

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Participant and Program Characteristics 2020 (Summary)

Background

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is administered by the U.S. Department of Agriculture's Food and Nutrition Service (FNS). WIC benefits include nutritious supplemental foods; nutrition education and counseling, including breastfeeding promotion and support; and referrals to healthcare, social services, and other community providers for pregnant, breastfeeding and non-breastfeeding postpartum women, and infants and children up to age 5 years who have been deemed to be at nutritional risk and who are deemed income-eligible for the program. Since 1988, FNS has produced biennial reports on WIC participant and program characteristics (PC) for use in program monitoring and managing WIC information needs. The PC 2020 report summarizes demographic, income, and health-related characteristics and behaviors of participants certified to receive WIC benefits in April 2020. The PC 2020 report also compares participant and program characteristics between participants certified to receive benefits in April 2020 and the participants certified to receive benefits in November 2020 in nine select State agencies.

Key Findings

- Seven million women, infants, and children were certified to receive WIC benefits in April 2020, a decline of 10.2 percent from April 2018.
- In 2020, the percent of infant participants breastfed after birth was 71.6 percent; 22.1 percent were breastfed at age 6 months.
- More than half (64.3 percent) of participants reported an income below 100 percent of the Federal Poverty Guideline in 2020 compared to 69.5 percent in 2018.
- Rates of low hemoglobin or hematocrit among children declined with age and were consistently highest among African American children.

Methods

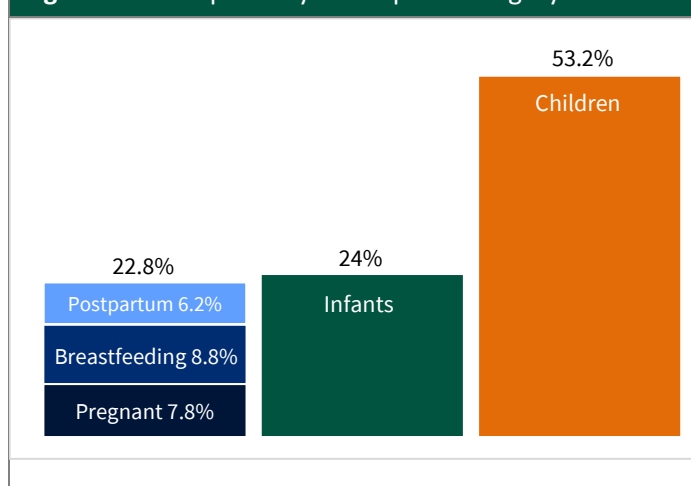
The data for this report are based on WIC administrative records collected from all 89 WIC State agencies (50 States, the District of Columbia, 5 U.S. territories, and 33 Indian Tribal Organizations). PC 2020 represents information on a census of WIC participants with active certifications during April 2020. As a response to the COVID-19 pandemic, FNS replicated the PC 2020 data collection methods to capture active certifications in November 2020 among a convenience sample of nine large State agencies across the FNS Regions (See Page 3 of this research summary).

Findings

There were 7 million women, infants, and children certified to receive WIC benefits in 2020. This is a decline of 10.2 percent from the same period in 2018 when 7.8 million participants were enrolled, and of 20 percent from 2016 when 8.8 million participants were enrolled. Of these 7 million, 6.28 million individuals picked up their WIC food benefits in April 2020.

In 2020, the proportion of breastfeeding women exceeded that of non-breastfeeding postpartum women, continuing the trend first seen in 2012. Among all WIC participants, 7.8 percent were pregnant women, 8.8 percent were breastfeeding women, and 6.2 percent were non-breastfeeding postpartum women.

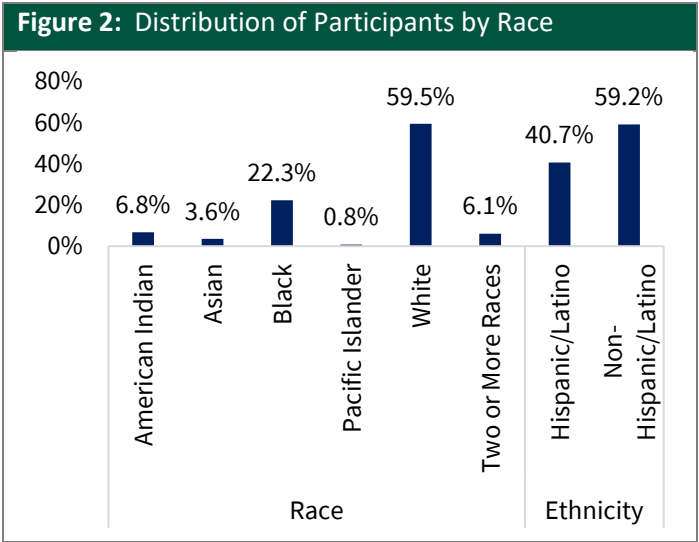
Figure 1: Participants by Participant Category



Just over 77 percent of all participants were infants and children under 5 years of age (Figure 1). The percentage of infants and children in the total WIC population has remained steady since 2010.

