

# WIC Research Update

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# Program Evaluation supports evidence-based decision-making.

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FNS conducts Program Evaluation, and is part of a scientific community that looks critically at the program.

Sound scientific research supports policy decisions about program design, including outreach, program integrity, nutrition education, and the food packages.



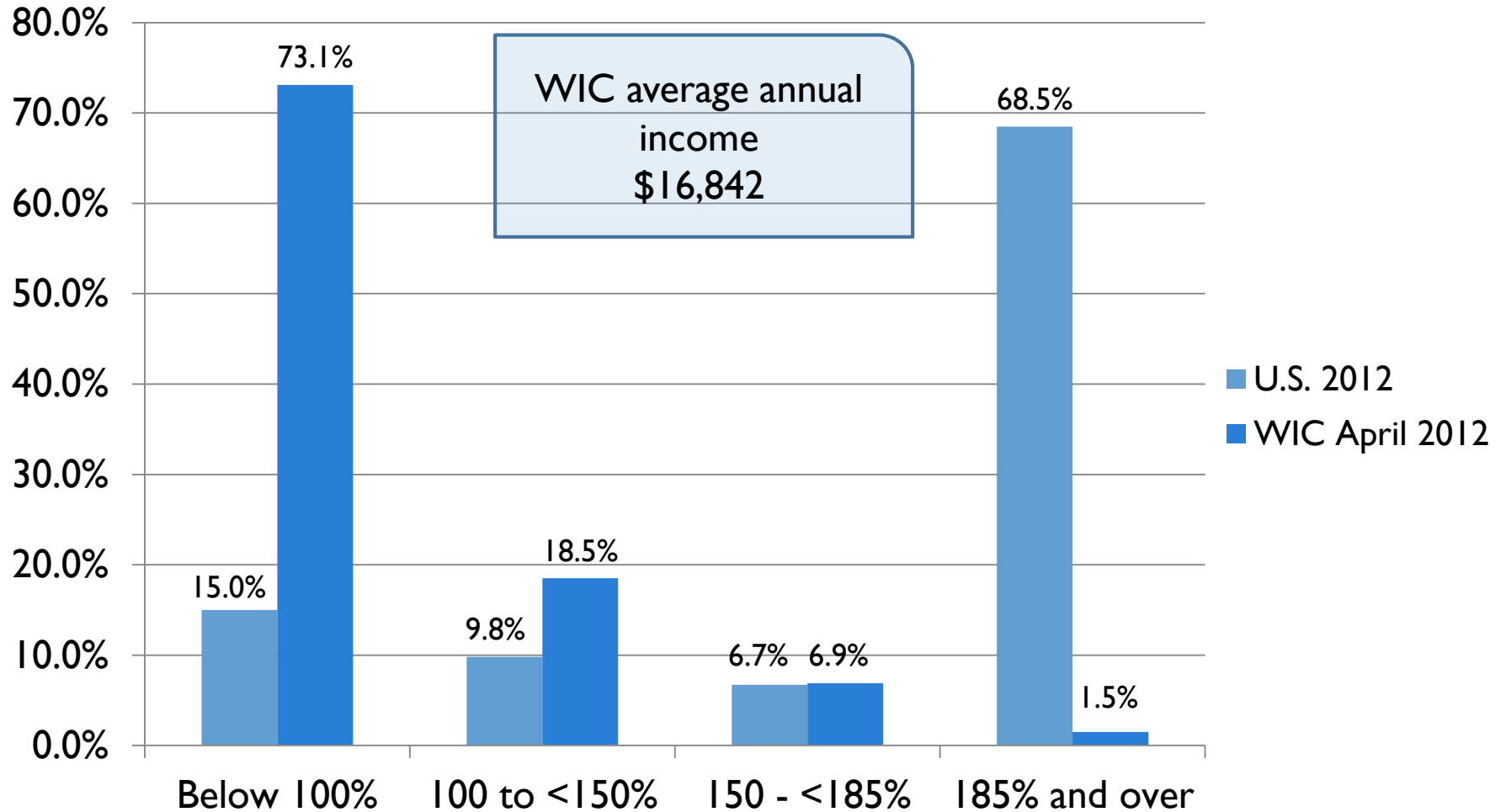
# Program Evaluation helps inform our understanding of our participants:

*How well are we reaching our target groups?*

	<b>Eligible (mil)</b>	<b>Participating (mil)</b>	<b>Coverage Rate</b>
Infants	2.4	2.0	<b>84.4%</b>
Children	9.1	4.5	<b>49.8%</b>
Pregnant Women	1.2	.839	<b>68.4%</b>
Breastfeeding Women	.826	.593	<b>77.8%</b>
Non- breastfeeding Women	.694	.589	<b>84.9%</b>
<b>Total</b>	<b>14.2</b>	<b>8.5</b>	<b>60.2%</b>

# Program Evaluation helps us understand our participants and our outreach efforts:

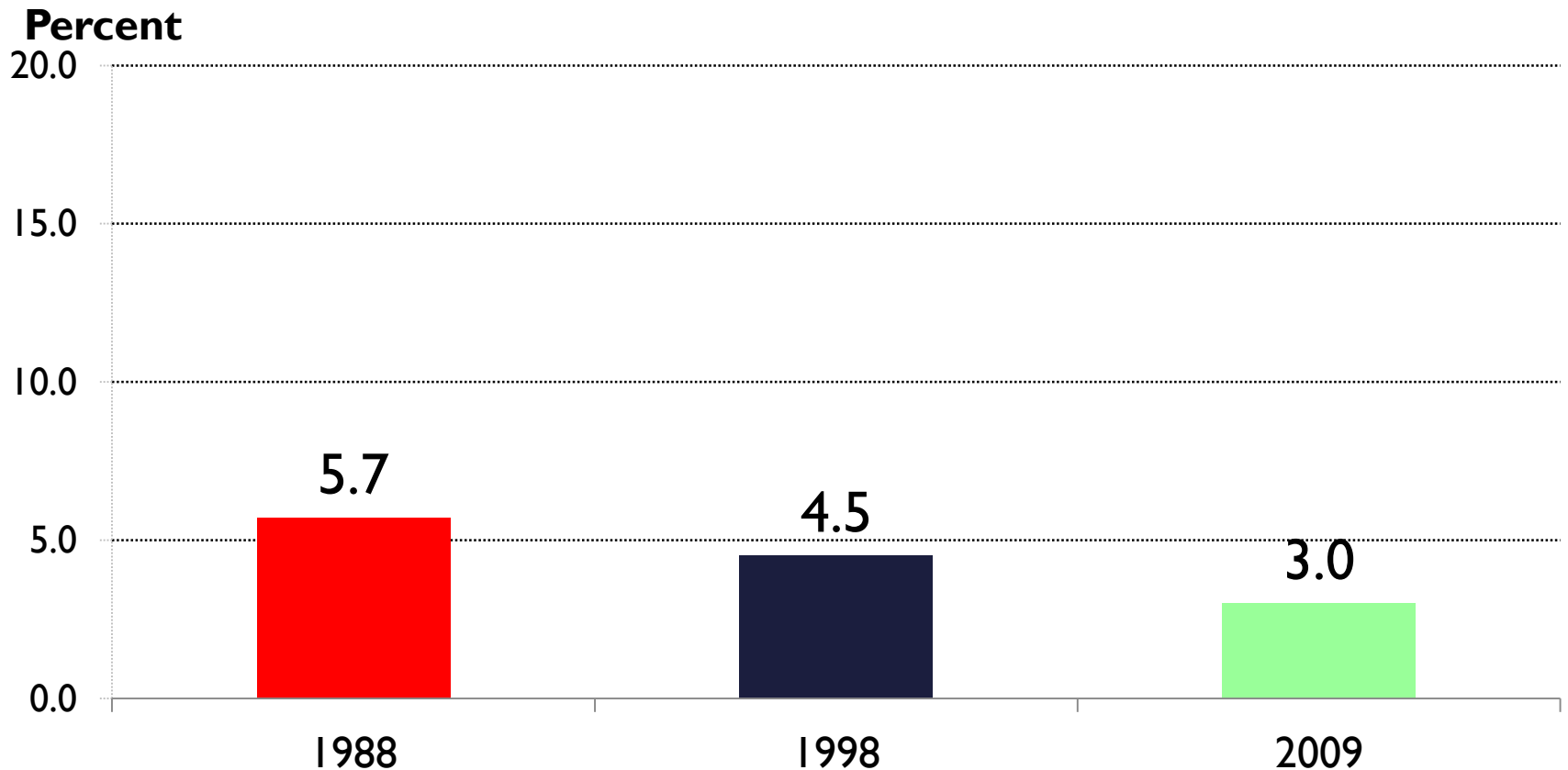
*Over 70% of WIC participants are below poverty at certification.*



