

Retention of Participants Through the First Five Years

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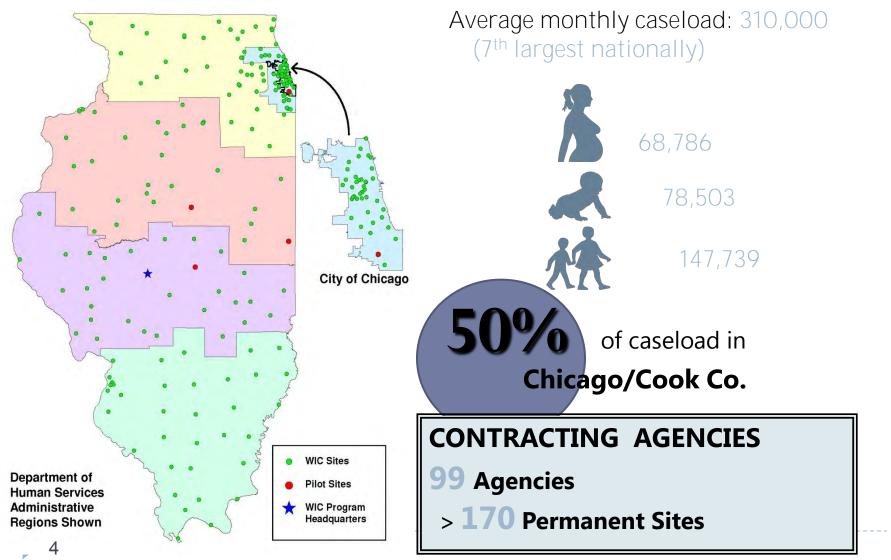
Outline

- Background and purpose
- History of project and formative research
- Description of the WIC to 5 program
- Evaluation results to date
- Agency experiences and perspective

Background and Purpose

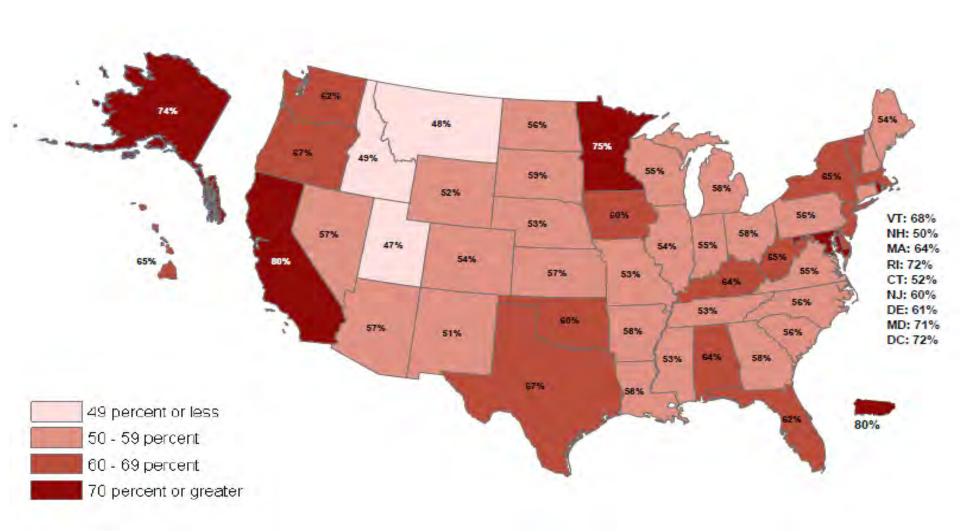
- WIC to 5 is a collaboration between the Illinois WIC program and researchers at the University of Illinois-Chicago, Department of Kinesiology and Nutrition to increase participation and retention of eligible children in WIC.
- Four WIC agencies across the state have been selected to pilot the program (Roseland Hospital, McLean County WIC, Macon County WIC, and Vermilion County WIC) and will be the first to implement this important project.
- Provide an overview of program design, training, and evaluation.

