

SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS, AND CHILDREN (WIC)

An Overview

Introduction

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) has been one of the nation's most successful and cost-effective nutrition intervention programs, protecting and improving the health of nearly 6.3 million individuals, including over 55,000 Arkansans, in 2020.^{1,2}

Despite its effectiveness, only 1 in 3 eligible Arkansans are participating in the WIC program.² As WIC nears its 50th year as a permanent program, the federal Department of Agriculture is seeking to modernize and improve its accessibility. This explainer provides an overview of WIC, including discussion of how the program is administered, its eligibility requirements, its funding mechanisms, and efforts to modernize it.

Background

WIC was established in 1972 as a two-year pilot project under the U.S. Department of Agriculture (USDA). USDA introduced the project to address concerns about malnutrition and inadequate access to nutritious food among low-income pregnant women, new mothers, infants, and young children. The pilot project demonstrated positive outcomes, leading to its expansion. In 1975, WIC became a permanent program, authorized by the Child Nutrition Act.³

The primary goal of the WIC program is to safeguard the health and well-being of eligible women, infants, and children through three core program components:⁴



- **Access to nutritious food.** WIC participants receive food packages tailored to their individual needs and circumstances. The packages include items such as milk, cheese, yogurt, whole grains, fruits, vegetables, and protein sources such as lean meats, poultry, fish, eggs, beans, and peanut butter. The contents are determined by federal regulations and can vary based on age, breastfeeding status, and other factors.
- **Nutrition education.** WIC provides nutrition education and counseling to participants and their families to empower them to make informed decisions regarding their health and diet. This includes guidance on healthy eating, breastfeeding, feeding infants and young children, meal planning, and making nutritious food choices on a limited budget.
- **Support services.** WIC offers additional support services to enhance the overall well-being of participants. These services may include referrals to healthcare providers, immunization screening and referrals, counseling on family planning and reproductive health, and assistance in accessing other community health resources.

WIC Eligibility Criteria

Eligibility for the WIC program is determined based on categorical, income, residential, and nutrition risk criteria. Specific eligibility requirements may vary slightly between states. Those who are eligible in Arkansas include:⁵

- Pregnant women, postpartum women (up to six months after giving birth), and breastfeeding women (up to one year after giving birth).
- Infants from birth up to their first birthday.
- Children from the age of 1 year up to their fifth birthday.
- Members of households with income up to 185% of the federal poverty level.^a
- Participants in certain programs such as Transitional Employment Assistance (TEA), SNAP, or Medicaid.

^a Annual income limits are \$36,482 for a two-person household and \$55,500 for a four-person household.

- Individuals who are assessed to have a nutritional risk, determined through a health screening conducted by a health professional such as a physician, nurse, or nutritionist.

Individuals must be Arkansas residents and cannot participate in WIC at more than one WIC clinic at the same time.

WIC Participation

Despite the effectiveness of the WIC program, participation rates among those eligible have remained near an average of 50% nationally, though rates vary significantly by state and participant category. In 2020, Puerto Rico, California, and Minnesota had WIC participation rates above 60%, while Utah, Arkansas, and Montana had the lowest participation rates, all below 37%. Arkansas's WIC participation rate was 36.3%, which was lower than the rates of the surrounding states of Texas, Oklahoma, Missouri, Tennessee, Mississippi, and Louisiana.²

Nationally, the category with the highest WIC participation rate in 2020 was infants and postpartum non-breastfeeding women, with 82% of those eligible participating. Four-year-old children had the lowest rate, with 24% of those eligible participating. Consistent with national rates, infants in Arkansas had the highest WIC participation rate, 75.5%, while children had the lowest participation rate, 23.5%.²

WIC Farmers' Market Nutrition Program

Established by Congress in 1992, the Farmers' Market Nutrition Program (FMNP) is a component of the WIC program designed to provide fresh, nutritious, unprepared, locally grown fruits and vegetables to WIC participants and to expand the awareness, use of, and sales of locally grown fruits and vegetables at farmers' markets. Congress appropriates funding annually for the administration of the FMNP. Federal funds support 100% of the food costs and 70% of the administrative costs of the program. Participating states must pay at least 30% of the administrative costs of the program.³

In Arkansas, WIC FMNP coupons are issued to WIC participants on a first come, first served basis from May through August of each year. These coupons are in addition to their regular WIC



