

Lead Agency: Health Department

Program Contact: David Brown

Program Offer Type: Existing Operating

Related Programs:

Program Characteristics: In Target, Climate Action Plan

Executive Summary

The Women, Infants and Children Program (WIC) serves lower-income pregnant, post-partum and breastfeeding women, infants and children under age five who have health or nutrition risks. WIC sees every participant at least four times per year to provide individual growth and health assessments, education on nutrition and physical activity, nutritious foods purchased with WIC vouchers, breastfeeding education and support, and referrals to other preventive health and support services.

Program Description

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 registered dietitians and Nutrition Assistants on the current best practices for diet during pregnancy, lactation, infancy and early childhood. For high risk pregnancies, children with special needs and breastfeeding complications, individual counseling is provided by registered dietitians. In between certifications, clients attend additional nutrition education classes on specific topics relevant to their individual needs. In all, over 90 nutrition education classes are taught each month. 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.

WIC provides access to other support services include prenatal and other medical care, immunizations, Head Start, housing and day care assistance, social services, etc. Children whose mothers participated in WIC during pregnancy had better vocabulary test scores than those that did not participate.

The program leverages federal funds to pay for almost 78% of costs. WIC served over 30,000 clients last year. WIC provides referral services to other valuable community programs. It is a hub that connects families with needed services for easy access and seamless service.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY11-12)	Current Year Purchased (FY12-13)	Current Year Estimate (FY12-13)	Next Year Offer (FY13-14)
Output	Average number of clients served each month	19,400	19,500	19,511	19,000
Outcome	% of mothers initiating breastfeeding on WIC	90.1%	88.1%	90.0%	89.0%
Outcome	Show rate for WIC nutrition education follow-up	70.0%	66.0%	68.0%	69.0%
Outcome	Children at risk of anemia (2-5 year olds)	0.0%	13.6%	13.6%	13.0%

Performance Measure - Description

 **Measure Changed**

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 - Data Source: WIC TWIST system. Outcome: return for education required each six months to continue participation - Data Source: WIC TWIST system. Outcome: children with lower than recommended hemoglobin levels - Data source: WIC Performance Measures, Oregon health Authority. This is a new measure for FY13-14. Anemia/low hemoglobin reduces the ability for children to learn.

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	2013	2013	2014	2014
Personnel	\$930,336	\$2,485,888	\$812,323	\$2,554,141
Contracts	\$0	\$0	\$9,755	\$11,532
Materials & Supplies	\$32,131	\$54,012	\$54,225	\$20,055
Internal Services	\$275,939	\$600,931	\$409,243	\$555,103
Total GF/non-GF:	\$1,238,406	\$3,140,831	\$1,285,546	\$3,140,831
Program Total:	\$4,379,237		\$4,426,377	
Program FTE	7.69	32.86	8.20	33.06
Program Revenues				
Indirect for dep't Admin	\$194,806	\$0	\$201,409	\$0
Intergovernmental	\$0	\$3,140,831	\$0	\$3,140,831
Total Revenue:	\$194,806	\$3,140,831	\$201,409	\$3,140,831

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.

Fed/State WIC grant: \$2,919,032

Fed/State WIC Breastfeeding/Peer Counselors grant: \$221,799

County General Fund: \$1,285,546

Significant Program Changes

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

The changes in FTE and personnel costs are an increase to the FTE of two part-time Community Health Specialist 1 positions in the Breastfeeding Peer Counselor Program due to the high volume of clients.