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Beginning with the next issue, Marilyn Doss Ruffin will be editor of the <u>Family Economics Review</u>. Katherine S. Tippett, who has served as editor since 1970, has accepted a new position with the Nutrition Monitoring Division of the Human Nutrition Information Service, USDA.

Contents:

Measurements of Family Income Nancy E. Schwenk	1
Female Farm Landlords, 1979 Kathleen K. Scholl	8
Research ReportMajor Concerns of Families Anna Mae Kobbe	12
Nutrient Data Base for Continuing Food Intake Survey Linda P. Posati and Robert L. Rizek	14
Dietary Recommendations for Healthy Americans Summarized Patricia M. Behlen and Frances J. Cronin	17

Abstracts

Economic Characteristics of HouseholdsNew Data Series	6
Geographical Mobility	7
New Publication on Adjustable Rate Mortgages	7
Nutrient Content of the U.S. Food Supply, 1983	16

Regular Features

Some New USDA Publications	13
Some New USDA Charts	25
Cost of Food at Home	26
Consumer Prices	27

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Measurements of Family Income

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By Nancy E. Schwenk Consumer economist

at Greensboro

Concern over the economic status of families in the United States has created increased interest in the economic tools used to measure family income. Analyzing data on family economic issues can result in contradictory explanations of research findings. A case in point is conflicting family income figures, which can result from differences in methods of presentation and/or sources of data. This article will present reasons why there are various and conflicting income figures available and why a new method of measuring family income has been initiated by the Federal Government.

Methods of Presentation

Income figures can be presented in a number of different ways to assess economic well-being. Patterns of income change over time, and differences among subgroups of the population may vary, however, depending on how the data are presented. For example, income can be reported as a mean figure or as a median figure. In 1983 mean household income was \$25,401 and median household income was \$20,885. As this example shows, mean income figures tend to be higher than median income figures. This is because household income has narrower limits on the low side than the high side. The usual lower limit for annual household income is zero dollars, whereas the upper limit can reach into the millions of dollars.

One of the best indicators of economic well-being over time is the annual change in real purchasing power. This change is measured by comparing before-tax median household or family income figures after adjusting for changes in prices using the Consumer Price Index. Although median family income increased from \$22,388 to \$23,433

between 1981 and 1982, there was a decline in real income of 1.4 percent after accounting for a 6.1-percent rise in consumer prices. By contrast, in 1983 median income University of North Carolina for all families increased faster than the inflation rate for the first time in 4 years. Before-tax median income was \$24,580, an increase in real income of 1.6 percent over 1982.

> There are limitations to the before-tax income concept. First, this concept fails to account for changes in tax regulations and rates or the effect of the "bracket creep." For example, while before-tax real mean family income figures for 1981-82 showed a decline, after-tax real income increased during this period by 1.3 percent. This increase was associated with a reduction in Federal income tax rates. Second, before-tax income may not be efficient for measuring differences in purchasing power between subgroups, such as the aged and the nonaged, because certain groups pay smaller proportions of their gross incomes in taxes than others. After-tax income estimates provide a better measure of household purchasing power and differences among population subgroups than do unadjusted income estimates alone. As can be seen in table 1, various subgroups of the population are affected by taxes and by inflation in different ways.

Income statistics can also be expressed as household income or family income. Household income differs from family income in that household income includes not only the income of all related persons in the household but also the income of any unrelated persons in the household. Household income also covers the income of one-person households. Family income is limited to the income of only related persons in the household.

Income can also be reported based on income per household member. Using income per household member helps standardize for differences in household size. The use of income per household member after taxes provides a different perspective of income levels and differences in levels between households with different characteristics. For example, in 1980 before-tax per person income was lower in elderly households than

Household type	19	80	19	81	1982		1983	
	Income	Percent change	Income	Percent change	Income	Percent change	Income	Percent change
	Dollars		Dollars	3	Dollars	-	Dollars	
All households:								
Before tax	25,461	-5.4	24,958	-2.0	25,087	+0.5	25,401	+1.3
After tax	19,670	NA	19,162	-2.6	19,511	+1.8	NA	NA
White:								
Before tax	26,489	-5.3	26,004	-1.8	26,121	+0.4	26,455	+1.3
After tax	20,371	NA	19,875	-2.4	20,234	+1.8	NA	NA
Black:								
Before tax	16.887	-6.0	16.271	-3.6	16.251	-0.1	16.531	+1.7
After tax	13,841	NA	13,234	-4.4	13,370	+1.0	NA	NA
Spanish:								
Before tax	20,156	-9.1	20,123	-0.2	19.352	-3.8	19.369	+0.1
After tax	16,380	NA	16,228	-0.9	15,787	-2.7	NA	NA
Age 65 and over:								
Before tax	15.265	-0.2	15,603	+2.2	16.377	+5.0	16.386	+0.1
After tax	13,274	NA	13,498	+1.7	14,208	+5.3	NA	NA
Female head no								
husband present, with related children:								
Before tax	13,841	NA	13,483	-2.6	12,974	-3.8	NA	NA
After tax	11,956	NA	11,577	-3.2	11,216	-3.1	NA	NA

Table 1. Mean household income in constant 1983 dollars

Note: NA = Not available.

Sources: U.S. Department of Commerce, Bureau of the Census, 1983, Estimating after-tax money income distribution using data from the March Current Population Survey, <u>Current</u> <u>Population Reports</u>, Series P-23, No. 126. U.S. Department of Commerce, Bureau of the Census, 1984, After-tax money income estimates of households, 1981, <u>Current Population</u> <u>Reports</u>, Series P-23, No. 132. U.S. Department of Commerce, Bureau of the Census, 1984, After-tax money income estimates of households, 1982, <u>Current Population Reports</u>, Special Studies, Series P-23, No. 137. in all households, whereas after-tax per person income was higher for elderly households than for all households. This comparison reflects the smaller size of these elderly households relative to all households. Also, the elderly tend to have lower income levels (and, hence, lower tax rates), and they are more likely to receive nontaxable income such as Social Security benefits. The relative tax burden for various household types can be seen in table 2.

Sources of Data

The Bureau of the Census has been collecting annual money income statistics for families and persons in the United States since 1947. The statistics are gathered in the Current Population Survey (CPS) and published in the Consumer Income Series P-60 of the Current Population Reports. These statistics have been used to measure levels and changes in the economic well-being of the population since 1947 and, since 1965, levels and changes in the official poverty population. The CPS income estimates. presently the major source of data on the distribution of income, are based on data obtained annually in March from the CPS and from supplementary questions to the CPS. In the March CPS, household members are asked to recall their income for the previous calendar year. The present CPS sample, which includes approximately 59,000 households, was initially selected from the 1970 census files, with coverage in all 50 States and the District of Columbia, and is continually updated.

Table 2. Percent of mean household income paid in taxes¹

[Calculated using current dollars]

Household type	1980	1981	1982
All households	22.7	23.2	22.2
White	23.1	23.6	22.5
Black	18.0	18.7	17.7
Spanish	18.7	19.4	18.3
Elderly	13.0	13.5	13.2
Female headed	13.6	14.1	13.6

¹These taxes include Federal individual income taxes, State individual income taxes, FICA (Social Security) taxes and Federal retirement payroll taxes, and property taxes on owner-occupied housing.

Sources: U.S. Department of Commerce, Bureau of the Census, 1981, Money income of households in the United States, 1979, <u>Current Population Reports</u>, Consumer Income, Series P-60, No. 126. U.S. Department of Commerce, Bureau of the Census, 1983, Estimating aftertax money income distribution using data from the March Current Population Survey, <u>Current Population Reports</u>, Series P-23, No. 126. U.S. Department of Commerce, Bureau of the Census, 1984, After-tax money income estimates of households, 1981, <u>Current Population Reports</u>, Series P-23, No. 132. U.S. Department of Commerce, Bureau of the Census, 1984, After-tax money income estimates of households, 1982, <u>Current Population Reports</u>, Special Studies, Series P-23, No. 137. U.S. Department of Commerce, Bureau of the Census, 1984, Money income and poverty status of families and persons in the United States, 1983, <u>Current</u> Population Reports, Consumer Income, Series P-60, No. 145.

