

**TO REVIEW THE FEDERAL GOVERNMENT'S  
INITIATIVES REGARDING CHILD NUTRITION  
PROGRAMS**

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**HEARING**  
BEFORE THE  
**COMMITTEE ON AGRICULTURE,  
NUTRITION, AND FORESTRY**  
**UNITED STATES SENATE**

ONE HUNDRED EIGHTH CONGRESS  
FIRST SESSION

—————  
APRIL 3, 2003  
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# CONTENTS

	Page
HEARING(S):	
To Review the Federal Government's Initiatives Regarding Child Nutrition Programs .....	01

## Thursday, April 3, 2003

### STATEMENTS PRESENTED BY SENATORS

Cochran, Hon. Thad, a U.S. Senator from Mississippi, Chairman, Committee on Agriculture, Nutrition, and Forestry .....	01
Dayton, Hon. Mark, a U.S. Senator from Minnesota .....	37
Leahy, Hon. Patrick, a U.S. Senator from Vermont .....	29
Lincoln, Hon. Blanche, a U.S. Senator from Arkansas .....	43
Lugar, Hon. Richard G., a U.S. Senator from Indiana .....	25

### WITNESSES

Bost, Eric, Under Secretary, Food, Nutrition, and Consumer Services, United States Department of Agriculture, Washington, DC .....	02
--	----

#### Panel I

Besharov, Douglas, Joseph J. and Violet Jacobs Scholar in Social Welfare Studies, American Enterprise Institute, and Professor, University of Maryland School of Public Affairs, Washington, DC .....	19
Weill, James, President, Food Research and Action Center, Washington, DC ..	14

#### Panel II

Caplan, Karen, Frieda, Inc., Los Alamitos, California, on behalf of the United Fresh Fruit and Vegetable Association .....	35
Curry, Anne, Vice President, Legislative and Political Affairs, Food Marketing Institute, Washington, DC .....	33
Hofstedt, Rod, Executive Director, Adult and Children's Alliance, St. Paul, Minnesota, on behalf of the National Child and Adult Care Food Program Forum .....	38
Leppert, Jill, President, National WIC Association, Bismark, North Dakota ....	31
Wambles, Don, President, National Association of Farmers Market Nutrition Programs, Montgomery, Alabama .....	39

### APPENDIX

PREPARED STATEMENTS:	
Harkin, Hon. Tom .....	54
Besharov, Douglas .....	103
Bost, Eric .....	61
Caplan, Karen .....	125
Curry, Anne .....	121
Hofstedt, Rod .....	139
Leahy, Hon. Patrick .....	59

IV

	Page
PREPARED STATEMENTS—Continued	
Leppert, Jill .....	112
Lugar, Hon. Richard .....	58
Stabenow, Hon. Debbie .....	50
Wambles, Don .....	146
Weill, James .....	78
DOCUMENT(S) SUBMITTED FOR THE RECORD:	
American Dietetic Association .....	242
Apple Processors Association, Paul S. Weller, Jr., President .....	229
Beckman, Rev. David, President, Bread for the World .....	152
Fallon, Sally, President, The Weston A. Price Foundation .....	215
Food Marketing Institute (FMI), News .....	166
Food Marketing Institute (FMI), Your Neighborhood Supermarkets .....	169
Hauter, Wenonah, Director Public Citizen's Critical Mass Energy and Environment Program .....	231
National Law Center on Homelessness and Poverty, Susan Fallon, Staff Attorney .....	225
National WIC Association—2003 WIC Reauthorization Agenda .....	159
Society for Nutrition Education (SNE) .....	235
Society for Nutrition Education (SNE), Platform/Policy Statement on the Federal Child Nutrition Reauthorization of 2003 .....	237
United—Child Nutrition Policy Recommendations .....	211
United—Fresh Produce and Child Nutrition Programs .....	212
United—National Alliance for Nutrition and Activity .....	179
United—News Release .....	213
United—State of California Health and Human Services Agency .....	195
QUESTION AND ANSWER:	
Harkin, Hon. Tom (no answers provided) .....	248
Leahy, Hon. Patrick (no answers provided) .....	249

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**THURSDAY, APRIL 3, 2003**

U.S. SENATE,  
COMMITTEE ON AGRICULTURE, NUTRITION, AND FORESTRY,  
*Washington, DC.*

The Committee met, pursuant to notice, at 10:13 a.m., in room SR-328A, Russell Senate Office Building, Hon. Thad Cochran, [Chairman of the Committee], presiding.

Present or submitting a statement: Senators Cochran, Lugar, Harkin, Leahy, Conrad, Lincoln, Stabenow, and Dayton.

**STATEMENT OF HON. THAD COCHRAN, A U.S. SENATOR FROM  
MISSISSIPPI, CHAIRMAN, COMMITTEE ON AGRICULTURE,  
NUTRITION, AND FORESTRY**

The CHAIRMAN. The committee will please come to order. Today, our Committee on Agriculture is having its second hearing on the re-authorization of the Child Nutrition Act and the National School Lunch Act. At our first hearing on March 4, we reviewed the National School Lunch and School Breakfast Programs. Today, we will hear from witnesses who will discuss the Special Supplemental Nutrition Program for Women, Infants, and Children, the Summer Food Service Program, the Child and Adult Care Food Program, and the Farmers' Market Nutrition Program.

As we all know, good nutrition is very important to good health. These programs we are reviewing will help ensure that our nation's children and others have access to a nutritious diet.

The Federal Government supports over a dozen child nutrition programs and other activities which benefit more than 37 million children and almost two million lower-income pregnant and post-partum women.

I am going to put the balance of my statement discussing these programs and the funding requests that we have received and level of funding for the program in the record so we can move right along to hear from our witnesses.

The CHAIRMAN. We are going to hear from three panels of witnesses today. Senator Kohl, who has taken a special interest in these programs, had planned to be here today. We had scheduled this hearing for another day and then we had to change the date, and because of this late change, he was not able to rearrange his schedule and I regret that.

Also, Senator Coleman wanted to be here to welcome Mr. Hofstedt from Minnesota, but he is chairing a Foreign Relations Committee hearing.

We know there are some other things going on in the Senate today. On the floor, we have an appropriations bill, as you probably know, pending and under consideration by the Senate. We may have votes and I may have to go to the floor during the conduct of this hearing and I hope you will understand that it is not because we think anything else has a higher priority, but we have to do what we must, I guess.

We are pleased to begin the hearing today with testimony from Mr. Eric Bost, who is Under Secretary of Food, Nutrition, and Consumer Services at the Department of Agriculture. We have other witnesses, as I indicated, and I will introduce them at the appropriate time.

Thank you all for your assistance and for the preparation of the statements that we have in advance. We will make all these statements a part of the record in full and we encourage you to make whatever summary comments you think would be helpful to our understanding of these programs.

Mr. Bost, you may proceed.

**STATEMENT OF ERIC BOST, UNDER SECRETARY, FOOD, NUTRITION, AND CONSUMER SERVICES, UNITED STATES DEPARTMENT OF AGRICULTURE, WASHINGTON, DC**

Mr. BOST. Good morning, Mr. Chairman. For the record, I am Eric Bost, Under Secretary for Food, Nutrition, and Consumer Services at the United States Department of Agriculture. I am really happy and pleased to be here today to talk about the administration's recommendations for the re-authorization of these programs.

You have my written testimony, and so I just want to provide some highlights of the recommendations that we want to propose that we think will go a long way in terms of addressing the needs of children in this country.

The opportunity to make a difference in children's lives is evident and our responsibility, we believe, is clear. We also know that we can't do it alone. That is why last spring, Deputy Under Secretary Suzanne Biermann and I conducted listening sessions around the country. We have listened to parents, providers, school administrators, students, WIC participants who came and told us what they think about our programs, what they like, and what they would change. Through this process, we have gained important insights to shape our proposal.

We have established three guiding principles essential to the proposal we bring to you today. One, access to program benefits for all eligible children. Two, support for healthy school environments to address the epidemic of overweight and obesity among our children. Three, commitment to program integrity to ensure the best possible targeting of program benefits to eligible children.

Let's talk about the recommendations. Let's talk about ensuring program access. In our commitment to ensure program access, we propose, first, to consolidate the school meals programs into one program, the School Nutrition Program. Streamlining operations would allow States to operate under one State administrative of-

face, offer a full array of meals under one set of rules and provide meals to children 365 days a year.

Second, increase the regular free and reduced-price breakfast rates to the severe need rate for all schools participating in the program. This rate increases supports and offers expansion for the critical yet under-utilized school breakfast program.

Next, we propose to expand the 14-State pilot project, often referred to as the Lugar Pilot. This program increases participation in the summer feeding program by reducing administrative paperwork, which encourages schools and other agencies to support the program.

Fourth, exclude the military housing allowance to improve access for those families who make the ultimate sacrifice for our country.

Finally, streamline the application process for both families and schools by requiring a single application per household and providing for a year-long certification.

One of the issues that we are really addressing in this country right now is the prevalence of overweight and obesity among America's youth, which is an issue we believe that we must address. The percentage of young people who are overweight has doubled in the last 20 years for children ages six to 11 and almost tripled for adolescents age 12 to 19. Health problems associated with obesity cost America over \$117 billion, directly related to significant medical issues, for example, Type II diabetes among children.

We also know why we have this problem. The reasons are clear and, to some extent, uncomplicated, and something that my father used to tell me when I was a kid growing up. If you eat too much, and if you eat too much of the wrong thing, and if you get too little physical exercise, you will be overweight and you are at risk of being obese. It is something that is easy to talk about, but much more difficult and complex to address.

We also know that there are significant environmental influences at work: The availability of sugary, high-fat foods, the movement away from sports and exercise toward TV and computer screen watching, the lack of strong programs of nutrition education and physical education in many schools. It is also real important to note, I believe, that we all bear responsibility for this problem and that we all have a very important role to play.

For example, parents need to model eating behavior and physical behavior. Currently, six of ten adults are overweight, too. I am also reminded of the saying that my parents used to talk about, do what I say, not what I do, and that is what we have been talking about. Parents must guide the choices of their children when they are too young to make informed choices alone. Families and communities can make healthy eating and exercise shared activities. One of the programs that is going on in Denver is a prime example of that.

Teachers can find ways to build nutrition and physical education into their curriculum, and school administrators can work toward a healthy school environment. The media can help by providing nutrition and physical activity promotion messages at times that reach children and their caregivers.

Of course, why we are here today, the Federal Nutrition Assistance Programs also have a very essential role to play.

Some things that we are currently doing as part of the President's HealthierUS initiative, we promote the "Eat Smart, Play Hard" campaign to motivate healthy eating and more physical activity. We promote healthy eating right from the start through our breast feeding promotion and support activities as a part of our WIC program. We are expanding and improving program-based nutrition education and other services. We promote the eating of fresh fruits and vegetables, which I truly believe is very, very important. Also, we are working in concert with the Department of Health and Human Services and the Department of Education.

We also believe that we must do more. As a part of the re-authorization, we propose to support expanded funding for delivery of nutrition messages and materials; require schools to offer low-fat milk as a beverage option for school meals; seek authority to continue the fruit and vegetable pilots through the end of school year 2005, and finally, establish a healthy school environment that supports the President's HealthierUS and Leave No Child Behind initiatives.

Along those lines, and let me elaborate, the administration proposes a multi-departmental implementation of HealthierUS in schools through demonstration projects. School districts will be asked to volunteer for the demonstration projects and will be provided financial and other incentives to implement one or more of the keystones or principles of HealthierUS. One, eat a nutritious diet. Two, be physically active each day. Three, get preventive screenings. Four, make healthy choices.

Incentives will be attached to each keystone or principle and a special HealthierUS designation will recognize those schools that are able to implement all four, but they don't have to be all four. They can do one or a combination thereof. This is a coordinated effort between us and the Department of Education and Health and Human Services.

It is also real important that there is an evaluation component to this so that we can make a determination if what we are proposing actually works. We are also hopeful that to earn a HealthierUS nutrition incentive, schools would serve program meals that meet the Federal nutrition standards; offer healthy food options in vending machines, school stores, and a la carte meals; promote the consumption of fruits and vegetables; and deliver nutrition education.

It is a leadership role, a very supportive role, a proper role for government to give good nutrition a fighting chance by providing financial support to local schools that take action to promote children's health. Our responsibility demands action. This action is real and is important and it supports local decisionmaking. It is outcome-driven and results-oriented.

Through leadership and support in partnership with the school districts, local schools, teachers, administrators, and parents, we take a step to improve the school environment through these incentive-based demonstration projects that include an evaluation component that lets policy be guided by outcomes.

Another issue that I believe is also very important is food safety. Food safety is an integral and essential part of a healthy school environment that this administration supports. We recommend re-



quiring school food authorities to employ HACCP, which is Hazard Analysis Critical Control Points, procedures in the preparation of school meals.

The National Food Service Management Institute at the University of Mississippi is a key resource for food safety materials, education, and training for food service personnel in our nutrition programs. The Institute recently created a network of instructors to train these employees in the principles of HACCP, and they have also developed a manual and teleconferences as resource for food service managers responding to food recalls or emergency readiness.

Hunger and obesity, most people wonder how can you talk about those in the same sentence? However, I want to be very clear that the epidemic of obesity does not mean that we have won the war on hunger in this country. In fact, although there has been talk about Federal nutrition assistance programs that are in some way responsible for obesity, we have seen no evidence to support this contention.

Instead, we know that less than 5 percent of families are enrolled in all four of our major nutrition programs—that is food stamps, school lunch, school breakfast, and WIC. We know that 52 percent participate in only one program. Research indicates that 3.5 million households report that they didn't have enough food for their family sometime during the year because they couldn't afford it, and we know that obesity affects Americans of all income levels, all racial and ethnic groups, and all ages. In other words, we know that hunger and obesity coexist in this country.

However, we do appreciate the focus of many on the prevalence of obesity, and it is something that is very important that we need to address. We also say we appreciate any data and research that is brought to our attention so that we can look at making informed decisions to address both of these issues.

For these reasons and for the health and well-being of Americans, especially our children, we will continue our efforts to make a difference in the lives of Americans who suffer from both hunger and obesity.

I would be remiss if I didn't talk about something that is very important, not only to the President but also to the Secretary and to me personally, and that is this issue of program integrity. We cannot really succeed in our efforts without ensuring effective and efficient management of our resources. It is important to us not only from a management perspective, but also in our role as public stewards.

As you know, we have a problem with the accuracy of certification in the National School Lunch Program. While we do not know the exact scope of the problem, we do know that we have a problem and that the problem appears to be getting worse. This is important not only because improper certifications create a risk that nutritional assistance benefits are not getting to those who are eligible, but also because our school lunch certification data are used to distribute billions of other dollars in Federal, State, and local education aid.

I also want to be very clear in terms of the two guiding principles that I established in terms of addressing this issue. First and fore-

most, that we would not do anything that we believe would result in eligible children being deterred or prevented from participating in our program and two, that would result in any undue administrative burden in our schools. Those were the two guiding principles that I have established.

With that in mind, to address this issue, there are some recommendations that I would like to put forth. One, require direct certification for free meals through the food stamp program. This will increase access to eligible children, reduce the application burden for families and schools, and improve accuracy in the certification process.

Two, enhance verification of the paper-based application process by drawing the samples earlier in the year and both increasing and expanding the sample of both random and error-prone applications.

Three, minimize any barriers that may result from an enhanced verification process by requiring a more robust consistent followup for those who do not respond.

Four, provide funding for schools to support the new enhanced administrative efforts, and we should not, nor would I recommend that these expanded efforts be placed in the hands of already overburdened food service workers.

Five—no, just four. I will save the fifth one just in case.

[Laughter.]

Mr. BOST. Let's talk about what these recommendations do. They include strong steps that we can take to begin to improve the process. I also believe they establish a plan to continue research and demonstration efforts so that the improvements can continue. They protect eligible children and ensure their ability to participate in the program. They streamline the application and certification process, and provide administrative funds to help schools get us there.

Let's talk about WIC for just a few minutes. I would be remiss if I didn't talk about this program that we believe is very important. WIC is also up for re-authorization. The President has been very clear regarding his commitment to this vital program by requesting unprecedented levels of funding for WIC. Currently, over 7.6 million at risk, low-income women and their young children are served in this program every month.

As part of the administration's re-authorization package, we propose increased budget authority for WIC management information systems development and support, expanded availability of breast feeding counselors, and establishment of a pilot project to determine how WIC can help prevent childhood obesity.

I believe I have talked long enough. Mr. Chairman, I appreciate the commitment and longstanding support of you and other members of this committee. The administration supports other improvements in the Child Nutrition Program if funding is available in accordance with the President's 2004 budget. These improvements would focus on the themes that I have outlined today.

I truly look forward to working with you and all of the committee members to address the issues that we face, and again, thank you so very much for all the work that you have done in this area and I also thank you for this opportunity to present the administra-

tion's proposals. I would be happy to answer any questions that you may have of me at this time. Thank you so very much.

[The prepared statement of Mr. Bost can be found in the appendix on page 61.]

The CHAIRMAN. Mr. Secretary, thank you for your presentation and for your statement of proposals that you submit. I am pleased that you have made some specific proposals to improve the efficiency of our school food programs and to make them even better than they are today and to be sure that we reach all children who are eligible. I noticed that that was one of the highest priorities of the Food, Nutrition, and Consumer Services Office of the Department of Agriculture. You particularly pointed out on page four, "We are interested in expanding access to the other programs that we administer with a special focus on the summer food service program," and you mention that as one of your top priorities, as well.

Tell me how you expect to make these improvements and expand the benefits that are available to those who are eligible without increasing the costs of the program.

Mr. BOST. There are a couple of ways, Mr. Chairman. Let's start with the recommendations that I made regarding direct certification. We believe if we will implement the process of direct certification, that essentially it will add eligible children that will be a part of the National School Lunch Program and not preclude any children from participating.

In addition to that, we have received some very positive feedback regarding the pilots that are a part of the Lugar Pilot that streamlines our programs, and with the implementation of the recommendation that we have made to implement that countrywide, we will go a long way toward streamlining our processes, making it easier for sponsors to come into the program and their ability to add children to receive services.

In addition to that and most specifically regarding our summer eating program, we have done a great deal of work with our advocacy partners in terms of working in concert with them to, one, get the word out, two, to recruit additional sponsors, and to ensure that we increase the number of children that are participating in our summer eating program.

It is not just us. I believe that there is a concerted effort with us, our advocacy partners, faith-based institutions, and schools to increase the number of children participating in our summer eating program, and so those are some of the steps that we are recommending. They also speak to some of the things that we have done in the past to address this issue.

The CHAIRMAN. When the hearing began, there was one Senator who had even gotten here before I did, the Senator from Michigan. I am going to recognize Ms. Stabenow for any questions you have or statement you would like to make, Senator.

Senator STABENOW. Thank you very much, Mr. Chairman. First, I do have a full statement I would just ask be submitted for the record.

[The prepared statement of Senator Stabenow can be found in the appendix on page 50.]

Senator STABENOW. I want to welcome all of the folks who will be testifying today as witnesses. I appreciate your work and your

dedication to these issues and I do notice that we also have Jill Leppert, President of the National WIC Association. We are pleased to have her, and also Karen Caplan who is here on behalf of the United Fresh Fruit and Vegetable Association. I am really pleased to have you here representing a very important part of this discussion.

Speaking of fresh fruits and vegetables for a moment, Mr. Bost, if I might, I know that you recently hosted a conference in Indianapolis—

Mr. BOST. Yes.

Senator STABENOW [continuing]. I was pleased to be a part of that through a video greeting. I know that you brought together people to talk about the fruit and vegetable pilot projects that are very, very successful in Michigan. We are getting a lot of wonderful feedback.

I wonder if you might speak a little bit about the fruit and vegetable pilot program and what you heard from people at your conference.

Mr. BOST. Senator Stabenow, it was one of the happiest conferences I have had the opportunity of attending. Everybody was so happy.

[Laughter.]

Senator STABENOW. It is because they are eating so many good fruits and vegetables.

Mr. BOST. Well, maybe. I don't know. They were just really happy.

We have received so much positive feedback regarding the pilot that is in four States, an Indian reservation, and 100 schools. We received positive feedback from students, from teachers, from administrators about how much the kids are really enjoying it, and that is why we are proposing that, one, that we be able to—that we get the authority to continue it, because there are still funds currently available, and that we look at extending that pilot into a couple of additional States, I believe into 2005 and 2006.

In addition to that, the research branch in USDA will be doing an evaluation of that pilot and we should receive some information from them, I believe, in May. Before that, the anecdotal information that we receive from the participants that were at the conference and all of the very positive press that we have received and feedback that we receive from students has just been overwhelming, and that is why we believe that we should continue it.

The last thing that I would say, too, as we address this issue of our children dealing with being overweight and obese, one of the things that I always talk about is that one of the most important components of being able to address that issue is increased consumption of fresh fruits and vegetables. Because of that, I believe it is very important and very critical as we look at putting all of the things that we want to do into a package of addressing this issue, that that be a very important component of it.

Senator STABENOW. Thank you. If I might ask one other question, Mr. Chairman, in looking at your streamlined school meal program, I am impressed with your proposals to do that, that would allow schools to provide meals 365 days a year without having to manage three or four different programs. I am wondering

about the other programs. You talked about the summer program, which is very important.

Mr. BOST. Yes.

Senator STABENOW. What about the summer food programs, the other child care programs and so on that are administered by groups other than schools? Does your proposal include them?

Mr. BOST. Well, Senator Stabenow, maybe and maybe not. We wanted to look at starting with streamlining all of our programs that are essentially operated by the schools, and in some instances, there are going to be opportunities for private providers and/or faith-based organizations to be a part of this. We wanted to start with the school because essentially that is where most of our children are receiving services.

I want to say that there are going to be some limited opportunities for us to look at expanding that to other providers. It wasn't first on my list. I thought I needed to look at being strategic in terms of getting the best bang for my dollar in terms of being able to meet the needs of the highest number of kids and then we will look at that as a second possibility.

Senator STABENOW. We also know that when schools are providing food in the park rather than the cafeteria, there are increased costs related to that that I hope that you will look at as we look at reimbursement.

I would just thank you, Mr. Chairman, and thank my colleagues for including in the budget resolution a statement on behalf of all of us that we don't want to see these programs cut. I know we didn't ask the question about what would happen if the House proposals passed, we know that we would not be here talking about the possibility of increasing programs, so I appreciate my colleagues making that statement in our budget resolution and I am looking forward to working with you, Mr. Chairman.

The CHAIRMAN. Thank you, Senator Stabenow.

Mr. BOST. I wanted to thank you, Senator Stabenow, too. During my confirmation hearing, you had asked me about asparagus, I hope!

Senator STABENOW. Yes.

[Laughter.]

Mr. BOST [continuing]. I wanted to tell you that I do talk about asparagus.

Senator STABENOW. Good.

[Laughter.]

Senator STABENOW. Michigan asparagus, I hope.

Mr. BOST. I didn't say I ate them, but I do talk about it.

[Laughter.]

Senator STABENOW. Well, we actually have guacamole now made out of asparagus. I am going to send you some.

Mr. BOST. No, I have had some, Senator Stabenow.

[Laughter.]

Mr. BOST. I do want you to know, because during my confirmation hearing, you specifically asked me about asparagus—

Senator STABENOW. I did—

Mr. BOST [continuing]. I wanted to give you some feedback because I haven't really seen you since then, that we do talk about it as part of a healthy, balanced meal and having good choices.

Senator STABENOW. Good.  
Mr. BOST. For some people.  
[Laughter.]

Senator STABENOW. I should say that we want children to try this wonderful vegetable, and they may like it if they try it. Thank you, Mr. Chairman.

The CHAIRMAN. Senator Harkin.

Senator HARKIN. Thank you very much, Mr. Chairman, and I will just ask that my full statement be made a part of the record in its entirety.

The CHAIRMAN. Without objection, it is so ordered.

Senator HARKIN. Thank you.

[The prepared statement of Senator Harkin can be found in the appendix on page 54.]

Senator HARKIN. Welcome again, Mr. Bost, to this committee.

Mr. BOST. Thank you, Senator Harkin.

Senator HARKIN. I am sorry I am a little late getting here.

Just two things. I want to followup a little bit on the fruits and vegetables, but first, the proposal that you are making for integrating all of these school-based programs into one kind of a program is intriguing. I don't know that I feel positive or negative one way or the other. I want to see some of the details. Do you have any idea when you will have some of those details for us?

Mr. BOST. Senator, if I can, we are currently working on it, but it is one of the things that we heard from a significant number of school people as we traveled the country in terms of getting ready to put our programs together, and essentially will make it easier to operate our programs, and we are always looking for something that is going to address and reduce the administrative and paperwork burden on our schools, and this is one of the things that we feel really good about. We are working on the details, but we feel that this is a home run in terms of us being able to work with the schools of addressing concerns that they have brought to us since I have been Under Secretary about all of the paperwork and the burdens that they have to deal with.

Senator HARKIN. Please allay my fears. This is not an attempt to do a block grant, is it?

Mr. BOST. No, not at all.

Senator HARKIN. All right. I just wanted to make sure we got that on the record.

Mr. BOST. Sure.

Senator HARKIN. All right. Thank you, Mr. Bost.

Mr. BOST. You are welcome.

Senator HARKIN. Now, let us get to the fresh fruits and vegetables. Four States now have it, Iowa, Michigan, Ohio, and Indiana. Senator Stabenow is correct and you are, too. All of the feedback that we have from this has just been extremely positive. In fact, what I am hearing back, and I don't have much information from the Indian tribe, it is in New Mexico. I don't have much—

Mr. BOST. The Zuni Tribe, yes. They love it, too.

Senator HARKIN. Is that right?

Mr. BOST. Yes, sir.

Senator HARKIN. That is the one thing that I haven't gotten information on.

Mr. BOST. We have received very positive feedback from them, also, so much that they personally talked with me about being able to extend the program, too.

Senator HARKIN. That is the biggest question I get, is will we have this next year, since it is only a 1-year program.

Mr. BOST. Well, Senator Harkin, the first thing that I would ask is that it was \$6 million appropriated to do it for 1 year and it ends June 30.

Senator HARKIN. Right.

Mr. BOST. The schools have not expended all of the money, so the first thing is—

Senator HARKIN. Because a lot of them didn't start until late in November or something.

Mr. BOST. Right. The first question on the table is providing us with the authority to continue it. That is the first thing, because we don't have the authority to do that because it ends June 30 unless we get the additional authority. That is the first thing.

The second part of that is that I am proposing the opportunity to continue it for a couple more years and to expand it into a couple of additional States.

Senator HARKIN. Well, that is my question. I like that idea, but are you going to ask for some more money to do this or are you going to try to pull it out of that \$6 million pool?

Mr. BOST. No. We believe that in terms of some efficiencies that we are putting in place in the operation of the entire program, that we will have some money available to run it without taking money away from the—taking money out of the \$6 million or asking for additional funds to do it.

Senator HARKIN. I would like to know the secret of how you make that kind of money. That is interesting. You are not going to ask for any more money?

Mr. BOST. No.

Senator HARKIN. You are not going to take anything away from the States that already have it?

Mr. BOST. No.

[Laughter.]

Senator HARKIN. Magic man.

Mr. BOST. Well, Senator Harkin, I thought that would make you happy.

Senator HARKIN. That is great. If you can expand it and do that, more power to you.

Mr. BOST. Well, I mean, we can't expand it to all 50 States, of course—

Senator HARKIN. No, I understand that, but—

Mr. BOST [continuing]. We were looking at expanding it to—

Senator HARKIN. A couple of States?

Mr. BOST. About three, two or three more States and to some schools in that for a couple more years.

Senator HARKIN. Good. Thank you, Mr. Chairman. Thank you, Mr. Bost.

Mr. BOST. Thank you, Senator Harkin.

The CHAIRMAN. Senator Conrad.

Senator CONRAD. Thank you, Mr. Chairman. Thank you for holding this hearing. I want to commend, too, my colleagues who are

here. I want to thank Senator Harkin for his leadership in fresh fruit and vegetables program. I would very much welcome the program being extended to my State.

[Laughter.]

Senator CONRAD. Mississippi would be a good State, and then—

[Laughter.]

Senator CONRAD. North Dakota would be a good State. Could we reach agreement on that this morning, Mr. Under Secretary?

Mr. BOST. Senator, interestingly enough, I thought about how we would go about choosing the States, given the fact that we would only be selecting a couple, and I put on the table for my staff to give consideration to a report released every year by several magazines that lists the chubbiest States, and I thought maybe that would be a good start, but my staff said they didn't think that was fair and so they came up with some competitive process that States would actually compete, and so to make it fair.

Senator CONRAD. Could we just declare the competition over?

[Laughter.]

Mr. BOST. Well, that—

Senator CONRAD. Put Mississippi and North Dakota on your list?

Mr. BOST. If that is something that the Chairman could include in the legislation, of course, we would abide by that.

[Laughter.]

Senator CONRAD. That is an awfully good idea, Mr. Chairman.

[Laughter.]

Senator CONRAD. I am glad that you had it.

Let me say, I have been looking over your proposals, and I find some of them have the potential to be really good ideas. Obviously, it depends on how it is implemented, but requiring a single application per household, providing for year-long certification—

Mr. BOST. Yes.

Senator CONRAD [continuing]. The current certification method, which requires that eligibility must be re-determined whenever a household reports a change in income, is overly burdensome.

I also want to commend you for proposing demonstration projects to identify better certification methods. These ideas have the potential to improve the school lunch program.

Also, I am very pleased that Jill Leppert, who is from Bismark, North Dakota, and is the President of the National WIC Association, is with us. She will be on a later panel. I am delighted she is here. She is very highly respected in our State, and by the fact that she holds this national position indicates that she is respected across the country, as well.

The child nutrition programs are so vitally important because many of our families are now in households where both parents work. When both parents work, providing good nutritious meals to kids becomes even more of a challenge. As I look at children's health statistics, especially the increases in the obesity rate, I am alarmed.

When both parents are working, meals are caught on the fly. This pushes people toward fast food and away from the way we ate when we were growing up, which was families around the dining room table together, at breakfast and at lunch. When I was grow-



ing up, I was home every day for lunch, and ate fresh fruit and vegetables. We ate in a very nutritious way.

I see fewer healthy habits now. In fact, I am around young people, and their eating habits really stun me. They are appallingly bad, and it is part of this fast-moving society. To the extent that we can have healthy programs in the schools, we are going to help a lot of people lead healthier lives. That should be the focus of effort and energy.

We are in the middle of the budget debate. I was at the conference committee yesterday, and I am very concerned about the House budget proposal. It includes about a 5-percent cut of \$6 billion to the child nutrition program. In my State, that would translate into a \$14 million cut. Fourteen-million dollars in North Dakota is a lot of money. That is a huge amount of money.

I wanted to know, Mr. Under Secretary, what is the position of the administration on the House proposal? Do you oppose these cuts? Do you support the cuts? What is the position of the administration on the House budget proposal?

Mr. BOST. Senator Conrad, very clearly, I am in absolute support of the President's budget presented to the House, I believe, about 2 weeks ago that essentially would serve up to 7.8 million persons in our WIC program every month. That is a \$43 million increase over fiscal year 2003. That includes a \$150 million contingency fund. That includes \$20 million for breast feeding and \$5 million to look at preventing childhood obesity. In our food stamp programs, there is a contingency fund of \$2 billion, which is about \$1.4 billion over last year. In the Child Nutrition Programs as a part of the President's budget request, we would be able to serve a million more children per year during lunch and also a million more children per year during breakfast.

The issue for me is that is something that Congress is addressing and dealing with. I am in support of the President's budget. I truly believe that it will go a long way toward addressing the needs, the nutritional needs, of children and families in this country.

In addition to that, it is premature for me to speculate, because I am sure after you all, the House and the Senate, do what you are going to do, then you are going to come to me and then talk about what you think my recommendations are based on what you give me. Right now, the issue for me here today is to tell you that I am in absolute support of the President's budget because it will go a long way toward addressing what I believe our issues are right now.

Senator CONRAD. I take from that, although you have not used the words, that you oppose the cuts included in the House bill because they were not included in the President's budget.

Mr. BOST. What I would say—

Senator CONRAD. Would that be a correct interpretation?

Mr. BOST. Well, what would be a better interpretation, Senator Conrad, is that I am in support of the President's budget.

[Laughter.]

Senator CONRAD. How about the Senate budget?

Mr. BOST. I don't even know if I have seen the Senate—I don't think I have seen it. I don't think I've seen the Senate budget. I can't respond, because I don't think I have seen it all.

Senator CONRAD. OK. Well, I would urge you to take a look at the Senate's budget. It does not include the cuts proposed by the House. I really think the House has made a bad mistake with respect to what they have proposed. It is very important that the cuts are restored in the conference committee, and I hope that the Administration will send that signal. You have sent it here today. I hope others who might be listening will send that signal, as well. Let me just conclude there, Mr. Chairman, and I thank you.

The CHAIRMAN. Thank you, Senator.

One thing about this budget to remember is that it is a process that is strictly under the purview of the Congress, and you are correct in the way you have responded to that issue. The President has an obligation under law to submit a budget request to Congress each year. He has done that. Then separate and apart from the President's budget, Congress has an opportunity to express its views on what the budget ought to be, and we do that through a separate process.

I don't remember ever Congress agreeing with the President on the budget—[Laughter.]

—and vice versa. It is a political experience for all of us, or it has come to be more political than policy, more politics than policy in the budget process. That is not a fault of our current committee members, who have important roles in that budget process.

Thank you for being here. You have started off the hearing today, in fine style, giving us your views about how these programs can be improved and even expanded and operated more efficiently. We appreciate your leadership. Thank you for coming before the committee.

Mr. BOST. Thank you, Mr. Chairman. I would like to thank you and also members of the committee, and I really look forward to working with you as we continue on this road. Thank you so very much.

The CHAIRMAN. Our next panel will consist of two distinguished gentlemen who will be witnesses expressing views on the programs under consideration by the committee today. Mr. James Weill is President of the Food Research and Action Center here in Washington, DC, and Mr. Douglas Besharov, who is a Scholar in Social Welfare Studies at the American Enterprise Institute and is a professor at the University of Maryland School of Public Affairs.

Welcome, gentlemen. We appreciate your accepting our invitation to appear as witnesses at this hearing. We have the statements that you have submitted to the committee, which we thank you for, and we would ask you to make summary comments, if you would, and that will give us an opportunity to ask you questions about your testimony and your thoughts about these programs and how they may be improved.

Mr. Weill, we will start with you.

**STATEMENT OF JAMES WEILL, PRESIDENT, FOOD RESEARCH  
AND ACTION CENTER, WASHINGTON, DC**

Mr. WEILL. Thank you, Mr. Chairman. We thank you and the committee for giving us the opportunity to testify today.

The Food Research and Action Center is a nonprofit research, public education, and policy organization that focuses on nutrition

programs. We also co-chair the Child Nutrition Forum, which is a large coalition of health, education, child care, anti-hunger, business, labor, and nutrition groups.

This committee has a long history of effective bipartisan work on the child nutrition and food stamp programs. You, Mr. Chairman, and Senators Harkin, Lugar, Leahy, Stabenow, and other members of this committee, have provided leadership to protect and strengthen those programs. We look forward to working with you to produce the best possible re-authorization bill. We also look forward to continuing to work with Under Secretary Bost and his team, who have done good work to boost participation in the summer food, food stamp, and other programs.

Good nutrition is essential to the physical, emotional, developmental, and educational well-being of children, but it is also critical to the strength and economic well-being of families, communities, and the nation. Indeed, in 1946, Congress passed the School Lunch Act as “a measure of national security, to safeguard the health and well-being of the nation’s children, and to encourage the domestic consumption of nutritious agricultural commodities.”

A well-conceived re-authorization bill will help the Nation reach many important goals, not just reducing childhood hunger, but improving child health, enhancing the development of very young children, improving the quality of child care, strengthening rural communities, improving the achievement of children in school, and providing safe havens for them in out-of-school time, and providing critical help to the working poor.

We also are hearing and seeing more and more reports in the last few weeks of families of those reservists who are being called up turning to the school lunch program, food stamps, and other nutrition programs to get them through the period of lower incomes that they are suffering. Strong nutrition programs help these families, too.

That is why we are so distressed that the House budget resolution cuts child nutrition programs and food stamps by more than \$18 billion. As has been said here today, such cuts would cause great harm, and we are very pleased that the Senate passed a resolution opposing those cuts.

Even very strong programs as these are must always be adapted to new realities. One such reality is the growing number of low-income parents who are working longer hours or non-traditional shifts, often evening and night shifts. The need for the community-based programs that I am going to be talking about—care for preschoolers, before-school care in the morning, after-school care that runs into the evening, and summer activities—has become far greater, and so has the need to improve the nutrition programs to better feed children in those hours.

Similarly, the growing incidence of childhood obesity needs to be addressed in this re-authorization. Helping programs obtain more fruit and vegetables is one solution. Getting more children access to the nutrition programs is another. A range of studies show that when children participate in the federally funded programs, in school breakfast, in lunch, in child care food and WIC, they eat more healthfully than children who do not. They eat better than

children who bring food from home in brown bags, or eat at home or don't eat at all.

Now, some have suggested that the nutrition programs provide too much food and contribute to obesity in that way. All the actual evidence is to the contrary. Certainly, the food choices that some schools and programs make could be improved, but most school meals meet nutrient goals. Schools have successfully reduced fat content substantially over the last decade. The number of calories provided by schools falls well within accepted nutrition guidelines. Kids who eat school meals have better diets than those who don't, and meals in the nutrition programs are just about the only examples we have today of proper portion sizes that are encountered by children.

Obesity is not a result of poor families or schools or community programs having too many resources for too much food. Indeed, emerging evidence suggests that for many poor people, hunger and food insecurity, the lack of adequate resources, combine with obesity and are tied together. Obesity can be an adaptive response to hunger, for example, when poor people are unable to consistently get enough food to eat throughout the month, so they eat more than they normally would during the periods that food is available.

Moreover, poor families often face limited food choices and considerably higher prices in their neighborhoods. For low-income people, resource constraints, not too much in resources, are contributing to obesity.

Congress could help by increasing program resources to make it more feasible to purchase better foods, as well as by limiting the availability in schools of less-healthy food from other sources, food that competes with the better nutrition available in the Federal programs. Providing more resources for nutrition counseling would also help.

After-school and summer food dollars, by their very existence, contribute to reducing obesity by helping to expand and improve programs which keep children active and engaged in out-of-school hours, rather than sitting at home in front of the television. Nineteen out of every 20 summer food programs are connected to some recreational or other activity.

I also want to discuss very briefly Under Secretary Bost's testimony on over-certification. We appreciate that he wants to adopt positive strategies, such as direct certification, although we believe that direct certification could be broadened further than he has proposed, and we appreciate that he has indicated that the actual extent of any over-certification problem is unknown, that early estimates that were tossed around in the press were way off the mark.

Since we know that past verification efforts have kept two to three eligible children out of the lunch program for every ineligible child, the greatest possible caution is called for. We appreciate that Secretary Bost plans to followup aggressively with non-responders, people who don't respond initially to new verification initiatives. The bottom line is that the expansion of verification poses some risks to eligible children. Those risks are serious, precisely because so many non-responders turn out to be eligible or get lost in the paper shuffle.

The best strategy here is to adopt some good pilots, some scientifically based pilots, rather than new national rules and to test both the extent of the problem and new strategies.

I want to turn briefly now to those changes that we are urging Congress to make to improve access to the programs. Our written testimony goes into considerable detail on these proposals and I won't go into that detail, but I want to touch very briefly here on our six highest priorities.

First is making the summer food rule, the so-called Lugar Summer Food Rule, apply nationwide to all sponsors. The pilot program that was initially, proposed by Senator Lugar to improve the summer food program by simplifying cost accounting requirements for the public sponsors of that program has worked. In the first year of the pilot 2001, participation increased by almost 9 percent in the 13 States involved in the pilot, while it decreased in the rest of the nation.

Senators Lugar and Harkin's proposal to make the rule national was in the Senate's fiscal year 2004 appropriations bill. It was dropped in conference, and one of the reasons it was dropped then, was to address it in re-authorization. Now is the time to do that and to make the pilot permanent, to make it national, applicable in all States, and to make it applicable to all sponsors, public and private nonprofit.

Our second recommendation is to improve the area eligibility test. In the community-based programs that I am focusing on eligibility often depends on the level of school lunch eligibility in the geographic area. If more than 50 percent of the children in the local school are eligible for free and reduced price school lunch, then coverage is available for food for children in the summer and after-school programs and in family child care homes in the area. This type of area eligibility is a great approach because it avoids a lot of unnecessary red tape and burden on community sponsors, many of them small and many faith-based.

The 50 percent test is too high, especially for rural areas where poverty is more spread out. The test used to be 33-and-a-third percent in summer food. Last year, Congress made 40 percent the test in the Title I education programs and in the 21st Century Community Learning Center After-School Program. It should be 40 percent in the child nutrition programs, as well, both to reach more low-income areas and children and to ease administrative problems by making rules congruent across these after-school and other programs.

Our third recommendation is to make school breakfasts available to more children. A multitude of studies has shown the benefits of school breakfasts, and more recently, those studies have shown that breakfast, when it is offered free of charge to all children in the school rather than just to the low-income children, improves achievement, behavior, and attendance. For one thing, more low-income kids participate when the program is not stigmatized and seen as being just for poor kids.

We urge this committee to act on this research by taking the next step. We realize that money is not available to make universal school breakfasts available on a widespread basis, but we urge that it be done in a targeted set of schools, those that already have high

percentages of children receiving free and reduced-price lunches, especially at the high school level, where the stigma problem is greatest. We also urge the committee to provide some funds for breakfast expansion and startup efforts.

Our fourth recommendation is making suppers available at after-school programs in low-income areas. As the 1996 welfare law and changes in the economy result in much longer hours of work for low-income parents and often work in non-traditional shift and hours, after-school programs more and more have to operate into the early evening. Because of pilot projects that Congress established a couple of years ago, nonprofits in seven States—Delaware, Illinois, Michigan, Missouri, New York, Oregon, and Pennsylvania—can currently use Federal nutrition funds to pay for suppers for the children in those after-school programs that run into the early evening and that are in low-income areas. The pilot has been wonderfully successful and it should be extended to all States and to school-based as well as community-based sponsors.

I would also note in the context of what Senator Conrad was saying and Mr. Bost and I have said about the role of these programs in combatting obesity, that for many children whose parents work late, the alternative to giving them supper in after-school programs with healthy balanced foods is that they feed themselves at home or on the way home and, needless to say, they often feed themselves less than optimal food.

Our fifth recommendation is increasing access to the child and adult care food program for preschoolers. The Child and Adult Care Food Program (CACFP) is a key support for quality and affordable care. It provides not just reimbursements for meals and snacks, but it provides nutrition standards and training and education. Because of the 1996 law's creation of a two-tiered reimbursement system, family child care homes and CACFP sponsors who support nutrition in those homes have been hit hard, fiscally harder than Congress anticipated. They need more help for their quality improvement and nutrition education efforts.

Also, the rule providing that for-profit child care centers can participate in the program if 25 percent or more of the children they serve are low-income should be made permanent. This for-profit rule, has been done on a year-to-year basis, which has made planning hard and would be particularly helpful in Southern States, where there is more for-profit child care, if it were made permanent.

Sixth: the rule for children in homeless shelters that provides funds for feeding them up to age 12 ought to be changed to up to age 19.

In conclusion, these are key modest improvements that need to be made to improve access to these programs for low-income children and for community providers in low-income areas. We look forward to working with the committee on these and other important re-authorization issues, and I thank the committee for the opportunity to testify today.

The CHAIRMAN. Thank you, Mr. Weill, for your statement.

[The prepared statement of Mr. Weill can be found in the appendix on page 78.]

The CHAIRMAN. Mr. Besharov, you may proceed.

**STATEMENT OF DOUGLAS BESHAROV, JOSEPH J. AND VIOLET JACOBS SCHOLAR IN SOCIAL WELFARE STUDIES, AMERICAN ENTERPRISE INSTITUTE, AND PROFESSOR, UNIVERSITY OF MARYLAND SCHOOL OF PUBLIC AFFAIRS, WASHINGTON, DC**

Mr. BESHAROV. Thank you very much, Chairman Cochran and members of the committee. My name is Doug Besharov and I work at the American Enterprise Institute and teach at the University of Maryland School of Public Affairs. I teach welfare policy, family policy, and evaluation there.

I have the thankless task of being the someone who Jim just mentioned who said that “some” have suggested that Federal food programs help contribute to the obesity problem in this country. I plead guilty to that. I didn’t say how much because I don’t know how much. Obesity is a very serious problem in this country. I am going to go through a few numbers today.

My position and my view is not necessarily that you should cut programs or cut spending. My point, my overriding point which I hope to leave you with today is: As of today, and even with the increases in the obesity programming that we planned, the Federal Government is not part of the solution.

Whether the solution is fresh food, less food on the plate, certainly less fat, those are programmatic details. The point is, and I want to go through the numbers here, we have a public health crisis on our hands, and to think and to spend most of our time only talking about expansions of the program to give people more food misses what is the more telling and more pressing policy problem today.

Now, notice I am walking into this with my eyes open. Not only do I understand the membership of the committee, but I know how this can easily become, spend more money on food programs for fresh fruit and so forth. Fine. To me, the issue here is to address forthrightly the problem that Americans, particularly low-income Americans, are getting fatter by the year and our food programs don’t address that directly and they ought to. Let me try to be the someone with that thankless task.

Senator LEAHY. Don’t think it is a thankless task. You have a lot of heads shaking “yes” up here at these other tables.

Mr. BESHAROV. Well, if you could see right down here, you know I am part of the problem.

[Laughter.]

Mr. BESHAROV. I started in this business in 1967 when I was in Mississippi and I was part of the group that tried to get food—it was the Commodity Food Program then—to low-income Americans, mainly African Americans, who were starving. I understand the issues of access and I understand the issues of having a safety net that provides food and money so that low-income families can eat and survive.

That was 35 years ago. Today, as many as 70 percent of low-income adults are overweight, and that is about 10 percent more than the non-poor. As I say in my testimony, racial disparities are even greater. Eighty percent of African American women are determined to be oversight. That is a third more than white women.

If you look at my Table 1, you can see that these are changes that took place between the 1960’s and about the year 2000. Men,

on the first column there, 50 percent overweight, 11 percent obese in the early 1960's, 67 percent overweight today. As I mentioned, for blacks and Hispanics, the numbers are larger.

The worrisome point is children. You have been talking about school meals. Please draw your attention to children six to 11. This is all government data. I haven't made it up. Four percent overweight in the 1960's, 12 percent overweight today. Black children, boys, 2 percent overweight in the 1960's, 17 percent overweight today.

Now, there are a lot of reasons for the increase in overweight, lack of access, more affluence, and so forth, and we can talk about that. My point is only this is a tremendously important question.

Now, the other side of this that is always brought up is, but there is hunger and starvation in this country. There is hunger, but my next table, Table 2, again, straight from government data, no fiddling, no weighting, no changing of the numbers, suggests that when we talk about hunger, we often confuse it with food insecurity, an appropriate measure to ask people's financial condition when they have to buy food. In terms of actual hunger, the same surveys that are used by food advocates to show that people are food insecure, which means they might not have food or be worried about food at least once a year, show very low levels of actual hunger, especially for children.

If you look in the first row, all households with children under 18, the food insecurity with actual hunger is less than 1 percent. I am not saying, therefore, we don't need a food stamp program. I am not saying we don't need a welfare program. The reason this number is so low is because we have a food stamp program, is because we have a welfare program, perhaps because we have a school lunch program and WIC.

My issue here is not that if you take away those programs, these numbers will stay the same. It does say that we have largely beaten the problem of childhood hunger, and that ought to open another flank, or another front in our efforts here, which is to fight obesity and overweightness.

I don't want to spend too much time on these numbers, but I feel the issue here is really convincing you about the nature of these issues, so look at Table 3 for a moment and then I will close.

This is mean caloric intake, and what you see at these numbers is—and the earliest numbers I was able to find was in the 1970's compared to 1988 to 1994, and what you will see is that all Americans, middle-class and poor, are eating more, on the average, about 200 calories more a day. If you are curious about that, and it is quite a frightening thought, 100 calories a day more is a pound a year, and you can do the math. I do it every time I say no to desert.

These numbers about caloric intake suggest that we have won the battle on caloric intake. Now, we have to change the mix of what people are eating, and, in fact, these numbers are actually higher than they should be given the reduction in physical activity taking place among all Americans.

One of the members of the panel a moment ago said that he used to walk to school. Many fewer children walk to school. Both because of budget cutbacks and because of the No Child Left Behind



program, there is much less recess. There is much less physical activity in school.

There are many causes for this growing obesity, and I don't want you to have the impression that I am saying the whole cause is school lunch programs, although I have eaten them, and let me tell you, in the schools I have been in, they are a big part of the problem. I don't want you to hear me saying the problem is food stamps. There are multiple problems. America, in general, is getting heavy, but the poor are getting heavy faster than the rest of us and whether or not food programs are a part of the problem, they are certainly not part of the solution.

Thank you very much.

The CHAIRMAN. Thank you, Mr. Besharov.

[The prepared statement of Mr. Besharov can be found in the appendix on page 103.]

The CHAIRMAN. I noticed in your testimony you also proposed that the WIC program ought to include a program of nutrition counseling. Is there any specific recommendation of how we accomplish that?

Mr. BESHAROV. Yes, Mr. Chairman. First of all, I don't think it is an exaggeration to say that the current WIC food basket is almost a Third-World food basket. It is very heavy on high-caloric, high-fat foods, which may have been essential when WIC was planned in the early 1970's and we had much less affluence even among the poor.

That has changed, and we could shift the mixture of what we do in WIC. Right now, WIC counselors are limited to about a 15-minute session with clients every 3 months, and that is a busy 15 minutes. Among other things in that 15 minutes, Mr. Chairman, is a discussion of motor-voter. By Congressional mandate, part of that nutrition counseling is, don't forget to register to vote and vote when you can.

That we could reconsider whether 50 to 55 percent of all newborn children in this country should be receiving WIC—50 to 55 percent of new infants should be receiving WIC benefits. We could cap it. We don't have to cut it. Stop the growth of the program to that many kids. Use the money that is coming in from the rebate program, from other expansions, to beef up State counseling efforts.

The National WIC Association, I believe—their representative is here, so they can tell me if I have it wrong, but they would very much like to see a few experiments or waivers where the States are allowed to modify the food package, modify how much time they spend in counseling, spend less time on other activities, and do that within current budget practices. It seems to me we want to see what the tens of thousands of dedicated WIC workers and directors could do to change that counseling.

The CHAIRMAN. Mr. Weill, you mentioned that you recommend streamlining some of these programs. You and Secretary Bost both suggest that we should streamline the National School Lunch Program and the School Breakfast Program. How would you go about doing that if you were Under Secretary of Agriculture?

Mr. WEILL. Well, I would first agree with what Senator Harkin said, that we are not talking about a block grant here. We would adamantly oppose any effort to block grant the program.

The ways to streamline these programs include such examples as letting families use one application for all programs rather than having a family have to make out separate applications for school lunch, summer food, after-school food. We also need to streamline the programs by letting local programs have one application. An after-school and summer community site in a church, in a boys' and girls' club, in the school, shouldn't have to file a separate application for after-school food during the school year and summer food during the summer.

Indeed, we have recommended in our written testimony that programs that receive Federal funds, particularly 21st Century Community Learning Center funds, to operate the underlying after-school programs, ought to be automatically waived into the after-school and summer food programs. Having been certified for Federal funds to hire the staff, they ought to automatically get the food benefits, as well. There are a variety of ways of reducing red tape and pulling the programs together.

The CHAIRMAN. Thank you.

Senator Harkin.

Senator HARKIN. Thank you very much, Mr. Chairman, and thank you both for your long work in this area, both Mr. Weill and Mr. Besharov.

Mr. Weill, first, I just wanted to clear up a couple of things here on the school lunch program. I am going to get into this whole area of obesity, too, because it is something I have focused on a long time, too.

We are going to be discussing sometime this year, and the Department, I know, is also, this whole food pyramid, and I wonder if FRAC has looked at the food pyramid and its impact—and I am going to ask Mr. Besharov the same question—and its impact on what is being done to design the kind of school lunches and school breakfasts that kids eat. Has FRAC done any looking at that?

Mr. WEILL. Well, we have done some looking at it, but we haven't gotten too far in it. USDA is relooking at the food pyramid and the Food and Nutrition Board is going to be making new nutrition recommendations.

The WIC food package has also been referred by USDA to the National Academy of Sciences Food and Nutrition Board to look at whether there are ways to improve the WIC food package. There are a variety of nutritional and other authorities that are starting to look at the pyramid.

The important thing, while it is certainly possible the pyramid could be improved, is that if families and programs adhere to the current pyramid, nutrition would be better than it is now. The pyramid may have its flaws, but all the pyramids that are out there all provide a better mix of foods for people.

Senator HARKIN. Well, the ones that are being proposed that I have seen pretty much change a lot of what were assumptions right now under the old food pyramid.

Mr. WEILL. That is right, so part of the issue is making the pyramid better, but part of the issue is getting everybody to follow whatever pyramid there is, and my point was only that so many people are ignoring the current pyramid that that is where a lot of the problem lies, too.

Senator HARKIN. Mr. Besharov, again, I want to thank you for being provocative and getting people to think.

Mr. BESHAROV. Thank you.

Senator HARKIN. A lot of what you are talking about, I have been wondering about myself for years. I tried back in the 1996 Farm bill to get vending machines out of schools, and obviously, I was spectacularly successful.

[Laughter.]

Senator HARKIN. Or at least get them to shut them off after the last lunch period. I have also proposed that we ought to put more emphasis on the breakfast programs, because if a kid eats breakfast, then they don't get hungry later on.

Have you looked at the fresh fruit and vegetables pilot program that is going on that we have—

Mr. BESHAROV. Only a little.

Senator HARKIN. A little bit?

Mr. BESHAROV. Senator, just a little, yes.

Senator HARKIN. Because some of the anecdotal, at least, evidence that we are getting back from these is that kids are coming to school—the fruits and vegetables are available not just at lunch period, but all day long. They come to school, they can have an apple, orange, banana—bananas are allowed, things like that—and they don't get hungry and so they don't go to the vending machines or they don't try to snack and eat other stuff. In fact, we had testimony from one guy that was before us here that they actually, because the sales of the vending machines had gone down, they actually took a vending machine out of the school.

I would hope you would maybe take a look at that as part of your thinking and how you are looking at this—

Mr. BESHAROV. I surely will, Senator.

Senator HARKIN [continuing]. Getting those fruits and vegetables there.

Most of the pyramids that we see—have you looked at the food pyramid, Mr. Besharov?

Mr. BESHAROV. Yes, sir.

Senator HARKIN. You must have looked at it, right? What do you think about it?

Mr. BESHAROV. It reminds me of my mother-in-law. She says she has two kinds of friends—

Senator LEAHY. Be very, very careful.

[Laughter.]

Senator LEAHY. She may read this transcript.

Senator HARKIN. This guy may be more provocative than I imagined.

[Laughter.]

Mr. BESHAROV. She said she had two kinds of friends at cocktail parties. One kind of friend dieted by eating just the cracker and one kind of friend dieted by just eating the cheese, which is to say we are in a rip-roaring fight about these food pyramids, and I am enough of a political scientist to think that there is more at stake here than healthy eating, which is to say there are going to be some winners and some losers if we change the shape of this food pyramid.

I don't think the government has the slightest idea what to do about recommending food eating patterns for us.

Senator HARKIN. Well, I don't know if the government does, but there are experts in the nutritional field out there that have been examining this for the last 30 years at Harvard, Stanford, other places have looked at this, and they have looked at eating patterns and they have basically concluded that the basis of the pyramid is wrong and that we need more fruits, vegetables, things like that as the base of the pyramid and less of the breads and pastas and things like that, more grains, for example, things like that that should be in.

The base, the base of the pyramid, of what most of the people are talking about, the base of the new pyramid is something no one talks about. At the very base, it is called exercise. See, what in your stage, reading much like we did 20, 30 years ago, but we are not doing any exercise. A study, and again, one of these wonderful government studies came out, showed that less than 80 percent, 80 percent of elementary school kids in this country get less than 1 hour of exercise a week in school. They don't have recess anymore. They don't do the things that we used to do when we were kids. They eat this fat food and they don't exercise and they don't burn it up. I wonder if you would look at that.

Mr. WEILL. Senator, can I just say one thing about that?

Senator HARKIN. Yes, Mr. Weill.

Mr. WEILL. That is crucially important. We will all agree that obesity is a tremendous problem for kids, but we don't know everything about what is causing obesity. We ought to be clear about what we know and what we don't know.

