

Maine Center for Disease Control and Prevention

WIC Nutrition Program

Effective: October 1, 2012
Revised: August 1, 2025

Policy No.CR-7

Special Populations

Authority

7 CFR §246.4(5)i

Policy

1. The local agency shall ensure that services are accessible to applicants/participants that are considered a special population, which may include, but is not limited to, the following:
 - 1.1. Migrant workers
 - 1.2. Refugees
 - 1.3. Applicants/participants residing in institutions
 - 1.4. Homeless
 - 1.5. Non-English speaking or limited English proficiency refugees
 - 1.6. Native Americans
 - 1.7. Persons with disabilities
 - 1.8. Geographically isolated locations
 - 1.9. Island populations
2. The State and Local Agency's Annual Outreach Plans shall include a section on special populations.

Procedures

1. The State Agency and its Local Agencies shall inform potential applicants, service organizations, advocacy/minority organizations, and the general public in underserved communities of the following information:
 - 1.1. Availability of program benefits
 - 1.2. Eligibility criteria for participation
 - 1.3. Location of local agencies/clinics operating WIC programs and toll-free telephone numbers
 - 1.4. Hours of service of local agencies/clinics operating WIC programs

- 1.5. Rights and responsibilities
 - 1.6. Nondiscrimination policy
 - 1.7. Civil rights complaint procedure
 - 1.8. The Local Agencies shall utilize certification procedures specified in Policy CE-1 for any member of a special population who applies for WIC benefits
2. The Annual Outreach Plan shall outline what will be done to reach Special Populations (also referred to as an Affirmative Action Plan) and must include the following information:
 - 2.1. A list of all areas and special populations, in priority order based on relative need, within the jurisdiction of the Local Agency
 - 2.2. The Local Agency's plans to initiate or expand operations
 - 2.3. In areas most in need of supplemental foods, plans should include:
 - 2.3.1. Informing local health and social services organizations of the availability and benefits of the Program and the availability of technical assistance
 - 2.3.2. A description of how the Local Agency will take all reasonable actions to identify potential community service agencies
3. Implementation or expansion plans that prioritize the most underserved populations for the upcoming year shall include:
 - 3.1. An estimate of the number of potentially eligible persons in each area
 - 3.2. A list of the areas currently operating the WIC program and their current participation, by participant priority levels
 - 3.3. Locations that are currently operating CSFP and their current participation
 - 3.4. Plans to provide program benefits to eligible migrant farmworkers and their families, to Native Americans, and to homeless individuals.
4. The outreach plan shall include a plan to inform the following classes of individuals of the availability of program benefits:
 - 4.1. Pregnant women, with special emphasis on women in the early months of pregnancy
 - 4.2. Migrants
 - 4.3. Homeless persons/families
 - 4.4. Refugee populations
 - 4.5. Native Americans
 - 4.6. Individuals whose primary language is not English
 - 4.7. Substance-misusing individuals
 - 4.8. Breastfeeding women

5. The Local Agency's nutrition education efforts shall address the specific needs of special populations by:
 - 5.1. Providing nutrition education materials appropriate to population and language needs
 - 5.2. Provide nutrition counseling guidelines specific to population
 - 5.3. Arrange for staff training on working with this population
 - 5.4. Distribute resource materials related to populations
 - 5.5. Network and coordinate with other local WIC agencies

6. Outreach materials shall be available in the following languages as resources allow:
 - 6.1. English
 - 6.2. Spanish
 - 6.3. Somali
 - 6.4. Arabic
 - 6.5. French
 - 6.6. Lingala
 - 6.7. Portuguese

7. The State and Local Agencies shall use Appendix CR-7-A Notice for Language and Disability Assistance Notice Tag Line document in mailed correspondences, when translated documents are not available. This document shall also be posted on social media platforms and webpages.

8. Specific Local Agency outreach and referral efforts designed to provide access to services for migrants and their families shall be documented in the Local Agency Annual Report.