Income data collected in the CPS are limited to money income received before payment of Federal, State, local, or FICA (Social Security) taxes and before any other types of deductions. By definition, money income is the sum of amounts received from earnings; Social Security and public assistance payments; dividends, interest, and rent; unemployment and worker's compensation; government and private employees pensions; and other periodic income. CPS money income. therefore, does not reflect the fact that some households receive part of their income in the form of noncash benefits such as food stamps, health benefits, and subsidized housing; that some farm families receive noncash benefits in the form of rent-free housing and goods produced and consumed on the farm; or that some cash benefits are also received by some nonfarm residents, such as the use of business transportation and facilities, full or partial payments by business for retirement programs, and medical and educational expenses.

Many policy makers feel that these elements should be considered when judging family economic status. The CPS estimates wage and salary income well, but underreporting problems are evident with respect to property income, Social Security income, and worker's compensation. CPS does not cover all of the information needed to assess economic well-being of the population and information needed for policy analysis, since government assistance programs are not counted as income in determining poverty status but contribute significantly to the well-being of recipients.

Another source of income statistics is the Internal Revenue Service (IRS). The IRS compiles statistical summaries of individual income tax returns and makes these statistics available in the IRS publication series <u>Statistics of Income</u>. IRS returns contain units which are not included in the CPS statistics, including prior year deliquent returns, returns of Armed Forces members living overseas or on base without families, and returns of decedents. Also, the computation of adjusted gross income (AGI) on Federal income tax returns allows various adjustments and exclusions from total income, such as interest and dividend exclusions, moving expenses, disability income exclusion, alimony paid, and employee business expenses. AGI includes income from capital gains, whereas CPS income excludes capital gains and capital losses.

IRS figures for aggregate adjusted gross income tend to be higher than CPS figures because there is a tendency in household surveys for respondents to underreport their income. In particular, there is a tendency for survey respondents to forget minor or irregular sources of income when completing questionnaires.

Another source of data on family income is the Decennial Census of Population, which has been collecting family income data every 10 years since 1940. Income data collected in the 1980 Census of Population differs from CPS income data in that CPS data excludes the institutional population and most members of the Armed Forces living on post; these two groups were included in the census. Also, college students were generally enumerated at their own homes in the CPS and classified as family members but were enumerated at their college residence in the census. In general, levels of income reported in the census are slightly higher than those reported in the CPS.

The Bureau of the Census has initiated a new publication series, "Economic Characteristics of Households in the United States," based on data obtained from the Survey of Income and Program Participation (SIPP). SIPP is a national longitudinal survey program of the U.S. Department of Health and Human Services and U.S. Department of Commerce. Through household visits, the survey collects information on wages, salaries, government transfer programs, assets, liabilities, and taxes, and links this information with data from various administrative record systems, such as the wage and benefit data of the Social Security Administration.

SIPP was launched in the fall of 1983 when the Census Bureau began interviewing 18,000 households nationwide. A second wave of interviewing took place in January 1985. Households in the survey will be interviewed at 4-month intervals over a period of 2-1/2 years. The reference period will be the 4 months preceeding the interview. As SIPP progresses, new panels will be started every year which will allow cross-sectional analyses based on a total sample of approximately 35,000 households. The initial publication, released in September 1984, reports on the third quarter of 1983. (See p. 6.) This first report includes tables of average monthly income, employment status, program participation status, living arrangements, and other characteristics for the 4 calendar months preceding the interview.

SIPP was devised to overcome many of the limitations of the CPS in assessing the economic well-being of the population. SIPP will measure income distribution and poverty more accurately than the CPS does. For example, yearly CPS information on the extent of poverty reveals little about the extent to which an individual is poor from one year to the next. According to Greg Duncan's findings in the Panel Study of Income Dynamics at the University of Michigan, in the 10-year period from 1969 to 1978, one of every four Americans experienced at least 1 year in poverty but only 2.6 percent were poor for 8 years or more. Therefore, longterm poverty characterizes a much smaller fraction of the population than the 1-year figures would suggest. SIPP will improve current estimates of income and income change, including annual and subannual estimates, by source of income. SIPP will provide data on the amount and type of tax liability, including income taxes, property taxes, and Social Security taxes. These data will be used to study Federal and State aid programs, measure noncash income and delineate those who are eligible for and participate in government benefits programs, estimate future program costs and coverage, and assess the effects of proposed changes in program eligibility rules or benefit levels.

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Economic Characteristics of Households — New Data Series

The Bureau of the Census has published a new report titled "Economic Characteristics of Households in the United States, Third Quarter 1983." This publication is the first of a new series of quarterly reports covering the economic status of households in the United States, based on data obtained from the Survey of Income and Program Participation. The data include information on average monthly income and program participation for the third quarter of 1983.

Monthly Income

In the third quarter of 1983, median monthly income for the Nation's 83.1 million nonfarm households was \$1,670. The median income of white households (\$1,750) was above the national average and well above median monthly income of black households (\$1,080) and Spanish-origin households (\$1,230).

Regional differences in median monthly income were found in this first quarterly study. The Northeast (\$1,770) and West (\$1,800) had the highest median income, followed by the Midwest (formerly the North Central) (\$1,650) and the South (\$1,550).

There was a large difference between incomes of married-couple families and single-parent families (mother present). The latter had a median monthly income of \$800, whereas married-couple families received approximately \$2,160.

The data show that the age of the householder affects median household income. Median monthly income peaks at ages 45 to 54 (\$2,340) and then falls to \$1,810 in the 55- to 64-year-old group and to \$950 in the 65-year-old-and-over group.

Program Participation

During the third quarter of 1983, an average of 13.5 million nonfarm households received some form of means-tested benefits. Approximately 12 million of these households participated in noncash benefits programs, and about 7 million received some form of cash assistance. The major programs that provided noncash benefits to households included medicaid (7.5 million recipients), food stamps (6.3 million), and public or other subsidized rental housing (3.5 million). Cash assistance programs included SSI^1 (2.8 million) and AFDC² or other cash assistance (3.8 million).

The largest number of households are affected by two programs that are not meanstested programs. Medicare programs benefit 20 million households, whereas Social Security or Railroad Retirement benefit 22.7 million households.

Those households receiving means-tested benefits had monthly cash incomes well below the figure for all households. The median monthly income for all households was \$1,670; for food stamp households it was \$420. Households receiving pension incomes also had lower cash income. Among households receiving only private pensions, the median monthly income was \$1,420; among households receiving only Social Security or Railroad Retirement, this amount was \$1,050.

Many households that received benefits received these benefits from more than one program. Of the 12.4 million households that received means-tested noncash benefits, 5.7 million received them from two or more programs and 2.3 million received benefits from three or more programs. Benefits from both food stamps and medicaid were the most common form of multiple recipiency, affecting 4.3 million households.

¹Supplemental Security Income.

²Aid to Families With Dependent Children.

Source: U.S. Department of Commerce, Bureau of the Census, 1984, Economic characteristics of households in the United States, third quarter, 1983, <u>Current</u> Population Reports, Series P-70, No. 1.

Geographical Mobility

Migration within the United States and immigration into the United States from abroad are the topics of a report from the March 1983 Current Population Survey. The data are derived by comparing responses about residence in 1982 with actual residence in 1983.

In March 1983, 36 million people reported to have moved within the United States during the past year, while less than 1 million reported to have moved into the United States from abroad. Of those persons who moved within the United States, over 60 percent (about 22 million) moved within the same county. Of those who moved between counties (14 million), a little more than one-half moved within the same State; the rest (approximately 6 million persons) made interstate moves.

The March 1983 data show net outmigration in the Northeast and Midwest, while the South and the West had net gains of residents. During this period, 4 million persons moved from cities to suburbs, while 2 million moved from the suburbs into the cities. For the first time in a decade, nonmetropolitan areas experienced no net gains of migrants.

Rates of moving decline with increasing age. The highest rate of mobility is found for persons in their early twenties. This is due to the many life-cycle changes which may also lead to a change in residence. Households tend to move to accommodate new members or in anticipation of children reaching school age. Once the children reach school age, there appears to be a reduction in mobility of these households.

Rates of mobility vary by race and by marital status. Blacks are more likely to move within the same county, whereas whites are more likely to move between counties. Married persons with spouses present in the household had the lowest rate of moving (13 percent); single persons had the highest overall rate of mobility (20 percent).