Overview of IL WIC Program

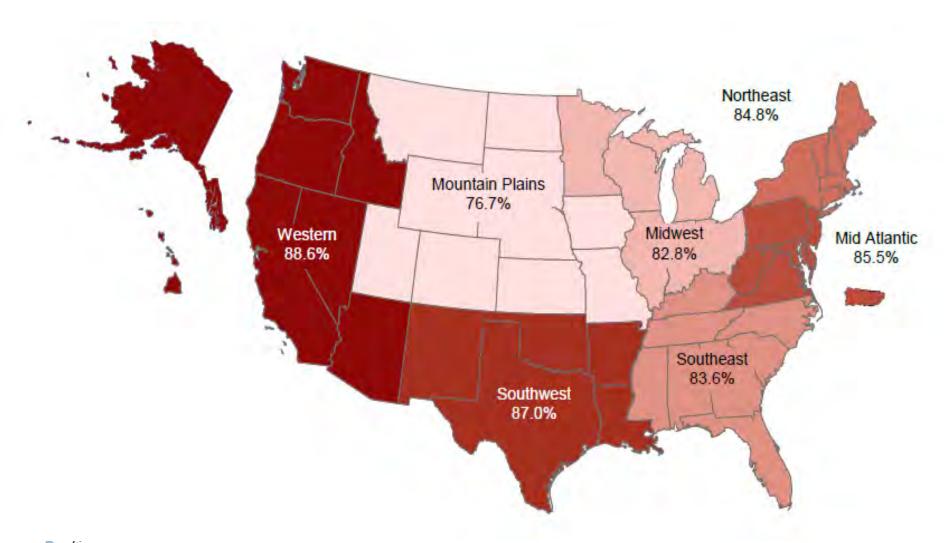


Source: IL WIC Data SFY2011

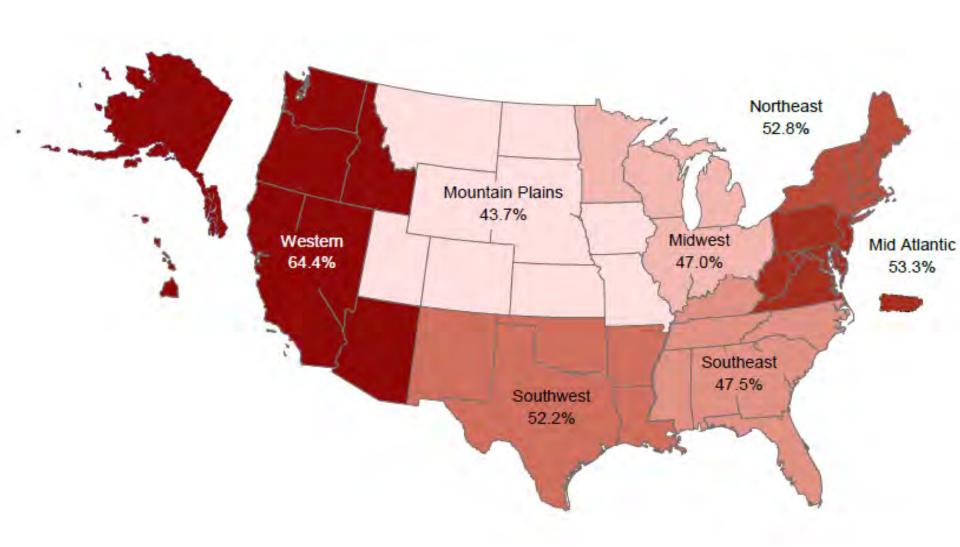
WIC Coverage Rates for All Participants by State, 2010



WIC Coverage Rates for Infants by FNS Region, 2010



WIC Coverage Rates for Children by FNS Region, 2010



Illinois WIC Retention Project

- ▶ 2011-2012 Formative Research
 - Focus groups, interviews, surveys
- ▶ 2013 WIC to 5 Program Development
- ▶ 2014 Pilot Program Launch and Evaluation
- 2015 Statewide Launch

Formative research methods

<u>Data Type</u> Participants	Focus Groups	Online Surveys (n)	Interviews (n)
WIC Staff	2 (n=23)	13	19
WIC Coordinators		66	4
Vendors			24
Head Start Staff		18	12
Current WIC Guardians	2 (n=17)		30
Former WIC Guardians			22
Health Care Providers	In process	26	
Total	40	123	111 N=

Barriers

Mentioned by caregivers, WIC staff, and vendors

WIC Families (individual level barriers)

Perceived value of the food package Hectic/busy lifestyles Access to other food benefits Multiple jobs/ looking for work

Issues at the WIC clinic

Difficulty scheduling/rescheduling
Long wait times
Too much paperwork
Unwelcome clinic environment
Staff judgment

Issues at WIC Vendors

Difficulty using food instruments Negative interactions with cashiers Stigma from other customers

Community level barriers

Lack of awareness about WIC eligibility
Transportation issues
Unsupportive physicians
Availability of food items

Facilitators

Mentioned by caregivers and WIC staff

- Friendly or helpful WIC staff
- Expands the family food budget
 - SNAP is never enough
 - ▶ For some: "WIC is the only help I get"
- New (since 2009) fruit and vegetable vouchers
- Integrated services at some sites
 - Immunizations, dental care, food centers (Chicago only)
- Appointment reminders
- Welcoming clinic environment/ fun for kids
- Interesting/ useful nutrition education sessions