What we know is that kids have less physical activity. We know schools have fewer physical activity programs than they used to and those programs ought to be restored. We know kids have less opportunity after school to engage in activity than they used to and they need more programs that do that.

We know that school meals have been getting better. Certainly, they could get even better, but we know that they have been getting better while the entire rest of the eating environment around children has been getting worse for the last ten or 15 years.

What we need to do is work from the evidence that we actually have rather than speculation and half-truths, and think about how to improve these programs to reach more kids and fight obesity.

Senator HARKIN. Well, how do you feel about the a la carte lines? I want to ask you both about that. How do you feel about a la carte lines that we have in schools today?

Mr. WEILL. We would be in favor of giving the Secretary much broader authority to reduce competitive foods in the schools.

Senator HARKIN. How do you feel about those, Mr. Besharov?

Mr. BESHAROV. If the school meal can't compete with an a la carte line and can't compete with fast foods down the street, we should worry about what we are serving in school and try to let them compete better. I would be in favor of letting the a la carte lines continue.

Senator HARKIN. Well, it is the a la carte lines that have all the fat food in them, Mr. Besharov. Ask any of your school food service people.

Mr. BESHAROV. If you can trust the USDA numbers, we start with the fact that the combined caloric intake of the school breakfast and the school lunch program is 56 percent of a child's daily needs. That is on the average child. For younger children, for girls and so forth, it is higher than that.

It may be that the a la carte line is worse, but it is not that the school lunch line is all that good, and if we want children to eat that food, let us make it better. Let us not take away their choices. I don't see what the problem there is.

Now, I have spoken to school lunch preparers, not the union people and so forth and so on, and there is a challenge in the kinds of things we ask them to cook, and what it reminds me of is the first time I ate in the Clinton White House mess. It was quite difficult to enjoy the food because it fit under the guidelines we were trying to apply to school lunches.

There is a way to cook healthy. There is a way to make food appetizing. It may not be a hot meal with a hot vegetable. It could be a great sandwich and a great salad. That kind of flexibility ought to be built in if we trusted the school systems to do what was best for kids within a broad set of guidelines. I am not talking block grant. It is much more difficult to provide a hot meal within the school structure than a nutritious, balanced, calorically appropriate cold meal. We could experiment with that, and many schools do that. We could just think about these things and not be caught up in what is in the end, a political argument.

What is happening is, not just for the poor, not just children and school lunches, but America is getting heavy and it is a health hazard of immense proportion.

The CHAIRMAN. Thank you, Senator.

Senator HARKIN. Thank you, Mr. Chairman.

The CHAIRMAN. Senator Lugar.

**STATEMENT OF HON. RICHARD LUGAR, A U.S. SENATOR FROM INDIANA**

Senator LUGAR. Thank you, Mr. Chairman. Essentially, as you have noted, and Secretary Bost has, this hearing comes at a time that the Senate budget for all we are talking about is flat and the House has cut 5 percent, and so it is in conference. Therefore, the problems of doing additional things are compounded by the fact we are about to pass a budget, and the constraints are obvious and may be severe.

Having said that, it seems to me that what we need from both of you and the witnesses today is some specific legislative language. Often, these hearings get into the philosophy of what we ought to be doing, and that is helpful in terms of a public airing.

For example, this is a concrete problem that Senator Harkin brings up. We have heard testimony year after year, all of us, about the vending machines in the schools, and the reason the vending machines are there largely is because the principals not only permit it, but they support it. They like the revenue. The thought comes back to us that we would be depriving the school of a certain quality of experience if those revenues were not available.

Now, we begin to argue nutrition, and then we get into a Libertarian argument that, after all, every American, regardless of age,

size, and so forth, ought to have any choice that he or she wants. That is nonsense if we are really worried about obesity or worried about nutrition.

Clearly, the problem, as some of you pointed out, is that the foods made available to these school lunches frequently are not the most nutritious because those might be expensive.

Now, Secretary Bost, at least, has come along and said we ought to have a vegetable and fruit program. Wherever the pyramid comes out, most nutritionists in the country do believe most Americans would do better off if we had more fruits and vegetables in our diets. This seems to be almost a no-brainer, but it is expensive, and the problem of substituting whatever we have there in the school lunch with more fruits and vegetables involves expense.

How we come to grips with this is a legislative process, and I am searching. Now, I want to look at what Secretary Bost offers in terms of legislation, but at least it is a proposal.

Likewise, with regard to vending machines, whether Senator Harkin's idea of closing them certain hours or at least cutting down the dull roar of competition, at least that is a possibility.

If we go into this, then we bring all of American society in, as you suggested, Mr. Besharov, into a political issue. Should we have freedom of choice quite apart from nutrition or obesity and so forth? It is a reasonable argument.

This committee, by and large, is for nutrition, for children growing up strong, and so at least I want to stay on that course. I would tend to be against the vending machines if I had to make a choice between the two. I would choose the fruits and vegetables as opposed to a lot of what we have there now, and that was going to probably cost money.

I am certain expansion of the summer program will cost money. The reason for having summer programs is that the committee has discovered, as many of you have, that a lot of children who have school lunches during the year, it simply drops off at the summer-time. A continuation of this, I think is important.

We can make an argument how many children in America, what percentage, are undernourished either during the school year or during the summer, but having at least come to some idea of what the number is we ought to be serving, the consistency of the program is important and that requires some improvisation, given the numbers of sponsors that have to be substituted.

I commend Secretary Bost for wanting to expand that issue. I would hope so, too. That has a budgetary figure attached to it that has to be recognized, too, and hopefully will be in our process here.

Finally, it just seems to me that with regard to all of these standards, we have probably not come to grips with why some children get breakfast, why some don't. The standards of education seem to be better if everybody gets breakfast. This then leads to an issue that floats through this. How do you rigorously determine who ought to be getting this, who is deserving from an income standpoint?

Many people have suggested new audits, new screenings. You have suggested, Mr. Weill, this has some dangers because in most of these affairs, many poor children who do not have advocates for them, including their parents, are likely to get left by the wayside,

and that seems to be anecdotally what is occurring in these past screenings, and that is important, because if there are poor children that are not receiving food, they are probably in this group that got screened out in the process.

I would want to proceed very cautiously. Most of you do, too. Certainly, Secretary Bost gave that indication in his testimony and I just underline it, because I am afraid the rhetoric of school lunches usually is that, somehow, there are a lot of free lunches going to affluent children, and we have worked from then on to make sure that there are no malefactors, even if we screen out people who are in genuine need.

I have finally come down, and I would ask your comment finally on this, that most of the arguments in favor of food banks in the county still suggest in a time of affluence, 10 percent of the population is challenged. That doesn't mean hungry every day, but from time to time have nutritional needs. This, even of the total calorie variety, not of the obesity situation. Is that overstated? Is this a figment of the imagination? The U.S. Conference of Mayors, others seem to have done some work in this area for a while. This is the basis on which many of us support trying to help the food banks out a great deal more.

[The prepared statement of Senator Lugar can be found in the appendix on page 58.]

Senator LUGAR. Let me just ask that question. What is the incidence of hunger in America? Even anecdotally, what rigorous analysis, and you have given some of this, Mr. Besharov, and I give credit for your stating those statistics, but it doesn't altogether solve my problem that I just see, at least, at the local level. A good number of children look to me to be in need of somebody taking care of them. We can say parents should have, or some other adult supervision, all the way along, but they don't. Finally, the schools do, and I am glad they do because it makes it possible for these children to learn, likewise, maybe to have some health. What is the incidence, as you see it, of the hunger situation in America?

Mr. WEILL. According to the scientific studies, from the Census Bureau and USDA through a process vetted through academics, there are 33 million Americans who live in households that suffer from either hunger or food insecurity. Not all those households, not all those people suffer from hunger, in large part because of these nutrition programs. The number of households, I believe, in which there is outright hunger, is three and one half million households with nine million people in which there is actual hunger. People depend on food banks and on emergency services of other kinds, from cities, and others to stave off hunger.

I just would add, Senator, I agree with everything you said about program integrity and the vending machines. That one other strategy here that a lot of schools are using is to put fruits and vegetables, low-fat milk, and other healthy choices in vending machines rather than throw out the vending machines, and some schools have found that they make just as much money off the machines that way.

These issues also go to how complicated the lives of poor kids and the institutions that serve them are. I heard a story a month ago that in the Philadelphia schools, kids drink soda from the

vending machines in part because all the water fountains are shut down in the low-income schools, either because they are broken or because there is lead in the water. When we talk about these issues, we have to recognize the realities of the lives surrounding low-income kids.

Mr. BESHAROV. I certainly agree with what Jim just said, but I just passed to him the USDA numbers that he was mentioning. They are on page four of my testimony. What they show is that only when you use the phrase “food insecurity” do you get anywhere near the 10-percent number.

Look, there are young people in this country who are today severely malnourished because they are not getting two squares, let alone three, and it is clearly the case that for older people, this is a serious problem, no doubt about it. The analogy is what we are seeing on TV in the war on Iraq. We see areas of severe firefights, and there are other areas that are peaceful. There are pockets of people who are in deep trouble and we should be addressing their needs, whether it is in a food program at school or some social service assistance.

The larger picture is one of victory through 30 years of expanding food programs. It is not impossible to say, on the one hand, we had a great success here, and on the other, we should not cut back the programs. The success comes from the programs.

If I might, Senator, to answer your question about what do you do in a time of limited need, I would take a page out of part of the welfare reform story. We here in Washington pontificated for 20 years—40 years if you go back to the Kennedy administration—about how to reform welfare. It turned out, forgetting about the block grant part of it, it turned out that the States had loads of ideas and we had never really asked them. Instead, we tried one idea from Federal Government officials and think tanks—I plead guilty—after another.

It wouldn't be so awful to give in the WIC program some flexibility to a few States, let them experiment. It would not cause the end of the world to give some States flexibility in the school meals program to see what they came up with, not getting to a block grant, but just asking where the good ideas are. They are not just all here in Washington, and it is almost a dead end to say, do we have all the answers? Let us propose the answers. An overriding answer is, let us see what the States would come up with if, in a constrained, limited way, we asked them for new options on how to deliver nutritious quality food to kids.

Mr. WEILL. If I may, Senator, I would just note that there is more flexibility, perhaps, than Mr. Besharov is aware of. He was talking earlier about the lunch program requiring hot meals to be served. That is actually not true.

Mr. BESHAROV. Actually, I didn't say that. I didn't mean to say that.

Mr. WEILL. Schools could serve the cold meals with more fruits and vegetables that he is talking about. The problem is, it is more costly. Again, the resources are the constraint here on better food, much more than the lack of flexibility.



Senator LUGAR. Thank you. Still, if you would have legislative language on any of these things, that would be tremendously helpful.

Mr. WEILL. We will be delighted to provide it.

The CHAIRMAN. Senator Leahy.

**STATEMENT OF HON. PATRICK LEAHY, A U.S. SENATOR FROM VERMONT**

Senator LEAHY. Thank you, Mr. Chairman, and thank you for having this hearing. I and Senator Lugar and Senator Harkin have worked on these issues for forever.

[Laughter.]

Senator LEAHY. I know the three of us had hair back when we started. I actually had some. It shows how long it has been going on.

I would ask that my full statement be placed in the record, if I might, Mr. Chairman.

The CHAIRMAN. Without objection, so ordered.

Senator LEAHY. I listened carefully, as we all have, to this. I grew up at a time when we didn't have a school lunch program. I walked home for lunch. My kids, when I say anything about this, they say, "Yeah, yeah, Dad, we know, snow up to your waist and it was uphill both ways, going and coming."

[Laughter.]

Senator LEAHY. I had the advantage of not living far from the school and having an Italian-American mother and lunch was probably a heck of a lot better than it would ever be in a school lunch program.

That is not the reality today. It is not the reality of my children going to school. I can't help but think what a wonderful opportunity we have for real education as well as nutrition in the school lunch program. Every teacher will tell you a well-fed, nutritionally fed child, not one who has the surge of the ups and downs from a sugar high and a sugar crash, things like that, they are going to learn better. There are a lot of other aspects going through the course, but it is one.

We seem to grapple with this all the time. I go to some schools and there are really good lunch programs and the kids love it. You go in others and it is a question, do you have the green glop or the gray glop today? Yet, I have to assume that basically you are working on some of the same parameters, at least, when it comes to funding.

Now, Mr. Besharov, you said all these statistics about growing rates of obesity among Americans, and they are well documented. I was at a medical forum in Vermont, very, very good people across the State back here a few months ago. Basically, we were talking about Medicare and things like that, but it quickly went down to how much money we would save in this country if we just tackled that one question of obesity and some of the things that come out, problems, everything from aggravation of a diabetes case to heart to on and on and on. That one thing would lower in our own State very dramatically the costs of medical care if we could somehow get hold of that.

Actually, everybody has touched on that, but in terms of child nutrition programs, if you have sodas and candy and other foods in competition, does that not add to this child overweight and obesity problem? Mr. Besharov.

Mr. BESHAROV. The answer, of course, is all other things being equal, sure. Now, the question is, are all other things always equal and is that the shortest distance from here to there?

First of all, let me make it very clear that that the obesity problem in this country goes far beyond school meals, goes far beyond Federal aid to nutrition programs. You can't look at the growing girth of Americans in general without thinking that there are forces much broader than what is happening in schools and so forth. It is happening all over in various ways—larger portion sizes at home, in restaurants, fast food, less exercise.

My point is, and the committee and the Congress may decide to prohibit these things, and I have no brief one way or the other. My fear, Senator, is as follows. That may just be the most obvious band-aid to a much larger problem, which is the quality—the tastefulness of the food, the willingness of young people to eat the food that is served to them. I don't think it is just that these young people want the pizza or want the candy bar. It is that what they are being offered on the line doesn't attract them.

Senator LEAHY. The green glop and the gray glop?

Mr. BESHAROV. Yes. As I say, I have this lucky situation. I don't even know who runs the vending machines. I don't run a sports team. I have no interest one way or the other in this one. I worry that if you do only that and don't address the question of why they are turning to those machines, they will find some other way to eat that stuff.

Senator LEAHY. The reason I ask, any suggestions people have to make, you are going to have a welcome audience here. This committee on nutrition matters has never been a partisan committee. We have had—I remember back when I was first on here, Senator Dole, Senator McGovern, Senator Hubert Humphrey joined together on these matters. Senator Dole and Senator McGovern, and I have a proposal now which actually Senator Lugar, we see it in the Foreign Relations Committee and we see it in Appropriations, the schools program in parts of the Third World, in Africa and elsewhere, where, as a result, maybe girls will be able to go to school as well as boys. Now, that is not going to change things the first year or the second year or the third year, but over time, think what that will change in just the structure of some of these places.

My last question, and I will put the rest in the record, but Mr. Weill, you know my State of Vermont is very rural and we have a difficult time setting up summer feeding programs. I get very frustrated by it because I have helped get money for summer feedings programs. We don't use it as much as I would like to see it.

You have mentioned the change in the area eligibility rate from 50 percent to 40 percent would help rural areas expand access to the summer programs, and I agree with that. What do you do, though, and how do you get the kids there? Again, this is not like where I grew up in Montpelier, Vermont, and I could walk home to school. I mean, these rural areas are scattered all over. Neigh-

bors might be a mile, two miles, three miles apart and the school might be another eight or ten miles. How do you do that?

Mr. WEILL. That is right. There used to be some grant funds in the summer food program that helped cover special transportation and startup costs and, money permitting, we would be all in favor of restoring those grants. The 50 to 40 is one strategy. Making the Lugar summer pilots nationwide is another.

In some States, summer food providers have used some very novel strategies, like running the summer food program off a bus and taking the food to the kids—

Senator LEAHY. That is an idea.

Mr. WEILL. There are a number of ways to make the program easier to run—not easy to run, but easier to run in rural areas and we would be glad to talk to you further about that.

Senator LEAHY. Mr. Chairman, thank you for doing this. You and Senator Lugar and Senator Harkin have really been giants in this area of school lunch and school nutrition. I have to go back to Judiciary. I would much rather stay here. This is a lot more fun because there tends to be a lot more agreement here. Maybe when you start alphabetically, with Agriculture, by the time you get all the way up to the “J”s, the committee breaks down, or maybe it is the issues. I don’t know. Thank you.

The CHAIRMAN. Thank you very much, Senator Leahy.

Thank you both for being here today and giving us the benefit of your thoughts and observation and experience in these programs.

Mr. WEILL. Thank you very much, Mr. Chairman.

Mr. BESHAROV. Thank you very much.

The CHAIRMAN. Our next panel consists of five individuals representing different organizations or associations. Ms. Jill Leppert is President of the National WIC Association. Ms. Anne Curry is Vice President of the Food Marketing Institute. Ms. Karen Caplan is Chairman of the Board of United Fresh Fruit and Vegetable Association. Mr. Rod Hofstedt is here representing the National Child and Adult Care Feeding Program Forum. Mr. Don Wambles, who is President of the WIC Farmers Market Association.

I hope that you will all be able to limit your presentation to recognize the fact that we are almost at the noon hour. We don’t want anyone to go hungry because of this hearing.

[Laughter.]

The CHAIRMAN. We don’t want to cut you short, either. I have a device here that signals when 5 minutes is up, and I am reluctant to use that, but I would encourage you to try to keep your opening statements within 5 minutes and that will give us all an opportunity to ask you questions if you are able to do that.

Thank you all for being here. We have copies of the written statements that you have submitted. They will be made a part of the record in full, and so I will ask Ms. Leppert to please proceed.

[The prepared statement of Senator Leahy can be found in the appendix on page 59.]

**STATEMENT OF JILL LEPPERT, PRESIDENT, NATIONAL WIC  
ASSOCIATION, BISMARCK, NORTH DAKOTA**

Ms. LEPPERT. Thank you, Mr. Chairman and members of the committee, for your invitation to present the National WIC Association's views on re-authorization of WIC. Our members work to improve the quality of life for over 7.5 million participants monthly.

At the onset, I would like to compliment you, Mr. Chairman and members of the committee, for your commitment to WIC, as well as President Bush and Secretary Veneman for their support. NWA is proud of the strong bipartisan commitment WIC has had since its inception.

WIC has an extraordinarily nearly 30-year record of preventing child health problems and improving their health and growth and development. WIC children enter school ready to learn.

In its December 2001 report to Congress, GAO identified six challenges facing WIC. With your permission, I would like to highlight our proposed responses.

As local public health departments are reducing or eliminating health care services, WIC has become the single greatest entry point of health care for many WIC families. To eliminate unnecessary clinic visits and allow for better coordination with health care services, providing more nutrition counseling time, and streamlining paperwork, NWA recommends giving States the option to extend certification periods for up to 1 year for children and breastfeeding women.

WIC resources are being stretched in amazing ways. Currently, WIC staff provide participants with information on a wide variety of subjects, some of which relate to WIC's mission and some that do not. Each minute of an unfunded mandate results in the loss of over 125,000 hours of nutrition education intervention annually. The GAO has identified at least 90 program requirements that have been added to WIC since 1988.

WIC is proud of the role we play in our public health system. However, expecting so much of the WIC program while providing no additional resources as we assume more responsibilities challenges WIC's infrastructure, staff, and the families that WIC serves.

WIC's population, like the general population, has experienced dramatic experiences in the prevalence of obesity and related health issues. In addition, there have been dramatic increases in the ethnic diversity of the WIC population.

NWA would like to recommend, first, while WIC programs have been actively engaged in obesity prevention efforts, the program's definition of nutrition education is self-limiting. NWA recommends expanding the definition of nutrition education to allow for anticipatory guidance related to physical activity, feeding relationships, and child development.

Second, the current WIC food package is now nearly 30 years old and is no longer consistent with current dietary guidelines or science. WIC agencies have independently taken steps to combat the nation's obesity epidemic by modifying the WIC food package when necessary. Agencies often provide low-fat milk and low-fat cheeses, thus reducing the total caloric, cholesterol, and fat intake of the food package. Simply put, the WIC food package is not a

cause of obesity. Contrary to Mr. Besharov's assertion, it is not about more food, but it is about better food. More can be done.

In 2002, SWA recommended changes to the WIC food package to reflect current nutrition science. While Under Secretary Bost and his FNS teams are to be commended for their efforts to publish a proposed rule of the WIC food package and applauded for referring an evaluation of the food package to the Institute of Medicine, the time has passed for WIC to provide a healthier food package. NWA recommends USDA report to Congress within 6 months of re-authorization on the status of efforts to adopt a new food package and that USDA publish within 6 months of that report a proposal to revise the WIC food package.

Third, in the interim period, NWA asks Congress to direct USDA and FNS to allow States to implement pilot or demonstration projects that would allow for food substitutions, including fresh, frozen, or canned fruits and vegetables and food items responsive to the needs of WIC's diverse cultural population.

Fourth, NWA recommends that the Institute of Medicine re-evaluate the WIC food package at least every 10 years, recommending changes to reflect current and national nutrition science and concerns.

Fifth, the competitive bidding process requirement for infant formula has resulted in significant savings for the WIC program, allowing WIC to serve roughly one in five participants. Efforts to weaken this program would have unintended consequences. NWA urges Congress to ensure that this program element is protected.

The current funding formula does not allow States sufficient NSA funds to support funded participation levels, maintain, protect, and improve client services and program integrity. NWA recommends that States have the option to convert unspent food funds to NSA and to apply a portion of the rebate dollars received to NSA in accordance with the proportional administrator food split.

Technology provides a critical foundation for quality WIC services and program integrity. Funding WIC technology from existing resources compromises WIC's ability to deliver services and to develop responsive MIS systems. To develop and maintain MIS and electronic delivery systems and to link other health data systems, NWA supports USDA's efforts in this area, but recommends that Congress provide \$122 million annually outside the regular NSA grant to upgrade and maintain WIC technology systems.

Finally, Mr. Chairman and members of the committee, NWA looks forward to working with you in this re-authorization process. I remain ready to answer any questions or to provide additional information that you may request. Thank you.

The CHAIRMAN. Thank you very much, Ms. Leppert.

[The prepared statement of Ms. Leppert can be found in the appendix on page 112.]

The CHAIRMAN. Ms. Curry, you may proceed.

**STATEMENT OF ANNE CURRY, VICE PRESIDENT, LEGISLATIVE AND POLITICAL AFFAIRS, FOOD MARKETING INSTITUTE, WASHINGTON, DC**

Ms. CURRY. Good morning, Mr. Chairman, members of the committee. Thank you for the opportunity to provide testimony regard-

ing the re-authorization of the Special Supplemental Program for Women, Infants, and Children on behalf of the 26,000 retail food stores represented by the Food Marketing Institute.

Retail food stores are proud to partner with both Federal and State programs to ensure that recipients of our nation's food assistance, particularly pregnant women and their young children, are able to access these benefits without difficulty in our stores. FMI is in full agreement with the important mission of the WIC program and supports its goals 100 percent.

In preparation for the re-authorization of the WIC program, we reconvened a WIC task force to compile recommendations for consideration by Congress. It was composed of 15 grocery companies and seven State grocer associations. We identified areas for improvement for both the customer and the retailer experience.

Today, the administrative process in the WIC program from the initial authorization of a store to customer check out and retailer reimbursement is incredibly complex and needs to be more user-friendly and efficient. It is also important to note that our recommendations will not cost money, and certainly in a tight budget year, this should prove to be important to a committee chairman who is also an appropriator.

[Laughter.]

Ms. CURRY. Additionally, we proposed that these recommendations should actually achieve savings and certainly efficiencies and improved customer service.

The WIC task force identified six areas that need to be addressed from a grocer's perspective: Retailer authorization, retail operations, reimbursement issues, penalties, EBT, (electronic benefits transfer), and infant formula theft. Certainly, each of these recommendations, if implemented, would positively impact the recipients, as well.

The complete FMI WIC task force report has been submitted for the record, and I believe you all received a copy of this. From this comprehensive report, we developed a top-ten list of priority items, and it is those items that I would like to highlight today.

One, the notification of a store owner or manager when a compliance violation should occur.

Two, an interim WIC license should be available on a short-term basis after a change in store ownership while the new owner's application is being reviewed by the Department of Agriculture.

Three, WIC retail advisory panels should be authorized and required in every State to address operational issues on an ongoing basis.

Four, private label or store brands should also receive approval in the WIC program, provided these items maintain the nutritional integrity of the current WIC products.

Five, the WIC program needs to be more flexible with minimum inventory, particularly, for example, with some of the special infant formula products.

Six, prescriptions need to be more attuned to the manufacturers changes in their packaging of products. For example, the WIC prescriptive might be a 46-ounce can, where the most popular size of a juice that you would purchase would be in a 64-ounce plastic bottle. Therefore, inventory is not always able to keep up with that

and it could be more expensive because it is a non-traditional size. We recommend that those issues be addressed.

No. 7, line-item rejection for vouchers should be permitted rather than throwing out the entire voucher when a single item is not eligible for reimbursement.

Eight, WIC EBT cost should be neutral to authorized retailers and follow the path of the food stamp program as they move from WIC coupons to EBT cards.

No. 9, retailers are very supportive of a national WIC UPC data base and feel that it is a necessity that would dramatically decrease the potential for human error, particularly in some States that are moving to EBT.

Finally, No. 10, infant formula theft in the stores is a real problem for retailers. In fact, it is one of the ten most stolen items from a grocery store and a potential health risk for young babies.

We appreciate the opportunity to provide further input and look forward to working with you and your committee staffs in the coming months. FMI stands fully committed to the goals and mission of the WIC program, ensuring that our customers are able to access their benefits in the most efficient and compassionate way in our stores.

Thank you again for allowing us to testify and we would appreciate any questions.

The CHAIRMAN. Thank you.

[The prepared statement of Ms. Curry can be found in the appendix on page 121.]

The CHAIRMAN. Ms. Caplan, you are welcome to proceed.

**STATEMENT OF KAREN CAPLAN, FRIEDA'S, INC., LOS ALAMITOS, CALIFORNIA, ON BEHALF OF THE UNITED FRESH FRUIT AND VEGETABLE ASSOCIATION**

Ms. CAPLAN. Thank you. I was hoping to start by saying good morning, but as I look at the clock, I see that I will change that to say, good afternoon, Mr. Chairman and members of the committee. My name is Karen Caplan. I am the President and CEO of Frieda, Incorporated, the nation's leading marketer and distributor of exotic fruits and vegetables, based in Los Angeles, California.

I come before you today as Chairman of the Board of the United Fresh Fruit and Vegetable Association, the fresh produce industry's national trade organization. I am joined here today by our Association President, Tom Stenzel, and our Vice President for Public Policy, Robert Guenther.

I am also a mother of two school-aged children, so my interest in child nutrition is very personal as well as professional.

I don't need to repeat the facts about today's crisis in childhood obesity and poor nutrition, which is leading to a future legacy of disease and staggering health care costs. Now is the time that all of us must work together in a bipartisan fashion to put in place actual solutions to these challenges, not excuses for failing to act.

As you approach this difficult task, we have to be honest with ourselves. Despite the best efforts of many in this room, the nutritional health of our nation's children has in far too many cases come second to other considerations. We tell food service managers to offer healthy meals, but low reimbursement rates encourage

them to use inexpensive ten-pound cans of string beans and mushy fruit instead of offering fresh fruits and vegetables that kids might like and they might eat.

We tell school officials to create healthy school environments, then look the other way when kids turn to competitive foods on a la carte lines or vending machines down the hall.

We tell kids and parents how important it is to eat five to nine servings of fruits and vegetables every day as the key to good health. Then we can't find room in the WIC program for even a modest amount of fresh fruits and vegetables because of opposition from entrenched commodities.

It is clear that something has to change, and change dramatically. Mr. Chairman, we submit that Congress must develop legislation to make healthfulness and quality equal components of school breakfasts and lunches, to build a healthier school environment that truly teaches lifelong wise food choices, and to launch a smarter start for WIC recipients that could be incorporated into healthy diets long after they leave the program.

How can we do that? As you review all the testimony before the committee, you will find one common goal among every interest group. We need to increase the availability of quality fresh fruits and vegetables to kids, whether it is through school breakfast, lunch, or the WIC program.

The single most important thing I want to talk to you today is about USDA's new fresh fruit and vegetable pilot program launched in the Farm bill last year. On behalf of the 106 schools in the pilot program, I bring you unqualified and enthusiastic support from the teachers, the parents, the school food service officials, principals, school nurses, and, yes, even the children, for continuing and expanding the fresh fruit and vegetable pilot program.

Under Secretary Bost referred to the administration's support for this program during his earlier testimony, and I want to reinforce and magnify his comments. At the conference hosted last week in Indianapolis, officials from Indiana, Ohio, Michigan, Iowa, and the Zuni Nation in New Mexico shared success stories greater than anyone could have imagined.

Teachers reported more attentive students and focused classrooms. School nurses reported fewer trips to the nurse and fewer absences. Food service managers reported more healthy meals served and more fruits and vegetables being chosen in the cafeteria. Principals reported fewer behavior problems. Parents reported kids asking them to buy new produce items at home. The kids reported trying new fruits and vegetables and increasing their consumption by at least one full serving a day.

After decades of working to teach school kids to make healthy food choices, we finally learned the secret to increasing their consumption. Put appealing, good tasting fresh fruits and vegetables in front of them and they will love you for it. All this, just because the government spent a modest amount to give them a healthy fruit and vegetable snack at school. That single lesson may help launch the most effective program in truly transforming the school food environment and increasing actual consumption of fruits and vegetables to meet U.S. dietary guidelines.



As a produce mom who sometimes takes new and unusual fruits and vegetables to my kids' classes, I had the opportunity to learn firsthand how this powerful form of experience-based learning can be, because my daughter is in Brownies and it was my turn to do the Brownie triad. The kids in our troop tried, and I brought this so no one will go hungry today, Mr. Chairman, Asian pears, and we brought some blood oranges—I don't know if any of you have ever tried those, sugar snap peas, and jicama.

The CHAIRMAN. What was the last one?

Ms. CAPLAN. Jicama.

The CHAIRMAN. OK.

[Laughter.]

Ms. CAPLAN. I knew I would stump you with one of them. Oh, I don't want to forget the most important fruit here, since my mother actually introduced it to America, the kiwi fruit. A lot of kids had never tried that.

The interesting thing was the Brownie meeting was at three o'clock in the afternoon. All of the parents had assured me that their kids would never try this weird stuff. I was amazed the next morning to get e-mails and phone calls from almost every single mother that their kids now were talking about packing five a day in their school lunch, they were looking to see if they were drinking 100 percent fruit juice, and they were looking forward to going shopping in the produce department.

We urge the committee to expand—I want to say that again—we urge the committee to expand the fruit and vegetable pilot program to all 50 States at a pilot level next year so we can continue to collect the data and results that will determine how this program can be implemented most effectively.

In addition to this pilot program, my written testimony, which I won't go over in detail, includes 31 specific legislative recommendations covering seven key issue areas in child nutrition. I ask you to examine all of these areas for cost-effective and successful strategies for increasing fresh fruits and vegetables through child nutrition programs.

Thank you so much for letting the produce industry speak.

The CHAIRMAN. Thank you, Ms. Caplan.

Ms. CAPLAN. You are welcome to enjoy this.

The CHAIRMAN. Don't run off.

[The prepared statement of Ms. Caplan can be found in the appendix on page 125.]

The CHAIRMAN. Our next panel member is from the State of Minnesota, and Senator Dayton has asked for the privilege of introducing you. Senator Dayton.

**STATEMENT OF HON. MARK DAYTON, A U.S. SENATOR FROM MINNESOTA**

Senator DAYTON. Thank you, Mr. Chairman. I will be brief. Does this mean they are going to change the name of the Brownies to the "Kiwis" then?

[Laughter.]

Senator DAYTON. I speak, Mr. Chairman, on behalf of my colleague, Senator Coleman, who is also a member of this committee and wanted to be here. He is chairing a Foreign Relations Sub-

committee meeting right now, a hearing, so unfortunately, he can't join us, but he joins with me in thanking you for introducing with great pride, of Minnesota, Rod Hofstedt, who has been a leading advocate for food and nutrition advances for Minnesota's children and adults for the last—well, more than 23 years.

Twenty-three years ago, he founded and since then has directed one of the largest family and child and adult nutrition alliances and family and child program throughout the country and has been recognized now, as before, for his leadership in this regard by being the President-elect of his national association.

It is with great pride that I introduce Mr. Hofstedt, and again, Mr. Chairman, thank you for including this Minnesotan on your panel.

The CHAIRMAN. Thank you, Senator. Thank you.

Mr. Hofstedt, you may proceed.

**STATEMENT OF ROD HOFSTEDT, EXECUTIVE DIRECTOR,  
ADULT AND CHILDREN'S ALLIANCE, ST. PAUL, MINNESOTA,  
ON BEHALF OF THE NATIONAL CHILD AND ADULT CARE  
FOOD PROGRAM FORUM**

Mr. HOFSTEDT. That was very nice. I would like to thank you on behalf of the National Child and Adult Care Food Program Forum for allowing us to share our views with you today.

The Forum represents local primarily nonprofit sponsoring organizations that administer the Child and Adult Care Food Program to family child care providers across the United States. Family child care providers provide child care in their own homes.

Based on our experience and numerous research studies, we believe that the Child and Adult Care Food Program, CACFP, is one of the key building blocks for good nutrition in quality affordable child care. CACFP serves 2.7 million children daily, over 900,000 in family child care homes and 1.7 million in child care centers.

Today, I am going to focus on the family child care portion of CACFP. The program provides reimbursement for food and meal preparation costs, ongoing training in the nutritional needs of children, and onsite technical assistance through a minimum of three in-home visits each year.

Nutrition problems start at a young age. A recent review of the research on the nutritional status of preschool children revealed some disturbing trends relating to an increase in obesity and overweight as well as other problems. Research has shown that homes participating in the CACFP serve more nutritious meals and snacks. Parents can rely on child care providers participating in the CACFP to be good partners in helping their children develop positive nutrition habits early. Since many habits learned in child care will last a lifetime, we must make certain that CACFP is available to help make sure these nutrition habits are desirable and healthy.

Unfortunately, fewer and fewer children in family child care are able to participate in the Child and Adult Care Food Program. Many more children could be served if Congress would reduce unnecessary red tape, provide support for continuing nutrition education, and restore some of the reimbursements that were cut so drastically as a part of the 1996 welfare reform law.

Since the 1996 cuts, which were made as part of implementing a means test, CACFP and family child care has gone from being one of USDA's fastest-growing programs to a program that serves fewer and fewer children each year. There has been a 14 percent drop in the number of homes participating and a 7-percent drop in the number of children and meals served through the family child care portion of the program. In fact, in comparison to USDA growth projects, CACFP and family child care now serves a quarter of a billion less meals and snacks than was expected without the means test.

In the interest of time, I will only cover several key recommendations for improving access. These recommendations are based on surveys of sponsoring organizations, providers focus group, and an analysis of participation data.

More low-income families would participate in the Child and Adult Care Food Program if Congress would reduce the red tape involving qualifying for low-income reimbursement rates by reducing CACFP area eligibility from 50 percent to 40 percent. The final reimbursement rates adopted for families with incomes over 185 percent of the poverty level were considerably lower than those initially proposed. The means test system with these reduced rates has had the unintended consequence of driving providers off the program. For example, these providers only receive 14 cents for serving a nutritious snack. Congress needs to raise these reimbursement rates to a reasonable level in order to compensate providers for a greater part of the cost of meeting the CACFP meals service standards.

Child and Adult Care Food Program sponsors need the resources to focus on the important nutrition education support services that have now been pushed aside by the avalanche of paperwork generated by the means test. CACFP sponsoring organizations' per home administrative rates need to be increased to allow the program's tradition of excellent nutrition education to continue.

The need for affordable quality child care is growing and the need for good nutritious meals and healthy eating habits have never been greater. Congress needs to make the necessary improvements so the number of children participating in the Child and Adult Care Food Program can once again grow to meet these needs.

In conclusion, I would like to thank the committee for their attention to this important program and the Forum looks forward to working with you in any way it can. Thank you.

The CHAIRMAN. Thank you very much, Mr. Hofstedt.

[The prepared statement of Mr. Hofstedt can be found in the appendix on page 139.]

The CHAIRMAN. Our final member of this panel is Mr. Don Wambles, who is President of the WIC Farmers Market Association. Mr. Wambles, welcome. You may proceed.

**STATEMENT OF DON WAMBLES, PRESIDENT, NATIONAL ASSOCIATION OF FARMERS MARKET NUTRITION PROGRAMS, MONTGOMERY, ALABAMA**

Mr. WAMBLES. Thank you, Mr. Chairman and members of the committee, for the opportunity to speak to you today. Our national association represents 37 States, Guam, Puerto Rico, and five In-

dian Tribal organizations that operate the WIC Farmers Market Nutrition Program, as well as 36 State agencies that operate the Seniors Farmers Market Nutrition Program.

The Farmers Market Nutrition Programs meet two very important objectives. One, they provide fresh, locally grown fresh fruits and vegetables to low-income women, children, and seniors, and we do this by giving them coupons that they can spend only at local farmers' markets with the actual producers that grow those fruits and vegetables.

Then, second, it provides additional income for those small fruit and vegetable growers, and in the down economic times that we have right now, this is extremely important for those small producers.

Last year, we served more than 2.7 million WIC clients and seniors with these programs, allowing them to receive fresh, wholesome fresh fruits and vegetables, and approximately 14,500 small farmers across America benefited from additional income through these programs.

The Farmers Market Nutrition Program creates a direct link between production agriculture and thousands of low-income women and children. The Farmers Market Nutrition Program educates the WIC clients about the importance of fresh fruits and vegetables in their diets. It changes eating habits, and it increases sales to small farmers.

Last year, through the WIC Farmers Market Nutrition Program alone, farmers received almost \$22 million in coupon sales. We have not even added in the additional impact where they spend cash dollars whenever they come there. That is just through the coupon sales alone.

The Farmers Market Nutrition Programs are the only programs that provide direct benefits to small farmers and low-income families with a minimal amount of effort. We deliver nutritious fruits and vegetables to needy women, children, and seniors, and additional income is provided to farmers with the added benefit of exposing young mothers to the stable family environment provided by small family farmers in visiting the farmers' markets.

This program is more than just giving recipients \$20 and turning them loose and allowing them to go spend it. We provide nutrition education. We also provide them with assistance in shopping at the farmers' market. We assist them in learning how to shop, what products to buy and teach them how to prepare that product once they get home. We have an education component built in with it.

This is extremely different than buying something ready to eat and taking it home or stopping by somewhere and purchasing something and eating it. This effort of teaching them how to shop and how to prepare it takes time. It is not something that can be done quickly. For those of us that have the knowledge of how to do this, we must take the time and the energies that is necessary to teach those who do not know how, especially our young mothers that do not know, because they can become contributing portions of our society. The Farmers Market Nutrition Program is a win-win for all of society.

The WIC Farmers Market Nutrition Program requires a 30 percent State match on the part of the States to receive the Federal

dollars associated with it. As State budgets have tightened, it has become increasingly more difficult to find the necessary dollars to provide those State match funds. I sincerely believe that States need to have a stake or provide part of the money associated with these programs, but during the current economic conditions, it is very tough for States to accomplish that. We have even had some States that have had very successful programs have to drop out of the program last year simply because they did not have State match moneys available to draw down the Federal funds.

It is extremely hard to explain to a farmer why you had a program 1 year and you don't the next, but it is even more difficult to look into the face of a child and explain to that child, you got this program last year but we don't have it this year. There is nothing more heart wrenching than to see that.

It is even more frustrating to us to work to establish a program, to build interest and enthusiasm in it, and then to see that program die because of State budget crisis.

Therefore, our association is asking that you give serious consideration to changing the State match requirements to allow us to continue to operate this very important program. The State match requirement of 30 percent of the total Federal grant—we are having to match the total Federal grant at 30 percent—has been and continues to be an obstacle to expanding the program or to growing the program within States or to growing the program and increasing it in additional States.

We are asking that we only have to match the administrative portion of the Federal dollars, just like all other nutrition programs, not to match the food portion of the Federal dollars.

Second, the Federal benefit per recipient has been capped at \$20 since the inception of this program, and this is the only program that I know of that you can look at for a period of ten or 12 years that has not had an increase in the benefit level. Everything else that is associated with the program, the farmers' input cost and the cost of food, has gone up during this period of time; and yet, here we are, we are still capping the Federal benefit that we are giving these young mothers and children at \$20 and we expect them to receive the same amount of food. It can't happen. We sincerely ask that you look seriously at increasing the Federal benefit level to a maximum of \$30.

It is extremely important that these programs continue to strengthen local markets. That is one of the goals that they were intended for. We also need the flexibility back at the States' level to address local situations where farmers' markets are neither abundant or available.

While this hearing is focused on re-authorization of the WICFMNP, I would be remiss if I didn't speak real briefly about the Seniors Farmers Market Nutrition Program. It is a sister program to the WIC Farmers Market Nutrition Program. FNS has done a tremendous job of implementing this program in the two short years that it has been out. It is an example of the out-of-the-box thinking that OMB advocates. The seniors' program has been so successful that it has far exceeded the \$15 million allocated through the Farm bill. We had a little over \$28 million in requests

from States this year, so there are a lot of programs that have gone unfunded.

In closing, I would like to just share with you two experiences to maybe put a face on the Farmers Market Nutrition Programs. At one of our markets this year, I was there and I observed a young WIC mother making a purchase of fruits and vegetables with a little boy about three or 4 years old, wasn't much taller than this table, and whenever his mother made that purchase with those coupons, you could see the excitement on that child's face, almost to the extent that he couldn't have been any happier had Santa Claus been standing there. It was unreal.

[Laughter.]

Mr. WAMBLES. I could not imagine seeing what I was seeing in Montgomery, Alabama. When she handed him that basket of produce that she had just purchased, he just literally glowed and he looked up at his mama and he said, "Mama, are we going to have something good to eat tonight?" Those words just struck at my heart. I could not imagine that we had people, children right there at home, that had to even ask that question. This program is meeting a tremendous need.

Finally, a similar situation, an elderly gentleman was at one of our markets. I was drawn to him because of the cap that he was wearing. On his cap, it said, "I am a World War II Veteran." With the situation that is going on right now, I could not help but speak to him, and he told me that the seniors' program was extremely beneficial to him. He said, "Without the program, I wouldn't have moneys to come and shop at the farmers' market."

As we continued talking, the glow in his eyes as he told me about his military service and how proud he was to have served us, it saddened to me to think that he qualified for the program. His face and his words or what his service has provided you and me. He is one example of the many veterans being served by the seniors' program.

In summary, the Farmers Market Nutrition Programs are providing at-risk children, young mothers, seniors, and small family farmers benefits through the WIC and Seniors Farmers Market Nutrition Programs. Lifestyles are changed. Bonds are formed between recipients and small farmers every day. Small fruit and vegetable growers receive direct income in these difficult economic times.

Mr. Chairman, our association stands ready to work with you and Members of Congress and USDA to continue to strengthen these programs, and I would be happy to answer any questions.

The CHAIRMAN. Thank you very much, Mr. Wambles, for your testimony and your participation in this panel.

[The prepared statement of Mr. Wambles can be found in the appendix on page 146.]

The CHAIRMAN. Senator Lincoln, you have been here a while today and haven't had a chance to say a word. I feel bad about that. You may proceed making a statement or ask questions, as you wish.

**STATEMENT OF HON. BLANCHE LINCOLN, A U.S. SENATOR  
FROM ARKANSAS**

Senator LINCOLN. Thank you, Mr. Chairman. I will ask for unanimous consent, if I may, to put my entire statement in the record. I don't want to take too much time from anybody.

I first want to start by thanking the chairman for his leadership in this issue and his willingness to—not only his patience today but his willingness to devote the kind of time from this committee to an issue that is so very important. I appreciate his very strong commitment to nutrition, both he and the ranking member provide us in this committee. I do want to thank each and every one of you all for being here today. You are somewhat preaching to the choir with me, as a matter of fact.

I just want to mention a couple of things. I, too, as a mother of school-age children recognize the importance of what we can do in not just providing food to individuals, to children, to the elderly, but the lifestyle changes we can provide and the other ways that we can really affect people's lives.

I was late today, Mr. Chairman, because I was in the Finance Committee at a hearing on Medicare, so I went from the elderly to the young people in many ways when you talk about nutrition programs. One of the things we talked about was coordination of care and looking at nutrition as an enormous part of our elderly people's lives, and we teach a lot of those lessons in these types of programs when we are dealing with children, both in providing them good choices, but in some instances, just simply providing them the kind of nutrition and means that they need on a daily basis.

Two years ago, the U.S. Department of Agriculture Food Assistance and Nutrition Research Program issued a report that ranked Arkansas as one of the bottom five States for food security and hunger. Now, Mr. Chairman, jicama has made its way to Arkansas and Mississippi, but not in great numbers.

[Laughter.]

Senator LINCOLN. For States like ours, and particularly mine in Arkansas, with the sizable agricultural sector that we have, almost 5 percent of our households in Arkansas do not always have adequate food. That is really inexcusable in this day and age, at a time when we are the greatest force, the greatest nation on this globe, to think that there are hungry children.

I have an older sister that taught in the public schools in Arkansas, and when she quit, I asked her, I said, what made you quit teaching? She said, "Well, there were several things," she said, "but unfortunately, it was bus duty." I said, bus duty? That couldn't have been that hard. She said, "Well, once a month, I was at bus duty and," she said, "it was incredible." She said, "There were kids that were clinging to my leg that didn't want to go home. They were hungry, they were sick, and they were frightened."

Well, we can't do everything about all of those problems, but we can provide children a nutritious meal at least once, if not twice, a day in our school systems, and it is absolutely critical in that overall component of trying to do more on behalf of our children, who are truly the future leaders of this great country.

The nutrition programs are key in eliminating hunger and ensuring the health and well-being of our young people. Unfortunately,

under current economic circumstances, we are finding that people who never dreamed they would be having to access these programs are looking to these programs. We want to make the process as seamless. We don't want them to be a process of lots of paperwork and embarrassment and humiliation in order to get parents, to allow them to get their children into these programs or to go to farmers' markets. We don't want these programs to be something that are a challenge or that are difficult for them to access. If they need them, we want to provide them, and there is great opportunity for us to be able to do that. There are so many programs that have been very, very productive.

The immediately and long-term benefits of the WIC program has proven it to be one of our most successful. There is no doubt that we can improve on that and we should be looking on ways to do that.

I am amazed that stolen formula is the most—the largest, is that right, Ms. Curry?

Ms. CURRY. One of the ten largest.

Senator LINCOLN. One of ten. That is amazing to me. With twin boys, I can remember buying formula in bulk, Mr. Chairman.

[Laughter.]

Senator LINCOLN. It was amazing. To think of those individuals who find themselves in a circumstance where they can't provide, it is unbelievable.

We have seen, particularly since its inception, the Child and Adult Care Food Program, over the last decade, participation in this particular program has risen 73 percent in Arkansas.

Clearly, there is a need. The WIC Farmers Market and the WIC program, summer feeding program, some of our adult feeding programs, all of these are serving a critical need in this nation and it is so important.

The last thing I will address is that many of our colleagues sat around this very table when we discussed the Farm bill and we talked about the programs. We talked about authorization and implementation. We addressed the need to provide appropriate levels for funding for these programs, and I just want to take this opportunity to echo that concern, as well. We need to make sure that—at least I hope we won't leave the committee without saying that we must preserve the investment in their entirety in the budget that we approach as we go through this budget process because if there is anything that is elemental, it is making sure that people have at least something to eat, even if it is not enough, and that is so true in this time of economic recession.

Mr. Chairman, thank you for addressing what is a very important issue today among our families, our schools, our elderly, and I hope that our distinguished witnesses here today, both in this panel and in others, will continue to work with us on the committee, because we do have our work cut out for us and we have a lot to do. Thank you.

The CHAIRMAN. Thank you, Senator.

The CHAIRMAN. Senator Dayton.

Senator DAYTON. Thank you, Mr. Chairman. I will be brief because, as you say, the hour is getting late and the M&M peanuts



down in the vending machine are out by about one o'clock, so I have to get down there.

[Laughter.]

Senator DAYTON. I would like to go back, Mr. Hofstedt, to your point about putting another layer of reporting requirement on providers and on parents and families. I don't understand, Mr. Chairman. I have these credit cards. I can go anywhere, as we all can, in the country, thousands and thousands of vendors and I don't have to fill out a form every time. If I did, I wouldn't be a consumer. Electronically, it can establish my identity and qualifications. It can establish a limit of expenditure and the like. Even at the government level, I have a driver's license. I can go and it establishes my identity and my driving record, unfortunately, but anywhere in Minnesota and in many other States.

I don't see why, and I hope, Mr. Chairman, if we are adding the desire to be fiscally responsible, as we should, that we are also responsible to the spirit and the intent of the programs and that we provide—we take on and instruct the USDA to take on, at least the Federal Government to take on, if we want these additional safeguards, if we want the information, if we want to set limits and the like, that we take it on ourselves to do that and to do so in a way that brings the eligibility for all these different programs ideally under one roof and one card so that we put that on ourselves rather than on the providers and on the recipients. I just think it is getting way out of hand.

Mr. Hofstedt, you said this reporting requirement has really reduced the participation in these programs, so we are contradicting our own intentions by doing so.

Mr. HOFSTEDT. Absolutely. For providers and parents that have to deal with all the income eligibility forms, and especially if you are talking for a provider who is getting 14 cents for a snack, they just say, forget about it, because what can you serve for 14 cents? They are required to serve a nutritious meal. What is happening is they are dropping out of the program and going back to serving Kool-Aid. It is cheaper.

Senator DAYTON. That is just pointless. Mr. Chairman, I just had the opportunity and I brought them into the hearing room to witness, I have three experts on the school lunch program in Minnesota, three high school students from Minnesota, and I asked them about the availability of fresh fruits and vegetables and they said, well, sometimes they have a salad bar, but the salad is iceberg lettuce and usually nothing else and it is often turning brown, which is not exactly desirable. Then one said that they wish they had applesauce every day, but they don't. I said, well, do they ever buy just fresh apples? They said, well, sometimes, but those are just the red ones and they are bitter.

You would think we could at least—I don't think we even have to have master chefs in these programs, but we ought to be able to provide fresh produce that is edible and appealing. I mean, it just seems that some of the basics here, Mr. Chairman, and I agree, we want to be nutritious, we have to serve a lot, a lot of students, but there are ways in which we can keep this simple and yet make it possible for kids to actually enjoy things we want them to eat. Otherwise, they are going to go find the M&Ms.

I might say that we as adults, as someone said earlier, we don't model necessarily the behavior we want our children to follow. If anybody wants to comment on that, I would welcome it.

The CHAIRMAN. Thank you very much, Senator.

Let me thank all of you for being here and members of this panel and providing us your observations and thoughts about how we can improve these programs and some of the essential things that we should consider as we proceed to reauthorize the Child Nutrition Act.

I was interested in Ms. Leppert's comment in the statement that WIC vendors should be food stamp authorized, as well. Would this be good for participants, or what is the reason for that suggestion?

Ms. LEPPERT. The reason for that suggestion is in terms of program integrity. It is just easier that they are food stamp authorized. The food stamp program has the better ability to check on the programs than WIC does.

The CHAIRMAN. Ms. Curry, you raised a troubling point about infant formula theft and the relabeling and redating issue in the food stores. It occurred to me, what do we need to do about that in the re-authorization bill? Is there a step we can take or something that we could do in the legislation that would help improve that situation?

Ms. CURRY. The grocers who participate in the WIC program feel that the Department of Agriculture should require the State to come up with a contractual agreement with their distributors who make the infant formula and possibly even develop an audit trail from manufacturers to retailers so that infant formula could only be purchased from authorized distributors that would be designated by the State. When we have the "black market" infant formula, it ends up in places where there is absolutely no way of knowing where it came from, what the expiration date is, or even if the product is actually what it says it is. The Department could come up with a more stringent definition for authorized distributors. Formula could only be purchased from authorized distributors.

The CHAIRMAN. That is a very troubling situation. I know counterfeiting of not only food stuffs but drugs, things that are over-the-counter drugs, we had an instance where Senator Kohl, who is a member of our Appropriations Subcommittee on Agriculture, and we have worked closely together on some of these issues, we had representatives from the Food and Drug Administration and HHS giving us a presentation on how widespread counterfeiting is in our stores and retail establishments these days, and I am sure your industry is very aware of this, as well, so I appreciate your bringing that to our attention and reminding us that we can play a role in helping to deal with that.

Ms. LEPPERT. If I may make a comment, WIC is also very concerned about counterfeiting of formula, and anything that can be done to prevent that counterfeiting and any time that we could work with FMI to come up with a rule or regulation that would help prevent that, we would be in favor of.

The CHAIRMAN. Thank you. Ms. Caplan, we appreciate your being here and the basket you brought along. I hope you are going to leave that.

[Laughter.]

Ms. CAPLAN. If you don't ask me any questions.

[Laughter.]

The CHAIRMAN. You point out something that was interesting to me. In your testimony, you state that our commodity distribution program sometimes looks like a free-for-all among commodity groups to fight for sales, et cetera. I was thinking, this week, we had the soybean farmers of America were up here, the American Soybean Association, and one of the things they were pointing out was the fact that a lot of emphasis is being placed on soy products now and how these are nutritionally beneficial and, in some cases, more healthy as choices for food stuffs than some of our traditional products are.

You don't want to keep or prevent the distribution of some of these food stuffs even though they are still not as widely used or as known if they are truly good. They are not all bad just because they are distributed as choices by the Department of Agriculture. Would you agree with that, or how do we let some of these products get exposed to a potential user group?

Ms. CAPLAN. Well, what was meant by that in my testimony was that there are some organizations that have huge marketing budgets and huge lobbying budgets, as I understand it, that have incredible influence here, and consequently, sometimes their influence is felt more strongly than those of us, maybe fresh soybean, like tofu and vegetarian products or fresh fruits and vegetables that don't have huge marketing and lobbying budgets and can't be as influential. That is what was meant by it.

The opportunity that could be given to other foods, which I was looking at the exotic produce. The kids were a lot more interested in trying Asian pears than they would be those red mealy apples that Senator Dayton was talking about because they were given a choice of something that probably their parents had never tried and they may never have tried at home. It would be wonderful if this committee would find a way to give the opportunity for different foods that are fairly priced to be included in these programs.

The CHAIRMAN. Mr. Hofstedt, you mentioned for-profit child care centers and their difficulty of participating in some of these programs. I mentioned Senator Kohl's name a while ago. He and I included a provision in the agriculture appropriations bill that permitted reimbursement to these child care centers for providing food to the children under their care. Do you have a position on the value of a provision like that? Would you support that?

Mr. HOFSTEDT. Absolutely. Our position with the Forum is very simple: Feed children. If we can get good food into kids, that is wonderful, and any way we can expand the program, that is fine.

The CHAIRMAN. Mr. Wambles, you mentioned the difficulty of coming up with matching funds at the State level to permit the operation of the Farmers Market Program. I wonder if you know how many States have actually stopped participating in the program because of the matching fund requirement.

Mr. WAMBLES. To my knowledge, we had one that had to drop out of the program last year, and I am not sure about the 2003. I do not think we have as many States in the program this year as we did last year.

The CHAIRMAN. We ought to, as you do, encourage participation in that program and if we have the matching requirement set too high or if any amount is too high, we ought to take that into careful account as we go through the re-authorization of this program.

I appreciate very much everybody's attendance at the hearing today. We have had a good hearing. We have some excellent ideas to consider as we proceed to try to improve this program and make sure it reaches those who need assistance, government assistance to help meet dietary requirements and health requirements. We want a well-fed but well-nourished, at the same time, citizenry, and that Congress has demonstrated its willingness to take a lead in that.

This building we are in is named for Richard Russell, who was given credit for the school lunch program. It was his legislation that began that program. There have been other leaders of Congress who have improved it and expanded it and made it better, and our committee is going to be committed to carrying on that tradition, and we appreciate your assistance in identifying ways we can make it better and do a better job.

Thank you very much. The hearing is adjourned.

[Whereupon, at 12:50 p.m., the committee was adjourned.]

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**A P P E N D I X**

APRIL 3, 2003

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**Senator Debbie Stabenow  
Opening Statement  
April 3, 2003**

**Committee on Agriculture, Nutrition and Forestry  
United States Senate**

**Full Committee hearing to review the federal  
government's initiatives  
regarding child nutrition programs**

Chairman Cochran and Senator Harkin, I thank you for convening this second hearing on the reauthorization of child nutrition programs administered by the U.S. Department of Agriculture. Our last hearing focused primarily on the School Lunch and the School Breakfast programs; I am pleased that today's witness list includes representatives from some of the other important nutrition programs including the WIC program and the Child and Adult Care Food Program (CACFP), as well as representatives here on behalf of the important retailers, wholesalers, and growers of the products used by these programs.

