

# Research shows that healthier foods provided in WIC packages benefitted all children equally in the reduction of obesity risk, regardless of family income

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A [study](#) led by [Dr. M. Pia Chaparro](#) from Tulane University's School of Public Health and Tropical Medicine, in collaboration with researchers at the [UCLA Fielding School of Public Health](#) and [Public Health Foundation Enterprises WIC](#), showed that changing the foods provided in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) packages were associated with reduced childhood obesity risk among all WIC-participating children, regardless of their family income and the poverty level of the neighborhood where they lived.

The study looked at children who participated in WIC in Los Angeles County between 2003 and 2016 continuously from birth until their 5th birthday. Children were grouped as receiving the old WIC food package (2003-2009) or the new WIC food package (2010-2016).

The WIC packages were updated in 2009 to better align them with the Dietary Guidelines for Americans. The food package changes included the addition of fruits, vegetables, and whole grains; a reduction in the amount of juice and dairy, as well as in the amount of fat allowed in milk; and a reduction in infant formula amounts to better match infants' age and needs.

The data used in the study included weight and height or length measurements taken on the same children during WIC certification and recertification visits, as well as demographic and socioeconomic information on children and their families. In addition, characteristics from the neighborhoods where children lived were obtained from the [American Community Survey](#).

Receiving the new WIC food package was associated with 7 to 18% lower obesity risk across all family income categories. While neither family income nor neighborhood poverty significantly influenced the association between the WIC food package and child obesity, certain subgroups seemed to benefit more from the food package change than others. In particular, boys from families with income above poverty but residing in the poorest neighborhoods experienced the greatest reductions in obesity risk at 23%.

In summary, the WIC food package revisions were associated with reduced childhood obesity risk among all WIC-participating families, across levels of income-eligibility and neighborhood poverty. This study adds to the mounting evidence of the beneficial impacts of the current WIC food package on dietary behaviors and obesity related outcomes.

Further changes to the WIC food package as recommended by an expert panel in

2017, including additional cash value for fruits and vegetables; further reductions of juice, milk, and peanut butter; and reduction in amounts of jarred infant food, should be prioritized in order to maximize the health benefits of WIC participation, according to the researchers.