



# Indiana WIC Annual Report 2012

## 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 five years of age who are at health or nutritional risk. WIC has existed for almost 40 years and proved to be a cost-effective public health program.

## WIC provides:

- ◆ Nutrition and health screening and assessment.
- ◆ Nutrition education and counseling.
- ◆ Breastfeeding promotion and support.
- ◆ Referrals to other Indiana health, family, and social services.
- ◆ Supplemental healthy foods designed to meet special nutrition needs.

## Who is eligible?

Pregnant, postpartum and breastfeeding women, infants, and children up to five years of age are eligible for WIC. They must be Indiana residents, be income eligible by having an income that falls at or below 185% of the U.S. Poverty Income Guidelines (currently \$42,643 for a family of four), 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.

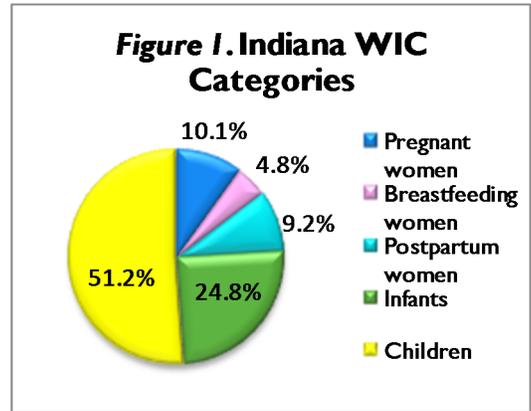
*Nutrition risk* may be *medically-based*, such as anemia, underweight, overweight, history of pregnancy complications, or *dietary risk*, such as failure to meet the dietary guidelines or inappropriate nutrition practices.

# Indiana WIC Program Profile

In fiscal year 2012, there was an average of **164,281** Hoosiers served each month in Indiana through a statewide network of 138 WIC clinics.

Among Indiana WIC participants, over half (**51.2%**) are children. Infants account for **24.8%**, and women for **24.1%** (Figure 1).

Indiana WIC serves nearly half of all infants born statewide.



Healthy WIC moms have healthy WIC babies.



The benefits of WIC nutrition begin even before the child is born.



## Indiana WIC Finances

In fiscal year 2012, Indiana WIC supported local economies by **\$112 million** in healthy food sales for mothers and young children in 710 grocery stores and 87 pharmacies and by funding 49 community and public health agencies to provide nutrition and education services.

The Indiana WIC Farmers' Market Nutrition Program generated **\$259,000** in locally grown fruits and vegetables sales to Hoosier farmers who participated in 220 WIC approved Farmers' Markets and Farm Stands.

By negotiating rebates with a formula manufacturer, Indiana WIC was able to save **\$37 million**. The saving allowed Indiana WIC to support around one-quarter of the average monthly caseload. Due to cost containment efforts, Indiana WIC continuously maintains a lower average monthly food cost compared to the national average (**\$37.85** versus **\$44.99**). FY2012 average monthly food cost was **\$3.69** or **8.9%** below the FY2011 cost of **\$41.54**.

The Indiana WIC program has the sixth lowest monthly average administrative cost per participant in the nation after New Jersey, Nevada, Illinois, Texas, and Florida WIC Programs (**\$16.26** versus the national average of **\$17.61**).

# WIC Public Health Value

The WIC program is one of the nation's most successful and cost-effective public health nutrition intervention programs. As an integral part of Indiana's public health system, Indiana WIC works to save lives and improve lifelong health of low-income women, infants, and children. WIC has been proven to improve birth outcomes and ensure the health of our children while reducing the healthcare costs.



A recent research study has shown that women participating in WIC during their pregnancy is associated with lower risks for infant mortality and improved racial disparities (1).

WIC prenatal participation is associated with a greater likelihood of receiving adequate prenatal care and reduced rates of adverse birth outcomes such as low birth weight and prematurity (2,3).

Every prevented very low birth-weight incident results in reduced Medicaid costs on average between \$12,000 and \$15,000 (4). Every dollar invested in the health of pregnant women on WIC saves on average between \$1.92 to \$4.21 on Medicaid cost (5).

