

## Public Health Foundation Enterprises, Inc.

### A. Abstract

The selected funding objective for this project is Child Retention with the goal being *to increase the number of children that recertify for WIC*. This project supports two Family Support Coordinators (FSCs) at two WIC sites who will contact and case-manage families with 9 - 11 month old infants to improve their WIC retention by facilitating their twelve month recertification. Within the first 3 months of the project, each FSC will hold two focus groups in the two targeted WIC sites with moms that have been receiving WIC services for an extended period of time to learn more about what has kept them returning to WIC. The FSCs will also complete asset mapping (in depth resource and referral assessments) for the communities surrounding the targeted WIC sites to be better able to connect families with the resources they need. As the FSCs contact families, they will undoubtedly encounter difficult situations that require much support. Asset mapping will help prepare the FSCs to refer families to needed resources and services (food banks, child care, mental health services, housing, spousal abuse, etc.).

The FSCs will support their case-managed families by providing in-depth personalized support by answering their questions, reinforcing the value of WIC and streamlining their WIC services by offering choices and options (online education, communication by texting, evening and Saturday appointments, etc.). Home visits will be provided as needed. During this project, the FSCs will also identify barriers to WIC services; the solutions to which can be expanded both program-wide and statewide.

This project includes both an outcome evaluation and a process evaluation. The primary outcome evaluation objective of this project (Objective 1.3) is to determine the impact of FSCs on the retention of children on the program. This will be operationalized by measuring recertification rates of one-year-olds as they transition from certification as an infant to certification as a child. Two PHFE WIC sites will be selected as FSC intervention sites and two additional sites that will act as control sites.

In addition to the outcome evaluation, numerous process and implementation objectives will be accomplished. The first of these is the identification of barriers to recertification. Data will be gathered both through focus groups in the first three months of the study, as well as ongoing by FSCs who will keep logs of reasons participants fail to recertify and reasons participants share that make it difficult to recertify.

The key personnel for this project will be Sharen Anthony, Project Coordinator/Senior Nutritionist and two FSCs (promoted from current WNA staff). Dr. Shannon Whaley will lead the evaluation activities (in-kind); Mike Whaley (no relation – in-kind) will lead all data collection strategies and Judy Gomez, MPH, RD (in-kind) will provide program guidance and support.