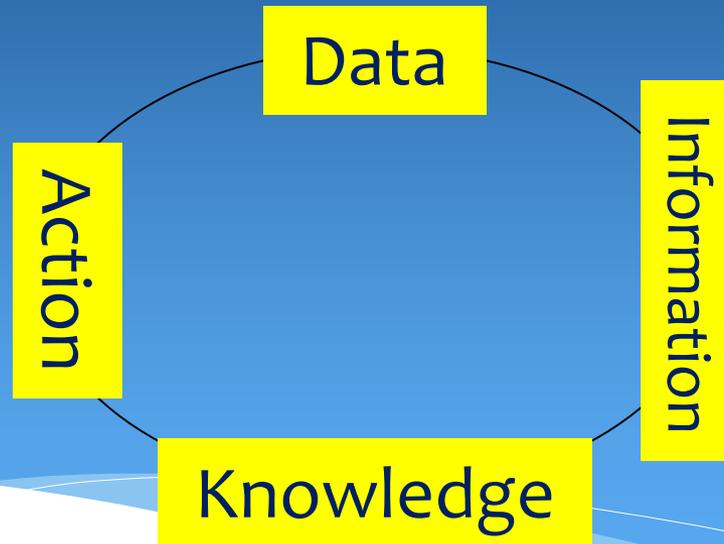


Measuring Progress



WIC Coordinator Conference, Fall 2014

Kobra Eghtedary, PhD

WIC Data, Research & System Management Director

Anne M. Bianchi MS, RD

Director, WIC Program

District Health Department #10

Suzette Daly, RN, BSN

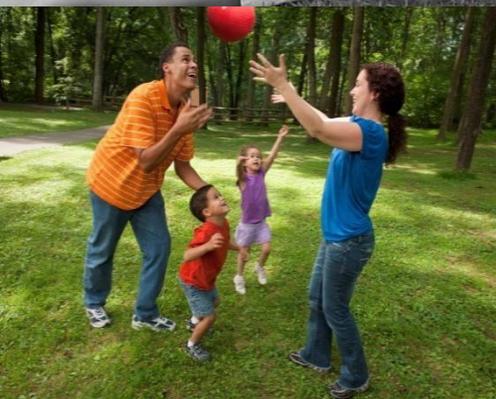
Family and Community Health Supervisor

Health Department of Northwest Michigan

Bagya Kodur, MS

Michigan WIC Report Specialist

Michigan WIC Top Ten List



Indicators	2003	2013	Progress Direction
First Trimester Entry into WIC	31.7	36.9	
Birth weight: <ul style="list-style-type: none"> • LBW <2500 g • Full Term LBW • HBW >4000 g • % Preterm Infants 	7.3 -- 8.7 --	8.7 3.7 7.2 11.5	
Breastfeeding: <ul style="list-style-type: none"> • Initiation • 6 Months Duration 	49.8 14.7	63.1 17.7	
Prenatal Weight Gain: <ul style="list-style-type: none"> • <Ideal • >Ideal 	26.9 48.6	16.9 52.4	
Body weight: <ul style="list-style-type: none"> • 85th-<95th%, ≥2yrs • ≥95th%, ≥2yrs 	16.1 12.9	16.8 14.1	
Anemia, Low Hg, 3 rd Trimester	30.1	38.9	
Anemia, Low Hg, 6 months - 5 yrs.	13.1	17.5	
Prenatal Smoking, Last Trimester	23.1	16.8	
First Trimester Prenatal Care	74.3	79.9	
Prepregnancy: <ul style="list-style-type: none"> • Overweight/Obese • Underweight 	51.0 5.2	56.0 4.3	

Michigan WIC Five-year-plan

The Health Outcome Indicators

January 2014 To December 2018



- Increase first trimester entry into the WIC program from 36.9% to 42.0%.
- Increase ideal prenatal weight gain from 30.7% to 33.5% among Michigan WIC mothers.
- Reduce the percent of low birth weight infants born to women enrolled in Michigan WIC from 8.7% to 8.0%.
- Increase breastfeeding initiation rate from 63.1% to 67.0% and the six-month duration rate from 17.7% to 20.5%.
- Decrease the prevalence of early childhood obesity, in children 2 to 5 years of age, from 14.1% to 13.5%.
- Decrease the prevalence of low hemoglobin level from 17.5% to 15.0% among children less than five years of age.

The projections are based on the 2003-2013 trend data from Michigan PNSS and PedNSS. 2013 data is used as the baseline for a five-year-plan from Jan. 2014 to Dec. 2018.

Michigan WIC Five-Year-Plan

The Health Outcome Indicators

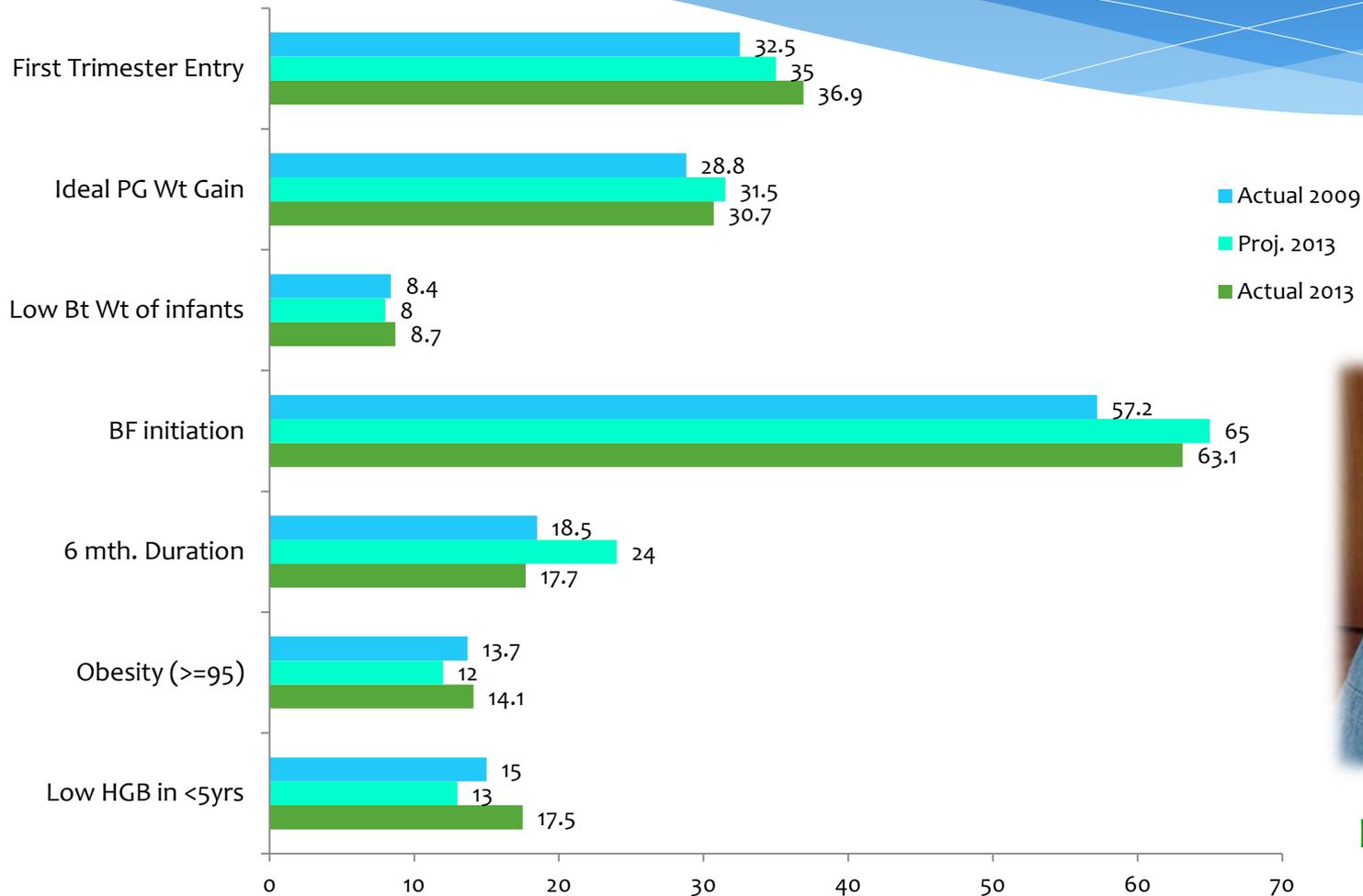
January 2009 to December 2013



- * Increase first trimester entry into the WIC program from 32.5% to 35.0%.
- * Increase ideal prenatal weight gain from 28.8% to 31.5% among Michigan WIC mothers.
- * Reduce the percent of low birth weight infants born to women enrolled in Michigan WIC from 8.4% to 8.0%.
- * Increase breastfeeding initiation rate from 57.2% to 65.0% and the six-month duration rate from 18.5% to 24.0%.
- * Decrease the prevalence of early childhood obesity, in children 2 to 5 years of age, from 13.7% to 12.0%.
- * Decrease the prevalence of low hemoglobin level from 15.0% to 13.0% among children less than five years of age.

