# Final Report - WIC Dynamics 

## Volume 2

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## Section 1

## Study Design and Methodology

WIC Dynamics is a study of the impact of participation growth associated with infant formula rebates, new legislative and regulatory requirements, and economic factors that occurred since 1988. The focus of this research is on local WIC agencies' decisions to implement certain procedures or to modify practices between 1988 and 1993.

## Sampling

Surveys. When designing the sample, it was necessary to use the local agency as the unit or analysis, and at the same time estimate the number of participants who were affected by the changes in practices and procedures. To do this, the sample was selected with probabilities proportional to the square root of the number of participants. The determination of the exact number of agencies to be sampled was based on the need to obtain adequate precision for categorical variables. It was determined that a sample of 250 respondents would provide such precision, but that a certain leeway was necessary to account for nonresponse and to guard against too optimistic a view of the stratification. The sample was therefore set at 300 local agencies.

The 13 largest agencies (all agencies with more than 30,000 participants) were first sampled with certainty. Then the agencies were sorted by overall growth, timing of growth, region, and within region in descending order of size. The square root of the population was calculated for each agency and the square roots were added. The total was divided by 287 (the number of noncertainty agencies to be sampled), and this ratio became the interval size. At this point it was verified that no agency's size measure (square root of the participant total) exceeded the interval size. The cumulative sum of the size measures was obtained for each agency, thus defining a segment for each agency. The agency in whose segment the starting point fell was sampled. Then one interval was added to the starting point and the segment in which that number fell determined the next sampled number. This process was repeated, so that in the end 287 noncertainty agencies were sampled.

Case Studies. The case study design required a sample of 22 local agencies as heterogeneous as possible. Agencies were selected across all regions and at least one agency per region had to have been included in a prior Food and Nutrition Service (FNS) case study on administrative and funding procedures. The local agencies were selected with the intention of presenting contrasts in terms of possible operational reactions to the various legislative, regulatory, and administrative initiatives between 1988 and 1992. In addition, we tried to include agencies that demonstrated growth during this time, as well as agencies that remained relatively stable or decreased in participant size.

## Data Collection Procedures

Seven data collection instruments were used to collect the data needed to answer the study questions:

- State Agency Mail Survey
- Local Agency Mail Survey
- Local Agency Interview Guide
- Local Health and/or Social Service Provided Interview Guide
- Observation Checklist for Individual Nutrition Education Sessions
- Observation Checklist for Group Nutrition Education Sessions
- WIC Record Review Form

Surveys. The WIC community, including the National Association of WIC Directors (NAWD) Research Committee, State and local representatives who participated in a discussion group at the 1991 NAWD meeting held in Washington, D.C., and several State and local WIC directors made substantial input into the development of the survey instruments. This was done to ensure that the instruments captured relevant information and that it was feasible for respondents to provide valid and reliable responses. The State Agency Survey was sent to all State agencies and tribal organizations that administer the WIC program nationally. The Local Agency Survey was sent to a sample of 300 local agencies. Those agencies that did not respond within 3 to 4 weeks were sent a postcard reminding them to complete the survey. In addition, reminder telephone calls were made by Macro staff, and if necessary, by FNS staff (to the State agencies) or State staff (to the local agencies). As a result, we obtained a 91 percent response rate from the State survey, and 95 percent response rate from the local agency survey.

When the completed surveys were received, the data was entered into a computer file, an edit program was run to identify data errors and missing data, and extensive follow-up telephone calls were made to obtain the missing data and resolve discrepancies. Once the data was cleaned, the analysis tables were produced.

Case Studies. The Local Agency Interview Guide and Local Health and/or Social Service Provider Interview Guide were designed to supplement and add in-depth, qualitative dimension to the information obtained in the State and local surveys. A sample of 22 sites were selected for on-site observation and discussions with agency staff. Prior to visiting these sites, the regional office and State WIC agency were contacted, and site visit appointments were made. Not all questions in the guides were asked of all respondents. Only those questions appropriate to the staff member's functions and responsibilities were asked. The primary focus of the Local Health and/or Social Service Provider Interviewer Guide was on coordination of services, while the Local Agency Interview Guide covered local agency operations, service coordination and integration, and nutrition services.

The Observation Checklist for Individual Nutrition Education Sessions and the Observation Checklist for Group Nutrition Education Sessions were used to record observations by study team staff during nutrition education sessions. Finally, the WIC Record Review Form was used to abstract information documenting nutrition education and certification from a sample of WIC participant records at each site.

## Analysis Techniques

Surveys. Separate files were created for State and local level analyses. The analysis of the local agency data looks at three separate components: 1) legislative, regulatory, and administrative changes, as well as other factors such as food cost fluctuations; 2) participation changes; and 3) local agency operational changes; Changes in local agency operations relate to a variety of factors including Federal and State legislative, regulatory, and administrative changes as well as to other local factors and economic conditions. Nine specific factors were identified for this study:

- Funding changes (Federal, State, administrative)
- Medicaid expansion
- Infant formula rebates
- Drug abuse education requirements
- Services provided to homeless
- Availability of health care and social services
- One-stop shopping/integrated services
- Food cost fluctuations
- Vendor management

Changes in participation were examined for each agency in order to classify them into: 1) agencies in which the number of participants has increased; 2) agencies in which the number of participants has remained stable; and 3) agencies in which the number of participants has declined.

Changes in an agency's operations were defined in terms of the following three dimensions:

- Agency practices that affect service delivery and administration (e.g., the provision of nutrition education services or the tailoring of food vouchers).
- Agency resources relating to personnel, space, and facilities.
- Agency operations or the deployment of resources (e.g., office hours, number of sites).

Frequencies and cross tabulations were used to analyze the survey data. Unit nonrespondents were omitted and the weights were adjusted to total the 1,777 local agencies and their $5,396,569$
participants in the 1992 FNS-191 file. Some survey items addressed activities and procedures that differ among clinics in local agencies. To capture this diversity and minimize burden, local agencies were asked to report for each of their "principal clinics," the largest clinics, up to six. Hence, data were weighted to the 5,387 principal clinics in the 1,777 local agencies for some analyses. Item nonresponses were assigned to a separate category in all the tables. The number of participants were then adjusted to correspond to the known population totals. Standard errors for selected tables were obtained using the SUDAAN statistical package and presented in tables comparable to the frequency tables.

Case Studies. Individual site visit reports provide summaries of each of the key areas addressed in the site visits, as well as relevant historical and background information. Data tables were prepared to summarize information and to enhance the accompanying narrative information. The case studies are used to illustrate key survey findings. They provide depth and explanation to our presentation of how agencies operate and how operations have changed since 1988.

Section 2

## Local Agency Tables

Number and Percentage of Agencies and of Participants by Agency Size


Table 2
Humber and Percentage of Agencies and of Participants by Percentage Growth

MOTE: Based on 1777 local sgencles and 5,396,569 participants

Table 3
Humber and Percentage of Agencies and of Participants by Agency Sponsorship Agencies


NOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 3

Number and Percentage of Agencies and of Participants by Agency Sponsorship

HOTE: Based on 1777 local agencies and 5,396,569 participants
Table 4
Number and Percentage of Agencies and of Participants by Catchment Area
Mumber and Percentage of Agencies and of Participants by Catchment Area

NOTE: Based on 1777 locsl agencies and 5,396,569 participants
Wumber and Percentage of Agencies and of Participants by Ethnic Populations Served

## Agencies


Table 5
Number and Percentage of Agencies and of Participants by Ethnic Populations Served

Nunter and Percentage of Agencies and of Participants by Ethnic Populations Served

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 5
Humber and Percentage of Agencies and of Participents by Ethnic Populations Served

Table 5
Humber and Percentage of Agencies and of Participants by Ethnic Poputations Served

(CONTINUED)
NOTE: Based on 1777 local agencies and 5,396,569 participants
Number and Percentage of Agencies and of Participants by
Caseload Change Since 1988 and Ethnic Populations Served

(CONTINUED)

## Agencies


Table 1A. 6
Number and Percentage of Agencies and of Participants by
Caseload Change Since 1988 and Ethnic Populations Served

NOTE: Based on 1777 locst agencies and 5,396,569 participants
Table IA. 6
Mumber and Percentage of Agencies and of Participants by
Caseload Change Since 1988 and Ethnic Populations Served

Humber and Percentage of Agencies and of Participants by
Caseload Change Since 1988 and Ethnic Populations Served
Participants


NOTE: Based on 1777 local agencies and $5,396,569$ participants


## Table IB. 6

Number and Percentage of Agencies and of Participants by
Operating Capacity and Ethnic Populations Served
Agencies


NOTE: Based on 1777 local agencies and 5,396,569 participants

Table 18.6
Number and Percentage of Agencies and of Participants by
Operating Capacity and Ethnic Populations Served
Participants


MOTE: Based on 1777 local agencies and 5,396,569 participants


Participants
Number and Percentage of Agencies and of Participants by
Perceived Caseload Change Since 1988 and Actual trouth

Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 8
Number and Percentage of Agencies and of Participants by
Caseload Change Since 1988 and Agency Sponsorship

Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table9
Number and Percentage of Agencies and of Participants by
Caseload Change Since 1988 and Catchment Area Agencies

MOTE: Based on 1777 local agencies and 5,396,569 participants
Table 9
Humber and Percentage of Agencies and of Participants by
Caseload Change Since 1988 and Catchment Area
Participants

NOTE: Based on 1777 local agencies and $5,396,569$ participants
Wumber and Percentage of Agencies and of Participants by
Caseload Change Since 1988 and Ethnic Populations Served

## Agencies


(COntinued)

## Table 10

Humber and Percentage of Agencies and of Participants by
Caseload Change Since 1988 and Ethnic Populations Served

(CONTINUED)
Humber and Percentage of Agencies and of Participants by
Caseload Change Since 1988 and Ethnic Populations Served

NOTE: Gased on 1777 local agencies and 5,396,569 participants

(CONTINUED)
Huber and Percentase of Agencies and of Participants by
Caseload Change Since 1988 and Ethnic Populations Served


NOTE: Based on 1777 local agencies and 5,396.569 participants
Table 11
Humber and Percentage of Agencies and of Participants by
Operating Capacity and Agency Size Agencies

Participants


NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 12 (Row Pcts)
Number and Percentage of Agencies and of Participants by

WOTE: Based on 4777 tocal agencies and 5,396,569 participants

Number and Percentage of Agencies and of Participants by ty and Percentage Growth
Agencies


Participants


## Table 13

Number and Percentage of Agencies and Affected Participants by
Agencies' Perceived Impact of Caseload Fluctuations Agencies

Participants


NOTE: Local agencies were asked to indicate all factors which impacted their operations. Consequently, responses are not mutualty
exclusive. For instance, in the 5 year period under study, some agencies experienced both caseload increases and decreases.
Humber and Percentage of Agencies and Affected Participants by
Agencies' Perceived Impact of Factors Related to Economic Factors

Nuber and Percentage of Agencies and Affected Participants by
Agencies' Perceived Impact of Factors Related to Economic Factors

## Participants

| feconomic factors | Perceived Impact on Agency Operations |  |  |  |  |  |  |  | Total |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Impact |  | No Impact |  | Hot Appl icable |  | Don't know |  |  |  |
|  | no. | Pct. | No. | Pct. | Ho. | Pct. | \%o. | ct. | no. | pct. |
| federal funding | 14,682,071 | 86.76 | 598,100 | 11.081 | 111,011 | 2.06 | 5.3871 | 0.10 | 5,396,569 | 100.00 |
| Availobility of state funds | 1,0060,354 | 56.71 | 888,4661 | 16.46 | 1,442,341 | ${ }^{26.131}$ | 5,3871 |  | 5,396,569 |  |
| Avvilability of Local funds | 1, 1,748,555 | 32.401 | 909,794 | 16.861 | 2,732,873 | 50.64 | 5,3871 |  | 5,396,569 |  |
| Poomturn in | 14,420,592] | 81.91 | 680,426 | 12.611 | 290, 164 | ${ }^{5} .381$ | 5,3871 |  | 5,396,569 |  |
| State Budget Curs | 12,563,392 | 47.501 | 1,832,5671 | 33.96! | 905,224 | 18.44 | 5.3874 |  | 5,396,569 | +100.00 |
| Food cost Fliuctuations | \|,4,210,605 | 78.021 | 1,049,3131 | 19.44 | 131,263! | 2.431 | 5,3871 | 0.10 | 5,366,569 | 100 |
| Infent Formula Rebates | \| 4,877,876 | 90.39 | 440,888 | 8.171 | 72,4181 | 1.34 | 5,3871 | 0.10 | 5.366,569 | 100 |
| Other | 77.413 | 1.43 | 9 |  | 5,313,769 | 98.47 ! | 5,387! |  | 5,396,569 | 100.00 |

NOTE: Local agencies were asked to indicate all factors which impacted their operations. Consequently, responses are not mutually
exclusive. for instance, in the 5 year period under study, some agencies experienced both caseload increases and decreases. NOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 15

Number and Percentage of Agencies and Affected Participents by
Agencies' Perceived Impact of New Progrem Requirements

## Agencies


Participants


MOTE: Local agencies were asked to indicate all factors which impacted their operations. Consequently, responses are not mutually
NOTE: Besed on 1777 local agencies and 5,396,569 participants
Table 16
Number and Percentage of Agencies and Affected Participants by
Agencies' Perceived Impact of Other Initiatives and Factors

NOTE: Local agencies were asked to indicate all factors which impacted their operations. Consequently, responses are not mutually neies and $5,396,569$ participants
II -43

## Table 16

Number and Percentage of Agencies and Affected Participants by
Agencies' Perceived Impact of Other Initiatives and Factors

NOTE: Local agencies were asked to indicate all factors which impacted their operations. Consequently, responses are not mutually
NOTE: Based on 1777 local agencies and 5,396,569 participants


Participants
HOTE: Based on 1777 local agencies and 5,396,569 participants

HOTE: Based on 1777 local agencies and 5,396,569 perticipants

Number and Percentage of Agencies and Affected Participants by
Use of Consultants or Contracting Staff to Provide WIC Services

Participants

11-48

NOTE: Based on 1777 local agencies and 5,396,569 participants
NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 23
Humer and Percentage of Agencies and Affected Participants by
Sufficiency and Appropriateness of Professional. Paraprofessional, and Clerical Support Staff

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 23
Number and Percentage of Agencies and Affected Participants by
Sufficiency and Appropriateness of Professional, Paraprofessional, and Clerical Support Staff
Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants


Affected Participants



## Table 25

Unber and Percentage of Agencies and Affected Participants by
Degree of Difficulty Experienced by Agency in Recruiting
Professional, Paraprofessional, and Clerical/Support Staff
Agencles

Affected Participants

HOTE: Based on 1777 local agencies and 5,396,569 participants
Number and Percentage of Agencies and Affected Participants by
Degree of Difficulty Experienced by Agency in Retaining
Professional, Paraprofessionst, and Clerical/Support Staff

NOTE: Based on 1777 local agencies and 5,396,569 participants
HOTE: Based on 1777 local agencies and 5,396,569 participants
Table 27
$\begin{aligned} & \text { Humber and Percentage of Agencies and Affected Participants by } \\ & \text { Perceived Reasons for Not Filling Vacant Positions }\end{aligned}$
Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants

Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 29

Number and Percentage of Agencies and Affected Participants by

NOTE: Based on 1777 local agencies and 5,396,569 participants
NOTE: Based on 1777 local agencies and 5,396,569 participants