Let me reiterate some statistics that I shared during our last hearing to emphasize how important all of the domestic nutrition programs are in the country

and in my state. Last year, 132,246,667 school lunches were served to children in Michigan. Half of all babies born in my state are eligible for WIC. Each day in Michigan, 66,285 children and seniors attend day care centers that benefit from the Child and Adult Care Food Program. Twenty five schools in Michigan are participating this year in the fruit and vegetable pilot. The list just goes on and on. Simply put, these programs provide critical help and nutrition assistance to families and children in Michigan and across the nation.

Knowing how important these programs are, I am very troubled by the budget passed by the House that will result in an estimated \$5.9 billion in cuts to child nutrition programs to pay for a tax cut (source: Center on Budget and Policy Priorities). As a member of the Senate Budget Committee, I know these cuts will be devastating. Michigan alone would suffer a \$146 million reduction in federal dollars for child nutrition programs.

The numbers don't tell the whole story, though. Behind those numbers are the faces of hungry children and families who will be denied the assistance they deserve. Here is just a short list of what I think will happen if those cuts were enacted:

- School meal prices would increase for families already on limited budgets,
- Schools may drop programs altogether – eliminating free and reduced priced lunches,
- Income guidelines might be lowered for participating families,
- Fewer areas would qualify for the summer food program,
- Less commodities would be purchased for donations to programs,
- WIC farmers markets may be eliminated, and
- Fewer sites would qualify for the CACFP.

We can't let this happen.

That is why during the Senate debate on the budget I offered a Sense of the Senate amendment that there should be no cuts to domestic nutrition programs. Several of my colleagues on this committee joined me as cosponsors including Senators Harkin, Fitzgerald, Leahy, and Dayton. I am pleased that my amendment was included in the Senate budget by unanimous consent and I am hopeful that the final conference report will not include reconciliation instructions that will force reductions in domestic nutrition programs, or any other important program



under the jurisdiction of this committee for that matter.

Let me briefly mention, since Jill Leppert, President of the National WIC Association, is here today, that WIC is an outstanding program and a resounding success. I know we share a mutual goal in improving the current food package to include fruits and vegetables. I want to work with you and my colleagues on the committee to make that happen this year. As many of my friends on committee know, I represent a diverse agricultural state and I am proud of the many nutritious commodities grown and produced in Michigan. I am concerned about the rise of obesity in our nation, and I want to find ways include more fruits and vegetables in all of the nutrition programs to help children and families develop healthful dietary patterns that will last a lifetime. Of course, I would prefer that those fruits and vegetables come from Michigan! I know that Karen Caplan, testifying on behalf the United Fresh Fruit and Vegetable Association will provide information about the importance of including more fruits and vegetables in all of these programs.

I look forward to the committee's continued work on the reauthorization of child nutrition programs and I thank the witnesses for coming today to provide their testimony.

**OPENING STATEMENT**  
**Senator Tom Harkin**

**Committee on Agriculture, Nutrition, and Forestry**  
**Hearing on Child Nutrition Programs**

April 3, 2003

I want to thank Chairman Cochran for calling this hearing, the second hearing in preparation for the reauthorization of our child nutrition programs.

We in Congress should be extremely proud of our child nutrition programs, as should the entire country. I believe we can all agree that it is our responsibility to provide the fundamentals for the healthy development of our children.

As we all know as Senators, but also from watching our own children grow over the years, children need certain basic foundations for their success later in life – love, nurturing environments, cognitive stimulation, and healthy nutrition. Without these things, the chances of our children's success later in life are seriously impaired.

The Senate has a long history of bipartisan efforts to provide for these needs. Throughout my years on this committee I have enjoyed working with my colleagues in a bipartisan manner to fulfill our responsibilities to the nutrition of America's children.

These programs do a tremendous amount of good. Our school meals programs ensure that kids walk into class ready to learn. All of the work that Congress did on the No Child Left Behind education reform bill doesn't amount to anything if kids can't concentrate because they are hungry.

The WIC program has a 25-year record of tremendous success, reducing rates of anemia in low-income children, contributing to their intake of vital nutrients, and generally contributing to their healthy development. Studies have also shown that five-year old children whose mothers participated in the WIC programs have better vocabulary scores than children who didn't.

The child nutrition programs have urgent and pressing needs that require our attention and our resources.

First, we must do more to ensure that our child nutrition programs play a role in fighting the epidemic of obesity in our country.

The hard-working people that administer the child nutrition programs tell us that they are swimming in paperwork. I hope that we can find ways to lessen this burden while still maintaining program integrity.

And I personally want to make sure that our child nutrition programs are serving rural areas and urban areas equally. As those on this committee know, rural areas often face specific barriers that others areas do not have to worry about.

But making these needed investments in the child nutrition programs will cost money. That is why I wrote to the President and to the Senate Budget Committee asking them to provide \$10 billion in new money for the reauthorization of child nutrition programs this year.

Regrettably, at a time when strengthening our child nutrition programs is so important, there is a serious threat to cut them significantly.

The House Budget Resolution proposes cuts to all food and nutrition programs, including child nutrition. In fact, the House Budget Resolution would necessitate cuts to child nutrition programs in the order of \$6 billion dollars.

With the economy sputtering, with child obesity reaching epidemic proportions, and with millions of children and working families depending on our child nutrition programs, we cannot afford to cut nutrition assistance.

I pray that this Congress does not become known for cutting child nutrition programs.

It's not just a matter of healthy kids, but of a healthy nation. Unless our foundation is solid, the entire nation is at risk.

That is why, when Congress passed the Richard Russell School Lunch Act just after World War II, it said,

“It is hereby declared to be the policy of Congress, *as a measure of national security*, to safeguard the health and well-being of the nation's children.”

We are blessed, as members of this committee, with tremendous responsibility to our children but also with an incredible opportunity to set forth nutrition policy that speaks to the heart of the problems before us.

I hope that we here today can agree, Republicans and Democrats on this Committee, as well as Undersecretary Bost and the Administration, that child nutrition simply cannot withstand funding cutbacks. We must pledge to work together to strengthen, rather than undermine, our child nutrition programs.

If our history is any indicator, I have every reason to believe that this Committee will continue to work in a bipartisan manner to meet these responsibilities. I look forward to this undertaking over the next several months as well as to the testimony presented today.

Opening Statement  
Senator Richard G. Lugar  
Senate Agriculture Committee  
Hearing on Children Nutrition Programs  
Thursday April 3, 2003

Mr. Chairman, I am pleased that the Senate Agriculture Committee is holding this hearing today on the important issue of child nutrition. I am eager to participate in discussion on how we can improve the effectiveness of these programs and reduce the bureaucratic red tape for those that administer them.

I am a strong supporter of government programs that improve our children's health. And while I am proud that we are able to provide many nutritious meals to our nation's children, there is always more we can do. One area I have focused on in the past, and hope to hear testimony about today, is the large gap in nutrition program service during the summer months when many needy children are not serviced by school administered programs.

The Summer Food Service Program aims to fill this gap by providing meals to low-income children. But unfortunately, administrative burdens caused by federal paperwork and reimbursement requirements prevent potential program sponsors from offering this program to needy children. In fact, participation by sponsors in the Summer Food Service Program has been declining for the last few years. This lack of service is evidenced in some reports that as little as 15% of the children participating in the National School Lunch Program also participate in the Summer Food Service Program.

In 2001, several of my colleagues and I put together a pilot program that we hoped would encourage higher participation by program sponsors especially in low participation states. The three-year pilot streamlined paperwork requirements by removing the documentation requirement, providing maximum reimbursement rates for food and administrative costs and providing higher cost subsidies to rural areas.

I look forward to receiving information on the success of these pilots. Data indicates that participation increased by almost 9 % between 2000 and 2001 in the 13 pilot states. In the remaining 37 states, summer food participation decreased 3 %. I hope to continue to work with this committee and the Administration in investigating ways to further expand Summer Food Service Program participation.

We have many challenges facing us concerning child nutrition including access and overall child health. I would like to thank the individuals who have taken time to share with us their views on how we can best ensure the health and vitality of our nations children through federal nutrition programs.

I look forward to working with each of my colleagues to provide an effective nutrition safety net for our nation's children.

Statement of Senator Patrick Leahy  
Senate Committee on Agriculture, Nutrition, and Forestry  
Hearing on Child Nutrition  
April 3, 2003

Thank you, Mr. Chairman. And thanks to all of our witnesses. We know you had to alter your busy schedules to join us here today rather than last week, and we appreciate your cooperation, your commitment of time to this important effort, and the insights you will share with us today.

The programs that we are considering today – the Summer Food Service Program, the Child and Adult Care Food Program, the Special Supplemental Program for Women, Infants and Children (WIC) and the WIC Farmers' Market Nutrition Program – ensure that low-income children and their mothers can rely on nutritious food not just during the school day, during the school year, but also after school, in the summertime and before children are old enough to attend school. We know that these programs are successful and that they are a vital part of many communities across the nation, but we also know that they are not reaching nearly enough of the children and families who need them. I look forward to hearing from our witnesses about ways that we can improve each of these programs, and particularly about how we can expand and improve access.

This hearing also provides the Committee with the opportunity to hear from Mr. Eric Bost, the Under Secretary of the Food, Nutrition and Consumer Services at the U.S. Department of Agriculture, on the Administration's proposals and priorities for the reauthorization of the child nutrition programs. From reading Mr. Bost's prepared testimony, I am encouraged about the many opportunities that I believe we will have to work together in crafting proposals that will improve the health and well-being of the children served by the federal child nutrition programs. I share the Administration's interest in ensuring program access to all eligible children – and, especially, in expanding the Summer Food Service Program; in streamlining the application processes and administration of the programs, and in developing financial incentives for schools to generate a healthier school environment.

We learned at our last hearing that when schools improve the packaging and refrigeration of milk and offer a variety of milk flavors, more children drink milk and more participate in the federally subsidized meal program. We also heard testimony about the positive impact that offering healthy fruits and vegetables in schools has on students' diets. We need to give schools incentives to offer more healthy fruits, vegetables and dairy options to our children – particularly using local farm products – and we need to do a better job of teaching kids about good

nutrition and about the responsibility they are exercising with the food choices they make. What they learn now about healthy diets and the importance of physical fitness will help shape and improve their food and lifestyle choices not only today but throughout their lives.

Incentives are a start, but we can do better than that. With more and more of our kids suffering the health consequences of being overweight or obese, we have a responsibility to help them make smarter nutrition choices. We need to limit the proliferation of junk foods in our schools. I have offered legislation in the past few years to do that, and I look forward to working with the Administration, with the members of the Committee and with others in Congress on this effort again this year, as we work on the reauthorization bill.

Unfortunately, before we can consider such improvements, we are faced with the alarming possibility that funding for domestic nutrition assistance – the very initiatives we are discussing today – could be cut as part of the Congressional Budget Resolution that now is in conference. America's struggling families and their children rely on us to make wise choices in setting budget priorities, and it is difficult to think of a worse choice than this. In these difficult economic times, we should not be putting the basic needs of low-income Americans – and particularly, the children who are helped by these efforts – first up on the chopping block. I joined many senators on the Committee (\*\**Senator Stabenow, Senator Harkin, Senator Fitzgerald and Senator Dayton*\*\*)) and others in the Senate in offering an amendment to the Senate Budget Resolution that expresses the sense of the Senate that the final conference agreement on the Budget Resolution should not reduce funding for domestic nutrition programs below the current baseline levels, and I am pleased that it was approved by voice vote. The reconciliation instructions included in the House Budget Resolution to cut mandatory funding in the areas of domestic nutrition assistance would be devastating to the children and families who count on these programs to meet their daily food needs. I hope that the witnesses today will share with the Committee the impact that billions of dollars in cuts would have on the programs with which you have working knowledge.

Thank you, Mr. Chairman, and I look forward to hearing the testimony of our witnesses.



TESTIMONY OF  
ERIC M. BOST  
UNDER SECRETARY, FOOD, NUTRITION AND CONSUMER SERVICES  
UNITED STATES DEPARTMENT OF AGRICULTURE  
BEFORE THE  
SENATE COMMITTEE ON AGRICULTURE, NUTRITION AND FORESTRY  
April 3, 2003

Thank you, Mr. Chairman. I am Eric Bost, Under Secretary for Food, Nutrition and Consumer Services at the U.S. Department of Agriculture (USDA). I am pleased to be here today to talk about the Administration's recommendations for the upcoming reauthorization of the Child Nutrition Programs and the Special Supplemental Nutrition Program for Women, Infants and Children (WIC).

Within USDA, the Food, Nutrition, and Consumer Services (FNCS) is the lead mission area for improving the health and nutrition of all Americans, especially children as well as our most vulnerable individuals and families. Our agency oversees 15 nutrition assistance programs that touch the lives of 1 out of 5 people in this country every year. The National School Lunch Program alone serves an average of 28 million children each school day. Fifty-eight percent of these children receive a nutritious lunch free or at a reduced price. Nearly eleven million also take part in school breakfast, after-school snacks, or summer meals. Programs like these present us with an extraordinary opportunity to reach young Americans and send out strong, consistent messages about achieving and maintaining a healthy lifestyle. Through our school meals programs, summer feeding, child care and WIC programs, we are making important strides towards improving the quality of children's diets and raising their awareness of healthy choices.

Over a year ago, as we began considering possible improvements to the Child Nutrition Programs and WIC, we knew that an inclusive process, bringing together the suggestions of interested groups and individuals from across the country, would serve us well. So we traveled to nine cities to hear from advocacy groups, school lunch and child nutrition professionals and the public, about what was working and what needed improvement. From this process, we gained significant insight into the ways in which our programs could better meet their goals.

We have been guided by the belief that ensuring the strength and integrity of the nutrition safety net depends on programs being readily accessible by all those eligible for them, a strong commitment to encourage children to make positive choices about what they eat, how much they eat, and how active they are; and good stewardship of program resources, combining effective oversight with a minimum of red tape.

The reauthorization process gives the Administration and Congress the opportunity to empower local schools, parents, and communities to move toward a nutrition environment that values and fosters the health of our children. We believe that reauthorization of these programs should be guided by the following principles:

- Ensuring access to program benefits for all eligible children. To effectively and efficiently ensure access, we propose streamlining the application process and the administration of programs to minimize burdens on both schools and parents;

- Supporting healthy school environments to address the epidemic of overweight and obesity among our children by providing financial incentives to schools that meet the dietary guidelines; and
- Improving the accuracy of program eligibility determinations, while ensuring access to program benefits for all eligible children, and reinvesting program savings to support program outcomes.

This Administration believes that these principles provide the focus and framework needed to address the challenges and opportunities our nation faces in promoting good nutrition and health for all children.

#### **Ensuring Program Access**

Streamlining these programs by fostering common program rules and policies is an important step toward minimizing administrative burdens for those who operate the programs and ensuring easier access for parents to enroll their children. Over the years, school cooperators have requested streamlining of the Child Nutrition Programs, noting that in order to provide the full array of year-round services that are offered, they have to participate in four programs, with four different sets of rules. Further, cooperators argue that the restrictions placed on each of the various meal services increase administrative costs and result in schools limiting the meal services offered to children in an effort to simplify administration of programs.

This Administration proposes to streamline the operations of the School Meals Programs under the auspices of one program, the School Nutrition Program. USDA expects that streamlined operations will permit schools to provide meals to children, 365 days a year. This proposal would allow schools to offer a full array of meals under one set of rules. Simplifying the administrative burden would allow schools to operate under one State administrative office and enable them to provide meals to children during vacations and holidays without having to apply for the Summer Food Service Program or the Child and Adult Care Food Program. We also recommend increasing the regular free and reduced-price breakfast rates to the severe need rate for all schools participating in the program.

We are interested in expanding access to the other programs that we administer, with a special focus on the Summer Food Service Program. This is one of my top priorities for FNCS. We are committed to improving access to nutritious food for children in the summer months, when school is not in session. FNS launched a major effort last year, along with providers and advocates, to expand the number of sponsors, feeding sites, and participants in the Summer Food Service Program, and we continue to work directly at the local level, selecting unserved or underserved counties to develop potential sponsors, sites and vendors for this program.

But to meet our commitment to improve access for all children who are eligible, we must work closely with our program partners; individuals and organizations in communities across America who deliver the nutrition assistance programs, and work to make the programs accessible and effective. Faith-based organizations have played an important role in raising community awareness about program services, assisting individuals who apply for benefits, and

delivering benefits. President Bush has made working with the faith-based community an Administration priority, and we intend to continue our efforts to reach out to that community.

#### **Healthy School Environment**

The prevalence of overweight and obesity among America's youth is an epidemic requiring immediate attention. The percentage of young people who are overweight has almost doubled in the last 20 years for children aged 6-11 and almost tripled for adolescents aged 12-19. And we know that overweight among children is the precursor to obesity, and its related health problems, among adults.

Obesity is one health issue that affects every single one of us – through our families, our friends, our communities, our workplaces, and even our taxes. It causes more health problems than smoking, heavy drinking, or even poverty.

The immediate reasons for overweight among our children are clear and uncomplicated: too many of them eat too much, they eat too much of the wrong things, and they get too little physical activity. But these seemingly simple factors are influenced by many forces – the too-easy availability of sugary, high-fat foods; enticement away from sports and exercise toward television and computer screens; the lack of strong programs of nutrition education and physical education in many schools – that contribute to the increasing numbers of overweight and out-of-shape children.

We all bear some responsibility for this problem, and we all have important roles to play.

Parents need to model healthy eating and physical activity; currently 6 in 10 adults are overweight, and children learn from what parents *do* at least as much as what they *say*. At the same time, parents must guide the choices of their children while they are too young to make informed choices alone. Families and communities can make healthy eating and exercise shared activities. Teachers can find ways to build nutrition and physical education into their curricula, and school administrators can work to create a healthy school environment. The media can help as well, by promoting nutrition and physical activity at times that truly reach children and their caregivers.

And, of course, the Federal nutrition assistance programs have an essential role to play. We operate programs in over 93% of the schools across the Nation, serving over 28 million children each day. And USDA has been working for more than a decade to do our part:

- As part of the President's *HealthierUS* Initiative, we are pursuing a vigorous nutrition promotion campaign, "Eat Smart. Play Hard.," to motivate healthy eating and more physical activity;
- We are promoting healthy eating right from the start by expanding breastfeeding promotion and support activities;
- We are expanding and improving program-based nutrition education, and other nutrition services to motivate people to eat healthfully; and
- We are working to encourage schools to establish healthy school environments that offer nutritious foods and increase opportunities for physical activity through

activities such as our *HealthierUS* Memorandum of Understanding with the Department of Health and Human Services and the Department of Education.

Additionally, USDA has worked with schools to more closely align the meals they serve with the *Dietary Guidelines for Americans*. Today, over 80 percent of NSLP schools offer meals that are consistent with good health. We have supported these changes by improving the quality, variety, and nutritional content of the commodities we provide to schools, and by providing food service workers with training and technical assistance to help them prepare more nutritious and appealing meals.

But there is more that we must do, and reauthorization offers us a prime opportunity.

- We support expanded funding to support the delivery of education messages and materials in schools.
- We support requiring schools to offer low fat milk as a beverage option for school meals.
- And we propose to establish a Healthy School Environment that supports the President's *HealthierUS* and No Child Left Behind initiatives through financial incentives to schools that choose to meet certain criteria.

And so, the Administration proposes a multi-departmental approach to implementing *HealthierUS* in schools which is outcome driven.

The Administration proposes demonstration projects in schools across the country that operationalize the four keystones of *HealthierUS*:

- Nutrition – Eat a nutritious diet;
- Physical Fitness – Be physically active each day;
- Prevention – Get preventive screening; and
- Avoid Risk Behaviors – Make healthy choices.

Critical to the demonstration projects is an evaluation component that will provide information regarding outcomes to inform future policy. School districts will be asked to volunteer for the demonstration projects, and will be offered incentives to support the implementation of *HealthierUS* in their schools. Understanding the importance of local choice, schools will be able to identify if they want to implement one or more of the four keystones – incentives will be attached to each keystone and a special “*HealthierUS*” designation will be awarded to those schools that implement all four. The Departments of Agriculture, Education, and Health and Human Services will coordinate to achieve the goals of the demonstration projects.

For example, to earn a “*HealthierUS*” nutrition incentive, a school could design a nutrition program that:

- Serves program meals that meet Federal nutrition standards;
- Offers *healthful* food options in vending machines, school canteens, and their a la carte menu service;
- Promotes the consumption of fruits and vegetables; and



- Delivers nutrition education and formally commits to the principles of good school nutrition.

Nutrition experts could decide the specifics of these and other potential criteria. But the thrust of our recommendation is to give good nutrition a fighting chance by financially supporting local schools that wish to take action to promote children's health. Such an action empowers parents, school administrators, teachers, local communities, and States to improve the health of their children – a proper role for government, and a wise investment in the future.

The challenge of obesity did not appear overnight; it will not be solved overnight, and we cannot solve it alone. But our responsibilities to promote the Nation's health demand action now. Without it, the problem will only get worse. The cost in increased health problems among future generations is a price that is too high to pay.

We look forward to working with the Committee to develop a demonstration project as we work to reauthorize the Child Nutrition Programs. The Federal government cannot create a healthy school environment on its own, nor can it mandate one to local schools. But it can offer leadership and support for schools and communities that are willing to invest in these efforts for the sake of our children. In conjunction with local school districts, we can use nutrition education and promotion to teach and motivate children to choose a healthy diet. We must also support local schools that make serious efforts to improve the school-eating environment and

promote physical education in the school's curriculum, and consider financial and other incentives to reward their successes.

Food safety has always been an integral part of food service for the Child Nutrition Programs and is an essential part of the healthy school environment this Administration supports. To promote food safety, we recommend requiring school food authorities to employ Hazard Analysis and Critical Control Point (HACCP) procedures in the preparation and service of meals to ensure the delivery of safe, nutritious food.

To assist us in ensuring that the meals served to children in schools, day care centers and summer programs are safe, the National Food Service Management Institute (NFSMI) at the University of Mississippi is a key resource for food-safety materials, education and training for food service personnel in our nutrition programs. Established by Congress in 1989, the Food Management Institute recently created a network of HACCP instructors to train school food service employees in HACCP principles, and developed a manual and teleconferences to train food service managers in responding to a food recall or emergency readiness crisis. It is vital that the food we serve in all of our nutrition programs be safe and nutritious under all conditions.

#### **Fighting Hunger and Obesity**

Does the epidemic of obesity mean that we have won the war on hunger? No. In spite of the success of our nutrition assistance programs, hunger remains a problem. In data for 2001, 3.5 million U.S. households were classified as food insecure with hunger. Low-income households may be eligible for more than one nutrition assistance program, but only five percent of eligible

families receive benefits from food stamps, school lunch, school breakfast, and WIC in the same year. The majority of households participate in only one program.

Hunger and obesity co-exist in the United States and are no more mutually exclusive than cancer and heart disease. The Federal government has a responsibility to address both, and we are committed to ensuring access both to enough food and to the skills and motivation to make healthy lifestyle choices.

#### **Program Integrity**

However ambitious our agenda for the Child Nutrition and WIC Programs, we cannot realize and sustain effective change without careful attention to program stewardship and integrity. This is true for two reasons. First, program waste and abuse divert taxpayer resources from investment in the improvements we seek. Second, and perhaps more importantly, we cannot sustain these programs without continued public trust in our ability to manage them effectively. For these reasons, I consider program integrity as fundamental to our mission as program access or healthy eating. Program reauthorization provides a tremendous opportunity to improve the program by decreasing benefits currently paid in error and reinvesting the savings in targeted initiatives that increase program access and improve the quality of meals.

As this Committee knows, a great deal of attention – and some conflicting information— has emerged in recent months regarding the accuracy of certifications in the National School Lunch Program. USDA has been examining this issue for a number of years, and while we do not have data that allow us to estimate the exact level of error in the program, we have clear

indications from a number of different sources that there are problems with the school meals certification process. Further, the evidence suggests that these problems have worsened over time.

Currently, households report their income on forms sent out at the beginning of the school year, and school lunch providers are required to determine program eligibility based on the data; only a small percentage of the information is verified. Improper certifications create the risk that nutrition assistance benefits intended for poor children go to those who are not eligible. Furthermore, data on children certified for free and reduced-price meals is used to distribute billions in Federal, State, and local education aid, so errors in this data can undermine targeting of essential services to those most in need.

It would be irresponsible for USDA not to take steps to address the problem, and we have a plan for action. But before I present it to you, let me emphasize that the Bush Administration is committed to ensuring that all eligible children have access to free and reduced-price meals. We have had a continuing dialogue with the Congress, the school food service community, and program advocates, and have been working to develop and test policy changes that improve accuracy but do not deter eligible children from participation in the program and do not impose undue burdens on local program administrators. The recommendations that we will pursue include:

- **Require direct certification for free meals through the Food Stamp Program.** As provided for in the President's budget, this would increase access among low-income

families and reduce the application burden for their families and schools. The process of direct certification is significantly more accurate than paper applications.

- **For those who must continue to apply through paper-based applications, enhance verification of those applications** by drawing verification samples early in the school year, with all verifications to be completed within 45 days; expanding the verification sample; and including both a random sample and one focused on error-prone applications in each school.
- **Minimize barriers for eligible children who wish to remain in the program by requiring a robust, consistent effort in every State to follow-up** with those who do not respond to verification requests. USDA would require that an initial contact to the household be in writing, and in the event of no response to the initial contact, multiple attempts at a follow-up telephone contact would be required.
- **Streamline the process for those who must still submit paper applications** by requiring a single application for each household.
- **Provide for year-long certifications in both paper-based applications and direct certifications**, eliminating the need to report income changes during the year.
- **Provide funding to support these new/enhanced administrative efforts.** Let me note that while we consider this enhanced verification process an important step to improve

integrity, we should not require that these expanded efforts be placed in the hands of already overburdened food service workers.

- **Initiate a series of comprehensive demonstration projects to test alternative mechanisms for certifying and verifying applicant information**, including use of wage data matching that identifies eligible and ineligible households and a nationally representative study of overcertification error and the number of program dollars lost to program error.

These recommendations include both strong steps that we can take immediately to address the issue, and a plan to continue research and demonstration efforts to build on these early steps with further improvements over time. Further, we expect to learn more about the problem of certification inaccuracy, and potential solutions in the coming months as the results of our research and analysis continue to emerge.

The Administration has committed to reinvest any savings that result from an improved certification system back into the program – and especially to the low-income children who rely on it. Our commitment to maintaining access to the program for these children is fundamental, and the proposal I have outlined offers a substantial response to the certification accuracy problem without jeopardizing children's eligibility, or unduly burdening our schools. I look forward to working with you to pursue these improvements.

**Special Supplemental Nutrition Program for Women, Infants and Children**

I would now like to talk about the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC). WIC has proven to be one of the most successful public health nutrition programs ever created by Congress.

Each month, WIC provides over 7.5 million at risk, low-income pregnant, breastfeeding and postpartum women, infants and very young children with supplemental food packages targeted to their dietary needs, nutrition education and referrals to health and social services. Nearly one-half of the infants born in this country receive WIC benefits.

The success of WIC is well documented. Participation in WIC leads to better pregnancy outcomes—fewer infant deaths, fewer premature births, and increased birth weights. Medicaid savings for newborns and their mothers in the first 60 days after birth average between \$1.77 and \$3.13 for every dollar spent on WIC. These results, we believe, are attributable to the unique design of the program, which is comprised of:

- A nutrition prescription that allows pregnant and new mothers to purchase food dense in nutrients that are often lacking in the WIC population;
- Individualized nutrition education and counseling; and
- Critical referrals to other health care and social service assistance programs.

As we study improvement to the WIC Program during reauthorization, the Administration is especially supportive of improving nutrition services and expanding Federal support for technology and innovation. In the area of technology and innovation, this

Administration would support \$30 million in annual budget authority. This money could be earmarked for WIC Management Information System (MIS) development and support. Many WIC State agencies are operating outdated systems. These funds would help to update and improve these systems, which are critical for effective program management.

Additionally, promising improvements would result from authorizing a national evaluation of WIC's effectiveness every five years; expanding the availability of breastfeeding peer counselors to provide support to breastfeeding mothers; and authorizing obesity pilot projects to evaluate whether WIC can help prevent childhood obesity.

#### **Conclusion**

Mr. Chairman, I appreciate the commitment and long-standing support of this Committee in recognizing the importance of good nutrition as part of an overall healthy lifestyle for all Americans. As we prepare to reauthorize the child nutrition programs, we are mindful of the critical contribution they make to life-long eating habits and good health.

But, the Federal government cannot – and should not – do this job alone. Meeting this challenge requires all of us...parents, family members, our schools, our communities, local and national organizations, industry and all levels of government, State as well as Federal.

Mr. Chairman, this Administration looks forward to working with your Committee in reauthorizing the Child Nutrition Programs and WIC to enhance their effectiveness and further their impact on the health and nutrition of families today and in the future.



This concludes my prepared remarks. I would be happy to answer any questions you might have at this time.

**Testimony Before the United States Senate Committee  
on Agriculture, Nutrition and Forestry  
March 26, 2003**

**James D. Weill, President, Food Research and Action Center**

Thank you for giving us at the Food Research and Action Center (FRAC) the opportunity to testify here today on the reauthorization of the child nutrition programs, with a special focus on the community-based programs. Our testimony will concern the nutrition programs for infants and preschoolers, and for school-aged children in the out of school hours.

These programs are:

- The Supplemental Nutrition Program for Women, Infants and Children – the program almost universally known as (and admired as) “WIC.”
- The Child and Adult Care Food Program (CACFP), which provides federal funds for nutrition for preschoolers in family child care homes, child care centers, and Head Start programs. CACFP also provides federal support for meals for children in domestic violence and homeless shelters.
- The afterschool food programs – CACFP provides support for snacks and suppers in afterschool programs; and the National School Lunch Program supports afterschool snacks in school-sponsored afterschool programs.
- The Summer Food Service Program (SFSP), which pays for meals and snacks for low-income children in summer programs operated by schools, other public agencies like parks and recreation departments, community-based non-profits, and other sponsors.

This Committee has had a long and effective bipartisan approach to the nation’s nutrition investments. You, Mr. Chairman, and Senators Harkin, Lugar and Leahy have helped lead the way to protecting and strengthening the child nutrition and food stamp programs.

Similarly, the Agriculture Appropriations Subcommittee, with leadership from you and Senator Kohl, has put together a series of positive child nutrition initiatives since the last full child nutrition reauthorization in 1998. Part of our testimony today will be about the need to build on those initiatives and pilots in summer food, school breakfast, and afterschool supper programs, among others.

We at the Food Research and Action Center look forward to working with this Committee, the entire Congress and the Administration to produce the best possible bill.

We also want to acknowledge the leadership and initiatives that Undersecretary Bost and his team at USDA have provided over the last two years – working hard to expand programs, simplify administration, and implement changes enacted by Congress in 1998 and since to boost summer, breakfast and afterschool participation, to reduce paperwork and to assure that more children in need get the benefits of these wonderful programs.

The child nutrition programs are just about the most effective federal investments that exist. As you proceed in reauthorization, we urge the Committee to remember at every point the enormous positive impact the programs have had in recent decades, are having now, and can have in the future on the physical, emotional, developmental, educational and economic well-being of low-income children, their families and their communities. A well-conceived reauthorization bill can build from these strengths. A well-conceived reauthorization bill can help the nation reach many important national goals – not just reducing childhood hunger and food insecurity, but improving prenatal care and child nutrition and health, enhancing early development, raising the quality of child care, strengthening rural communities and boosting rural development, increasing jobs and entrepreneurial opportunities, improving the achievement of children in school, providing safe havens for children in out-of-school hours, supporting welfare-to-work efforts, and providing critical help to the working poor.

This reauthorization is also a chance to build on the programs' strengths in order to tackle new health, demographic and workforce realities. As one example, many more low-income parents are working longer hours or nontraditional shifts. The need for before-school care, afterschool care that runs into the evening, and summer activities has become far greater, and therefore the need to adjust the nutrition programs to feed children in these hours has become urgent as well.

Similarly, the growing incidence of childhood obesity requires the reauthorization process to address how the programs can be strengthened in order to reduce obesity. As this Committee knows, there has been a tremendous increase in childhood obesity in recent years. This is terribly worrisome. Helping schools and out-of-school programs purchase more fruits and vegetables is one solution to the problem. But improving children's access to the nutrition programs is another. A range of studies show that children in the federally-funded programs eat more healthily than children who do not – who bring food from home in brown bags, or eat at home, or don't eat at all.

A handful of people have alleged that the nutrition programs provide too much food to children and contribute in that way to obesity. All the evidence is to the contrary. The studies show that children eating school breakfasts eat more healthily than other children. Children eating food under the CACFP program in preschools and child care centers eat more healthily than other children. The programs have healthy portion sizes – this is not where “supersizing” occurs.

Certainly the food choices that some schools or community programs make could be improved. Congress could help by increasing program resources, as well as by limiting the availability in schools of less healthy food, from other sources, that competes with the better food in the federal programs. But obesity is not a result of poor families or schools or community programs having too many resources for too much food. To say otherwise is just willfully ignoring the facts: the WIC food package for a child is worth \$40 per month; the federal support for an afterschool snack is 58 cents per child per day; the food in a school breakfast costs \$1.17

or less; in a school lunch, \$2.14 or less. (And the average food stamp allotment is 79 cents per meal per person.)

Indeed, emerging evidence shows that, among low-income people, hunger and food insecurity and obesity are tied together. Obesity can be, for the poor, an adaptive response to hunger, when poor people are unable to consistently get enough to eat throughout the month, so they eat more than they normally would during the periods that food is available. Low-income families and programs for children not only have limited resources but also often face limited food choices and higher prices in their neighborhoods. Resource constraints, not too much resources, are contributing to obesity.

The child nutrition programs contribute to reducing obesity in another way. By helping to fund, expand and improve recreation and other programs after school and in the summer, the programs keep children active and engaged, rather than sitting at home eating in front of a television. For example, nineteen out of twenty summer food programs are connected to some recreational or other activity. One study in California traced some obesity among low-income teens to the lack of organized afterschool programs and the teens' fear of being out in their unsafe community in unsupervised ways – these young girls just stayed at home to be safe. They need afterschool programs with good nutrition in them.

Before getting to specific recommendations, there are two other broad points I would like to make that apply to all of the community-based nutrition programs. First, many of the afterschool, summer and child care programs I will be discussing are operated by non-profits – frequently by faith-based groups. For example, some of the food banks that are part of America's Second Harvest are key providers of nutrition in afterschool programs. In some cases it is considerably harder to operate these programs if you are a non-profit than if you are a public agency. Some of our recommendations are to make it easier for community-based non-profits to participate.

Second, while I am here to testify about the community-based programs, the rules governing school breakfast and lunch are important factors in the health of the community programs. (A fuller list of our recommendations for all programs, including school-based programs, is in the appendix to our written testimony.)

For example, we continually hear from local officials how desperately children need school breakfast and lunch programs. Mayor Menino of Boston talks about how his city's schools try hard not to close on snow days if only because the low-income children so desperately need the food; and that the schools try to feed the children more on Friday before they go home to empty cupboards, and on Monday when they come in to school particularly ravenous. In Oregon this spring, as the fiscal crisis forces schools to operate only four days per week or add extra weeks of vacation, administrators and parents are deeply concerned not only about the educational damage but also the harm to hungry children when school meals programs aren't operating and the summer and other programs have to pick up the slack. These concerns

underline how critically important the community-based programs are to children after school and in the summer, and to pre-schoolers all day and year-round.

Also, some remedies to the so-called school lunch “overcertification” problem, if not the right ones, could harm the community programs as well. We believe both that the numbers being tossed around about “overcertification” are exaggerated and that some proposed remedies would drive substantial numbers of eligible children out of the program. (That position also is detailed in an attachment to our testimony.) But because one key entry point to federal nutrition funds for community-based programs turns on the number of children in the community eligible for free and reduced price school meals (when 50 percent of the children in the geographic area are eligible for free or reduced price school lunch, then preschoolers in the area are eligible for CACFP, and children in the area are eligible for summer food and afterschool snacks), any approach that inappropriately depresses school lunch participation will have negative “domino effects” in the community programs.

The school and community programs are also closely linked for preschoolers. As “universal preschool” programs grow in the years ahead, more and more young children will be spending part of the day in public schools and part of the day in child care. Making sure that providers can provide breakfast, lunch, snacks and suppers in a co-ordinated way to preschoolers in full day programs that operate both in schools and the community will be particularly important.

Our testimony details a range of changes that we urge Congress to make because they are important to the improvement of the child nutrition programs. It reviews each program, that program’s critical strengths, and priority improvements in that program. But it may help if we summarize at the outset some of the highest priority, modest cost, priorities for reauthorization this year.

#### Urgent Priorities for New Investments in Child Nutrition Reauthorization

1. Improving the Summer Food Service Program by making the "Lugar" Summer Food Pilots nationwide for all sponsors. Everyone agrees that more children need summer meals, but the program is hard to operate. In 2000, Congress initiated a pilot program (proposed by Senator Lugar) that allowed 13 states and Puerto Rico to improve use of the Summer Food Service Program by simplifying cost accounting requirements for public sponsors (e.g., schools, government agencies), thereby reducing paperwork and allowing de facto a modestly higher reimbursement for meals and snacks provided under the program. Summer food participation increased by almost nine percent between 2000 and 2001 in the pilot states, reversing three consecutive years of declines. In contrast, participation decreased in the rest of the nation by more than three percent. There is broad support for expanding the pilots nationwide to all states, and to all sponsors (both public and private nonprofit).

2. Improving the area eligibility test from 50 percent to 40 percent. For many children

program eligibility depends on the proportion of children in their geographic area (usually the school catchment area) eligible for free and reduced price school lunch. In summer food, afterschool snacks, and CACFP for preschoolers in family child care, providers are eligible for full reimbursement if 50 percent of children in the area are free or reduced-price eligible. The test used to be considerably better for summer food (33 1/3 percent), and also, until 1996, for CACFP (all children in the program were eligible for the highest reimbursement). The 50 percent test has a particularly negative impact in rural areas, and also has pushed major declines in CACFP family child care participation. Making the test 40 percent (a change Congress made last year in the Title I education programs and the 21<sup>st</sup> Century Community Learning Centers afterschool program) would be an important step forward.

3. Making school breakfasts available to more children. Only 43 low-income children in the U.S. eat school breakfast for every 100 who eat school lunch. School breakfast programs are critical to student achievement, and recent studies show that offering breakfast free of charge to all children in a school, rather than just to the low-income children, further improves student achievement, behavior and attendance. It does so in part by pulling more low-income children into breakfast as the stigma applied to a program otherwise seen as being "just for poor kids" is removed. Different strategies need to be tried here, including: (1) making breakfast available at no cost to all children in a targeted set of schools – those that already have high percentages of children receiving free and reduced price meals (i.e., lower income schools, especially at the high school level where the stigma is greatest); and (2) providing funds for breakfast expansion and start-up efforts.

4. Making suppers available at afterschool programs in low-income areas. As TANF and changes in the economy and other public programs result in longer hours of work and often work in nontraditional hours for low-income parents, afterschool programs more and more have to operate into the early evening. Seven states can currently use federal nutrition funds to pay for suppers as well as snacks for all the children in afterschool programs in low-income areas. This pilot has been very successful, and should now be extended to all states. It helps provide what parents and children need: programs that offer a safe place with nutritious food and a caring environment for all the hours parents are at work and commuting.

5. Increasing access to the Child and Adult Care Food Program. CACFP is a key support for quality affordable care for school age and preschool children. It provides reimbursements for meals and snacks, nutrition standards and training. CACFP sponsors supporting nutrition in family child care need more help for their quality improvement and nutrition education efforts. Also, for-profit child care centers have as a general rule not been eligible to participate in CACFP, but in recent years those for-profit centers with 25 percent or higher of the children being low-income have been eligible through a yearly appropriations process. Such year-to-year decisions make planning harder and discourage participation. The rule should be made permanent. USDA's evaluation of the original for-profit center demonstration project showed that centers participating in the food program began serving complete breakfasts, more fresh fruits, and higher quality meals. The for-profit participation is particularly helpful in Southern

states.

6. Making all children in homeless shelters eligible for reimbursements for meals and snacks through CACFP. Currently homeless shelters can be reimbursed for meals and snacks served to homeless children in residence up to the age of 12 years. It makes sense to extend this provision up to the age of 18, to help shelters serving vulnerable runaways, and to provide meals for all children whose families reside in homeless and domestic violence shelters.

The remainder of our testimony reviews the strengths of each of the child nutrition programs that functions primarily through community-based providers, and gives recommendations in more detail.

#### Afterschool Food

Afterschool experts agree that food is a very important part of any afterschool program, but it is also a very costly part. USDA's afterschool snack and supper funds provide the means for local programs to give children the nutrition they need to continue learning after a long day at school. Additionally, the food acts as a magnet drawing children and youth into quality educational and enrichment programs that keep them safe and out of trouble during the afterschool hours when they are most likely to commit crimes, be the victims of crime, experiment with drugs and alcohol, or become pregnant.

While the afterschool snack program pre-dates 1998, the 1998 child nutrition reauthorization act made federal funds for snacks available to afterschool programs with less paperwork and expanded eligibility. The Child and Adult Care Food Program was changed to allow afterschool programs located in low-income areas where 50 percent or more of the children are eligible for free or reduced-price school meals to feed school-age children 19 and under a snack. Schools were given the option of providing snacks to children age 18 and under through the National School Lunch Program, on the same area eligibility basis, which substantially decreased the paperwork for schools.

Over the past few years, Congress also created an afterschool supper pilot program for seven states –Delaware, Illinois, Michigan, Missouri, New York, Oregon, and Pennsylvania. The suppers are available through the Child and Adult Care Food Program under the same area eligibility rules as snacks, also for children 19 and under. Programs operating for more than three hours can serve a supper and a snack.

To ensure that afterschool programs are able to provide the nutrition children need, the afterschool supper program needs to be expanded nationwide. Almost 15 percent of all men and 11 percent of all women who are full-time wage or salary workers with children under the age of 18 (over 5.2 million parents) work evenings, nights, a rotating or split shift schedule, or on an employer-determined irregular schedule, and this number will only increase as more women make the transition from welfare to work and often do so through jobs that require non-standard hours. Many

afterschool programs are operating longer hours or running later to meet the needs of low-income working parents, which require that children receive a supper in addition to or instead of a snack.

By providing a meal, afterschool programs are more likely to give children in care for several hours the nutrition their bodies need. A more substantial amount of food is even more important for teenagers, who are wholly ineligible under federal rules for suppers except in the seven pilot states.

This supper pilot is only available through the Child and Adult Care Food Program, but not through the National School Lunch Program (for school-sponsored afterschool programs). We ask the Committee both to make the supper program available in all states, and to expand it to allow schools to provide such meals through the National School Lunch Program. It is extremely burdensome for schools to use CACFP for suppers – to participate in multiple child nutrition programs.

Another change that is crucial to improving access to afterschool snacks and suppers, as discussed earlier, is to decrease the area eligibility test from 50 percent to 40 percent. Making this change is especially important for rural communities that do not have the same pockets of poverty found in urban areas. Due to the large catchment areas of rural schools, even communities with considerable poverty have trouble meeting the 50 percent test. Lowering the threshold to 40 percent would also bring the program in line with federal education programs designed to serve low-income children, such as 21<sup>st</sup> Century Community Learning Centers, which are exactly the programs that should be utilizing afterschool snacks and suppers. Indeed, such centers should have categorical eligibility for afterschool and summer nutrition programs so they would have less paperwork and could help more children.

There are a number of other steps that need to be taken to expand participation and ease administrative burdens. Many programs and schools report that the afterschool snack reimbursement does not cover the costs of providing the snack. A modest increase in reimbursement is badly needed.

As mentioned, programs receiving federal funds (directly or through state or local agencies) to operate afterschool or summer programs should be automatically eligible to participate in the afterschool snacks and suppers program and the Summer Food Service Program, and required to participate as a condition of receiving the underlying federal assistance. Similarly, summer food sites should be automatically eligible for afterschool snacks and suppers if they operate during the school year. Currently, the eligibility rules are slightly more expansive for summer food.

#### Summer Food Service Program

Working parents across the nation are concerned about what their children do when school lets out for the summer. Families struggling to make ends meet face additional worries – without



access to the regular school meal programs, they may not have enough food during the summer for their children to eat well, or sometimes at all. Food banks report significant increases in requests for emergency food from families with children during the summer. Fortunately, the Summer Food Service Program (SFSP) is available to fill this gap. The SFSP reimburses schools, local governments, nonprofit organizations, and others for meals and snacks served to low-income children when school is not in session.

The benefits of the SFSP extend beyond nutritious meals. A USDA evaluation showed that 95 percent of summer food sites provide activities for children as well as nutrition. Children left unsupervised have an increased risk of getting into trouble, and research shows that summer enrichment programs can improve student achievement. Yet school districts nationwide are facing budget cuts that will reduce or eliminate their summer programs, even though school districts are coming under more pressure to ensure that all students meet standardized testing goals. In this context, summer programs are essential to leveling the playing field for all students. The meal reimbursements from the SFSP provide crucial and dependable financial support and draw children to these important summer activities.

On a typical school day, approximately 15.9 million low-income children participate in the National School Lunch Program. Yet on a typical day in July 2002, only about 1.9 million children participated in the SFSP. State agency directors and staff responsible for SFSP coordination tell FRAC the top obstacle is that paperwork is too burdensome. To ease paperwork and increase participation in the SFSP, Senator Richard Lugar sponsored and Congress enacted a pilot project in 13 states and Puerto Rico that began in 2001. The first two summers of the pilot show that, taken as a whole, the pilot jurisdictions increased the number of children participating in the SFSP, reversing three consecutive years of decline before the pilot began, while participation in other states fell. To build upon this success and encourage greater participation in the SFSP, Congress should make the Lugar pilots national and available to all SFSP sponsors.

Another top obstacle to SFSP participation cited in the FRAC survey of local officials was "Area eligibility percentage is too high," referring to the fact that sites cannot qualify as "open sites" for the SFSP unless at least 50 percent of the children in the area are low income. The test used to be 33 1/3 percent. The No Child Left Behind Act lowered the percentage of children from low-income families required for schools to be eligible for Title I school wide funding from 50 percent to 40 percent. So, not only would more communities be eligible to have SFSP sites, especially in rural areas, if the area eligibility threshold for SFSP participation were lowered from 50 percent to 40 percent, but changing the percentage to 40 percent would also bring harmonization across programs that provide educational and nutritional funds to communities in need.

Sponsors and sites also would be more likely to participate if special funds were made available to reach underserved areas. These funds could help pay for transportation, start-up and outreach costs faced by programs, especially those in rural areas.

### CACFP

The Child and Adult Care Food Program is key to good nutrition and quality affordable child care which allows children to develop fully, prepares children to enter school ready to learn, and helps low-income parents work. The program provides reimbursement for food and meal preparation costs, ongoing training in the nutritional needs of children, and on-site technical assistance in meeting the program's strong nutritional requirements. Each working day, the Child and Adult Care Food Program provides high quality nutrition and learning experiences for more than 2.7 million children in family child care homes, child care centers and Head Start programs. (Family child care providers operate a licensed or regulated child care business in their homes.)

CACFP is a well documented success. Research has shown that children in child care participating in CACFP receive more nutritious meals and snacks. Studies also have shown that participation in CACFP is an indicator of quality family child care. This is especially important to help meet the increased need for quality affordable care to support the efforts of families moving from welfare to work.

Child care plays a central role in shaping the nutrition habits of young children. Since many of the habits learned in the preschool years will last a lifetime, access to CACFP should be increased as a way of helping to make sure these nutrition habits are good ones. CACFP helps keep child to provider ratios low, gives parents nutrition education, and provides a great deal of provider-parent contact.

The need for affordable quality care is growing, and the need for good nutritious meals and healthy habits has never been greater; we urge Congress to make the targeted improvements needed to reach the millions of children who could benefit from CACFP but are currently unserved. Those improvements are needed in CACFP in family child care, in early education programs, and in centers.

#### Family Child Care:

As part of the 1996 welfare law, the CACFP unitary reimbursement rate system in family child care was dismantled and replaced with a two-tiered, means-tested system. As a result of the means test, reimbursement rates for nutrition for children from families with income over 185 percent of the poverty level were cut in half.

Before the implementation of the means test, the family child care portion of CACFP was one of the fastest growing federal food programs. Since the implementation of the means test, the number of family child care homes, children, and meals and snacks served in family child care homes through CACFP has been declining steadily – far beyond what Congress anticipated in 1996.

Since the implementation of the means test, there has been a 14 percent drop in the number of family child care homes participating in CACFP, and a 7 percent drop in the number of children and meals and snacks served through CACFP in family child care homes. In fact, in comparison to USDA projections of what growth would have been in CACFP in family child care homes without the means test, the program served a quarter of a billion fewer meals and snacks in FY 2002 than was expected. These drops happened even while the number of low-income children with parents in the workforce rose rapidly. And when homes drop out of CACFP, often they then are not monitored and revert back to an unregulated status.

We are not today recommending elimination of the means test, but we do recommend helping working families work by clearing away some of the unnecessary paperwork, making critical adjustments to the system and providing support for reaching out to bring CACFP to more child care providers and children.

We need to improve CACFP's ability to reach low-income families by reducing the area eligibility threshold in family child care from 50 percent to 40 percent. Currently, areas qualify if the local school has at least 50 percent of the children qualifying for free and reduced price lunch (families with income below 185 percent of the poverty level), a level difficult for some areas to meet. A state-funded CACFP quality initiative in Washington state which extended higher reimbursement rates to homes in areas with schools meeting the 40 percent cut off increased the number of eligible neighborhoods by 40 percent. Expanding area eligibility is particularly important for reaching family child care providers in rural areas. The distribution of poverty in rural communities makes meeting the 50 percent area eligibility cut-off more difficult than in highly concentrated urban areas.

We also need to assure that CACFP sponsors (the non-profit organizations that administer CACFP to family child care home providers) have the resources needed to focus on important nutrition education and support services that have been pushed aside by an avalanche of means test paperwork. CACFP sponsoring organizations' per home administrative reimbursement rates should be increased to allow the program's tradition of excellent nutrition education to continue.

The final reimbursement rates adopted in 1996 for families with income over 185 percent of poverty were considerably lower than those initially proposed, and the new means test system, with these reduced rates, has had the unintended consequence of driving providers from the program. We need to adjust the system by raising the Tier 2 reimbursement rates to assure that they are at least minimally adequate to make it worthwhile for providers serving homes with a mix of children from low-income and middle-income families and homes serving middle-income children to participate in CACFP.

We also need to build on the successes to date of USDA's Management Improvement Initiative in strengthening and supporting CACFP by making the Initiative permanent, increasing funding, and including a focus on making program management more efficient and reducing barriers to participation. Paperwork is a significant barrier to participation in CACFP. Providers

need reasonable CACFP record-keeping requirements that allow accountability without being overwhelming.

#### Early Education Initiatives:

As early education initiatives have increased, so too has the importance of strengthening the federal food programs to support these efforts. If there is no provision for adequate nutrition, learning readiness is a hollow promise for children. Hungry or undernourished children can't learn and grow, nor do they feel secure and safe. A good mealtime not only provides good nutrition but also is a learning laboratory for many developmental tasks for young children. Federal nutrition programs and funds therefore are essential to the school readiness and child development goals that often underlie interest in expanding early education.

The school nutrition programs (school lunch and breakfast) and the summer food program, as well as the Child and Adult Care Food Program, can be used to feed young children and to support their education and healthy development in a variety of preschool settings. A number of barriers currently exist for some programs seeking to use the federal nutrition programs. For example, many preschool programs that operate all-day or year-round face significant barriers trying to patch the programs together to cover all the children all the time because the eligibility and operational requirements, including contracts, meal service options, meal pattern requirements and reimbursements, are all different for the different programs. Some of these barriers could be addressed by streamlining the National School Lunch Program, School Breakfast Program and CACFP to support the needs of children in school-based preschool programs by extending school meal program benefits year-round and to holidays, and including the option of a dinner and snack meal service without limiting eligibility or lowering reimbursements.

In addition, Congress needs to increase access to CACFP in child care centers and early education programs by making a number of other important changes. Extending categorical income eligibility to include State-supported Head Start and Even Start programs in addition to the federally-funded Head Start programs will smooth participation for State-funded programs. CACFP centers also should be allowed to offer the option of a third meal for children in child care centers for more than eight hours.

#### For-profit Centers:

As indicated earlier, making permanent the current temporary extension of CACFP eligibility to children in for-profit child care centers serving 25 percent or more low-income children will also help support early education efforts. Currently one half million children in for-profit centers rely on nutritious meals and snacks paid for by CACFP. The temporary rule giving CACFP eligibility to a for-profit child care center if 25 percent or more of its children are low-income has allowed this portion of the program to grow substantially. In the absence of this special rule, for-profit centers are not eligible for CACFP unless the state puts Title XX Social

Services Block Grant funds into the center to support at least one quarter of its children.

### WIC

Pregnancy and early childhood are critical periods for good nutrition. The special importance of the WIC Program in preventing and treating nutrition problems during these critical periods has been widely recognized for almost three decades. But science in recent years has underlined the central importance of good nutrition – and hence, of WIC.

WIC currently serves 7.5 million low-income women, infants and children—in county health departments, hospitals, mobile clinics (vans), community centers, schools, public housing sites, migrant health centers, and Indian Health Service facilities. WIC professionals evaluate nutritional risk factors for each participant, provide a monthly food package and nutrition education (which includes instruction on breastfeeding and child development as it relates to feeding children) targeted to the participant's needs, and refer each participant to other necessary health care and social services.

Extensive research has demonstrated that WIC improves the health of nutritionally at risk low-income women, infants and children. WIC has improved prenatal care, pregnancy outcomes, anemia, nutritional intakes, and food security for millions of vulnerable women and children. This translates into improved quality of life, a foundation for long-term good health, and children entering school better able to learn. WIC services also translate into dollars saved in the federal budget and state budgets -- it has been estimated that every dollar spent on WIC results in savings of between \$1.77 and \$3.13 in Medicaid costs for newborns and their mothers.

We are very concerned that potentially eligible WIC participants have full access to the program and its services. We would like to raise three important issues that we believe could make a crucial difference in meeting this goal.

- Certification periods for mothers and young children in WIC should be extended to one year. Currently, infants are certified for one year, but mothers and young children must be re-certified every six months. This leads to unnecessary clinic visits, lack of coordination with health care services, and unnecessary invasive blood work . This change would also allow for more counseling time and less paperwork.
- Changing times make it essential for the WIC Program to improve program access for working families – through outreach, extended office hours, and out-stationed staff. More mothers of young children are working outside the home. Often their work hours are inflexible, and their ability to leave the workplace for health care and nutrition services is very limited. This situation requires WIC to make special efforts to provide program services when and where women and children can come.

- WIC funding should ensure that the program continues to achieve excellent results through its nutrition education services. Many WIC programs do not have sufficient resources to fully fund important nutrition counseling and education.

Finally, we believe, for all the reasons cited in this testimony, that WIC should be structured to ensure that all eligible women, infants and young children are able to participate. This has been much discussed over the years, but inevitably runs into “cost constraints.” But given the proven success of WIC, its cost-effectiveness and its critical role in the lives of young children, if we can’t make WIC available to every eligible person in need of its services, our national priorities on where to spend money are misplaced. We think it is time for Congress to begin to seriously consider this question and the options that would allow all eligible people to participate.

#### Nutrition Education

The child nutrition programs present opportunities for positive modeling of healthy and nutritious meals, from birth through the teen years. To support and take full advantage of these opportunities, increased funding is essential to ensure the availability of effective nutrition education that teaches children, over the course of their preschool and school years, how to make healthy lifelong choices for themselves. Enhanced nutrition education funds could make nutrition education more possible in schools, family child care homes and child care centers, and in the WIC Program.

#### Homeless Children

Federal food programs provide important support to children in homeless and domestic violence shelters. It is critically important that barriers to the food programs be reduced for this at-risk population. A report released by the Urban Institute estimated that at least 2.3 million adults and children are likely to experience a spell of homelessness at least once during a year. Families with children represent the fastest growing segment of the homeless population, according to the National Coalition for the Homeless.

Homeless children are more likely to be hungry or undernourished than other children, including poor, housed children. Hungry or undernourished children are less healthy, less focused, and pay less attention in school, often resulting in educational and behavioral problems, exacerbating the deleterious effects of homelessness.

