



ADDENDUM TO NWA'S 2018 RESEARCH NEEDS ASSESSMENT

NWA publishes a periodic Research Needs Assessment.

The goal of the Research Needs Assessment is to identify research areas that support NWA and WIC programs nationwide to (1) be responsive to emerging issues and (2) continue to explore, demonstrate and integrate evidence-based practices that improve the health and well-being of low-income families.

The most recent NWA Research Needs Assessment was published in 2018. In light of both the current global COVID-19 pandemic and NWA's commitment to encouraging research that is responsive to emerging issues, this document provides focused priority areas for WIC research and evaluation to unpack the impact of COVID-19 on WIC programs and participants. In addition, the research and evaluation priorities presented in this document would inform program management decisions, policy recommendations and advocacy.

NWA recognizes that state and local WIC programs conduct research and evaluation to varying degrees and in a number of different ways. For example, many agencies have built strong collaborative partnerships with academic institutions and some state agencies have epidemiologists and analysts on staff who can leverage routine data and drive research projects. There is also an active community of non-profit and academic researchers who conduct research on WIC. This document is designed to help WIC programs, academic researchers and non-profit organizations focus on the most pressing research questions, in light of COVID-19, to inform WIC program and policy developments. To support research collaborations between these different stakeholders, NWA published [this guidance](#) for planning, conducting and communicating a WIC research project. The information in this guidance remains valuable and relevant to research and evaluation that assesses the impact of COVID-19 on WIC.

In addition to guidelines to build capacity for research and evaluation, access to research and evaluation tools would be valuable to many WIC agencies. Examples of the types of tools and support that would be valuable include:

- » Participant satisfaction survey questions/instruments
- » Data visualization to understand emerging trends
- » Examples of reports that different MIS systems can produce



As was true prior to COVID-19, it is important to note that the way WIC operates from state-to-state varies. Although responding to the same pandemic, different state and local WIC programs responses were designed to meet the specific needs of the participants they serve. Many agencies had been providing aspects of their WIC services, such as nutrition education and breastfeeding support, remotely for a number of years. When considering research on the impact of a global phenomenon, it is crucial to consider both state and local specific contexts as well as a national perspective on the impact of COVID-19 on WIC. The areas of focus identified in this document will assist in building out local context for WIC service delivery, while also adding the national landscape of WIC throughout the pandemic.

In addition to the four areas of interest outlined below, there is an ongoing need to provide evaluation guidance and support to state and local WIC agencies. Prior to the COVID-19 pandemic, NWA made a commitment to integrating health equity into all areas of our work and supporting NWA members to consider their work through an equity lens. The Board of Directors published a [Health Equity Statement](#). Our integration of equity extends to research and evaluation. NWA encourages all researchers and evaluators to consider the equity implications of not just the outcomes of research (i.e. who is being impacted and why, contextual factors etc.), but also of the processes chosen to conduct research and evaluation. There are a number of reputable resources that may be helpful to further explain [equitable evaluation](#) and support practices for [partnership based research](#).

The pace at which the WIC program has had to adapt to change since early March 2020, as a result of the COVID-19 pandemic, has been unprecedented. As a result, there are new program delivery models that are accompanied by a new set of barriers and enablers to WIC participation. Research that explores the topics outlined below, will help broaden our understanding of the impact of COVID-19 and inform policy recommendations and program level decision making that strengthen and support WIC.

1. SYSTEMS LEVEL INNOVATION

Systems level innovations enable WIC programs to leverage other programs and services that support the population WIC serves. Policies and procedures that support system level innovation can enhance WIC program capacity to ensure families are receiving the support they need to access a range of services that promote health and wellbeing.

WIC is central to a constellation of programs that support low-income pregnant women, caregivers, infants, toddlers and young children. There are policies and procedures that can support and enhance system level innovation. Examples of such policies and procedures range from data sharing agreements/systems between health care providers and WIC to patient navigators to support streamlined referrals across programs, and leveraging non-emergency medical transportation (NEMT) to transport WIC participants to clinics.

