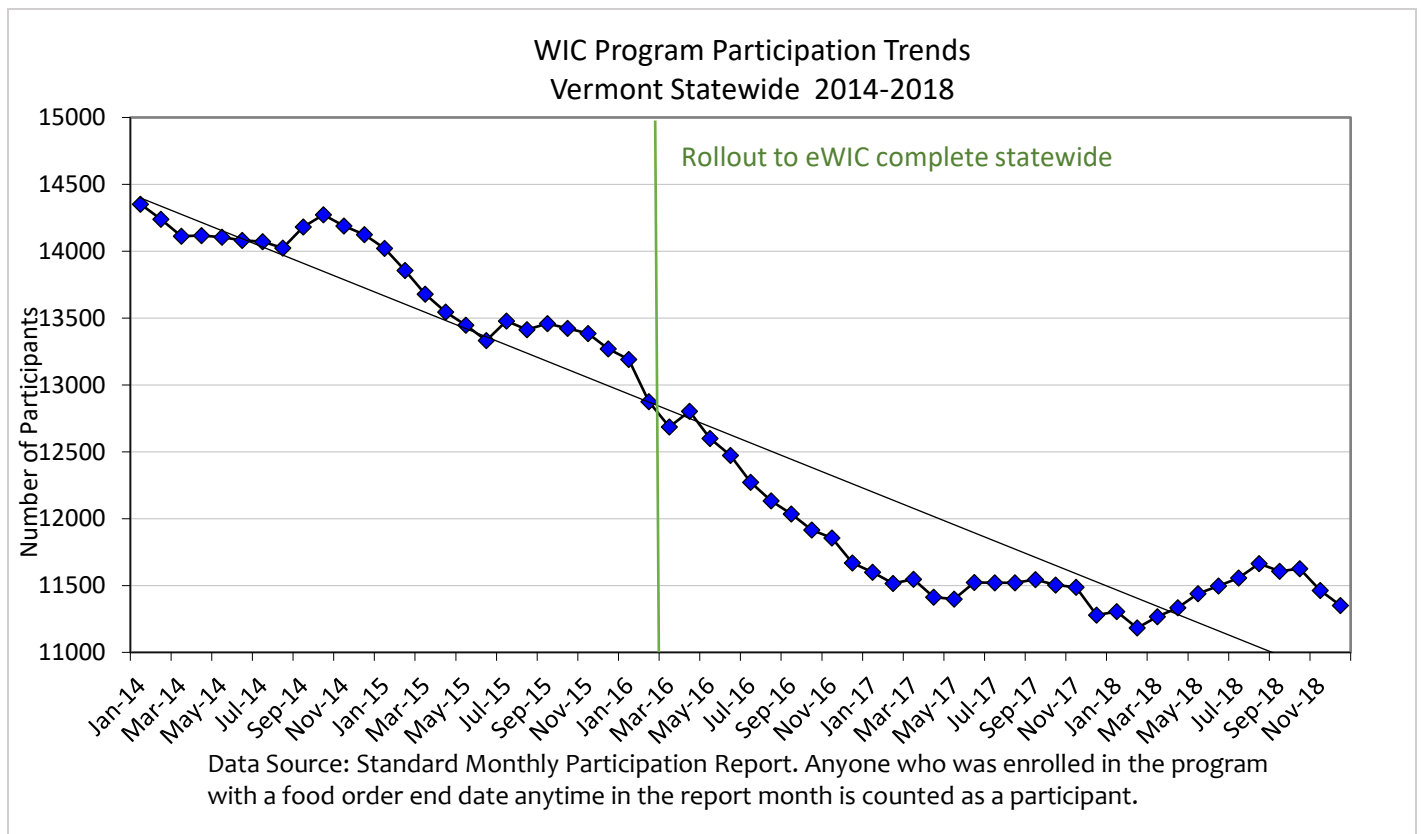


Who WIC Serves

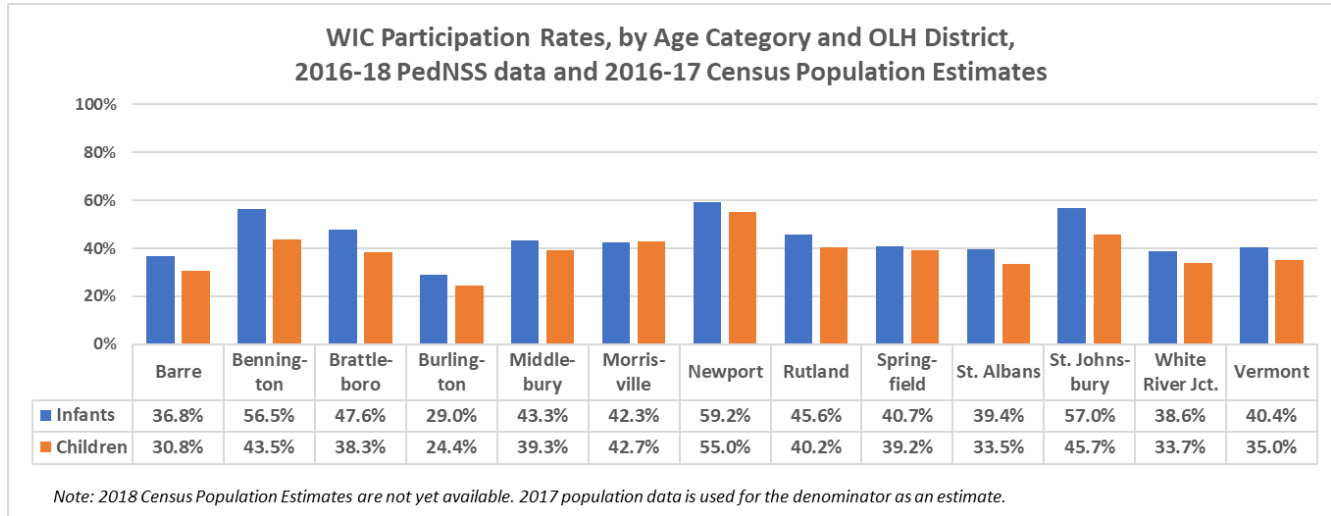
The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is a federal public health nutrition program administered in Vermont by the State Department of Health. The program serves income-eligible pregnant, postpartum, and breastfeeding women, and infants and children up to age 5. Participation in Medicaid, 3SquaresVT or Reach-up Financial Assistance allows for adjunctive eligibility in WIC. The following is a report of participation trends and demographic characteristics of participants. Data sources included in the brief are labeled on each chart and include: Vital Statistics, Pregnancy and Pediatric Nutrition Surveillance Systems, and Census Population Estimates.

