



CORNERSTONE: THE FOOD PACKAGE

WIC PROVIDES A MONTHLY FOOD PACKAGE (SOMETIMES DESCRIBED AS A FOOD PRESCRIPTION) OF NUTRITIOUS FOODS TAILORED TO SUPPLEMENT THE DIETARY NEEDS OF PARTICIPANTS TO ENSURE GOOD HEALTH, GROWTH AND DEVELOPMENT. THE FOODS ARE SPECIFICALLY CHOSEN TO PROVIDE CONSISTENCY WITH THE DIETARY GUIDELINES FOR AMERICANS AND ESTABLISHED DIETARY RECOMMENDATIONS FOR INFANTS AND CHILDREN UNDER 2 YEARS OF AGE. THE SELECTED FOODS ALSO REINFORCE WIC NUTRITION EDUCATION MESSAGES, ADDRESS EMERGING PUBLIC HEALTH NUTRITION-RELATED ISSUES, AND PROVIDE WIDE APPEAL TO THE DIVERSE WIC POPULATION.

REVIEWING THE WIC FOOD PACKAGE

As mandated by the Healthy Hunger-Free Kids Act (of 2010), the WIC food package is reviewed every 10 years. Central to the review is that recommendations are “grounded in the most recently available science.” Based on the National Academy of Science, Engineering and Medicine (NASEM) expert committee’s review and subsequent recommendations, the United States Department of Agriculture, Food and Nutrition Service (USDA/FNS) considers policy options that result in Federal Regulations. These regulations specify the types and minimum nutritional requirements of foods to be included in the WIC food package. States are provided certain level of flexibility on how they implement the regulations.

THE WIC FOOD PACKAGE SUPPORTS HEALTHY HABITS AND IMPROVES DIETARY INTAKE

Following the food package changes in 2009 (which reflected the recommendations of the first NASEM previously known as the Institute of Medicine, or IOM, review), studies have shown:

- improved access to healthy foods (e.g., whole grains, fruits, vegetables, and lower-fat milk) for WIC participants, as well as the community at large;^{1,2}
- increased breastfeeding initiation among WIC mothers; increased consumption of fruits, vegetables, whole grains, and low-fat/nonfat milk by young children; and lower rates of overweight and obesity;³
- improved participant consumption of whole grains, decreased consumption of whole milk among caregivers and children who usually consumed it, and increased consumption of fruits and vegetables.⁴

THE WIC FOOD PACKAGE HELPS COMMUNITIES

Since the implementation of the 2009 food package rule, studies have also shown improved inventory of healthier foods (e.g., fresh fruits and vegetables, lower-fat milk, whole grain bread, and brown rice^{5,6,7}) in

WIC and non-WIC authorized stores. The WIC food package, therefore, can help communities to improve access to healthy food.

FLEXIBILITY FOR STATES ENSURES AN APPROPRIATE AND COST EFFECTIVE FOOD PACKAGE

The cultural diversity of WIC participants across the country necessitates flexibility for States to ensure foods offered meet the preferences that are wide ranging across the country. The food package rule allows States the flexibility to provide the federal minimum nutrition requirements in the most cost effective way to help contain costs. States can, therefore, make choices that ensure the food package they provide meets nutritional standards, is culturally appropriate and cost effective. Due in part to such flexibility, the average monthly food costs per-participant have fallen by 21% in the last 25 years (adjusted for inflation).⁸

NEW RECOMMENDATIONS AS OF JANUARY 2017

On January 5, 2017 the NASEM Expert Committee published their recommended revisions to the current WIC food package in a report entitled: **Review of WIC Food Packages: Improving Balance and Choice: Final Report.**⁹



PROPOSED CHANGES TO THE WIC FOOD PACKAGE SUPPORT THE WIC MISSION AND ARE AN EFFECTIVE USE OF WIC FUNDING

The proposed changes recommended by NASEM would help the WIC program provide a food package that is tailored to the nutritional needs of the participant, effectively maximizing the nutritional benefit that each client receives from their food. In particular, NASEM recommends increasing consumption and choice in whole grains and fruits and vegetables, decreasing amounts of certain foods that were found to be offered in too large a quantity or were burdensome to WIC families, and improving support for breastfeeding mothers.

The recommendations made by NASEM are summarized in the table below:

RECOMMENDATIONS SUMMARY

Recommendation 6-1: USDA-Food and Nutrition Service (FNS) should increase the dollar amount of the cash value voucher (CVV), add fish, and reduce the amounts of juice, milk, legumes, and peanut butter in all food packages for women and children (IV, V-A, V-B, VII).

Recommendation 6-2: USDA-FNS should support the cultural food preferences and special dietary needs of WIC participants by requiring states to offer additional options for the WIC food categories.