These systems are the context within which many WIC programs have been operating throughout the COVID19 pandemic. It is important to consider the impact that systems level innovations have had on WIC service delivery throughout the pandemic, while also considering if the sudden shift in how WIC services were being delivered was a catalyst for new systems level innovations to be established. Specific focus questions for future research include:

- » How has the experience of WIC programs with specific existing system level innovations differed from programs that do not have system level innovations?
- » Have new systems level innovations been initiated to overcome service delivery challenges presented by COVID-19?
- » What are appropriate impact measures to evaluate specific systems level innovations? For example, in communities where WIC and pediatricians had strong referral systems in place, what has the impact of reduced Well Child visits been on the immunization rates of children participating in WIC?

» SOME MEASURES FOR WIC PARTICIPANTS INCLUDE:

- » Participant satisfaction;
- » Perceived customer service;
- » Perceived value of WIC;
- » Perceived ease of enrolling in WIC;
- » Perceived ease of accessing WIC benefits;

» SOME MEASURES FOR WIC STAFF INCLUDE:

- » Perceived ease of enrolling participants;
- » Perceived ease of issuing WIC benefits;
- » Enhanced capacity for remote nutrition education
- » Enhanced capacity for providing social support and referrals

- » What enables some WIC programs to establish systems level innovations?
- » What barriers prevent some WIC programs from establishing systems level innovations?
- » What were the most common system level innovations in WIC prior to the COVID-19 pandemic?

2. BEHAVIORAL IMPACTS

The impact of WIC participation is an ongoing area of focus for WIC research. In light of COVID-19, it is imperative to explore whether the different methods of program delivery impact program outcomes. Specific areas of interest include:

- » Breastfeeding initiation and duration rates.
- » Redemptions of WIC food benefits.
 - » Which foods are WIC participants redeeming/not redeeming?
- » Food security status
- » How have redemption of WIC benefits been affected by other food assistance programs (e.g., SNAP)?



3. UNDERSTANDING CHANGES TO WIC CASELOAD

Prior to COVID-19, WIC had been experiencing a decrease in participation. Research prior to COVID-19 explored the barriers to WIC participation and found numerous factors that impact WIC participants' ability and desire to participate in WIC. Examples of commonly noted barriers included transportation, lack of referrals from other health providers and misconceptions about the WIC and eligibility.

To explore the impact of COVID on WIC caseload, we recommend research that explores the following issues:

- » Changes to the number of WIC-eligible people since March 2020.
- » Changes in the proportion of eligible people participating.
- » Changes to WIC caseload.
 - » Are increases due to new participants joining or existing participants remaining on the program for longer?
 - » Are newly eligible people accessing WIC?
 - » What are the demographics of new participants?
- » Has COVID-19 had an impact on retention?
 - » Are participants who were already enrolled in WIC participating for longer?
 - » Are participants new to the program since COVID-19 continuing to participate once enrolled?
 - » Are any participants returning to WIC after a 3-month or 6-month or more gap in enrollment?
- » Which aspects of the program are new and existing participants engaging with?
- » How has outreach to eligible participants changed in light of COVID-19?

4. OPERATIONALIZING OF WAIVERS

USDA-offered waivers have enabled WIC programs to change the way services are delivered through the pandemic, ensuring that WIC participants can access the program safely. The flexibilities provided through waivers provide insights into the value of certain potential policy changes that would increase participant choice and support an improved WIC participant experience.

- » Which waivers did state agencies pursue?
- » Where there any gaps in waivers? (i.e., were there any program flexibilities that were not supported by USDA?)
- » What are the different ways that waiver flexibilities have been implemented across WIC state or local agencies?
- » What were the impacts of waivers that changed WIC clinic processes, e.g., certifications, nutrition education etc.?
- » What was the impact of the retail-based waivers/ waivers to the food package?
- » How did waivers that enabled telehealth impact service delivery and program participation?
 - » How were staff trained?
 - » Were there any barriers preventing participants from accessing telehealth?
- » Do waivers reduce barriers to accessing WIC?
- » Were specific populations or geographic areas impacted differently by waivers?
- » Does the need for technology to support remote participation in WIC present issues to equitable access?

In conclusion, different types of WIC research that explore systems level innovation, behavioral impacts, changes to WIC caseload and how waivers were operationalized, could inform future program enhancements and ensure WIC can reach all eligible families.