\* Source: WIC PC2012 Exhibit III.6, p.45, *among those reporting*

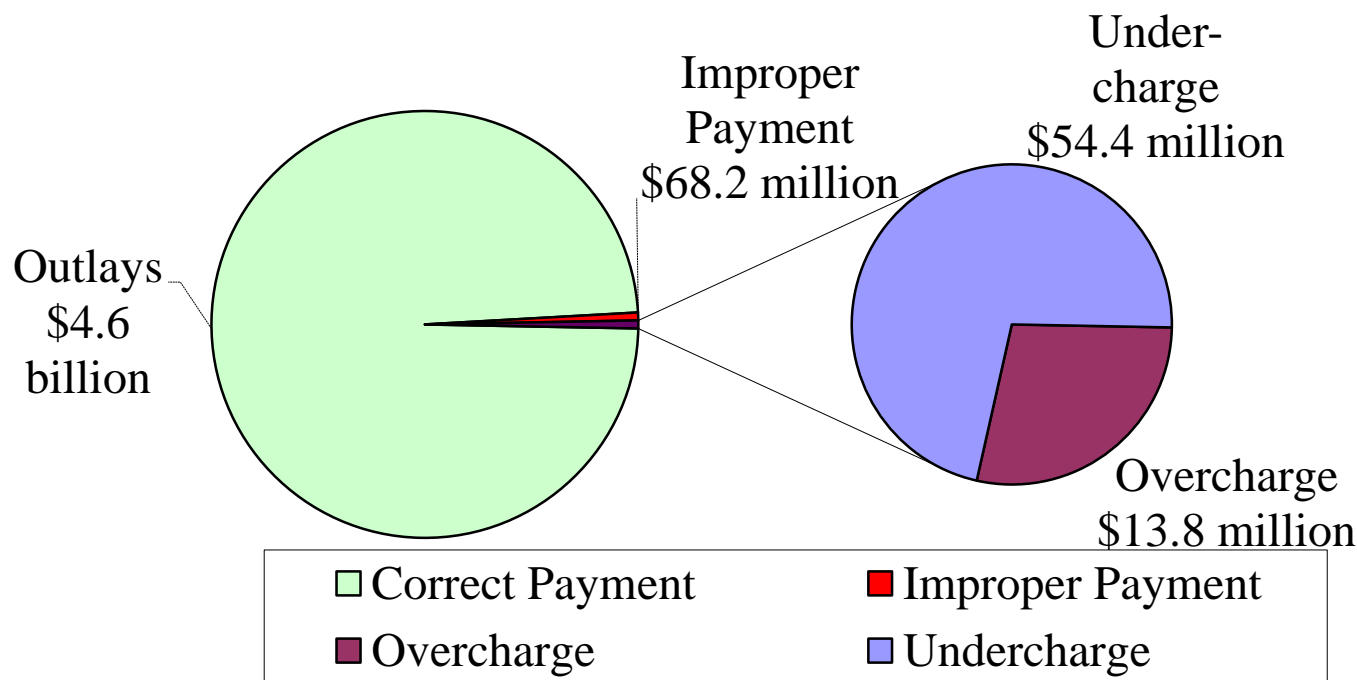
# Program Evaluation helps us understand program operations:

We have cut our *Certification Case Error rate* by almost half, to 3.0%.



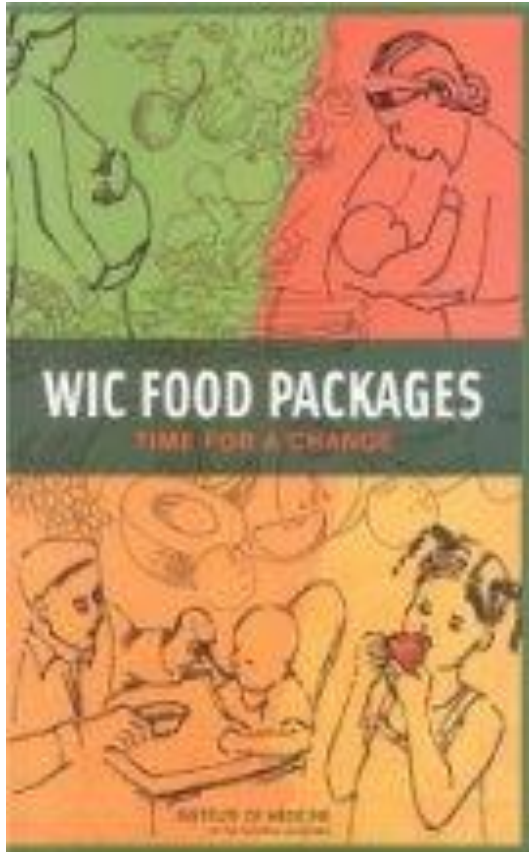
# Program Evaluation helps us understand program integrity.

- \* Improper Payments in 2013 were 1.47% of outlays
- \* Undercharges exceeded overcharges