Rates of moving are also related to educational attainment and employment status. Higher mobility rates are associated with higher levels of educational attainment. Those 18 years of age and older with only an elementary school education were least likely to have moved in the survey year; they were also least likely to make local moves. Of those in the labor force, persons in the Armed Forces experienced the highest mobility rates. Persons not in the labor force--retired workers, homemakers, students, and disabled persons--had the lowest mobility rates.

Source: U.S. Department of Commerce, Bureau of the Census, 1984, Geographical mobility, March 1982 to March 1983, <u>Current</u> <u>Population Reports</u>, Population Characteristics, Series P-20, No. 393.

New Publication on Adjustable Rate Mortgages

The Federal Reserve Board and the Federal Home Loan Bank Board have issued a new publication, <u>Consumer Handbook on Adjustable</u> <u>Rate Mortgages</u>, designed to help consumers understand how ARM's work and guide them in making an informative decision in choosing a mortgage. The booklet describes the risks and advantages of such features as index rates, margins, interest rate and payment caps, and negative amortization. Also included is a checklist to help homebuyers compare the features of one ARM with another or with a fixed-rate mortgage.

Prepared in consultation with many other Federal agencies and trade and consumer groups at the request of Congress, the 24-page booklet is available free (single copy) from the Board of Governors of the Federal Reserve System, Publications Services, Mail Stop 138, Washington, DC 20551.

Female Farm Landlords, 1979

By Kathleen K. Scholl Consumer economist

Women play a greater role in agriculture as owners of farmland (23 percent of all landlords) than as farm operators (5 percent of all operators). Women landlords own about one-tenth of all farmland; as farmers, women farm about one-twentieth of the farmland.

Data from the 1979 Farm Finance Survey (7) show that of the 1.7 million farm landlords in the United States, 46 percent were males and 25 percent were females.¹ Sex of landlord was not ascertained for the other 29 percent. Of the nearly 1 billion acres of farmland, 40 percent was rented to others. Female landlords rented about 70 million acres, or 18 percent of all the rented land.

On a per landlord basis, female landlords had smaller land holdings than male landlords or those who did not report their sex (table 1). The females rented a larger portion of their land to others than the male landlords (84 percent of their holdings compared with 64 percent); on the average, they also rented more acres than males (158 acres compared with 142 acres).

Female farm landlords had a lower rate of return on their capital investment, even though the value of their land and buildings

¹The percent of farm landlords that are women varies depending on whether the data refer to all landlords or to noncorporate landlords only: Women make up 23 percent of all landlords but 25 percent of noncorporate landlords. With the exception of the first paragraph, data in this article refer to noncorporate landlords (including individual, family, or partnership landlords). Note that information was collected concerning only one landlord per unit. Sex of senior partner was requested; therefore, husband-wife partnerships could be recorded under either sex category.

was the same as that of male landlords (table 2).² Females were more likely than males to retain valuable land and rent less valuable land to others. As illustrated in table 2, the per acre value of land and buildings rented by females was \$88 less than land rented by males. The females fell further behind their male counterparts in the return they received on the rented land (\$34 per acre as compared with \$41). Yet, after taking into consideration that female landlords' rented land and buildings were only 90 percent of the value of the males' rented land and buildings, female landlords were still found to have a 1 percent lower rate of return on their capital investment.

In general, farm assets did not differ by sex of landlord on a per landlord basis (table 3). Those who did not provide sex of landlord information, however, have more assets. An examination of more detailed asset information indicates very little difference between the sexes. Females had slightly more assets in land and less in household dwellings and tenant's dwellings. The greatest difference between the landlords' assets was found in the value of machinery and equipment, with female landlords' investment much lower than the males'. This may be a result of the females retaining a smaller proportion of their land for their own farming and thereby not requiring extensive equipment to operate it.

Only 8 percent of female farm landlords had any debt, whereas 19 percent of the males had farm or nonfarm debt. Of those with debt, females averaged less debt than the male or the no response groups (table 3). Although all three groups secured the majority of their debts with real estate, the female landlords' real estate debt as a percent of the value of rented land and buildings was less than either the male or no response groups (16.5 percent compared with 23.8 and 23.1 percents).

Overall, female farm landlords had a lower debt-to-asset ratio than male landlords (1.8 compared with 6.1). Since females had less debt and were less likely than males to have

²Landlords self-reported the value of their assets and debts.

Item	Male (n=788,720)	Female (n=430,801)	No response ¹ (n=487,271)
Land owned (acres per landlord)	221	188	217
Land rented to others (acres per landlord	142	158	199
Rent received per landlord:			
Total	\$5,686	\$5,141	\$5,834
Share	4,090	3,813	3,567
Cash	1,597	1,328	2,267

Table 1. Owned and rented land, and rent received per landlord, by sex, 1979

¹These are individual, family, or partnership landlords that did not respond to the sex of landlord item in the survey.

Source: Data derived from U.S. Department of Commerce, Bureau of the Census, 1982, 1979 Farm Finance Survey, Census of Agriculture, 1978, Vol. 5, Special Reports, Part 6, table 9.

Table 2. Per-acre value of land and return and female/male ratios, 1979

Item	Male	Female	Female/male ratio (percent)		
	1	Dollars	States and D		
Value of land and buildings owned	851	839	99		
Value of land and buildings rented	864	776	90		
Return per acre	41	34	83		

Source: Data derived from U.S. Department of Commerce, Bureau of the Census, 1982, 1979 Farm Finance Survey, <u>Census of Agriculture, 1978</u>, Vol. 5, Special Reports, Part 6, table 9.

debt, female landlords may be at less risk than males in their investments. This conservative borrowing behavior is probably responsible for the females' lower rate of return on rental land but may have preserved their presence in today's farm economy. Collected in 1979, at the beginning of the fall in farmland prices, these data indicate that women on average did not risk their investment on inflated land values. As the value of land declines in the eighties, the female farm landlord may be less likely than the male farm landlord to face foreclosure, assuming that females' lower rental income can maintain the expenses associated with the farm investment.

The above findings on female landlords are similar to a study of female farm operators (6). As with female landlords, female operators assumed less risk, on average, than their male counterparts. Fewer female operators reported debt in comparison with male operators (37 percent compared with 58 percent), and female operators had a lower debt-to-asset ratio than male operators (8.9 and 17.4, respectively).

Other findings from the report on farm operators indicated that female operators produced less (had a lower volume of sales) than male operators. Some of this difference is attributable to the smaller farms operated by women and the fact that the median age of female operators was 59 years--nearly 10 years older than male operators. Even after adjusting for size of farm and age of operator, however, the output of female farm operations still was lower than that of male operations.

Some female farm operators may be widows who have inherited their operations. This may also be true of female landlords, although the data do not provide this

Table 3. Farm assets and debt per farm landlord, by sex, 1979

Item	Male (n=788,720)	Female (n=430,801)	No response ¹ (n=487,271)
Fotal farm assets	\$126,156	\$123,995	\$147,065
Land and buildings	122,887	122,716	146,914
Other farm assets: ²			
Machinery and equipment	9,483	3,731	6,526
Crops stored	11,123	9,670	15,381
Livestock and poultry	9,212	8,117	9,347
Fotal debt ³	41,095	28,012	40,866
Real estate	46,492	34,485	47,602
Non-real estate	11,479	6,905	9,240

¹These are individual, family, or partnership landlords that did not respond to the sex of landlord item in the survey.

²Includes only landlords reporting these specific assets.

³Includes only landlords reporting debt.

Source: Data derived from U.S. Department of Commerce, Bureau of the Census, 1982, 1979 Farm Finance Survey, <u>Census of Agriculture, 1978</u>, Vol. 5, Special Reports, Part 6, tables 23 and 67.

information. Analysis from another survey $(\underline{2}, \underline{3})$ indicated, however, that many female landowners are older widows who have acquired their land through inheritance or gift.

The Economic Recovery Tax Act of 1981, which allows the tax-free passage of an entire estate to the surviving spouse, combined with the fact that women outlive men (8), indicates the continued likelihood of widows controlling farmland. Older widows who do not have children interested in taking over the farm may not have an incentive to expand or update the farm operation. Their preference may be to have a consistent flow of income rather than to pursue new, more efficient production practices that would entail making long-term commitments and assuming additional risk.

