

January 29, 2010



Debra Whitford  
Director, Supplemental Food Programs Division  
Food and Nutrition Service  
U. S. Department of Agriculture  
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Alexandria, VA 22302

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RE: Docket ID Number FNS-2006-0037, WIC Food Packages Interim Rule

Dear Ms. Whitford:

The American Dietetic Association appreciates this opportunity to submit comments to the United States Department of Agriculture on its interim final rules to modernize the WIC food package to better meet the nutrition and health needs of this country's vulnerable citizens — mothers and children. ADA is the largest association of Registered Dietitians and other food and nutrition professionals in the United States, with a membership exceeding 70,000. The American Dietetic Association is the world's largest organization of food and nutrition professionals. ADA is committed to improving the nation's health and advancing the profession of dietetics through research, education and advocacy. Thousands of our members refer patients to obtain services from the WIC program and thousands more of our members are WIC employees themselves.

The proposed revisions to the WIC food packages represents the most significant change to the food packages in over 30 years and will do much to improve the nutritional health of all WIC recipients. ADA commends USDA for designing food packages that address the today's health concerns by providing less saturated fat and cholesterol, and more fiber, other vitamins and minerals than the current food package. The proposed WIC food packages will help mothers and children establish dietary patterns that promote better food habits and establish dietary patterns compatible with health. These packages add fruits, vegetables, and whole grain bread and cereal products; decrease saturated fat and cholesterol; and provide options to milk, meats and legumes consistent with the *Dietary Guidelines for Americans*. They largely reflect the Institute of Medicine (IOM) recommendations in *WIC Food Packages: Time for a Change*.

ADA applauds USDA for the positive changes in WIC food packages included in the Interim Rule. As the Department finalizes the WIC Food Package rule, we ask that you consider the following recommendations to maximize the potential health benefits for each WIC participant.

### **Fruit and Vegetable Benefit**

ADA urges that USDA demonstrate full adherence to the IOM recommendation for fruits and vegetables by providing the full cash-value voucher amounts for fruits and vegetables of \$8 per month for children. We strongly support the recent change to increase the amount of the cash-value voucher for pregnant, partially breastfeeding and non-breastfeeding post-partum women to \$10 per month.

In addition, many states allow only fresh fruits and vegetables in their approved foods list. Including frozen and canned fruits and vegetables will increase availability of fruits and vegetables for all WIC participants.

## **Milk and Substitutes**

Medical Documentation Requirement -- ADA recommends that USDA waive the medical documentation requirement for children to receive soy beverages. The consumption of soy beverage for children can be a cultural/personal preference as well as a medical necessity. Children who already have consumed soy-based formula throughout the first year of life should not require a new prescription for fortified soy-based beverage. The competent professional authority as defined by 7 CFR 246.2 is qualified to determine when milk substitutes are appropriate for individual participants. Instead of requiring a prescription from that physician or designated assistant, WIC competent professional authority could conduct a nutritional reassessment and then, if necessary, alert the child's physician. WIC dietitians and nutritionists are health professionals trained and capable of doing a complete assessment, selecting WIC foods and providing appropriate education to a participant with consultation with the health care provider when warranted. ADA urges USDA to allow WIC dietitians and nutritionists and health care providers to determine when milk substitutes are appropriate for individual participants.

Lower-fat options -- ADA also supports the maximum fat content of 2% fat milk for Food Packages V through VII, but questions the implications and practicality of requiring households with a child between 1 - 1.9 years to purchase a carton of whole milk. The rule may complicate purchasing, storage and serving practices for two different kinds of milk. ADA asks FNS to consider lowering the required minimum fat content in milk to 2% for children 1.0 to 1.9 years, without medical documentation. Children of this age can safely meet calorie and fat needs with 2% milk. The American Heart Association's Dietary Recommendations for Children include food patterns for 1-year-olds based on inclusion of 2% milk. Subsequent to the publication of the IOM report and the Interim Rule, the American Academy of Pediatrics published guidelines that support the use of lower fat milk for children age 12 months and older who have a family history of heart disease, obesity and high cholesterol and for children at risk for being overweight. ADA urges USDA to allow children ages 12 to 23 months to receive lower fat milk based on a determination by either a health care provider or the WIC dietitian or nutritionist.

Substitutions -- ADA believes that the milk amounts for Food Packages IV through VII are consistent with the 2005 *Dietary Guidelines for Americans* and reflect IOM recommendations, and are appropriate for a supplemental feeding program. ADA is pleased that the WIC food packages include substitutions for milk, and urges reconsideration of the IOM recommendation to offer yogurt as a substitute for at least Food Package VII, and possibly V.

## **Categorical Tailoring and Substitution Requests**

ADA is concerned about very narrow allowance for state agencies to categorically tailor or propose food substitutions. There are rapid changes in food industry, science, demographics and other factors in today's environment, and state agencies will need to submit proposals for cultural accommodations or categorical tailoring in the future. Federal changes to the WIC food packages require a tremendous amount of time and resources, and thus are typically not able to quickly respond to state needs. It is essential that states be allowed the ability to revise food lists, within the categorical maxima defined in the proposed rule, to keep pace with the needs of their participants.

## **Conclusion**

ADA commends USDA Food and Nutrition service for developing WIC food packages that will positively contribute to participant long-term nutritional health.

The thousands of registered dietitians that work as WIC nutritionists, providing education to women and children at WIC clinics throughout the country, stand ready to help WIC recipients maximize their health and their families' health under the new WIC food packages.

Sincerely,

A handwritten signature in cursive script, reading "Mary H. Hager". The signature is written in black ink and is positioned above the printed name.

Mary H. Hager, PhD, RD, FADA  
Directory, Regulatory Affairs