HOTE: Based on 1777 local agencies and $5,396,569$ participants

## Table 31

Number and Percentage of Agencies and Affected Participants by
Type of Service and Estimated Typicai Number of Minutes Waiting for Service

| \|Typicsl Number of Minutes Haiting for | Certification | Group Nutrition Education | Individual Nutrition Education | Food instrument Issuance | Food Pick Up |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | No. \| Pct. | | Ho. ${ }^{\text {P Pct. }}$ | No. \| Pct. | | No. \| Pct. | No. - Pet. |
| 0 to 5 minutes | 427: 24.04; | 599\| 33.70 | | 663 1 37.291 | 744; 41.891 | 1531 8.58 |
| [5 to 10 minutes | 536\| 30.151 | 302! 16.98; | 518; 29.171 | 510, 28.691 | 5413.04 |
| 10 to 15 minutes | 3681 20.72! | 1751 9.86 | 2971 16.72\| | 272; 15.31; | 4012.27 |
| 15 to 30 minutes | 229\| 12.87; | 901 5.041 | \| 201| 11.33; | 122: 6.87! | 1911.10 |
| More than 30 minutes | 2171 12.21 | 461 2.601 | 1 571 3.20! | 241 1.35i | 11\| 0.62 |
| Not Appl icable | 0101 | 565 (31.82! | \| 411 2.291 | 105; 5.891 | 1500\| 84.39 |
| \| Total | 1777 1 100.00\| | 1777 100.00; | 1 1777 100.001 | 1777\| 100.00| | 1777: 100.00 |

Participants


NOTE: lased on 1777 local agencies and 5,396,569 participants

| Typical Humber of Minutes Receiving \|Service | Certification | Group Nutrition Educ (not high risk) | Group Nutrition Educ (high risk) | Individual Nutrition Educ (not high risk) | Individual Nutrition Educ (high risk) | Food Instrument Issuance | Food Pick |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | No. I Pct. \| | No. I Pct. | No. Pct. | Ho. \| Pct. | Ho. Pet. I | No. I Pct. | Ho. ! | Pct. |
| 10 to 5 mimutes | 3011.70 | 101 0.581 | 0101 | 216\| 12.16 | 73\| 4.11| | 726: 40.86; | 106\| | 5.99 |
| 15 to 10 minutes | 166; 9.32\| | 10916.141 | 67! 3.77; | 645 ; 36.30; | 3541 19.92\| | 606 34.081 | 961 | 5.41 |
| 10 to 15 minutes | 181) 10.17 \| | 283) 15.951 | 55\| 3.08; | 5381 30.27! | 471\| 26.52| | 226\| 12.69| | 23: | 1.28 |
| 115 to 30 minutes | 8131 45.761 | 6281 35.341 | 3591 20.201 | 225: 12.671 | 727\| 40.91| | 82\| 4.591 | 101 | 0.57 |
| More than 30 minutes | 584; 32.88; | 200\| 11.25| | 137: 7.70\| | 351 1.96\| | 121! 6.82\| | 26: 1.491 | 1; | 0.06 |
| Hot Applicable | 01 01 | 543\| 30.57| | 1156! 65.08\| | 11516.47 | 28; 1.55; | 1091 6.431 | 15381 | 86.53 |
| Don't Know | 310.171 | 310.171 | $3: 0.17$; | 310.171 | 310.17 i | $310.17 \mid$ | 31 | 0.17 |
| Total | 1777: 100.00; | 17771 100.00! | 1777: 100.00! | 1777! 100.00! | 1777: 100.00\| | 1777 1 100.00 | 17771 | 100.00 |

Participants


Tsble 33
Number and Percentage of Principal clinics by
Method of Obtaining Hematological Measurements

NOTE: Based on 1777 local agencies
Table 34

NOTE: gased on 1777 local agencies



NOTE: Based on 1777 local agencies

## Table 38

Number and Percentage of Agencies by Reported Problems in
Referring clients to Dther Agencies Agencies

note: Based on $177 /$ local agencies

note: Based on 1777 local agencies

NOTE: Based on 1777 local agencies and 5,396,569 participants

| \|Topics Covered | Methods Used |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Not Dffered |  | Printed Materials : Audio Visual |  |  | Computer Assisted |  |
|  | No. | Pct. No. | Pct. \| Ho. | Pct. ( No. | Pet. | Ho. | Pct. |
| Management of Individual Nutrition \|Risk | 154,550 | 2.86: $5.151,0771$ | $95.45{ }^{\text {a }}$ 4,731,004i | 87.67i $2,340,363$ i | 43.37 i | 96,324! | 1.78 i |
| 1 Importance of Mutrition to Health \|Status | 156,412! | $2.90{ }^{\text {a }}$ ( $5,128,746 \mid$ | 95.04: $4,481,5261$ | $83.04{ }^{\text {a }}$ ( 3,021,0611 | 55.98 ' | 01 | 0 |
| Description of Basic Good Diet | 132,8181 | 2.46\| 5,092,867 | 94.37: 5,039,606\| | 93,39\| 3,339,823| | 61.891 | 12,085 | 0.221 |
| Wajor Nutrients Provided by WJC PPackage | 269,266 | $4.99)^{\prime} 4,885,712{ }^{\text {a }}$ | 90.53) 4, 255,393) | $78.85{ }^{\text {a }}$ ( 2,408,2191 | 44.621 | 31,507! | 0.581 |
| Other Sources of Particular Nutrients | 151.970; | 2.82i 4,971, 135i | 92.12i 5,003,023; | 92.71\| 2,740,8791 | 50.791 | 48,970 | 0.91 |
| \|Importence of Diet for Fetal Growth | 163,291\| | 3.03\| 5,059,811| | 93,76\| 4,702,1541 | 87.13\| 3,285,283; | 60.881 | 01 | 01 |
| \|Breastfeeding | 132,818! | 2.46\| 5,172,322! | 95.84; 5, 115.885; | 94.80! 4, 518,3301 | 83.73 | 01 | 01 |
| Handl ing of Infant formula | 236,256\| | $4.3814 .980,2591$ | 92.29† 4,633,4691 | 85.86! 2,069.512; | 38.351 | 7.4441 | 0.14 |
| \|Use of thole Cons's Milk | 690,4611 | 12.7914.554,5211 | 84.40 3,358,534i | 62.23\| 1,378,534| | 25.541 | 01 | 01 |
| Solid and Table Foods | 159,9721 | 2.96; 5,012,107! | 92.88; 4,961,287! | 91.93:3,189,7781 | 59.11 | 01 | 01 |
| Importence of Wutrition for trowth | 220,5881 | 4.09\| 5,081,527! | 94.16\| 4,843,365! | 89.75 \| 3,303,131| | 61.21 | 12,085 | 0.22 |
| Nutrittous Snacks | 143,3161 | 2.66\| 5,096,432| | 94.44\| 5,040,9631 | 93.41\| 3,203,9551 | 59.371 | 25,5321 | 0.471 |
| Dental Health | 391.7601 | 7.26\|4,806,701| | 89.071 4,677,363\| | 86.67 2,675,718! | 49.581 | 01 | 01 |
| \|Risks of Substance Abuse | 302,8511 | $5.61 \mid 4,969,3841$ | 92.08! 4,820,738! | $89.3312,644,150 \mid$ | 49.001 | 01 | 01 |
| FFood Preparation/Shopping/Safety | 4,996, 2481 | 92.58! 378,427! | 7.01: 400,3211 | 7.42) 261.874; | 4.851 | 01 | 01 |
| Oother | 4,816,8591 | 89.26\| 553,610| | 10.26! 529,137! | 9.81; 347,562; | 6.441 | 18,931 | 0.35 |

Table 41

MOTE: Based on 1777 local agencies and 5,396,569 participants
Nuiber and Percentage of Agencies and Affected Participants by
Frequency of Hutrition Education Contacts

Affected Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Affected Participants

NOTE: Based on 1777 tocal agencies and 5,396,569 participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 44


NOTE: Based on 1777 local agencies and 5,396,569 participants

WOTE: Based on 1777 local agencies and 5,396,569 participants
Table 45
Number and Percentage of Agencies and Affected Participants by
Use of Nutrition Education Materials and Methods

## Affected Participants


MOTE: Based on 1777 local agencies and 5,396,569 participants


Participants


NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 47

Table 48
Mumber and Percentage of Agencies and Affected Participants by
Factors Ranked Most Often as Promoting High Guality WIC Services

NOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 48

Number and Percentage of agencies and Affected Participants by
Factors Ranked Most Often as Pronoting High Quatity WIC Services


Table 49
$\begin{aligned} & \text { Number and Percentage of Agencies and Affected Participants by } \\ & \text { Factors Ranked Most Often as Hindering High Quality Wic Services }\end{aligned}$


HOTE: Based on 1777 local agencies and 5,396,569 participants
NOTE: Based on 1777 local agencies and 5,396,569 participants

NOTE: Based on 1777 local agencies and 5,396,569 perticipants
 Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Humber and Percentage of Agencies and Affected Participants by
Changes in Nutrition Education Practices Since 1988

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 51
Number and Percentage of Agencies and Affected Participants by
Changes in \#utrition Education Practices Since 1988 Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 52
Humber and Percentage of Agencies and Affected Participants by
Changes in food Instrument Practices Since 1988

HOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 53


NOTE: 日ased on 1777 local agencies and 5,396,569 participants

$$
\text { Table } 53
$$

Nuber and Percentage of Agencies and Affected Participants by
Changes in Scheduling Practices Scheduling Practices
Participants

HOTE: Based on 1777 local agencies and 5,396,569 participants

NOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 54

Humber and Percentage of Agencies and 4 fected Participants by
Changes in Staffing Practices Since 4988

HOTE: Based on 1777 local agencies and 5,396,569 participants
Table 55
Wuber and Percentage of Agencies and Affected Participants by
Changes in Waiting List Practices Since 1988

Participants

HOTE: Based on 1777 local agencies and 5,396,569 participants
Table 56
Number and Percentage of Agencies and Affected Participants by
Changes in Administrative Practices and Operations Since 1988 Agenc ies

NOTE: Based on 1777 local agencies and 5,396,569 participants
Number and Percentage of Agencies and Affected Participants by
Changes in Administrative Practices and Operations Since 1988

HOTE: Based on 177 local agencies and 5,396,569 participants

$$
\text { Table } 57
$$

Humber and Percentage of Agencies and Affected Participants by

Participents

HOTE: Based on 1777 local agencies and 5,396,569 participants
Table 5B
Number and Percentage of Agencies and Affected Participants by
Other Changes Made Since 1988

Participants

NOTE: Gesed on 1777 local agencies and 5,396,569 participants
Table 59
Humber and Percentage of Agencies and Affected Participants by
Degree of Change in Funding Sources for Labor and Hon-Labor Items Compared to 1988

NOTE: Based on 1777 local agencies and 5,396,569 participants

| Labor and Non-Labor items | Agency's Percept ion of Level Now in Comparison to 1988 |  |  |  |  |  |  |  |  |  | Total |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | More |  | About the | Same |  |  | Not Applicable |  | Don't Know |  |  |  |
|  | No. | Pct. | No. | Pct. | No. | Pct. | No. | Pct. | Ho. | Pct. | No. | Pct. |
| Wic Funded Staff | [4,500,011] | 83.39 | 500,2121 | 9.271 | 386,989 | 7.171 | 9,3571 | 0.171 | 01 | 0 | 5,396,569 | 100.00 |
| Mon-wIC Funded Staff | \| 1,056,458| | 19.58 | 964,670 | 17.88 | 445,244 | 8.25 | 2,930,196 | 54.301 | 01 | 0 | 5,396,569 | 100.00 |
| wic Funded Non-Labor Itens: |  |  |  |  |  |  |  |  |  |  |  |  |
| Space | \| 2,611,958 | 48.40 | 1,538,887 | 28.52 | 400,485 | 7.42 | 833,989 | 15.45 | 11,250 | 0.21 | 5,396,569 | 100.00 |
| Utilities | 12,312,193] | 42.85 | 1,752,3181 | 32.47 | 225,0731 | 4.17 | 1,095,755 | 20.30 | 11.2501 | 0.211 | 5,396,569 | 100.00 |
| Computer Equipment | 13,504,662\| | 84.94 | 695,9621 | 12.901 | 201,9881. | 3.741 | 982,708: | 18.211 | 11,250 | 0.21 | 5,396,5691 | 100.00 |
| Hedical Equipment | 12,670,8901 | 49.49 | 1,567,024: | 29.04 | 258,393 | 4.79 | 889,012 | 16.47 | 11,2501 | 0.211 | 5,396,5691. | 100.00 |
| Educational Equipment | 13,079,586\| | 57.071 | 1,790,233) | 33.17 | 315,725 | 5.85 | 199,775 | 3.701 | 11,250 | 0.21 | 5,396,569 | 100.00 |
| Other | 12,568,712 | 47.60 | 1,523,0731 | 28.22 | 481,4551 | 8.92 ! | 812,078 | 15.051 | 11,250\| | 0.21 | 5,396,5691 | 100.00 |
| Non-wic funded Non-Labor items: |  |  |  |  |  |  |  |  |  |  |  |  |
| Space | +1,290,877 | 23.92 | 1,565,862 | 29.02 | 1,008,543 | 18.69 | 1,520,037 | $28.17!$ | 11,250 | 0.21 | 5,396,569 | 100.00 |
| Utlities | 1,1,171,450 | 21.71 | 1,695,528\| | 31.42 | 853, 1071. | 15.81 | 1,665,235 | 30.86 | 11,2501 | 0.21 | 5,396,5691 | 100.00 |
| Computer Equipment | 918,858 | 17.031 | 76,9771. | 14.03 | 331, 188 | 6.14 | 3,378,296 | 82.60 | 11,2501 | 0.21 | 5,396,5691- | 100.00 |
| Medical Equipment | 728,5401 | 13.50 | 1,151,163 | 21.33 | 825,734: | 15.30 | 2,679,882\| | 49.66 | 11,250 | 0.21 | 5,396,5691 | 100.00 |
| Evucat ional Equipment |  | 11.79 | 1,122,499 | 20.80 | 624,028 | 11.56 | 3,002,446\| | 55.64 | 11,250 | 0.21 | 5,396,569] | 100.00 |
| Other | \|-1.737.014! | 11.801 | 977,038\| | 18.101 | 761,7441 | 14.12! | 3,009.523! | 55.71 | 11, 250 | 0.211 | 5,396,5691 | 100.00 |

Table 60
Humber and Percentage of Agencies and Affected Participants by
Degree of Change in Humber and Appropriateness of Staff

NOTE: 日ased on 1777 local agencies and 5,396,569 participants

Table 61
Hubber and Percentage of Agencies and Affected Participants by
Degree of Change Perceived in Recruiting and Retaining Staff
Agencies

Participants

HOTE: Based on 1777 local agencies and 5,396,569 participants
Table 62

NOTE: lased on 1777 local agencies and 5,396,569 participants

## Table 63

Degree of Change in Waiting time and Time Spent Receiving Specific Services

HOTE: Based on 1777 local agencies and 5,396,569 participants

Table 64
Number and Percentage of Principal Clinics by
Degree of Change in Staff Time Spent on Referrals

NOTE: Based on 1777 local egencies

## Table 65


NOTE: Based on 1777 local agencies and 5,396,569 participants

NOTE: Based on 1777 local agencies and 5,396,569 participants

## Section 3

## Standard Errors Tables

Table 1
Standard Errors of Agencies and of Participants by Percentage Growth

Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants


Participants


NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 3

Participants


NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 4 (Rou Pcts)
Standard Errors of Agencies and of Participants by


## Participants

Table 4 (Colum Pcts)
Standard Errors of Agencies and of Participants by

Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 5
Standard Errors of Agencies and Affected Participants by
Agencies' Perceived Impact of Caseload Fluctuations
Agencies

Participants


HOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 12

Standard Errors of Agencies and Affected Participants by
Degree of Difficulty Experienced by Agency in Recruiting Professional, Paraprofessional, and Clerical/Support Staff
Agencies

NOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 7

| New Program Requirements | Perceived Impact on Agency Operations |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 1 mpact | 1 | Ho Impact |  | Hot Applic | able | Don't Know |  | Total |  |
|  | No. | Pct. | No. | Pct. | Ho. | Pct. | No. 1 | Pct. I | Ho. | Pct. |
| \}Breastfeeding Promotion Requirements | 41.861 | 2.361 | 29.581 | 1.661 | 27.701 | 1.56 | 15.771 | 0.89\| | 0.001 | 0.00 |
| Drug Abuse Education Requirements | 59.321 | 3.341 | 56.83; | 3.201 | 36.98\| | 2.08; | 15.77 | 0.891 | 0.001 | 0.00 |
| Homeless Service Requirements | 57.44\| | 3.231 | 65.831 | 3.701 | 38.961 | 2.191 | 15.77! | 0.891 | 0.001 | 0.001 |
| ¢Vendor Management Initiatives | 63.08; | 3.551 | 59.89 ' | 3.371 | 43.901 | 2.471 | 15.771 | 0.89\| | 0.001 | 0.00 |
| ,other | 25.71\| | 1.451 | 11.45 | 0.641 | 32.25 | 1.81\| | 15.77 | 0.89! | 0.001 | 0.00 |