Whether because they are widows or for other reasons, women behave differently than men in the farm economy; they underutilize their resources. This behavior may be of concern to those monitoring farm production. Also, the families of these female landlords and operators may be experiencing low farm incomes as a result of the women's lower production levels or lower rates of return on their farm investment. Women who are active in agriculture may wish to reassess their management decisions concerning their farm investments.

The findings suggest that some female landlords may not be receiving the best return on their farm investment and, therefore, would benefit from farm financial counseling. In addition, financial counselors may need to work closely with older female landlords, since the women may be widows with little experience in making farm management decisions without their husbands. Some of the basic issues to be studied are: (1) Should the women charge more for the use of their land? and (2) is the low rent received per acre an indication that the land is not used efficiently? If yes is indicated to either of these questions, financial counselors may need to work with agricultural extension specialists to assist women with farm management decisions. Also, estate planning and counseling is advisable for farm couples in which the wife is not regularly involved in the management of farmland.

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Research Report — Major Concerns of Families¹

By Anna Mae Kobbe President, National Association of Extension Home Economists

The National Association of Extension Home Economists, representing the 4,000 Extension home economists employed by the USDA Cooperative Extension Service and State land-grant universities, has completed a national survey to identify public policy issues of greatest concern to families.

The survey questionnaire consisted of two parts. First, Extension home economists were asked to rate, on a four-point scale and according to their observations, how concerned the majority of people in their counties were about each of 13 issues. The four-point rating scale ranged from "extremely concerned" to "not at all concerned." Respondents were then asked to rank which three of the issues should be considered of highest priority. The 13 public policy issues were selected on the basis of their timeliness and relevance to priority areas of Extension home economics programs (box). The second part of the survey questionnaire was open-ended. It asked respondents to list three family concerns or issues other than those already covered in part 1.

Responses were received from 547 of 856 Extension home economists sampled. (The sample was drawn from the membership list of the National Association of Extension Home Economists.) The majority of the respondents worked in a rural county (58 percent). More

ISSUES

Fair insurance rates (such as age, sex. race) Pay equity for women Medical costs Court-ordered child support enforcement Preschool care for children Before- and after-school care for school-age children Care of the elderly Care of the handicapped Flexitime and job-sharing opportunities Employment-training opportunities Equal pensions for men and women Survivor's benefits for spouses Equity of social security for women

than half of the respondents (about 58 percent) were under 30, and 80 percent were under 51. Sixty-three percent were married. Almost one-half of the survey respondents were from the Southern region (46 percent); the Central region accounted for 28 percent, and the Eastern and Western regions for less than 15 percent each.

The leading public policy issue selected was medical costs. Meeting medical costs was ranked first by 36 percent of all respondents and identified as one of the three most important issues by a total of 61 percent. In fact, an overwhelming 96 percent said that people in their communities were "extremely concerned" or "very concerned" about rising medical costs. Communities in the Central region were worried about medical costs the most, with 40 percent of the respondents stating that this was the most important issue.

The second most important concern was pay equity for women, given top choice by 19 percent of the respondents and named among the three most important issues by 40 percent. Pay equity was of particular interest in the Southern and Western regions, where 28 percent and 22 percent of the Extension professionals respectively stated that people in their communities were "extremely concerned" about this matter.

¹This article is condensed from a paper presented at the Agricultural Outlook Conference in December 1984 at Washington, DC. Complete copies are available from the Family Economics Research Group. (See inside front cover for address.)

Two issues virtually tied as the thirdranked choice. The problem of preschool child care was cited by 31 percent of the respondents and care of the elderly was identified by 30 percent. Although Extension professionals in the Central region were somewhat less likely than those in other regions to feel that people in their counties were "extremely concerned" about preschool child care, the differences among the regions were minimal for both issues.

A wide range of problems emerged in response to the open-ended question in part 2. However, high unemployment and lack of jobs were mentioned by almost one-fifth (19 percent) of all the respondents and by 44 percent of the respondents in the Southern region.

Difficulties in family relationships and parenting emerged as the second most frequently mentioned concern (15 percent). However, if the whole array of problems which indicate stress on the family-divorce, teenage pregnancy, child abuse, and alcohol and drug abuse--are aggregated as family stability, this issue was listed among the current concerns 42 percent of the time.

Housing problems and the cost of housing were mentioned by 11 percent of the respondents as the third most pressing issue. The region that gave this problem its top priority was the Eastern region, where almost one-quarter of the home economists (24 percent) who responded indicated that they saw the high cost of housing and/or the need for low-cost housing as a present and growing family concern in their counties.

Additional problems listed on the openended question were high interest rates, unstable farm economy, decreased quality of education, crime and violence, water pollution and conservation, and personal money management and financial planning.

Some New USDA Publications

The following are for sale from the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402, 202-783-3238.

- <u>1984 Handbook of Agricultural</u> <u>Charts. December 1984. Stock No.</u> 001-019-00368-5. \$3.75.
- <u>1984 Yearbook of Agriculture:</u> <u>Animal Health--Livestock and</u> <u>Pets. November 1984. Stock No.</u> 001-000-04434-6. \$10.
- Chartbook of Nonmetro-Metro Trends. September 1984. Stock No. 001-019-00351-1. \$2.50.
- Food Consumption, Prices, and <u>Expenditures 1963-83</u>. November 1984. Stock No. 001-019-00370-7. \$4.50.
- Minifarms: Farm Business or Rural Residence. November 1984.
 Stock No. 001-019-00360-0. \$1.50.
- Recipes for Quantity Food Service. September 1984. Stock No. 001-000-04379-0. \$7.50.

The following are for sale from the Consumer Information Center, Pueblo, CO 81009, 303-948-3334.

- How to Buy Economically: A Food Buyer's Guide. 1981. 28 pp. 436N. \$0.50.
- Making Food Dollars Count. 1983.
 27 pp. 409N. \$0.50.

Single copies of the following are available from the U.S. Department of Agriculture Food Safety Inspection Service, Room 1163, South Building, Washington, DC 20250.

The Safe Food Book: Your Kitchen Guide. 1984. 33 pp. HG 241. Free.

Nutrient Data Base for Continuing Food Intake Survey

By Linda P. Posati Nutritionist Human Nutrition Information Service

Robert L. Rizek Director, Nutrition Monitoring Division Human Nutrition Information Service

In anticipation of the Continuing Survey of Food Intake by Individuals (CSFII) begun in 1985 by the Human Nutrition Information Service (HNIS),¹ the data base used for calculating the nutrient intakes of individuals is being broadened and updated to reflect new research information. Both the new data base and the data base used for the' 1977-78 individual food intake survey contain data from the HNIS' National Nutrient Data Bank, the major nationwide source of information on the nutritive value of foods.

1977-78 Survey Data Base²

The USDA nutrient data base for the 1977-78 individual food intake survey contains data on 100 grams of edible portions of 4,545 food items.³ It contains values for 14 nutrients and for food energy. The

¹See "Continuing survey of food intakes by individuals," <u>Family Economics Review</u> 1985(1):16-17, by Robert L. Rizek and Linda P. Posati.

²Two separate nutrient data bases were used for calculating the nutritive value of foods in the 1977-78 Nationwide Food Consumption Survey--one for the individual intake portion of the survey, the other for the household food use portion. This article describes the data base in use for the individual intake survey only.

³Many of the items in this base are mixtures for which nutrient profiles are based on recipe formulation. nutrients are protein, fat, carbohydrate, calcium, iron, magnesium, phosphorus, vitamin A as total international units, thiamin, riboflavin, niacin, and vitamins B₆, B₁₂, and C. The data base includes only foods in forms as they are ingested, such as cooked meat. Most of the nutrient values were obtained from the 1963 edition of Agriculture Handbook No. 8 and its revised sections on Dairy and Egg Products, Baby Foods, and Poultry Products.4 Other data were obtained from reports of research published between 1963 and 1977 and from the food industry. Much of the industry data were generated between 1973 and 1977 in preparation for nutrition labeling.