Suggested Solutions Mentioned by caregivers, WIC staff, and vendors

AGENCY

Tailored messaging Sell WIC campaign Participant incentives Automated text reminders "Get to Know WIC Staff" photo board Tailor education based on WIC experience Waiting room video



COMMUNITY

Public education campaign
Grocery delivery
Mobile clinic
Linkage with other services
Partner with healthcare
and childcare providers

<u>VENDOR</u>

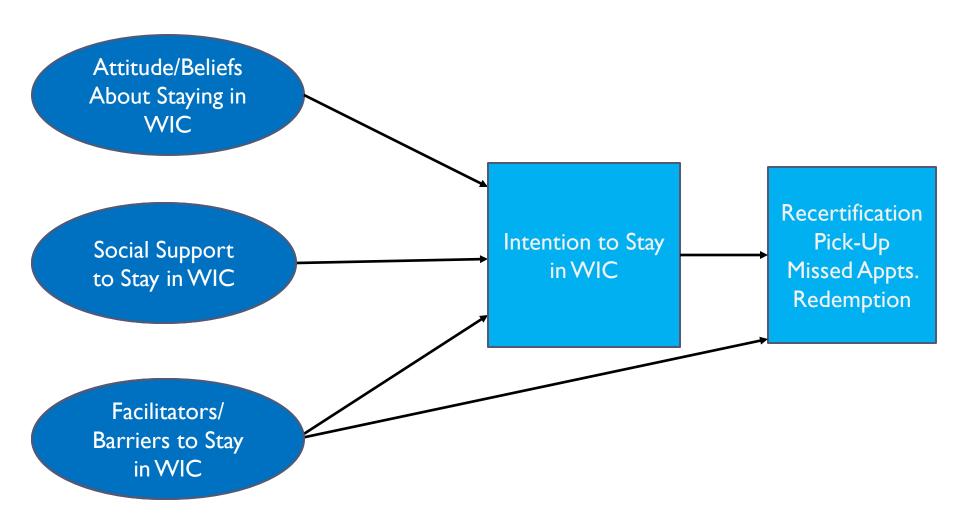
Vendor Training
WIC grocery store tour
Switch to EBT
Improved WIC labeling

Goals of WIC to 5

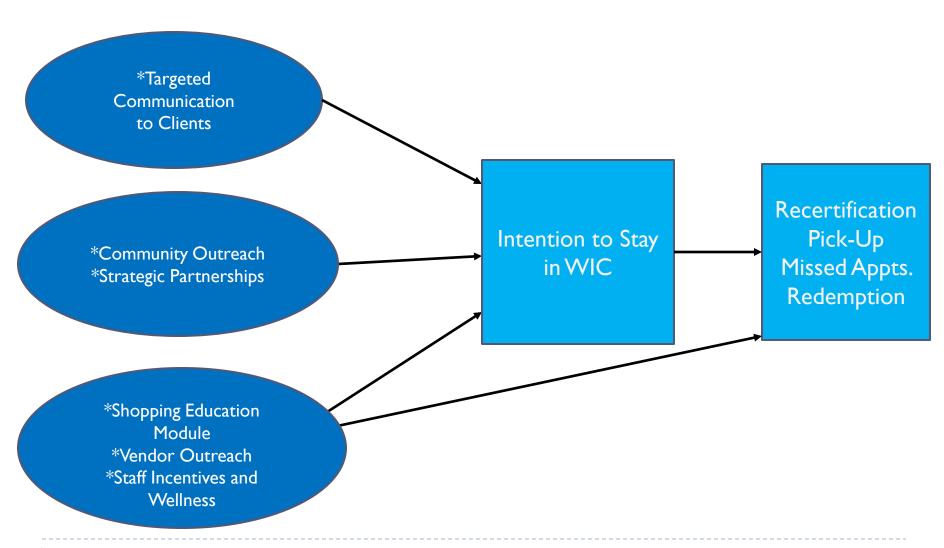


- Raising Client Awareness of WIC Eligibility and Benefits
- Increase Staff Incentives and Promote Staff Wellness
- Increase Image/Understanding of WIC among Health Care and Child Care Providers
- Provide Outreach and Potentially Training for Vendors

WIC to 5 Model (Theory of Planned Behavior)



What is Included? (Theory of Planned Behavior)



What is Included?

