

Women and Children Participating in WIC

DEFINITION

Women and children participating in WIC is the percentage of eligible women, infants, and children enrolled in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC).

SIGNIFICANCE

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a federally funded preventive program that provides participants with nutritious food, nutrition education, and referrals to health care and social services. WIC serves pregnant, postpartum, and breastfeeding women, infants, and children under age five living in low-income households. Any individual who participates in SNAP, RIte Care, Medicaid, or Rhode Island Works is automatically income-eligible for WIC. Participants also must have a specified nutritional risk to qualify. This includes medically-based risks such as anemia or high-risk pregnancy, or dietary risks such as inadequate nutrition.^{1,2}

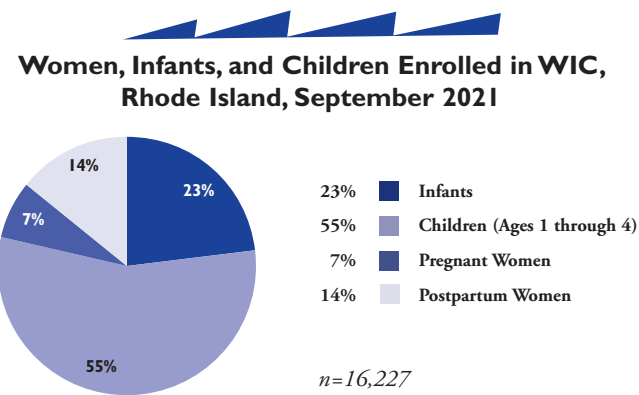
WIC improves the quality of participants' diets and promotes healthy eating habits. Studies have shown that WIC participants access more nutritious foods, including more produce, whole grains, and low-fat dairy. WIC participation also may decrease

household food insecurity (families that do not have regular access to enough food for an active, healthy life). Food insecurity in early childhood can lead to impaired cognitive, behavioral, and psychosocial development, and can limit academic achievement. Pregnant women also have special nutritional needs that influence pregnancy outcomes and the health of their children.^{3,4,5}

WIC participation has been shown to reduce infant mortality, improve birth outcomes (including reducing the likelihood of low birthweight and prematurity), improve cognitive development, reduce risk of child neglect and abuse, increase child immunization rates, and increase access to preventive medical care.^{6,7}

Revisions to the WIC food package that were implemented in 2009 increased access to a wider variety of nutritious foods, increased state flexibility to provide culturally appropriate foods, and strengthened breastfeeding support.^{8,9} In Rhode Island in Federal Fiscal Year (FFY) 2021, 32% of infants participating in WIC were fully or partially breastfed and 68% of infants were formula fed.¹⁰

In 2020, WIC began providing an EBT (electronic benefit transfer) card called eWIC to all Rhode Island users.¹¹



Source: Rhode Island Department of Health, WIC Program, September 2021.

- ◆ **Infants and children ages one through four comprised more than three-quarters (78%) of the population being served by WIC in September 2021 in Rhode Island. Women accounted for over one-fifth (7% pregnant and 14% postpartum) of the population being served.**¹²
- ◆ **In September 2021, 3% of WIC participants in Rhode Island were Asian, 17% were Black, 2% were Native American, 66% were white, and 11% identified as another race or more than one race. Fifty-eight percent of WIC participants identified as Hispanic. Hispanic women and children may be included in any racial category.**¹³
- ◆ **The four core cities had participation rates at or exceeding the statewide enrollment rate of 45% in June 2021 – Central Falls (54%), Providence (54%), Woonsocket (53%), and Pawtucket (45%).**¹⁴
- ◆ **WIC is not an entitlement program. Congress determines funding annually, and WIC is not funded at a level that is sufficient to serve all eligible women and children.**¹⁵ Rhode Island received \$17.1 million in federal WIC funding during FFY 2021, slightly higher than the \$16.9 million in FFY 2020.¹⁶
- ◆ **The WIC Farmers' Market Nutrition Program (FMNP) improves participants' intake of fresh fruits and vegetables by enabling participants to purchase produce at authorized local farmers' markets using WIC benefits.**¹⁷ In Rhode Island, 1,015 WIC participants purchased fresh produce at 26 farmers' markets and 14 farm stands through the FMNP in FFY 2021.¹⁸