# Research informs the WIC food package.

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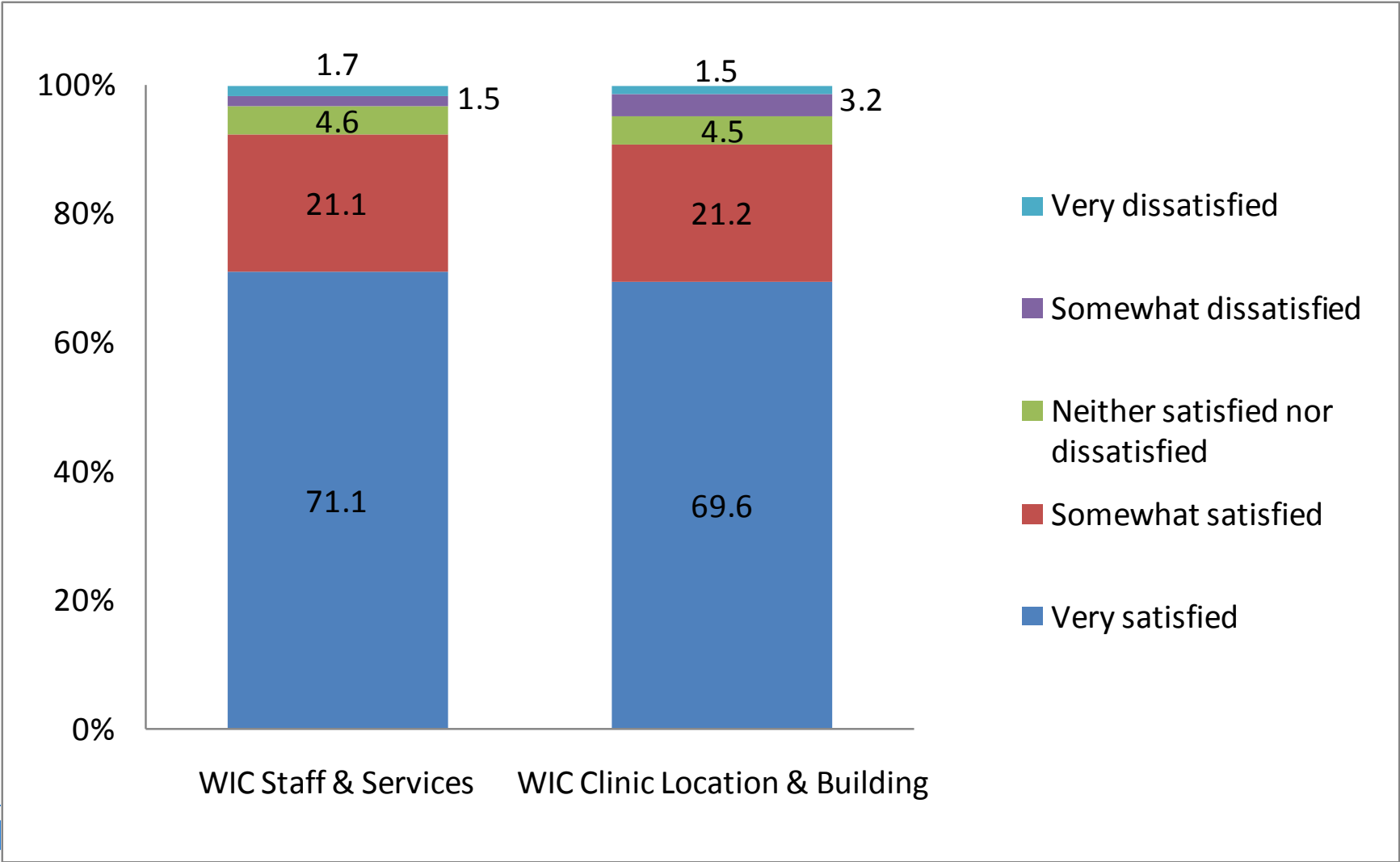


- ▶ The Institute of Medicine reviewed the package in 2005 and is now conducting the next review.
- ▶ The WIC food package changes were informed by
  - ▶ science,
  - ▶ scientific experts,
  - ▶ policy experts, and
  - ▶ public input.



