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APPENDIX A
PROCESS EVALUATION:
POC INTERVIEW GUIDES—INITIAL, INTERIM, AND FINAL

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APPENDIX A.1
PROCESS EVALUATION:
POC INTERVIEW GUIDES—INITIAL

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WIC Nutrition Education Study
POC Site Staff Interview Guide—Initial Interview

Site ID: _____ **Date:** _____

Staff interviewed (names/titles): _____

Interviewer name: _____

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-0599. The time required to complete this information collection is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Note to Interviewer:

Several of the items for this interview are included in the Phase I Site Survey but are included in this interview because the information may change during the period between the survey and start of the pilot. Prior to the interview, provide the site with a report of their Phase I survey responses and ask them to review it to prepare updates for the interview. The interviewee can make changes to the report and return it before the interview or share the changes with the interviewer during the interview, whichever they prefer. Additionally, request a copy of the current Local Agency Nutrition Education Plan for the site and, if applicable, a schedule of the group education topics for the site. Review these in advance of the interview to prefill any questions in the interview guide that can be completed with information in those resources and verify them during the interview.

Script

Hi. My name is _____. I work for Altarum Institute, and we are part of the study team for the WIC Nutrition Education Study or NEST.

Thank you for taking the time for this interview. The purpose of today's interview is to hear from you about your WIC site and the nutrition education you provide. During this interview, I will ask you to provide updates for some of the information that we received from your site previously in a survey completed last summer. I'll also ask for some additional background information about your site and how you provide nutrition education. We will be contacting you again in 6 months for updates to some of this information, which will take about 15 minutes. Our interview today will last no more than 45 minutes.

Do you have any questions before we begin? If not, let's get started!

Note to interviewer: Several of the items for this interview are included in the Phase I Site Survey and are included in this interview to obtain updates for information that may have changed during the period between the survey and start of the pilot. Populate these items with data from the Site Survey as indicated prior to conducting the interview.

A. Background Information

1. Describe the site schedule (hours of operation, days of the week operating): _____
2. On average, how many participants are served at your site each month? _____

3. [INTERVIEWER: VERIFY AND UPDATE RESPONSES THE SITE PROVIDED FOR QUESTION 9 ON SITE SURVEY]

For each job classification/type of staff, enter the number of staff who currently provide nutrition education at the site who work full time and the number who work part time. (Enter NA for any staff type that is not applicable at the site. If a staff member works 32 or more hours/week on WIC, count them in the Full-Time Staff column and if less than 32 hours/week on WIC, count them in the Part-Time Staff column appropriate for the number of hours they work per week. If a staff member **performs more than one role**, count them only once in the job classification/type for their **primary** role.)

Job Classification/Type of Staff	Number of Full-Time Staff (work on WIC activities 32 or more hours per week)	Number of Part-Time Staff (work on WIC activities 21–31 hours per week)	Number of Part-Time Staff (work on WIC activities 20 or fewer hours per week)
WIC director/coordinator			
Site/clinic supervisor			
Registered dietitian (RD)			
Degreed nutritionist, not RD			
Trained nutrition paraprofessional (e.g., nutrition assistant, nutrition aid, competent paraprofessional authority, diet technician, social services technician)			
Nurse			
Nutrition education coordinator			
Administrative/clerical/support staff			
Lactation consultant/WIC-designated breastfeeding expert			
Breastfeeding coordinator			
Breastfeeding peer counselor			
Other: _____			
Total			

B. Scheduling Nutrition Education

Now I'd like to know how your site provides nutrition education.

4. **[INTERVIEWER: VERIFY AND UPDATE RESPONSES THE SITE PROVIDED FOR QUESTION 5 ON SITE SURVEY]**

During what types of visits does the site provide nutrition education contacts? (*Check all that apply.*)

- Certification visit (e.g., enrollment, recertification)
- Mid-certification visit (e.g., prenatal trimester visit, infant/child mid-certification, breastfeeding mid-certification)
- Secondary education follow-up visit (e.g., group classes, food issuance/pick-up, breastfeeding follow-up, low risk follow-up)
- High-risk follow-up visit (e.g., nutritionist visit, nutrition counseling visit, high-risk group classes)
- Other visits (describe): _____

5. **[INTERVIEWER: VERIFY AND UPDATE RESPONSES THE SITE PROVIDED FOR QUESTION 4 ON SITE SURVEY.]**

In the first column, enter the number of nutrition education contacts the site **offers** (i.e., makes available) during a certification period for each participant category and time period. While the number of contacts varies based on individual needs, enter the number that is offered to the **majority of participants** in the category. *(Count all contacts beginning with the certification visit; for example, if prenatal women who enroll in the 1st trimester are offered 3 contacts during the prenatal certification period, enter "3." Enter NA for any category/time period that is not applicable at the site.)*

In the second column, enter the **estimated** percentage of participants who **receive** that number of nutrition education contacts during their certification period. *(Please estimate based on your experience. You do not need to run a report or review participant records to answer this question.)*

Participant Category and Time Periods	Number of Nutrition Education Contacts Site Offers during Certification Period	Estimated Percentage of Participants who Receive this Number of Contacts
Participants who are NOT high risk		
Prenatal woman, enrolling in 1 st trimester		
Prenatal woman, enrolling in 2 nd trimester		
Prenatal woman, enrolling in 3 rd trimester		
Breastfeeding woman, 6-month certification period		
Breastfeeding woman, 12-month certification period		
Postpartum woman, not breastfeeding		
Infant, 6-month certification period		
Infant, 12-month certification period		
Child, 6-month certification		
Child, 12-month certification		
Participants who are high risk and/or have nutritional risks requiring special attention		
Prenatal woman, enrolling in 1 st trimester		
Prenatal woman, enrolling in 2 nd trimester		
Prenatal woman, enrolling in 3 rd trimester		
Breastfeeding woman, 6-month certification period		
Breastfeeding woman, 12-month certification period		
Postpartum woman, not breastfeeding		
Infant, 6-month certification period		
Infant, 12-month certification period		
Child, 6-month certification period		
Child, 12-month certification period		

6. **[INTERVIEWER: VERIFY AND UPDATE RESPONSES THE SITE PROVIDED FOR QUESTION 7 ON SITE SURVEY.]**

On average, how much time do staff members who provide nutrition education at the site spend providing nutrition education during each of the following types of WIC visits? Do **not** include time spent on eligibility (e.g., income and residency) or assessment (e.g., weighing/measuring, blood work, reviewing nutrition questionnaires). *(Check one response for each type of visit.)*

Type of Visit	Less than 5 Min	5-10 Min	11-20 Min	21-30 Min	31-45 Min	46-60 Min	More than 60 Min	NA	Don't Know
Enrollment Certification	<input type="checkbox"/>								
Recertification – Not high risk, 1 person	<input type="checkbox"/>								
Recertification – High risk, 1 person	<input type="checkbox"/>								
Recertification – 2 or more family members	<input type="checkbox"/>								
Mid-certification	<input type="checkbox"/>								
Secondary education follow-up (individual)	<input type="checkbox"/>								
Secondary education follow-up (group)	<input type="checkbox"/>								
High-risk follow-up	<input type="checkbox"/>								
Other	<input type="checkbox"/>								

7. Do you know what your attendance rate is, that is, the percentage of participants who come for nutrition education appointments?

- Yes
- No
- Not applicable, site does not schedule appointments (walk-in only) → **GO TO Question 11**

8. In a typical month, about what percentage of participants attend appointments (i.e., "show up") for nutrition education at each type of appointment?

Type of Appointment	Percent
Certification	___
Mid-certification	___
Secondary education follow-up	___
High-risk follow-up	___
Other visits (describe): _____	___

9. What methods, if any, does your site use to remind participants of their upcoming appointments, for example, reminder calls or text messages?

10. How does your site follow up with participants who miss their nutrition education appointments?

11. Which of the following medical or other services are offered to participants at this site in conjunction with WIC visits? **[INTERVIEWER: READ LIST AND CHECK ALL THAT APPLY.]**

- Children's health care (e.g., EPSDT, well child)
- Prenatal care
- Lead screening
- Family planning services
- SNAP registration
- Medicaid registration
- Head Start
- Dental services
- Environmental health/screening
- Maternal/prenatal health care
- Parenting support
- Prevention and screening services (e.g., vision, early and periodic screening, immunizations)
- Sexually transmitted disease services
- Smoking cessation
- There are no other services available at this site.
- Other (describe): _____

C. Nutrition Education Modes

Next, I'd like to know more about the methods that your site uses to provide nutrition education. **[INTERVIEWER: FOR ITEMS 10-17, VERIFY AND UPDATE RESPONSES THE SITE PROVIDED FOR QUESTION 6 AND QUESTIONS 10 THROUGH 14 (VERSION 2) ON SITE SURVEY. IF VERSION 2 WAS NOT COMPLETED BY THE SITE, THEN COLLECT THIS INFORMATION. SKIP VISIT TYPES THAT ARE NOT APPLICABLE.]**

12. What methods are used to provide nutrition education? (Check all methods that are used for each type of visit.)

Method	Enrollment Certification	Recertification	Mid-certification	Secondary Education	High-Risk	Other
One-on-one counseling: Face to face (in WIC site)	<input type="checkbox"/>					
One-on-one counseling: Telephone	<input type="checkbox"/>					
One-on-one counseling: Video conferencing	<input type="checkbox"/>					
Group education sessions	<input type="checkbox"/>					
Technology-based nutrition education used by participants at site (e.g., computer, kiosk, tablet)	<input type="checkbox"/>					
Technology-based nutrition education used by participants offsite via Internet (e.g., web-based nutrition education modules)	<input type="checkbox"/>					
Other nutrition education activities (e.g., monthly topic, worksheets, videos, self-study modules)	<input type="checkbox"/>					

13. During **certification visits** (enrollment or recertification), how often does the site use the methods listed below to provide nutrition education? (*Check one response for each method.*)

Check this box and go to Question 14 if the site does not provide certification visits.

