



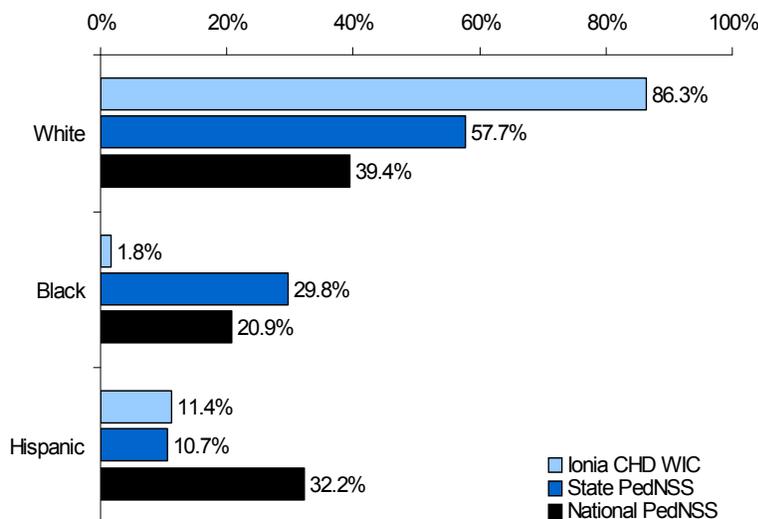
## 2003 WIC Local Agency Pediatric Nutrition Surveillance System (PedNSS) Report

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.

Ionia County had, according to the 2000 U.S. Census, over 60,000 residents. An estimated 6.8% of residents were under the age of five years old. Also, approximately 13.5% of infants and children under five years old in the county lived below poverty in 2000. The health department provided WIC services for eligible resident in the county. In 2003, the Ionia County Health Department (Ionia CHD) served 1,566 infants and children participating in Michigan WIC. Data about participants of the Ionia County Health Department (Ionia CHD) WIC program in 2001-2003 revealed:

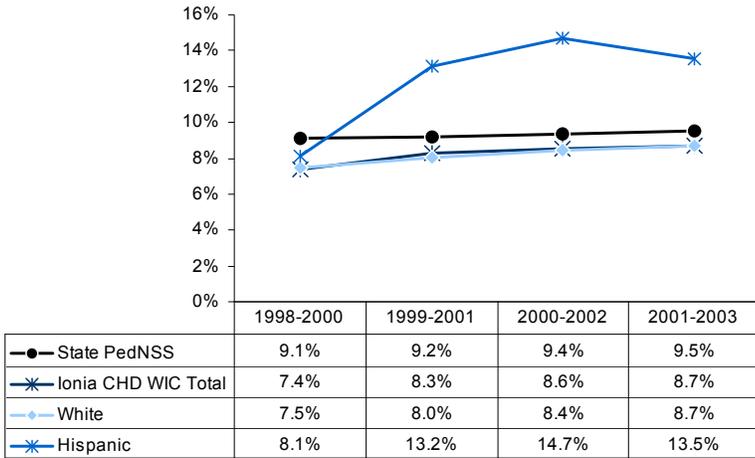
- The incidence of low birthweight among Hispanic infants was 13.5%, 4.8 percentage points higher than the overall agency incidence;
- The incidence of high birthweight was 9.4%;
- 6.8% of infants and children under the age of five years old were short in stature;
- 8.1% of infants and children under the age of two years old were underweight;
- Over one-third of children (34.3%) two to five years old were either overweight or at risk of overweight;
- One in ten infants and children under the age of two years old (11.1%) had iron deficiency anemia;
- 42.7% of infants were ever breastfed.

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



Non-Hispanic White and Hispanic infants and children make up 97.7% of all infants and children under five years old in Ionia CHD WIC.