# Program Evaluation tells us how well we are meeting participants' needs.

*Participant satisfaction is high.*

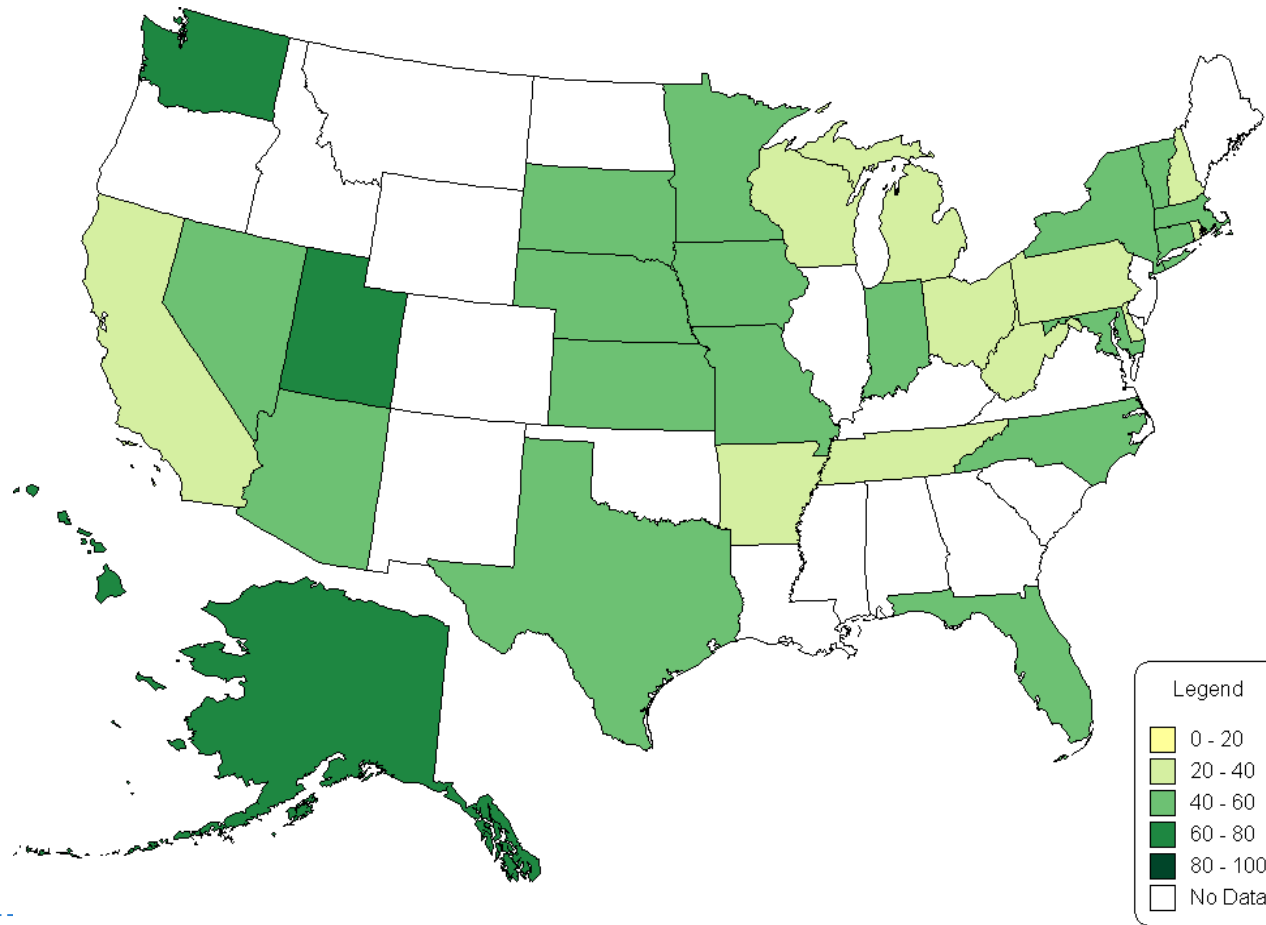




# Program Evaluation helps us track important program goals:

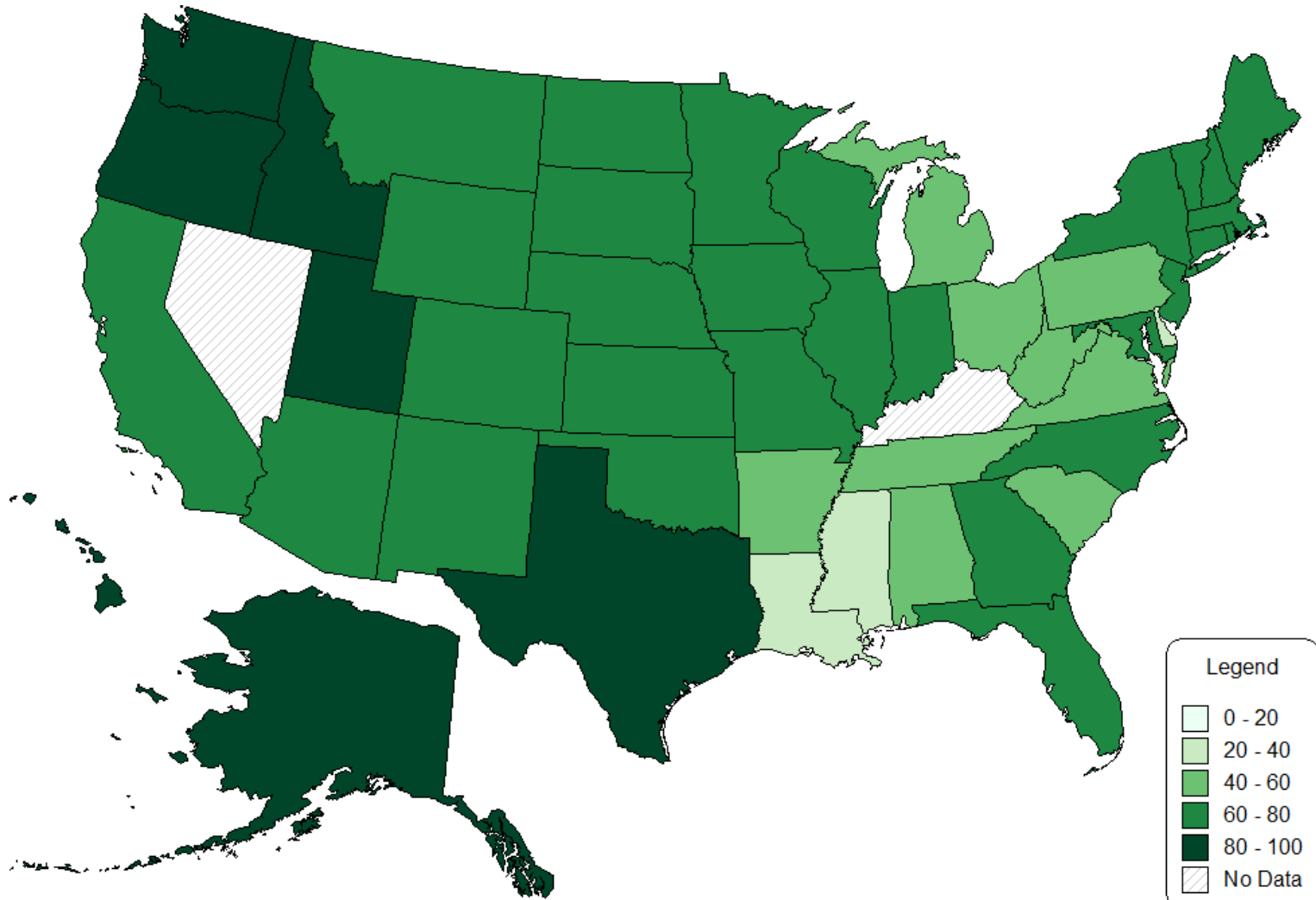
## *WIC Breastfeeding Initiation Rates 1998*

*41.5% (7-11mo. Reports by 63 State Agencies)*



# WIC Breastfeeding Initiation Rates 2012

63.9% (7-11mo. Reports)



# FNS conducts Program Evaluation on all aspects of WIC.

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- ▶ Nutrition and Breastfeeding
- ▶ Health impacts
- ▶ Program Management and Costs
- ▶ Program Integrity



# Health Impacts

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- ▶ **WIC Medicaid II Study**
  - ▶ Savings in health care costs from \$1.77 to \$3.13\*
- ▶ **Infant Toddler Feeding Practices Study**

\*The Savings in Medicaid Costs for Newborns and Their Mothers from Prenatal Participation in the WIC Program, prepared for FNS by MPR, October 1, 1990.

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# WIC Program Management and Cost

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- ▶ WIC Participant Characteristics (PC)
- ▶ Eligibles Estimates, National and State
- ▶ WIC Nutrition Services and Administration Costs (NSA)
- ▶ FY 2010 Food Cost Report
- ▶ IOM Food Package Review



# WIC Nutrition Education and Breastfeeding

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- ▶ Infant Toddler Feeding Practices Study – 2
- ▶ Baylor Center for Nutrition Education Innovations
- ▶ Nutrition Education Study
- ▶ Breastfeeding Policy Inventory
- ▶ Breastfeeding Peer Counseling Survey
- ▶ Periconceptual Research Grants



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**Thank you!**

**Questions?**

## *Program Evaluation Highlight:*

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# **WIC Breastfeeding Policy Inventory**

## **Background**

- ▶ Breastfeeding is recommended as a public health strategy
- ▶ SES-related disparities in breastfeeding rates
- ▶ States' breastfeeding rates vary
- ▶ Variation in how States and Local Agencies track breastfeeding measures



# Policy Background

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- ▶ WIC food package revisions:
  - ▶ fully breastfeeding,
  - ▶ partially breastfeeding, and
  - ▶ fully formula feeding
- ▶ Healthy, Hunger-Free Kids Act of 2010 required USDA to publish annual breastfeeding performance measures

# WIC Breastfeeding Policy Inventory (BPI)

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- ▶ Online census of State (SAs) and local agencies (LAs)
  - ▶ 90 WIC SAs (including ITOs & Territories)
  - ▶ 1,800 local WIC agencies
- ▶ Three Areas:
  - ▶ Policy and Practices
  - ▶ Breastfeeding Measures
  - ▶ Data Collection Tool

# Part I: Breastfeeding Policy and Practices

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- ▶ Staffing and Training
- ▶ Clinic Environment
- ▶ Outreach Activities
- ▶ Breastfeeding Aids
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# States and Local Agencies have *full-time* staff leading breastfeeding efforts.

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	State Agencies	Local Agencies
Policies Guided by Breastfeeding Advisory Committee	61.5%	n.a.
	Mean	Mean
Breastfeeding Coordinator	1.0	1.3
Peer Counseling Program Coordinator	0.8	0.7
Mean Number of Peer Counselor Staff	6.5	3.8



Over 92% of WIC Participants are Served in Local Agencies where at least one staff member has a breastfeeding credential.

