



State of Connecticut
GENERAL ASSEMBLY



Commission on Children

Testimony of
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Senator Handley, Representative Sayers, and Members of the Committee:

Thank you for this opportunity to testify on behalf of the Connecticut Commission on Children concerning Committee Bill 688, *An Act Concerning State Enhancement to the Federal Supplemental Food Program for Women, Infants and Children*. This important legislation would provide state enhancement funds for the federally funded Supplemental Food Program for Women, Infants and Children (WIC).

The Commission on Children strongly supports this bill. We also offer recommendations to strengthen the legislation. At a time when our state leaders are increasingly interested in investing in prevention and programs that show results, WIC is a perfect fit.

WIC: A Public Health Success Story

The WIC program is one of the biggest public health success stories in the nation's history. It provides supplemental food, nutrition education and health care referral services to pregnant women, infants and young children under age five from low-income households who are determined by medical professionals to be at nutritional risk. Nutritional deficiencies during pregnancy or early childhood can result in lasting damage to a child's mental and physical development.

WIC's nutrition education includes a focus on encouraging healthy eating and active habits, supporting breastfeeding mothers, and providing information on how to shop for nutritious foods. The combination of essential food, health referrals, and nutrition education is a key component of WIC's success.

The WIC program is nationally known as one of the best investments government can make in a child's life. It has been proven to increase the number of women receiving prenatal care, to reduce the incidence of low birth weight, fetal mortality, and anemia, and to enhance the

nutritional quality of participants' diets. In addition, the program reduces the need for extensive medical care and thus yields savings in the Medicaid program.

WIC participation has been strongly associated with improved cognitive development, school readiness and immunization rates among children. As a key component in school success, it is a critical anti-poverty program. However, it serves many unexpected families in need – for example, many military families depend upon WIC.

Saving Millions of Dollars for Connecticut

Every dollar spent on WIC results in between \$ 1.77 and \$ 3.13 in Medicaid savings for newborns and their mothers, according to the U.S. Department of Agriculture. In Connecticut, the WIC program served an average monthly total of 51,410 persons in 2006. However, an estimated 10,000 to 12,000 eligible persons were unserved by the program. The large number of unserved families in Connecticut represents a missed opportunity for WIC to provide health benefits to vulnerable families and to produce additional cost savings.

A Critical Hub for Cost-Effective Prevention Investments

As a health promotion and disease prevention agency, WIC plays a critical role in state program referral and outreach.

In Connecticut, WIC assists the Head Start and Early Head Start Programs in participant recruitment. WIC works with the HUSKY Program and with Community Health Centers to ensure that all of the centers' children have medical insurance coverage and/or primary health care providers. WIC integrates its outreach efforts with the Food Stamp Program. WIC assists area health departments in locating children lost to the CIRTS statewide immunization-tracking program. WIC avails municipal and area hospital public health education and intervention programs to its participants, including lead screening, poisoning prevention and abatement measures; cardiovascular disease prevention; child safety; obesity prevention; community baby showers; health fairs; smoking cessation; and low-income dental health clinics. Community service organizations donate thousands of new children's books to WIC for distribution, and civic groups – as well as the participants themselves – donate children's clothing to WIC participants. With its audience of low-income families, WIC is truly a hub agency.

Obesity and WIC

Childhood obesity has become a very serious public health crisis. The U.S. Surgeon General has labeled it an epidemic.

Nationally the prevalence of overweight children nearly doubled in the past 20 years and nearly tripled for adolescents. A study published last year estimated that by 2010 nearly half of North

and South American children will be overweight. Adult obesity in Connecticut has nearly doubled in fifteen years. Twenty percent (20%) of our state's adults were obese in 2005.

Most obese children grow up to be obese adults and suffer from the conditions associated with obesity, including heart disease, stroke and diabetes. Obesity has costly direct and indirect consequences for families, health systems and the government programs that pay for emergency and long-term illness care. In Connecticut, obesity-related health problems for adults cost an estimated \$856 million in annual medical expenses.

Although obesity affects children and families of all income levels, it tends to affect low-income people more than those with higher incomes. Several studies have shown a strong association between food insecurity and obesity among low-income women. According to the Food Research and Action Center, "the reasons are unclear, but appear to be related to how they manage limited resources for food – sacrificing, on a cyclical basis, the quality and quantity of the food they eat in order to protect their children."¹

WIC plays an important role in addressing the obesity epidemic, as well as in increasing economic security and improving nutritional intake. A 2004 study concluded that WIC participation prevents overweight in young children. Increasing access to the WIC program – in order to help young families establish healthy eating patterns on low incomes – is essential.

Federal and State Funding Issues Facing WIC

The federal budget for WIC does not propose sufficient funding to meet the expected need nationally for WIC. WIC needs additional administrative funding. In terms of service delivery dollars, the federal government has under funded the state WIC program for years. While food dollars from the federal government have been generally adequate, WIC administrative funding for nutrition education, staffing, enrollment and outreach has been level-funded for years.

This funding situation has caused staff shortages and has impaired the delivery of public health services. Many families have to wait weeks for an enrollment appointment at local WIC agencies in Connecticut. The diversion of management resources to cover clerical, enrollment and nutrition education functions, as a means of compensating for staff shortages, has harmed outreach and interagency referral and service integration measures. The large number of unserved persons may be a reflection of the reduced outreach and referral efforts caused by the funding shortage.

Some states appropriate funds to supplement federal WIC dollars for food and/or administrative expenses such as nutrition education. For example, New York and Massachusetts have invested significant state funds for WIC. Connecticut should follow their lead and invest cost-effective dollars in this model program.

¹ Parker, L. (2005, Oct.) *Obesity, food insecurity and the federal child nutrition program: Understanding the linkages*. Washington, DC: Food Research and Action Center.

Conclusion

In order to continue its cost-effective work, Connecticut's federally-funded WIC Program needs state support. S.B. 688 takes a major step toward providing that support and strengthening the safety net that protects Connecticut's children. We urge you to approve the bill with sufficient funding to meet WIC program needs in the areas of administration and outreach. This funding should be tied to incentives to ensure that the program improves the level of participation by eligible persons and the quality of service.

In addition, we recommend that the bill be amended to provide for the creation of an oversight council to assist the Department of Public Health in the administration and oversight of this critical federal-state program. Unlike other programs in the state, the WIC program has very little guidance and oversight from those outside the administering state agency. With the administrative challenges resulting from funding shortages, effective oversight is very important.

Consumer families, regional directors, community advocates and state legislators should be represented on this oversight council, which should be charged with ensuring that the program is run efficiently and effectively in order to meet the nutritional needs of all eligible children and families. The oversight council should have a decision-making role where appropriate and should report directly to the General Assembly.

We urge passage of the bill with the changes recommended in this testimony.