

February 21, 2023

Benefits, and Certification Branch
Policy Division
Food and Nutrition Service
1320 Braddock Place, 3rd Floor
Alexandria, Virginia 22314

Re: Docket No. FNS-2022-0007; Special Supplemental Nutrition Program for Women, Infants, and Children (WIC): Revisions in the WIC Food Packages

On behalf of the International Fresh Produce Association, we respectfully submit the following comments to the U.S. Department of Agriculture on the proposed revisions to the WIC food packages. The International Fresh Produce Association (IFPA) was founded in 2022 on the deep-seated history of leadership of the United Fresh Produce Association (UFPA) and the Produce Marketing Association (PMA). IFPA is the largest and most diverse association serving the entire global fresh produce. A core component of the industry's legacy association work has been increasing fruit and vegetable consumption through federal policy and programs, including the Special Supplemental Nutrition Assistance Program for Women, Infants, and Children (WIC).

As the United States experiences staggering rates of diet-related chronic diseases and exorbitant healthcare costs related to poor nutrition, promoting nutrition through federal nutrition programs like WIC is imperative to addressing food and nutrition insecurity. Nine out of ten Americans do not consume enough fruits and vegetables highlighting the consumption crisis we have with one of the most important food groups in dietary guidance.ⁱ Additionally, six in ten Americans have a chronic condition and four in ten have two or more, many of which are diet-related, including heart disease, some cancers, stroke and diabetes.ⁱⁱ

Proper nutrition informs healthier outcomes and can mitigate or prevent the onset of chronic diet-related disease. Obesity, diabetes, and heart disease alone account for nearly \$650 billion in healthcare costs each year, affecting more than one-in-five children.ⁱⁱⁱ Nutrition interventions that mitigate chronic disease earlier in life, such as WIC, can have a substantial impact over time, as children with obesity are five times as likely to have obesity as adults.^{iv} In addition, targeted nutrition support during pregnancy and early childhood can address micronutrient deficiencies that result in health conditions like neural tube defects and iron-deficiency anemia.

Newly published research from the Centers for Disease Control and Prevention (CDC) shows how dire the fruit and vegetable consumption crisis is among children aged 1-5 years old. Questionnaires conducted between June 2021 and January 2022 in 20 states found that among the responses, 32.1% of children aged 1-5 years old did not eat a fruit at all during the day and 49.1% did not eat a vegetable at all during the day. Across the 20 states more than one half of children did not eat a daily vegetable for the preceding week. Disparities existed widely within the results showing that consumption of fruits and vegetables differed by race and ethnicity, age and household food sufficiency. Most notably, children who did not eat a fruit or vegetable daily was highest among non-Hispanic Black children and lowest

among non-Hispanic White children. The authors of the published research specifically noted the role that policies and programs, including WIC, play in increasing consumption of fruits and vegetables.^v

WIC is recognized as the nation's strongest public health nutrition program and serves over 6 million participants per year by providing them access to healthy, nutritious foods through science-based food packages, breastfeeding support, nutrition education, and referrals for health care services.^{vi} The WIC program has considerably evolved to further support nutrition since its inception. The 2009 food package changes were significant in improving nutrition and health outcomes for WIC participants. Research has shown that the WIC program has improved pregnancy and birth outcomes,^{vii} reduced risk of infant mortality,^{viii} improved breastfeeding rates,^{ix} increased consumption of under-consumed food groups,^x promoted higher dietary quality,^{xi} and reduced prevalence of childhood obesity particularly among 2–4-year-olds.^{xii}

The proposed WIC food package changes that were released in November 2022, are rooted in independent, science-based recommendations that align with Dietary Guidelines for Americans (DGA). The 2017 report released by the National Academies of Sciences, Engineering, and Medicine (NASEM) reviewed the latest nutrition science and set forth recommendations to further align the food packages and the DGA. The proposed rule reflects the scientific advice of the NASEM report and the DGA, demonstrating an ongoing commitment to build upon the public health advances secured in the 2009 food package review.