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*Nearly three-quarters are served in clinics with at least one IBCLC-certified staff member.*

	% Participants in LAs w/ FTE > median
Breastfeeding Coordinator	72.7
Peer Counseling Program Coordinator	63.7
Number of Peer Counselor Staff	66.7
Breastfeeding Credential Held by at Least One Member of Local Agency Staff	
* International Board Certified Lactation Consultant	71.4
* Certified Lactation Educator	39.6
* Certified Lactation Counselor	59.5
* Other certification in lactation management	14.8
Certified Lactation Specialist	6.0
None of these	7.6

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# State and Local Agencies Provide Extensive Breastfeeding Promotion Training

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	State Agencies	Local Agencies
<b>New-Hire Breastfeeding Promotion Training</b>		
Clerical or support staff	65.7	73.5
Competent Professional Authorities	85.6	82.2
Peer counselors	97.2	97.9
WIC designated breastfeeding experts	55.4	68.0
Breastfeeding coordinators	91.7	89.1
Nutritionists	89.4	87.6
All of the above applicable staff except WIC designated breastfeeding experts	73.9	58.3
<b>Developer of Training</b>		
A local WIC agency	n.a.	29.5
A State WIC agency	68.2	64.6
USDA Food and Nutrition Service	86.9	67.2
Breastfeeding support organization	7.1	5.8
Education or public health institution	2.6	4.9
Vendor	6.9	1.7

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# Staff receive ongoing training

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	State Agencies (%)	Local Agencies (%)
<b>Staff Who Receive Ongoing BF Promotion Training</b>		
Clerical or support staff	58.2	59.5
Competent Professional Authorities	83.1	77.7
Peer counselors	100.0	97.3
WIC designated breastfeeding experts	52.9	67.1
Breastfeeding coordinators	94.2	92.8
Nutritionists	90.8	84.9
None of these	2.4	1.2
<b>Staff Are Trained on Using Food Packages to Promote BF</b>	92.7	96.4
<b>Staff Are Trained on Using Food Packages to Promote Exclusive BF</b>	91.8	91.2

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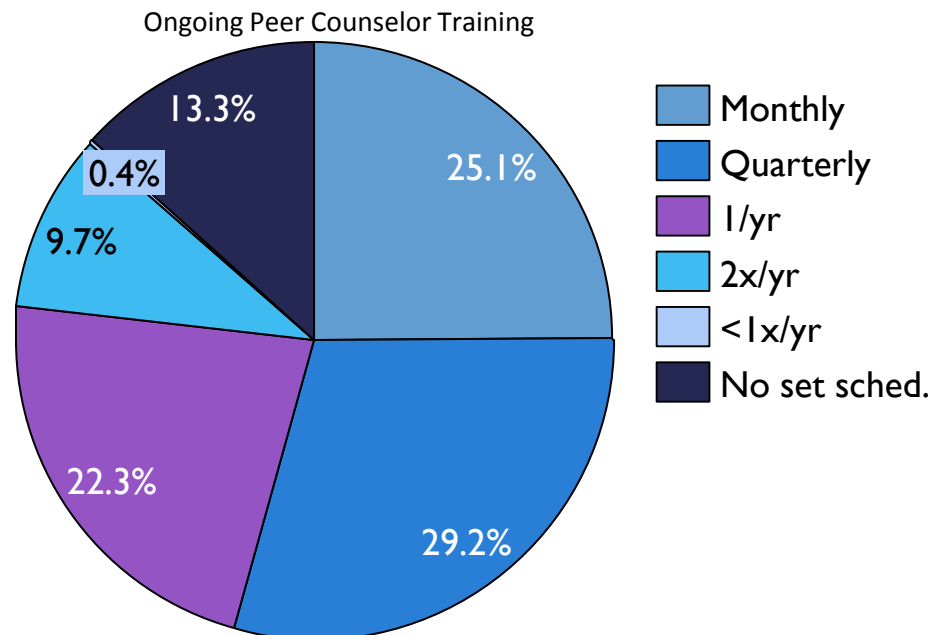




# Training is occurring regularly.

## ▶ Peer Counselors

- ▶ 25 percent of LAs offer monthly training
  - ▶ 29 percent offer it quarterly
  - ▶ 22 percent offer annual training
- About one-quarter of LAs offer training quarterly to WIC Designated Breastfeeding Experts and Breastfeeding Coordinators.
  - About half of LAs offer training for nutritionists once or twice per year.



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# WIC Agencies are working to treat breastfeeding as the norm.

	Direct-Service State Agencies	Local Agencies	Participants
<b>Practices Around Clinic Staff Interactions with WIC Participants</b>			
Assume all postpartum participants initiated breastfeeding	50.1	63.6	69.2
<b>Treat exclusive breastfeeding as the norm</b>	<b>84.5</b>	<b>91.0</b>	<b>93.4</b>
Respect each mother's infant feeding decision	97.6	99.6	100.0
<b>Encourage participants to breastfeed anywhere in the clinic</b>	<b>94.7</b>	<b>97.7</b>	98.8
Use breastfeeding-friendly language	97.6	99.7	99.6
Offer breastfeeding support to participants on a walk-in basis	95.3	95.5	<b>95.7</b>
Promote breastfeeding for as long as possible or as preferred by both the participant and her infant	100.0	99.9	<b>100.0</b>
<b>Clinic Features</b>			
Posters showing breastfeeding	97.6	96.7	98.1
Informational bulletin boards on breastfeeding	87.8	81.1	89.8
Breastfeeding materials featuring ethnically diverse parents and infants	95.1	94.9	97.7
<b>Chairs, pillows, footstools, or other furniture to make breastfeeding mothers more comfortable</b>	<b>66.1</b>	<b>72.7</b>	<b>83.0</b>
<b>Private space for breastfeeding</b>	<b>80.1</b>	<b>87.6</b>	<b>93.1</b>
None of these	0.0	0.1	0

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# WIC is reaching out beyond the clinic to the community.

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State Agencies    Local Agencies

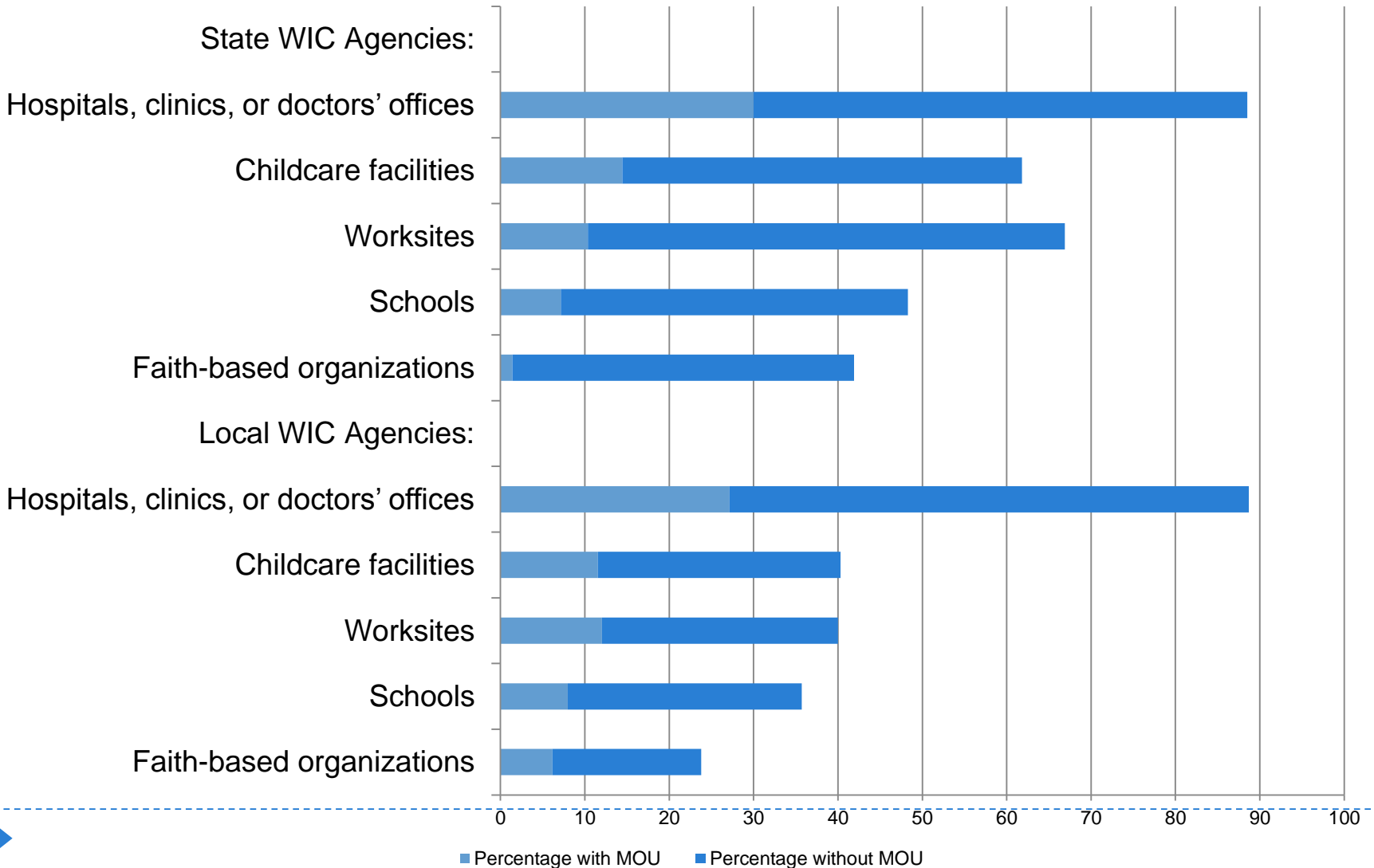
## Planned or Participated in Breastfeeding Promotion/Outreach in Past Year

