



ROLLINS
SCHOOL OF
PUBLIC
HEALTH



Program Planning

Ingredients for Success

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Training Objectives



Participants will be able to:

1. Describe the program planning cycle
2. Identify health determinants
3. Develop program goals and objectives based on community assessment results
4. Write program goals and SMART objectives that link to program evaluation
5. Describe theories that relate to behavioral, organizational, and policy change

Training Objectives



Participants will be able to:

6. Develop program activities based on theory
7. Define evidenced-based interventions
8. Discuss the use of a logic model for program planning
9. Develop program indicators
10. Describe program implementation steps

Program Planning



What is Planning?

Planning is a series of decisions, from general and strategic decisions to specific operational details, based on the gathering and analysis of a wide range of information.



Bartholomew et al. ,2006

Program Planning Model



Best Practices of Program Planning

- Be tailored to specific populations and settings
- Involve participants in planning, implementation, and evaluation
- Integrate efforts aimed at changing individuals, social and physical environments, communities, and policies
- Link participants' concerns about health to broader life concerns and to a vision of a better society

Best Practices of Program Planning

- Use resources within the environment
- Build on the strengths of participants and communities (assets)
- Advocate for resources and policy changes needed to achieve the desired health objectives
- Seek to institutionalize successful intervention components and replicate them in other settings

Ingredients for Program Planning

- **Program Preplanning**
 - *Picking a recipe/Making your grocery list*
- **Program Goals and Objectives**
 - *Planning for your meal*
- **Theoretical Framework**
 - *Working with the ingredients*
- **Logic Modeling**
 - *Prepping and organizing your ingredients*
- **Evidence-based Programs**
 - *Following the recipe*
- **Implementation**
 - *Serving your meal*



What's your favorite?





Step 1: *Picking a recipe and making your grocery list*

PROGRAM PREPLANNING

Why Preplan?

- When elements of a program – such as participation of key stakeholders, time, resources, and data analysis – are handled well, program results can exceed expectations.
- If not handled well, they can result in program failure.

Stakeholders

- Stakeholders- key contacts and other key informants in the community, public health organizations and other related services, target population

