

HER NOPREN Summer Speaker Series for Students
[Special Supplemental Nutrition Program for Women, Infants, and Children \(WIC\)](#)

[Overview](#)

Recorded July 29, 2020

[Link to Call Recording](#)

[Link to Slides](#)

About Our WIC Panelists

[Caroline G. Dunn, PhD, RDN](#), Research Associate, Department of Health Policy and Management, Harvard TH Chan School of Public Health – Caroline’s research largely focuses on examining the adoption and implementation of federal, state, local, and organizational policies aimed at improving child nutrition. Caroline completed her master’s in human nutrition and a coordinated program in dietetics at the University of Alabama and received her doctorate in Public Health from the University of South Carolina Arnold School of Public Health. Caroline also serves as the fellow for the NOPREN/HER Ad hoc Joint Working Group on COVID-19 School Nutrition Implications.

[Elisabet Eppes, MPH](#), Program Innovation Director, National WIC Association - Elisabet currently serves as Program Innovation Director at the National WIC Association (NWA). During her five years at NWA, Elisabet has worked on several different teams, including Community Partnerships, Government Affairs, and Research and Innovation. In her current role, Elisabet is responsible for directing NWA’s activities related to WIC program innovation, focusing on those aimed at improving the WIC participant experience. Elisabet’s background includes a Bachelor of Science in Biobehavioral Health from the Pennsylvania State University and a Master of Public Health with a concentration in Nutrition from the University of Washington.

[Ruth Morgan, MPH](#), Social Science Research Analyst, USDA Food and Nutrition Service Office of Policy Support, Special Nutrition Evaluation Branch – Ruth manages a portfolio of WIC research and evaluation contracts and has been with FNS for four years. Before joining USDA, Ruth was a Senior Policy Associate at the Altarum Institute, where she provided technical research and evaluation support to several FNS WIC and SNAP studies and other nutrition program evaluations, including Share Our Strength’s Cooking Matters program. Prior to Altarum, she worked on health food access projects for The Food Trust of Philadelphia as program evaluator, farmers’ market manager, and nutrition educator. Ruth holds a Master’s degree in public health from Drexel University and a Bachelor’s degree in biology and society from Cornell University. She currently resides in Washington, DC with her husband, Kosal, and daughter, Madeline.

[Courtney Paolicelli, DrPH, RDN, LD, CDE, CHES](#), Team Lead for WIC Evaluation Research, USDA Food and Nutrition Service Office of Policy Support, Special Nutrition Evaluation Branch - Courtney started her career as a WIC dietitian in San Diego, CA, and worked in a variety of other public health and clinical settings before beginning her tenure with USDA in 2014. She is also a commissioned Officer in the US Army Reserve,

and is currently assigned to the US Military-Baylor University Graduate Program in Nutrition as an Assistant Professor. She received her Doctorate of Public Health from the University of Texas-Health Science Center in 2012, and her Master of Public Health in Nutrition from UNC-Chapel Hill in 2004. She currently resides in Alexandria, VA, with her husband, Lt Col Mark Paolicelli, US Marine Corps, their daughter, Molly, and their goldendoodle, Winston.

Elizabeth Racine, DrPH, RDN, Professor of Public Health Sciences, University of North Carolina at Charlotte, Department of Public Health Sciences – Elizabeth is interested in understanding the incentives and barriers to healthy eating and physical activity among different populations in the Charlotte region, the US, and in other countries. Locally, she has evaluated a number of programs such as the Latino Food and Fun Program, Achieve 225—a purposeful play intervention in Charlotte-Mecklenburg Schools, and Building Healthy Lifestyles in All Directions—a nutrition and physical activity intervention in Cabarrus County Childcare Centers. Nationally, she has evaluated the impact of food assistance programs on diet quality and food security. She has evaluated elements of the WIC program, the Farmers' Market Nutrition Program, the Supplemental Nutrition Assistance Program, and SOS—a home delivered feeding program similar to Meals on Wheels. Internationally, she partners with colleagues in India to study the impact of economic development on food security, infant feeding practices, and obesity. She earned her BS in Economics at Boston University, MS in Nutrition at California State University at Los Angeles, MPH in Maternal and Child Health (MCH) at Johns Hopkins School of Public Health, and DrPH in MCH & Health Economics and Finance at Johns Hopkins Bloomberg School of Public Health

QA during the session via chat

Q: Are the WIC purchase data reflecting monthly purchases?