Social marketing campaign	27.2	20.2
World Breastfeeding Week event	79.3	72.9
Community health fair	64.0	63.5
Peer counseling program promotion in the community	64.0	59.9
Other	29.7	21.6
None of these	6.7	9.4
<b>Staff Outreach to Hospitals</b>		
Teach in-hospital prenatal classes	19.7	6.7
Provide in-hospital breastfeeding support	56.7*	32.9

*\*Among Direct-service State Agencies*



Nearly all SAs and LAs reach out to hospitals and doctors' offices to promote breastfeeding; a quarter to a third have MOUs in place.



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# Breast pumps are available at nearly all SAs and LAs

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Direct-Service  
State Agencies      Local Agencies

## Pump Types Distributed

Manual ( $n_{SA} = 39, n_{LA} = 1,624$ )

Loans

0.0

2.6

Gives

94.9

93.4

Pedal ( $n_{SA} = 37, n_{LA} = 1,565$ )

Loans

13.2

23.7

Gives

16.0

4.9

Single-user electric ( $n_{SA} = 39, n_{LA} = 1,608$ )

Loans

10.7

6.2

Gives

62.9

72.4

Multiuser electric/hospital grade ( $n_{SA} = 39, n_{LA} = 1,612$ )

Loans

60.8

88.6

Gives

10.2

2.4





# Breast Pumps are helping when mothers return to work or school.

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## Issuance Conditions for Most Common Pump Type

	Direct- Service SA	LA
Mothers request one	23.3	28.2
Mothers certified as fully or partially breastfeeding	62.3	40.8
Mothers certified as fully breastfeeding only	27.3	19.2
Mothers committed to exclusive bf for a minimum duration	24.9	20.6
Mothers returning to work or school	72.4	76.7
Mother/infant separation (other than work or school)	62.5	74.5
Mother/infant feeding problem	58.1	76.2
Other	14.7	10.9

## Other Issuance Policies or Practices

Breast pump training may count as a nutrition education contact	46.0	57.9
Participants are required to complete breast pump training	74.8	75.5
Clinic staff must follow up w/participants after receiving pump	77.4	88.3
Breast pumps may be issued to a participant proxy	51.6	53.8
Participants may be required to make a deposit for pump	0.0	7.8
Participants may purchase a breast pump at a price below retail	5.0	2.5



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# Formula Policies

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	State Agencies	Local Agencies
<b>Formula Issuance to Fully Breastfeeding Participants in 1<sup>st</sup> Month</b>		
When a doctor prescribes formula	36.6	47.4
When the mother no longer wants to exclusively breastfeed	49.1	60.9
Never	36.9	25.5
Other	12.8	9.3
<b>Steps Clinic Staff Take when a Participant on a Fully Breastfeeding Food Package Requests Formula</b>		
Formula is issued without any additional steps taken	7.5	1.5
Participant receives counseling about benefits of breastfeeding	84.8	91.1
Participant receives counseling about changing food packages	79.8	93.0
A minimum amount of formula is provided based on assessment	79.8	78.7
Other	7.5	9.2



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# The prenatal visit is a key link for breastfeeding promotion.

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	Participants (%)
<b>Breastfeeding Promotion Practices During Prenatal WIC Enrollment</b>	
Give her a breastfeeding promotion kit	42.2
Enroll her in peer counseling program	81.5
Include her in prenatal breastfeeding education classes	82.4
Offer her participation in a breastfeeding support group	62.5
Provide individual breastfeeding counseling	96.5
Give her information about the greater quantity and variety of foods in the fully breastfeeding food package	88.4
Other	11.9
<b>Locations Where Interactions with Pregnant WIC Participants May Occur</b>	
Nutrition education classes	81.4
Breastfeeding support groups <sup>c</sup>	80.8
By telephone	92.8
Hospitals	30.1
Other off-site locations	23.0



# Postpartum Enrollment Practices

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	Direct-Service State Agencies	Local Agencies
<b>Breastfeeding Promotion Practices During Postpartum WIC Enrollment</b>		
Conduct a breastfeeding assessment	63.5	74.7
Give her a breastfeeding promotion kit	41.6	26.7
Enroll her in peer counseling program <sup>b</sup>	63.7	77.1
Include her in breastfeeding education classes	44.1	29.1
Offer her participation in a breastfeeding support group <sup>c</sup>	48.4	66.6
Provide individual breastfeeding counseling	95.1	96.9
Give her information about the greater quantity and variety of foods in the fully breastfeeding food package	87.8	88.0
Other	4.9	7.7



# WIC proactively reaches out to participants post partum.

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	Direct-Service State Agencies	Local Agencies
First Week Postpartum		
Mean	1.6	1.4
Median	1	1
Interquartile range	1-2	1-2
First Six Months Postpartum		
Mean	4.7	4.5
Median	4	3
Interquartile range	2-6	2-6



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# Breastfeeding Education takes many forms.

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## Format of Breastfeeding Education

	Direct-service SA	LA
In-person group sessions	58.8	64.9
In-person individual sessions	97.6	98.5
Print materials	95.1	96.3
Telephone	80.7	79.7
Computer in the clinic	9.6	17.1
Website	21.2	30.0
Email	9.6	12.2
Instant messaging service	12.0	4.2
Text messages	41.5	22.7



# Breastfeeding Education Resources

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	State Agencies	Local Agencies
Developer of Participant Breastfeeding Education		
A local WIC agency	n.a.	40.1
A State WIC agency	83.0	79.0
USDA Food and Nutrition Service	85.0	50.6
Breastfeeding support organization	7.2	7.9
Education or public health institution	12.0	10.9
Vendor	19.2	10.4
Don't know	0.0	1.9
Languages in which Education Is Offered ( $n_{SA} = 41$ ; $n_{LA} = 1,657$ ) <sup>a,b</sup>		
Spanish	55.4	87.4
Chinese	0.0	9.3
French	0.0	6.5
Korean	0.0	4.4
A Native North American Language	9.7	2.3
Vietnamese	0.0	8.8
Other	2.9	14.6

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# The timing of in-person breastfeeding education varies.