Enrollment and Participation

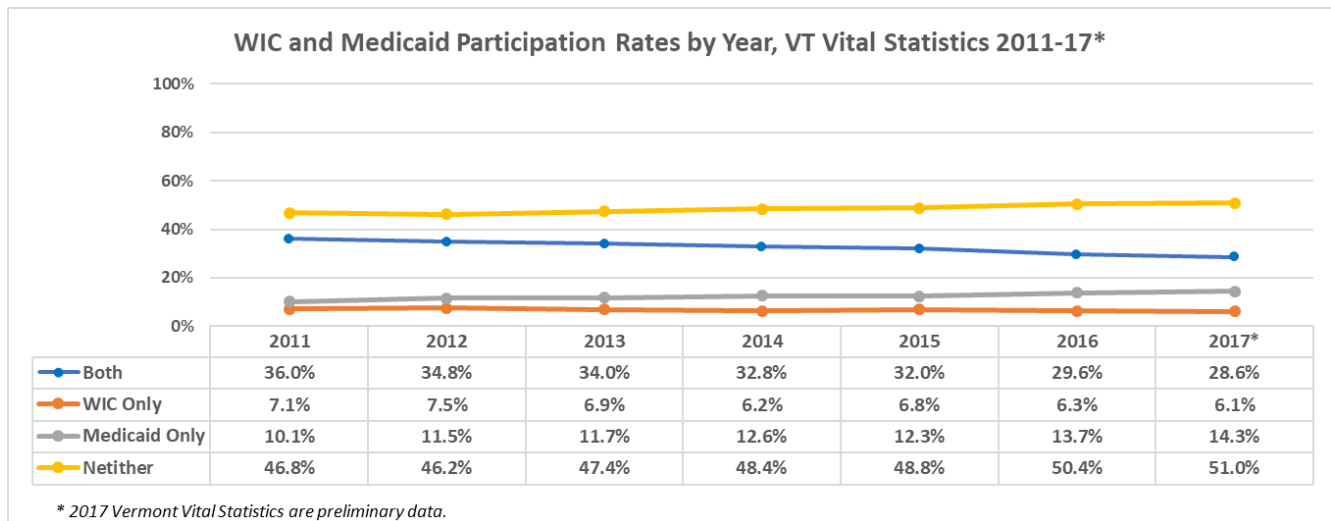
WIC caseloads have been on a steady decline in Vermont and across the country. There are many factors contributing to this, including declining birthrates, lower unemployment rates, and a healthy economy. Other factors such as, a lack of awareness or understanding of WIC, stigma associated with participation, lack of referrals, barriers to applying, transportation issues, and difficulties with the shopping experience¹, have also contributed to a decline in participation. In Vermont, this decline has leveled off since mid-2017. In early 2016, Vermont completed the statewide transition to eWIC. During this time, home delivery of the WIC food package transitioned to a system of participants accessing it with an electronic benefits transfer (EBT) card in grocer locations. This transition was a steep learning curve to participants, WIC staff, and grocers alike.