Targeted Communication

- Increase Perceived Value of the WIC Food Package.
- Increase Awareness about WIC Eligibility.
- Promote Trust and Reduce Perceived Judgment from WIC Staff.

Community Outreach

Increase Awareness About and Perceived Value of the WIC Program Among Family Members, Community Leaders, and Other Service Providers (In Process).

What is Included?

Strategic Partnerships

 Increase Perceived Value of the WIC Program Among Physicians and Child Care Providers

Shopping Education Module

- Reduce Barriers Associated with Shopping.
- Improve Recognition of WICeligible Foods and Package Sizes.
- Reduce Perceived Stigma
 Associated with Redeeming WIC
 Checks.

What is Included?

Vendor Outreach

Improve Relationships between
 WIC Clients, Cashiers, and Store
 Managers (In Process)

Staff Incentives and Wellness

- Increase Perceived Value of Staff.
- Reduce Staff Stress.
- Improve Staff Perceived Efficacy to Retain Clients.

WIC to 5 Key Messages



Save

Helps our family save money.

Nourish

Provides nutritious foods kids need.

Grow

Supports healthy growth and development

Connect

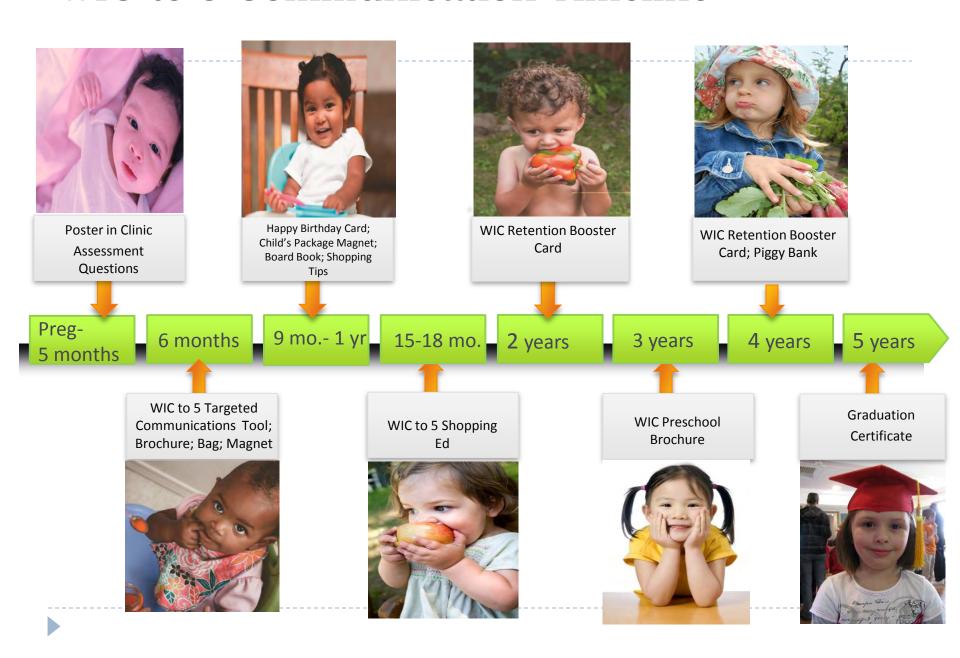
Links families with other programs, providers, and resources.

Learn

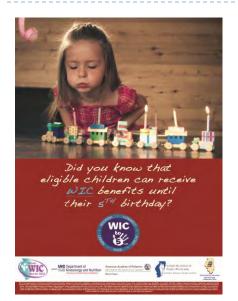
Free advice and counseling from caring staff.

Targeted Communication to Clients about Retention

WIC to 5 Communication Timeline



Posters









6 month follow-up visit





Take 5 for WIC to 5
Brochure

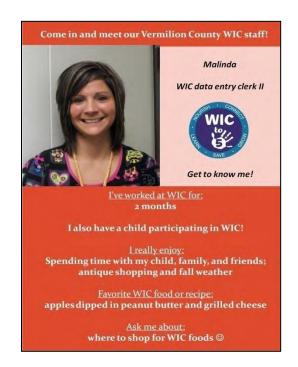


- •WIC isn't just for moms and babies.
- •The brochure you were given describes 5 benefits WIC provides as your child gets older.
- •Review Question 1 (WIC eligibility question) from brochure with participant.
- •Review Question 2 (Reasons to stay in WIC) from brochure with participant.
- Input response into WCVE.