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	Direct-Service State Agencies	Local Agencies
<b>Times When Pregnant Participants Receive In-Person Breastfeeding Education</b>		
Whenever participants request it	62.2	69.5
At each certification visit	80.1	66.4
At each clinic visit	55.3	65.6
Twice per certification period	27.4	21.6
Quarterly	7.5	6.6
Monthly	19.8	10.7
Other	19.6	11.9
<b>Times When Postpartum Participants Receive In-Person Breastfeeding Education</b>		
Whenever participants request it	68.7	79.8
At each certification visit	69.6	69.3
At each clinic visit	59.1	58.3
Twice per certification period	12.9	11.8
Quarterly	7.7	4.4
Monthly	12.8	10.7
▶ Other	20.3	16.6

# Part I: Breastfeeding Policy and Practices

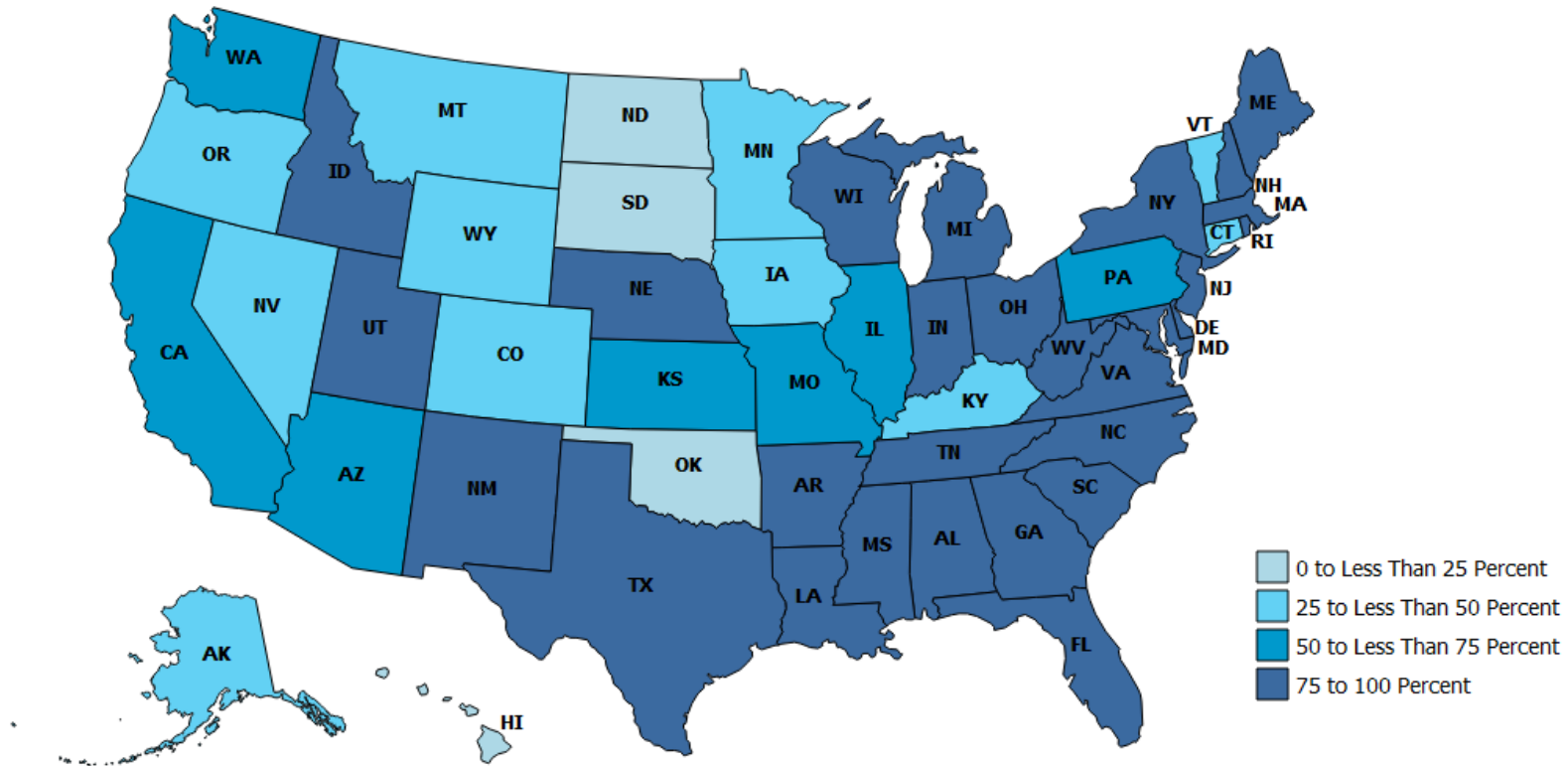
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# Percentage of LAs that have a Peer Counseling Program

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# Peer Counseling Practices

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	Local Agencies
<b>Agency Operates a Peer Counseling Program</b>	68.5
<b>Among Local WIC Agencies Operating Peer Counseling Programs:</b>	
Mean Percentage of Clinic Sites Operating Program	83.0
Pregnant Participants Are Eligible to Participate in Program	97.2
Mean Percentage of Agency's Pregnant and Postpartum Participants in Program	61.5
Methods for Enrollment in the Program	
Automatic	52.7
Offered at the prenatal certification visit	90.9
Offered at the postpartum certification or recertification visit	84.2
Participants request enrollment	68.3
Only when peer counselors can add to their caseloads	7.7
Random selection	2.3
Participants referred when experiencing breastfeeding problems	75.7



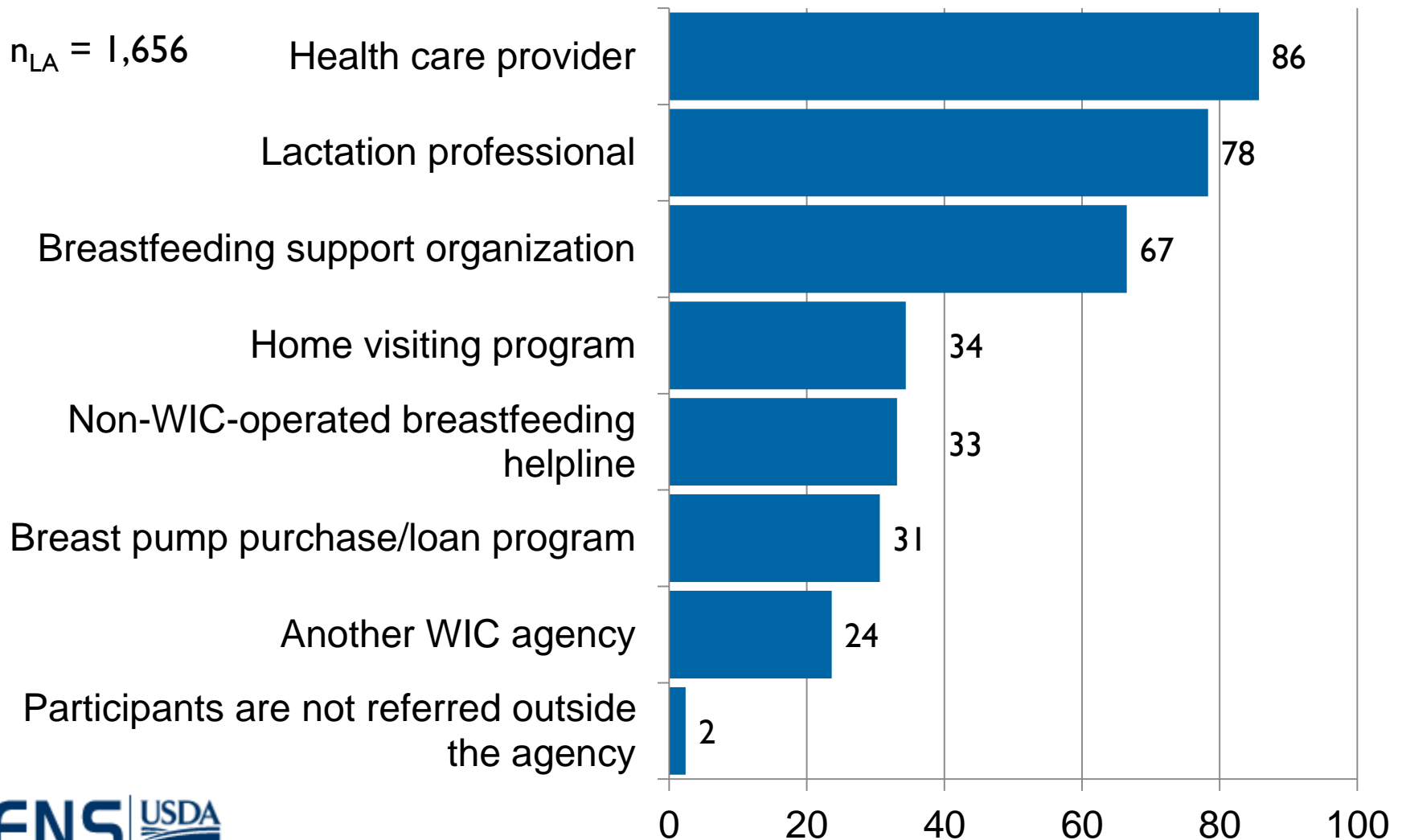
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# WIC LAs have multiple breastfeeding referral resources.





