We are only three weeks away from our annual meeting. On behalf of the Board of Directors, we sure hope that you plan to attend. The educational program is excellent, and it will be a great time to re-connect with our colleagues as we seek to address the multiple challenges of pediatric practice, pediatric education and pediatric advocacy. We are excited that multiple sponsors will be exhibiting and supporting our program. And the Sunday morning session always features updates from national and state partners of great import to our chapter.

These are difficult times for pediatric advocates. So many issues currently confront us – gun violence and childhood deaths, seemingly unfettered gun access, mental health issues and suicide risks, inadequate COVID-19 vaccination rates, unfortunate steady COVID-19 infection rates, inadequate Medicaid expansion, anti-science and, by extension, anti-physician rhetoric (to name a few) – that it would be easy just to hunker down in our own little worlds and do what we can by ourselves. But that is not what pediatricians do. We seek to work together and amplify our voices and our causes. It is easy to get discouraged and say that nothing can really be accomplished in the long run. But that is not what pediatricians do. We realize that our role is bigger than our individual roles and that there is strength in numbers. In that vein, we also recently signed onto a letter with the SC Section of ACOG expressing their objections to the limitation of women’s reproductive rights in SC.

Professional burnout is real, but I would argue that pediatric advocacy has the benefit to help mitigate that. When we are in service to others, we have the opportunity to see how our communal efforts help others and help ourselves by enhancing our own community.
Two more things—

1. Please vote in AAP national elections which will open up in August.
2. It has been my pleasure to serve as your president over the last two years. We will be in very capable hands going forward with the team of Drs. Mack (President) and Edwards (Vice President)! The SCAAP is capable of doing great things for its members and for its constituents (children and families), but leadership depends heavily on the involvement of its members. Please answer the call when you can.

Robert A. Saul, MD

There is Still Time to Register for the 2022 SCAAP Annual Meeting

July 28-31, 2022

The SCAAP Annual Meeting will be held from July 28-31, 2022 (that's just ONE WEEK away) at the Marriott Resort (Grande Dunes) in Myrtle Beach!
SCAAP Testimony in Opposition to Criminalize or Ban Abortions

The South Carolina Chapter of the American Academy of Pediatrics (SCAAP) joins the South Carolina Section of the American College of Obstetricians and Gynecologists in opposing efforts by the South Carolina state legislature to criminalize or ban abortions. Read the full statement HERE.

Advocacy Corner

The AAP and the SCAAP continue to be active in the legislative advocacy space and we encourage you to check out opportunities for legislative action here: https://scaap.org/advocacy/#

Introducing the newest member of our Board of Directors!

SECRETARY-TREASURER
Ramkumar Jayagopalan, MD, FAAP

MEMBERS-AT-LARGE
Michael Foxworth II, MD, FAAP
Stephanie Kwon, DO, FAAP

Doctors unveil book dispenser for young patients to promote literacy, healthy habits
Tyler physicians and Smith County Medical Alliance volunteers unveiled their new Texas BookShare program and special vending machine to a clinic for underserved child patients at St. Paul Children’s Family Service Center on Thursday afternoon.

The program is launching locally to promote literacy and reward children’s good health habits. Read full story [HERE](#).

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**First Five South Carolina**

First Five SC includes information about 60 publicly funded programs and services across 10 state agencies, with over 40 programs on the simple eligibility screening tool. Families can self-navigate, with no log-in, in order to learn about state and federally funded public programs across South Carolina that may be available to them based on their family income, child’s needs, location, and other household circumstances. A common application will launch in 2022 that means families will be able to use a single service application for many participating programs.
Pediatrician Climate Change Study

On behalf of fellow pediatricians and the University of Pittsburgh, you are invited to participate in a research survey to learn more about the opinions and practices of pediatricians and pediatric providers regarding discussing climate change within pediatric clinical settings. This study includes a 5-minute online survey reporting your opinions on discussing the health effects of climate change with patients and families. Following the survey, you will have a chance at one of twenty $50 Amazon gift cards. Chances of being chosen are expected to be approximately 1 in 20. In a second survey, you will be asked to enter personal contact information. This is only to contact you if you are chosen to receive a gift card and will not be linked to your first survey answers.

Participation is voluntary. If you are interested, please follow this link to the survey: https://pitt.co1.qualtrics.com/jfe/form/SV_eSdQQLrBQg0MWhg

For questions, you can contact the study coordinator, Erin Mickieicz (mickieiczee@upmc.edu), or the principal investigator from the University of Pittsburgh, Dr. Maya Ragavan (ragavanm@chp.edu).

CHA Gun Violence Digital Toolkit

CHA created a digital toolkit for our children’s hospitals to use for gun violence prevention advocacy. Earlier this week, the Senate announced their bipartisan gun violence framework agreement, and will likely release the full legislative text in the coming days. We released the following statement yesterday:
Children's Hospital Association (CHA) is encouraged by the agreement around gun violence prevention and investments in youth mental health that was announced by a bipartisan group of 20 senators, led by Sens. Murphy, D-Conn., and Cornyn, R-Texas.

CHA supports the efforts to reach a compromise to pass meaningful gun violence prevention legislation and to improve access to school and community-based mental health services for children and families, especially those coping with traumatic experiences. We look forward to reviewing the legislative text, once available, and working with Congress towards the ultimate goal: keeping our children safe. Additionally, we will continue our efforts to work towards transformative legislation to end the youth mental health crisis.

The digital toolkit and social media toolkit are available for download on the CHA website. We created three versions of the graphics so hospitals could have the option to use CHA branded, their branding or co-branded graphics on social media.

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**Did you miss our *Infant Formula Shortage Expert Panel***?

If you missed the live panel, we have good news - we recorded it! If you are interested in watching the recording please email Dr. Elizabeth Mack and she will send you the link.

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*SCAAP presents... Infant formula shortage expert panel*

6/22/22 @ 8-9PM EST
CLICK HERE TO JOIN
Message from the South Carolina Department of Health & Environmental Control on WIC Formula Waivers

South Carolina WIC has adopted formula waivers from the USDA for non-contract formulas and to exceed the maximum monthly allowance. These two waivers give us a lot of flexibility. First, being able to exceed the maximum monthly allowance means that clients can purchase formula in different sizes. Normally, only one size is allowed with WIC and that is the size loaded onto the card. Now we will load one size onto the card, but clients will be able to get other sizes if their prescribed size is not available at the store without having to contact the clinic for any changes to the card.

Second, we are allowed to provide formula alternatives if our contract formula (Gerber) is not available. The prescribed Gerber formula will be loaded onto their card. However, if they are prescribed Gerber Good Start Gentle, and it is unavailable in the standard size and in larger sizes (due to the first waiver), then they can purchase another temporarily allowed formula that is comparable from Similac or Enfamil. This will provide the client with more options. There are still restrictions within the waiver. They cannot purchase any formula. It has to be the same base (for example, they cannot be prescribed a soy formula and change to a non-soy formula at the store without contacting the clinic) and they cannot get just any brand (for example, store brands are not included and not all Similac/Enfamil products are included).

Handouts with more information are attached to this newsletter below.

These waivers started on 5/28 and have been approved for 6 months.

AR Substitutes
Soy Concentrate and Substitutes
Soothe and Substitutes
Gentle and Substitutes
Soy and Substitutes
Gentle Concentrate and Substitutes
Soy RTF and Substitutes
Gentle RTF and Substitutes

If you would like to contact SCAAP, please email Ray Saputelli.