Homeless shelters, domestic violence shelters and some transitional housing providers can use the federal Child and Adult Care Food Program as a resource for feeding children. Unfortunately, however, there is a 12 year age limit on this CACFP component. This means that some children in families aren’t covered while other children in the same family are. It also means that teenage runaway shelters can not use the program. By allowing homeless and

domestic violence shelters to serve meals through CACFP to children up 18 years of age, rather than just up to 12 years old, Congress could significantly increase the reach of this valuable program.

Conclusion

In 1946, Congress passed the National School Lunch Act as a “measure of national security, to safeguard the health and well-being of the Nation’s children and to encourage the domestic consumption of nutritious agricultural commodities.” Since then, these goals have remained paramount, and Congress frequently has responded by improving the child nutrition programs—initiating and strengthening WIC, school breakfast, lunch, summer, child care food and afterschool food programs—to better serve children and families, and adjust to changes in our families, workplaces, schools, and communities. We at FRAC believe that the priorities raised in this testimony are key to continuing this effective and essential endeavor to help to ensure good nutrition and health for all our children.

Thank you for the opportunity to speak with you today. I welcome your questions and the chance to contribute to your deliberations on this year’s reauthorization of the child nutrition programs.

Appendix

I. FRAC Priorities for Child Nutrition Reauthorization 2003

II. Child Nutrition Policy Brief – “Overcertification.”

III. Selected Studies Showing that Child Nutrition Programs Improve Nutrition, Development,  
and Education



## ***FRAC Priorities for Child Nutrition Reauthorization 2003***

### ***New Opportunities to Improve Children's Nutrition, Development, Health, Learning and Family Economic Well-being***

The expected 2003 reauthorization of the child nutrition programs (School Breakfast and School Lunch, WIC, the Summer Food Service Program, and the Child and Adult Care Food Program for children in child care centers, family child care homes, afterschool programs and homeless and domestic violence shelters) presents substantial opportunities to achieve important national goals. A well-conceived reauthorization bill can help reduce childhood hunger, improve prenatal care and child nutrition and health, reduce obesity, enhance child development, raise the quality of child care for low-income families, increase jobs and entrepreneurial opportunities for low-income women, get young children ready for school, improve the achievement of school-age children, and support the efforts of low-income families to make the transition from welfare to work.

These opportunities exist because the child nutrition programs are fundamentally sound investments that already help accomplish these goals. But they are not flawless investments, and they can do much more. The following recommendations, if adopted, would qualitatively improve the programs, help them better achieve all these goals, and give an important boost to America's children.

#### **1. Every child should have an equal chance at success in school. Making school breakfast programs more broadly available to schoolchildren will help our nation achieve this goal.**

The experience of the last several years has shown that offering breakfast free of charge to all children in a school, rather than just to low-income children, improves student achievement, behavior and attendance. Also, breakfast for all pulls more hungry, low-income children into the programs as the stigma applied to a program "just for poor kids" is removed.

There are a number of ways to broaden the availability of breakfasts, including:

- ▶ Grants for breakfast pilot programs open to all children at no charge in states with the lowest School Breakfast Program participation among low-income children;
- ▶ A competitive grants program to pay part of the cost difference for the reduced price and paid meals in schools that want to provide breakfast through Provision 2;
- ▶ A broad universal breakfast initiative for children in particular grades;
- ▶ Universal breakfast in those schools with a higher percentage of children receiving free and reduced-price lunches.

The other essential step is to help more schools operate successful school breakfast programs under the existing program and do so for more children.

Two ways to achieve this goal are:

- ▶ Facility grants for start-up, expansion, outreach, and adoption of breakfast in the classroom;
- ▶ Removing the unwieldy cost accounting requirement for severe need schools so that the lowest income schools can receive more easily the small but important additional reimbursement for breakfasts they serve.

**2. More children in care outside school hours should have access to nutritious meals and snacks year-round so they can learn, play, and be safe while their parents work.**

The strength of child care and nutrition programs for both preschoolers and school-aged children becomes increasingly critical as more low-income children have both parents or the custodial parent working, many with lengthy commutes, and long and/or non-traditional hours. Although there has been some progress in the last few years, the child nutrition programs must become a stronger support for school-aged child care programs both during the school year and in the summer.

- ▶ The area eligibility threshold for both Child and Adult Care Food Program (CACFP) afterschool programs and the Summer Food Service Program (SFSP) should be lowered from 50 percent to 40 percent.
- ▶ The CACFP afterschool supper option, based on area-eligibility and currently operating in seven states, should be expanded to all states. Additionally, schools should be allowed to serve supper on this basis to children through the National School Lunch Program (NSLP).
- ▶ Summer Food Service Program (SFSP) sites, both open and enrolled, should be automatically eligible to offer afterschool snacks and suppers during the regular school year.
- ▶ Programs receiving federal funds (directly or through state or local agencies) to operate after-school or summer programs should be automatically eligible to participate in the afterschool snacks and suppers program and the SFSP, and required to participate as a condition of receiving the underlying federal assistance.
- ▶ The rules of the “Lugar” Summer Food Service Program pilot, now operating in 13 states and Puerto Rico, should be the basic operating rules for all sponsors in all states and the District of Columbia.
- ▶ The SFSP “seamless waiver,” which allows schools to feed children during the summer through NSLP, should become law and be available to all schools.

- ▶ Grants should be provided to underserved areas for transportation, start-up, and expansion of SFSP and afterschool snack and supper programs.

Many SFSP and afterschool snacks program sponsors report that even the best-managed programs have difficulty paying for the costs of running these programs at the current reimbursement levels.

- ▶ The true costs of these programs should be evaluated. Based on the study results, an increase in the reimbursement rates for these programs should be part of the Administration's and Congress' agenda.

**3. It is vital that we meet the developmental needs of very young children. Good nutrition and quality child care are essential to the healthy development of preschool children. The Child and Adult Care Food Program in family child care homes and child care centers promotes both, which allows children to develop fully, prepares children to enter school ready to learn, and helps working families work.**

Key steps to ensure that children in family child care get the strongest start possible include improving CACFP's ability to reach more low-income families by:

- ▶ Reducing the area eligibility threshold in family child care from 50 percent to 40 percent;
- ▶ Reducing paperwork by extending CACFP categorical eligibility to beneficiaries of means-tested, federally funded programs that support working families, such as Medicaid/SCHIP and child care subsidy programs.

Sponsors need the resources that let them focus on important nutrition education and support services – services that have been pushed aside since 1996 by an avalanche of means test paperwork. This can be accomplished by:

- ▶ Establishing an incentive grant program for using CACFP to improve children's nutrition and child care quality. Initiatives would include:
  - Enhancing CACFP nutrition education, including obesity prevention, focusing on food and activity, anemia prevention, and food safety;
  - Producing models and materials addressing language and cultural issues for serving special populations, including immigrant communities;
  - Creating outreach partnerships;
  - Making innovative use of technology to improve program access and nutrition education;
- ▶ Increasing sponsoring organizations' administrative reimbursement rates to reflect the increased administrative burden of the means test.

Some areas require additional time and resources to best serve the target communities. Rural areas need more resources for transportation; certain low-income areas require two-person monitoring teams; other areas need additional assistance to help low-income families and providers overcome language and literacy barriers in order to participate in CACFP.

- ▶ Sponsor reimbursement rates for serving family child care homes in rural and low-income areas should be supplemented to strengthen CACFP to cope with these circumstances.

The final rates adopted for Tier 2 CACFP family child care were considerably lower than those initially proposed, and the new means test system with these reduced rates has had the unintended consequence of driving providers from the program.

- ▶ Tier 2 reimbursement rates should be increased to assure that they are at least minimally adequate to make it worthwhile for providers serving homes with a mix of children from low-income and middle-income families to participate in CACFP.

It is important to build on the successes of USDA's Management Improvement Initiative by:

- ▶ Making the initiative permanent;
- ▶ Increasing funding;
- ▶ Focusing on making program management more efficient and reducing barriers to participation. This would include:
  - Streamlining program and paperwork requirements;
  - Developing models for maximizing the use of technology for program operations, nutrition education and training;
  - Creating partnerships with the U.S. Department of Health and Human Services and the U.S. Department of Education to strengthen quality child care and early education efforts using CACFP;
  - Improving program recruitment and retention.

CACFP State Agencies should be assured access to the resources necessary to continue to successfully administer this complex program.

Key steps to ensure that children in child care centers get the strongest start possible include:

- ▶ The current temporary extension of CACFP eligibility to children in for-profit child care centers serving 25 percent or more low-income children should be made permanent;
- ▶ CACFP should offer a third meal for children who are in child care centers for more than eight hours a day;
- ▶ State-supported Head Start and Even Start programs should be categorically eligible.

In order to meet the child nutrition program needs of school-based preschool programs:

- ▶ The National School Lunch Program, School Breakfast Program and CACFP for these preschool programs should be streamlined by extending benefits year-round (including holidays if the preschool is open) and including the option of a dinner and snack meal service without limiting eligibility or lowering reimbursements.

**4. Pregnancy and early childhood are critical periods for good nutrition. Numerous evaluations of the WIC program demonstrate its positive impact on children's health and development.**

WIC funding should be structured to ensure:

- ▶ All eligible women, infants and young children are able to participate;
- ▶ WIC continues to achieve excellent results by fully funding WIC nutrition services; and
- ▶ Access to WIC with a particular focus on reaching working families through outreach, extended office hours, and out-stationed staff.

**5. "Streamlining" of child nutrition programs is desirable when it makes it easier for program sponsors and children to participate in the programs, while maintaining the federal framework and the availability of the current programs.**

- ▶ Schools and sponsors should be able to fill out one application in order to be approved to operate all the child nutrition programs for which they are eligible;
- ▶ Families should be able to fill out one application for all their children to participate in any of the child nutrition programs;
- ▶ A child nutrition program sponsor that feeds children year-round should be able to do it the entire year with one program, rather than being required to change over to another program for several months or weeks;
- ▶ The number of allowable meals and snacks should be based upon the amount of time the program operates and children are being cared for, with programs being eligible to serve a maximum of three meals and one snack;
- ▶ Each program (other than WIC) should allow all children 19 years and under to participate.

**6. Schools should improve the nutrition environment where children consume meals and snacks.**

- ▶ The Secretary of Agriculture should have the authority to control the sale of competitive foods throughout the school, from the time school opens in the morning until the end of the last lunch period, to ensure that the healthfulness of foods offered to children is optimal.
- ▶ In addition, USDA should recommend, based on research, the optimal amount of time that children should be provided for the consumption of breakfasts and lunches. States should be encouraged to set a minimum amount of time for meal consumption in schools based on this research.

**7. Some of our most vulnerable children are homeless, many living in homeless and domestic violence shelters. It is essential that their nutritional needs be met every day.**

- ▶ Homeless and domestic violence shelters should be allowed to serve meals through CACFP to children up to 18 years of age, rather than just up to 12 years old.
- ▶ The changes made by the April 4, 2002 USDA guidance regarding homeless children's eligibility for the National School Lunch Program (NSLP) and the School Breakfast Program should be permanently included in legislation. Homeless children should be made categorically eligible for school meals.
- ▶ The NSLP's definition of homeless children should be brought up to date with the McKinney-Vento Act, including children whose families are "doubled up" with another family, and children whose families are living in a motel, car, campground or an emergency shelter.
- ▶ In keeping with the McKinney-Vento Act's establishment of local homeless education liaisons, these liaisons, in addition to homeless shelter directors and local officials, should be able to document a child's homelessness and subsequent eligibility for free school meals.

# *CHILD NUTRITION POLICY*

## *BRIEF*

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Food Research & Action Center 1875 Connecticut Ave. NW, Suite 540 Washington, DC 20009

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### Overcertification

The recent debate over school lunch “overcertification”:  
Unclear data and ill-considered proposals are a threat to eligible  
low-income children

Recent articles in the press have suggested that as many as one in five children who are certified as eligible for free school lunch may in fact be ineligible because the family’s income may be too high. This U.S. Department of Agriculture (USDA) overcertification estimate is being cited in some quarters to justify sweeping income verification proposals for children in the free and reduced-price school lunch program. But there are good reasons to believe that the estimate is unreliable, and that the cures being proposed will deny school lunch to hundreds of thousands – perhaps more than a million – eligible low-income children.

The extent of “overcertification” in the school lunch program is unclear. USDA’s methodology is unreliable and its estimates appear to overstate the problem significantly.

Schools are required to verify the income of a small percentage of school lunch applicant families every year, but they do not have to report the results to USDA. USDA’s estimates therefore are not based on the actual studies, but a dubious extrapolation of national Census data. Looking at the USDA methodology suggests it is not certain that a significant overcertification problem exists at all.

- **USDA’s estimate of overcertification virtually disappears when it counts reduced-price as well as free lunches.** When the number of children certified for both free and reduced-price school lunch combined is compared with the corresponding Census data, the difference is only two percent.
- **USDA’s estimate compares apples and oranges.** USDA compares one data set (from the Census) that uses annual income to estimate the number of potentially eligible children with another based on monthly income (actual free school lunch certifications). But many low-income families experience income fluctuations from month to month – in one study of school lunch 15 percent of the children correctly certified in the fall had family income increases above the income

*CHILD NUTRITION POLICY BRIEF***Overcertification**

limit by the following spring. A National Research Council report on measuring poverty points out that, in counting the number of people eligible in a means-tested program, "the shorter the accounting period, the higher the poverty rate." USDA's estimate also relies on comparing Census data from one calendar year (1999) with free school lunch certification numbers from an earlier year (1998) during a period of rising income. Thus, some families eligible for free school lunch at the beginning of the school year would have had income above the eligibility limit by the end. When Census and free school lunch certification data from the same calendar year are compared, up to one quarter of the overcertification estimate disappears.

**Some income verification proposals would do far more harm than good.**

Some reports have indicated that the Bush administration may propose that all 16 million children will have to prove how little their families earn before being allowed to eat free or reduced-price school lunches. Such sweeping income documentation requirements would likely cause far more eligible than ineligible children to lose the benefits of school lunch and school breakfast.

- Income verification demonstration projects carried out by USDA found that, when income documentation is required, far more eligible low-income children are diverted from free or reduced-price lunch than ineligible children are deterred. Lost paperwork, language problems and all the other complications of broad income verification make such an effort a very imprecise tool in school lunch. Two national school lunch studies found that over three-fourths of the families that did not respond to requests for income documentation were still eligible. Applying such a process to every child would push hundreds of thousands—perhaps more than a million—eligible children out of the program. As 25 House of Representatives members recently wrote to OMB, such "unintended consequences for low-income children who are eligible [violate the principle that the] cure should not be worse than the disease."
- Reducing the counts of eligible children in schools could also have adverse effects on educational funding for schools with the greatest need. Federal and state educational programs that target low-income children and schools, such as Title I, often base their funding allocations on free or reduced-price lunch certifications. With broad income documentation possibly deterring large numbers of eligible children, low-income schools and children could also lose significant portions of the educational funds that they need.

**Other, better strategies are available.**



*CHILD NUTRITION POLICY BRIEF*

**Overcertification**

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USDA has been working for several years to discover the extent of and possible targeted methods to rectify any overcertification:

- **Proposed rule.** USDA proposed a rule in Summer 2002 that will require school districts and states to report the results of their application audits. These results would allow USDA to more accurately determine the extent of any overcertification.
- **Pilot projects.** In 2000, USDA started three-year pilot projects to evaluate different methods of determining income eligibility, including income documentation (albeit in a non-representative sample of schools). From the final results, expected in 2004, USDA should be able to discover some of the impact of such methods. However, more rigorous pilot studies in a nationally representative sample of schools would be necessary to accurately determine the effects of such methods.

Looking at audit information and carefully designed pilot projects would be a prudent course – figuring out the scope of any problem and finding out what works – before altering a successful program that serves 16 million low-income school children across the nation. New, sweeping proposals advanced just to respond to a bad estimate of a problem, or to save money, or to rush to fit the 2003 reauthorization timetable run too great a risk of fundamentally damaging the program.

**Selected Studies Showing that Child Nutrition Programs Improve  
Nutrition, Development, and Education**

Child and Adult Care Food Program

Bruening K., Gilbride, J.A., Passanante, M.R., and McClowry, S. (1999). Dietary intake and health outcomes among young children attending 2 urban day-care centers: *JADA*, 99(1529-1535).

U.S. Department of Agriculture, Food and Nutrition Service (1983). *Evaluation of the Child Care Food Program*.

School Breakfast Program

Murphy, J.M., Pagano, M.E., Nachmani, J., Sperling, P., Kane, S., and Kleinman, R.E. (1998). The relationship of school breakfast to psychosocial and academic functioning: cross-sectional and longitudinal observations in an inner-city school sample. *Archives of Pediatric and Adolescent Medicine*, 152, 899-907.

Pollitt, E., (1995). Does breakfast make a difference in school? *Journal of the American Dietetic Association*, 95, 1134-1139.

School Lunch Program

Gleason, P. and Sutor, C (March 2001). Food for Thought: Children's Diets in the 1990's. *Policy Brief, Mathematica Policy Research, Inc.*

Fox, M.K., Crepinsek, M.K., Connor, P. and Battaglia, M. (2001). *School Nutrition Dietary Assessment Study II*. USDA Food and Nutrition Service, Office of Analysis, Nutrition and Evaluation.

WIC

Institute of Medicine, Food and Nutrition Board. (1996). *WIC nutrition risk criteria: A scientific assessment*. Washington, D.C.: National Academy Press.

Rose, D., Habicht, J.P., and Devaney, B. (1998). Household participation in the Food Stamp and WIC Programs increases nutrient intakes of preschool children. *Journal of Nutrition*, 128 (3):548-555.

*American Enterprise Institute for Public Policy Research*



**GROWING OVERWEIGHT AND OBESITY IN AMERICA:  
THE POTENTIAL ROLE OF FEDERAL NUTRITION PROGRAMS**

**Testimony  
of  
Douglas J. Besharov**

**Joseph J. and Violet Jacobs Scholar, American Enterprise Institute  
Professor, University of Maryland School of Public Affairs  
before the  
Committee on Agriculture, Nutrition, and Forestry  
April 3, 2003**

Chairman Cochran, and Members of the Committee on Agriculture, Nutrition, and Forestry:

Thank you for inviting me to testify on the federal government's initiatives regarding child nutrition programs. My name is Douglas J. Besharov. I am the Joseph J. and Violet Jacobs Scholar in Social Welfare Studies at the American Enterprise Institute for Public Policy Research, where I conduct research on children and families. I am also a professor at the University of Maryland School of Public Affairs, where I teach courses on family policy, welfare reform, and evaluation.

In the summer of 1967, I saw American starvation and malnutrition up close. As a civil rights worker in the Mississippi Delta, I (literally) carried ill and malnourished black children into hospitals. (The hospitals—without a law student from the North standing in the admitting room and threatening a lawsuit—ordinarily refused to treat poor African Americans.) The children were starving because their families had no money to buy food. Making things worse, many black families were denied welfare, simply because of their race. (I saw mothers with young children who applied for welfare being offered bus tickets to Chicago.)

This national disgrace was ended only after sustained media exposure: Senator Robert Kennedy and members of his Senate committee took journalists on a tour of the delta, where, in his words, they saw black children with “bellies . . . swollen with hunger.”<sup>1</sup> Later, a team of six doctors, who were funded by the Field Foundation to study conditions in “two rural Mississippi counties in 1967,” documented “severe cases . . . of malnutrition and near starvation” among black children. Then came the searing 1968 CBS documentary, “Hunger in America.”<sup>2</sup>

But that was thirty-five years ago—before massive expansions of the federal feeding and welfare programs for the poor. Spending now exceeds \$50 billion a year, for food stamps (\$21 billion), school breakfasts and lunches (\$8 billion), and WIC (The Special Supplemental Nutrition Program for Women, Infants, and Children)(\$6 billion), as well as welfare (\$12 billion). Today, instead of hunger, the central nutritional problem facing the poor, indeed all Americans, is not too little food but, rather too much—or at least too many calories.

Today, as many as 70 percent of low-income adults are overweight, about 10 percent more than the nonpoor. Adolescents from low-income families are twice as likely to be overweight (16 percent vs. 8 percent). Racial disparities are even greater. Almost 80 percent of African-American women, for example, are overweight—a third more than white women. Even more serious, about 50 percent of African-American women are obese—two thirds more than white women. (Table 1.)

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<sup>1</sup>Robert F. Kennedy Memorial, available from: <http://www.rfkmemorial.org/RFK/index.htm>, accessed November 25, 2002.

<sup>2</sup>Manuscripts Department, Library of The University of North Carolina at Chapel Hill, *Southern Historical Collection, #4366 Raymond Milner Wheeler Papers*, available from: [http://www.lib.unc.edu/mss/inv/w/Wheeler.Raymond\\_Milner](http://www.lib.unc.edu/mss/inv/w/Wheeler.Raymond_Milner), accessed November 25, 2002.

Table 1  
Overweight/Obesity

Age, Sex, and Race/Ethnicity	Percent Overweight/Obese	
	1961-62 1963-65*	1999-2000
Men	50/11	67/28
Women	40/16	62/34
Children	4/-	15/-
Men White	50/11	68/28
Men Black	44/14	60/29
Men Hispanic	-	74/29
Women White	38/14	58/31
Women Black	59/27	78/51
Women Hispanic	-	72/40
Children ages 6-11		
Boys White	4/-	12/-
Boys Black	2/-	17/-
Boys Hispanic	-	27/-
Girls White	5/-	12/-
Girls Black	5/-	22/-
Girls Hispanic	-	20/-

\*1961-62: for adults; and 1963-65: for children.

Source: HHS, *National Health and Nutrition Examination Survey*.

You would not know about the problems of obesity and overweight among the poor from the reports and press releases from various advocacy groups that bewail high rates "food insecurity." Every year since 1995, the federal government has conducted a survey called "The Food Security Survey." In 2001, it found that nearly 11 percent of American households were "food insecure," but that is an artificial construct based on answers to eighteen different questions that express some uncertainty about having sufficient financial resources to obtain enough food to meet the needs of all household members *even once* in the past year. In the same survey, only 3.3 percent of all households actually reported that one or more household members were hungry—*even once* in the past year—because they could not afford food.<sup>3</sup> Only 0.6 percent of households with children reported that one more children were hungry at least once during the year. A far cry from the 1960s, the formative years for most federal feeding programs. (See Table 2.)

<sup>3</sup>Mark Nord, Margaret Andrews, and Steven Carlson, *Household Food Security in the United States, 2001* (Washington, D.C.: U.S. Department of Agriculture, October 2002), p. 3.

Table 2  
**Food Insecurity/Hunger**

Household Type and Poverty Status	Percent Food Insecure (FI)		
	All FI	FI with Hunger	FI with Hunger of Children
<b>All households</b>			
With and without children	10.7%	3.3%	-
With children under age 18	16.1%	3.8%	0.6%
<b>Poor households</b>			
With and without children	36.5%	12.9%	-
With children under age 18	44.5%	-	2.2%
<b>Households &lt; 130% poverty</b>			
With and without children	32.3%	10.9%	-
With children under age 18	41.4%	11.5%	1.8%
<b>Households ≥ 185% poverty</b>			
With and without children	4.9%	1.3%	-
With children under age 18	6.3%	-	0.1%

Source: USDA, *Household Food Security in the United States, 2001*.

Overweight and obesity refer to excess amounts of body fat. The commonly used standards to determine whether a person is overweight or obese are based on medical data indicating weight levels (for a given height) that are associated with increased mortality and various health risks.<sup>4</sup> For example, a man 5'10" would be considered overweight at 175 pounds and obese at 210 pounds. A woman 5'4" would be considered overweight at 145 pounds and obese at 175 pounds.

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<sup>4</sup>The standard measure used to measure overweight and obesity is the body mass index (BMI). The BMI is calculated as weight in kilograms divided by the square of height in meters (or weight in pounds divided by the square of height in inches multiplied by 703). A BMI of 25.0 or more is used to define overweight. In children, overweight is defined as sex- and age-specific BMI above the 95<sup>th</sup> percentile, based on growth charts from the Centers for Disease Control (CDC). Obesity is defined as a BMI of 30.0 or more. Other methods used to measure overweight and obesity in epidemiologic studies include waist circumference, skin-fold thickness, and waist-to-hip ratio.

Being overweight is not simply a matter of aesthetics. The growing girth of Americans is a major health catastrophe. Overweight people are three times more likely to have coronary artery disease,<sup>5</sup> two to six times more likely to develop high blood pressure,<sup>6</sup> more than three times as likely to develop type 2 diabetes,<sup>7</sup> and twice as likely to develop gallstones than normal weight people.<sup>8</sup> Obesity, of course, is more serious, causing an estimated 50 to 100 percent increase in premature deaths (estimated to be 300,000 deaths per year).<sup>9</sup>

Despite this massive increase in overweight and obesity among the poor, federal feeding programs still operate under their nearly half-century-old objective of increasing food consumption. Few experts are willing to say that federal feeding programs are making the poor fat, although the evidence points in that direction. But no expert thinks they do very much to fight this growing public health problem. (See table 3 for increases in caloric intake.)

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<sup>5</sup>CardiologyTulsa, *Cardiac Risk Factors*, available from: <http://www.cardiologytulsa.com/factors.htm>, accessed December 3, 2002.

<sup>6</sup>Accu-Check, *Understanding Diabetes*, available from: [http://www.accu-check.com/understanding/reducing/mn\\_high\\_blood\\_pressure.cfm](http://www.accu-check.com/understanding/reducing/mn_high_blood_pressure.cfm), accessed December 3, 2002.

<sup>7</sup>Suzanne Rostler, *Even a Few Extra Pounds Can Raise Disease Risk*, July 10, 2002, available from: <http://www.healthetech.com/corp/info/articles.jsp?ID=8>, accessed December 3, 2002.

<sup>8</sup>Jessica Seaton, "Weighty Issues," *Los Angeles Times*, December 14, 2001, available from: <http://www.spm.net/Weightyissues.htm>, accessed December 3, 2002.

<sup>9</sup>David B. Allison, Kevin R. Fontaine, JoAnn E. Manson, June Stevens, and Theodore B. VanItallie, "Annual Deaths Attributable to Obesity in the United States," *Journal of the American Medical Association*, vol. 282, no. 16, October 27, 1999, pp.1530-1538.

Table 3  
**Caloric Intake**

Sex, Age, and Poverty Status	Mean Caloric Intake Level	
	1971-74	1988-94
Male*	2,393	2,517
Female*	1,618	1,764
Children under 6	-	1,407
Children ages 6-11	-	1,974
<b>Below Poverty</b>		
Male*	2,108	2,350
Female*	1,575	1,767
Children under 6	-	1,453
Children ages 6-11	-	2,000
<b>Above Poverty</b>		
Male*	2,434	2,575
Female*	1,624	1,770
Children under 6	-	1,390
Children ages 6-11	-	1,969

\*Ages 1 to 74 years in 1971-74, and ages 2 months and over in 1988-94.

Source: HHS, *National Health and Nutrition Examination Survey*.

Start with food stamps, the largest federal feeding program. In 2002, it served about 19 million people a month, and provided a maximum of \$465 per month for a household of four. That's on top of free school meals and WIC food packages. On the theory that the poor would be tempted to use food aid for other things, food stamps are coupons (now largely using a credit card-like system) that can be used only for foods to be eaten in the home. (They cannot be used to buy: nonfood products, alcoholic beverages and tobacco, vitamins and medicines, food that will be eaten in the store, or any hot foods.)

Food stamps work as intended, raising caloric consumption by as much as 10 percent more than if recipients were given cash. It's like when you buy tickets for a set number of rides before entering an amusement park. The tendency is to buy more than one needs and, rather than return the unused ones for a refund, it is easier to take that one or two more rides before leaving. That's of course why the parks sell them that way. The only difference is that unused food stamps can't be turned in for cash. (The fact that people do not want to use all their food stamps for food explains why a black market has developed with them.)

If we want the poor to consume less food, the remedy seems simple enough: Give them cash instead of food stamps—and let them make their own decisions about how much to consume. Experimental programs have demonstrated that “cashing out” food stamps is much more convenient for the poor and does not result in unhealthy diets nor the mismanagement of family finances. Recipients continued to get well above the recommended dietary allowances for



most nutrients.<sup>10</sup>

The school lunch and breakfast programs, serving almost 28 million lunches and over 8 million breakfasts on an average day, also lead to over consumption—because federal rules, dating back to 1946, require a disproportionate number of calories in the meals. Schools are required to provide 25 percent of the Recommended Dietary Allowance (RDA) of calories for breakfast and 33 percent of caloric RDAs for lunch. That's 58 percent of each day's total daily caloric RDAs—leaving for dinner and any snacks only 42 percent of RDAs, or about 950 calories for the average student. That is the equivalent of having only a Burger King Whopper (without cheese) and small coke for the rest of the day and evening. Try telling that to a child wanting a snack after school.

What's more, even in these large meals, the level of fat, both saturated and unsaturated, in school lunches exceeds program standards by about 10 percent. Successive administrations have tried to reduce the fat content of school meals, but with only modest success. Much of the problem seems to stem from the kinds of foods served and poor cooking practices. In keeping with federal rules, most schools provide lunches that have one meat, two fruits or vegetables, one bread or grain product, and milk. Preparing meals that are both healthy and appealing to children requires a level of proficiency beyond that of the frequently low-paid staff in many cafeterias.

Such large (and fattening) school meals may have made sense six decades ago (the year after World War II ended), but welfare and food stamps now give low-income families many other sources of food. The lives of the poor are certainly not flush, but, for most, neither are they the bare bones subsistence of the past. The time is long overdue for allowing schools that wish to do so to provide smaller and simpler meals.

WIC, officially the Special Supplemental Nutrition Program for Women, Infants, and Children, is also operated as if welfare and food stamps had not yet been invented. It provides food packages and counseling to over 7 million children and mothers each month. The monthly food packages, worth about \$120 for infants and post-partum mothers and about \$35 for each child between the ages of one through four.

WIC's popularity among service providers is largely based on its generous package of infant formula, enriched juice, and fortified cereal for infants—thus guaranteeing that they get sufficient nutrients. But because the infant formula is free and easy to use, it is widely believed that WIC discourages breastfeeding. Six months after a child's birth, 13 percent of WIC mothers breastfeed compared to 30 percent of non-WIC mothers. Recognizing the healthy impact of breastfeeding, for more than a decade program officials have tried various ways to encourage more breastfeeding, for example, by providing additional foodstuffs (including canned tuna and carrots) to breastfeeding mothers, but to only limited apparent avail.

The other WIC food packages are heavily tilted toward high calorie, high cholesterol food stuffs. The monthly package for one to four year olds, for example, is 9 quarts of juice, 36 ounces

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<sup>10</sup>See Steven Carlson, "An Overview of Food Stamp Cashout Research in the Food and Nutrition Service," in Nancy Fasciano, Daryl Hall, and Harold Beebout (eds.), *New Directions in Food Stamp Policy Research* (U.S. Department of Agriculture, June 25, 1993), pp. 23-24.

of cereal (hot or cold), 24 quarts of milk, 2 to 2.5 dozen eggs, and about 1 pound of dried beans/peas or peanut butter. A food package like this only makes sense if it is the family's major source of food, which is certainly not the case. In fact, in 2000, about 18 percent of children participating in WIC were overweight, as were about 55 percent of breastfeeding women and about 56 percent of postpartum women.<sup>11</sup> Considering that these mothers are generally young women, these are very high levels of overweight.

WIC's nutritional counseling is also a big disappointment, because, besides providing food packages, it is supposed to provide nutritional advice and counseling. In practice, this means that counselors spend an average of about fifteen minutes with mothers every three months. This is hardly enough time to make any real differences in their practices—especially since there are many other things that must be covered during the sessions, including, pursuant to Congressional mandate, motor voter registration.

WIC programs cannot increase the time spent with young mothers because federal rules allot a strict percentage of funding for the food packages and the counseling sessions. A year ago, together with my colleague Peter Germanis, I wrote a book about WIC. We argued that, since WIC already covered almost 50 percent of all newborns,<sup>12</sup> it should not focus on increasing the number of families in the program, but, rather, in paying more attention to the problems of overweight and obesity. We said that new funds should go for providing intensive counseling and advice about preparing healthier food and actual cooking instruction. When our book appeared, a number of WIC directors wrote to us saying that they already did that, so it was an unfounded criticism. However, these efforts were the exception rather than the rule, and almost all were being made with non-WIC funds!

All this is no secret to senior policymakers and food advocacy groups. Although there are still some pockets of real hunger in America, they are predominantly among populations with behavioral or emotional problems. In 1998, for example, then Agriculture Secretary Dan Glickman, when discussing the problem of childhood obesity, said that “The simple fact is that more people die in the United States of too much food than of too little, and the habits that lead to this epidemic become ingrained at an early age.”

What, then, is preventing the modernization of federal feeding programs? Of course, various industry groups have a vested interest in the continuation and expansion of families feeding programs—and are adept at lobbying Congress. For farm and dairy interests, for example, the programs are a way to get the government to purchase surplus commodities. And for unions, localities, and individual grantees, the programs represent jobs and financial aid. But these vested interests, alone, are not powerful enough to stymie reform.

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<sup>11</sup>U.S. Department of Agriculture, Food and Nutrition Service, *WIC Participants and Program Characteristics 2000*, Nutrition Assistance Program Report Series, Report No. WIC-02-PC (Alexandria, VA: U.S. Department of Agriculture, July 2002), Exhibits 5.36-5.37.

<sup>12</sup>U.S. Department of Agriculture, Food and Nutrition Service, “Frequently Asked Questions,” July 10, 2002, available from: <http://www.fns.usda.gov/wic/FAQs/FAQ.HTM#4>, accessed December 3, 2002.

Ironically, it is the liberal, food advocacy groups that have prevented the modernization of the food programs, for, to make the case for reform, one must first accept that hunger has mostly disappeared from America. I want to be careful here, because I have friends in these organizations and I know them to be high-minded and completely dedicated to what they see as the best interests of the poor. But they seem to believe that admitting any weaknesses in federal feeding programs would make them vulnerable to the budget cutters. How else to explain their periodic press releases about growing hunger and their relative silence about over consumption? Perhaps the advocates are correct, but it makes them the main protectors of the status quo. So much so, by the way, that various industry groups, not otherwise known for their liberal politics, provide them with financial support (and often sit on their boards).

America's growing weight problem has many causes—less exercise, eating more, especially fast food, and, for the poor especially, depression. Federal feeding programs may be only a small part of the cause of America's growing weight problem, but they urgently need to be part of the cure.



## NATIONAL WIC ASSOCIATION

**Statement presented on behalf of**  
**The National WIC Association, NWA,**  
**Before the**  
**United States Senate**  
**Committee on Agriculture, Nutrition, and Forestry**  
**The Honorable Thad Cochran, Chairman**  
**by**  
**Jill Leppert, LRD, President, NWA and**  
**Nutrition & Breastfeeding Coordinator, North Dakota State WIC Program**

**10:00 AM, Thursday 3 April 2003**

Thank you Mr. Chairman and members of the Committee, for your invitation to present the **National WIC Association's** views on reauthorization of the Special Supplemental Nutrition Program for Women, Infants and Children, known as WIC. As **NWA's** President, I am speaking on behalf of the thousands of nationally recognized WIC health professionals, nutritionists and dietitians who are committed to addressing the nutrition and healthcare needs of WIC families. Our members serve over 7.5 million participants through 2,100 WIC agencies in 10,000 WIC clinics each month. They are the front lines battling to improve the quality of life for our most vulnerable populations.

With your permission I would also like to introduce a member of the **NWA** team accompanying me today who is available here in Washington to address any questions you may have following the hearing – the Rev. Douglas A. Greenaway, Executive Director of the Association.

At the outset, I would like to compliment you Mr. Chairman and members of the Committee for your long-term commitment to WIC and the other Child Nutrition Programs as well as the President and Secretary Veneman and their teams for their tremendous support of WIC. **NWA** is proud of the strong bi-partisan commitment WIC has engendered since its inception. The future of our nation's low-income women, infants and children depend upon your support.

WIC is a short-term intervention program designed to influence lifetime nutrition and health behaviors in a targeted, high-risk population. It has an extraordinary, nearly 30-year record of preventing children's health problems and improving their health, growth and development. WIC children enter school ready to learn. They show better cognitive performance.

Quality nutrition services are the centerpiece of WIC: nutrition and breastfeeding education, nutritious foods, and improved healthcare access for low and

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moderate income women and children with, or at risk of developing, nutrition-related health problems. WIC serves almost one-half of all infants born in this country and roughly 1 in 4 of all children between one and four years of age.

WIC's committed, results oriented, entrepreneurial staff stretch resources to serve all eligible women and children and ensure program effectiveness and integrity.

Mindful of the challenges WIC faces in delivering high-quality nutrition services, during the last reauthorization cycle **NWA** asked Congress to invite the General Accounting Office, GAO, to examine those challenges.

In its December 2001 report to Congress entitled, "Food Assistance: WIC Faces Challenges in Providing Nutrition Services," GAO identified six challenges: coordinating nutrition services with health and welfare programs, meeting increased program requirements with available resources, responding to health and demographic changes in WIC's populations, meeting increased program requirements, improving the use of information technology to enhance service delivery and program management, assessing the effects of nutrition services, and recruiting and retaining skilled staff.

To these, **NWA** has added an additional challenge: visioning the future landscape of WIC. A copy of our legislative proposals, including suggested bill language, has been attached to our written testimony.

With your permission, I would like to highlight our proposed responses to these challenges:

### ***Coordinating Nutrition Services with Health and Welfare Programs***

Better than half of all WIC participants receiving health care services from managed care entities. Local public health departments reducing or eliminating direct health care services. As result, WIC is consistently challenged to coordinate health and welfare program services. Indeed, in the current environment, WIC has become the single greatest point of health-care contact for many WIC families.

To eliminate unnecessary clinic visits and allow for better coordination with healthcare services, reducing invasive blood work for infants and children, providing for more nutrition counseling time and streamlining paperwork for clients and clinic, **NWA** recommends giving states the option to extend certification periods for up to one year for children and breastfeeding women, or until women stop breastfeeding, whichever is earlier.

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To offer families flexibility for physical presence because of distance, transportation, weather, other local conditions or special needs hardships, **NWA** recommends that where participants are receiving on-going healthcare from a provider that the physical presence requirement for children be required to be met one time, at some time during the certification period and not necessarily at the time of certification.

### **Meeting Increased Program Requirements with Available Resources**

**NWA** and USDA/FNS have worked together over the past two years to reinvent the way nutrition education is delivered to participants. We continue to work to enhance these efforts. Both the quality of time and the availability of time that WIC nutrition staff have available to spend with WIC participants is critical to the success of the nutrition and health care intervention.

WIC resources are being stretched in unimaginable ways. Currently, WIC staffs provide participants with information on a wide variety of subjects ranging from alcohol and drug abuse to voter registration. Some of these responsibilities relate to the mission of WIC, others do not. Each minute of an unfunded mandate results in the loss of over 125,000 hours of nutrition education interventions annually.

The GAO has identified at least nine new program requirements that have been added to WIC since 1988 without a consequent increase in nutrition services administrative funding.

The GAO writes in its report that "with the reduction in the number of public health departments serving women and children, public health officials have increasingly turned to WIC to help address the health needs of low-income children. According to CDC, WIC has become the single largest point of access to health related service for low-income preschool children. Consequently, the CDC has turned to WIC to provide services traditionally performed by local health departments, such as identifying children who are not immunized."

WIC is proud of the significant and critical role that we play in our public health system. However, expecting so much of WIC while providing no commensurate resources as we assume these additional responsibilities challenges not only WIC infrastructure and staff, but increasingly the poor families that WIC works so hard to serve.

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To protect the quality of WIC nutrition and healthcare services and the limited nutrition services administrative dollars that are available to WIC, **NWA** recommends that the administrative costs that WIC incurs related to providing services for other programs should be reimbursed by those programs.

Moreover, to guarantee the integrity and quality of WIC nutrition and healthcare services and to maintain the nutrition and health mission of WIC, **NWA** recommends exempting WIC from services that are inconsistent with the intent and purpose of the Program.

To preserve the integrity of basic WIC services – nutrition benefits and coordinated healthcare, to streamline paperwork and reduce administrative costs and reduce service barriers, **NWA** recommends exempting WIC from the requirements of the National Voter Registration Act and the requirement to offer voter registration applications and document these opportunities for all applicants and participants.

### ***Responding To Health and Demographic Changes in WIC's Populations***

WIC's population, like the general population has experienced dramatic increases in the prevalence of overweight and obesity and related health issues. In addition, there have been dramatic increases in the diverse ethnicity of WIC's population. To respond to the health and demographic changes in WIC's populations, **NWA** recommends a six-point approach.

First, while WIC Programs across the nation have been actively engaged in obesity prevention efforts since the turn of the millennium, the Program's definition of nutrition education is self-limiting. To positively affect our nation's most serious nutritional problems – obesity and related health consequences, **NWA** recommends expanding the definition of nutrition education to enhance WIC's primary role allowing for anticipatory guidance related to physical activity, feeding relationships and child development.

Second, the current WIC food package is now nearly 30 years old and no longer consistent with current dietary guidelines and science. WIC agencies have independently, within allowable guidelines, taken steps to combat the nation's epidemic of overweight and obesity by modifying the food package. For example, agencies provide low and reduced fat milk and cheese, reducing the total cholesterol, fats and calories of the food package. Agencies also tailor the food package to assist participants in weight management and to meet other

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dietary needs. Simply put, the WIC food package in and of itself is not a contributing factor to obesity. Nevertheless, in 2000, **NWA** recommended changes to the WIC food package to reflect current nutrition science, improve dietary intake and reduce the incidence of obesity including broader choices of grain products, addition of fresh, frozen or canned fruits and vegetables, reduced quantities of juice for infants, offering low-fat milk as the standard, reduced quantities of cheese and foods that reflect diverse cultural dietary patterns.

While Under Secretary Bost and his team at the Food & Nutrition Service are to be commended for their efforts to publish a proposed rule on the WIC Food Package, a proposal has yet to see the light of day. The time has past for WIC to provide healthful changes and enhance the food package, improving WIC nutritionists' flexibility in prescribing foods and responding to America's obesity epidemic.

**NWA** recommends USDA report to Congress within 6 months of enactment of reauthorization legislation on the status of efforts to adopt a comprehensive food package proposal that reflects the need for fresh, frozen and canned fruits and vegetables and culturally appropriate foods responsive to participants' nutritional needs and consistent with national nutrition guidelines. Also that USDA publish within 6 months of that report to Congress a comprehensive proposed rule to revise the WIC food package to meet these minimum changes.

Third, in the interim period as we await the report of the Institute of Medicine and USDA to Congress, **NWA** asks Congress to direct USDA/FNS to allow states to implement pilot or demonstration projects which would allow for food substitutions, including fresh, frozen or canned fruits and vegetables and food items responsive to the needs of the diverse cultural populations WIC serves.

It should be noted, Mr. Chairman, that **NWA** supports a federally approved WIC food list that includes national, store and private label brands, giving states flexibility to select WIC foods to manage food costs and nutritional options for participants.

Fourth, **NWA** supports USDA's current intentions to have the National Academy of Sciences' Institute of Medicine re-evaluate the WIC food package. To ensure that WIC foods continue to provide healthful food supplements for WIC families and complement nutrition education efforts **NWA** further recommends that the National Academy of Sciences' Institute of Medicine re-evaluate the WIC food package at least every 10 years, recommending changes to reflect current national nutrition science and concerns.

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Fifth, the competitive bidding requirement for infant formula has resulted in significant savings to the WIC Program. Indeed, USDA reports that use of competitive bidding reduces federal WIC costs by approximately \$1.5 billion a year. Roughly 1 in 5 WIC participants are able to participate in WIC because of the infant formula rebate program. Efforts to weaken this program will have unintended consequences on the Program and **NWA** urges Congress to work closely with the Association and USDA to ensure that this program element is protected.

Among the Federal Regulations related to the competitive bidding requirement are regulations which potentially put formula fed WIC infants at health risk. These regulations set a maximum amount for infant formula to be issued to WIC participants each month at a rate of 8 lbs. (3.6 kg) per 403 fluid ounces of concentrate for powdered formula. Infant formula manufacturers offer powdered formula in a variety of can sizes, which they change periodically.

Because the maximum amount can not be exceeded and because the powdered can size variations rarely exactly match the authorized amount, WIC clients are provided less formula and nutritional benefit than they are authorized to receive. To avoid a substantial, cumulative shortage over the certification period and potential health risks, **NWA** recommends that USDA allow State WIC agencies to round up to the next whole can size of infant formula to ensure that all infants receive the full-authorized nutritional benefit of at least 944 reconstituted fluid ounces, at standard dilution, per month for powdered infant formula.

Sixth, to be income eligible to participate in the WIC Program an applicants' gross income (i.e. before taxes are withheld) must fall at or below 185 percent of the U.S. Poverty Income Guidelines. For a family of 4, this amounts to \$33,485 or \$644 weekly. Because families increasingly find their income stretched to meet rising healthcare, housing and transportation costs and are frequently placed in a position of nutritional insecurity, **NWA** recommends that Congress respond to the income challenges of the working poor by increasing the income guidelines to 200 percent of the U.S. Poverty Income Guidelines.

### ***Meeting Increased Program Requirements***

The WIC shopping experience is intended to reinforce the WIC nutrition education experience and provide WIC families with a full complement of not only WIC foods, but a full market basket of foods to ensure comprehensive, quality meals for WIC families.

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To insure cost competitiveness and reasonable food prices, **NWA** recommends that with the exception of non-profit agencies, pharmacies and vendors required to ensure participant access, all WIC vendors should be food stamp authorized and offer participants a full market basket of foods.

The WIC Farmers' Market Nutrition Program (FMNP) funds are provided through a legislatively mandated set-aside in the WIC appropriation. If the entire WIC allocation is needed to maintain WIC caseload, FMNP would not be funded. This unstable situation leaves the status of FMNP in doubt from year to year and does not allow planning and management of resources with confidence for the upcoming growing season. For participating FMNP states Federal funds support 70 percent of the total cost of the program. The remaining 30 percent of the program's cost must come from a state match.

**NWA** recommends that Congress separate the funding for WIC and FMNP to eliminate direct competition for funds and enhance collaboration between WIC and FMNP. Separation of funding will ensure resources for WIC benefits, that WIC caseload funds are not diverted to FMNP and that FMNP stands on its own.

The current funding formula does not allow states sufficient NSA funds to support funded participation levels, maintain, protect and improve client services and program integrity or USDA initiatives.

**NWA** recommends that states 1) have the option to convert unspent food funds to NSA by a change in the Act which will allow states to increase the spend forward amount from 1 percent + .5% for management information systems (MIS) to 1.5 percent + .5% or 2 percent for MIS as well as 2) apply a portion of the rebate dollars received to NSA in accordance with the proportional administrative/food split used in allocating food and NSA grant dollars. Currently, rebate dollars may only be used for food.

While states currently have the ability to use vendor and participant recovered funds for program purposes, states would like to extend this ability to the use of funds recovered from local agencies.

**NWA** recommends that states have the ability to utilize collections of WIC program recovered funds in a consistent manner.

USDA has promulgated interim regulations concerning infant formula cost containment without the benefit of public comment, failing to consider State agencies' experience with bidding and contracting and preventing States' from negotiating the best contract for individual circumstances.

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**NWA** urges Congress to direct USDA to partner with the Association to review the interim regulations on infant formula cost containment and propose regulatory changes to appropriately respond to States' concerns thereby ensuring maximum participant benefits.

### ***Improving the Use of Information Technology to Enhance Service Delivery and Program Management***

Technology provides a critical foundation for quality WIC services and Program Integrity. Funding WIC technology from existing resources compromises WIC's ability to deliver services and develop responsive MIS systems. Current limits on funding prevent more than half -- 56% -- of WIC state agencies from meeting USDA core functions.

To develop and maintain MIS and electronic service delivery systems, and to link with other health data systems **NWA** recommends that Congress provide an additional \$122 million annually outside the regular NSA grant to implement MIS core functions, upgrade WIC technology systems, maintain MIS and electronic services and expedite the joint **NWA/USDA** 5 year plan for state MIS systems.

### ***Assessing the Effects of Nutrition Services***

To support rigorous research and evaluation documenting WIC's continued success, **NWA** recommends the flexible use of Special Project Grants funds, state WIC funds and other grant resources for health outcomes research and evaluation to identify effective nutrition education and breastfeeding promotion and support services, to test innovative service delivery and food prescriptions, and to support USDA's partnership with **NWA** to achieve WIC sensitive research and evaluation objectives.

### ***Recruiting and Retaining Skilled Staff***

The recruitment and retention of quality professional staff continues to be a challenge for WIC. Programs are not able to offer competitive salaries or benefits and must increasingly rely on paraprofessionals to deliver nutrition services.

To assist in this effort, **NWA** recommends that Congress revise the National Health Service Corps Program to include WIC nutrition interns, registered dietitians and nutritionists in student loan forgiveness programs.

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### ***Visioning the Future Landscape of WIC***

Over the course of the past decade there has been discussion about the value or appropriateness of converting WIC from a domestic discretionary program to a mandatory program. Little is known about the real consequences of affecting such a conversion.

**NWA** recommends that before policy makers entertain conversion of the Program's funding mechanism from a discretionary to a mandatory program, that Congress fully study the consequences of such a change and its impact on eligibility, participation, and services prior to implementing a conversion.

Finally, Mr. Chairman and members of the Committee, as the nation's premier public health nutrition program, WIC is a cost-effective, sound investment – insuring the health of our nation's children. Our Executive Director, Douglas Greenaway, the members of **NWA** and I look forward to working with you in this reauthorization process. We remain ready to answer any questions or provide additional information you may request.

### ***WIC For A Healthier, Stronger America!***

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655 15TH STREET, N.W., SEVENTH FLOOR  
WASHINGTON, D.C. 20005-5701  
TELEPHONE: 202/452-8444  
FAX: 202/220-0873  
E-MAIL: FMI@FMI.ORG  
WEBSITE: WWW.FMI.ORG

**STATEMENT OF**

**ANNE CURRY**

**VICE PRESIDENT, LEGISLATIVE AND POLITICAL AFFAIRS**

**FOOD MARKETING INSTITUTE**

**BEFORE THE UNITED STATES SENATE**

**COMMITTEE ON AGRICULTURE, NUTRITION AND FORESTRY**

**THURSDAY, APRIL 3, 2003**



♻️ Printed on recycled paper

**Y O U R   N E I G H B O R H O O D   S U P E R M A R K E T S**

Mr. Chairman:

Thank you for the opportunity to provide testimony regarding the Reauthorization of the Special Supplemental Program for Women, Infants and Children on behalf of the 26,000 retail food stores represented by the Food Marketing Institute (FMI). Retail food stores are proud to partner with state and federal governments to ensure that recipients of our nation's food assistance programs, particularly pregnant mothers and their young children, are able to access benefits without difficulty in our stores.

FMI is in full agreement with the important mission of the WIC program and supports its goals 100%. In preparation for the reauthorization of the WIC Program, we reconvened our WIC Task Force to compile recommendations for consideration by the Congress. We have identified areas for improvement for both the customer and the retailer experience. Today, the administrative process from the initial authorization of a store, to customer checkout and retailer reimbursement is incredibly complex and needs to be more user friendly and efficient.

It is also important to note that our recommendations will not cost money. Certainly, in a tight budget year this will prove important to a Committee Chairman who is also an appropriator. Additionally, we propose that these recommendations should achieve savings and certainly efficiencies and improved customer service.

The FMI WIC Task Force identified six areas that need to be addressed from a grocer's perspective: retailer authorization, retail operations, reimbursement issues, penalties, electronic benefits transfer (EBT) and infant formula theft. Certainly, each of

these recommendations, if implemented, would impact the recipient positively as well.

The complete FMI WIC Task Force report has been submitted for the record.

From this comprehensive report, a top 10 list of priority items was developed. It is those items, I will highlight today.

1. **The store owner/manager should be notified after each incident and prior to another compliance visit.** A store owner/manager strives for nothing less than 100% compliance with WIC rules at all times. However, if a human error is found during a compliance visit, the owner/manager needs to be notified immediately. Unfortunately, under the current system, the WIC undercover shopper may come back to the store a second or third time to see if there are further mistakes, but the owner/manager has still not been informed of an initial problem and thus has not had an opportunity to correct the problem. Fines could be levied in excess of \$30,000 over not enough money to buy a cup of coffee. Three visits may have taken place before the owner/manager was notified of a problem and then with the next problem they could be disqualified from participation in both the WIC and Food Stamp programs for 1-3 years.
2. **An interim WIC license should be available for a short period of time, after change in store ownership, while the new owner's application is being reviewed by USDA.** Currently, the license is immediately lifted when ownership changes hands and often it is 9-12 weeks for a new license even when the new owner is authorized at another location. This has a very significant impact on WIC customers who can no longer purchase products at a store where they have been shopping previously.
3. **WIC Retail Advisory Panels should be authorized and required in every state to address operational issues on an ongoing basis.** They have been very helpful in each state where they are being utilized. Currently, more than half of the states have advisory panels.
4. **Private label products should receive approval provided the items maintain the nutritional integrity of the current WIC food products.**
5. **The WIC program needs to be more flexible with minimum inventory, particularly with some of the specialty infant formula products.** For example, a recipient may be given a prescription for 10 cans of Alimentum or Nutramigen, a specialty formula. The inventory may be depleted after one customer. If 2-3 customers come in to the store with similar prescriptions, the inventory may not be available in the required 48 hour window.

6. **The prescriptions need to be more attuned to the manufacturers' changes in packaging of products.** For instance, an authorized product of the same measurement is approved in can but not in plastic bottles. The prescription is provided in non-traditional sizes -- 64oz plastic bottles are the standard size in juice, however the prescription may provide for 46oz cans which are difficult to find and sometimes more expensive because they are a non-traditional size.
7. **Line-item rejection for vouchers should be permitted, rather than throwing out the entire voucher when a single item is not eligible for reimbursement.**
8. **The WIC Program should incorporate language stating that WIC EBT should be cost neutral to authorized retailers. Similar language was included in the Food Stamp program prior to beginning the electronification of benefits.** This is particularly important given the discussion in several states of some very expensive options for electronic delivery of WIC benefits with no identified funding. Costs for some of the approaches being discussed can reach \$1,000 per lane. On the other hand, with strong communication, retailers can upgrade equipment during the natural lifecycle with minimal cost, provided that requirements are standardized across the country and software is available from the state that requires only minimal modifications by retailers.
9. **Retailers are very supportive of a National WIC UPC Database and feel that it is a necessity, and will dramatically decrease the potential for human error, particularly with some states moving to EBT.** Its completion should be expedited and implementation should begin.
10. **Infant formula theft is a real problem for retailers and a potential health risk for young babies.** USDA should require that states develop a contractual agreement with distributors or an audit trail from manufacturers to retailers. Formula could only be purchased from authorized distributors.

Again, we appreciate the opportunity to provide input and look forward to continuing to work with you and your staff as these ideas are considered further in the coming months. We stand fully committed to the goals and mission of the WIC program and ensuring that our customers are able to access these benefits in the most efficient and compassionate way in our stores.

Thank you. I would be glad to answer any questions.





**Prepared Statement  
by  
Karen Caplan  
Chairman, Board of Directors  
United Fresh Fruit & Vegetable Association**

***Produce Industry Child Nutrition Reauthorization Recommendations***

**Committee on Agriculture, Nutrition, and Forestry  
United States Senate**

**April 3, 2003**

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**United Fresh Fruit & Vegetable Association  
1901 Pennsylvania Avenue, NW, Suite 1100 · Washington, DC 20006  
(202) 303-3400 · Fax: (202) 303-3433  
[www.uffva.org](http://www.uffva.org)**

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## Table of Contents

<b>Introduction</b>	3
<b>Core Objectives for Child Nutrition Reauthorization</b>	4
<b>Produce Industry Child Nutrition Recommendations</b>	
<b>National Expansion of the Fresh Fruit and Vegetable Pilot Program</b>	
Background	5
Policy Statement	6
Policy Recommendations	6
<b>Increasing Produce Consumption through School Meals Programs</b>	
Background	6
Policy Statement	7
Policy Recommendations	7
<b>School Breakfast</b>	
Background	8
Policy Statement	9
Policy Recommendations	9
<b>Supplemental Nutrition Program for Women, Infants, and Children</b>	
Background	9
Policy Statement	10
Policy Recommendations	10
<b>Nutrition Education and Promotion Programs</b>	
Background	11
Policy Statement	12
Policy Recommendations	12
<b>Commodity Distribution and Infrastructure Improvements</b>	
Background	12
Policy Statement	13
Policy Recommendations	13
<b>Fruit and Vegetable Nutrition Research</b>	
Background	13
Policy Statement	13
Policy Recommendations	13
<b>Miscellaneous Provisions</b>	
Policy Recommendations	14
<b>Conclusion</b>	14
<b>Attachment 1</b> – National Alliance for Nutrition and Activity's CNR Recommendations	
<b>Attachment 2</b> – California WIC Fresh Produce Option Proposal	

### Introduction

Good morning Mr. Chairman and Members of the Committee. My name is Karen Caplan. I am President and CEO of Frieda's Inc., the nation's leading marketer and distributor of specialty produce. I come before you today as Chairman of the Board of United Fresh Fruit and Vegetable Association, the industry's national trade organization representing growers, packers, processors, marketers and distributors of all varieties of fresh fruits and vegetables, working together with our retail and foodservice customers, and our suppliers. I appreciate the opportunity to testify before the Committee on behalf of the U.S. fruit and vegetable industry regarding the future direction of federal child nutrition policy.

