INDIANA WIC

ANNUAL REPORT 2013







What is WIC?

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is a federally funded program, which is designed to provide services to low-income pregnant, postpartum and breastfeeding women, and infants and children up to 5 years of age who are at health or nutritional risk. WIC has existed for 40 years and has proven to be a cost-effective public health program.





Who is eligible for WIC?

Pregnant, postpartum and breastfeeding women, infants and children up to 5 years of age are eligible for WIC Benefits.

They must be an **Indiana resident**, have an income that falls at or below

185%

of the U.S. Poverty Income Guidelines* and be individually determined by a health professional to be at

nutritional risk.

Families participating in certain other benefit programs such as the

Supplemental Nutrition Assistance Program (SNAP),

Medicaid or

Temporary Assistance for Needy Families (TANF)

automatically meet the income eligibility requirement.

Nutrition risk may be medically-based, such as

anemia, underweight, overweight, history of pregnancy complications or dietary risk.

*For current WIC Income Guidelines contact Indiana WIC at 800.522.0874 or visit our website at WIC.in.gov.



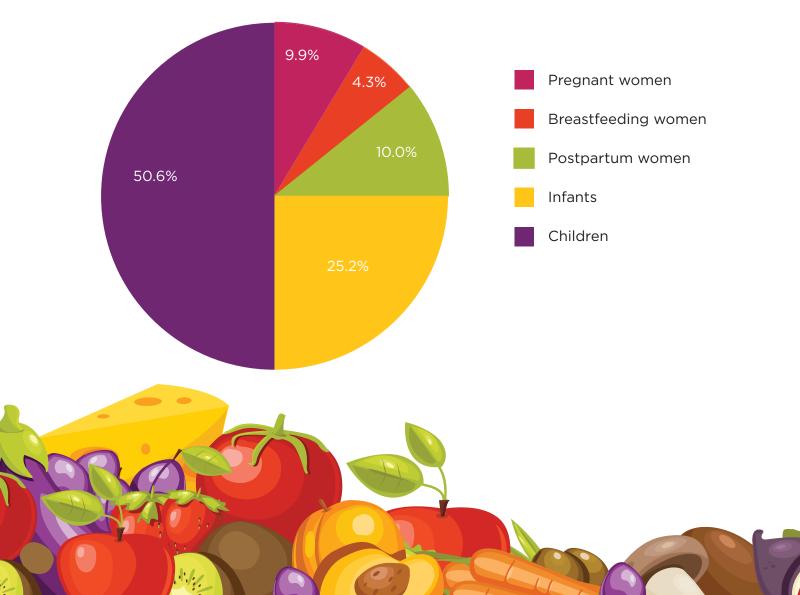
Indiana WIC program profile

In fiscal year 2013, there was an average of 159,525 Hoosiers served each month in Indiana through a statewide network of

138 WIC clinics.

Among Indiana WIC participants, approximately half (50.6%) were children. Infants account for 25.2% and women for 24.2%. (Figure 1)

FIGURE 1. INDIANA WIC CATEGORIES



Indiana WIC Finances

In fiscal year 2013, Indiana WIC supported local economies by

\$110.3 million

through the purchasing of healthy food for mothers and young children in

692 grocery stores and 88 pharmacies

and by funding

49 community and public health agencies

to provide nutrition and education services.

The Indiana WIC Farmers' Market Nutrition Program generated

\$210,977

in locally grown fruits and vegetables sales to Hoosier farmers who participated in

172

WIC approved Farmers' Markets and Farm Stands.

An infant formula rebate contract contributed

\$38 million

to Indiana WIC for the purchase of healthy food for participants.

Indiana WIC continuously maintains a lower average monthly food cost compared to the national average.

(\$37.26 versus \$43.23)

Indiana is

13th in the nation

for lowest monthly food cost per participant.

The Indiana WIC program has the **3rd lowest** monthly average administrative cost per participant in the nation after New Jersey and Texas WIC Programs.

(\$15.75 versus the national average of \$18.10)



WIC's effort to decrease infant mortality in Indiana

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) was launched 40 years ago and since then has been proven to improve the nutritional status and health outcomes of vulnerable populations. A recent study has shown that WIC participants had a lower infant mortality rate (IMR) compared to non-WIC participants. Prenatal WIC participation was associated with especially significant improvement in African American IMR, thus reducing racial disparities. The WIC program helps to reduce the number of low birth weight infants, infants born prematurely, and iron deficiency in children by providing supplemental food, nutrition education and referrals to various health services.

In addition to providing a variety of healthy foods and nutritional education, the WIC program cooperates with other programs to maximize its efforts to improve health and nutritional status of WIC participants.

In fiscal year 2013, WIC clinic staff made

45,149

referrals to

Healthy Families and

24,464

referrals to the

Expanded Food Nutrition Education Program/ Family Nutrition (EFNEP/FNP) programs.



Promotion and Referrals

WIC clinic staff conduct outreach and promotion to increase prenatal WIC enrollment. Woman often wait until the third trimester to enroll in WIC. The Program would like to provide services to women as soon as they know they are pregnant. Indiana WIC helps to improve preconception health and reduce the number of unintended pregnancies, as well as assuring adequate prenatal and postnatal care by providing referrals to family support services, clinics and private physicians.

