

Fourth Trimester Podcast

Episode 111: Get A Healthy Start - Nutrition, Breastfeeding & Building Your Community with WIC's Kiran Saluja

Sarah Trott: [00:00:05] My name is Sarah Trott. I'm a new mama to a baby girl and this podcast is all about postpartum care for the few months following birth, the time period also known as the Fourth Trimester. My postpartum doula, Esther Gallagher, is my co-host. She's a mother, grandmother, perinatal educator, birth and postpartum care provider. I've benefited hugely from her support. All parents can benefit from the wisdom and support that a postpartum Doula provides. Fourth trimester care is about the practical, emotional and social support parents and baby require, and importantly, helps set the tone for the lifelong journey of parenting.

When I first became pregnant, I had never heard of postpartum Doulas, let alone knew what they did. So much of the training and preparation that expecting parents do is focused on the birth and newborn care. Once a baby is born, often the first interaction parents have with medical or child professionals, other than the first pediatrician visits, is the six-week checkup with the OB/GYN. *What about caring for mama and family between the birth and the six week doctor visit? What are the strategies for taking care of the partner and the rest of the family while looking after your newborn?*

Our podcasts contain expert interviews with specialists from many fields to cover topics including postpartum doula practices, prenatal care, prenatal and postnatal yoga, parenting, breastfeeding, physical recovery from birth, nutrition, newborn care, midwifery, negotiating family visitation, and many more.

First-hand experience is shared through lots of stories from both new and seasoned parents. Hear what other parents are asking and what they have done in their own lives.

We reference other podcasts, internet resources and real-life experts who can help you on your own parenting journey. Visit us at <http://fourthtrimesterpodcast.com>

Sarah Trott: [00:00:03] Hi, this is Sarah Trott and welcome back to the Fourth Trimester Podcast. I'm joined today with a special guest who I'll introduce in a moment. Today we're going to talk about navigating early parenthood with confidence. We're going to talk about nutrition, breastfeeding and support - really important topics for new and expecting parents. And I'm really excited about the program today.

Sarah Trott: [00:00:27] As a reminder, please go ahead and hit follow or subscribe wherever you listen to your podcast. It really helps us out and we appreciate your support.

Sarah Trott: [00:00:36] So here today to talk about this topic of navigating early parenthood - I couldn't think of anyone better to have on the program for this topic - is Kiran Saluja. She is the Executive Director of the PHFE WIC program, which is a program of Heluna Health. If you haven't heard of it, WIC is the Special Supplemental Nutrition Program for Women Infants and Children. WIC serves 7 million participants nationally, and it's funded by the United States Department of Agriculture. I'm not sure if a lot of people know that. So that's really interesting to hear.

And by the way, California has the highest WIC participation, serving almost a million individuals every month. And Kiran's specific program, the PHFE, runs the largest local WIC agency in the country, serving approximately 189,000 participants every month. So it's not a small program. Ms Saluja is a Registered Dietitian. She has her Master's in Public Health. She also has a Master's and a Bachelor's degree from the University of Delhi, India. And her Master's of Public Health is from here in the States at UCLA School of Public Health.

Sarah Trott: [00:01:51] And she is an incredibly passionate supporter of breastfeeding. She's participated in numerous breastfeeding coalitions and task forces and special committees at the local, state and federal levels. I've heard her speak on the topic at various events, and I'm just so thrilled to have her here. She's led this WIC program through nearly 40 years of innovation, including developing several health equity initiatives. She's transitioned the benefits and delivery system from paper check to electronic benefits. So thank you, technology! She helps ensure that over half of all

children under the age of five in Los Angeles County receive WIC benefits. So that's huge.

Sarah Trott: [00:02:37] And she currently serves on the Los Angeles County Food Equity Roundtable. She's also spoken at the national, state and local conferences about WIC, about breastfeeding, about nutrition education, including before the US Congress in 2010 and at the Institute of Medicine in 2011. So needless to say, Kiran is a fierce WIC advocate. For her, WIC is not a profession, it is her vocation.

Sarah Trott: [00:03:05] And Kiran, she is so busy, she not only does all of this, she has three adult children. She's the proud grandmother of two sets of twins, eight year old girls and three year old boys. And she has been married to her (arranged!) husband for almost 44 years. So welcome to the program, Kiran. I'm so happy to have you here.

Kiran Saluja: [00:03:26] Wow, that was a lot to hear. I'm suddenly feeling really old and really tired. Thank you, Sarah. I am delighted to be here. Just my pleasure.

Sarah Trott: [00:03:36] Thank you. Yes. Thank you. when I first heard you talk, I was definitely scribbling your name down. I said, oh, this is a guest I can't wait to have on the program. So, would you like to give yourself an introduction in your own words?

Kiran Saluja: [00:03:50] Wow. After all you've said so far. Hello, everyone. Yes I was talking to Sarah a little bit before this. I have worked in WIC for 40 years. And I cannot tell you what an amazing journey this has been. When Sarah talked about how we serve over 189,000 women, infants and children every month, it is a remarkable set of people who work with me, who make this possible, who actually I work for, we have about a staff of 560.

