DEPARTMENT OF HEALTH



Minnesota WIC Facts 2025

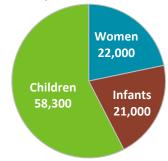
Powerful WIC outcomes

- WIC participants have healthier diets.^{1,2}
- WIC reduces costs. Every \$1 invested in WIC saves \$2.48 in medical, educational, and productivity costs.³
- WIC helps prevent preterm births and decrease infant mortality within the first year of life.⁴
- The WIC fruit and vegetable benefit increases fruit and vegetable intake, food security, and participation.⁵

MN WIC participants

 During Federal Fiscal Year (FFY) 2024, an average of 101,300 low-income women, infants, and children up to age five participated monthly in the MN WIC program.⁶

FFY 2024 Average Monthly Participation in MN WIC⁶



- In 2023, an estimated 37.5% of all infants born in Minnesota participated in MN WIC.⁶
- Minnesota serves 65.7% of those eligible for WIC, ranking within the top four states nationwide.⁷

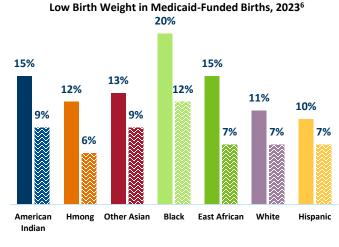
Nutrition & breastfeeding support

- Participants receive an individualized nutrition assessment along with education and referrals to community resources.
- WIC promotes and supports breastfeeding, including exclusive breastfeeding, and provides one-on-one support before and during a parent's breastfeeding journey.
- Many local WIC programs provide a <u>peer breastfeeding</u> <u>support program</u> to parents.

Healthy foods

- WIC provides healthy foods including fruits, vegetables, whole grains, low-fat dairy, and ironfortified infant formula.
- In FFY 2024, MN WIC issued \$31.1 million in benefits specifically for fruits and vegetables.⁶ Monthly fruit and vegetable benefit levels in 2024 increased to \$26 for children and \$47 to \$52 for pregnant and postpartum participants.⁶
- During FFY 2024, MN WIC participants purchased \$93.2 million in WIC foods at local grocery stores.⁶

WIC improves birth weight

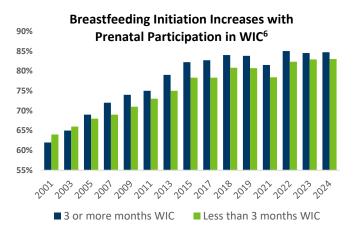


Solid: No WIC Prenatal Participation Patterned: Prenatal participation in WIC for 3 or more months

In Medicaid-funded births, pregnant people participating in MN WIC for three or more months had fewer infants born with low birth weight compared to those not participating.⁶ The medical cost for each low-birth-weight infant ranges between \$114,000 and \$604,000.⁸

Breastfeeding rates

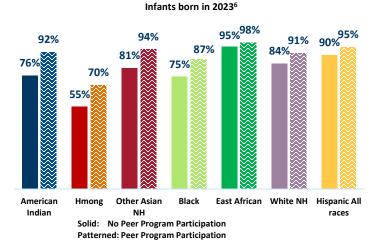
Prenatal participation in MN WIC earlier in pregnancy improves breastfeeding initiation. Meeting breastfeeding recommendations could save \$17.2 billion (2014 dollars) in national annual medical costs and prevent 3,340 deaths yearly.⁹



Peer breastfeeding support advances health equity

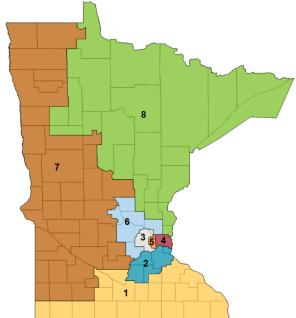
People of all races and ethnicities with a MN WIC peer counselor had significantly higher breastfeeding initiation.

MN WIC Peer Program Breastfeeding Initiation



MN WIC Food Dollars Spent in Local Grocery Stores by Congressional District FFY 2024⁶

Congressional Districts		
	# Monthly Average WIC Participants (FFY2024)	Annual WIC Dollars Spent in Local Grocery Stores
District 1 - Finstad	14,300	12,300,000
District 2 - Craig	8,500	7,900,000
District 3 - Morrison	9,100	9,400,000
District 4 - McCollum	19,000	18,200,000
District 5 - Omar	7,800	7,900,000
District 6 - Emmer	14,000	13,100,000
District 7 - Fischbach	16,500	14,100,000
District 8 - Stauber	12,100	10,300,000
TOTAL	101,300	\$ 93,200,000



References

¹Longer participation in WIC is associated with better diet quality in 24-month old children. Accessed 2/2025

²Associations between participation in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and maternal diet quality. Accessed 2/2025
³Economic evaluation of California prenatal participation in the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) to prevent preterm birth. Accessed 2/2025

⁴Association of Special Supplemental Nutrition Program for Women, Infants and Children with preterm birth and infant mortality. Accessed 2/2025 ⁵Associations of increased WIC benefits for fruits and vegetables with food security and satisfaction by race and ethnicity. Accessed 2/2025 ⁶Minnesota WIC Information System and Minnesota Vital Statistics

⁷Estimates of WIC Eligibility and Program Reach | Food and Nutrition Service (usda.gov) Accessed 2/2025.

⁸Estimates of healthcare spending for preterm and low-birthweight infants in a commercially insured population: 2008–2016. Accessed 2/2025 ⁹Suboptimal breastfeeding in the United States: Maternal and pediatric health outcomes and costs - PubMed (nih.gov). Accessed 2/2025

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