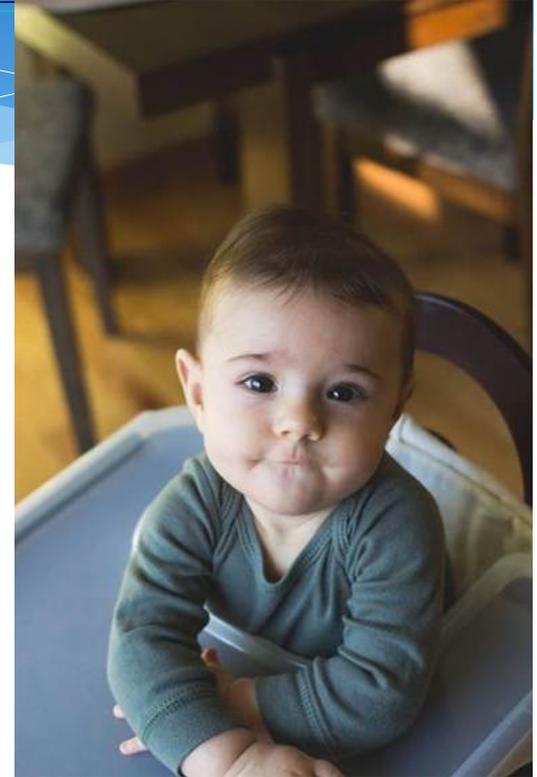
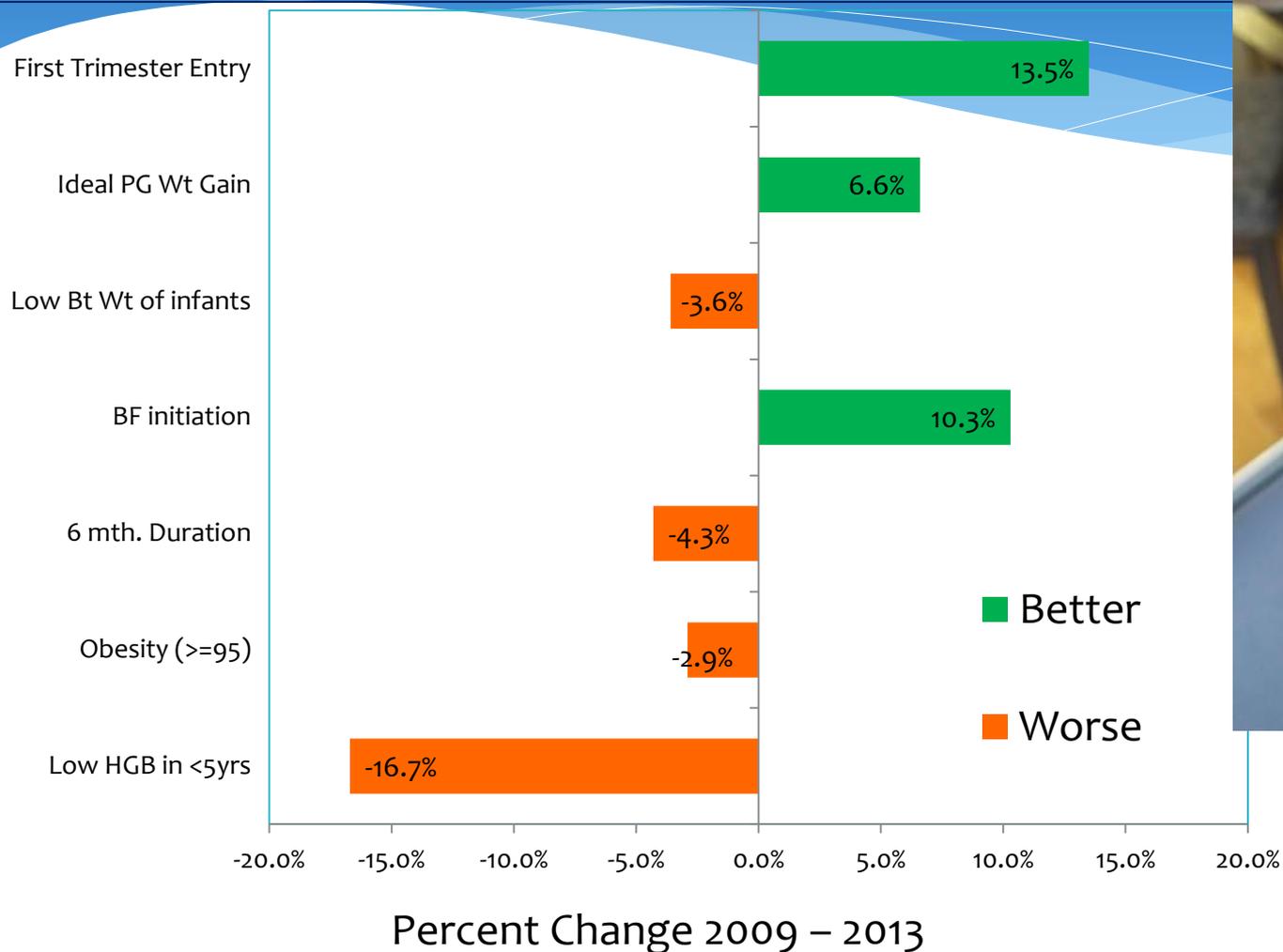
The projections are based on the 1994-2009 trend data from Michigan PNSS and PedNSS. 2009 data is used as the baseline for a five-year-plan from Jan. 2009 to Dec. 2013.

Health Progress Review 2009 -2013 Five Year Plan



PNSS & PedNSS

Health Progress Review 2009 -2013 Five Year Plan



PNSS & PedNSS

De-duplicated Enrollment by Race, FY 2014

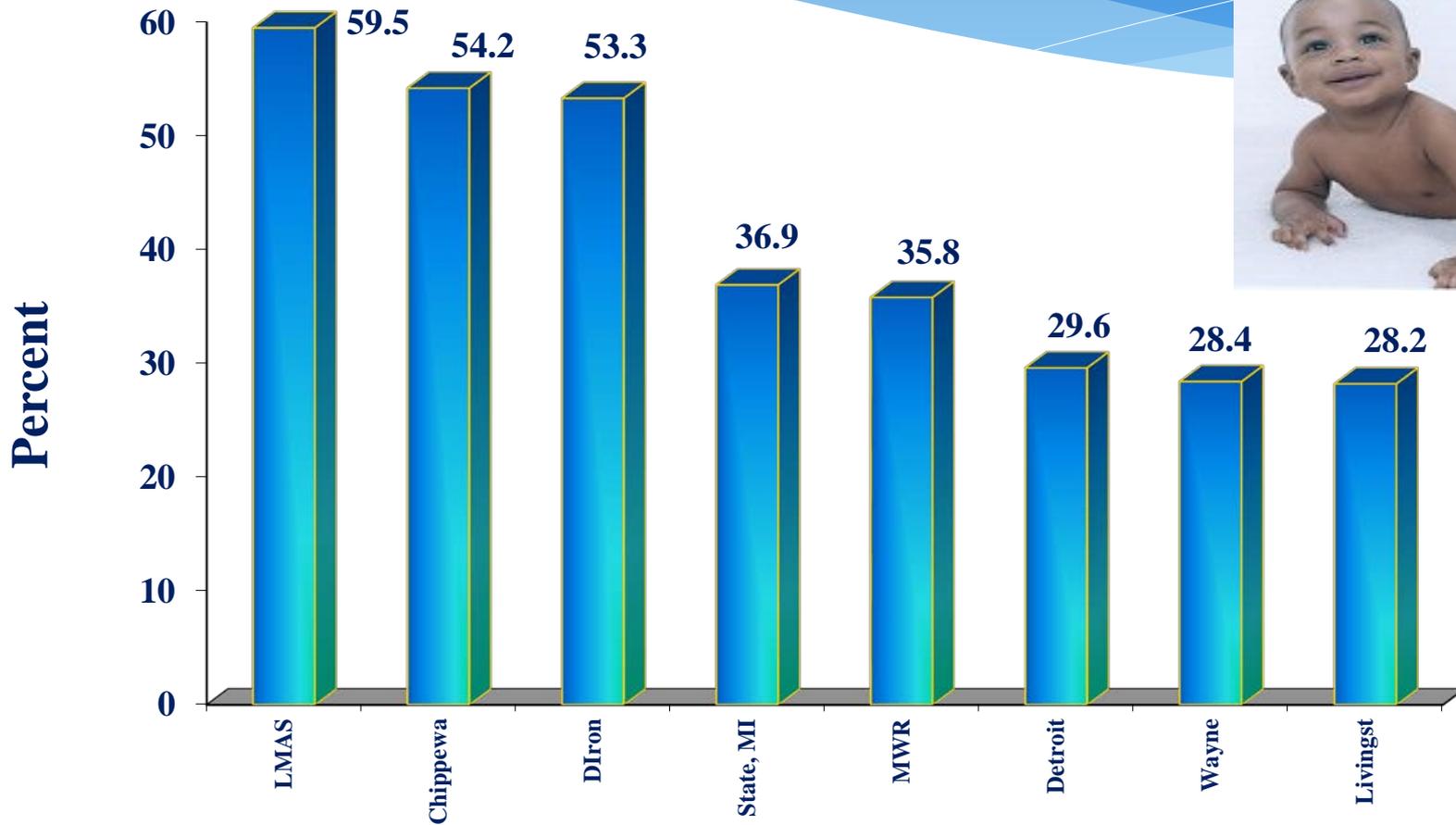
Race	Category		Total	% Enrolled
	I/C	W		
White	178,799	77,777	256,576	62.1
Black or African American	81,766	33,267	115,033	27.9
Multi-Racial	26,971	4,613	31,584	7.6
Asian	5,080	2,444	7,524	1.8
American Indian/Alaskan Native	1,307	634	1,941	0.5
Native Hawaiian/Other Pacific Islander	169	106	275	0.1
Statewide	294,092	118,841	412,933	100.0



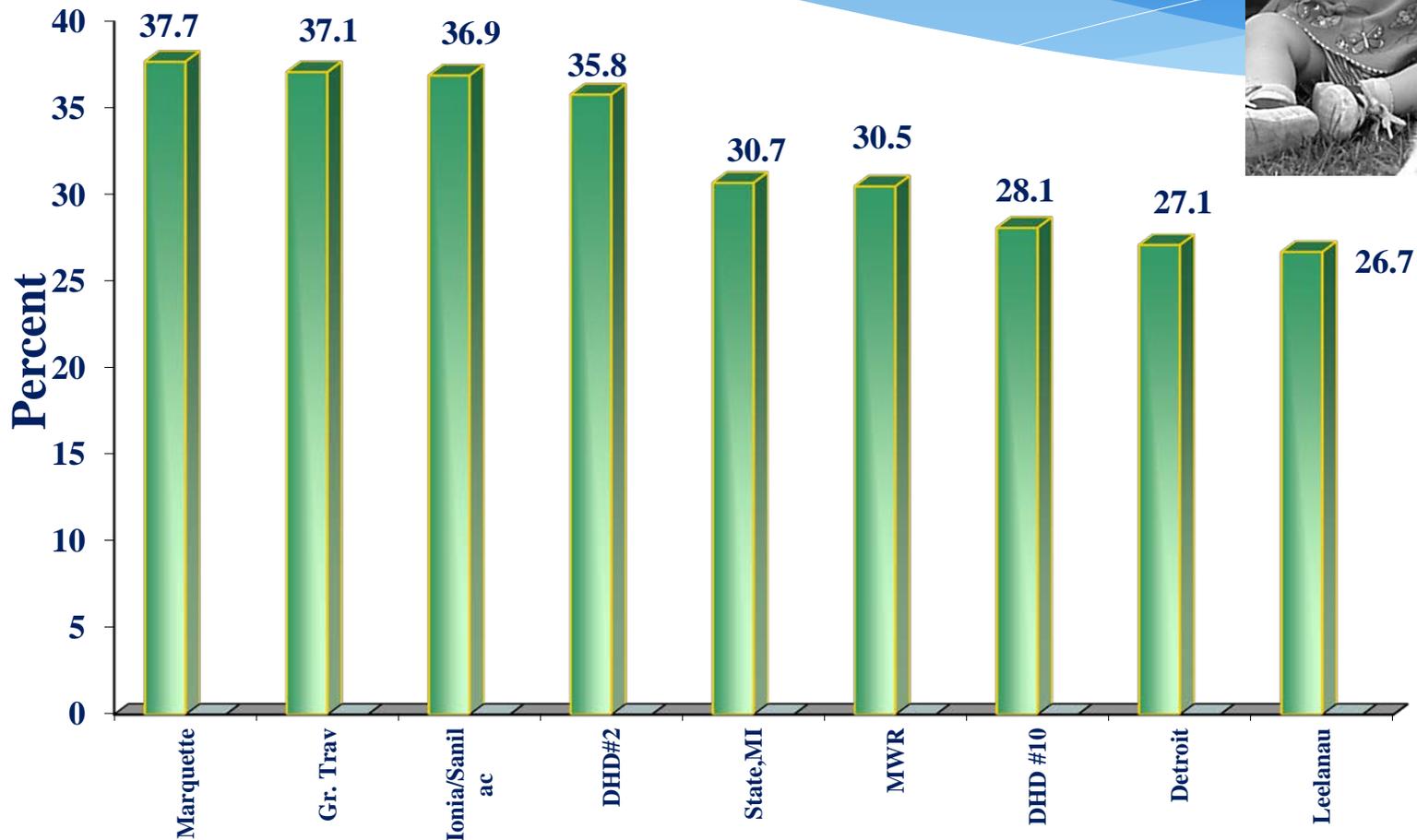
12.5% of total deduplicated enrollees are Hispanic:
 I/C 39,483
 W 11,834
 Total 51,317

