

Revisions to the WIC Food Package Arizona's Response

1. What elements of the WIC food packages would you keep the same and why?

We would keep the following: dry beans and peas, eggs, juice, peanut butter, milk, cheese, cereal, fish, carrots and formula. We would like to keep these because they are nutritionally adequate and usually accepted well, but we do not want to be limited to just these foods.

2. What changes, if any, are needed to the types of foods currently authorized in the WIC food packages? Please discuss recommended quantities and cost implications.

States should have the flexibility to select the specific foods offered, depending on availability, participant choices, cultural acceptability, cost and administrative feasibility. Food portions available will continue to be supplemental while offering a proportional balance from each food group. The number of portions offered from each food group will be related to nutrition needs. Therefore, the number of portions from each food group will vary for each participant category.

- a. Offer choices of grain products, in addition to, or in partial replacement of, cereals for all women and children. Selection criteria should include low-sugar, low-fat, and iron-, folic acid-, and B vitamin enriched. A portion of the cereal/grain products should be high in fiber. Possible items might include: whole grain bread, enriched rice, other enriched rice products, pasta, tortillas, or cornmeal.
- b. Offer choices of fruits and vegetables- fresh, frozen, or canned- in addition to or in partial or full replacement of juice for all women and children. Selection criteria should include fruits and vegetables high in vitamin A, vitamin C, folic acid, vitamin B6, magnesium, fiber and antioxidants, with year round availability at low to moderate price. The inclusion of cruciferous vegetables is encouraged. Possible items would include: carrots, citrus fruits, tomatoes, sweet potatoes, greens or broccoli. These foods would be offered in addition to any produce available through the WIC Farmer's Market Nutrition Program.
- c. Exclude or reduce the juice from the infant food package and prescribe it only when the infant is developmentally able to drink it from a cup. This could be replaced with infant jarred fruits and vegetables.
- d. Reduce the maximum quantity of milk for children. Offer lower fat milks as the standard milk for all women and children over 2 years of age. Allow for the use of alternative milk/calcium-rich foods, such as tofu, soymilk, or yogurt as replacement for milk and restrict the maximum allowable amount of cheese for all women and children. Selection criteria for alternative milk/calcium rich foods will be defined.
- e. Offer beans/ peas (legumes)- canned or dried- to all women and children.
- f. Reduce the quantities of protein-rich foods for children. Allow substitution between protein-rich food items such as eggs, peanut butter, and other

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alternative protein sources for all women and children. Selection criteria for protein-rich foods will be defined.

- g. Offer a combination of types and quantities of foods (as recommended in parts 1a through 1f) to meet a specified nutrient range for protein, calcium, iron, vitamin A, vitamin C, folic acid, magnesium, zinc, vitamin B6, and fiber. A specific range for each nutrient will be identified for each participant category. The content of the total food prescription will be used to determine the contribution for each of the identified nutrients.

3. Should the quantities of foods in the current WIC food packages be adjusted? If yes, by how much and why? Discuss cost implications.

Allow States the flexibility to offer regionally or locally available, culturally appropriate nutritious foods that are affordable and can be assimilated into dietary patterns that contribute to life-long good health. States should be allowed the flexibility to determine which specific foods to provide within defined categories. Foods may differ by state as a result of cultural, local or regional preferences, availability, distribution and cost issues.