WIC clinic staff conduct prenatal screenings by examining participant weight, medical history, hemoglobin level, and nutrition practices to determine nutrition and health risks early in their pregnancy (6).

Women who participate in WIC during both the prenatal and postpartum periods are less likely to be obese and more likely to have higher hemoglobin levels and babies with higher birth weight at a subsequent pregnancy than women who participate in WIC only during their pregnancy (7).

Research shows that WIC participation has a positive effect on participants' diet and diet-related outcomes, including higher intakes of key nutrients, and decreases incidence of iron deficiency anemia in children (8,9).

Children who participate in WIC are more likely to be immunized, to have a regular source of medical care and increased diagnosis and treatments of childhood diseases such as otitis media, gastroenteritis, respiratory infections, and asthma (10).

*My mom's breast milk makes me healthy and smart. I'm off to a great start!*



*WIC peer counselors provide mom-to-mom, heart-to-heart breastfeeding education and support.*



## Indiana WIC Breastfeeding Support

The multiple health, nutritional, immunologic, economic, and emotional benefits of breastfeeding to mother and baby are well recognized. Breastfeeding provides superior nutrition for optimum infant growth; lowers the risk of obesity, gastrointestinal and lower respiratory infections, leukemia, asthma, type 2 diabetes, heart disease, allergic responses, and SIDS; and saves families around **\$1,200-\$1,500** per year on formula expenditures alone (11).

The Indiana WIC Program promotes and encourages exclusive breastfeeding as the best choice for infants by providing educational materials and one-on-one counseling, offering a greater quantity and variety of foods and longer participation in the program for breastfeeding moms, and creating internal and external breastfeeding-friendly environments. The Indiana WIC staff is committed to achieving breastfeeding success for all WIC moms and their babies. Whether mom is going back to work or school or is worried about her baby not receiving enough breast milk, lactation-trained Indiana WIC staff and peer counselors always provide the right information and support and empower WIC moms to exclusively breastfeed. Presently, 86 WIC staff are International Board Certified Lactation Consultants (IBCLC) certified to support participants in meeting their breastfeeding goal.

In fiscal year 2012, the Indiana WIC breastfeeding initiation rate reached **67.8%**, a **1.5%** increase from last year. The breastfeeding initiation rate has increased steadily over the last decade. Prevalence of ever breastfeeding increased from **49.3%** in fiscal year 2002 to **67.8%** in 2012. Although the *Healthy People 2020* objective to increase the proportion of children ever breastfed to **81.9%** continues to be the goal achieved statewide, a few local WIC programs met this goal during the past fiscal year:

- Adams County WIC Program
- Brown Co. WIC Program
- DeKalb County WIC Program
- LaGrange County WIC Program
- Senior Citizens Center
- Tippecanoe County WIC Program
- Valparaiso WIC Program
- Whitley County WIC Program

# Nutrition Education



Nutrition education is the program benefit that sets WIC apart from the other Food and Nutrition Service nutrition assistance programs and makes WIC a premiere public health program (12).

The WIC Federal regulations (7 CFR 246.11) set the following nutrition education goals:

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

IN WIC staff supports these nutrition education goals by:

- Creating an inviting, emotion-based, and friendly clinic environment.
- Facilitating excellent customer service for WIC families.
- Enhancing nutrition education through emotion-based assessment and counseling.
- Strengthening documentation of emotion-based nutrition assessment and education.
- Summarizing nutrition education activities and materials to support participant interaction.

The clinic environment, nutrition education sessions, and customer service must harness emotion because it is a powerful behavior change force. WIC nutrition education is effective only when it results in a positive healthy change. The results of the *IN WIC Participant Survey 2012* showed, that **98.0%** of IN WIC participants made at least one healthy change to their lifestyles as a result of participating in the Indiana WIC program, with the majority of participants reporting more than one change. The most commonly mentioned healthy change was an increase in fruit and vegetables consumption (**79.1%**); more than half (**56.8%**) of the respondents reported consuming more whole grains, **48.2%** reported drinking more water, and **40.1%** reported eating less fast food. More than one-third of respondents reported drinking fewer sugary drinks (**36.3%**) and lower fat milk (**35.3%**), **32.9%** said that they started eating more iron-rich foods, **28.8%** reported eating less high-fat foods, and **26.1%** reported exercising more. More than one-fifth (**21.0%**) reported breastfeeding, **17.6%** reported getting their children immunized, **16.2%** reported smoking less or quitting smoking, and **13.2%** decided to breastfeed longer than planned.



