

## The WIC Program in Illinois

The Special Supplemental Nutrition Program for Women, Infants, and Children, known as WIC, is funded and administered by the Food and Nutrition Service of the U.S. Department of Agriculture (USDA) in partnership with states and local agencies. Its purpose is to serve as an adjunct to good health care during critical times of growth and development in order to prevent health problems. WIC serves pregnant women (through pregnancy and up to six weeks after birth or after pregnancy ends), breast-feeding women (up to the infant's first birthday), and non-breast-feeding women (up to six months after the birth of an infant or after the pregnancy ends), as well as infants up to their first birthday and children up to age 5. Poverty and an identified medical or nutritional risk are two eligibility criteria. Nutritious foods, nutrition education, and referrals to maternal and child health services are among the program's benefits. WIC serves 45 percent of all infants born in the United States.

In Illinois WIC is administered by the Illinois Department of Human Services (IDHS). Benefits are available in all 102 Illinois counties at more than 220 locations of county health departments, community action agencies, and hospitals. To participate in the program, WIC applicants must be pregnant, breast-feeding or non-breast-feeding postpartum women; infants; or children up to age 5. Applicants must be individually determined to be at nutritional risk by a health professional. Nutritional risk can be such problems as an inadequate diet, history of high-risk pregnancy, child-growth issues, and homelessness. Also, to qualify, an applicant's income must be [at or below 185 percent of the federal poverty level](#).

Essential to the nutrition and health of low-income women and children, WIC provides specific nutrients based on needs at various stages of development: infant cereal, iron-fortified adult cereal, vitamin C-rich fruit or vegetable juice, eggs, milk, cheese, peanut butter, dried and canned beans or peas, and canned fish. Soy-based beverages, tofu, fruits and vegetables, baby foods, whole wheat bread, and other whole-grain options were recently added to meet participants' cultural and nutritional needs better.

Basic nutrition education—notably breast-feeding promotion and support—is the core of WIC services. Nutrition education assists WIC participants on infant and toddler feeding, breast-feeding instruction, prenatal weight gain, anemia, child growth and development, and other nutrition-related health issues. Another essential element of WIC is to encourage and facilitate access to early prenatal care, health screenings, and preventive care through referral and outreach. Accordingly WIC serves as a gateway into the health care system. In fact, around [95 percent](#) of children participating in WIC are enrolled in All Kids, the Illinois children's health insurance program.

Knowing that WIC improves children's health, doctors and health professionals refer women and children to WIC every day. As reported by [IDHS](#), in Illinois approximately 40 percent of all children born participate in WIC. In the 2009 fiscal year, 309,870 participants received WIC in Illinois, according to [USDA's WIC Program Data](#). Of those participants,

- 28 percent are infants;
- 48 percent are children; and
- 24 percent are either pregnant, postpartum, or breast-feeding women.

Not surprisingly, USDA data show significant increases in Illinois participation rates for [the 2008 and 2009](#) fiscal years over previous years—a slower, steady rise over time.

The WIC program has been showing a consistent positive impact on maternal nutritional status, birth outcomes, and child development. Research from [USDA, U.S. Government Accountability Office, and Children’s HealthWatch](#) illustrates the following WIC-attributed benefits for women and children:

- Increased number of women receiving prenatal care and reduced incidence of low birth weight and fetal mortality;
- Improved rates of childhood immunization;
- Increased rate of breast-feeding;
- Decreased risk of developmental delays in young children; and
- Increased participation among pregnant women and families in the broader health care and social service system.

### **WIC Eligibility by State and Congressional District**

The [Urban Institute](#) released in March a report analyzing the number of children who are income-eligible in each state for the WIC program. The report, “[WIC Income Eligible Children by Congressional District and State](#),” looks at children who are up to 5 years old and live in families with incomes under 185 percent of the federal poverty level, making them WIC-eligible by income. The analysis informs congressional members how many young eligible children in their districts and state are potentially affected by WIC legislation and the forthcoming reauthorization. It also enumerates the infants, toddlers, and young children who are growing up in low-income families and thus are vulnerable during a critical window of their development.

In Illinois 36 percent of children up to 5 years old, or about 318,700 children, are WIC-eligible by income. Additional children are eligible due to their enrollment in Medicaid; these children are not covered in the Urban Institute report. Compared to other states, Illinois ranks thirty-fifth out of fifty states, with Mississippi having the highest percentage of children income-eligible at 54 percent and New Hampshire having the lowest percentage at 24 percent. A closer look at a few congressional districts in Illinois reveals the following numbers of children to be WIC income-eligible:

- 61 percent, or 34,700 children, in [District 4](#), covering the west, northwest, and southwest sides of Chicago;
- 53 percent, or 23,700 children, in [District 1](#), covering Chicago’s South Side and part of the southwest suburbs;
- 49 percent, or 18,300 children, in [District 17](#), covering much of west-central Illinois; and
- 38 percent, or 15,300 children in [District 19](#), which encompasses a large stretch of rural Southern Illinois, part of Springfield, and the outer St. Louis suburbs.

### **WIC Reauthorization**

The [federal child nutrition programs](#), including WIC, expired in September 2009. Congress passed a one-year extension of the programs and should act to reauthorize them this year. This opportunity is key to ensuring adequate support for these critical programs so that more children have access to the nutritious food they need for healthy development.

The [Food Research and Action Center](#) recommends modernizing and streamlining WIC program operations by creating electronic benefit transfers (EBT) for WIC participants throughout the country. Similar to the method that distributes funds for the Supplemental Nutrition Assistance Program (SNAP), formerly known

as the Food Stamp Program, this would make it easier for mothers and young children to access WIC foods, protect program integrity, and achieve efficiency in the delivery of WIC services.

To find out more about WIC in Illinois (e.g., what documents are needed to enroll) or to locate the nearest office, call 800-323-4769. For specific questions about WIC food packages, contact [IDHS, Bureau of Family Nutrition](#), at 217-782-2166. Additional information regarding eligibility, participation, and other WIC-related material can be found at the USDA's Food and Nutrition Services' website, <http://www.fns.usda.gov/wic/>

For other information, contact Wendy Pollack, director, Women's Law and Policy Project, Shriver Center, at 312-368-3303 or [wendypollack@povertylaw.org](mailto:wendypollack@povertylaw.org).

Published by the SARGENT SHRIVER NATIONAL CENTER ON POVERTY LAW. Funded in part by generous grants from the Chicago Foundation for Women, the Jo & Art Moore Family Fund, and The Libra Foundation.