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

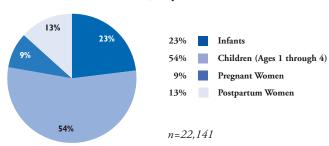
The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a federally-funded preventive program that provides participants with nutritious food, nutrition education, and access to health care and social services. WIC serves pregnant, postpartum, and breastfeeding women, infants, and children under five years of age living in households with incomes at or below 185% of the federal poverty level (\$37,777 per year for a family of three in 2017). Any individual who participates in SNAP (formerly the Food Stamp Program), RIte Care, Medicaid, or Rhode Island Works is automatically income-eligible for WIC. Participants must also have a specified nutritional risk, such as anemia, high-risk pregnancy, or abnormal growth, or be in need of supplemental food to qualify.^{1,2}

Compared to children who receive WIC benefits, young children who are eligible for WIC but not participating are more likely to be in poor health, at risk for developmental delays, underweight, short for their age, and/or experience food insecurity (i.e., live in families that do not always have enough food for an active healthy life).³ Food insecurity in early childhood can lead to impaired cognitive, behavioral, and psychosocial development, and can limit academic achievement.⁴ Pregnant women also have special nutritional needs that influence pregnancy outcomes and the health of their children.⁵

WIC participation has been shown to reduce infant mortality, improve birth outcomes (including reducing the likelihood of low birthweight and prematurity), enhance maternal and child dietary intake, reduce risk of child abuse and neglect, improve child growth rates, boost cognitive development, and increase the likelihood of having a regular source of medical care.^{6,7}

Revisions made in 2014 to the WIC food package have increased access to a wider variety of nutritious foods and strengthened breastfeeding support.⁸ WIC consistently promotes breastfeeding as the optimal method of infant feeding.⁹ In Rhode Island in Federal Fiscal Year (FFY) 2017, 78% of mothers participating in WIC initiated breastfeeding. Seventeen percent of infants participating in WIC were breastfed at three months of age, and 14% were breastfed at six months of age.¹⁰

Women, Infants, and Children Enrolled in WIC, Rhode Island, September 2017



Source: Rhode Island Department of Health, WIC Program, September 2017. Percentages may not sum to 100% due to rounding.

- ♦ Infants and children ages one through four comprised more than three-quarters (77%) of the population being served by WIC in September 2017 in Rhode Island. Women accounted for over one-fifth (9% pregnant and 13% postpartum) of the population being served.¹¹
- ♦ In September 2017, 70% of WIC participants in Rhode Island were White, 16% were Black or African-American, 3% were Asian, and 11% identified as other races or more than one race. Fifty-one percent of WIC participants identified as Hispanic or Latino. Hispanics are included in the racial groups above.¹²
- ♦ Three of the four core cities Central Falls (60%), Providence (60%), and Woonsocket (59%) had WIC participation rates exceeding the statewide enrollment rate of 50% in 2017. The enrollment rate for Pawtucket was the same as the statewide rate of 50%.¹³
- ♦ 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.¹⁴ Rhode Island received \$22.9 million in federal WIC funding during FFY 2017, which was less than the \$23.3 million in funding for FFY 2016.¹⁵
- ◆ 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.¹6 In Rhode Island, 31 farmers' markets provided fresh produce to 12,371 WIC participants through the FMNP in FFY 2017.¹7

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Table 13. Women, Infants, and Children Enrolled in WIC, September 2017

CITY/TOWN	ESTIMATED NUMBER ELIGIBLE	NUMBER ENROLLED	% OF ELIGIBLE ENROLLED
Barrington	128	34	27%
Bristol	420	176	42%
Burrillville	437	155	35%
Central Falls	2,036	1,227	60%
Charlestown	161	63	39%
Coventry	773	365	47%
Cranston	2,766	1,447	52%
Cumberland	662	222	34%
East Greenwich	180	46	26%
East Providence	1,616	696	43%
Exeter	125	40	32%
Foster	106	35	33%
Glocester	178	45	25%
Hopkinton	219	51	23%
Jamestown	35	8	23%
Johnston	952	435	46%
Lincoln	536	130	24%
Little Compton	42	10	24%
Middletown	397	173	44%
Narragansett	157	47	30%
New Shoreham	39	5	13%
Newport	883	437	49%
North Kingstown	611	195	32%
North Providence	1,091	477	44%
North Smithfield	214	71	33%
Pawtucket	5,051	2,532	50%
Portsmouth	252	77	31%
Providence	14,409	8,673	60%
Richmond	88	75	85%
Scituate	186	43	23%
Smithfield	297	92	31%
South Kingstown	527	162	31%
Tiverton	342	136	40%
Warren	310	118	38%
Warwick	2,215	868	39%
West Greenwich	125	33	26%
West Warwick	1,413	625	44%
Westerly	729	242	33%
Woonsocket	3,188	1,875	59%
Four Core Cities	24,684	14,307	58%
Remainder of State	19,212	7,834	41%
Rhode Island	43,896	22,141	50%

Source of Data for Table/Methodology

Rhode Island Department of Health, WIC Program, September 2017.

Note: WIC participation rates in this Factbook can be compared to all Factbooks, with the exception of the 2011 Factbook, which used a July rather than September 30 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

- ¹ National Conference of State Legislatures. (2014). The Special Supplemental Nutrition Program for Women, Infants, and Children factsheet. Retrieved January 23, 2018, from www.ncsl.org
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- ³ Children's HealthWatch policy action brief: Federal programs that protect young children's health. (2011). Boston, MA: Children's HealthWatch.
- 4 Food insecurity. (2016). Washington, DC: Child Trends.
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- ⁷ Fortson, B. L., Klevens, J., Merrick, M. T., Gilbert, L. K., & Alexander, S. P. (2016). Preventing child abuse and neglect: A technical package for policy, norm, and programmatic activities. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

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