They are such committed, amazing individuals, men and women who do this honestly, not for money because nobody works in nonprofits if it was for the money, but it's for the satisfaction and really the helping that they do, which is so priceless. My personal life, you already talked about, yes. Life is busy, work is busy. I love to garden, by the way, and spring is such a lovely time in California, so I just love sitting out my yard. But my

allergies are so bad that I am quite a mess. I've been living in the United States since 1980. I just regret that I didn't find WIC right away.

Kiran Saluja: [00:05:04] It took me four years to get to the WIC program. Otherwise I could have been here 44 years. So I love what I do. I love the fact that WIC is such a powerful program that has flown under the radar, because the WIC outcomes and what the impacts are on the pregnant woman for healthier pregnancies, for babies with such amazing nutrition and health, and for the entire family down the road. Because while WIC is a real short term intervention, it has a huge footprint for the rest of your life. So, you know, I go between work and personal because my work is so personal and my personal, my family, they really understand that and they're so supportive.

And they love the fact that I work in WIC because they have been the benefactors of all the nutrition education. And they are now passing it on to their children. I just love it, watching my daughters put out all these lovely vegetables, which sometimes my granddaughters are now getting opinionated about. But, you know, they they have nutrition in their souls, so to speak.

Sarah Trott: [00:06:13] I so appreciate that. And I can hear and see the passion, and how you've made this career of yours integral to your life and your family life. It's so beautiful to see. And I think, one of the things that I'd love to ask you, first off, what we like to do on this program is ask our guests who are parents, what their own fourth trimester experience has been like. So if you're comfortable with that, we'd love to hear about your own experience.

Kiran Saluja: [00:06:44] My daughter was born in October of 1982. I had lived in this country for two years. I was going to school for my Master's in Public Health and working full time, as most new immigrants do, because, you know, you've got to kind of survive. And it's actually a real emotional thing for me to talk about. Even now, after almost 42 years. I had a very, very tough fourth trimester experience. Some of it was naiveté. I came from India, you know. It came from a family, lots of friends, lots of support. I had a good network here, but when I had this baby delivered in the hospital

with, well, when I kind of looked back, I think it was almost abuse the way the baby was taken away, I just thought I'd breastfeed her.

Kiran Saluja: [00:07:30] And instead of that, I had this experience where they said, here you are. And I tried and I'm like, looking for help. And they're like, don't you know what to do? I mean, I still remember some of this so vividly. And then they said, well, squeeze some milk out and then give it to her. And when I squeeze my breast, I got this slightly red tinted discharge and they're like, oh my God, there's something wrong. We've got to take this baby away. You can't feed this baby. And it was horrible. I had to do all this testing. I didn't know about La Leche League. I wasn't prepared, which is why I think it's so great now that there are podcasts like yours that can prepare moms for what to expect, that anticipatory guidance.

Kiran Saluja: [00:08:10] And I spent the next 5 to 6 weeks, literally. We were all crying. The baby cried, I cried, my husband cried. My mother cried because I couldn't feed the baby. We had to give her formula. It didn't really suit her. And then six weeks later, they told me, oh, you're fine. It's benign. No big deal. We thought you had cancer. You can feed the baby. And it was just horrible. you know, and my mother had come out to help me. And at that time, she was like, we need to go back. You need to pack your bags. I'm going back. I'm like, well, it's not that easy. I do have a husband. You arranged for me him. So my daughter survived and thrived in spite of all of this. I think like, oh my God, what did I do to you?

Kiran Saluja: [00:08:52] I had two other children after that. One was born in 1985. And to remind your listeners, I joined WIC in 84. I found home my second and third daughter's fourth trimester experiences were exquisite. I had support, I had help in breastfeeding. I was told that I had rusty pipe syndrome. Who knew there was such a thing and that some women just, you know, a little bit of blood leaks out of the capillaries, no big deal. And I went on to breastfeed both babies. For a really long time. I wouldn't embarrass your viewers by telling you how long.

And, you know, I actually didn't tell my elder daughter that she was not breastfed until fast forward. Like I think she was 15 and she saw me doing a slideshow. In those days,

we had those slide carousels and she's like, why do you have my picture in there? It was a talk about breastfeeding support and I'm like, okay, sit down. I have to tell you something. And I have never lived that down because she's always blamed me for the IQ points that she lost because I didn't breastfeed her.

Sarah Trott: [00:09:58] I mean, well, you didn't know and you weren't getting the support that you needed.

Kiran Saluja: [00:10:03] Certainly they understand that. She teases me and I tell her, well, you know, you are an attorney. And she's like, yeah, but I could have been so much more, mom. Thank you. So WIC has really been, so critical for me in terms of my fourth trimester experience.

