

Children's Healthy Weight State Capacity Building Program Logic Model

Project Goals:

- Increase the proportion of children at a healthy weight
- Build the capacity of state Title V programs to integrate nutrition
- Increase the MCH nutrition competency of the state Title V workforce (workforce competency)
- Optimize MCH nutrition-related data sources for effective program planning (data capacity)

Assumptions:

- Across the country, state Title V programs lack critically important nutrition infrastructure and expertise
- Improving Title V workforce competency and data and evidence capacity around MCH nutrition will ultimately improve the health of the MCH population
- Participating states in this project will build on lessons learned and formative work from the Children's Healthy Weight CoIIN
- The first step to building capacity of a state Title V program to integrate nutrition is to complete a statewide nutrition needs assessment
- By September 2020, life will return to something like what it was before the COVID-19 pandemic started

Project Target Audience: State Title V programs and stakeholders in state and local organizations

Inputs	Activities	Outputs	Outcomes		
State teams MCHB ASPHN Assoc of MCH Programs (AMCHP) Council of State & Territorial Epidemiologists (CSTE) Subject matter experts Funding MCH nutrition-related data Evidence-informed nutrition interventions Resources that demonstrate value of nutrition Resources to improve the public health infrastructure	ASPHN will provide MCH nutrition leadership for states on several activities related to Title V workforce competency and data capacity. Broadly, ASPHN will... <ul style="list-style-type: none"> • Engage national, state, local, and tribal partners • Provide resources, training, and intensive, individualized technical assistance • Lead meetings • Evaluate project performance and effectiveness • Disseminate learnings • Manage state teams and the cooperative agreement 	STATE SPECIFIC <ul style="list-style-type: none"> • #/types of partnerships in states • # of promising practices that increase MCH nutrition competency and that optimize MCH nutrition data sources • # of state Title V block grant applications that incorporate nutrition services, programs, and PSE strategies • 3 state models of MCH nutrition integration ASPHN SPECIFIC <ul style="list-style-type: none"> – #/type of partnerships with experts, state Title V programs, and other national groups – #/types of resources, templates and tools including dedicated webpage; shared online platform – #/types of TA sessions, meetings, and trainings – 1 evaluation plan and # of reports – 1 coordinating center of expertise on integrating nutrition into state Title V programs 	Short Term (1-2 Years)	Intermediate (3-5 Years)	Long Term >5 Years)
			States have increased: <ol style="list-style-type: none"> 1) public health nutrition expertise focused on MCH population 2) awareness by the Title V workforce of how nutrition can be integrated across a range of MCH priorities 3) relationships with organizations that connect with the MCH population 4) awareness of nutrition-related data sources 5) MCH-nutrition-related epidemiology and evaluation expertise 6) awareness of the value of MCH nutrition program evaluation data 	States have increased: <ul style="list-style-type: none"> • nutrition interventions in state Title V work plans • collaboration among national, state, local, and tribe partners • use of nutrition-related data sources in program planning • use of MCH nutrition program evaluation data 	<ol style="list-style-type: none"> 1. Increased access to evidence-informed nutrition programs and services, including policy, system, and environmental (PSE) change strategies for the MCH population 2. Improved nutrition status among MCH population 3. Decreased obesity prevalence among children