Updating the WIC food packages to better align with current, nutrition research and dietary guidance, is one of the most significant steps taken to implement the National Strategy unveiled at the White House Conference on Hunger, Nutrition, and Health to reduce diet-related chronic disease and end hunger by 2030. Not only will the updates positively impact the health and nutrition of WIC participants, but it will likely have an impact on all consumers as manufacturers will be encouraged to provide healthier, nutritious products at the retail level. This occurred in the 1980s in response to the WIC program becoming permanent in 1974 when manufacturers reformulated infant formula and breakfast cereals to meet iron-fortification requirements set in the original food packages, and again with the 2009 food package revisions when the Cash Value Benefit (CVB) was introduced, and retailers increased stocking of fresh produce after minimum stock requirements were implemented. In addition to the direct impacts on WIC children, the 2009 revisions closed disparities in healthy food access through improved stocking of fresh produce, especially in low-income neighborhoods.^{xiii xiv}

IFPA strongly supports USDA's proposal to permanently establish higher values for the Cash Value Benefit (CVB) to reach target intake for fruits and vegetables.

Updated food packages will benefit all WIC participants, but particularly the 4.9 million women and children who will receive enhanced fruit and vegetable benefits.^{xv} The Cash Value Benefit (CVB) is one of the most substantial investments in nutrition security in the history of federal nutrition programs and can significantly close the consumption gap of fruits and vegetables, particularly among vulnerable populations. With the increased amounts of the CVB, first put in place by Congress in 2021, USDA's proposed rule would take a noteworthy step forward in establishing healthy eating patterns by affirming WIC benefit issuance at 50% of DGA-recommended intake.^{xvi} This increase sets the stage for healthier

outcomes at key periods of growth and development, as well as the formation of lifelong taste preferences that could encourage healthier diet patterns beyond the duration of WIC eligibility.^{xvii}

NASEM calculated that, based on composite costs of fruits and vegetables most commonly purchased by WIC participants, an appropriate supplemental issuance for the CVB would amount to \$23 per month for children, \$41 per month for postpartum women, and \$45 per month for a pregnant or breastfeeding woman.^{xviii} NASEM also identified significant gaps in vegetable consumption among WIC-eligible populations, including 100% of postpartum women, 99% of children, and 99% of pregnant women who fall short of DGA-recommended vegetable intake.^{xix} The NASEM calculated amounts more closely align with the updated CVB amounts of \$24 per month for children, \$43 for pregnant and postpartum women, and \$47 for fully and partially breastfeeding women established in 2021.

The increase in the CVB amount has been very well received by program participants and has positive impacts on nutrition security. In spring 2021, a multi-state WIC participant satisfaction survey was conducted to examine the impact of the CVB during the COVID-19 pandemic. The results, which were published in March 2022, and included more than 10,000 responses, found that fruit and vegetable intake rapidly and measurably increased among children by about ¼ cup per day for WIC-enrolled children. In addition, WIC participants reported that the increased amount was adequate, in contrast to the consensus among participants that the original amount of \$9 per child for the CVB was not enough.^{xx} Added CVB benefits greatly shifted participant perceptions about the value of WIC participation: 83.8% of WIC participants felt that the CVB was “not enough,” but only 24% felt similarly after the increased amounts were put in place in 2021.^{xxi} Another study published in February 2022 echoed these findings with WIC participants experiencing low program satisfaction due to insufficient benefits for fruits and vegetables prior to the increase in the CVB amount.^{xxii} Program satisfaction is one of the key elements to increasing program participation and retention. NASEM identified that a higher-value CVB could incentivize ongoing participation by young children,^{xxiii} addressing a persistent challenge that fueled participation declines in the 2010s.

In addition to addressing key nutrient gaps, increasing consumption of fruits and vegetables, and improving program perceptions and program satisfaction, the CVB is the most versatile element of the WIC food package, providing a greater degree of choice that can empower WIC families to reflect cultural eating patterns and experiment with new varieties. When charged by USDA to identify priorities for additional investment beyond cost-neutrality, NASEM clearly articulated that the priority should be further increases to the CVB.^{xxiv} Research conducted in Southern California with over 1,500 families found that the higher-value CVB increased the average number of different vegetable and fruit types purchased. At the lower \$9/month CVB, four fruits and vegetable types were purchased, at the \$24/month CVB, seven fruit and vegetable types were purchased, and at the \$35/month CVB, nine fruit and vegetable types were purchased.^{xxv} By using the enhanced benefit to introduce children to a wider variety of fruits and vegetables, children’s dietary preferences will be shaped throughout the life course. This change will lead to improved health outcomes not only during the course of WIC participation, but also likely reduce long-term diet-related chronic disease in adulthood. Additionally, the change in stocking standard requirements from two to three vegetables will continue to provide WIC participants with a wide variety of healthy, nutritious choices.