1985 Survey Data Base

Preparation of the data base for use with the 1985 continuing survey has been coordinated with staff of the National Health and Nutrition Examination Survey (NHANES) who will also use these data for their surveys.5 The new data base will contain approximately the same number of food items as the 1977-78 data base; however, some foods will be deleted either because they were reported infrequently in 1977-78 or because they have been removed from the market since then. Products that are new to the market will be added. Some foods with slightly different characteristics that were treated as one item in 1977-78 will be entered as separate items; for example, the addition of lowsodium products. The separation of regular and low-sodium products in the 1985 data base is necessary since sodium intakes will be studied for the first time in the 1985 study.

⁴<u>Composition of Foods...Raw, Processed</u>, <u>Prepared</u>, Agriculture Handbook No. 8 Revised, 1976-79, Consumer and Food Economics Institute [now known as Human Nutrition Information Service], U.S. Department of Agriculture.

⁵See "National Nutrition Monitoring System," <u>Family Economics Review</u> 1984(4): 15-19, by Betty B. Peterkin and Robert L. Rizek, Human Nutrition Information Service, U.S. Department of Agriculture. The 1985 data base will include the following additional nutrients and dietary constituents that were not part of the 1977-78 data base:

- . Sodium
- . Potassium
- . Zinc
- . Copper
- . Folacin
- . Cholesterol
- . Total saturated fatty acids
- . Total monounsaturated fatty acids
- . Total polyunsaturated fatty acids
- . Vitamin A as retinol equivalents
- . Carotene as retinol equivalents
- Vitamin E as alpha-tocopherol equivalents
- . Dietary fiber
- . Alcohol

Many of the new nutrients are included in revised sections of Handbook No. 86 and have a relatively strong data base to support the values. These nutrients include sodium, potassium, zinc, copper, folacin, cholesterol, fatty acids, and vitamin A as retinol equivalents.7 Data for other nutrients, however, are less well-founded. Only limited data are available for dietary fiber and tocopherol. A study is underway to generate new data on dietary fiber; however, the research effort is hampered by the absence of an accepted method. Values for dietary fiber will generally represent the sum of insoluble fiber (by neutral detergent) and the sum of soluble fiber (determined as pectin) in foods for which data exist. This sum may or may not agree with results from a yet-to-be-determined "standard method" for dietary fiber.

⁷Data on nutrient values come primarily from analyses conducted by the food industry and through HNIS contractual arrangements with land-grant universities, nonprofit research organizations, and Agricultural Research Service laboratories. Data for vitamin E may be confined to the parent forms of the staple or commodity food items. These data would then have to be extrapolated to processed food products needed in a survey data base. Such extrapolations require that assumptions be made, some of which may be with little research basis.

Until now only the total vitamin A activity of foods, and not the separate contributions of retinol and provitamin A isomers, have been estimated. Values for beta-carotene have not been reported frequently, and existing reports on food composition are often not clear as to whether a value is explicit for betacarotene or whether it may include other carotenoids. Values in the data base for carotene will be those assumed in arriving at the value for total vitamin A. A study underway will provide helpful information on the distribution of vitamin A and related compounds in several kinds of foods and mixtures. The ultimate use and distribution of the data base for dietary fiber, vitamin E, and carotene will be decided after the data have been reviewed.

To facilitate preparation of the data base for the 1985 survey, HNIS has developed a new computerized system for linking the survey food items with the computerized data base that contains nutrient information.⁸ For example, the survey data base contains a code for whole milk that is linked to a single whole milk code in the nutrient data set. Many items in the survey data base, however, are mixtures for which there is no one-to-one link. A major part of the new system, therefore, is a recipe linking file that will improve accuracy by automatic calculation of mixtures. For these foods. links are made through the ingredients--for each mixture, the recipe linking file contains the codes from the nutrient data set for each ingredient, plus the weights of the ingredients. The individual survey food item is then generated using the proportion of ingredients. Retention factors for vitamins, which are stored

⁸The system includes documentation of sources of nutrient data, recipes, and other data used.

⁶See footnote 4, p. 14.

in a separate file, can be applied during the recipe calculation step to compute cooked values from raw ingredients, or to adjust values when an additional heat treatment has been applied to a mixture of cooked ingredients. A yield factor to adjust the recipe for weight changes during cooking is also included for each mixture. Fat loss and/or absorption during cooking are taken into account by a separate programming step.

Nutrient Content of the U.S. Food Supply, 1983

Trends in nutrient levels since 1909-13 are reported by Ruth M. Marston and Nancy Raper in an article "Nutrient Content of the U.S. Food Supply, 1983" published in the <u>National Food Review</u> (NFR-29). A detailed report on trends in levels and sources of magnesium is also included.

Nutrient data for the U.S. food supply are based on per capita use of all food available for consumption. Subsequent food losses occurring in processing, marketing, and home use are not considered; therefore, nutrient levels as reported from the food supply may be higher than for nutrients actually ingested.

In 1983, levels were 1 to 5 percent above those for 1982 for food energy and for all nutrients reported in the historical series-protein, fat, carbohydrate, calcium, phosphorus, iron, magnesium, vitamin A value, thiamin, riboflavin, niacin, vitamin B6, vitamin B12, and ascorbic acid. Several factors affected these increases: The Federal standard for enrichment of white flour with iron was raised, effective July 1, 1983, and use increased for some meats, poultry, salad and cooking oils, butter, edible beef tallow, oranges and orange juice, lowfat milks, and high fructose corn syrup (HFCS), particularly HFCS-55 (55 percent fructose).

Changes in nutrient levels between 1967-69 and 1983 included both increases and declines. Increases ranged from 1 to 20 percent for levels of food energy, protein, fat, carbohydrate, iron, magnesium, vitamin A value, thiamin, riboflavin, niacin, vitamin B₆, and ascorbic acid. Declines of 1 to 8 percent occurred in levels of calcium, phosphorus, and vitamin B₁₂.

The gains in nutrient levels between 1967-69 and 1983 reflected the higher Federal standards for enrichment of white flour with thiamin, riboflavin, and niacin, which became effective in 1975, as well as the higher standard for enrichment with iron, effective in 1983. Other factors included greater use of citrus products, vegetables, poultry, salad and cooking oils, shortening, HFCS, peanuts, and spices. Declines reflected the decreased use of meats, particularly edible offals, eggs, and fluid whole milk.

An analysis of trends in levels and sources of magnesium between 1909 and 1983 indicated that the magnesium level of the U.S. food supply declined 15 percent, from 409 to 347 mg per capita per day, reflecting the marked decline in use of grain products and potatoes. Vegetable sources consistently accounted for the largest proportion of magnesium throughout the century, although their share declined because of decreased use of grain products and potatoes. Grain products were the major source of magnesium in the first half of the century; dairy products were the major source thereafter. In 1983 sources of magnesium, in declining order, were dairy products; fruits and vegetables, excluding potatoes; grain products; meat, poultry, and fish; and dry beans, peas, nuts, and soy products.

Dietary Recommendations for Healthy Americans Summarized

By Patricia M. Behlen and Frances J. Cronin Nutritionists Nutrition Education Division Human Nutrition Information Service

Nutritionists in both the public and private sectors have advised Americans about dietary practices for more than 100 years (18). The U.S. Department of Agriculture has developed and published dietary guidance statements since the turn of the century (<u>36</u>). Guidance has evolved based on our understanding of human nutritional needs, the relationship of diet to health, and the composition of foods.

The focus of early dietary recommendations was the consumption of enough of the kinds of foods needed to provide nutrients and energy required for good health. In the sixties, recommendations began to reflect concern about the excessive consumption of certain diet components and the risk of some chronic diseases (7). Since then, several Federal, professional, and health organizations have published dietary recommendations that consider the relationship of diet to the risk of chronic diseases as well as to nutrient needs. A number of scientists reviewed these recommendations and identified areas of consensus and of disagreement (15, 17, 19, 23, 24); since publication of these reviews, however, additional recommendations have been made or original recommendations revised.

This article summarizes a number of dietary recommendations for the healthy U.S. population prepared since 1977 by 10 Federal, professional, and health organizations. Additional recommendations for specific population groups, such as infants and pregnant and lactating women, are also discussed. Readers are referred to the original documents and other references cited for more indepth information on dietary recommendations summarized in this paper. The organizations and report titles reviewed in this article are listed in table 1. (They are listed in chronological order.) The table also indicates the type of publication in which the recommendations are presented and the stated purposes of the recommendations. Some of the recommendations, such as those of the American Heart Association (AHA) (8) and the Food and Nutrition Board's (FNB) Committee on Dietary Allowances (21), are revisions of earlier recommendations.