Method	Never	Rarely (<10%)	Occasionally (11–39%)	Some- times (40–59%)	Often (60–89%)	Almost Always (≥90%)
One-on-one counseling: Face to face (in WIC site)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Video conferencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group education sessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants at site (e.g., computer, kiosk, tablet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants offsite via Internet (e.g., web-based nutrition education modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other nutrition education activities (e.g., monthly topic, worksheets, videos, self-study modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. During **mid-certification visits**, how often does the site use the methods listed below to provide nutrition education? (*Check one response for each method.*)

Check this box and go to Question 15 if the site does not provide mid-certification visits.

Method	Never	Rarely (<10%)	Occasionally (11–39%)	Some- times (40–59%)	Often (60–89%)	Almost Always (≥90%)
One-on-one counseling: Face to face (in WIC site)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Video conferencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group education sessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants at site (e.g., computer, kiosk, tablet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants offsite via Internet (e.g., web-based nutrition education modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other nutrition education activities (e.g., monthly topic, worksheets, videos, self-study modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. During **secondary education follow-up visits**, how often does the site use the methods listed below to provide nutrition education? (*Check one response for each method.*)

Check this box and go to Question 16 if the site does not provide secondary education follow-up visits.

Method	Never	Rarely (<10%)	Occasionally (11–39%)	Some- times (40–59%)	Often (60–89%)	Almost Always (≥90%)
One-on-one counseling: Face to face (in WIC site)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Video conferencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group education sessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants at site (e.g., computer, kiosk, tablet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants offsite via Internet (e.g., web-based nutrition education modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other nutrition education activities (e.g., monthly topic, worksheets, videos, self-study modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. During **high-risk follow-up visits**, how often does the site use the methods listed below to provide nutrition education? (*Check one response for each method.*)

Check this box and go to Question 17 if the site does not provide high-risk follow-up visits.

Method	Never	Rarely (<10%)	Occasionally (11–39%)	Some- times (40–59%)	Often (60–89%)	Almost Always (≥90%)
One-on-one counseling: Face to face (in WIC site)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Video conferencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group education sessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants at site (e.g., computer, kiosk, tablet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants offsite via Internet (e.g., web-based nutrition education modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other nutrition education activities (e.g., monthly topic, worksheets, videos, self-study modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. During **other types of visits** (not including certification, mid-certification, secondary education follow-up, and high-risk follow-up visits), how often does the site use the methods listed below to provide nutrition education? (*Check one response for each method.*)

Check this box and go to Question 18 if the site does not provide other types of visits.

Method	Never	Rarely (<10%)	Occasionally (11–39%)	Some- times (40–59%)	Often (60–89%)	Almost Always (≥90%)
One-on-one counseling: Face to face (in WIC site)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Telephone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one counseling: Video conferencing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group education sessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants at site (e.g., computer, kiosk, tablet)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology-based nutrition education used by participants offsite via Internet (e.g., web-based nutrition education modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other nutrition education activities (e.g., monthly topic, worksheets, videos, self-study modules)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Which of the following does your site use to reinforce the information provided in nutrition education contacts? **[INTERVIEWER: READ LIST AND CHECK ALL THAT APPLY.]**

Onsite Methods

- Brochures or written materials
- Bulletin boards with nutrition information
- Computer, kiosk, or tablet computer at site
- Cooking demonstrations
- Display tables with nutrition information
- Educational props (e.g., food containers, breastfeeding dolls, physical activity items)
- Food tasting
- Nutrition education DVDs/videos viewed at site
- Support groups (e.g., parenting or breastfeeding group)
- None
- Other (describe): _____

Offsite Methods

- Email messages with nutrition education content
- Grocery store tours
- Monthly or quarterly nutrition newsletter sent home
- Nutrition education DVDs/videos sent home
- Social media (e.g., Facebook, Twitter)
- Technology-based education used outside of site (e.g., Internet modules)
- Telephone calls with nutrition education content
- Text messages with nutrition education content
- None
- Other (describe): _____

19. a) What, if any, follow-up does your site do to assess if participants are using these reinforcement materials or options? _____

b) **[ASK ONLY IF SITE IS ASSESSING USE OF REINFORCERS]** What have you learned about how participants are using reinforcement materials? _____

20. **[ASK ONLY IF SITE PROVIDES GROUP EDUCATION]** How many months of future group session topics do you have planned? _____

21. **[ASK ONLY IF SITE PROVIDES GROUP EDUCATION]** I'm going to read a list of topics. Please tell me if you plan to cover the topic in group education for the upcoming months. **[INTERVIEWER: READ LIST AND CHECK ALL THAT APPLY.]**

- Breastfeeding
- Child feeding practices
- Cooking/meal preparation
- Dental health
- Fruit and vegetables
- Healthy snacks
- Healthy weight for child
- Healthy weight for mother
- Infant feeding practices
- Infant/child growth and development
- Introduction of solid foods
- Inappropriate/sometimes foods (e.g., high-fat foods, fast foods)
- Iron/anemia
- Milk (lower fat choices/consumption)
- Parenting
- Physical activity
- Picky eaters
- Portion sizes
- Prenatal nutrition/diet
- Shopping for and preparing healthy foods
- Sugar-sweetened beverages
- Water consumption
- Whole grains
- Weaning from the bottle
- Other (describe): _____

D. Site Space

Now, I have a few questions about the space available at your site for providing nutrition education.

22. a) Do you feel that there is adequate space for providing nutrition education at your site?

- Yes
- No

b) [If no] Please explain: _____

23. In your opinion, what features of your WIC site support high-quality and effective nutrition education?

24. If you could change one thing about your site's space to improve the way you provide nutrition education, what would it be?

E. Staff Training

Next I have some questions about training for staff who provide nutrition education at this site.

25. During the past 6 months, about how many total hours of training on nutrition topics and/or nutrition education skills were provided to staff at your site who provide nutrition education? If there was one **4-hour** training course and one **2-hour** training course, then count 6 hours regardless of the number of staff who attended.

26. I'm going to read a list of different types of nutrition education methods. For each one, tell me if staff at this site who provide nutrition education have received training on this method in the past 6 months. Include training that was provided by your own agency, State agency, and any outside training. **[INTERVIEWER: READ LIST AND CHECK ALL THAT APPLY.]**

- Group facilitation skills (e.g., facilitated group discussion)
- Motivational interviewing
- Communication skills
- Goal setting
- Emotion-based counseling
- Value Enhanced Nutrition Assessment (VENA) skills
- Participant or learner-centered education skills
- Other (describe): _____

27. Now I'm going to read a list of different types of nutrition and health topics. For each one, tell me if staff at this site who provide nutrition education have received training on this topic in the past 6 months. Include training that was provided by your own agency, State agency, and any outside training. **[INTERVIEWER: READ LIST AND CHECK ALL THAT APPLY.]**

- Breastfeeding
- Prenatal nutrition
- Infant nutrition
- Child nutrition
- Weight and growth issues (prenatal weight gain, infant/child growth and weight gain)
- Choosing lower fat milk
- Fruit and vegetables
- Physical activity
- Whole grains
- None of the above
- Other (describe): _____

F. Referrals

I'd like to know about referrals that your site provides to participants.

28. Are participants referred to other programs or organizations for help with achieving nutrition education, physical activity, or other health goals?

- Yes
- No → **GO TO Question 31**

To which programs/organizations do you routinely refer WIC participants?

- a. _____
- b. _____
- c. _____
- d. _____

29. Describe your referral process. For example, are referrals made by providing information to the participant, by phone or email to the referral organization, etc.?

30. What, if any, follow-up is done with the participant or with the referral organization after the referral is made?

G. Nutrition Education Support and Challenges

My last questions ask for your opinion about challenges in providing nutrition education and factors that support implementation of effective nutrition education.

31. What are the biggest challenges you experience in providing nutrition education?

32. a) What factors support your site in implementing effective nutrition education?

b) Describe how those factors support your site.

33. Is there anything else you would like me to know about how your site provides nutrition education?

34. Before we wrap up, can you please describe any special nutrition education activities or approaches used at your site?

That's all of the questions that I have today. I will talk with you again in about 6 months to get updates for some of these questions. Thank you for taking the time for this interview.

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APPENDIX A.2
PROCESS EVALUATION:
POC INTERVIEW GUIDES—INTERIM AND FINAL

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WIC Nutrition Education Study
POC Site Staff Interview Guide—Interim and Final Interviews

Site ID: _____ Date: _____

Staff interviewed (names/titles): _____

Interviewer name: _____

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-0599. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Script

Hi. My name is _____. I work for Altarum Institute, and we are a part of the study team for the WIC Nutrition Education Study or NEST. Thank you for taking the time for this short interview. It is really important for us to hear about any changes in site schedule, staffing, or ways you provide nutrition education at your site since we talked with you 6 months ago. Our call today will last no more than 15 minutes.

Do you have any questions before we begin? If not, let's get started!

Note to interviewer: Use a copy of the site's responses to the Baseline Interview to reference during the interview to facilitate obtaining updates to changes in site schedule, staffing, etc.

A. Background Information

1. Have there been any changes to the site schedule (days and times of operation)?

- No
- Yes

a) [If yes] Describe the changes: _____

2. Have there been any changes in the number of full-time and part-time staff who provide nutrition education at certification and other types of visits?

