MONTANA
WOMEN, INFANTS AND CHILDREN

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WIC PROVIDES GOOD FOOD AND A WHOLE LOT MORE!

- WIC is the Special Supplemental Nutrition Program for Women, Infants and Children. This public health program is designed to improve health outcomes and influence lifetime nutrition and health behaviors in a targeted, at-risk population. Nutrition education is the cornerstone of the WIC Program.
**WHAT IS WIC’S HISTORY?**

- **1972:** WIC was piloted as a supplemental food program aimed at improving the health of pregnant mothers, infants and children in response to growing concern over malnutrition among many poverty-stricken mothers and young children.

- **1974:** The first WIC site opened in Kentucky in January.

- **1974:** WIC was operating in 45 States.

- **1975:** WIC was established as a permanent Program by legislation P.L. 94-105.

- **1975:** Eligibility was extended to nonbreastfeeding women (up to 6 months postpartum) and children up to age 5. WIC had initially provided supplemental foods to children up to age 4 and to breast-feeding postpartum mothers.

- **1978:** Legislation introduced new elements into the Program:
  - Nutrition education must be provided.
  - The supplemental foods should contain nutrients found lacking in the target population, and have relatively low levels of fat, sugar, and salt.
  - States needed to coordinate referrals to social services including immunization, alcohol and drug abuse prevention, child abuse counseling, and family planning.

- **1992:** WIC introduced an enhanced food package for exclusively breastfeeding mothers to further promote breastfeeding.

- **1997:** USDA implemented *Loving Support Makes Breastfeeding Work* campaign to increase breastfeeding rates among WIC mothers and improve public support of breastfeeding.

- **2004:** The *Breastfeeding Peer Counselor initiative* was launched: Women with breastfeeding experience and training (often past WIC participants) became counselors to support other women learning to breastfeed.

- **2009:** Based on Institute of Medicine recommendations, USDA introduced a new food package with foods consistent with the Dietary Guidelines for American and established dietary recommendations for infants and children over two years of age. Fruits, vegetables, and culturally sensitive substitutes for WIC foods are now part of the WIC food package. In addition, mothers who exclusively breastfeed receive more healthy foods with the enhanced WIC food package for exclusively breastfeeding mothers.

Pulled information directly from National WIC Association
https://www.nwica.org/overview-and-history
INCOME AND WHO IS ELIGIBLE?

- Income Eligibility starting July 1, 2014
  - HH 1 $21,590
  - HH 2 $29,101
  - HH 3 $36,612
  - HH 4 $44,123
  - HH 5 $51,634
  - HH 6 $59,145

This income puts the family at a low to moderate income and is approximately 185% of the US poverty guidelines.
WHO IS ELIGIBLE?

Categories Eligible

- Pregnant
- Post Partum (with or without infant)
  - Non Nursing to 6 months
  - Nursing to 12 months
- Infants
- Children until the month they turn 5
WHAT FOODS DOES WIC PROVIDE?

- Milk
  - Cow’s, lactose free, goat, and soy milk are available
- Cheese
- Eggs
- Peanut Butter
- Beans, Peas, Lentils
- Cereal
- Whole grain
  - bread, rice or tortillas
- 100% fruit or vegetable juice
- Canned tuna or pink salmon
- Fruits and vegetables
- Infant formulas
- Infant cereal
- Baby foods
- Farmers Market F/V checks available at some WIC offices and to some WIC clients. Not every WIC client gets these.
**WIC Basic Food Packages**

- **Infant**: No checks given if mom is fully nursing. At six months will receive baby foods including f/v and meats.

- **Infant on formula**: Formula checks until 6 months then will get checks with formula and baby food f/v.

- **Children**: 3 gallons milk, 16 ounces of cheese, 1 dozen eggs, 2 containers juice, 36 ounces of cereal, 2 whole grain choices, Peanut butter or beans (client choice), $8 fruit and vegetable benefit.  
  - Children under 2 will get whole milk and children above 2 will get skim or 1%

- **Pregnant**: 4 ½ gallons of milk, 16 ounces of cheese, 1 dozen eggs, 3 containers juice, 36 ounces of cereal, 1 whole grain choice, peanut butter, canned or dried beans, $10 fruit and vegetable benefit.

