



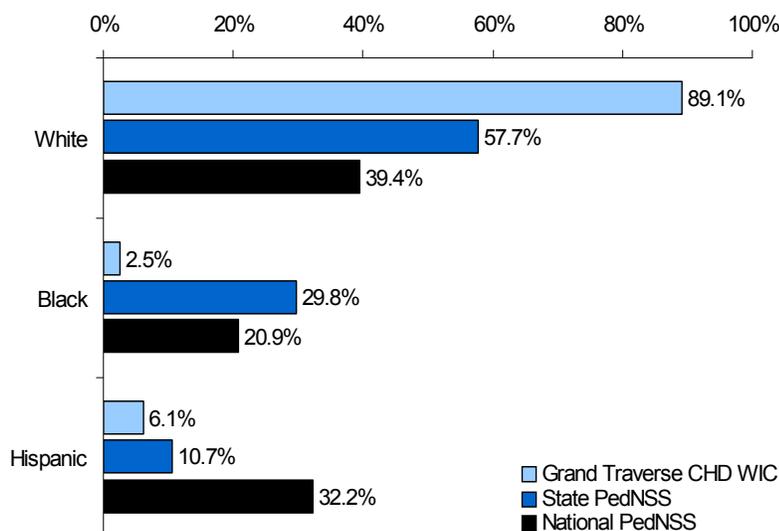
2003 WIC Local Agency Pediatric Nutrition Surveillance System (PedNSS) Report

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.

The health department is the only WIC agency providing services in Grand Traverse County. The county had, according to the Census, 4,776 children under the age of five years old in 2000. Also in 2000, 6.7% of children under five years old lived below poverty. Approximately 1,911 of children in Michigan WIC were served by Grand Traverse County Health Department (Grand Traverse CHD) in 2003. PedNSS statistics about WIC participants of Grand Traverse CHD WIC showed:

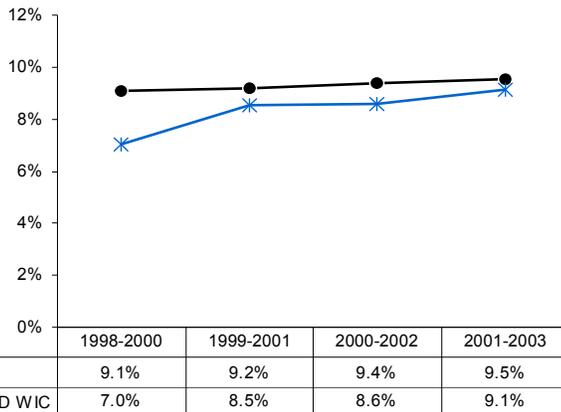
- 9.1% of infants were low birthweight;
- One in ten infants weighed greater than 4000g (13lbs 8oz);
- One in ten Hispanic infants and children under the age of two years old were short in stature;
- 7.2% of infants and children under the age of two years old were underweight;
- One-third of children two to five years old were either overweight or at risk of overweight;
- 16.8% of Hispanic infants and children under five years old had iron deficiency anemia;
- 73.0% of infants were ever breastfed and 29.6% were breastfed to six months of age.

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



The majority of infants and children under five years old in Grand Traverse CHD WIC were non-Hispanic White, but a considerable number of participants were Hispanic.

Figure 2. Trend in **low birthweight*** among infants in the Grand Traverse County HD WIC Agency, 1998-2003 MI PedNSS



The incidence of low birthweight in Grand Traverse CHD WIC increased by an average of 9.3% since 1998.

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

Figure 3. Trend in **ever breastfed** by race/ethnicity among infants in the Grand Traverse County HD WIC Agency, 1998-2003 PedNSS

The prevalence of infants ever breastfed increased among White participants of Grand Traverse CHD WIC by an average of 1.0% per year and among Hispanic infants by an average of 2.7% per year.

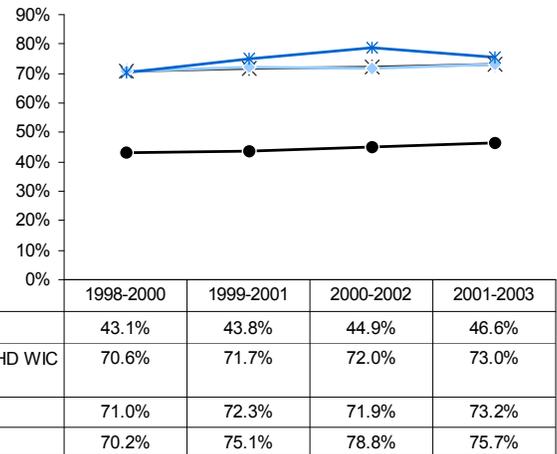
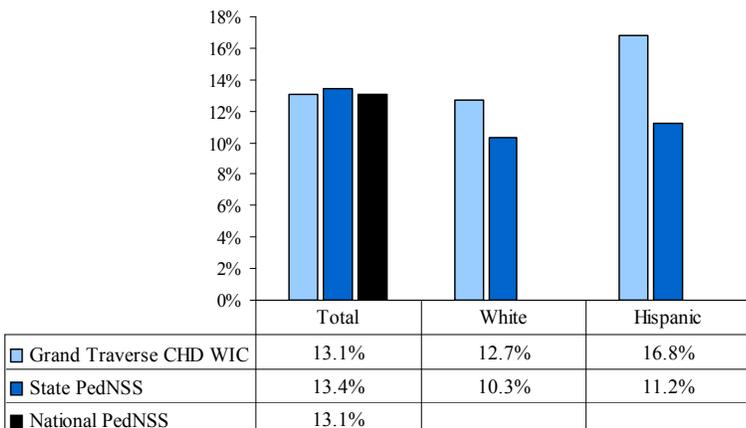