91.4 % of PG women enrolled in 2013 returned to WIC postpartum

First Trimester Entry into WIC by Local WIC Agencies



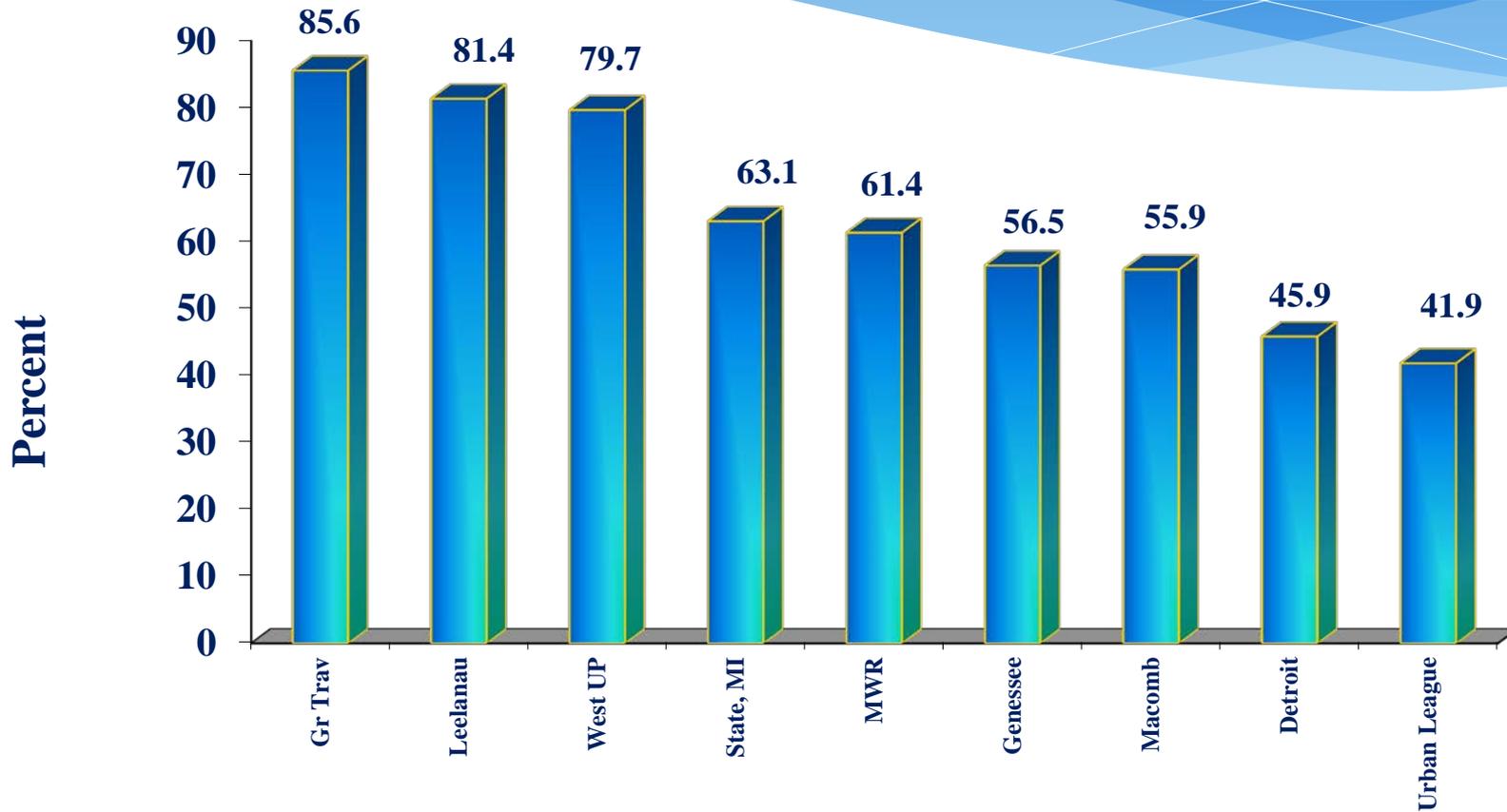
Ideal Pregnancy Weight gain by Local WIC Agencies



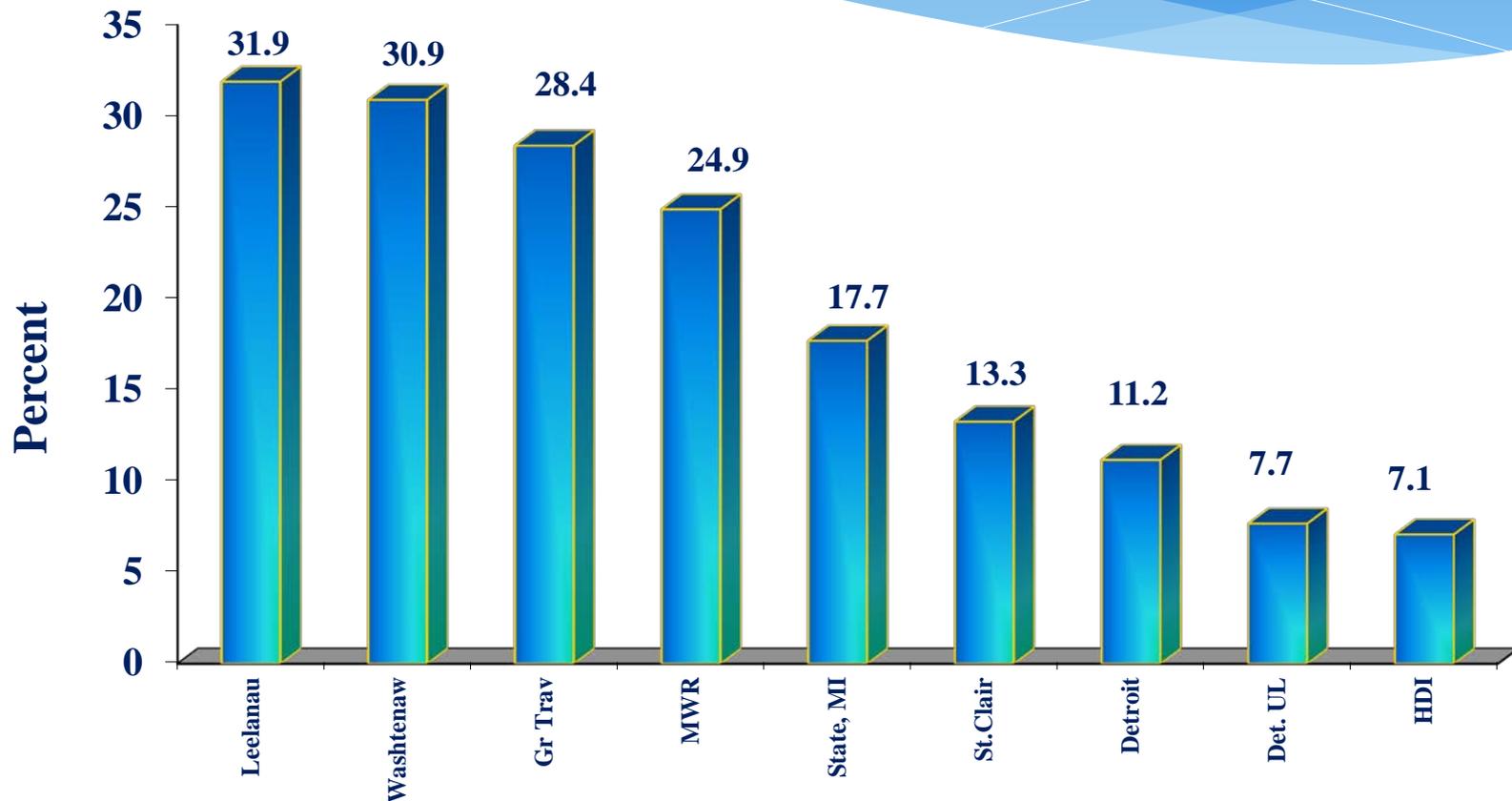
Prevalence of LBW by Local WIC Agencies



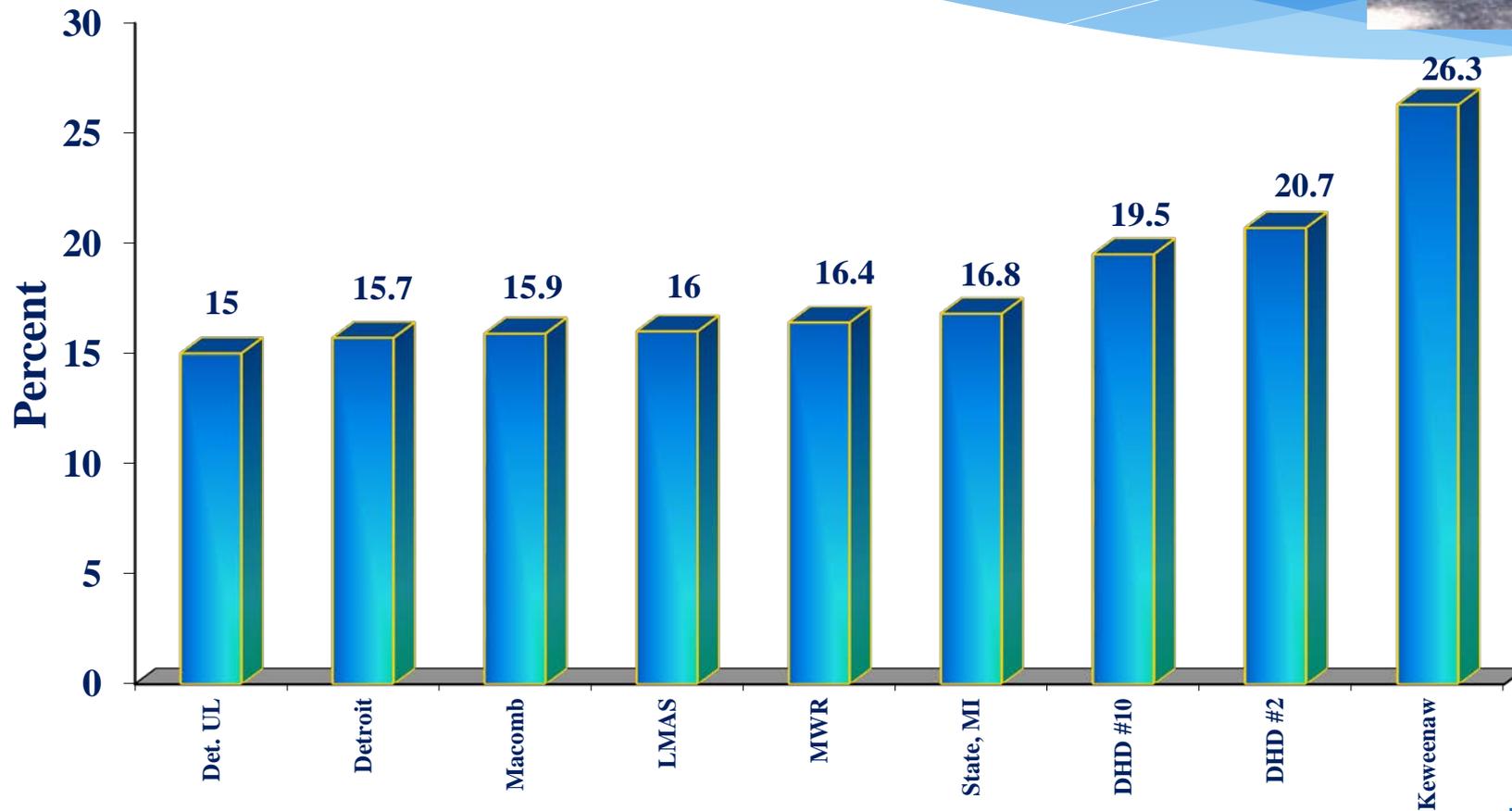
Breastfeeding Initiation by Local WIC Agencies



