

WIC Food Package Comments  
South Dakota WIC Program  
December 15, 2003

1. Please indicate what elements of the WIC food packages you would keep the same and why.
  - The nutritional requirements of the various foods such as the amount of Vitamin C in juice, the amounts of sugar and iron in cereals and the standards for milk should remain the same. These requirements continue to meet the needs of the WIC population.
  
2. What changes, if any, are needed to the types of foods currently authorized in the WIC food packages?
  - To help address the overweight concerns of the WIC population, the standard milk for children over the age of 2 and women should be the low fat milks such as skim, 1% and 2%. Whole milk would be prescribed for children 13-24 months of age and only as needed for medical reasons or requests for the WIC participant categories. Limiting fat intake should help establish appropriate dietary patterns for children over the age of 2 and women.
  - Offer fresh, frozen, or canned fruits and vegetables as a partial or full replacement of juice for women and children. The fruits and vegetables included should be high in Vitamin A, C, Folic Acid, B6, magnesium, fiber and antioxidants. Inclusion of cruciferous vegetables is supported by the dietary recommendations from the Dietary Guidelines for Americans, the American Dietetic Association, the Institute of Medicine and the Center for Nutrition Policy and Promotion. The national 5 a day campaign recommends a minimum of 5-9 servings of fruits and vegetables per day. The inclusion of these fruits and vegetables could help address the overweight issues as they are low in calories and high in nutrients. Research has established the link between eating fruits and vegetables and a decreased risk for cancer, heart disease, stroke and diverticulosis. Within the WIC population one of the food groups participants are lacking in include fruits and vegetables. In addition to meeting the nutritional needs of WIC participants the inclusion of fruits and vegetables would help States address some of the culturally diverse eating patterns. The fruits and vegetables would also supply more fiber than juice which is associated with many health benefits including promotion of normal bowel function and the prevention of childhood obesity, cancer, cardiovascular disease and Type II diabetes.
  - Allow the use of canned beans/peas as well as dried beans and peas to all women and children. The use of canned legumes will increase the use of this food group. As the number of WIC participants that work outside the home increases, the need for including foods that can be prepared quickly is more important. Legumes are a part of many different cultural groups and are low in fat and high in nutrients such as folic acid, fiber, iron and protein.

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- Allow substitutions between the protein-rich foods such as eggs, peanut butter and legumes for all women and children. This would give more flexibility to the protein food group to allow for the cultural differences as well as potentially decreasing the cost of the food package and allow for additional food dollars to be spent on the addition of fruits and vegetables.
  - Allow states more flexibility to offer foods that address culturally appropriate dietary patterns. The addition of fruits, vegetables, calcium substitutions such as yogurt and tofu and protein substitutions would offer food packages that are more culturally acceptable and promote a healthy diet.
  - Allow the ability to offer a food package that includes all WIC foods in addition to the special formula. This would help meet the nutritional needs of the women and children with special needs. The food prescription would be based on the medical diagnosis and the participant's ability to consume the WIC foods.
3. Should the quantities of foods in the current WIC food packages be adjusted?
- Due to the recommendations by the American Academy of Pediatrics, the amounts of juice issued should be changed. Juice is not an essential part of an infant's diet. Allow the States the flexibility to determine if juice should be included in the infant food package. If juice is included in the infant food package, it should not be allowed until the infant is 6 months of age and drinking out of a cup. If juice is introduced earlier, it can replace the amount of breastmilk or formula consumed. Continue to allow the current guidelines of no more than 4-6 oz of juice per day for an infant. Continue to counsel parents regarding the importance of appropriate infant feeding practices and the quantity of juice recommended.
  - Juice in the children's food packages should be decreased to no more than 124-186 oz full strength juice per food package. This amount is within the guidelines suggested by the American Academy of Pediatrics of no more than 4-6 oz juice per day for children 1-6. An excess amount of juice can lead to increased calories, contribute to the childhood obesity rates and prolonged exposure to sugar on teeth can lead to dental caries.
  - Allow the use of alternative milk/calcium-rich food sources such as tofu or yogurt as a partial or complete replacement for milk. This would help to address the dietary needs of a more culturally diverse population. Cow's milk and cheese is not a part of the daily food pattern of some of the cultural groups, so the addition of these other calcium-rich foods would allow the WIC program to serve these populations better. Some of our culturally diverse clients also have lactose intolerance and they would benefit from the addition of some of these other calcium-rich foods.
  - The amount of milk could be reduced in the child's food package. The current quantities of milk for children exceed the Dietary Guidelines of 16 quarts per month.

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 participants.
  - Iron and Vitamin C for all categories to help address the issues of anemia in the WIC population.
  - Calcium for all categories to help address the issues of bone health in the WIC population.
  - Folic acid for women to help prevent neural tube defects.
  
5. Keeping in mind that foods provided by WIC are designed to be supplemental, can the WIC food packages be revised to have a positive effect on addressing overweight concerns?
  - Making the low-fat milks the standard products issued to children age 2 and over and women is one way to address the overweight concerns. The higher fat milk adds calories that are not needed by the majority of participants. Continue to allow high fat milk products to participants if recommended by the CPA. The lower fat milks provide the appropriate amounts of calcium, protein, Vitamins A and D. The reduction in the amount of milk in the child's food package could lead to a decrease in the over consumption of milk and help to decrease the amount of extra calories consumed.
  - Decreasing the amount of juice in the food packages and including some fruits and vegetables can include the nutrients with fewer calories.
  - Allowing canned legumes encourages an increase in the intake of these foods that are low in fat and high in nutrients.
  
6. Are there other concerns that affect foods issued through the WIC food packages that should be considered in designing the food packages? Should WIC provide options to address allergies, cultural patterns or food preferences?
  - The States should be allowed some flexibility to design food packages to meet the cultural needs of the participants within the food groups addressed.
  - Allergies can be addressed in some food groups such as allowing legumes or eggs instead of peanut butter.
  - Offering the low fat milks as the standard milk for children over age 2 and women, offering fruit and vegetables in partial or total replacement to fruit juice and offering canned dried legumes will help to address the overweight issues affecting the WIC population.
  - If changes can be made in the WIC food package to help address obesity prevention, this will also have an impact on the prevention of Type II Diabetes.

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

- Currently the food packages are designed around the nutrients needed by the participants and foods are grouped into food groups. Food groups need to be continued to assure participants get a balanced food package.
- If the States are allowed more flexibility to meet the needs of the culturally diverse populations, the participants should not need any more flexibility than they currently have.

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

- Adding the following foods will help meet the needs of the culturally diverse populations: fruits and vegetables, canned legumes, yogurt, tofu.
- Allowing States some flexibility in prescribing the food packages and being able to substitute foods within the protein group such as peanut butter, legumes and eggs would also help make the packages meet the dietary needs of the more culturally and ethnically diverse communities.

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

- States need to have as much flexibility as possible to help address the issues of the culturally diverse populations and the individual needs of each participant.
- The States need to be able to tailor the food packages to meet the needs of the participants for example offering the lower fat milk to help control the fat content of the food packages to help address the overweight issues.
- It is also important for States to have flexibility to assist them in controlling the cost of the food packages.