Participants


HOTE: Sased on 1777 local agencies and 5,396,569 participants
Table A


HOTE: Based on 1777 local agencies and 5,396,569 participants
Table 8
Standard Errors of Agencies and Affected Participants by
Agencies' Perceived Impact of Other Initiatives and Factors

NOTE: Based on 1777 locat agencies and 5,396,569 participants

Participants


NOTE: Based on 1777 local agencies and 5,396,569 participants

NOTE: Based on 1777 local agencies and $5,396,569$ participants
Table 10
Number and Percentage of Agencies and Affected Participants by
Sufficiency and Appropriateness of Professional, Paraprofessional, and Clerical Support Staff
Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 11

Affected Participants

HOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 12

Standard Errors of Agencies and Affected Participants by
Degree of Difficulty Experienced by Agency in Recruiting Professional, Paraprofessional, and Clerical/Support Staff
Agencies

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 13
Standard Errors of Agencies and Affected Participants by
Degree of Difficulty Experienced by Agency in Retaining Professional, Paraprofessional, and Clerical/Support Staff Agencies

słued!j!
Table 14
Standard Errors of Agencies and Affected Participants by Available at Agency
Agencies

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 14
Number and Percentage of Agencies and Affected Participants by

| \|tanguages | Interpreters Available |  | Nutrition Education Provided |  |
| :---: | :---: | :---: | :---: | :---: |
|  | No. | Pct. | No. | Pct. |
| [Spanish | \| 103441.97| | 1.92 | 99384.291 | 1.84 |
| Vietnamese | \| 70300.66| | 1.301 | 86030.481 | 1.59 |
| CCanbodian/khner | 54555.531 | 1.01 | 97469.591 | 1.81 |
| Llaotian | 71128.94 | 1.32 | 87821.071 | 1.63 |
| Thai | 61045.991 | 1.13\| | 62868.951 | 1.16 |
| Hmong | - 36682.10 \| | 0.681 | 73805.101 | 1.37 |
| Chinese | \| $91202.56 \mid$ | 1.69 | 70861.811 | 1.31 |
| Haitian/Creole | +172448.941 | 1.341 | 7337.211 | 1.36 |
| French | 190098.42 | 1.671 | 67423.65: | 1.25 |
| Portugese | \| 66190.541 | 1.23 \| | 50610.101 | 0.94 |
| Native American Language | \| $63695.70 \mid$ | $1.18{ }^{1}$ | 46877.84; | 0.87 |
| Sign Language | -109179.61\| | 2.02 | 94533.86\| | 1.75 |
| Other | \| 95034.06| | 1.76 | - 85803.29. | 1.59 |

NOTE: Based on 1777 local agencies and 5,396,569 participants
NOTE: Based on 1777 local agencies and 5,396,569 participants


## Participants



NOTE: Based on 1777 local agencies and 5,396,569 participants


Participants


NOTE: Based on 1777 local sgencies

Table 19
Number and Percentage of Principal Clinics by
Specified Health Services Available on Site
Table 20
Nunber and Percentage of Principal Clinics by
Specified Non-Heat th Referral Services Available on Site

Table 21

NOTE: Based on 1777 local agencies

NOTE: Based on 1777 local agencies

HOTE: Blased on 1777 local agencies

## Table 24

Standard Errors of Agencies and Affected Participants by
Topics Covered and Methods Used

## Agencies


NOTE: Based on 1777 tocal agencies and 5,396,569 participants
Standard Errors of Agencies and Affected Participants by
Topics Covered and Methods Used
Affected Participants

| \|Topics Covered | Methods Used |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Not offered iver |  | Verbal Presentation! |  | Audio visual |  |  |  | Computer Assisted |  |
|  | No. | ct. | No. | t. | No. | ct. | No. | ct. | No. | ct. |
| $\left\{\begin{array}{l}\text { Management of Individual Mutrition } \\ \text { Risk }\end{array}\right.$ | 14704.03 | 0.27 | 25636.40 | 0.48 | 79585.90 | 1.47! | 135559.11 | 2.51 | 15951.18 | 0.30 |
| Importance of Nutrition to Heal th | $16621.43{ }^{\text {i }}$ | 0.31 | 30884.56 | 0.57 | 98153.88 | t.82 | 127804.25 | 2.37 | 0.00 | 0.00 |
| Description of Basic Good Diet | 2233.64 \| | 0.041 | 41813.701 | 0.771 | 48556.711 | 0.901 | 110277.81\| | 2.04 | 11192.48 | 0.21 |
| Major Hutrients Provided by HIC Package | 37051.76 | 0.69 | 71185.60 | 1.32 | 101547.24 | 1.88 ${ }^{1}$ | 137008.19 | 2.431 | 20624.07 | 0.38 |
| Other Sources of Particular Mutrients | 17181.06\| | 0.321 | 66837.591 | 1.24 | 52744.45; | 0.98 ! | 138743.091 | 2.571 | 26039.52! | 0.48 |
| Importance of Diet for fetal Growth | 25520.37 | 0.471 | 49353.78 | 0.91 | 78900.00 | 1.461 | 122016.96\| | 2.261 | 0.001 | 0.00 |
| Breastfeeding | 2233.64 | 0.041 | 24230.59\| | 0.45; | 34594.71 | 0.641 | 93090.82; | 1.72 | 0.001 | 0.001 |
| Handing of Infant formule | 34400.971 | 0.64 | 53488.631 | 0.991 | 82204.86\| | 1.52\| | 126771.88 | 2.351 | 6974.53\| | 0.13 |
| Use of Whole Cows's Milk | 91658.03 | 1.70; | 98867.301 | 1.83 | 129908.37; | 2.41 | 105318.36; | 1.95 | 0.001 | 0.00 |
| Solid and Table Foods | 18344.02 | 0.341 | 55932.741 | 1.041 | 51746.081 | 0.961 | 123244.68\| | 2.28 | 0.00\| | 0.00 |
| Importance of Nutrition for Growth | 38976.721 | 0.72 | 44868.151 | 0.831 | 64488.461 | 1.191 | 128591.60 | 2.38; | 11992.48 | 0.21 |
| Nutritious Snacks | 10045.71 | 0.191 | 39511.52\| | 0.73 | 49156.271 | 0.911 | 132643.35 | 2.461 | 21213.37! | 0.39 |
| Dental Health | 57305.09 | 1.06: | 85012.15 | 1.58 | 78338.21; | 1.45 | 116388.88 | 2.16! | 0.001 | 0.00 |
| TRisks of Substance Abuse | 41665.831 | 0.77 | 54263.581 | 1.01 | 65809.00\| | 1.22 ! | 140562.27 | 2.601 | 0.001 | 0.00 |
| ,Food Preparation/Shopping/Safety | 84199.97 | 1.56 | 82098.00 | 1.52 | 84199.971 | 1.56: | 71286.52\| | 1.32 | 0.001 | 0.00 |
| \|other | 91097.86 | 1.691 | 89392.55; | 1.66 | 88791.91\| | 1.651 | 72561.191 | 1.341 | 16495.691 | 0.311 |

MOTE: Based on 1777 local agencies and 5,396,569 participants
Table 25
Standard Errors of Agencies and Affected Participants by
Frequency of Nutrition Education Contacts

Affected Participants

NOTE: Based on 1777 local agencies and 5,396, 569 participants
NOTE: Based on 1777 local agencies and 5,396,569 participents
Table 27
Standard Errors of Agencies and Affected Participants by
Use of Nutrition Education Materials and Methods
Agencies

| $100^{\circ}$ | 1000 | 1780 | ｜ $58 \cdot 7$ | 1790 | ｜ 58.7 | دә420 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1000 | 1000 | $14 \cdot 1$ | 158．02 | ［16］ | ［18．02 | บ0！3 2ndzsuI Pazsissy jainduos |
| $100 \cdot 0$ | 1000 | 10 ¢ $£$ | ｜25．5s | $10 \cdot 5$ | 1／5＇ร5 |  |
| 1000 | 100 | 10\％ 8 | 16809 | 1078 | 168.09 | soap！A／swl！ |
| 00\％ | 1000 | けップ | 182＇27 | 1ヶでて | （82\％${ }^{\text {\％}}$ | sap！ 1 s |
| 100．0 | 1000 | 168.2 | 162 15 | 168 ＇z | 162.15 | sode 1 otpry |
| $00 \cdot 0$ | $100 \cdot 0$ | $150 \cdot \varepsilon$ | 191＊35 | $150 \cdot \varepsilon$ | 191＇75 | s3ssi |
| $00 \cdot 0$ | 1000 | isorg | $121 \cdot 3$ | ｜ $50 \cdot \mathrm{E}$ | 121＇s | suo！ferssuowan poos |
| 1000 | $100 \cdot 0$ | $15 \% 2$ | 10\％ 5 | 1ヶ\％ | 107 ¢\％ | slppor pood |
| 1000 | $100 \%$ | 1000 | $100 \cdot 0$ | 100.0 | $100 \cdot 0$ | ssplydurd |
| $00 \%$ | $100^{\circ} 0$ | $100 \%$ | 1000 | $100 \%$ | $100 \%$ |  |
| $\cdots$ | ${ }^{+\cdots}$ | ＋13 |  |  |  |  |
|  | 10701 |  | pesn 20 N | ； | pasn |  |
|  | as | onpa uo | ！دan¢ | A！pul |  |  |

NOTE：Based on 1777 local agencies and 5，396，569 participants
Table 27
Standard Errors of Agencies and Affected Participants by
Use of Hutrition Education Materials and Methods
Affected Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 28


NOTE: Based on 1777 local sgencies and 5,396,569 participants

## Table 28

Standard Errors of Agencies and Affected Participants by
Use of Mutrition Education Materials and Methods
Affected Participants

| \|Materisls Used in Group Instruction | Use in Group Nutrition Education Session |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Used |  | Not Used |  | Total |  |
|  | No. | Pct. | No. | Pct. |  | Pct. |
| Lectures/Oral Discussions | 60357.931 | 1.12 | 60357.93 | 1.12 | 0.001 | 0.00 |
| Pamphlets | 55315.37 | 1.031 | 55315.37 | 1.031 | 0.001 | 0.001 |
| Food Modets | \| 110863.34 | | 2.051 | 110863.34\| | 2.05 | 0.001 | 0.00 |
| Food Demonstrations | \| 129773.99 | | 2.401 | 129773.99 | 2.401 | 0.001 | 0.00 |
| Tests | ; 128792.36! | 2.39 | 128792.36 | 2.39 | 0.001 | 0.00 |
| Audio Tapes | ! 127284.56: | 2.36 | 127284.56 | 2.36 | 0.00 | 0.00 |
| stides | ; 130172.26 | 2.41 | 130172.26 | 2.41 | 0.001 | 0.00 |
| films/Videos | 76966.411 | 1.43 1 | 76968.41 | 1.431 | 0.001 | 0.00 |
| Flip Charts | \| 122405.52 | | 2.27 | 122405.521 | 2.271 | 0.001 | 0.00 |
| Computer Assisted Instruction | \| 28867.33| | 0.53; | 28867.33 | 0.531 | 0.001 | 0.00 |
| Other | \| 63492.79] | 1.18 | 63492.79\| | 1.181 | 0.001 | 0.00 |

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 29

NOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 29

Standard Errors of Agencies and Affected Participants by
Factors that May Act as Barriers to Providing High Quality Wutrition Education

NOTE: Based on 1777 local agencies and 5,396,569 participents

## Table 30

Standard Errors of Agencies and Affected Participants by
Changes in Certification Practices Since 1988

NOTE: Based on 1777 local agencies and $5,396,569$ participants

NOTE: Based on 1777 local agencies and 5,396,569 participants

## Table 31

Standard Errors of Agencies and Affected Participants by

NOTE: Based on 1777 local agencies and 5,396,569 participants


## Table 32

Standerd Errors of Agencies and Affected Participants by
Changes in food Instrument Practices Since 1988
Participants

NOTE: Based on 1777 local agencies and 5,396,569 perticipants
Table 33
Standard Errors of Agencies and Affected Participants by
Changes in Scheduling Practices

NOTE: Based on $\mathbf{4 7 7 7}$ local sgencies and 5,396,569 participants

HOTE: Based on 1777 local agencies and 5,396,569 participants
Table 34
Standard Errors of Agencies and Affected Participants by
Changes in Staffing Practices Since 1988

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 34
Standard Errors of Agencies and Affected Participants by

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 35
Standard Errors of Agencies and Affected Participants by
Changes in Waiting List Practices Since 1988

Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 36

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 36
Standard Errors of Agencies and Affected Participants by
Changes in Administrative Practices and Operations Since 1988
Participants

HOTE: Based on 1777 local agencies and 5,396,569 participants

Standard Errors of Agencies and Affected Participants by Changes in Facilities since 1988

Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants
Table 38
Standard Errors of Agencies and Affected Participants by

Participants

NOTE: Based on 1777 local agencies and 5,396,569 participants

## Section 4

## State Agency Tables

Table 1
Number and Percentage of State Agencies by Selected Service Characteristics

(CONTINUED)
Some questions were inappropriate or irrelevant to ITO's,
and were not answered by some of the ITO's. These were
treated as 'Not Applicable to ITo's' and not included in
percentage calculations.

Table 2
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Percentage Growth in Participation Since 1988

| Percentage Growth in Participation Since 198B | State Agencies |  | Affected Local Agencies |  | AEfected Participants |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | No. | Pct. | No. | Pet | No. | Pct. |
| Less than 15\% | 161 | 20.781 | 88 | 5.111 | 140.4931 | 2.66 |
| 158 to 33\% | 251 | 32.471 | 4551 | 26.41\| | 1,277,6521 | 24.16 |
| 338 to 50\% | 161 | 20.781 | 5701 | 38.891 | 1,715, 195\| | 32.44 |
| 508 to 100\% | 181 | 23.381 | 4941 | 28.67 | 2,047.6301 | 38.72 |
| Greater than 1008 | 1 | 1.301 | 151 | 0.871 | 106.4221 | 2.01 |
| Not Applicable | 1 | 1.301 | $1 \mid$ | 0.05 | 5771 | 0.01 |
| Total | 77. | 100.001 | 1723\| | 100.001 | 5,287,9691 | 100.00 |

Table 3
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Agencies. Perceived Impact of Caseload Fluctuations

## State Agencies


Affected Local Agencies


Affected Participants


$$
\text { Table } 4
$$

Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Agencies. Perceived Impact of Economic Factors

Affected Local Agencies

Table 4
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Agencies. Perceived Impact of Economic Factors

Number and Percentage of State Agencies. Affected Local Agencies, and Affected Participants
by Agencies. Perceived Impact of New Program Requirements

Affected Local Agencies


## Table 5

Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Agencies. Perceived Impact of New Program Reguirements ived Impact of New Program Reguirements
Affected Participants

Table 6
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Agencies. Perceived Impact of other Initiatives and Factors State Agencies

Affected Local Agencies

Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Agencies. Perceived Impact of other Inltiatives and factors Affected Participants

Table 7

NOTE: Based on 77 state agencies, 1723 affected local agencies, and 5, 287,969 affected participants

## Table $B$



- Some questions were inappropriate or irrelevant to ITo's, and were not answered
by some of the Ito's. These were treated as 'Not Applicable to ITO's' and not
included in percentage calculations.