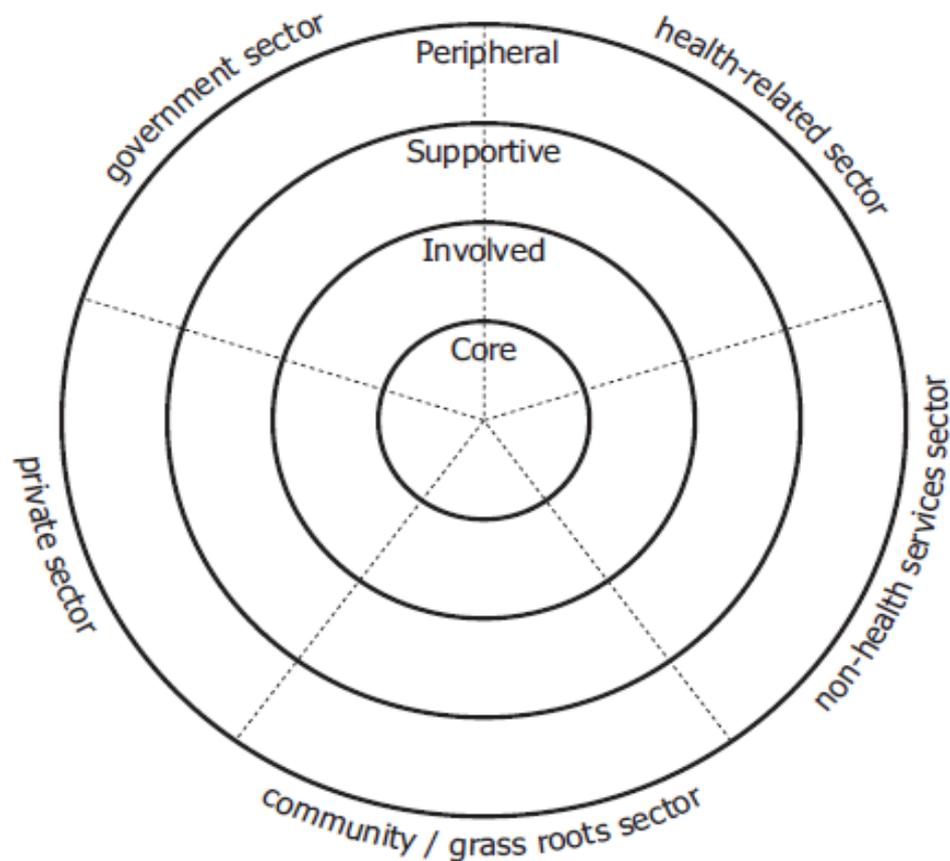
Bartholomew et al. ,2006



Stakeholders

- Stakeholders are key to a program's success and need to be brought in at the beginning of the planning process.
- Stakeholders can be key decision makers (e.g. administration, church elders, board of directors) or community members, potential program participants, and partner organization members.

Types of Stakeholders



The Health Communication Unit, University of Toronto

Gaining Support

- If an idea for a program comes from top-level people (e.g. administrators, funders), program planners do not have to “sell” the program to leadership
- But most often, ideas are generated from the community (e.g. parents, member of a congregation, concerned citizen), and therefore need to gain support from decision makers

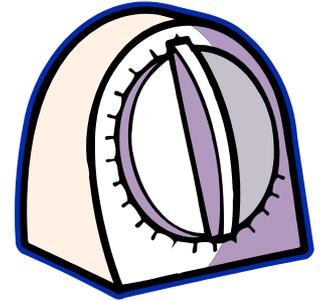
Discussion: How have you gained stakeholder support for programs in the past?



Developing Rationale

- Create a summary document with:
 - Needs assessment data
 - Epidemiological data about a specific health problem
 - Cost-effectiveness data of a health program
 - Values and benefits that are important to decision makers
 - Data from other successful programs
 - Compatibility between the proposed program and the health plan of a GA or the U.S. (Healthy People 2020)
 - Protecting human resources

Project Management



- Time
 - Have a timeline for pre-planning and planning activities
 - Include key dates for deliverables
 - Allow for as much time as possible to involve people appropriately
- Money and other resources
 - Create an inventory of available resources
 - Expertise, contributions, in-kind gifts, volunteers

Activity 1:

Identifying and Working with Stakeholders





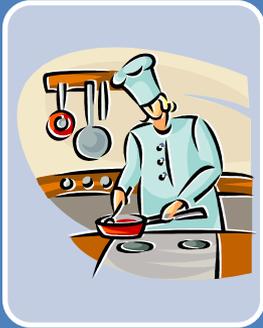
Step 2: *Planning for your meal*

PROGRAM GOALS AND OBJECTIVES

Program Planning

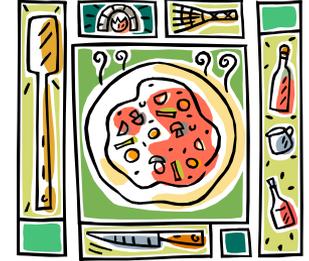


Identify Goals



Identify and Write
Program Objectives

Program Goals



- Program goal is a statement that provides specific long-term direction for the program.
 - Is written to include all aspects or components of a program
 - Provides overall direction of a program
 - Does not have a deadline
 - Is often not measurable in exact terms

Example: Program Goal

1. To reduce the incidence of cardiovascular disease in the employees of the Smith Company.
2. To increase survival rates of breast cancer patients through the optimal use of community resources.
3. To prevent the spread of HIV in the youth of Atlanta.

Goals and Objectives

“A goal is a future event toward which a committed endeavor is directed; objectives are the steps to be taken in pursuit of a goal.”

Ross and Mico 1980

Program Objectives



- Program objective - a specific statement of short-term application that is measurable.
 - Includes activities that have a specific time limit and expected results of each activity
 - Specifies intermediate accomplishments or benchmarks that represent progress towards a goal
 - A bridge between community assessment and a planned intervention

SMART Objectives

Specific

Measurable

Achievable

Realistic

Time-phased

Half of all those in the county who complete a regular, aerobic, 12-month exercise program will reduce their “risk age” on their follow-up health risk appraisal by a minimum of two years compared to their preprogram results.

Program Objectives: How much change?

