

THE WICKER REPORT

By: United States Senator Roger Wicker



Wicker Honors Student Veterans

The sacrifices made by Mississippians on behalf of freedom are known around the world. On this Veterans Day, one of those heroes – Columbia native Sam Bond Dale Jr. – will be remembered with a ceremony and plaque in Le Mesnil-Fuguet, France. The village was where the young pilot lost his life after his plane was shot down by Germans during World War II.

Dale made the ultimate sacrifice, never returning to the United States to start a family or build a career. For the World War II soldiers who did

come home, a new national effort had been launched to help with the transition after the war, enabling veterans to go back to school or buy a home. That effort became known as the first G.I. Bill. Since then, the G.I. Bill has helped millions of veterans and their family members obtain a college degree or vocational training. Some 1.1 million student veterans across the nation are utilizing this benefit today.

Expansion of G.I. Bill Benefits

Although the G.I. Bill's origins go back to World War II,

former Mississippi Congressman Sonny Montgomery is responsible for ensuring that these benefits would not be lost to later generations. His dedication even earned him the nickname "Mr. Veteran." The resulting legislation, commonly known as the "Montgomery G.I. Bill," has played an immeasurable role in the continued recruitment of the best and brightest Americans into our military.

Over the past decade, I have supported several major expansions to the "Montgomery G.I. Bill," voting in favor of the "Post-9/11 G.I. Bill" in 2008 and the "Forever G.I. Bill" in 2017. Today, the benefits of the G.I. Bill extend to more veterans than ever before and no longer have an expiration date,

letting veterans control their own educational timelines.

Welcoming University Communities

Such policies are needed at the federal level, but they do not stand alone. I am glad to see the university support for student veterans growing stronger in our state. For example, in recent years, our universities have opened new centers on campus where veterans can find support for academic success and a welcoming environment. Earlier this year, Mississippi State, which has been designated as a "Purple Heart University," launched a free tuition program for service members in the Mississippi National Guard. More recently, on November 2 and 3, the University

of Mississippi had an opportunity to host VA Secretary Robert Wilkie as part of its Warrior Week to honor the student veterans and faculty veterans within its campus community.

Lessons From the Past

The stories of our veterans will continue to teach future generations, thanks to a special collection of personal accounts and memorabilia at the Library of Congress. The Veterans History Project, which was created in 2000, encompasses more than a century of primary sources from our military veter-

erans.

I hope this year's Veterans Day – which also marks the 100th anniversary of the end of World War I – will inspire others to contribute to the Veterans History Project or to spend some time discovering the many stories that have already been collected. These snapshots of history are truly a national treasure and a reminder of the American sacrifices around the world that have been made to preserve freedom. For more information, please visit www.loc.gov/vets.

Health of babies in U.S. continues to worsen March of Dimes report shows

Mississippi's preterm birth rate stays at 13.6 percent—the highest in the nation—giving the state an "F" grade, though new initiatives show promise

Mississippi's preterm birth rate in 2017 remained at 13.6 percent, which is the highest rate in the nation, and the state remained at an F Grade, according to the 2018 Premature Birth Report Card from March of Dimes, the nation's leading maternal and infant health nonprofit. For the third year in a row, more U.S. babies were born too soon with serious risks to their health. Premature birth and its complications are the largest contributor to death in the first year of life in the United States, and the leading cause of death in children under age 5 worldwide.

The overall U.S. preterm birth rate rose to 9.93 percent of births in 2017 from 9.85 percent in 2016, according to data from the National Center for Health Statistics (NCHS). While there is no single cause of preterm birth, research shows that chronic inequities and unequal access to quality health care do have a negative impact on these rates. These factors contribute to the reality that in the U.S. women of color are up to 50 percent more likely to deliver prematurely and their children can face a 130 percent higher infant death rate compared to white women. In Mississippi, for example, the preterm birth rate among black women (16 percent) is 44 percent higher than the rate among all other women.

Promising interventions can help reverse these trends, and better access to health care is essential. A recent March of Dimes report revealed the unequal access to maternity care across the US, particularly in communities with higher poverty rates. New programs have been launched by the March of Dimes and partners in Mississippi to address these inequities:

- In Jackson, MS, the University of Mississippi Medical Center is implementing IMPLICIT ICC, a quality im-

provement model that screens mothers for four risk factors at the well child visit: postpartum depression, smoking, birth spacing, and multivitamin intake. This model has been shown to produce better outcomes in subsequent pregnancies for moms as well as improve their overall health. To date, 38+ health professionals have been trained in the model and over 800 mothers have been screened.

- The Jackson State University School of Public Health was awarded a March of Dimes Community Grant for their project "Partnering to Improve African American Women's Preconception Health" to train community health workers to use One Key Question®—a screening in primary care that proactively brings up health topics like obesity, high blood pressure, and other health risks and behaviors that can be managed before a woman gets pregnant and, if addressed, can decrease unintended pregnancy and improve the health of wanted pregnancies.