Sarah Trott: [00:10:23] It sounds like it was life changing for you. I mean, that contrast between your first. I mean, that's the difference with getting support. And, you have WIC to credit for that for your education and the support that you were getting, which is huge. And that extends, I think, beyond like any specific program. Women and families need support is sort of the message there. And first, I'm so sorry to hear that your first experience wasn't as idyllic or even just like the baseline level of support that we would want for you. So I'm sorry to hear that. but thank you for sharing your story.

Sarah Trott: [00:10:58] And it's not too much information. You're totally welcome to share how long you breastfed. I think we've had many, many guests come on and talk about breastfeeding their children for I know that's like I think it's one of those misconceptions that people kind of go into with parenting of like, there's this certain number of time or years and, and I've had other people talk about how because the immune system develops over the first three to five years of a person's life that breastfeeding has benefits for a very long time.

Kiran Saluja: [00:11:26] Milk composition actually changes to accommodate the needs of the growing child. And at one year when they're sort of entering the pre toddler stage, you have a very different set of antibodies in your milk than you had before. And as the

child is getting older, absolutely the fat content changes. You know, if it's hot, then the amount of water in your milk is more. I mean, breast milk is just magical. But yes.

Kiran Saluja: [00:11:51] So since you asked, I will tell you that I breastfed my first daughter for 18 months. And the third daughter came much later. She was one of those, oh my God, we're having a baby. So the eldest was nine, the second was six and with the last one. I kind of said I'm not having any more, so I might as well go for the gold. So I did it for about two and a half years.

Sarah Trott: [00:12:13] Yeah, well, I've got you beat, so that doesn't seem long at all. For what it's worth.

Kiran Saluja: [00:12:19] You're right. But, you know, in 1991 it was. And in 1985, 18 months. Yeah. You wouldn't know but those days it was just bizarre. But I'm so proud of you. Tell me, how long did you breastfeed? Or are you still breastfeeding?

Sarah Trott: [00:12:32] Around three years.

Kiran Saluja: [00:12:33] Yeah. Wonderful. I am proud of you. Well done.

Sarah Trott: [00:12:36] And it wasn't something I planned either. It was kind of just, what felt right to me and what felt right for my family in that moment.

Kiran Saluja: [00:12:44] You know, I will tell you real quick, as a quick digression that we have a very, very strong employee perinatal support program at work. And I think I mentioned to you, we have about 560 staff and surprise, a lot of them are women. Another surprise, a lot of them are young. And of course they're having babies, which I love. I think currently we have 12 to 15 staff who might be who are pregnant, and then a bunch of them when they come back to work, which now we, you know, takes about six months because you have this lovely family leave laws in California at least. So before they are out we do a huge, basically, nutrition support.

Kiran Saluja: [00:13:25] Every month we meet for our staff because we feel if we can't support our staff, how can we have them turn and support moms? And when they come back, we have this wonderful employee breastfeeding support program. So I actually have staff who are still breastfeeding their four year olds and we celebrate that. And we have staff who've tandem breastfed. So they've got a two year old and they have a baby at the breast and we've got pictures of that. We want to really normalize breastfeeding as. This is how you feed babies, and you can feed them for as long as comfortable for you, the baby and your family. Yes, just like you did 100%.

Sarah Trott: [00:14:04] I love that message and the way that you couch that too - it's specific to you. It might be different for each parent. So that's so beautiful. Thank you for sharing that.

Sarah Trott: [00:14:15] You have so much wisdom and experience. And this is kind of a broad question. So I'm going to let you take this where you want to. But the question is what would you like new parents or people supporting new parents to know going into parenthood?

Kiran Saluja: [00:14:31] So for those of you who are listening, who are new parents, I think you all have such a great generation. You have access to material, you're hungry for knowledge. You're listening to this podcast. There you go. When you have your baby. Just know you're never alone. Sometimes it can feel really isolating. A lot of the time it feels exhausting. Be prepared to sleep now while you're pregnant, however you can.

Kiran Saluja: [00:14:58] And there are people in your circle who are dying to support you. I know there's a lot of this. My husband, my partner, my whoever it is, and I, we want to be alone with this baby. We want to bond with this baby. So everybody back off and that's fine, I respect that. But remember, when you feel that it's getting too much, there is nobody out there that you need to impress. People love you. People want to support you - they're dying to support you. I know you're kind of like, yeah, they all want to hold my baby.

And that's the other thing that sometimes the baby does become the focus and moms can feel a little marginalized and say, there's somebody behind this and remember to do self-care. You know, somebody very wise told me one time, nobody cares if your house is clean.

Kiran Saluja: [00:15:51] Nobody cares if the meals aren't cooked. They'll bring you food. They're dying to bring you food. Look at your support systems. And then I know that there are some of us who don't have a lot of support. Like, you know, you live far away from your family. What about friends? What about church? If you go to church, what about a neighborhood community? Set up some friendships. you know, set up your support system. Because I really want you to know that you're never alone.