Figure 2. Trend in **low birthweight\*** by race/ethnicity among infants in the Ionia County HD WIC Agency, 1998-2003 MI PedNSS



The incidence of low birthweight among Ionia CHD WIC infants increased by an average of 22.0% 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. Trend in **ever breastfed** by race/ethnicity among infants in the Ionia County HD WIC Agency, 1998-2003 PedNSS

Overall the prevalence of infants ever breastfed increased by about 3.8% per year for White infants of Ionia CHD WIC.

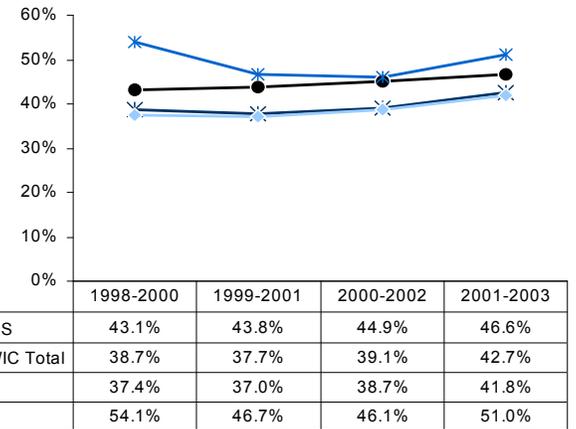
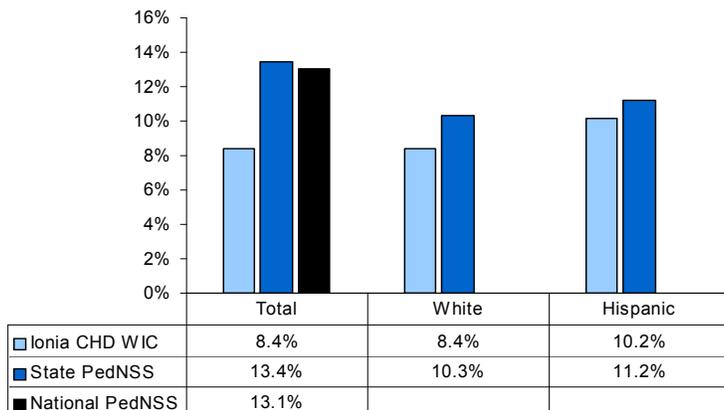


Figure 4. Average prevalence of **iron deficiency anemia\*** by race/ethnicity among infants and children under five years old, 2001-2003 PedNSS

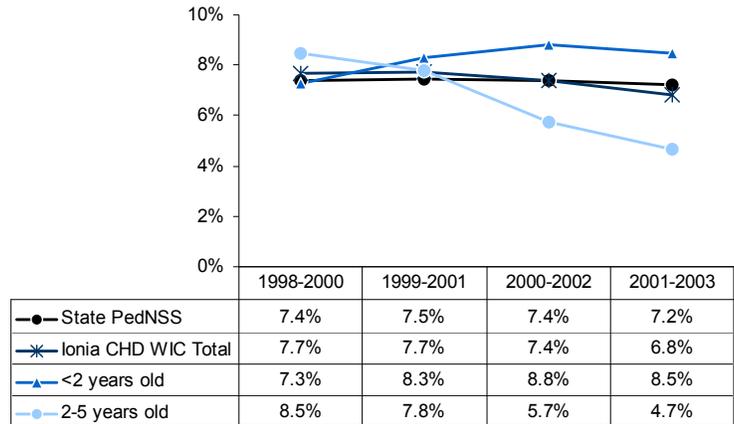


The prevalence of iron deficiency anemia was lower for Ionia CHD WIC infants and children under the age of five years old than their state and national peers.

\*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%.