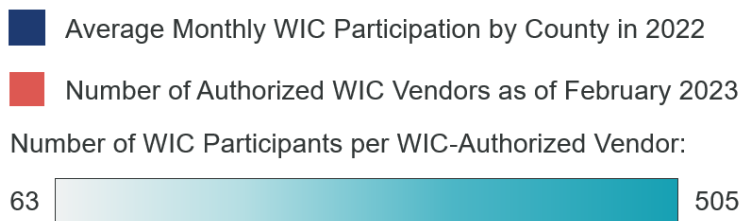
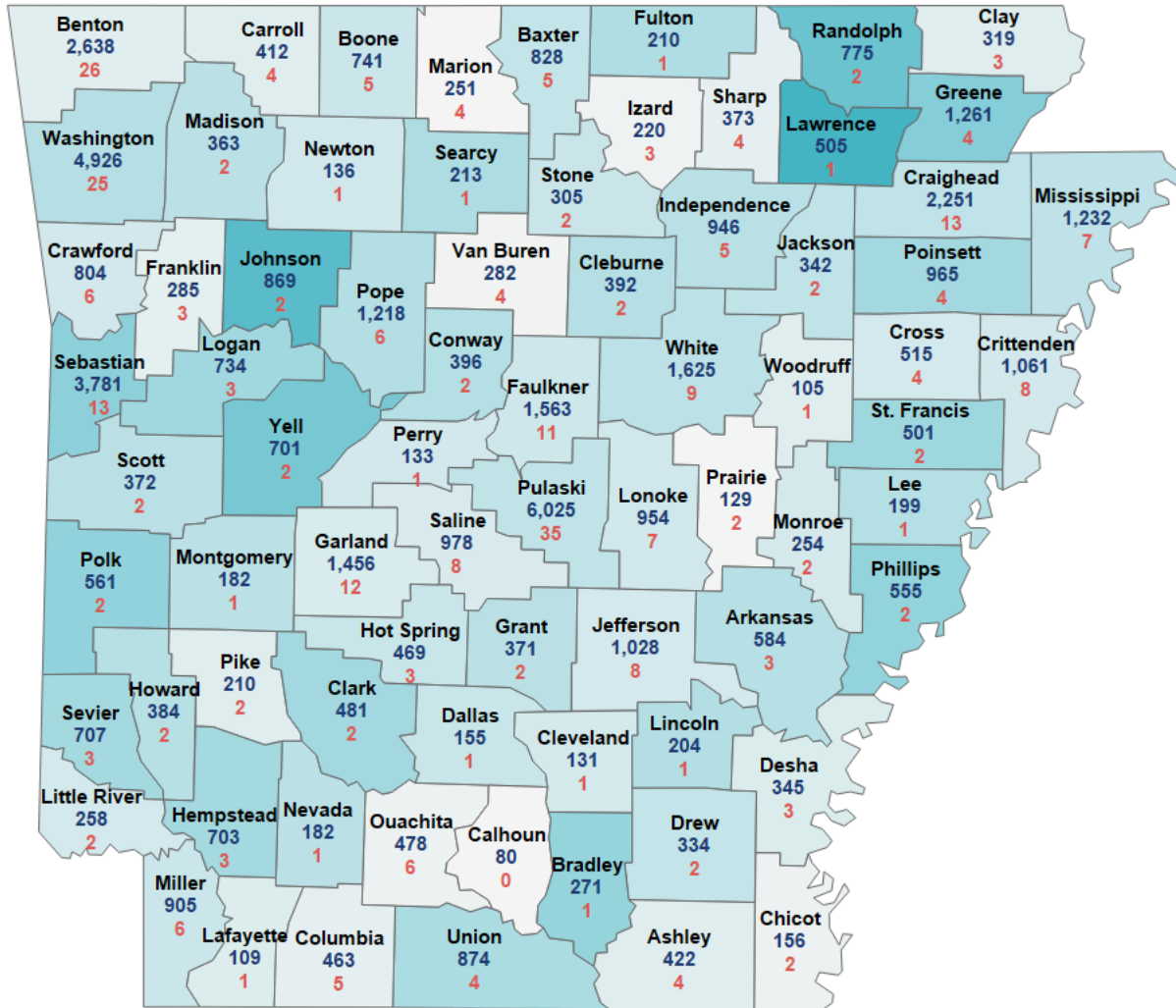
benefits and must be used at WIC FMNP-authorized farmer's markets from May through September.⁶

Common Challenges With WIC

WIC participants may encounter several challenges when trying to use their benefits. These challenges can vary depending on factors such as location, program administration, and individual circumstances. Common challenges faced by WIC participants include:

- **Administrative hurdles.** Participants may encounter administrative challenges that create barriers to accessing and maintaining benefits, such as difficulties in scheduling appointments, providing required documentation, or keeping up with program recertification requirements.
- **Stock availability.** Even if a store accepts WIC benefits, it may have limited quantities or varieties of WIC-approved food items in stock, leading to frustration and inconvenience for participants.
- **Product eligibility confusion.** Understanding which specific brands, sizes, and varieties of food items are eligible for WIC benefits can be confusing, especially when brands or packaging change.
- **Stigma and discrimination.** Some participants may experience stigma or negative attitudes from store staff or other customers while using their WIC benefits, which can make the participants feel uncomfortable or embarrassed. This can be due to misconceptions about the program or a lack of understanding of its purpose.
- **Limited food choices.** The food packages provided by WIC may not always align with individual preferences, cultural dietary practices, or specific dietary needs. Participants may feel limited in their food choices and have difficulty incorporating the provided food items into their regular meals and diet.
- **Limited availability of approved stores.** Finding stores that accept WIC benefits and offer WIC-approved food items can be a challenge in certain areas. Arkansas counties with the greatest numbers of WIC-approved stores include Pulaski, Benton, and Washington. Conversely, 15 Arkansas counties have fewer than two stores authorized to accept WIC benefits. Figure 1 illustrates WIC-approved vendors per capita by county.