|  | State Agencies |  | Affected Local Agencies |  | Affected Participants |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | No. | Pct. \| | No. | Pct | No. | Pct |
| Uses a Cost/Participant Formula |  |  |  |  |  |  |
| Yes | 33 | 45.21 | 12461 | 72.48 | 4.074.278 | 77.10 |
| No | 401 | 54.791 | 4731 | 27.52 \| | 1,210,348). | 22.90 |
| Not applicable to ITO's or S/L's | 41 | -1 | 4 | -1 | 3.3431 | * |
| Total | 771 | 100.001 | 1723\| | 100.001 | 5,287,9691 | 100.00 |
| Average Cost Per Participants |  |  |  |  |  |  |
| Less than $\$ 6.00$ | 2 | 2.63 | 2 | 0.12 | 263.670 | 4.99 |
| \$6.00-56.99 | 101 | 13.161 | 2571 | 14.92 | 1,109.3471 | 20.98 |
| \$7.00-57.99 | 101 | 13.161 | 361 \| | 20.96 | 1.095.3511 | 20.72 |
| \$8.00-58.99 | 161 | 21.05 | 6591 | $38.27 \mid$ | 1,914,302 | 36.20 |
| \$9.00- 59.99 | 61 | 7.891 | 204\| | 11.85 \| | 639.4191 | 12.09 |
| \$10.00-514.99 | $14 \mid$ | 18.421 | 142 \| | 8.251 | 218,763\| | 4.14 |
| \$15.00-\$19.99 | 91 | 11.841 | 91 | 0.52 | 8,3041 | 0.16 |
| \$20.00 or mare | 91 | 11.84 \| | 98\| | 5.11 | 38.4951 | 0.73 |
| Not Applicable to ITO's or S/L's | 1) | * | 1) | $\cdot 1$ | 318 ! |  |
| Total | 77 | 100.001 | 17231 | 100.001 | 5,287,969\| | 100.00 |
| Change in Method of Computing Administrative Costs Per Participant |  |  |  |  |  |  |
| Yes | 13 | 17.33 | 322 | 18.71 | 1.133,000 | 21.43 |
| No | 621 | 82.671 | 1399 | 81.291 | 4,153.8941 | 78.57 |
| Not applicable to ITO's or S/L's | 21 |  | 21 | -1 | 1.0751 |  |
| Total | 77 | 100.001 | 1723\| | 100.001 | 5.287.9691 | 100.00 |

[^0]Table 12
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants


- Some state agencies and ITO's function as both state and local agencies;
therefore, some questions were not answered because they were inappropriate
or irrelevant to the respondent. These were treated as Not Applicable to
Table 12
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Funding Allocation Practices

|  | State Agencies | Affected Agencie | $\begin{aligned} & \text { Local } \\ & \text { es } \end{aligned}$ | Affected Participants |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | No. \| PCt. | | No. 1 | Pet. | No. | Pet. |
| No. of Times Agency Reallocated Administrative Funds |  |  |  |  |  |
| None | 5.13 .33 | 235 | 14.03 | ABB, 412 | 18, 32 |
| One | 6113.331 | 225 | 13.431 | 931.687 | 19.22 |
| Two | 14\| 31.11 | | 4061 | 24.241 | 1.335,3261 | 27.54 |
| Three | $8\|17.78\|$ | 2881 | 17.191 | 603.9071 | 12.46 |
| Four | 6\| 13.33| | 3051 | 18.21 | 516.681 | 10.66 |
| Five or More | 51 11.11\| | 2161 | 12.901 | 572.1721 | 11.80 |
| Not Applicable to ITO's or S/L's | 32 -1 | $48 \mid$ | * | 439,784\| | * |
| Total | 77 \| $100.00 \mid$ | 1723\| | 100.001 | 5,287,969 | 100.001 |

[^1]Table 13



* Some state agencies and ITO's function as both state and local agencies;
therefore, some questions were not answered because they were inappropriare
or irrelevant to the respondent. These were treated as Not Applicable to
ITO's or S/L's' and not included in percentage calculations.
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Merhods for allocating caseioad

|  | State Agencies |  | Affected Agenctes | Local | Affected Participants |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | No. | Pct. 1 | No. | Pct | No | Pct |
| Maximum Caseload Agsigned on the Basisof: |  |  |  |  |  |  |
| Number of Pregnant Women and/or Infants on Waiting Lists | 3 | 5.56 | 3 | 0.18 | 163.441 | 3.17 |
| Number of Eligibles Meeting Specific Priorities | 11 | 20.37 | 509 | 30.39 | 1,444,810 | 27.98 |
| Assigrment on Another Basis | 131 | 24.071 | 2931 | 17.491 | 1,251,1631 | 24.23 |
| Negotiated Basis | 5 | 9.261 | 1881 | 11.221 | 354,283\| | 6.86 |
| ocher : |  |  |  |  |  |  |
| Caseload Not Assigned to Locals | 3 | 5.56 | 90 | 5.37 | 270,473 | 5.24 |
| Based on Historic Levels/Ability to Serve/Current Levels | 4. | 7.41 | 213 | 12.72 | 251,448 | 4.87 |
| Based on Priorities Served | 31 | 5.561 | 431 | 2.57 \| | 267.4901 | 5.18 |
| Based on Eligibles | 1\| | 1.85 \| | 141 | 0.841 | 121,8501 | 2.36 |
| Based on Several Factors | 31 | 5.561 | 1081 | 6.451 | 192,0191 | 3.72 |
| Based on Food costs | 1 | 1.851 | $1]$ | 0.051 | 6,0051 | 0.12 |
| Other Basis | 61 | 11.11 \| | 1921 | 11.46\| | 780.236 | 15.11 |
| Don't know | $1 \mid$ | 1.851 | 211 | 1.251 | 50.5961 | 1.17 |
| Not Applicable to tro's or S/L's | 231 |  | 481 | -1 | 124.1551 |  |
| Total | 71 | 100.001 | 17231 | 100.001 | \| 5.287.969| | 100.00 |

[^2]Table 15
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants


- Some state agencies and ito's function as both state and local agencies;
therefore, some questions were not answered because they were inappropriate
or irrelevant to the respondent. These were treated as Not Applicable to or irrelevant to the respondent. These were treated as Not
Some state agencies and 1 TO's function as both state and local agencies;
therefore, some questions were not answered because they were inappropriate
or irrelevant to the respondent. These were treared as . Not Applicable to
ITo's or sth's. and not included in percentage calculations.

(CONTINUEDI


(CONTINUED)

Table 16
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Factors Used in Assigning Caseload Increases or Decreases to a Local Agency


[^3]Table 17
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Most Frequently Used Method for Allocating Caseload Under Conditions of Rapid Growth


- Some state agencies and rTO's function as both state and local agencies;
therefore, some questions were not answered because they were inappropriate
or irrelevant to the respondent. These were treated as Not Applicable to or irrelevant to the respondent. These were treated as 'Not Applicable to
ITO's or S/L's' and not included in percentage calculations.
Table 18
Number and Percentage of State Agencies, Aftected Local Agencies, and Affected Participants
by whether State Agency Developed Participant-to-Staff Ratios Are Used


IV-24

$$
\text { Table } 18
$$

Number and Percentage of State Agencles, Aftected Local Agencies, and Affected Participants
by Whether State Agency Developed Participant-to-Staff Ratios Are Used


Since 1988 - State administrative rules, regulations, and policies: $\qquad$
$\qquad$
$\qquad$
$\qquad$
Since 1988 - Quality of service: $\qquad$
$\qquad$
$\qquad$
$\qquad$
Since 1988 - Other operational changes:

$$
\text { Table } 20
$$

Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by the Presence of Program Performance Standards

Table 22



- Some state agencies and ITO's Eunction as both state and local agencies:
or irrelevant to the respondent. These were treated as 'Not
ITO's or S/L's' and not included in percentage calculations.
Table 21
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by State Sponsorship of Breastfeeding Promotional Activities

NOTE: Based on 77 state agencies, 1723 affected local agencies, and 5,287,969 affected participants
Table 24


|  | State Agencies |  | Affected Local Agencies |  | Affected Participants |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | No. | Pct. | No. | Pct | No. | Pct. |
| Frequency of Issuing Food Vouchers or Instruments |  |  |  |  |  |  |
| Less Than one Time a Month | 0 | 0 | 0 | 0 | 0 | 0 |
| Once Per month | 331 | 42.861 | 6381 | 37.03\| | 1.100.0001 | 20.80 |
| Once Every 6 weeks | 01 | 01 | 01 | 01 | 01 | 0 |
| Once Every 2 Months | 301 | 38.961 | 6961 | 40.391 | 2,556,045 | 48.34 |
| Once Every 3 Months | 61 | 7.791 | 2681 | 15.551 | 821.8071 | 15.54 |
| No Issue Schedule | 01 | 01 | 01 | 01 | 01 | 0 |
| Other | 3 | 3.901 | 86 | 4.991 | 683,887 | 12.93 |
| Not Applicable - Direct Distribution | 5 | 6.491 | 351 | 2.031 | 126.2301 | 2.39 |
| Total | 731 | 100.00 | 17231 | 100.001 | 5,287,969 | 100.00 |
| Issuance Variation Across Agency |  |  |  |  |  |  |
| Varies Significantly | 2 | 4.65 | 13 | 4.38 | 360.351 | 7.44 |
| Varies Somewhat | 201 | 46.511 | 778 | 46.701 | 2,215,1491 | 45.76 |
| Does Not Vary | 21 | 4 A .84 | 8151 | 48.921 | 12.265,492 | 46.80 |
| Not Applicable to ITO's or S/L's | 34 | * | 57 |  | 1 446,977\| | - |
| Total | 771 | 100.001 | 17231 | 100.001 | \|5,287,969| | 100.00 |

Some state agencies and ITO's function as both state and local agencies;
therefore, some questions were not answered because they were inappropriate
or irrelevant to the respondent. These were treated as, Not Applicable to
ITO's or S/L's' and not included in percentage calculations.

Table 26



* Some state agencies and ITO's function as both state and local agencies;
therefore, some questions were not answered because they were inappropriate
or irrelevant to the respondent. These were treated as Not Applicahle to
ITO's or $S / L \cdot s$ ' and not included in percentage calculations.
IV-32

$$
\text { Table } 27
$$



Table 27


Iv- 34

Table 29



* Some state agencies and ITO's function as both state and local agencies;
cherefore, some questions were not answered because they were inappropriate
or irrelevant to the respondent. These were treated as Not Applicable to
ITo's or $S / L$ s. and not included in percentage calculations.
(CONTINUED)
Table 29
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Shift in Type and Location of Computer Equipment Since 1988


[^4]
Table 31
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Change in wiC Coordination with other Programs Since

Table 32


(COntinued)
Table 32


IV-41
Table 33
Number and Percentage of State Agencies, Affected Local Agencies, and Affected Participants
by Current Capacity at which Local Agencies in Stare Are operating


## Table 34

Number and Percentage of State Agencies Reporting Major Changes in State Operations Since 1988

(CONTINUED)
Number and Percentage of State Agencies Reporting Majoz Changes in State Operations Since 1988

(COntinued)
Number and Percentage of State Agencies Reporting Major Changes in State operations Since 1988

(CONTINUED)
Table 34
Number and Percentage of State Agencies Reporting Major Changes in State Operations Since 1998

| Operational Areas with Change | No. | Pct |
| :---: | :---: | :---: |
| Monitoring and Vendor Management Procedures |  |  |
| No tajor changes | 20 | 25.97 |
| Increase scrutiny in general including compliance buying\| | 24 \| | 31.17 |
| Increase scrutiny of high-risk vendors | 101 | 12.99 |
| Increase vendor training | 91 | 11.69 |
| Streamline current monitoring | 51 | 6.49 |
| Increased state agency role in monitoring | 71 | 9.09 |
| Added staff for vendor management | 111 | 14.29 |
| Reduced number of authorized vendors | 31 | 3.90 |
| Vendor management improved | 5 | 6.49 |
| Revised policies on vendor issues | 61 | 7.79 |
| Local agency efforts in vendor management | 31 | 3.90 |
| other | 13) | 16.88 |

Table 34
Number and Percentage of State Agencies Reporting Major Changes in State operations Since 1988

(CONTINUED)
Table 34
Number and Percentage of State Agencies Reporting Major Changes in State operarions Since 1988
Operational Areas with Change
Quality of Service
NOTE: Based on 77 state agencies

NOTE: gased on 77 state agencies

## Table 35


NOTE: Based on 77 state agencies

## Section 5

Sampling and Estimation

## Respondent Universe

There were three components to the study:

- A survey of State agencies;
- A survey of local agencies; and
- A set of case studies of local agencies.

The respondent universe was composed of all WIC State and local agencies funded by the U.S. Department of Agriculture, Food and Nutrition Service (FNS). This included agencies in all 50 States, the District of Columbia, Commonwealth of Puerto Rico, the Virgin Islands, and Guam. The case studies were limited to local agencies in the continental United States.

The State Agency Mail Survey was a census survey. All 85 State agencies, including those operated by Indian Tribal Organizations, were surveyed. The case studies were purposively selected. Thus the sampling issues, including weighting and variance estimation, refer exclusively to the Local Agency Survey.

## Objectives of the Local Agency Sample Design

The goal of the local agency sampling design was to provide estimates on selected current operating features of local WIC agencies, to determine the extent to which change has occurred, and to assess the impact of changes on these features. The focus of the research is on local WIC agencies' decisions to implement certain procedures or to modify practices between 1988 and 1993. Thus, as one objective, it was necessary to use the local agency, which is the main decision-making unit, as the unit of analysis. As a second objective, it was important to estimate the number of participants who have been affected by changes.

## General Sampling Design

Any sample design for the present study had to take these two objectives into account and try to balance them. The difference between the two objectives requires some discussion. Since the overriding interest is to obtain national estimates at the participant level (i.e., the number of participants affected), the preferred method of sampling agencies is to sample with probabilities proportional to size (PPS). But PPS sampling would have resulted in underrepresentation of smaller agencies (in the sense that a very small proportion of such agencies might be selected). Pure PPS would have resulted in a sample with a strong predominance of larger WIC agencies. On the other hand, if a random sample had been drawn, participants from larger agencies would be underrepresented. We therefore needed to develop a method that would have allowed us to
provide national estimates of participants while maintaining adequate representation from smaller agencies. In addition, many of the research questions were directed at examining agency behavior and the impact that this behavior has on participants. Thus, it became as important to adopt a sampling strategy that will allow us to say "X percent of participants are being affected by nutrition education procedure Y ," as it is to say to say "X percent of agencies use nutrition education procedure $\mathrm{Y}^{\prime \prime}$ with maximum precision.

In general, the probability of selection according to PPS would have reflected the relative proportion of participants served by an agency relative to all participants served. In contrast, the probability of selection with simple random sampling would have been equal for all agencies. In order to increase the opportunity of selecting larger agencies (to reflect issues concerning number of participants) and yet to obtain a fair representation among smaller agencies (to address issues related to agencies), we used a square root transformation that would attenuate the size differences between agencies. The sample was selected with probabilities proportional to the square root of the number of participants, enabling the research to address the needs for information at both the participant and agency level.

## Defining Local Agencies

Upon examination of the FNS-191, it became clear that the definition of "local" agency was ambiguous. In some States (Delaware, Arkansas, Louisiana, Puerto Rico) there are no local agencies per se. Instead, there is one local agency (the State) and numerous clinics. In others (e.g., Oklahoma) there is one major agency as large as many State agencies and a few small ones. Finally, there are some large city agencies that are also larger than many State agencies.

Based on conversations with the States, it was found that all had some type of administrative units between the State and the clinics, generally in the form of a regional administrative unit. However, the role of the regional level varies, and based on discussions with each State, it was apparent that some of the local agency survey questions (e.g., staffing and budgeting) could best be answered by the "State/Local" agency with the remainder answered by various regional staff.

Using regional administrative units as the definition of local agency would be inconsistent with FNS practice and would affect the selection of local agencies in other States. This led to the decision to sample as planned (defining a local agency to be one listed as such in the FNS-191 file for 1991, with number of participants greater than 0 ), but then to subsample the larger agencies as needed to obtain information from the regional administrative units.

All agencies with more than 30,000 participants were sampled with certainty, and it is for this set of agencies that sampling lower level units was considered. A total of 13 such agencies were identified.