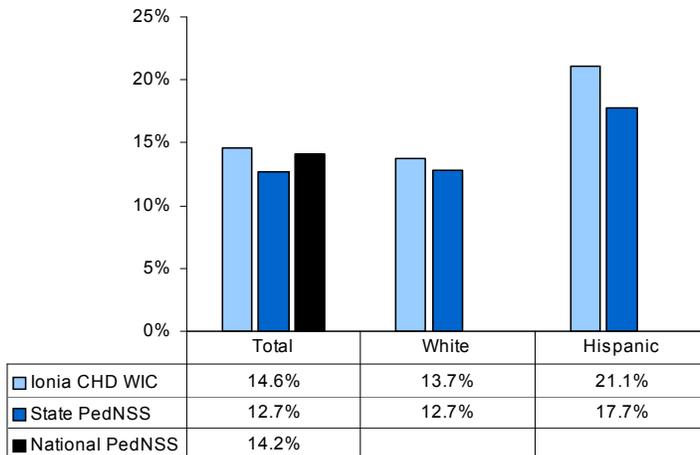
In Ionia CHD, the trend in short stature increased among infants and children under two years old by approximately 5.6% per year, but for children two to five years old the prevalence decreased by an average of 17.6% per year.

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.

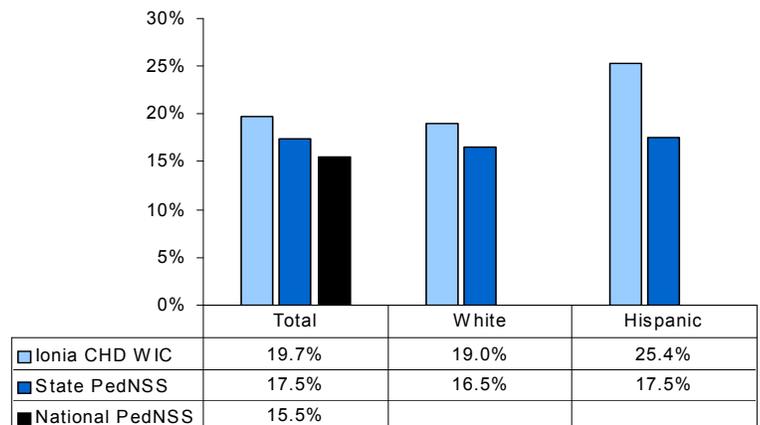
Figure 6. Average prevalence of **overweight\*** by race/ethnicity among children two to five years old, 2001-2003 PedNSS



Both White and Hispanic children of Ionia CHD WIC had prevalences of overweight higher than their state counterparts.

\*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.

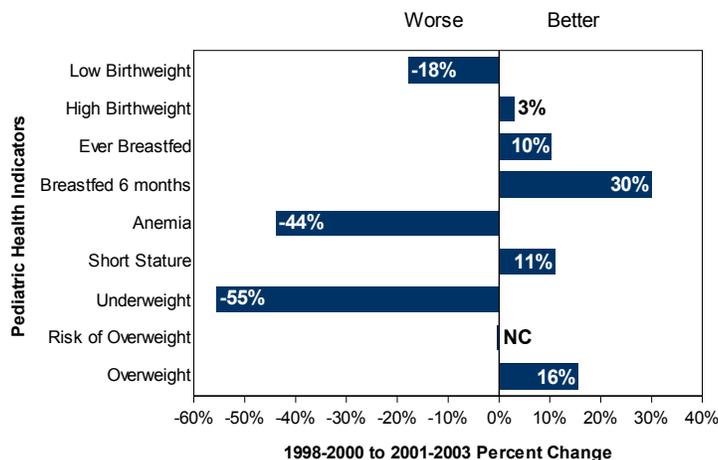
Figure 7. Average prevalence of **risk of overweight\*** by race/ethnicity among children two to five years old, 2001-2003 PedNSS



\*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.

Just like the prevalence of overweight among Ionia CHD WIC children, White and Hispanic children two to five years old had prevalences of risk of overweight higher than their state peers.

Figure 8. Pediatric **health progress review** for Ionia County HD WIC infants and children two to five years old, 1998-2000 and 2001-2003 MI PedNSS



NC: no change.

Improvements are necessary in the areas of underweight, iron deficiency anemia, and low birthweight in Ionia CHD WIC.



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.