With the increased CVB, spending on fruits and vegetables also increased from \$1 million per month to \$3 million per month in California alone.^{xxvi} Interviews conducted with WIC participants in Wilmington, Delaware found that the higher CVB allotments increased WIC participants' purchasing and consumption of fruits and vegetables, increased the frequency of their shopping occasions, and enhanced their dietary variety.^{xxvii} The increased CVB is a win-win-win for program participants, retailers, and growers.

IFPA strongly urges USDA to maintain the elevated CVB benefits throughout implementation.

USDA's proposed rule outlines an implementation timeline of 18 months, allowing States to adjust complex computer systems to account for the new food packages.^{xxviii} This window is critical to ensure that States are positioned to appropriately program in new products, issuance levels, and substitution patterns. However, the proposed rule suggests that changes cannot be made on a food category basis; instead, an entire food package (e.g., the food package for children) must be adjusted at the same time. For example, the proposed rule suggests that canned fish could not be added to the child food package until the entire child food package is updated. This limitation is of particular concern for the food packages with elevated CVB, as a narrow reading of that limitation would suggest that benefits must be reduced to \$9 or \$11 for fruits and vegetables unless *all* changes are included across the individual food package. USDA should avert this disastrous result and explicitly exempt Cash Value Benefit from this limitation in implementation to assure equitable treatment of WIC participants as States adjust their systems and program in the new food packages.

IFPA strongly recommends USDA further limit juice consumption by providing a higher value CVB and only allowing juice as an "opt-in" substitution.

As currently written, the proposed food package updates reduce juice in the child, pregnant and breastfeeding food packages, eliminates juice for postpartum participants, and allows a substitution of a \$3 CVB for the full juice amount. We respectfully request that USDA further encourage mostly whole fruit and vegetable consumption (defined by the Dietary Guidelines for Americans to be inclusive of produce that has been chopped, diced, sliced or cubed) by eliminating juice as the default option in food packages, providing participants an additional \$3 (adjusted for inflation) to the CVB, and permitting juice only as a substitution option. This change is necessary as the current food packages provide more than 100% of the recommended limit for juice as part of a healthy diet. Fruit juice is overconsumed by children and high intakes of juice have been linked to diarrhea, overnutrition or undernutrition due to increased calorie consumption and the lack of protein and fiber, and the development of dental caries.^{xxix}

The DGA recommends that children age 12-24 months should consume most of their fruit intake from whole fruit, but if fruit juice is given, it should be 100% and be limited to no more than 4 ounces per day. Prior to 12 months of age, juice, even 100% fruit or vegetable juice, is not recommended.^{xxx} Although the updated packages reduce the juice quantity provided to 53% of the upper DGA limit based on 4 oz/day for children ages 12-23 months, 36%-53% of the upper DGA limit based on 4-6 oz/day for children ages 2 to 4 years, and 27% of the upper DGA limit based on 8 oz/day for pregnant and breastfeeding food packages, the elimination of juice as the default option and replacing it with a higher value CVB would increase fruit and vegetable consumption, even further closing the consumption gap of

fruits and vegetables. Higher fruit and vegetable issuance is critical for improving health outcomes and closing intake disparities. Whole fruit is higher in fiber than 100% fruit juice,^{xxxii} and NASEM prioritized fiber intake across all child and adult food packages.^{xxxiii} By decreasing overall juice issuance and boosting CVB for whole fruit purchases, WIC can work to reverse intake disparities that disproportionately affect low-income families and, in particular, Black children.^{xxxiii}

IFPA strongly supports USDA’s proposal to allow a CVB substitution for jarred infant fruits and vegetables for infants ages 6 to 11 months.