Kiran Saluja: [00:16:18] And then I also want you to know that many of you may not even realize this, but maybe you qualify for WIC. Because while you're working, maybe you don't because it is a program that's based on income eligibility. But when moms go on maternity leave or they go on disability, incomes drop precipitously. And for that time, if you want to come into WIC, we'd love to have you. We'd embrace you. And WIC is really all about helping moms and dads and families with support. The kind of anticipatory guidance which gives you, not just by trained counselors, but by the access to a huge online resource for nutrition education and breastfeeding education.

Kiran Saluja: [00:17:04] The amount of support you get in terms of just a one on one conversation with another human being whose sole job is to listen to you and to respond to your questions. And in case you're wondering. WIC is not a welfare program. WIC is actually one of those asset programs we have in this country that serves. What is it? 53% of infants in this country are on the WIC program. So reach out for support wherever you can find it. And you're never alone. That's for new parents.

Kiran Saluja: [00:17:36] Now, if you're listening and you're a supporter. Offer unconditional support. And again, don't go there to hold the baby. Go there to offer to clean up if they want you to. They might want you to vacuum the house. They might want you to make a cup of tea. They might want you to get them groceries. Whatever it takes. I think offering up the support, saying I'm here, I will do anything to support you is

probably like, that's like gold for a new mom. So for the new moms that say, open your heart and for the people who are helping, I'd say offer yourself, offer your love.

Sarah Trott: [00:18:14] Ah, I love that so much. Ah, I love that so much. And for the supporters, you don't necessarily even have to wait to be asked to vacuum or help clean the bathroom or whatever it is. it's more observant. Look around, think about what you can do to be helpful. I always found that so nice when someone would come over to my house and kind of just look around and just ask permission. Hey, is it okay with you if I fold that pile of laundry?

Kiran Saluja: [00:18:46] Say it with such love and no judgment, because that's the other thing. New moms are like, oh my God. So it's just like, yeah, can I do that for you? Absolutely. What a nice thing. You know, I just want to kind of also add that when, if you do qualify for WIC and you do join WIC, because at the end of the day I'm a WIC-y, okay. So I'm going to bring in WIC everywhere. You get a really good start with WIC because I know we've talked about support, but to help with breastfeeding, you know, we have such amazing lactation consultants who work for us and it's free. I mean, what is there to scoff at? And then nutrition advice for new moms who want to know so much about feeding, eating themselves. How much water do I drink? You know what? If I'm drinking milk, will it give my baby gas? You know, can I have a drink every now and again? We can help you answer all those questions.

Kiran Saluja: [00:19:35] And then your baby gets older. Six months, and then we can help you with when to introduce solids. What to introduce, how to do easy foods for the baby. You don't have to have big processors and freeze ice cubes. It's whatever you eat. Because at the end of the day, if you've been breastfeeding, the baby is getting the flavors from your breast milk, given what you eat, all you have got to do is change the texture, WIC can help with that. And as they get older and they transition on to, you know, table foods, adding fruits and vegetables in their diet because WIC is there through five years, giving you the very best start in life, and WIC materials are available to you even if you don't qualify for WIC. So at some point, Sarah you can drop in our website. <https://www.phfewic.org/>. Honestly, you can spend days on that website. There is so much information. I still love to go there. you know, just to kind of look around. My

children have grown up on the website and my grandchildren are growing up on the website, it's pretty amazing.

Sarah Trott: [00:20:40] There are a ton of resources. I totally agree with you. I was having a look through recently and so we're going to link the websites as well as some PDFs and resources that you and your team have very kindly shared with us for our audience. So we'll put links in the show notes and the article that goes with this website for sure. And as you said, you don't have to be part of the program to benefit from all of these amazing free guides. So I really appreciate you mentioning those.

Kiran Saluja: [00:21:10] One of the very important pieces for a new mom is learning about infant cues. And you know, babies can tell you if they are hungry if you watch them and this can even prevent them from crying because you are so in touch to what they need. And then one of the big issues moms have, parents have is sleep with babies. And infant cues will kind of tell you, you know, when is the baby in really deep sleep? Because especially with breastfeeding, a lot of these babies, they love that. And that's the essential of the fourth trimester. The skin to skin holding your baby, just anyone doing skin to skin. That is such an amazing thing that happens. You know, this baby's brain is going all over. The neurons are developing during that skin to skin contact, but that's also very cozy. So babies can get at the breast, have a little bit of milk and go to sleep.

And then moms put them down and then they wake up. And then moms are like, oh my God, I don't have enough milk. No, the baby isn't quite full yet or perhaps the baby is likely not fully asleep yet and is annoyed that you disturbed him or her. So these infant cues, you can read about them while you're pregnant, they kind of tell you how to wait until your baby's in a deep sleep. So even if they're at the breast and going to sleep, you switch them from one to the other side. You wake them up, you get them, have a full tummy, and then you put them down. And then understanding as a pregnant mom that a new baby doesn't have a six month old stomach. A new baby has a very tiny stomach. Like the size of a marble.