A: Yes monthly – <https://www.fns.usda.gov/wic/wic-food-packages-maximum-monthly-allowances>

Q: Is the waiver for remote approval permanent or temporary?

A: Temporary - <https://www.fns.usda.gov/disaster/pandemic/covid-19#:~:text=Extended%20Benefits%20Issuance%20Waivers%3A%20FNS,during%20the%20COVID%2D19%20pandemic.&text=WIC%20agencies%20must%20still%20conduct,local%20agency%20at%20least%20biennially>.

Extensions of Approved Waivers - FNS is extending all currently active waivers through September 30, 2020 for all WIC state agencies that choose to continue operations under such waivers.

Extensions of Approved Waivers - FNS is extending waiver approvals through June 30, 2020 for all WIC state agencies that choose to continue operations under their approved waivers

Additional Funding for WIC: FNS is providing up to \$500 million in additional funding to cover increases in program participation.

Physical Presence Waivers: FNS is allowing participants to enroll or re-enroll in WIC without visiting a clinic in person and postpone certain medical tests.

Remote Benefit Issuance Waivers: FNS is allowing WIC agencies to issue benefits remotely so participants don't have to pick up their WIC benefits in person.

Food Package Substitution Waivers: FNS is allowing WIC agencies to substitute certain food package items when availability is limited. Agencies can also change their approved-foods lists as needed.

Minimum Stocking Requirements Waivers: FNS is working with states to address supply challenges for stores that accept WIC.

Extended Benefits Issuance Waivers: FNS is allowing WIC state agencies to issue up to four months of benefits on EBT cards at one time, to reduce the need for contact with WIC staff during the COVID-19 pandemic.

WIC and Food Distribution Q&As: Information on the WIC and food distribution programs in response to COVID-19, including authorities as provided through FFCRA.

Treatment of Funds Received Under the Coronavirus Aid, Relief, and Economic Security Act (CARES Act): An overview of the treatment of rebates and additional unemployment benefits provided by the CARES Act when conducting a WIC income eligibility determination.

Benefit Issuance 4 Month Offline – FNS is allowing WIC agencies to issue up to four months of WIC benefits on EBT cards at one time for those State agencies with offline systems.

Food Package Medical Documentation – FNS is allowing state agencies to waive medical documentation for existing participants that are unable to contact their health care provider. Existing benefits may be extended for up to two months.

Local Agency Monitoring – FNS is allowing WIC agencies to conduct local agency monitoring reviewing virtually instead of onsite. WIC agencies must still conduct monitoring reviews of each local agency at least biennially.

Separation of Duties – FNS is allowing single employees to determine eligibility for all certification criteria and issuing food instruments, cash-value vouchers, or supplemental food for the same participant at WIC agencies to promote social distancing at time of certification.

Vendor Pre-authorization –FNS is removing the requirement for onsite pre-authorization visits and allowing these visits to be done onsite after the public health emergency and applicable state and local social distancing orders are lifted.

Compliance Investigations – FNS is allowing WIC agencies to waive conducting compliance investigations of a minimum of five percent of the number of vendors authorized.

Non-Retail 2 Month Issuance –FNS is allowing those state agencies using a home delivery and/or direct distribution systems to issue two months of exempt infant formula at one time.

FMNP Training –FNS is allowing FMNP state agencies to conduct initial training remotely.

FMNP Agreement – FNS is allowing FMNP state agencies to extend currently expiring agreements with authorized farmers, roadside stands, and/or farmers' markets by one year.

Vendor Agreement Extension –FNS is allowing state agencies to postpone some vendor reauthorization actions by extending expiring vendor agreements by one year.

Transaction without Presence of Cashier – FNS working with state agencies to find new ways to allow WIC transactions.

Direct Distribution – FNS is allowing WIC agencies that currently operate direct distribution models to issue two months of benefits to participants at one time due to closures and need for social distancing.

Q: Were there requests for any of these waivers or policy changes before COVID?

A: Yes, some of these requests have been things WIC stakeholders have wanted pre COVID and hope some of these get extended post pandemic - see this recent Issue Brief - <https://healthyeatingresearch.org/research/strengthening-wics-impact-during-and-after-the-covid-19-pandemic/>. NWIC also noted they have been asking for more remote service provision in WIC for many years! So that was a silver lining with the pandemic, that we had the impetus to quickly switch to remote services.

