

# Increasing the WIC Benefit Amount for Fruits and Vegetables to Support Healthy Families



## Background

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) was developed in 1972 to address growing poverty and malnutrition amongst mothers with young children in the United States. The program has since grown to become the third largest food and nutrition assistance program in the nation, serving approximately 6 million participants annually.<sup>1</sup> Studies have found the WIC program to be effective in improving diet quality and health outcomes amongst participants.<sup>2</sup>

**1 in 9 residents in the United States are food insecure. In the U.S. Black and Latinx pregnant people are twice as likely to experience food insecurity than Whites.<sup>3</sup>** For pregnant people, access to fruits and vegetables (F&Vs) is critical for fetal growth and development. Poor nutrition and the stress of food insecurity can lead to preterm birth (delivery before 37 weeks), a leading cause of infant death and poor health. Additionally, access to adequate nutrition is imperative for young children to support growth and development. Neglecting to address the root causes of poor growth and development during the first 5 years of life can have lifelong effects on health and wellbeing and may explain the intergenerational persistence of health disparities throughout the United States.

## Produce Prescriptions Programs

**Produce Prescription Programs are healthy food supplement programs embedded into the healthcare system.** WIC serves as the nation's largest PPR program. Instead of prescribing medication, providers provide financial incentives in forms such as subsidies or vouchers to patients who are seen to have a "nutritional risk", shifting healthcare to a more preventative model and enabling providers to offer produce prescriptions before the onset of disease.

A growing body of evidence suggests that these financial incentives can improve health and reduce healthcare costs.<sup>4,5</sup> Although the evidence is clear that F&Vs are a critical piece of preventing and managing many diet-related chronic diseases and supporting health, access remains out of reach for many families. Studies have found that although WIC improves overall diet quality of participants, WIC-eligible individuals are still less likely to meet dietary guidelines for F&V intake compared to higher income individuals. The current WIC packages include a supplement or Cash Value Benefit (CVB) for F&Vs – a maximum of \$9/month for children ages 1-5 and \$11/month for pregnant and postpartum people; however, according to the National Academy of Medicine, the WIC F&V supplement would need to be at least \$23-\$45 per month in order for participants to meet just half of the recommended daily intake of F&Vs.<sup>6</sup>

**WIC has the infrastructure and networks in place to rapidly improve the health of millions of low-income families simply by increasing their ability to purchase healthy food.**

## The Opportunity

The American Rescue Plan Act of 2021 was signed into law by President Biden to respond to increased food and nutrition insecurity from the COVID-19 pandemic. Amongst other supports for Americans, **the law allowed states to temporarily increase the WIC CVB amount for F&Vs to \$35/month per child and adult.<sup>7</sup>** Furthermore, the Biden Administration's recent budget proposal recommends upholding the increase through June 2022.



## Research to Support Policy Action

This brief outlines a case study for how providing an F&V subsidy to pregnant people supports health. The highlighted study from the University of California San Francisco explored whether providing an additional subsidy for F&Vs to pregnant WIC participants in San Francisco impacts F&V consumption, food security, and preterm birth outcomes. The study found promising results, including decreased odds of preterm birth, emphasizing the importance of increasing the F&V CVB as a policy strategy to support health outcomes and lower health care costs.<sup>8</sup>

### The Vouchers 4 Veggies – EatSF Program

Vouchers 4 Veggies (V4V) is a produce prescription program that partners with all WIC clinics in San Francisco to distribute F&V vouchers to pregnant participants. In partnership with the San Francisco Department of Public Health, participants receive \$40 per month in F&V vouchers in addition to the standard WIC package. Since 2016, V4V has enrolled over 3,900 WIC participants, consistently finding they improve their food security and fruit and vegetable consumption while participating in the program.

## The Intervention



**\$40 per month**  
for 6 months  
to pregnant WIC participants

## Study Design

Pre-/post- surveys were administered (n=592) to pregnant WIC participants in San Francisco receiving the intervention in addition to the standard WIC package for pregnant people. Pre-/post- changes were compared to a comparison group of non-pregnant WIC participants (n=108) receiving only the standard WIC package. Birth outcomes were compared to a historical comparison group of San Francisco WIC participants.

## Results

### Improved Food Security

Significant improvements in food security at follow up were observed. Among women in the intervention group who were food insecure at baseline, **a significantly greater proportion were food secure at follow up** compared to the comparison group (23% vs 14%). In addition, **mean food insecurity scores of women in the intervention group decreased significantly more** compared to mean scores of the comparison group.

### Increased Fruit and Vegetable Intake

A significant increase in the frequency of the intake of vegetables at follow up was observed. The intervention group had **significantly larger change in mean frequency intake of combined fruits and vegetables (0.73 times per day)**, total vegetables, salad, non-fried potatoes, and fruit juice. This suggests greater consumption of fruits and vegetables amongst the intervention group compared to the control group.

### Decreased Odds of Preterm Birth

Significant improvement in odds of preterm birth amongst the intervention group compared to a historical comparison group – **the odds of preterm delivery were 37% lower in the intervention group.**

## Downstream Effects

Improving food security and nutrition throughout pregnancy can reduce the risk of pregnancy complications such as preterm birth, birth defects, and other negative impacts on infant development.<sup>2,9,10</sup> These findings suggest financial support for fruits and vegetables may have a meaningful impact on birth outcomes and significant cost savings on the healthcare setting. **Decreasing the odds of one preterm birth is associated with a health care cost savings of \$65,000.<sup>11</sup>**

## Policy Recommendation

The National WIC Association (NWA), the leading advocacy non-profit for the WIC program, recently released [a report](#) voicing their support for President Biden's budget proposal. Amongst others, they recommended extending the increase to the F&V CVB, a recommendation we fully support. **Furthermore, we support a permanent increase to the CVB to \$50 per month, to assure mothers and their children have adequate resources to meet the recommendations outlined in the Dietary Guidelines for Americans (DGAs).** Supporting and sustaining the WIC CVB ensures all families have access to healthy food, playing a critical role in improving nutrition and health across the lifespan.

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