FIGURE 1: WIC PARTICIPANTS AND WIC-APPROVED VENDORS BY COUNTY^{7,8}



WIC Funding

Congress appropriates funds for WIC through the federal budget process. The funds appropriated can vary each year based on factors such as program participation rates, economic conditions, and policy priorities. Although federal law does not require matching

funds, some states provide supplemental funds for their WIC programs. Arkansas, however, does not.

The Department of Agriculture's (USDA) Food and Nutrition Service oversees WIC at the federal level and provides funds to state health departments, Indian Tribal Organizations, Washington, D.C., and the U.S. territories. States, in turn, allocate or use the funds to support the core operations of the program, including program administration, nutrition education, and the provision of WIC food benefits to eligible participants.

The bulk of WIC funding is provided through food grants and Nutrition Services and Administration (NSA) grants. Food grant funds may be used to pay retail grocery stores for foods purchased by program participants; to acquire, store, and provide supplemental foods to participants; and to purchase or rent breast pumps. NSA grant funds may be used for participant certification costs, nutrition education activities, breastfeeding promotion and support activities, and salaries and administrative costs to provide these services. Generally, money for food costs and administrative expenses must be kept separate; however, grantees may, under federal guidelines, convert food funding to support NSA costs.³

Because WIC's funding is tied to the cost of food items, the program has come to include a number of cost-containment measures. Such measures include approved food lists with reasonably priced food items, rebates on infant formula and other authorized foods, and the selection of WIC vendors based on competitive prices.

WIC Modernization and Innovation

To modernize WIC and the WIC Farmers' Market Nutrition Program (FMNP), USDA is focusing on four initiatives:⁹

- Prioritize outreach by developing and implementing a national outreach campaign to increase enrollment and retention in WIC, while reducing disparities in program access and delivery.
- Improve the shopping experience by working with state agencies and retailers to implement or expand self-checkout; improve customer service and streamline the



checkout experience; provide shopping-related resources for families with limited English language skills; expand the variety and choice of foods available in WIC; and make it easier to find WIC-approved items.

- Increase the diversity and cultural competency of the WIC workforce through investments in research and education.
- Modernize technology and service delivery by sharing data and referrals with other benefit programs with similar income eligibility, including SNAP and Medicaid, and providing WIC agencies with funds for projects that focus on technology enhancements.

Conclusion

WIC plays a crucial role in safeguarding the health and well-being of low-income women, infants, and children up to age 5 who are at a nutrition risk across the state. Research has shown that WIC participation results in improved birth outcomes, infant feeding practices, immunization rates, and cognitive development.¹ Despite its effectiveness, only 1 in 3 eligible Arkansans participate in the program, highlighting the need for improvements and increased accessibility. With continuing investment in outreach, technology, service delivery, and WIC workforce development, WIC has the potential to reach more eligible individuals, better support maternal and child health outcomes, and reduce nutritional disparities in Arkansas.

References

- ¹ U.S. Department of Agriculture, Food and Nutrition Service. *About WIC: How WIC Helps*. Retrieved July 6, 2023, from fns.usda.gov/wic/about-wic-how-wic-helps
- ² U.S. Department of Agriculture, Food and Nutrition Service. *National and State Level Estimates of WIC Eligibility and Program Reach in 2020*. Retrieved July 6, 2023, from fns.usda.gov/wic/eligibility-and-program-reach-estimates-2020
- ³ Congressional Research Service. (R44115; 2017, April 7). *A Primer on WIC: The Special Supplemental Nutrition Program for Women, Infants, and Children*. crsreports.congress.gov/product/pdf/R/R44115
- ⁴ U.S. Department of Agriculture, Food and Nutrition Service. *About WIC: WIC at a Glance*. Retrieved July 6, 2023, from fns.usda.gov/wic/about-wic-glance
- ⁵ Arkansas Department of Health. *WIC (Special Supplemental Program for Woman, Infants, and Children)*. Retrieved July 6, 2023, from healthy.arkansas.gov/programs-services/topics/wic
- ⁶ Arkansas Department of Health. *Farmers' Market Nutrition Program*. Retrieved July 6, 2023, from healthy.arkansas.gov/programs-services/topics/farmers-market-nutrition-program
- ⁷ Governor's Food Desert Working Group. *Addressing Food Access in Arkansas: A Report & Recommendations*. Retrieved July 6, 2023, from arhungeralliance.org/wp-content/uploads/2022/12/Food-Desert-Working-Group-Report.22.pdf
- ⁸ Arkansas Department of Health. *WIC Vendor Management*. Retrieved July 6, 2023, from healthy.arkansas.gov/programs-services/topics/wic-vendor-management
- ⁹ U.S. Department of Agriculture, Food and Nutrition Service. *WIC Modernization*. Retrieved July 6, 2023, from fns.usda.gov/wic/modernization