- No
- Yes

a) [If yes] Describe the changes: _____

[INTERVIEWER: MAKE CHANGES IN INFORMATION FROM PRIOR INTERVIEW.]

Job Classification/Type of Staff	Number of Full-Time Staff (work on WIC activities 32 or more hours per week)	Number of Part-Time Staff (work on WIC activities 21–31 hours per week)	Number of Part-Time Staff (work on WIC activities 20 or fewer hours per week)
WIC director/coordinator			
Site/clinic supervisor			
Registered dietitian (RD)			
Degreed nutritionist, not RD			
Trained nutrition paraprofessional (e.g., nutrition assistant, nutrition aid, competent paraprofessional authority, diet technician, social services technician)			
Nurse			
Nutrition education coordinator			
Administrative/clerical/support staff			
Lactation consultant/WIC-designated breastfeeding expert			
Breastfeeding coordinator			
Breastfeeding peer counselor			
Other: _____			
Total			

B. Nutrition Education Modes

3. Have there been any changes in the methods, for example, one-on-one, group, or technology based, that your site uses to provide nutrition education at certification and other types of visits?

- No
- Yes

a) [If yes] Describe the changes: _____

4. **[ASK ONLY IF SITE PROVIDES GROUP EDUCATION]** How many months of future group session topics do you have planned? _____

5. **[ASK ONLY IF SITE PROVIDES GROUP EDUCATION]** Which of the following topics do you plan to cover in group education for the upcoming months? **[INTERVIEWER: READ LIST AND CHECK ALL THAT APPLY.]**

- Breastfeeding
- Child feeding practices
- Cooking/meal preparation
- Dental health
- Fruit and vegetables
- Healthy snacks
- Healthy weight for child
- Healthy weight for mother
- Infant feeding practices
- Infant/child growth and development
- Introduction of solid foods
- Inappropriate/sometimes foods (e.g., high-fat foods, fast foods)
- Iron/anemia
- Milk (lower fat choices/consumption)
- Parenting
- Physical activity
- Picky eaters
- Portion sizes
- Prenatal nutrition/diet
- Shopping for and preparing healthy foods
- Sugar-sweetened beverages
- Water consumption
- Whole grains
- Weaning from the bottle
- Other (describe): _____

C. Staff Training

6. During the past 6 months, about how many hours of training on nutrition topics and/or nutrition education skills were provided to staff at your site who provide nutrition education? If there was one **4-hour** training course and one **2-hour** training course, then count 6 hours regardless of number of staff who attended.

7. I'm going to read a list of different types of nutrition education methods. For each one, tell me if staff at this site who provide nutrition education have received training on this method in the past 6 months. Include training that was provided by your own agency, State agency, and any outside training. **[INTERVIEWER: READ LIST OF TOPICS.]**

- Group facilitation skills (e.g., facilitated group discussion)
- Motivational interviewing
- Communication skills
- Goal setting
- Emotion-based counseling
- Value Enhanced Nutrition Assessment (VENA) skills
- Participant or learner-centered education skills
- Other (describe): _____

8. Now I'm going to read a list of different types of nutrition and health topics. For each one, tell me if staff at this site who provide nutrition education have received training on this topic in the past 6 months. Include training that was provided by your own agency, State agency, and any outside training. **[INTERVIEWER: READ LIST OF TOPICS.]**

- Breastfeeding
- Prenatal nutrition
- Infant nutrition
- Child nutrition
- Weight and growth issues (prenatal weight gain, infant/child growth and weight gain)
- Choosing lower fat milk
- Fruit and vegetables
- Physical activity
- Whole grains
- None of the above
- Other (describe): _____

D. Other Changes

9. Have any other changes related to staffing, schedules, or methods of nutrition education occurred over the past 6 months?

- No
- Yes

a) [If yes] Describe the changes: _____

That's all of the questions that I have today. Thank you for taking the time for this interview. (If interim interview, add: I will talk with you again in about 6 months.)

APPENDIX B
PROCESS EVALUATION:
ONSITE OBSERVATION FORMS—INDIVIDUAL SESSIONS,
GROUP SESSIONS, AND SITE FEATURES

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APPENDIX B.1
PROCESS EVALUATION:
ONSITE OBSERVATION FORMS—INDIVIDUAL SESSIONS

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Individual Nutrition Education Observation Form

Site number: _____ Observer initials: _____ Date: ___ ___/___ ___/___ ___ AM/PM
[Month] [Day] [Year] [Circle]

Nutrition educator study number: _____

1. Start time with nutrition educator ___:___ End time with nutrition educator ___:___

Total minutes with nutrition educator ___ Total minutes on nutrition education ___

2. Participant category(s) Pregnant Postpartum woman/infant Parent/child
[# Infants ___] [# Children ___]

3. Participant risk category Not at high risk High risk Don't know

4. Type of session Certification Mid-certification Secondary education follow-up
 High-risk follow-up Don't know
 Other: (Specify) _____

5. Participant language spoken English Spanish Other _____

6. Interpreter used? Yes No; not needed No; but needed

Type of interpreter used? Interpreter available at site
 Bilingual WIC staff member
 Language line/phone interpreter service
 Family member or friend < 18 years old
 Family member or friend ≥ under 18 years old
 Other: _____

7. Nutrition education topic(s) discussed

- | | | |
|---|---|--|
| <input type="radio"/> Breastfeeding | <input type="radio"/> Introduction of solid foods | <input type="radio"/> Shopping for and preparing healthy foods |
| <input type="radio"/> Calcium intake | <input type="radio"/> Iron/anemia | <input type="radio"/> Sugar-sweetened beverages |
| <input type="radio"/> Child feeding practices | <input type="radio"/> Medical issues (e.g., blood pressure, gestational diabetes) | <input type="radio"/> Vitamin and mineral supplements |
| <input type="radio"/> Fruit and vegetables | <input type="radio"/> Milk choices/consumption | <input type="radio"/> Water consumption |
| <input type="radio"/> Having enough to eat | <input type="radio"/> Physical activity | <input type="radio"/> Weaning from the bottle |
| <input type="radio"/> Healthy meals | <input type="radio"/> Picky eaters | <input type="radio"/> Whole grains |
| <input type="radio"/> Healthy snacking | <input type="radio"/> Prenatal nutrition/diet | |
| <input type="radio"/> Healthy weight for child | <input type="radio"/> Protein intake | |
| <input type="radio"/> Healthy weight for mother | | |
| <input type="radio"/> Infant feeding practices | | |
| <input type="radio"/> Other _____ | | |

8. Written nutrition education materials provided (e.g., brochure)? Yes No

9. Comments on written nutrition education materials provided (e.g., photocopy or printed, in appropriate language, up to date). Obtain copies of materials.

10. Other reinforcers used

- | | | |
|--|--|---|
| <input type="radio"/> Bulletin board/poster | <input type="radio"/> Educational props (e.g., breastfeeding dolls, physical activity items) | <input type="radio"/> Food models |
| <input type="radio"/> Circle charts | | <input type="radio"/> Self-study sheet/module |
| <input type="radio"/> Computer, tablet, or kiosk | | <input type="radio"/> Video/DVD |
| <input type="radio"/> Display table | | |
| <input type="radio"/> Other: _____ | | |

11. Referral provided? No; not needed No; but needed Yes

If yes, describe the type of referral: _____

Individual Nutrition Education Characteristics

For each feature listed, check the description that *most closely* describes the nutrition education session observed. Check one item for each row; check NA if the feature is not applicable.

12. Approach to Education Topics				NA
Little or no nutrition education provided <input type="radio"/>	Several nutrition topics addressed with no prioritization of topic areas <input type="radio"/>	Small number of nutrition topics addressed participant's interests and priorities <input type="radio"/>		<input type="radio"/>
13. Focus of Nutrition Education Topics				NA
Nutrition educator did not ask about needs and interests of participant <input type="radio"/>	Participant's needs and interests were not the focus of nutrition education discussion <input type="radio"/>	Participant's needs and interests determined focus of nutrition education discussion <input type="radio"/>		<input type="radio"/>
14. Seating Arrangement				NA
Seating arrangement/ computer placement did not facilitate conversation (e.g., educator turned away from participant while entering data) <input type="radio"/>	Participant seated across desk or table without access to computer screen <input type="radio"/>	Seating arrangement/ computer placement allowed for direct eye contact and participant access to computer screen <input type="radio"/>		<input type="radio"/>
15. Talk Time Distribution (Estimated Time Participant Speaks During Appointment)				
Less than 20% of time <input type="radio"/>	Less than half (20–39%) <input type="radio"/>	About half (40–59%) <input type="radio"/>	More than half (60–79%) <input type="radio"/>	80% of time or more <input type="radio"/>
16. Goal Setting Strategy				NA
16a. Participant was not engaged in discussion about behavioral goals <input type="radio"/>	Behavioral goals primarily determined by nutrition educator based on assessment <input type="radio"/>	Behavioral goals primarily determined by participant <input type="radio"/>		<input type="radio"/>
16b. Participant was not engaged in discussion about ideas and strategies to achieve behavioral goals <input type="radio"/>	Nutrition educator provided ideas and strategies to change behavior and achieve goals <input type="radio"/>	Nutrition educator asked participant for ideas and strategies to change behavior and achieve goals <input type="radio"/>		<input type="radio"/>
16c. Goal(s) set at previous visits not mentioned <input type="radio"/>	Nutrition educator stated goal(s) set previously and asked if participant met goal(s) <input type="radio"/>	Nutrition educator asked participant about progress or challenges in meeting goal(s) set previously <input type="radio"/>		<input type="radio"/>
17. Information Gathering				NA
Used few or no open-ended questions <input type="radio"/>	Used open-ended questions frequently <input type="radio"/>			<input type="radio"/>
18. Participant Autonomy (Explore-Offer-Explore)				NA
Did not ask permission before sharing unsolicited information or strategies <input type="radio"/>	Asked permission before sharing unsolicited information or strategies <input type="radio"/>			<input type="radio"/>
19. Affirming Positive Behaviors				NA
Provided no affirmations <input type="radio"/>	Provided affirmations not tied to specific participant strengths, behaviors or efforts <input type="radio"/>	Provided affirmations related to specific participant strengths, behaviors, and efforts <input type="radio"/>		<input type="radio"/>