The substitution of jarred infant fruits and vegetables by either reducing the amount to 64 oz. for a \$10 CVB substitution, or completely eliminating jarred infant fruits and vegetables for a \$20 CVB substitution, provides families the flexibility needed to meet their individual needs. Research has shown the importance of introducing fruits and vegetables during infancy and the role that it plays in older childhood. Children who consumed fruits and vegetables less than once daily during late infancy had increased odds of eating fruits and vegetables less than once daily at age 6 years old.^{xxxiv} Additional studies found that the earlier a child experiences nutritious foods, the more likely they are to choose a healthier diet later. Researchers have also noted that these nutritious foods, like fruits and vegetables, need to be a part of the built environment for children so that not only are the options available, but they become a preference. By increasing access to a wide variety of fruits and vegetables beyond jarred infant foods through the CVB substitution, children may have increased exposures to fruits and vegetables leading to healthy eating patterns in infancy that translate throughout their life span.^{xxxv}

IFPA strongly supports USDA’s promotion of equity and nutrition security and the support for cultural and traditional foods and preferences in the updated food packages.

The updated food packages support cultural preferences and the purchasing of traditional foods through increasing access to a wide range of food options. With the increased CVB, families can purchase a greater variety of fruits and vegetables which can support a diverse range of eating patterns and cultural preferences. Additionally, the increased CVB promotes equity within the WIC population by increasing purchasing power. However, it still does not meet the total value of the food benefit calculated by the Bureau of Labor Statistics. When WIC was established in the 1970s, a monthly benefit would supply approximately \$20 of supplemental foods across four adult/child categories (milk/cheese, cereal, juice, and eggs); According to the Bureau of Labor Statistics, if the WIC food packages were adjusted for annual inflation to maintain the same purchasing power, the total value of the food benefit would be over \$100 today.^{xxxvi} Instead, the average WIC benefit in 2021 was only \$35.58 across eight adult/child food categories.^{xxxvii} It is critical through this update, and future updates, that the value of the benefit is sufficient to shape dietary behaviors as well as cultural and traditional preferences to further promote equity.

IFPA recommends that USDA consider implementation needs of state and local WIC agencies and retailers when finalizing the updated food packages.

As USDA works toward finalizing the updated WIC food packages, there are implementation considerations that need to be taken into account for WIC agencies as well as for retailers. Although there are only a handful of WIC agencies that only allow fresh fruits and vegetables to be purchased with the CVB, they will need considerable time, possibly up to 24 months, to expand options to other forms. During this time, it is important that WIC retailers continue to provide access to a wide variety of

fresh fruits and vegetables. Additional funding resources may be needed for these agencies as technology updates or enhancements will likely be needed. Technical assistance should be provided to them as well at both the state and local agency level and with retailers. USDA must ensure that agencies have time to adapt and implement these changes and provide the necessary monetary, capacity, or other resources necessary to ensure full, successful implementation.

USDA should continue to engage state WIC agencies on issues related to program participation and retention and redemption of all benefits, including full usage of the CVB. They should incorporate retailers into working groups and conversations around ensuring all WIC benefits are redeemed and provide education to state agencies on troubleshooting common issues with under redemption of benefits. As an association with a mix of some of the largest retail members in the U.S., as well as independents, we stand ready and willing to assist USDA and state WIC agencies with ensuring full redemption of the CVB.

In closing, we encourage USDA to implement the rule as a whole and to not make changes that may hinder the integrity of the strong, science-based proposed food packages that have been put forth.

This is particularly important for fresh fruits and vegetables, which are consumed as standalone, healthy, nutritious options by families across the US. We appreciate the opportunity to comment on the updated WIC food packages which can be instrumental in improving food and nutrition security among some of our nation's most vulnerable populations. We look forward to being a part of the implementation of the updated food packages and are available to assist with implementation throughout the supply chain.

Sincerely,

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International Fresh Produce Association

ⁱ Centers for Disease Control and Prevention, Division of Nutrition, Physical Activity, and Obesity. "Only 1 in 10 Adults Get Enough Fruits and Vegetables" <https://www.cdc.gov/nccdphp/dnpao/division-information/media-tools/adults-fruits-vegetables.html#:~:text=Despite%20these%20positive%20health%20benefits,Behavioral%20Risk%20Factor%20Surveillance%20System.>

ⁱⁱ Centers for Disease Control and Prevention. National Center for Chronic Disease Prevention and Health Promotion. Chronic Diseases in America. <https://www.cdc.gov/chronicdisease/resources/infographic/chronic-diseases.htm>

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