



STATE OF NEW YORK DEPARTMENT OF HEALTH

GSA-24

Riverview Center

150 Broadway

Albany, New York 12204-2719

Antonia C. Novello, M.D., M.P.H., Dr.P.H.
Commissioner

Dennis P. Whalen
Executive Deputy Commissioner

December 15, 2003

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

Re: Revisions to the WIC Food Packages, 7 CFR Part 246

Dear Ms. Daniels:

Thank you for the opportunity to comment on the Public Notice 7 CFR Part 246, Revisions to the WIC Food Packages. New York State supports improvements to the WIC food packages consistent with nutrition science, WIC mission and the culturally diverse population the WIC program serves.

The WIC community has advocated for many years that USDA update the WIC Food Packages. This current effort will bring about positive changes that would support and continue the proven outcomes of the program. In turning to the Institute of Medicine for recommendations that are science-based, the program is ensuring that future food packages are responsive to the nutritional needs of WIC participants. To fulfill its objectives, the program must, on a regular basis, review its food packages to determine consistency with current science, demographic, environmental, and agricultural and food industry changes. We fully support that this review occur at a minimum every ten years.

States' and communities' comments on the proposed rules will emphasize participant diversity, needs, preferences, costs and states' administrative concerns. New York State supports the National WIC Association's (NWA) recommendations contained in its two food package position papers. In addition, we are basing our recommendations on our own experiences with our state's regional and diverse population and the administration of this program.

New York State has some basic premises on which the food packages changes should occur:

- WIC Food packages should be made consistent with the dietary recommendations made in the U.S. Dietary Guidelines for Americans with food quantities and portion sizes that address the needs of the participants;
- the current standard food packages be modified to provide a minimum of 65% of the RDA for the WIC target nutrients, including folic acid;

received
DEC 17 2003
SPM

- the food prescriptions allow for tailoring based on the nutrient content of the total prescription and not be subject to food-for-food substitutions;
- states be given the flexibility to select from a wide variety of foods based on regional availability, participant preferences, cultural acceptability, cost and administrative feasibility to substitute foods in the standard packages; and
- the cost neutrality is based on the total cost of the food packages over the package for package comparisons.

New York State looks forward to a timely review and implementation of new food packages. We believe that the goal that we are all working toward is to provide the women and children we serve the most appropriate nutrients and foods for their nutritional risks.

If you have any questions regarding our enclosed comments, please call me at (518) 402-7093.

Sincerely,

A handwritten signature in cursive script, appearing to read "M. Frances Porter".

M. Frances Porter
Director
Bureau of Supplemental Food Programs
Division of Nutrition

Enclosure

bcc: Patricia Hess
Mary Warr Cowans
Barbara Krueger
Connie Chin
BSFP Unit Leaders
Patricia Race
Mary Lou Woelfel

X:\BURDIR\CFC03\USDA proposed regs\NYS Comments on USDA Food Package Letter.doc

**REVISIONS TO THE WIC FOOD PACKAGES
NEW YORK STATE COMMENTS**

- 1. Please indicate what elements of the WIC food packages you would keep the same and why.**

New York State supports the continuation of the target nutrients of protein, iron, calcium and vitamins A and C for the food packages. The target nutrients in the WIC food packages continue to be essential to the nutritional health of participants during critical periods of growth and development.

- 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.**

The WIC Food Packages have not been revised in a decade and we see that the nutritional needs and risks of participants have changed. There is an epidemic of overweight and obesity that affects the well-being of our nation's children and adults. To meet the new challenges, New York State recommends that the food packages are based on current nutrition science and are consistent with our nutrition message. Public health and policy must address the emerging nutrition problems that our country is facing.

Costs have been cited as a barrier to the inclusion of fruits, vegetables and other suggested food commodities, but the program's first concern should be the nutrient content of the food packages. The costs should be based on the total cost of the food packages over the package-for-package comparisons.

Fruits and vegetables

New York State recommends that fruits and vegetables be added to the food package. The allowable fruits and vegetables can be fresh, frozen or canned. The inclusion of fruits and vegetables in the WIC food package supports Eat Well Play Hard, NYS Department of Health's (NYSDOH) obesity prevention initiative.

- New York State would like to refer USDA to the *NAWD WIC Food Prescription Recommendations* released in 2000. Recommendation #1b (offering choices of fruits and vegetables): NYSDOH suggests expanding the fruit and vegetable choices to include crushed and stewed tomatoes, in addition to tomato sauce.
- Gear food packages to address the problem of increasing overweight. The National WIC Association has offered several good recommendations. Any food package revision should offer fruits and vegetables as substitution for juice for women and

children. Since the USDA food pyramid recommends eating fresh fruits and vegetables, incorporating them into the package might be the change with the greatest chance of success.

Milk/Cheese

New York State supports the partial substitution of products such as yogurt (plain and vanilla), tofu and calcium-fortified soy milk in place of milk. We also strongly recommend that lowfat dairy be prescribed as a standard food package for children two years and older and women.