- Realistic and achievable?
 - From Healthy People 2020 or program goals
 - From the intervention literature
- What is realistic for a smoking cessation program?
- Examine review articles from interventions for effects or % change

Healthy People 2020

HealthyPeople.gov

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August is National Immunization Awareness Month

Vaccines are among the most cost effective clinical preventive services.

Learn More



Closer Look: Health Disparities

Compare the Top 10 Causes of Death across Populations

Race/Ethnicity:

Ethnicity:

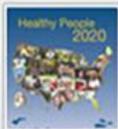
Age Range:

Get Your Results



Looking for personal health information?

healthfinder.gov



Get the Healthy People 2020 brochure

What's New for 2020

Don't miss these new Topic Areas, tools, and more.



Spotlight

Coming soon in 2011:
Leading Health Indicators.
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Topics & Objectives Index - Healthy People

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Select a Topic Area from the list below to get started. Each topic area includes a topic area overview, objectives and data ^{*}, and evidence-based resources.

[Download all Healthy People 2020 objectives \[PDF - 2 MB\].](#)

[Download all Healthy People 2020 objectives in spreadsheet format \[XLSX - 159 KB\].](#)

If you experience problems viewing documents, please download the latest version of the [Viewer or Player](#).

A

[Access to Health Services](#)

[Adolescent Health](#) *New*

[Arthritis, Osteoporosis, and Chronic Back Conditions](#)

B

[Blood Disorders and Blood Safety](#) *New*

C

G

[Genomics](#) *New*

[Global Health](#) *New*

H

[Health Communication and Health Information Technology](#)

[Healthcare-Associated Infections](#) *New*

[Health-Related Quality of Life & Well-Being](#) *New*

[Hearing and Other Sensory or Communication Disorders](#)

N

[Nutrition and Weight Status](#)

O

[Occupational Safety and Health](#)

[Older Adults](#) *New*

[Oral Health](#)

P

[Physical Activity](#)

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Physical Activity

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Goal

Improve health, fitness, and quality of life through daily physical activity.

Overview

Released in 2008, the *Physical Activity Guidelines for Americans* (PAG) is the first-ever publication of national guidelines for physical activity. The Physical Activity objectives for Healthy People 2020 reflect the strong state of the science supporting the health benefits of regular physical activity among youth and adults, as identified in the PAG. Regular physical activity includes participation in moderate and vigorous physical activities and muscle-strengthening activities.

More than 80 percent of adults do not meet the guidelines for both aerobic and muscle-strengthening activities. Similarly, more than 80 percent of adolescents do not do enough aerobic physical activity to meet the guidelines for youth. Working together to meet Healthy People 2020 targets via a multidisciplinary approach is critical to increasing the levels of physical activity and improving health in the United States.



Physical Activity



Print



E-mail



Share

Overview

Objectives

Interventions & Resources

[Download all Physical Activity Objectives \[PDF – 26 KB\]](#)

[Expand All Objectives](#)

PA-1 Reduce the proportion of adults who engage in no leisure-time physical activity

[View Details](#) ▼

PA-2 Increase the proportion of adults who meet current Federal physical activity guidelines for aerobic physical activity and for muscle-strengthening activity

PA-2.1

Increase the proportion of adults who engage in aerobic physical activity of at least moderate intensity for at least 150 minutes/week, or 75 minutes/week of vigorous intensity, or an equivalent combination

[View Details](#) ▼

PA-2.2

Increase the proportion of adults who engage in aerobic physical activity of at least moderate intensity for more than 300 minutes/week, or more than 150 minutes/week of vigorous intensity, or an equivalent combination

[View Details](#) ▼

Program Objectives

Questions to consider when developing objectives:

1. Can the objective be realized during the life of the program?
2. Can the objective be realistically achieved?
3. Does the program have enough resources?
4. Are the objectives consistent with the policies and procedures of the organization?
5. Do the program objectives align with the cultural characteristics of your priority population and the changes sought?

Healthy Heart Program

- Health Topic: Cardiovascular Health
- Goal: To reduce the incidence of cardiovascular disease in the residents of Tift county, GA.
- What are some short-term, intermediate, and long-term objectives for this program?



