

CITIZENS
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CORPORATION
a non-profit energy company

October 22, 2007

President George W. Bush
Executive Office of the President of the United States
1600 Pennsylvania Avenue, N.W.
Washington D.C. 20500

Dear President Bush:

We, the undersigned Presidents, CEOs and chairs of pediatric departments of Boston teaching hospitals, with the support of the undersigned current and former Members of Congress, would like to express our concern about the growing problem of energy insecurity and its negative health effects, particularly for children, the sick, and the elderly. As health professionals whose first duty is the prevention of illness, we feel compelled to speak about this problem.

Rising energy prices affect all households, yet the impact is greatest on low-income families. Even families with a stable but low income are often unable to meet the demands of higher-cost months. This strain on already tight budgets leads to unavoidable trade-offs, usually between food and energy – also called ‘heat or eat’.

The primary federal government program for assisting low-income families in paying their energy bills is the Low Income Home Energy Assistance Program (LIHEAP). For those who receive assistance, LIHEAP is very effective at keeping them safe and healthy. *However, in 2006 only 16.1% of eligible households received LIHEAP.* Federal and state budgets currently provide only a fraction of the money needed. Most years Congress appropriates less than half of the annual funding for which LIHEAP is authorized. As the amount of federal money allocated to households remains flat or decreases, increasing numbers of families are falling behind in their struggle to shield their children and grandparents from cold and heat stress.

With new research from the Children’s Sentinel Nutrition Assessment Program (C-SNAP) based at Boston Medical Center, we now have data to back up what we see at our hospitals when energy insecure families with young children are forced to make difficult trade-offs. Babies and toddlers who live in energy insecure households are more likely to:

- be in poor health
- have a history of hospitalization
- be at risk for developmental problems, and;
- be food insecure, which contributes its own chain of negative health and development effects.

Additionally, compared to babies and toddlers whose families receive LIHEAP, babies and toddlers in income-eligible families who do not receive LIHEAP benefits are:

- significantly more likely to be underweight, and 32% more likely to be admitted to the hospital on the day of the C-SNAP interview.



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The elderly are similarly affected by choices between food and energy. The US Department of Agriculture has conducted research showing the negative effects of extreme temperatures on the elderly. Low-income households, particularly those that are entirely made up of seniors, were significantly more likely to experience hunger during the times of the year with the most extreme weather. (Nord and Kantor, Journal of Nutrition 2006). Food insecure seniors are:

- significantly more likely to eat a nutritionally inadequate diet, likely due to financial constraints, and;
- 133% more likely to be in fair or poor health. (Lee and Frongillo, Journal of Nutrition 2001)

Working on the frontlines of health care each and every day, we witness the consequences for the most vulnerable citizens in our society, especially children and the elderly, of inadequately researched policies and insufficient program funding. With energy prices doubling over the past four years and projections of record high prices over the coming winter, we must recognize who is most affected by our actions – or more specifically – our inaction.

We believe the following recommendations from C-SNAP to be sound:

Doctor's Orders: Prevention and Treatment

1. Fully fund the Low Income Home Energy Assistance Program (LIHEAP).
2. Support consumer shut-off protections that protect the most vulnerable people from extreme weather and high energy prices.
3. Support the comprehensive safety-net through adequate food and energy assistance programs.
4. Help low-income families and seniors improve the energy-efficiency of their homes by providing more funds for home weatherization and rebate programs.
5. Collect energy insecurity data in the same uniform, annual manner currently used to track food insecurity.

We need policy makers to follow the doctor's orders for our patients – as they would to protect their own health. We have the resources in the United States to help manage this health crisis, if we do not put them to use we betray our responsibility to future generations.

Sincerely,

Elaine Ullian
President and Chief Executive Officer
Boston Medical Center

Joseph P. Kennedy II
Chairman and President
Citizens Energy Corporation



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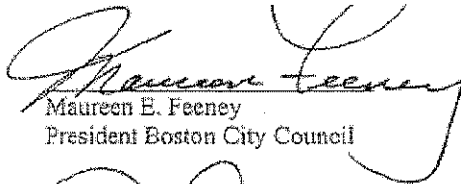
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Massachusetts General Hospital

Paul F. Levy
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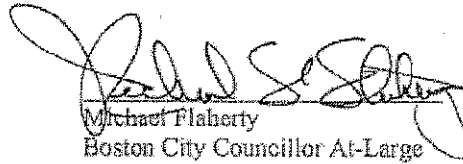


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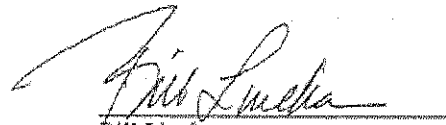

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President Boston City Council



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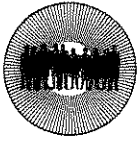

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Handwritten signature of Christopher O'Connor in black ink.

Christopher O'Connor
President
Caritas St. Elizabeth's Center

Handwritten signature of John Fernandez in black ink.

John Fernandez
President & CEO
Massachusetts Eye & Ear Infirmary

Handwritten signature of Dennis D. O'Keefe in black ink.

Dennis D. O'Keefe
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Cambridge Health Alliance

Handwritten signature of Martin T. Meehan in black ink.

Martin T. Meehan
Chancellor
University of Massachusetts - Lowell

Handwritten signature of William Delahunt in black ink.

William Delahunt
Member of Congress

Handwritten signature of Michael E. Caputo in black ink.

Michael E. Caputo
Member of Congress