Most of the organizations state that they recognize the dynamic nature of science and that new evidence could mean refinement or alteration of their current recommendations. Some organizations listed in table 1 are now in the process of reviewing their recommendations. For example, the Departments of Agriculture and Health and Human Services recently conducted a review of the Dietary Guidelines for Americans which were developed in 1980 (36). A committee of nine scientists was appointed by the Secretary of Agriculture to review comments on the Guidelines and to make appropriate recommendations to the Departments.¹ At its final meeting held on December 19, 1984, the Dietary Guidelines Review Committee concluded that the number and general content of the existing seven Dietary Guidelines should be essentially unchanged. Their final report will recommend that some relatively minor changes be made in the text of the Guidelines. The two Departments will review the Committee's recommendations in preparing a second edition of the Guidelines.

All dietary recommendations summarized here are for healthy Americans, but the purpose of specific recommendations differ. The Dietary Goals (34), Surgeon General's Report (33), and the Dietary Guidelines (28) are the most general. Their recommendations are designed to maintain and improve health. The recommendations of the National Academy of Sciences' Committee on Diet, Nutrition, and Cancer (22), the American Cancer Society

¹Copies of the <u>Report of the Dietary</u> <u>Guidelines Advisory Committee on the</u> <u>Dietary Guidelines for Americans may be</u> obtained from the Human Nutrition Information Service, USDA, 6505 Belcrest Road, Hyattsville, MD 20782. Table 1. Summary of type of report and purpose of dietary recommendations, by 10 Federal, professional, and health organizations

Title and organization	Type of report	Purpose of recommendations
Dietary Goals for the United States, 2d edition (34) U.S. Senate Select Committee on Nutrition and Human Needs, 1977	Congressional report with references and statements by scientists.	To provide individual consumers with dietary guidance to make informed decisions.
Diet and Coronary Heart Disease: General Dietary Recommendations (8) American Heart Association, 1978	Referenced statement for professionals.	To provide dietary guidance to reduce risk of coronary heart desease.
Healthy PeopleSurgeon General's Report on Health Promotion and Disease Prevention (33) U.S. Department of Health, Education, and Welfare, 1979	Government report for the general public.	To propose a set of major goals for improving the health of Americans.
<u>Concepts of Nutrition and Health (12)</u> Council on Scientific Affairs American Medical Association, 1979	Referenced report for professionals.	To provide a basis for dietary recommendations made to clients.
Recommended Dietary Allowances (21) Committee on Dietary Allowances Food and Nutrition Board National Research Council National Academy of Sciences, 1980	Referenced report for professionals.	To provide a nutrient standard for planning adequate diets for population groups.
Nutrition and Your Health: Dietary Guidelines for Americans (28) U.S. Department of Agriculture and Department of Health and Human Services, 1980	Government publication for the general public.	To provide healthy Americans with dietary guidance to maintain and promote health.
<u>Toward Healthful Diets (20)</u> Food and Nutrition Board National Research Council National Academy of Sciences, 1980	Referenced position paper for professionals.	To indicate dietary practices that promote health benefits without undue risk.
Diet, Nutrition, and Cancer (22) Committee on Diet, Nutrition, and Cancer National Research Council National Academy of Sciences, 1982	Referenced review for professionals.	To provide dietary guidance to reduce risk of cancer.
Nutrition and Cancer: Cause and PreventionA Special Report (2) American Cancer Society, 1984	Special report for professionals with some references.	To provide dietary guidance to reduce risk of cancer.
<u>Cancer Prevention</u> (<u>32</u>) National Cancer Institute National Institutes of Health U.S. Department of Health and Human Services, 1984	Booklet for general public.	To provide guidance to make lifestyle changes which may help to reduce risk of cancer.
Note: Numbers in parenthesis refer to re	ferences on pp. 23-24.	

(ACS) (2), and the National Cancer Institute (NCI) (32) are designed to reduce the risk of cancer, and those of AHA (8) to reduce the risk of heart disease. FNB's Committee on Dietary Allowances makes specific nutrient recommendations for various sex-age groups in addition to discussing other issues (21). FNB (20) and, to a lesser extent, the American Medical Association (AMA) (12) have advised that some dietary recommendations to reduce the risk of chronic diseases are not appropriate for everyone.

Table 2 summarizes the dietary recommendations of these 10 organizations in the following areas: Nutrient adequacy, weight control, fat (including saturated and polyunsaturated fatty acids), cholesterol, carbohydrates (including complex carbohydrate or starch, dietary fiber, and refined sugar), sodium, and alcohol. A recommendation is defined as a statement that gives direct dietary advice to healthy Americans. If an organization discusses an issue but states that it is inappropriate to make a recommendation for the general public, this position is noted in table 2. Recommendations for individuals at high risk for a particular disease are not included. If an organization discusses a particular dietary need or concern but did not make a specific recommendation, this is indicated in table 2.

Over half of the organizations specifically recommend a varied diet to meet nutrient needs (12, 20, 21, 28, 32, 33). Dietary Goals (34) discusses the importance of including a variety of fresh and unrefined foods to provide adequate nutrients but does not include a specific recommendation for a varied diet. AHA (9) states that their recommendations can be followed in a diet that is nutritionally adequate. The Committee on Diet, Nutrition, and Cancer (22) and ACS (2) only discuss those nutrients, such as beta-carotene and vitamins A and C, that have been linked with reduced cancer risk in some studies. They recommend eating fruits and vegetables that are good sources of these nutrients. Both these groups also recommend including cruciferous vegetables in the diet.

Most organizations recommend moderation or reduction of total fat in the diet (2, 8, 12, 22, 28, 32, 33, 34). Specific levels of fat as percent of total calories are recommended by the Dietary Goals (34), AHA (8), and the Diet, Nutrition, and Cancer (22)report. In addition, FNB's Committee on Dietary Allowances (21) suggests that fat be reduced to not more than 35 percent of dietary energy, particularly in diets of less than 2,000 calories. FNB (20) states that fat should be reduced if an individual is overweight or if energy needs are low.

Both AMA (12) and FNB (20) state that it is inappropriate to make recommendations for the healthy person about the levels or proportions of saturated and polyunsaturated fat in the diet. The Committee on Diet, Nutrition, and Cancer (22), and NCI (32) state that high-fat diets are associated with some types of cancer and that fats of all types should be reduced. The remaining organizations all recommend reducing saturated fat or avoiding too much saturated fat (8, 21, 28, 33, 34). Dietary Goals (34) and AHA (8) recommend that saturated fat provide only about 10 percent of total calories and also that polyunsaturated fat be increased to about 10 percent of total calories. The Committee on Dietary Allowances recommends an upper limit of 10 percent of dietary energy from polyunsaturated fat (21).

AMA (12) and FNB (20) conclude that recommendations concerning dietary cholesterol are inappropriate for healthy people. However, Dietary Goals (34), the Dietary Guidelines (28), the Surgeon General's Report (33), and AHA (8) suggest a reduction of dietary cholesterol or avoiding too much dietary cholesterol. The Committee on Dietary Allowances (21), the Committee on Diet, Nutrition, and Cancer (22), and ACS (2) discuss dietary cholesterol but make no recommendation. NCI (32) does not discuss dietary cholesterol.

