



Oregon

Theodore R. Kulongoski, Governor

Department of Human Services

Health Services

800 NE Oregon Street

Portland, OR 97232-2162

(503) 731-4030 - Emergency

(503) 731-4260

(503) 731-3477 - FAX

(503) 731-4031 - TTY-Nonvoice

December 15, 2003

Patricia Daniels, Director
 Supplemental Food Programs Division
 Food and Nutrition Service
 USDA
 3101 Park Center Drive, Room 520
 Alexandria, Virginia 22302

RE: Revisions to the WIC Food Packages

Dear Ms. Daniels:

Thank you for the opportunity to recommend revisions to the WIC Food Packages. The client population served today by the Oregon WIC Program is very different from the clients served in the 1970's. In order to serve today's WIC population, State's need greater flexibility to make substitutions in the food packages.

The WIC food package is an important component of the WIC Program. Unfortunately, providing nutritious food is not enough when we want to assure clients will actually consume the foods offered. Today, the food package must be culturally appropriate and address food allergy and health issues, including obesity. For example, vegetables and fruits should be allowed as juice substitutions in all child and woman food packages and food substitutions should also be allowed across food categories. Allowing these types of food substitutions would help us create more desirable food packages to meet the needs of the WIC participants we serve in Oregon.

As we consider new options for the WIC food package, we are sensitive to the balancing act we undertake between participant acceptability and the nutrient content, cost and the logistics of providing different foods. For example, it is our experience in Oregon that many clients do not use or eat products if only the generic is available. Even though we would be able to contain food costs by only providing generic foods, our caseload would likely drop if participants found the

"Assisting People to Become Independent, Healthy and Safe"
 An Equal Opportunity Employer

received
 DEC 17 2003
 HSS 9292 (01/03)


Ms. Patricia Daniels
Revisions to the WIC Food Packages
December 15, 2003
Page 2

foods to be undesirable. State flexibility is key to providing food packages that clients will consume.

The attached table outlines the Oregon WIC Program responses to the issues posed in the proposed rule: "Revisions to the WIC Food Packages". We recognize any changes will involve data system modifications and vendor and participant education. Please let me know if you have questions or would like further clarification.

The Oregon WIC Program is supportive of USDA's efforts to improve the WIC Food Package. Our goal is to develop food packages that are nutritionally sound and appeal to participants. We are pleased that the nutritional needs, cultural food preferences, food allergies and health issues faced by WIC participants are being considered. We appreciate the opportunity to submit our recommendations for consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Debra J. Huls", written in a cursive style.

Debra J. Huls
Oregon WIC Program Manager

Attachment

**If you need this information in an alternate format, please contact
Debbie Carbone at (503) 731-4567.**

1. Please indicate what elements of the WIC food package you would keep the same way and why.

| RECOMMENDATION | RATIONALE | IMPLEMENTATION CONSIDERATIONS |
|---|--|-------------------------------|
| Continue to allow extra foods for exclusively breastfeeding women | Nutritional needs are higher for breastfeeding women than even for pregnant women | None |
| Continue cereal options, including iron and sugar requirements | Provides flexibility to assure variety for client preference and nutritional needs of participants | None |
| Continue to allow current juice maximums | May be used to accommodate participants requiring more calories | None |
| Continue to allow milk maximums, fat levels and alternatives | May be used to accommodate participants who prefer milk and who require varied levels of calories | None |

2. What changes, if any, are needed to the types of foods currently authorized in the WIC food packages? If you recommend additions or deletions to the types of foods currently offered, please discuss recommended quantities and cost implications.

| RECOMMENDATION | RATIONALE | IMPLEMENTATION CONSIDERATIONS |
|---|---|--|
| Allow juices that meet vitamin C requirement, regardless of vitamin and mineral additives | Generally, juices with added calcium, zinc, etc. do not cost more than those without; would provide additional nutrients for participants | Would be easier for vendors and participants, as requires less scrutiny of products |
| Allow vegetables and/or fruits as substitutions for some or all of the juice in food packages of all participants and available through WIC approved vendors year around. This would be in addition to the Farmers' Market Nutrition Program. | WIC participants consume less than recommended levels of folic acid, zinc, B6 and magnesium Helps to address obesity by adding bulk and fiber and increasing satiety Expands participant food choices to meet recommendations of Food Guide Pyramid Decreases risk of dental caries from excessive juice Makes produce more attainable by low-income families | Participant education would need to include food preparation that helps to retain high nutrient value, how to combine produce for optimizing nutrients, how to choose appropriate and allowable produce Requires vendor training and data system changes whereby allowable amounts and packaging are clearly defined and manageable at check out Food instruments could allow a fixed dollar amount for fresh, canned or frozen vegetables and fruit. For example, a \$5.00 amount could substitute for 2 cans of juice. Use method comparable to Farmers' Market. |