Across the life span, proper nutrition is critical in promoting health, preventing disease, and improving quality of life. Over a decade of research has revealed the health benefits of increased fruit and vegetable consumption in reducing the risk of cancer and numerous other serious illnesses including heart disease, stroke, and diabetes. According to federal government statistics, better nutrition could reduce the cost associated these diet-related diseases by a minimum of \$71 billion each year, enough to fully fund the entire USDA. Therefore federal nutrition policy and assistance programs should support incentives and key strategies that help Americans reach national health goals.

With obesity reaching epidemic proportions in the United States, greater attention must be focused on increasing produce consumption as a public health solution. The fruit and vegetable industry has the good fortune to offer consumers a healthy and nutritious product that is increasingly recognized as critical to the prevention of chronic diseases and maintaining overall good health. Therefore, increasing federal support and funding to promote fruit and vegetable consumption for chronic disease prevention and to reduce obesity should be a top priority for the nation.

Over the past several years, the fruit and vegetable industry has become immersed in child nutrition policy. Previously, our industry had little involvement with child nutrition reauthorization efforts, leaving this process mostly to those who had a more historical association with these important programs. Frankly, we have been surprised with what we've learned. Despite the best efforts of many on this Committee and in the Congress, the nutritional health of our nation's children has in far too many cases been secondary to other considerations.

- When states don't have adequate refrigeration or distribution systems, we still feed kids from 10 pound cans of soggy beans, instead of offering fresh vegetables they might like.
- We ask school officials to offer healthy meals, but low reimbursement rates encourage them to sell unhealthy competitive foods to break even on the business.
- Our supplemental benefits program to pass on surplus commodities from American agriculture is a free-for-all among commodity groups to fight for sales, leaving kids high-fat, poor quality products that often wouldn't move through mainstream supermarkets.
- When the Congress for the past two years has asked USDA to add fruits and vegetables to the WIC program, we find out that WIC is more of an entitlement program for entrenched commodities, than for citizens who need a healthier WIC package.

It is clear that with obesity, diabetes and other nutrition-related chronic diseases at epidemic proportions in the United States, something has to change. Mr. Chairman, we submit that child nutrition programs must put public health first, and guarantee that school lunches, breakfasts, after-school snacks, and WIC become part of the solution rather than part of the problem. Congress must develop legislation that makes healthy meals, a healthy school food environment, and a healthy start for WIC recipients our nation's top priority in child nutrition programs.

So, how can we do that? As you review all the testimony before the committee – from the school foodservice people, the anti-hunger people, the consumer groups, and more – you’ll find that the one common goal of every group is increasing the availability of fresh fruits and vegetables in child nutrition programs. It doesn’t matter whether we’re talking about school lunch or WIC, the Committee should keep one overriding principle in mind as you write this bill: *What are we doing to increase fresh fruits and vegetables in this program?*

#### **Core Objectives for Child Nutrition Reauthorization**

Increasing federal support and funding to create greater awareness of the benefits provided by fruit and vegetable consumption with respect to disease prevention and intervention efforts is a top priority of the produce industry. Overall the produce industry strongly supports the development of nutrition policy that helps increase awareness and understanding of the benefits provided by fruits and vegetables with respect to disease prevention and intervention. Ultimately, we believe the goal of any nutrition policy developed by Congress, the Administration, and interest groups should ensure federal child nutrition feeding programs support and encourage the health and well being of all Americans. Simply stated, the produce industry’s supports the overall nutrition policy goal:

*Federal nutrition policy should be developed which ensures the increase of produce consumption by focusing efforts to reshape national nutrition policy to anchor fruits and vegetable at the “center of the plate.” In turn, the federal government should elevate its financial investment into nutrition program priorities to better address the significant role fruit and vegetables play in health promotion and disease prevention for all Americans. Ultimately, the goal of federal nutrition policy should be to extend, expand and enhance policies that recognize and would directly encourage fruit and vegetable as critical to promoting health and preventing an array of chronic diseases.*

Within an overall commitment to increasing fresh fruits and vegetables in these programs, let me highlight several core priorities for you this morning.

- We support the recommendation of the American School Foodservice Association to increase reimbursement rates with the concept of a 10-cent per meal “healthy children supplement” to be devoted to improving the quality and healthfulness of school meals. Without greater funds, schools will continue to be forced to buy the lowest quality, cheapest, and least fresh product available.
- We support increased school breakfast programs, including expansion of the program to all children at no cost, and increased provision of commodities under the breakfast program.
- We support a new “Healthy Foods for Healthy Kids Initiative,” to provide \$10 million annual for grants to states and school districts for innovative projects such as salad/garden bars, healthy vending programs, cold storage and other creative ways to increase fresh produce.
- We support expansion of the DOD fresh program from \$50 million annually to \$100 million annually. This critical program is oversubscribed each year as it is the most practical way schools can receive frequent small deliveries of fresh produce under USDA programs.
- We support national expansion of the Farm Bill pilot program that provides fresh fruits and vegetables to kids in schools. Concurrent with this hearing, the President of our Association is meeting in Indianapolis with over 150 nutrition and education leaders who have worked on this pilot program, and I can assure you, the results have been overwhelming. When we’re lucky enough to find a simple program that works, let’s not keep reinventing the wheel but simply go forward aggressively to make this a national program.

- We support making USDA commodity purchases for schools conform to the U.S. Dietary Guidelines for Americans. It makes no sense to take high-fat or excess commodities and give those to schools. Let's make sure to provide commodities in the proportion called for in the Dietary Guidelines.
- We support a major research and education agenda at USDA to reflect its new commitment to the National 5 A Day Partnership. This program traditionally led by the national Cancer Institute has been expanded to multiple branches of government and public private partners. We commend Under Secretary Bost and Secretary Veneman for signing a Memorandum of Understanding with HHS supporting the 5 A Day Program, and now we need to see this successful program grow. Specifically, we support the USDA appoint 5 A Day coordinators in each state to work with state and local partners, as well as designated a permanent 5 A Day office within USDA to provide national leadership.
- Finally, on WIC, we strongly support the science-based revision of the WIC packages to increase fruits and vegetables offered to recipients. On April 24, 2000, USDA published, in the Unified Agenda section of the *Federal Register*, a notice about a rule FNS was developing to revise the WIC food packages to add nutrient-dense leafy and other dark green and orange vegetables to food packages for women and children. The time line contained in that notice indicated that a proposed rule would be published in September 2000. You know the rest – even after several years of direction from this Committee to publish the revised WIC package proposal, USDA has failed to do so. While USDA now seeks to have yet another study of the WIC program, the Congress should direct USDA to publish a proposed final rule within 120 days of this legislation's enactment so that further delay is not allowed.
- In the meantime, we strongly urge Congress to direct the USDA to allow an innovative and health-oriented pilot program proposed by the California WIC Association to move ahead. USDA has thus far rejected the request to conduct even a pilot program prepared by those closest to what WIC recipients need in a food package today. We have attached a copy of the California WIC proposal to our written testimony, and urge the Committee to reinforce this very day that USDA should listen to the very WIC program managers and do all it can to support and move forward with this pilot program under current law.

Mr. Chairman, this is not an exhaustive list, but gives you a sense of the clarity and specificity of the recommendations contained in our full testimony.

Today, I am submitting written testimony that includes 31 specific legislative recommendations covering seven key issue areas. In addition, as a member of the Steering Committee of the National Alliance for Nutrition and Activity, I am submitting child nutrition recommendations supported by 250 different public health, nutrition, consumer, and public groups. I ask that these recommendations be entered as part of the record.

#### **Produce Industry Child Nutrition Recommendations**

##### **National Expansion of the Fresh Fruit and Vegetable Pilot Program**

###### *Background*

In the 2002 Farm Bill, Congress authorized a \$6 million Fruit and Vegetable Pilot program in FY03 to provide free fruit and vegetable snacks to students in 25 schools each in Michigan, Ohio, Indiana and Iowa, and seven schools in the Zuni Nation in New Mexico. In record time, USDA organized a basic pilot program and sent an announcement to the states, wondering whether many schools would volunteer to participate. With over 800 schools coming forward, USDA was hard pressed to select just 107 schools to participate in the program.

Beginning in October 2002, the pilot program has already produced an unprecedented success story changing the lives of children and the healthy food environment of every school participating. On March 25-26, USDA and the National Cancer Institute, supporter of the National 5 A Day Program, co-hosted a conference in Indianapolis of teachers, food service personnel, principals, school nurses, parent-teacher organizations, education administrators and more to report preliminary results of the program. While USDA will soon submit its quantitative report to Congress, the anecdotal reports from participants in the conference are overwhelming.

*"In my 32 years of teaching, I've never seen a program make such a tremendous difference in the lives of our kids." Teacher*

*"If we don't have the fruit and vegetable snack program next fall, I'm not coming to school the first week because the kids would kill me." Foodservice Director*

*"Visits to our nursing office are down, and the kids are missing less school due to sickness." School Nurse*

*"Kids are trying new fruits and vegetables and then asking their parents to buy them at home." Teacher*

*"We didn't expect it, but kids are actually eating more fruits and vegetables from the regular school lunch, and our overall sales are up." Foodservice Director*

#### Policy Statement

*The Fruit and Vegetable Pilot Snack Program works! It works to immediately and drastically change children's fruit and vegetable consumption to improve their health, and it is transforming the school environment for healthy food choices. Congress and the Administration have an unparalleled opportunity to make a real difference in prevention of childhood obesity and development of related diseases, and must act now.*

#### Policy Recommendations

- Congress should authorize a National Fruit and Vegetable School Snack Program as a permanent part of child nutrition programs.
- Authorize USDA to develop additional pilot programs in all 50 states in FY04, leading to a national program open to all public schools in FY05 based on the success and lessons learned in the pilot programs.
- The current pilot program funded schools at a rate of approximately \$100 per student for the school year, or 55 cents per day per student in a 180-day school year. This minimum standard should be used as a benchmark in developing a national program. Direct USDA to develop plans to ensure efficiencies, economies, and controls in a national program, while allowing the flexibility for local school choices that has been a cornerstone of success thus far.

#### **Increasing Produce Consumption Through School Meals Programs**

##### Background

Fruit and vegetable consumption is an important component of a balanced diet consistent with the *Dietary*

*Guidelines for Americans* and the Food Guide Pyramid. Unfortunately, as children get older, the quality of their diets steadily decreases. Furthermore, habits established in early childhood generally carry on throughout adulthood. National surveys point clearly to the fact that most children have diets that need improvement and many children have diets that are considered poor. For instance:

- > Less than 13% of school-aged children met the target for fruits; with older school-aged children consuming particularly low amounts.
- > On any given day, 45% of children eat no fruit, and 20% eat less than one serving of vegetables.
- > The average 6 to 11 year old eats only 3.5 servings of fruits and vegetables a day, achieving only half the recommended 7 servings per day for this age group.
- > As children get older, their overall diet quality declines
- > For males 15 to 18 years old, only 6% have a good diet
- > These figures are even worse for African American children across all age groups.

With the implementation of the Federal Government's School Meals Initiative underway, the quality of the reimbursable school meal has improved, with meals now meeting key components of the Dietary Guidelines for Americans such as 30% or less calories from fat, and 2 fruits and/or vegetables must be offered.

However, many students, especially in the middle and upper level grades, have access to a wide variety of food choices and with more access to snack bar type foods, they consume fewer servings of fresh fruits and vegetables. More importantly, findings from the CDC School Health Policies and Programs Study confirm that foods sold outside of the school meal program provide students with a variety of options that may interfere with their ability to choose a healthy diet.

Fortunately, research has shown that schools with salad and fruit bars offer a significantly wider range of fruit and vegetable categories than other schools; items offered include green salads, raw vegetables, fresh fruit, canned fruit, and dried fruit. In addition, making a single healthy substitution in a day can make a big difference in a child's nutritional intake. For example:

- If a child ate a medium banana instead of a 1-ounce mix of salty snacks such as potato chips, they would get 12% less fat, 10% more fiber and 13% more potassium.
- If broccoli and carrot sticks were eaten at lunch instead of French fries, fat intake could be lowered by 14% and beta carotene intake increased by 216%!

With this in mind, it is critical that the child nutrition reauthorization legislation for 2003 be used as a tool to combat obesity in children and promote policies which look for ways to provide incentives for schools to expand the availability of fresh fruits and vegetables and increase produce consumption.

#### Policy Statement

*Promote policy recommendations that help increase fruit and vegetable intake among school children such as salad/garden bars, farmers markets, pre-packaged salads, salads in a cup, exotic fruit cups, innovations in vending and other creative ways used by schools to market and promote fruits and vegetables. Make healthy choices the easy choices at school.*

#### Policy Recommendations

- Provide \$10 million for grants to states or school districts for the Healthy Foods for Healthy Kids Initiative (for educational/promotional materials, salad/garden bars, prepackaged salads and fruit cups, innovative vending options, cold storage and other infrastructure, and other creative ways to help schools provide and encourage children to consume more fruits and vegetables).

- Expand the Department of Defense Fresh Fruit and Vegetable Program up to \$100 million annually to help improve the quality of produce available to schools.
- Require USDA commodity purchases to be more in line with national nutrition and dietary guidance contained in the Dietary Guidelines for Americans and the Food Guide Pyramid.
- Develop an incentive-based pilot project whereby school districts are rewarded when they offer more fruits and vegetables.
- Provide a 10-cent per meal “healthy children supplement” to be devoted to improving the quality and healthfulness of school meals. Supplemental increase to the school meal reimbursement rate to be used specifically for the purchase of fruits and vegetables.
- Support increase of reimbursement rates for Summer Food Service Program to provide for additional purchases of fruits and vegetables.
- Require schools and school districts that utilize the Nutrient Standard Menu Planning (NSMP) or Assisted Nutrient Standard Menu Planning (ANSMP) approach to menu analysis, to provide a fruit or vegetable (no-fried) offering as part of the reimbursable meal. (Currently, required meal components include the entrée, fluid milk, and a side dish)
- Remove bonus commodities from the 12% requirement for commodities.

#### **School Breakfast Program**

##### Background

The School Breakfast Program was established by Congress — first as a temporary measure through the Child Nutrition Act of 1966 in areas where children had long bus rides to school and in areas where many mothers were in the workforce; then with permanent authorization in 1975 — to assist schools in providing a nutritious morning meal to children.

The School Breakfast Program provides per meal cash reimbursements as an entitlement to public and nonprofit private schools and residential child care institutions to cover the costs of serving breakfast to students. The School Breakfast Program provides children with one-fourth or more of their Recommended Daily Allowance (RDA) for key nutrients. Research has indicated a link between participation in the breakfast program and educational attainment. Low-income children who participate in school breakfast programs achieve higher standardized test scores than low-income children who do not participate in the program. The program is also associated with reductions in tardiness and absenteeism among participants.

In the 2000-2001 school year, 7.9 million children and 71,930 schools participated in the School Breakfast Program; 6.5 million of the children who participated in the School Breakfast Program in the 2000-2001 school year were from families with low incomes. Over 75 percent of schools serving lunch also serve breakfast. Over 42 percent of the low-income children participating in school lunch receive a school breakfast. In FY 2001, the federal government appropriated \$1.49 billion for school breakfast.

Unfortunately, up to 83 percent of children do not eat School Breakfast in schools where the meals are offered. More importantly, for children who participate in the School Breakfast program, they consume 0.4 more servings of fruit than nonparticipants for breakfast and are associated with higher intakes of food energy, calcium, phosphorus, and vitamin C. It is critical that a comprehensive School Breakfast program be established under the child nutrition reauthorization process with the goal of increased access for all students who wish to participate.



Policy Statement

*Breakfast is a critical meal for children and provides the nutritional necessities which prevent symptoms such as headache, fatigue, restlessness and sleepiness from competing with educational outcomes. Increasing the availability of school breakfast for all students is essential for increasing learning opportunities.*

Policy Recommendations

- Make school breakfast programs more broadly available to all children in elementary schools through a universal school breakfast program.
- Establish a commodity purchase program for school breakfast at the rate of 5 cents per meal.

**Supplemental Nutrition Program for Women, Infants, and Children**Background

Established as a pilot program in 1972 and made permanent in 1974, WIC is administered at the Federal level by USDA's Food Nutrition Service. A wide variety of State and local organizations cooperate in providing the food and health care benefits, and 46,000 merchants nationwide accept WIC vouchers.

In most WIC State agencies, WIC participants receive checks or food instruments to purchase specific foods each month, which are designed to supplement their diets. Federal regulations include seven food packages designed to target specific nutrients known to be limited in participant diets. WIC food is high in one or more of the following nutrients: protein, calcium, iron, and vitamins A and C. WIC foods include iron-fortified infant formula and infant cereal, iron-fortified adult cereal, vitamin C-rich fruit and/or vegetable juice, eggs, milk, cheese, peanut butter, dried beans or peas, tuna fish and carrots. Special infant formulas and certain medical foods may be provided when prescribed by a physician or health professional for a specified medical condition.

State agencies are responsible for identifying specific foods, in accordance with federal regulations, to develop individually tailored food prescriptions. Local WIC agencies staff identify food preferences and prescribe the food prescription which best meets the needs of the participants.

**Eligibility** – Pregnant or postpartum women, infants, and children up to age 5 are eligible. They must meet income guidelines, a State residency requirement, and be individually determined to be at "nutritional risk" by a health professional. To be eligible on the basis of income, applicants' gross income (i.e. before taxes are withheld) must fall at or below 185 percent of the U.S. Poverty Income Guidelines.

**Participation** – More than 7 million people get WIC benefits each month. Average monthly participation for fiscal year 2001 was approximately 7.31 million.

Children have always been the largest category of WIC participants. The average monthly WIC participation for FY 2001 was approximately 7.31 million people - of that number, nearly 3.6 million were children, over 1.92 million were infants, and nearly 1.78 million were women.

**Food Package Review** – Since 1978, FNS has conducted one major review of the WIC food prescriptions and solicited comments regarding availability of culturally appropriate foods and the

existing federal 6-gram sugar limit for WIC-eligible adult cereals. Due to the extensive number of comments received on the sugar limit proposal, FNS decided to expand the review to all components of the WIC food prescriptions. In 1998, USDA's Center for Nutrition Policy and Promotion undertook a review of the WIC food packages. Major findings from that report are highlighted below:

- > All WIC women exhibit nutrient shortfalls in their diets. WIC pregnant women do not meet 100 percent of the RDA for four of the five target nutrients and for the four other nutrients of concern.
- > Problems with the dietary intake of WIC pregnant women are lower energy intakes, lower nutrient density, and higher percentage fat intakes than recommended. Although the WIC package is very low in added sugar, the overall intake of added sugar by pregnant women exceeds recommendations.
- > A WIC group at particular nutritional risk appears to be non-breast-feeding postpartum women who may not be consuming their WIC packages.
- > Protein intake is well above recommendations for all WIC participant groups as well as the WIC-income-eligible nonparticipating, and the total sample groups.
- > All groups of women and children studied consume more than the suggested daily intake of added sugar (from the Food Guide Pyramid), with the exception of nursing mothers. The contribution of the WIC package to added sugars in the overall diet is very low, coming from added sugars in peanut butter and ready-to-eat cereals.

With the exception of the special food package for exclusively breastfeeding women and for homeless participants, no significant changes to the food prescription have been made since the inception of the Program in 1974.

**Efforts to Enhance the WIC Food Prescriptions** – On April 24, 2000, USDA published, in the Unified Agenda section of the Federal Register, a notice about regulations currently under development at the agency. The unified agenda contained information about a rule FNS was developing to revise the WIC food packages. Specifically, the notice stated that the proposed rule would amend regulations governing the WIC food packages to, among other things, add nutrient-dense leafy and other dark green and orange fruits and vegetables to food packages for women and children. The time line contained in the unified agenda notice indicated that a proposed rule would be published in Sept. 2000, with a final rule being published in Sept. 2001 (effective date Sept. 2002). The agency has yet to publish a proposed rule.

#### Policy Statement

*The current WIC food packages are designed to maximize general nutrition and health benefits and safeguards the health of pregnant, breastfeeding, and postpartum women and infants, and children up to age five who are at nutritional risk because of inadequate nutrition and income. The produce industry is concerned that WIC food prescription packages have changed little since 1974 and does not reflect current nutrition research and are not consistent with the Federal Dietary Guidelines. Therefore, the produce industry strongly supports policy recommendations which will ensure that a variety of fresh fruits and vegetables are available under the WIC food packages.*

#### Policy Recommendations

- Require the USDA to publish its proposed rule improving the nutritional quality of the WIC food packages within 120 days of bill passage.
- Modify WIC food package to include more nutrient-dense fruits and vegetables.

- Provide a more targeted approach to WIC nutrition education efforts with a focus on fruit and vegetable intake
- Allow for WIC farmers markets coupons to be redeemed at grocery stores or at stores inside federal empowerment zones.
- Initiate a pilot program to implement the California WIC Fresh Produce Option
- Bonus or supplemental payments to states where WIC program participants increase fruit and vegetable intake
- Provide bonus/surplus commodities for WIC program recipients
- Authorize farmers markets as WIC vendors if vendors are not available

#### **Nutrition Education and Promotion Programs**

##### *Background*

The nation's investment in nutrition assistance has been a critical tool in fighting undernutrition and related health problems. Today, it is well established that good nutrition is fundamental to proper growth, development, health and performance. Diet is widely recognized as a central component of health promotion and disease prevention.

But while the United States has made progress in promoting food security and fighting hunger, we face a continuing challenge in improving the quality of the American diet. Poor nutrition and lack of physical activity account for 300,000 deaths per year, second only to tobacco as a cause of preventable mortality. The economic cost of poor nutrition contributing to coronary heart disease, cancer, stroke and diabetes—four of the ten leading causes of death—is now \$71 billion per year, and the growing childhood obesity epidemic is likely to result in a dramatic increase in this cost over time. Research also suggests that diets during pregnancy and early childhood can have long-term impacts on child and adult health. Consumption of a healthy diet in the early years is essential for normal growth and development, and to prevent a variety of nutrition-related health problems, such as iron-deficiency anemia, growth retardation, malnutrition, compromised cognitive achievement, obesity, dental caries, and chronic diseases later in life.

Nutrition education through information and promotion is a key strategy for changing behaviors that lead to reaching health goals. Research also confirms that properly designed and implemented nutrition education interventions, focusing on achieving behavioral change, can be effective at improving diets and nutrition-related behaviors. The governments *Healthy People 2010* initiative also recognizes nutrition as an important factor in the prevention of premature deaths from the chronic diseases described above and sets numerous nutrition objectives including an increase in the proportion of schools that provide nutrition education in school curricula

**Child Nutrition Programs Educational Efforts**— Nutrition education in the Child Nutrition Programs is designed to be supported through two complementary, integrated mechanisms – the Nutrition Education and Training Program (NET) and Team Nutrition. NET has provided support for the State and local infrastructure to deliver nutrition education at schools and childcare settings participating in the Child Nutrition Programs. Team Nutrition is a strategy for incorporating behavior-based messages into new materials for use in NET and other community-based initiatives that target children.

Team Nutrition establishes a national model that encourages use of multiple, reinforcing channels of communication to reach children and their caregivers with targeted nutrition education messages. The NET staff and infrastructure have used materials designed by Team Nutrition and begun to follow the Team Nutrition communications strategy. Without the NET Program, there is no delivery mechanism for either national Child Nutrition initiatives like Team Nutrition or more localized approaches and projects. Although NET continues to be authorized at 50 cents per enrolled child to provide State grants for the infrastructure needed to coordinate nutrition education activities in CN Programs, no federal funding is currently provided. A NET-like infrastructure continues to exist only to the extent that States provide the funding.

Policy Statement

*Improving the design and delivery of nutrition education and promotion efforts holds great potential in achieving significant improvement in dietary practices for all Americans. It is critical that a coordinated approach to fruit and vegetable initiatives within these important nutrition programs is developed and established to meet the Federal Dietary Guidelines and the Healthy People 2010 objectives.*

Policy Recommendations

- Allow for schools and school districts to participate in a public/private matching education program to promote increased fruit and vegetable consumption.
- Authorize FNS to appoint or identify a 5 A Day Liaison at the national, the seven regional FNS offices, and state levels to coordinate and expand USDA efforts to promote fruit and vegetable intake.
- Provide FNS with authority to enter into financial partnerships with business and private non-profit entities to develop and implement 5 A Day promotional initiatives.
- Enhance and strengthen the Team Nutrition program by adding a state-level infrastructure and networking component called the Team Nutrition Network. Increase funding for Team Nutrition by adding an additional \$40 million annually for the Team Nutrition Network. Maintain the current level of funding \$10 million per year for existing Team Nutrition program components and give USDA more flexibility to maintain Team Nutrition Functions.
- Provide funding to FNS to develop a clearinghouse of best practices regarding fruit and vegetable promotion and consumption efforts across the various nutrition assistance programs including child nutrition programs, food stamp programs, WIC, etc. Such a clearinghouse will help state agencies, districts and others in establishing effective fruit and vegetable promotional and consumption efforts.

**Commodity Distribution and Infrastructure Improvements**

Background

USDA's distribution network is designed for moving truckloads (36,000 pounds) of nonperishable commodities and perishable products with long shelf lives. Contracts are established with vendors who deliver to warehouses, often at a State level within a two-week delivery window. States make arrangements for the storage of the commodities until schools or other recipient organizations need them. Each State has its own distribution system for redistributing the commodities within its borders. Distribution of highly perishable products, such as fresh fruits and vegetables, within USDA's network has sometimes resulted in products arriving at the end user in an unsuitable condition for consumption or with a very short shelf life. Perishable fresh fruits and vegetables need to be delivered to end users in smaller quantities that can be used in a relatively short time. Also, the time between harvesting and usage of perishable, fresh fruits and vegetables needs to be kept to a minimum. USDA's distribution method works best for non-perishables and

bulk volumes rather than distributing fresh fruits and vegetables. USDA generally distributes only fruits and vegetables with relatively long shelf lives. Over the last five years, entitlement and bonus commodity donations of fresh fruits and vegetables have been limited to commodities such as potatoes, tomatoes, apples, pears, oranges, cantaloupes, lemons and grapefruit.

Policy Statement

*Due to lack of infrastructure investment for schools by the federal government, the ability to provide fresh fruits and vegetables for school feeding programs continues to be inadequate. In addition, logistical transportation issues continue to impede the delivery and availability of fresh fruits and vegetables in school feeding programs. Congress should include policy recommendations that aid local school districts in the ability to transport, store, handle, and prepare more fresh fruits and vegetables for school feeding programs.*

Policy Recommendations

- Develop a grant program to provide state and local governments, food banks; federal food distribution program administrative organizations; and charitable and faith based organizations with a dedicated funding source for infrastructure and technology improvements to store, transfer, and efficiently distribute fresh fruits and vegetables obtained through federal feeding and nutrition assistance programs, state and local government distribution channels, and private sector charitable donations.
- Reinstate funding for food service equipment necessary for preparing, serving and school meals in addition to storing highly perishable commodities.

**Fruit and Vegetable Nutrition Research**

Background

Historically, FNS had money appropriated for research purposes in three program accounts. The three program accounts were: Child Nutrition, Food Stamps, and WIC. Four years ago, the House Appropriation Committee required that funds designated for research under the FNS' Office of Analysis, Nutrition, and Evaluation be transferred to the Economic Research Service. At the time Congress felt having an USDA consolidate research functions was appropriate. Currently, this policy remains in place.

Policy Statement

*Given the expanding research base on the role of fruits and vegetables in health promotion, and the gap in federal funding for such research, FNS, ERS and other research agencies within USDA must assure that their research agendas include more emphasis on fruits and vegetables.*

Policy Recommendations

- Require USDA to develop a fruit and vegetable research agenda that coordinates research between the Economic Research Service, Food and Nutrition Service, Agricultural Research Service and other USDA agencies. That agenda should include research on how best to promote fruit and vegetable intake to children and should be developed in coordination with the produce industry, nutrition and health organizations, school food service professionals, and other stakeholders.
  - The impact of increased fruit and vegetable consumption toward preventing chronic diseases, including reducing obesity, diabetes, diverticulosis, cataracts, cancer, heart disease, stroke, and hypertension, and the overall benefits of whole food consumption including documentation of certain phytonutrients found in fresh produce that may help prevent such chronic diseases;

- > Development of more effective behavior-based dietary interventions and health promotion programs within federal nutrition programs to increase consumption of fruits and vegetables based on federal dietary guidelines, including environmental influences, strategies for overcoming barriers to behavior change, and food preference development for children and adolescents; and
- > Influences on food choices and options for providing an optimal environment for making informed healthy food choices in a free-market economy including evaluation of different health communications and delivery mechanisms to reach underserved and nutritionally "at risk" populations.

#### **Miscellaneous Provisions**

- Funding to states for operation of state-based 5 A Day initiatives (funding to be used for staffing and programs)
- Establish policy re: commercials during children's TV that would allow "equal time" for healthy food commercials

#### **Conclusion**

We recognize that as with any new or expanded programs, financial resources have to be reallocated or increased to account for the cost associated with these initiatives. On the other hand, we believe investments into these specific policy initiatives will ensure that the federal child nutrition programs represent the nation's best commitment to offer young people a bright start to good nutrition choices.

It can no longer be acceptable to say we don't have the money. With all due respect to the Budget Resolution passed last week in the House, the only reason some say we do not have the money to spend on prevention today is the exorbitant costs of health care we must spend to make up for earlier failures in public health and nutrition programs. Let us not repeat those same mistakes, but instead, *find* the money needed for prevention now, because we'll surely save money in the long run.

We look forward to working with the Committee to address these important issues and offer our tireless commitment to improving child nutrition programs. Thank you.

## Testimony

The United States Senate  
Committee on Agriculture, Nutrition  
and Forestry

Rod Hofstedt  
President Elect  
The National CACFP Forum

March 26, 2003

**Testimony For  
The United States Senate  
Committee on Agriculture, Nutrition and Forestry**

*Cindy's Mom brings the sleepy two year old to her family child care home early on a workday morning. By about 7:30, Cindy and three other child care children are ready for breakfast. They sit at a table with their child care provider, and she helps them pour milk into their cereal and spread sliced fruit on top. She serves them each a glass of orange juice. This healthy breakfast is how the day begins for over 900,000 children participating in the Child and Adult Care Food Program each workday.*

Hello, my name is Rod Hofstedt, I am the President Elect of the National CACFP Forum. I want to thank the Committee for giving me this opportunity to share our views with all of you today. The Forum represents local sponsoring organizations that administer the Child and Adult Care Food Program to family child care providers across the United States. Family child care providers provide child care in their own homes. Based on our experience, and numerous research studies, we believe that the Child and Adult Care Food Program (CACFP) is one of the key building blocks for good nutrition and quality affordable family child care. The program provides reimbursement for food and meal preparation costs, ongoing training in the nutritional needs of children, and onsite technical assistance through a minimum of three in-home visits each year. CACFP serves 2.7 million children daily: over 900,000 in family child care homes and 1.7 million in child care centers. Today I am going to focus on the family child care portion of CACFP.

**How Do Parents and Children Benefit?**

**Parents and Children benefit because CACFP helps to start good nutrition habits early.**

Nutrition problems start early. A recent review of the research on the nutritional status of preschool children revealed some disturbing trends: increasing rates of overweight and obesity, iron deficiency a problem among low-income children, and hunger and poverty continue to have significant negative effects on the nutritional status of very young children.

Parents can rely on providers participating in the CACFP to be good partners in helping their children develop good nutrition habits early. Many children are in care over eight hours each day and eat the majority of their meals at child care. Since many habits learned in child care will last a lifetime, we need to assure that CACFP is available to develop sound nutritional habits in our children. The U.S. Department of Agriculture's **Evaluation of the Child and Adult Care Food Program** found that:

*Children in the Child and Adult Care Food Program received meals that were nutritionally superior to those served to children in child care settings without the Child and Adult Care Food Program.*



Family child care providers appreciate the nutrition education and training they receive through the food program in-home visits, group classes, and on-going assistance and support. Child care providers learn not just the importance of good nutrition but practical advice and guidance on serving tasty and nutritious meals and snacks. As a provider explained:

*"The food program offers training in nutrition and helpful food preparation tips that we can pass on to the parents. The program also offers fun and nutritious recipes."*

**Parents and Children benefit because CACFP helps support affordable quality family child care.**

CACFP resources support quality child care that parents can afford. Research has shown that participation in CACFP is one of the indicators of quality child care. The U.S. General Accounting Office's report, **Promoting Quality in Family Child Care**, cited the effectiveness of the program:

*"Because of its unique combination of resources, training, and oversight, experts believe the food program is one of the most effective vehicles for reaching family child care providers and enhancing the care they provide."*

CACFP can be a key source of financial support by providing up to \$3,500 a year for a family child care home serving 5 children. The importance of food program resources can be seen clearly in a quote from this family child care provider:

*" Without the food program child care providers would have to raise their rates. The types and nutritional value of the foods we serve would more than likely decline. The number of meals and snacks served would be less."*

Given the well documented success of Child and Adult Care Food Program we should make the improvement necessary to assure that all eligible children have access to these much needed benefits. (For a summary of research on CACFP please see attachment A.)

**Increasing Program Access  
Reaching More Children Feeding More Children  
It Is Time to STOP THE DROP!**

As part of the 1996 Welfare Reform Law, a complicated means test was implemented into the family child care portion of CACFP. Prior to this means test all family child care homes participated through an effective one rate system. The new means test created a two-tiered system of reimbursements cutting in half the reimbursement rates for families with incomes over 185% of the poverty level.

Before the implementation of the means test the family child care portion of CACFP was one of the fastest growing federal food programs. Since the implementation of the means test, the number of family child care homes, children and meals and snacks served in family child care homes through CACFP has been declining steadily.

We need to turn this trend around and start reaching all eligible children in child care. Research has shown CACFP's key role in helping to assure quality affordable child care. This is especially important to help meet the increased need for quality affordable care to support the efforts of families moving from welfare to work.

Since the implementation of the means test, there has been a 14% drop in the number of family child care homes participating in CACFP, and a 7% drop in the number of children<sup>1</sup> and meals and snack served through CACFP in family child care homes. In fact, in comparison to USDA growth projections, CACFP in family child care now serves a quarter of a billion less meals and snacks than was expected without the means test. (Please see the attachment B for a graph of estimated versus actual participation.)

Let's help working families work by clearing away some of the unnecessary paperwork, making the necessary adjustments to the system and providing support for reaching out to bring CACFP to more child care providers and children. The following recommendations are based on surveys of sponsoring organizations and providers, focus groups and an extensive analysis of participation data.

#### **Preserving Effective Nutrition Education and Quality Care**

We need to assure CACFP sponsors (Sponsors are non-profit organizations that administer CACFP to family child care home providers.) have the resources needed to focus on important nutrition education and support services that have been pushed aside by an avalanche of means test paperwork by:

- ★ Increasing sponsoring organizations' per home administrative reimbursement rates to reflect the increased administrative burden of the means test.
- ★ Adjusting the sliding scale for sponsors per home administrative reimbursement upwards to account for the higher fixed costs related to the means test.

- ★ Providing a grant program for using CACFP to improve children's nutrition and child care quality. Initiatives would include:

Enhancing CACFP nutrition education, including obesity prevention focusing on projects that encourage healthy eating habits and physical activity,

Producing models and materials addressing language and cultural issues for serving special populations including immigrant communities, and

Making innovative use of technology to improve program access and nutrition education for providers and children.

#### Program Access

The final rates adopted for Tier 2 were considerably lower than those initially proposed and the new means test system, with these reduced rates, has had the unintended consequence of driving providers off the program. We need to adjust the system by:

- ★ Raising the Tier 2 reimbursement rates to assure that they are at least minimally adequate to make it worthwhile for providers serving homes with a mix of children from low-income and middle-income families and homes serving middle-income children to participate in CACFP.
- ★ Allowing CACFP family child care providers to facilitate the return of participating children's family income form. (No cost)

#### Reaching More Rural Areas

Reaching family child care providers in rural areas is especially challenging because of the barriers to using area eligibility, the most successful and inclusive CACFP eligibility mechanism. The distribution of poverty in rural communities makes meeting the 50% area eligibility cut-off more difficult than in highly concentrated urban areas. In addition, serving rural areas requires more resources for time and travel because of the distances involved.

We should adapt the area eligibility criteria to reflect the realities of rural poverty and provide the resources needed to fully serve rural areas by:

- ★ Reducing the area eligibility threshold in family child care from 50 percent to 40 percent.
- ★ Enhancing sponsoring organization reimbursement rates for serving family child care homes in rural areas.

### **Serving More Low-Income Areas**

Serving low-income areas requires additional time and resources to meet increased security needs including at times two-person monitoring teams (for high-crime urban areas), and to help low-income families and providers overcome language and literacy barriers to participate in CACFP.

We should provide the resources required to support the intensive services needed in low-income areas by:

- ★ Enhancing sponsoring organization reimbursement rates for serving family child care homes in low-income areas.

### **Reaching More Low-Income Families by Cutting Red Tape**

We need to improve CACFP's ability to reach low-income families by streamlining program and paperwork requirements through:

- ★ Reducing the area eligibility threshold in family child care from 50 percent to 40 percent.
- ★ Reducing paperwork by extending CACFP categorical eligibility to other beneficiaries of means-tested federally funded programs supporting working families, including Medicaid/SCHIP and child care subsidy programs.
- ★ Standardizing the categorical eligibility requirements for parents and providers.

### **Increasing Access through Paperwork Reduction**

Paperwork is a significant barrier to participation in CACFP. Providers need reasonable CACFP record keeping requirements that allow accountability without being overwhelming. This should be addressed through:

- ★ Making the disregard the same as the National School Lunch Program. (No cost)
- ★ Allow CACFP family child care providers to facilitate the return of participating children's family income form. (No cost)
- ★ Allow carryover funds. (No cost)
- ★ Creating a paperwork reduction task force to examine the feasibility of reducing paperwork related to financial guidance, regulations and record keeping requirements. (No cost)

- ★ Allowing several pilot projects to focus on increased flexibility in record keeping and monitoring requirements to allow targeting of efforts to make the best use of CACFP resources. (No cost)

**Building On Success of USDA's Management Improvement Initiative**

We need to build on the successes to date of USDA's Management Improvement Initiative in strengthening and supporting CACFP by:

- ★ Making the Initiative permanent, increasing funding, and including a focus on making program management more efficient and reducing barriers to participation. This focus would include:

Streamlining program and paperwork requirements including record keeping,

Developing models for maximizing the use of technology for program operation, nutrition education and training,

Creating partnerships with the U.S. Department of Health and Human Services and the U.S. Department of Education to strengthen quality child care and early education efforts using CACFP, and

Focusing on improving program recruitment and retention.

- ★ Allowing the Secretary of Agriculture to reallocate unspent State agency audit funds.

The need for affordable quality child care is growing, and the need for good nutritious meals and healthy eating habits has never been greater; Congress needs to make the necessary improvements so that the number of children participating in the Child and Adult Care Food Program can once again grow to meet these needs.

In conclusion, I would to thank the Committee for their attention to this important program. The National CACFP Forum looks forward to working with the Committee to make the improvement necessary to increase access to CACFP through the 2003 Child Nutrition Reauthorization. (My contact information is attached.)

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i. ADA adjusted for Minnesota change in reporting system.

**NAFMNP**

NATIONAL ASSOCIATION OF FARMERS' MARKET NUTRITION PROGRAMS

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**Statement**

By

Don Wambles, President

National Association of Farmers'  
Market Nutrition Programs

Presented to

U.S. Senate Committee on Agriculture,  
Nutrition & Forestry  
Thad Cochran, Chairman

March 26, 2003

*Cultivating opportunities for consumers to buy fresh produce from local growers*

P.O. Box 9080 Alexandria, Va. 22304  
Phone (703) 837-0451 Facsimile (703) 837-9304.  
Website: [www.nafmnp.org](http://www.nafmnp.org)

Chairman Cochran and members of the Committee. I want to thank you for giving our Association the opportunity to participate in this hearing on child nutrition programs and the reauthorization of the Child Nutrition Act.

Mr. Chairman, my name is Don Wambles. I am the Administrator of the State of Alabama Farmers Marketing Authority, and I am serving this year as president of the National Association of Farmers' Market Nutrition Programs. Our national association represents 37 states, Guam, Puerto Rico, and 5 Indian Tribal Organizations (ITOs) that operate WIC Farmers' Market Nutrition Programs and 36 Senior Farmers' Market Nutrition Programs.

These programs meet two very important objectives. They provide fresh produce to women, infants, children, and seniors by giving them coupons with which to buy fresh fruits and vegetables from small farmers who qualify and participate in the FMNP and increase income to small family farmers by increasing use and awareness of farmers' markets.

Nationally, upwards of 2.7 million WIC clients and seniors buy safe and healthy domestically grown vegetables and fruits from more than 14,400 farmers at more than 2,000 community-based farmers' markets, farm stands, and CSAs (Community-Supported Agriculture Programs).

Mr. Chairman, your state has two WIC FMNP programs—one operated by the MS Department of Agriculture & Commerce and the other by the Mississippi Band of Choctaws. The Choctaw program began in 1995 serving a single farmers' market, eleven farmers, and just over 1,000 recipients. This program today serves eight farmers' markets, 24 producers and more than 1,100 recipients.

The second Mississippi program was started in 1998 under the leadership of Agriculture Commissioner Lester Spell. That first year, 3 farmers markets and 17 small farmers participated, and almost 3,500 WIC recipients received coupons. This past year, this program was offered in 7 farmers markets; 35 farmers participated; and nearly 7,500 recipients received coupons.

The Mississippi programs are small by comparison to many, but they are representative of every single program in the country. These programs create a lasting link between small farmers and thousands of low-income women and children who receive coupons to buy fresh vegetables and fruits. The FMNP educates WIC clients and seniors about the importance of fresh fruits and vegetables. It changes eating habits for the better. This program also generates sales for small farmers. Last year, farmers received about \$40 million from coupons redeemed in both of our programs.

I don't have to expound on all the research that shows the benefits of good child nutrition. I will let the nutrition experts handle that. What I do know is that we deliver nutritious fruits and vegetables to children and dollars to farmers as efficiently as possible, with the added benefit of exposing young mothers to the stable family environment provided by small family farmers.

This program is more than just giving a recipient \$20 in coupons. It provides nutrition education, assistance when shopping at a farmers market, and help in how to prepare products

when they return home. This is a big change from buying fast food, or buying something ready to eat. Learning to shop for fresh vegetables and to prepare them takes time and effort, therefore those of us who have the necessary knowledge must spend the time and energy to teach those who do not, whether young or old.

I would like to thank Congress for its strong and continuing support for the Farmers' Market Nutrition Program. This is the only program that provides direct benefits to small farmers and low-income families with so little effort. Unlike a lot of government programs, neither is considered an entitlement program, a welfare program, or even a subsidy to large corporate farmers. The FMNPs provide fresh, locally grown fruits and vegetables to low-income women, children and the elderly, and they also provide much needed income to thousands of small family farmers. I don't need to remind this committee that these farmers spend their dollars in their local communities, thus promoting local economic development. These programs are a win-win for the country.

This program was funded last year and again this year at \$25 million. Candidly, this has been sufficient funding for applicants to date, but there's a reason why this is so. As state budgets have tightened, it has been increasingly more difficult to find the necessary dollars to provide the required 30 percent state match for this program. While I believe that states should provide some commitment or stake in these programs, the current economic conditions have made it very tough on many states to accomplish this. We have even had states that have had very successful, established programs simply drop out of the program because they could not provide the match.

How do you explain that to a farmer or a child? I know of nothing more frustrating than to establish a program, build interest and enthusiasm in it, and grow it only to see the program end because of state budget crises.

Our association would ask that you consider changing the state match requirements so that states could continue to operate this very important program. The states' match (30% of the total federal grant) is not in line with other food assistance programs. *The Farmers' Market Nutrition Program is the only nutrition program that must provide state match dollars for the federal food funds.* This simply is not fair; it has been and continues to be an obstacle to program growth within states and limits expansion to new states. The FMNP should only be required to match the administrative portion of the Federal funds, just like other nutrition programs.

We would also ask Congress to examine the amount of federal dollars we can give a recipient. This has been capped at \$20 for the past ten years. This is the only program that I know of that hasn't had inflation. It is simple math. Fertilizer costs have increased; labor costs have increased; equipment costs have increased. It makes sense to give recipients more coupons to buy fresh produce that costs more today than ten years ago. I can't explain the logic behind that reasoning to WIC recipients or to the farmers that utilize my markets. It is important for this issue to be addressed this year. It is also reasonable to say that the coupon maximum should be increased to \$30.

Another issue that should be considered is the requirement that limits farmer participation to only those farmers who operate at farmers' markets. While we want to



see this program continue to be used to strengthen local markets, we also want the flexibility to address local situations where markets are neither abundant nor available. There are states and pockets within states that do not have sufficient markets for their farmers, and those farmers should be able to participate in this program.

While this hearing is focused on WIC reauthorization, we want to talk briefly about the Seniors Farmers Market Program. This program is a sister program to the WIC FMNP. It has been phenomenally successful, even though it is in its infancy. The USDA Food & Nutrition Service has been exemplary in their effort to work creatively on the Seniors' program. They have done a tremendous job in getting this program off the ground.

It has been so successful that the demand for the program has far exceeded the available dollars allocated by the Farm Bill. While \$15 million was allocated, states' applications exceeded \$28 million. This program will continue to grow, provided that Congress—through the appropriations committees—add the necessary dollars so that all states that have applied for programs will be funded.

Mr. Chairman, no one in America should go hungry. I would like to put a face on these two programs. I recently witnessed a young WIC mother with her son purchasing produce with WIC FMNP coupons. When the mother handed the bag of vegetables to her child, he stated with excitement, "Mama, are we going to have something to eat tonight?" The expression on that child's face and his words are embedded in my mind forever.

I also recently talked to an elderly gentleman at one of our markets about the Seniors FMNP. He stated that it was a blessing to him. He did not have sufficient income to shop at the farmers market otherwise. I could not help but notice his cap. It was a World War II veteran cap. He wore that cap and talked about his service to the country with pride. He is just one example of the many veterans that are being served through the Seniors' FMNP. I cannot forget what their service has provided for us. At-risk children, young mothers, and seniors benefit from both the WIC and Seniors' Farmers' Market Nutrition Program. Lifestyles are changed. Bonds between recipients and small farmers are being established every day.

Yes, we strongly encourage you to make legislative changes that strengthen and expand both the WIC FMNP and the Seniors' FMNP. Our association stands ready to work with you and your staff and with USDA staff to make this happen.

Thank you for the opportunity to offer this testimony. I'll be happy to respond to your questions.



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**DOCUMENTS SUBMITTED FOR THE RECORD**

APRIL 3, 2003

**Written Testimony to the  
United States Senate  
Agriculture Committee**

**Hearing on Child Nutrition Reauthorization**

**April 3, 2003**

Respectfully submitted by  
Reverend David Beckmann  
President, Bread for the World

Mr. Chairman, I thank you and the committee members for the longstanding and bipartisan support of child nutrition programs.

The 2003 Child Nutrition Program reauthorization offers an opportunity to reaffirm the strong support these programs have enjoyed for many years. It provides a process for enacting targeted reforms to expand and improve the programs. Bread for the World will support your efforts to ensure that child nutrition programs reach every child in need, operate efficiently, and retain their integrity.

I appreciate this opportunity to offer comments about the child nutrition programs. I want to talk about why our members care about these programs from a faith perspective and provide some ideas on how best to approach targeted reforms.

But first I would like to comment on the reauthorization as it relates to the ongoing efforts to approve the fiscal year 2004 Budget Resolution and the upcoming reconciliation. As Congress develops a Concurrent Budget Resolution, drastic cuts to mandatory programs have been proposed by the House of Representatives. These cuts could impact child nutrition programs. Some experts calculate that child nutrition programs could be reduced by up to \$6 billion over ten years, and this reduction could be justified in terms of achieving a savings from reducing fraud – the level of which is debated.

These cuts in mandatory programs are intended to help balance the budget by 2013. Balancing the budget is a worthy goal. But the irony is that cutting child nutrition programs will undermine this effort because reducing our commitment to children will undoubtedly cost our country more in the long run. Studies have shown that investments in the WIC program have saved Medicaid dollars, for example. We also know that hunger impairs the ability to learn, and when children's learning is stunted, our future workforce is weakened. In fact there are many ways in which shortchanging our children limits our nation's future.

The Senate version of the Budget Resolution does not make cuts to mandatory programs. It also does not reserve any new money for the much-needed expansions of the child

nutrition programs. I urge you to work within the Senate to include new money for the programs. Please make children a priority and move us toward the day when all eligible children are participating in these vital lifelines to the future.

#### **Bread for the World's Commitment to Child Nutrition Programs**

Bread for the World is a grassroots, nationwide Christian citizens movement seeking justice for the world's hungry people. Justice can mean many things to many different people, but from a Christian perspective, promoting justice means working to uphold the right and opportunity of every person to live in freedom and with dignity.

It means that we have a responsibility to do more to support the 34 million Americans, including 13 million children, who live in households that struggle to put food on the table. Some members of these families occasionally skip meals or perhaps go without food for an entire day or more.

#### **THE IMPORTANCE OF A STRONG REAUTHORIZATION**

The Child Nutrition Reauthorization comes at a pivotal time. Poverty rates are on the rise, working families are increasingly turning to food pantries for assistance, and the economy is uncertain. The changes you enact to the programs will have lasting impacts on millions of working families whose paychecks increasingly don't cover all the basic necessities.

According to the U.S. Bureau of the Census, while the proportion of poor children declined significantly during the 1960s (from 25 percent to 15 percent), it has climbed steadily since then and now hovers around 20 percent. It is important to make sure all eligible children are able to participate in the programs. **Specifically, I urge you to reject proposals that would have the unintended effect of pushing eligible children out of the school meals programs.**

#### **Poverty Intervention**

Hunger is unquestionably linked to poverty. But the link goes farther than simply assuming that people who are poor cannot afford enough food. Adults without enough food lack the energy to work a steady job and climb *out* of poverty.

Thus food programs can be seen as specific interventions to address poverty because they serve as a critical work support. When we ensure that low-income adults have enough nutritious food to eat, and when we combine that with an availability of good jobs and reasonable costs of living, we can combat hunger and poverty at the same time.

Similarly, children without enough food lack the energy to learn. Hunger is detrimental to the growth of children. It stunts their cognitive development, concentration, and ability to grow. They fall behind. Self-worth, motivation, and hope diminish. Their ability to work as adults is impaired.

We can bring food security to every adult and child so that everyone has the opportunity to thrive. The first step is to reaffirm our commitment to initiatives like school lunch, school breakfast, the Summer Food Service Program, the Child and Adult Care Food Program, and WIC and to find ways to support and strengthen the programs.

#### **THE CHILD NUTRITION PROGRAMS ALREADY PLAY A CRITICAL ROLE**

##### **School Lunch and Breakfast**

Over 27 million students participate in the school lunch program, with over 15 million low-income children receiving lunch for free or at a reduced price. For these children, the school lunch program provides a critical link to food security. Many children rely on school meal programs as their main source of food. Some don't eat between school lunches.

About 75% of schools that participate in the NSLP also offer a breakfast program. However, only about eight million children receive breakfast at school, with over six million receiving free and reduced-price breakfasts. Research has shown that children who eat breakfast at school score better on tests, have lower rates of tardiness and absences, and are less likely to be anxious and depressed.

In addition, both the school lunch and school breakfast programs provide children with nutritious food. School meals are required to meet federal dietary guidelines, and they are becoming healthier. More schools are providing fruits and vegetables and reducing the fat content of the meals.

##### **The Summer Food Service Program**

The Summer Food Service Program is one of the most vital of government programs. When schools let out for the summer, low-income children lose access to the nutritious free and reduced-price school lunches and breakfasts they have during the year. Schools, local government agencies, camps, colleges, and private nonprofit organizations are all working to bridge the gap through the SFSP, but improvements are needed to get this program running at full capacity. As I will discuss later in this testimony, only 2 million children are served through the SFSP, a woefully low number compared to the 15 million children receiving free and reduced-price school meals.

##### **The Child and Adult Care Food Program**

Over 2.5 million children a day have access to nutritious meals through the CACFP. The program provides an important support for child care services and improves the quality of child care because generally only providers that are licensed or approved to provide day care are eligible to participate (with the exceptions of schools and homeless shelters). In addition, food often draws children whose parents must work to afterschool programs, which offer a safe and enriching environment.

##### **The Special Supplemental Nutrition Program for Women, Infants, and Children**

The WIC program provides services to over 7.64 million women, infants, and children. It is one of the best examples of effective government programs. By supplying supplemental food high in nutritional value to low-income families, WIC has reduced

low birth weights, child anemia, and infant mortality. The program is also credited with reducing Medicaid costs and increasing a child's readiness to learn. Finally, by providing nutrition education, WIC enables families to learn about healthy eating and food shopping practices that will last a lifetime and can be passed on to children.

These programs work. They provide a critical safety net to millions of children whose families struggle to provide the basics. They help to build a stronger future for America.

## **OPPORTUNITIES FOR IMPROVEMENT**

### **Enact Targeted Reforms**

There is much that can be done to improve the child nutrition programs. Many of the important changes that will allow the programs to work better have been discussed at this hearing and at the hearing on March 4, 2003. As part of the Food Policy Working Group, a coalition of faith-based organizations working to develop comprehensive food policy that will end hunger in America, Bread for the World supports many of these suggestions. Eliminating the reduced-price category, raising reimbursement rates, and providing more money to promote healthy meals are all good ideas.

There are several proposals that Bread for the World will be working especially hard to achieve.

### **Addressing Overcertification in a Responsible Way**

The USDA believes that ineligible children are receiving free school lunches. The President has requested that Congress improve eligibility verification of families seeking meals. Ensuring that only children who qualify for meals have access to them is a legitimate objective.

But please do not rush to judgment and enact sweeping reforms before we know they are necessary. The level of overcertification in the school meal programs is debatable, and we should be more concerned about making sure that all eligible children are indeed participating.

There are proposals for addressing overcertification that could have very detrimental effects. The Administration has indicated that it would like Congress to adopt a program in which some states expand requirements for up-front documentation.

Increasing the income verification requirements on applicants could eliminate eligible children's access to free and reduced-price meals, since schools consider children ineligible if paperwork is not returned. But sometimes paperwork is not received by parents. There are often language barriers and trust issues. These factors could bar income-qualified children from participating. **Under current verification processes and previous studies, we know that the children who are removed from the program for non-response are in fact often eligible.**

The costs of denying nutritious food to developing children are too great to this country. At the very least, proposals for changing the application verification process should be

fully tested before being widely implemented. Proper safeguards must be in place to protect eligible children from being removed from the programs for non-response.

**Expanding the Programs, Especially the Summer Food Service Program**

Participation rates vary from program to program, but one thing is certain: there are plenty of children who are underserved. Bread for the World supports efforts to ensure that each child is able to participate in the programs for which he or she is eligible.

One of the most glaring gaps in the child nutrition programs is the lack of eligible children participating in the Summer Food Service Program. About 15.4 million children received free and reduced-price meals during the 2000-2001 school year through the NSLP, but the SFSP had an average daily attendance of only 2.1 million children. (In addition, the NSLP served about 1 million children in the summer at year-round schools.) Thus many children who are eligible for free and reduced-price meals during the school year are not served during the summer.

One reason for this gap in service is the lack of enough Summer Food Service program sites. Paperwork is burdensome, and potential sponsors are discouraged from participating because they lack the administrative capabilities to comply. Congress has the opportunity to encourage more participation in the SFSP by reducing the red tape associated with sponsoring a summer food program and by providing start-up grants. Expanding the Lugar pilot program to all states and to all organizations would be a welcome move.

