

OPPORTUNITIES FOR WIC'S NEXT HALF CENTURY

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WIC WORKS!

WIC improves health with high-quality services.

WIC was established as an anti-hunger program funded through the US Department of Agriculture in the 1970s to help families with young children facing hunger and malnutrition. Now in its 44th year, WIC benefits and services have reduced food insecurity,¹ with access to healthy foods, including fresh fruits and vegetables.²

WIC not only feeds families, it has a long and impressive record of positive health outcomes³ attributed to the high-quality services WIC provides to mothers, infants, children and their families. Improved health outcomes include a reduction in anemia⁴ and in pre-term and verylow-birthweight babies,⁵ a slowing of the childhood obesity epidemic,⁶ and lower rates of child abuse or neglect in WIC families.⁷ In addition, breastfeeding rates in the most challenged populations have increased,⁸ children's oral health has improved,⁹ and more children receive their vaccinations.¹⁰ Research also attributes WIC participation to improved reading scores for children.¹¹ These health improve-

ments mean healthier families and reduced health care¹² and social service costs.¹³ Moreover, the WIC food package supports our farmers, food manufacturers, and grocers.

Despite these many achievements, WIC is facing some major challenges. Fewer young families are participating in WIC: only 60% of WIC-eligible families nationwide are participating, and a perplexing decline in participation occurs past the child's first birthday, with only about one-third of eligible four-year-olds participating.¹⁴

WIC needs to operate in new ways in order to reach today's new parents—the Millennials—a generation that is tech-savvy and firmly linked to social media. Young mothers need to see WIC as a valuable and relevant source of support that can help them during their busiest time of life: caring for infants, raising their children, and coordinating school, work, and family life. WIC needs to help the families it wishes to serve to integrate WIC participation into work schedules, child care pick-up, family appointments and the daily activities of managing a family.

TURNING TOWARD THE FUTURE

WIC needs to move nimbly to serve current and future generations.

To continue to be successful. any program or business must adapt to its environment. As WIC approaches its half century, its success will depend on its ability to respond to current challenges. WIC should begin to team up with a public health landscape that has already shifted to a focus on prevention and patientcentered care, improved health outcomes, and reduced costs. For WIC, prevention and participantcentered care have long been core values. It is time to find new ways to implement them.

As a large, complex program, WIC often responds slowly to changing

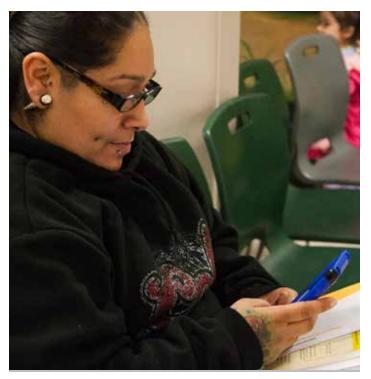
circumstances. But it can–and must–begin to move into its next half century as a vital partner with public health and diverse community organizations, with new ways of doing business and innovations that put the mothers and families at the center.



WIC is a place where families can connect.

There is an urgency for some changes to move more quickly into place: significant improvements to the WIC program, such as the current food package or transition from paper food checks to electronic benefit cards (EBT), have taken more than a decade to implement.¹⁵ Opportunities exist to elevate WIC's value–and keep families participating–by engaging new partners, considering new service delivery models, and whenever possible, using the lens of the user experience.

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Moms expect to use their smartphones to do business and communicate.

OPPORTUNITIES AHEAD

Here we present some forward-looking ideas in the areas of integrating WIC with current opportunities in health care reform and prevention and expanding the use of WIC clinics, along with reaching and engaging our customers to move WIC to be a more resilient and responsive service. WIC can both learn from and partner with other arenas to bring its core program into alignment with its customers.



Testing for iron and anemia at a WIC program can be streamlined and data should be shared electronically with health care providers.





Children receive oral health screenings and fluoride varnishes at a WIC office in Sacramento, CA.

Infants and children are measured and weighed to track growth and development.

INTEGRATE WIC INTO PUBLIC HEALTH

SOME OPPORTUNITIES:

- Expand the community role of WIC experts in nutrition and lactation:
 - Create business agreements with public and commercial health plans that enable WIC staff, representing a very large workforce of nutrition and lactation experts, to work in local clinics providing services beyond their WIC time. In California, for example, WIC staff contract through their parent organizations to provide nutrition and breastfeeding support in Comprehensive Perinatal Programs (CPSP), an expanded Medicaid program.¹⁶
 - Integrate WIC services into new health care models, such as Patient-Centered Medical Homes, to meet certification standards that signify better patient care. One way is to colocate WIC services.¹⁷
- Link WIC Management Information Systems (MIS) to electronic health records (EHRs).
- Include nutrition and breastfeeding quality measures and WIC participation in pay-for-performance and value-based purchasing models, such as Medicaid's Community Care Organizations (CCOs) and Accountable Care Organizations (ACOs).¹⁸

PROTECT THE NATIONAL INFRASTRUCTURE OF WIC CLINICS

SOME OPPORTUNITIES:

- To ensure continued positive outcomes, enhance their community standing, capitalize on their cultural and language diversity, and improve the experience of participants, make WIC sites community centers for women and their families, with WIC staff providing nutrition and breastfeeding support even to mothers ineligible for WIC, using funds from sources other than WIC.
- Include kiosks at WIC sites for online learning in addition to in-person WIC education.
- Integrate fathers and men:
 - Include male staff members who relate to WIC dads.
 - Provide services such as reading events, parenting classes, cooking demos in ways that engage men.
 - Eliminate ID checks or proof of custody for returning WIC dads.
- Implement clinic practices that acknowledge the diverse cultures within our communities and welcome all families.
- Extend the successful breastfeeding support groups to nutrition or healthy lifestyles support groups.
- Make better connections to needed services by integrating social workers or case managers into WIC services to address the increasing evidence of the impact of adverse childhood experiences on chronic disease.
- Change WIC branding with a new name that emphasizes the family aspect.
- Build on the successes of the wellness and fitness industry to improve WIC ambiance and marketing strategies. Examples:
 - Rather than being solely identified in the clinic by professional titles, staff could have titles related to health or that appealed to the desire for individual support or coaching. For example, a Nutrition Assistant might be called a Nutrition Navigator.
 - WIC participants might also be called something else, such as members, and greeted at the door by staff and checked in in the waiting room via a tablet held by a WIC staff person sitting next to them, rather than from behind a counter and a glass window.



Local WIC agencies should include men and dads through simple customer service practices.

A kiosk in a Pennsylvania health office links to WIC and other health and family services.



A Health Information Team member in a WIC program in Alameda County, CA, helps participants connect with social services.



Two-way texting for appointment management, and nutrition and breastfeeding support, should be commonplace.



Local WIC agencies will need to use teleconferencing to serve participant needs and maximize staff capacities.

CONSIDER THE STRESSES ON YOUNG WOMEN AND MEN AND THEIR FAMILIES, AND ACCOMMODATE THEM BY EMPLOYING NEW TECHNOLOGY AND THE HUMAN TOUCH

SOME OPPORTUNITIES:

- Provide services where our customers do business or work, such as pharmacies, retail outlets, hair salons or barber shops, child care centers, worksites or parks.¹⁹
- Employ people with the skills to create WIC education and support materials that can be used on mobile electronic devices in addition to paper and PowerPoint presentations.
- Make core WIC services accessible via smartphones and computers. Examples:

Screening, application, certification, and recertification:

- Provide ability to apply online, just as one does for health insurance, credit cards and other services requiring sensitive information, including an instant qualification response.
- Integrate eligibility, screening and application processes with Medicaid, state exchange and social service programs, providing both the applicant and local WIC agencies with information for follow-up via electronic linkages.
- Use phone and video technology, in addition to in-person appearances, as an option for application and recertification.
- Use video options when family members, such as children, are not present.

Appointment scheduling and management, notifications and updates:

- Employ text messages and video options, such as video conferencing through secured lines or programs such as Facetime or Skype.
- Offer the option to make appointments online.

Education and support:

- Send nutrition and breastfeeding education handouts directly to a participant's phone, with links to videos.
- For new moms who cannot attend breastfeeding support groups or nutrition education sessions, provide video conference options or chatrooms.

Accessibility and staffing:

- Where moms have many hours of travel to their WIC clinic or have transportation issues, use technology to maintain WIC participation, including during inclement weather.
- Address staffing shortages in remote regions by teleconferencing WIC staff, such as Registered Dietitians or lactation consultants, across WIC sites and between local agencies.

SOME OPPORTUNITIES:

- Increase flexibility in food choices:
 - Give WIC participants more flexibility in food choices to support a healthy diet and the recommendations of the Institute of Medicine.



This package locker is located in a large apartment building. This option would allow flexibility for working families and also be useful for transporting groceries home. Some lockers are refrigerated.

- Integrate new technologies in food ordering and delivery:
 - Look beyond EBT to new money management apps and services, such as Apple Pay and Google Wallet, that use smartphones for payment.
 - WIC shopping apps are available. Ones that integrate WIC foods and recipes and can be personalized for a family's needs should continue to be developed and available to families.²⁰
 - Online ordering and delivery:
 - Consider the results of WIC grocers who are testing online ordering of WIC groceries, with payment at time of pick-up at the store.
 - Consider new WIC food delivery models facilitated by online ordering, such as delivery to homes, worksites, or even lockers. For example, Amazon lockers, some of which are refrigerated, are located in community businesses where customers pick up other merchandise. Such practices could allow flexibility for working families or support families in remote areas where grocery stores are long distances away and could expand limited food choices at small grocers.

WE ARE ALL IN

The success of WIC depends on keeping WIC relevant and valuable to our participants.

It will take all of us at the local, state and federal levels working collaboratively and expeditiously on the many points of possible improvement–whether easy fixes such as applying best practices for including men, dads and diverse families, or longer-term changes such as changing the name of WIC to emphasize family inclusion and developing WIC-specific apps.

State and local staff and USDA leadership must embrace new opportunities and challenges and look outside of their programs and the government for success strategies.



NOTES

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- 20. For example, see WIC Shopper. http://www.ebtshopper.com/.

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