Q: Is there any talk of updating the food packages any time soon since the last update was in 2009?

A: We are waiting on USDA to implement the recommendations of the NASEM expert committee, who published their review of the WIC food packages in 2017

<https://www.fns.usda.gov/wic/wic-food-packages> -

<https://www.nap.edu/catalog/23655/review-of-wic-food-packages-improving-balance-and-choice-final>

<https://pubmed.ncbi.nlm.nih.gov/28689558/>

<https://pubmed.ncbi.nlm.nih.gov/26276067/>

<https://pubmed.ncbi.nlm.nih.gov/32452523/>

Q: Is WIC as fluid as SNAP in response to the state of the economy?

A: Yes, as noted in the recent HER Issue Brief, we expect an increase in enrollment during the pandemic and economic recovery.

<https://healthyeatingresearch.org/research/strengthening-wics-impact-during-and-after-the-covid-19-pandemic/>

Updated Suggested USDA WIC Readings & Resources:

- <https://www.nwica.org/overview-and-history>
- www.thewichub.org

- <https://www.ers.usda.gov/publications/pub-details/?pubid=43927>
- <https://www.nap.edu/resource/23655/WIC-timeline.pdf>
- <https://www.nap.edu/catalog/21832/review-of-wic-food-packages-proposed-framework-for-revisions-interim>
- <https://www.fns.usda.gov/wic/wic-ebt-activities>
- <https://healthyeatingresearch.org/research/strengthening-wics-impact-during-and-after-the-covid-19-pandemic/>

Additional NWA Remarks

Elisabet – What do you hear from folks on the Hill, state administrative agencies, retailers, food manufacturers, participants, health professionals, or other stakeholders about the benefits of WIC? 2 minutes.

- I think all of these stakeholders would largely echo what Caroline described in terms of the impacts of WIC on health and developmental outcomes.
- WIC is generally supported by policymakers on both sides of the aisle. However, we tend to highlight different WIC benefits to different audiences. When we message WIC to more conservative policymakers, we do tend to focus on the cost savings as mentioned by Caroline. We stress that fully funding WIC will lead to dramatic healthcare and other cost savings in the future.
- To explore the latest research related to the benefits of WIC participation, I encourage you to check out the WIC Hub, at www.thewichub.org.

Elisabet – Can you please explain what the public charge rule is and how it intersects with the WIC population?

- Certain federal programs limit eligibility for noncitizens. Many immigrants must wait at least five years before obtaining eligibility for SNAP benefits, for example. One of the great things about WIC is that it is one of the few programs that Congress elected not to limit eligibility on the basis of citizenship or immigration status. With the exception of one state (Indiana), WIC agencies do not ask for information about a client's (or potential client's) immigration status.
- However, beginning in early 2017, the Trump administration has been engaged in harmful rhetoric and policy proposals to expand the definition of "public charge," an arcane element of immigration law that allows federal authorities to deny legal status to individuals who are determined to rely on government assistance. Individuals determined to be a "public charge" can be denied a visa or green card. Historically, an individual could be found to be a public charge if they had accessed a limited range of federal benefits – specifically cash assistance (i.e., the Temporary Assistance for Needy Families, or TANF, program) and long-term institutional care under certain Medicaid plans.

- In response to these policy proposals, WIC clinics across the country have reported a heightened level of fear among immigrant and mixed-status families participating in WIC services, prompting eligible families to refuse to access vital nutrition and breastfeeding support. Due to this fear, families have sought to withdraw from WIC services, returning food benefits and breast pumps to clinic sites. Hispanic coverage rates declined nationally by 10% in 2017, signaling that fewer eligible Hispanic families are accessing WIC services. Participation has decreased significantly at clinics in high-immigrant communities, with local agencies in at least 18 states reporting a decline of at least 20% of their caseload. This trend is consistent across all immigrant communities, and immigrant parents of U.S. citizen children have also sought to withdraw their US citizen children from WIC services.
- In August 2019, the department of Homeland Security (DHS) issued a final rule that expanded the federal programs that could be used in public charge determinations. This new rule went into effect nationwide on February 24, 2020. The rule allows the consideration of Medicaid, SNAP, and housing subsidies use – marking a significant expansion of what types of benefits could constitute a public charge finding. WIC is not included in the final public charge rule and is expressly excluded from consideration in public charge determinations, which we are grateful for (and is the result of a lot of hard work by NWA and our advocacy partners).
- However, although WIC is explicitly excluded from the final rule, WIC agencies continue to report challenges with reaching immigrant families, as many families are opting to not participate in any federal programs out of an abundance of caution,

Elisabet - Please share what city, state, tribal, and federal decision makers are most interested in considering for ways to strengthen the public health impacts of WIC.

