The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is administered at the Federal level by the U.S. Department of Agriculture, Food and Nutrition Service, which provides grants for program administration and operation to 90 WIC State agencies (SAs), including the 50 geographic States, 34 Indian Tribal Organizations, 5 U.S. territories, and the District of Columbia. WIC provides supplemental nutritious foods, nutrition education, including breastfeeding promotion and support, and screening and referrals to other health, welfare, and social services to pregnant, postpartum, and breastfeeding women, infants, and children up to age 5.

While Federal WIC regulations and guidance provide a policy framework for delivering nutrition education, State and local agencies (LAs) have significant flexibility to design nutrition education appropriate for the demographics of their participants. This flexibility has yielded a range of messages, delivery systems, and approaches related to nutrition education along with variation in qualifications and training for WIC nutrition educators.

The WIC Nutrition Education Study provides detailed information on WIC nutrition education services and includes the following phases:

- **Phase I:** Comprehensive nationally representative description of WIC nutrition education processes and features.
- **Phase II:** Pilot study of the impact of WIC nutrition education on nutrition and other behaviors in six WIC sites.
- **Phase III:** Design of a national evaluation study based on findings from the pilot study.

This report presents the Phase I results of the study. FNS plans to complete Phases II and III in fall 2017.
WIC provided extensive training to nutrition educators. Almost all sites (97 percent) provided training on breastfeeding in the past 12 months with an average of 13 hours per staff member annually. Training on other nutrition or health topics (prenatal, infant, or child nutrition; weight and growth issues; and other nutrition topics) was also widespread, offered by 65 to 80 percent of sites, with an average of 5 to 7 hours of training per staff member annually.

One-on-one counseling was the primary delivery method for WIC nutrition education, followed by group education and technology-based methods. All sites reported using face-to-face, one-on-one counseling sessions. One-on-one counseling by telephone or videoconferencing is an alternative to face-to-face counseling when participants are unable to come to WIC sites because of geographical, health, or other circumstances. Forty-two percent of sites reported using one-on-one telephone conferencing and 5 percent of sites reported using one-on-one videoconferencing. Nearly half of sites (49 percent) used group education sessions, another alternative for interactive nutrition education.

Most WIC sites provided nutrition education that was individualized and tailored to the needs of each participant. Over half (52 percent) of sites ranked “participant chooses the topic(s) she wants to talk about” as the method used most often to determine discussion topics for one-on-one counseling sessions. Thirty-one percent of sites ranked “participant and staff member choose the topic(s) together” and 17 percent ranked “staff member chooses the most appropriate topic(s).” During these sessions, breastfeeding and infant feedings were the most frequently discussed topics. In addition, 80 percent of sites reported that participant behavioral goals are almost always or often set during one-on-one counseling sessions.

Many LAs coordinated the delivery of nutrition education with other local programs or services to provide consistent messages or share resources. LAs most often coordinated with Cooperative Extensions (42 percent of LAs), breastfeeding coalitions or task forces (42 percent of LAs), and Head Start (38 percent of LAs). The most common way LAs coordinated with other programs or services is through referral of participants to other nutrition education programs or services (69 percent of LAs).

For More Information