20. Sharing Nutrition Education Materials			NA
Did not offer nutrition education materials <input type="radio"/>	Did not incorporate materials offered into education discussion <input type="radio"/>	Incorporated materials into education discussion <input type="radio"/>	<input type="radio"/>

21. Follow-Up on Use of Reinforcers			NA
Did not mention reinforcers provided at previous visits <input type="radio"/>	Asked if participant recalled reinforcers from previous visits <input type="radio"/>	Asked participant about if/how they used reinforcers from previous visits <input type="radio"/>	<input type="radio"/>

22. Comments about Process and Style of Nutrition Education Provided

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APPENDIX B.2
PROCESS EVALUATION:
ONSITE OBSERVATION FORMS—GROUP SESSIONS

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Group Nutrition Education Observation Form

Site number: _____ Observer initials: _____ Date: ____/____/____ AM/PM
[Month] [Day] [Year] [Circle]

Nutrition educator study number: _____

1. Group start time __:____ Group end time __:____ Total time (minutes) _____

1a. Time watching video or in a didactic presentation (minutes) _____ [] NA

1b. Time in group discussion or interactive exercises (minutes) _____ [] NA

2. Participant categories targeted Pregnant Postpartum woman/infant
 Parent/child Not category specific

3. No. of participants scheduled _____ Not applicable (walk-in)
No. of participants present _____

4. Participant language spoken English Spanish Other _____

5. Session presented in appropriate language? Yes No

6. Interpreter used? Yes No; not needed No; but needed

7. Topic(s) addressed

- | | | |
|---|---|--|
| <input type="radio"/> Breastfeeding | <input type="radio"/> Introduction of solid foods | <input type="radio"/> Shopping for and preparing healthy foods |
| <input type="radio"/> Calcium intake | <input type="radio"/> Iron/anemia | <input type="radio"/> Sugar-sweetened beverages |
| <input type="radio"/> Child feeding practices | <input type="radio"/> Medical issues (e.g., blood pressure, gestational diabetes) | <input type="radio"/> Vitamin and mineral supplements |
| <input type="radio"/> Fruit and vegetables | <input type="radio"/> Milk choices/consumption | <input type="radio"/> Water consumption |
| <input type="radio"/> Having enough to eat | <input type="radio"/> Physical activity | <input type="radio"/> Weaning from the bottle |
| <input type="radio"/> Healthy meals | <input type="radio"/> Picky eaters | <input type="radio"/> Whole grains |
| <input type="radio"/> Healthy snacking | <input type="radio"/> Prenatal nutrition/diet | |
| <input type="radio"/> Healthy weight for child | <input type="radio"/> Protein intake | |
| <input type="radio"/> Healthy weight for mother | | |
| <input type="radio"/> Infant feeding practices | | |
| <input type="radio"/> Other _____ | | |

8. Focus of group nutrition education: Child focused Adult/parent focused

9. Group elements included

- | | | |
|---|---|---|
| <input type="radio"/> Discussion between pairs/partners | <input type="radio"/> Food sampling/ demonstrations | <input type="radio"/> Physical activity |
| <input type="radio"/> Flip charts | <input type="radio"/> Hands on activity or game | <input type="radio"/> PowerPoint presentation |
| | <input type="radio"/> Icebreakers | <input type="radio"/> Video/DVD |
| <input type="radio"/> Other: _____ | | |

10. Reinforcers used

- | | | |
|--|---|---------------------------------------|
| <input type="radio"/> Circle charts | <input type="radio"/> Food models | <input type="radio"/> Posters |
| <input type="radio"/> Cooking demonstration | <input type="radio"/> Food tasting | <input type="radio"/> Quizzes/surveys |
| <input type="radio"/> Display table | <input type="radio"/> Nutrition education pamphlets or handouts | |
| <input type="radio"/> Educational props (e.g., breastfeeding dolls, physical activity items) | | |
| <input type="radio"/> Other: _____ | | |

Group Nutrition Education Characteristics

For each feature listed, check the description that *most closely* matches the characteristics of the group nutrition education session observed. Check one item for each row; check NA if the feature is not applicable.

11. Greeting				NA
Facilitator did not introduce herself or explain what will happen during session <input type="radio"/>	Facilitator welcomed group and mentioned topic of session <input type="radio"/>	Facilitator greeted attendees warmly, introduced herself by name, and explained what will happen during session <input type="radio"/>		<input type="radio"/>
12. Seating Arrangement				NA
Inadequate seating for attendees <input type="radio"/>	Adequate seating with chairs arranged in rows (classroom style) <input type="radio"/>	Adequate seating with chairs arranged so that attendees can look at one another <input type="radio"/>		<input type="radio"/>
13. Occupying Children				NA
No activities/resources to occupy children during group sessions <input type="radio"/>	Limited activities/resources to occupy children during group sessions <input type="radio"/>	Adequate activities/ resources to occupy children during group sessions <input type="radio"/>		<input type="radio"/>
14. Attendee Engagement (Estimated Time Participants Speak During Session)				
Less than 20% of time <input type="radio"/>	Less than half (20–39%) <input type="radio"/>	About half (40–59%) <input type="radio"/>	More than half (60–79%) <input type="radio"/>	80% of time or more <input type="radio"/>
15. Facilitation Style				NA
15a. Facilitator presented information or played video with minimal discussion or group interaction <input type="radio"/>	Facilitator presented information with some opportunity for discussion or involvement from attendees <input type="radio"/>	Facilitator engaged group with adult learner techniques (e.g., partner sharing, small group discussion, learning activities, games, guided discussion, or storytelling) <input type="radio"/>		<input type="radio"/>
15b. Used few or no open-ended questions to elicit participation, ideas and strategies from attendees <input type="radio"/>	Used open-ended questions frequently to elicit participation, ideas and strategies from attendees <input type="radio"/>			<input type="radio"/>
16. Affirming Positive Behaviors				NA
Provided no affirmations <input type="radio"/>	Provided affirmations not tied to specific participant strengths, behaviors or efforts <input type="radio"/>	Provided affirmations related to specific participant strengths, behaviors, and efforts <input type="radio"/>		<input type="radio"/>
17. Sharing Nutrition Materials				NA
Did not offer nutrition education materials <input type="radio"/>	Did not incorporate materials offered into session <input type="radio"/>	Incorporated materials into session <input type="radio"/>		<input type="radio"/>
18. Comments about Process and Style of Nutrition Education Provided				

APPENDIX B.3
PROCESS EVALUATION:
ONSITE OBSERVATION FORMS—SITE FEATURES

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5. Nutrition reinforcers for participants to view or take home	Yes	No
Display rack with nutrition-related information (newsletters, referrals, etc.)		
Display tables with nutrition-related information		
Newsletters or games/activities		
Nutrition education DVDs/videos played in waiting area or space set aside for viewing		
Nutrition posters		
Nutrition-related bulletin boards		
Other (describe)		

6. Use of stationary computer system/kiosk/tablet

Is there a computer/ tablet/kiosk onsite for participants to use? Yes No

How is it used? Nutrition education contact Nutrition education reinforce Both

Observed frequency of use Often Sometimes Seldom Never

Describe how the computer/kiosk/tablet is integrated into nutrition education at this site. [Include items such as how staff members discuss the technology with participants, placement in clinic, signage]

Provide any additional comments necessary to describe overall style and quality of nutrition education provided at this site. Comments may address:

Counseling style (e.g., participant centered, directive, guiding)

Prominent counseling skills used

Overall participant engagement

Summary of common strengths and challenges of nutrition educators

Overall comments about process of nutrition education at this site

7. Overall comments about individual nutrition education provided

8. Overall comments about group education provided

9. Comments about ways nutrition reinforcers are integrated into nutrition education

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APPENDIX C
PROCESS EVALUATION: NUTRITION EDUCATOR SURVEY

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WIC Nutrition Education Study Nutrition Educator Survey

Office of Management and Budget (OMB) No. 0584-0599. Expiration Date: 10/31/2017

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-0599. The time required to complete this information collection is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Thank you for completing this survey for the WIC Nutrition Education Study (NEST). This survey is being conducted for the USDA, Food and Nutrition Service (FNS) to collect information for a study to evaluate the impact of nutrition education on the eating and physical activity behaviors of participants. Your responses will provide important information about how you conduct nutrition education and about your experience working with WIC participants.

Responses for individual sites or respondents will not be identified in any study reports or publications. Although survey responses will be identifiable to FNS, the responses will not be used for compliance or monitoring activities.

The information you provide will help strengthen and enhance WIC nutrition education efforts and highlight the efforts across the country to promote healthy eating and physical activity practices among WIC participants.

Most questions include a “button” or a box to select the response. Some questions require that you enter numbers or text responses. We recommend that you review the questions before beginning the survey so that you can obtain any information needed to respond. [\[Click here\]](#) to download and print a copy of the survey. The survey will take about 20 minutes to complete.