Beans/Legumes

New York State supports NAWD Recommendation #1e (offering beans/peas): NYSDOH strongly supports the expansion of the offering of canned or dried beans/peas (legumes) to all categories of women participants and children.

Canned beans including vegetarian baked beans are often favored by WIC participants. Canned beans may be less expensive, if not comparable in cost to peanut butter and should have at minimal or cost neutral impact on the food package costs. Canned and dried beans support Eat Well Play Hard, NYSDOH's obesity prevention initiative.

Grain products

New York State supports offering whole grain products in place of or in addition to cereal. A portion of the grain products should be high in fiber, such as whole grain bread, enriched rice, tortillas or cornmeal.

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.

USDA should allow state agencies to have the flexibility to provide up to the federal maximum monthly food package averaged over the participant's certification period. This would allow the State to exceed the monthly food package if the total for that commodity is not exceeded over the life of a certification.

Foods such as milk and juice should be adjusted based on the nutritional risk and the developmental stage of the participant. NYSDOH feels that juice and cereal should be given based on the infant or child's developmental needs.

The WIC Program's primary concern should be the nutrient content of the food packages. Food costs can be contained with smaller quantities, eliminating high priced items, or substituting higher price items in combination with lesser priced foods.

Juice

NYSDOH WIC Program encourages tailoring the juice and cereal in infant food packages based upon the infant's individual developmental needs by removing cereal and/or juice from the infant's checks as appropriate. Consistent with the American Academy of Pediatrics (AAP) in its May 2001 issue of *Pediatrics*, New York State supports the recommendation that juice should not be introduced into the diet of infants before 6 months of age. New York State also supports AAP's recommendation as follows:

- giving juice only to infants who can drink from a cup (approximately 6 months or older);
- substituting whole, canned frozen or fresh fruits instead of fruit juice to meet the infants recommended fruit intake. Fruit juice lacks the fiber of whole fruit and can be consumed more quickly.
- limiting fruit juice intake to 4 - 6 oz/day for children 1 - 6 years old. The current federal monthly maximum for juice is 276 oz of single-strength juice and 288 oz of reconstituted juice. Excessive juice has been linked to obesity, dental caries, and diarrhea. Reducing the monthly maximum allowance of 184 oz (4 cans of 46 oz juice/month) or 5.9 oz juice per day would meet the AAP recommendation.

Milk/Cheese

New York State recommends yogurt as a suitable food substitution for milk or cheese. Plain low fat yogurt is a healthy substitute that can offer a cultural alternative. Eight ounces of plain low fat yogurt has 140 calories, with 4 grams of fat, 11 grams of protein, and 400 mg of calcium. One ounce serving of American cheese contains 101 calories, with 8.3 grams of fat, 5.8 grams of protein, and 172 mg of calcium.

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 nutrients for each category of WIC participant, e.g., pregnant women, children 1-5, etc.? Please provide the scientific rationale for them.**

New York State recommends maintaining the current allowance of calcium, and additional Vitamins A and C and Folate for postpartum and breastfeeding women categories. Based on the DRIs from the IOM, the following nutrients are important in the diet of lactating women: Vitamin A (additional 800mcg), Vitamin C (additional 45mg), and Folate (additional 100mcg), as well as calcium and protein. Vitamin D should be an added targeted nutrient. Some of the milk

substitutes such as yogurt may not be supplemented with Vitamin D. It is essential that a source of Vitamin D be provided in the WIC food packages.

Exclusively breastfeeding women

- Calcium: NYSDOH recommends that the current federal maximum for milk/cheese be maintained while adding substitutes such as plain low fat yogurt (412 mg per 8 oz). Substitutes may be more culturally appropriate and gain wider acceptance. The requirement for calcium has been lowered by 200 mg from the 1989 RDAs. Lactating women over 19 years should receive 1,000 mg/d while women under 19 require 1,300 mg. Currently, Package VII provides 28 quarts which falls short of the 31 quarts required to meet the 1,300 mg.
- Vitamin A: Offer substitutes of spinach, sweet potatoes, and/or cantaloupe for the carrots provided in the current food package. The need for Vitamin A is higher for breastfeeding women, 1,200 mcg for women under 19 years and 1,300 for women over 19 years.
- Vitamin C: Juice amounts should be reduced and replaced with fresh, canned and frozen fruits/vegetables rich in Vitamin C such as peppers, oranges etc. This would add variety, fiber, and other necessary nutrients, distinguishing the package from an infant/child package. The breastfeeding woman needs an additional 45 mg of Vitamin C (120 mg for women over 19 years and 115 for those under 19).

Breastfeeding and postpartum women

NYSDOH WIC recommends offering additional servings of leafy green vegetables, fruit, and legumes and providing cereal and whole grain bread/ rice/pasta fortified with folic acid.

- Folate is a targeted nutrient for preventative measures. Folate needs are higher for breastfeeding women (500 mcg) and is a concern for future pregnancies.

