



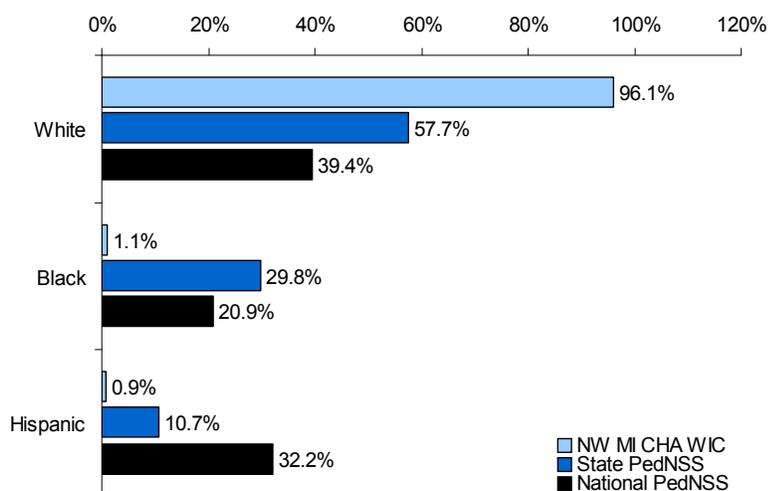
2003 WIC Local Agency Pediatric Nutrition Surveillance System (PedNSS) Report

The goal of Michigan WIC is to improve the health outcome of low income nutritionally at-risk women and children by providing supplemental nutritious foods, offering nutrition education/counseling, breastfeeding support, and referral to other health and social services. This report is developed to provide specific local information regarding the health and nutritional status of WIC participants. In order to provide local statistics stratified by age and race/ethnicity, three-year averages were calculated for each health indicator. Consequently, point estimates represent the incidence or prevalence of an indicator between the years 2001 and 2003. Trends were constructed using rolling averages and cover the period between 1998 and 2003.

Northwest Michigan Community Health Agency (NW MI CHA) consist of four counties: Antrim, Charlevoix, Emmet, and Otsego counties. An estimated 6.2% of residents in the four-county area was, in 2000, under the age of five years old. Data from the 2000 U.S. Census also indicates that approximately one in ten residents under the age of five years old (10.8%) lived below poverty. NW MI CHA WIC served approximately 2,993 of all infants and children participating in Michigan WIC in 2003. Information about NW MI CHA WIC infants and children under the age of five years old revealed:

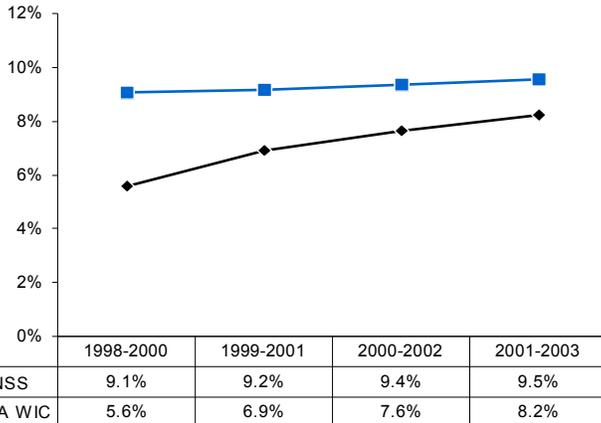
- 8.2% of infant participants were low birthweight;
- The prevalence of high birthweight among infants was 9.0%;
- The prevalence of short stature was 2.1 percentage points lower in NW MI CHA WIC infants and children under five years old than their state peers: 5.1% and 7.2%, respectively;
- Underweight was observed in more infants and children under two years old compared to children two to five years old: 5.4% and 3.3%, respectively;
- 29.1% of children two to five years old were either overweight or at risk of overweight;
- The prevalence of iron deficiency anemia in NW MI CHA WIC infants and children was less than half that of their state peers;
- Over half of NW MI CHA WIC infants, 63.7%, were ever breastfed.

Figure 1. **Racial/ethnic distribution** among infants and children under five years old, 2001-2003 PedNSS



96.1% of NW MI CHA WIC infants and children under five years old were non-Hispanic White. Consequently, this report will not show statistics for health and nutritional indicators stratified by race/ethnicity.

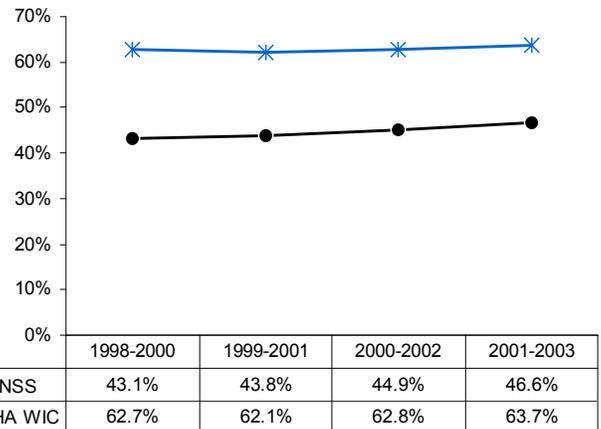
Figure 2. Local and state trends in **low birthweight*** among infants in the NW MI CHA WIC agency, 1998-2003 MI PedNSS



The incidence of low birthweight in NW MI CHA WIC has increased by 14%, on average, per year since 1998.

