

Program #40018 - Women, Infants and Children (WIC)

**Program Contact: David Brown** 

**Department: Health Department** 

**Program Offer Type:** Program Offer Stage: As Requested Existing Operating Program

**Related Programs:** 

Program Characteristics: In Target

## **Executive Summary**

The Women, Infants and Children Program (WIC) serves more than 18,000 lower-income pregnant, post-partum and breastfeeding women, infants and children (under age five) per month who have health or nutrition risks. WIC provides individual growth and health assessments, education on nutrition and physical activity. WIC vouchers to purchase nutritious food, breastfeeding education and support and referrals to other preventive health and support services. This offer also includes the Breastfeeding Peer Counseling program.

### **Program Summary**

The WIC Program's mandate is to provide food, nutrition education, growth monitoring and support services to our most vulnerable population – low income pregnant, breastfeeding women, infants and children up to five years of age. In addition to food vouchers, all participants must be certified on the program which includes weighing and measuring every 6 months as well as hemoglobin screenings. Clients are counseled by Nutrition Assistants on the current best practices for diet during pregnancy, lactation, infancy and early childhood. Registered Dietitians counsel higher risk clients.

Poor nutrition during the first three years can affect brain development resulting in lowered academic achievement, reduced immune function, greater incidence of obesity, diabetes, etc. Research demonstrates that families on WIC are in overall better health, have less dental related Medicaid costs, have less underweight infants and demonstrate a lower prevalence of anemia than low-income children not on WIC. Four and five year-olds whose mothers participated in WIC during pregnancy have better vocabulary test scores than those that didn't receive WIC benefits. WIC positively influences the nutrient intakes of children, dramatically improves Healthy Eating index scores for the household, reduces the risk of child abuse or neglect and WIC participation is associated with increased use of preventative care and improved health status of children.

The WIC Program is one of our primary equity strategies in the Department. Culturally specific services and partnerships with minority organizations are valued. The program acts as a core referral center for other services and has been key in getting more families enrolled for Medicaid and insurance.

A relatively new program offered through WIC, the Breastfeeding Peer Counseling Program, provides breastfeeding and prenatal support and maintains a caseload of over 700 prenatal clients. Since its inception, breastfeeding rates in Multnomah County have increased 1% per year.

WIC served over 30,000 clients last year and provided access to other support services including prenatal and other medical care, immunizations, Head Start, housing and day care assistance, social services, etc.

Performance Measures								
Measure Type	Primary Measure	FY13 Actual	FY14 Purchased	FY14 Estimate	FY15 Offer			
Output	Average number of clients served each month	18,874	19,000	18,311	18,500			
Outcome	% of mothers initiating breastfeeding on WIC	91%	89%	92%	92%			
Outcome	Show rate for WIC group nutrition education follow-up	62%	69%	61%	63%			
Outcome	Children at risk of anemia (2-5 year olds)	13.8%	13.0%	13.6%	13.0%			

#### **Performance Measures Descriptions**

Output: Average number of clients served each month measures the average number of clients receiving WIC food vouchers. Outcome: % of mothers who initiated breast feeding after delivery. Outcome: return for education required each six months to continue participation. Outcome: children with lower than recommended hemoglobin levels. This is a new measure for FY13-14. Anemia/low hemoglobin reduces the ability for children to learn.

2/24/201

## **Legal / Contractual Obligation**

The Special Supplemental Nutrition Program for Women, Infants and Children is authorized by Section 17 of the Child Nutrition Act of 1966, 42 U.S.C. 1786, as amended through PL105-394, and the regulations promulgated pursuant thereto, 7 CFR Ch. II, Part 246.

# Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2014	2014	2015	2015
Personnel	\$812,323	\$2,554,141	\$781,338	\$2,648,483
Contractual Services	\$9,755	\$11,532	\$3,950	\$17,675
Materials & Supplies	\$54,225	\$20,055	\$63,336	\$33,989
Internal Services	\$409,243	\$555,103	\$624,916	\$374,075
Total GF/non-GF	\$1,285,546	\$3,140,831	\$1,473,540	\$3,074,222
Program Total:	\$4,426,377		\$4,547,762	
Program FTE	8.20	33.06	6.71	34.05

Program Revenues								
Indirect for Dept. Admin	\$201,409	\$0	\$209,389	\$0				
Intergovernmental	\$0	\$3,140,831	\$0	\$3,074,222				
Total Revenue	\$201,409	\$3,140,831	\$209,389	\$3,074,222				

### **Explanation of Revenues**

The Women, Infants and Children program's revenue is federal funds included in the intergovernmental revenue agreement between Multnomah County as the Local Public Health Authority (LPHA) and the State of Oregon Public Health Services. WIC is also funded with county general fund. The WIC Program has seen a significant increase in pregnant women requiring WIC services. County general funds assist the WIC Program in meeting the Federal/State funding requirement of scheduling new pregnant women within 10 days of application to the program.

State LPHA: \$3,074,222

County General Fund: \$1,473,540

#### Significant Program Changes

Last Year this program was: 40018 Women, Infants and Children (WIC)