Kiran Saluja: [00:22:43] And as we know, the stomach does stretch, but you can't put a four ounce bottle in a baby. And thank God that the breast isn't calibrated. So you don't know how many ounces are going in. The baby knows. It's shockingly amazing that little babies know when they're hungry and they know when they're full. And one of the things that breastfeeding does is really respects those cues, which stay with us until we are older. So if, for example, you're feeding a baby a bottle and you have a bottle marking that you kind of feel, I have to finish this because as new parents, we really worry about feeding is such a big thing because that's I've got to keep my baby alive. Right.

Kiran Saluja: [00:23:24] When you breastfeed, you don't have that concern about how much. You learn about sleep and deep sleep, that's sort of your cue. And, you know, your baby's getting enough because you look at diapers, what goes in comes out the other end. So it's pee and poop. So you need poopy diapers. And if the baby is peeing and pooping, you're good. But with the bottle sometimes parents get hung up on 'I've got to finish this four ounces'. And so they constantly override the baby cues. So by the time this kid is now two, they've overridden the cues. They don't know how much makes them feel full.

Kiran Saluja: [00:23:58] So again, I'm kind of getting all over this metaphor. But my point is that understanding your baby's cues is very important. They're for crying, they're for hunger. Sometimes the baby cries because they're bored. Babies get bored, so you don't always have to feed them when they cry. And that's sort of the beauty of prenatal education and getting yourself up to speed. And we've got all of this on our website. I know Sarah has a whole lot of baby cues info, so learn as much as you can. And you're on this podcast. So you're obviously learning.

Sarah Trott: [00:24:32] Yeah, absolutely. So the baby communication guide we will link to. I appreciate you sharing the story around overriding the cues. Because babies don't have language like we do, they they really only have the subtlety of their cries, their eyes, the way they look, the their body position, their posture, the things that they're telling you through all of these little signals is actually a lot of information if you only

know what it means. So I appreciate that so much. We'll definitely link to that guide. So thank you so much.

Sarah Trott: [00:25:13] And across your many years of experience are there any themes of the questions that you got asked a lot by parents over the years?

Kiran Saluja: [00:26:12] You know, new moms really worry about diet because they're really concerned, you know? Oh my God, I don't eat a good diet. Will my baby be like, I can't breastfeed? And I always tell them, remember evolution? There's a reason why we're here because your body adapts. Between you and okay, between you and me and the audience: your diet doesn't have to be perfect. Your body will make great milk for your baby because it's all about the survival of that baby. So unless, I mean, I hate to say this in this way, but honestly, unless you are so malnourished, you know I mean, even if you look at images from Somalia, you see that the children that are older look very starved in this, you know, where the war areas are. But the babies look good. The mom may look really emaciated because the body will produce breast milk for the baby. So that's one of the big things I get asked, what about my diet? And I'll tell you as your audience, probably you're all very well nourished in this country. You can produce good milk, trust me. Okay. Unless you're following some totally zany diet. But by and large, if you're eating regularly normally, you know, of course you can drink a soda every now and again, no big deal. You don't have to drink eight gallons of milk every day. Just do the normal stuff. Eat three meals a day, including fruits and vegetables. You know, the usual guidelines.

Kiran Saluja: [00:27:38] That's usually a very big concern for parents. I also get asked about whether you can have an occasional glass of wine and. Okay, I'm going to take off my dietician hat here. Your blood alcohol level is your milk alcohol level. Just remember that okay. Your breast milk alcohol level. So what happens with blood alcohol when you drink it goes up and then gradually it goes down. So you can pump and dump. If you really absolutely want to have a couple of drinks and then, you know, hopefully you've got some breast milk stored away that is untainted. You can give that to the baby at that time. And then in about four hours the alcohol will come out. But I'm not encouraging you to drink while you're breastfeeding. Don't get me wrong.

Kiran Saluja: [00:28:22] I'm just saying you can live normally and I'll tell you why I say this is because my nemesis is formula. We've learned to coexist. Because, yes, we need infant formula for those babies who absolutely cannot be breastfed. But I will go on to tell you that there are very few women who really, totally can never breastfeed with support. There's lots that can be done. But my point here is that in the commercials around formula feeding, they always show the breast feeding woman would be really washed out. You know, sad. And they show the formula feeding mum. Very beautiful, hair is all done. She's drinking a glass of wine and she's feeding a baby formula.

Kiran Saluja: [00:29:05] Look, that's not you. If you want to breastfeed, you can breastfeed and be glamorous. You can breastfeed and have a life. And those are sort of the in the moment questions a lot of people worry about is, oh my God, what should I do?

Kiran Saluja: [00:29:16] And when it comes to introducing solids and so on, you know, the AAP guidelines, which I don't expect you all to know and follow, is don't give babies anything until six months. Just breastfeeding. Or if you're using formula, formula feeding, that's all they need for six months, because their intestinal tracts aren't developed to process really complex proteins. Which is why I keep going back to breast milk, because that, you know, it's like you don't give a cow goat's milk. So we feed our babies cow milk in formula that is just sort of changed up a little bit to make it more like breast milk.