Six Months Breastfeeding Duration by Local WIC Agencies

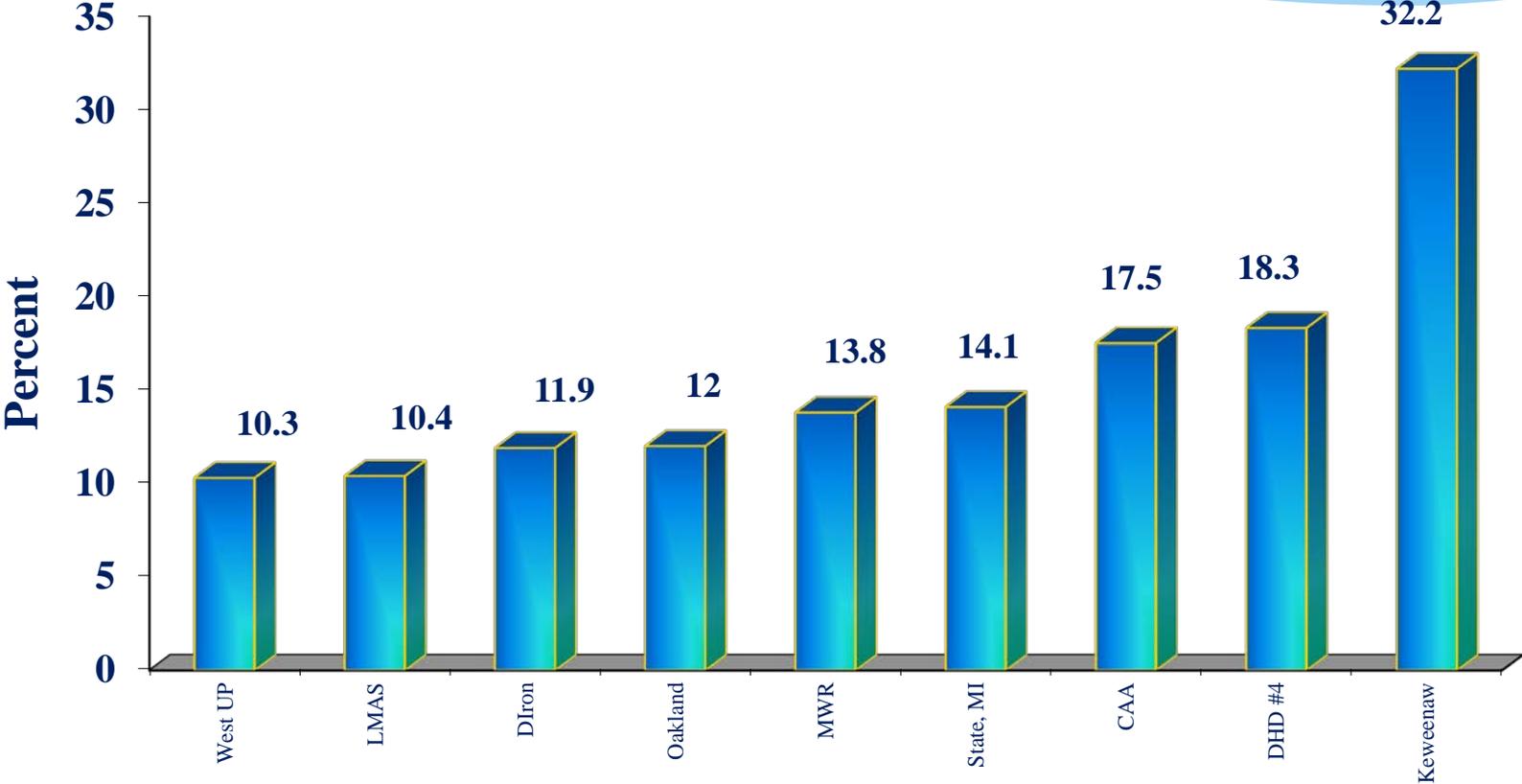


Early Childhood Overweight by Local WIC Agencies

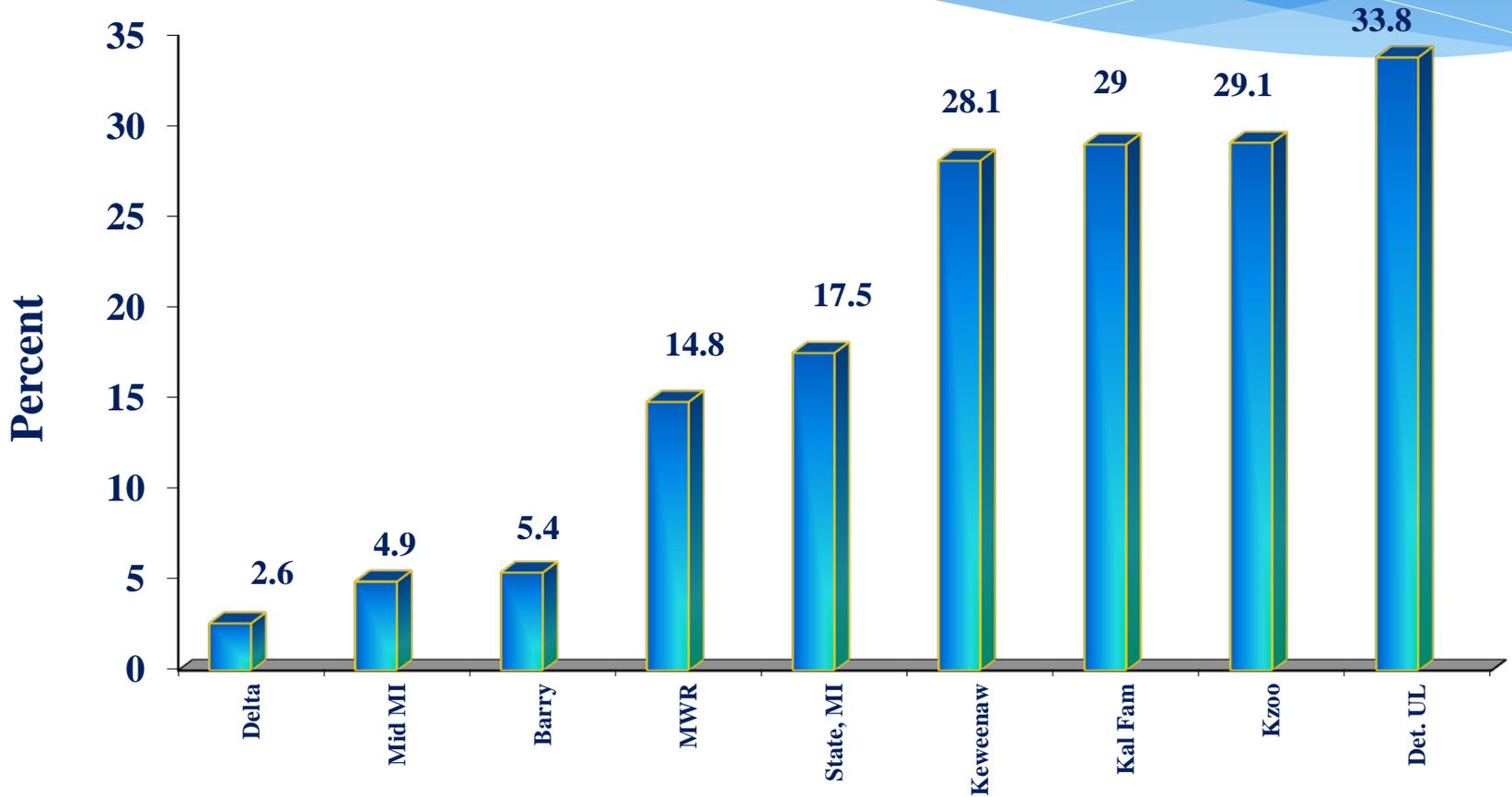




Early Childhood Obesity by Local WIC Agencies



Early Childhood Anemia by Local WIC Agencies





Behavior Indicators

WIC Clients	Fruits & Vegetables %	Sweetened Drinks %	Fast Food, ≤2x /wk. %	TV Viewing, ≥2h /Day %
WIC Mothers	86.7	52.9	47.5	ND
WIC Children 1-5	ND	21.1	39.0	36.7

