

HEALTHY MOTHERS, HEALTHY BABIES
4 SEASONS HOTEL, WASHINGTON, D.C.
MAY 17, 1984

- I HAVE BEEN ACTIVELY INVOLVED IN HEALTH AND NUTRITION BECAUSE OF THE COMMITTEES WHICH I CHAIR -- THE FINANCE COMMITTEE, WHICH DEALS WITH MAJOR HEALTH PROGRAMS AND THE NUTRITION SUBCOMMITTEE, WHICH DEALS WITH FEDERAL NUTRITION PROGRAMS, INCLUDING THE SPECIAL SUPPLEMENTAL FOOD PROGRAM FOR WOMEN, INFANTS, AND CHILDREN, USUALLY REFERRED TO AS WIC.
- PERHAPS THE WIC PROGRAM BEST EXEMPLIFIES THE FEDERAL GOVERNMENT'S APPROACH TO PREVENTIVE MEDICINE AND HEALTH PROMOTION FOR PREGNANT WOMEN. WIC CURRENTLY PROVIDES NUTRITION BENEFITS TO ABOUT 3 MILLION WOMEN, INFANTS AND CHILDREN THROUGHOUT THIS COUNTRY WHO ARE CERTIFIED TO BE AT NUTRITIONAL RISK. THIS IS UP FROM 2.2 MILLION IN 1981. THE FEDERAL GOVERNMENT INVESTED ABOUT \$900 MILLION IN 1981 IN THE WIC PROGRAM -- IT'S NOW ABOUT \$1.4 BILLION.
- EVALUATION STUDIES INDICATE THE WIC PROGRAM HAS BEEN COST EFFECTIVE IN BOTH HEALTH AND DOLLAR TERMS -- A MAJOR STUDY AT THE HARVARD SCHOOL OF PUBLIC HEALTH FOUND THAT EACH \$1 SPENT IN THE PRENATAL COMPONENT OF WIC AVERTS \$3 IN HOSPITALIZATION COSTS DUE TO THE REDUCED NUMBER OF LOW BIRTHWEIGHT INFANTS REQUIRING HOSPITALIZATION.
- ALTHOUGH WIC HELPS IN PROVIDING GOOD NUTRITION TO PREGNANT WOMEN, MORE NEEDS TO BE DONE. THIS IS WHERE THE "HEALTHY MOTHERS, HEALTHY BABIES" MEDIA CAMPAIGN CAN PLAY A VALUABLE ROLE.

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- GOVERNMENT CANNOT ASSUME ALL OF THE RESPONSIBILITY, AND WHAT YOU DO IN THE PRIVATE SECTOR WILL COMPLEMENT GOVERNMENT EFFORTS. I COMMEND THOSE INVOLVED IN THIS MEDIA CAMPAIGN WHICH REPRESENTS PARTNERSHIP AMONG GOVERNMENT, PROFESSIONAL, AND VOLUNTARY ORGANIZATIONS. WITH THIS KIND OF COOPERATION, THERE IS A BETTER CHANCE THAT PREGNANT WOMEN AND THEIR FAMILIES WILL HAVE ACCESS TO INFORMATION ABOUT WHAT THEY CAN DO FOR THEIR OWN BEST HEALTH AND THAT OF THEIR UNBORN BABIES AND YOUNG INFANTS.
- THERE IS A NEED FOR THIS KIND OF CAMPAIGN BECAUSE ONLY 16 OTHER NATIONS HAVE A LOWER INFANT MORTALITY RATE THAN OURS. SOME 250,000 BABIES ARE BORN WITH BIRTH DEFECTS IN THIS COUNTRY EACH YEAR. ALTHOUGH A PROGRAM LIKE WIC CAN ACHIEVE A LOT, MORE PRIVATE SECTOR INITIATIVES ARE REALLY NECESSARY.
- A RECENT GAO REPORT STATES THAT "WE ESTIMATE THAT WIC DECREASES THE PROPORTION OF LOW BIRTHWEIGHTS FOR INFANTS BORN TO WOMEN ELIGIBLE FOR WIC BY 16 TO 20 PERCENT. WIC'S EFFECT ON MEAN BIRTHWEIGHTS ALSO APPEARS TO BE POSITIVE....WIC MOTHERS APPEAR TO EXPERIENCE GREATER BENEFIT THE LONGER THEY PARTICIPATE." SINCE LOW BIRTH WEIGHT IS ONE OF THE PRINCIPAL CAUSES OF INFANT MORTALITY IN THE U.S. TODAY, THIS FINDING IS OF PARTICULAR SIGNIFICANCE.
- GAO ALSO TENTATIVELY CONCLUDED THAT TEENAGE WOMEN AND BLACK WOMEN WHO PARTICIPATE IN WIC HAVE BETTER BIRTH OUTCOMES THAN COMPARABLE WOMEN WHO DO NOT PARTICIPATE.