Table 13. Women, Infants, and Children Enrolled in WIC, June 2021

| CITY/TOWN | ESTIMATED NUMBER ELIGIBLE | NUMBER ENROLLED | % OF ELIGIBLE ENROLLED |
|--------------------|---------------------------|-----------------|------------------------|
| Barrington | 163 | 39 | 24% |
| Bristol | 349 | 125 | 36% |
| Burrillville | 393 | 83 | 21% |
| Central Falls | 1,956 | 1,054 | 54% |
| Charlestown | 141 | 46 | 33% |
| Coventry | 802 | 262 | 33% |
| Cranston | 2,722 | 1,244 | 46% |
| Cumberland | 698 | 210 | 30% |
| East Greenwich | 171 | 36 | 21% |
| East Providence | 1,493 | 603 | 40% |
| Exeter | 135 | 33 | 24% |
| Foster | 101 | 22 | 22% |
| Glocester | 173 | 30 | 17% |
| Hopkinton | 197 | 121 | 61% |
| Jamestown | 37 | 6 | 16% |
| Johnston | 961 | 414 | 43% |
| Lincoln | 519 | 195 | 38% |
| Little Compton | 51 | 11 | 22% |
| Middletown | 384 | 151 | 39% |
| Narragansett | 135 | 22 | 16% |
| New Shoreham | 28 | 0 | 0% |
| Newport | 728 | 397 | 55% |
| North Kingstown | 455 | 125 | 27% |
| North Providence | 1,137 | 362 | 32% |
| North Smithfield | 226 | 116 | 51% |
| Pawtucket | 4,491 | 2,031 | 45% |
| Portsmouth | 233 | 74 | 32% |
| Providence | 13,402 | 7,242 | 54% |
| Richmond | 147 | 7 | 5% |
| Scituate | 183 | 30 | 16% |
| Smithfield | 369 | 115 | 31% |
| South Kingstown | 389 | 105 | 27% |
| Tiverton | 286 | 95 | 33% |
| Warren | 299 | 96 | 32% |
| Warwick | 1,990 | 672 | 34% |
| West Greenwich | 94 | 37 | 39% |
| West Warwick | 1,267 | 436 | 34% |
| Westerly | 576 | 161 | 28% |
| Woonsocket | 2,986 | 1,571 | 53% |
| Four Core Cities | 22,835 | 11,898 | 52% |
| Remainder of State | 18,032 | 6,481 | 36% |
| Rhode Island | 40,867 | 18,379 | 45% |

Stigma Associated With Participation in WIC

◆ Individuals may feel stigma associated with participating in WIC and be less likely to use their benefits. Nationally, many participants express frustration that stores do not have signs indicating which items are WIC-eligible and feel stigmatized by store employees and other customers during checkout. Granting flexibility for the quantity of items purchased, improving signage for eligible products, allowing WIC items to be rung up along with SNAP and other food purchases, and allowing self-checkout for WIC items may help to reduce stigma.^{19,20}

COVID-19 and WIC Participation

◆ Waivers granted by the federal government in response to the COVID-19 pandemic provided flexibility in enrollment, benefit issuance and redemption. Nationally, WIC participation increased 2% in February 2021 compared to February 2020 (pre-pandemic). Changes in participation varied widely and 24 states had declines in participation, including in Rhode Island, which had a 3% decline in the number of participants over this period. Community outreach and coordination with other program operators can help increase access to WIC.²¹

Source of Data for Table/Methodology

Estimated Number Eligible: Rhode Island Executive Office of Health and Human Services, Medicaid Management Information System, June 30, 2021.

Number Enrolled: Rhode Island Department of Health, WIC Program, June 2021.

Note: WIC participation rates in this Factbook are based on a single date in June. Factbooks prior to 2020 used a September 30 reference date, with the exception of the 2011 Factbook, which used a July reference date. Additionally, since 2007, the “estimated number eligible” is based on calculations done by the Rhode Island Department of Health to determine the number of pregnant and postpartum women, infants, and children under age five who live in families with an income less than 185% of the federal poverty level. In previous years, the “estimated number eligible” was based on 2000 Census data (2005 and 2006 Factbooks) and 1990 Census data (all Factbooks prior to 2005).

Core cities are Central Falls, Pawtucket, Providence, and Woonsocket.

References

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