Most And Least Redeemed Food Items

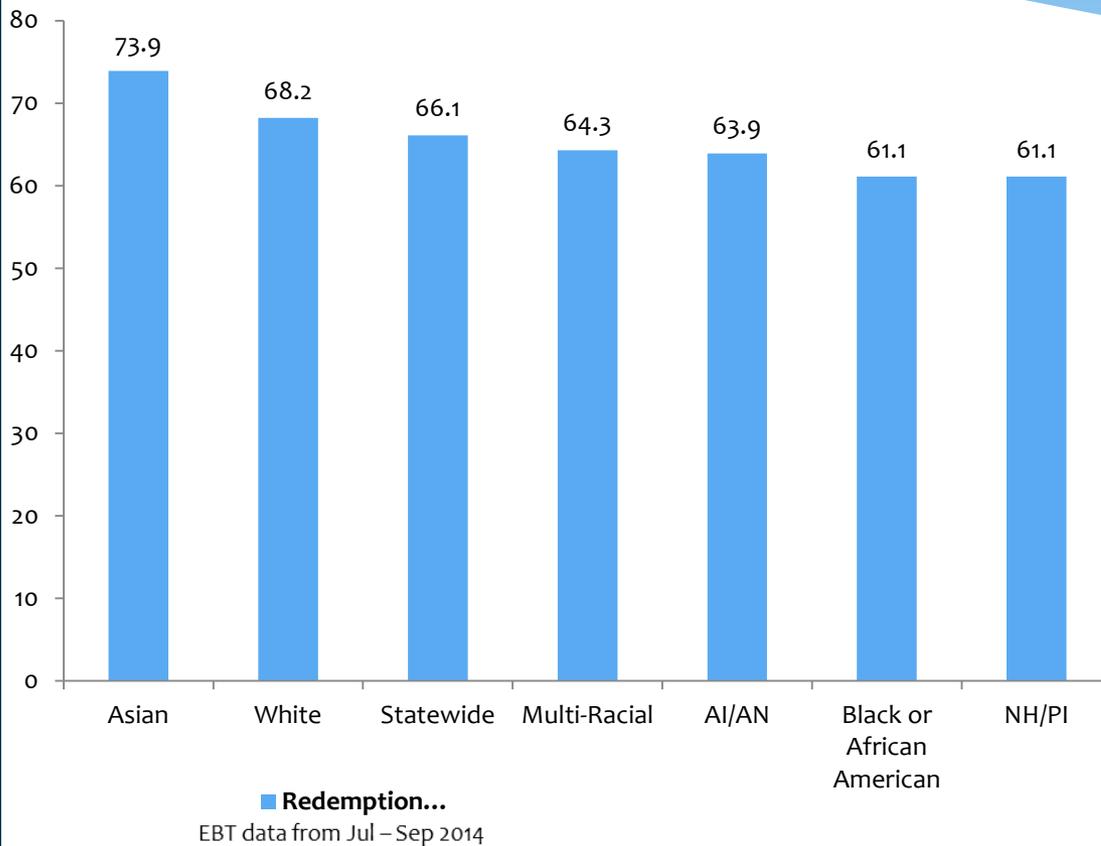
Top 5 Redeemed Items

CatCode	Sub CatCode	Description	% Redeemed *
11	039	12.5 oz. PWD Enfamil Premium Infant	95.8%
01	001	Whole Milk- gallon only	81.9%
54	000	Juice 64 oz.	80.3%
03	000	Eggs	78.8%
19	001	WIC Fresh Fruit and Vegetables	77.2%
02	000	Cheese - all authorized types	75%

Least 5 Redeemed Items

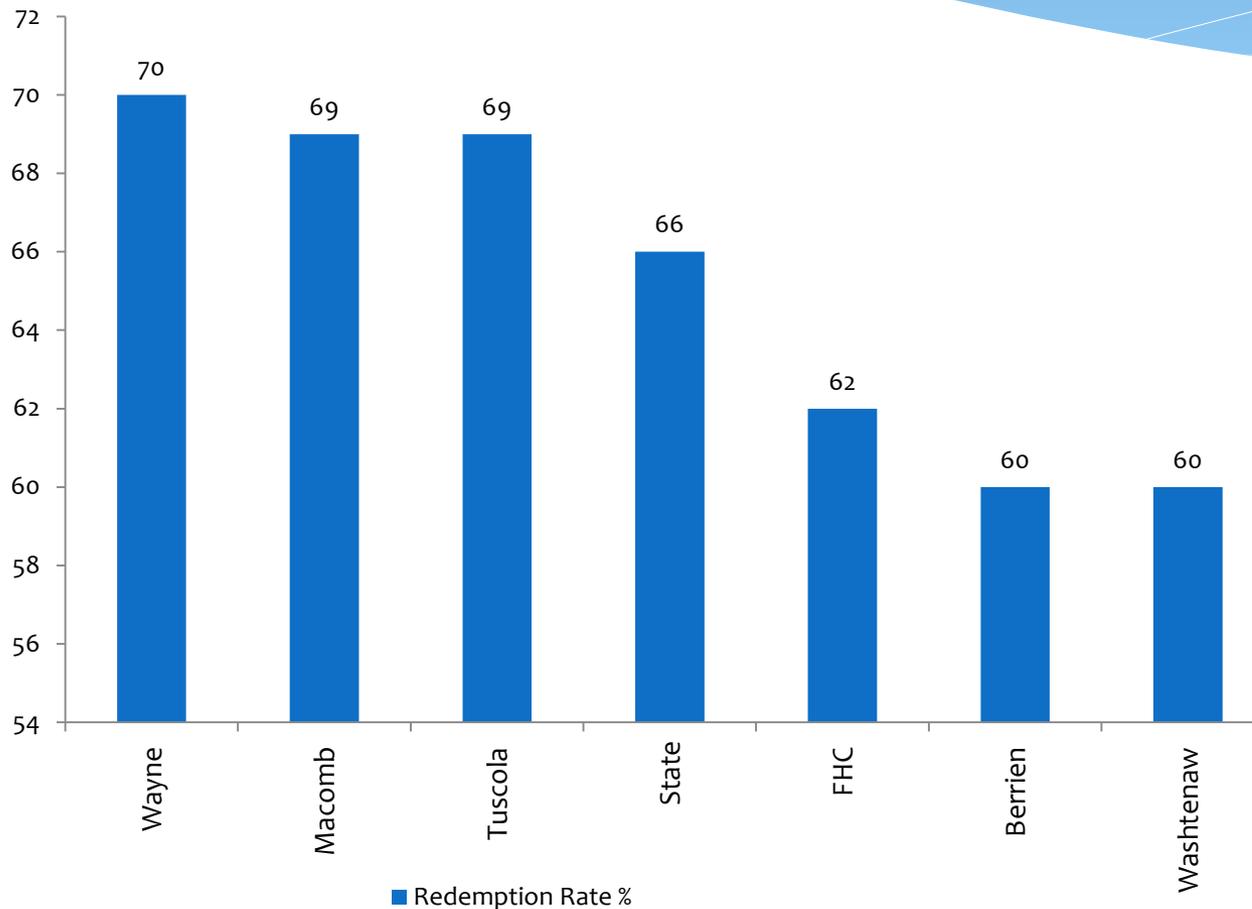
CatCode	Sub CatCode	Description	% Redeemed *
05	000	Cereal - All Authorized Adult	61.1%
15	013	Soy Beverage	54.5%
06	000	16-18 oz. Pnut Btr, lb. Dry Beans,15-16 oz. Cn Bean	53.6%
16	---	Other Milk (Whole, LF Qt, LF Hg)	44.7%
13	000	2.5 oz. Infant Meats	38%

Michigan WIC Redemption Rate By Race



75.5% of WIC families are at or below 130% Poverty level.

Redemption Rates by Local WIC Agencies



- 12.5 oz. PWD Enfamil Premium: 95.8%
- Fresh Fruits & Veg: 77.2%
- Most redeemed: Whole Milk : 81.9%
- Least redeemed: Infant Meats : 37.9%



WIC REPORTING

Using WIC Data at the LA

Suzette Daly, RN, BSN

Family and Community Health Supervisor

Health Department of Northwest Michigan

Michigan WIC Five-year-plan

The Health Outcome Indicators

January 2014 to December 2018

- * Increase first trimester entry into the WIC program from 36.9% to 42.0%.
- * Increase ideal prenatal weight gain from 30.7% to 33.5% among Michigan WIC Mothers.
- * Reduce the percent of low birth weight infants born to women enrolled in Michigan WIC from 8.7% to 8.0%.
- * Increase breastfeeding initiation rate from 63.1% to 67.0% and the six-month duration rate from 17.7% to 20.5%.
- * Decrease the prevalence of early childhood obesity, in children 2 to 5 years of age, from 14.1% to 13.5%.
- * Decrease the prevalence of low hemoglobin level from 17.5% to 15.0% among children less than five years of age.

HDNW Client Risk Factors by Category Report

Breastfeeding Women	Child	Infant	Pregnant Women	Postpartum Women
Example: Postpartum Overweight	Example: May Not Meet Dietary Guidelines	Example: Short Stature	Example: Prepregnancy Overweight	Example: Low Hemoglobin
Low Hemoglobin/Hematocrit 62.3%	At Risk Of Overweight 24.7%	At Risk of Overweight 27.7%	Pregnancy Overweight 44.2%	Low Hemoglobin/Hematocrit 40.3%
Postpartum Overweight 35.8%	Inadequate Growth 11.8%	Routinely using nursing bottles or cups improperly 11.5%	Ingesting foods that could be contaminated 28.1%	Postpartum Overweight 26.1%
High Maternal Weight gain 33.0%	May Not Meet Dietary Guidelines 11.3%	High Risk Underweight 11.0%	Maternal Smoking 26.5%	Maternal Smoking 22.2%

Clinic Closed Hours & Holiday User Monitoring Report

- * Clinic Closed Hours & Holiday User Monitoring Report-Admin/reports/Staff compliance/clinic closed hours & Holiday user monitoring report
- * Run monthly and takes 30-45 minutes to review
- * Coordinator sends Staff an email asking them to document why they were in MI-WIC outside of normal working hours

- 
- * Staff now send me an email when they are in MI-WIC outside of normal work hours
 - * Why do this?
 - * Keeps a watchful eye for fraudulent activity
 - * Protects Staff
 - * Staff are mindful of when they are working in MI-WIC
 - * They know “Suzette” is reviewing monthly and watching
 - * If I receive a letter from State WIC I already have reviewed this report and know why the Staff Person was in MI-WIC

Formula Usage Report

- * Formula Usage Reports-
Clinic/reports/participation/formula usage reports
- * CIAS works report and reviews for all required documentation
- * WIC Coordinator reviews only the problem records
- * Since working this report the WIC Special Formula/Food Request Form has been documented accurately by Physician
- * Staff are reviewing Form with what they documenting for Food Prescription

Show Rate Report

- * Show Rate Report-Clinic/reports/scheduler/show reports
- * Run Monthly
- * Email to all WIC Staff
- * Review at County Meetings
- * Review overall show rate for each clinic and then review show rate for each appointment type
- * For the two lowest show rates what can they do to improve the show rate?

Show Rate cont.

- * Staff by in for solution to problem
- * They know their Clients and what works best for scheduling appointments
- * Discuss what is working in other clinics that they can learn from
- * Ideas from Staff:
 - working through lunch hour
 - calling or text messaging before, during clinic and after clinic

Show Rate Cont.

using wichealth.org to have Client complete nutrition education

rescheduling appointment and moving the appointment to the day rescheduled. (used only before or during the clinic)

Use of WIC Data: A Local Perspective

MDCH WIC Coordinators Meeting
November 19-20, 2014

Anne M. Bianchi, MS, RD
Director, WIC Program
District Health Department # 10

Objectives

- * My WIC Coordinator Colleagues will...
- * Identify 4 data types which demonstrate WIC's roles in improving health outcomes
- * State where to find relevant data (per above)
- * State 4 practical examples of how to use data for your local program and communities

Michigan WIC Is Full of Data...

Welcome to WIC Data and System Management!

The Data and System Management (DSM) section was created to administer responsibilities and policies related to data and system use, processes, trainings and data publications for the Michigan Women, Infants and Children (WIC) Program. In 2009, the Michigan WIC Program implemented its web-based management information system MI-WIC. Michigan has served as a national model for system excellence and has been recognized as the country's first state to implement an online client eligibility certification system integrated with online electronic benefits transfer (EBT).

MI-WIC has improved client services, clinic process and data quality through the system inclusion of guided scripts, scanning of documentation, pre-defined reports, data quality validations and the ability to complete WIC nutrition related processes. Data quality improvements have allowed for the expanded use of Michigan WIC data in research collaborations that have been instrumental to understanding the unique needs of WIC clients. Quality data has led to evidence based decision making and interventions to improve the health outcomes for the women, infants and children we serve.