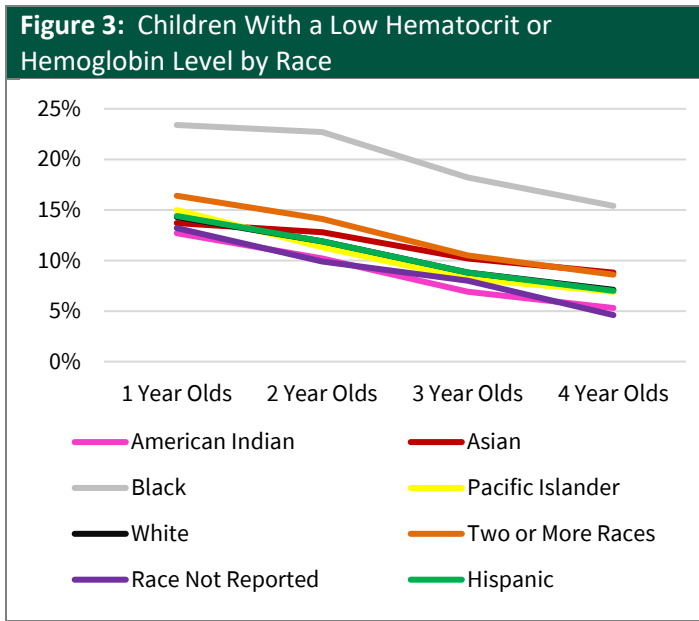
The racial and ethnic characteristics of the WIC population in 2020 (Figure 2) were similar to 2018. Ethnicity is reported separately from race. In 2020, 40.7 percent of WIC participants were Hispanic or Latino.

Income data were reported for 93 percent of all WIC participants and nearly all (90 percent) had a household income at or below 185 percent of the Federal Poverty Guideline. In 2020, the percentage of WIC participants who reported an income below 100 percent of the Federal Poverty Guideline was 64.3 percent compared to 69.5 percent in 2018 and 72.4 percent in 2016. Thirty-five percent of all participants in 2020 had a reported income between 0 and 50 percent of the Federal Poverty



Guidelines; this differed across race categories with 21 percent of Asian and 45 percent of Black participants having a reported income of 0 to 50 percent of the Federal Poverty Guideline.

Dietary (53.9 percent) and anthropometric (49.6 percent) risks were the most common broad categories of nutritional risk assigned at program enrollment. Among women, anthropometric and clinical/health/medical risks were most commonly assigned (63.7 and 57.8 percent, respectively). Dietary risks were most commonly reported for children (72.3 percent). A majority of infants (73.2 percent) were assigned the broad nutritional risk category of “other risks”, most commonly for the mother being at risk during pregnancy (68.1 percent). Note that this includes data from March and April 2020 when FNS was authorized under the Families First Coronavirus Response Act to grant waivers to State agencies to conduct



certification and recertification appointments without participants’ physical presence at a WIC clinic and defer the anthropometric and hematological test requirements necessary to determine certain nutritional risks.

More than one-quarter of breastfeeding women (27.3 percent) and non-breastfeeding postpartum women (30.7 percent) had a hematocrit or hemoglobin level that indicated anemia based on FNS-issued criteria. Among children, rates of a hemoglobin or hematocrit level below the FNS-issued criteria declined with age and were consistently highest among African American participants (Figure 3). Note that due to the physical presence waivers, the anemia data presented here only include participants certified through February 2020.

In 2020, breastfeeding initiation and duration rates remained steady and continued to vary by race and ethnicity. Among the 82 State agencies that reported breastfeeding data for 2020, the percent of participants breastfed was 71.6 percent after birth, 32.6 percent at age 3 months, and 22.1 percent at age 6 months. Among 9- to 13-month-olds who were breastfed, Asian participants had higher rates of breastfeeding at 6 months (31 percent) than participants of other races and Black participants had the lowest rates of breastfeeding at 6 months (17 percent). Hispanic/Latino participants had higher rates of breastfeeding at 3 months and 6 months than non-Hispanic/Latino participants.

WIC Participant and Program Characteristics 2020 COVID-19 Analysis

Background

Although WIC participation has been declining since 2010, the COVID-19 pandemic may have resulted in more families being eligible for WIC benefits or seeking WIC participation. As a response to the COVID-19 pandemic, FNS conducted a study among a convenience sample of nine State agencies to assess differences in the size and characteristics of the WIC population between April and November 2020 and to examine changes in the distribution of WIC participant categories.