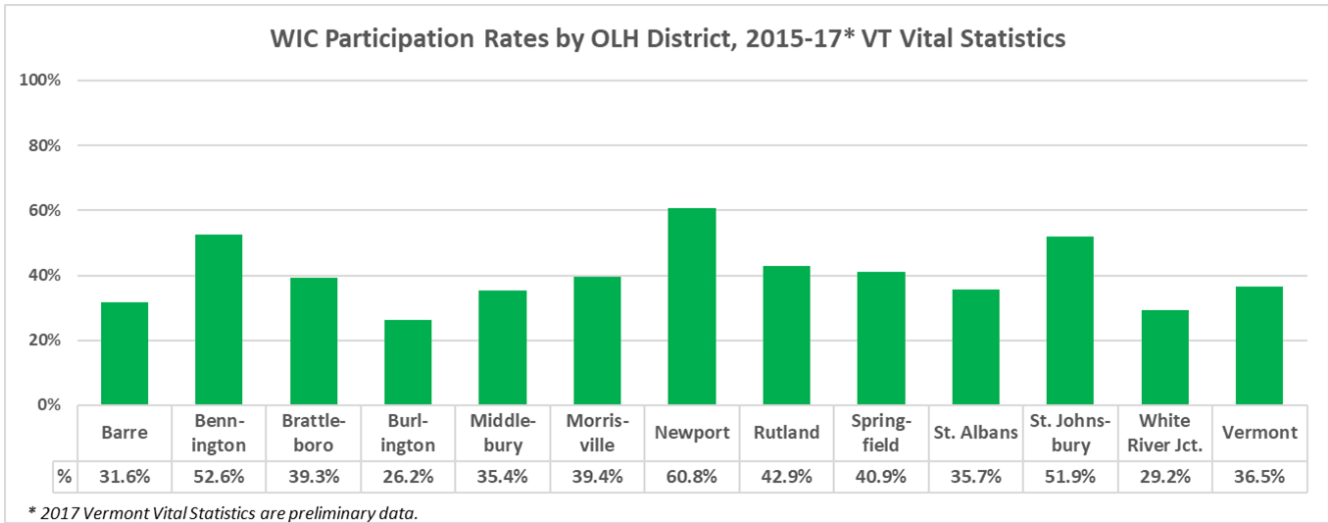
Statewide, 40.4% of Vermont infants and 35.0% of Vermont children participate in the WIC program. These data are calculated by comparing program data to total population estimates for infants and children through age 5. There is some regional variation on this statewide coverage as shown in the table below. The state is served by 12 regional Office of Local Health (OLH) district offices. The following tables report multi-year results for the regions served by those districts along with statewide data.



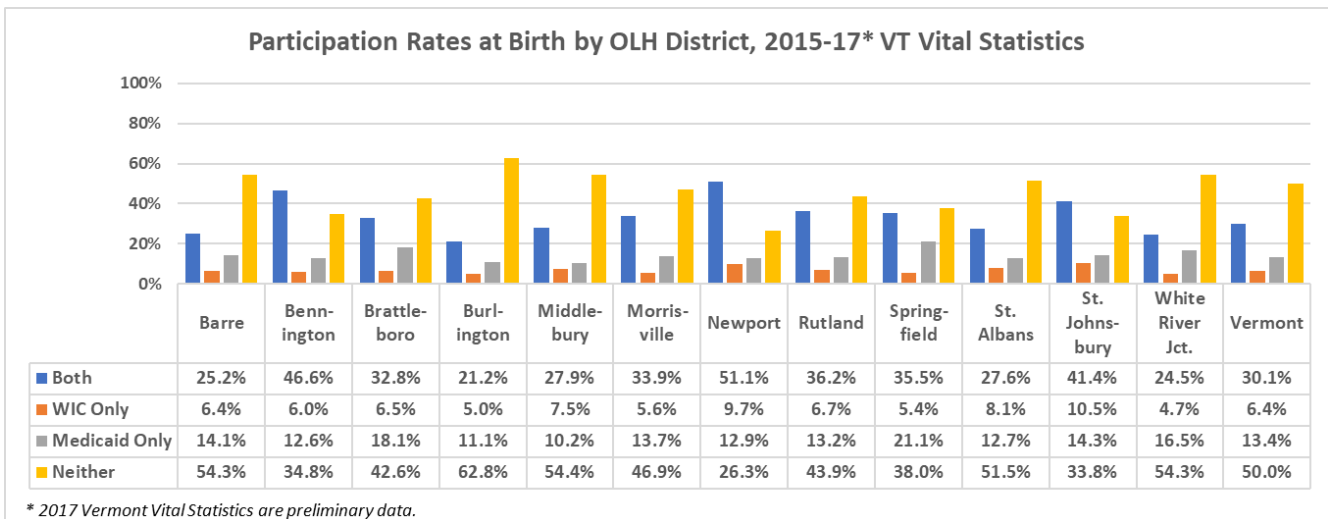
In 2017, just over one-third (34.7%) of infants were born to Vermont women participating in WIC at the time of birth. This rate has been decreasing over time; in 2011 this rate was 43.1%. Though they would be adjunctively eligible for WIC, 14.3% of infants are on Medicaid but not WIC at the time of birth. Six percent of infants were born to women participating on WIC but not Medicaid at the time of birth.



