

Portland State University

PDXScholar

OHSU-PSU School of Public Health Annual
Conference

2021 Program Schedule

Apr 8th, 3:03 PM - 3:08 PM

An Intervention to Increase Detection of Developmental Delays in WIC Programs

Mohadeseh Solgi

Julie A. Reeder
Oregon Health Authority

Sherri Alderman
Portland State University

Katharine E. Zuckerman
Oregon Health & Science University

Follow this and additional works at: <https://pdxscholar.library.pdx.edu/publichealthpdx>



Part of the [Development Studies Commons](#), [Disability Studies Commons](#), and the [Public Health Commons](#)

Let us know how access to this document benefits you.

Solgi, Mohadeseh; Reeder, Julie A.; Alderman, Sherri; and Zuckerman, Katharine E., "An Intervention to Increase Detection of Developmental Delays in WIC Programs" (2021). *OHSU-PSU School of Public Health Annual Conference*. 5.

<https://pdxscholar.library.pdx.edu/publichealthpdx/2021/Posters/5>

This Poster is brought to you for free and open access. It has been accepted for inclusion in OHSU-PSU School of Public Health Annual Conference by an authorized administrator of PDXScholar. Please contact us if we can make this document more accessible: pdxscholar@pdx.edu.

An Intervention to Increase Detection of Developmental Delays in WIC Programs

Authors: 1. Mohadeseh Solgi, Oregon Health & Science University 2. Julie A. Reeder, Oregon WIC Program, Oregon Health Authority. 3. Katie Green, Centers for Disease Control and Prevention, National Center on Birth Defects and Developmental Disabilities 4. Katharine E. Zuckerman, General Pediatrics, Oregon Health & Science University

Background: Low-income children are at risk for under-detection of developmental disabilities (DD). Women's Infants and Children's Special Supplemental Nutrition Program (WIC) clinics see low-income children regularly in early childhood and could be an important source of referrals to developmental services.

Objectives: To increase the number of referrals to Early Intervention/Early Childhood Special Education (EI/ECSE) from non-primary care settings such as WIC.

Methods: This was a site-randomized trial of an intervention to train WIC staff in early identification of DD's, using CDC's Learn the Signs Act Early (LTSAE) developmental monitoring materials. 7 county WIC agencies in Oregon enrolled; 4 intervention agencies and 3 control agencies. The intervention consisted of an on-site, half-day training regarding signs of developmental delays, use of LTSAE materials, and referral to EI/ECSE. WIC staff were encouraged to identify and refer at-risk children to EI/ECSE. Control sites received no training and continued their usual processes. Primary study outcome was number of children referred from WIC to EI/ECSE in control vs. experimental counties as well as % of referrals evaluated based on data obtained Oregon's EI/ECSE program. Because of COVID-19, the study was cut short 2 months after the intervention as all Oregon WIC visits were stopped and transitioned to telephone. Thus, the 2-month period prior to intervention was compared to the 2 months post-intervention in all sites.

Results: Data for 46 children referred to EI/ECSE were obtained. Overall, 3 of 4 intervention sites increased their referrals to EI, and 0 of 3 control sites increased referrals. Total referrals in the intervention arm increased from 5 to 33 in the intervention arm, but decreased from 6 to 2 in the control arm. In the intervention arm, referrals increased for both boys and girls and for all ages. Overall, of the 31 intervention arm children with EI data available, 11 were either evaluated or scheduled for evaluation after COVID, 22 families either did not have concerns or could not be located, and 1 child did not qualify.

Conclusion: This brief intervention with WIC staff led to short-term increases in EI referrals and evaluations. Such interventions may hold promise for reducing disparities in early detection of DD's.