Children

NYSDOH WIC recommends that Vitamin D be a nutrient considered for the food packages. Milk is a major source of this vitamin. There has been an increased concern over the lack of Vitamin D in diets or through exposure to the sun. Any food package changes should ensure that the vitamin is included in the total nutritional content of the WIC food packages.

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.**

All of NYSDOH responses address the overweight concerns, but the addition of fresh, canned or frozen fruits/vegetables, provision of lower fat milk as a standard, and canned legumes, will provide continuity between the foods WIC provides to participants and the nutrition education they receive.

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 (the American Dietetic Association notes that the most common food allergies are to milk, eggs, peanuts, soybeans, tree nuts, fish, shellfish, and wheat), cultural practices or food preferences?**

NYSDOH endorses NAWD recommendation #1f (reducing quantities of protein-rich food for children) in its *NAWD WIC Food Prescription Recommendations* to allow substitutions between protein-rich food items due to food allergies. The AAP recommends that pregnant and breastfeeding women with a family history of allergies avoid certain foods such as peanuts. Children are advised to avoid peanuts until three years old.

NYSDOH recommends that protein foods such as canned beans, plain yogurt, tofu, and soy protein be substitutes for current protein foods such as eggs and peanut butter. We also recommend rice and corn substitute for food containing gluten.

7. **What data and/or information (please cite sources) should the department consider in making decisions regarding revisions to the WIC food packages, e.g., nutritional needs of the population, ethnic food consumption data, scientific studies, acculturation practices, and participant surveys, etc.?**

USDA should consider health outcomes of the WIC population to address any food package changes. Poor health outcomes and new emergent health issues such as the overweight epidemic should guide USDA to review the food package. The review should be conducted on a regular basis. New York State supports the proposal that the WIC Food Package should be reviewed every ten years.

In anticipation of the future changes, USDA should fund a longitudinal study of outcomes of the changes. Following a sample number of participants given baseline data and follow-up can help determine if the changes are effective and what, if any, changes may need to be made in the future.

- 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?**

New York State would not recommend that participants be allowed greater flexibility in choosing among authorized food items. The food prescription is tailored specifically to the individual nutritional needs of each participant. To allow participants to choose among authorized foods will counteract the nutritionists' prescription for creating a well-balanced nutrition plan for the participant.

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

We strongly recommend expanding the cultural diversity of WIC approved foods without any exclusionary criteria for one specific population or cultural group and support the NWA position paper on *Culturally Sensitive Food Prescriptions Recommendations*.

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

New York State strongly supports allowing states the flexibility to offer cultural foods in substitution or combination with current food packages. New York State performed a price analysis of the culturally sensitive food prescription recommendations made by the National WIC Association. For children ages one to three, the prices of package 1, suggested for African Americans, Asians, Hispanics, and Native Americans; package 3, suggested for African Americans and Africans; and package 6, suggested for Mexicans, Native Americans and Hispanics, were cost neutral in comparison to the standard package currently recommended by WIC. These findings indicate that the addition of culturally sensitive food packages to the current food packages prescribed by WIC will be beneficial to WIC participants without creating an unmanageable cost burden to the program.

- 11. WIC program's overall goal is to achieve the greatest improvement in health and development outcomes for WIC participants, achieved partly by providing food that targets nutrients determined to be lacking or consumed in excess in the diets of the WIC population. In addition to targeting these food nutrients, food selection criteria should address necessary operational concerns for the foods – for example, cost effectiveness; appeal to recipients; convenient and economical package sizes; complexity/burden for the WIC administrative structure to manage; etc. It would be helpful if commenters would identify/recommend WIC food selection criteria, describe how the criteria interact, indicate their relative weighting or importance, and provide supporting rationale.**

The New York State WIC program takes several factors into consideration when establishing food selection criteria, including participant preference, length of time on the market, food availability, cost, texture, nutritional content, and the developmental stage of infants and children. Participant preference is the most fundamental factor taken into consideration, as the ultimate goal of the WIC program is to create food packages that will be consumed by WIC participants. The NYS WIC program also selects foods that come in convenient package sizes, are low-cost, and are a well-established product in New York State markets. Texture and developmental skills are important in establishing food selection criteria for infants and children, and preference is given to types of cereals that allow children to develop fine-muscle skills through self-feeding.

References

1. Position of National WIC Association: "NAWD WIC Food Prescription Recommendations," 2000.
2. The Use and Misuse of Fruit Juice in Pediatrics. American Academy of Pediatrics Committee on Nutrition. *Pediatrics* 2001; 107: 1210-1213.
3. Bowes & Church's Food Values of Portions Commonly Used, Seventeenth edition, Jean A. Pennington, Lippincott Williams & Wilkins, 1998.
4. Nutrition During Lactation, Institute of Medicine, National Academy Press, Washington D.C., 1991.
5. Recommended Dietary Allowances, 10th Edition, National Research Council, National Academy Press, Washington, D.C., 1989.
6. Dietary Reference Intakes, Food and Nutrition Board, Institute of Medicine, National Academy Press, Washington, D.C., 2000.
7. Position of the National WIC Association: "Culturally Sensitive Food Prescription Recommendations," 2003.