

Leveraging WIC Collaborations to Address Syphilis

Collaborations between Women, Infants, and Children (WIC) programs and states can be effective in combatting the syphilis and congenital syphilis epidemic. Below are some examples that states can consider when working with WIC programs.

- Pennsylvania's [WIC program](#) provides support in finding free and confidential sexually transmitted infections (STI) testing and treatment centers.
- Utah worked with their local health department to partner with their WIC classes to provide education on syphilis in pregnancy to class attendees. The state has provided the WIC program with CDC's [maternal syphilis brochure](#) as a resource.
- New Mexico has started the conversation of collaborating with WIC to address syphilis. During an investigation where the state was trying to find a syphilis case who might attend WIC, WIC staff raised some concerns, including maintaining client trust in the program, protecting confidentiality, and avoiding scaring clients off. However, the state and WIC identified potential solutions, such as having WIC staff contact clients or flagging the WIC system for referrals when relevant cases arise.
- Montana's STI program is collaborating with WIC and other maternal and child health programs to raise awareness and increase congenital syphilis screening, particularly among pregnant people and people who use drugs. After issuing a Health Alert Network message with screening recommendations, one local health department partnered with their local maternal and child health programs, including WIC, to identify inconsistent prenatal care and connect clients to communicable disease nurses for point-of-care syphilis testing.
 - While the state supplies point-of-care tests, barriers include WIC funding restrictions that limit non-WIC services, like staff time. To address this barrier, Montana is creating a guidance document outlining the issue and allowable activities under WIC funding.
- Arkansas is exploring partnerships with WIC programs to support maternal health. The state has started linking data to assess how many people used WIC before and after pregnancy. Following this data analysis, the state will collaborate with WIC to develop strategies for connecting people to treatment and care, as well as providing outreach materials for use in clinics.

Key takeaways your state can consider as you are implementing ways to foster and deepen WIC collaborations:

- **Education and Awareness:** Leverage WIC programs to educate clients about syphilis and congenital syphilis using accessible materials like brochures and other outreach materials.
- **Connection to Health Services:** Focus on connecting clients to STI/syphilis testing, treatment, and care through referrals.
- **Evidence-Based Strategies:** Data analysis plays a critical role in understanding WIC program use and guiding strategies to link clients to necessary health services.
- **Continuously Addressing Barriers:** Barriers that states continue to face include funding restrictions, confidentiality concerns, and maintaining WIC client trust. Continuous discussion can increase awareness and address these barriers to strengthen and deepen collaborations with WIC.