Thank you for your continued support!

WIC Data & Reports

[Click here for:](#) Access to WIC research, reports and data quality information

Training & Presentations

[Click here for:](#) Access to training and presentations from the DSM Section

Contact DSM

[Click here for:](#) DSM contact information

WIC Systems

[Click here for:](#) Access to system release information, special projects and system policies and processes.

Related Links

[Click here for:](#) Resources for WIC local agency staff and MCH audiences.

Top picks for WIC data...

Welcome to WIC Data and Reports!

Our goal is to provide you with up to date information, data and research related to our WIC clients. Here you will find the latest reports, collaborations and publications for the Michigan WIC program to better serve local WIC agencies and WIC clients. Please use the many tools on this site to assist you in making data informed decisions when it comes to programming in your area.

To provide insight into the health status of WIC clients and program characteristics, please utilize the following data resources as quick references for the Michigan WIC Program.

- [Michigan WIC Top Ten List](#) A look at the Top Ten health indicators used to assess Michigan WIC's maternal and infant health outcomes.
- [Michigan WIC Five Year Plan](#) A look at Michigan WIC's health outcome indicator goals from January 2014 - December 2018
- [Average Day in the Michigan WIC Program](#) Know the facts about an average day in the Michigan WIC Program.



PNSS & PedNSS

[Click here for:](#) Access to Michigan PNSS & PedNSS annual and trend reports.

Special Reports

[Click here for:](#) Access to breastfeeding, enrollment and other valuable reports.

WIC Research

[Click here for:](#) Information about WIC research projects and data use.

Data Quality

[Click here for:](#) Data quality improvement tips and information.

Top Picks for WIC Data

- * Michigan WIC Five (5) Year Plan
- * Pregnancy Nutrition Surveillance Survey (PNSS) and Pediatric Nutrition Surveillance Survey (PedNSS)
- * Breastfeeding Rate(Initiation) and Duration (Special Ad Hoc Reports)
- * MI-WIC Breastfeeding Initiation and Duration
- * Michigan WIC Top Ten List
- * A Day in the Michigan WIC Program

Michigan WIC Five Year Plan

Michigan WIC Five-year-plan

The Health Outcome Indicators

January 2014 To December 2018



- Increase first trimester entry into the WIC program from 36.9% to 42.0%.
- Increase ideal prenatal weight gain from 30.7% to 33.5% among Michigan WIC mothers.
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- Decrease the prevalence of low hemoglobin level from 17.5% to 15.0% among children less than five years of age.

The projections are based on the 2003-2013 trend data from Michigan PNSS and PedNSS. 2013 data is used as the baseline for a five-year-plan from Jan. 2014 to Dec. 2018.

Udate: Sept. 2014. KE

WIC 5 Year Plan: PNSS and PedNSS

- * Plan developed using Pregnancy Nutrition Survey Surveillance (PNSS) and Pediatric Nutrition Surveillance Survey (PedNSS)
- * Use MDCH Health Outcome indicators and priorities to guide WIC program and quality improvement activities
- * Review local PNSS and PedNSS data and compare to State and US

Merging State and Local Health Outcome Indicators

- * Example: Nutrition Services Plan (NSP)
- * Review of 2013 PNSS data: State and Local Agency (DHD #10)
- * Indicator: 1st Trimester WIC Enrollment
- * MI: 36.9% DHD # 10: 48.2%
- * MI: Increase 1st trimester entry into the WIC Program from 36.9% to 42% by 2018 (5 years)
- * DHD #10: Increase 1st trimester entry into WIC from 48.2% to 50% by Sept 30th 2015 (1 year)

Local Use of PNSS and PedNSS data: Board of Health presentations

- * Presentations to Board of Health (County Commissioners) are wonderful WIC outreach and advocacy opportunities
- * Use WIC health outcome data to support program effectiveness (including cost-effectiveness)
- * Increases the awareness of extent of WIC services (far beyond food benefits)
- * Example: power point slide from recent BOH (WIC: Strengthening Families for 40 Years)

What's Special about DHD #10 WIC?

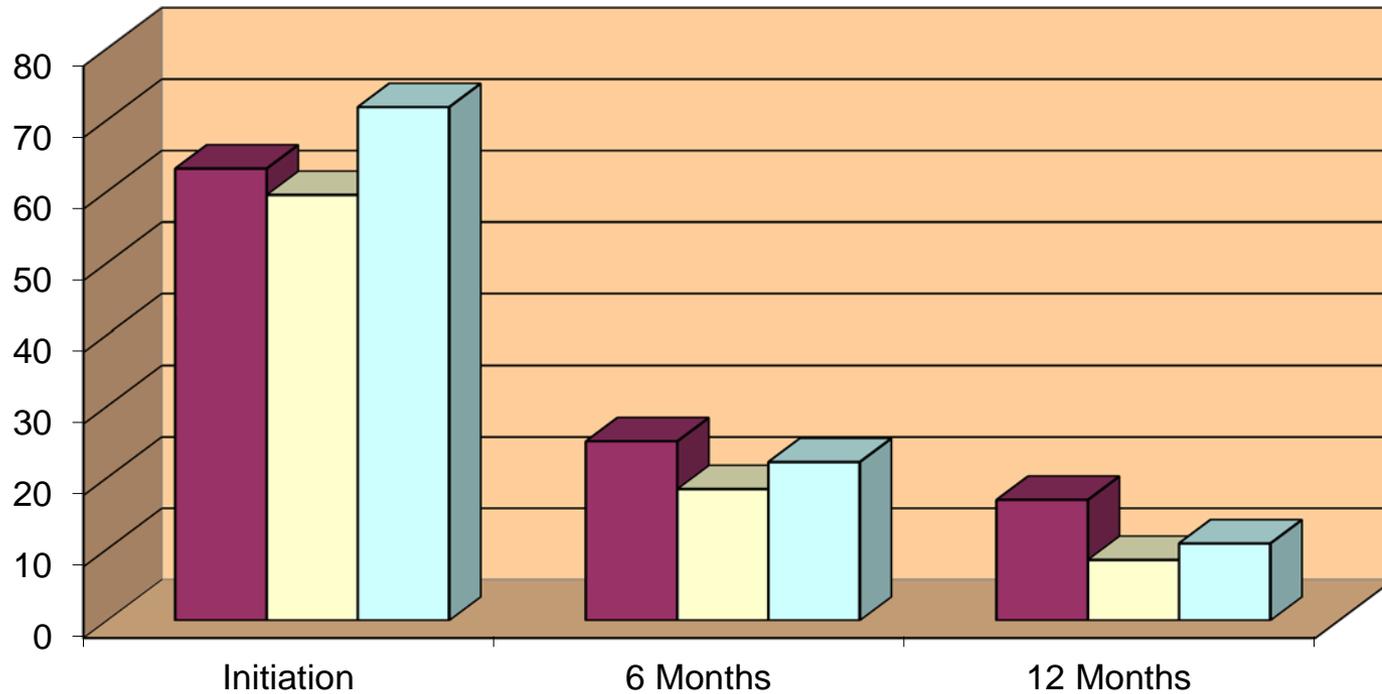
- * 49% of pregnant women enrolled on WIC during their 1st trimester of pregnancy
- * 77.5% of women enrolled in our WIC Program began prenatal care in 1st trimester



Use of PedNSS: NSP

- * Review MI WIC Five Year Plan
- * Review 2013 PedNSS: State and Local Agency Data
- * Set realistic health outcome objectives (1 year)
- * MI: Increase breastfeeding initiation rate from 63.1% to 67% by 2018 (5 years)
- * DHD # 10 NSP: Increase breastfeeding initiation rate from 76.2% to 78% by 2015

WIC Population



■ United States ■ Michigan ■ DHD #10

Top Data Picks: Breastfeeding Rate and Duration Special Reports

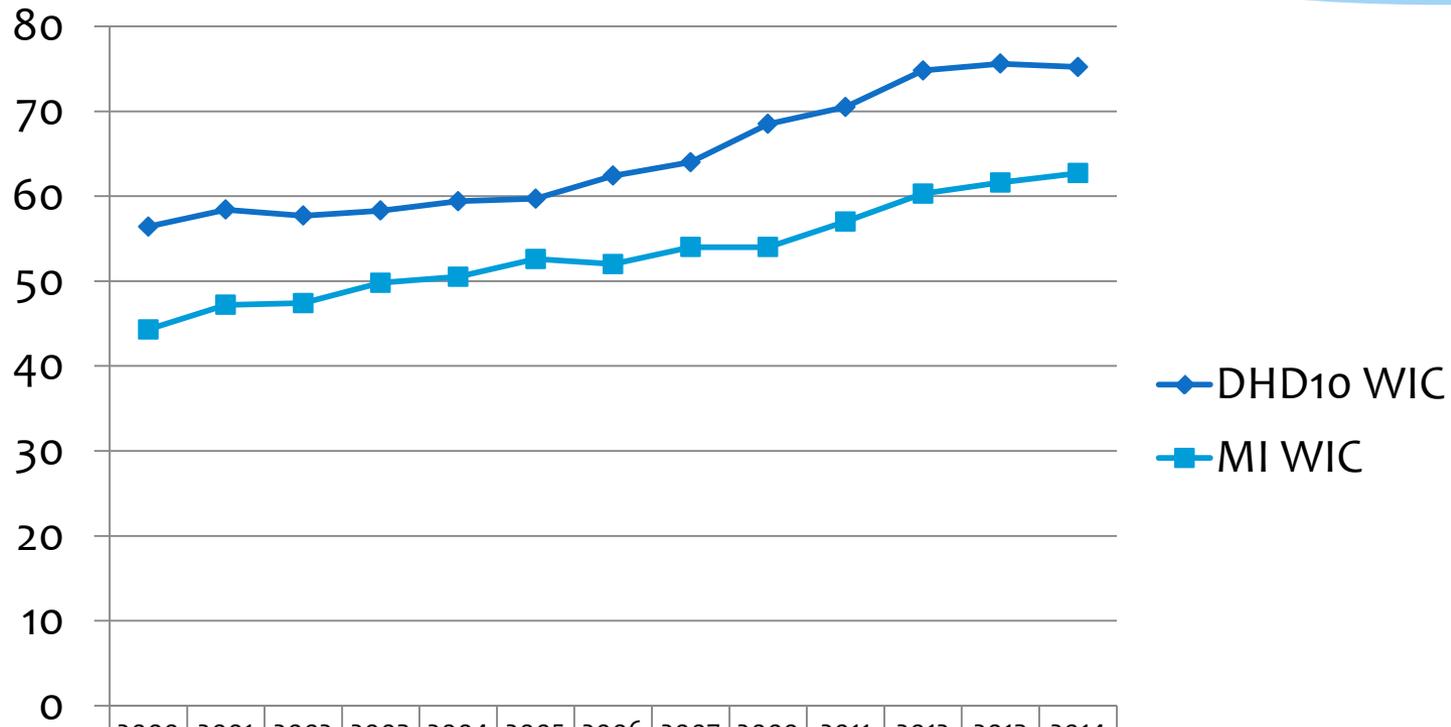
- * Useful in a great so many venues!!
- * NSP: Breastfeeding and Nutrition Education Plans
- * Board of Health and Community Outreach Presentations
- * Continuous Quality Improvement (CQI) projects
- * Staff Recognition and Celebration of Successes