## Sample Size

The determination of the exact number of agencies to be sampled was based on whether or not the agencies were affected by factors related to Federal and State legislative and regulatory initiatives and by growth patterns during the period of study. This required analysis of the participation patterns for States using FNS-191 information between 1988 and 1991, as well as identification of those States that were influenced by cost-containment and other factors that would have affected participation. For a random sample of 250 agencies, the 95 percent confidence interval of an estimate at the local agency level for population estimates would be plus or minus 5.74 percent in the case of a categorical variable where 50 percent answer each way (the worst case scenario) when one corrects for the number in the population. These figures apply to a random sample, and to the extent that stratification is effective or not, the number would vary. We therefore estimated, from partial review of one FNS file, that we would need a sample between 250 and 300 agencies.

The sample was set at 300 local agencies as listed in the FNS-191. Of these, 16 were nonrespondents; resulting in 284 local agencies went into the final sample.

## Stratification

The FNS-191 files for 1987, 1989, and 1991 were merged, even though there was no unique identifier that permitted an exact merger. The State agency codes changed from year to year and the local agency IDs also did not seem to be completely well defined. A match was made on State postal code and local agency ID, and where local agency IDs were duplicated (presumably because they were associated with different State agencies), a match on city was required. On examination of the files, it was found that there were a number of false matches and presumably some failures to match. Thus an exact determination of which agencies exhibited change was not possible. Even on examining the name and address, one was not always able to tell whether one was dealing with the same agency or not.

However, an exact determination was not needed. A stratification variable was established separating slow growth agencies from the rest. Slow growth was defined as less than 10 percent growth. Being classified in this category meant a match had to have taken place (and on examination of cases, it seems that a true match was accomplished in most cases). The purpose of matching was to ensure proper representation of slow growth and fast growth agencies. A stratification with a small number of misclassifications is still useful as a means of increasing precision. The sampled units were later reclassified for analytic purposes.

A second variable was defined as to whether or not the growth from 1987 to 1989 expressed as a percentage was greater than the growth from 1989 to 1991. Thus overall growth and timing of growth formed a two-way stratification of the sample. Each of the four cells was ordered by region and the frame was ordered by size within cells.

The FNS 191 files for 1988 and 1992 were obtained after the sample was drawn and the data collected. These files did not enter into the draw of the sample but were used in adjusting the weights and for analytic purposes.

## Weights

Each agency was assigned an initial sampling weight $1 / p$ where $p$ is the probability of selection. This probability is 1.0 for the certainty agencies and $(\mathrm{k}(\mathrm{n}-\mathrm{c})) / \mathrm{K}^{\prime}$ where k is the agency size (the transformed measure of the number of participants), n is the number of agencies sampled, c is the number of certainty agencies, and $\mathrm{K}^{\prime}$ is the sum of the sizes of the noncertainty agencies.

After the data were collected, the weights of the noncertainty respondents were adjusted so that the total weights would total to the number of local agencies in the 1992 FNS-191 file. After the adjustment of the local agency weights, the weighted number of participants were adjusted so that they would add up to the exact number of participants according to the same file.

## Description of the Procedure Used to Draw the Sample

The 13 largest agencies (all agencies with over 30,000 participants) were first sampled with certainty. Then the agencies were sorted by overall growth (slow versus fast), timing of growth, region, and within region in descending order of size. The square root of the population was calculated for each agency and the square roots were added. The total was divided by 287 (the number of noncertainty agencies to be sampled) and this ratio became the interval size. At this point it was verified that no agency's size measure (square root of the participant total) exceeded the interval size. A random number from 0 to the interval size was selected. The cumulative sum of the size measures was obtained for each agency, thus defining a segment for each agency. The agency in whose segment the starting point fell was sampled. Then one interval was added to the starting point and the segment in which that number fell determined the next sampled number. The process was repeated until all 287 noncertainty agencies were sampled.

To represent this quantitatively let $X_{1} \ldots X_{k}$ represent the noncertainty agencies ordered by region and size (the square root of the population) within region. Let $\mathrm{s}_{1} \ldots \mathrm{~s}_{\mathrm{k}}$ correspond to the measure of size of each agency. Let $b=\left(s_{1}+s_{2}+\ldots+s_{k}\right) / 287$. Now let $c_{j}=s_{1}+s_{2}+\ldots+s_{j}$ where $c_{0}$ $=0$. A random starting value e is selected between 0 and b . The sample is the set of noncertainties $X_{j}$ for which $c_{j-1}<e+i b \leq c_{j}$ for some integer $i$ where $0 \leq i \leq 286$.

## Standard Error

Standard error estimations were carried out using SUDAAN (Professional Software for Survey Data Analysis), software developed by Research Triangle Institute, that calculates Taylor series standard error estimates. However, SUDAAN does not calculate standard errors for the design
used in this study. Indeed, since the sample was drawn systematically, there is no unbiased estimate of the variance. However, there are a number of approximations that are commonly used. The most common of these is obtained by collapsing the noncertainty units into strata of two or three, where adjacent units in the systematic order are placed in the same stratum. Then one calculates the variance for a PPS sample without replacement.

One must take into account that the sampling intervals do not correspond to where the size of the local agencies will fall. Thus the probabilities of selection will not be exact but will be sufficiently close to make the design correspond with a fair degree of accuracy to the one used.

The design was prepared such that each sampled unit was assigned to a stratum, corresponding to the segment of the frame from which it was sampled. These were arranged so that the size measures were as equal as possible among the strata. Unit nonresponses also required special treatment. Strata yielding unit nonresponse were omitted, but population counts for those strata were added to the remaining strata. This is essentially equivalent to spreading nonresponse across strata (since adjustments were made to the totals for the entire population). Then adjacent pairs of strata were collapsed (with one collapsed cell of three sampled units). Certainty units were assigned a cell of their own. All certainty units were respondents.

The SUDAAN procedure for unequal probability sampling of PSUs without replacement was used. Joint probabilities of selection used the approximation presented by Hartley and Rao (Hartley, H.O. and Rao, J.N.K. 1962. Sampling with unequal probabilities and without replacement, Ann. Math. Statist. 33, pp. 350-374).

For most of the tables there was no second stage sample. The crosstabulation procedure was used, using either the adjusted weights or the adjusted weighted participant counts as weights. Because the weights had been adjusted to a fixed total, there was no variance in the total; instead of using the variance of the weights, the product of the variance of the percentage and the total count was used.

The exception was in the estimation of the variance for tables referring to principal clinics. Here the agency weights had been adjusted, but not the principal clinic weights. It was decided that the weight variances (which provide variances for the total) would present a conservative estimate, given that they do not take into account the partial adjustment. Here a second stage sample was defined, but one where 100 percent of the principal clinics were sampled.

## Section 6

## Survey Instrumentation

## LOCAL WIC AGENCY QUESTIONNAIRE WIC DYNAMICS STUDY

## INTRODUCTION

The WIC program has undergone many changes in the last few years. There have been some new program requirements and the number of WIC participants has grown nationaliy. These changes have probably had an effect on your agency and have moditied the way your agency provides services to WIC participants.

Because the experience of your agency will assist in the planning for the future of WIC. we would like to find out how the WIC program is operating in your agency and what concems you have. At the present time there is considerable discussion about the impact of potential WIC funding and participation increases. We are particularly interested in learning about how agencies currently operate, how this differs from the past, and changes that might occur in the future.

This questionnaire has three major sections. The first section asks you to describe how you view changes that have occurred in the program since 1988. The second and third sections ask you to describe your local agency and the services that you provide.

## IDENTIFYING INFORMATION

## [LABEL]

Is information on the above label correct? If not, change any incorrect information. Thank you.

## INSTRUCTIONS

Most of these questions should be answered by the WIC DIrector. Other WIC staff members may also have information that will help in answering the questions.

In the space provided below, please enter your name, title, phone number, and the date on which you completed this questionnaire. Please write legibly in this section and throughout the questionnaire. You may be contacted by staff from Macro International if any of your answers need clarification. If you have questions about any of the items please call Ms. Cindy Morgan or Ms. JoAnn Kuchak collect at (301) 5885484.

Your name:
Title: $\qquad$
Telephone Number: $\qquad$
Date: $\qquad$
To analyze your answers, we need to know if your agency was sub-divided or consolidated at any time from 1988 to the present. I so, please list the name of each affected agency on the lines below and check whether the agency was consolidated with your agency or split off from your agency.

| Consolldated |  |
| :---: | :---: |
| With | Separated |
| From |  |

Whth

## CONFIDENTIALITY

Although we ask for identitying information for follow-up, your responses will be held confidential by Macro International and names will not, under any circumstances, be shown to USDAFNS. All information obtained from this survey will be presented in the aggregate or contained in a computerized file of responses without identifiers.

## OUR THANKS

We know how busy all WIC staff are and are grateful for your cooperation. We hope you view this as an opportunity to be heard and have input into decisions made at the national level.

## PART I CHANGES IN THE WIC PROGRAM AND THEIR IMPACTS ON LOCAL AGENCIES

## SECTION A GROWTH AND CAPACITY

1a. Since 1988, this agency's caseload has: [Check one.]

| Decreased | Stayed About <br> the Same | Increased |
| :---: | :---: | :---: |
| $\square$ | $\square$ | $\square$ |

1b. How would you characterize these changes in caseload? [Check one.]
$\square \quad$ No changes in caseload since 1988
$\square$ Generally steady growth
$\square \quad$ Generally steady decline
$\square$ Growth every year, with one or more years of peak growth
$\square \quad$ Decline every year, with one or more years of sharp decline
$\square$ Constant up and down filuctuations, with no peaks
$\square$ Constant up and down fluctuations with peak growth
$\square$ Constant up and down fluctuations with sharp declines

## $\square$ Other [specity]

$\qquad$

2a. How close are you to operating at maximum capacity (relative to the size of your WIC caseload and your capability to deliver services effectively)? [Check one.]

| Below <br> Capachy | At Capachy | Above <br> Capacity |
| :---: | :---: | :---: |
| $\square$ | $\square$ | $\square$ |

2b. If your agency tapped all of the resources you know to be currently available to you, up to how many more wic particlpants could you serve while maintaining your current level of services? [Please estimate to the nearest 100. Insert number below.]

## SECTION B PROGRAM CHANGES

3. Since 1988, there have been many changes in WIC. Infant formula rebates and additional funding have increased patticipation, and new program requirements have been placed on local WIC agencies (e.g., drug abuse education, breastifeding promotion). In addition, many states and local communities have suffered economic hardships. Below is a list of events, requirements, and circumstances that may have affected the way local agencies provided WIC services between 1988 and 1992. Please review the following list and indicate for each item whether the item affected your local WIC agency.

IPlease check the appropriate box to indicate whether these changes had an impact on the delivery of services at your agency.]

## WIC PROGRAM CHANGES <br> 1988-1992

| Changes | Impact | No <br> Impact | Not <br> Applicable |
| :--- | :---: | :---: | :---: |
| CASELOAD FLUCTUATIONS |  |  |  |
| Caseload increases | $\square$ | $\square$ | $\square$ |
| Caseload decreases | $\square$ | $\square$ | $\square$ |
| Reprioritizing or targeting caseload | $\square$ | $\square$ | $\square$ |
| Other [specify] | $\square$ | $\square$ | $\square$ |
| ECONOMIC CONDITIONS |  | $\square$ | $\square$ |
| Federal funding | $\square$ | $\square$ | $\square$ |
| Availability of state funds for WIC | $\square$ | $\square$ | $\square$ |
| Availability of local funds for WIC | $\square$ | $\square$ | $\square$ |
| Downturn in local economy | $\square$ | $\square$ | $\square$ |
| State budget cuts | $\square$ | $\square$ | $\square$ |
| Food cost fluctuations | $\square$ | $\square$ | $\square$ |
| Infant formula rebates | $\square$ | $\square$ | $\square$ |
| Other [specify] | $\square$ | $\square$ | $\square$ |


| Changes | Impact | $\begin{gathered} \text { No } \\ \text { Impact } \end{gathered}$ | Not Applicable |
| :---: | :---: | :---: | :---: |
| NEW PROGRAM REQUIREMENTS <br> Breastfeeding promotion requirements |  |  |  |
|  |  |  |  |
| Drug abuse education requirements | $\square$ | $\square$ | $\square$ |
| Homeless service requirements | $\square$ | $\square$ | $\square$ |
| Vendor management initiatives | $\square$ | $\square$ | $\square$ |
| Other [specify] | $\square$ | $\square$ | $\square$ |
| OTHER INITIATIVES |  |  |  |
| Medicaid expansion (expanded eligibility for Medicaid) | $\square$ | $\square$ | $\square$ |
| Coordination/integration of services <br> (e.g., one-stop shopping, self-sufficiency programs) | $\square$ | $\square$ | $\square$ |
| Other [specity] | $\square$ | $\square$ | $\square$ |
| OTHER FACTORS Shortages of physicians | $\square$ | $\square$ | $\square$ |
| Shortages of nutritionists | $\square$ | $\square$ | $\square$ |
| Increases in non-English-speaking population | $\square$ | $\square$ | $\square$ |
| Computerization/automation initiatives | $\square$ | $\square$ | $\square$ |
| Agency reorganization (e.g., changes in local agency catchment areas) | $\square$ | $\square$ | $\square$ |
| Other [specity) | $\square$ | $\square$ | $\square$ |

4. Please identify the changes that have taken place since 1988. [Check all applicable statements.] Certification

Yes No


Stopped doing walk-in certifications


Started doing walk-in certifications


Scheduled less time per certification per person


Scheduled more time per certification per person


Replaced one-on-one interviews with self-administered forms
$\square \quad \square$ Conducted group certifications


Dropped group certificationsReduced priorities servedLimited caseload to certain prionities
Added priorities served
Other [specify]

## Nutrition Education

$\square \quad \square \quad$ Increased group nutrition educationCanceled or postponed group nutrition education
$\square \quad \square \quad$ Canceled individual sessionsAdded more group nutrition education sessions and offered fewer individual sessions
Added more individual nutrition education sessions and offered fewer group sessions


Placed more emphasis on breastfeeding
 Increased staff time per participant in nutrition education

Decreased staff time per participant in nutrition educationRelied more on paraprofessionals to deliver nutrition educationUsed more handouts and pamphlats to supplement or minimize staff
$\square \square$ Increased class sizes
$\square \square$ Decreased class sizes

Other [specity]

## Food Instruments

## Yes <br> No



Issued multiple food instrumentsIssued single food instrument
Issued standard packages more often
Prepared food instruments before determining eligibility


Implemented classes on how to use food instrumentsWrote food instrument at local agency level
Computer-generated food instuments at local agency
Other [specifyl

## Scheduling



Began appointment system or rigorously held to appointment scheduleOver-booked WIC participant appointments


Implemented less flexible clinic activity schedules (limiting services to a particular type at a particular time or on a particular day)

implemented more flexible clinic activity schedules


Extended clinic hours beyond regular business hours, such as Saturday, early morning, or evening clinics


## Shortened clinic hours

Extended clinic days of service (for clinics not typically open every day)Cut back on days of service (for any clinic)Other [specify]
Staff


Utilized volunteer staff to a greater extentUtilized volunteer staff to a lesser extent


Utilized contract/consultant staff to a greater extent
Utilized contract/consultant staff to a lesser extentUsed more itinerant staff (who traveled to the various sites)Used less itinerant staff (who traveled to the various sites)Used more paraprotessional staff
Used fewer paraprofessional staff
Used more clerical staff


Used fewer clerical staffUsed more professional staff
Staff (continued)
Yes No
$\square \square$ Used fewer professional staflCurtailed or canceled staff meetings
$\square \square$ Cutback training activities for staffIncreased training activities for staff
$\square \square$Other [specify]
Wating Llsts
$\square$Initiated or increased use of waiting lists
Dropped waiting lists
$\square \square$ Other [specifyl
Administrativ
ㅁ
Postponed or canceled special projects
Delayed completion of "paperwork" and reports
$\square \square$ Streamlined recordkeeping
$\square \square$ Streamlined case managementMade greater use of computers$\square \square$Increased paperwork
$\square \square$ Decreased paperwork
$\square \square$ Expanded case management
$\square \square$Other [specify]
Facillites
$\square \square$ Moved to new facilities
Added clinic sites
$\square \square$ Eliminated clinic sites
$\square$ Made more efficient use of space
$\square \square$ Co-located with health care providerOther [specity]
Other
$\square \square$ Initiated special projects
$\square \square$ Planned, scheduled, and held regular staff meetings
$\square$ Other [specity]Other [specify]
$\qquad$
$\qquad$
$\qquad$

## PART II LOCAL AGENCY OPERATIONS

## SECTION A LOCAL AGENCY CHARACTERISTICS

5. How many WIC participants did your agency serve as of November 19927 [Insert number for each type of participant.]

Number of Particlpants

| Pregnant women | - |
| :--- | :--- |
| Breastieeding women | - |
| Postpantum women | - |
| Infants | - |
| Children |  |
| $\quad$ Total |  |

6. Which one of the following WIC service settings best describes your local agency? (Check the box next to the best description -- check only ONE box.]
$\square$ State health agency
$\square$ District heath agency
$\square \quad$ Multi-county health agency
$\square$ Single county health agency
$\square$ Municipal health agency
$\square$ Community health agency
$\square$ Community action agency
$\square$ Indian health agency
$\square$ Public hospital
$\square$ Private voluntary hospital
$\square$ Private proprietary hospital
$\square \quad$ Other [specify] $\qquad$
7. What is the best description of the geographic area served by your local agency? [Check the box next to the best description - check only ONE box.]

