

LA-03

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

10/16/03

Dear Ms. Daniels,

I am a WIC nutritionist in a Newark New Jersey WIC program. Enclosed is my comments to the revisions of WIC food packages. I hope the format is acceptable to you and will be useful. These are my personal reactions to some of the issues dealing with this topic.

Sincerely,

Donna Gottlieb

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received
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ISSUE#6. In light of the increasing number of people pursuing vegetarian lifestyles

as well as the need to design food packages for people with milk allergies offer an enriched (calcium, vitamins A and D) soy milk option for children and women as part of the WIC food package. The vacuum packed soy milk containers (usually sold in supermarket area near evaporated milk) is a less expensive product than the soy milk sold in the refrigerator section.

In response to the high rate of peanut allergy in the U.S.A. not have the WIC children's food package under age 2 include peanut butter or at least to not have the food package at age one automatically go to beans alternating with peanut butter. When this food package is automatic at age one unless the nutritionist adjusts it there will be the risk of an early introduction of peanut butter for a young child. The American Academy of Pediatrics suggests waiting until the age 3 years before introducing peanut butter into the child's diet. If peanut butter is to be discouraged in young children WIC will need to offer a more convenient protein alternative than dried peas and beans.

REVIEW ISSUE#11. Many WIC clients seem to have difficulty cooking dried peas

and beans thus offer an easier to prepare protein source such as canned beans. When canned beans are rinsed to decrease the sodium content they offer a heart healthy inexpensive protein source. I would suggest three 15-16 ounce cans of peas or beans to be an alternative to one pound of dried peas or beans since the servings would be similar. There are 12 adult servings to one pound of prepared dried peas and beans and 12 servings from three 15-16 ounce cans of peas and beans. The cost for canned product would be more than from the dried product but it would be comparable or less than a one pound jar of a name brand peanut butter.

#4. Include fruits and vegetables in the food package for children and women on a year round basis in WIC's attempts to increase fruit and vegetable consumption to 5 a day. Recommend reduce juice in the food package and replace with fresh or frozen fruit and vegetables. Canned products can be high in sugar or salt and may lack the fiber contained in the fresh or frozen product. People seem to overconsume juices and underconsume fruits and vegetables in The U.S. The American Academy of Pediatrics recommends limiting juice intake to 6 ounces a day for the child under

age 10 years. If fresh fruit is too expensive for the WIC food package frozen is a healthy inexpensive alternative.

ISSUE #3 and 5. Decrease juice in food package since excess juice intake contributes a large amount of calories for the nutrients provided contributing to obesity (1 quart of juice can have 300-500 calories). Water contributing zero calories is to be encouraged as a juice substitute. Fruit and vegetable intake needs to be increased in the target population to increase nutrients and fiber both to decrease the incidence of longterm diseases such as cancer and heart disease as well as increase satiety from meals and snacks to help with weight control. To keep costs under control the money for juice can be put toward the fruit and vegetable checks. Limiting the juice dollars so that even \$5.00 a month per child or adult participant can be spent on reasonable priced frozen vegetables can have a large impact on the quality of the diet as well as be a WIC teaching tool for families to encourage their children to learn good food habits by having vegetables at meals and fruits for snacks.

REVIEW ISSUE#1. WIC should continue providing iron fortified formula until age one year. However an adjustment needs to be made to the software system to ensure that formula does not stop before the first birthday. This would help insure adequate iron intake in infants under age one. For premature infants

I would recommend the system allow the nutritionist to plan the formula package to the adjusted age of one year without requiring a medical formula request form. At this point in time if the food package is planned for age one the child package often starts 3 weeks before the first birthday.

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