- a. Offer foods that reflect the cultural dietary consumption patterns of the participants served. States should offer foods that reflect participant choice, cultural dietary patterns, medical diagnosis and nutritional intervention plans. Foods offered should be available year-round at low to moderate prices.
- b. Offer foods that allow for variety and versatility in a way that can be easily incorporated into regular dietary patterns. Food prescriptions should provide foods packaged in portions that can be consumed by the participants before expiration dates and/or spoilage. Selection criteria should include consideration of a participant's resources, such as food preparation time, the availability of cooking equipment, cooking skills, etc.
- c. Offer foods that are reasonably priced and readily available in retail food stores throughout the year. To encourage consumption, foods should be readily available to participants from a wide range of vendors.
- d. Here are some suggestions for quantity adjustments:
 - 1. Decrease infant cereal by one 8-ounce box because it supplied all the cereal needed for infants and, thus, was more than supplemental. This cost could be better spent on fruits and vegetables for infants 6-12 months.
 - 2. Decrease eggs to one dozen per month for all categories.
 - 3. Decrease juice for children and women to 92-96 ounces per month.
 - 4. Decrease children and women's milk by one and a half gallons per month.
 - 5. Do not offer quarts of milk on the standard food packages due to cost.
 - 6. Have one gallon of milk equal to one pound of cheese for substitutions.
 - 7. Give two pounds of vegetable or fruits to exclusively breastfeeding women per month.

4. What nutrients should be established as priority for each category?

Offer a combination of types and quantities of foods to meet a specified nutrient range for protein, calcium, iron, vitamin A, vitamin C, folic acid, magnesium, zinc, vitamin B6 and fiber. A specific range for each nutrient will be identified for each participant category. The content for the total food prescription will be used to determine for each of the identified nutrients.

5. Can the WIC food packages be revised (beyond what is allowed under current regulations) to have a positive effect on addressing overweight concerns? If so, how?

The WIC food package could be revised to have a positive effect in addressing overweight concerns. This could be accomplished by decreasing the amount of milk provided as well as adding more fruits & vegetables to the food package, whether they come in the form of frozen, canned or fresh products. Fruits and vegetables should be high in vitamins A, C & B6, folic acid, magnesium, fiber and antioxidants and be available year-round at reasonable prices.

6. Are there other concerns that affect foods issued through the WIC food packages that should be considered in designing the food packages?

Price should be considered in the design of the new food package. By adjusting the amounts of foods currently provided in the food package as well as adding new foods, price should be maintained or decreased with the new package.

7. What data and/or information should the Department consider in making decisions regarding revisions to the WIC food packages?

USDA should consider the nutritional needs of the WIC population in redesigning the food package. When the current food package was created, it was to address the nutrients that were found to be deficient in our participants. These could have changed over the years and should be reexamined. Additionally, consumption data should be collected to determine what our participants are eating and what they would potentially eat, if provided in their WIC food package.

8. Should participants be allowed greater flexibility in choosing among authorized food items? If so, how?

Participants should be allowed greater flexibility in choosing from authorized foods, especially in the types of milk and grains. Lower fat milks should be the standard for women and children over age 2; alternatives to milk should be considered. Cereal options could be expanded to include additional low-fat, low-sugar and vitamin-fortified options as well as bread, rice, pasta, tortillas or cornmeal. These should include foods that are a part of their regular dietary pattern. Additionally, foods should be provided in amounts that could be consumed before they expire or spoil.

9. How can WIC food packages best be designed to effectively meet nutritional needs in culturally and ethnically diverse communities?

Food packages can best meet the nutritional needs of all communities by remaining general but offering a greater variety of choices. WIC is a supplemental food program. By offering foods that serve as a standard or staple in most cultures, WIC can enable participants to purchase more culturally specific foods on their own.

10. Should WIC State agencies be afforded more or less flexibility in designing WIC food package? (Explain)

States should be allowed the flexibility of offering regionally or locally accepted and available foods. This flexibility would allow states the opportunity to assess their food needs and tailor the food packages. Access and availability of foods and availability of food funds should be considered when reviewing the tailoring policy.

11. Identify food selection criteria (Examples: Cost effectiveness; appeal to participant; convenient and economical package sizes; and complexity/burden for administration to manage.)

States should offer foods that can be assimilated into dietary patterns that contribute to life-long good health and that reflect participant choice based on taste and convenience. Cost should be considered as well as packaging sizes. Complexity/burden for administration of the program should be a consideration but should not be the area of highest importance.