## Indiana WIC Community Partners

Indiana WIC Families are healthier and better served because of WIC's exceptional relationships with a broad network of local community partners. We are working together as a big public health team and making connections that matter. Indiana WIC staff continue to provide excellent referrals to WIC participants and applicants to enhance their nutrition and health and to assist them with needed support from community services. In fiscal year 2012, the staff made **331,509** referrals, including referrals to:

- Breastfeeding Support - 47,968
- Private Physician - 46,970
- Healthy Families - 43,690
- Dental Program - 41,868
- Immunization Program - 25,597



WIC, Healthy Families, and the Expanded Food Nutrition Education Program/Family Nutrition Program (EFNEP/FNP) often serve the same families. Successful cooperation allows the programs to maximize resources through the coordination of services. The most efficient way to do this is through a Memorandum of Understanding (MOU) that allows WIC to provide participant data directly to its key partners.

The major benefits of this kind of partnership include:

- Minimizing duplicative efforts for participants and staff.
- Providing more opportunities for WIC, Healthy Families, and EFNEP/FNP to benefit from each other's strengths, expertise and best practices.
- Ensuring more ways to make a positive impact on health and nutrition for Hoosier families.

The State WIC Office is currently working on mainstreaming the data sharing process with another key partner - the Indiana Quitline Network. Partly due to the exceptional collaborative partnership with the smoking cessation programs, the smoking rate among pregnant women on WIC during the last three months of pregnancy dropped from **25.1%** in 2002 to **19.7%** in 2012 (13). Smoking is one of the major public health issues in Indiana and efficient collaboration with the smoking cessation programs continues to be a priority for the IN WIC Program.