Take 5 for WIC to 5
Targeted Communication
Tool/Flip Book

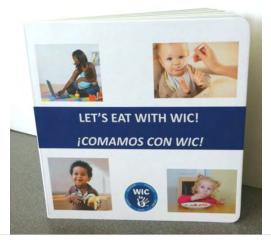
6 month follow-up visit





Get To Know You materials

1 Year of Age





Board Book about WIC Foods



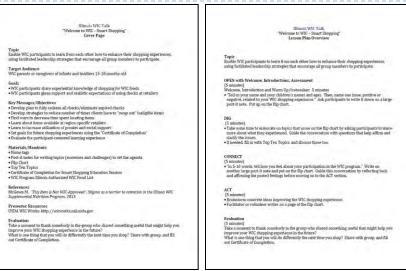
Child Food Package Magnet

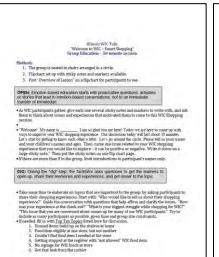


WIC Shopping Tips

Shopping Education Module

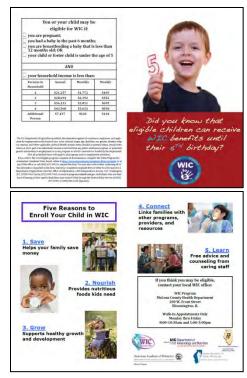
- Utilizes WIC Talk format and facilitated leadership principles
- Takes approximately 30 minutes
- Focuses on clients discussing shopping barriers and empowering them to come up with their own strategies





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Community Outreach



Outreach Brochure



Outreach Poster

Target outreach sites: Community Family Resource Centers, churches, SNAP offices, food banks, other agencies and service providers

Strategic Partnerships

American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN"

Illinois Chapter





- Pocket guide for health care providers
- Handbook for childcare providers
- Online newsletter content
- Continuing education credits via webinar
- Package for offices: posters, band aids, outreach brochure

Staff Incentives and Wellness

- Tote bags, water bottles, pedometers, and other incentive gifts selected by sites
- Incentive program developed by WIC coordinators
- Wellness newsletters
- Empowerment training for WIC coordinators (In Process)



WIC to 5 Program Evaluation

WIC to 5 Logic Model

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Staff Time

Client Incentives

- •Client Materials
- Staff Incentives
- Provider materials

•Staff Training

•Staff Incentive Delivery

- Posters
- •Conversations with clients
- •Deliver client incentives and materials
- •Physician packages and training
- •Child care packages and training

•WIC staff receive WIC to 5 training

- •Clients see WIC to 5 poster in WIC agency waiting room
- •Clients receive WIC to 5 brochure, bag, and magnet and discuss benefits to staying in WIC at 6 months recertification appointment
- •Clients receive child food package magnet, board book, and birthday card at 12 month appointment
- •Clients attend nutrition education module on shopping
- •Clients discuss with staff concerns about retention at 2 year appointment
- •Clients receive WIC to 5 pamphlet at 3 year appointment
- •Clients discuss with staff progress while in WIC and plans for after WIC participation ends at 4 year appointment
- •Clients receive WIC graduation certificate at 5 years
- •WIC agencies implement incentive program
- •Childcare providers and physician offices hang posters
- •Childcare provider staff/director read handbook and newsletters; attend webinar
- •Physicians and office staff/manager read pocket guide and newsletters; attend webinar
- •Childcare providers and physicians talk to parents/caregivers about keeping child enrolled in WIC

hort-Term Outcomes

•Improved client attitudes, social norms, and self-efficacy related to attending WIC appointments and nutrition education, picking up WIC checks, shopping with WIC checks and redeeming WIC checks

- •Increased staff empowerment
- •Improved physician and child care providers' attitudes toward the WIC program

Long-Term Outcomes

•Increased duration of participation in WIC
•Increased likelihood of remaining in WIC until 5 years of age.
•Increased percentage of eligible children aged 1-5 years enrolled in WIC

