National WIC Association WIC for a Healthier America

What Would WIC Look Like with Inadequate Funding?

1) WAITLISTS: WIC would not be able to serve all eligible mothers and young children seeking services. WIC has a priority system to serve the most at-risk clients; first post-partum women would move to waitlists, then three and four year olds. However, with one-year certification for children, some states may be forced to cut higher risk participants in the near term.

2) MORE CLINICS WILL BE FORCED TO CLOSE AND CONSOLIDATE: In

an effort to serve as many participants as possible with fewer resources, many clinics will consolidate and close. Rural sites are most vulnerable. Regardless of geographic location, closing clinics reduces access to the vital services of the WIC Program.

3) DECREASED QUALITY OF

SERVICES: As fewer staff are trying to see clients at fewer clinics, they will spend less time on nutrition education and breastfeeding education and support with each client, mission-driven components of the program.

4) BREASTFEEDING SUPPORT REDUCED OR ELIMINATED:

Resources to support breastfeeding moms like breastfeeding peer counselors and breast pumps may be eliminated. Breastfeeding support may be reduced to simple education. Without peer counselors and providing working mothers with access to breast pumps, breastfeeding rates would likely decrease in the WIC population. These mothers and young children could face health consequences in the future that could have been prevented with the help of breastfeeding.

5) **SELF-SELECTION OUT OF THE**

PROGRAM: Many mothers and young children at nutrition risk and eligible for the program would self-select out of the program for fear of taking resources away from those in worse circumstances

than themselves. Others may select out because getting to a clinic that is farther away and taking off work to wait longer for services are new obstacles. At-risk mothers and young children failing to participate in the program may suffer developmental and other nutrition-related health problems later in life, negatively impacting their ability to contribute to society and increasing their health care cost burden to themselves and the country.

6) DECLINING QUALITY OF MONI-TORING PROGRAM INTEGRITY AND MANAGING VENDORS: With attention and resources focused on serving as

many clients as possible with less funding, programs may be forced to divert resources from program integrity monitoring and vendor management.

7) PAPER CHECKS: Funding shortfalls in the program will likely result in no funding for technology for updating state management information systems (MIS) and planning and implementing electronic benefits transfer (EBT) systems. Without funding, achieving EBT by 2020 for all states is near impossible. EBT is an important program integrity tool that allows states to track food costs and vendor practices in real time to more guickly identify and address incidences of fraud. Additionally, WIC participants have the flexibility to shop more according to their food needs throughout the month rather than redeeming all WIC items at once.

8) FUNDING FOR THE TRIBAL PRO-GRAMS AND U.S. TERRITORY WIC PROGRAMS MAY DISAPPEAR.

Historically, USDA has funded Indian Tribal Organization (ITO) WIC Programs and other federal nutrition programs separately from geographic state agencies. These tribal WIC Programs serve clients who may not be conveniently located to any other WIC clinics.

As the nation's premier public health nutrition program, WIC is a cost-effective, sound investment insuring the health of our children.

NWA'S MISSION

NWA inspires and empowers the WIC community to advocate for and promote quality nutrition services for all eligible mothers and young children, and assure effective management of WIC.