| RECOMMENDATION | RATIONALE | IMPLEMENTATION CONSIDERATIONS |
|---|--|--|
| <p>Vegetables and Fruit (Continued)</p> <p>Allow canned, frozen or fresh—no sugar or flavorings added</p> <p>Allow states flexibility to select allowable vegetables and fruits in type and form</p> <p>Allow substitution of fortified soy beverage for milk</p> | <p>Increases opportunities for participants to include vegetables and fruits in family eating patterns</p> <p>Dried vegetables and fruits are not recommended due to cost and increased risk of dental caries with dried fruits</p> <p>Regional conditions will dictate what is available, in what form, and at what cost. State flexibility would help to assure cost neutrality.</p> <p>Helps to address cultural diversity of each region</p> | <p>Prior to implementation, states may need time to pilot options to figure out the most practical approach in the vendor setting for checkers and clients.</p> <p>More easily accommodated with EBT</p> <p>Include oranges, sweet potatoes, broccoli, spinach, collards, tomatoes, carrots, mango, papaya, cabbage, potatoes, bananas, apples, green beans, peas, lettuce (romaine, red leaf), green plantains, pumpkin, melons and grapefruit.</p> |
| <p>Allow unflavored, sugar-free yogurt as a substitute for all or part of milk.</p> | <p>Helps to address cultural and ethnic preferences of WIC population</p> <p>Provides substitute for races and individuals who do not tolerate dairy</p> <p>Many soy beverages provide protein, calcium, vitamins A, D and riboflavin comparable to cow's milk</p> <p>Cost comparison in Oregon indicates soy beverages are comparable to lactose-reduced milks</p> <p>Good calcium and protein source for participants who are lactose-intolerant and/or who do not drink milk</p> <p>Oregon price comparisons indicate that yogurt is generally less expensive per cup than lactose-reduced milk</p> | <p>A 5 oz. serving of yogurt is nutritionally equivalent to 1 cup of milk. A 32 oz. container of plain yogurt has six 5oz. servings and would be cost neutral compared to lactose-reduced milk.</p> |

| RECOMMENDATION | RATIONALE | IMPLEMENTATION CONSIDERATIONS |
|---|--|--|
| <p>Allow other nut butters, and a variety of unflavored nuts and seeds to be substitutions for peanut butter</p> | <p>Addresses food allergies and participant preferences</p> | <p>Some restrictions may be necessary to achieve cost neutrality</p> |
| <p>Allow substitution of beans or canned fish or meats for eggs and/or peanut butter, when participant has documented allergy</p> | <p>Allows participants with food allergies to receive same level of supplementation as others of same category</p> | <p>Some restrictions may be necessary to achieve cost neutrality.</p> |
| <p>Allow substitution of canned beans to all populations currently eligible for dried beans</p> | <p>Many WIC participants do not have the tools, time or inclination to prepare dried beans</p> <p>Allowing canned beans may help WIC families to increase the variety of foods included in their eating patterns</p> <p>On average, ½ cup of canned beans equals the amount of protein in ½ cup peanut butter, with up to 16 times less fat, fewer calories, and more fiber and iron</p> | <p>Allow only unflavored beans without meat or other additives, only in varieties now available dried</p> <p>Substitute 3-4 cans of beans or peas for 1 lb. of dried beans</p> |
| <p>Allow substitution of other canned fish and meats for tuna</p> | <p>Helps to address public health concern related to mercury</p> <p>Increases variety of choices for cultural and ethnic groups and participant preference</p> | <p>Allow only unflavored meats, without high fat additives</p> |
| <p>Include other allowable foods in Special Woman and Child packages</p> | <p>These participants need other nutrients when they are only receiving a small amount of supplemental formula</p> | <p>Could provide all foods available in regular package for participant category, but substitute formula for the milk</p> |
| <p>Recommend substitution of other vegetables and/or fruits, canned, frozen or fresh, for carrots in enhanced breastfeeding woman package</p> | <p>Same as for vegetable and fruit substitutions for juice, as noted above</p> | <p>Same as for vegetable and fruit substitutions for juice, as noted above</p> |

| RECOMMENDATION | RATIONALE | IMPLEMENTATION CONSIDERATIONS |
|--|---|-------------------------------|
| <p>Add peanut butter or beans, and their substitutions as noted above, to Postpartum, Non-Lactating Woman's food package</p> | <p>Current Food Package VI contains only 60% of the RDI for iron</p> | |
| <p>Allow states option to substitute allowable "adult" cereals for infant cereals when appropriate</p> | <p>Most infants are developmentally ready for dry cereal and finger foods by 8 months of age</p> <p>Many parents report not purchasing or discarding WIC infant cereal when their infant gets older</p> | |
| <p>Allow wider variety of cheese options, while maintaining option for low and reduced fat cheeses</p> | <p>Mexican cheeses are currently not allowed, even though 30% of WIC population is Hispanic.</p> <p>Soy cheeses would add an option for cow milk allergies and intolerances and vegans.</p> | |

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

| RECOMMENDATION | RATIONALE | IMPLEMENTATION CONSIDERATIONS |
|--|---|--|
| <p>Allow states to average formula amounts over a 6-month certification period</p> | <p>Allows participants to receive maximum amount of infant formula allowed, despite frequent changes in formula can sizes</p> <p>Cost neutral</p> | <p>The formula packaging is not always divisible into 806 or 910 fluid ounces. Allow <u>under</u> the maximum amount of ounces the 1st month and <u>over</u> the ounces the 2nd month, so the full amount is provided over a 6-month period.</p> |