Healthy Heart Program

❑ Objectives:

- ❑ By August 4 2012, two different heart disease brochures that outline risk factors and prevention strategies will be distributed to all residences in the county. (short-term)
- ❑ At least 20% of residents will be able to identify two of their own heart disease risk factors after receiving the brochures. (short-term)

Healthy Heart Program

❑ Objectives:

- ❑ During the telephone interview follow-up, at least 50% of residents will report having had their blood pressure taken during the previous six months.
(intermediate)
- ❑ The percentage of people who have access to safe walking trails will increase by 55% by the year 2012.
(intermediate)
- ❑ By the year 2015, the incidence of heart disease will be reduced by 15% in the residents of Tift County.
(long-term)

Stakeholder Participation

- Involve stakeholders, community members, and partner organizations in the development of your program's goals and objectives.
- This will increase buy-in and their understanding of your program when it comes time to implement.

Resources

- Healthy People 2020

<http://www.healthypeople.gov/2020/default.aspx>

- Getting to Outcomes

http://www.rand.org/pubs/technical_reports/TR101/index.html

- Intervention Mapping

<http://interventionmapping.com/index.php?q=node/6>

Activity 2:

Developing Goals and Objectives





Step 3: *Working with the ingredients*

HEALTH BEHAVIOR CHANGE THEORY

Theories are Program Tools

*There is nothing so practical as a
Good Theory. – Kurt Lewin*



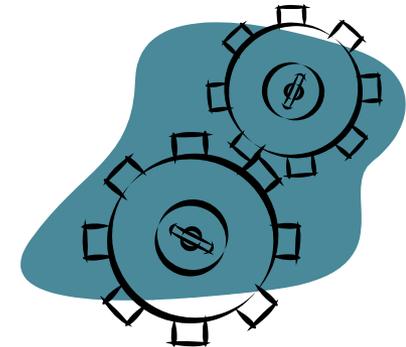
Definitions

Theory

- A set of interrelated concepts and definitions that help explain and predict events or situations to present a systematic view

Construct

- A specific concept developed or adopted for use in a particular theory



Theories and Models Help to:

- Explain the dynamics of behavior
- Provide a rationale for decision-making and action
- Offer ways to achieve behavior change
- Explain external influences of behavior
- Identify what should be measured for evaluation