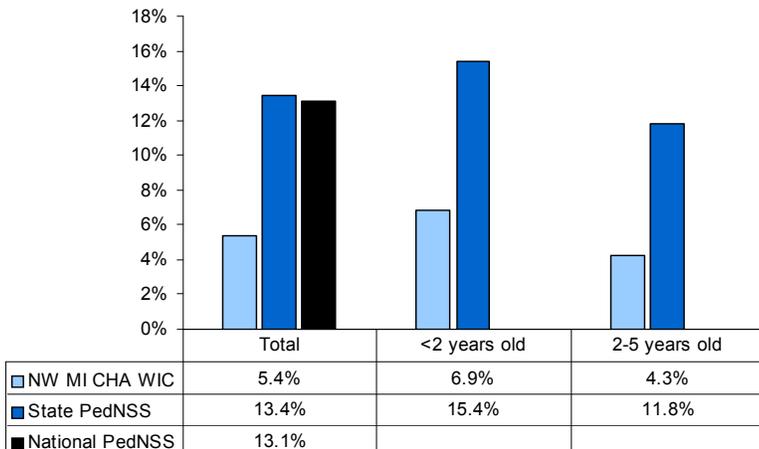
*Low birthweight is defined as having a birthweight less than 2500 grams (5lbs 9 oz) regardless of gestational age.

Figure 3. Local and state trends in **ever breastfed** among children under two years old, 1998-2003 PedNSS



Consistently more than half of infants in NW MI CHA WIC were ever breastfed compared to their state peers.

Figure 4. Average prevalence of **iron deficiency anemia*** by age among infants and children under five years old, 2001-2003 PedNSS

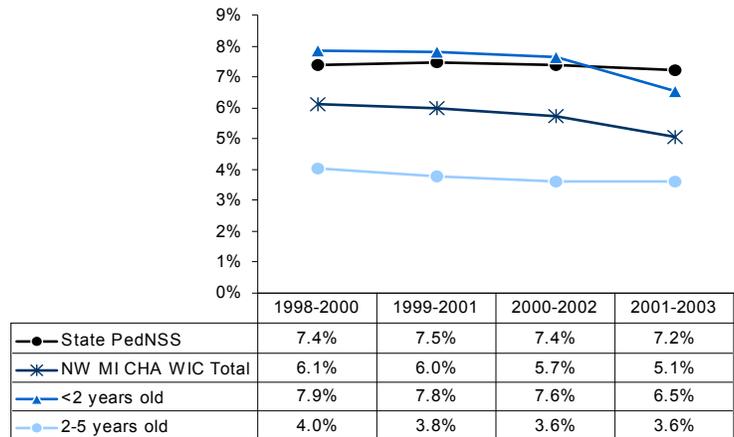


The prevalence of iron deficiency anemia in NW MI CHA WIC was less than half that of state WIC infants and children under five years old.

*For infants under the age of one year, iron deficiency anemia is defined as having either a hemoglobin concentration of 11.0 g/dL or a hematocrit level of less than 33%. For children two to five years old, iron deficiency anemia is defined as having either a hemoglobin concentration less than 11.1 g/dL or a hematocrit level below 33.3%.

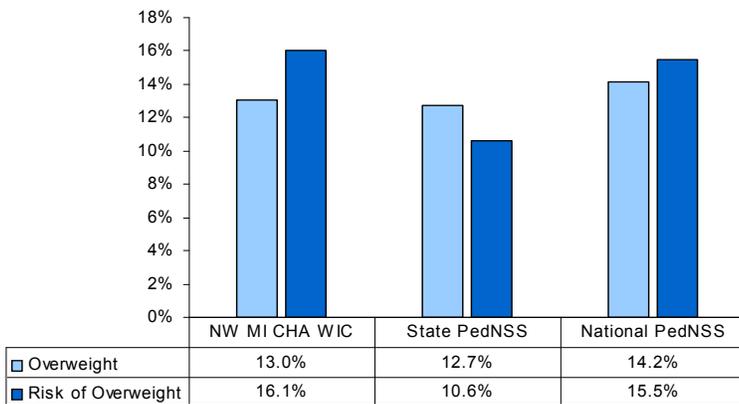
The average annual percent decline in short stature for Michigan WIC was 0.8%, meanwhile in NW MI CHA the decline was an average of 6.0% per year.