Outcome Evaluation Plan

Longitudinal Survey for WIC Clients

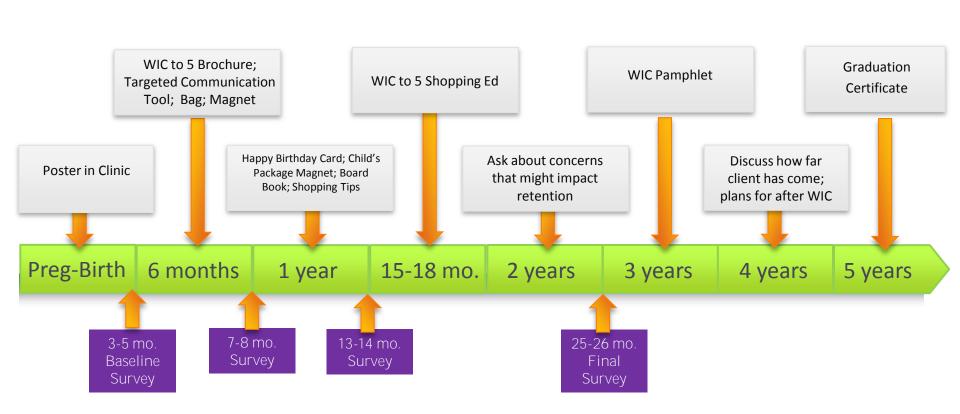
- Recruit ~30 mother/child dyads from 4 pilot agencies and 3 control agencies for longitudinal survey
- Longitudinal survey includes:
 - Demographics and dyad/household characteristics
 - Theory of planned behavior questions to assess attitudes, social norms, perceived behavioral control, and intention
 - Potential modifiers including food security, infant feeding, perceived stress, food values, household organization, and hardship
 - Some process evaluation questions