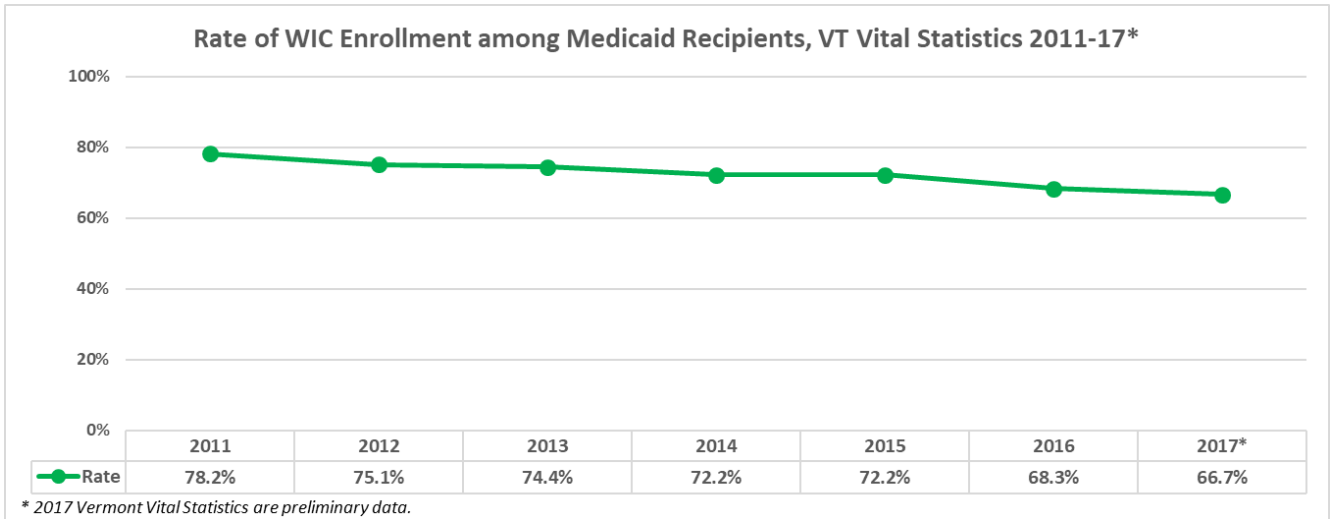
In 2015-2017, mother’s WIC participation at birth varied greatly by region, from a low of about 26% of births in the Burlington District Office to a high of just over 60% in the Newport District Office. The statewide rate was 36.5%.



We also see variation in mother’s Medicaid enrollment at birth by region. Springfield and Brattleboro have the highest percentage of those participating in Medicaid but not WIC. Newport and St. Johnsbury have the highest percentage of those participating WIC but not Medicaid.

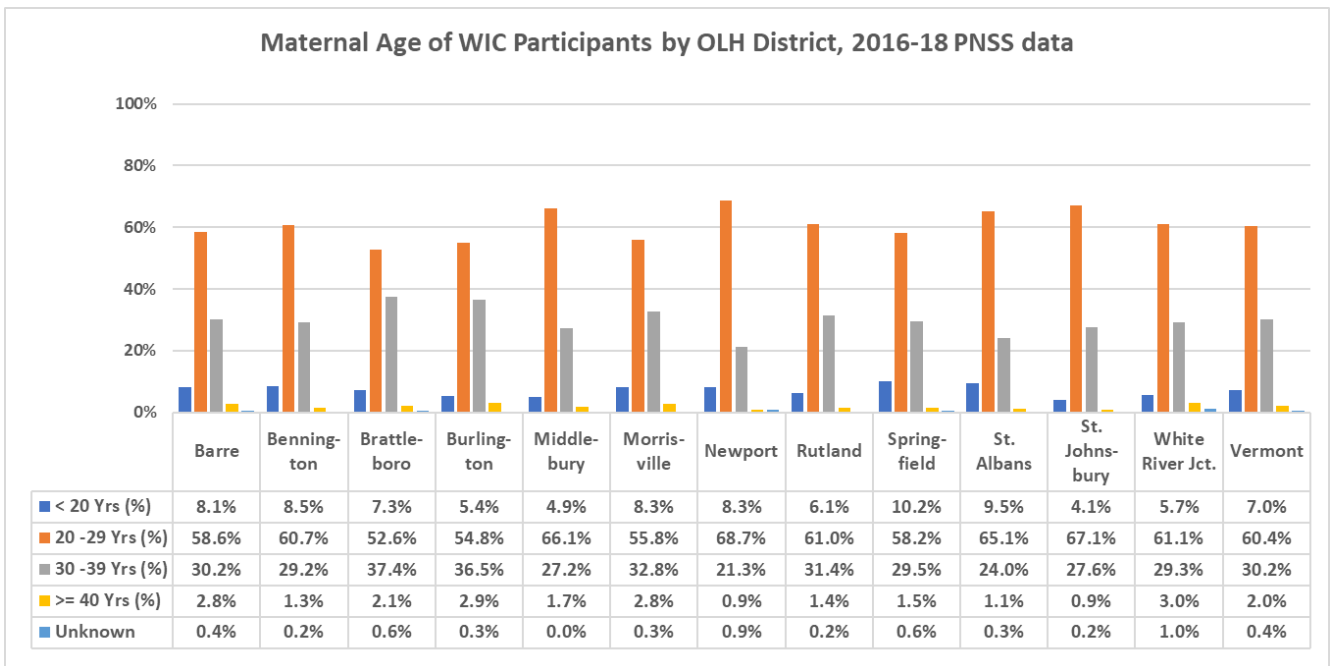


Additionally, while the rate of Medicaid enrollment among WIC recipients has remained consistent since 2011 at around 83%, WIC enrollment among Medicaid recipients has decreased from 78.2% to 66.7% in the same timeframe.