Recommendations about complex carbohydrates are difficult to summarize because the terminology used is not consistent among the various reports. Table 2 lists the recommendations as they are stated by the organizations. Overall, seven made recommendations about dietary fiber, starch, and/or complex carbohydrates (2, 8, 21, 28, 32, 33, 34). The Committee on Diet, Nutrition, and Table 2. Summary of dietary recommendations made for healthy Americans by 10 Federal, professional, and health organizations

Title and	Nutrient	Weight		Cholesterol		
organization	adequacy	control	Total	Saturated	Polyunsaturated	
Dietary Goals for the United States, 2d edition (34) U.S. Senate Select Committee on Nutrition and Human Needs, 1977	(1)	To avoid over- weight, consume only as much energy as expended.	Reduce to 27-33 pct of total energy.	Reduce to 8-12 pct of total energy.	Intake should be 8-12 pct of total energy intake.	Reduce to 250- 350 mg/day.
Diet and Coronary Heart Disease: General Dietary Recommendations (8) American Heart Association, 1978	(1)	Balance calories to maintain ideal weight.	Reduce to 30-35 pct of total calories.	Reduce to less than 10 pct of total calories.	Up to 10 pct of total calories.	Reduce to 300 mg/day for adults.
Healthy PeopleSurgeon General's Report on Health Promotion and Disease Prevention (32) U.S. Department of Health, Education, and Welfare, 1979	Balance and vary food choices everyday.	Exercise and balance calories to maintain desirable weight.	Reduce excess intake.	Consume less.	(1)	Consume less.
Concepts of Nutrition and Health (12) Council on Scientific Affairs American Medical Association, 1979	Vary diet to increase nutri- ent adequacy.	Maintain desirable weight through dietary control and exercise.	Moderate intake regardless of source.	Proportion of satur saturated fat is no importance.	rated and polyun- ot of universal	Level in the diet is not of universal importance.
Recommended Dietary Allowances (21) Committee on Dietary Allowances Food and Nutrition Board National Research Council National Academy of Sciences, 1980	Nutrient recom- mendations are to be met by a variety of foods.	Balance energy intake with out- put to maintain desirable weight.	Reduce to not more than 35 pct of dietary energy, particularly in diets below 2000 calories.	Reduce.	Upper limit intake of 10 pct of dietary energy.	(1)
Nutrition and Your Health: Dietary Guidelines for Americans (28) U.S. Department of Agriculture and Department of Health and Human Services, 1980	Eat a variety of foods.	Maintain ideal weight. If obese, lose weight grad- ually; increase physical activity.	Avoid too much.	Avoid too much.	(1)	Avoid too much.
Toward Healthful Diets (20) Food and Nutrition Board National Research Council National Academy of Sciences, 1980	Select wide variety of foods from the major food groups.	Adjust energy in- take to maintain appropriate weight for height.	Reduce intake if overweight, or if energy needs are low.	Recommendations not warranted for the public.	Recommendations not warranted for the public.	Recommendation not warranted for the healthy person.
Diet, Nutrition, and Cancer (22) Committee on Diet, Nutrition, and Cancer National Research Council National Academy of Sciences, 1982	(1)	(1)	Reduce intake to 30 pct of total caloric intake.	Reduce intake.	Reduce intake.	(1)
Nutrition and Cancer: Cause and PreventionA Special Report (2) American Cancer Society, 1984	(1)	Avoid obesity.	Cut down intake.	(1)	(1)	(1)
Cancer Prevention (32) National Cancer Institute National Institutes of Health U.S. Department of Health and Human Services, 1984	Vary diet. Eat variety of foods every day.	Prevent being overweight; increase physical activity.	Keep intake of all fats low both saturated and unsaturated.	Keep intake of all fats low both saturated and unsaturated.	Keep intake of all fats low both saturated and unsaturated.	(1)

¹ No specific dietary advice is stated in the published report. If a group specifically stated that recommendations are inappropriate or unwarranted, this is noted.

Note: Numbers in parentheses in column 1 refer to references on pp. 23-24.

Title and		Cashahudaataa		Cadium	Alashal
organization	Starch	Fiber	Refined sugar	Sodium	Arconor
Dietary Goals for the United States, 2d edition (<u>34</u>) U.S. Senate Select Committee on Nutrition and Human Needs, 1977	Increase complex carbohydrates and naturally occurring sugar to 45-51 pct of total energy.	Increase.	Reduce to 8-12 pct of total energy.	Decrease salt intake to 4-6 g/day (1600-2400 mg/day sodium).	Keep intake moderate.
Diet and Coronary Heart Disease: General Dietary Recommendations (8) American Heart Association, 1978	Increase carbohy- drates, particu- larly complex.	Increase carbohy- drates, particu- larly complex.	(1)	Avoid excess sodium.	Keep intake moderate.
Healthy PeopleSurgeon General's Report on Health Promotion and Disease Prevention (33) U.S. Department of Health, Education, and Welfare, 1979	Consume more complex carbohy- drates.	Consume more complex carbohy- drates.	Consume less.	Consume less salt.	(1)
Concepts of Nutrition and Health (12) Council on Scientific Affairs American Medical Association, 1979	(1)	(1)	(1)	Moderate intake of salt to less than 12 g/day (4800 mg/day sodium).	Keep intake moderate.
Recommended Dietary Allowances (21) Committee on Dietary Allowances Food and Nutrition Board National Research Council National Academy of Sciences, 1980	Maintain or increase consumption of complex carbohydrates.	Moderately increase intake.	Reduce intake.	Safe and adequate range of sodium is about 1100-3300 mg/day.	For many indivi- duals, reduced in- take will assist energy balance.
Nutrition and Your Health: Dietary Guidelines for Americans (28) U.S. Department of Agriculture and Department of Health and Human Services, 1980	Eat foods with adequate starch.	Eat foods with adequate fiber.	Avoid too much.	Avoid too much.	If you drink, do so in moderation.
Toward Healthful Diets (20) Food and Nutrition Board National Research Council National Academy of Sciences, 1980	(1)	(1)	Reduce intake if energy requirement is low.	Use salt in moderation: 3-8 g/day (1200-3200 mg/day sodium).	Reduce intake if energy require- ment is low.
Diet, Nutrition, and Cancer (22) Committee on Diet, Nutrition, and Cancer National Research Council National Academy of Sciences, 1982	{*}	(1)	(1)	(1)	If consumed, do so in moderation.
Nutrition and Cancer: Cause and PreventionA Special Report (2) American Cancer Society, 1984	(1)	Eat more high fiber foods.	(1)	(1)	Keep consumption moderate, if you drink.
Cancer Prevention (32) National Cancer Institute National Institutes of Health U.S. Department of Health and Human Services, 1984	(1)	Eat foods with fiber.	(1)	(1)	If you drink, do so in moderation.

Table 2. Summary of dietary recommendations made for healthy Americans by 10 Federal, professional, and health organizations (continued)

¹No specific dietary advice is stated in the published report. If a group specifically stated that recommendations are inappropriate or unwarranted, this is noted.

Note: Numbers in parentheses in column 1 refer to references on pp. 23-24.

Cancer (22) did not believe there was enough evidence to make a recommendation about dietary fiber; however, they did suggest including whole grain cereal products, fruits, and vegetables in the daily diet.

Recommendations to reduce or to avoid too much refined sugar are made by five groups (20, 21, 28, 33, 34). The others either discuss sugar with no specific recommendation or make no mention of sugar (2, 8, 12, 22, 32).

Many of the organizations suggest either reducing or avoiding too much sodium or salt in the diet (8, 12, 20, 21, 28, 33, 34). Specific levels or ranges of sodium were specified by some of these organizations and are listed in table 2 (12, 20, 21, 34).

Finally, two recommendations that are made by most of the 10 organizations are to maintain ideal or desirable weight (2, 8,<u>12</u>, <u>20</u>, <u>21</u>, <u>28</u>, <u>32</u>, <u>33</u>, <u>34</u>), and, if alcohol is consumed, to consume it in moderation (2, 8, 12, 20, 21, 22, 28, 32, 34).

Many of the recommendations made by these organizations have been reviewed, critiqued, and in some cases endorsed by other professional associations or organizations. For example, the American Public Health Association (14) and the Society for Nutrition Education (SNE) (26) have endorsed the Dietary Guidelines. SNE (27) also endorsed the dietary recommendations included in the report of the Committee on Diet, Nutrition, and Cancer. Four of the six guidelines in the Diet, Nutrition, and Cancer report are being publicized by the American Institute for Cancer Research (10, 25).

In December 1984 the National Institutes of Health held a Consensus Development Conference on lowering blood cholesterol (<u>30</u>). The consensus panel advised that all Americans over 2 years of age adopt a diet in which total dietary fat provides no more than 30 percent of total calories, saturated fats provide no more than 10 percent of total calories, polyunsaturated fats are limited to 10 percent of total calories, and dietary cholesterol is limited to 250 to 300 mg per day. For those who are obese, reduced calorie intake was recommended.

