

## EXECUTIVE SUMMARY

As of May 1, 1999, in the state of Michigan, 24,454 out of 241,741 enrollees receiving coupons in WIC failed to obtain services for 30 days or longer, thereby potentially increasing their own or their infant's health risk. To begin exploring the factors that may affect women's continued participation in available nutritional support programs for their infants and themselves, the Michigan Department of Community Health, WIC Division, contracted with the Michigan State University, Department of Medicine, Health Services Research Division to conduct a survey of WIC enrollees.

The WIC Enrollees Survey was conducted as a series of Computer Assisted Telephone Interviews (CATI) by Michigan State University's Institute for Public Policy and Social Research, Office for Survey Research (OSR). The study was designed as a cross-sectional survey of women enrollees or authorized adults responsible for enrolled infants' care. At the end of April 1999, the WIC Programs at MDCH generated a list of all adult representatives of enrolled individuals as of April 1999. The study over-sampled the non-participating enrollees, African-Americans, and enrolled women so that there would be roughly equal numbers of interviews of them as there were of participating enrollees, Caucasian enrollees, and adults responsible for enrolled infants. Interviewers completed a total of 804 interviews with randomly selected eligible enrollees or enrollee representatives. The overall response rate was 74.2 percent and the overall margin of sampling error is  $\pm 3.4$  percent or less. The study's findings are based on weighted data that adjust as appropriate for the disproportionate stratified sampling.

The following is a brief overview of the study's findings within topics of central importance to the purposes of the research:

### DEMOGRAPHIC PROFILE

- Nearly all, 94.8 percent, of the respondents have children.
  - The average number of children living with them was 2.18 with a standard deviation of 1.31.
  - Among those with children, 36.9 percent reported that there was only one child living in the household, 31.1 percent reported two, 16.6 percent reported three, and 9.3 percent reported four; that is, 93.9 percent of the respondents had between one and four children living with them.
  - Among the respondents with children 81.9 percent reported having at least one child less than one years old.
- Nearly three-quarters of the respondents were under 30 years of age.
- Less than half the respondents were currently married (42 percent), with 37 percent single and 12 percent living with someone as a part of an unmarried couple.
- Roughly one in five respondents (19 percent) said they live in a rural area, nearly half in a small city or town (47 percent), while nearly one-third (32 percent) said they live in urban or suburban communities.
- More than one-quarter live with their parents or other relatives.
- 42 percent of the respondents were employed either full-time or part-time; 50 percent said either they were unemployed or they were homemakers.
- Only 5 percent of respondents stated they had completed a four-year college degree or higher, while 21 percent had not finished high school.
- 52 percent of the respondents stated that their household income was less than \$15,000.
- Those representing enrolled infants in the WIC program were more likely than women enrollees to be employed (especially full-time) and less likely to be full-time homemakers.
- Women enrolled were somewhat more likely to have completed high school and at least some college compared with those representing enrolled infants.
- Those representing enrolled infants were less likely to be married than enrolled women and more likely to be a member of an unmarried couple, divorced or separated.

Comparing those respondents considered to be non-participating or no-shows and those still participating:

- Those classified as non-participating were more likely than their counterparts to be working full-time and to report higher household incomes.
- Those who continue participating tend to have completed less education.
- There were no significant differences with respect to age, marital status, location of residence, or with whom they live [between those classified as non-participating and those who continued to participate.]

## **PARTICIPATION IN THE WIC PROGRAM**

**WIC PROGRAM** The fundamental question to be answered by this study is why so many enrolled WIC participants become non-participants by not returning for re-certification and to pick up coupons for the next three-month time period. The study tried to determine if nonparticipation resulted from a lack of knowledge about enrollment or eligibility with the program, inconvenience of the service delivery, dissatisfaction with services or staff, or differences in need. Among the study's findings related to these are the following:

### **Program Knowledge**

- Nearly all respondents (95.6 percent of WIC enrollees) stated that they had knowledge of the program.
  - Twelve percent of all WIC enrollees surveyed did not know they could qualify for WIC even if they did not qualify for other assistance.
  - The most commonly mentioned sources where respondents first heard about the WIC program were friends (28 percent), family members (27.1 percent), health center, clinic or health care provider (11.6 percent), advertising on television or radio (7.8 percent).
- Of all respondents, 96.7 percent said they knew they or the infant they represented were currently enrolled.
  - Those who were not currently participating in WIC were appreciably less likely to know this -- 81.8 percent vs. 98.0 percent of current participants.
- Among all respondents who knew they were enrolled in WIC, 80.5 percent said they had picked up their last set of coupons by the scheduled date.
  - 40.9 percent of the nonparticipating respondents said they had not picked up the coupons on time, but so too did 17.8 percent of the enrollees who were classified as participating for this study.
  - More than half (57.4 percent) of the 68 participating respondents who said they had not picked up their coupons by the scheduled date indicated that they did pick up the coupons but after the scheduled date, while only 22.6 percent of the 133 non-participating respondents said they had done so.
- The respondents, both participating and non-participating, who said they had not picked up their coupons even after the scheduled date were asked what was the most important reason for not picking up their coupons. The most common reasons were:
  - they did not want to participate in the program any more (14.0 percent)
  - they forgot about the appointment (14.0 percent)
  - it was inconvenient (12.9 percent)
  - they had no available transportation (11.7 percent)
  - they were unable to attend because of illness (10.0 percent)
  - they did not think they were currently eligible (9.1 percent)

### **Delivery Systems**

- The choice of Monday through Friday morning was the best time to come to WIC offices for appointments for 52.4 percent of the respondents; afternoons between 1:00 p.m. and 5:00 p.m. for 30.8 percent.
- 6.1 percent of the respondents stated that the weekday evenings between 5:00 and 7:00 p.m. were the best times; 4.3 percent stated that the noon hour during the week was the best time.
  - Evenings and noon hours were more likely to be selected by non-participating enrollees compared with those still participating.
  - There was no statistically significant difference as to whether the current pick-up times are convenient between those continuing to participate in WIC and those who became inactive.

### **Satisfaction with WIC Services**

- 90.6 percent of respondents indicated phone calls to the WIC office are answered promptly all or most of the time;
- 72.3 percent indicated the WIC phone line never rings busy or this only happens a little bit of the time;
- 68.6 percent indicated they never or only a little bit of the time have to wait on hold;

- 88.3 percent indicated that the person answering the phone always or most of the time is able to answer their questions;
  - More than two-thirds of respondents rated the office and the office staff as either excellent or very good in terms of cleanliness and safety, and friendliness, courtesy and respectfulness;
  - 76.9 percent said WIC office staff always pay attention to what they have to say;
  - 63.9 percent said the nutrition information they receive is very helpful;
  - 90.1 percent said the information they are given is very understandable;
  - 57.1 percent said they are never sent a reminder card about next appointments;
  - 71.6 percent said they are never called to remind them about next appointments;
  - 39.9 percent said they have to wait 15 minutes or less to pick-up WIC coupons, while the rest have to wait longer than 15 minutes.
- 96.0 percent of respondents said they felt their privacy was respected by WIC staff.
  - There were no significant differences in the ratings given by respondents based on who was enrolled in WIC (i.e., women vs. infants) or their current participation status (i.e., actively participating vs. non-participants or no-shows).
  - There is no evidence that those who have discontinued participation did so because of dissatisfaction with services or treatment received by WIC.

### **Utilization of WIC Services**

- Virtually all respondents who knew they were enrolled (99.7 percent) reported having used the coupons;
- Nevertheless, 21.1 percent reported that there had been at least one occasion in the previous two months when they did not have enough food in the house.
  - There was no significant difference between those who continued to participate and those who did not show up to pick up their next coupons.

### **NUTRITION**

- 11.5 percent reported consuming virtually no dairy products per day, while only 30.1 percent reported consuming four or more.
  - The average number of servings of dairy products per day reported was 3.61.
  - Those respondents currently breastfeeding a child were much more likely than those not breastfeeding to report consuming at least the recommended numbers of servings of dairy products (total of 5.13 servings per day).
- 11.5 percent reported consuming virtually no fruits or vegetables each day, while only 5.9 percent reported eating the recommended five or more.
  - The average number of servings of fruits and vegetables per day reported was 2.10.
- The average number of servings reported of foods high in dietary fat per day was 2.23.
- There were no significant differences in the nutrition intake pattern of those who continue participating in WIC and those who discontinued participation.