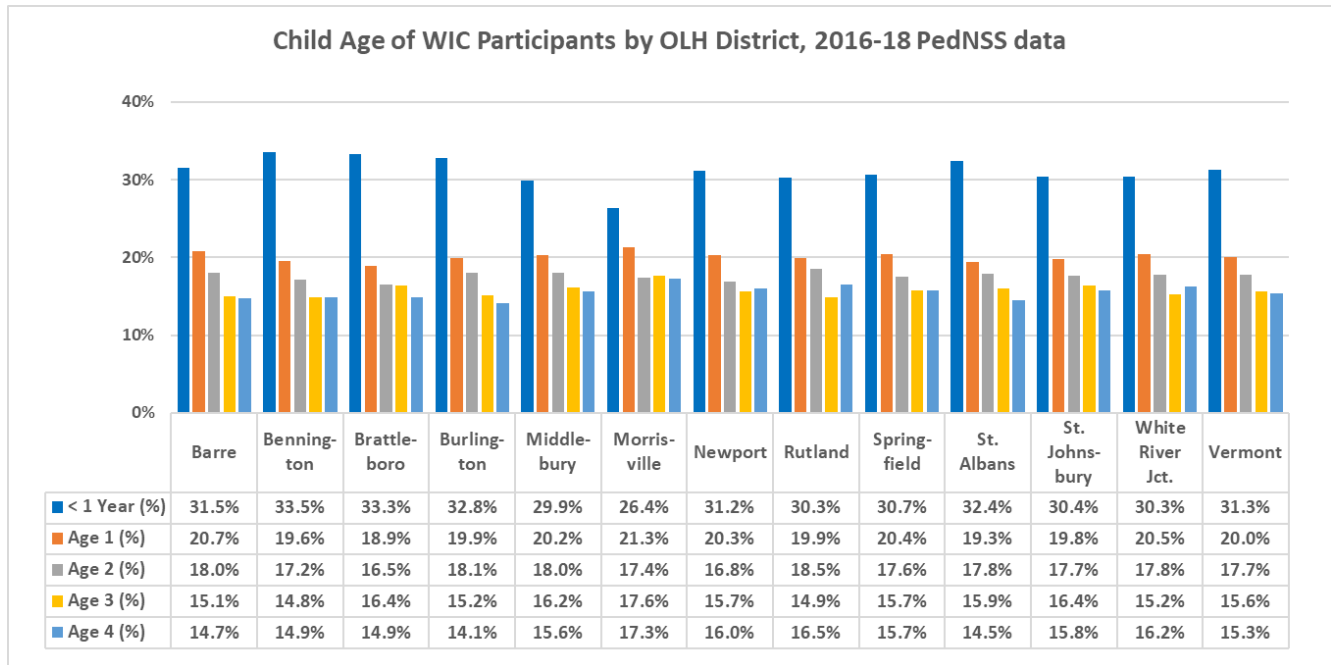


Age

The majority of pregnant and postpartum WIC participants fall into the 20-29 year-old age group with some variation across the state.

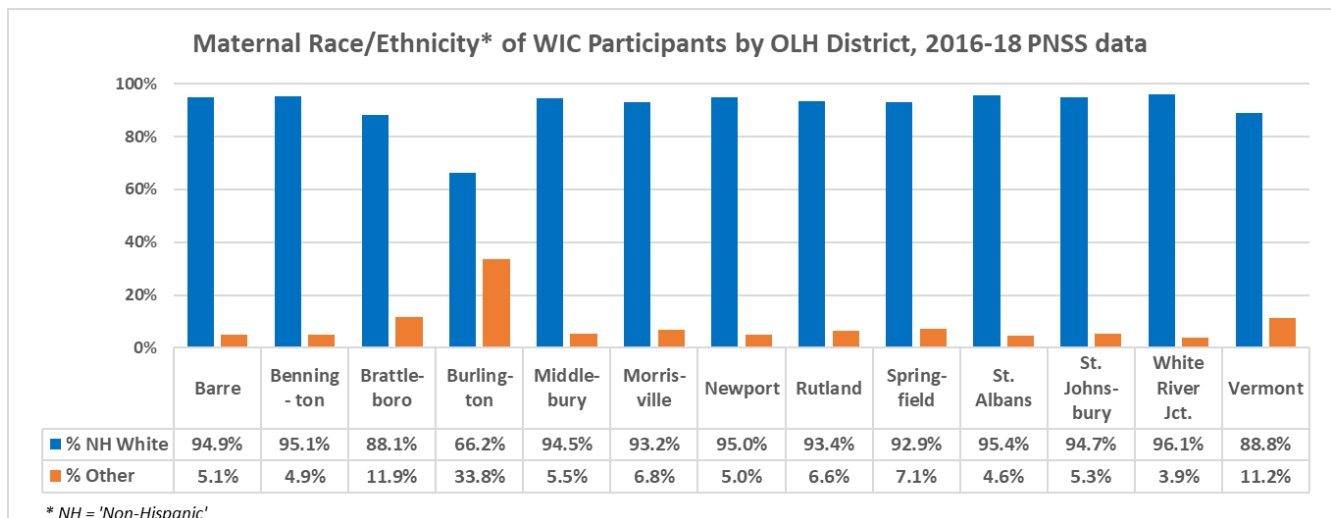


For children, about one-third of participants are less than 1 year old, with a steady decline seen by year as children age. This has stayed consistent since 2016 when eWIC rollout was completed.

