

# The National WIC Association's Position on the Role of Infant Formula in Supplemental Nutrition Program for Women, Infants and Children

#### Introduction

The mission of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is to safeguard the health of low-income women, infants and children up to age 5 who are at nutrition risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care. The United States Department of Agriculture Food and Nutrition Service (USDA/FNS) has made breastfeeding a priority and strongly encourages WIC mothers to breastfeed their infants except for medical considerations.<sup>1</sup>



The National WIC Association (NWA) is the non-profit education arm and advocacy voice of WIC, the over 6.3 million mothers and young children served by WIC and the 12,000 service provider agencies who are the front lines of WIC's public health nutrition services for the nation's nutritionally at-risk mothers and young children. NWA's efforts on behalf of WIC have been effective in gaining broad support for the program, including bipartisan support of the US Congress, successive Administrations, advocacy groups, the health care sector, religious organizations, and the business community.

NWA recognizes the life-long positive and impactful health outcomes associated with breastfeeding and has made breastfeeding promotion and support one of its core missions while respecting the parent's or the caregiver's infant feeding choice. The provision of supplemental iron-fortified infant formula serves as a safety net to partially breastfed and non-breastfed infants who may not otherwise have access to adequate nutrition.

#### This paper:

- Provides background on why WIC continues to provide iron-fortified infant formula
- >> The role of WIC in providing iron-fortified infant formula
- >> Describes ways WIC staff can support parents and caregivers who formula feed their infants

# Why WIC continues to Provide Iron-Fortified Infant Formula

At the start of the WIC Program in the early 1970s, few women chose to breastfeed and only 24% of mothers initiated breastfeeding in the hospital.<sup>2</sup> Bottle-fed babies were introduced to whole cow's milk by six months of age or earlier – a feeding practice that contributed to a high prevalence of anemia in infants and children.<sup>3</sup> To ensure that infants in WIC received proper nutrition for growth and development, the program adopted the recommendations of the American Academy of Pediatrics (AAP) by supplying iron-fortified infant formula to partially breastfed or non-breastfed infants under 12 months of age.<sup>4,5</sup>

As mandated by the Healthy Hunger-Free Kids Act of 2010, the WIC food package undergoes a comprehensive review every 10 years.<sup>6</sup> Revised for the first time in 2007, changes to the food package incentivized participants to breastfeed, thereby, resulting in an increase in breastfeeding initiation rates and a decrease in the rates of early introduction of solid foods. <sup>7,8,9,10,11</sup>

Charged with the most recent review of the WIC food package, the National Academies of Sciences, Engineering, and Medicine's (NASEM) Expert Committee published its recommendations in a 900+ page report in January 2017. Titled, *Review of the WIC Food Packages: Improving Balance and Choice: Final Report,* the committee proposed further incentivizing breastfeeding initiation and maintenance through additional food package changes and ongoing data collection and analysis while continuing to support the provision of iron-fortified infant formula to participants.<sup>12</sup>

## The Infant Feeding Decision

The 2020 USDA WIC Participant and Program Characteristics report showed that the proportion of breastfeeding women continued to exceed non-breastfeeding postpartum women, which was first observed in 2012.<sup>13</sup> There are still, however, known barriers that interfere with WIC's breastfeeding promotion efforts causing some women to choose formula feeding. Healthcare-related challenges such as inadequate and/or inappropriate breastfeeding support in hospitals, misconceptions about breastfeeding, inflexible employment and childcare options, as well as social norms and cultural beliefs all influence what women consider normal feeding practices. 14 In addition, WIC mothers identified a number of social, cultural, and structural barriers to breastfeeding including returning to work, lacking support from health care providers, as well as having family members and partners as deterrents to breastfeeding. 15 These barriers often prevent women from choosing to breastfeed or cause them to stop breastfeeding prematurely.



Achieving optimal growth and development in a nurturing environment and developing a foundation for healthy eating patterns are desired health outcomes for all WIC infants regardless of feeding method. In low-income households, a lack of access to iron-fortified infant formula may encourage early introduction of cow's milk or over-dilution of formula with water.<sup>16</sup> This bears particular relevance with the 2022 Abbott formula recall<sup>17</sup> where WIC agencies nationwide anecdotally reported participants choosing to switch their infants early from iron-fortified formula to cow's milk instead of switching formulas. These practices may result in inadequate nutrition, iron-deficiency anemia, and/or water intoxication.<sup>18,19</sup> The provision of iron-fortified infant formula through WIC provides a safety net for these families.

## The Role of WIC in Providing Iron-Fortified Infant Formula

In the US, unlike many other countries, infant formula manufacturers often provide conflicting and misleading infant feeding information to parents through a variety of marketing practices. <sup>20,21</sup> The role of WIC is to be the trusted source of infant nutrition information to help parents make informed decisions regarding breastfeeding, infant-formula feeding, use of bottles/open cups/sippy cups, introduction of complimentary foods and others. In building a committed partnership with WIC families WIC staff is in the position to provide the necessary support and guidance to enable success regardless of the feeding choice that the parents make.