Nutrition Education Survey Help Desk

If you have any problems completing the survey, please contact:

**Karen Deehy
1-202-579-8448**

karen.deehy@altarum.org

Validation: Must be numeric 4 digit code

Survey Response Number*

Nutrition Education Contacts

For all questions, nutrition education includes breastfeeding education.

1. How often do you use the following methods to provide nutrition education?

(Select one response for each method.)

	Never	Rarely (<10%)	Occasionally (11–39%)	Sometimes (40–59%)	Often (60–89%)	Almost Always (≥90%)
One-on-one counseling: Face to face (in WIC site)	()	()	()	()	()	()
One-on-one counseling: Telephone	()	()	()	()	()	()
One-on-one counseling: Video conferencing	()	()	()	()	()	()
Group education sessions	()	()	()	()	()	()
Other nutrition education activities (e.g., monthly topic, worksheets, videos, self-study modules)	()	()	()	()	()	()

2. How often do you assist participants with technology-based nutrition education methods?

Assistance could take the form of explaining the process, helping participants complete the education, or following up on their experience using these methods.

(Select one response for each method.)

	Never	Rarely (<10%)	Occasionally (11–39%)	Sometimes (40–59%)	Often (60–89%)	Almost Always (≥ 90%)
Technology-based nutrition education used by participants at site (e.g., computer, kiosk, tablet)	()	()	()	()	()	()
Technology-based nutrition education used by participants offsite via Internet (e.g., web-based nutrition education modules)	()	()	()	()	()	()

Nutrition Education Contacts

For all questions, nutrition education includes breastfeeding education.

Logic: Show/hide trigger exists.

3. How do you provide nutrition education to participants who do not speak English?*

(Select all that apply.)

- I speak the same language as most of our non-English speaking participants.
- I ask a bilingual WIC staff member to interpret or translate.
- I use an interpreter or translator available at the site.
- I use a language line/phone interpreter service.
- I use a translation program on the computer.
- Participants bring family member or friend to interpret.
- Not applicable—all participants that I work with speak English.
- Other (describe): _____

Logic: Hidden unless: Question “3. How do you provide nutrition education to participants who do not speak English?” #4 is one of the following answers (“I ask a bilingual WIC staff member to interpret or translate.”, “I use an interpreter or translator available at the site.”, “I use a language line/phone interpreter service.”, “I use a translation program on the computer.”, “Participants bring family member or friend to interpret.”)

4. How confident are you in your ability to provide nutrition education to participants whose primary language is different from yours?

- Very confident
 - Somewhat confident
 - Not at all confident
-

Training

The next three questions ask about training you have received from the WIC Program during the past 12 months.

5. During the past 12 months, how did you receive training on nutrition topics and nutrition education skills?*

(Select all that apply.)

- National/State/regional conferences or workshops
 - Training sessions/courses at a State training center
 - In-person training sessions (e.g., conferences, workshops) provided by your local agency
 - In-person training sessions (e.g., conferences, workshops) provided by other local agencies or programs
 - State or local agency webinars
 - Online training modules or courses
 - Training provided during local agency or site staff meetings
 - Individual staff mentoring/coaching
 - I did not receive any training
 - Other (describe): _____
-

Page entry logic: This page will show when: Question “5. During the past 12 months, how did you receive training on nutrition topics and nutrition education skills?” #6 is not one of the following answers (“I did not receive any training”)

Training

Page exit logic: Page Logic **IF:** ((Question “One-on-one counseling: Face to face (in WIC site)” is one of the following answers (“Never”) AND Question “One-on-one counseling: Telephone” is one of the following answers (“Never”)) AND Question “One-on-one counseling: Video conferencing” is one of the following answers (“Never”)) **THEN:** Jump to [page 20 -](#)

6. In the first column, select “Yes” or “No” to indicate if you received training on the topic during the past 12 months.

In the second column, for each topic that you select “Yes,” estimate the number of hours of training on that topic you received during the past 12 months.

	Included in Training during Past 12 Months?		If Yes Estimated Number of Hours (e.g. 10)
	Yes	No	
Breastfeeding	()	()	___
Prenatal nutrition	()	()	___
Infant nutrition	()	()	___
Child nutrition	()	()	___
Value Enhanced Nutrition Assessment [VENA] skills	()	()	___
Participant or learner-centered education	()	()	___
Motivational interviewing	()	()	___
Emotion-based counseling	()	()	___
Group facilitation skills (e.g., facilitated group discussion)	()	()	___
Weight and growth issues (prenatal weight gain, infant/child growth, and weight gain)	()	()	___
Other nutrition topics	()	()	___

7. Which, if any, of the topic(s) you've received training on over the past 12 months have been most useful to you in providing nutrition education?

One-on-One Counseling

Validation: Max. answers = 3 (if answered)

8. How are discussion topics determined for most of your one-on-one counseling sessions?

(Select **up to three** methods and rank them by selecting “1” for the method used most often, “2” for the method used next most often, and “3” for the method used next most often.)

- _____ I choose the most appropriate topic(s).
- _____ The participant chooses the topic(s) she wants to talk about.
- _____ The participant and I choose the topic(s) together.
- _____ Other

8a. If you selected OTHER in question 8, can you please provide a brief description of the method you use to determine discussion topics:

One-on-One Counseling

Validation: Max. answers = 7 (*if answered*)

9a. Which topics do you discuss most often with pregnant women?

(Select **up to seven** topics)

- Breastfeeding
 - Calcium intake
 - Cooking/meal preparation
 - Dental care
 - Diabetes
 - Folic acid
 - Food safety/Foods to avoid
 - Fruit and vegetables
 - Having enough to eat
 - Healthy snacking
 - High blood pressure/hypertension
 - Infant feeding
 - Iron/anemia
 - Milk (lower fat choices/consumption)
 - Nausea, vomiting, or constipation
 - Physical activity
 - Pica (eating non-food items)
 - Postpartum depression/self-care
 - Postpartum weight loss
 - Prenatal nutrition/diet
 - Preparing for a healthy pregnancy
 - Protein intake
 - Shopping for and preparing healthy foods
 - Sugar-sweetened beverages
 - Vitamin and mineral supplements
 - Water consumption
 - Weight gain during pregnancy
 - Whole grains
 - Other (please describe): _____
-

One-on-One Counseling

Validation: Max. answers = 7 (if answered)

9b. Which topics do you discuss most often with breastfeeding women?

(Select up to seven topics)

- Breastfeeding
 - Calcium intake
 - Cooking/meal preparation
 - Dental care
 - Diabetes
 - Folic acid
 - Food safety/Foods to avoid
 - Fruit and vegetables
 - Having enough to eat
 - Healthy snacking
 - High blood pressure/hypertension
 - Infant feeding
 - Iron/anemia
 - Milk (lower fat choices/consumption)
 - Nausea, vomiting, or constipation
 - Physical activity
 - Pica (eating non-food items)
 - Postpartum depression/self-care
 - Postpartum weight loss
 - Preparing for a healthy pregnancy
 - Protein intake
 - Shopping for and preparing healthy foods
 - Sugar-sweetened beverages
 - Vitamin and mineral supplements
 - Water consumption
 - Whole grains
 - Other (please describe): _____
-

One-on-One Counseling

Validation: Max. answers = 7 (*if answered*)

9c. Which topics do you discuss most often with postpartum women who are not breastfeeding?

(Select **up to seven** topics)

- Breastfeeding
 - Calcium intake
 - Cooking/meal preparation
 - Dental care
 - Diabetes
 - Folic acid
 - Food safety/Foods to avoid
 - Fruit and vegetables
 - Having enough to eat
 - Healthy snacking
 - High blood pressure/hypertension
 - Infant feeding
 - Iron/anemia
 - Milk (lower fat choices/consumption)
 - Nausea, vomiting, or constipation
 - Physical activity
 - Pica (eating non-food items)
 - Postpartum depression/self-care
 - Postpartum weight loss
 - Preparing for a healthy pregnancy
 - Protein intake
 - Shopping for and preparing healthy foods
 - Sugar-sweetened beverages
 - Vitamin and mineral supplements
 - Water consumption
 - Whole grains
 - Other (please describe): _____
-

One-on-One Counseling

Validation: Max. answers = 7 (*if answered*)

10. Which topics do you discuss most often with parents/caregivers of infants?

(Select **up to seven** topics.)

- Breastfeeding
 - Colic
 - Constipation or vomiting
 - Food intolerances/allergies
 - Formula preparation/feeding
 - Infant feeding practices
 - Infant growth and development
 - Introduction of cow's milk
 - Introduction of solid foods
 - Inappropriate foods (e.g., high-fat foods, fast foods, honey)
 - Iron/anemia
 - Overfeeding
 - Parenting
 - Physical activity
 - Propping the bottle (leaving infant unattended with bottle)
 - Sugar-sweetened beverages
 - Water consumption
 - Weaning from the bottle
 - Other (describe): _____
-

One-on-One Counseling

Validation: Max. answers = 7 (*if answered*)

11. Which topics do you at the site discuss most often with parents/caregivers of children?

(Select **up to seven** topics.)

