

## Conclusions

WIC has grown dramatically since its establishment almost three decades ago. Strong congressional support, generated by various evaluations that found WIC to have high rates of return for its investment, resulted in increased funding for WIC, which, along with effective cost-containment practices, allowed more people to participate in the program. Legislative and regulatory actions and Federal/State/local partnerships that encouraged State innovations such as infant formula rebates have helped shape and refine the program as it evolved into one of the central components of the Nation's food assistance system. In recent years, participation in WIC has leveled off, as appropriations for WIC have stabilized at what is believed to be near full-funding levels.

As a gateway through which many low-income families enter the public health system, WIC reaches a large number of this Nation's infants and children.

Therefore, having the most effective WIC program possible can have an important influence on the health of America. The WIC community faces a number of issues that have been raised by policymakers, researchers, and WIC program managers at the Federal, State, and local levels about both the impact and the administration of the WIC program. While some of these questions have been addressed in the literature, others remain unanswered. Additional research to determine the optimal method of operating the WIC program to meet the needs of program participants given the resource constraints is needed. USDA's Economic Research Service and the Food and Nutrition Service are both currently conducting research related to WIC (see appendix for a brief description of some of these ongoing studies). Results from these studies will help shed light on many of the issues currently facing the WIC program.