Breastfeeding Ad Hoc Reports

- * Available 2 times per year (Spring and Fall) and as requested by Coordinator
- * Includes ONLY infants
- * Does NOT calculate Exclusivity
- * Prefer this report for BF DURATION
- * Data are useful to evaluate effectiveness of NSP and CQI activities (PedNSS data delayed)

Infant Health: Breastfeeding

WIC Breastfeeding Initiation Rates



DHD10 WIC	56.4	58.4	57.7	58.3	59.4	59.7	62.4	64	68.5	70.5	74.8	75.6	75.2
MI WIC	44.3	47.2	47.4	49.8	50.5	52.6	52	54	54	57	60.3	61.6	62.7

MI WIC Breastfeeding Reports

Scope Local Agency/Clinic Name

Report Parameters -- Webpage Dialog

https://sso.state.mi.us/MIWIC/Clinic/WebForms/OracleReports.aspx?fiFAIyRQYXJ

Breastfeeding Initiation and Duration

State/Local Agy

Local Agy/State

430000 District Health Department #10

Run Report Cancel

https://sso.state Internet | Protected Mode: On

BIANCHIA3824 438363 Wexford County WIC Program miwipc

MI-WIC Breastfeeding Reports

Michigan WIC Program Breastfeeding Initiation and Duration Report

Page 1 of 2

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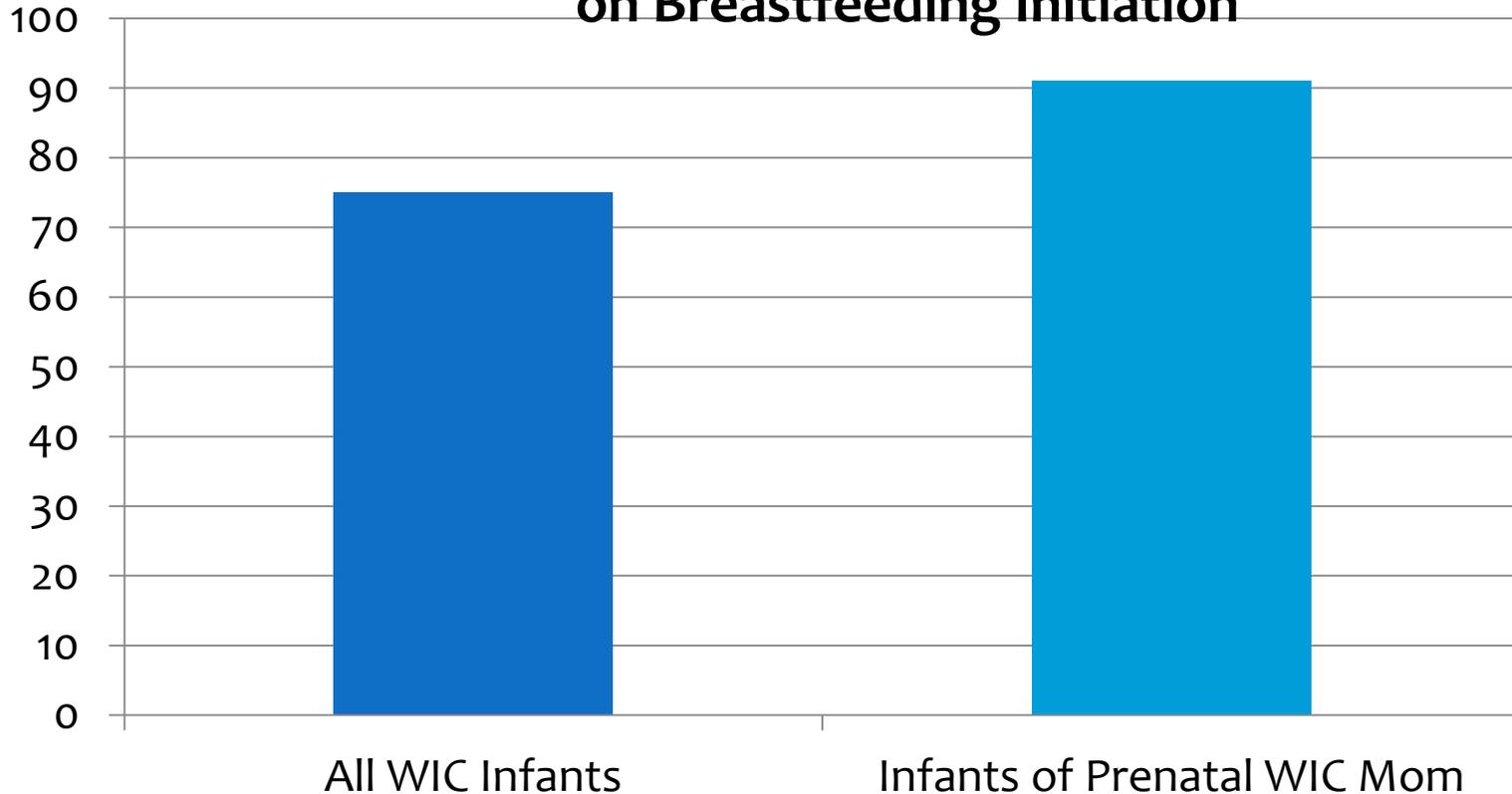
Agency	Breastfeeding Initiation			Breastfeeding Duration												Breastfeeding Exclusivity	
	Infants and Children	Infants Only	Infants of Prenatal WIC Mom	1 wk	2 wks	4 wks	6 wks	2 months	3 months	6 months	12 months	18 months	2 yrs	3 yrs	4 yrs	3 months	6 months
43	5071 74%	1372 77%	1197 87%	380 7.5%	598 11.8%	399 7.9%	278 5.5%	397 7.8%	708 14.0%	600 11.8%	354 7.0%	121 2.4%	60 1.2%	16 0.3%	2 0.0%	700 13.8%	488 9.6%
4351	549 72%	165 79%	148 90%	45 8.2%	68 12.4%	50 9.1%	31 5.6%	43 7.8%	75 13.7%	53 9.7%	36 6.6%	17 3.1%	6 1.1%	1 0.2%	1 0.2%	69 12.6%	72 13.1%
4352	167 69%	44 75%	41 93%	12 7.2%	27 16.2%	13 7.8%	8 4.8%	10 6.0%	17 10.2%	20 12.0%	6 3.6%	4 2.4%	1 0.6%	0 0.0%	0 0.0%	18 10.8%	17 10.2%
4353	450 73%	106 73%	92 87%	37 8.2%	57 12.7%	33 7.3%	28 6.2%	27 6.0%	57 12.7%	43 9.6%	21 4.7%	11 2.4%	5 1.1%	2 0.4%	0 0.0%	52 11.6%	38 8.4%
4354	672 69%	177 68%	155 88%	31 4.6%	72 10.7%	60 8.9%	35 5.2%	55 8.2%	104 15.5%	89 13.2%	39 5.8%	20 3.0%	11 1.6%	0 0.0%	0 0.0%	92 13.7%	115 17.1%
4355	306 73%	71 77%	65 92%	13 4.2%	48 15.7%	24 7.8%	13 4.2%	30 9.8%	45 14.7%	35 11.4%	18 5.9%	9 2.9%	3 1.0%	1 0.3%	0 0.0%	60 19.6%	10 3.3%
4356	480 72%	133 70%	110 83%	41 8.5%	55 11.5%	31 6.5%	24 5.0%	36 7.5%	72 15.0%	67 14.0%	32 6.7%	10 2.1%	3 0.6%	1 0.2%	0 0.0%	92 19.2%	44 9.2%
4358	166 74%	36 77%	30 83%	8 4.8%	19 11.4%	14 8.4%	5 3.0%	12 7.2%	20 12.0%	19 11.4%	23 13.9%	3 1.8%	5 3.0%	1 0.6%	0 0.0%	9 5.4%	8 4.8%
4359	555 75%	122 76%	102 84%	56 10.1%	50 9.0%	41 7.4%	28 5.0%	38 6.8%	71 12.8%	74 13.3%	52 9.4%	14 2.5%	4 0.7%	2 0.4%	1 0.2%	65 11.7%	49 8.8%
4360	269 81%	87 84%	82 94%	20 7.4%	40 14.9%	23 8.6%	22 8.2%	20 7.4%	35 13.0%	29 10.8%	12 4.5%	3 1.1%	1 0.4%	0 0.0%	0 0.0%	26 9.7%	19 7.1%

MI-WIC Breastfeeding Reports

- * Data based on all active enrollees
- * “On-demand” BF report
- * Includes both infant and children in calculations
- * Most useful for BF Initiation: Infants Only & Infants of Prenatal WIC Moms
- * Clinic-specific data (helpful for districts)
- * Used often for community presentations and staff recognition

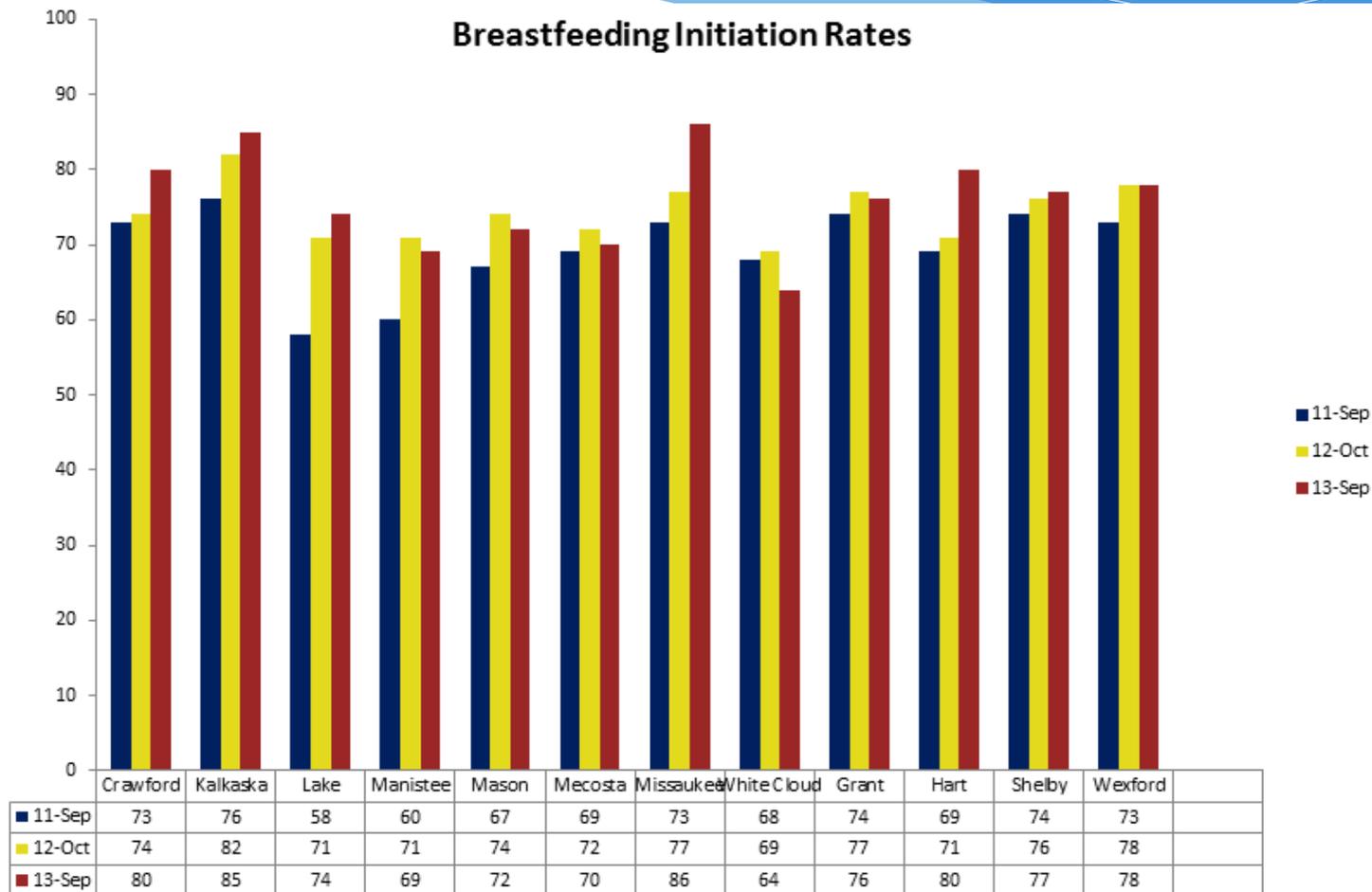
WIC Makes A Positive Difference!

