

# California WIC Program: Facts and Issues



## What is WIC?

- WIC is the **Special Supplemental Nutrition Program for Women, Infants, and Children**, a 100% federally funded program providing nutritious food (via prescriptive checks), individual counseling and nutrition education, breastfeeding promotion and support, and referrals to other needed services to at-risk, low-to-moderate income (up to 185% of the federal poverty level) women and children up to the age of five.
- The purpose of the WIC Program is to prevent infant mortality, low birth weight and other poor birth outcomes through protecting the nutrition and overall health of participants. Dozens of scientific studies have shown WIC to be a cost-effective and positive public health intervention. The healthy foods and culturally sensitive education WIC offers has reduced anemia, increased breastfeeding rates, and helped turn the rising tide of obesity among the nation's youngest children.
- For detailed information about WIC, including income eligibility guidelines, the foods currently provided, and how to find nearby WIC sites, please go to the California Department of Public Health WIC web pages (cited below).

## Who Participates in WIC?

- Nationwide, WIC serves 7.7 million low-income, nutritionally at-risk participants with a \$6 billion dollar budget (FFY '16). In California, the nation's largest WIC program, 83 local agencies serve 1.1 million participants at 500 local centers.
- About 60% of *all* infants born in California receive WIC services. In 2013, over 76% of income-eligible individuals participated in the California WIC Program, surpassing the national average by 16 percentage points. However, a recent survey estimated that 54,000 (11%) of California women with recent births were eligible, but not participating, in WIC. WIC serves a vulnerable population: nationally, almost three-quarters of WIC participants had incomes *below* the federal poverty line in 2014. California's WIC caseload reflects the state's diversity: the majority of participants (75%) are Latino/a, followed by Caucasian (12%), African American (6.5%), Asian (6%), and Native American (0.5%).
- Approximately 33% of WIC participants are pregnant and post-partum women, 21% are infants and 56% are children ages 1-5. Most WIC participants in California report they are insured through Medi-Cal—among young children on WIC in 2012, 72% were on Medi-Cal and 58% received benefits from CalFresh.
- Since many military families fall within the low-income guidelines, there are WIC offices serving military bases. In California, there are 13 WIC clinics located on or near military bases. WIC checks can be used at commissaries – in one month (August 2016), WIC checks spent at all 24 active commissaries amounted to \$171,224 spent by 4,029 WIC participants.

## WIC Funding Details

- Since WIC is not a federal entitlement program like school meals or CalFresh (food stamps), California WIC must maximize participation within its food and nutrition services grant levels, appropriated yearly by Congress. California WIC currently (FFY '16) operates with \$650 million in federal food funds, \$217 million in manufacturer rebates, and \$306 million in nutrition services funds. The program employs about 3,000 state and local staff, and participants redeem WIC food checks at 4,000 grocery stores statewide, annually pumping over \$916 million into local businesses.

- Every season, California WIC shoppers visit their local Farmer's Markets. The separate seasonal WIC Farmer's Market Nutrition Program serves about 90,000 WIC families with \$2 million in benefits annually, providing \$20 in checks for fresh produce to families each season. Additionally, Fruit and Vegetable Checks issued monthly in the food package can be redeemed in grocery stores and Farmer's Markets. Last year more than one million participants redeemed over \$84 million in regular WIC Fruit and Vegetable Checks at participating Farmer's Markets and local grocery stores.
- WIC has received strong bipartisan support throughout its 42-year history. Under federal law, in order to contain costs, state WIC programs are required to procure infant formula using a competitive bidding system, awarding a sole-source contract to the firm awarding the lowest net price (wholesale price minus rebate). Nationally, infant formula rebates generate \$1.3 to \$2 billion annually, allowing the WIC program to serve 2 million additional participants. California currently contracts with Mead Johnson, generating about \$217 million annually. California WIC's average monthly food benefit is \$61 per participant per month (FY 2016), but the average actual cost to the taxpayer was much lower – \$44.71 per participant – thanks to this cost-saving procurement strategy.