## Recommendations: How WIC Staff Can Support Parents and Caregivers Who Feed Their Infants Formula

Parents and caregivers who feed formula to their infants deserve respect and must be provided information and guidance to safely deliver formula to their babies. Formula feeding parents and caregivers may feel shamed or judged for their choices, which are often outside of their control. WIC is in the unique position to support all parents and caregivers regardless of their feeding method. Because WIC staff are trained to offer participant-centered education to parents and caregivers, they should continue to educate them on:

- Formula storage and preparation.
- Paced bottle-feeding.
- Infant hunger and satiety cues and feeding behaviors.
- Healthy and nurturing feeding relationship, including ways to hold infants during feedings.

#### Conclusion

Achieving optimal growth and development in a nurturing environment and developing a foundation for healthy eating patterns are desired health outcomes for all WIC infants regardless of feeding method. In low-income households, a lack of access to infant formula may increase the early introduction of cow's milk or formula over-dilution with water. These practices may result in inadequate nutrition, iron-deficiency anemia, and/or water intoxication. It is the responsibility of WIC staff to respect the feeding choice made by the parents and caregivers and provide assistance and support accordingly.



<sup>1</sup>United States Department of Agriculture, Food and Nutrition Service (2019) Breastfeeding Is a Priority in the WIC Program. Accessed online: <a href="https://www.fns.usda.gov/wic/breastfeeding-priority-wic-program">https://www.fns.usda.gov/wic/breastfeeding-priority-wic-program</a>.

<sup>2</sup>Wolf JH (2003) Low Breastfeeding Rates and Public Health in the United States. American Journal of Public Health. Vol. 93 Issue 12, pp. 2000–2010.

<sup>3</sup>Fomon S (2001) Infant feeding in the 20th century: formula and beikost. Journal of Nutrition. Vol. 131 Issue 2, pp. 409S–420S.

<sup>4</sup>Kleinman RE, Greer FR (2013) Pediatric Nutrition, 7th Edition. Illinois: American Academy of Pediatrics.

<sup>5</sup>American Academy of Pediatrics (2020) Choosing an Infant Formula. Accessed online: <a href="https://www.healthychildren.org/English/ages-stages/baby/formula-feeding/Pages/Choosing-an-Infant-Formula.aspx?gl=1\*1ycpmry\*ga\*0DM5NDQ1NTc4LjE2MzE2NjMwMjM.\*gaFD9D3XZVQQ\*MTYzMTY2MzAy-Mi4xLjEuMTYzMTY2MzEwNi4w&ga=2.254799944.1538717021.1631663023-839445578.1631663023.

<sup>6</sup>Lincoln, Blanche D-AR (2010) Healthy, Hunger-Free Kids Act of 2010. Available online: <a href="https://www.congress.gov/bill/111th-congress/senate-bill/3307/text">https://www.congress.gov/bill/111th-congress/senate-bill/3307/text</a>.

7Institute of Medicine (2006) WIC Food Packages: Time for a Change. Washington, DC: The National Academies Press.

<sup>8</sup>United States Department of Agriculture, Food Nutrition Service (2014) Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revision in the WIC Food Packages: Final Rule. Federal Register Vol. 79, No.42. Available online: <a href="https://www.gpo.gov/fdsys/pkg/FR-2014-03-04/pdf/2014-04105.pdf">https://www.gpo.gov/fdsys/pkg/FR-2014-03-04/pdf/2014-04105.pdf</a>.

<sup>9</sup>Chiasson MA, Findley SE, Sekhobo JP, Scheinmann R, Edmunds LS, Faly AS, McLeod NJ (2013) Changing WIC changes what children eat. Obesity. Vol. 21 Issue 7, pp. 1423–1429.

<sup>10</sup>Whaley SE, Koleilat M, Whaley M, Gomez J, Meehan K, Saluja K (2012) Impact of policy changes on infant feeding decisions among low-income women participating in the Special Supplemental Nutrition Program for Women, Infants, and Children. American Journal of Public Health. Vol. 102 Issue 2, pp. 2269–2273.

<sup>11</sup>Guan A, Hamad R, Batra A, Bush N, Tylavsky F, LeWinn K (2021) The Revised WIC Food Package and Child Development: A Quasi-Experimental Study. Pediatrics. Vol 147 Issue 2. Accessed online: <a href="https://publications.aap.org/pediatrics/article/147/2/e20201853/77045/The-Revised-WIC-Food-Package-and-Child-Development">https://publications.aap.org/pediatrics/article/147/2/e20201853/77045/The-Revised-WIC-Food-Package-and-Child-Development</a>.

<sup>12</sup>National Academies of Sciences, Engineering and Medicine Committee to Review WIC Food Packages (2017) Review of WIC Food Packages: Improving Balance and Choice: Final Report. Available online: <a href="http://nationalacademies.org/hmd/reports/2017/review-of-wic-food-packages-improving-bal-ance-and-choice.aspx">http://nationalacademies.org/hmd/reports/2017/review-of-wic-food-packages-improving-bal-ance-and-choice.aspx</a>.

