

POLICY POSITION

14. Supplemental Food Program for Women, Infants, and Children (WIC)

Background

The South consistently has been the region with the highest infant mortality rates in the country. The factor most closely associated with infant mortality is low birth weight. Also associated with low birth weight are physical and mental disabilities such as blindness, deafness, mental retardation and learning disabilities, and central nervous system disorders.

Common factors contributing to low birth weight include poor maternal nutrition and lack of prenatal care. Low weight births are most prevalent among poor, less educated, single parent and minority mothers.

The federal supplemental food program for Women, Infants and Children (WIC) was established to address poor nutrition of pregnant and nursing women, infants and young children. The WIC program, administered by the U.S. Department of Agriculture, operates through local WIC sponsors. It provides prescription food supplements (such as infant formula, milk, eggs and fruit juice) and nutrition counseling to eligible persons.

To be eligible, women and children under five must be low-income (having an income maximum at 100% of poverty or up to 185% of poverty, as set by each state) and must be determined by a medical professional to be at a nutritional risk. The WIC sponsors are generally clinics, hospitals, or other health agencies. WIC food supplements are delivered in one of three ways:

1. WIC vouchers/coupons distributed to recipients who may redeem them at grocery stores for the prescribed foods;
2. retail food items distributed to recipients by WIC sponsors at designed locations;
3. prescribed food items delivered to homes by a dairy under contract with a WIC sponsor.

Several studies have been conducted by organizations such as the Harvard School of Public Health, the Massachusetts Department of Public Health and the Center for Disease Control of the Department of Health and Human Services. These studies show that the WIC Program has resulted in a marked reduction in low birth weight and ultimately infant mortality. Reductions in low birth weight contribute to lower health care costs after birth due to a reduced risk of major health problems often cause by low birth weights.

Presently, approximately 3.1 million persons are being served under the WIC Program. However, this represents only slightly more than one-third of those eligible. Although Administration proposals over the last several years to cut funding or to eliminate the program have been rejected by Congress, current funding levels clearly do not meet the need for such assistance.

The Southern region also is able to serve only slightly more than one-third of those eligible; however, some states serve less than 30%. Many counties in the Southern states continue to go entirely unserved due to inadequate funding.

Recommendation

The Southern Legislative Conference commends Congress for rejecting proposals to cut WIC funding or eliminate the program and supports federal and state legislation and proposals to supplement the WIC Program in an effort to reach more of those eligible and in need of WIC services.

Adopted by the Southern Legislative Conference on July 24, 1985.

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