## Current WIC Policy Issues

**Declining Caseloads:** As part of a national trend, California's WIC caseloads have declined steadily since 2010. Since WIC applicants must have incomes at or below 185% of poverty (or be eligible based on participation in Medi-Cal), the number of people eligible for WIC is directly linked to the health of the economy. California's improving economy has considerably lowered unemployment rates and fewer families are now living in poverty than during the Great Recession. Unemployment peaked in 2010 at 12.2% and is now 7.5 percentage points lower, while the poverty rate dropped 1.1% between 2014 and 2015. Falling WIC caseloads also reflect a declining birthrate, since fewer births reduce the potential pool of WIC-eligible participants. California's birthrate continues a steep decline from 2008 (15.4 live births per 1000 people) to 2016 (12.4 births/1000) and has not been this low since 1933. Immigration issues also play a role. **Policy Solution: State and local agencies should continue to work with multiple partners to strengthen data-driven outreach and smart enrollment strategies.**

**Modernization:** California WIC is making steady progress to replace paper food checks with Electronic Benefit Transfer (EBT) cards. At the same time, the aging WIC Management Information System, ISIS, is being replaced via a project known as *eWIC*. Piloting will begin in 2019 with statewide rollout complete by April 2020. Using an EBT card instead of paper checks should contribute to a faster and more dignified shopping experience for WIC participants. The Program has also recently rolled out a new mobile-friendly website where participants can see upcoming appointments and their authorized food items: <https://m.wic.ca.gov/>. WIC providers have started to explore telehealth and other technology apps in order to better serve isolated or rural participants with transportation and other access barriers. **Policy Solution: Ensure Congress continues to appropriate adequate federal funds to support EBT and MIS projects like *eWIC*.**

**Federal Budget and ACA Repeal:** Although the Trump Administration has proposed level funding for WIC in FFY 2018, families WIC serves would be severely harmed by the drastic cuts and benefit restrictions to other programs that have been proposed, such as the block granting of Medicaid (Medi-Cal) and repeal of the Affordable Care Act (Covered California). The Administration's proposals to slash SNAP (CalFresh) eligibility and benefits by \$75 billion and federal contributions by \$116 billion over ten years would spell nutritional disaster for the majority of WIC families, for whom SNAP – along with WIC -- is a lifeline against hunger. Similarly, proposals to gut federal support for housing and other anti-poverty programs would have a direct impact on the health and well-being of WIC families. **Policy Solution: Oppose federal budget and legislative attempts to shred the health and human needs safety net.**

## Sources

**Food and Nutrition Services, US Department of Agriculture**

<https://www.fns.usda.gov/wic/women-infants-and-children-wic>

**Economic Research Service, US Department of Agriculture**

<https://www.ers.usda.gov/topics/food-nutrition-assistance/wic-program/>

**California Department of Finance: Birth Rate Demographics**

<http://www.dof.ca.gov/Forecasting/Demographics/Projections/>

**California Employment Development Department: Unemployment Rates**

[http://www.edd.ca.gov/About\\_EDD/pdf/urate201702.pdf](http://www.edd.ca.gov/About_EDD/pdf/urate201702.pdf)

**WIC Division, California Department of Public Health**

<https://www.cdph.ca.gov/Programs/CFH/DWICSN/Pages/AboutWIC/CDPHWICDivision.aspx>

<https://www.cdph.ca.gov/Programs/CFH/DWICSN/Pages/FarmersMarkets.aspx>

<https://archive.cdph.ca.gov/programs/wicworks/Pages/default.aspx>

**Maternal and Infant Health Assessment Survey (MIHA), CDPH**

[https://archive.cdph.ca.gov/data/surveys/MIHA/Pages/MaternalandInfantHealthAssessment\(MIHA\)survey.aspx](https://archive.cdph.ca.gov/data/surveys/MIHA/Pages/MaternalandInfantHealthAssessment(MIHA)survey.aspx)

**Center on Budget & Policy Priorities: WIC Issue Papers**

<http://www.cbpp.org/topics/child-nutrition-and-wic>

**Public Policy Institute of California: WIC and Poverty Overviews**

<http://www.ppic.org/publication/the-wic-program-in-california/>

[http://www.ppic.org/content/pubs/jtf/JTF\\_ChildPovertyJTF.pdf](http://www.ppic.org/content/pubs/jtf/JTF_ChildPovertyJTF.pdf)

**National WIC Association**

<https://s3.amazonaws.com/aws.upl/nwica.org/2017-ca-wic-fact-sheet.pdf>

**California WIC Association**

<http://www.calwic.org>

July, 2017

For More Information:

Karen Farley, CWA Executive Director: [kfarley@calwic.org](mailto:kfarley@calwic.org)

Terri Cowger-Hill: CWA Legislative Consultant: [terricowger@aol.com](mailto:terricowger@aol.com)