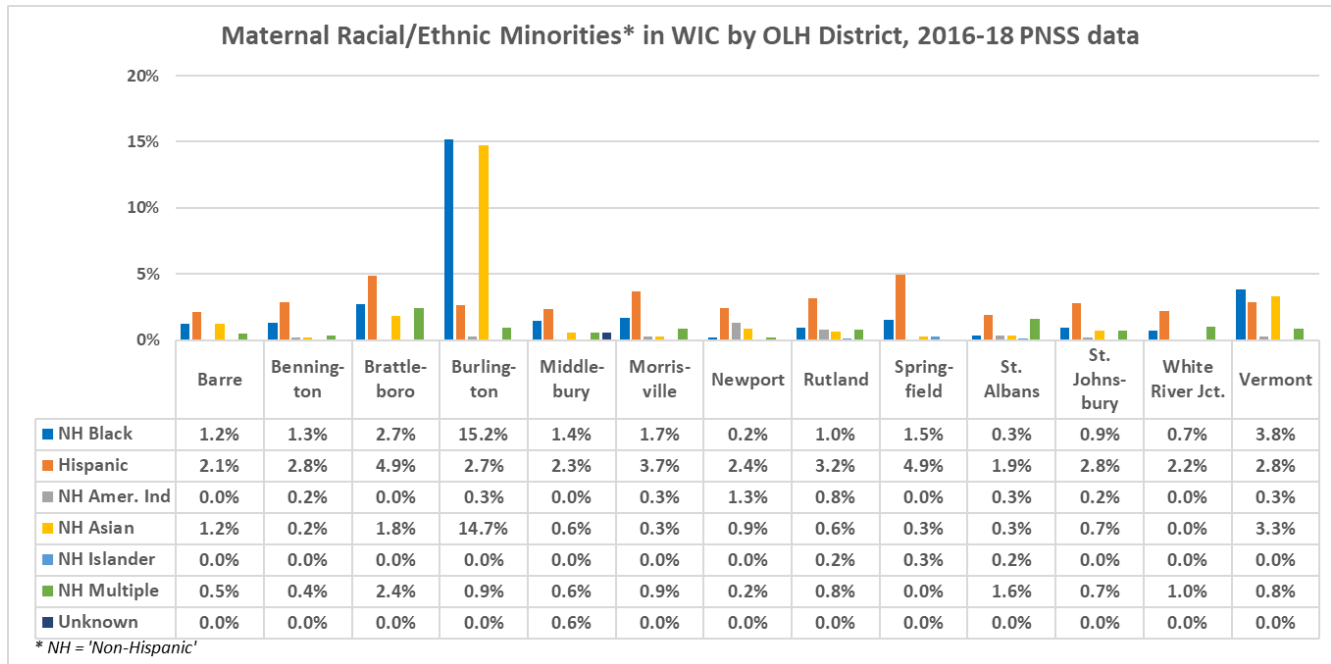


Race & Ethnicity

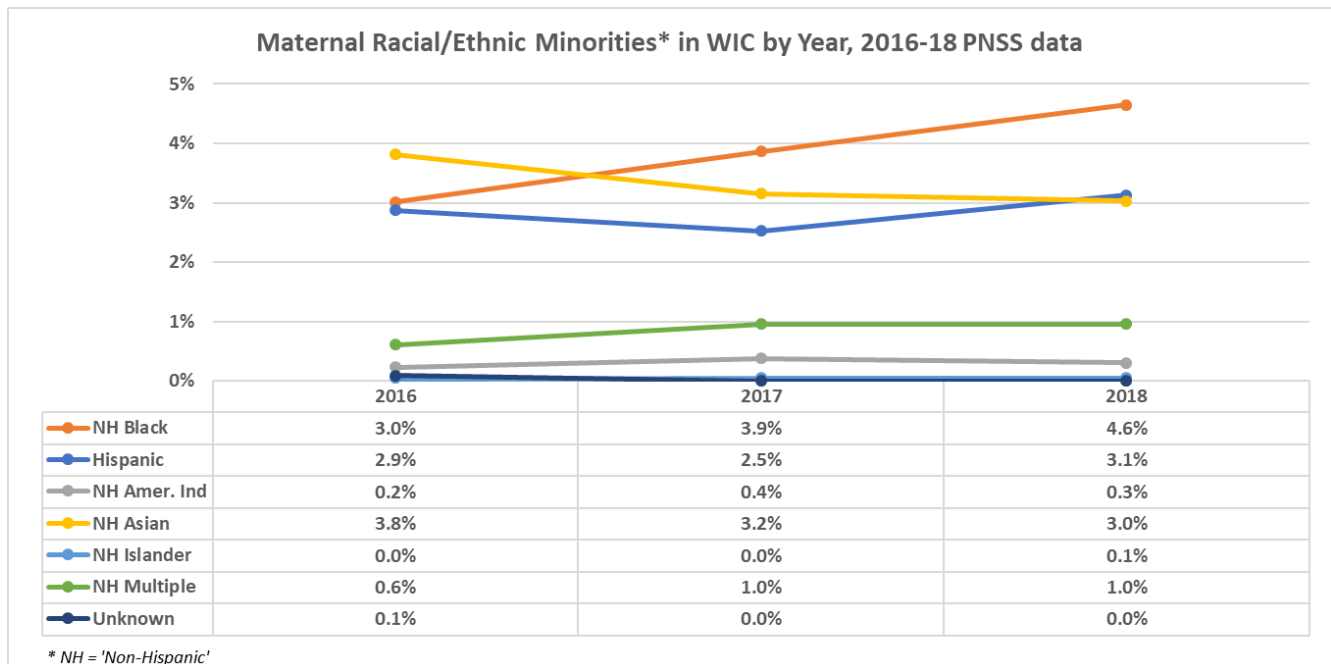
In the Burlington District Office, about one-third (33.8%) of pregnant and postpartum participants identified as other than White from 2016-2018. Burlington has the largest caseload which influences the statewide percentage of just over 11%.