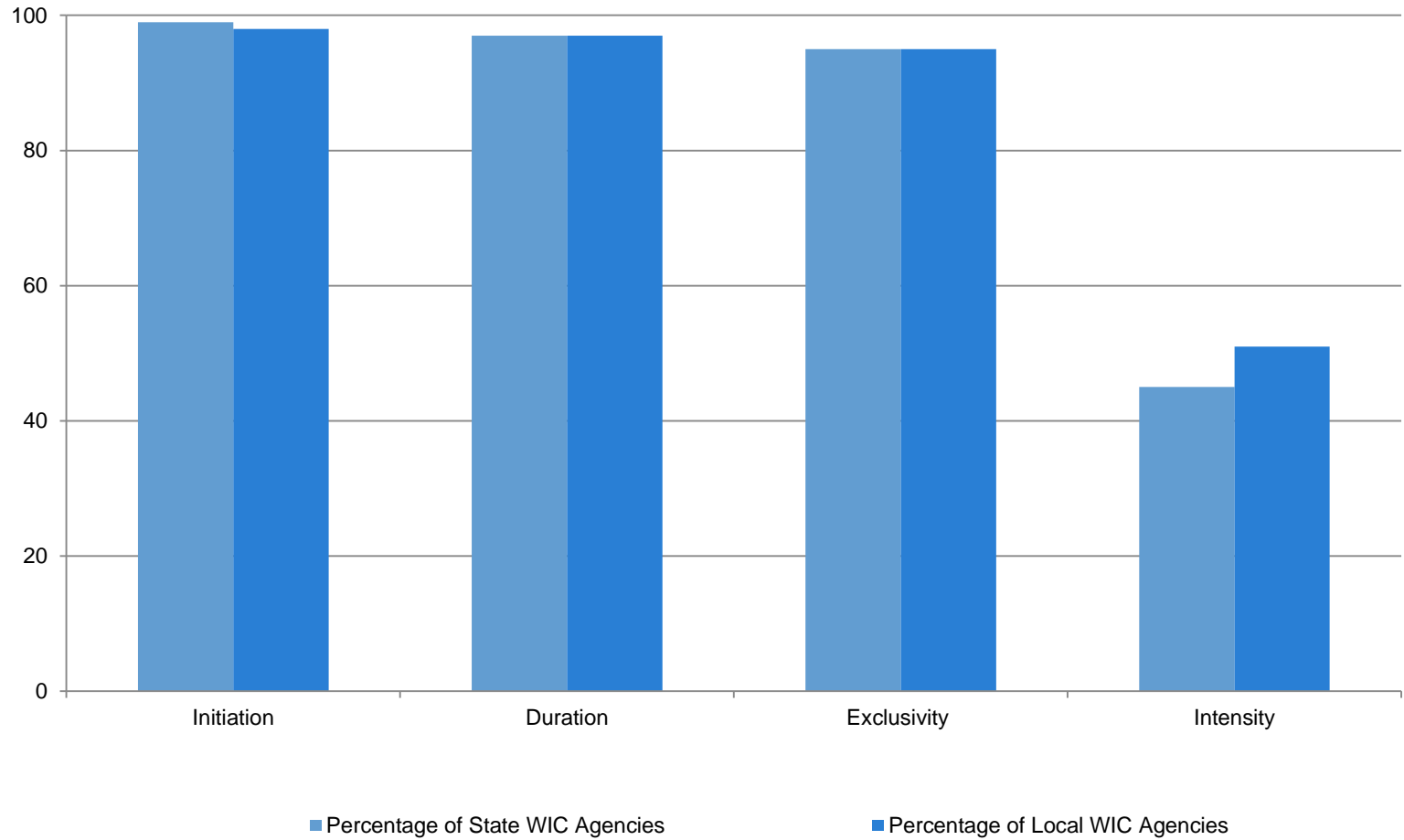


## Part II: Breastfeeding Measures



# Breastfeeding Measures

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# Breastfeeding Data collection periods

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	Initiation (n <sub>LA</sub> = 1,588)	Duration (n <sub>LA</sub> = 1,578)	Exclusivity (n <sub>LA</sub> = 1,545)	Intensity (n <sub>LA</sub> = 812)
Percentage of Agencies that Assess Outcome <sup>a</sup>				
Before the first postpartum WIC clinic visit	58.3	37.5	49.0	40.6
Postpartum certification appointment	92.5	90.5	96.9	96.0
Later recertification visits	39.3	70.9	68.8	65.0
Other WIC clinic visits	41.4	73.6	73.4	68.4
Peer counseling visits or calls <sup>b</sup>	75.1	81.3	81.6	81.1
Other	6.3	5.9	5.9	5.5



# Summer EBT for Children

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## ▶ Objective

- ▶ Determine impact on Food Security of a \$60/child/month EBT benefit for children in NSLP

## ▶ Implementation

- ▶ Used the WIC EBT technology in TX, NV, MI, Chickasaw, Cherokee
- ▶ Special food quantities using WIC foods for children (including cash value for WIC fruits & vegetables)

## ▶ Findings

- ▶ Reduced Very-Low Food Security among Children by 33%



# SNAP Healthy Incentives Pilot (HIP)

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## ▶ Objective

- ▶ Determine impact on fruit and vegetable consumption of a SNAP incentive -> \$1 SNAP benefits could purchase \$2 of FFV

## ▶ Method

- ▶ Randomized, controlled design
- ▶ Massachusetts

## ▶ Findings

- ▶ Interim Report: Participants ate 1/5 cup more FFV
- ▶ Final Report: late 2014



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**Thank you!**

**Questions?**