Empowerment Survey for WIC Staff

All staff at pilot and control agencies

Match survey responses to administrative data for program participation outcomes

WIC to 5 Evaluation

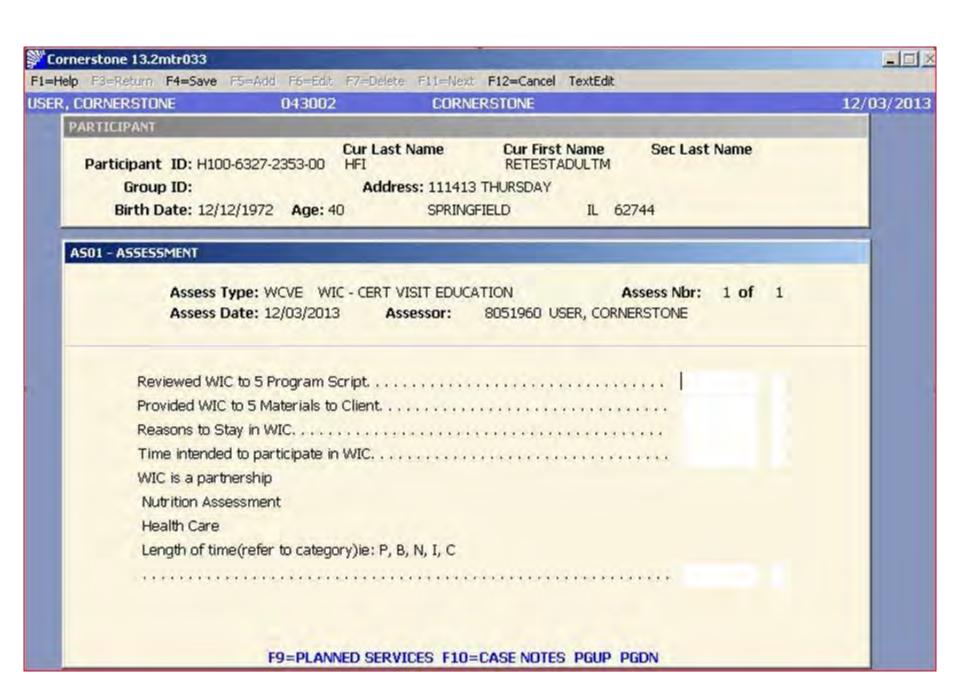


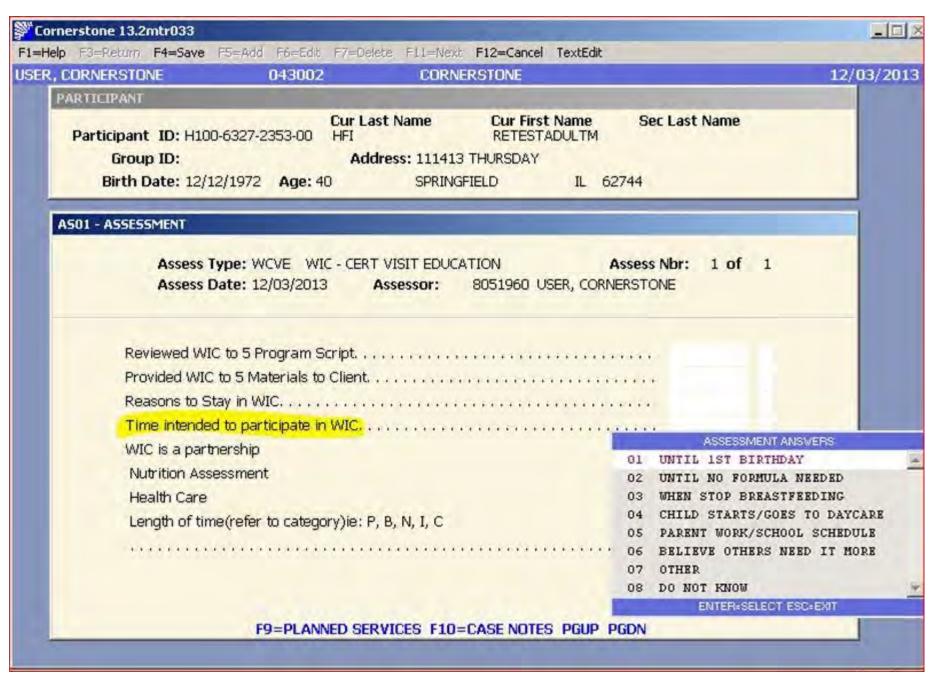
Process Evaluation Plan

- Collect ongoing program data from MIS database
- On-site observations
 - WIC Waiting Room
 - Counseling sessions with WIC CHP
 - Provider offices
 - Community outreach sites
- After visit client polling
- Focus groups with WIC staff

Recording Program Data in MIS (Cornerstone)

- 2 questions added to evaluate program delivery
- I question added to assess intended duration of participation
 - Asked at pregnancy, early postpartum, infants <6 months, and infants at 6 month follow-up
- I question added to assess reason to stay in program





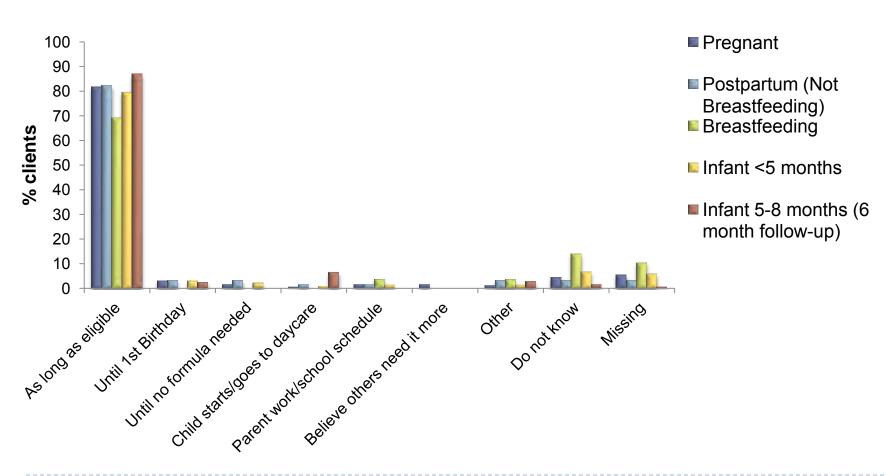
Results to Date

- February 2014 program launch
- Posters hanging in clinic
- Delivery of 6 month brochure and targeted communication; 349 clients
- Asking pregnant, postpartum, breastfeeding, and infants < 6 months how long they intend to stay in the WIC program; 517 clients