Not all groups have supported recommendations in these reports. For example, the Council for Agricultural Science and Technology (CAST) published a series of papers (<u>16</u>), a number of which expressed concern about some sections of the Diet, Nutrition, and Cancer report. In a 1980 report, the American Council on Science and Health (<u>4</u>) concluded that it was not appropriate to make recommendations to the general public about dietary changes to reduce the risk of coronary heart disease.

In addition to the specific areas summarized in table 2, other dietary guidance recommendations have been made by these groups and others. Among them is the recommendation to use flouridated water to help prevent tooth decay (<u>11</u>, <u>20</u>, <u>21</u>, <u>28</u>, <u>33</u>). This recommendation is also supported by the American Dental Association (ADA) (<u>5</u>). For optimum dental health ADA (<u>6</u>) also recommends eating a balanced diet, minimizing snacks, and restricting consumption of sweets.

The Committee on Diet, Nutrition, and Cancer (22), and ACS (2) recommend that everyone minimize their consumption of foods preserved by salt curing and smoking. This recommendation was criticized in a number of the papers included in the CAST report (16). This report noted that only a very small proportion of the cured foods available in the United States are processed using techniques of salt curing or smoking similar to those that have been linked with increased cancer risk in populations in other countries. Most cured and smoked foods in the United States are prepared by processes that have not been linked with cancer.

The organizations listed in table 2 and others discuss the needs of special groups within the general population. Several discuss the increased nutrient needs of pregnant and lactating women (3, 12, 21, 28, 33). With the exception of iron and perhaps folacin, these increased needs are expected to be met through a balanced diet (3, 21, 28). AMA (12) and the American College of Obstetricians and Gynecologists (3) recommend a calorie level for most pregnant women that supports a weight gain of about 10 to 12 kg (approximately 22 to 26 lb) during pregnancy. Some groups suggest that pregnant women restrict alcohol consumption $(\underline{3}, \underline{13}, \underline{28}, \underline{29}).$

Those organizations making recommendations about feeding infants encourage breast feeding and advise delaying the introduction of solid foods until the infant is around 4 to 6 months of age (12, 28, 33).

Both the American Academy of Pediatrics (AAP) (1) and the AHA (35) have published information on dietary recommendations for healthy children. AAP (1) states that the safety of a diet reduced in calories, fat, cholesterol, refined sugar, and sodium, and increased in complex carbohydrates has not been established for children. AHA (35) recommends a prudent modification of the diet for children over 2 years of age, which is similar to the recommendations they made for adults.

In the last few years, osteoporosis has been recognized as a major health concern (12). In April 1984 the National Institutes of Health held a Consensus Development Conference on osteoporosis. The consensus panel concluded that osteoporosis is a major public health problem (31). One of the possible causes listed by the panel was a deficiency of calcium. The panel recommended that well before menopause, women increase their calcium intake to between 1,000 and 1,500 mg per day. This recommendation is higher than the 800 mg of calcium per day for adults currently recommended by the Committee on Dietary Allowances (21). The panel also stated that increased calcium intake may prevent age-related bone loss in men.

Dietary recommendations for healthy Americans made by Federal, professional, and health organizations are similar in most respects. All of the organizations acknowledge the importance of diet to good health. The inconsistencies in recommendations that occur reflect differences in interpretation of research results. Recommendations will be modified and refined as research enhances understanding of the relationships among specific diet components, food, and health.

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Some New USDA Charts



Chart 82

National averages for loans closed by all major lenders. Source: Federal Home Loan Bank Board.

Chart 124



Insufficient data for male householder families with no employed earner 1982 median family income data. Source: Bureau of Labor Statistics.

Chart 135

Families with Health Care Coverage by Income

% of families



Multi-

Single

Source: National Center for Health Statistics.

Cost of food at home estimated for food plans at 4 cost levels, April 1985, U.S. average

	Cost for 1 week				Cost for 1 month			
Sex-age group	Thrifty plan	Low-cost plan	Moderate- cost plan	Liberal plan	Thrifty plan	Low-cost plan	Moderate- cost plan	Liberal plan
FAMILIES								
Family of 2:2								
20-50 years	\$37.40	\$47.10	\$57.90	\$71.60	\$161.80	\$203.90	\$251.10	\$310.20
51 years and over	35.30	45.10	55.40	66.00	153.10	195.40	240.00	286.00
Family of 4:								
Couple, 20-50 years and children								
1-2 and 3-5 years	54.40	67.60	82.50	100.80	235.40	293.10	357.60	436.90
6-8 and 9-11 years	62.40	79.60	99.20	119.20	270.40	344.90	430.30	516.60
INDIVIDUALS ³								
Child:								
1-2 years	9.80	11.80	13.80	16.50	42.40	51.30	59.70	71.70
3-5 years	10.60	13.00	16.10	19.20	45.90	56.40	69.60	83.20
6-8 years	13.00	17.20	21.50	25.10	56.40	74.60	93.20	108.80
9-11 years	15.40	19.60	25.10	29.00	66.90	84.90	108.80	125.80
Male:								
12-14 years	16.20	22.20	27.60	32.40	70.10	96.30	119.70	140.40
15-19 years	16.80	23.10	28.50	33.00	72.80	99.90	123.30	142.90
20-50 years	17.90	22.80	28.40	34.20	77.40	98.70	123.30	148.20
51 years and over	16.20	21.60	26.50	31.60	70.30	93.60	114.70	137.10
Female:								
12-19 years	16.10	19.20	23.20	28.00	69.60	83.40	100.70	121.40
20-50 years	16.10	20.00	24.20	30.90	69.70	86.70	105.00	133.80
51 years and over	15.90	19.40	23.90	28.40	68.90	84.00	103.50	122.90

¹Assumes that food for all meals and snacks is purchased at the store and prepared at home. Estimates for the thrifty food plan were computed from quantities of foods published in <u>Family Economics Review</u>, 1984 No. 1. Estimates for the other plans were computed from quantities of foods published in <u>Family Economics Review</u>, 1983 No. 2. The costs of the food plans are estimated by updating prices paid by households surveyed in 1977-78 in USDA's Nationwide Food Consumption Survey. USDA updates these survey prices using information from the Bureau of Labor Statistics (<u>CPI Detailed Report</u>, table 3) to estimate the costs for the food plans.

²10 percent added for family size adjustment. See footnote 3.

³The costs given are for individuals in 4-person families. For individuals in other size families, the following adjustments are suggested: 1-person--add 20 percent; 2-person--add 10 percent; 3-person--add 5 percent; 5- or 6-person--subtract 5 percent; 7- or more-person--subtract 10 percent.

Consumer Prices

Consumer Price Index for all urban consumers [1967 = 100]

Group	Apr. 1985	Mar. 1985	Feb. 1985	Apr. 1984
All items	320.1	318.8	317.4	308.8
Food	309.6	309.7	309.5	302.3
Food at home	297.7	298.4	298.6	292.8
Food away from home	343.9	342.6	341.4	330.9
Housing	345.9	344.7	343.6	333.2
Shelter	375.9	374.3	373.3	357.8
Rent, residential	260.4	259.2	258.4	246.4
Fuel and other utilities	388.7	388.2	386.5	380.9
Fuel oil, coal, and bottled gas	623.5	620.8	623.4	650.7
Gas (piped) and electricity	445.9	445.5	443.3	432.3
Household furnishings and operation	247.9	246.9	246.2	242.3
Apparel and upkeep	205.9	205.3	201.8	199.2
Men's and boys'	197.4	195.2	192.8	190.6
Women's and girls'	170.0	169.9	164.1	163.2
Footwear	213.2	213.1	210.1	208.9
Transportation	320.0	316.7	314.3	309.6
Private	314.6	311.0	308.7	304.8
Public	398.0	397.3	394.4	377.1
Medical care	398.0	396.5	393.8	375.7
Entertainment	263.3	262.2	261.3	253.8
Other goods and services	321.8	321.1	320.5	302.8
Personal care	279.8	278.7	278.2	268.9

Source: U.S. Department of Labor, Bureau of Labor Statistics.

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Highlights

Measurements of Family Income Female Farm Landlords Major Family Concerns New Nutrient Data Base Dietary Recommendations