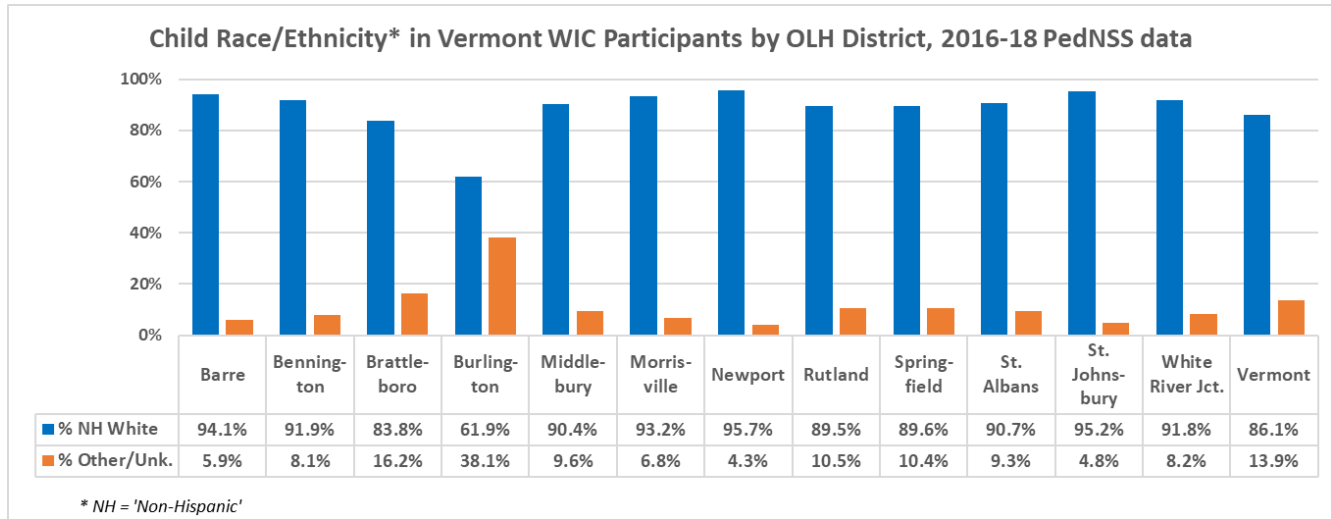
Further breakdown with those who identify as other than White can also be seen by region. Burlington has higher percentages of Black Non-Hispanic and Asian Non-Hispanic pregnant and postpartum WIC participants, influenced by the refugee resettlement communities located in that region. Brattleboro and Springfield have the highest percentages of Hispanic participants, both at 4.9%.



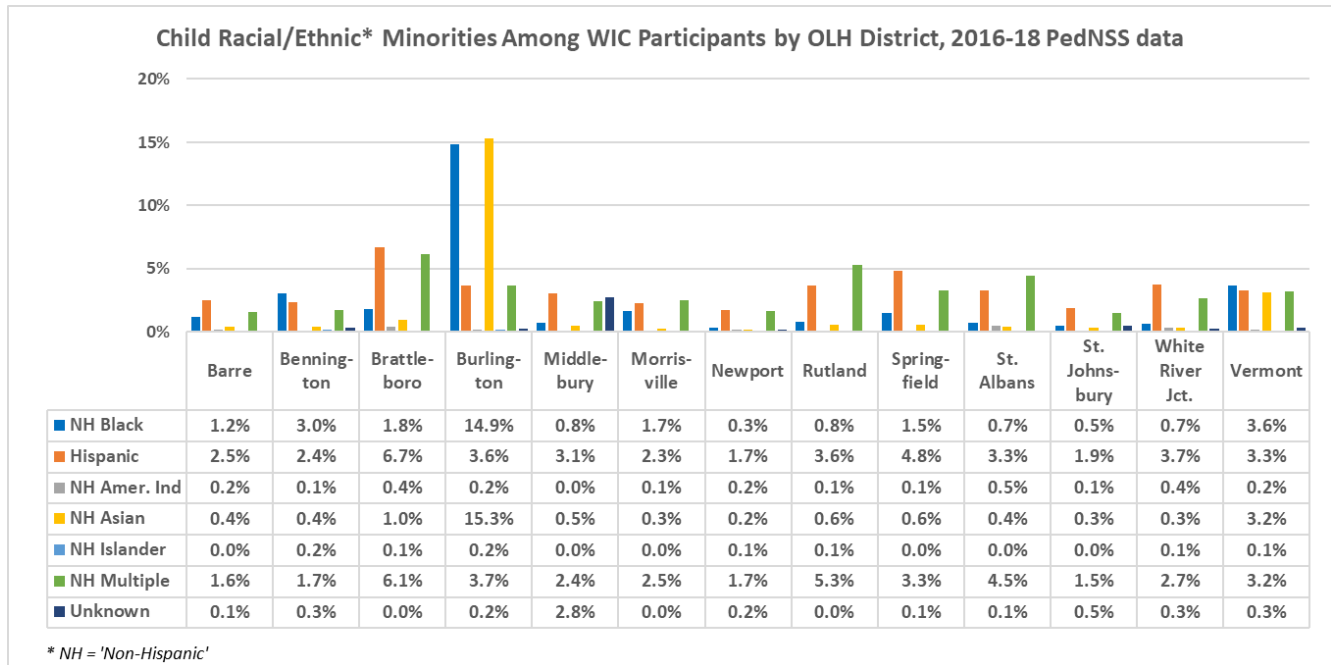
There are also small changes seen over time. Additionally, White Non-Hispanic participants has decreased slightly from 2016 (89.3%) to 2018 (87.9%)