- Child growth and development
- Child feeding practices
- Constipation, diarrhea, or vomiting
- Cooking/meal preparation
- Dental health
- Family meals
- Fruit and vegetables
- Healthy snacks
- Healthy weight for child
- Inappropriate/sometimes foods (e.g., fast foods, high-fat foods)
- Iron/anemia
- Milk (lower fat choices/consumption)
- Parenting
- Physical activity
- Pica (eating non-food items)
- Picky eaters
- Portion sizes
- Screen time
- Shopping for and preparing healthy foods
- Sugar-sweetened beverages
- Water consumption
- Weaning from the bottle
- Whole grains
- Other (describe): _____

One-on-One Counseling

Page exit logic: Skip one on one counseling questions.**IF:** Question “12. During your one-on-one counseling sessions, how often are participant behavioral goals (e.g., nutrition or physical activity) set?” #16 is one of the following answers (“Goal setting is **not** part of one-on-one counseling sessions”, “Rarely”) **THEN:** Jump to [page 20 -](#)

12. During your one-on-one counseling sessions, how often are participant behavioral goals (e.g., nutrition or physical activity) set?*

- Goal setting is **not** part of one-on-one counseling sessions
- Rarely
- Occasionally
- Sometimes
- Often
- Almost always

Validation: Max. answers = 3 (*if answered*)

13. How are participant goals selected for most of your one-on-one counseling sessions?

(Select **up to three** responses. Select “1” for the process used most often, “2” for the process used the next most often, and “3” for the process used next most often.)

- _____ The participant usually identifies the goal(s).
- _____ I usually suggest the goal(s).
- _____ The participant and I usually select the goal(s) together.
- _____ Other

13a. If you selected OTHER in question 13, can you please provide a brief description of how participant goals are selected:

14. How much input do participants have in setting their goal(s)?

- A little
- Some
- A lot

Validation: Max. answers = 3 (if answered)

15. In your one-on-one counseling sessions with women participants, what three goals are set most often?

(Select “1” for the goal set most often, “2” for the goal set next most often, and “3” for the goal set next most often.)

- _____ Achieving or maintaining healthy weight
- _____ Breastfeeding initiation or duration
- _____ Changing beverage intake (e.g., more water, less sugar-sweetened beverages)
- _____ Eating less fast food
- _____ Having family meals
- _____ Increasing fruit and vegetable intake
- _____ Increasing physical activity
- _____ Increasing whole grain intake
- _____ Switching from whole milk to lower fat milk
- _____ Other

15a. If you selected OTHER in question 15, can you please provide a brief description of other goal(s) you set with women participants:

One-on-One Counseling

Validation: Max. answers = 3 (if answered)

16. In your one-on-one counseling sessions with parents/caregivers of infants, what three goals are set most often?

(Select “1” for the goal set most often, “2” for the goal set next most often, and “3” for the goal set next most often.)

- _____ Achieving or maintaining healthy growth/weight
- _____ Breastfeeding duration
- _____ Feeding appropriate amount of formula
- _____ Introducing solid foods
- _____ Increasing physical activity
- _____ Transitioning to table foods
- _____ Weaning from the bottle
- _____ Other

16a. If you selected OTHER in question 16, can you please provide a brief description of other goal(s) you set with parents/caregivers of infants:

One-on-One Counseling

Validation: Max. answers = 3 (if answered)

17. In your one-on-one counseling sessions with parents/caregivers of children, what three goals are set most often?

(Select “1” for the goal set most often, “2” for the goal set next most often, and “3” for the goal set next most often.)

- _____ Achieving or maintaining healthy growth/weight
- _____ Changing beverage intake (e.g., more water, less sugar-sweetened beverages)
- _____ Choosing healthy snacks
- _____ Having family meals
- _____ Increasing fruit and vegetable intake
- _____ Increasing physical activity
- _____ Increasing whole grain intake
- _____ Switching from whole milk to lower fat milk
- _____ Other

17a. If you selected OTHER in question 17, can you please provide a brief description of other goal(s) you set with parents/caregivers of children:

One-on-One Counseling

Validation: Max. answers = 3 (if answered)

18. In your opinion, which WIC-related factors present the greatest challenge to helping participants achieve their goals?

(Select **up to three** factors - “1” for the most significant factor, “2” for the next most significant factor, and “3” for the next most significant factor.)

_____ Participants do not usually meet with the same WIC staff member at each visit for consistent follow-up on goals.

_____ Goals are usually not discussed or reinforced at subsequent WIC visits.

_____ Time limits on WIC appointments make effective goal-setting or follow-up difficult.

_____ WIC staff members lack the knowledge or resources to help participants achieve their goals.

_____ The time between WIC appointments is too long for effective follow-up on goals.

_____ There are no WIC-related factors that make it difficult to help participants achieve their goals.

_____ Other

18a. If you selected OTHER in question 18, can you please provide a brief description of the other WIC related factor(s) that present the greatest challenge to helping participants achieve their goals:

One-on-One Counseling

Validation: Max. answers = 3 (if answered)

19. In your opinion, what societal or environmental factors make it difficult for participants to achieve their goals?

(Select up to three factors - “1” for the most significant factor, “2” for the next most significant factor, and “3” for the next most significant factor.)

_____ Financial constraints make it difficult for participants to achieve goals (e.g., cannot afford to buy healthy foods).

_____ Participants do not have access to nonfinancial resources needed to achieve goals (e.g., stores that sell healthy foods or safe place for physical activity).

_____ Participants do not have support from their family/friends/community for achieving their goals.

_____ Lack of services or programs to support goals make it difficult for participants to achieve behavior changes.

_____ Participants are not motivated to make nutrition- or health-related behavioral changes.

_____ Participants receive conflicting or mixed messages about nutrition from several sources (e.g., media, health care provider).

_____ Advertising for unhealthy foods makes it difficult for participants to follow through on goals.

_____ Other

19a. If you selected OTHER in question 19, can you please provide a brief description of the other societal or environmental factors that make it difficult for participants to achieve their goals:

One-on-One Counseling

Page exit logic: Skip group session questions **IF:** Question “Group education sessions” is one of the following answers (“Never”) **THEN:** Jump to [page 22 - \(untitled\)](#)

Validation: **Min. answers = 3** (*if answered*) Max. answers = 3 (*if answered*)

20. In your opinion, what are the three most important factors in helping participants set and achieve their goals?

(Select “1” for the most important factor, “2” for the next most important factor, and “3” for the next most important factor.)

- _____ Allowing participants to identify their own goals
- _____ Asking participants to verbalize their motivations for making the change
- _____ Breaking larger goals into small achievable steps
- _____ Expressing confidence in participants’ ability to make the change
- _____ Planning for challenges and obstacles that may arise
- _____ Planning rewards for achieving goals
- _____ Setting measurable goals with defined time frames
- _____ Follow-up on progress or challenges in achieving goals
- _____ Other

20a. If you selected OTHER in question 20, can you please provide a brief description of the other important factors in helping participants set and achieve their goals?

Group Education Sessions

21. How often do nutrition educators at the site use the following activities or resources during group education sessions?

(Select one response for each activity or resource.)

	Never	Rarely (<10%)	Occasionally (11–39%)	Sometimes (40–59%)	Often (60–89%)	Almost Always (≥ 90%)
Icebreakers/ warm-up activities	()	()	()	()	()	()
Discussions between pairs of WIC participants	()	()	()	()	()	()
Educational props (e.g., breastfeeding dolls, food containers)	()	()	()	()	()	()
Informational charts or displays	()	()	()	()	()	()
Food sampling/ demonstrations	()	()	()	()	()	()
Hands-on activity or game	()	()	()	()	()	()
Physical activity	()	()	()	()	()	()
PowerPoint presentation	()	()	()	()	()	()
Video/DVD	()	()	()	()	()	()

22. How are the topics for your group education sessions determined?

(Select all that apply.)

- Each day, week, month, or quarter has a specific topic.
- There are specific topics for participant categories (e.g., breastfeeding class, prenatal class, infant class).
- Participants select from a menu of topics when they schedule their appointments.
- Topics are determined based on participants' interest during each group session.
- Other (describe): _____

Group Education Sessions

23. Thinking about the group sessions you have facilitated over the past 6 months, which topics were discussed most often?

(Select all that apply.)

- Breastfeeding
 - Child feeding practices
 - Cooking/meal preparation
 - Dental health
 - Fruit and vegetables
 - Healthy snacks
 - Healthy weight for child
 - Healthy weight for mother
 - Infant feeding practices
 - Infant/child growth and development
 - Introduction of solid foods
 - Inappropriate/sometimes foods (e.g., high-fat foods, fast foods)
 - Iron/anemia
 - Milk/choosing lower fat milk
 - Parenting
 - Physical activity
 - Picky eaters
 - Portion sizes
 - Prenatal nutrition/diet
 - Shopping for and preparing healthy foods
 - Sugar-sweetened beverages
 - Water consumption
 - Whole grains
 - Weaning from the bottle
 - Other (describe): _____
-

Nutrition Education Resources

24. How much do you agree or disagree with each statement?

	Agree Strongly	Agree	Disagree	Disagree Strongly
I have the educational materials necessary to assist participants with their nutrition, breastfeeding, physical activity, and other goals.	()	()	()	()
I have the necessary referral information for other programs and resources that are available to assist participants in their nutrition, breastfeeding, physical activity, and other behavioral goals.	()	()	()	()

25. How often do you refer participants to other programs or resources for assistance with their nutrition, breastfeeding, physical activity, and other behavioral goals?

- Never
- Rarely
- Sometimes
- Often

About You

26. How much do you agree or disagree with each statement?

	Agree Strongly	Agree	Disagree	Disagree Strongly
I serve as a role model for healthy eating and physical activity behaviors for the WIC participants at my site.	()	()	()	()
My own eating and physical activity habits influence the way I talk to WIC participants.	()	()	()	()

Validation: **Min. answers = 1** (if answered)

27. Which job titles or roles do you have in the WIC program?

(Select all that apply.)