Figure 5. Trend in **short stature*** by age group among infants and children under five years old, 1998-2003 MI PedNSS



*Short stature is defined as having a height-for-age below the 5th percentile of the National Center for Health Statistics and Centers for Disease Control and Prevention (NCHS/CDC) age- and gender- specific growth chart.

Figure 6. State and local average prevalences of **overweight*** and **risk of overweight**** among children two to five years old, 2001-2003 PedNSS



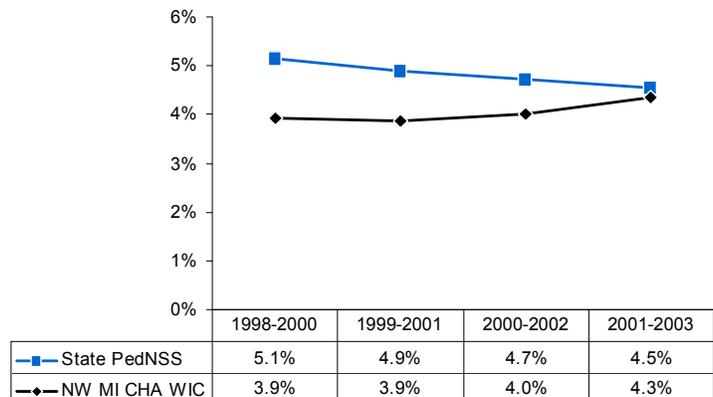
The prevalence of overweight locally and at the state level were equivalent: 13.0% and 12.7%, respectively.

*Overweight is defined as having a weight-for-height greater than the 95th percentile of the National Center for Health Statistics and Centers for Disease Control and Prevention (NCHS/CDC) age- and gender- specific growth chart.

**Risk of overweight is defined as having a weight-for-height between the 85th and the 95th percentile of the National Center for Health Statistics and Centers for Disease Control and Prevention (NCHS/CDC) age- and gender- specific growth chart.

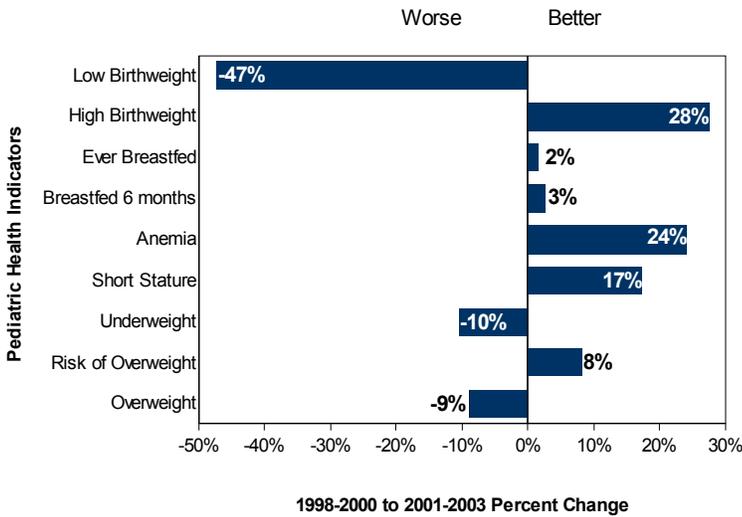
The prevalence of underweight among infants and children under five years old of NW MI CHA increased on average by 3.5% per year since 1998.

Figure 7. State and local average prevalences of **underweight*** among infants and children under five years old, 2001-2003 PedNSS



*Underweight is defined as having a weight-for-height less than the 5th percentile of the National Center for Health Statistics and Centers for Disease Control and Prevention (NCHS/CDC) age- and gender- specific growth chart.

Figure 8. Pediatric **health progress review** for NW MI CHA WIC infants and children under five years old, 1998-2000 and 2001-2003 MI PedNSS



Although NW MI CHA WIC improved in six of nine health and nutritional indicators, the incidence of low birthweight increase by almost 50%.



Jennifer M. Granholm, Governor

Janet Olszewski, Director

Suggested Citation:

Larrieux C, Eghtedary K, Grigorescu V, Carr A. "2003 WIC Local Agency PedNSS Report Northwest Michigan Community Health Agency." WIC Division, Bureau of Family, Maternal, and Child Health, Michigan Department of Community Health. April 2007.

For more information, please contact:

WIC Division
Michigan Department of Community Health
Lewis Cass Building
6th floor

320 South Walnut Street
Lansing, MI 48913

Website: <http://www.michigan.gov/wic>
E-mail: MichiganWic@michigan.gov

Michigan Department of Community Health
WIC Program

Mission Statement

The mission of the Michigan WIC program is to improve the health outcomes and quality of life for eligible women, infants, and children by providing nutritious food, nutrition education, breastfeeding promotion, and support and referrals to health and other services. To this end:

- Delivery of services and supports are to be provided in a caring, respectful, efficient, and cost effective manner.
- Delivery of services shall be provided in a culturally competent and confidential manner.
- The WIC Program shall assure the broadest possible access to services, supports, and food.