- I'm going to focus on some priorities we have for the next Child Nutrition Reauthorization process, which we expect to be taken up by the next Congress. Our legislative asks are developed in partnership with our state and local agency members through our Legislative Committee, and our Board of Directors also has a chance to weigh in. Here are some policy changes we are pushing for:
 - Extension of eligibility for postpartum women and young children, to address existing nutrition gaps and improve health outcomes;
 - Establishing an online purchasing solution for WIC transactions;
 - Relaxing statutory physical presence requirements to enable ongoing remote services for WIC participants;
- Ultimately we would like to see WIC become a universal program, with services either being provided through USDA funding or through insurance coverage.

- Turning to regulatory changes, we are hoping that USDA revises the WIC food package in the near term to reflect the recommendations of the NASEM expert committee.
- Now, let's discuss the historical and contemporary role of states in strengthening the public health impacts of WIC, including WIC Vendor Authorization. And, please explain the role of research in developing, implementing, evaluating, disseminating, and sustaining intervening strategies to strengthen the public health impacts of nutrition and physical activity within the first 1,000 days. (2 minutes)
 - Because WIC is administered by state agencies, states have a lot of power to advance policies and procedures that have the potential to improve WIC's public health impact. We generally encourage states to adopt policies that promote choice and flexibility in WIC and make WIC as easy to access as possible. We also encourage states to build strong partnerships with key stakeholders such as Medicaid and SNAP offices for targeted outreach as well as WIC vendors and technology providers to ensure a positive WIC shopping experience.
 - Turning to the importance of research, methodologically rigorous qualitative and quantitative research studies are essential in order to document WIC's impact and identify areas for improvement. WIC has a strong history of rigorous program evaluation and using data to inform both policy and program management decisions. NWA strongly encourages collaboration between researchers and WIC practitioners, including state and local WIC agencies. In conjunction with our Evaluation Committee, NWA publishes a Research Needs Assessment once every two years that describes gaps in WIC research. We encourage researchers to consult our Research Needs Assessment as well as our Guidance for Planning Conducting, & Communicating a WIC Research Project, when embarking on a WIC research project. Both of these can be found on our website, www.nwica.org under WIC Research Activities.

To conclude today and help students understand the key needs for WIC during this time, please share some of your elevator speech to your Congressional members, among others, about the importance of investing in this program, particularly during this pandemic and going forward during our economic recovery and efforts to ensure food justice is a part of racial justice. (1 minute)

- WIC is a comprehensive public health program, providing both a monthly financial benefit and robust nutrition education and breastfeeding support for participating families. WIC's monthly benefit averages only \$41 per month and is limited to specific healthy foods tailored to the unique nutritional needs of the participant's developmental stage. This nutrition intervention is proven to improve birth outcomes and reduce healthcare expenditures by mitigating preterm birth and low birthweight, increasing breastfeeding rates among participating mothers, and reducing the prevalence of childhood obesity among participating toddlers.

- Despite these proven benefits, WIC is only serving 51% of eligible individuals, as both programmatic (annual in-person certification requirements) and societal barriers (i.e., transportation, child care, etc.) deter participation, especially by toddlers. WIC is embracing various innovations to modernize the program experience and reach new participants, most notably by phasing out paper checks and introducing electronic-benefit transfer (EBT) cards throughout the 2010s.
- WIC services adapted significantly during the COVID-19 public health crisis. Under the Families First Coronavirus Response Act, WIC agencies were granted waivers of physical presence requirements and able to deliver all services – including onboarding new families – by remote means, including telephone appointments and video conferencing. As WIC normalizes operations, we hope to continue to modernize WIC services to more efficiently deliver nutrition counseling and breastfeeding support.