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- THE IMPLICATIONS OF LOW BIRTHWEIGHT -- HIGH INFANT MORTALITY, EXPENSIVE HOSPITAL COSTS IN A NEONATAL INTENSIVE CARE UNIT, AND ANY NUMBER OF DEVELOPMENTAL DISABILITIES -- SHOULD CAUSE US TO TAKE A PREVENTIVE APPROACH TO BIRTH DEFECTS BY EDUCATING WOMEN ABOUT PROPER NUTRITION AND SELF-CARE DURING PREGNANCY.
- A RECENT WIC PROGRAM EVALUATION CONDUCTED BY THE MISSOURI DEPARTMENT OF PUBLIC HEALTH FOUND THAT THE INCIDENCE OF LOW BIRTHWEIGHT WAS REDUCED MORE THAN 50 PERCENT AMONG BABIES BORN TO MOTHERS WHO PARTICIPATED IN WIC FOR MORE THAN SIX MONTHS PRIOR TO DELIVERY.
- THIS SAME STUDY, WHICH IS WIDELY REGARDED AS THE BEST OF ITS KIND, EXAMINED MEDICAID COSTS DURING THE FIRST MONTH OF LIFE -- AND FOUND THAT FOR EVERY DOLLAR SPENT ON THE PRENATAL COMPONENT OF WIC, THERE WAS A SAVINGS OF \$1.42 IN ACTUAL MEDICAID COSTS JUST DURING THE FIRST MONTH OF LIFE.
- AS AN INTERVENTION STRATEGY, WIC HAS CERTAINLY PROVEN ITS EFFECTIVENESS -- IT NOT ONLY SPARES MANY BABIES FROM FUTURE MENTAL AND PHYSICAL HANDICAPS, BUT IT SAVES SOCIETY THE HIGH COST OF PUBLIC ASSISTANCE PROGRAMS SUCH AS MEDICAID, SSI FOR DISABLED CHILDREN, AND SPECIAL EDUCATION.

MATERNAL AND CHILD HEALTH BLOCK GRANT

- THE COMMITMENT OF THE FEDERAL GOVERNMENT TO THE HEALTH OF MOTHERS AND CHILDREN HAS A LONG HISTORY. SINCE THE PASSAGE OF TITLE V OF THE SOCIAL SECURITY ACT WHICH PROVIDED GRANTS TO STATES FOR MATERNAL AND CHILD HEALTH PROGRAMS, A LARGE NUMBER OF SMALL, NARROWLY-FOCUSED CATEGORICAL PROGRAMS, IN THIS AREA ALSO HAVE BEEN IMPLEMENTED. IN 1981, THE CONGRESS CONSOLIDATED EIGHT SUCH PROGRAMS FOR MOTHERS AND CHILDREN INTO THE MATERNAL AND CHILD HEALTH BLOCK GRANT. OUR INTENT AT THE TIME WAS CLEAR -- WE BELIEVED THAT THE CONSOLIDATION OF RELATED CATEGORICAL PROGRAMS WOULD LEAD TO THE DEVELOPMENT WITHIN THE STATES OF A MORE COMPREHENSIVE, BETTER COORDINATED APPROACH FOR PROVIDING HEALTH CARE TO MOTHERS AND CHILDREN. WE WANTED TO ASSURE THAT MOTHERS AND CHILDREN (IN PARTICULAR THOSE LIVING IN POVERTY WITH LIMITED AVAILABILITY OF HEALTH SERVICES) WOULD HAVE ACCESS TO QUALITY CARE AT REASONABLE COST.
- WE ALL KNOW THE EFFECTS THAT POOR HEALTH CARE CAN HAVE ON FETAL DEVELOPMENT AND THE GROWTH OF CHILDREN. BABIES BORN TO MOTHERS WHO RECEIVE LATE OR NO PRENATAL CARE ARE 3 TO 4 TIMES MORE LIKELY TO BE LOW BIRTH WEIGHT AND 3 TIMES MORE LIKELY TO DIE IN THE FIRST YEAR OF LIFE. CHILDREN WHOSE FAMILIES, BECAUSE OF ECONOMIC HARDSHIP, MAY NOT RECEIVE GOOD HEALTH CARE DURING THEIR DEVELOPMENTAL YEARS, ARE 2 OR 3 TIMES

MORE LIKELY TO SUFFER FROM SERIOUS CHILDHOOD ILLNESSES, 75 PERCENT MORE LIKELY TO BE ADMITTED TO A HOSPITAL IN A YEAR, AND 3 TO 4 TIMES MORE LIKELY TO BE INAPPROPRIATELY IMMUNIZED DURING THE PRESCHOOL PERIOD.