Effects of Prenatal WIC Support in Manistee County on Breastfeeding Initiation



MI WIC Breastfeeding Reports...

Breastfeeding Initiation Rates



Other Cool Data Stuff

Michigan WIC Top Ten List



Indicators	2003	2013	Progress Direction
First Trimester Entry into WIC	31.7	36.9	
Birth weight: • LBW <2500 g	7.3	8.7	
• Full Term LBW	--	3.7	
• HBW >4000 g	8.7	7.2	
• % Preterm Infants	--	11.5	
Breastfeeding: • Initiation	49.8	63.1	
• 6 Months Duration	14.7	17.7	
Prenatal Weight Gain: • <Ideal	26.9	16.9	
• >Ideal	48.6	52.4	
Body weight: • 85th-<95th%, ≥2yrs	16.1	16.8	
• ≥95th%, ≥2yrs	12.9	14.1	
Anemia, Low Hg, 3 rd Trimester	30.1	38.9	
Anemia, Low Hg, 6 months - 5 yrs.	13.1	17.5	
Prenatal Smoking, Last Trimester	23.1	16.8	
First Trimester Prenatal Care	74.3	79.9	
Prepregnancy: • Overweight/Obese	51.0	56.0	
• Underweight	5.2	4.3	

Michigan WIC Top 10 List

- * GREAT for evaluation of Health Outcome TRENDS
- * Use trend data for program management and CQI activities
- * Idea: Customize this document for your local agency using PNSS and PedNSS reports and share with staff, administration, BOH and community partners

An Average Day in the Michigan WIC Program

An Average Day in the Michigan WIC Program



54%

Of babies born in Michigan enroll in WIC

WIC families purchase over

\$514,211

in healthy foods

90.5 %

Of WIC families live below 150% of poverty.

38%

Of pregnant mothers enroll in WIC during their first trimester.

11,556

Clients are served.

WIC Families redeem

76%

Of their fresh fruits and vegetable benefits.

54.9%

Of WIC mothers are overweight or obese pre-conception

16.8% Of children are overweight and **14.1%** are obese.

8.9% Of infants are born at a low birth weight.

61.2% Of infants are breastfed.

An Average Day in the DHD #10 WIC Program

An Average Day in the DHD #10 WIC Program 2012-2013

285
clients
are
served

49%
of pregnant
mothers enroll in
WIC during their
first trimester

55.7%
WIC mothers are
overweight
or obese
pre-pregnancy

76.2%
of WIC infants are breastfed

90.5%
of WIC families
live below 150%
of poverty

18.8%
of children are
overweight and
15.7% are
obese

WIC families
purchase
over
\$15,910
day
in healthy
foods

7.7%
of infants are born at a low birth weight

CQI: Everyone's Favorite Topic

- * Why use QI:
- * To improve public health service, processes and health outcomes
- * To find more efficient ways to get work done
- * To make decisions and evaluate changes USING DATA
- * Not all changes are improvements!!

MIHP and WIC

AIM Statement:

By September 30, 2014, MIHP enrollment will increase by 20%.

The Team:

- MIHP and WIC staff in Mason, Mecosta, and Newaygo counties
- Meryl Smith
- Marcia Walter
- Anne Young
- Anne Bianchi

Results:

Enrollment increased by

44%

Health Department and WIC Annual Report to the Community

Women, Infants, and Children

Average Monthly Enrollment	9,293
% Return Rate	93%
# of Project Fresh Books Distributed	2,458
Value of Project Fresh Coupons	\$73,740
Child Lead Screening	1,249



Our Breastfeeding Support Peer Counselors

Local WIC Nutrition

Positive Behavior Change in Young Children

At a recent WIC Dietitian appointment a mom said that the Sesame Street Nutrition book and DVD packet received at WIC has greatly improved her son's willingness to try new foods. He enjoys singing the phrases/songs from the shows. Mom plans to introduce more vegetables in their family meals and is excited to view the new recipe website provided by the WIC Dietitian.

The Importance of Breastfeeding



WIC Highlights:

- WIC Program was awarded a full accreditation status.
- WIC Breastfeeding Peer Counselor Program was funded with Michigan Department of Community Health and USDA. There are six WIC Peers and one MSUE Peer that help promote breastfeeding education leading to an increase in initiation rate, now at 75%!
- Fremont Area Community Foundation Project FRESH Expansion to help an additional 510 women and children
- Mason and Oceana County Community Foundation: Rock and Rest Outreach Project

In Summary....

- * Michigan WIC is very fortunate to have so many quality data sources
- * Data can be used by local staff in several venues (presentations, CQI, grant proposals, celebration of successes etc)
- * WIC Health Outcome data can and should be shared with staff, administration and community partners
- * Help is just an e-mail or a phone call away (Kobra:)

Thank you for your time and interest

- * Contact information:
- * Anne M. Bianchi, MS, RD
- * abianchi@dhd10.org
- * 231-876-3824

Action Plans

- * Who
- * What
- * When
- * Where
- * Why



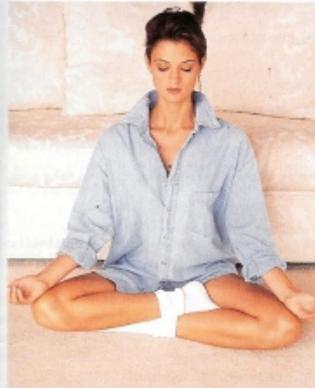
Images of Success

- * Screening
- * Assessment
- * Education
- * Evaluation

Quick and Easy Ways to Amp Your Energy

No matter how busy your life, you can find a few minutes to take an energizing break and free yourself from fatigue.

1. You may not be able to go to the health club to work out, but you can find the time to walk around the block.
2. You may not be able to get together with a good friend, but you can find the time to talk to her on the phone.
3. You may not be able to get a massage, but you can do 30 seconds of deep breathing.
4. You may not be able to go to the park to commune with nature, but you can buy a plant for your desk at work.



Reader Poll

We'd like to know your thoughts on fatigue:

- 1 Do you feel you're more fatigued than you should be?
 Yes No
- 2 Have you ever complained to your doctor about fatigue?
 Yes No
- 3 Do you find that you're more tired than your male friends or relatives?
 Yes No
- 4 After reading this article, do you now know the source of your fatigue?
 Yes No

You can tell us your answers in one of two ways:

VISIT OUR WEB SITE
www.Biography.com
or
FAX US 212-210-1326

We must receive your answers by January 15, 2002. The results will be posted on our Web site on January 15 and published in our March issue.

BIOGRAPHY
JAN/2002

Measuring Progress

- * **Program Activities**
 - * Target Population
 - * Local Agency
 - * State Agency

- * **Objectives**
 - * Short-term
 - * Ongoing
 - * Long-term

- * **Outcome Indicator**



Michigan WIC Five-year-plan

The Health Outcome Indicators

January 2014 To December 2018



- Increase first trimester entry into the WIC program from 36.9% to 42.0%.
- Increase ideal prenatal weight gain from 30.7% to 33.5% among Michigan WIC mothers.
- Reduce the percent of low birth weight infants born to women enrolled in Michigan WIC from 8.7% to 8.0%.
- Increase breastfeeding initiation rate from 63.1% to 67.0% and the six-month duration rate from 17.7% to 20.5%.
- Decrease the prevalence of early childhood obesity, in children 2 to 5 years of age, from 14.1% to 13.5%.
- Decrease the prevalence of low hemoglobin level from 17.5% to 15.0% among children less than five years of age.

The projections are based on the 2003-2013 trend data from Michigan PNSS and PedNSS. 2013 data is used as the baseline for a five-year-plan from Jan. 2014 to Dec. 2018.

Research And Collaborations

- * **WIC Nutrition Education Study (NEST) - USDA/FNS**
All 48 Local Agencies are requested to complete the Nutrition Education Survey - 80 sites will be selected to participate in telephone interviews.
- * **WIC NSA Cost Study - USDA/FNS**
All 48 Local Agencies are requested to participate in this online survey
- * **WIC EBT High Risk Vendor Detection Study – USDA/FNS**
WIC EBT Data is used to identify characteristics for high risk vendors
- * **WIC Vendor Management EBT Study – USDA/FNS**
80 vendors in different counties across the state will be selected to complete compliance buys
- * **SEBTC – USDA/FNS**
- * **Census Bureau Study**
- * **Institute for Women’s Policy research**

- * **Intervention for Obesity** - Elizabeth Kuhl, Wayne State University School of Medicine, in collaboration with Detroit IPH
- * **Barriers to and Motivators for Prevention of Excess Weight in During Pregnancy and Weight Loss in Postpartum-** Mei Wei Chang, MSU, in collaboration with Genesee and Ingham County Health Departments
- * **Mother’s In Motion** – Mei- Wei Chang, MSU School of Nursing in collaboration with Calhoun, Kent, Jackson, Detroit, Benton Harbor

Thank You Team.....!

- * We gratefully acknowledge and thank all local agency coordinators and local clinic staff for your efforts to collect high quality data and use Michigan WIC data and the MI-PNSS & PedNSS.
- * Special acknowledgement and appreciation to DSM Team Members:
 - * Bagya Kodur, WIC Report Specialist
 - * Ramesh Balyam, 3SSW Report Developer
- * Enthusiastic thank you to our Data connoisseurs/ “geeks”:
Ann Bianchi & Suzette Daly