IRP-RIDGE 2012–2013 Research Project Summary

Is WIC Reaching Those in Need?
Children’s Participation in Nutritional Policy during the Great Recession

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BACKGROUND AND METHODOLOGY

For the roughly 20 percent of American children living in poverty and food-insecure households, nutritional policy provides an essential safety net against hunger and its negative effects on development. Though it is established that more mothers and children enrolled in the nutritional safety net during the Great Recession, it is unclear whether this increase was experienced equally by all racial, ethnic, and socioeconomic groups. A thorough evaluation of WIC’s availability and effectiveness for all mothers and children will reveal not only how to intervene, but also when intervention might benefit from additional outreach.

Using longitudinal data from the Survey of Income and Program Participation (SIPP), this study examines whether differences in children's participation in nutritional policy have remained steady, increased, or decreased as families' economic need increased during the Great Recession. The program that forms the basis for this investigation is the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), which increases children's access to nutritious food from the prenatal period until the child’s fifth birthday. Specifically, the study considers: (1) whether participation in WIC increased between 2004 and 2011 for all age groups (those exposed in utero, as infants, and between ages one and five); and (2) whether these increases were experienced equally across racial, ethnic, and socioeconomic groups.

The analysis consists of a bivariate and multivariate description of eligibility, participation, and the determinants of participation over time. To address the first research question of how participation changed during the recession, and specifically whether infants remained overrepresented among participants, or whether other children—those exposed prenatally, or non-infant children—disproportionately increased their participation, the analysis compares pre- and post-recession participation rates, using the 2004 and 2008 panels, to document that overall eligibility and participation increased across the two panels. Average monthly participation is calculated in each four-month wave of each panel, among both the total population (all respondents in the allowable age and fertility groups), and among just those who were eligible.

After documenting changes in participation among several groups of children, logistic regression models are estimated to examine the second research question of whether these patterns are stratified by socioeconomic status (maternal education and household poverty ratio) and maternal race and ethnicity.
among eligible families. Have the most socioeconomically needy families—those at the bottom of the income and educational distributions—increased their participation, especially at the earliest ages, to the same degree as their peers? Have black, Hispanic, Asian, and non-Hispanic white children benefited equally from increases in participation at all ages? From the regression estimates, adjusted probabilities of participation are calculated in each panel for each group of children, conditional on reaching the maximum age in an age group.

FINDINGS

The findings suggest that age differences in participation remain pronounced, with infants more likely than older children—and especially those in utero—to receive exposure to WIC. Differences between non-Hispanic whites and others declined in all age groups, driven by increasing participation among non-Hispanic whites and Hispanics. Socioeconomic differences in participation also declined, largely because of increasing participation among children in higher-educated and higher-income families. These findings suggest that, during the recession, socioeconomic status become a weaker predictor of WIC participation.

There are several possible reasons for these changes: First, higher-resource families may have experienced changes in their assets during the recession, reducing their available economic buffer during a period of increased economic hardship. Relatedly, they may have become more forward-thinking during the recession, anticipating the possibility of unemployment and enrolling in WIC. Alternatively, higher-resource families may have perceived a decline in the stigma associated with WIC participation during the recession, and therefore enrolled in order to receive the additional nutritional benefit provided by the program.

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