



NATIONAL WIC ASSOCIATION 2018 NUTRITION AND PUBLIC HEALTH POLICY PRIORITIES

THE SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS, AND CHILDREN (WIC) WORKS IN TANDEM WITH OTHER PUBLIC PROGRAMS TO IMPROVE HEALTH OUTCOMES FOR LOW-INCOME FAMILIES. THE NATIONAL WIC ASSOCIATION (NWA) ADVOCATES FOR CONTINUED FEDERAL AND STATE SUPPORT FOR PROGRAMS AND PUBLIC POLICIES THAT COMBAT FOOD INSECURITY AND ENHANCE HEALTH OUTCOMES FOR WIC PARTICIPANTS AND THEIR FAMILIES.

NWA 2018 POLICY PRIORITIES

1. Support Nutrition Assistance Programs – Including SNAP
2. Expand Access to Quality Care through Public Health Programs
3. Advance Policies that Reflect the Realities of Pregnancy and Raising Children
4. Maintain Science-Based Nutrition Standards and Food Labels

1. SUPPORT NUTRITION ASSISTANCE PROGRAMS – INCLUDING SNAP

Due to food insecurity, WIC families are often enrolled in other nutrition assistance programs – particularly the Supplemental Nutrition Assistance Program (SNAP), school meals programs, and the Child and Adult Care Food Program (CACFP).

SNAP alone serves over 42 million participants – nearly six times the size of WIC.¹ WIC agencies work closely with their nutrition program counterparts to cross-refer eligible participants, streamline services and the application process, and build vendor relationships. Federal nutrition programs should be adequately funded and should not be subject to any structural changes that could negatively impact participation by eligible children and families.

2. EXPAND ACCESS TO QUALITY CARE THROUGH PUBLIC HEALTH PROGRAMS

As a public health program, WIC plays a critical role in screening for and monitoring nutritional and growth deficits, while also referring participants to medical professionals for diagnosis and appropriate treatment. Nearly 70% of WIC participants are enrolled in Medicaid.² WIC participants that are not enrolled in Medicaid often rely on the Children’s Health Insurance Program (CHIP) or the Affordable Care Act (ACA) marketplaces to obtain insurance coverage. Federal and state policy should be focused toward increasing coverage rates, lowering premium costs, and addressing preventative and urgent care needs.

3. ADVANCE POLICIES THAT REFLECT THE REALITIES OF PREGNANCY AND RAISING CHILDREN

Family-oriented policies that reflect the reality of pregnancy and raising young children should be advanced. Pregnant women and new mothers in the workforce deserve stronger protections to avoid discrimination and job loss – including paid family

leave, which is associated with significant positive health effects for young children, breastfeeding rates, and parental involvement.³ Furthermore, breastfeeding women can face unsupportive work environments. Federal and state laws should ensure access to hygienic and private lactation spaces both in the workplace and in public spaces.⁴

4. MAINTAIN SCIENCE-BASED NUTRITION STANDARDS AND FOOD LABELS

Improvements in public health require strong science-based nutrition standards for federal programs and comprehensive food labeling to inform consumers and support healthy decision-making. Evidence-based standards should be applied during the development of the Dietary Guidelines for Americans and the Guidelines for pregnancy, infants, and toddlers through 24 months (P-24 Guidelines) as well as in updates to the school meals programs and CACFP.

¹ United States Department of Agriculture, Food and Nutrition Service (2017) SNAP Program Data. Accessed online: <https://www.fns.usda.gov/pd/supplemental-nutrition-assistance-program-snap>.

² United States Department of Agriculture, Food and Nutrition Service (2015) WIC Participant and Program Characteristics 2014. Accessed online: <https://www.fns.usda.gov/wic/wic-participant-and-program-characteristics-2014>.

³ Gomby DS, Pei D-J (2010) Newborn Family Leave: Effects on Children, Parents, and Business. A Publication of the David and Lucile Packard Foundation. Accessed online: <http://paidfamilyleave.org/pdf/NebwornFamilyLeave.pdf>.

⁴ Murtagh L, Moulton AD (2011) Working Mothers, Breastfeeding, and the Law. American Journal of Public Health, Vol.101 Issue 2, pp. 217-23. Accessed online: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3020209/>.