### **BREASTFEEDING**

- Over half of the women who have at least one child (52.0 percent) said they had breastfed at least one of their children.
- Among those who currently have a child under the age of one, 37.1 percent said they were breastfeeding their baby at the time of the study; of those who were not, 90.2 percent said they had tried.
- 51.9 percent of those who had ever tried breastfeeding their child said the most helpful person was their hospital lactation nurse, while 12.6 percent indicated it was their mother or grandmother, 6.1 percent said their doctor, 2.7 percent said their sister or sister-in-law, 2.4 percent said a friend and 1.2 percent said a peer counselor.
- African-American women were much less likely to report having breastfed their child or any of their children than were Caucasian women.
  - Those who were non-participating or inactive were actually somewhat more likely to have breastfed one of their children than were those continuing to participate in WIC.
- Consistent with the general population women with higher levels of income or education were more likely to have breastfed.

## HEALTH STATUS OF WOMEN

- One quarter of the respondents described their health as excellent, while 35.1 percent said it was very good, 30.3 percent good, 7.7 percent fair, and only 1.6 percent said it was poor.
- The average number of days of poor physical health in the previous month were 2.76, days of poor mental health were 5.27, and days when usual activities were limited were 2.04.
- 63.9 percent reported no days in the previous month when their physical health was not good; 52.0 percent reported no days when their mental health was not good; and 50.7 percent of those who did not feel good physically or mentally at least one day reported no days that they could not do their usual activities as a result.
- 31.5 percent said a doctor had told them they have a medical condition or illness.

## HEALTH INSURANCE AND SOCIAL SERVICE PROGRAMS

### Government Assistance

#### Other Types of Assistance.

- Six out of 10 WIC respondents (52.1 percent) reported also receiving services other than WIC from the state, county, or local health department.
- Of all those respondents who said they receive some other type of assistance, 73.7 percent said they are enrolled in Medicaid, 28.1 percent said they receive food stamps, and 6.5 percent said they receive Maternal or Infant Support Services.

### Health Insurance

- More than one in five respondents (21.8 percent) reported having no health care coverage.
- 45.2 percent said they have insurance coverage provided through a government-sponsored program, virtually all of whom received assistance through Medicaid.
- 29.6 percent said they have health insurance through their own or someone else's employer.
- Respondents who became non-participants in WIC were more likely to have health insurance coverage through an employer than were those continuing to participate in WIC (41.9 percent vs. 28.6 percent) and they were less likely to have coverage through a government-sponsored program (34.1 percent vs. 46.0 percent) or to have no insurance.

## WOMEN'S HEALTH SERVICES

- 26.8 percent said they had experienced at least one such occasion in the past year when they needed health care but could not do so because of cost.
- 84.1 percent said there is a particular place they usually go to when they are sick or need advice about health. For 65.7 percent of these, the place they usually go is a doctor's office, while for 24.1 percent it is a clinic or health center.
- 87.4 percent of those with a particular place for their health care said there is one particular health care provider that they usually see. This was the case for 96.6 percent of those who go to a doctor's office, but only 71.3 percent of those who go to a health center or clinic, 70 percent of those who go to a hospital outpatient facility, and only 43.8 percent of those who go to a hospital emergency room.

### Preventive Health Care

- Non-participants were no more or less likely to have had a checkup in the past year than were those continuing to receive WIC benefits.
- 88.8 percent said they have had a clinical breast exam performed by a doctor, nurse or other health professional (88.6 percent of those 20 years of age or older).
- Those who continued to participate in WIC were also less likely to have ever had a clinical breast exam than those who became non-participants.
- 46.4 percent said they rarely or never perform breast self-examinations, while 17.9 percent said they do them once every few months and only 35.7 percent said they do them monthly, as recommended.

### Health Information

- The most commonly mentioned source of most health information was the respondents' health care providers (52.1 percent). The next most frequently mentioned source was written information (19.0 percent), followed by the respondents' mothers (7.5 percent), television (7.1 percent), the health department or WIC (2.4 percent), friends (1.6 percent), and work (1.3 percent).