<sup>13</sup>United States Department of Agriculture, Food and Nutrition Service (2022) WIC Participant and Program Characteristics 2020 Final Report. Available online: <a href="https://www.fns.usda.gov/wic/participant-program-characteristics-2020">https://www.fns.usda.gov/wic/participant-program-characteristics-2020</a>

<sup>14</sup>United States Department of Health and Human Services (2011) The Surgeon General's Call to Action to Support Breastfeeding. Available online: <a href="https://www.surgeongeneral.gov/library/calls/breastfeeding/calltoactiontosupportbreastfeeding.pdf">https://www.surgeongeneral.gov/library/calls/breastfeeding.pdf</a>.

<sup>15</sup>National Academies of Sciences, Engineering, and Medicine (2016) Review of WIC Food Packages: Proposed Framework for Revisions: Interim Report. Available online: <a href="https://www.ncbi.nlm.nih.gov/books/NBK379063/#:~:text=A%20number%20of%20social%2C%20cultural,and%20lack%20of%20access%20to">https://www.ncbi.nlm.nih.gov/books/NBK379063/#:~:text=A%20number%20of%20social%2C%20cultural,and%20lack%20of%20access%20to</a>.

<sup>16</sup>Ellison R, Greer B, Burney J, Goodell S, Bower K, Nicklas J, Lou Z, Kavanagh K (2017) Observations and Conversations: Home Preparation of Infant Formula Among a Sample of Low-Income Mothers in the Southeastern US. Journal of Nutrition Education and Behavior. Vol 49 Issue 7. Available online: <a href="https://pubmed.ncbi.nlm.nih.gov/28689612/">https://pubmed.ncbi.nlm.nih.gov/28689612/</a>.

<sup>17</sup>Abbott (2022) Recall Notice: U.S./Puerto Rico. Accessed online: <a href="https://www.similacrecall.com/us/en/home.html?utm\_campaign=rcl-powder-recall-2022&utm\_medium=tag-referral&utm\_source=r-cl-similac-com&utm\_content=rcl-powder-recall-site-banner-click&utm\_term=20220217.</a>

<sup>18</sup>American Academy of Pediatrics, Healthy Children (2021) Why Formula Instead of Cow's Milk. Accessed online: <a href="https://www.healthychildren.org/English/ages-stages/baby/formula-feeding/Pages/Why-Formula-Instead-of-Cows-Milk.aspx">https://www.healthychildren.org/English/ages-stages/baby/formula-feeding/Pages/Why-Formula-Instead-of-Cows-Milk.aspx</a>.

<sup>19</sup>American Academy of Pediatrics, Healthy Children (2018) How to Safely Prepare Formula with Water. Accessed online: <a href="https://www.healthychildren.org/English/ages-stages/baby/formula-feeding/Pages/How-to-Safely-Prepare-Formula-with-Water.aspx?ga=2.40893602.187811365.1649778567-1130088413.1645561370&gl=1\*em5lut\*ga\*MTEzMDA40DQxMy4xNjQ1NTYxMzcw\*ga FD9D3XZ-VQQ\*MTY00Tc4MTQ1MS4yLjAuMTY00Tc4MTQ1MS4w.</a>

<sup>20</sup>Romo-Palafox M, Gershman H, Pomeranz J, Harris J (2019) Marketing claims on infant formula and toddler milk packages: What do caregivers think they mean? UConn Rudd Center for Food Policy & Obesity. Available online: <a href="https://uconnruddcenter.org/wp-content/uploads/sites/2909/2020/09/Infant-Formula-and-Toddler-Milk-Brief">https://uconnruddcenter.org/wp-content/uploads/sites/2909/2020/09/Infant-Formula-and-Toddler-Milk-Brief</a> 9-23-19.pdf.

<sup>21</sup>World Health Organization (2022) How the Marketing of Formula Milk Influences Our Decisions on Infant Feeding. Accessed online: <a href="https://www.who.int/teams/maternal-newborn-child-adoles-cent-health-and-ageing/formula-milk-industry">https://www.who.int/teams/maternal-newborn-child-adoles-cent-health-and-ageing/formula-milk-industry</a>.

<sup>22</sup>American Academy of Pediatrics, Healthy Children (2021) Why Formula Instead of Cow's Milk. Accessed online: <a href="https://www.healthychildren.org/English/ages-stages/baby/formula-feeding/Pages/Why-Formula-Instead-of-Cows-Milk.aspx">https://www.healthychildren.org/English/ages-stages/baby/formula-feeding/Pages/Why-Formula-Instead-of-Cows-Milk.aspx</a>.

<sup>23</sup>American Academy of Pediatrics, Healthy Children (2018) How to Safely Prepare Formula with Water. Accessed online: <a href="https://www.healthychildren.org/English/ages-stages/baby/formula-feeding/Pages/How-to-Safely-Prepare-Formula-with-Water.aspx?ga=2.40893602.187811365.1649778567-1130088413.1645561370&gl=1\*em5lut\*ga\*MTEzMDA40DQxMy4xNjQ1NTYxMzcw\*ga FD9D3XZ-VQQ\*MTY00Tc4MTQ1MS4yLjAuMTY00Tc4MTQ1MS4w.</a>

