

December 2, 2003

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Re: Revisions to the WIC Food Package

Thank you for the opportunity to comment on Public Notice 7 CFR Part 246, Revisions to the WIC Food Packages. This letter comes to you from the perspective of a former WIC participant. With the fact that we have many WIC clinics out there teaching that "A Variety of Foods Contribute to Good Health" I feel it is prudent that the Special Supplemental Program for Women, Infants and Children "practice what they preach".

It is essential that WIC follow current learning theories which support the fact that most individuals learn by hearing, seeing and doing. Hearing alone does not produce knowledge. Does every nutritionist have a normal BMI? Probably not, because hearing something, and even knowing it, does not produce behavior change. However, seeing and doing when combined with hearing, otherwise known as the Social Cognitive Theory, are more effective in producing desired behavior changes. What participants see on their voucher could have a greater impact on their food choices, as it did in my own case mentioned later.

Not only do the types of foods need "revising" but also the amount of foods allowed should be more reflective of what is recommended. Eight years ago, as a mother of a WIC born infant, I found that I had several boxes of unopened, unused, infant cereal on my shelf. One box of infant cereal may last at least two months when used in recommended amounts, if your child will accept it and eat it. My WIC child did not accept it, and never ate it. Although I did not use it, I purchased it every month with the vouchers because the store clerks always told me I had to get everything on the voucher. Although my second child loved the dry infant cereal, we never could have used as much as WIC provides (she was not a WIC infant). Sure I could make homemade biter biscuits, etc with the leftover cereal, but as a full time student and graduate assistant with my first child and working full time with my second child, making homemade biter biscuits was not on the priority list, especially when a box of them prepared is not much more costly than a box of cereal.

Although I used all of the juice I purchased with my WIC vouchers, I used it in the wrong way. My WIC participant son drank juice all day long, whenever he was thirsty. Even as an upcoming nutrition student, I thought that because I received all of the juice from a federal nutrition program, it must be the best thing for my child to drink when he was thirsty in between meals. Although the nutritionist may have told me that he did not need so much juice, I only "heard" that information, and it just did not stick. However, I "saw" that amount of juice on my voucher every month and that did sink in. After about a year and a half of wondering why my child would not eat hardly any solid food; I had learned much more about nutrition in University classes and my confidence had grown. I figured out that my child did not eat because he was so

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full of juice, and realized that just because WIC gave me all that juice, it did not mean my child needed that much.

The fact that peanut butter could be included on a voucher for a child under age three is also very confusing. WIC recommends holding off on introducing peanut butter due to the choking hazard. I will never forget when that was brought up in a graduate level nutrition course, and I immediately stated that my son (a WIC participant at that time) had received peanut butter on his voucher since he was one. In addition, I had been giving it to him since that time. I thought it was a good protein source, he liked it, and it was on my voucher so it must be appropriate. Once again, I was misled by what I saw listed on my voucher.

The truth is most of the above situations could have been avoided with education. However, a WIC nutritionist only has about 15 minutes with a participant. In addition to the participant's requested nutrition education (which may or may not include questions over topics that need to be discussed, such as these), the nutritionist must review immunizations, explain how to use vouchers in the store, and then try to fit in other necessary information related to choking, etc. That is information overload for the average participant; especially one of low literacy. WIC serves a large number of low literacy participants and families. In addition, I feel that if I, as a nutrition student with a bachelor's degree, had these misconceptions, many other participants do as well.

The food package should more closely resemble current nutrition guidelines. There has been a large scale effort to increase fruit and vegetable consumption across the nation known as the 5 A Day Program. Eating 5 to 9 servings of fruits and vegetables everyday can lower the risk of cancer, heart disease, stroke and diabetes, and aids in weight loss and weight maintenance. 75% of all deaths in the United States are related to heart disease, stroke, high blood pressure and diabetes; eating more fruits and vegetables decreases these risks. We know that only about 23% of Americans eat at least 5 servings a day.

I suppose I am a little confused about the goals of the USDA. USDA is a "national partner" with the national 5 A Day program, for the purpose of promoting fruit and vegetable consumption. What better way to promote consumption than by including it in the WIC food package? I am waiting on the USDA to *show* me that they support fruit and vegetable consumption; as I do not see that support in current food packages.

I feel that the USDA *must* address these issues to uphold the integrity of the WIC program by making the approved foods more in line with current nutrition recommendations. Decreasing the amount of juice to be replaced with whole fruit and including vegetables is needed not only to allow more variety within the package but also for the health benefits especially with the current rates among adults and children. Lack of variety is one of the participant's biggest complaints in State wide surveys; the large drop off in WIC participation following one year of age may be lessened by improving the food package.

Some may argue that there is a WIC Farmer's Market Program to provide fruits and vegetables. This is true, but funding is limited. Only a handful of counties in our State participate in this

program. As a WIC participant mom, I never participated in the program; it was never available in either of the two States I resided in during that period.

Looking at the scientific evidence supporting fruit and vegetable consumption, the rates of obesity and chronic disease in the country, and the low fruit and vegetable consumption in this country, I have one question to ask. Ethically, how can a nutrition professional not support revisions to the food package and the addition of fruits and vegetables?

Thank you,  
Laurie Stanton