The protein is, you know, denatured a little bit, or we give them soy milk, which is really a bean juice, if you come to think of it. So I just want everyone to kind of just think about it. These are babies that you have grown for nine months. Your body can do this amazing thing, and then you deliver this baby. Your body can do this amazing thing to produce breast milk. But I know this podcast is not about breastfeeding, so I'm going to stop and we can move on.

Sarah Trott: [00:30:23] It is absolutely about breastfeeding. We're talking about everything under the sun: pregnancy, birth and postpartum. So that is spot on. One of

the things that since we're talking about this that you touched on a little bit earlier, was about the things that you eat and the nutrition passing through the breast milk. So the diversity of what you're eating or if your favorite foods are certain things, will that mean that the baby is potentially going to have a similar palate to you when it does come time to introduce solids? I'm just curious.

Kiran Saluja: [00:31:01] Such a great question. Absolutely. So it's so interesting that, you know, we don't think that kids like to eat broccoli, right? Because it has a slightly bitter flavor. So the work that's been done around breast milk, and I am so delighted to tell you that, in fact, UCSD now has a milk bank. And one of the things they're going to be doing, their human milk bank, donor milk bank is going to do a lot more research on breast milk. So we really needed an institution like that to be telling us more. But what they found out in previous research is, let's say you eat a lasagna that's rich in lots and lots of garlic and, you know, flavors.

Your baby is going to get that flavor through your breast milk. So is an Italian baby going to like lasagna better than an Indian baby who likes curry? Probably. It depends on what you're eating. And especially the fruits and vegetables. The vegetables, not so much the fruits, but that slightly bitter flavor of broccoli and cauliflower. And it's better accepted by kids who are breastfed.

Kiran Saluja: [00:32:07] Because one of the things you have to remember is that our formula is sweetened and it's very highly sweetened. So if you never have anything else to do and you want to taste some formula, taste it. It has a very sweet flavor. So formula fed babies have a penchant for a lot more sweet stuff. I'm not saying breastfed babies don't like sweets. My grandsons can. Oh my God, they can live on chocolate if I let them. but the flavors of breast milk totally pass through. And yes, those babies are more accepting of table foods. And the family. If you've been eating those while you're, you know, while you're breastfeeding. Yes, the palate is very wide.

Kiran Saluja: [00:32:48] I want to make one other real mention here. And this is some brand new research we're doing. And since you have a very vast audience, this is not just for the listeners, but maybe the people you are in your loving circle. We're finding

out that these formulas that are supposed to be like, modified for colicky babies and so on. I want to encourage all your listeners to always look at labels, because if on an infant formula label, you see corn syrup as the number one, number two ingredient on the label, do not buy.

This is what I'm going to tell you. And I'll tell you why. We found research that babies who get these formulas that are sweetened with corn syrup solids are at a significantly higher risk of obesity than infants consuming formula without corn syrup and than breastfed babies. So in formula, if you're not able to breastfeed, there are choices. And WIC also provides those choices. I want you to have a choice, but I want you to be a wise consumer because you should read labels for everything. And that is one of the things that WIC tells you is about what's healthy in foods.

And label reading is a piece of it. But for babies, since we're talking about the fourth trimester, reading labels for formula and making sure you're not buying a formula with corn syrup as the number one or two ingredient is very important, I'm going to get you an article that you can link

(<https://www.sciencedirect.com/science/article/pii/S0002916523036183?via%3Dihub>).

That'll be very good for your readers who are interested. I think there's two research articles we've published lately.

Kiran Saluja: [00:34:26] I'm sorry. That just came into my mind from nowhere, but I wanted to mention it.

Sarah Trott: [00:34:30] No, I mean, that's really good practical information. And especially when there's more research now than there used to be around some of these topics. It's really fascinating. Right? Is there more information that you're really excited about that maybe are very different from the way things used to be?

Kiran Saluja: [00:35:00] Infant feeding itself, you know, there's so much that we've known about infant nutrition but also then growing into child nutrition. Some of the simple things that we're really learning, which, you know, it's sort of a "duh" moment, you know, is, children will eat what their parents eat. So you can't be like saying you

have this piece of broccoli or you have got to eat this. But I hate that. You know that doesn't work. What's in your pantry? You know, are you buying all of these? You know, I mean, I buy chips, honest, you know, but. But what else is there in your pantry? Is that the only snack that's available? Those are real important things that you keep a vast array of healthy, accessible foods for your children.

Kiran Saluja: [00:35:47] One of the things I learned that is not new, but it's really served me well and it's serving my children well, is you can't just buy healthy groceries. You have to convert those groceries into food. So you, you know, you've got this big bag of baby carrots, but now you're going to put them in little Ziploc bags and make them accessible. So a three year old can open the fridge and find the bag of carrots and not the chocolate cake that's lying behind it, you know. So what are you really, what are we doing with how we present the food, how we have access to the food? All of that is so important.

