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SAS-01

COMMUNITY HEALTH SECTION

December 10, 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, 7 CFR Part 246

Dear Ms. Daniels:

Thank you for the opportunity to comment on Public Notice 7 CFR Part 246, Revisions to the WIC Food Packages. The current WIC food packages are now thirty-years-old. Since then, nutrition science and its relationship to achieving and maintaining good health have evolved. A great number of social, economic, environmental, demographic, and other changes have also occurred. Additionally, food availability has improved and there are now many more choices in foods that fit current food recommendations. The existing WIC food packages are neither consistent with current dietary guidelines, supportive of cultural needs, adaptable to demographic shifts, nor are they responsive to emerging health issues.

The existing food packages are not serving the intended purposes and, in some instances, may negatively impact the health of WIC participants. WIC food packages and individual food prescriptions act together to support participants in implementing recommendations given by WIC nutrition staff in nutrition counseling and education efforts. When the food package is out of step with dietary recommendations or when the foods are not eaten, the successful model breaks down.

Two position papers "*NAWD WIC Food Prescription Recommendations*" and "*NWA Culturally Sensitive Food Prescription Recommendation*," published by the Association in 2000 and 2003 respectively, address the emerging needs posed by the population WIC now serves.

In addition I would like to address the issue of cost neutrality. This issue emerges every time there is discussion about changes in the WIC food package. The original food package was designed to meet specific nutrition goals. Certainly cost concerns played a part in the development of the first food package, but nutrition issues are inherently not cost neutral. The overriding issue was and should continue to be to meet those specific nutrition goals that are identified to be of major concern to the WIC population.

There is nothing in legislation that requires cost neutrality. The charge to the IOM is to identify current nutritional concerns of the WIC population and then to design a food package that addresses those concerns. It is unreasonable to add the constraint of cost neutrality.

However if it is necessary to make the food packages changes cost neutral, I would advocate that it is the overall cost of all food packages that is taken into consideration and not a package-for-package comparisons.

Thank you for the opportunity to comment.

Sincerely,

Jill Leppert, LRD
North Dakota WIC Nutrition and Breastfeeding Coordinator

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