- AFTER NEARLY A TEN YEAR PERIOD IN WHICH AN INCREASING NUMBER OF WOMEN BEGAN PRENATAL CARE EARLY IN THEIR PREGNANCY, WE ARE SEEING THIS PROGRESS REVERSED. SINCE 1980, THERE HAS BEEN AN UPWARD CLIMB IN THE PERCENTAGE OF WOMEN RECEIVING LITTLE OR NO CARE.
- IN RECENT YEARS THERE HAS BEEN A DECLINE IN THE PERCENTAGE OF PRESCHOOL CHILDREN WHO ARE ADEQUATELY IMMUNIZED AGAINST CHILDHOOD DISEASE. AS A RESULT, FOR THE FIRST TIME IN MANY YEARS, CITIES ARE EXPERIENCING OUTBREAKS OF CONTAGIOUS DISEASES AMONG PRESCHOOL CHILDREN.
- THE IMPORTANCE OF THE MATERNAL AND CHILD HEALTH BLOCK GRANT TO THESE PROBLEMS IS CLEAR. WHILE MCH BLOCK GRANT FUNDS COMPRISE LESS THAN NINE PERCENT OF THE TOTAL 1983 HEALTH BUDGET OF MOST STATES, ON AVERAGE, THEY REPRESENT AT LEAST 30 PERCENT OF TOTAL EXPENDITURES FOR MATERNAL AND CHILD HEALTH SERVICES.
- THE COST EFFECTIVENESS OF THE PROGRAM -- AND ITS PARTICULAR EMPHASIS ON IMMUNIZATION -- HAS BEEN WELL DEMONSTRATED. A RECENT STUDY SHOWED THAT EVERY DOLLAR SPENT ON PREVENTIVE CARE FOR CHILDREN RESULTED IN EIGHT DOLLARS IN SAVINGS IN LONG-TERM CARE COSTS.

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- THE SENATE RECENTLY APPROVED A PERMANENT INCREASE IN THE AUTHORIZED FUNDING FOR THE MATERNAL AND CHILD HEALTH BLOCK GRANT PROGRAM. THIS INCREASE IN FUNDING WILL SUPPLEMENT MEDICAID AND GUARANTEE THAT THIS VULNERABLE POPULATION, FOR WHOM A SMALL DOLLAR INTERVENTION WILL LEAD TO A SUBSTANTIAL LONG TERM PAYOFF, IS ADEQUATELY SERVED.
- THE FINANCE COMMITTEE'S DEFICIT REDUCTION PACKAGE, CURRENTLY PENDING ON THE SENATE FLOOR, CONTAINS A PROVISION WHICH WOULD MANDATE THAT STATES PROVIDE MEDICAID COVERAGE BEGINNING WITH THE MEDICAL DETERMINATION OF PREGNANCY TO EVERY WOMAN WHO WOULD BE ELIGIBLE FOR AFDC IF THE CHILD WERE BORN.

- THE ENTIRE DISCIPLINE OF MATERNAL AND CHILD HEALTH FOCUSSES ON DEALING WITH LOW BIRTHWEIGHT INFANTS...TWO-THIRDS TO THREE-FOURTHS OF ALL THE MORTALITY IN THE NEONATAL PERIOD IS A FUNCTION OF LOW BIRTHWEIGHT. THIS IS A SERIOUS PROBLEM FOR A PROGRESSIVE, INDUSTRIAL SOCIETY LIKE OURS.
- THE WHOLE FUTURE OF OUR COUNTRY IS AT STAKE IF OUR CHILDREN ARE NOT BROUGHT INTO THE WORLD WITH THE BEST POSSIBLE CHANCE OF SURVIVAL. BECAUSE THIS IS AN ISSUE OF CONCERN TO ALL OUR CITIZENS, WE NEED THE INVOLVEMENT AND INTEREST OF EVERY SECTOR OF OUR SOCIETY.
- HEALTHY MOTHERS, HEALTHY BABIES REPRESENTS AN IMPORTANT COALITION OF PUBLIC, PRIVATE AND CORPORATE INTERESTS WITH A COMMITMENT TO PROVIDE AN IMPORTANT MESSAGE TO AMERICAN WOMEN.
- EACH YEAR 240,000 AMERICAN BABIES ARE BORN WITH DEFECTS. MANY OF THESE PROBLEMS ARE DIFFICULT TO AMELIORATE, BUT MANY MIGHT HAVE BEEN PREVENTED IF PRENATAL INFORMATION WAS PROVIDED TO WOMEN AT THE HIGHEST RISK OF BEARING LOW BIRTHWEIGHT BABIES.
- THIS FUNDRAISING EVENT WILL MAKE IT POSSIBLE TO REACH WOMEN THROUGH THE MASS MEDIA, AND HOPEFULLY IMPROVE OUR COUNTRIES' INFANT MORTALITY STATISTICS THROUGH PREVENTIVE HEALTH EDUCATION FOR A BROAD PUBLIC AUDIENCE.