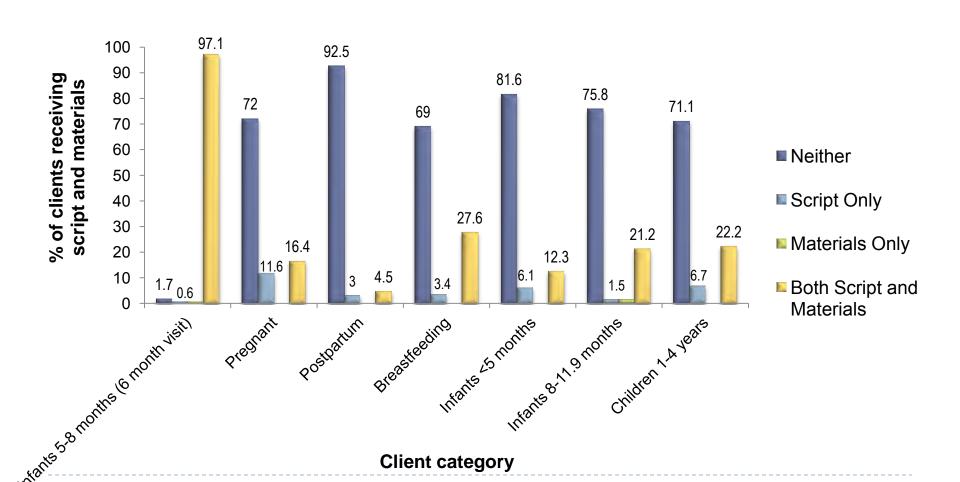
Client Characteristics

Client Characteristics	n (%)
Client Type	
Pregnant	207 (19.7)
Postpartum	67 (6.4)
Breastfeeding	29 (2.8)
Infants <5 months	244 (23.2)
Infants 5-8 months	349 (33.2)
Infants 8-11.9 months	118 (11.2)
Children 1-4 years	303 (28.8)
Ethnicity	
Hispanic or Latino	125 (11.9)
Not Hispanic or Latino	927 (88.1)
Race	
American Indian/Alaskan Native	1 (0.1)
Asian	5 (0.5)
Black or African American	414 (39.4)
White	632 (60.1)
Total	1052

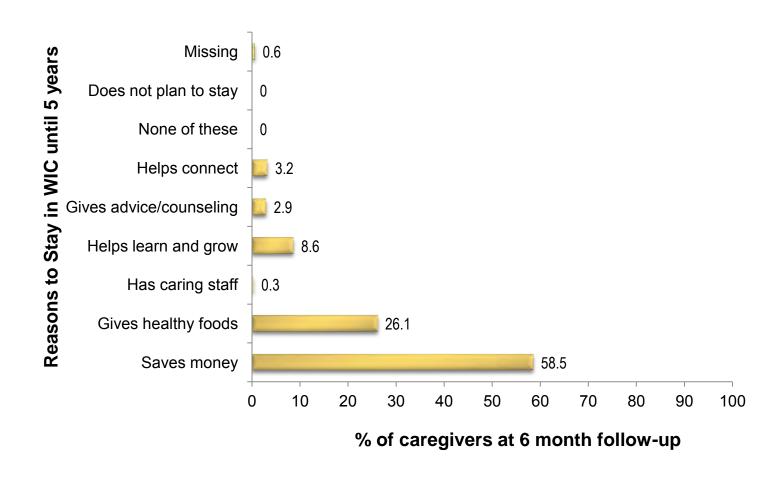
Intended duration of WIC participation



Delivery of 6 month targeted communication



Reasons to Stay in WIC



The Local Agency Experience - Summary

- What are we doing to improve caseload
- How WIC to 5 has helped
- ▶ How we are doing with WIC to 5
- What have we found

Caseload

How do we get them here? How do we keep them coming back?

Caseload

Outreach

- Community partnerships: health fairs; committees; networking events
- Program awareness: flyer to local agencies, doctor offices, daycares, schools
- Visibility: promotional materials displayed in the community

Schedule changes

- Walk-ins
- Late Monday clinic
- Saturday clinic

Welcoming clinic environment: Hospitality on a limited budget

- Check in desk warm and welcoming staff
- De-clutter
 - Display only YOUR messages
 - Have an alternate place for community information
- Tidy waiting room
 - Clean up at noon and end of day
 - ▶ Torn books/magazine get rid of them

Customer service

- Efficient quality service
 - Most important topic for today
 - Participant centered services
- Staff training and development provide tools to be confident educators
- Staff recognition staff that feels supported and appreciated provide better service

Ways WIC to 5 has helped

- Collaboration brought us together to share ideas
 - Local agency ideas taken into consideration
- Tools simple effective tools to discuss benefits of WIC
- Marketing/promotion visuals/posters
- Incentives participants and staff
 - McLean County Staff Recognition Program
- Onsite training

Roseland Hospital WIC Program











How are we doing with WIC to 5?

- It really doesn't take a whole lot of extra time.
- It is an additional way to have participant centered conversations.
- It is a reminder to talk about benefits of WIC at each visit.

What we have found

- People have been missing the message that their child can be in WIC until 5 years of age (certifications, Family Case Management, closing visits)
- Misunderstand the value of the WIC food package WIC to 5 illustrations help here
- Participants are receptive to WIC to 5 messages

Acknowledgements

Illinois Department of Human Services

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- Karen Shiflett, Macon County
- Cheryl Sprague, BS CLC, Vermilion County
- Sharon Johnson-Jadeja, Roseland Hospital, Chicago
- Patrice Hughes, Roseland Hospital, Chicago

Next Steps

- Complete a fotonovella (compared to brochure)
- Revising child care provider materials to highlight synergy between Head Start nutrition guidelines and WIC.
- Work with vendors on WIC to 5 vendor/cashier training.
- Develop an WIC community outreach kit.
- Development of targeted communication tools/materials for after 2 years.

Questions?