4. Recognizing that the WIC Program is designed to provide supplemental foods that contain nutrients known to be lacking in the diets of the target population, what nutrients should be established as priority for each category of WIC participants, e.g. pregnant women, children 1-5, etc.? Please provide scientific rationale for them.

| RECOMMENDATION | RATIONALE | IMPLEMENTATION CONSIDERATIONS |
|---|--|---|
| Add folic acid, zinc, vitamin B6 and magnesium to the priority nutrients for all categories of WIC participants | August 1999 USDA "Review of the Nutritional Status of WIC Participants" notes that these are additional nutrients needed for optimal growth and development and lacking in the diets of WIC participants | Increasing the availability of vegetables, fruits, beans and substitutions for key foods, as recommended under number 2 above, would help to address this lack of nutrients in WIC participants |

5. Keeping in mind that foods provided by WIC are designed to be supplemental, 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? Please be specific.

| RECOMMENDATION | RATIONALE | IMPLEMENTATION CONSIDERATIONS |
|--|---|-------------------------------|
| Allow substitution of vegetables and fruits for some or all of the allowed juice | Helps to address obesity by adding bulk and fiber and increasing satiety Decreasing juice would be appropriate for many participants who do not need the additional calories | |
| Allow substitution of canned beans or dried beans for peanut butter | Would increase number of participants selecting beans, which are significantly lower in fat and calories, as well as higher in fiber | |

6. Are there other concerns that affect foods issued through the WIC food packages that should be considered in designing the food packages? For example, should WIC provide options to address allergies, cultural patterns, or food preferences?

| RECOMMENDATION | RATIONALE | IMPLEMENTATION CONSIDERATIONS |
|---|--|--|
| <p>Provide options for those with food allergies as noted in #2 above</p> | <p>The American Academy of Allergy, Asthma and Immunology cites six food that are responsible for the majority of allergic reactions. The most common are cow's milk, eggs, peanuts, wheat, soy and other nuts, and fish, particularly in the first two yrs of life. WIC foods are heavily represented in this list and substitutes are necessary to help assure adequate nutrition for those with allergies.</p> <p>Prevalence of food allergies has increased over the past ten years</p> <p>For example, The American Academy of Allergy, Asthma and Immunology recommends no solid foods before six months of age. The American Academy of Pediatrics recommends no cow's milk until one year of age and no eggs or nuts until 2 years of age.</p> | <p>Substitutions should provide close to equivalent nutrition to the food being substituted</p> <p>Food instruments may need to be changed</p> |
| <p>USDA and IOM should review literature on allergenicity of WIC food packages and determine what recommendations should be applied to WIC</p> <p>Recommend adopting the National WIC Association's "Culturally Sensitive Food Prescription Recommendation"</p> | <p>Foods offered do not reflect the preferences of ethnic and cultural groups significantly represented within the WIC population</p> <p>Allowing substitute foods that may be more acceptable to participants, based on their core cultural foods, may increase consumption and, thereby, nutritional status of these participants</p> | <p>Many new food packages would need to be created</p> <p>States will need to be able to define solutions for their populations that keep costs neutral or low</p> |

7. *What data and/or information (please cite sources) should the Department consider in making decisions regarding revisions to the WIC food packages?*

The USDA should consider the information in the following resources when making decisions regarding revisions to the WIC food packages:

- NWA “Culturally Sensitive Food Prescription Recommendations,”
- “Child and Adolescent Food and Nutrition Programs” article in the Journal of the American Dietetic Association, 2003; 103:887-893,
- Food allergies and reaction data from The American Academy of Allergy, Asthma and Immunology, and
- Current data regarding the race and ethnicity patterns within the WIC target population.

8. *Recognizing that current legislation requires WIC food packages to be prescriptive, should participants be allowed greater flexibility in choosing among authorized food items? If so, how?*

Yes, participants should be given greater flexibility to choose between a variety of protein sources (eggs, beans, peanut butter, other nuts, seeds and butters, and canned fish and meat). Add canned, frozen or fresh vegetable and fruit choices as substitutes for juice. Allow participant choice in milk alternatives, including yogurt.

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

We support the recommendations in the National WIC Association’s “Culturally Sensitive Food Prescription Recommendations.” As new foods are added to the Program, they should be made available to all participants, not just from the cultures or groups for whom the food packages are designed.

10. *Should WIC State agencies be afforded more or less flexibility in designing WIC food packages? Explain.*

State and territories need to be allowed more flexibility in designing WIC food packages that meet the needs of their populations, while taking into account the availability of specific foods and the feasibility of adjusting their service delivery processes to accommodate any changes. We continue to support nationally defined standards for nutrient content, sugar content, fat content, etc. in WIC foods, to maintain the integrity of the nutritional impact of the Program and prevent states from diluting nutrient content as a way to cut costs or respond to industry pressure.

11. *Additional Comments*

All of the issues noted in this statement are addressed within the context of responses to questions one through ten, above.