A single neighborhood
A group of neighbortoods
A city
A portion of one county (or parish)
$\square$ One county (or parish)Portions of several counties
Multiple counties or parishes
$\square$ A state-designated health district: Enter number of counties $\qquad$
$\square$ Special populations throughout the state [For example, the local WIC agency serves a special population group regardess of place of residence in the state. A public hospital drawing high risk, indigent maternity patients from a wide area of the state might fit this designation.]
$\square$ The entire state: Enter number of counties $\qquad$
The next series of questions are about your clinic/service sites.
8. Please enter the total number of local agency service sites that provide any type of WIC services.

Enter number of sites: $\qquad$
8a. How many of these sites provide all the following WIC services: certification, nutrition education, and food instrument [e.g., voucher] issuance?

Enter number of sites: $\qquad$
8b. How many sites have health care services available on site or available within the same building complex?

Enter number of sites: $\qquad$
8c. How many sites have soclal services available on site or available within the same building complex?

Enter number of sites: $\qquad$
8d. How many sites operate on a part-time basis? [Part-time means the site offers WIC services only some days or some portions of each weekday.]

Enter number of sites: $\qquad$
8e. How many sites operate with extended hours, offering weekend or evening hours?
Enter number of sites: $\qquad$

8f. How many of these sites have been established since 1988?
Enter number of sites: $\qquad$
8 g . Since 1988 , how many sites were eliminated or consolidated?
Enter number of sites: $\qquad$
9. Does your agency use vans, moblle unlis, or other motorized facillites to provide WIC services? [Check one.]
$\square$ Yes
$\square$ No
10a. Some local WIC agencies use staff funded from other sources. For the following types of staff that perform WIC services, enter the current number of FTE positions (1 FTE $=40 \mathrm{hrs}$ per week) by funding source. [Enter number.]

| Staft Positions | Staft Number of Positions |  |  |
| :--- | :--- | :--- | :--- |
|  | Funded by WIC | Funded by a <br> Non-WIC <br> Government <br> Source | Volunteer/ <br> Charitable |
|  |  |  |  |
| Paraprofessional |  |  |  |
| Clerical/support |  |  |  |

10b. Have these staffing numbers changed since 1988? [Check the box under the appropriate column.]

|  | More | No Change | Less | Not <br> Applicable |
| :---: | :---: | :---: | :---: | :---: |
| WIC funded staff | $\square$ | $\square$ | $\square$ | $\square$ |
| Non WIC-funded staff | $\square$ | $\square$ | $\square$ | $\square$ |

10c. Do any non-WIC funded medical care providers perform certifications? [Check one.]
[. Yes
$\square$ No

11a. Do you currently use any contract or consulting staff to provide wiC services? [Check one.]Yes

- No

11b. If yes, how many staff are consultants or contract staff?
Enter number of staft: $\qquad$
What positions do they hold? [Please specity.] $\qquad$
$\qquad$
$\qquad$
11c. How many staff travel from one site to one or more other WIC sites to provide WIC services? [Enter the number of staff in each category.]
$\qquad$ Professional
__ Paraprofessional
$\qquad$ Clerical/support
12. For each of the following non-labor items, check the box which best describes the funding source. [Check the box under the appropriate column.]

| Non-Labor Items | Exclusivaly <br> Funded by <br> WIC | Exclusively Funded <br> by a Non-WIC <br> Government Source | Exclusively <br> Charitable | Funded by a Combination of <br> WIC, non-WIC Government <br> Sources and/or Charitable <br> Sources |
| :--- | :---: | :---: | :---: | :---: |
| Space | $\square$ | $\square$ | $\square$ | $\square$ |
| Utilities | $\square$ | $\square$ | $\square$ | $\square$ |
| Computer equipment | $\square$ | $\square$ | $\square$ | $\square$ |
| Medical equipment | $\square$ | $\square$ | $\square$ | $\square$ |
| Educational equipment <br> (audio/visual) <br> Other (specity) | $\square$ | $\square$ | $\square$ | $\square$ |
|  | $\square$ | $\square$ | $\square$ | $\square$ |
|  | $\square$ | $\square$ | $\square$ | $\square$ |

13. Overall, has there been a change in the level of funding for items such as space utilities, equipment. or other expenses since 1988? [Check the box under the appropriate column.]

| Funding for Non-Labor Items | More | About the Same | Less | Not Applicable |
| :---: | :---: | :---: | :---: | :---: |
| WIC FUNDED: |  |  |  |  |
| Space | $\square$ | $\square$ | $\square$ | $\square$ |
| Utiities | $\square$ | $\square$ | $\square$ | $\square$ |
| Computer equipment | $\square$ | $\square$ | $\square$ | $\square$ |
| Medical equipment or supplies | $\square$ | $\square$ | $\square$ | $\square$ |
| Educational equipment or supplies | $\square$ | $\square$ | $\square$ | $\square$ |
| Other (such as office supplies, travel, etc.) | $\square$ | $\square$ | $\square$ | $\square$ |
| (Please specity) | $\square$ | $\square$ | $\square$ | $\square$ |
|  | $\square$ | $\square$ | $\square$ | $\square$ |
| NON-WIC FUNDED: |  |  |  |  |
| Space | $\square$ | $\square$ | $\square$ | $\square$ |
| Utilities | $\square$ | $\square$ | $\square$ | $\square$ |
| Computers | $\square$ | $\square$ | $\square$ | $\square$ |
| Medical equipment or supplies | $\square$ | $\square$ | $\square$ | $\square$ |
| Educational equipment or supplies | $\square$ | $\square$ | $\square$ | $\square$ |
| Other (such as office supplies, travel, etc.) | $\square$ | $\square$ | $\square$ | $\square$ |
| (Please specity) | $\square$ | $\square$ | $\square$ | $\square$ |
|  | $\square$ | $\square$ | $\square$ | $\square$ |

14a. We are interested in the current sultability of statring - that is, the number of staff and the appropriateness of their skills and experience. For each type of staff, please check the box that describes the sufficiency of your current staff in terms of number of staff and appropriateness of skills and experience. [For each type of staff check one box.]

|  | Number of Staff |  |  |  |
| :--- | :---: | :---: | :---: | :---: |
|  | More Than <br> Sufficient | Sufficient | Less Than <br> Sutficient | Not <br> Applicable |
| Professional | $\square$ | $\square$ | $\square$ | $\square$ |
| Paraprofessional | $\square$ | $\square$ | $\square$ | $\square$ |
| Clerical/support | $\square$ | $\square$ | $\square$ | $\square$ |


| Appropriateness of Skills and Experionce in Providing Nutrition Education/Nutrition Services |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | More Than Sutticient | Sufficient | Less Than Sufficient | Not Applicable |
| Protessional | $\square$ | $\square$ | $\square$ | $\square$ |
| Paraprotessional | $\square$ | $\square$ | $\square$ | $\square$ |
| Clerical/support | $\square$ | $\square$ | $\square$ | $\square$ |


| Appropriateness of Skills and Experience in Performing Non-Nutritional Servicas (0.9. reforrals to social services) |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | More Than Sutficient | Sufficient | Less Than Sutticient | Not Applicable |
| Professional | $\square$ | $\square$ | $\square$ | $\square$ |
| Paraprofessional | $\square$ | $\square$ | $\square$ | $\square$ |
| Clericalsupport | $\square$ | $\square$ | $\square$ | $\square$ |

14b. Please identify how the suitablity of your staff has changed since 1988. For each type of staff, please check the box that describes the change in the surficiency of your staff relative to 1988 in terms of size and appropriateness of skills and experience. [For each type of staff, check one box.]

|  | Number of Staff |  |  |  |
| :--- | :---: | :---: | :---: | :---: |
|  | More Than <br> Sutficient | No Change |  | Less Than <br> Sufficient |
|  | $\square$ | $\square$ | $\square$ | Applicable |
| Prolessional | $\square$ | $\square$ | $\square$ | $\square$ |
| Paraprofessional | $\square$ | $\square$ | $\square$ | $\square$ |
| Clerical/support | $\square$ | $\square$ | $\square$ | $\square$ |


| Appropriateness of Skills and Experience in Providing Nutrition Education/Nutrition Services |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | More Than Sufficient | No Change | Less Than Sufficient | Not Applicable |
| Protessional | $\square$ | $\square$ | $\square$ | $\square$ |
| Paraprofessional | $\square$ | $\square$ | $\square$ | $\square$ |
| Clerica/support | $\square$ | $\square$ | $\square$ | $\square$ |


| Appropriatenass of Skills and Experience in Performing Non-Nutritional Services (e.g. referrals to social services) |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | More Than Sufficiont | No Change | Less Than Sutlicient | $\begin{gathered} \text { Not } \\ \text { Applicable } \end{gathered}$ |
| Professional | $\square$ | $\square$ | $\square$ | $\square$ |
| Paraprofessional | $\square$ | $\square$ | $\square$ | $\square$ |
| Clerical/support | $\square$ | $\square$ | $\square$ | $\square$ |

15. Enter the number of vacant positions that your agency currently has. [Enter number.]

Number of Current
Vacamt Positions
Professional
Paraprofessional $\qquad$

16a. Please check the category that describes whether it is difficult to recrult and hire staff for vacant staff positions. [For each type of staff, check one box.]

| Staff Positions | No Vacancles | Not Difficult | Difficult |
| :--- | :---: | :---: | :---: |
| Professional | $\square$ | $\square$ | $\square$ |
| Paraprofessional | $\square$ | $\square$ | $\square$ |
| ClericaVsupport | $\square$ | $\square$ | $\square$ |

16b. Has the degree of difficulty recrulting and flling vacant staff postions changed since 1988 ? [Check one.]

| Less Difficult | About the Same | More Difficult |
| :---: | :---: | :---: |
| $\square$ | $\square$ | $\square$ |

17. What were the main problems filling vacant positions? [Check all that apply.]
$\square \quad$ There were no problems
$\square$ Hiring freeze

- Shortage of certain types of staff
[specity]
$\square$ Salary and/or benefits not competitivePoor working conditions
$\square$
Safety of the facility and/or neighborhoodOther [specity] $\qquad$

18. What were the main problems contributing to high staff turnover? [Check all that apply.]

There were no problemsSalary and/or benefits not competitive
$\square \quad$ Poor working conditions
$\square$ Safety of the facility and/or neighborhood
$\square$ Work load
$\square$ Low morale
$\square$ Other [specify]

19a. Retaining staff once you have hired them may also be a problem. Is it difficult to retain staff? [For each type of staff, check one box.]

| Staff Positions | Dlficult | Not Difflcult |
| :--- | :---: | :---: |
| Professional | $\square$ | $\square$ |
| Paraprotessional |  |  |
| Clericalvsupport | $\square$ | $\square$ |

19b. Has the degree of difilculty retaining staff changed since 1988? [Check one.]

| More Difficult | About the Same | Less Difflcult |
| :---: | :---: | :---: |
| $\square$ | $\square$ | $\square$ |

20. Indicate the languages for which staft are available to act as interpreters for WIC participants.
[Check all that apply.]
$\square$ Spanish
$\square \quad$ Vietnamese
$\square$ Cambodian/Khmer
$\square$ Laotian
$\square$ Thai
$\square$ Hmong

- Chinese
$\square$ Haitian/Creole
$\square$ French
$\square$ Portuguese
$\square$ Native American Language
$\square$ Sign Language
$\square$ Other [specify] $\qquad$


## SECTION B SPACE AND FACILITIES

21. In your opinion, is your local agency's current space adequate for the number of staff, participants, and program responsibilities? [Check one.]

| Adequate | Inadequate |
| :---: | :---: |
| $\square$ | $\square$ |

22. Do you think the adequacy of your space and facilities has changed since 1988? [Check one.]

| Decreased | About the Same | Increased |
| :---: | :---: | :---: |
| $\square$ | $\square$ | $\square$ |

## PART III PARTICIPANT SERVICES

## SECTION A SERVICES OVERVIEW

23a. What is the variation and typical number of minutes that a WIC participant spends walting for following WIC services: If your agency has more than 6 clinics, please provide estimates for the 6 largest clinics. [Enter number of minutes.]

|  | WaltIng TIme |  |  |  |
| :--- | :--- | :--- | :---: | :---: |
|  | Variation in \# Minutes | Typical \# <br> Minutes | Not <br> Applicable |  |
| Certification | From | to |  | $\square$ |
| Group nutrition education | From $\quad$ to |  | $\square$ |  |
| Individual nutrition education | From $\quad$ to |  | $\square$ |  |
| Issuance | From $\quad$ to |  | $\square$ |  |
| Food pick up | From | to |  | $\square$ |

23b. How has the amount of time a WIC participant spends walting for services changed since 1988 ? [Check one for each service.]

|  | Walting Tme |  |  |  |
| :--- | :---: | :---: | :---: | :---: |
|  | Decreased | About the Same | Increased | Not Applicable |
| Certification | $\square$ | $\square$ | $\square$ | $\square$ |
| Group nutrition education | $\square$ | $\square$ | $\square$ | $\square$ |
| Individual nutrition education | $\square$ | $\square$ | $\square$ | $\square$ |
| Issuance | $\square$ | $\square$ | $\square$ | $\square$ |
| Food pick up | $\square$ | $\square$ | $\square$ | $\square$ |

24a. What is the variation and typical number of minutes that a WIC participant spends recelving the following WIC services? (i.e. personal transaction time) If your agency has more than 6 clinics, please provide estimates for the 6 largest clinics. [Enter number of minutes].

|  | Tlme Recelving Services |  |  |  |
| :--- | :--- | :---: | :---: | :---: |
|  | Variation in \# Minutes | Typical \# <br> Minutes | Not <br> Applicable |  |
| Certification | From to |  | $\square$ |  |
| Group nutrition education (Not high <br> risk) | From | to |  | $\square$ |
| Group nutrition education (High risk) | From | to |  | $\square$ |
| Individual nutrition education (Not high <br> risk) | From | to |  | $\square$ |
| Individual nutrition education (High risk) | From | to |  | $\square$ |
| Issuance | From | to |  | $\square$ |
| Food pick up | From | to |  | $\square$ |

24b. How has the amount of time a WIC participant spends recelving services changed since 1988 ? [Check one for each service.]

|  | Time Receiving Services |  |  |  |
| :--- | :---: | :---: | :---: | :---: |
|  | Decreased | About the Same | Increased | Not Applicable |
| Certitication | $\square$ | $\square$ | $\square$ | $\square$ |
| Group nutrition education | $\square$ | $\square$ | $\square$ | $\square$ |
| Individual nutrition education | $\square$ | $\square$ | $\square$ | $\square$ |
| Issuance | $\square$ | $\square$ | $\square$ | $\square$ |
| Food pick up | $\square$ | $\square$ | $\square$ | $\square$ |

## SECTION B CERTIFICATION

25. Please indicate the number of clinics in your agency that use the methods listed for obtaining hematological measurements. If your agency has more than 6 clinics please provide estimates for the $\mathbf{6}$ largest clinics. [Enter the number of clinics.]

| Methods | Typlcally Used | Not Used | Don't Know |
| :--- | :--- | :--- | :--- |
| On site by WIC stafi | - | - |  |
| On site by non-WIC staft |  |  |  |
| Off site by health care personnel; results |  |  |  |
| brought in by applicant |  |  |  |
| Off site by heath care personnel; results <br> brought in by someone other than applicant <br> Other [describe] | - | - |  |

26. In how many clinics are hematologlcal measurements coordinated with local lead screening efforts? If your agency has more than 6 clinics, please provide estimates for the 6 largest clinics. [Enter the number of clinics.]