The continued rise in its preterm birth rate earned the U.S. a "C" grade on the March of Dimes Premature Birth Report Card, which grades all 50 states, DC and Puerto Rico on their preterm birth rate. This year, 30 states had a worse rate compared to last year and 10 of those states received a worse grade. The Report Card shows the racial, ethnic and geographic disparities in preterm birth within each state. (Visit [March of Dimes](http://MarchofDimes.org) to download broadcast-quality videos, high-resolution pictures, documents and other links about preterm birth.)

"We must all come together to take concrete, common-sense steps to reverse this alarming trend," says Stacey D. Stewart, president of March of Dimes. "Our country's most important resource is human potential. That begins with ensuring every

baby has the healthiest possible start in life, regardless of racial and ethnic background or their family's income. By expanding proven programs and innovative solutions we can shift our health care system to improve treatment and preventive care for moms and lower the preterm birth rate. Birth equity is our goal; it can be reached."

The 2018 Report did show bright spots of progress in several states where a range of organizations, including the March of Dimes, have been able to reverse the trend and lower the preterm birth rate.

- Rhode Island: Increased leadership and collaboration among Rhode Island's Department of Health, March of Dimes, and health care systems in the state led to a full percentage point drop in the premature birth rate and Rhode Island moving from a C to a B grade.

- Knox County, TN: Wider use of locally developed and tailored programs, such as group prenatal care, helped Knox County lower its preterm birth rate from 12.5% in 2007 to 9.8% in 2016, an improvement of more than 20% over the past decade.

- Raleigh, NC: Adoption of the North Carolina Pregnancy Medical Home model, which coordinates care for pregnant women, helped the city tackle early elective deliveries and smoking, forcing Raleigh's preterm birth rate down from 9.9% in 2015 to 9.3% in 2016. Late preterm births also decreased from 6.9% to 6.1%.

While many of the underlying causes of preterm birth remain unknown, March of Dimes leads the fight for the health of all moms and babies by:

- Working to ensure women have access to preventive and supportive care before, during and after pregnancy.
- Delivering programs to improve the care that moms and babies receive. Group prenatal care can reduce

health disparities, and March of Dimes is expanding its group prenatal care program, called Supportive Pregnancy Care,

- Empowering families and communities with the knowledge and tools to have healthier pregnancies.

- Supporting moms through every stage of the pregnancy journey, even when everything doesn't go according to plan. The Share Your Story online community unites and supports families during their most vulnerable time. As families navigate the newborn intensive care unit (NICU), March of Dimes offers information and comfort with its NICU Family Support® program and its My NICU Baby™ App.

- Advancing research at our six Prematurity Research Centers. Experts study the causes of premature birth, knowing that the answers are going to involve a combination of interventions to prevent and solve this urgent health crisis.

- Advocating for policies to protect moms and babies and give them the best possible start.

- Amplifying the voices of all women and their families. We mobilize communities across the country to work toward achieving birth equity.

The March of Dimes Premature Birth Report Card is based on final 2017 natality data from NCHS. Compared to 2016, preterm birth rates in 2017 worsened in 30 states, stayed the same in 6 states and improved in 16 states.

- 1 state – Vermont – earned an "A" on the 2018 Premature Birth Report Card;
- 15 states received a "B";
- 16 states got a "C";
- 14 states, Puerto Rico and the District of Columbia got a "D";
- 4 states (Alabama, Louisiana, Mississippi, West Virginia) received an "F."

Among the 100 largest U.S. cities, based on the number of births in 2016, Irvine, California once again had the best (lowest) rate of preterm birth at 5.5 percent, and Detroit, Michigan now has the worst (highest) preterm birth rate at 14.5 percent.

Nov. 2 Player of the Week

Holmes County Central High School

Justin Smith

JUNIOR

QUARTERBACK

9 FOR 12 PASSES, 195 YARDS, 2 TOUCHDOWNS & 0 INTERCEPTIONS

Support your local schools

Sunflower

"Your Better Value Food Store"

Highway 12 E. 834-3495 Lexington

12 Days of Christmas Sale

Peoples Drug Store

Lexington -on the square- 834-2721

Thursday, November 8

VERA BRADLEY

BUY ONE GET ONE FREE*

(Does not include sale items)

Friday, November 9

40% OFF ALL CHRISTMAS ORNAMENTS

Monday, November 12

30% OFF ALL COLLEGIATE AND MEN'S GIFTS

Tuesday, November 13

BUY A 22 oz TYLER CANDLE JAR AND GET A 112 gm GLAM WASH FREE (While supplies last)

Wednesday, November 14

30% OFF LADIES CLOTHES

Thursday, November 15

40% OFF ANY SINGLE GIFT ITEM

Friday, November 16

30% OFF ALL BABY ITEMS

Monday, November 19

40% OFF CORKCICLE, TERSIS TUMBLERS AND STATIONERY ITEMS

Tuesday, November 20

30% OFF ALL FLAGS AND RUGS

Wednesday, November 21

40% OFF ALL CHRISTMAS ITEMS

*Free items must be of equal or lesser value
\$3 charge for gift wrap on sale items
Cash, check or credit/debit please