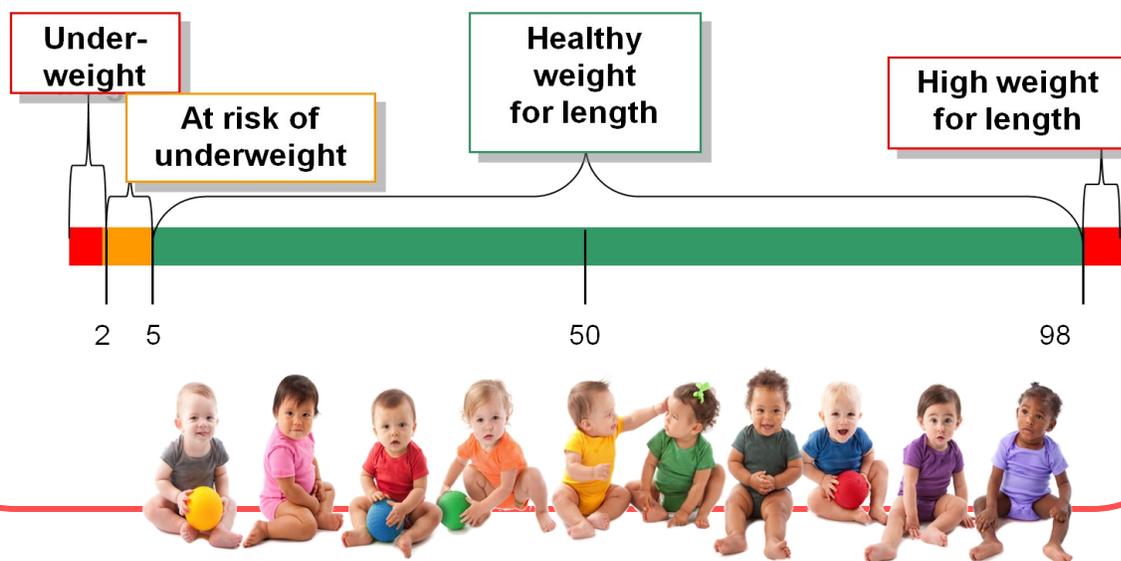
# WIC and the Battle Against Obesity



The continuing epidemic of adult and childhood obesity has become one of the most serious public health threats for Hoosiers. In fiscal year 2012, **15.0%** of children aged 2 - 5 on the Indiana WIC Program were obese, a **0.2%** decrease from last year. The program aims to reach the *Healthy People 2020* objective to decrease the proportion of obese children to **9.6%**. Only two counties, **Perry** and **White**, met this goal during the reported period.

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 2012, the Indiana WIC CVV Redemption rate reached **80.8%**, a **0.6%** increase from last year.
- The WIC Program also greatly contributes to public health efforts to reduce obesity by actively identifying and enrolling infants and children who may be at risk of obesity later in their life. For the purpose of identifying these children and instituting preventive measures early on, a new risk factor **115 High Weight-for-Length** (Infants and Children <24 Months of Age) has been successfully implemented by the Program in fiscal year 2012.
- Monitoring growth is another pathway the Indiana WIC successfully uses to track participants who are at risk of being overweight or obese and growth grids are key tools for interpreting growth measurements. In fiscal year 2012, the Indiana WIC program has successfully implemented **WHO Growth Charts** for infants and children up to 2 years of age. They are “breastfeeding friendly” and more helpful in identifying excess weight gain in young children at an earlier stage.

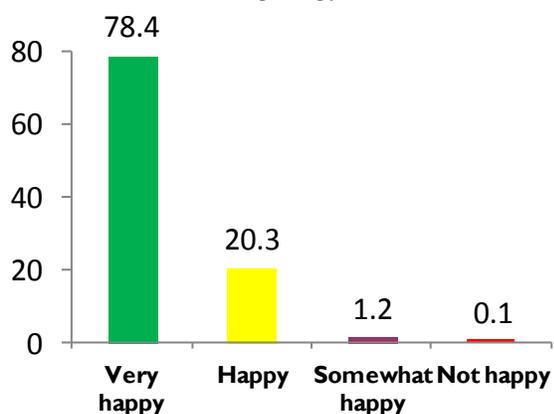


# Indiana WIC Participation Survey 2012



As part of continuing efforts to improve WIC services and program implementation, the Indiana WIC Program administered the 2012 WIC Participation Survey for a two-week time period during mid-summer of 2012. A total of 4,911 respondents completed this survey. The survey allowed WIC staff to gain valuable information from WIC participants regarding topics such as grocery store and food experiences, technology use, and clinic experiences.

**Figure 2. Q: Overall how happy are you with the quality of service that you receive at the clinic?**



The majority of survey respondents reported that office staff was pleasant on the telephone, that they rarely or never wait longer than 15 minutes, that the clinic is respectful and welcoming, and that the clinics appear clean and organized. Over 85% of survey respondents also reported that they feel the staff listens and seems interested in their concerns, and almost 99% of respondents reported that they are very happy or happy with the quality of service they receive at the WIC clinic.

## What do Hoosier Families Say about Indiana WIC?

*“My wife and I hated having to ask for help but staff treated us good and said they were sure glad we came in. They made us feel like we were helping them. They made us comfortable about getting WIC. Thank you for all you do!!! Always sweet and helpful.”*

*“The WIC program is very beneficial for me and my family. I feel very lucky to live in a community where such programs exist.”*

*“Staff do a wonderful job! I love going to WIC as do my kids! I feel like I can talk about any concerns I may have, which is great! I am so glad to have found a wonderful WIC office!”*

*“I love this office and the staff, always inviting and helpful - very grateful for WIC program; it has afforded my family healthy opportunities.”*

*“WIC has been a huge blessing in helping us get by. My son is very healthy and I have the WIC program to thank for that.”*

**This institution is an equal opportunity provider.**

For more information about the Indiana WIC Program, visit <http://www.wic.in.gov>, or to get footnoted references, visit <http://www.in.gov/isdh/24849.htm> or call 1-800-522-0874.

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