Inadequate Funding Would Mean a Less Effective Program	
WIC PROGRAM OUTCOMES	WHY IT'S IMPORTANT
 Fewer Healthy Birth Outcomes » Prenatal WIC participation is associated with lower infant mortality rates.¹ » It is now well-documented in research that WIC has done a good job of improving birth outcomes and the health of infants, including reducing low birth weight births below 2500g.² ³ ⁴ ⁵ ⁶ ⁷ ⁸ ⁹ WIC is particularly effective at improving birth outcomes in the moms with inadequate prenatal care and who are particularly high risk cases.¹⁰ ¹¹ Longer duration of participation in WIC yields better birth outcomes. WIC participation results in better birth outcomes therefore WIC participation also results in lower Medicaid costs.¹² ¹³ ¹⁴ 	Preterm births cost the U.S. over \$26 billion a year, with average first year medical costs for a premature/low birth-weight baby of \$49,033 compared to \$4,551 for a baby born without complications. ¹⁵ For every dollar spent on a pregnant woman in WIC, up to \$4.21 is saved in Medicaid. ¹⁶
 Lower Breastfeeding Rates » With increasing breastfeeding education and support services over the years, the WIC breastfeeding initiation rate increased 21.8 percentage points to 63.1% between 1998 and 2010.¹⁷ » WIC has been shown to positively influence a mother's decision to breastfeed.¹⁸ WIC's Loving Support Makes Breastfeeding Work campaign has also been successful in educating and raising awareness about breastfeeding.^{19 20} And, breastfeeding peer counselor support has been shown to be effective in improving breastfeeding initiation and duration rates in low-income women in WIC and in women overall.^{21 22 23 24} 	Breastfeeding helps mothers feel close to their babies, and breast milk contains all the nutrients infants need to grow and develop. Breastfed infants tend to be healthier since they receive antibodies from the breast milk, protecting them against infection. Breastfeed- ing has been shown to reduce the risk for developing obesity later in childhood. ²⁵ ²⁶ ²⁷ ²⁸ ²⁹ It provides a protective effect against infectious diseases and sudden infant death syndrome in children. ^{30 31} And, it improves cognitive development. ³² It has been associated with a reduction in LDL cholesterol, blood pressure related dis- orders, type 2 diabetes, and cardiovascular dysfunction. ³³ Additionally, if 90% of US mothers exclusively breastfed their infants to 6 months, the US would save \$13 billion per year in medical expenses and prevent over 900 deaths annually. ³⁴
 Inadequate Growth and Development » Infants receiving WIC are less likely to be underweight, but are not at greater risk for overweight.³⁵ » Four and five-year-olds whose mothers participated in WIC during pregnancy have better vocabulary test scores than children whose mothers had not received WIC benefits.³⁶ 	Infancy and early childhood are formative years for physical and cognitive development, setting a positive or negative health trajectory for the rest of life.

Inadequate Funding Would Mean a Less Effective Program		
WIC PROGRAM OUTCOMES	WHY IT'S IMPORTANT	
 Decreased Consumption of Key Nutrients/Decreased Nutrient Density of Diet » WIC children have higher increased intakes of iron, potassium, and fiber. ³⁷ » WIC nutrition education leads to an increased consumption of whole grains, fruits, and lower-fat milk. ³⁸ » WIC participation has been documented as associated with improvement in Healthy Eating Index scores and subscores for vegetables, fruits and meats as well as decreasing intake of fat and added sugar. ³⁹ 40 » After the introduction of the updated WIC food packages, WIC participants increased consumption of healthy foods, including whole grains, fruits, and vegetables, and decreased consumption of whole milk. ⁴¹ 	A healthy diet is associated with a positive health status and can reduce the risk for several chronic diseases in- cluding obesity, heart disease, type 2 diabetes, and some cancers. Consuming a healthy diet during early child- hood contributes to adequate growth and development.	
Increased Prevalence of Anemia » Low-income children enrolled in WIC have a lower prevalence of anemia than those who are not enrolled in WIC. ⁴²	Anemia is a condition caused by lack of healthy red blood cells to carry oxygen around to tissues in the body. Not only does anemia disrupt the growth and health of body tissues because they are not getting enough oxygen, but symptoms that manifest as a result, including fatigue, diz- ziness, headaches and difficulty concentrating, interfere with living a productive and healthy life. ⁴³	
Less Likelihood of Immunization » Children who participate in WIC are more likely to be immunized than children who drop out of WIC. ⁴⁴	Vaccines protect children from well-known serious infec- tions that can lead to further medical complications, poor health, and death. Vaccination of large portions of a popu- lation also hinders the spread of infectious diseases, and as a result, protects vulnerable members of the community who cannot get vaccinated for various reasons.	

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