Overview of the WIC Program

WIC was created as a 2-year pilot program in 1972 by an amendment to the Child Nutrition Act of 1966 (P.L. 92-433). The program was made permanent in 1975 by P.L 94-105, which stated that "Congress finds that substantial numbers of pregnant women, infants, and voung children are at special risk in respect to their physical and mental health by reason of poor or inadequate nutrition or health care, or both." WIC is based on the premise that early intervention programs during critical times of growth and development can help prevent future medical and developmental problems. Administered by USDA's Food and Nutrition Service (FNS), the program currently provides grants for supplemental foods, nutrition services, and administration to 88 WIC State agencies, including the 50 States, the District of Columbia, Guam, the U.S. Virgin Islands, American Samoa, the Commonwealth of Puerto Rico, and 33 Indian Tribal Organizations.

WIC has grown dramatically since its beginning and is now one of the central components of the Nation's food assistance system. In fiscal year 2000, WIC served an average of 7.2 million participants per month, of whom roughly a quarter were infants, a quarter were women, and half were children (USDA, 2000a). Almost half of all infants in the United States now participate in the program.¹ Federal program costs totaled almost \$4 billion in fiscal year 2000, making WIC the country's third largest food assistance program in terms of total expenditures, exceeded only by the Food Stamp Program (\$17.0 billion) and the National School Lunch Program (\$6.1 billion) (USDA, 2000a). WIC accounts for about 12 percent of the total Federal Government expenditures for food and nutrition assistance.

Participant Eligibility

To qualify for WIC, applicants must meet categorical, income, and nutritional risk eligibility requirements.

Categorical Eligibility. To participate in the WIC program, a person must be:

• A pregnant woman (includes women up to 6 weeks postpartum),

- A nonbreastfeeding woman up to 6 months postpartum,
- A breastfeeding woman up to 1 year postpartum,
- An infant under 1 year of age, or
- A child up to his/her fifth birthday.

Income Eligibility. The family income of WIC applicants must meet specified guidelines.² All States currently set the income cutoff at the maximum 185 percent of the Federal poverty line (\$31,543 for a family of four in July 2000). Applicants who participate in or who have certain family members who participate in the Food Stamp, Medicaid, or Temporary Assistance for Needy Families (TANF) programs, are adjunctively income eligible; that is, they are deemed to meet the income eligibility criteria automatically.³ Some of these programs, particularly Medicaid, have higher income thresholds for certain WIC categories, usually pregnant women and infants.

Nutritional Risk. Applicants must be at nutritional risk, as determined by a health professional such as a physician, nutritionist, or nurse. Federal regulations recognize five major types of nutritional risk for WIC eligibility: (1) detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements; (2) other documented nutritionally related medical conditions; (3) dietary deficiencies that impair or endanger health; (4) conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; and (5) conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including, but not limited to, homelessness and migrancy (7 CFR 246.2).

Participant Benefits

The WIC program offers three types of benefits to participants, free of charge: a supplemental food package, nutrition education, and referrals to health and other services.

¹The percentage of infants who participate in WIC ranges from 30 to over 70 percent across States.

²WIC regulations state that the maximum allowable family gross income (i.e., before taxes are withheld) must not exceed the guidelines for reduced-price school meals, which are 185 percent of the U.S. Poverty Income Guidelines (7 CFR 246.7). State agencies may set the income guidelines equal to State or local guidelines for free or reduced-price health care, as long as they are equal to or less than 185 percent of the poverty guidelines and greater than 100 percent of the poverty guidelines.

³In April 1998, about half of all WIC participants also participated in at least one of these three programs (Bartlett et al., 2000).

and carrots in addition to other WIC foods. *Nutrition Education.* WIC makes nutrition education, including breastfeeding promotion and support, available to all participants (or to the parents or caretakers of infant or child participants). The nutrition education is designed to achieve two broad goals: (1) to stress the relationship between proper nutrition and good health and raise awareness about the dangers of using drugs and other harmful substances, and (2) assist the individual in achieving a positive change in food habits, resulting in improved nutritional status and in the prevention of nutrition-related problems through

Supplemental Food Package. WIC provides partici-

pants with supplemental foods that are high in nutri-

ents lacking in their diets. Nutritional weaknesses may

result in adverse health consequences. There are seven different food packages, based on the category of the

participant, as follows: (1) infants through 3 months,

breastfeeding postpartum women, (6) breastfeeding

women (enhanced), and (7) children or women with special dietary needs. WIC supplemental foods include

iron-fortified infant formula, iron-fortified infant and adult cereal, vitamin C-rich fruit and/or vegetable

juice, eggs, milk, cheese, peanut butter, tuna fish, car-

rots, and dried beans or peas.⁴ Breastfeeding women

whose infants do not receive formula from WIC can receive an enhanced food package that includes tuna

(2) infants 4-12 months, (3) children 1-4 years old, (4) pregnant and breastfeeding women (basic), (5) non-

foods (7 CFR 246.11). Local WIC agencies are required to offer participants at least two nutrition education sessions during each 6-month period, in either

the use of the supplemental foods and other nutritious

0-3 months—is 403 fluid ounces of concentrated liquid infant formula (powdered or ready-to-feed formula may be substituted at specified rates). The maximum monthly allowance for food package II—infants 4-12 months—is the same as that for package I with the addition of 96 fluid ounces of reconstituted fruit juice and 24 ounces of infant cereal. an individual or group setting. However, individuals who do not attend the nutrition education activities are not denied the WIC food package.

Referrals to Health Care and Social Services. WIC was designed to operate as an adjunct to health care. Local WIC agencies assist WIC participants in obtaining health care and social services (such as food stamps, Medicaid, immunizations, etc.), either through onsite health services or referrals to other agencies.

Food Delivery Systems

To provide program participants with supplemental food packages, the States may use three types of food delivery systems (or any combination of the three):

- Retail food delivery systems—participants obtain supplemental food by transacting a food instrument (e.g., check or voucher) at authorized retail vendors (e.g., grocery stores).
- Home food delivery systems—supplemental foods are delivered to the participant's home.
- Direct distribution food delivery systems—participants pick up supplemental foods from storage facilities operated by the State or local agency.

The vast majority of WIC participants receive their supplemental foods benefits via retail food delivery systems. WIC State agencies issue food instruments to participants, who then transact the food instruments for specific supplemental foods at authorized retail vendors. The food instrument specifies the type and amount of supplemental foods that can be obtained. Only those vendors who are authorized by the WIC State agency may transact and redeem food instruments. Approximately 48,000 vendors were authorized by WIC State agencies nationwide as of fiscal year 1999. Vendors must provide the supplemental foods at the current price or at less than the current price charged to other consumers.