9. . The State Agency shall be responsible for costs associated with hiring interpreters and shall provide Local Agencies with the identification and code numbers needed to access services as specified in the Interpreter Services Guidelines, Appendix CR-7-A.

10. . Local Agencies shall maintain a list of and coordinate outreach efforts with persons/organizations serving migrant and other minority populations in their service areas. These service providers may include:
 - 10.1. Head Start
 - 10.2. Migrant health centers
 - 10.3. Refugee resettlement programs
 - 10.4. Public Health Nursing
 - 10.5. Other DHHS funded community initiatives

11. Local Agencies shall facilitate service to homeless families/individuals by taking reasonable

steps to establish that the homeless facility meets the following conditions with respect to resident WIC participants:

- 11.1. The homeless facility does not accrue financial or in-kind benefit from a person's participation in the Program, e.g., by reducing its expenditures for food service because its residents are receiving WIC foods. Foods provided by the WIC Program are not subsumed into a communal food service, but are available exclusively to the WIC participant for whom they were issued.
- 11.2. The homeless facility places no constraints on the ability of the participant to partake of the supplemental foods and nutrition education available under the Program.
 - 11.2.1. Contact the homeless facility periodically to ensure continued compliance with these conditions.
 - 11.2.2. Request the homeless facility notify the State or Local Agency if it ceases to meet any of these conditions.
12. Migrant farm workers typically are employed in Maine during the summer and early fall crop season. Migrant workers frequently remain in the local area for a very short time.
 - 12.1. It is essential that certification, transfer of eligibility, and receipt of WIC foods are received as expeditiously as possible. WIC benefits must be issued on the same day the migrant participant is certified.
 - 12.2. Local Agencies are required to make special efforts to reach out and serve the migrant population. Decisions about clinic hours and service coordination should be made in consultation with area migrant program coordinators and other organizations in the service area.
 - 12.3. Special outreach and referral efforts implemented by a Local Agency to provide access to services for migrant workers and their families shall be documented in the Local Agency agreement.
 - 12.4. The State Agency is responsible for monitoring migrant services provided by Local Agencies.
 - 12.5. Local Agencies with a significant migrant population must conduct and document specific outreach efforts, which ensure the number of migrants enrolled adequately represent the migrant population in the service area.
13. The WIC program shall collaborate with the Children with Special Health Needs Program in the following manner:
 - 13.1. The Children with Special Health Needs program is designed to help families who have a child with a chronic, long-term disease or condition that needs subspecialty physician treatment and whose condition can be improved by such treatment.
 - 13.2. A diagnosis does not automatically qualify a child for services.
 - 13.3. The program will pre-authorize payment for formula or special medical foods under certain specific conditions for children who have a diagnosis of an error of inborn

metabolism and who are without MaineCare. Staff should call the Children with Special Health Needs Program at 287-5357 or 1-800-698-3624 to discuss a referral.

14. The Local Agencies must make every effort to alleviate barriers to WIC services for all eligible and potentially eligible individuals during critical times of growth and development.

15. The State Agency has an agreement with Indian Township and Pleasant Point Health Centers to monitor WIC enrollment for possible dual enrollment.

16. Micmac, Maliseet and Penobscot tribal organizations are served by Maine CDC WIC Local Agencies.

16.1. WIC Local Agencies are responsible to make every effort to locate and enroll Native American participants that are not served by Tribal WIC organizations.

16.2. The following Indian Tribal organizations exist in Maine:

Aroostook Band of Micmac Indians *
PO Box 772
Presque Isle, Maine 04769 207-764-1972

Houlton Band of Maliseet Indians *
Rt 3 Box 450
Houlton, Maine 04730 207-532-4273

Indian Township Health Center
PO Box 301
Princeton, Maine 04668 207-796-2322

Pleasant Point Health Center
PO Box 343
Perry, Maine 04667 207-853-0644

Penobscot Indian Nation **
Community Building-Indian Island
Old Town, Maine 04468
207-817-7300

* Services provided by Aroostook County Community Action Program

** Services provided by Bangor Department of Health and Community Services