- WIC director/coordinator
- Site/clinic supervisor
- Registered dietitian (RD)
- Degreed nutritionist, not RD
- Trained nutrition paraprofessional (e.g., nutrition assistant, nutrition aid, competent paraprofessional authority, diet technician, social services technician)
- Nurse
- Nutrition educator coordinator
- Administrative/clerical/support staff
- Lactation consultant/WIC-designated breastfeeding expert
- Breastfeeding coordinator
- Breastfeeding peer counselor
- Other (describe): _____

About You

Logic: Show/hide trigger exists.

Piping: Piped Values From Question 38. (27. Which job titles or roles do you have in the WIC program?)

28. Which best describes your primary role in the WIC Program?

Action: JavaScript: Back to question 27

29. How many years have you worked for the WIC Program?

(Include your time at this WIC site and other WIC experience.)

- Less than 1 year
- 1–3 years
- 4–6 years
- 7–10 years
- 11–20 years
- More than 20 years

30. During your time working for WIC, how many years have you provided nutrition education as part of your job?

- Less than 1 year
- 1–3 years
- 4–6 years
- 7–10 years
- 11–20 years
- More than 20 years

About You

31. What is the highest degree you have completed?

- High school diploma or GED
- Associate's degree
- Bachelor's degree
- Graduate degree

32. Which, if any, of the following credentials do you have?

(Select all that apply.)

- Registered Dietitian (RD)
- Licensed Dietitian/Nutritionist (LD/LN)
- Dietetic Technician, Registered (DTR)
- Certified Medical Assistant (CMA)
- Registered Nurse (RN)
- Licensed Practical Nurse (LPN)
- International Board Certified Lactation Consultant (IBCLC)
- Certified Lactation Consultant/Certified Lactation Educator/Certified Lactation Educator & Counselor (CLC/CLE/CLEC)
- No credentials
- Other (describe): _____

33. What is your age?

- 24 or younger
- 25–34
- 35–44
- 45–54
- 55 or older

A Final Question

34. Please use the space below to share a brief description of any special nutrition education activities or approaches that you use with WIC participants.

**You have completed all of the survey questions!
Thank you for contributing to the WIC Nutrition Education Study.**

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APPENDIX D
PROCESS EVALUATION:
PARTICIPANT FOCUS GROUPS MODERATOR GUIDE

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WIC Nutrition Education Study Phase II Participant Focus Groups—English Moderator Guide

Date of group: _____
Site number: _____
Facilitated by: _____ **Recorder:** _____
Number of participants: _____
Start time: _____ **End time:** _____

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-0599. The time required to complete this information collection is estimated to average 90 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Introductory Script

Welcome! My name is_____, and I am here with my co-worker_____. Thank you for taking the time for this group discussion. It is really important to hear your thoughts about the information you get from WIC on health and healthy eating for you or your children. This is sometimes referred to as nutrition education. Our discussion today will last about an hour and a half.

We work for Altarum Institute, and our work focuses on helping improve the nutrition and health of children and families. We do not work for WIC, but we are talking with you today because the WIC program asked us to learn about WIC nutrition education from WIC participants.

We will be using first names only today. Everything you say during this session is private. After we conduct several of these group discussions, we will write a report for the Food and Nutrition Service of the USDA. The Food and Nutrition Service is the federal office that oversees the WIC Program. Your name will not appear anywhere in the report. Nothing said today will be attached to your name at any point. Nothing that you say will affect the services you receive through WIC or any other public assistance programs.

Your input in this discussion group will provide us with valuable feedback on WIC nutrition education. The purpose of today's group is to hear from you about your own experiences

and satisfaction with WIC nutrition education. We will use the information to identify ways for improving WIC nutrition education to better serve the WIC families in your community and those in other communities like yours.

Before we begin, I would like to review a few details about our discussion:

- There is no right or wrong answer to any question I ask. Remember that we don't work for WIC, so please feel free to say whatever you think. No one at the WIC office will know what you have said.
- Also, it is okay to have ideas or opinions that are different from each other. We want to hear everyone's point of view.
- It would be helpful to have only one person talking at a time. We are tape recording this session so that we don't miss anything important. If two people talk at once, we won't be able to hear your valuable input. We may remind you of this during the group discussion.
- We would like everyone to participate. But you each don't have to answer every question. You don't have to raise your hand either. If we really want to know what you think about a particular question, we may ask you what you think.
- We will be taking notes during this discussion and will tape record the session so that we can capture all of your good thoughts. At the completion of the study, the audiotapes will be destroyed.
- I want to emphasize what I said earlier: we will be using first names only. Everything you say is private. What you say today will not be attached to your name at any point. Nothing that you say will affect the WIC benefits you receive.

Our group discussion will last no more than 90 minutes. We will not be taking a formal break, but if you need to leave for a restroom break, the bathrooms are _____. And feel free to get snacks.

As a thank you for participating and to help you with any child care or transportation costs for this meeting, you will receive a \$50 gift card at the end of the discussion. Accepting this gift will not affect any WIC or other public benefits you get.

For this session, I will read a question and then listen to your responses. I also may ask follow-up questions to get some more detail.

Do you have any questions before we begin?

Let's get started! I can't wait to hear what you have to say.

[FACILITATOR'S NOTE: It is helpful to go in order of how the group is sitting. This will allow the note taker to label responses by person. Also for note taking you can then label person 1, person 2, person 3, etc. for writing comments.]

Introductions/Icebreaker

I'd like to start out by going around the room having each of you share some things about yourself.

1. First, tell us your first name and the first names and ages of any children you have; if you're pregnant, tell us when your baby is due.
2. Second, please tell us your favorite food.
3. And third, please tell us how long you or your children have been receiving WIC.

I'll start..my name is.. and I have...and my favorite food is...

Experience with Nutrition Education at WIC Visits

During our time together, we are going to talk about details of your WIC visits so we can learn what is most useful to you and how to make the visits better. Please help me understand how WIC visits work. Every WIC office is different, so it will help me to hear from you what happens at the WIC office you go to.

4. Can you please describe the steps of your last WIC visit? Start at the beginning when you arrived at the office.
5. What was most helpful to you during that WIC visit?
6. How did this visit compare to other WIC visits?

Now, let's talk about your most recent visit to WIC when either you or one of your children got recertified, which usually happens every 6 to 12 months, or, if you are new to WIC, when you first enrolled. This would be a visit where you had to bring proof of address or income to make sure you can be on WIC. Do you know which visit I'm talking about? [Make sure participants understand that you are referring to recertification/enrollment]

7. In this visit you would have talked one-on-one with a WIC staff person about health or healthy eating for you or your children. What did you talk about?

Probes:

- a. Who decided what to talk about?
- b. Who did most of the talking?
- c. Did you feel like you got a chance to talk about the things you wanted to talk about or not? Why do you say that?
- d. Do you feel like all your questions were answered or not? [If no, what did you want to talk about that you didn't get to talk about?]
- e. Overall, do you feel like the WIC staff person listened to you or not? Why do you say that?

8. Do you remember if you chose something to work on at that visit? For the rest of the discussion, we will call what you chose to work on a “goal.” [If yes, what goal was set?]

Probes:

- a. Who set the goal—you or the WIC staff person?
- b. How was the goal chosen?
- c. Did you talk about what would be hard about reaching the goal? [If yes, was the WIC staff person helpful in talking with you about any challenges and how to handle them?]
- d. Did you work on the goal after your WIC visit? [If yes, tell me about that.] [If no, why not?]

Now, let’s talk about your most recent visit with WIC when you were not signing up for WIC for yourself or a child. This would be a visit when you did not have to bring proof of your income or address. These visits are sometimes called nutrition education visits, nutrition classes, mid-certification visits, or check pick-up. What do they call those visits at your WIC office?

[Facilitator: use the visit term used by the participants]

9. Did this [*term used for visit*] include talking with a WIC staff person about healthy eating, physical activity, or breastfeeding? [If yes, describe what happened at that visit; for example, a one-on-one session with a WIC staff person, a group class with other people, or something else.]
 - a. What did you talk about?
 - b. How long did you spend talking about health or healthy eating?
 - c. Were you able to ask questions or talk about things you wanted to talk about? Why or why not?
10. If you had a goal, did a WIC staff person ask you at this visit how things were going in reaching your goal or if you wanted to set a different goal?
 - a. Did a WIC staff person ask about any challenges you were having in reaching your goal? [If yes, did she or he talk with you about how to handle these challenges?]
 - b. What are some examples of ways that WIC has helped you reach your goals?

Use of Reinforcers and Internet Education

Now let’s talk about written material like pamphlets or newsletters or other items that you got from WIC about health or healthy eating. *[Facilitator: show some examples of print material or items, e.g., measuring cups, obtained from the WIC site.]*

11. Have you looked at or used the items that you took home?
 - a. [If no] Why not?
 - b. [If yes] Which of these has been most useful to you? Why?
 - c. [If yes] How much time did you spend using these materials at home?
 - d. What other kinds of materials or items would you like to get from WIC to take home?

[For sites that have Internet nutrition education] I understand that your WIC office has an Internet tool called *[insert name used by site for the Internet system]*. This tool... *[describe tool.]*

12. Have any of you used the *[insert name used by site for the Internet system]*?
[If yes] Can you please tell me how it works?

Probes:

- a. How many times have you used it?
- b. Where did you use it?
- c. What topics did you learn about?
- d. How long did it take to finish the Internet lesson?
- e. Was the information helpful to you or not? Why do you say that?
- f. Would you use it again? Why or why not?

Changes Participants have Made

13. Now let's talk about changes you have made to try to be healthier. Think about the past 6 months. If you have been on WIC for less than 6 months, then think about the time since you've been on WIC. Have any of you made changes in how you eat or feed your children during this time?
 - a. [If yes] What changes have you made? [Probe if not mentioned: eating more fruit and vegetables, eating more whole grains, drinking lower fat milk]
14. Have any of you made changes in the past 6 months/since on WIC in how much exercise or physical activity you or your children get?
 - a. [If yes] Please tell me about the changes.
15. Has anyone made another healthy change they want to tell us about?