Kiran Saluja: [00:36:23] Your own habits influence kids. Kids love demos. We do a big thing on Rethink Your Drink because sadly, sugar sweetened beverages are sort of a bane on our society. And Coke has convinced you that if you drink Coke, you could be with a polar bear, and you can go to the North Pole and Santa will smile at you. And so people drink Coke for happiness. And when they regularly drink sugar sweetened beverages, they have so much sugar. So we do a little teaching demo where we actually show people, here's some water here. I'm going to put 16 spoons of sugar in a glass and I'm going to add some color. Guess what? This is a sugar sweetened beverage. What was so gratifying is we just did a demo this Saturday, and there was an eight year old in the audience at this health fair that we were my staff was at, and his mom got him a Gatorade, and he was sitting with the Gatorade, and he saw the glass and he said, I don't want to drink this. This has a lot of sugar. I want that spa water that these people have. Those are sort of the simple things that we can all be aware of.

Kiran Saluja: [00:37:39] And I'm not recommending that you buy zero calorie Coke and give it to your kids either. I'm just like, even juice is very sweet. So a friend of mine. All this diluted juice. She used to get orange juice, and then she used to add extra, a whole extra can or two extra cans of water to it. Her kids were like 8 or 9 when they went to a

party, and they came back and said, you know, that orange juice I had that tasted really different? And that's what she told them. Yeah, because I've diluted your juice so that you don't get a lot of sugar and you can taste buds get affected for life based on how we are eating now. So it's really important that we imprint these our kids in a good way.

Kiran Saluja: [00:38:20] I get a lot of questions about shopping at the grocery store, comments like, 'The supermarket is so confusing'. And God knows going to a supermarket is very confusing. So one of the things that I've said for a really long time, because of course I'm biased, is eat like WIC. And how do you eat like WIC? You look for the WIC placards, which are everywhere in supermarkets these days for WIC approved foods, at least in the United States. And you might say, well, what is a WIC approved food? So WIC foods are very scientifically chosen to be the best option in whatever category they're in.

Kiran Saluja: [00:38:54] So for cereals, I think they have about 1,000 brands of cereals. Now that has got to be the most confusing aisle in a grocery store. But there are certain cereals that will say WIC approved. They are low in sugar. They have the best mix of whole grains, and they have all the vitamins and minerals that you could want. Cocoa Puffs will not be on that list, I can guarantee that for you. But there are healthy choices in milk. It's the nonfat or low fat. In the peanut butter. Yeah, we do give peanut butter because it's a good source of protein. It will be the one that probably has the lower amount of sugar. In yogurts, we offer yogurts. What kind of yogurt can I get? We have beans. There are canned vegetables, but you have a fabulous array of fresh fruits and vegetables which are not labeled because any fresh fruits and vegetables bring it on. Eat as much as you can. Make half your plate fruits and vegetables and whole grains. The bread that you buy on WIC will be 100% whole grain. Look for those labels. Look for WIC labels to eat like WIC. Be healthy.

Sarah Trott: [00:40:06] Right. And these guides are available to everybody, not just necessarily WIC participants. So that's neat to know. You can actually see the little signs in some grocery stores. I'm going to start looking for those now. Now that I know. Yeah okay.

Sarah Trott: [00:40:20] Well we've covered a lot. I want to touch on a couple additional points before we go. I'd love to know, from your perspective, what are some advice and practical information for caring about oneself as a parent or caregiver.

Kiran Saluja: [00:40:43] Wow. I will tell you that when my first daughter had twins and then the second one said, I'm having twins, I'm like, I don't believe you because I really thought she was pulling my leg. So I have had experience with supporting a mom with twins. But I will tell you that having one baby versus two babies, you're just as exhausted a little bit more there. But it's being a mom. It's tiring. So set up expectations. I would say that's so important. Setting up expectations. You know, you see these images of these moms and you're like, I want down to earth. It's okay to be in your pajamas for the whole day.

Kiran Saluja: [00:41:29] Think about yourself. Rest when you can. That's when I bring up the clean house image. You know, sleep when the baby sleeps. If your baby doesn't sleep a lot. Because some of us have had babies that are colicky, that's when you need some help and support. Who can help you? How can you do that? You know there are rules about babies and co-sharing beds and all, but I'm going to tell you as a mom, I'm just going to talk about my experience. I'm not going to tell you to do that. I breastfed my babies in bed because that was so easy for me. And you have to have firm mattresses and not on a slouchy couch. And of course, you're not drinking or using any substances.

You have to be aware of what's happening. Who is in your life? Identify your support systems, have a realistic image of what your first few weeks are going to be like. They're going to be hard. If you're breastfeeding, know what to expect. The first week or so. You're going to need a lot of help. Maybe two weeks. You make it through those two three weeks, and then it's like falling off a log.

Kiran Saluja: [00:42:31] Then you can breastfeed upside down, I kid you not. But those first few weeks it. Yeah, it comes naturally that initial hour after birth. Preserve that hour. It's called the golden hour. Actually, the golden hours. Once the baby is born, let the hospital know. Let your OB know. Let the nurses know what you want to do. If you want to breastfeed, that's a critical time to put that baby on you.