**Simplifying the Programs**

The child nutrition programs are in desperate need of simplification. I urge you to examine ways to reduce paper applications. Enable states to increase their ability to conduct direct certification, which allows all children whose families are receiving food stamps or TANF to be automatically certified for school meals. Consider enabling children to be certified for an entire year, so that families whose wages fluctuate will not be penalized when they have a good month and wages rise temporarily. Additional resources can also help high-need schools implement Provision II to significantly reduce their paperwork in exchange for offering all meals for free. And for those families that are chosen for verification, increase efforts to ensure the requests for information do reach the household and are easily understood by parents.

**Understanding the Paradox of Obesity and Malnutrition**

The United States has a growing obesity problem. According to the 1999 Center for Disease Control and Prevention National Health and Nutrition Examination Survey, nearly two-thirds of adults are overweight or obese. This same study estimates that 13 percent of children (ages 6-11 years) and 14 percent of adolescents (12-19 years) are overweight.

Some say that our national nutrition programs are at fault. They blame the programs for providing poor and hungry people with too much food and allege that the foods provided are too high in fat content. But these criticisms are misdirected. Overweight and obesity are not limited to low income individuals, and therefore we should not try to solve the obesity problem through programs for low-income people.



Child nutrition programs should adhere to nutritional guidelines. Progress in this area is commendable and should continue. When the programs work as intended -- and when funding is sufficient to cover the cost of nutritious food and nutrition education -- they have enormous benefits in providing essential nutrients and in promoting healthy eating. But the child nutrition programs cannot overcome many other powerful factors in determining obesity.

A study now in progress at the University of California-Davis' Nutrition Department is analyzing the food acquisition cycles of food stamp recipients. They are learning that the cycles are characterized by a short period of involuntary food restriction at the end of the month when food stamps and money runs low, followed by a brief period of over or binge eating at the beginning of the month when the food supply is replenished.

Moreover, some low-income families consume foods high in fats, calories, and sugars because those foods are lowest in cost and most readily available. Healthy foods like fruits and vegetables cost more. Also, many low-income neighborhoods do not have large grocery stores with low prices, and transportation to larger stores with better prices is not always accessible.

Children must have a stable source of healthy, nutritious food. We should recognize that these programs already play a critical role in promoting the health and well being of our country's low-income children. I urge you to continue to assess and increase the nutritional value of school meals and the nutrition education components. What remains to be addressed is the overarching barriers to healthy eating that are associated with poverty.

Thank you for your leadership on child nutrition issues and for this opportunity to share the views of Bread for the World and its members.

**David Beckmann**

The Rev. David Beckmann is president of Bread for the World, a nationwide Christian citizens' movement against hunger. Bread for the World mobilizes about a quarter of a million letters to Congress each year on issues that are important to hungry people in the United States and worldwide. In recent years, Bread for the World has worked for debt relief, increased development assistance, and other changes to strengthen food security in Africa. Bread for the World has also lobbied to strengthen the Food Stamp Program and make Temporary Assistance for Needy Families more effective in reducing hunger and poverty in the United States.

Beckmann is a Lutheran pastor as well as an economist. After a term with Lutheran World Relief in Bangladesh, he worked at the World Bank – on urban poverty projects, then as a speechwriter for the president of the Bank, and then as senior advisor on nongovernmental organizations. He led the Bank's early thinking about popular participation in development.

Beckmann became president of Bread for the World and Bread for the World Institute (a related educational organization) in 1991. Bread for the World Institute does research and education on World Bank and International Monetary Fund reform issues.



## National WIC Association

### **WIC For A Healthier, Stronger America!**

The Special Supplemental Nutrition Program for Women, Infants and Children – WIC – has an extraordinary 29-year record of preventing children's health problems and improving their health, growth and development. **WIC children enter school Ready To Learn** and show better cognitive performance.

Quality nutrition services are the centerpiece of WIC: nutrition and breastfeeding education, nutritious foods, and improved healthcare access for low and moderate income women and children with, or at risk of developing, nutrition related health problems. WIC's committed, results oriented, entrepreneurial staff stretch resources to serve all eligible women and children and ensure program effectiveness and integrity.

As the nation's premier public health nutrition program, **WIC is a cost-effective, sound investment – insuring the health of our children.**

### **WIC Is Critical for Families in Need**

WIC serves over 7.54 million women, infants and children – nearly half of all America's infants and one-quarter of its children between 1 and 4 years of age. Still, over one in ten WIC eligibles are unable to receive WIC services due to funding constraints, the changing economic and social environment, erroneous perceptions about program eligibility and infrastructure limitations.

### **NWA Funding Recommendations**

**Fiscal Year 2004 Appropriation** – NWA supports the President's FY 2004 WIC funding level of \$4.77 billion. This level is critical to:

- maintain current and anticipated WIC participation levels
- prevent participant cuts due to inadequate nutrition services and administration (NSA) funding
- respond to food cost inflation
- provide funds for nutrition services to maintain clinic staffing and pay competitive salaries
- achieve manageable growth for under fair share states to ensure that WIC reaches nutritionally at-risk, income eligibles unable to participate.

NWA supports the President's proposal to provide contingency funds for WIC. It is critical that any contingency funds distributed to states be recognized as a part of the national WIC appropriation base for the following year's distribution.

### **NATIONAL WIC ASSOCIATION – 2003 WIC Reauthorization Agenda**

**NWA's mission:** providing leadership to promote quality nutrition services; advocating for services for all eligible women, infants and children; and assuring the sound and responsive management of WIC.

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## National WIC Association

**Assisting Immunization Linkage** – Healthcare providers have responsibility for ensuring adequacy of childhood immunizations. WIC's role is to support providers and remind parents that immunizations protect their children's health. **NWA recommends:** \$22 million annually in CDC National Immunization Program funding targeted to WIC to screen and assess child immunization status, followed by education and referral to providers and \$100 million for immunization registries linking WIC and other healthcare services.

**Improving the Use of Information Technology to Enhance Service Delivery and Building Management Information Systems (MIS)** – Technology provides a critical foundation for quality WIC services and Program Integrity. Funding WIC technology from existing resources compromises WIC's ability to deliver services and develop responsive MIS systems. Current limits on funding prevent more than half – 56% – of WIC state agencies from meeting USDA core functions. To develop and maintain MIS and electronic service delivery systems, and to link with other health data systems – **NWA recommends:** Congress provide an additional \$122 million annually outside the regular NSA grant to implement MIS core functions, upgrade WIC technology systems, maintain MIS and electronic services and expedite USDA's 5 year plan for state MIS systems.

### NWA Reauthorization Recommendations

- **Coordinating Nutrition Services with Health and Welfare Programs**

**Extending Certification Periods** – To offer mothers appointments with their infants and children — eliminating unnecessary clinic visits and allowing better coordination with healthcare services, reducing invasive blood work for infants and children, providing for more counseling time and streamlining paperwork for clients and clinic – **NWA recommends:** giving states the option to certify for one year children and breastfeeding women, or until women stop breastfeeding, whichever is earlier.

**Suggested language** – To Sec. 1786 (d)(3)(A) "Persons shall be certified for participation in accordance with general procedures prescribed by the Secretary," add a new paragraph (i) "A State may have the option to certify for up to one year children and breastfeeding women, or until women stop breastfeeding, whichever is earlier."

**Exemptions for Physical Presence** – To offer families flexibility for physical presence because of distance, transportation, weather, other local conditions or special needs – **NWA recommends:** including the physical presence requirement one time only at some time during the certification period, provided that the participant is receiving on-going healthcare from a provider.

**Suggested language** – Revise Sec. 1786 (d)(3)(C) Physical presence. (i) In general. (ii) Waivers. (i)(aa) to read "was present at some time during the certification period;" and (ii)(aa) to read

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"was present at some time during the certification period;" and (l)(bb) to read "is receiving ongoing health care from a provider;" striking "other than the local agency" (as a local agency may not be health care provider) and add a new paragraph (ll)(aa) "was present at some time during the certification period; (bb) is unable to present due to distance, transportation, weather, other local conditions or special needs."

- **Meeting Increased Program Requirements with Available Resources**

**Amending the National Voter Registration Act (NVRA)** – To preserve the integrity of basic WIC services – nutrition benefits and coordinated healthcare, to streamline paperwork and reduce administrative costs and reduce service barriers – **NWA recommends:** exempting WIC from the requirements of the NVRA, to offer voter registration applications and document these opportunities for all applicants and participants.

**Suggested language** – Add a new paragraph (D) to Sec. 1786 (e)(4) The State agency – (D) "and each local agency shall be exempt from the requirements of the National Voter Registration Act."

**Protecting WIC's Limited NSA Resources** – To protect the quality of WIC nutrition and healthcare services – **NWA recommends:** WIC administrative costs related to providing services for other programs be reimbursed by those programs. **Each minute of an unfunded mandate results in the loss of over 125,000 hours of nutrition education interventions annually.**

**Suggested language** – Add a new paragraph (C) to Sec. 1786 (c)(2) Subject to amounts appropriated to carry out this section under subsection (g) of this section – (C) "the Secretary shall not authorize any State agency or approved eligible local agency to expend funds provided for activities that are not fully reimbursed by other Federal Government departments or agencies unless otherwise authorized by section 17 of this Act."

**Maintaining the Nutrition and Health Mission of WIC** – To guarantee the integrity and quality of WIC nutrition and healthcare services – **NWA recommends:** exempting WIC from services that are inconsistent with the intent and purpose of the Program.

**Suggested language** – To Sec. 1786 (a) Congressional findings and declaration of purpose. "Congress finds that substantial numbers of pregnant, postpartum, and breastfeeding women, infants, and young children from families with inadequate income are at special risk with respect to their physical and mental health by reason of inadequate nutrition or health care, or both. It is therefore, the purpose of the program authorized by this section to provide, up to the authorization levels set forth in subsection (g) of this section, supplemental foods and nutrition education through any eligible local agency that applies for participation in the program. The program shall serve as an adjunct to good health care, during critical times of growth and development, to prevent the occurrence of health problems, including drug abuse, and improve the health status of these persons – **add a new paragraph (1) "The program shall be exempt from providing services that are inconsistent with the intent and purpose of the program as provided for in subsection (a).**"

### NATIONAL WIC ASSOCIATION – 2003 WIC Reauthorization Agenda

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- **Responding To Health and Demographic Changes in WIC's Populations**

**Managing America's Obesity** – To positively affect our nation's most serious nutritional problem – obesity and related health consequences – **NWA recommends:** *expanding the definition of nutrition education to enhance WIC's primary role allowing for anticipatory guidance related to physical activity, feeding relationships and child development.*

**Suggested language** – To Sec. 1786 (b)(7) add "'Nutrition education' means individual or group sessions and the provision of materials designed to improve health status that achieve positive change in dietary habits, **and related habits, such as, but not limited to, physical activity, parenting, child development** and emphasize relationships between nutrition and health, all in keeping with the individual's personal, cultural, and socioeconomic preferences."

**Enhancing WIC Food Prescriptions** – To provide healthful changes and enhance the food package, improving WIC nutritionists' flexibility in prescribing foods and responding to America's obesity epidemic – **NWA recommends:** *USDA report to Congress within 6 months of enactment of reauthorization legislation on the status of efforts to adopt a comprehensive food package proposal that reflects the need for fresh, frozen and canned fruits and vegetables and culturally appropriate foods responsive to participants' nutritional needs and consistent with national nutrition guidelines. Also that USDA shall publish within 6 months of its report to Congress a comprehensive proposed rule to revise the WIC food package to meet these minimum changes.* **NWA** also supports a federally approved WIC food list that includes national, store and private label brands, giving states flexibility to select WIC foods to manage food costs and nutritional options for participants.

**Suggested language** – To Sec. 1786 (f)(11) add "The Secretary shall prescribe by regulation the supplemental foods to be made available in the program under this section. To the degree possible, the Secretary shall assure that the fat, sugar and salt content of the prescribed foods is appropriate, **and that the prescribed foods provide culturally appropriate variety and options responsive to emerging public health concerns and current nutrition science.**"

**Re-evaluating WIC Food Prescriptions** – The current WIC food package is now 30 years old and no longer consistent with current dietary guidelines and science. In 2000, **NWA** recommended changes to the WIC food package to reflect current nutrition science, improve dietary intake and reduce the incidence of obesity including broader choices of grain products, addition of fresh, frozen or canned fruits and vegetables, reduced quantities of juice for infants, offering low-fat milk as the standard, reduced quantities of cheese and foods that reflect diverse cultural dietary patterns. **NWA** supports USDA's intentions to re-evaluate the WIC food package. To ensure that WIC foods continue to provide healthful food supplements for WIC families and complement nutrition education efforts – **NWA recommends:** *the National Academy of Sciences, Institute of Medicine, re-evaluate the WIC food package at least every 10 years, recommending changes to reflect current national nutrition science and concerns.*

**Suggested language** – To Sec. 1786 (f)(11) add a new paragraph (A) "The Secretary shall engage the National Academy of Sciences, Institute of Medicine every 10 years to re-evaluate the

### NATIONAL WIC ASSOCIATION – 2003 WIC Reauthorization Agenda

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## National WIC Association

supplemental foods available in the program and recommend changes to reflect current public health concerns, national nutrition science and the diverse cultures the program serves."

**Maximizing Infant Formula Benefits** – Federal Regulations set a maximum amount for infant formula to be issued to WIC participants each month at a rate of 8 lbs. (3.6 kg) per 403 fluid ounces of concentrate for powdered formula. Infant formula manufacturers offer powdered formula in a variety of can sizes, which they change periodically. Because the maximum amount can not be exceeded and because the powdered can size variations rarely exactly match the authorized amount, WIC clients are provided less formula and nutritional benefit than they are authorized to receive. To avoid a substantial, cumulative shortage over the certification period and potential health risks – **NWA recommends:** USDA allow State WIC agencies to round up to the next whole can size of infant formula to ensure that all infants receive the full-authorized nutritional benefit of at least 944 reconstituted fluid ounces, at standard dilution, per month for powdered infant formula.

**Suggested language** – To Sec. 1786 (f) add a new paragraph (25) "The State agency – (A) shall round up to the next whole can size of infant formula to ensure that all infants receive the full-authorized nutritional benefit of at least 944 reconstituted fluid ounces, at standard dilution, per month for powdered infant formula."

**Responding to the Income Challenges of the Working Poor** – Currently, to be income eligible to participate in the WIC Program an applicants' gross income (i.e. before taxes are withheld) must fall at or below 185 percent of the U.S. Poverty Income Guidelines. For a family of 4, this amounts to \$33,485 or \$644 weekly. Because families increasingly find their income stretched to meet rising healthcare, housing and transportation costs – **NWA recommends:** an increase in the income guidelines to 200 percent of the U.S. Poverty Income Guidelines.

**Suggested language** – To Sec. 1786 (d) Eligible participants (2) (A) add a new paragraph (iv) (I) "notwithstanding subsections (2) (A) (i), (ii), and (iii), receives a gross income at or below 200 percent of the U.S. Poverty Income Guidelines."

- **Meeting Increased Program Requirements**

**Ensuring Cost-Effective Vendor Services** – To insure cost competitiveness and reasonable food prices – **NWA recommends:** with the exception of non-profit agencies, pharmacies and vendors required to ensure participant access, WIC vendors should be food stamp authorized and offer participants a full market basket of foods.

**Suggested language** – To Sec. 1786 (f) add a new paragraph (25) "The State agency – (B) shall, notwithstanding subsection (h) (11) (A) and (B) of this section, require WIC vendor applicants to provide proof of Food Stamp Program authorization and that they meet minimum inventory requirements based on a full market basket of foods benefits during the application process. And a new paragraph (25) (B) (i) an agency may exempt non-profits, pharmacies or vendors required to ensure participant access from this subsection."

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**Separating WIC and WIC Farmers' Market Nutrition Program (FMNP) Funding** – FMNP funds are provided through a legislatively mandated set-aside in the WIC appropriation. If the entire WIC allocation is needed to maintain WIC caseload, FMNP would not be funded. This unstable situation leaves the status of FMNP in doubt from year to year and does not allow planning and management of resources with confidence for the upcoming growing season. For participating FMNP states Federal funds support 70 percent of the total cost of the program. The remaining 30 percent of the program's cost must come from a state match. **NWA recommends:** that Congress separate the funding for WIC and FMNP to eliminate direct competition for funds and enhance collaboration between WIC and FMNP. Separation of funding will ensure resources for WIC benefits, that WIC caseload funds are not diverted to FMNP and that FMNP stands on its own.

**Suggested language** – Delete Sec. 1786 (m) from the section, re-letter subsections (n), (o), (p) and (q) as (m), (n), (o) and (p) and create a new Section explicitly for the WIC Farmer's Market Nutrition Program (FMNP).

**Increasing NSA Funding Flexibility** – The current funding formula does not allow states sufficient NSA funds to support funded participation levels, maintain, protect and improve client services and program integrity or USDA initiatives. **NWA recommends:** state options to convert unspent food funds to NSA including increasing the spend forward amount from 1 percent + .5% for management information systems (MIS) to 1.5 percent + .5% or 2 percent for MIS and allowing states to apply a portion of rebate dollars received to NSA in accordance with the proportional administrative/food split used in allocating food and NSA grant dollars.

**Suggested language** – For the proportional conversion of rebate dollars to Sec. 1786 (h)(8) add a new paragraph (K) "The Secretary shall authorize state agencies to expend the amounts made available under this subsection in a manner consistent with subsections (h) (1), (2) and (3).

**Suggested language** – For increasing the spend forward amount revise Sec. 1786 (i)(3)(A)(ii)(I) to read "for each fiscal year, of the amounts allocated to a State agency for nutrition services and administration, an amount equal to not more than **1.5 percent** of the amount allocated to the State agency under this section for the fiscal year may be expended by the State agency for allowable expenses incurred under this section for nutrition services and administration during the subsequent fiscal year; and"

**Expanding Recovered Funds Flexibility** – States currently have the ability to use vendor and participant recovered funds for program purposes. States would like to extend this ability to the use of funds recovered from local agencies. **NWA recommends:** states have the ability to utilize collections of WIC program recovered funds in a consistent manner.

**Reviewing Infant Formula Cost Containment Regulations** – USDA has promulgated interim regulations without the benefit of public comment, failing to consider State agencies' experience with bidding and contracting and preventing States' from negotiating the best contract for individual circumstances. **NWA recommends:** that USDA partner with the Association to review the interim regulations on infant formula cost containment and propose

### NATIONAL WIC ASSOCIATION – 2003 WIC Reauthorization Agenda

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## National WIC Association

regulatory changes to appropriately respond to States' concerns thereby ensuring maximum participant benefits.

- **Assessing the Effects of Nutrition Services**

**Providing for Innovation, Data Collection and WIC Outcomes Research** – To support rigorous research and evaluation documenting WIC's continued success – **NWA recommends:** flexible use of Special Project Grants funds, state WIC funds and other grant resources for health outcomes research and evaluation to identify effective nutrition education and breastfeeding promotion and support services, to test innovative service delivery and food prescriptions, and to support USDA's partnership with NWA to achieve WIC sensitive research and evaluation objectives.

- **Visioning the Future Landscape of WIC**

**Considering the Appropriate Funding Mechanism for WIC** – Over the course of the past decade there has been discussion about the value or appropriateness of converting WIC from a domestic discretionary program to a mandatory program. Little is known about the real consequences of affecting such a conversion – **NWA recommends:** that should policy makers consider conversion of the Program's funding mechanism from a discretionary to a mandatory program, that Congress fully study the consequences of such a change and its impact on eligibility, participation, and services prior to implementing a conversion.

- **Recruiting and Retaining Skilled Staff**

**Recruitment and Retention of Quality Staff** – **NWA recommends:** revising the National Health Service Corps Program to include registered dietitians and nutritionists in student loan forgiveness programs.

**As the nation's premier public health nutrition program, WIC is a cost-effective, sound investment – insuring the health of our children.**

**WIC For A Healthier, Stronger America!**

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FOR IMMEDIATE RELEASE

Contact: Bill Greer  
202-220-0667  
wgreer@fmi.org

**FMI Proposes Reforms to Benefit WIC Program Participants**  
*Reforms Would Help Them Stretch WIC Dollars  
And Broaden Their Access to Products and Retail Stores*

WASHINGTON, DC — April 3, 2003 — A retail food industry leader today proposed reforms to the Women, Infants and Children (WIC) program that would enable users to stretch their WIC dollars, broaden their access to products and stores, and make it easier for retailers to serve them — all at no additional cost to taxpayers.

“The Food Marketing Institute (FMI) fully supports the important mission of the WIC program,” testified FMI Vice President of Legislative and Political Affairs Anne Curry before the Senate Agriculture, Nutrition and Forestry Committee.

She added, however, “Today the administrative process — from the initial authorization of a retail store to customer checkout and reimbursement — is incredibly complex and needs to be more user-friendly and efficient.”

Curry offered 10 proposals to improve the WIC program for all parties involved, including:

- Allow WIC participants to buy less costly but nutritionally equal private label versions of products, saving them money to purchase additional food.
- When store ownership changes, issue interim WIC licenses so customers can continue to shop at their regular stores. Under current rules, licenses are immediately lifted in such events, and it takes up to 12 weeks for them to be reissued.
- Make WIC prescriptions more flexible and in line with packaging changes. For example, a prescription may call for 46-ounce cans of juice when the standard packaging has changed to 64-ounce plastic bottles.
- Improve efficiency by facilitating the transition to delivering WIC benefits electronically, which is used widely in the Food Stamp program. “The transition should be cost-neutral to authorized retailers,” Curry said, or allow companies to “upgrade equipment during the natural lifecycle at a minimal cost, provided that requirements are standardized and software is available that requires only minimal modifications by retailers.”

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- Notify store managers of program errors after WIC undercover compliance visits. Stores can lose their WIC and Food Stamp licenses after three visits have documented errors — when the problems could have been easily resolved after the first visit.
- Authorize the creation of WIC Retail Advisory Panels in every state. These have been very helpful in resolving operational issues. Currently, half the states have such panels.

“It is important to note,” Curry said, “that our recommendations will not cost money . . . and should achieve savings and improved efficiency and customer service.

These recommendations are based on a report issued by the FMI WIC Task Force, composed of 22 food retail industry executives that help oversee the program at the state and federal levels. The task force is chaired by Liz Chace-Marino, a former state WIC program administrator and currently director of government and corporate affairs at The Stop & Shop Supermarket Company based in Boston, MA.

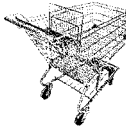
Food Marketing Institute (FMI) conducts programs in research, education, industry relations and public affairs on behalf of its 2,300 member companies — food retailers and wholesalers — in the United States and around the world. FMI's U.S. members operate approximately 26,000 retail food stores with a combined annual sales volume of \$340 billion — three-quarters of all food retail store sales in the United States. FMI's retail membership is composed of large multi-store chains, regional firms and independent supermarkets. Its international membership includes 200 companies from 60 countries.



655 15<sup>th</sup> STREET, NW SEVENTH FLOOR  
 WASHINGTON, D.C. 20005-5701  
 TELEPHONE: 202/452-8444  
 FAX: 202/220-0873  
 E-MAIL: [FMI@FMI.ORG](mailto:FMI@FMI.ORG)  
 WEB SITE: [WWW.FMI.ORG](http://WWW.FMI.ORG)

### WIC Reauthorization Priorities

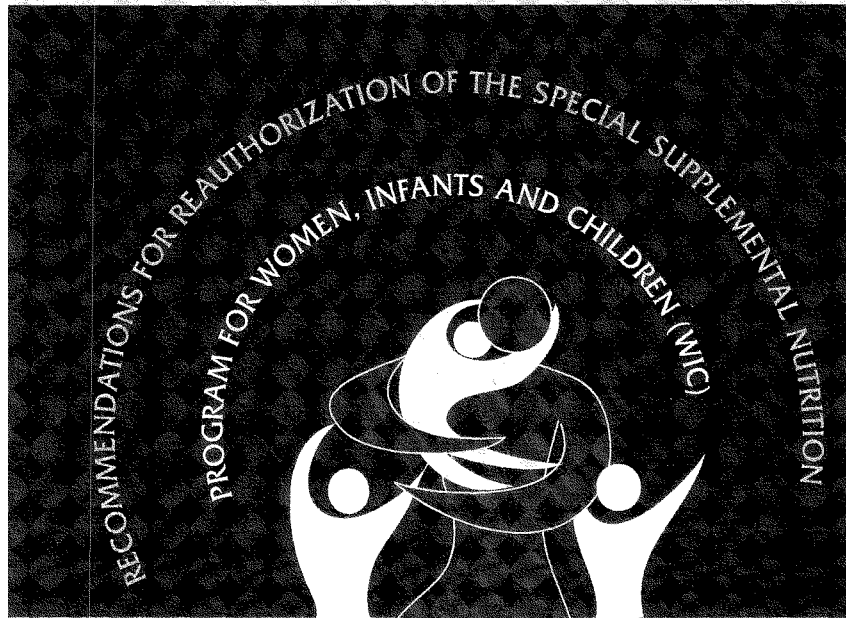
1. **Notification of Owner/Manager When Compliance Violation Occurs**
  - The store owner/manager should be notified after each violation and prior to another compliance visit, so they have the opportunity to correct the problem.
2. **WIC-EBT Cost Neutral for Retailers**
  - The WIC Program should incorporate language similar to what was included in the Food Stamp program prior to beginning the electronic of benefits, that the program should be at no additional cost to authorized retailers.
3. **Advisory Panels**
  - WIC Retail Advisory Panels should be authorized and required in every state to address operational issues on an ongoing basis.
4. **Private Label Products**
  - Private label products should receive approval provided the items maintain the nutritional integrity of the current WIC food products.
5. **Line-item Rejection**
  - Line-item rejection for vouchers should be permitted, rather than entire vouchers being rejected when a single item is not eligible for reimbursement.
6. **National WIC UPC Database**
  - Retailers are very supportive of a National WIC UPC Database and feel that it is a necessity, particularly with some states moving to electronic delivery of benefits.
7. **Change in Packaging**
  - The program needs to be more attuned to the changes in packaging.
8. **Infant Formula Theft**
  - Seek USDA mandate that states develop some type of contractual agreement with distributors or audit trail from manufacturer to retailer. Formula could only be purchased from authorized distributors.
9. **Interim Licenses**
  - An interim WIC license should be available for a short period of time, after change in store ownership, while the new owner's application is being reviewed by USDA, particularly if the new owner already has another WIC license.
10. **Flexibility with minimum inventory, particularly with some of the specialty products.**
  - For example, a recipient may be given a prescription for 10 cans of Alimentum or Nutramigen, a specialty formula. The inventory may be depleted after one customer. If 2-3 customers come in to the store with similar prescriptions, the inventory may not be available in the required 48 hour window.



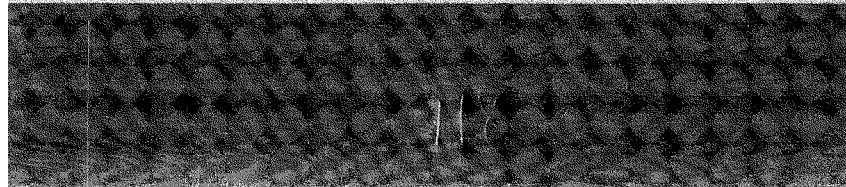
YOUR NEIGHBORHOOD SUPERMARKETS



**FOOD MARKETING INSTITUTE (FMI)**  
**YOUR NEIGHBORHOOD SUPERMARKETS**



**Compiled by the FMI WIC Task Force**  
**September 2002**



**Food Marketing Institute (FMI)**  
*Your Neighborhood Supermarkets*

**Recommendations for Reauthorization of the Special  
Supplemental Nutrition Program for Women, Infants and  
Children (WIC)**

**Compiled by the FMI WIC Task Force  
September 2002**

## **FMI Recommendations for Reauthorization of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC)**

In preparation for the reauthorization of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) by September 30, 2003, the Food Marketing Institute reconvened our WIC Task Force to compile recommendations to be considered by the Administration and Congress as legislation is designed. There are several of these recommendations that can undoubtedly be accomplished administratively, without legislative authorization. We would offer to you the resources of FMI staff and FMI's WIC Task Force for further clarification or suggestions on any of these items. We appreciate the opportunity to provide feedback during this important process.

The FMI WIC Task Force agrees that there are six primary areas that need to be addressed from a retailer's perspective in the reauthorization process. Those areas include retailer authorization, retail operations, reimbursement issues, penalties, electronic benefits transfer (EBT) and infant formula rebates. Certainly, most of these recommendations, if implemented, would impact the customer positively as well.

Although, we are in full agreement with the important mission of the WIC program and support its goals 100%, the process from the initial authorization of a store, to customer checkout and retailer reimbursement is incredibly complex and needs to be made more user friendly and efficient. Below is a comprehensive listing by category of the issues we feel need to be addressed during the upcoming re-authorization process.

### **Retailer Authorization**

- **The number of stores participating in WIC should not be limited.** Not only should USDA not advance any vendor limitation rules for WIC, but they should adopt language that prohibits states and counties from limiting the number of otherwise qualified vendors.
- **Tobacco licenses and alcohol licenses should not be required by any state for WIC authorization.** This was changed last year for the Food Stamp Program and should be revised in the WIC program as well to be consistent with those guidelines. One type of business license should be required to be included with the application. Some states are still requiring tobacco and alcohol licenses even when none of those products can be purchased on the WIC program. Often those licenses come very late for retailers, delaying the submission of their WIC application.
- **There should be one application for both the Food Stamp and WIC programs. It should be standardized across the 50 states and territories, available on the Internet and able to be filled out by any authorized company representative.** The new centralized application process seems to be working

very well for Food Stamp authorization. Some states have some very onerous requirements that should be eliminated. For instance, in New York, a store owner or manager must appear in person at the WIC office to pick up a WIC application. Some states also require each store manager to fill out the paperwork for the WIC application and if there are 2 errors on the paperwork, that store is disqualified for a year. In some states a ½ inch thick stack of paperwork is required. For a person with no experience in this area to be confined to only one error on a stack of paperwork with no chance to correct the error is very unfair.

- **An interim WIC license should be available for a short period of time, after change in store ownership, while the new owner's application is being reviewed by USDA.** Currently, the license is immediately lifted when ownership changes hands and often it is 9-12 weeks for a new license even when the new owner is authorized at another location. This has a very significant impact on WIC customers who can no longer purchase products at a store where they have been shopping previously.

## Retail Operations

- **WIC Retail Advisory Panels should be authorized and required in every state to address operational issues on an ongoing basis.** They have been very helpful in each state where they are being utilized.
- **WIC participants or those who make purchases for a WIC participant need to be better trained in the program requirements and held accountable for failing to observe the rules.** It is a frequent occurrence for recipients to lose checks, get replacement checks, use the replacement checks then find the original checks and use them. The store then gets charged bank fees and the price of the voucher on the original checks and loses \$60-70 per transaction when this happens. The customer needs to know that this practice is fraud and should be penalized for it. Some customers have a difficult time converting ounces to pounds and need some educational tools to help them. There also needs to be more consistency in responses to questions even within the same state. For instance, for 12 oz of cheese, can you substitute 2 / 5oz packages plus the remainder in deli cheese? Questions similar to this are likely to get very different answers.
- **Private label products should receive approval provided the items maintain the nutritional integrity of the current WIC food products.**
- **The WIC program needs to be more flexible with minimum inventory, particularly with some of the specialty products.** For example, a recipient may be given a prescription for 10 cans of Alimentum or Nutramigen, a specialty formula. The inventory may be depleted after one customer. If 2-3 customers come in to the store with similar prescriptions, the inventory may not be available in the required 48 hour window.
- **Retailers need to be given more flexibility with training requirements.** Training should be required only once every 3 years with an annual newsletter of any updates. It could be mandated annually for those who are not in compliance.



Those who are in compliance are finding the required review training to be basic and of limited value.

- **Pricing changes need to be handled more efficiently.** When manufacturers increase prices and notify the state, they often do not get into the system efficiently. One example was given of a December manufacturer notification that was still in the system at the old price in June. The National UPC Database, currently in the design phase, should help to alleviate this problem and should be expedited as much as possible.
- **The program needs to be more attuned to the changes in packaging.** For instance, an authorized product of the same measurement is approved in can but not in plastic bottles. In some instances, the prescription is provided in non-traditional sizes. For instance, 64oz plastic bottles are the standard size in juice, however the prescription may provide for 46oz cans which are difficult to find and sometimes more expensive because they are a non-traditional size.

## Reimbursement

- **There needs to be a standard reimbursement policy.** Currently there is a wide variation in how states reimburse retailers.
- **Retail peer group pricing in some states is a real problem.** Peer grouping is often not done correctly. Most states do not require that all of the items on the prescription be purchased (except the infant package). This throws off the average pricing. It is important to use peer grouping instead of WIC volume. Massachusetts is a good example of a program that is working well and should be an example for other states.
- **Pricing should allow for minor fluctuations.** A few states still do not allow for a range and calculate based on the last survey only.
- **WIC checks or vouchers should be standardized across the country.**
- **Line-item rejection for vouchers should be permitted, rather than entire vouchers being rejected when a single item is not eligible for reimbursement.**

## Penalties

- **A national uniform sanction system should be instituted that recognizes the difference at retail level between human error and fraud.**
- **The store owner/manager should be notified after each incident and prior to another compliance visit. The whole penalty system needs to be reviewed as it is often unfair.** Undercover WIC shoppers come in and will not identify themselves to the owner or manager. All other compliance buyers identify themselves to the manager (alcohol, tobacco, etc.) The WIC undercover shoppers do not notify the owner/manager of a problem. The owner/manager needs to be notified immediately of a problem. Under the current system, the WIC undercover shopper comes back to the store a second time to see if there are

further mistakes, but the owner/manager has still not been informed of an initial problem and thus has not had an opportunity to correct the problem. Fines are being levied in excess of \$30,000 over not enough money to buy a cup of coffee. Three visits may have taken place before the owner/manager was notified of a problem and then with the next problem they will be disqualified from participation in both the WIC and Food Stamp programs. The penalties are steeper than selling alcohol to minors.

- **Penalties should be tied to the length of the original contract/authorization.** The history on the store should not be allowed to go past the contract/authorization period.

### **Electronic Benefits Transfer (EBT)**

- **The WIC Program should incorporate language similar to what was included in the Food Stamp program prior to beginning the electrification of benefits, that the program should be at no cost to authorized retailers.** This is particularly important given the discussion in several states of some very expensive options with no identified funding. Costs for some of the approaches being discussed can reach \$1,000 per lane. On the other hand, with strong communication, retailers can upgrade equipment during the natural lifecycle with minimal cost, provided that requirements are standardized across the country and software is available from the state that requires only minimal modifications by retailers.
- **Retailers are very supportive of a National WIC UPC Database and feel that it is a necessity, particularly with some states moving to EBT.** Its completion should be expedited and implementation should begin.
- **Retailers fully support the required use of the WIC Messaging Format developed by stakeholders beginning in 1998 and adopted by the American National Standards Institute (ANSI) earlier this year.** Requiring all states to utilize at the minimum the same message format is imperative to reduce confusion, allow for standardization and have a successful program.
- **USDA should encourage the use of one EBT platform by a number of states to achieve efficiency and interoperability.** The New England Partners and Texas/New Mexico projects should be commended for adopting this approach for their pilots.

### **Infant Formula**

- **Infant formula is one of the 10 most stolen items in a grocery store. It is black marketed at WIC only stores or in flea markets.**

- **Infant formula rebates are a real problem. States should be obligated to put any rebate or enforcement dollars back into the program and should monitor the impact these rebates are having on the price of the product.** Most states are starting to institute rebates to help underwrite the program. In Texas last year the infant formula rebate was worth \$170 million.

**FMI WIC Task Force**

Ms. Liz Chace-Marino, Chair  
Director, Government & Corporate Affairs  
The Stop and Shop Supermarket Company  
Boston, MA

Ms. Ingrid Bjorklund  
Minnesota Grocers Association  
St. Paul, MN

Mr. Gregory B. Calhoun  
President & CEO  
Calhoun Enterprises  
Montgomery, AL

Mr. Kevan Fenderson  
Corporate Director, Government Relations  
Albertsons, Inc.  
Boise, ID

Mr. Doug Henken  
President  
Washington Food Industry Association  
Olympia, WA

Mr. Gary Huddleston  
Manager, Consumer Affairs  
The Kroger Co.-Houston Marketing Area  
Houston, TX

Mr. Mitch Klein  
Krasdale Foods, Inc.  
White Plains, NY

Ms. Judy Knapp  
Hannaford Bros. Co.  
Scarborough, ME

Ms. Kathy Kuzava  
President  
Georgia Food Industry Association  
Smyrna, GA

Ms. Jane Marlow  
Tax and Licensing Division  
Manager, WIC and Food Stamp Programs  
Wal-Mart  
Bentonville, AR

Ms. Lynn Marmer  
Group Vice President, Corporate Affairs  
The Kroger Co.  
Cincinnati, OH

Mr. Marty Oliver  
Director of Common Area  
Publix Super Markets, Inc.  
Lakeland, FL

Mr. Jonathan Mayes  
Vice President, Government Relations  
Safeway Inc.  
Pleasanton, CA

Mr. Jim Rogers  
President  
Food Industry Alliance of New York State  
Albany, NY

Mr. Rich Savner  
Director of Public Affairs & Government Relations  
Pathmark Stores, Inc.  
Carteret, NJ

Mr. Barry Scher  
Vice President, Public Affairs  
Giant Food Inc.  
Washington, DC

Mr. Brandon Scholz  
President  
Wisconsin Grocers Association  
Madison, WI

Mr. Stan Sorkin  
Corporate Director, Marketing and Government Relations  
Krasdale Foods, Inc.  
White Plains, NY

Mr. Randy St. John  
Pennsylvania Food Merchants Association  
Camp Hill, PA

Mr. Chris Ward  
Jax Markets  
Anaheim, CA

Mr. Joe Williams  
President  
Gulf Coast Retailers Association  
Houston, TX

FMI Staff Contact:

Jennifer Hatcher  
Director, Government Relations  
Food Marketing Institute  
655 15<sup>th</sup> Street, NW  
Suite 700  
Washington, DC 20005  
202-220-0734  
202-220-0873 (fax)  
jhatcher@fmi.org



**Attachment One**

**National Alliance for Nutrition and Activity**  
*Child Nutrition Program Reauthorization*  
*Recommendations*

Committee on Agriculture, Nutrition, and Forestry  
United States Senate

April 3, 2003

United Fresh Fruit & Vegetable Association  
1901 Pennsylvania Avenue, NW, Suite 1100 · Washington, DC 20006  
(202) 303-3400 · Fax: (202) 303-3433  
[www.uffva.org](http://www.uffva.org)

## **National Alliance for Nutrition and Activity**

### **Child Nutrition Program Reauthorization Recommendations**

*Over the last two decades, rates of obesity have doubled in children and tripled in adolescents. Poor diet (too much saturated fat, sodium and calories, not enough fruits, vegetables and whole grains, etc.) and physical inactivity are major contributors to heart disease, cancer, stroke and diabetes, which are responsible for 60% of deaths in the United States.*

#### **Strengthen Nutrition Education/Promotion in Child Nutrition Programs**

*Good nutrition should begin in childhood when eating habits are formed and chronic diseases begin to develop. Promoting and teaching healthy eating should be an integral component of the child nutrition programs.*

- Enhance and strengthen the Team Nutrition program by adding a state-level infrastructure and networking component called the "Team Nutrition Network." Fund by increasing the State Administrative Expense formula from 1.5% to 2% and dedicating the 0.5% increase to nutrition education (to provide \$40 million annually). Maintain the current level of funding (\$10 million per year) for existing Team Nutrition program components and give the U.S. Department of Agriculture (USDA) more flexibility to spend those resources.

#### **Improve the School Nutrition Environment**

*Schools should not only teach nutrition in the classroom, but should model it in the cafeteria and everywhere on school campuses. All food choices available to children at school should make a positive contribution to children's diets.*

#### **Help schools to continue to improve the nutritional quality of school meals**

*The nutritional quality of meals served as part of the National School Lunch Program (NSLP) and School Breakfast Program (SBP) significantly improved between 1992 and 1998 (they now have less fat, saturated fat, cholesterol and sodium and more fruits and vegetables). However, schools need additional support to continue to make school meals more healthful and appealing to children. Only 15% of schools meet the saturated fat standards for lunches and three out of four American high school students do not eat 5 servings of fruits and vegetables each day (the minimum recommended amount)*

- Provide \$10 million annually for grants to states or school districts for the "Healthy Foods for Healthy Kids Initiative" for educational/ promotional materials, salad/garden bars, prepackaged salads and fruit cups, innovative vending options, farm to school programs, cold storage and other infrastructure, and other creative ways to help schools provide and encourage children to consume more fruits and vegetables.
- Expand the Department of Defense Fresh Fruit and Vegetable Program up to \$100 million annually (from \$50 million) to help improve the quality of produce available to schools.



- Give schools flexibility to decide what type(s) of milk to offer with school meals (i.e., remove the whole milk requirement). Encourage schools to serve and promote low-fat milk.
- Provide USDA's Food and Nutrition Service with \$2 million per year to do field trainings and give grants to states to train localities on the School Meals Initiative to help schools improve the nutritional quality of meals, increase fruits and vegetables, reduce saturated fat, improve school nutrition environment, etc.
- Await the results of the pilot study on providing free fruits and vegetables to school students as snacks, and recommend next steps based on those results.
- Await the results of the GAO report on reimbursement rates for the School Breakfast Program, National School Lunch Program and after-school snacks and determine if they need to be adjusted to allow for adequate purchases of fruits, vegetables, whole grains, lean meats, low-fat cheeses and other healthy options.

*The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity 2001* recommends that "[i]ndividuals and groups across all settings ... [adopt] policies specifying that all foods and beverages available at school contribute toward eating patterns that are consistent with the *Dietary Guidelines for Americans*."

#### **Reduce competition to school meals from low-nutrition foods**

*Competitive foods (from vending machines, a la carte, school stores, etc.) are widely available to students. They can negatively affect children's diets, since the majority of competitive foods are high in calories and fat and low in nutrients. Between 1989 and 1996, children's calorie intake increased by approximately 100 to 180 extra calories per day (depending on the child's age). While obesity is a complex, multi-factorial problem, over-consumption of soft drinks and snack foods plays a role. Competitive foods of poor nutritional quality undermine the significant federal investment (\$7.9 billion in FY 2001) in the school meal programs.*

- Congress should give the U.S Department of Agriculture authority to establish and enforce regulations for all foods sales anywhere on school campuses throughout the school day in schools that participate in the National School Lunch Program or School Breakfast Program to ensure that foods sold outside of the school meal programs make a positive contribution to children's diets and do not undermine the national investment in school meals.

Within 6 months of enactment, the Secretary of Agriculture should convene an advisory committee of experts in child health, nutrition and education to develop recommendations for nutrition standards for competitive foods. Within 24 months of enactment, the Secretary should finalize regulations to improve the nutritional quality of competitive foods. The regulations should not preempt states or school districts from having stronger requirements.

### **WIC: Improve the Nutritional Quality of Foods and Maintain Mission**

*Scientific understanding about nutrition has advanced considerably since the WIC Program began in 1974. Yet, six out of the seven WIC food packages have never been significantly changed or updated. In addition, given the success and reach of the WIC Program, it has been assigned additional tasks that have reduced the time and resources dedicated to its principal mission of promoting nutrition and health. Additional services add to program costs and take resources away from nutrition and health services.*

- Urge USDA to update and improve the nutritional quality of the WIC food packages. Require that the food package, target nutrients and nutrient needs of participants be re-evaluated at least every 10 years and revised to reflect current nutrition science.
- Maintain the nutrition and health mission of WIC. Increase the Nutrition Services and Administration funding to assure quality nutrition education services. Provide adequate funding to accompany additional related administrative and client service requirements, such as substance abuse education, immunization screening, etc.

**Total Cost of NANA Requests: \$102 million.**

### **Nutrition Education**

- ❖ **Recommendation:** Enhance and strengthen the Team Nutrition program by adding a state-level infrastructure and networking component called the "Team Nutrition Network." Fund by increasing the State Administrative Expense formula from 1.5% to 2% and dedicating the 0.5% increase to nutrition education (to provide \$40 million annually). Maintain the current level of funding (\$10 million per year) for existing Team Nutrition program components and give the U.S. Department of Agriculture (USDA) more flexibility to spend those resources.
- ❖ **Rationale:**
  - The need for nutrition education in schools continues to grow, as obesity rates have doubled in children and tripled in adolescents over the last two decades. The negative health consequences of rising obesity rates are already evident. Rates of type 2 diabetes have increased ten-fold in children over ten years.
  - The existing Team Nutrition program at USDA includes many of the components of an integrated, behavior-based, comprehensive program for promoting the nutritional health of the nation's children. The goal of Team Nutrition is to improve children's lifelong eating and physical activity habits through nutrition education based on the principles of the *Dietary Guidelines for Americans* and the Food Guide Pyramid.
    - Team Nutrition uses multiple communication channels, including classroom activities, food service initiatives, school-wide events, home activities, community programs and events, media events and coverage, and a state-based grant program. Currently 20,010 schools participate in Team Nutrition.

- While the current Team Nutrition state-based grant program has been effective in helping states to develop innovative nutrition education programs, the grant program does not provide consistent and reliable funding year-to-year and does not include a central mechanism to facilitate sharing of information between states on best practices and innovations. An additional state-level infrastructure component is needed to develop and deliver effective nutrition education programs and activities in schools.
- We recommend \$40 million in new funding for the Team Nutrition Network, including staff and program funds (see Table). The Team Nutrition Network would fund a staff person in each state agency (in the same state agency that oversees the child nutrition programs) to administer and coordinate comprehensive, integrated, state nutrition education efforts and enhance networking within and between states. State-level infrastructure, including a central point of contact at the state level, is critical to the ability of Team Nutrition to deliver effective, ongoing nutrition education.
  - The Team Nutrition Network coordinator would work and coordinate with other school health efforts in the state, including the Centers for Disease Control and Prevention's Coordinated School Health Program, and other agencies within USDA. The TNN program funds (\$30 million) would be used by the TNN coordinators to conduct program activities such as:
    - dissemination of information, e.g., via the internet, mailings, conferences
    - surveillance and evaluation
    - grants for school districts or groups of school districts
    - professional development and training for teachers and staff
    - monitoring local use of TNN funding
    - technical assistance to initiate and maintain programs at the local level

**Team Nutrition and Team Nutrition Networks Funding Recommendations**

Team Nutrition Component	FY02 funding level	NANA Recommendation
<ul style="list-style-type: none"> <li>• Technical assistance materials</li> <li>• Print &amp; Electronic Resources</li> <li>• National Food Service Management Institute</li> <li>• Grants to states</li> <li>• Other (partnerships, nutrition education, Eat Smart/Play Hard)</li> </ul>	\$10 million	Maintain FY02 funding level of \$10 million. Allow FNS flexibility in determining funding for key components. FNS should consult with a variety of stakeholders within and outside of the government to help determine how to effectively deliver key TN concepts and the funding levels for such initiatives and components.

<b>Team Nutrition Infrastructure</b>	<b>None</b>	<b>\$40 million total as follows:</b>
Team Nutrition Network - staff		\$10 million: staffing (approx. \$150,000 per state position including benefits, for each state, territory, and the District of Columbia)
Team Nutrition Network - program funds		\$30 million: program operation (provide a state minimum grant, index to the number of school meals served in the state)
<b>TOTAL</b>	<b>\$10 million</b>	<b>\$50 million</b>

### Promoting Fruit and Vegetable Intake in Schools

- ❖ Eating enough fruits and vegetables is important for preventing cancer, heart disease, high blood pressure, and other diseases.
  - One-third of cancer deaths could be prevented by healthy diets.<sup>1</sup>
  - People who eat five or more servings of fruits and vegetables each day have half the cancer risk of those who eat fewer than two servings per day.<sup>2</sup>
  - Every year, cancer costs \$172 billion<sup>3</sup> and coronary heart disease costs \$130 billion<sup>4</sup> in medical costs and lost productivity.
- ❖ **“Healthy Foods for Healthy Kids Initiative”**: Provide \$10 million annually for grants to states or school districts for the “Healthy Foods for Healthy Kids Initiative” for educational/ promotional materials, salad/garden bars, prepackaged salads and fruit cups, innovative vending options, farm to school programs, cold storage and other infrastructure, and other creative ways to help schools encourage children to consume more fruits and vegetables.
  - Also: Await the results of the pilot study on providing free fruits and vegetables to school students as snacks, and decide next steps based on those results.
  - **Rationale**: Providing a wide variety of appealing and nutritious fruits and vegetables in the school setting would help students make healthier food choices.
    - The average 6 to 11 year old eats only 3.5 servings of fruits and vegetables a day, achieving only half the recommended seven servings per day for this age group.<sup>5</sup>

<sup>1</sup> U.S. Department of Health and Human Services. *The Surgeon General's Report on Nutrition and Health*. Washington, D.C.: U.S. Department of Health and Human Services, Public Health Service, 1988.

<sup>2</sup> Block G, Patterson B, Subar A. "Fruit, Vegetables, and Cancer Prevention: A Review of the Epidemiological Evidence." *Nutrition and Cancer* 1992, vol. 18, pp. 1-29.

<sup>3</sup> American Cancer Society (ACS). *Cancer Facts & Figures 2003*. Atlanta, GA: ACS, 2003.

<sup>4</sup> American Heart Association (AHA). *Heart Disease and Stroke Statistics -- 2003 Update*. Dallas, TX: AHA, 2002.

<sup>5</sup> National Center for Health Statistics, U.S. Department of Health and Human Services. *National Health and Nutrition Examination Survey III*. Washington, D.C.: 1994.

- Fewer than 15% of elementary school-aged children eat the recommended five or more servings of fruit and vegetables daily.<sup>5</sup>
  - On any given day, 45% of children eat no fruit, and 20% eat less than one serving of vegetables.<sup>5</sup>
- Research has shown that schools with salad bars offer a significantly wider range of fruit and vegetable choices than other schools; items offered include green salads, raw vegetables, fresh fruit, canned fruit, and dried fruit.<sup>6</sup> For example, placing garden bars in the primary schools of one school district resulted in a tripling of the amount of fruits and vegetables served over a period of three years.<sup>7</sup>
  - A number of successful approaches have been implemented in schools across the country and have resulted in increased awareness and consumption of fruits and vegetables. For example, in four school-based fruit and vegetable promotion studies funded by the National Cancer Institute, fruit and vegetable intake increased in children by an average of a half serving per day.<sup>8</sup> However, the initial costs for salad bars and other fruit and vegetable initiatives are often cited as barriers to such programs. With minimal resources and start up funds, more schools across the country could develop and implement initiatives to promote a wider variety of appealing fruit and vegetable choices to students.
- ❖ **Department of Defense Fresh Fruit and Vegetable Program (DoD Fresh):** Expand the DoD Fresh Program up to \$100 million annually (from \$50 million) to help improve the quality of produce available to schools.
    - **Rationale:** The joint USDA/DoD Fresh Program provides a mechanism for delivering fresh fruit and vegetables to schools and Indian reservations utilizing DoD's efficient and expansive food distribution system. The DoD Fresh program has been successful because the fruits and vegetables arrive in good condition and in manageable quantities that can be used in the planned school menus while they are still fresh. Increased funding for this program would allow more schools to participate and receive high-quality fruits and vegetables, which are more likely to be consumed by children.
  - ❖ **Commodity Purchases:** Require USDA to write a report to Congress within six months of enactment to assess current commodity purchasing practices and how purchasing decisions are made, and develop recommendations including a plan of action to align those purchases with dietary recommendations.
    - **Rationale:** The gap between the federal government's recommendations for fruit and vegetable consumption and the current consumption rates is substantial and could take up to 128 years to close.<sup>9</sup> Federal dietary guidance urges Americans to consume more fruits and vegetables:

<sup>6</sup> U.S. Department of Agriculture, Office of Analysis, Nutrition, and Evaluation. *Changes in Children's Diets: 1989-1991 to 1994-1996*. Washington, D.C.: USDA, January 2001. Report No. CN-01-CD1.

<sup>7</sup> Presentation by Brenda Padilla of Vacaville Unified School District to the U.S. Department of Agriculture, February 20, 2002.

<sup>8</sup> Potter J, Finnegan J, Guinard J, et al. *5 A Day for Better Health Program Evaluation Report*. Bethesda, MD: National Institutes of Health, National Cancer Institute, 2000.

<sup>9</sup> Produce for Better Health (PBH) Foundation. *The Fruit and Vegetable Consumption Challenge - Executive Summary*. Wilmington, DE: PBH, 2002.

- The *2000 Dietary Guidelines for Americans* urges consumers to “choose a variety of fruits and vegetables daily” as part of a healthy diet.
  - USDA’s *Food Guide Pyramid* recommends that Americans should consume 5 to 9 daily servings of fruits and vegetables.
  - The Healthy People 2010 report also has as a goal for Americans to consume more fruits and vegetables.
- According to a study done by the Produce for Better Health Foundation, although fruits and vegetables comprise 33 percent of the total food intake recommended by USDA in the Food Guide Pyramid, only 4.5 percent of total USDA spending in 2000 directly or indirectly promoted consumption of fruits and vegetables.<sup>3</sup>
- A system whereby USDA commodity purchases are better aligned with federal dietary guidance would help Americans, especially those benefiting from USDA’s nutrition assistance programs, to achieve public health goals related to fruit and vegetable intake.
- ❖ **Fruit and Vegetable Research Agenda:** Require USDA to develop a fruit and vegetable research agenda that coordinates research between the Economic Research Service, Food and Nutrition Service, Agricultural Research Service and other USDA agencies. That agenda should include research on how best to promote fruit and vegetable intake to children and their caregivers including through marketing, food pricing, and environmental strategies and should be developed in coordination with the produce industry, nutrition and health organizations, school food service professionals and other stakeholders.
- **Rationale:** The 5 A Day Memorandum of Understanding signed by USDA and the Department of Health and Human Services provides impetus for USDA to expand the research base for fruits and vegetables. The Food and Nutrition Service, in conducting studies and evaluations of the nation’s food and nutrition assistance programs, plays a critical role in helping to shape policy, improve program effectiveness, and guide future research.
- Fruits and vegetables comprise 33 percent of the recommended food servings of the Food Guide Pyramid. Despite the importance of fruits and vegetables to public health and the public statements of federal officials in support of increased consumption, an analysis of USDA funded projects revealed that only 11 percent of active agricultural, food, and nutrition research projects reported in 2000 focused on fruits and vegetables,<sup>3</sup> and the vast majority of those research projects were on farm production.
- In 2000, of active research projects by USDA and current awards by NIH:
- Only one percent of publicly-funded, active agricultural, food, and nutrition research projects were on fruits and vegetables;
  - Only 9.2 percent of those fruit and vegetable research projects were devoted to diet and health issues; and
  - Only 1.9 percent of fruit and vegetable research projects were devoted to increasing the consumption of fruits and vegetables.
- ❖ **National 5 A Day for Better Health Program Coordinators:** Urge the Secretary of Agriculture to appoint or identify a 5 A Day Coordinator at the national level and urge FNS to appoint or identify a 5 A Day Coordinator in each of the seven FNS regional offices to coordinate and expand USDA efforts to promote fruit and vegetable intake.

- **Rationale:** The National 5 A Day Partnership was established in January 2001 in response to recommendations based on the National Cancer Institute's (NCI) 5 A Day for Better Health Program Evaluation Report. The Partnership is working to guide the 5 A Day program into the future by involving an expanded base of health-oriented government agencies, businesses, and non-profits, including USDA. The partnership is dedicated to developing a comprehensive, coordinated, national campaign infrastructure that increases fruit and vegetable consumption to 5 A Day for 75% of Americans by 2010.