- **Breastfeeding**: 5 gallons of milk, 32 ounces of cheese, 2 dozen eggs, 3 containers juice, 36 ounces of cereal, 1 whole grain choice, peanut butter, canned or dried beans, 30 ounces of canned tuna or pink salmon, $10 fruit and vegetable benefit.

- **Non Breastfeeding**: 3 gallons of milk, 16 ounces cheese, 1 dozen eggs, 2 containers juice, 36 ounces cereal, peanut butter or beans but not both, $10 fruit and vegetable benefit.
WIC risk factors and need for referral to RD

- Along with client being income eligible the client must have a nutritional risk factor.
  - General risk code if they don’t have another risk factor is “Failure to meet USDA/US Department of Health and Human Services dietary guidelines for Americans.”

- Examples of risk factors for RD referral
  - Under wt, low wt for ht, high wt for ht, obese, short stature, low or high maternal wt gain, FTT, prematurity, GDM or DM, multi-fetal gestation, pregnant woman breastfeeding, food allergies, cancer, renal disease, thyroid disorders, GI disorders, eating disorder, dev or sensory disabilities interfering with ability to eat, DDS problems, homelessness, abuse, inappropriate nutrition practices and others.
Motivational Interviewing/Counseling

- WIC participants don’t just need to know how to be healthier. They need help with two other things before they can begin making health changes:
  - Appreciative Inquiry to Increase confidence
    - Success talk
    - Feeling: pride, confidence, energy
    - In the office: more engaged and receptive to your health messages
    - Leave the office feeling energized, empowered and ready to act
  - Motivational interviewing to increase motivation
    - Change talk
    - Feeling: motivation, determination
    - In the office: more committed to making a change
    - Leave the office more likely to do the behavior.
- We want Mom or Dad to talk;
- Talk about successes and increase her confidence.
- Talk about the change she wants to make and increase her motivation
Nutrition Care Process at WIC

- WIC does SOAP notes. You will need to do the NCP on your own or with the help of a preceptor.
  - Preceptors will discuss NCP with you.
  - SOAP notes should provide you with the information to do the NCP.
# Comparison of SOAP and NCP Note

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<tr>
<th>SOAP note</th>
<th>NCP note</th>
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<tr>
<td><strong>S = Subjective</strong>&lt;br&gt;Self-reported information, history</td>
<td><strong>Assessment</strong> data collected: Food and nutrition history, RD and self-reported data, anthropometric, Hgb, age, weeks gestation comparison to growth standards/percentiles</td>
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<td><strong>O = Objective</strong>&lt;br&gt;Ht, wt, Hgb, WIC Computer/CPA assigned Nutrition Risk Codes</td>
<td><strong>Nutrition Diagnosis:</strong> PES statement</td>
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<td><strong>A = Assessment</strong>&lt;br&gt;CPA/RD assessment of the nutritional history, data, growth, etc</td>
<td><strong>Intervention:</strong> Nutrition counseling, motivational interviewing aimed at impacting the diagnosis</td>
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<td><strong>I: Intervention/Nutrition Education provided</strong>&lt;br&gt;Counseling/Nutrition Education provided&lt;br&gt;Referrals made&lt;br&gt;<strong>Goal:</strong> Client goal</td>
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<td><strong>P = Plan</strong> for follow up to goals and education and plan for future nutrition education.</td>
<td><strong>Monitoring and Evaluation:</strong> Plan to monitor signs and symptoms or progress in achieving goals.</td>
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**ITEMS WE EXPECT YOU TO REVIEW BEFORE COMING INTO YOUR WIC ROTATION**

- Each agency may have things for you to go over before you enter that rotation. Please contact your preceptor via email at least 1 week prior to start of rotation.
  - Common reading materials available in their MDI WIC Community Rotation “box”.
  - Each agency will have you follow HIPPA. Some agencies you will be signing a privacy policy.
Questions