## Number of Clinics

Coordinated with lead screening
Not typically coordinated with lead screening
$\qquad$

Don't know

## SECTION C

REFERRALS

## 27. On Site Health Care Services.

For the following health care services, please estimate the number of clinics at which service is or is not available on-site. If your agency has more than 6 clinics, please provide estimates for the 6 largest clinics. [Enter the number of clinics.]

| Heath Care Services | Number of Clinics by Service Avallability |  |  |
| :---: | :---: | :---: | :---: |
|  | Available on Site | Not Available on Site | Don't Know |
| Dental care |  |  |  |
| Obstetricalgynecological care |  |  |  |
| Breastieeding support program |  |  |  |
| Pediatric care |  |  |  |
| Family planning services |  |  |  |
| Immunizations |  |  |  |
| EPSDT |  |  |  |
| Other health screening |  |  |  |
| Medicaid screening |  |  |  |
| Other [specify] |  |  |  |
| Other [specifyl |  |  |  |
| Other [speciiyl |  |  |  |

28a. On Site Application for Other Services.
For the following non-health care referral services that may be available to a WIC patticipant, please estimate the number of clinics at which the service is or is not available on-site. If your agency has more than 6 clinics, please provide estimates for the 6 largest clinics. [Enter the number of clinics.]

| Other Services | Number of Cilinics According to Service Avallability |  |  |
| :---: | :---: | :---: | :---: |
|  | Available on Site | Not Available on Site | Don't Know |
| AFDC | - | - |  |
| Food assistance programs |  |  |  |
| Social services program |  |  |  |
| Head Start |  |  |  |
| Child care |  |  |  |
| Transportation |  |  |  |
| Substance abuse counseling |  |  |  |
| Housing |  |  |  |
| Adult education/job training |  |  |  |
| Other [specityl] |  |  |  |
| Other [speciity] |  |  |  |
| Other [specify] |  |  |  |

28b. For the following non-heath care referral services that may be available to a WIC participant, please estimate the number of clinics that offer WIC participants the opportunity to apply for these services. If your agency has more than 6 clinics, please provide estimates tor the 6 largest clinics. [Enter the number of clinics.]

| Other Services | Number of WIC CIInics that Typlcally Offer Opportunities to Apply for Soclal Services |  |  |
| :---: | :---: | :---: | :---: |
|  | Typically Offered | Not Offered | Don't Know |
| AFDC | - | - | - |
| Food assistance programs |  |  |  |
| Social services program |  |  |  |
| Head Start |  |  | - |
| Child care | - |  |  |
| Transportation |  |  |  |
| Substance abuse counseling |  |  |  |
| Housing |  |  |  |
| Adult education job training |  |  |  |
| Child Support |  |  |  |
| Other [specify]. |  |  |  |
| Other [specity] |  |  |  |
| Other [specify] ..._ |  |  |  |

29a. In how many of your clinics, have you or your statt experienced problems or difficulties obtaining needed non-WIC services (listed in Questions 27 and 28 above) for WIC participants during the past year? If your agency has more than 6 clinics, please provide estimates for the 6 largest clinics. [Enter the number of clinics.]

|  | Number of CIInics | Typically a <br> Problem | Not a <br> Problem |
| :--- | :---: | :---: | :---: |

29b. What were the main difficultles? [Check all that apply.]We have not experienced problems obtaining needed servicesServices not available or available on a limited basis.
$\square$ Waiting list for services.
$\square \quad$ WIC participants not eligible for needed services.
$\square$ Sërvices not offered during convenient times.
$\square$ Lack of or limited transportation to access services.
$\square$ Other [specify] $\qquad$
$\square \quad$ Other [specify] $\qquad$
30. Since 1988, in how many of your clinics has there been a change in the amount of staff time spent on referrals for participants? If your agency has more than 6 clinics, please provide estimate for the 6 largest clinics. [Enter the number of clinics.]

|  | Tlme on Referrals |  |  |  |  |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Substantially <br> Less | Somewhat <br> Less | About <br> the Same | Somewhat <br> More | Substantially <br> More |
| Number of clinics <br> spending: | - |  |  |  |  |

## SECTION D NUTRITION EDUCATION

31. Enter the number of staff responsible for nutrition education duties who are licensed, registered, or eligible for registration as a dietician. [Complete all categories that apply.]

> Total Staff
_Licensed/registered/certified or eligible for registration
$\qquad$ Paraprofessionals (less than a 4-year degree)
$\qquad$ Other professionals (i.e. nurse, heatth educator or others with a 4 -year degree)
32. In the table below, please indicate the nutrition education toplcs offered during the past year. [Check the boxes that indicate the method used to deliver the information. Check all that apply.]

| Topics Offered in Nutrition Education and Counseling Sessions, by Dellvery Method | Not Offered | Verbal Presentation (Group or Individual) | Printed Materials | Audio/VIsual | ComputerAssisted |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Management of the individual's certified nutritional risk or medical condition (e.g., anemia) | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Importance of nutrition to participant's heath status | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Description of basic good diet | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Major nutrients provided by WIC food package | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Other sources of particular nutrients such as iron, Vitamin A, and Vitamin C | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Importance of diet for fetal growth | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Breastleeding | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Handling of infant formula | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Use of whole cow's milk | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Solid and table foods | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Importance of nutrition for growth in children | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Nutritious snacks | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Dental heath | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Risks of substance abuse [including drugs, smoking, coffee, alcohol] | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Other [specity] | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |

33. In what language( $\mathbf{S}$ ), other than English, is nutrition education provided in your local agency? [Check the box next to each language that applies.]
$\square$ Spanish
$\square$ Vietnamese
$\square \quad$ Cambodian/Khmer
$\square$ Laotian
$\square$ Thai
$\square$ Hmong
$\square$ Chinese
$\square \quad$ Haitian/Creole
$\square$ French
$\square$ Pontuguese
$\square$ Native American Language
$\square \quad$ Sign Language
$\square$ Other [specify]
34. Are any nutrition education services currently relmbursed by Medicaid? [Check one.]
$\square$ Yes
$\square$ No
$\square$ Don't know

35a. During a 6 -month certification period, how often does a participant receive nutrition educatlon? [Please all that apply for each type of participant.]

|  | High Risk <br> Particlpant | Non-HIgh Risk <br> Particlpant |
| :--- | :---: | :---: |
| Once per certification period | $\square$ | $\square$ |
| Twice per certification period | $\square$ | $\square$ |
| Monthly | $\square$ | $\square$ |
| Bi-monthly (every 2 months) | $\square$ | $\square$ |
| Other (specity) | $\square$ | $\square$ |

35b. What type of session does your agency employ to provide nutrition education? [Please check all that apply for each type of participant.]

|  | High Risk <br> Participant | Non-High Risk <br> Participant |
| :--- | :---: | :---: |
| Individual | $\square$ | $\square$ |
| Small group (2-9) | $\square$ | $\square$ |
| Medium group (10-19) | $\square$ | $\square$ |
| Large group (20-29) | $\square$ | $\square$ |
| Very large group (30+) | $\square$ | $\square$ |

36a. Are the following nutrition education materials and methods used in Individual nutrition education sessions? [Check one for each medium.]

Individual Instruction:

|  | Yes | No |
| :--- | :---: | :---: |
| Verbal discussion/ counseling | $\square$ | $\square$ |
| Pamphlets | $\square$ | $\square$ |
| Food models | $\square$ | $\square$ |
| Food demonstrations | $\square$ | $\square$ |
| Tests | $\square$ | $\square$ |
| Audio tapes | $\square$ | $\square$ |
| Slides | $\square$ | $\square$ |
| Films/videos | $\square$ | $\square$ |
| Flip charts | $\square$ | $\square$ |
| Computer-assisted instruction | $\square$ | $\square$ |
| Other [specify] | $\square$ | $\square$ |

36b. Are the following nutrition education materials and methods used in group nutrition education sessions? [Check one for each medium.]

| Group Instruction: | Yes | No |
| :--- | :--- | :--- |
| Lectures/oral discussions | $\square$ | $\square$ |
| Pamphlets | $\square$ | $\square$ |
| Food models | $\square$ | $\square$ |
| Food demonstrations | $\square$ | $\square$ |
| Tests | $\square$ | $\square$ |
| Audio tapes | $\square$ | $\square$ |
| Slides | $\square$ | $\square$ |
| Films/videos | $\square$ | $\square$ |
| Flip charts | $\square$ | $\square$ |
| Computer-assisted | $\square$ | $\square$ |
| instruction | $\square$ | $\square$ |
| Other [specity] | $\square$ |  |

37. In your opinion, what is the quality of nutrition education that your agency is currently able to offer compared to the quality your agency provided in 1988? [Check one.]

| Substantially <br> Lower | Somewhat Lower | About the Same | Somowhat Higher | Substantially <br> Higher |
| :---: | :---: | :---: | :---: | :---: |
| $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |

38. What are the barriers to your agency providing high-quality nutrition education? [Check all that apply.]
$\square$ There are no barriers.
$\square$ Space
$\square$ Too few staff
$\square$ Too little staff time per participant
$\square$ Participant interest
$\square$ Transportation
$\square \quad$ Child care
$\square$ Participant time
$\square$ Cultural issues/language difficulties
$\square$ Difficulty recruiting qualified staffOther [specify] $\qquad$
39. This agency provides nutrition education directly to: [Check all that apply.]

|  | None | A Faw | Some | Most | All |
| :--- | :---: | :---: | :---: | :---: | :---: |
| Caregiver of <br> infants <br> (0-12 months) | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Caregiver of <br> children <br> Children | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |

## SECTION E QUALITY

40. In your agency, what are the flve most important factors that currently promote high quality WIC services to participants?
41. $\qquad$
42. $\qquad$
43. $\qquad$
44. $\qquad$
45. $\qquad$
46. In your agency, what are the five most Important factors that currently hinder high quality WIC services to participants?
47. $\qquad$
48. $\qquad$
49. $\qquad$
50. $\qquad$
51. $\qquad$

When you have completed this questionnalre, please be sure you have entered your name, title, phone number, and date on page 2 of this questlonnalre. A mailing envelope with postage has been provided for your use. In case the envelope was lost, please send this questionnalre to:

WIC Dynamles
Attn: CSO
Macro International
8630 Fenton Street, Sulte 300
Silver Sping, Maryland 20910

Agaln, we thank you for your cooperation. Your answers will be extremely helpiul to understanding what is happening In the WIC program across the natlon.

# STATE WIC AGENCY QUESTIONNAIRE WIC DYNAMICS STUDY 

## INTRODUCTION

The WIC program has undergone many changes in the last few years. There have been some new program requirements and the number of WIC participants has grown nationally.

To help plan for the future of WIC, we would like to find out how the WIC program is operating at the state and local level and what concems WIC state directors have. At the presemt time there is considerable discussion about whether to increase WIC funding and participation. We are particularly interested in learning about how agencies currently operate, how this differs from the past, and changes that might occur in the future.

This questionnaire has four major sections. The first section asks you to describe how you view changes that have occurred in the program since 1988. The second section asks descriptive information about your agency; the third, WIC program initiatives; and the fouth, other related program initiatives. Please review the entire questionnaire before writing your answers.

Before completing this questionnaire, please review the information on the above label and change any incorrect information. Thank you.

## INSTRUCTIONS

Most of these questions should be answered by the state WIC Director. Other staff members may also have information that will help in answering the questions.

In the space provided below, please enter your name, title, and phone number, and the date on which you completed this questionnaire. Please write legibly in this section and throughout the questionnaire. You may be contacted by staff from Macro International if any of your answers need claritication. If you have questions about any of the items please call Ms. Cindy Morgan or Ms. JoAnn Kuchak collect at (301) 588-5484.

Your name:
Title: $\qquad$
Telephone Number: $\qquad$
Date:

## CONFIDENTIALITY

Although we ask for identifying information for follow-up, your responses will be held confidential by Macro International and names will not, under any circumstances, be shown to USDAFNS. Responses will not be attributed to you or your state. All information obtained from this survey will be presented in the aggregate or contained in a computerized file of responses without identifiers.

## OUR THANKS

We know how busy all WIC staff are and are grateful for your cooperation. We hope you view this as an opportunity to be heard and have input into decisions made at the national level.

## PART I CHANGES IN THE WIC PROGRAM AND THEIR IMPACTS ON STATE AGENCIES

1a. Since 1988, there have been many changes in WIC. Infant formula rebates and additional funding have increased participation, and new program requirements have been placed on the WIC program (e.g., drug abuse education, breastfeeding promotion). In addition, many states and local communities have suffered economic hardships. Below is a list of events, requirements, and circumstances that may have affected the way state WIC agencies operated between 1988 and 1992. Please review the following list and indicate for each item whether the item affected the WIC program in your state between 1988 and 1992.
[Please check the appropriate box to indicate whether these changes impacted the WIC program.]
WIC PROGRAM CHANGES
1988-1992

| Changes | Impact | $\begin{gathered} \text { No } \\ \text { Impact } \end{gathered}$ | Not Applicable |
| :---: | :---: | :---: | :---: |
| CASELOAD <br> Infant formula rebates |  |  |  |
|  |  |  |  |
| Other caseload increases or decreases |  |  |  |
| Other cost containment efforts |  |  |  |
| Other [specity] |  |  |  |
| ECONOMIC CONDITIONSFederal funding policies |  |  |  |
|  |  |  |  |
| Availability of state funds for WIC |  |  |  |
| Downturn in local economies |  |  |  |
| State budget cuts |  |  |  |
| Food cost fluctuations |  |  |  |
| Other [specify] |  |  |  |
| NEW PROGRAM REQUIREMENTS |  |  |  |
| Breastfeeding promotion requirements |  |  |  |
| Drug abuse education requirements |  |  |  |
| Homeless service requirements |  |  |  |
| Immuntzation requirements |  |  |  |
| Prenatal care initiatives |  |  |  |
| Vendor management initiatives |  |  |  |
| Other [specity] |  |  |  |
| OTHER FEDERAL INITIATIVES |  |  |  |
| Medicaid expansion (expanded eligibility for Medicaid) |  |  |  |
| CoordinationVintegration of services (e.g., one-stop shopping, self-sufficiency programs) |  |  |  |
| Other [specity] |  |  |  |
| OTHER FACTORS Computerization/automation initiatives |  |  |  |
|  |  |  |  |
| Other [specify] | $\square$ | $\square$ |  |

1b. Since 1988, what have the major changes in state agency operations been? [Briefly describe below.] Since 1988 - Statfing: $\qquad$
$\qquad$
$\qquad$
$\qquad$
Since 1988 - Funding policies: $\qquad$
$\qquad$
$\qquad$
$\qquad$
Since 1988 - Nutrition education, including breastfeeding promotion and support and use of standards:
$\qquad$
$\qquad$
Since 1988 - Coordination with other agencies and programs that serve WIC participants: $\qquad$
$\qquad$
$\qquad$
$\qquad$

Since 1988 - Monitoring and vendor management procedures: $\qquad$
$\qquad$
$\qquad$
$\qquad$
Since 1988 - Paperwork, including the development of request for proposals (RFPs): $\qquad$
$\qquad$
$\qquad$
$\qquad$

Since 1988 - State administrative rules, regulations, and policies: $\qquad$
$\qquad$
$\qquad$
$\qquad$
Since 1988 - Quality of service: $\qquad$
$\qquad$
$\qquad$
$\qquad$
Since 1988 - Other operational changes:

## PART II STATE AGENCY DESCRIPTION

## SECTION A BACKGROUND

2a. Does the WIC program operate in all areas of your state? [Check only ONE box.]
$\square$ Yes
$\square$ No
2b. How many countles remaln unserved?
Enter number of counties $\qquad$
2c. How many Individuals do you estimate to be unserved? [Estimate number or check "Don't know".]
$\qquad$ \# of unserved WIC eligibles
___ Don't know
3a. What period of time is covered by the state fiscal year definition?
Enter month and day: From $\qquad$ to $\qquad$
3b. Has the state fiscal year changed since 1988? [Check only ONE box.]Yes, it changedNo, it remained the same

## SECTION B FUNDING

4. In addition to Federal funding to support WIC program operations in your state, what other funding sources are currently used? [Check all applicable boxes.]
$\square$ State appropriated funds are used
$\square$ Private grants are used
$\square$ County or local funds are used in some jurisdictions
$\square$ Other sources are used [please describe] $\qquad$ -
$\square$ No other sources are available

5a. Has the avallablity of funding from sources other than the Federal source changed since 1988 ? [Check only ONE box.]
$\square$ Yes, additional funding sources became available
$\square$ Yes, fewer funding sources were avaitable
No, funding sources remained the same
5b. Has the amount of funding from sources other than the Federal source changed since 1988 ? [Check only ONE box.]
$\square$ Yes, more funding became available
$\square$ Yes, less funding became available
[. No, the amount of funding remained the same
6. If state appropriated funds are not spent during the state fiscal year, may these funds be carried forward or must they be returned to the state? [Check only ONE box.]
$\square$ State funds may be carried fonward
$\square$ State funds must be returned
$\square$ Other [please describe] $\qquad$
7a. Do you currently use an administrative cost per participant formula to allocate administrative funds between local agencies within your state? [Check only ONE box.]
$\square$ Yes
$\square$ No
7b. Has the method of computing administrative costs per participant changed noticeably since 1988 ? [Check only ONE box.]Yes
$\square$ No
7c. What is the current administrative grant per participant for local agencies?
Enter average amount per participant \$
8. Check the box opposite the statement that best describes this state's method of computing administrative funding formulas for its local agencies. [Check only ONE box.]
$\square$ The state considers historical conditions of the local agencies such as the number of participants they have served in the past, the local agency infrastructure, the local agency's willingness to serve more participants, etc.
$\square$ The state considers other factors about the local agency service area such as statistics about the number of people potentially eligible for WIC, the area's poverty level, bith and death statistics, high risk matemity statistics, and/or the percent of need being met by the program currently.
$\square$ The state agency considers most of the factors listed in A and B.
$\square$ The state agency considers conditions other than those listed in A or B. They are: $\qquad$
9. How long has the current method of detemining local agency administrative grants been in place?

Erter approximate month and year when current method began: $\qquad$
10. How many times during the most recently completed Federal fiscal year (October 1, 1991 to September 30, 1992) did the state allocate or re-allocate administrative funds to local agencies?

Enter number of administrative funding allocations and re-allocations $\qquad$
11. Indicate the percentage of administrative funds used for local level expenses and the percentage of state-level expenses for the previous fiscal year. [Insert percentage.]
$\qquad$ \% local level
$\qquad$ \% state level

## SECTION C CASELOAD ALLOCATION

12. Considering current caseload, what method is currently used to Increase or decrease caseload Ilmits to the local agencies within the state? [Check the box next to the statement that best describes your method.]
$\square$ The state agency assigns a caseload maximum, or number of caseload slots, for each local agency on the basis of the number of pregnant women and/or infants on waiting lists.
$\square$ The state agency assigns a caseload maximum, or number of caseload slots, for each local agency on the basis of the number of eligibles meeting specific priorities.
$\square$ The state agency assigns a caseload maximum, or number of caseload slots, for each local agency on a basis other than items 1 and 2 above.
$\square$ Local agencies must require a certain caseload limit trom the state which is then negotiated with the state agency based on additional factors. [Describe factors.]
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$

- Other [please specity] $\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$

13. How long has this method been used? [Please enter the number of years.]
$\qquad$ years
14. Listed below are 11 factors that the state agency may consider when assigning caseload Increases or decreases to a local agency. Please read the entire list and then rank the factors by whether they are very important, somewhat important, not very important, or not used. Please use the following scale to rate the factor: $1 \times$ very important, $\mathbf{2 =}$ somewhat important, $3=$ not very important, $4=$ not used.
$\square$ The state agency considers the local agency's Affirmative Action Ranking when allocating caseload slots to local agencies.
$\square$ The state agency considers the percent of potentlally ellgible beling served by the local agency.
$\square$ The state agency considers the local agency's historical ablity to serve the number of caseload slots allocated to it.
$\square$ The state agency considers the WIC priorty groups currently being serviced by the local agency.
$\square$ The state agency considers now or expanded services for high-risk maternity patients at a local agency.
$\square$ The state agency considers whether matemity care is co-located with WIC services.
$\square$ The state considers first any areas which remain unserved in the state.
The state considers the average food cost per particlpant in a local agency.
$\square$ The state considers the local agency's proven ablity to grow at a certain rate.
$\square$ The state agency considers management or staffing problems which might hinder the local agency's ability to serve participants.
$\square$ The state considers factors other than those llsted here which it considers important in allocating caseload limits. They are:

Other [please specity] $\qquad$

Other [please specity]
15. In the past when you have had rapld growth in your caseload, what was the most frequently used method the state agency used to increase caseload allocation limits to the local agencies? [Check the box next to the statement that best describes your method.]
$\square$ All local agency caseload limits were increased systematically by a certain percentage without taking other factors into consideration.
$\square$ Local agencies were asked how many participants they could serve and were generally increased up to the level stated or requested.
$\square$ Local agencies were only granted additional caseload slots it they met certain conditions (such as that they must serve a certain proportion of pregnant women and infants, or must increase the number of Priority 1 and/or Priority 2 groups served).
$\square$ Other [please specity] $\qquad$
$\square$ Not applicable; we have not had rapid participant growth.

## SECTION D STAFFING

16a. Has the state agency developed WIC local agency participant-to-staff ratios [Check only ONE box.]
$\square$ Yes[pleasespecity]
$\square \mathrm{No}$
16b. How long have participant-to-staff ratlos been in effect in your state? [Please enter the number of years.]

17. Are WIC-funded employees who work at the local agency level in the direct delivery of WIC service considered to be: [Check only ONE box.]
$\square$ State employees (with salary and fringe benefits set by state personnel policies).
District (multi-county) employees (with salary and fringe benefits set by statewide employment policies).
$\square$ County employees (with salary and fringe benefits set by the various county govemment units).
$\square$ City employees (with salary and fringe benefits determined by city government units).
$\square$ A combination of WIC employment settings exists.
$\square$ Other [please specify]

## SECTION E QUALITY

18. What are the five most important factors that currently promote high-qualty WIC services in your state? [Please list those factors that relate to your state agency.]
19. $\qquad$
20. $\qquad$
21. $\qquad$
22. $\qquad$
23. $\qquad$
24. What are the five most important factors that currently hinder high-quality WIC services in your state? [Please list to those factors that relate to your state agency.]
25. $\qquad$
26. 
27. $\qquad$
28. $\qquad$
29. $\qquad$

## SECTION F CAPACITY

20a. In your opinion, at what capacity are local agencies in your state currently operating? [Check only ONE box.]
$\square$ Far above capacity
Somewhat above capacity
$\square$ At capacity
$\square$ Somewhat below capacity
$\square$ Far below capacity
20b. If your current local sponsoring agencies tapped all of the resources you know to be currently available to them, how many more WIC particlpants could your state serve while maintaining the current level of services? [Please estimate to the nearest 100. Insert number below.]

## PART III WIC PROGRAM INITIATIVES

21a. Has the state developed and implemented WIC program pertormance standards? [Check only ONE box.]Yes, they are developed and in useYes, they are under developmentNo, we have not developed program standards
21b. Do these standards include nutrition education and nutrition services? [Check only ONE box.]
$\square$ Do not use standardsYes, the standards primarily focus on nutrition educationYes, the standards focus somewhat on nutrition educationNo, the standards do not address nutrition education
21c. Does the state agency use these standards to monitor or evaluate local agencies? [Check only ONE box.]Do not use standardsYes, they are used for monitoringYes, they are used for evaluationYes, they are used for monitoring and evaluation activitiesNo, they are used for other activities [please specity]
22. Does the state WIC agency currently sponsor any of the following breastfeeding promotional activitles? [Check all applicable boxes.]
$\square$ Providing materials-such as pamphlets, posters, etc.
$\square$ Co-sponsoring local activities
$\square$ Hot lines
$\square$ Public Service Announcements
$\square$ Coordinating with hospital matemity wards
$\square$ In-service training programs
$\square$ Peer counseling program training
$\square$ Other [please specify] $\qquad$

23a. What is the average frequency of Issuing vouchers or food instruments to WIC participants? [Check the box opposite the average frequency.]
$\square$ Less than one time a month
$\square$ Once per month
$\square$ Once every 6 weeks
$\square$ Once every 2 months
$\square$ Once every 3 months
$\square$ No issue schedule
$\square$ Other [please specify]
23b. Does this Issuance schedule vary across local agencies? [Check only ONE box.]
$\square$ Yes, it varies significantly
$\square$ Yes, it varies somewhat
$\square$ No, it does not vary
24a. Have your food package lssuance policles and procedures changed since 1988? [Check only ONE box.]
$\square$ Yes
$\square$ No
$\square$ Don't know
24b. How many years have you been using current food Issuance pollcies and procedures? [Please enter the number of years.]
$\qquad$
25a. What proportion of the local agencies in your state are using PC or minl-computer support? [Check only ONE box.]AllMostSomeFew

25b. What proportion of local agencies in your state are using mainframe support? [Check only ONE box.]
$\square$ All
$\square$ Most
$\square$ Some
$\square$ Few
25c. Please indicate, for each functional area, the best description of the current state of automation in WIC operations.

## ENROLLMENT [Check only ONE box.]

$\square$ Local agencies fill out paper forms and send to state or contract agency for key entry into a central database.
$\square$ Local agencies key data on terminals linked to a central computer (state, regional or contractor data processing center).
$\square$ Local agencies enter data on micro- or mini-computer and later transmit all or part to central database.
$\square$ Other [please specity]

## FOOD INSTRUMENT PRODUCTION [Check only ONE box.]

$\square$ State produces bulk automated checks/drafts/vouchers and sends to local agencies; locals write manual checks/drafts/vouchers.
$\square$ State produces bulk automated checks/drafts/vouchers and sends to local agencies; locals produce "manuals" (i.e., first visit food instrument) using on-line terminals or computers.
$\square$ Local agencies produce all food Instruments on-site using computers or terminals.
$\square$ Electronic Beneff Transter card is used.
$\square$ Other [please specify]
APPOINTMENT SCHEDULING [Check only ONE box.]
$\square$ There is only manual scheduling.
$\square$ There is automated scheduling on computer at local level, but it is not part of the state-wide WIC data system.
$\square$ There is automated schedulling at the local level that is pant of WIC state-wide data system.
$\square$ There is automated scheduling that is part of a local WIC data system.
$\square$ Other [please specity]

25d. Is the level of automation described above a change in automation since 1988? [Check all applicable boxes.]
$\square$ No change.
$\square$ Small shift from local recordkeeping to centralized state processing.
$\square$ Large shitt from local recordikeeping to centralized state processing.
$\square$ Small shift from central state processing to more locally based processing.
$\square$ Large shift from central state processing to more locally based processing.
25e. Was there a shift in the type and location of equipment since 1988 ?
STATE LEVEL [Check only ONE box.]
$\square$ Yes, there is substantially more mainframe equipment used.
$\square$ Yes, there somewhat more malnframe equipment used.
$\square$ No significant change.
$\square$ Yes, there is somewhat less malnframe equipment used.
$\square$ Yes, there is substantially less malnframe equipment used.
LOCAL LEVEL [Check only ONE box.]
$\square$ Yes, there is substantially more mainframe equipment used.
$\square$ Yes, there somewhat more mainframe equipment used.
$\square$ No significant change.
$\square$ Yes, there is somewhat less malnframe equipment used.
$\square$ Yes, there is substantially less malnframe equipment used.

STATE LEVEL [Check only ONE box.]
$\square$ Yes, there is substantially more PC/mini-computer equipment used.
$\square$ Yes, there somewhat more PC/minl-computer equipment used.
$\square$ No significant change.
$\square$ Yes, there is somewhat less PC/minl-computer equipment used.
$\square$ Yes, there is substantially less PC/minl-computer equipment used.
LOCAL LEVEL [Check only ONE box.]
$\square$ Yes, there is substantially more PC/minf-computer equipment used.
$\square$ Yes, there somewhat more PC/minl-computer equipment used.
$\square$ No signiticant change.
$\square$ Yes, there is somewhat less PC/mini-computer equipment used.
$\square$ Yes, there is substantially less PC/mini-computer equipment used.
25f. Overall, how do you perceive that these changes in automation affected productivity and quality in the program? [Check ONE box for productivity and ONE box for quality.]

PRODUCTIVITY [Check one] QUALITY [Check one]No effect in productivityNo effect in qualitySubstantial improvementSubstantial improvementSome improvementSome improvementSome declineSubstantial declineSome declineSubstantial decline

## PART IV RELATED PROGRAM INITIATIVES

26. Have coordination efforts involving WIC and other programs, such as maternal and child health programs, as well as Medicaid, changed since 1988? [Check only ONE box.]
$\square$ Yes, they have substantially increased
$\square$ Yes, they have somewhat increasedYes, they have somewhat decreasedYes, they have substantially decreased
$\square$ No, they stayed about the same
27. In your state, does the Medicaid program currently relmburse for WIC services, such as nutrition education? [Check only ONE box.]
$\square$ Yes
$\square$ No
$\square$ Don't know
28. Does the WIC program currently participate in any Jolint program efforts with the health department, maternal and child health providers, and other agencies to provide services to women and young children? [Check only ONE box.]
$\square$ Yes, to a large extent [please specity] $\qquad$
$\square$ No, not at all $\qquad$
29. Does the WIC program participate in any initiatives to improve the Immunization status of young children? [Check only ONE box.]
$\square$ Yes, to a large extent [please specity] $\qquad$
$\square$ No, not at all $\qquad$
30. In your state, do WIC applicants need to visit a physician or other non-WIC cllnic prior to certification to obtain biochemical and anthropometric data or to verity pregnancy? [Check only ONE box.]
$\square$ Yes
$\square$ No

31a. Are there other new program efforts targeting low-income women and young children currently underway in your state that relate to and impact the WIC program? [Check only ONE box.]Yes
$\square$ No
31b. If so, please briefly describe what these program efforts are. $\qquad$

When you have completed thls questionnalre, please be sure you have entered your name and title, phone number, and date on page 2 of this questionnaire. A maliling envelope with postage has been provided for your use. In case the envelope was lost please send this questionnaire to:

WIC Dynamics
Attn: CSO
Macro International
8630 Fenton Street, Sulte 300
Sliver Spring, Maryland 20910
Again, we thank you for your cooperation. Your answers will be extremely helptul to FNS.


[^0]:    Some state agencies and ITO's function as both state and local agencies:
    therefore, some questions were not answered because they were inappropriate
    or irrelevant to the respondent. These were treated as Not Applicable to

[^1]:    Some state agencies and ITO's function as both state and local agencies; or irrelevant to the respondent. These were treated as 'Not
    ITO's or $5 / \mathrm{L}$ 's and not included in percentage calculations.

[^2]:    Some state agencies and ITO's function as both state and local agencies;
    therefore, some questions were not answered because they were inappropriate
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[^3]:    therefore, some questions were not answered because they were inappropriate
    or irrelevant ro the respondent. These were treated as Not Applicable to or irrelevant to the respondent. inese were treated and not included in percentage calculations.

[^4]:    * Some state agencies and ITO's Eunction as both state and local agencies;
    

