

# SAN FRANCISCO WOMEN, INFANT AND CHILDREN PROGRAM (WIC)

San Francisco Food Security  
Taskforce  
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# WOMEN, INFANTS, AND CHILDREN (WIC)

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides Federal grants to States for supplemental foods, health care referrals, and nutrition education for low income

- Pregnant,
- Breastfeeding, and non-breastfeeding postpartum women,
- Infants and
- Children up to age five who are found to be at nutritional risk.

WIC assists families in buying supplemental foods from WIC- authorized vendors and offers nutrition education, growth monitoring, and access to health care.



# WOMEN, INFANTS, AND CHILDREN (WIC)

WIC participation has been linked with:

- Fewer premature babies
- Higher birthweight babies
- Healthier diets
- Improved rates of regular medical care



# CHILD NUTRITION STARTS IN THE WOMB

- Adequate prenatal nutrition is vital to ensure normal development of the infant and also for the well-being of the mother.
- Pregnant women have additional nutritional demands, and food insecurity makes meeting these demands difficult. Mean intakes of women from food-insufficient households were below two-thirds of the recommended daily allowance for calcium, iron, vitamin E, magnesium, and zinc.
- Food insecurity has been associated with poor quality dietary intake
- Women living in food insecure households in the US are more likely to be overweight.
- Together, poor nutrition and excess weight/weight gain increase the risk for pregnancy complications such as gestational diabetes, preeclampsia and fetal macrosomia, which may lead to worse birth outcomes including shorter gestations and lower birth weights.



# FOOD INSECURITY AND MENTAL HEALTH



- Food insecurity has been associated with depression and anxiety among mothers.
- Pregnant women experiencing depressive symptoms are at risk for dysfunctional placentation and intrauterine growth restriction, which affect birth outcomes such as preterm birth.
- The incidence of children exhibiting problem behavior also increases with the severity of household food insecurity

# BREASTFEEDING AND FOOD SECURITY



- Infant's first food- Breastfeeding can ensure that there is enough food to maintain a healthy and productive life today and in the future.
- The purchase of infant formula can use up a significant portion of the household income and therefore threatens the food security of the entire family.
- The AAP recommends exclusive breastfeeding until at least the baby is 1 year old.
- In 2014-2015 the SF WIC program exclusive breastfeeding rates at 2 months, 4 months, 6 months and 11 months were 21.7%, 17.2%, 15.8% and 14.5% respectively. All of these rates were lower than the state average.
- For Non-Hispanic Asian mothers the rates were 10.3%, 7.8%, 6.5% and 5.9% respectively.
- The Healthy People 2020 goals for exclusive breastfeeding are 46.2% at 3 months, 25.5% at 6 months.

# IMPACT OF WIC ON FOOD INSECURITY

- Food-insecure women who enrolled in WIC in the first or second versus the third trimester were significantly less likely to be food insecure postpartum.
- Women who participated in WIC after pregnancy had higher hemoglobin levels and lower risk of maternal obesity at the beginning of their subsequent pregnancy
- For food insecure children at initial WIC visit, each additional WIC visit was associated with decreased risk of food insecurity at last WIC visit.
- The severity of malnutrition among women, infants and children may be down since the early 1970's but more people in the WIC age are struggling economically than when WIC started.



# IMPACT OF WIC

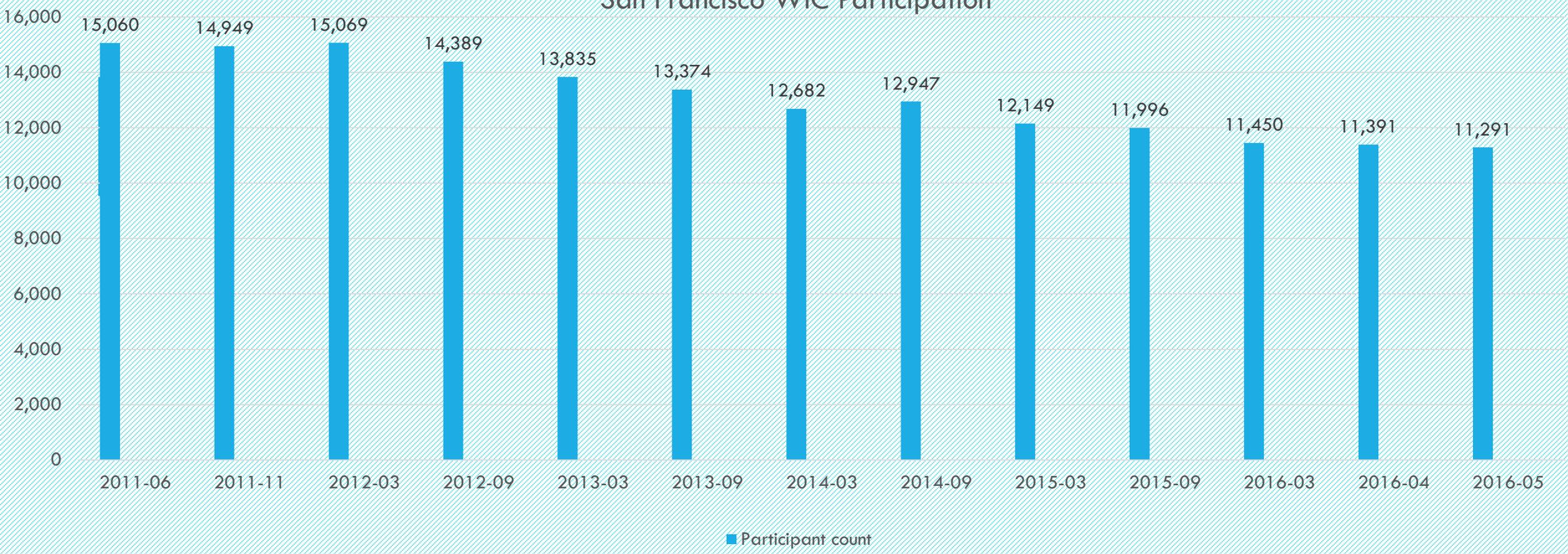
- Children who continued participating in WIC are considered “well children” i.e in excellent or good health, no developmental delays, no hospitalizations, healthy weight for their age and were less frequently overweight than children who formerly received WIC.

## Impact on local economy-

- In 2015 WIC checks redeemed brought in a revenue of \$8,945,961 into the local economy.



# San Francisco WIC Participation



SF WIC program has experienced a participation drop of ~25% since June 2011



# PARTICIPATION GAP AMONG WIC PARTICIPANTS- JANUARY 2016

Category	Enrolled in WIC	Enrolled in Medi-Cal	% served
Children 5 and under	8,547	13,956	61%
Pregnant women	993	1,093	90.85%
0 years	2,295	2,333	98.37%
1 Year	1,781	2,979	60%
2 years	1,531	2,813	54.42%
3 years	1,547	3,033	51%
4 years	1,393	2,798	49.78%

# BARRIERS TO WIC PARTICIPATION

- Lack of knowledge about the program- Eligibility requirements, length of participation
- Lack of easy access
- Program too restrictive
- Poor shopping experience