Figure 4. Average prevalence of **iron deficiency anemia*** by race/ethnicity among infants and children under five years old, 2001-2003 PedNSS

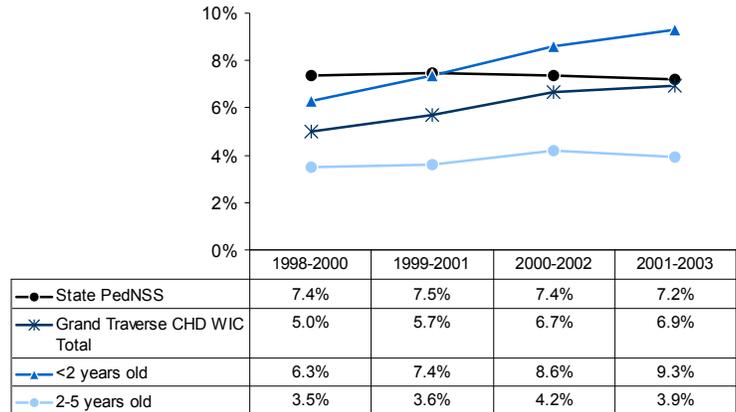


Hispanic infants and children under five years old had a prevalence of iron deficiency anemia 5.6-percentage point higher than their peers at the state level.

*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%.

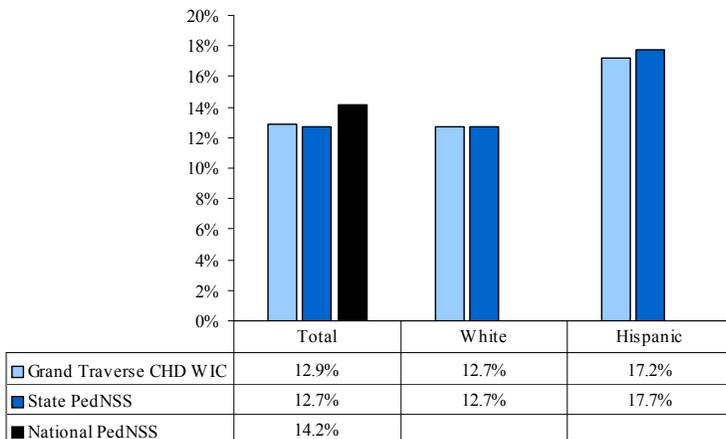
The overall prevalence of short stature in Grand Traverse CHD WIC increased by an average of 11.6% per year since 1998.

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.

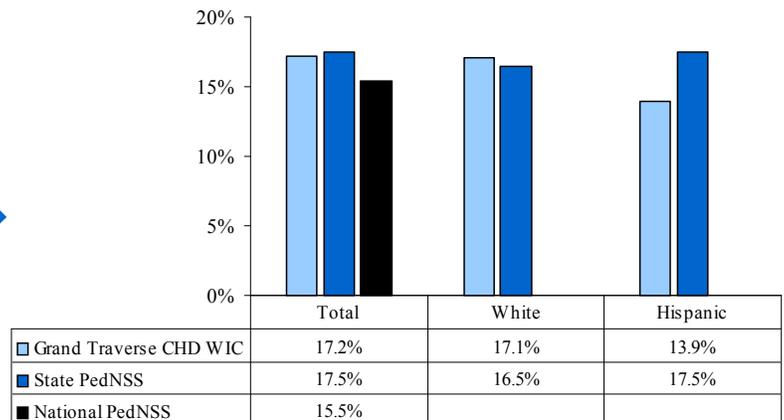
Figure 6. Average prevalence of **overweight*** by race/ethnicity among children two to five years old, 2001-2003 PedNSS



The prevalence of overweight were equivalent for White children at the state and agency level: 12.7%.

*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.

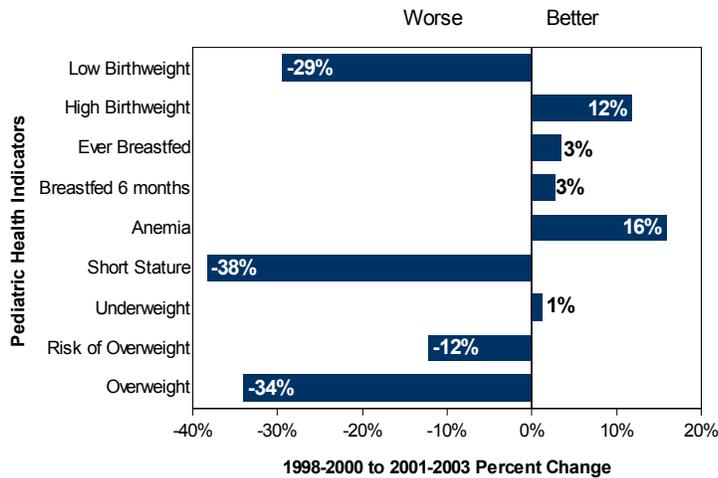
Figure 7. Average prevalence of **risk of overweight*** by race/ethnicity among children two to five years old, 2001-2003 PedNSS



*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 risk of overweight among Hispanic children of Grand Traverse CHD WIC was lower than that of Hispanic children at the state level: 13.9% and 17.5%, respectively.

Figure 8. Pediatric health progress review for Grand Traverse County HD WIC infants and children under five years old, 1998-2000 and 2001-2003 MI PedNSS



In Grand Traverse CHD WIC improvements are necessary in the area of low birthweight, short stature, and overweight.



Jennifer M. Granholm, Governor

Janet Olszewski, Director

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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.