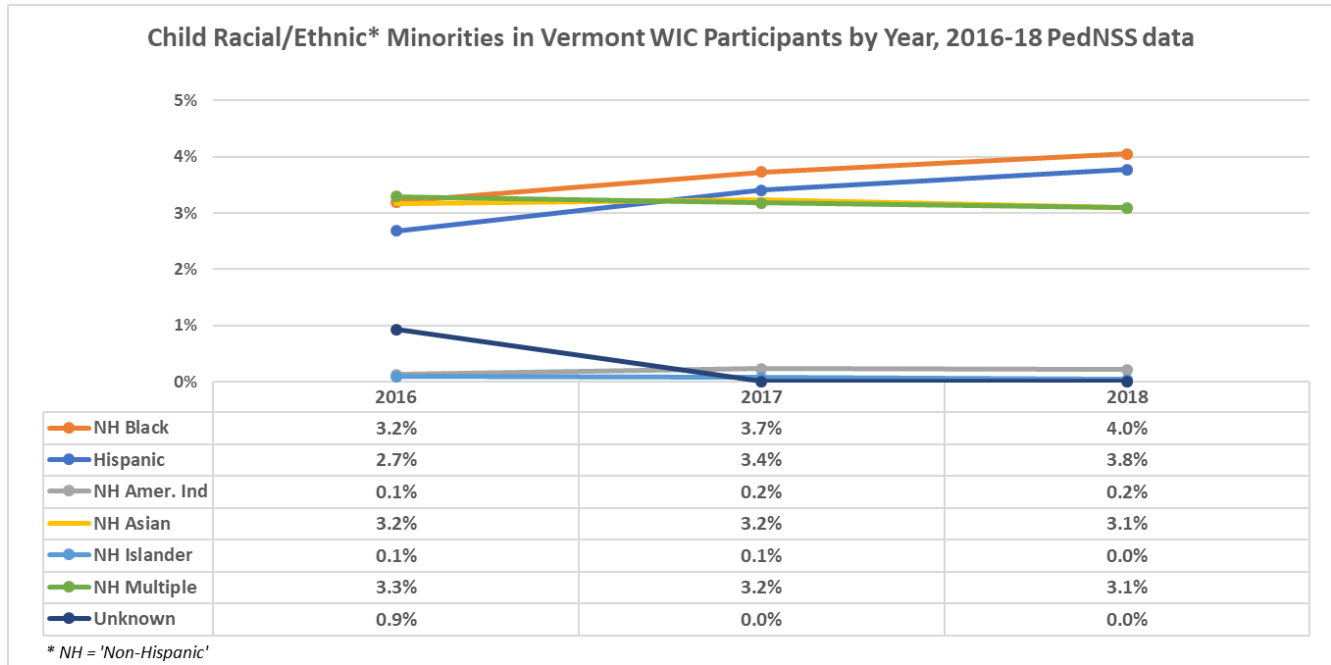
Similar data are seen with child participants. Burlington has the highest percentage of those who identify as other than White Non-Hispanic at 38.1%.



As seen with pregnant and postpartum WIC participants, Burlington has the highest percentages of Black Non-Hispanic and Asian Non-Hispanic child participants. Newport and St. Johnsbury have the least racial and ethnic diversity among child participants in the WIC program.



There are small changes in the Black and Hispanic populations seen over time. Non-Hispanic White child participants have also decreased slightly over time moving from 86.5% in 2016 to 85.7% in 2018



Data Notes

The Standard Monthly Participation Report is run directly from the WIC Management Information System. It is a count of all active participants who have received benefits within the month.

In Vermont Vital Statistics data, WIC status is drawn from the birth file. It represents women who are receiving WIC benefits at the time of birth. Therefore, the WIC data status assignment does not include women who enroll in the WIC program in the postpartum period which differs from the WIC status assignment in the PNSS.

The PedNSS (Pediatric Nutrition Surveillance System) provides data on prevalence and trends for nutrition-related indicators for children (infants and children < 5 years of age) participating in WIC. This population is not representative of the Vermont child population and findings reported here should not be generalized outside the population receiving WIC services.

The PNSS (Pregnancy Nutrition Surveillance System) provides prevalence and trends for nutrition, health and behavioral indicators in pregnant and postpartum women enrolled in Vermont’s WIC program. This population is not representative of Vermont’s pregnant and postpartum populations and findings reported here should not be generalized outside the population receiving WIC services.

Citations

1. National WIC Association (2018) WIC Outreach and Retention Survey Report. Available online: <https://s3.amazonaws.com/aws.upl/nwica.org/outreach-and-retention-survey-report-2018.pdf>

Contact Information

For questions related to this data brief, please contact the Vermont WIC Program by email at wic@vermont.gov or by phone at 800-649-4357 or 802-863-7333.