## CHILDREN'S HEALTH SERVICES

- 95.7 percent said there is one particular clinic, health center, doctor's office or other place to which they usually take their children when they are sick or to get information about the children's health. Of the respondents that identified such a place, 64.4 percent stated the place they go for their children's care is a doctor's office, 26.8 percent stated it is a clinic or health center.
- 90.9 percent of those who have a usual source of care for their children indicated that their children have a primary care or regular health care provider -- for 90.6 percent of these respondents, the usual provider is a physician.
  - 87.0 percent said they were either very satisfied (61.0 percent) or somewhat satisfied (26.0 percent) with their child's ability to get care when needed, while 6.0 percent were somewhat dissatisfied, and 7.0 percent were very dissatisfied.
  - 91.1 percent were either very satisfied (60.1 percent) or somewhat satisfied (31.1 percent) with the quality of care their children receive, while 6.9 percent were somewhat dissatisfied and 2.0 percent were very dissatisfied.

## IMPLICATIONS AND RECOMMENDATIONS

- ★ The study shows that those who become non-participants tend to be higher in socioeconomic status (education, income and occupation) than those who continue to utilize WIC benefits. WIC may wish to study the nutritional and health status of this population of the working poor to determine if this group would continue to benefit from WIC services. If WIC services are determined to be of continuing value to this population, programs may need to be altered to accommodate their needs, particularly with respect to appointment times and staffing to take phone calls.
- ★ Sixty percent of the WIC enrollees were enrollees of other social services in addition to WIC services. Coordination of social service programs may improve the efficiency and the impact of the services provided. Almost 74 percent of the respondents indicated that they also have Medicaid health insurance. Further study of the relationship of various delivery systems for Medicaid managed care and their influence on the coordination of services with WIC and other social services programs should be conducted.

- ★ Although 92 percent of all respondents both participating and non-participating reported believing that WIC's available coupon pick-up times were convenient, statistically significant differences were found between respondents preferred times based on status of activity. More specifically, non-participants preferred the noon hour or after 5 p.m. on weekdays in comparison to their counterparts. Enrollees who found current coupon pick-up times to be not convenient were more likely to be employed and to prefer coupon times outside of conventional hours; that is, after 5 p.m. on weekdays (25.7 percent), during the lunch hour (5.1 percent), or in the mornings on weekends (7.8 percent). The WIC program may wish to do a pilot study of restructured office hours to see whether extended hours would be used by enrollees or increase the efficiency of their staff's time and services.
- ★ WIC enrollees in urban areas rated their satisfaction with WIC office services significantly lower than enrollees living in suburban or rural areas in terms of call responsiveness (if phones at WIC were answered promptly, attendant or operator was able to answer their questions, etc.) and cleanliness of the office. Further study of WIC enrollees' experiences in urban centers may result in specific strategies to improve the services and the appearance of the offices. From the data, it appears that additional staffing in these areas may be needed to more efficiently handle the volume of calls and clients.
- ★ Nutrition questions indicated that milk and dairy servings (3.61) were close to the recommended four servings a day for pregnant and nursing women, but women's self-reported numbers of fruits and vegetables consumed (2.10 servings) were substantially less than the U.S. Department of Agriculture recommended five to seven servings per day. The women's fat intake (2.33 servings) was higher than national guidelines. WIC may want to evaluate the nutritional beliefs of enrolled women to develop strategies to minimize women's as well as infants' potential health risk through additional education about nutritional and fat intake needs.
- ★ A substantial number of those who became non-participants were electing to discontinue their participation -- sometimes because of moving out of state, miscarriages, or the death of the infant, even though some remained eligible. Yet, many of these women apparently provided no notification to WIC of their intent. Strategies and mechanisms should be developed to encourage and facilitate enrollees to notify WIC offices when they no longer wish to participate so that resources (such as appointment times) can be more efficiently used. Similarly, some who were enrolled did not know they had been enrolled, while others simply forgot about their appointments. WIC should explore the cost effectiveness of sending an enrollment confirmation letter immediately after enrollment and an appointment reminder postcard or phone call immediately prior to an appointment to minimize the number of missed re-certification appointments and coupon pickup appointments.
- ★ Information was collected on enrollee satisfaction regarding their experiences with the WIC program. The overall responses to the satisfaction questions indicate a high satisfaction with WIC services and that a high value is placed on these services. The WIC program has been successful in providing services to active participants. The challenge is to develop strategies to retain those that become non-participants in the program as they would likely continue to benefit from WIC services.