

ADDRESSING HUNGER AND NUTRITION

A Tool Kit for Positive Results



National
Conference
of
State
Legislatures

The WIC Program

By Chandra Kring

June 2005

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) provides services to nutritionally at-risk, low-income pregnant women, postpartum women, infants and children up to age 5. WIC benefits include nutritional education and counseling, health and social service referrals, and a monthly food package.

WIC participants receive checks or vouchers (in some jurisdictions, a new electronic debt card) to purchase specific foods each month that are designed to supplement their diets. WIC foods include iron-fortified infant formula and infant cereal, vitamin C-rich fruit or vegetable juice, eggs, milk, cheese, peanut butter, dried bean/peas, tuna fish and carrots. Special therapeutic infant formulas and medical foods are provided when prescribed by a physician for a specified medical condition. Different food packages are provided for different categories of participants.

WIC has been very successful in supporting and promoting breastfeeding. Breastfeeding provides many health, nutritional, economical and emotional benefits to mother and baby. Since a major goal of the WIC Program is to improve the nutritional status of infants, WIC mothers are encouraged to breastfeed their infants. WIC has historically promoted breastfeeding to all pregnant women as the optimal infant feeding choice, unless medically contraindicated.

WIC is a federal grant program for which Congress authorizes a specific amount of funding each year for program operations. The program is available in all 50 states, 33 Indian tribal organizations, American Samoa, the District of Columbia, Guam, Puerto Rico and the Virgin Islands. WIC funding is discretionary rather than mandatory; however, states have the option to provide additional funding. States generally provide either supplemental or contingency funding for WIC.

At the federal level, WIC is administered by the Food and Nutrition Service (FNS) within the USDA. The FNS provides the funds to WIC state agencies (state health departments or comparable agencies) to pay for WIC food, nutrition counseling and education, and administrative costs.

Eligibility

Pregnant or breastfeeding women, infants, and children up to age 5 who are at nutrition risk are eligible. They must meet income guidelines and a state residency requirement and must be individually determined to be at “nutrition risk” by a health professional. There are no immigration restrictions for child nutrition programs; children may access WIC regardless of their immigration status.

For income eligibility, the applicant must fall at or below 185 percent of the federal poverty level. A person who participates in certain other benefit programs—such as the Food Stamp Program, Medicaid or Temporary Assistance to Needy Families—automatically meets the income eligibility requirements.

Nutritional risk is determined by a health professional such as a physician, nutritionist or nurse is based on federal guidelines. This health screening is free to program applicants.

Two major types of nutrition risk are recognized for WIC eligibility:

- Medically based risks such as anemia, underweight, overweight, history of pregnancy complications, or poor pregnancy outcomes.
- Dietary risks, such as failure to meet the dietary guidelines or inappropriate nutrition practices.

Once a local WIC agency has reached its maximum caseload, vacancies are filled in order according to the following priority levels:

- Pregnant women, breastfeeding women and infants who are determined to be at nutrition risk because of a nutrition-related medical condition.
- Infants up to six months of age whose mothers participated in WIC or could have participated and had a serious medical problem.
- Children at nutrition risk because of a nutrition-related medical problem.
- Pregnant or breastfeeding women and infants at nutrition

risk because of an inadequate dietary pattern.

- Children at nutrition risk because of an inadequate dietary pattern.
- Non-breastfeeding, postpartum women with any nutrition risk.
- Individuals at nutrition risk only because they are homeless or migrants, and current participants who, without WIC foods, could continue to have medical and/or dietary problems.

- Congress appropriated \$5.235 billion for WIC in fiscal year 2005.
- During fiscal year 2003, the average monthly participation in WIC was approximately 7.63 million people. Of that number approximately 3.82 million were children, 1.95 million were infants, and 1.86 million were women.

Program Issues and Challenges

WIC Food Package Lacks Fruits and Vegetables

Although WIC provides many nutritional foods to women and their children, fresh fruits and vegetable have been omitted from the WIC food package. The WIC Farmers' Market Nutrition Program provides vouchers for WIC recipients to shop at farmers' markets; however, this program is not available in all states, and in many areas operation is seasonal. In April 2005, the Institute for Medicine of the National Academies released recommendations based upon its review of the WIC food package. The report, *WIC Food Packages: Time for Change*, was sponsored by the USDA with the goal of bringing the foods provided through WIC up to current nutritional science and making it easier for program participants to improve their diets and health. The recommendations included providing vouchers or coupons for fresh produce totaling \$10 per month for women and \$8 per month for each child and adding fruit and vegetable baby foods to the packages for infants six months and older. The full report can be accessed at <http://books.nap.edu/catalog/11280.html>.

Connecting Nutrition Education and Parenting Skills

For nutrition education to be effective, it is essential to educate both the parent and the child. Linking nutrition education with parenting skills establishes a relationship around healthy eating between parent and child.

Program Models and Promising Practices

Providing Parent Education

The Ralls and Pike County, **Missouri**, WIC clinics have partnered with the University Outreach and Extension Program to provide a two-month program that supports parents, reinforces what parents are doing well, and provides information about options or strategies available to parents. Two days each month, *Parenting Pointer* days are held at the WIC clinic. During this time, each parent rotates through three circuits to spend time with a nutritionist, a nurse case manager, and a human development specialist. For the two-month period, six parenting topics are addressed: care for self; nurturing, guiding, understanding and motivating children; and advocating for children. Handouts are provided and activities are suggested for parents to complete at home by themselves or with their families. Information about the Parenting Pointers program can be found at <http://outreach.missouri.edu/fcrp/aboutus.htm>.

Resources

- Federal Program Overview: <http://www.fns.usda.gov/wic/>
- State Agency Contacts: <http://www.fns.usda.gov/wic/Contacts/ContactsMenu.HTM>
- Information on Breastfeeding: <http://www.fns.usda.gov/wic/Breastfeeding/breastfeedingmainpage.HTM>
- Information on WIC Food Package: <http://www.fns.usda.gov/wic/benefitsandservices/foodpkg.HTM>

Contact Information:

Hunger and Nutrition Partnership
National Conference of State Legislatures
444 North Capitol Street, N.W., Suite 515
Washington, D.C. 20001

Project Staff:

Ann Morse, Program Director, (202) 624-5400, ann.morse@ncsl.org
Katherine Gigliotti, Policy Associate, (202) 624-8691, katherine.gigliotti@ncsl.org
Project Web site: www.ncsl.org/programs/immig/hungerpartnership.htm

Definitions of commonly used hunger and nutrition terms can be found in NCSL's Hunger and Nutrition Partnership *Glossary of Hunger and Nutrition Terms* at <http://www.ncsl.org/programs/immig/Glossary.htm>.