

December 12, 2003

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

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

Dear Ms. Daniels:

The Nebraska WIC Program offers the following comments on Public Notice CFR Part 246, Revisions to the WIC Food Package. We appreciate the opportunity to comment on these revisions.

General comments

- The Nebraska WIC Program supports the position papers entitled "Culturally Sensitive Food Prescription Recommendations" and "WIC Food Prescription Recommendations", developed by the National WIC Association. We urge USDA to consider these recommendations.
- We would like to emphasize the importance of the linkage between the WIC supplemental food prescription and the nutrition education supporting behavior change. These components of WIC services should be complementary and support current national nutrition recommendations.

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

The WIC food package should support sound nutrition advice and national nutrition recommendations. The food package should also support the relationship between the supplemental food prescription and nutrition education provided to WIC participants.

We strongly support the following elements of the food package.

Retaining the limit of 6 grams of sugar per ounce. The Center for Nutrition Policy and Promotion (CNPP) reported that children 1-4 years of age consume 11-17 teaspoons of added sugar, well above the recommended level of 5-8 teaspoons.

- Retaining calcium, iron, protein, vitamin A, and vitamin C as target nutrients. The nutrient needs for these specific nutrients for the WIC population are significant. Inadequate nutrient intake of these nutrients may have a lifelong negative impact.
- Retaining the seven food packages outlined in federal regulations. Food packages IV-VII should be designed for cultural responsiveness.
- Retaining the designation of a CPA to prescribe types of supplemental foods in quantities appropriate for each participant.

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In addition, we offer the following suggestions.

- Additional target nutrients should include magnesium, folic acid, zinc, B6 and fiber.
- The food package should offer foods that provide a percentage of the target nutrients and a recommended proportion from each food group of the food guide pyramid.

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.

Allow States the option to:

- Offer fruits and vegetables, fresh, frozen, and/or canned, as partial or full replacement of juice for all women and children. Provide flexibility for States to choose fruits and/or vegetables high in Vitamin A, Vitamin C, folic acid, B6, magnesium, fiber, and antioxidants with availability as per individual States. Fruits and vegetables offered in the WIC food package would be in addition to any produce available through the WIC Farmer's Market Nutrition Program.
- Offer lower fat milk as an option for women and children over two. Allow the option for the use of alternative milk/calcium rich food sources such as soymilk, with the same nutritive value as milk, and yogurt, in limited flavors, as a replacement for milk. Allow the option to restrict the amount of cheese for all women and children.

Offer beans/peas (legumes) canned and/or dried to all women and children.

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

Dairy Products

- Decrease the amount of dairy products that are allowed in the WIC food package for both women and children. Allow for the substitution of dairy products (yogurt) for fluid milk and alternate dairy products (soymilk and tofu) to increase participant's choices and increase cultural acceptability to better meet client's diverse needs.
 - The amount of dairy or soy products allowed should be reduced for all women and children. This could decrease the overall cost of the food package.

Juice Products

- Decrease the amount of juice in the infant's food package and prescribe it only when the infant is developmentally able to drink it from a cup.
 - This is consistent with the recommendation to decrease the amount of juice that infants consume on a daily basis and could decrease the cost of the food package.
- Decrease the amount of juice in the children's and women's food package completely or in part so that fruits and vegetables can be included in the food package.
 - Decrease the amount of juice in the food packages to be consistent with the AAP recommendation of limiting juice intake to 4-6 oz of juice each day for children and the recommendations to increase the amounts of fruits and vegetable consumed. This decrease would also allow of the inclusion of fruits and vegetables in the WIC food package. Selection criteria should include fruits and vegetable high in vitamin A, vitamin C, folic acid, B6, magnesium, fiber and antioxidants with year round availability at a low to moderate price.

Protein Foods

- Reduce the total quantity of protein rich foods in the WIC food package and allow for substitutions or tailoring of the WIC food package based on client's food preferences. Protein foods should be made interchangeable and assigned to the client on an individual basis, allowing clients to have the freedom to choose between beans/peas, peanut butter and eggs in the amounts that best meet their individual needs.

Children's Food Package (Grouping IV)

- Decrease the total amount of food provided in the children's food package. The NWA Culturally Sensitive Food Prescription Recommendations- Appendix 2, has listed the percent of the RDA for target nutrients that a child would receive from a WIC food package. The food package exceeds each key nutrient, with the exception of fiber.
- WIC is a supplemental nutrition program and should not meet 100% of any target nutrient. However, the lack of fiber in the food packages is also a compelling reason to include fruits and vegetables in the WIC food package.

4. What nutrients should be established as priority nutrients for each category of WIC participants? Please provide the scientific rationale for them.

- We strongly support retaining calcium, iron, protein, vitamin A and vitamin C as the target nutrients and recommend that folic acid, magnesium, zinc, B6, and fiber be designated as target nutrients. The nutritional needs for these specific nutrients for the WIC population is significant. Inadequate intake of these nutrients may have a life-long negative impact.
- The WIC Food packages should offer foods that provide a percentage of the target nutrients and recommended proportions as indicated in the Food Guide Pyramid.

