



Lessons Learned: Examining WIC During COVID-19 for Policy and Program Recommendations Going Forward

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THE STUDY

From June 2020 to March 2021, PHFE WIC and the Nutrition Policy Institute, part of the University of California's Division of Agriculture and Natural Resources, engaged in a study to identify lessons learned from the experience in California with USDA's Special Supplemental Nutrition Program for Women, Infants and Children (WIC) waivers and other state changes to the program during the COVID-19 pandemic.

Researchers collected information on the experiences with WIC from interviews with 182 WIC participants, program information from 22 interviews with local WIC agency directors, refinement of interpretation from a meeting with 12 WIC agency directors, and finally, recommendations from multiple perspectives shared at a convening of over 20 local, state, and national WIC participants, experts and leaders. Two reports highlighting quotes from [WIC participants](#) and [agency directors](#) were published.^{1,2} This brief provides a summary of the high-level recommendations and their rationale.

KEY TAKE-AWAY

WIC will attract and retain the most families by using a more flexible 'hybrid' model, incorporating both in-person and remote options in order to honor participants' needs. Providing remote options removes barriers to WIC participation, makes WIC more "participant-centered," and makes WIC participation easy and convenient for working families.

Recommendation on USDA Waivers

The study findings resulted in a recommendation from the final convening to retain all of the USDA WIC waivers that were issued in response to COVID-19, as permanent options to be used in conjunction with previous operating methods. This approach provides the best opportunity to "meet WIC families where they are," by offering a balance of in-person and remote services, thus maximizing participant enrollment, retention, and benefit usage. Improving program access, simplifying and streamlining enrollment and certification procedures, and enhancing the food package were all identified as important ways to strengthen WIC's role in bringing its benefits to as many as possible low-income women, infants and children.

USDA Waivers

- Physical presence
- Extended certification
- Remote benefit issuance
- Food package substitutions
- Separation of duties

Recommendation on State Procedures

A complementary recommendation was to retain and, in some cases, strengthen procedures and flexibilities already implemented in California. None of these should require USDA Food and Nutrition Service (FNS) waivers or exemptions since they are allowable under current federal program rules and policies.

State Changes

- Remote staff work option
- State auto-issuance of benefits
- Option for remote education on WIC App/Card
- Option for remote nutrition education
- Option for remote breastfeeding support



Rationale. If COVID-19 provided a “silver lining” for WIC, it was how it moved the program into the 21st century and presented an opportunity to test new approaches. Recognizing the increased need, due to COVID and its economic consequences, for the essential benefits of WIC, during our convening program experts identified and agreed upon specific recommendations to expand participation and strengthen program benefits. Discussion underlined the interrelatedness of strategies to achieve these goals. Perhaps the best example of that interrelatedness is how urgently needed upgrades to the food package not only will enhance participants’ nutrition and health but also serve to increase the program’s attractiveness and boost enrollment and retention.

Additional considerations

- A repeated theme that emerged when discussing the study findings during the convening was the need to re-think each WIC requirement, to see if it really is needed, or can be satisfied in a less demanding way.
 - For example, is annual re-certification of each child in the same family serving a purpose that cannot be satisfied with annual family certification instead?
 - If financial cost and inconvenience are too great for families to meet the physical presence requirement to “complete” a WIC visit, participants will forgo or exit the program. Transportation costs, time off work, childcare needs, are examples of such participant considerations.
 - First-time parents and mothers of newborns/infants have different needs from mothers of young children and from those with more parenting experience.
- Strengthening food benefits with a greater value and a wider variety of qualifying foods is likely to boost retention, particularly after infancy (and access to formula).
- Better marketing of WIC services (beyond food) is necessary so that more people know about the value of WIC, why the specific foods are included, the value of nutrition counseling and breastfeeding support, the support and referrals provided by staff, and how easy it is to access these valuable benefits. WIC should do targeted outreach utilizing community partners in communities of color, to undocumented families and to those with language and technology barriers.
- WIC should work closely with Medicaid/Medi-Cal and SNAP/CalFresh to maximize referrals and recruitment opportunities for families who already are eligible for WIC. A single, common application should be explored.
- WIC should partner with other service providers for WIC eligible families (e.g., Head Start, community health centers and other healthcare providers, and childcare providers) for recruitment as well as for sharing of eligibility documentation. Data sharing across programs is essential and should include improved systems for referrals in both directions between local WIC agencies and primary care physicians, including WIC enrollment, referrals for well checks and regular physicals, and access to blood tests and anthropometric data required by WIC.
- The added efficiency with remote communication may permit WIC agencies to offer more competitive salaries to improve staff acquisition and satisfaction, and, in turn, may allow more outreach and recruitment of staff candidates reflecting participant communities.
- Remote operations need robust investment to improve technology. The state’s WIC App may improve both food package usage and participant retention. Push notifications, for example, could remind participants of WIC appointments, of unused benefits, and offer nutrition education tips. Videoconferencing options should be explored as an option for remote services.
- Breastfeeding support, needs of higher risk infants and children, and other concerns may be better met in face to face settings; agency directors noted that taking advantage of technology to streamline operations and build in efficiencies could leave more time for the critical person-to-person activities that make WIC the unique and effective program it is.

References: (1) L Ritchie, C Hecht, L Au, N Vital, R Strohlic, M Tsai, K Hecht, C Olague, A Rios, C Anderson, C Martinez, M Meza, S Whaley, L Ritchie. Informing the Future of WIC: Lessons Learned during COVID-19 from California WIC Participants. UC ANR Nutrition Policy Institute. Public Health Foundation Enterprises-WIC. 9 June 2021. <https://ucanr.edu/sites/NewNutritionPolicyInstitute/files/352389.pdf> (2) L Ritchie, C Hecht, L Au, N Vital, M Tsai, K Hecht, C Anderson, C Martinez, M Meza, S Whaley. Informing the Future of WIC: Lessons Learned during COVID-19 from California Agency Directors. UC ANR Nutrition Policy Institute. Public Health Foundation Enterprises-WIC. 9 June 2021. <https://ucanr.edu/sites/NewNutritionPolicyInstitute/files/352390.pdf>

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