Levels of Theories

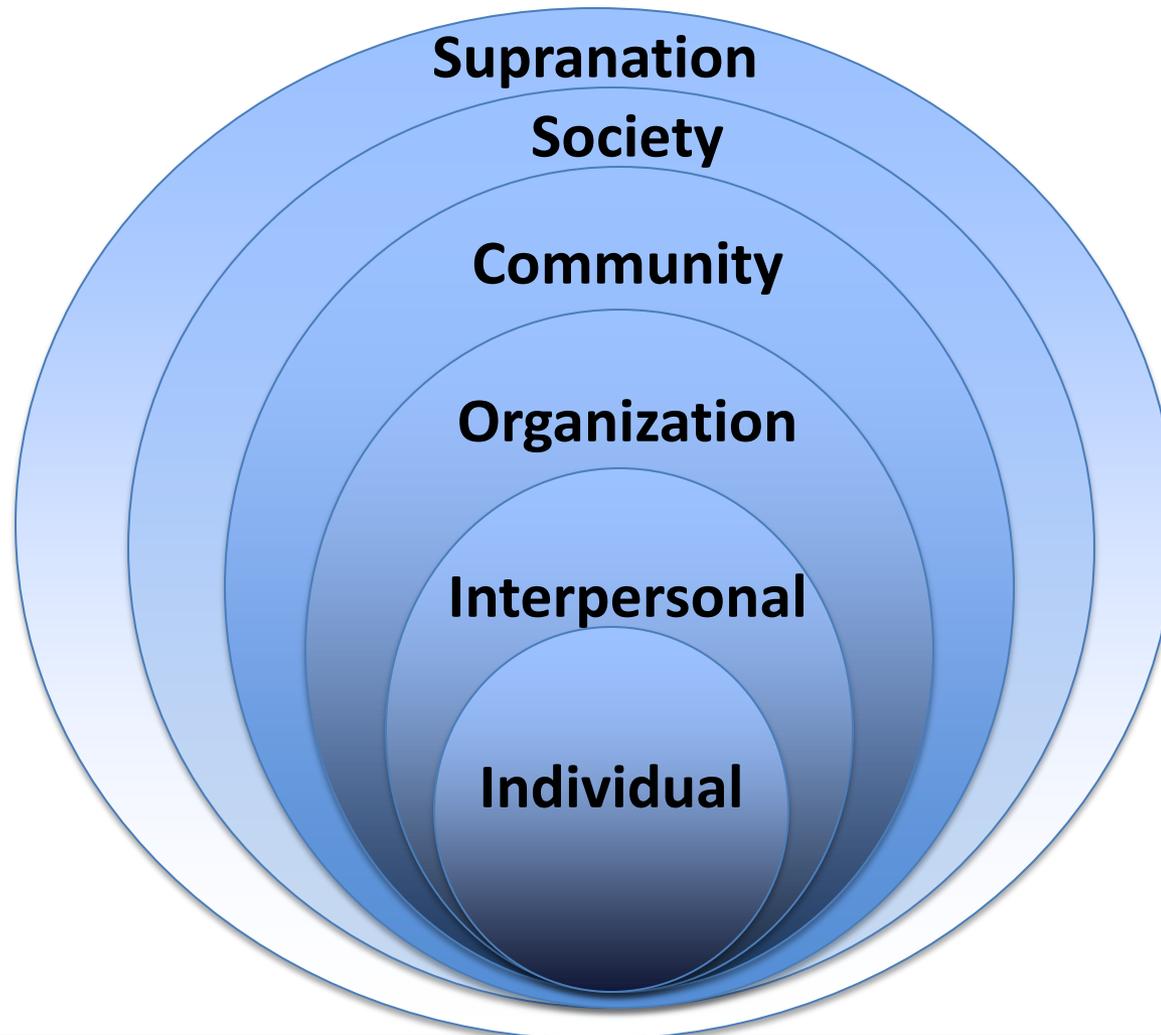
- Influencing People
 - Individual
 - Interpersonal
- Influencing the Environment and People
 - Community