USDA has, over the years, actively included 5 A Day messages in nutrition assistance programs and encouraged Americans to consume more fruits and vegetables through the *Dietary Guidelines* and the Food Guide Pyramid. As part of the expanded 5 A Day partnership effort, USDA representatives now serve on the Steering Committee of the National 5 A Day partnership. USDA representatives also serve in various capacities on the subcommittees that make up the Partnership. In addition to these partnership activities, a Memorandum of Understanding (MOU) was established in April 2002 between the Department of Health and Human Services (National Cancer Institute and the Centers for Disease Control and Prevention) and USDA (Food, Nutrition & Consumer Services, Research, Education and Economics, and Marketing and Regulatory Programs). In order for USDA to fulfill its commitment to implement 5 A Day programs on its own and coordinated with other agencies, USDA needs staff dedicated to 5 A Day activities and to working with other 5 A Day partners at the national and regional level

### Milk in Schools

- ❖ **Recommendation:** Give schools flexibility to decide what type(s) of milk to offer with school meals (i.e., remove the whole milk requirement). Encourage schools to serve and promote low-fat milk.
- ❖ **Rationale:** Schools should promote and serve 1% and fat-free milk. **Milk is by far the largest source of saturated fat – the kind of fat that causes heart disease – in children's diets.**<sup>10</sup> While most people do not have heart attacks until they are in their 50s or 60s, heart disease has its roots in childhood. The beginnings of atherosclerosis are seen in kids as young as ten years old, and a **quarter of children ages 5-10 years old already have high cholesterol, high blood pressure, or other risk factor for heart disease.**<sup>11</sup> Currently, two-thirds (63%) of the milk ordered by schools is high in fat – either 2% or whole milk.<sup>12</sup> Switching to 1% or fat-free (skim) milk is an easy way to help children reduce their risk of heart disease.
- ❖ The current law is a barrier to serving low-fat milk as the predominate type at schools. Prior to 1994, schools were explicitly required to serve both whole milk and low-fat milk with lunches. In 1994, that requirement was replaced with language requiring that schools "participating in the school lunch program... shall offer students a variety of fluid milk consistent with prior year preferences unless the prior year

<sup>10</sup> Subar A, Krebs-Smith S, Cook A, Kahle L. "Dietary Sources of Nutrients Among U.S. Children, 1989-1991." *Pediatrics* 1998, vol. 102, pp. 913-923.

<sup>11</sup> Freedman D, Dietz W, Srinivasan S, Berenson G. "The Relation of Overweight to Cardiovascular Risk Factors Among Children and Adolescents: The Bogalusa Heart Study." *Pediatrics* 1999, vol. 103, pp. 1175-1182.

<sup>12</sup> Centers for Disease Control and Prevention. School Health Policies and Programs Study 2000. Accessed on January 22, 2003 at <[http://www.cdc.gov/nccdphp/dash/shpps/factsheets/fs00\\_ns.htm](http://www.cdc.gov/nccdphp/dash/shpps/factsheets/fs00_ns.htm)>.

preference for any such variety of fluid milk is less than one percent of the total milk consumed at the school.<sup>13</sup> That is, schools must serve what they served in the previous year, and in the year before that, and so on, back to the time when serving whole milk was required.

❖ Other facts:

- Milk is an important source of many essential vitamins and minerals in Americans' diets, such as calcium, vitamins A and D, potassium and riboflavin. **1% and fat-free milk provide all the calcium and vitamins A and D found in whole and 2% milk, but with little or no saturated fat.**
- 44 million Americans have either low bone mass or osteoporosis, which causes 1.5 million fractures and costs \$17 billion a year in direct hospital and nursing home expenses.<sup>14</sup> A healthy diet -- especially adequate calcium consumption -- and weight-bearing exercise can help build bone mass and prevent debilitating fractures.
- Since 98% of maximum bone density is reached by age 20, it is especially important that children get enough calcium.<sup>5</sup> Median daily intake (700 mg) of calcium by teenage girls is about half of the recommended level (1300 mg).<sup>15</sup>
- If the average American switched from drinking whole milk to fat-free milk, his saturated fat intake would drop from 12% of calories to 10%, the level recommended by the federal government's *Dietary Guidelines*.<sup>16</sup>
- A child who drinks one cup of 1% milk instead of 2% milk each school day would cut 47,000 calories and 11 pounds of fat from her diet during her 13 years in school.<sup>17</sup>
- Because milk is a staple in children's diets, it is especially important to serve and promote low-fat options. **Three servings (the recommended number for older children and teenagers) of 2% milk would use up about half of their day's budget for saturated fat.**

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<sup>13</sup> Richard B. Russell National School Lunch Act, P.L. 103-448, 108 Stat. 4703, section 107. November 2, 1994.

<sup>14</sup> National Osteoporosis Foundation. *Disease Statistics: Fast Facts*. Accessed at <<http://www.nof.org/osteoporosis/stats.htm>> on August 30, 2002.

<sup>15</sup> National Academy of Sciences. *Dietary Reference Intakes for Calcium, Phosphorus, Magnesium, Vitamin D, and Fluoride*. Washington, D.C.: National Academy Press, 1997.

<sup>16</sup> Reger B, Wootan M, Booth-Butterfield S, Smith H. "1% Or Less: A Community-Based Nutrition Campaign." *Public Health Reports* 1998, vol. 113, pp. 410-419.

<sup>17</sup> Calculation based on the average fat content of 1% milk (2.6 grams per cup) and 2% milk (4.7 grams per cup) (USDA Nutrient Data Laboratory. Accessed at <<http://www.nal.usda.gov/fnic/foodcomp/Data/SR15/wtrank/sr15a204.pdf>> on January 15, 2003); the average consumption of fluid milk (0.9 cups per day) (USDA Food Consumption [Per Capita] Data System. Accessed at <<http://www.ers.usda.gov/Data/foodconsumption/>> on January 15, 2003); and an estimated 182 school days per year.



Nutrient Content of Different Types of Milk

	Calories 1 cup	Calories 3 cups	Saturated Fat (g) 1 cup	Saturated Fat (g) 3 cups
Whole	160	480	5	15
2%	130	390	3	9
1%	110	330	1.5	4.5
Fat-free	90	270	0	0

- One cup of whole milk contains five grams of saturated fat, which is a quarter of the Daily Value (daily limit) listed on food labels. Because whole milk is so high in saturated fat, the government prohibits the labels of whole milk from bearing the claim that calcium can reduce the risk of osteoporosis. Fat-free and 1% milk can make that claim.
- Although sales of low-fat milks (1% and fat-free combined) have doubled over the past 25 years, whole and 2% milk still make up 70% of total milk consumption.<sup>18</sup>

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<sup>18</sup>U.S. Department of Agriculture. *Food Consumption (Per Capita) Data System*. Accessed at <<http://www.ers.usda.gov/data/foodconsumption/>> on January 15, 2003.

### Foods Sold Outside the USDA School Meal Programs (vending, a la carte, etc.)

- ❖ **Recommendation:** Congress should give the U.S Department of Agriculture authority to establish and enforce regulations for all foods sales anywhere on school campuses throughout the school day in schools that participate in the National School Lunch Program or School Breakfast Program to ensure that foods sold outside of the school meal programs make a positive contribution to children's diets and do not undermine the national investment in school meals.

Within 6 months of enactment, the Secretary of Agriculture should convene an advisory committee of experts in child health, nutrition and education to develop recommendations for nutrition standards for competitive foods. Within 24 months of enactment, the Secretary should finalize regulations to improve the nutritional quality of competitive foods. The regulations should not preempt states or school districts from having stronger requirements.

- ❖ **Cost to USDA:** None

- ❖ **Rationale:**

- Only 2% of children (2 to 19 years) meet the five main recommendations for a healthy diet from the Food Guide Pyramid.<sup>19</sup> Three out of four children consume more saturated fat than is recommended in the *Dietary Guidelines for Americans*.<sup>20</sup> Three out of four American high school students do not eat the recommended five or more servings of fruits and vegetables each day.<sup>21</sup>

*The Surgeon General's Call to Action to Prevent and Decrease Overweight and Obesity 2001* recommends that "[i]ndividuals and groups across all settings ... [adopt] policies specifying that all foods and beverages available at school contribute toward eating patterns that are consistent with the *Dietary Guidelines for Americans*."

- Over the last two decades, rates of obesity have doubled in children and tripled in adolescents.<sup>22</sup> Between 1989 and 1996, children's calorie intake increased by approximately 80 to 230 extra calories per day, depending on the child's age and activity level.<sup>23,24</sup> The increases in calorie intake are driven by increased intakes of foods and beverages high in added sugars. While obesity is a complex, multi-factorial problem, over-consumption of soft drinks and snack foods plays a key role.

<sup>19</sup> Munoz K, et al. "Food Intakes of U.S. Children and Adolescents Compared with Recommendations." *Pediatrics* 1997, vol. 100, pp. 323-329 (erratum in *Pediatrics* 1998, vol. 101, pp. 952-953).

<sup>20</sup> Agricultural Research Service, U.S. Department of Agriculture. *Food and Nutrient Intakes by Children 1994-96, 1998* (1999). Table Set 17. Accessed at <<http://www.ars.usda.gov/bharc/foodsurvey/home.htm>> on August 17, 2001.

<sup>21</sup> Kann L, et al. Youth Risk Behavior Surveillance - United States, 1999. *Morbidity and Mortality Weekly Report* 2000, vol. 49, no. SS-5, pp. 1-96.

<sup>22</sup> Ogden C, et al. "Prevalence and Trends in Overweight Among U.S. Children and Adolescents, 1999-2000." *Journal of the American Medical Association* 2002, vol. 288, pp. 1728-1732.

<sup>23</sup> USDA, Office of Analysis, Nutrition and Evaluation. *Changes in Children's Diets: 1989-1991 to 1994-1996*. Washington, DC: USDA, January 2001. Report No. CN-01-CD1.

<sup>24</sup> Institute of Medicine, National Academies. *Dietary Reference Intakes: Energy, Carbohydrate, Fiber, Fat, Fatty Acids, Cholesterol, Protein, and Amino Acids*. Washington, DC: National Academies Press, 2002.

- Children who consume soft drinks consume more calories (about 55 to 190 per day) than kids who do not drink soft drinks.<sup>25,26</sup> A study conducted by the Harvard School of Public Health found that **for each additional can or glass of soda or juice drink a child consumes per day, the child's chance of becoming overweight increases by 60%.**<sup>27</sup> Consumption of soft drinks can displace healthier foods from children's diets like low-fat milk, which can prevent osteoporosis, and juice, which can prevent cancer.<sup>7,8,28,29,30</sup> The number of calories children consume from snacks increased by 30% between 1977 and 1996.<sup>31</sup>
- School meals must meet nutrition standards in order for a school food service program to receive federal subsidies. In contrast, foods sold outside the meal programs ("competitive" foods), including those sold in vending machines, a la carte lines, school stores, snack bars, and fund raisers, are not required by the USDA to meet comparable nutrition standards. **The USDA currently has very limited authority to regulate these foods.**
  - During meal periods, the sale of foods of "minimal nutritional value" (FMNV) is prohibited by federal regulations in areas of the school where USDA school meals are sold or eaten. However, FMNV can be sold anywhere else on-campus -- including just outside the cafeteria -- at any time.
  - A FMNV provides less than 5% of the Reference Daily Intake (RDI) for eight specified nutrients per serving.<sup>32</sup> FMNV include chewing gum, lollipops, jelly beans, and carbonated sodas. Many competitive foods are not considered FMNV, such as chocolate candy bars, chips, fruitades (containing little fruit juice), and therefore are allowed to be sold in the school cafeteria during meal times.
- The sale of competitive foods in schools can negatively affect children's diets, since many are high in calories, added sugars, and fat and low in nutrients.<sup>33</sup> The most common items sold out of vending machines, school stores, and snack bars include soft drinks, sports drinks, fruit drinks that are not 100% juice, 100% juice, salty snacks, candy, and baked goods that are not low in fat.<sup>34</sup>
- Competitive foods are widely available to students. 43% of elementary schools, 74% of middle/junior high schools, and 98% of senior high schools have vending machines, school stores, or snack bars.<sup>35</sup>

<sup>25</sup> Harnack L, et al. "Soft Drink Consumption among U.S. Children and Adolescents: Nutritional Consequences." *Journal of the American Dietetic Association* 1999, vol. 99, pp. 436-441.

<sup>26</sup> Guenther PM. "Beverages in the Diets of American Teenagers." *Journal of the American Dietetic Association* 1986, vol. 86, pp. 493-499.

<sup>27</sup> Ludwig DS, et al. "Relation between Consumption of Sugar-Sweetened Drinks and Childhood Obesity: A Prospective, Observational Analysis." *Lancet* 2001, vol. 357, pp. 505-508.

<sup>28</sup> Ballew C, Kuester S, Gillespie C. "Beverage Choices Affect Adequacy of Children's Nutrient Intakes." *Archives of Pediatric and Adolescent Medicine* 2000, vol. 154, pp. 1148-1152.

<sup>29</sup> Bowman SA. "Diets of Individuals Based on Energy Intakes from Added Sugars." *Family Economics and Nutrition Review* 1999, vol. 12, pp. 31-38.

<sup>30</sup> Lewis CJ, Park YK, Dexter PB, Yetley EA. "Nutrient Intakes and Body Weights of Persons Consuming High and Moderate Levels of Added Sugars." *Journal of the American Dietetic Association* 1992, vol. 92, pp. 708-713.

<sup>31</sup> Johns L, et al. "The Increasing Prevalence of Snacking among U.S. Children from 1977 to 1996." *The Journal of Pediatrics* 2001, vol. 138, pp. 493-498.

<sup>32</sup> Federal Register. 7 CFR § 210.11. "Requirements for School Food Authority Participation, Competitive Food Services."

<sup>33</sup> USDA. *Foods Sold in Competition with USDA School Meal Programs: A Report to Congress January 12, 2001*. Washington, DC: USDA, 2001.

<sup>34</sup> Wechsler H, et al. "Food Service and Foods and Beverages Available at School: Results from the School Health Policies and Programs Study 2000." *Journal of School Health* 2001, vol. 71, pp. 313-324.

<sup>35</sup> Centers for Disease Control and Prevention. *School Health Policies and Programs Study 2000*. Accessed on September 19, 2001 at <[http://www.cdc.gov/nccdphp/dash/shpps/factsheets/fs00\\_us.htm](http://www.cdc.gov/nccdphp/dash/shpps/factsheets/fs00_us.htm)>.

- Schools should practice what they teach. Selling low-nutrition foods in schools contradicts nutrition education and sends children the message that good nutrition is not important.<sup>15</sup> The school environment should reinforce nutrition education in the classroom to model healthy behaviors.

❖ **Will Schools Lose Funds if Competitive Foods Regulations are Strengthened?**

- Not necessarily. North Community High School in Minneapolis replaced most of its soda vending machines with machines stocked with 100% fruit and vegetable juices and water and slightly reduced the prices of healthy snack options. As a result, the sale of healthier items increased and the school has not lost money.
- A middle school and high school in Philadelphia changed their vending machines' beverage contents to include only 100% juice, 25% juice, and water. **Average monthly revenue from the machines increased** (see Table).

**Vending Machine Revenues in Philadelphia Schools (average sales per month)**

	Prior to change in beverages	After change in beverages
Sayre Middle School	\$304	\$333
South Philadelphia High School	\$653	\$667

❖ **Is Regulating Competitive Foods a Federal Issue?**

- **The federal government invests significant resources in the school meal programs** (\$8.4 billion in FY 2002, including cash payments and commodities), **and has strong nutrition standards for those meals, as well as provides technical assistance and support for states and local food service authorities to meet those standards.**<sup>36</sup> Competitive foods of poor nutritional quality undermine that investment.
- The federal government spends large amounts of money treating diet-related diseases such as heart disease, cancer, diabetes, stroke and osteoporosis through the Medicaid and Medicare programs and federal employee health insurance. Those diseases have their roots in childhood. According to the USDA, healthier diets could prevent at least \$71 billion per year in medical costs, lost productivity, and lost lives.<sup>37</sup>
- Most states leave the development of dietary guidance to federal agencies. There is no scientific basis for nutrition standards for school foods to differ for children in different states.

<sup>36</sup> USDA. *Federal Costs of School Food Programs*. Accessed at <<http://www.fns.usda.gov/pd/cncosts.htm>> on February 21, 2003.

<sup>37</sup> Frazao E. "High Costs of Poor Eating Patterns in the United States." In *America's Eating Habits: Changes and Consequences*. Edited by Elizabeth Frazao. Washington, D.C.: Economic Research Service, U.S. Department of Agriculture, 1999. Agriculture Information Bulletin No. 750, pp. 5-32.

## The WIC Program

- ❖ **Recommendation:** Urge USDA to update and improve the nutritional quality of the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) food packages.

- **Rationale**

- Scientific understanding about nutrition has advanced considerably since the WIC Program began in 1974. Yet, six out of the seven WIC food packages have never been significantly changed or updated. (A WIC food package is a set of foods for which a particular category of participants, such as "pregnant and breastfeeding women," receive vouchers.) The food packages are no longer in alignment with nutrition recommendations for promoting the health and well-being of program participants.
  - In April 2000, the USDA announced that it would publish proposed regulations regarding updating the WIC food packages in September 2000 and a final rule in September 2001, with the intent that the final rule would take effect in September 2002.<sup>38</sup> To date, the USDA has failed to publish even a proposed rule.
  - The USDA should publish the proposed rule to allow a public dialogue regarding which foods should be included in the WIC food packages.
- ❖ **Recommendation:** Require that the food package, target nutrients and nutrient needs of participants be re-evaluated at least every 10 years and revised to reflect current nutrition science.

- **Rationale**

- Nutrition science evolves over time. Advances should be applied to the WIC food packages within a reasonable timeframe.
  - Re-evaluation of the WIC food packages should include a review of target nutrients and participants' nutrient needs.
- ❖ **Recommendation:** Maintain the nutrition and health mission of WIC. Increase Nutrition Services and Administration funding to assure quality nutrition education services. Provide adequate funding to accompany additional related administrative and client service requirements, such as substance abuse education, immunization screening, etc.

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<sup>38</sup> Federal Register. "Special Supplemental Nutrition Program for Women, Infants, and Children (WIC): Revisions in the WIC Food Packages." April 24, 2000, vol. 65, pp. 22545-22546.

➤ Rationale

- The WIC Program's mission is: "To safeguard the health of low-income women, infants, and children up to age five who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care."<sup>39</sup>
  - Given the success and reach of the WIC Program, it has been assigned additional tasks that have reduced the time and resources dedicated to its principal mission of promoting nutrition and health.
  - In order to continue to be successful with its core mission, the WIC Program needs sufficient funding for all additional services. Additional services add to program costs and take resources away from nutrition and health services.
- Cost: WIC programs need \$22 million annually for the CDC National Immunization Program to screen and assess child immunization status followed by education and referral to providers.

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<sup>39</sup>U.S. Department of Agriculture. WIC Program home page. Accessed at <<http://www.fns.usda.gov/wic/>> on January 14, 2003.



**Attachment Two**

**State of California**  
**Health and Human Services Agency**  
*California WIC Fresh Produce Option Proposal*

Committee on Agriculture, Nutrition, and Forestry  
United States Senate

April 3, 2003

United Fresh Fruit & Vegetable Association  
1901 Pennsylvania Avenue, NW, Suite 1100 · Washington, DC 20006  
(202) 303-3400 · Fax: (202) 303-3433  
[www.uffva.org](http://www.uffva.org)



State of California—Health and Human Services Agency  
Department of Health Services



July 15, 2002

Ms. Cordelia Fox  
Regional Director  
Supplemental Nutrition Programs  
Food and Nutrition Service  
U.S. Department of Agriculture  
Western Region  
550 Kearny Street, Room 400  
San Francisco, CA 94108-2518

Dear Ms. Fox

I am responding to your letter of February 28, 2002, in which you replied to the California Women, Infants and Children (WIC) Supplemental Nutrition Program's January 16, 2002 proposal to offer a food package with a reduced amount of juice substituted with fruits and vegetables to child participants. In your letter you requested a detailed proposal for this substitution, and we are providing it in this letter. Although you approved the reduction in juice in the February 28, 2002 letter, we do not plan to reduce juice until we can offer fruits and vegetables as a substitution. In addition, we do not intend to pursue authorizing farmer's markets to accept WIC food instruments at this time. This had been a part of our original proposal, but we are deferring this option for future consideration.

In this letter, we are providing a detailed proposal that meets the criteria of nutritional equivalency or superiority, cost neutrality, and wide availability as defined in the Federal Regulations, Section 246.10 (e) (1)-(4). Specifically, this regulation permits states to substitute foods that meet the criteria in the WIC food package in order to allow for different cultural eating patterns. We are requesting your review and approval of this proposal based on the current regulations governing food package substitutions. In your February 28, 2002 letter you stated that you could not guarantee our proposal would be approved even if it meets current regulations, because changes to these regulations are underway. As I stated in correspondence of March 15, 2002, there is ample precedent for the U.S. Department of Agriculture (USDA) to apply its current regulations while regulatory changes are "in process". We hope you concur it is appropriate to follow this precedent in reviewing our proposal.



Do your part to help California save energy. To learn more about saving energy, visit the following web site:  
[www.consumerenergycenter.org/flex/index.html](http://www.consumerenergycenter.org/flex/index.html)

WOMEN, INFANTS, AND CHILDREN (WIC) SUPPLEMENTAL NUTRITION BRANCH  
3901 Lennane Drive, P.O. Box 942732, Sacramento, CA 94234-7320  
(916) 928-8500 Internet Address: [www.dhs.ca.gov](http://www.dhs.ca.gov)



### **Justification for Substitution**

The California WIC program provides services to participants representing a multitude of ethnic groups, Asians being one. California serves a high percentage of Asians compared to other state WIC agencies—in 2000, 6.1 percent of our WIC participants were Asian compared to 3.2 percent of WIC participants nationwide. The predominant Asian groups we serve are Vietnamese, Chinese, and Hmong. The current WIC food packages are not consistent with the traditional eating patterns of these Asian populations.

The following information from various sources illustrates how these Asian groups traditionally eat large quantities of fruits and vegetables, whereas juice is not a normal part of their diets in their native countries.

- All three groups traditionally consume a wide variety of fresh fruits and vegetables (1).
- The Hmong put a high value on fresh fruits and vegetables, and these are a major part of their diet. According to Ikeda et al, (2) in 24-hour food intake recalls from 205 Hmong women, fresh fruits and vegetables were consumed 26 times more often than juice. In addition, when thirsty, they selected water as their beverage.
- According to the Lao Family Resource Center staff in California (13), diabetes, obesity and hypertension are prevalent health problems among the acculturated Hmong. *They are educating members of this community to drink less sodas and fruit drinks, and more water.*
- Results of the focus groups (3) we conducted in spring 2002, showed that our Chinese participants voted unanimously, “with both hands and feet”, for the WIC program to offer fresh fruits and vegetables.
- A study of 260 Vietnamese refugee families residing in Florida, found that foods eaten frequently in Vietnam, including fresh vegetables, were also eaten frequently in the U.S. *However, the refugees reported that they ate foods characteristic of the American diet, including fruit drinks and soft drinks more often in the U.S. than they did in Vietnam.* (4)
- A California study investigated the relationship of the food habits and preferences of Vietnamese children to their length of stay in the U.S. It found that children under six years old who had lived in the U.S. more than one year, consumed green leafy vegetables less frequently and vitamin supplements more frequently than those who had lived in the U.S. less than a year. (5)

Asian families participating in WIC are influenced to drink juice either through the WIC food package, or by manufacturers marketing their juice via mass media. Juice is not a part of their traditional eating patterns. For many Asian groups, as their diet becomes Westernized, their intake of fats and sugar increases, while fiber intake decreases. Thus, risks of cardiovascular disease, cancer, hypertension, and diabetes are expected to rise among Asian Americans (6-10).

The committee revising the California Daily Food Guide completed a literature search on the food habits of various ethnic groups residing in California and recommended the following: (1) "Encourage continued use of traditional vegetables and fruits, as well as new types," and (2) "Moderate intakes of soft drinks, pastries, and sweet desserts. Encourage fruit as an alternative dessert."

Our proposal to offer various options with fruits and vegetables as a substitute for some of the juice addresses public health recommendations in addition to being more consistent with cultural eating patterns of Asian families. Offering fruits and vegetables supports U.S. Dietary guidance, the Five-A-Day campaign, and the American Academy of Pediatrics' (AAP's) recommendation to consume more whole fruits and vegetables, and less juice. While it makes sense to offer this substitution to all categories of WIC participants, our request at this time is limited to the children's food package due to our interest in addressing the recent AAP recommendation.

#### **Alternatives for Providing Fruits and Vegetables**

We gathered information from participant focus groups, the produce industry, research, nutritional analysis, and cost comparisons to determine the options that would most closely align with the traditional eating patterns and meet the federal requirements for substitution. We also field-tested several options at two different local agencies with the cooperation of two of our authorized grocers.

Based on our analysis, we propose to offer the following options to children on the California WIC program:

1. Juice\* only (Per month, 192 oz for 1-3 year old and 256 oz for 4-5 year old). This represents the current amounts routinely offered by the California WIC Program.
2. Less juice (128 oz for 1-3 year old and 192 oz for 4-5 year old, per month) with 1 lb. fresh broccoli and 2 lbs. oranges.
3. Less juice (128 oz for 1-3 year old and 192 oz for 4-5 year old, per month) with 2 lbs. potatoes and 2 lbs. oranges.

4. Less juice (128 oz for 1-3 year old and 192 oz for 4-5 year old, per month) with 2 lbs. fresh large carrots and 2 lbs. oranges.
5. Less juice (128 oz for 1-3 year old and 192 oz for 4-5 year old, per month) with 2 cans (14.5-oz each) of crushed or whole, peeled canned tomatoes OR 1.5 lb. fresh Roma tomatoes, and 1 lb. fresh large carrots.

\* Although this substitution proposal applies to both frozen and shelf-stable forms of juice, we used shelf-stable juice as a reference point because approximately 80 percent of the WIC families in California select this form of juice.

We conducted focus groups in spring 2002 to gather information on food buying practices of WIC participants. One of the questions we asked was, "Which fruits and vegetables do you buy for your family?" Both the Chinese and Vietnamese groups included all the fruits and vegetables that we are proposing. (See Attachment A for a complete list.) For details on the proposed form and type of fruits and vegetables participants can and cannot purchase, see Table 1. In addition, Attachment B shows the proposed food instruments for these options.

#### **Substitution Analysis**

A detailed analysis of the nutritional content, cost, and availability of the proposed substitution options is given below.

#### **Nutrition**

Vitamin C is the key target nutrient in the WIC authorized juice. One 64 oz container of WIC authorized fruit juice provides 576 mg of Vitamin C. In comparison, the fruits and vegetables proposed as substitutes for one 64 oz juice container, provide between 70 mg and 756 mg of Vitamin C, with an average of 380 mg (See Table 2). However, each proposed fruit and vegetable provides more than 10 percent of the Dietary Reference Intake (DRI) of Vitamin C per serving (See Table 3). This complies with a USDA recommendation to the Texas Department of Health WIC Program in a response, dated June 15, 2000, to their alternate food package proposal. Specifically, this recommendation stated, "*Please state which vegetables will be allowed in the package. One of the issues being raised regarding selection criteria for proposed additions to the WIC food package is that food should, at a minimum, meet 10% of the Daily Value (DV) per serving for one or more of the WIC target nutrients. Some vegetables (e.g., corn) do not meet 10% for any of the target nutrients.*" As we wrote in our original proposal to you in January 2002, the Vitamin C content in the children's food package is 275 percent of DRI even with the proposed reduction in juice, without substituting fruits and vegetables.

All of the proposed options with fruits and vegetables provide additional nutrients such as folate, fiber, Vitamin A, potassium, and antioxidants, whereas most juices provide very small or negligible amounts of these. In addition, these options provide more servings to all 1-5 year old children compared to the juice they replace (see Table 2).

**Cost**

We collected information on juice prices based on recent redemption data and compared it with the cost of the proposed fruit and vegetable options. We surveyed all different types of stores (i.e. chain, independent, neighborhood, etc) targeting our highest cost counties, in order to collect price information on our proposed fruits and vegetables. We factored in these prices and the expected seasonal variation in price to verify that our proposed options would be cost neutral (see Table 2).

**Availability**

The proposed fruits and vegetables are available year-round throughout California. We verified this through consulting with an expert in the produce industry, a web site ([www.aboutproduce.com](http://www.aboutproduce.com)), and our partners in the grocery industry in California. Based on our store survey, we know that the majority of stores, regardless of size, carry one or more of the proposed fruits and vegetables.

**Strategy for Implementation**

Upon approval of the proposed food substitution options, we plan to:

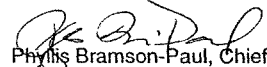
- Develop/acquire nutrition education materials and curriculum related to increasing fruit and vegetable consumption among children.
- Integrate food package nutrition education with overall nutrition goals.
- In partnership with grocers, establish fruit and vegetable inventory requirements and revise the vendor agreement.
- Provide training for local agencies, participants, and grocers.
- Make necessary changes in the Integrated Statewide Information System (ISIS) to add the food substitution options for children.
- Pilot test the proposed substitution options prior to statewide implementation.
- Develop a plan to assess the substitution changes one year after implementation.

We appreciate your consideration of this proposal. As I requested in my letter of March 15, 2002, please review this proposal for food substitution under the current regulations, rather than waiting for the proposed regulations to become final rule.

201

If you have any questions, please contact me at (916) 928-8806 or Linnea Sallack, Deputy Branch Chief, at (916) 928-8581.

Sincerely,

A handwritten signature in black ink, appearing to read "Phyllis Bramson-Paul". The signature is fluid and cursive, with the first name being the most prominent.

Phyllis Bramson-Paul, Chief  
Women, Infants, and Children (WIC)  
Supplemental Nutrition Branch

Table 1

## PROPOSED FRUITS AND VEGETABLES AS SUBSTITUTES FOR JUICE

Item	Price per Pound	Can Buy	Cannot Buy
<b>Broccoli</b>	\$1.49	Fresh broccoli stalks, bunches, or crowns; Chinese broccoli	Fresh broccoli florets, frozen broccoli, brocaflower, broccolini
<b>Potatoes</b>	\$0.75	Russet or Idaho potatoes in bulk only.	Bagged potatoes, red, white, Yukon Gold, Yellow Fin, Petite red and white potatoes, blue or purple potatoes and any other specialty potatoes.
<b>Carrots</b>	\$0.79	Large whole carrots in 1 or 2-pound bag or in bulk.	Baby carrots, carrots with tops, maroon carrots and any specialty carrots.
<b>Oranges</b>	\$0.99	Valencia or Naval oranges only.	Tangerines, blood oranges, and any other specialty orange.
<b>Fresh Tomatoes</b>	\$1.99	Roma tomatoes only.	Any other variety of fresh tomatoes.
<b>Canned Tomatoes 14.5-oz can</b>	\$1.35	Peeled, whole tomatoes or crushed tomatoes.	Stewed, Italian style with added seasonings or peppers, onions, herbs, etc.

Table 2  
PROPOSED OPTIONS

Item	Amount	Redemption Cost	Vitamin C	# of servings (c)		Vitamin C Per serving (mg)	Other Nutrients
				1-3 yo	4-5 yo		
<b>JUICE ONLY</b>							
WIC juice	64 fl oz	\$3.50 average redemption	576 mg	16 (4 fl oz servings)	10.5 (6 fl oz servings)	36	Vitamin C, Folate, Potassium and fiber vary with juice.
Item	Edible Weight (a)	Price per Pound (b)	Vitamin C	# of servings (c)	Vitamin C Per serving (mg)	Other Nutrients	
<b>BROCCOLI AND ORANGES</b>							
Fresh Broccoli bunch, stalks, or crowns (1 lb)	404 g	\$1.49	376 mg	17 (24 g/serv.)	6 (65 g/serv.)	22	Vitamin A and C, Folate, Fiber, and Potassium
Fresh Oranges (2 lbs)	664 g	\$ 0.99	360 mg	13 (52 g/serv.)	6 (105 g/serv.)	29	Vitamin C, Folate, Fiber, and Potassium
<b>TOTAL</b>			<b>756 mg</b>	<b>30</b>	<b>12</b>		
<b>POTATOES AND ORANGES</b>							
Potatoes (2 lbs)	736 g	\$ 0.75	94 mg	38 (19 g/serv.)	14 (50 g/serv.)	2.5	Potassium, some Vitamin C
Fresh Oranges (2 lbs)	664 g	\$ 0.99	360 mg	13 (52 g/serv.)	6 (105 g/serv.)	29	Vitamin C, Folate, Fiber, and Potassium
<b>TOTAL</b>			<b>474 mg</b>	<b>51</b>	<b>20</b>		

Item	Edible Weight (a)	Price per Pound	Cost (b)	Vitamin C	# of servings (c)		Vitamin C Per serving (mg)		Other Nutrients
					1-3 yo	4-5 yo	1-3 yo	4-5 yo	
<b>CARROTS AND ORANGES</b>									
Fresh Carrots (2 lbs)	745 g	\$ 0.79	\$ 1.58	59 mg	31 (24 g/serv.)	11 (64 g/serv.)	2	5	Vitamin A and Fiber
Fresh Oranges (2 lbs)	664g	\$ 0.99	\$ 1.98	380 mg	13 (52 g/serv.)	6 (105 g/serv.)	29	63	Vitamin C, Folate, Fiber, and Potassium
<b>TOTAL</b>			<b>\$ 3.56</b>	<b>439 mg</b>	<b>44</b>	<b>17</b>			
<b>CANNED TOMATOES OR FRESH ROMA TOMATOES AND FRESH CARROTS</b>									
Canned Tomatoes 2- 14.5 oz cans or	453 g	\$ 1.35	\$2.70	41 mg	28 (16 g/serv.)	11 (41 g/serv.)	1.5	3.7	Vitamin A and C, Potassium, and Lycopene.
Fresh Roma tomatoes (1.5 lbs)	680 g	\$ 1.99 (Variable from \$ 0.69 - \$ 1.99)	\$ 2.98	130 mg	29 (23 g/serv.)	15 (46 g/serv.)	5	8	
Fresh Carrots (1 lb)	372 g	\$ 0.79	\$0.79	29 mg	15	5	2	6	Vitamin A and Fiber
<b>TOTAL (Carrots w/ canned Tomatoes)</b>			<b>\$ 3.49</b>	<b>70 mg</b>	<b>43</b>	<b>16</b>			
<b>TOTAL (Carrots w/ fresh Roma tomatoes)</b>			<b>\$ 3.77 (variable)</b>	<b>159 mg</b>	<b>44</b>	<b>20</b>			

(a) Reuse/waste factor: Broccoli stalks 22%, Broccoli Florets 0 (edible weight is based on 50% stalks and 50% florets), Orange 27%, Potato 19%, and Carrot 18%, Roma tomato. Source: USDA Agriculture Handbook Number 8.  
 (b) Cost takes into account data from a price survey of the high cost counties in California.  
 (c) Serving size (used average of the range to calculate number of servings): Cooked or raw vegetable: 2 - 3 lbs for 1-3 yo and 1/3 - 1/2 cup for 4-5 yo  
 Fresh fruit: 1/4 - 1/2 small for 1-3 yo and 1/4 - 1 small for 4-5 yo children.



**Table 3****Vitamin C Content of the Proposed Fruits and Vegetables**

Item	Vitamin C per serving for 1 – 3 years old children*		Vitamin C per Serving for 4 – 5 years old children*	
	mg	DRI**	mg	DRI**
Broccoli	22	147%	62	248%
Chinese Broccoli	3.8	25%	10.3	41%
Carrots	2	13%	5	20%
Potatoes	2.5	16%	6.7	26%
Canned Tomatoes	1.5	10%	3.7	24%
Fresh Tomatoes	5	33%	8	32%
Oranges	29	193%	63	252%

\*Serving Size (used average of the serving size range to calculate the above numbers):

Cooked or raw vegetables: 2 - 3 tbs for 1 - 3 year old children  
1/3 - 1/2 cup for 4 - 5 year old children

Fresh Fruit: 1/4 - 1/2 small for 1 - 3 years old children  
1/2 - 1 small for 4 - 5 years old children

\*\*Dietary Reference Intake (DRI):

1 – 3 years old children: 15 mg

4 – 5 years old children: 25 mg

## FOCUS GROUP FINDINGS (Spring 2002)

Cantonese Speaking Women:  
Fruits and Vegetables Purchased

Fruits Purchased	Vegetables Purchased	
Apples	Spinach	Peas
Grapes	Napa cabbages	Turnips
Bananas	Bok choy	Carrots
Durians	Chinese broccoli	Lotus roots
Oranges	Broccoli	Potatoes
Watermelons	Lettuce	Tomatoes
Strawberries	String beans	
Cherries	Watercress	

Vietnamese Speaking Women:  
Fruits and Vegetables Purchased

Fruits Purchased	Vegetables Purchased
Apples	Spinach
Cantaloupe	Salad
Oranges	Carrots
Mangos	Cauliflower
Bananas	Chinese broccoli
Peaches	Broccoli
Watermelon	Beets
Kiwi	Squash
Strawberries	Potatoes
Cherries	Corn
Papaya	Tomatoes

**PROPOSED FOOD INSTRUMENTS FOR FRUITS AND VEGETABLES**

**Broccoli and Oranges**

Fruit & Veggies

Kind to buy:  
Fresh broccoli (bunch,  
stalks or crowns)  
Fresh oranges

How much to buy: up to  
1 lb stalks or crowns  
or 1 bunch of broccoli  
and 2 lbs fresh oranges

**PROPOSED FOOD INSTRUMENTS FOR FRUITS AND VEGETABLES**

**Potatoes and Oranges**

Fruit & veggies

Kind to buy:  
Potatoes (Russet or Idaho)  
Fresh Oranges

How much to buy: up to  
2 lbs potatoes and  
2 lbs fresh oranges

**PROPOSED FOOD INSTRUMENTS FOR FRUITS AND VEGETABLES**

**Carrots and Oranges**

Fruit & veggies

Kind to buy:  
Fresh large carrots  
Fresh oranges

How much to buy: up to  
2 lbs fresh carrots and  
2 lbs fresh oranges

**PROPOSED FOOD INSTRUMENTS FOR FRUITS AND VEGETABLES**

**Tomatoes and Carrots**

Fruit & Veggies

Kind to buy:  
14.5-oz canned tomatoes  
(crushed or whole peeled)  
OR Fresh Roma tomatoes  
And fresh large carrots

How much to buy: 2 cans  
Or up to 1.5 lbs tomatoes  
and 1 lb fresh large carrots



## CHILD NUTRITION POLICY RECOMMENDATIONS

### **Background**

*The 109<sup>th</sup> Congress is considering the reauthorization of the Richard B Russell National School Lunch Act and the Child Nutrition Act of 1966. The Senate Agriculture Committee and House Committee on Education and the Workforce will develop legislation regarding reauthorization of these child nutrition programs. The current federal child nutrition programs present a range of opportunities to achieve pressing national goals that will aid in the physical, emotional, developmental, education and economic well being of children, their families and their communities. As new initiatives are presented, financial resources have to be reallocated or increased to account for the cost associated with these initiatives. We believe investments into these specific policy initiatives will ensure that the federal child nutrition programs represent the nation's best commitment to offer young people a bright start to good nutrition choices.*

### **Current Situation**

Despite the best efforts of Congress, the nutritional health of our nation's children has become secondary to other policy considerations. It is clear that with obesity, diabetes and other nutrition-related chronic diseases at epidemic proportions in the United States, something has to change. We must put public health first, and guarantee that school lunches, breakfasts, after-school snacks, and WIC become part of the solution rather than part of the problem.

### **Produce Industry Policy Recommendations**

The produce industry supports the following recommendations for reauthorization with an overall commitment to increasing fresh fruit and vegetables in the child nutrition programs:

- ◆ Expansion of the Free Fruit and Vegetable Pilot program to a national program, allowing schools across the country to take part in this new, creative program to get fruits and vegetables to children during school hours
- ◆ Increasing the federal reimbursement rate to schools with the concept of a 10-cent per meal "healthy children supplement" to be devoted to improving the quality and healthfulness of school meals
- ◆ Increased school breakfast programs, including expansion of the program to all children at no cost, and increased provision of commodities under the breakfast program
- ◆ "Healthy Foods for Healthy Kids Initiative," to provide \$10 million annually for grants to states and school districts for innovative projects such as salad/garden bars, healthy vending programs, cold storage and other creative ways to increase fresh produce
- ◆ Expansion of the Department of Defense fresh program from \$50 million annually to \$100 million annually. This popular program is the most practical way schools can receive frequent small deliveries of fresh produce under USDA programs
- ◆ USDA commodity purchases for schools must conform to the U.S. Dietary Guidelines for Americans
- ◆ Increasing USDA's role in the support of the National 5 A Day Partnership with the appointment of 5 A Day coordinators in each state to work with state and local partners, as well as designating a permanent 5 A Day office within USDA to provide national leadership
- ◆ Science-based revision of the WIC packages to increase fruits and vegetables offered to participants

### **Action Necessary**

This year, Congress must pass reauthorization legislation that facilitates increased consumption of fresh fruits and vegetables, increases nutrition education for our children and provides schools the tools they need to access, store and distribute fresh fruits and vegetables.

United Fresh Fruit & Vegetable Association  
1901 Pennsylvania Ave. NW, Suite 1100  
Washington DC, 20006  
202/303-3400 or [www.uffva.org](http://www.uffva.org)

United





## FRESH PRODUCE AND CHILD NUTRITION PROGRAMS

### **Background**

*The 2002 Farm Bill authorized a \$6 million Fruit and Vegetable Pilot program in FY03 to provide free fruit and vegetable snacks to students in 25 schools each in Michigan, Ohio, Indiana and Iowa, and seven schools in the Zuni Nation in New Mexico. In record time, USDA organized a basic pilot program and sent an announcement to the states, wondering whether many schools would volunteer to participate. With over 800 schools coming forward, USDA was hard pressed to select just 107 schools to participate in the program.*

*Beginning in October 2002, the pilot program has already produced an unprecedented success story changing the lives of children and the healthy food environment of every school in the program. On March 25-26, USDA and the National Cancer Institute, supporter of the National 5 A Day Program, co-hosted a conference in Indianapolis of teachers, food service personnel, principals, school nurses, parent-teacher organizations, education administrators and more to report preliminary results of the program. While USDA will soon submit its quantitative report to Congress, the anecdotal reports from participants in the conference were overwhelmingly positive.*

### **Current Situation**

In many cases, the availability of fresh produce in the federal nutrition programs is limited to a few commodities. Critics will cite numerous impediments to increasing fresh fruits and vegetables in the school lunch and breakfast programs, the WIC program, and in creating a new healthy school food environment. But to overcome those challenges, Congress has to look no further than the students, teachers, principals, food service personnel, school nurses, parent-teacher organizations and community leaders now participating in the incredibly successful fruit and vegetable school pilot program now underway. Through the simple addition of fresh fruit and vegetable snacks during the school day, this program is transforming schools into models of healthy behavior and improved learning environments.

### **Expansion of Fresh Fruit & Vegetable Pilot Program**

The produce industry supports the following recommendations for the expansion of the Fresh Fruit and Vegetable Program authorized under the 2002 Farm Bill:

- ◆ Establish a *National Fresh Fruit and Vegetable School Program* as a permanent part of child nutrition programs.
- ◆ Develop additional pilot programs in all 50 states in FY04, leading to a national program open to all public schools in FY05 based on the success and lessons learned in the pilot programs.
- ◆ The current pilot program funded schools at a rate of approximately \$100 per student for the school year, or 55 cents per day per student in a 180-day school year. This minimum standard should be used as a benchmark in developing a national program. This program must ensure efficiencies, economics, and controls in a national program, while allowing the flexibility for local school choices that has been a cornerstone of success thus far.

### **Action Necessary**

The Fruit and Vegetable Pilot Program works! It works to immediately and drastically change children's fruit and vegetable consumption to improve their health, and it is transforming the school environment to provide healthy food choices. Congress and the Administration have an unparalleled opportunity to make a real difference in prevention of childhood obesity and development of related diseases, and must act now.

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1901 Pennsylvania Ave. NW, Suite 1100  
Washington DC, 20006  
202/303-3400 or [www.uffva.org](http://www.uffva.org)

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## News Release



**FOR IMMEDIATE RELEASE: April 3, 2003**  
**Contact: Hilary Hausman, 202/303-3400**

### **UNITED CHAIRMAN KAREN CAPLAN TESTIFIES BEFORE U.S. SENATE: URGES CONGRESS TO INCREASE FRUITS AND VEGETABLES IN CHILD NUTRITION PROGRAMS**

**Washington, DC – Thursday, April 3** -- United Chairman of the Board Karen Caplan, president and CEO, Frieda's, Inc., today urged the Senate Committee on Agriculture, Nutrition and Forestry to increase funding and availability of fresh fruits and vegetables in child nutrition programs such as school breakfast, lunch and the Women, Infants and Children (WIC) supplemental foods program.

With obesity reaching epidemic proportions in the United States, Caplan focused on increasing children's produce consumption as a key public health solution. The fruit and vegetable industry offers children healthy and nutritious products that are critical to prevention of chronic diseases and maintaining overall good health. Caplan told the Committee that increasing federal support and funding to promote fruit and vegetable consumption as part of a healthy school food environment should be a top priority for the nation.

"Congress must develop legislation to make healthfulness and quality equal components of school breakfasts and lunches, to build a healthier school environment that truly teaches lifelong wise food choices, and to launch a smarter nutrition start for WIC recipients that can be incorporated into healthy diets long after leaving the program," she said.

Caplan focused significant attention on USDA's new fresh fruit and vegetable pilot program launched in the Farm Bill last year. "On behalf of the 106 schools in the pilot program, I bring you unanimous support from teachers, parents, school foodservice officials, principals, school nurses, -- and yes, even the kids -- for continuing and expanding the fresh fruit and vegetable pilot program," she told the Committee.

"USDA UnderSecretary Eric Bost referred to the Administration's support for this program during his earlier testimony, and I want to reinforce and magnify his comments. At a conference USDA and NCI hosted last week in Indianapolis, officials from Indiana, Ohio, Michigan, Ohio and the Zuni nation in New Mexico shared success stories greater than any of us had imagined. Teachers reported more attentive students and focused classrooms; school nurses reported fewer trips to the nurse and fewer absences; foodservice managers reported more healthy meals served, and more fruits and vegetables being chosen in the cafeteria; principals reported fewer behavior problems; parents reported kids asking them to buy new produce items at home; and, the kids reported trying new fruits and veggies and increasing their consumption by at least one full serving a day."

"After decades of working to teach school kids to make healthy food choices, we've learned the secret to increasing their consumption -- put appealing, tasty, fresh fruits and veggies in front of them and they'll love you for it. All this just because the government spent a modest amount to give them a healthy fruit and vegetable snack at school," she said.

Headquarters: 1901 Pennsylvania Ave. NW, Suite 1100 • Washington, DC 20006 • Tel: (202) 303-3400 • Fax: (202) 303-3433 • www.uffva.org  
 Western Regional Office: 512 Pajaro Street • Salinas, CA 93901 • Tel: (831) 422-0940 • Fax: (831) 422-2892



“We urge the Committee to expand the Fruit and Vegetable program to all 50 states at a pilot level next year, so we can continue to collect the data and results that will determine how widespread this program could become,” she said.

During Caplan's testimony, she also outlined other key priorities, including:

- Increasing lunch reimbursement rates with a 10-cent per meal "healthy children supplement" to be devoted to improving the quality and healthfulness of school meals;
- Providing school breakfast programs to all children at no cost and increased provision of commodities under the breakfast program;
- Creation of a new "Healthy Foods for Healthy Kids Initiative" to provide \$10 million annually in grants to states and school districts for innovative projects such as salad/garden bars, healthy vending programs, cold storage, and other creative ways to increase fresh produce;
- Expansion of the Department of Defense Fresh program from \$50 million annually to \$100 million annually; and,
- Increasing the commitment from USDA to the National 5 A Day Partnership by establishing a permanent national 5 A Day office, and appointing state 5 A Day coordinators.

In addition to today's hearing, Caplan also visited this week with numerous members of Congress and Administration leaders to advance the produce industry's recommendations on child nutrition.

For more information on produce industry views on child nutrition reauthorization, please visit [www.uffva.org](http://www.uffva.org)

*Founded in 1904, United Fresh Fruit & Vegetable Association's mission is to promote the growth and success of produce companies and their partners. United is the national trade organization that represents the interests of growers, shippers, processors, brokers, wholesalers and distributors of produce, working together with their customers at retail and foodservice, suppliers at every step in the distribution chain, and international partners. For more information about United, please visit [www.uffva.org](http://www.uffva.org) or call 202/303-3400.*

**Testimony Submitted by  
Sally Fallon, President  
The Weston A. Price Foundation  
Senate Agriculture, Nutrition and Forestry Committee  
Hearing on the Child Nutrition Act  
April 3, 2003**

Mr. Chairman and the Ranking Minority Member, on behalf of the members and 150 local chapters of the Weston A. Price Foundation, I thank you for the opportunity to submit testimony to the Senate Agriculture, Nutrition and Forestry Committee on the serious health issues facing our children today, particularly the rapidly growing incidence of obesity in American children.

The reauthorization of the Child Nutrition Act is a very important step in curbing this unnecessary health risk while enhancing the nutrition and well being of our children.

The Weston A. Price Foundation is a nonprofit, tax-exempt educational organization founded in 1999 to restore nutrient-dense foods to the American diet through education, research and activism. The research of nutrition pioneer Dr. Weston Price, whose studies of isolated non-industrialized peoples established the parameters of human health and determined the optimum characteristics of human diets, serves as the basis of the Foundation's work. Dr. Price's research demonstrated that humans achieve perfect physical form and optimal health generation after generation only when they consume nutrient-dense whole foods and the vital fat-soluble activators, such as vitamins A and D, found exclusively in animal foods.

The Foundation supports a number of movements that contribute to this objective including accurate nutrition instruction, organic farming, pasture feeding of livestock, community-supported farms, honest and informative labeling, prepared parenting and nurturing therapies.

In our testimony, the Foundation will focus its attention on the Women, Infant and Children (WIC) Program and the Child Nutrition Programs.

**I. WOMEN, INFANT AND CHILDREN PROGRAM**

The Congress established the WIC Program in 1972 as a two-year pilot program with permanent authorization in 1974. The stated goal of the program was the prevention of nutritional deficiencies among low-income women and children, deficiencies that threatened their health and led to higher medical costs. WIC offers food programs to improve the diets and well-being of low-income pregnant, breastfeeding, and postpartum women and their infant and children up to and including age four. WIC seeks to prevent premature births and low birth weight babies as well as compromised development among babies and young children.

WIC is a \$5 billion program serving over seven million women and children. Nearly 50 percent of all infants in the U.S., 25 percent of all children age one to four and 25 percent of all pregnant women participate in the WIC program.

### **Encourage breastfeeding over the use of infant formula**

One of the stated purposes of the WIC program is the encouragement of breastfeeding. Unfortunately, this laudable goal has become compromised by the increased availability of free infant formula to WIC mothers. Free infant formula--with a market value of approximately \$80 to \$90 per month--sends a powerful message to WIC mothers to utilize infant formula, especially to those WIC mothers who work and have less available time to breastfeed.

Between 1989 and 1995, the percentage of WIC mothers breastfeeding in the hospital increased by 36.3 percent, from 34.2 to 46.6 percent, while the percentage for non-WIC mothers breastfeeding in hospital increased by 12.9 percent from 62.9 to 71 percent. The percentage of WIC infants breastfeeding at six months of age increased by 51.2 percent, from 8.4 to 12.7 percent, while for non-WIC infants, the percentage breastfeeding at six months of age was 29.2 percent in 1995, an increase of 22.7 percent from 1989. While the number and percentage of WIC mothers who breastfeed has increased in recent years, breastfeeding in the WIC program still lags behind national averages. Over half of WIC mothers utilize infant formula while in the hospital and about 87 percent use infant formula or other feeding methods when their infants reach six months of age.

While many individual WIC counselors encourage breastfeeding, the infant formula rebate program provides little incentive to managers of the program. Rebates from formula manufacturers have provided billions of dollars of extra funding to WIC with little Congressional oversight. WIC State agencies are required by law to have competitively bid infant formula rebate contracts with infant formula manufacturers. This means that a WIC State agency agrees to provide one brand of infant formula to its participants and in return receives money back, called a rebate, from the manufacturer for each can of infant formula purchased by WIC participants. As a result, WIC pays the lowest possible price for infant formula. The brand of infant formula provided by WIC varies from State agency to State agency, depending on which company has the rebate contract in a particular State.

In 1988, infant formula rebates provided WIC with \$32 million in additional funding. This has grown to \$1.5 billion in FY2001, which added 2.1 million participants to the program during that same fiscal year. Up to one-fourth of available funding for the WIC program comes from the infant formula rebate program. The rebate program decreases the monthly average food package cost to infants from the \$90 to \$27. While the extra funding for the WIC program is surely needed, we wonder whether the rebate program inadvertently undermines the promotion of breastfeeding in the WIC program.

***We encourage the USDA to increase its promotion of breastfeeding as research continually shows that breastfeeding is the healthiest way to nurture an infant.*** This can be done by withholding free samples of infant formula to postpartum mothers in the hospital and by increased health counseling to pregnant and postpartum mothers about the benefits of breastfeeding.

In 1993, the USDA began efforts to enhance the food package breastfeeding mothers to, in part, counter the use of infant formula. In addition to the basic package – Food Package V - for pregnant and breastfeeding mothers (7 gallons milk *or* 4 pounds cheese, 2 dozen eggs, 36 ounces cereal, 8 liters juice and 1 pound legumes *or* 18oz. peanut butter), breastfeeding mothers can receive an additional 1 pound cheese, 26 ounces tuna fish, extra juices and peanut butter and 2 pounds carrots under the enhanced food package – Food Package VII. ***We encourage the USDA to further upgrade the enhanced food package to include butter as well as additional milk, cheese, eggs and meat.***

#### **Restrict Availability of Soy Infant Formula**

The WIC program offers both milk-based and soy-based infant formula to low-income families throughout the US. An estimated 25 percent of North American bottle-fed babies receive infant formula made from processed soybeans. Use of soy formula in the WIC program closely corresponds to the 25 percent figure, according to the USDA.

Soy promotional material claims that soy provides complete protein that is less allergenic than cows' milk protein. When soy infant formula first became commercially available, manufacturers even promised that soy formula was "better than breast milk."

In fact, there are many toxins in soy infant formula, some that occur naturally in the soybean and some that are added during processing. When an infant consumes soy-based formula as its only food, it receives a very large dose of these toxins. Even in Asia, soy is consumed only in small amounts—ranging from 10 to 60 grams per day—usually as a fermented condiment. Soy was never traditionally used for infant feeding.

Soy-based formulas contain high levels of anti-nutrients that can block mineral absorption and inhibit digestion. They contain very high levels of manganese, which have recently been linked to brain damage and violent behavior in older children and adults who were fed soy formula. Developmental problems are compounded by the fact that these formulas lack both cholesterol and lactose, which are vital to the development of the brain and nervous system.

Most importantly, soy-based formula contains very high levels of phytoestrogens (isoflavones), plant-based estrogens that can cause endocrine disruption, resulting in early maturation and fertility problems in girls and delayed sexual development in boys.

Babies fed soy-based formula have 13,000 to 22,000 times more estrogen compounds in their blood than babies fed milk-based formula. Infants exclusively fed soy formula receive the estrogenic equivalent of at least five birth control pills per day. Almost 15 percent of white girls and 50 percent of African-American girls show signs of puberty, such as breast development and pubic hair, before the age of eight. Some girls are showing sexual development before the age of three. Premature development of girls has been linked to the use of soy formula and exposure to environmental estrogen-mimickers such as PCBs and DDE.

Male infants undergo a "testosterone surge" during the first few months of life, when testosterone levels may be as high as those of an adult male. During this period, baby boys are

programmed to express male characteristics after puberty, not only in the development of their sexual organs and other masculine physical traits, but also in setting patterns in the brain characteristic of male behavior. In animals, soy feeding indicates that phytoestrogens in soy are powerful endocrine disrupters. A recent study involving marmoset monkeys found that soy feeding in infancy prohibits this testosterone surge. Rats exposed to soy isoflavones at very low doses in utero and as infants have smaller testes than normal and exhibit inhibited sexual behavior.

Soy is not a healthy alternative for infants unable to tolerate milk-based formula. Often babies grow normally on soy formula with the problems appearing only later, at the onset of puberty. Some of the problems reported anecdotally in children who were brought up on soy formula include extreme emotional behavior, learning difficulties, asthma, immune system problems, irritable bowel syndrome, depression, early development in girls and disrupted sexual development boys.

Often soy-based formula is automatically given to African American mothers on the premise that African American infants are lactose intolerant. This is a fallacy. African American infants are no more prone to lactose intolerance than the children of other races. Virtually all babies produce the enzyme lactase for digesting lactose, the sugar in milk, as human milk is very high in lactose.