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.

Provide States the following options based upon the needs of their WIC participants.

Reduce quantities of specific categories of foods for children in Food Package IV. As noted above, the National WIC Association Culturally Sensitive Food Prescription Recommendations – Appendix 2 outlines the percent of the Daily Nutrient Value for target nutrients in the current Food Package IV. The food package exceeds the recommendations for key nutrients except for fiber.

- Increase the varieties of fruits and vegetables, fresh, frozen, and canned, offered to women and children.
- Reduce the amount of juice for women and children.
- Offer lower fat milk for all women and children over two years of age.
- Provide low fat cheese for all women and children, along with the option to restrict the amount of cheese for all women and children.
- As noted in the National WIC Association Position Paper on the WIC Food Prescription Recommendations, the WIC food prescription is key to WIC Program services. The WIC food prescription should support sound nutritional advice and overall good health and well being. The nutrition education component of the WIC Program assists WIC participants in incorporating WIC foods

into their daily dietary patterns to prevent nutritional imbalances and establish dietary habits that can be maintained to promote life-long nutritional health.

6. **Are there other concerns that affect foods issued through the WIC food packages that should be considered in designing the food packages?**
 - Cost, feasibility and administrative burden of providing a wider range of foods in the WIC food package.
 - Cultural preferences.
 - Allow state agencies to round up to the next whole can size of infant formula to ensure that all infants receive the full authorized nutritional benefit.
7. **What data and/or information (cite sources) should the Dept. consider in making decisions regarding revisions to the WIC food packages? E.g. nutritional needs of the populations, ethnic food consumption data, scientific studies, acculturation practices, and participant surveys, etc?**
 - WIC food prescriptions should be consistent and compatible with dietary recommendations made in the most current revision of the "Dietary Guidelines for Americans" by offering standard portions of the recommended number of servings from each food group in the Food Guide Pyramid, and targeting specific nutrients of high nutritional need of participants.
 - USDA should also consider position papers published by The American Dietetic Association focusing on dietary recommendations for Americans. These include: *Dietary Guidance for Healthy Children (4)*, *Nutrition Care for Pregnant Adolescents (5)*, *Oral health and Nutrition (6)*, *Child and Adolescent Food and Nutrition Programs (7)*, and *The Role of Nutrition in Health Promotion and Disease Prevention Programs (8)*. The recommendations in these papers are consistent with those in the Dietary Guidelines and the Food Guide Pyramid.
 - Information gathered by state agencies from participant surveys and purchases of food by WIC should be considered
 - Consider the unique dietary patterns of specific WIC populations served.
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?**
 - States should be given the flexibility in choosing the authorized nutritious WIC foods within defined categories for the WIC participants to make their individual selection. States should be able to offer culturally appropriate foods that meet the nutritional requirements of the specific WIC food package category.
 - The maximum quantity of formula allowed for Food Packages I, II, and III should be specified in the Federal Regulations. However, States should have the flexibility to justify prescribing a quantity that would exceed the maximum quantity of formula allowed. These circumstances *would be limited* to adjusting the formula prescribed to reflect formula packaging. This would help to provide the greatest amount of formula to the WIC participant based upon current packaging practices. It would also help to alleviate problems for the WIC participant and WIC vendor as the WIC food prescription would more accurately reflect what is available via the retail system. The following recommendation by the National WIC Association should be considered: USDA allows State WIC agencies to round up to the next whole can size of infant formula to ensure that all infants receive the full-authorized nutritional benefit.

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

- Add culturally appropriate food to complement core foods of WIC participants. (See the NWA Culturally Sensitive Food Prescription Recommendations)

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

States should have the flexibility to select the specific foods offered by each State agency, depending upon established nutrition criteria, and other factors specific to individual states including availability, participant choices, cultural acceptability, cost and administrative feasibility. State Agencies are in the best position to select foods offered that respond to cultural or religious needs, management and administrative capacities, local agency and vendor capabilities, and cost control issues.


- All WIC food prescriptions must be available to all WIC participants, without any exclusionary criteria or being “labeled” for one specific population or cultural group.
- The rule should provide guidelines for State agencies to submit documented plans for additions, substitutions or eliminations based on state specific needs.

11. The 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.

- Nutritional requirements of the WIC authorized foods should continue to be major selection criteria so as to maintain the integrity of the WIC food packages. Over the years, the specific nutritious foods authorized for the WIC program have contributed to the overall improvement of the health and well being of our WIC women, infants, and children. The nutritive requirement for each category of WIC authorized foods has been a key component of making WIC work and has distinguished WIC from other supplemental programs.
- The opportunity for each State to implement additional food selection criteria should be retained. Additional criteria such as cost, availability at the retail level, participant acceptability, and cultural variation should be left to the discretion of the individual States, thus meeting the specific needs of their WIC participants and food delivery systems.

We appreciate the opportunity to comment on these revisions.

Sincerely,



Peggy Trouba
Nebraska WIC Director