

Title of Intervention	Virginia FitWIC program	
Website	http://www.nal.usda.gov/wicworks/Sharing_Center/statedev_FIT-VA.html	
Intervention Strategies	Individual Education, Group Education	
Purpose	'Promote 6 targeted parental behaviors to prevent obesity in children served by the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).'	
Populations	Virginia WIC participants, adults	
Settings	WIC clinics, community	
Partners	Virginia WIC clinics, Virginia Department of Health, University faculty	
Intervention Description	1)'In the Virginia WIC program, clients attend educational groups once every 2 months and an individual session with a WIC nutritionist every 6 months. The educational groups are led by nutritionists or nutrition assistants. The Fit WIC intervention modified the educational groups' content and provided activities to reinforce the educational message but did not modify the frequency or duration of the bimonthly and semiannual contacts. For the Fit WIC intervention, the educational groups were used over a 1-year period to introduce WIC participants to 6 key messages: (1) increase physical activity, (2) monitor mealtime behavior, (3) limit household television viewing, (4) drink water instead of sweetened beverages, (5) consume 5 fruits or vegetables daily, and (6) increase family activities to promote fitness. These messages were presented with a set of "Fit WIC Virginia Guidance Cards." WIC parents were encouraged to serve as role models for their children.'	
	2) WIC 'clinic staff was encouraged to participate in 6 "staff wellness challenges." The staff wellness challenges ran concurrently with the group education classes. The nutrition and physical-activity messages presented to WIC staff mirrored those used in the nutrition education classes so that staff members could understand what challenges the participants were experiencing. WIC staff also were encouraged and reminded to model healthy lifestyle habits to WIC participants through behaviors that clients might witness while waiting in the clinic (e.g., eating homemade lunches).	
	3) 'Every other month, members of the local coalition of community services received from WIC health education materials to share with their clients. These materials were identical to the materials being used in the WIC clinic. Thus, WIC clients who used other community services received the same health message in a variety of venues, reinforcing the Virginia Fit WIC key messages. These venues included recreation centers, Department of Parks and Recreation facilities, the public library, a food bank, parenting classes, and a multicultural center, as well as other venues for family-oriented community services.'	
Theory	Social cognitive theory, self-efficacy theory	
Resources required	Staff/Volunteers:	WIC staff
	Training:	None
	Technology:	None

	Space:	No additional
	Budget:	Not mentioned
	Intervention:	Fit WIC Virginia Guidance Cards, Fit WIC materials - available at: http://www.nal.usda.gov/wicworks/Sharing_Center/statedev_FIT-VA.html
	Evaluation	Survey (English and Spanish)
Evaluation	Design:	Prospective study, nonrandomized. Pre-test–post-test, nonequivalent (nonrandomized) control group
	Methods and Measures:	Two WIC sites participated in a nonrandomized, controlled 1-year prospective study to assess parents' self-reported behavior changes.
Outcomes	Short term impact:	The FitWIC program 'successfully influenced 1 food-related behavior, frequency of offering a child water instead of sweetened drinks; and 1 activity-related behavior, frequency of active play with the child, for both English-speaking and Spanish-speaking participants.'
	Long term impact:	Not measured
Maintenance	Not mentioned	
Lessons Learned	1) Similar intervention strategies can change both food-related and activity-related behavior.	
	2)' Adding an on-site nutritionist with direct responsibility for enhancing the community WIC collaborative relationship.'	
	3) Client follow-up is the most costly and time intensive aspect of the program.	
Citation(s)	McGarvey, Elizabeth, Keller, Adrienne, Forrester, Mena, Williams, Erin, Seward, Donna, and Suttle, David. (2004) Feasibility and Benefits of a Parent-Focused Preschool Child Obesity Intervention. American Journal of Public Health. Vol. 94, No. 9. 1490-1495.	
Current Program Status	The United States Department of Agriculture (USDA) funded FitWIC programs in 6 States with 6 different interventions. To see all interventions you can go to the USDA website (1). All materials associated with the Virginia FitWIC program are available at the USDA WIC website (1). Missouri has a FitWIC program, information on this program is available at the Missouri Department of Health website (3)	
	1	http://www.nal.usda.gov/wicworks/Sharing_Center/statedev_FIT.html
	2	http://www.nal.usda.gov/wicworks/Sharing_Center/statedev_FIT-VA.html
	3	http://www.dhss.mo.gov/WICLWP/FitWIC-MO.html