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TO: The Honorable Alissa Keny-Guyer, Chair
House Human Services and Housing Committee

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SUBJECT: Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

Chair Keny-Guyer and members of the committee; I am Sue Woodbury, the Nutrition and Health Screening Section Manager for the Oregon Health Authority. The Special Supplemental Nutrition Program for Women, Infants and Children, more commonly known as WIC, is a program in the Nutrition and Health Screening Section.

I am here today to provide information on the WIC Program in Oregon.

WIC is regulated and fully funded by the United State Department of Agriculture and administered by state, territorial or tribal public health departments. In Oregon, WIC is administered by the Nutrition and Health Screening section of the Public Health Division. In 2018, WIC served 36,630 pregnant and postpartum women and 95,282 infants and children in our state. WIC serves those who have income levels less than or equal to 185% of the poverty level and at least one nutrition risk.

WIC services are available to women who exclusively or mostly breastfeed up to their child's first birthday and to women who formula feed or do some breastfeeding until their child is six months old. Women receive counseling and healthy foods focused on their specific nutritional needs during

pregnancy, breastfeeding and postpartum. They learn about the health benefits of breastfeeding and may be provided a breast pump to use when they return to school or work. They are given referrals to community resources based on their needs. These resources could include anything from assistance with postpartum depression, to other food resources such as SNAP or housing resources.

Children are eligible to receive WIC services until their 5th birthday. Children receive healthy foods tailored to their age and developmental needs. Infants not breastfed receive a food benefit for infant formula. Parents of children on WIC receive education on child feeding and the changing nutritional needs of their child. Referrals are made based on the needs of the child and family. They range from referrals to Head Start to early intervention and other parenting resources.

WIC is designed to influence lifetime nutrition and health behaviors in a targeted, high-risk population. Studies have shown that women who participate in WIC seek prenatal care earlier, have fewer premature births, fewer low and very low birth-weight babies, lower incidence of infant mortality and breastfeed longer. Children who participate in WIC are less likely to be overweight, have better oral health care coordination such as having a dental hygienist seeing children at the WIC clinic, are more likely to be immunized, live in more food secure household and have increased intake of whole grains, fruit and lower-fat milk. Participation in WIC can improve school readiness by helping to ensure children are well nourished and are better prepared to enter kindergarten ready to learn.

The benefits women and children receive through their participation in WIC align with Oregon's State Health Improvement Plan by helping slow the increase of obesity, improving oral health, improving immunization rates and reducing harm associated with alcohol and substance abuse.

Thank you for the opportunity to testify today. I am happy to answer any questions you may have.