In fiscal year 2013, WIC clinic staff made

2,008 referrals to Family Planning services,

1,148 referrals to Prenatal Clinics and

46,488 referrals to Private Physicians.

By partnering with the **Indiana Tobacco Quitline Network**, WIC targets the smoking rate of prenatal women. Due to their successful collaboration and referrals to other smoking cessation programs, the smoking rate among pregnant WIC participants has dropped

from **23.6%** in fiscal year 2012 to

22.8% in fiscal year 2013.

In fiscal year 2013, WIC clinic staff made 10,600 referrals to smoking cessation programs.

Promotion and Referrals

The WIC program promotes breastfeeding as not only the best nutritional source for infants, but also as a tool to reduce the incidence of infant mortality including Sudden Infant Death Syndrome³. The breastfeeding initiation rate has been increasing consistently for the last decade and has reached

69.7% in fiscal year 2013, which is 1.9% higher compared to the previous year.

A recent study concluded that a woman's

decision to initiate breastfeeding was significantly associated with WIC peer counselor contacts⁴.

In fiscal year 2013 WIC clinic staff

made

50,107 referrals to Breastfeeding Support. Working together with peer counselors and breastfeeding coordinators, the staff also promotes safe sleep and skin to skin practices.



Indiana WIC Breastfeeding Support

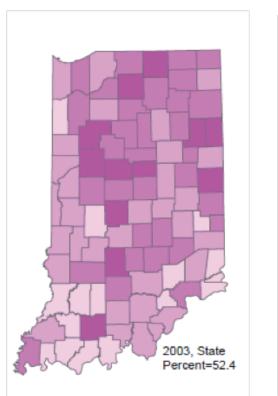
Over the past decade, the Indiana WIC breastfeeding initiation rate increased from

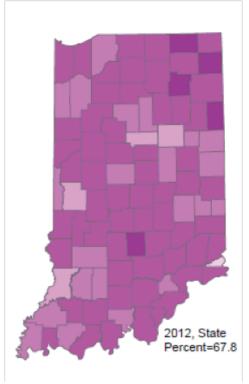
52.4% to 69.7%, a **17.3%** increase

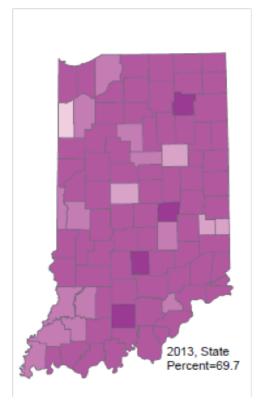
throughout the decade.

The program attained a 1.9% increase in 2013 over 2012. Due to this steady increase, the Indiana WIC Program anticipates attaining the

Healthy People 2020 goal of an 81.9%, breastfeeding initiation rate.







Breastfeeding Intitation Rate (Healthy People 2020 Goal=81.9%)

24.1 44.0 53.9 62.2 81.9 88.5

BREASTFEEDING SUPPORT



Nutrition Education

Through the implementation of Participant Centered Services the Indiana WIC Program staff support the following nutrition education goals set by WIC Federal Regulations (246.11):

- Highlight the relationship between nutrition, physical activity and health with special focus on the nutritional needs of WIC participants;
- Assist the individual who is at nutritional risk in achieving a positive change in dietary and physical activity habits;
- Provide nutrition education in the context of the ethnic, cultural and geographic preferences of the participants and with consideration for educational and environmental limitations experienced by them.





Battle Against Obesity

The continuing epidemic of adult and early childhood obesity has become one of the most serious public health threats for Hoosiers.

In fiscal year 2013,

14.5% of children ages 2-5 on the Indiana WIC program were obese. This number has decreased slightly from



15.0% in 2012.

The program aims to reach the **Healthy People 2020** objective to decrease the proportion of obese children to 9.6%.

Only three Indiana counties met this goal:

Crawford 8.4% Perry 9.0% and White 9.3%

Indiana WIC is making prevention of obesity a priority by supporting **breastfeeding** and **promoting healthy nutrition** and **physical activity** through offering WIC families healthy foods and a broad variety of nutrition education materials and activities.

The Indiana WIC Program continues to actively promote consumption of fruit and vegetables through offering Cash Value Vouchers (CVV) to WIC children and women. In fiscal year 2013, the Indiana WIC CVV

redemption rate continued to hold steady at 81%.

References

- 1. El-Bastawissi, A., Peters, R., Sassen, K., Bell, T., & Manopopoulos, R. (2007). "Effect of Washington Special Supplemental Nutrition Program for Women, Infants and Children (WIC) on pregnancy outcomes." Maternal and Child health Journal, 11(6):611-621
- 2. Khanani, I., Elam. J., Hearn, R., Jones, C., & Mazeru, N. (2010). "The Impact of Prenatal WIC Participation on Infant Mortality and Racial Disparities." American Journal of Public Health, 100(S1):204-209.
- 3. Chen, A., & Rogan, W. (2004). "Breastfeeding and the Risk of Postneonatal Death in the United States." Pediatrics, 113(5): e435-e439.
- 4. Campbell, L., Wan, J., Speck, P., & Hartig, M. (2014). "Women, infant and children (WIC) peer counselor contact with first time breastfeeding mothers." Public Health Nursing, 31 (1): 3-9.



For more information about the Indiana WIC Program visit WIC.in.gov



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