



Action Plan on FY 2012 WIC Funding and Beyond

Washington, DC, 8 August 2011 – The House of Representatives voted in June to approve a woefully inadequate Fiscal Year 2012 Agriculture Appropriations bill (H.R. 2112) that funds WIC at \$6.001 billion and cuts hundreds of millions of dollars from the WIC Program – at least \$733 million off of the Fiscal Year 2011 funding level of \$6.734 billion and at least \$830 million below **NWA's** funding recommendation of \$6.830 billion!

The result: hundreds of thousands of mothers and young children (between 300,000 – 450,000) will be denied essential supplemental foods and life-changing, health-care dollar saving WIC nutrition benefits.

The Budget Control Act of 2011 places a huge burden on domestic discretionary funding for programs like WIC, particularly as WIC is considered a “non-exempt” program under the Act and subject to potentially severe cuts in FY 2014 – FY 2021.

The fate of the WIC Program rests in the hands of the U.S. Senate expected to mark-up an Agriculture Appropriations bill for FY 2012 in Subcommittee following the Labor Day recess by mid-September.

NWA sponsored a national conference call on Friday 3 June to alert our membership to this impending funding crisis and to encourage members and their friends, family, and colleagues to take action. **NWA** sponsored an additional national conference call on Wednesday 3 August to discuss the impact of the Budget Control Act of 2011 on WIC.

Here's what needs to be done not simply for FY 2012 WIC Funding, but for FY 2013 and beyond:

What:

Schedule education meetings during this August Congressional recess with your state's U.S. Senators and Representatives. Do everything you can to assure this is a personal meeting with your Senator and Representative and not simply their staff.

NWA is not asking you to lobby on a particular bill, but to educate your U.S. Senators and Representatives about WIC and WIC's importance and value to the nation and their

constituents, so that they can make wise decisions on behalf of their constituents, their neighbors.

Goals:

1. Assure that WIC mothers and young children do not become needless victims to the budget axe!
2. Educate and equip Senators and Representatives to witness with facts to the value of WIC for their constituents in budget and appropriation discussions and negotiations.

How:

1. Organize a coalition of supportive partners and competent spokespersons from the medical, advocacy, business, and faith communities, who are willing to join you in these meetings (or meet without you should you be unable to participate) and who will reinforce WIC's role in improving the nutritional health and well-being of mothers and young children in your communities;
2. Include willing WIC voices who can speak as the "face of WIC" and grandmothers who can speak about what WIC does for their grandchildren;
3. Schedule meetings with your U.S. Senators and Representatives – the goal is to meet in person with Senators and Representatives (in the event a personal meeting is not possible schedule a meeting with the Chief of Staff – but remember the goal is to meet with your Senators and Representatives);
4. Gather relevant local and national data to help you in educating and arming your Senators and Representatives with WIC truths;
5. Visit www.nwica.org and access supporting documents and State Profiles as give-aways;
6. Rehearse as a group the presentation you will make;
7. Meet and make presentations to Senators and Representatives;
8. Follow-up with a thank you note, supporting materials and documentation that may have been promised, answers to questions requiring further follow-up;
9. Advise the **NWA** national office of the meeting substance, attendees, and outcomes.

Message:

- WIC is a superb example of American exceptionalism!
- WIC is preventative public health nutrition!
- WIC is mission driven. Benefits include:
 - nutrition education, breastfeeding promotion and support, prenatal, pediatric, and immunization referrals, social service referrals, child and adult abuse counseling referrals, drug and alcohol counseling referrals, among other services, and supplemental nutritious foods;
- To qualify for participation in WIC:
 - One must be either a pregnant, breastfeeding, or a post-partum woman and children up to age 5;

- Participants' income levels must be at or below 185% of the poverty level or participate in Medicaid – linking two critical prevention programs and saving WIC administrative costs; and
 - At least one nutrition risk has to be documented.
- WIC serves:
 - One out of every two infants born in the U.S., one out of every two grandchildren in America;
 - One out of every four pregnant women;
 - 85% of the mothers are 18-34 years old;
 - 61% reside in families with income below the poverty level;
 - 57% of participants are non-Hispanic, 42% Hispanic;
 - 60% are white, 19% are black, 11% American Indian or Alaskan Natives, and 3% were Asian or Pacific Islanders.
- WIC provides nutritious food packages valued at an average of \$42 per month that:
 - Are scientifically based and designed to reinforce the nutrition education provided in WIC clinics;
 - Address emerging public health nutrition related issues;
 - Provide nutrients found lacking in the diets of low-income populations;
 - Include whole grains, low-fat dairy, fresh fruits and vegetables, soy beverage and tofu, eggs, prepared baby fruits, vegetables, and meat, light tuna, salmon, sardines, and mackerel, canned and dry beans/peanut butter, juice, and iron-fortified infant formula for mothers not breastfeeding.
- WIC nutrition goals include:
 - Healthy pregnancies, healthy birth outcomes, and healthy childhood growth and development;
- WIC is results oriented:
 - Pregnant women participating in WIC have longer pregnancies leading to fewer premature births, fewer low and very low birth-weight babies, experience fewer fetal and infant deaths, seek prenatal care earlier in pregnancy and consume more key nutrients including iron, protein, calcium, and Vitamins A and C.
 - Every dollar spent on pregnant women in WIC produces \$1.92 to \$4.21 in Medicaid savings for newborns and their mothers;
 - WIC prenatal care benefits reduce the rate of low birth-weight babies by 25% and very low birth-weight babies by 44%;
 - Medicaid costs are reduced on average between \$12,000 and \$15,000 for every very low birth-weight incident prevented;
 - For very low birth-weight babies, a shift of 1 pound at birth saves approximately \$28,000 in first year medical costs;
 - The average first year medical costs for premature/low birth-weight baby is \$49,033 compared to \$4,551 for a baby without complications;
 - WIC children at ages 1 to 2 have less dental related Medicaid costs compared to non-WIC children;
 - WIC children are more likely to be immunized, have a lower prevalence of anemia, are at reduced risk of child abuse or neglect, have increased

- o intakes of iron, potassium, and fiber, and increased consumption of whole grains, fruits, and lower-fat milk;
- Four and five-year-olds whose mothers participating in WIC during pregnancy have better vocabulary test scores than children whose mothers had not received WIC benefits;
 - o That's the difference that WIC preventative public health nutrition benefits make!
- WIC benefits the local economy:
 - o In Fiscal Year 2010 over \$4.56 billion in food benefits were spent in local economies at mom & pop stores, corner stores, small and large retail groceries, and big box stores across the nation, strengthening jobs and assisting farmers;
- WIC is efficiently managed:
 - o program management or administrative costs in FY 2010 were less than 10% well below the Better Business Bureau Wise Giving Alliance charity standard for administrative costs of 35%;
 - o WIC Programs actively investigate potential fraud and take action through recoveries, civil penalties and other appropriate actions. Rates of fraud are low and are reduced by pro-active training and firm, fair enforcement actions.
- WIC is entrepreneurial:
 - o In 2010, \$1.7 billion in non-tax revenues were generated through competitive bidding of infant formula and other cost containment initiatives.

Ask:

- Can we count on you to:
 - o Help make a healthy nutrition difference in the lives of low-income mothers and young children;
 - o Help save the nation's health care dollars;
 - o Help assure healthy pregnancies, healthy birth outcomes, healthy child growth and development;
 - o Help prepare young children for school, ready to learn;
 - o Protect WIC for our nation's most vulnerable population – low-income mothers and young children.