16. Thinking about the changes you have made, has anything that you've learned at WIC been helpful in making them?
 - a. [If yes] Please tell me what has been helpful.

Satisfaction and Recommendations for Improvements

For the last part of our time together, we want to hear your suggestions for improving WIC nutrition education. Now is your chance to help WIC be as good as it can be!

17. What ideas do you have for ways you would like to receive nutrition information from WIC?

Probe:

- a. For example, would you like group activities, food demonstrations, nutrition activities for children?
 - b. Would you like to get text messages with nutrition information?
 - c. Would you follow WIC on Facebook or Twitter?
 - d. [If the WIC site doesn't use Internet nutrition education] Would you like to use the Internet to get WIC nutrition education?
18. Now think about the one-on-one nutrition sessions you've had with WIC staff.
 - a. What do you like about these sessions?
 - b. What don't you like about these sessions?
 - c. How could WIC improve one-on-one sessions?
 19. [For sites that offer groups sessions] Now think about the group nutrition classes you've had at WIC.
 - a. What do you like about these sessions?
 - b. What don't you like about these sessions?
 - c. How could WIC improve the group sessions?
 20. Think about the information you get on nutrition and healthy eating at WIC. In general is the information new to you or not?
 - a. If information is not new, did you find it useful or not?
 - b. Do you feel like the information you get at WIC applies to you or not? Why or why not?
 21. If you have children, do they usually come with you to WIC?
 - a. If yes, does it make it hard or easy to listen to the information provided?

22. In addition to what we have already talked about, what activities or changes would you like WIC to consider for making the nutrition education you receive more useful and meaningful to you?
23. Do you have anything else you would like to share about the nutrition education you receive at WIC?

CLOSING

Thank you very much for participating in this discussion group today. We have learned a lot from your experiences and suggestions.

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APPENDIX E
PROCESS EVALUATION:
INTERVIEW GUIDE FOR INTERVIEWS WITH SPANISH-
SPEAKING PARTICIPANTS

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WIC Nutrition Education Study Guide for Phase II Participant Interviews—Spanish

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB number. The valid OMB control number for this information collection is 0584-0599. The time required to complete this information collection is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Introductory Script for Interview

Hello, my name is _____ and I'm calling to interview you about the WIC Program. It's really important to hear your thoughts about the information you get from WIC on health and healthy eating for you or your children. This is sometimes referred to as nutrition education. Our interview today will take about 45 minutes. Is this still a good time for us to do the interview? *[If yes]* Thank you for taking the time for the interview. *[If no, reschedule the interview].*

I am conducting this interview for the Altarum Institute, which is an organization that focuses on helping improve the nutrition and health of children and families. We do not work for the Worcester WIC Program, but we are talking with you today because the WIC program asked us to learn about WIC nutrition education from WIC participants.

Everything you say during this interview is private. After we conduct several of these interviews, we will write a report for the Food and Nutrition Service of the USDA. The Food and Nutrition Service is the federal office that oversees the WIC Program. Your name will not appear anywhere in the report. Nothing said today will be attached to your name at any point. Nothing that you say will affect the services you receive through WIC or any other public assistance programs.

Your input in this interview will provide us with valuable feedback on WIC nutrition education. The interview will last approximately 30 minutes. The purpose of this interview is to hear from you about your own experiences and satisfaction with WIC nutrition education. We will use the information to identify ways for improving WIC nutrition education to better serve the WIC families in your community and those in other communities like yours.

Do you have any questions about the interview? *[Answer any questions.]* Do you agree to continue with the interview and to have it recorded? **[If no, end interview.]**

Now I'm going to start recording our interview.

INTERVIEWER: Start recording and say "Interview number ____" *[Number them consecutively.]*

Topic 1: Experience with Nutrition Education at WIC Visits

First, we are going to talk about details of your WIC visits so I can learn what is most useful to you and how to make the visits better. Please help me understand how WIC visits work. Every WIC office is different, so it will help me to hear from you what happens at the WIC office you go to.

1. Can you please describe the steps of your last WIC visit? Start at the beginning when you arrived at the office.
2. What was most helpful to you during that WIC visit?
3. How did this visit compare to other WIC visits?

Now, let's talk about your most recent visit to WIC when either you or one of your children got recertified, which usually happens every 6 to 12 months, or, if you are new to WIC, when you first enrolled. This would be a visit where you had to bring proof of address or income to make sure you can be on WIC. Do you know which visit I'm talking about? [Make sure participants understand that you are referring to recertification/enrollment]

4. In this visit you would have talked one-on-one with a WIC staff person about health or healthy eating for you or your children. What did you talk about?

Probes:

- a. Who decided what to talk about?
 - b. Who did most of the talking?
 - c. Did you feel like you got a chance to talk about the things you wanted to talk about or not? Why do you say that?
 - d. Overall, do you feel like the WIC staff person listened to you or not? Why do you say that?
5. Do you remember if you chose something to work on at that visit? For the rest of the interview, we will call what you chose to work on a "goal." [If yes, what goal was set?]

Probes:

- a. How was the goal chosen? Who set the goal—you or the WIC staff person?
- c. Did you talk about what would be hard about reaching the goal? [If yes, was the WIC staff person helpful in talking with you about any challenges and how to handle them?]
- d. Did you work on the goal after your WIC visit? [If yes, tell me about that.] [If no, why not?]

Now, let's talk about your most recent visit with WIC when you were not signing up for WIC for yourself or a child. This would be a visit when you did not have to bring proof of your

income or address. These visits are sometimes called nutrition education visits, nutrition classes, mid-certification visits, or check pick-up. What do they call those visits at your WIC office?

[INTERVIEWER: use the visit term used by the participants for next questions.]

6. Did this [*term used for visit*] include talking with a WIC staff person about healthy eating, physical activity, or breastfeeding? [If yes, describe what happened at that visit; for example, a one-on-one session with a WIC staff person, a group class with other people, or something else.]
 - a. What did you talk about?
 - b. How long did you spend talking about health or healthy eating?
 - c. Were you able to ask questions or talk about things you wanted to talk about? Why or why not?
7. If you had a goal, did a WIC staff person ask you at this visit how things were going in reaching your goal or if you wanted to set a different goal?
 - a. Did a WIC staff person ask about any challenges you were having in reaching your goal? [If yes, did she or he talk with you about how to handle these challenges?]
 - b. What are some examples of ways that WIC has helped you reach your goals?

Topic 2: Use of Reinforcers

Now let's talk about written material like pamphlets or newsletters or other items that you got from WIC about health or healthy eating.

8. What types of things have you received?
 - a. Which of these has been most useful to you? Why?
 - b. How much time did you spend using these materials at home?
 - c. What other kinds of materials or items would you like to get from WIC to take home?

Topic 3: Changes Participants have Made

Now let's talk about changes you have made to try to be healthier. Think about the past 6 months. If you have been on WIC for less than 6 months, then think about the time since you've been on WIC.

9. Have any of you made changes in how you eat or feed your children during this time?
 - a. [If yes] What changes have you made? [Probe if not mentioned: eating more fruit and vegetables, eating more whole grains, drinking lower fat milk]
10. Have any of you made changes in the past 6 months/since on WIC in how much exercise or physical activity you or your children get?
 - a. [If yes] Please tell me about the changes.
11. Thinking about the changes you have made, has anything that you've learned at WIC been helpful in making them?
 - a. [If yes] Please tell me what has been helpful.

Topic 4: Satisfaction and Recommendations for Improvements

For the last part of our interview, I want to hear your suggestions for improving WIC nutrition education. Now is your chance to help WIC be as good as it can be!

12. What ideas do you have for ways you would like to receive nutrition information from WIC?

Probe:

- a. For example, would you like group activities, food demonstrations, nutrition activities for children?
 - b. Would you like to get text messages with nutrition information?
 - c. Would you follow WIC on Facebook or Twitter?
 - d. [If the WIC site doesn't use Internet nutrition education] Would you like to use the Internet to get WIC nutrition education?
13. Now think about the one-on-one nutrition sessions you've had with WIC staff.
 - a. What do you like about these sessions?
 - b. What don't you like about these sessions?
 - c. How could WIC improve one-on-one sessions?

14. [For sites that offer groups sessions] Now think about the group nutrition classes you've had at WIC.
 - a. What do you like about these sessions?
 - b. What don't you like about these sessions?
 - c. How could WIC improve the group sessions?
15. Think about the information you get on nutrition and healthy eating at WIC. In general is the information new to you or not?
 - a. If information is not new, did you find it useful or not?
 - b. Do you feel like the information you get at WIC applies to you or not? Why or why not?
16. If you have children, do they usually come with you to WIC?
 - a. If yes, does it make it hard or easy to listen to the information provided?
 - b. Do you have suggestions for how WIC could make it easier to bring your children when you come to WIC?
17. In addition to what we have already talked about, what activities or changes would you like WIC to consider for making the nutrition education you receive more useful and meaningful to you?
18. Do you have anything else you would like to share about the nutrition education you receive at WIC?

Closing

Thank you very much for participating in this interview today. We have learned a lot from your experiences and suggestions.

INTERVIEWER: End the recording before proceeding.

I would like to verify your mailing address so we can send you a \$50 gift card in the mail.
[INTERVIEWER: Read the address from the list of names and contact information to confirm or update the mailing address.]

You should receive the gift card within a week.

Thank you again for spending this time with me today.

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