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United States Senate

COMMITTEE ON APPROPRIATIONS
WASHINGTON, DC 20510-6025

FRANCIS J. SULLIVAN, STAFF DIRECTOR
J. KEITH KENNEDY, MINORITY STAFF DIRECTOR

March 23, 1987

Dear Colleague:

On March 19 we introduced S.J. Res. 99 to express the sense of the Congress that funding for the Special Supplemental Food Program for Women, Infants and Children, WIC, should be increased. We are writing to ask you to join us as a cosponsor of this important resolution.

WIC is a federally funded food program designed to improve the nutrition and health status of low income pregnant, breast-feeding, and postpartum women, infants and preschool children who are at nutritional risk. Program benefits include the provision of highly nutritious supplemental food, nutrition education, and referral to health care.

As you may know, WIC is currently able to serve fewer than half of the eligible women, infants and children in need of program benefits due to limited funding. Our resolution calls for a steady, gradual increase in participation of approximately 5 percent more women, infants and children each year. Over the next four years, the number of women, infants and children served would increase from less than 50 percent to 65 percent.

A recent five-year national evaluation of WIC released by the U.S. Department of Agriculture demonstrated that WIC is one of the most effective and successful programs the federal government operates. The evaluation found that WIC reduces late fetal deaths and the incidence of low birthweight, the leading cause of infant mortality; increases the head circumference of infants whose mothers participate in WIC during pregnancy (head size reflects brain growth); and increases the number of low income women getting adequate prenatal care. Adequate prenatal care was cited in the 1985 Institute of Medicine report, Preventing Low Birthweight, as an essential prerequisite for the reduction of low birthweight. The national evaluation also found that WIC improves the diets of participating women and children.

Another significant study by researchers from the Yale School of Medicine--documented in a 1985 article in the New England Journal of Medicine--found that WIC reduces iron deficiency anemia among low income children.

This program is also extraordinarily cost effective. A Harvard University School of Public Health study found that every dollar spent on the prenatal component of WIC potentially saves three dollars in later health care costs. A recent article in Public Health Reports, the American Public Health Association's journal, reported on the findings of a Missouri Health Department study which indicated that every dollar spent on WIC's prenatal component saved \$.49 in Medicaid expenditures during the first 45 days of life alone.

The proven success of the WIC program warrants its expansion. To thwart the program's potential success through inadequate funding levels and to limit the number of vulnerable women and children whose health status can be improved, is shortsighted and unwise.

This joint resolution represents an important step in strengthening the WIC program and saving the government significant outlays in other public programs. Please join us here and in subsequent appropriation efforts to expand the program to those in need.

We hope you will cosponsor S.J. Res. 99. To add your name, please call Dick Coccozza at 4-7805.

Sincerely,

Jim Dorsch
John F. Leary

Tom Harkin

Phil Brandt

Dennis DeConcini

Kent Conrad

Paul A. ...

Peterson Leary