Recommendation 6-3: USDA-FNS should allow individual tailoring of the infant food packages as a means to support breastfeeding of any duration and intensity.

Recommendation 6-4: USDA-FNS should reduce the amounts of infant cereal across food package II for all infants and reduce the amounts of jarred infant vegetables, fruit, and meats for fully breastfeeding infants. Caregivers should be allowed to substitute all or part of the jarred infant fruits and vegetables with CVV and a portion of jarred meat with canned fish.

Recommendation 6-5: USDA-FNS should no longer require provision of WIC formula to all participants issued food package III.

Recommendation 6-6: USDA-FNS should issue food package V-B to women who are pregnant with multiple fetuses and food package VII to women who are partially breastfeeding multiple infants.

Recommendation 6-7: USDA-FNS should modify the required specifications for some WIC foods to improve their alignment with dietary guidance.

Recommendation 11-1: USDA-FNS should develop tools and strategies to assist state agencies, local agencies, and vendors to inform and support participants in making the best use of the expanded options of the revised food packages.

Recommendation 11-2: USDA-FNS should maximize the extent to which the revised food packages motivate the choice to initiate and continue breastfeeding among all racial and ethnic groups by enhancing and stabilizing the funding available for peer counseling and other lactation support staff in WIC sites.

Recommendation 11-3: USDA FNS should fund research to evaluate the effects of the recommended revision to the WIC food packages on participant satisfaction, participation in the program, redemption of WIC foods, & participants' diet and health.

Recommendation 11-4: USDA-FNS should fund data collection and analysis towards: support for breastfeeding, increasing the proportion of WIC participants initiating and continuing breastfeeding, and tailoring food package options to best meet the needs and goals of the breastfeeding dyad. USDA-FNS should examine how breastfeeding outcome data are captured in WIC management information systems and work toward a set of universal breastfeeding indicators that can be captured across systems.

Recommendation 11-5: USDA-FNS should fund research to assess how inclusion of the CVV in WIC food packages affects: food package redemption rates; participant choice of fruits and vegetables; overall diet quality; and vendor stocking practices.

Recommendation 11-6: USDA-FNS should fund research to evaluate the feasibility of adjusting the value of the CVV in high-cost states and territories.

Recommendation 11-7: The committee recommends that in the case that USDA-FNS has funding above cost neutrality, the value of the CVV should be increased for all children on the program.

Recommendation 11-8: The committee recommends that in the case that USDA-FNS has funding below cost neutrality, provision of juice should be further reduced or eliminated across food packages.

The National WIC Association strongly supports the NASEM recommendations and endorses their full implementation. These WIC food package changes will ultimately increase WIC participant satisfaction and help all 8 million low-income mothers, infants, and young children who participate in WIC supplement their diets with healthful food to support healthy growth and development.

¹ Andreyeva T, Luedicke J, Middleton AE, Long MW, Schwartz MB. (2012) Positive influence of the revised Special Supplemental Nutrition Program for Women, Infants, and Children food packages on access to healthy foods. *Journal of the Academy of Nutrition and Dietetics*. 112(6):850-858.

² Hillier A, McLaughlin J, Cannuscio CC, Chilton M, Krasny S, and Karpyn A (2012) The impact of WIC food package changes on access to healthful food in two low income urban neighborhoods. *Journal of Nutrition Education and Behavior*. 44(3):210-216.

³ Chiasson MA, Findley SE, Sekhobo JP, Scheinmann R, Edmunds LS, Faly AS, McLeod (2013). Changing WIC changes what children eat. *Obesity*.21(7):1423-1429.

⁴ Whaley S, Ritchie LD, Spector P, Gomez J (2012) Revised WIC food package improves diets of WIC families. *Journal of Nutrition Education and Behavior*. 44(3):204-209.

⁵ Havens EK, Martins KS, Jan J, Dauser Forrest D, Ferris AM. (2012) Federal nutrition program changes and healthy food availability. *American Journal of Preventive Medicine*. 2012;43(4):419-422.

⁶ Rose D, O'Malley K, Dunaway LF, Bodor JN (2014) The influence of the WIC food package changes on the retail food environment in New Orleans. *Journal of Nutrition Education and Behavior*. Vol 46, 3 Suppl.

⁷ Gleason S, Pooler J (2011) The Effects of Changes in Food Packages on Redemptions: Contractor and Cooperator Report No. 69. Altarum Institute.

⁸ Carlson, S, Neuberger Z, Rosenbaum, D. (2015) WIC Participation and Costs are Stable – Have Returned to Pre-Recession Levels. Center on Budget and Policy Priorities. p.9

⁹ National Academies of Sciences, Engineering, and Medicine. (2017) Review of WIC food packages: Improving balance and choice: Final report. Washington, DC: The National Academies Press. doi: 10.17226/23655.