Babies who are allergic to milk can be given a commercially available formula of hydrolyzed protein or one based on meat. ***We suggest that USDA encourage the development of meat-based infant formulas for the small numbers of infants who are truly allergic to milk-based formula.***

A summary of problems caused by soy is as follows:

- High levels of phytic acid in soy reduce assimilation of calcium, magnesium, copper, iron and zinc. Phytic acid in soy is not neutralized by ordinary preparation methods such as soaking, sprouting and long, slow cooking. High phytate diets have caused growth problems in children.
- Trypsin inhibitors in soy interfere with protein digestion and may cause pancreatic disorders. In test animals soy containing trypsin inhibitors caused stunted growth.
- Soy phytoestrogens disrupt endocrine function and have the potential to cause infertility and to promote breast cancer in adult women.
- Soy phytoestrogens are potent antithyroid agents that cause hypothyroidism and may cause thyroid cancer. In infants, consumption of soy formula has been linked to autoimmune thyroid disease.
- Vitamin B<sub>12</sub> analogs in soy are not absorbed and actually increase the body's requirement for B<sub>12</sub>.
- Soy foods increase the body's requirement for vitamin D. Toxic synthetic vitamin D<sub>2</sub> is added to soy milk.
- Fragile proteins are over-denatured during high temperature processing to make soy protein isolate and textured vegetable protein.
- Processing of soy protein results in the formation of toxic lysinoalanine and highly carcinogenic nitrosamines.

- Free glutamic acid or MSG, a potent neurotoxin, is formed during soy food processing and additional amounts are added to many soy foods.
- Soy foods contain high levels of aluminum which is toxic to the nervous system and the kidneys.
- Soy infant formula contains no cholesterol, a substance vital to the development of the brain and nervous system.

In other countries, official recommendations about soy have included warnings about overuse or side effects:

- The Australian College of Pediatrics recommends that soy formula not be indiscriminately used, noting that the routine use of soy may result in side effects.
- The New Zealand Ministry of Health recommends routine assessment of thyroid function in infants on soy formula.
- A Canadian Government Committee recommends the restriction of soy-based formula to infants who "cannot be fed dairy-based products for healthy, cultural or religious reasons, including galactosemia or a vegan lifestyle."
- The Food Safety Authority of Ireland does not recommend the routine use of soy-based formula in infants.
- The Swiss Federal /Commission on Food recommends the "use of soya bean products as baby foods should be made very restrictive" and allowed only in a few medical conditions (lactose intolerance, galactosemia and cow's milk allergy).
- The United Kingdom Department of Health states that cow's milk formulas are preferable for most bottle-fed babies and that infant formula manufacturers should investigate ways to reduce the levels of phytoestrogens in soy-based infant formulas.
- The UK Working Group of the Committee on Toxicity of Chemicals in Food, Consumer Products and the Environment (COT) recently stated that "there is cause for concern about the use of soy-based infant formula. Additionally, there is neither substantive medical need for, nor health benefit arising from, the use of soy-based infant formula." (2003)

***We urge the Congress to restrict the availability of soy infant formula in the WIC Program.***  
Soy infant formula should be available to WIC mothers only through a doctor's prescription.

***In addition, processed foods based on soy should carry a warning to consumers about possible endocrine disruption and thyroid problems.***

#### **Redesign WIC Food Packages to Help Counter Overweight and Obesity**

Obesity is on the rise in America, especially among disadvantaged groups. African-American and Mexican-American children are twice as likely as non-Hispanic white children to have a body mass index of more than 25, the definition of overweight. In the last three decades, the number of overweight young Americans has tripled, with no sign the trend is abating. According to the Surgeon Generals' 2001 report on obesity, 13 percent of children and adolescents were overweight in 1999.

WIC food packages were originally designed to help stave off hunger among its participants. The current prevalence of overweight and obesity among WIC participants now requires that WIC food packages be redesigned to help curb this health issue.

WIC food packages are established by the USDA through regulations with the approval of the Institute of Medicine of the National Academies, which develops Recommended Daily Allowance (RDA) and the new Dietary Reference Intakes (DRI) for nutrients. The current WIC food package is under review and revisions will be released in early 2005, according to the USDA. Concurrently, the USDA is revising its Dietary Guidelines and Food Pyramid with expected release of new guidelines in 2005. WIC food packages must conform to the requirements of USDA's Dietary Guidelines and Food Pyramid.

The current USDA Dietary Guidelines and Food Pyramid recommends a diet based largely on grains in the form of bread, crackers, paste, rice, etc., with small amounts of meat, dairy and fats and oils. In fact, the current Guidelines strongly favor a low-fat, high-carbohydrate diet. The current Guidelines stipulate that total fats should make up 30 percent or less of total calories, with saturated fats contributing to 10 percent or less of total calories. Carbohydrates should comprise between 45 to 65 percent of food intake by calories. These guidelines have been criticized as contributing to the epidemic of obesity in America, due to high levels of carbohydrates, particularly high glycemic index refined carbohydrates such as white flour and white rice.

Pediatrician clinicians have noted a number of years ago that children put onto a low fat and low cholesterol diets failed to grow properly. When researchers prominently associated with the American Heart Association fed children lower fat diets and measured some of the health markers they consider important predictors of heart disease, they learned that these lower fat diets were causing the very problems they wanted to prevent. The children whose genes would normally have been producing the desirable form of low density lipoproteins - light fluffy LDL - started to make the dangerous form of LDL - small dense LDL's.

The USDA has called for proposals to make changes to the Food Pyramid recommendations. The most likely candidate is a food pyramid recommend by Dr. Walter Willett of Harvard University. His version calls for a diet based on a combination of whole grains and vegetable oils (olive, canola, soy, corn, etc.), with the same strictures on animal foods and saturated fats as found in the current guidelines.

Dr. Willett's proposed guidelines are likely to further the trend to obesity and disease. With the exception of olive oil (which is rarely used in processed foods), commercial vegetable oils contain free radicals and dangerous breakdown products that cause heart disease, cancer, inflammation and aging, as well as increased obesity. In the young, diets based on vegetable oils depress learning and cause growth problems. Furthermore, these oils are often partially hydrogenated and contain dangerous *trans* fatty acids.

***We recommend that the Food Pyramid concept should be abandoned. The USDA should return to a plan that stresses high quality foods from four basic groups. The use of processed***



*and highly sugared foods should be strongly discouraged, especially those foods that contain high fructose corn syrup.*

*In addition, USDA should discontinue the unscientific opposition to animal fats.* Animal fats are stable, do not easily develop free radicals, and contain nutrients that are vital for good health. Children, in particular, need high levels of quality animal fats to achieve optimal physical and neurological development.

The Weston A. Price Foundation urges the USDA as well as the Congress to revise the dietary guidelines as follows:

- Everyday, eat high quality, unprocessed foods from each of the following four groups:
  1. Animal foods: meat, fish, eggs and whole milk products
  2. Grains and legumes: whole grain baked goods, breakfast porridges, beans
  3. Fruits and Vegetables: preferably fresh or frozen
  4. Fats and Oils: unprocessed monounsaturated and saturated fats including olive oil, peanut oil, butter and other animal fats, palm oil and coconut oil.
- Eat sparingly: sweets, white flour products, processed foods, polyunsaturated vegetable oils, partially hydrogenated oils and fried foods.

We believe that by following our recommendations to the dietary guidelines and modifying WIC food packages to conform to these recommendations, overweight and obesity, as well as many other health problems, will dramatically decrease in the country.

## II. REVISIONS TO THE CHILD NUTRITION PROGRAMS

The USDA manages a number of nutrition programs for our nation's children, including the School Lunch, School Breakfast, Special Milk, Summer Food Service and the Child and Adult Care Programs. Over 30 million of our nation's children participate in these various programs. We urge the Congress to at least maintain current funding levels for these very important programs, while revising several of the program offerings as follows:

### **Encourage Procurement of Local Farm Products for School Food Programs**

According to latest statistics, less than 13 percent of school-age children eat the recommended amount of fruit. On any given day, 45 percent of children do not eat any fruit and 20 percent eat less than one serving of vegetables. Overall, only 15 percent of our children eat the USDA-recommended five servings a day of fruits and vegetables.

The American School Food Service Association estimates that 30 percent of the nation's 23,000 public schools sell fast food. In an increasing number of schools, the food service department is contracting out lunch to fast food chains such as McDonalds, Domino's or Taco Bell.

However, a growing number of food service departments at schools across the U.S. have been joining forces with parents, teachers, community activists, and farmers to create new opportunities for healthy student lunch offerings while simultaneously supporting small farmers within their region. These Farm-to-School programs usually include the following:

- Salad bars purchased from farmers' market fruits and vegetables
- Recipes integrating appropriate seasonal, regionally grown produce
- Farmer cooperatives supplying produce directly to school districts
- Farmers selling produce directly to schools using programs sponsored by the USDA and the Department of Defense

Farm-to-School programs help ameliorate this situation by promoting the procurement and availability of locally grown fruits and vegetables. At least 68 school districts around the country currently operate farm-to-school programs with many more planning to do so in 2003.

We are encouraged by early reports on the wide spread acceptance of the Fresh Fruit and Vegetable Pilot Project authorized by the 2002 Farm Bill. The pilot was launched by the USDA in the summer of 2002 in four Midwestern states. Participating schools, which numbered 100, reported dramatic increase in consumption of fruits and vegetables by students and, most interestingly, a dramatic drop in the use of vending machines. *We encourage the Congress and the USDA to extend and expand the Fresh Fruit and Vegetable Pilot Project to the entire country.*

*We suggest that Fresh Fruit and Vegetable Pilot Project include animal foods (meats, eggs and dairy products) as well as fruits and vegetables.* It is vitally important for children to have access to hormone-free meats from cattle not raised in confinement or on factory farms, free range chickens and eggs and dairy products from cows that are not fed antibiotics and raised in confinement. The program should also be used to discourage the use of industrially created processed foods in children's diets.

In addition, soy milk is not a healthy option to cow's milk. Consumption of high levels of soy milk is associated with thyroid problems and endocrine disruption. *The USDA should not reimburse schools that decide to offer soy milk as well as cow's milk.*

Encouraging the growth of farm-to-school programs would go a long way to help stem the growth of obesity and other health problems in our nation's children.

#### **Ban Sale of Soft Drinks and Processed Snack Foods in School Vending Machines**

*The Weston A. Price Foundation encourages the Congress to call for a ban on the sale of soft drinks and snack foods in school vending machines.* Soft drinks contain high levels of sugar or artificial sweeteners, caffeine and phosphoric acid, that contribute to obesity, diabetes and poor bone health in growing children.

School districts, hungry for funds for extra-curricular programs, have signed "pouring" contracts with soft drink corporations, giving these corporations the ability to both sell and promote their

products at the schools. There are an estimated 20,000 vending machines in schools nationwide, according to the National Automatic Merchandising Association. These machines generated an estimated \$750 million for schools in 1997, based on figures from the trade journal *Vending Times*. Many schools have expressed a reluctance to give up such contracts without other sources of funding made readily available.

The USDA collected data on vending machines in schools and reported the following statistics:

- 88 percent of high schools, 61 percent of middle schools and 14 percent of elementary schools have food or beverage vending machines for student use.
- 34 percent of high schools and 15 percent of middle schools permit students to use school vending machines at any time, and 6 percent of elementary schools allow students to use vending machines during lunch.

Nationwide, school districts decreased the amount of milk they bought by nearly 30 percent between 1985 and 1997. During the same period, they increased their purchases of soft drinks by 1,100 percent. The soda industry responded to this and other trends by increasing U.S. production from 22 to 41 gallons per person a year between 1970 and 1997.

To counter this trend, seventy-six proposed bills in 28 states have attempted to restrict or ban the sale of carbonated soft drinks in schools. Only one, in California, passed, but it has not been enacted because the law also has requirements for school lunch funding that have not been fulfilled. Among the bills just being written or introduced are ones that would stop the sale of soft drinks in school vending machines, put restrictions on the kinds of snack foods that can be offered, require fast-food restaurants to put nutrient information on food packages, and allocate funds for bike and walking paths.

Snack foods sold in vending machines provide little food value and contain *trans* fatty acids, which can contribute to heart disease, cancer and many other diseases. ***We urge the replacement of vending-machine snacks with wholesome snacks prepared at the school and sold in school snack bars.*** Such snacks should include cheese, peanut butter, sandwiches, nuts and trail mix, cookies made with wholesome ingredients and popcorn.

Schools that have replaced soft drinks and processed snack foods with water and fruits and vegetables have found high acceptance among students.

#### **Ban Irradiated Foods in the School Lunch Program**

***The Weston A. Price Foundation strongly encourages the Congress to repeal section 4201(b)(3) of the 2002 Farm Bill so that the USDA may prohibit irradiated for use in School Lunch Program.***

We believe that irradiated food has not been proven safe, particularly for children. Irradiation disrupts the chemical composition of food and creates chemicals called unique radiolytic products that are not naturally occurring in foods and that the Food and Drug Administration (FDA) has never studied for safety.

Irradiation destroys vitamins, essential fatty acids and other nutrients in food. Research has revealed a wide range of health issues in animals given irradiated foods including genetic damage, organ malfunctions, stillbirths, premature death, a rare form of cancer, low weight gain and vitamin deficiencies.

There is a lack of research into the long-term health effects experienced by children who are exposed to toxic chemicals in foods. The only controlled study of children, published in 1975 in the *American Journal of Clinical Nutrition*, found that a diet of irradiated food had mutagenic effects. Studies on children have not been done since, primarily for ethical reasons because of the dangers seen in early studies.

New research from Europe on alkylcyclobutanones, one class of unique chemicals created during the irradiation process, has further indicated the need for caution. The FDA and the USDA have never publicly addressed this new toxicity information. Yet, these European studies establish that substances unique to irradiated foods cause cellular and genetic damage and promote colon tumor formation in rats.

In addition, irradiation merely masks problems in meat processing that result in contaminated meat. Poor sanitation and improper slaughter and processing practices in meat and poultry plants must be corrected, otherwise all consumers remain at risk. It is a mistake to accept food irradiation as a solution to food contamination problems within the industry.

Lastly, the USDA does not require that parents, students or teachers be informed that school meals have included food that has been irradiated. Parental right-to-know is of essence to an informed society.

Do not subject our children to unproven technologies. They do not deserve to be guinea pigs for the irradiation industry.

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The Weston A. Price Foundation thanks you for the opportunity to present our testimony on the reauthorization of the Child Nutrition Act. The Congress has an incredible opportunity to stem the tide of obesity in this country while improving the nutrition and health of our children.

If you have any further questions, please contact Sally Fallon or Bill Sanda, Director of Public Affairs, at [WestonAPrice@msn.com](mailto:WestonAPrice@msn.com) or by phone at 202-333-HEAL. Our very informative and educational web site can be found at [www.westonaprice.org](http://www.westonaprice.org).

NATIONAL LAW CENTER

**ON HOMELESSNESS & POVERTY**

Statement of Sara Simon Tompkins  
Staff Attorney  
National Law Center on Homelessness & Poverty

Submitted to United States Senate Committee on Agriculture, Nutrition and Forestry  
April 7, 2003

Mr. Chairman and Members of the Committee, thank you for the opportunity to submit this testimony on the reauthorization of the child nutrition programs. I am Sara Simon Tompkins, Staff Attorney at the National Law Center on Homelessness & Poverty. NLCHP is a non-profit that works to end and ameliorate homelessness by addressing the underlying causes of homelessness. Toward this end, NLCHP advocates for programs that assist people who are homeless and at risk for homelessness including the federal nutrition programs.

I welcome the opportunity to share with this Committee some comments on the child nutrition programs, particularly as they relate to homeless families and families at risk for homelessness. The child nutrition programs are critical to the health and well being of some of the poorest Americans and I appreciate the work that this Committee has done to maintain and strengthen those programs.

The child nutrition programs help improve the health and nutrition of millions of children from low-income families. The school lunch program alone provides free and reduced price lunches to approximately 15 million children per day.

The success and importance of these programs is well documented. Well nourished children perform better in school and have less behavioral and developmental problems. Studies show that when children eat breakfast in the morning, their math and reading scores go up. On the contrary, hungry students have lower math scores and are more

likely to repeat a grade. In addition, students who participate in the school breakfast program have been found to have fewer discipline problems and to visit school nurses less often.

These programs are particularly important for families that are homeless and on the verge of homelessness. Many homeless families cannot afford to provide their children with adequate meals. Children from these families are uniquely vulnerable, and for many, their most nutritious meal during the day is the one they receive through the school breakfast or lunch program.

The following are recommendations for strengthening the child nutrition programs and improving access:

1. **Make all children in homeless shelters eligible for reimbursements for meals and snacks through the CACFP program by reimbursing meals for children up to age 18.**

The CACFP Program currently provides reimbursement to homeless shelters for meals served to homeless children up to age 12. By extending the age limit to 18, Congress can help meet the need of a very vulnerable population.

According to the Urban Institute, approximately 1.35 million children are likely to experience homelessness in a given year. People who are homeless suffer from ill health at a much higher rate than people who are housed, due in part to inadequate nutrition. It is critical that homeless children and youth be provided with the nutrition they need to succeed in school and maintain good health.

Many children and youth living in homeless shelters and domestic violence shelters are between the ages of 12 and 18. Indeed, some shelters exclusively serve vulnerable youth. Additionally, many family shelters house children over 12 years of age. By raising the age limit to 18, Congress can help extend this program to provide nutrition for a greater number of hungry children.

2. **Make suppers available at after school programs nationwide.** Many parents are working later and children are staying longer at school as part of after school programs. These parents are often not able to provide their children with a nutritious dinner. Providing suppers at after school programs can help meet this need.

A pilot program exists in seven states to provide suppers to children after school. It has been a successful and important program. However, the suppers have been available through the CACFP program, not through the national school lunch program. This creates a burden for participating schools, because they must manage multiple programs. The after school supper program should be expanded nationwide and should be administered through the national school lunch program to ease the burden on the schools. This will ensure that low-income children in after school programs nationwide receive a nutritious supper.

3. **Provide year-long certifications.** Families participating in the child nutrition programs currently must report income changes during the year which can be highly burdensome for families. Allowing children to be certified for one year would simplify the program for poor families who have many other responsibilities to juggle, as well as reduce paperwork for program staff.

4. **Provide free meals for all households at or below 185% of the federal poverty guidelines**

Many families do not participate in the lunch and breakfast program because the fee of 40 cents for lunch and 30 cents for breakfast is more than they can afford. This is particularly true for families with several school age children. At the end of each month, when the resources of low-income families are running dry, the numbers of children in the reduced price category decline. In addition, according to the American School Food Service Association, less than 10% of the meals served to children are at the reduced price category. This means that the marginal cost of providing free meals for this population will not add significantly to the cost of the program. Providing free meals for all children under 185% of the federal poverty guidelines will eliminate the barrier that the fee presents to very poor families and allow very poor children to receive nutrition that they otherwise couldn't afford.

5. **Require direct certification for free meals through the Food Stamp Program and TANF Program.** Children who participate in the Food Stamp Program and TANF program are categorically eligible for the child nutrition programs. However, these families must still fill out a paper application. To reduce the burden on both the families and on the program staff, Congress should require direct certification for free meals

through the Food Stamp and TANF programs. States could simply send a list with names of eligible children to the local school district for direct certification.

Mr. Chairman, thank you again for the opportunity to present this testimony. The National Law Center on Homelessness and Poverty is committed to helping children who are homeless and at risk for homelessness access proper nutrition so that they can live vital, healthy lives. We appreciate your work in keeping America's children well nourished. If you have any questions, you are more than welcome to contact me.



STATEMENT  
ON  
RE-AUTHORIZATION OF CHILD NUTRITION PROGRAMS  
BY THE  
APPLE PROCESSORS ASSOCIATION  
TO  
SENATE COMMITTEE ON AGRICULTURE, NUTRITION & FORESTRY  
APRIL 10, 2003

Members of the Apple Processors Association (APA) are pleased to support USDA Child Nutrition programs by providing high-quality, affordable, 100% apple products for use in these programs. APA represents the producers of high-quality apple products made from the whole apple, such as 100% apple juice, sauce, and slices from fresh apples. APA member companies grow a significant proportion of the apples processed in their plants, and are committed to providing safe, high-quality, and affordable apple products to consumers. We urge the Senate Committee on Agriculture, Nutrition & Forestry (Committee) to include **processed fruits** in its references to fresh fruits and vegetables.

The *Dietary Guidelines for Americans* and the *Food Guide Pyramid* highlight the importance of fruits and vegetables of all types and forms for a balanced diet. The need to incorporate more fruits and vegetables into children's breakfasts and lunches should be the goal of schools, as well as parents. If these programs are authorized to provide incentives for serving nutritious meals, the Child Nutrition Programs can become tools to combat childhood obesity, and to promote policies that expand the availability of all types and forms of fruits and vegetables in child nutrition programs.

Since many schools lack the refrigeration necessary to store fresh fruits and vegetables, and since many children prefer the cooked/canned versions of fruits, such as applesauce and apple slices, we urge the Committee to include **processed fruits** whenever referring to fresh fruits and vegetables. For example, 100% fruit juices with Vitamin C also provide a healthy option for children. USDA and other research sources show that few children consume large amounts of fruit juice, and that high juice consumption is not correlated with increased body weight.

To assure that schools and student participants in the National School Lunch and Breakfast programs have access to more nutritious fruits and vegetables, APA urges the Senate to include the following policy recommendations in legislation to re-authorize the child nutrition programs:

**Help increase fruit and vegetable intake among school children**

- Provide \$10 million for grants to states or school districts for the *Healthy Foods for Healthy Kids Initiative* (for educational/promotional materials, salad/garden bars, pre-packaged salads and fruit cups, innovative vending options, and other creative ways to help schools to provide and encourage children to consume more fruits and vegetables).
- Expand the *Fruit and Vegetable Pilot Program* to a national program.
- Support the Administration's *HealthierUS* school demonstration projects with incentives that can be used for promotion of fruits and vegetables and healthful food options in vending machines, school canteens, and a la carte menu service.

**Establish a coordinated approach to fruit and vegetable initiatives to meet the Dietary Guidelines and Healthy People 2010 objectives**

- Urge USDA's Food and Nutrition Service (FNS) to appoint or identify a *5-A-Day* liaison at the national level and in each of the seven regional offices to coordinate and expand USDA efforts to promote fruit and vegetable intake.
- Provide FNS with authority to enter into financial partnership with business and private non-profit entities to develop and implement *5-A-Day* promotional initiatives.

Re-authorization of the Child Nutrition Programs provides an opportunity to improve the health and well-being of America's children. Congress should continue to support programs that encourage consumption of a variety of fruits and vegetables in the Child Nutrition Programs. APA will support these efforts by continuing to provide affordable and nutritious apple products to schools, after-school programs, summer food programs, and child care centers. We look forward to working with Congress and USDA to support healthful dietary choices in the nation's Child Nutrition Programs.

Paul S. Weller, Jr., President  
Apple Processors Association  
1629 K Street, N.W.  
Suite 1100  
Washington, D.C. 20006  
202/785-6715  
202/331-4212 FAX  
[pweller@agriwashington.org](mailto:pweller@agriwashington.org)

**Statement of Wenonah Hauter, Director  
Public Citizen's Critical Mass Energy and Environment Program  
Submitted to the Senate Committee on Agriculture, Nutrition and  
Forestry**

**Reauthorization of Child Nutrition Act**

**Submitted April 30, 2003**

I would like to thank the committee for permitting me to submit this statement on this very important issue. Public Citizen is a consumer organization founded by Ralph Nader in 1971. We represent some 150,000 members. Among the issues on which our organization works is food safety.

I would like to focus my comments on a provision contained in the Farm Security and Rural Development Act of 2002 (the Farm Bill) that has a direct impact on the Child Nutrition Act. That provision is Section 4201 (I) – “Use of Approved Food Safety Technology.”<sup>1</sup>

On its face, Section 4201 (I) seems fairly innocuous. However, the provision was written in such a way as to disguise its real intent – to introduce irradiation in the various nutrition programs the United States Department of Agriculture (USDA) administers.

At the present time, there is an express prohibition against the use of irradiation as an intervention for ground beef that is purchased by the USDA for the National School Lunch Program.<sup>2</sup>

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<sup>1</sup> (I) USE OF APPROVED FOOD SAFETY TECHNOLOGY.—  
(1) IN GENERAL.—In acquiring commodities for distribution through a program specified in paragraph (2), the Secretary shall not prohibit the use of any technology to improve food safety that—  
(A) has been approved by the Secretary; or  
(B) has been approved or is otherwise allowed by the Secretary of Health and Human Services.  
(2) PROGRAMS.—A program referred to in paragraph (1) is a program authorized under—  
(A) this Act;  
(B) the Food Stamp Act of 1977 (7 U.S.C. 2011 et seq.);  
(C) the Emergency Food Assistance Act of 1983 (7 U.S.C. 7501 et seq.);  
(D) the Richard B. Russell National School Lunch Act (42 U.S.C. 1751 et seq.); or  
(E) the Child Nutrition Act of 1966 (42 U.S.C. 1771 et seq.).

<sup>2</sup> United States Department of Agriculture, Agricultural Marketing Service, Livestock and Seed Program, “Technical Data Supplement (TDS) for the Procurement of Frozen Ground Beef Items, TDS-136 – June 2000 – Modified June 2002,” p. 2.

We believe that the prohibition should remain in effect and that the Committee should include that prohibition in the legislation it writes this year as it re-authorizes the Child Nutrition Act.

I make this request for a number of reasons.

**1. Section 4201 (l) of Farm Bill was not subject to Congressional hearings or floor debate.**

Section 4201 (l) of the Farm Security and Rural Development Act of 2002 (Farm Bill) – “Use of Approved Food Safety Technology”— was a veiled effort to instruct the Secretary of Agriculture to compel the irradiation of commodities purchased for the Child Nutrition Act programs (e.g., National School Lunch, National Breakfast and After-School Snacks Programs). The provision was added at the last-minute as part of a 400-page manager’s amendment during the Senate’s consideration of the Farm Bill on February 13, 2003. There were no committee hearings on the provision, nor any floor debate.

The provision did not receive any discussion during the Farm Bill Conference Committee deliberations, nor did it receive any debate during final passage of the Conference Report.

**2. There is no provision to provide for parental notification if irradiated foods are served.**

While current regulations require that irradiated food that is purchased at grocery stores be labeled as such, there is no requirement that consumers who purchase meals that have been prepared with irradiated ingredients be informed. Consequently, there is no obligation for school food service personnel to inform students that they are being served irradiated foods, and there is no mechanism in place for parents to know in advance that their children would be eating school lunches that have been prepared with irradiated food.

**3. There has not been enough research conducted to determine the safety of eating irradiated food over an extended period of time.**

We, at Public Citizen, have been conducting comprehensive research into this issue. While there are those who contend that irradiation and the chemical by-products it produces in foods are safe, there is ample research that raises serious questions about such claims. Among the problems that have surfaced in laboratory animals that have been fed irradiated food or chemicals that were produced when food was irradiated are:

- Premature death;
- Mutations;
- Fetal death and other reproductive problems;

- Immune system dysfunction;
- Fatal internal bleeding;
- The formation of rare forms of cancer;
- Organ damage;
- Blood disorders;
- Tumor formation;
- Nutritional deficiencies;
- Stunted growth.<sup>3</sup>

In addition, there has been recent research that indicates that irradiation in ground beef can cause the levels of harmful trans-fatty acids to double.<sup>4</sup>

#### **4. There is little research on the effects of consuming irradiated food on children.**

There is even less research into the long-term health effects experienced by children who are exposed to toxic chemicals in foods. Dr. William Au, a toxicologist at the Department of Preventive Medicine and Community Health, University of Texas Medical Branch in Galveston, has argued that the lack of understanding regarding the ill effects suffered by children who consume toxic chemicals in foods extends to the toxicological risk with respect to eating irradiated food.<sup>5</sup>

As one consumer advocate has stated: "There is nowhere on the face of the earth where there is any population that has consumed large amounts of any irradiated food over an extended period of time," said Carol Tucker Foreman (Consumer Federation of America's Food Policy Institute director). "I think it comes close to using the nation's schoolchildren as guinea pigs."<sup>6</sup>

Another consideration is the fact that it will be economically-disadvantaged children who will be forced to eat irradiated food in the National School Lunch Program, with those families who can afford to provide their children their own meals being able to opt-out and avoid irradiated food.

#### **5. The public is overwhelmingly opposed to including irradiated food in the National School Lunch Program.**

On November 22, 2002, the USDA announced that it would solicit comments from

<sup>3</sup> Public Citizen, "Questioning Food Irradiation: A History of Research into the Safety of Irradiated Foods," April 2003 (see <http://www.citizen.org/documents/questioningirradiation.pdf>).

<sup>4</sup> Brito, Marion S., et. Al., "Effects of Irradiation on Trans Fatty Acids Formation in Ground Beef," *Radiation Physics and Chemistry* 63 (2002), pp. 337-340 (see <http://www.citizen.org/documents/transfattyacid.pdf>).

<sup>5</sup> <http://www.citizen.org/documents/williamauaffidavit.pdf>

<sup>6</sup> *Baltimore Sun*, "Irradiated Meat in School Lunches Raises Fears: Some Parents Worried about Long-Term Health Effects," April 20, 2003 (see <http://www.sunspot.net/news/printedition/bal-te.lunchmeat20apr20.storv>).

the public on the implementation of Section 4201 (l) of the Farm Bill. Of the comments posted on the USDA website on this subject so far (April 30, 2003), by over an 8 to 1 margin, citizens have expressed their opposition to implementing this provision of the Farm Bill – with thousands of comments still left to be posted. Comments opposing such action have come from nearly all fifty states, while those supporting the technology have come from those who have direct ties to the irradiation industry.<sup>7</sup>

**6. Irradiation of food for the Child Nutrition Act programs is a government bailout for a struggling industry.**

While irradiated meat is being sold in some grocery stores, it appears that it is not gaining consumer acceptance. Grocery analyst Phil Lempert recently stated that sales of irradiated meat were still sluggish.<sup>8</sup> Anecdotal evidence indicates that some stores that had been carrying the product have stopped doing so. Introducing irradiated food into the National School Lunch Program could be a big economic boon to an industry that has had difficulty in gaining consumer acceptance of its products in the marketplace.

I urge the Committee to consider provisions for the Child Nutrition Act that would continue the prohibition against using irradiated food for the programs this Act encompasses. There are still too many unanswered questions regarding the safety of irradiation. The Child Nutrition Act, and school cafeterias, are the wrong place for experimentation.

Thank you for your consideration.

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<sup>7</sup> see <http://www.ams.usda.gov/fst/comments18.htm>.

<sup>8</sup> Lee, Thomas, "Schnucks is First in the Area to Offer Irradiated Meat, *St. Louis Post-Dispatch*, January 13, 2003.



**Society for Nutrition Education**  
9202 N. Meridian Street  
Suite 200  
Indianapolis, IN 46260  
[www.sne.org](http://www.sne.org)

April 10, 2002

Chairman Thad Cochran  
Senate Agriculture Committee  
328A Russell Senate Office Building  
Washington, D.C. 20510

Dear Chairman Cochran:

With the reauthorization of the child nutrition programs this year, the Senate Agriculture Committee and the Congress have a unique opportunity to ensure that millions of children in this country, particularly low income children, have improved access to nutritious food in school (through breakfast and lunch programs), during out-of-school time (in after-school and summer programs), in preschool child care, and at home. Studies show that healthy eating habits help to prevent childhood obesity and other nutrition-related diseases. The child nutrition programs already present opportunities for positive role modeling of healthy and nutritious meals, from birth through the teen years. We would like for Congress to build on these successes.

The Society for Nutrition Education (SNE) welcomes the opportunity to share with you and your staff our recommendations to strengthen the federal child nutrition programs, particularly as it relates to nutrition education. SNE represents the unique professional interests of nutrition educators across the United States. Our organization is dedicated to promoting healthy, sustainable food choices and has a vision of healthy people in healthy communities. Members of SNE educate individuals, families, fellow professionals, and students about nutrition, food, and health.

Outlined below are SNE's eight child nutrition education priorities:

1. Enhance and strengthen child nutrition education, promotion and environmental efforts by adding a state-level infrastructure and networking component to the U.S. Department of Agriculture's (USDA) Team Nutrition program.
2. Increase funding for nutrition education and promotion efforts to a total of \$50 million.
3. Provide expanded authority and funds to USDA in order to fully cover all food and beverages sales and enforce regulations on school campuses throughout the school day for schools that participate in the National School Lunch or School Breakfast Program.

4. Promote initiatives, such as 5 A Day, that would help increase all types of fruit and vegetable intake among child nutrition program participants.
5. Require USDA to conduct regular and periodic reviews (at least every five years) of the Women, Infants and Children (WIC) food package to assure that the food packages are consistent with health and nutrition recommendations as well as nutrition education and promotion efforts.
6. Support full funding for the WIC program to reach all nutritionally-at risk eligible women and children with nutrition services and supplemental foods.
7. Maintain the nutrition and health mission of WIC. Increase the Nutrition Services and Administration funding to assure quality nutrition education services. Provide adequate funding to accompany additional related administrative and client service requirements, such as substance abuse, education, immunization, screening, etc.
8. Support the WIC Farmer's Market Nutrition Program reauthorization and secure independent funding stream by decoupling from the WIC caseload funding mechanism.

We request that SNE's recommendations located in the attached policy platform paper be included in the record for the April 3, 2003 Senate hearing that continued the review of child nutrition programs (including WIC).

We look forward to working with you on the Committee's number one legislative priority, the reauthorization of the Child Nutrition Act, to strengthen and safeguard our nation's children's health and well-being. If you have any questions regarding our position paper, feel free to contact Karen Ensle ([ensle@aesop.rutgers.edu](mailto:ensle@aesop.rutgers.edu)), Chair, Advisory Committee on Public Policy or Christine McCullum ([Christine.McCullum@uth.tmc.edu](mailto:Christine.McCullum@uth.tmc.edu)), Co-Chair Advisory Committee on Public Policy for our association.

Sincerely,

Kathy McMahon  
President  
Society for Nutrition Education

Jane Voichick  
President-Elect  
Society for Nutrition Education

Enclosure





**SOCIETY FOR NUTRITION EDUCATION (SNE)  
Platform / Policy Statement on the  
Federal Child Nutrition Reauthorization of 2003**

**Issue:**

The 108<sup>th</sup> Congress will begin to consider the reauthorization of the *Richard B. Russell National School Lunch Act* and the *Child Nutrition Act of 1966*. This reauthorization process presents a range of opportunities for Congress to consider achieving pressing national goals and helping children reach their fullest potential. SNE urges Congress to reauthorize those programs that expire in 2003 (Special Supplemental Nutrition Program for Women, Infants and Children-WIC, Commodity Distribution, State Administrative Expense, the National Food Service Management Institute, Summer Food Service Program) and proposes a number of recommendations for consideration in the permanently authorized Child and Adult Care Food Program, National School Lunch and Breakfast Programs.

The Society for Nutrition Education (SNE) represents the unique professional interests of nutrition educators in the United States and worldwide. SNE is dedicated to promoting healthy, sustainable food choices and has a vision of healthy people in healthy communities. SNE provides forums for sharing innovative strategies for nutrition education, expressing a range of views on important issues, and disseminating research findings. Members of SNE educate individuals, families, fellow professionals, and students, and influence policy makers about nutrition, food, and health. SNE recognizes that the overall school environment is important and we support efforts to promote physical activity and education, reduce behavior risk factors, promote safety of our food supply and food access while this paper will only address the nutrition component.

SNE will continue to work to strengthen the federal child nutrition programs through the integration of nutrition education and promotion efforts into these important programs. We believe that increased funding is needed to expand and coordinate nutrition education and promotion efforts at the federal, state and local levels to ensure healthy eating behaviors and that nutrition education and promotion efforts should be included in all of the child nutrition programs including the National School Lunch and Breakfast Programs the Child and Adult Care Food Program and Summer Food Service Program.

In addition to nutrition education and promotion, SNE firmly believes that this reauthorization effort should provide the Secretary of Agriculture with the authority to regulate food sales anywhere on campus throughout the school day. A healthy school

environment, including an environment that allows students to make a variety of healthful food and beverage choices, must go hand in hand with nutrition education and promotion efforts if the goal of optimum health is to be realized.

In addition, full funding for the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a critical step in helping assure a healthy start for this country's most vulnerable.

**SNE's Priorities for Child Nutrition Reauthorization:**

As the U.S. Congress works toward reauthorization of the key child nutrition programs, SNE supports the following provisions related to nutrition education and promotion:

- Enhance and strengthen child nutrition education, promotion and environmental efforts by adding a state-level infrastructure and networking component to the USDA Team Nutrition program. Such an effort should address all of the child nutrition programs including school lunch and breakfast, child care, summer feeding.
- Increase funding for nutrition education and promotion efforts to a total of \$50 million. This includes new funding for the expansion of Team Nutrition to include the essential state infrastructure and network component - dedicated staff to promote nutrition education throughout all child nutrition programs - at \$40 million as well as maintenance of the current level of funding for other Team Nutrition program components of \$10 million for a total of \$50 million. Assure that such networks seek out existing networks for complementary actions.
- SNE applauds the positive efforts occurring in many states and local communities across the country to promote healthier school environments and will continue to work and encourage continued progress in this area. In addition to these efforts, SNE recommends that USDA be provided expanded authority and funds to more fully cover all food and beverages sales and enforce regulations anywhere on school campuses throughout the school day for schools that participate in the National School Lunch or School Breakfast Program. Such regulations should not preempt states or school districts from establishing stronger requirements.
- Promote initiatives, such as 5 A Day, that help increase all types of fruit and vegetable intake among child nutrition program participants. Such initiatives could include farmers markets, farm to school programs, salad and garden bars, prepackaged salads, salad and fruit cups, innovations in vending and other creative ways to market and promote all fruits and vegetables.
- Require USDA to conduct regular and periodic reviews (at least every five years) of the WIC food package to assure that the food packages are consistent with health and nutrition recommendations as well as nutrition education and

promotion efforts. Food package reviews should also consider cultural/ethnic food preferences.

- Support full funding for the WIC program to reach all nutritionally-at risk eligible women and children with nutrition services and supplemental foods.
- Maintain the nutrition and health mission of WIC. Increase the Nutrition Services and Administration funding to assure quality nutrition education services. Provide adequate funding to accompany additional related administrative and client service requirements, such as substance abuse, education, immunization, screening, etc.
- Support the WIC Farmer's Market Nutrition Program reauthorization and secure independent funding stream by decoupling from the WIC caseload funding mechanism.

**Background:** Congress will consider a series of federal child nutrition programs for reauthorization in 2003. These are authorizations ONLY, not appropriations. The last time Congress reauthorized child nutrition programs was in 1998 when they enacted the **William F. Goodling Child Nutrition and WIC Reauthorization Act of 1998**.

The 1998 reauthorization consisted of some of the following key provisions:

- Reauthorized the Summer Food Program and the Special Supplemental Nutrition Program for Women, Infants and Children (WIC);
- Added 13-18 year old children to the group eligible for food in after-school programs run by schools or non-profits;
- Made it easier for non-profit groups to run summer food programs, authorized a set of research pilot efforts to draw more children into the School Breakfast Program, and made other improvements; and,
- Provided more flexibility in disseminating nutrition education materials in the WIC program.

#### **Background Information to Support SNE Key Recommendations**

##### *Nutrition Education*

The Nutrition Education and Training (NET) program, initiated in 1977, provided direct nutrition education benefits to children rather than food or funds to purchase food, and serves all children, not just those at economic and/or nutritional risk. Moreover, NET was the primary distribution arm for implementing nutrition education projects and programs to the state and local level developed at the federal level. NET funding, became problematic in 1996 when the program's status was changed from entitlement to discretionary as part of welfare reform. Since then, the program has been authorized at 50-cents-per enrolled child, and funds to carry out the program have not been appropriated since 1998. Unfortunately, funding for NET was dropped in 1999.

Another USDA program, Team Nutrition, is designed to be an integrated, behavior-based program for promoting the nutritional health of children. The goal of Team Nutrition is to improve children's lifelong eating and physical activity habits through a national approach with consistent nutrition messages based on the principles of the *Dietary Guidelines for Americans* and the Food Guide Pyramid. It provides multiple communication channels, including classroom activities, food service initiatives, school-wide events, home activities, community programs and events, media events and coverage, and a state-based competitive grant program.

SNE believes the Team Nutrition program should remain the cornerstone of the USDA's Food Nutrition Service child nutrition promotion and education efforts. Team Nutrition should be enhanced to include an essential state-level infrastructure and network component that will allow for better dissemination, sustainability, and utilization of Team Nutrition materials and initiatives. Such an infrastructure and network is critical to Team Nutrition's effectiveness and implementation and will help to fill the void left when the NET program funding was discontinued. SNE further recommends that state nutrition education and program network coordinators should be dedicated to promoting nutrition education throughout the various child nutrition programs.

#### *Healthy School Environments*

Dramatic changes have taken place in the school nutrition environment where students now have wide access to foods of low nutritional value and high fat/calorie foods through vending machines, snack bars and a la carte lines. Given the epidemic rate of child obesity these changes are disturbing. Currently, USDA has limited authority to regulate foods sold as a la carte or sold out of vending machines in the school cafeteria and other eating areas, and has no authority outside those areas. Meals served as part of the reimbursable school breakfast and lunch programs must comply with the Dietary Guidelines, however, access to a wide variety of less nutritious foods and beverages interferes with a student's ability to make healthful food and beverage choices. USDA's Changing the Scene kit promotes the need for environmental changes that foster the overall health and well being of students. In addition, HHS Centers for Disease Control and Prevention and the National Association of State Boards of Education have each developed resources that share this concern and promote local level development of policies in the school setting. Numerous efforts across the country by state and local school agencies and districts that promote more healthful food and beverage selections are underway. However, providing USDA the authority to regulate all foods and beverages sold on school campuses would have a far greater impact on improving food and beverage selections for all 50 million school children across the country.

#### *WIC*

The Special Supplemental Food Program for Women, Infants and Children (WIC) has a proven track record of improving health outcomes in infants and children. WIC does work – studies have shown that WIC participation increases birth weight, reduces low birth weight and preterm births and reduces Medicare costs. For every dollar spent on pregnant women in WIC, there was a cost savings of between \$1.92 to \$4.21 in Medicaid costs.

While the program currently serves over 7.5 million women, infants and children – that is nearly half of all America's infants and one in four children between 1 and 5 years of age, over one in ten WIC eligible women and children are unable to receive WIC services. Funding constraints, infrastructure limitations and other program issues have compromised the ability to reach all of those eligible for WIC. Full funding for the WIC program is an essential step in assuring that this country's most vulnerable have access to essential medical and nutrition services and healthful foods and beverages to help assure long-term health.

The WIC Farmers Market Nutrition Program (FMNP), established in 1992, provides fresh, nutritious, unprepared foods (such as fruits and vegetables) from farmers' markets to women, infants and children who are nutritionally at risk. It also helps to expand the awareness and use of farmers' markets by consumers. WIC FMNP funds are provided through a legislatively mandated set-aside in the WIC program appropriation. FMNP funds often compete with the overall WIC appropriations, resulting in an inconsistent funding stream for FMNP. SNE recommends decoupling WIC funding for the FMNP from contingency on the WIC caseload. This would strengthen both programs by eliminating the competition between the programs for funds. Such as action would also stabilize the FMNP by allowing for consistent and predictable resources, and thereby increase access to fresh, nutritious produce for WIC clients, a key component to behavior change.

*Adopted April 2, 2003 by the SNE Board of Directors*

***For further information contact:***

Karen Ensle ([ensle@aesop.rutgers.edu](mailto:ensle@aesop.rutgers.edu)), Chair, Advisory Committee on Public Policy or  
Christine McCullum ([Christine.McCullum@uth.tmc.edu](mailto:Christine.McCullum@uth.tmc.edu)), Co-Chair Advisory Committee  
on Public Policy, Society for Nutrition Education

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120 South Riverside Plaza, Suite 2000  
 Chicago, IL 60606-6995  
 800/877-1600  
[www.eatright.org](http://www.eatright.org)

Policy Initiatives and Advocacy  
 1120 Connecticut Avenue, Suite 480  
 Washington, DC 20036-3989  
 202/775-8277 FAX 202/775-8284

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**STATEMENT SUBMITTED BY  
 THE AMERICAN DIETETIC ASSOCIATION  
 TO THE COMMITTEE ON AGRICULTURE, NUTRITION AND FORESTRY  
 UNITED STATES SENATE  
 FOR ITS HEARING ON CHILD AND ADULT CARE FOOD PROGRAM  
 AND WOMEN, INFANTS AND CHILDREN NUTRITION PROGRAM**

April 4, 2003

The American Dietetic Association (ADA) submits this statement and commends the committee for its efforts on the reauthorization of the 1966 Child Nutrition Act and the National School Lunch Act.

The ADA is the world's largest food and nutrition professional association. Now 85 years old, ADA is dedicated to serving the public through the promotion of optimal nutritional health and well-being. The work of the association and the services of its nearly 70,000 members are based on rigorous academic instruction, supervised practice and continuing education relying on peer-reviewed nutrition research and resources representing significant scientific consensus. In addition, one in six of ADA's members are employed in school food service and/or public health settings.

Funding for government programs is limited, and that requires difficult choices. ADA urges the committee not to consider the choice as deciding between the provision of food to hungry people and nutrition education. When the objective is to assure the health of the American public, access to safe, nutritious food and nutrition education go hand-in-hand.

**CACFP**

**Nutrition education should be an integral part of CACFP.** There is a pressing need for U.S. children to achieve eating and physical activity patterns that will enable them to attain healthful weights and prevent long-term health problems. Childhood adiposity, in and of itself, has been shown to influence adult mortality and morbidity (1,2). In addition, children who are overweight are more likely than normal-weight children to become obese adults (3), which carries with it a lifetime risk of coronary heart disease, hypertension, type 2 diabetes mellitus, gallbladder disease, osteoarthritis and some cancers (4,5). Children who are overweight also often experience psychological stress, poor body image and low self-esteem (6,7).

During the past decade, the number of children who are overweight has more than doubled. Approximately 11 percent of American children are overweight and an additional 14 percent have a body mass index between the 85th and 95th percentiles, which puts them at increased risk for becoming overweight (8). Thus, overweight is currently a much more prevalent condition among US children, including low-income children, than underweight and growth retardation (9,10).

In the face of this change, dietary guidance for U.S. children has broadened from its earlier focus on nutrient underconsumption and deficiency to now address nutrient overconsumption and inadequate physical activity patterns and to encourage behaviors that promote optimal health. Practiced over a lifetime, positive behaviors can help prevent many chronic diseases.

While many children regularly consume more calories than they will expend, most U.S. children do not meet the Food Guide Pyramid recommendations, especially for the fruit, grain, and dairy groups (11). In addition, the majority of children living in the United States exceed the Dietary Guidelines for Americans for total and saturated fat intake (12).

The dietary guidelines were designed to set achievable nutrition goals for all Americans over the age of 2 years. The strategies one uses to achieve those guidelines should reflect age, gender, ethnic and regional differences in food consumption patterns. The best known tool for helping the U.S. public meet the U.S. Dietary Guidelines is the Food Guide Pyramid which can be understood by all segments of the population and applied in ways to allow for food preferences and differences in food choices. The U.S. Dietary Guidelines stress the importance of variety, moderation and balance in food choices.

Data document the positive impact of educational efforts on promoting the U.S. Dietary Guidelines in children in a general population without compromising their nutritional status (13). In fact, data from the Child and Adolescent Study for Cardiovascular Health showed that vitamin and nutrient density in the diet increased with decreasing fat intake because of nutrition education (13).

In addition to providing sound nutrition messages, there is a need to incorporate behavioral strategies that build on enhancing self-efficacy and self-esteem in children. Children need to develop the confidence that they can successfully make changes in their eating and physical activity patterns. There is an ongoing need for nutrition intervention and education for the U.S. pediatric population (14), and dietetics professionals have the training and skills to meet these needs.

**The meal pattern for fat, sugar, portion sizes and appropriateness of foods needs to be improved.** U.S. children are consuming at least as many calories as in the past, and many are consuming many calories more than they need to grow properly (15-17). The percentage of intake from protein and carbohydrate has increased. In contrast, the percentage of energy intake from total fat has decreased from 38 percent to 33 percent and the percentage of energy intake from saturated fat has decreased from 16 percent to 11 percent. However, this can be attributed to the overall increase in energy intake and increased body weights.

**Food packages should be flexible to address cultural food practices and choices and participants' nutrition needs, and be consistent with national nutrition guidelines.** Every child should be presented with meals and snacks that enable them to learn about and to practice dietary habits that allow them to eat a variety of nutritious foods, maintain healthy weight, choose plenty of fruit and vegetables and grain products, avoid excessive fat and sodium, and use sugars only in moderation.

**All children in child-care settings should be served food that is stored, prepared, and presented in a safe and sanitary manner.** It is important that good institutional food management practices be implemented to protect the health and safety of children. Child-care programs must comply with local and state regulations related to wholesomeness of food, food preparation facilities, food safety, and sanitation. Compliance with regulations that help to establish and maintain a safe, sanitary, wholesome environment in which children can learn about and practice good eating habits should be a priority in every child-care program. The foodservice staff of child-care facilities needs to assess the safety and quality of their total foodservice operation daily using the recommendations of Hazard Analysis and Critical Control Point (HACCP)—more specifically, each program should have written standard operating procedures, staff and manager food safety training, recognized food safety certification

(jurisdiction dependent), third party review, ambient temperature monitoring, and should be buying from an approved vendor, and monitoring internal cooking and holding temperatures.

**WIC**

**ADA supports the recommendations of the National WIC Association.** Many National WIC Association members also are members of ADA. We both share the same goals for WIC and its beneficiaries – that is, to provide quality nutrition services and increase the nutritional status and therefore the health and well-being of WIC participants. The NWA's recommendations are fully compatible with ADA's goals and principles and thus we urge consideration of them as excellent next steps for the program.

In summary, ADA understands that funding for government nutrition programs is limited, and that difficult choices are being made between funding for the provision of food to hungry people and nutrition education. We must reemphasize, however, that access to food that is safe, nutritious and served in appropriate portions and nutrition education go hand in hand if the goal of optimum health is to be realized. Thank you for the opportunity to present these views.



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**QUESTION AND ANSWER**

APRIL 3, 2003

Sen. Harkin

1) Since 1990, there have been more than 100 reported outbreaks of food-borne illness in our schools affecting thousands of children, often with long-term health consequences. About 17 percent of the food served in schools is donated by the federal government and undergoes stringent USDA food-safety standards, including increased inspections and tougher pathogen testing. Yet the remaining 83 percent of food consumed at schools is not subjected to these tougher standards.

In 2002, the General Accounting Office recommended USDA provide local school authorities with information and guidance on incorporating these more stringent safety provisions in their procurement contracts.

To what extent has GAO's recommendations on extending these purchasing practices to schools been implemented?

What would be the health benefits of incorporating USDA's donated commodity standards into local schools' food-purchasing contracts?

Would schools benefit from preparing monthly plans addressing the risks and general safety guidelines in preparing food for the school lunch program?

What other methods could be employed to ensure that schools are purchasing and preparing the safest foods possible for the school lunch program?

2) Currently, recalls of unsafe food in the school lunch program is performed on a voluntary basis. Complicating such recalls is the fact that schools often do not know the identity of the producers and processors who supply food to them, due to a complicated chain of manufacturers, distributors and brokers that deal with schools.

How important is it for schools to immediately identify and isolate contaminated food that is subject to recall?

Why should schools not have access to the identity and contact information of all food manufacturers and producers who supply them with food?

Why should recalls of contaminated food served in the school lunch program not be made mandatory if a voluntary recall effort fails?

3) Contaminated foods that give healthy adults a stomachache can be deadly to young children. Therefore, the safety of school meals is a critical issue. In 2002, the GAO urged USDA to consider giving schools access to records from USDA's and FDA's inspections of prospective school food suppliers.

Have you followed up on this GAO recommendation? If so, what were your findings?

Wouldn't school officials be able to make better purchasing decisions if they had access to this data?

What barriers (legal or otherwise) are preventing USDA from implementing this recommendation?

Senator Patrick Leahy  
Questions for Witnesses  
April 3, 2003

**PANEL I**

Questions for Under Secretary Eric Bost, USDA Food and Nutrition Services:

1. You have testified that the Administration supports providing a financial incentive to schools that design a “*HealthierUS*” nutrition program. Specifically what kind of financial incentives does the Administration have in mind? For instance, would you support an increase in the per-meal reimbursements for schools that participate? If so, how much?
2. In order to improve the health of the entire school environment, we must address more than just the federal school meal programs. I agree with your statement that the federal government must work in concert with parents and communities who actively take responsibility for ensuring that their school environment supports healthy food and lifestyle lessons for their children. Nonetheless, the federal government will invest more than \$8 billion in school meal programs this year alone, and spends countless more in the Medicaid and Medicare programs to treat and manage illness and disease resulting from overweight and obesity. To protect that investment, and to prevent the need for such health care spending in the long run, shouldn’t we set guidelines about what is sold on school campuses when school is in session? We certainly don’t sell cigarettes on school campuses or allow children to smoke. And we know that health care costs and lost productivity related to poor diet and inadequate exercise are higher than the cost of tobacco related illness. Isn’t it reasonable for the federal government to lead by example and regulate the sale, and especially the donation, of less nutritious foods in schools?
3. You have testified that the Administration supports expanded funding for the delivery of nutrition education messages and materials in schools. What funding mechanism does the Administration have in mind for this and how much do you support providing? Would the Administration support shoring up the successful TEAM Nutrition program by funding a nutrition education infrastructure that would allow for nutrition education coordinators in each state, such as the current NET program?
4. In your testimony on addressing the accuracy of certifications in the National School Lunch program you state that the Administration’s proposal, “...offers a substantial response to the certification accuracy problem without jeopardizing children’s eligibility...”, and that the Administration is committed to investing any savings that result from the proposal back into the programs. This is certainly encouraging. What does the Administration estimate to be the cost savings from this proposal and what are your estimates for the number of eligible kids that may lose their benefits? Parts of the proposal also appear to cost money – how much does the Administration estimate it will cost to implement this proposal?

**PANEL II**

Questions for Mr. James Weill, FRAC (Food Research and Action Center):

1. In your testimony you discuss the need for extending eligibility for the CACFP program to homeless children up to the age of 18. Homeless children are clearly the most vulnerable of our citizens. Can you elaborate on what enactment of this proposal would mean for families across the country, and how many more young people do you estimate would be served by making this change?

**PANEL III**

Question for Ms. Jill Leppert, National WIC Association:

1. You state in your testimony that you wish to work with Congress and USDA to protect the competitive bidding requirement for infant formula that has been so successful in the WIC program. What efforts are you aware of are being made that could potentially undermine this requirement and if those efforts were successful, what would be the impact on the WIC program?

Question for Ms. Anne Curry, Food Marketing Institute:

1. You stated in your testimony that infant formula theft is a problem for retailers and a potential health risk for infants. Could you elaborate on this issue for me, particularly as to the extent of the problem and your recommendations for solving it?

Question for Ms. Karen Caplan, United Fresh Fruit and Vegetable Association:

1. It is absolutely essential that kids have healthy food options in schools, and we must ensure that fresh fruits and vegetables are a part of every child's diet both in and out of school. We heard testimony in our last hearing on these programs that children participating the fruit and vegetable pilot program created in last year's farm bill often would have been introduced to the particular food that they were served for the very first time as a result of the program, and I hear all the time about the expanded knowledge of healthy fruits and vegetables that women and children gain from participating in the Farmers' Market Nutrition program. We clearly need to do more to help children and families learn about fruits and vegetables – to learn what kinds there are, how to prepare them, and how they are grown. One way to do this is to encourage partnerships between schools and local farms to provide fresh local produce in the school meal programs, along with the knowledge of where that food comes from and how it is grown. Does the United Fresh Fruit and Vegetable Association support the concept of farm to cafeteria projects and what if any has been your experience with this concept?

Question for Mr. Rod Hofstedt, National Child and Adult Care Food Program Forum

1. Availability of quality child care in America is scarce. This year Congress will consider ways to improve access to child care overall, and to improve the quality of care each child receives. From your testimony it is clear that the child care feeding programs should be a vital part of any effort to improve child care quality and access. If the area eligibility rates for the program are changed from 50 percent to 40 percent as you have proposed, how many more child care homes do you estimate would participate in the program, and how many more children do you estimate would be served, particularly in rural areas?

Questions for Mr. Don Wambles, WIC Farmers' Market Association:

1. We have heard other testimony today that decoupling the funding of the WIC program and the Farmers' Market Nutrition programs would provide greater stability to both programs. Does the National Farmers' Market Association agree with that assessment and do you support such a proposal?

2. You have said that the state match rate is making it difficult for the Farmers' Market Nutrition programs to expand. What sort of growth would you expect to see if the match rate were limited to, as you said in your testimony, administrative expenses? What would that mean for the number of women and children served?