Did you know that a newborn, if it's just left on the mother's breast right after he's delivered or she's delivered without a lot of cleaning up and so on, can actually crawl up to the nipple and self attach. Puppies do it. Kittens do it. Human babies do it. But we interfere with that, right? We take them away. We put them under lights, we clean them up. And by the time we swaddle them and give them to the mom, sometimes we've lost the most amazing, precious moments of bonding. And. Latching on the breast. So that moment should be for you, your partner and the baby.

Kiran Saluja: [00:43:36] Everybody wants to visit you in the hospital. Don't let them all come. Get someone to stand guard. It's okay. Your mom will understand. I understood I was like, oh, but I understood because I tell people this, you need time alone with that baby. And then once you come home, get, get help, get help, know that sleep is going to be tough in the little while, but it gets better. It gets better every day, and then suddenly you're going to say, oh my God, my baby's a month old already. How did that happen?

Kiran Saluja: [00:44:08] And then identify signs of feeling low. If you find you're not happy or not at all happy, if you find that you're getting any kind of weird thoughts - they're very common. Postpartum depression is something that we don't talk about enough. Honestly, if you ask me, I think everybody has a little bit of postpartum depression, but we don't talk about it. So any time you feel like you want to do something that might harm you, then you got to look for some professional help. And there is so much help out there these days. Books have been written about it. Websites exist. Just look for it. You're not alone. Even if you're alone, you're never alone. There's somebody out there who's going to help you. So take care of yourself. Look for support. Know what to expect.

Kiran Saluja: [00:45:04] And know that this is a brief period. And suddenly you have a 42 year old and you're like, how the heck did that happen? You know, I think this is a really old adage that the minutes are long and the hours are long, but the years go by so fast. So you'll make it. You'll make it through day five. It might be hard, but you'll get

to day six and take it in bite sized chunks. You can all do it. You know, I have to say, women are pretty amazing.

Sarah Trott: [00:45:43] Thank you. You are not alone. We really like the reference to Postpartum Support International. You know, if someone's in that moment and they're feeling like they need to reach out and just talk to someone, even anonymously, there's a great free resource here in the United States for that. So we can link to that as well. 100%. And love all of the the information that you've shared with us. Was there anything else that we didn't talk about that you want to talk about?

Kiran Saluja: [00:46:20] You know, I kind of keep coming back to WIC because honestly, as you've said, this is sort of my passion. And the word I want to put out there is some of you might have known, WIC through your moms because honestly, as I say, if every one and two babies was on the program, they've all grown up. A lot of them come back and work with us. I meet some folks in the halls of Congress. The mayor is a WIC baby, some people on the Board of Health were like, real big shots, talk about having been WIC babies.

So the reason I bring WIC up is WIC has become this modern, amazing program where everything can be done remotely. And there are cards, so you don't have to go and use clunky checks anywhere. So this is not your mama's program anymore. WIC is a very modern program. It's moving with modernization into looking at online shopping. We're not quite there, but we are getting there. So I just want you all to know that WIC is not a handout. WIC is a hand up.

And with that, I just want to really encourage you. It might not be you, it might be somebody, you know, spread the word and access the support. You don't have to be on WIC, but you can get online and get a lot of really great, great material. I think that's what I would like to share. Thank you, Sarah so much for letting me speak to my passion.

Sarah Trott: [00:47:45] Thank you so, so much. I want to mention WIC again, officially. So WIC, women, infants and children, this is a program that provides wholesome food,

nutrition education, breastfeeding support, and a supportive community for income eligible women and parents who are pregnant or postpartum. Also, to infants and children up to five years old, you can visit www.signupwic.com to connect with your local WIC program.

Sarah Trott: [00:48:14] And we are going to post all kinds of resources. These are free guides on our website which is fourthtrimesterpodcast.com and in the show notes we'll include guides for the hospital experience, breastfeeding support, baby communication which we talked about, how to know those hunger cues and other cues, and postpartum nutrition. Thank you so, so much. Again. thank you so, so much again, Kiran Saluja. you've been such a fabulous guest for us today, and I really appreciate everything you've shared with us today.

Kiran Saluja: [00:48:49] Thank you. Sarah, I think what you're doing is really amazing because this is stuff that people really need to know more about. So thank you for putting the word out. And I know that your podcast has got such amazing guests in the past. I'm just honored to have been included. Thank you.

Sarah Trott: You can find out more about Esther Gallagher on <http://www.esthergallagher.com/>. You can also subscribe to this podcast in order to hear more from us. [Click here for iTunes](#) and [click here for Spotify](#). Thank you for listening everyone and I hope you'll join us next time on the Fourth Trimester. The theme music on this podcast was created by Sean Trott. Hear more at <https://soundcloud.com/seantrott>. Special thanks to my true loves: my husband Ben, daughter Penelope, and baby girl Evelyn. Don't forget to share the Fourth Trimester Podcast with any new and expecting parents. I'm Sarah Trott. Goodbye for now.