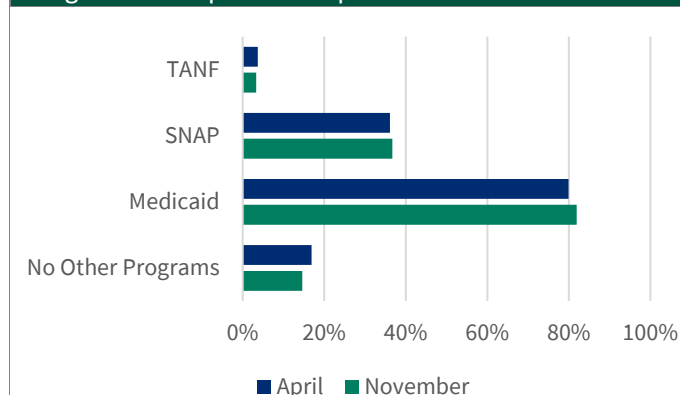
Methods

Nine State agencies were selected to participate in this study: Arizona, Colorado, Florida, Georgia, Massachusetts, Michigan, Ohio, Pennsylvania, and Washington. Collectively, WIC participants in these nine States represent about 25 percent of all participants nationwide. The nine State agencies submitted data on all participants certified to receive benefits in November 2020. The same data items requested for the April 2020 collection were requested for this special November 2020 collection to support comparisons.

Findings

Between April 2020 and November 2020, the number of individuals certified to receive WIC benefits across nine State agencies decreased by 2.3 percent. However, in seven of the nine States, the total number of children

Figure 5: Percentage of Participants by Reported Program Participation in April 2020 and November 2020



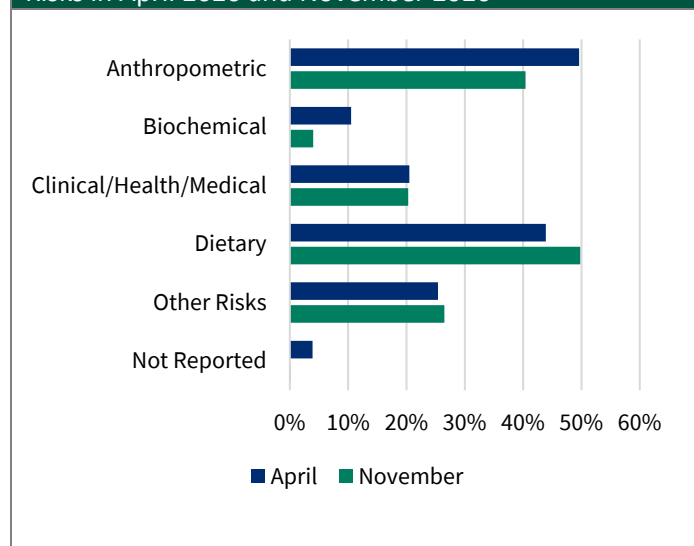
TANF is the Temporary Assistance for Needy Families program
SNAP is the Supplemental Nutrition Assistance Program

participating increased by 0.6 to 3.7 percent. Overall participation decreased by 0.1 percent among American

Indian and Black groups and increased by 0.2 percent among Whites but did not change in other groups.

Medicaid participation among individuals certified for WIC increased by two percent between April and November 2020 (Figure 5). WIC participants reporting no participation in TANF, SNAP, or Medicaid decreased by 2.2 percent.

Figure 6: Percentage of Participants with Nutritional Risks in April 2020 and November 2020



In November 2020, fewer participants were assigned anthropometric and biochemical nutritional risks compared to April 2020 (Figure 6). The number of participants assigned only one nutritional risk increased by 11.5 percent. The percentage of participants with missing anthropometric data increased by at least 4.8 percent across infant and child age categories. Given the difficulty of obtaining anthropometric and hematological measurements during the pandemic, and that these measurements were deferred as part of the physical presence waiver, the differences are expected.

From April 2020 to November 2020, breastfeeding initiation and duration rates declined only slightly. Among the eight State agencies that provided complete data on breastfeeding, initiation decreased slightly from 71.0 percent in April 2020 to 70.5 percent in November 2020, and duration at 6 months decreased slightly from 16.5 percent in April 2020 to 15.7 percent in November 2020.

For More Information:

Kline, N., Zvavitch, P., Wroblewska K., Worden, M., Mwombela, B., & Thorn, B. (2022). *WIC Participant and Program Characteristics 2020*. U.S. Department of Agriculture, Food and Nutrition Service. Prepared by Contractor, Contract No. AG-3198-K-15-0048. Alexandria, VA: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, Project Officer: Amanda Reat. Available online at: www.fns.usda.gov/research-and-analysis.