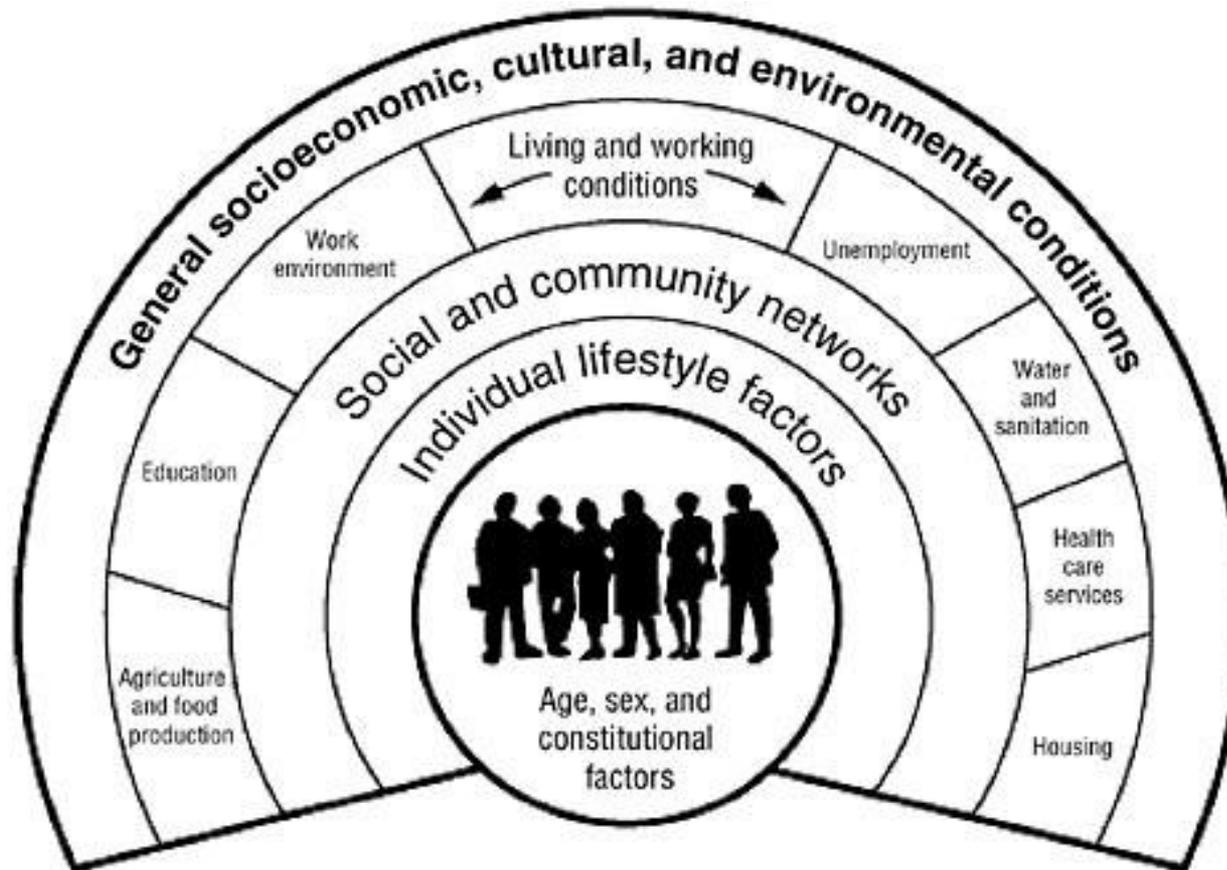
Ecological Approach

- The ecological perspective recognizes that health behaviors are a part of the larger system of behavior and social influences and that lasting changes in health require supportive changes in the whole system
- Mediated by both behavior and environment

Ecological Approach



Socio-Ecological Model



Reference: Institute of Medicine. (2003). *The Future of the Public's Health in the 21st Century*. Washington, D.C.: National Academies Press. Original source: Dahlgren G, Whitehead M. 1991. *Policies and Strategies to Promote Social Equity in Health*. Stockholm, Sweden: Institute for Futures Studies.

Ecological Approach

- **Five levels of influence:**

- Intrapersonal (individual) factors

- *Ex:* Knowledge and skills to increase physical activity

- Interpersonal factors

- *Ex:* Increasing family and social network support to increase physical activity

- Institutional (organizational) factors

- *Ex:* Worksite programs to increase physical activity

Ecological Approach cont.

- **Five levels of influence:**
 - Community factors
 - *Ex:* Increasing social or cultural norms to participate in physical activity or opportunities in community settings (e.g., churches, clubs)
 - Public Policy (societal) factors
 - *Ex:* Ordinance that states there must be a certain number of sidewalks in a given area

Health Determinants

- Determinants: The factors that have been found to be associated with the “at risk behavior” or the environmental condition



Health Determinants

- The implication for planning the intervention is that determinants are causally related to the conditions
- Even though the relationship between the at-risk behavior and determinant is causal, most often the empirical evidence is not

Health Determinants: Discussion

- What are determinants for the following health topic? (Remember to think of personal and environmental factors)

– Health Topic: Tobacco use



Health Determinants: Discussion

- What are the determinants for your organization/project's health topic?
- How do those health determinants inform your planning process?

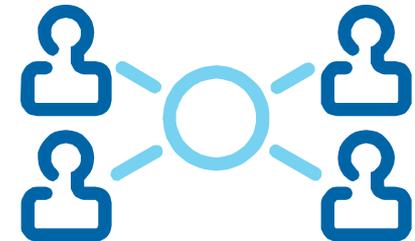
Theories and Models

- **Individual**

- Health Belief Model
- Stages of Change/Transtheoretical Model (TTM)
- Theory of Planned Behavior and Theory of Reasoned Action
- Precaution Adoption Model

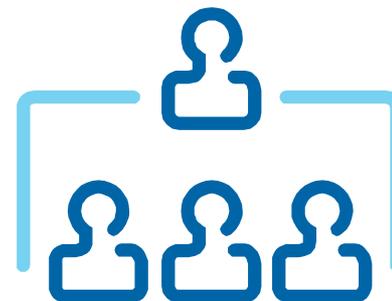
- **Interpersonal**

- Social Learning Theory/Information-Motivation-Behavioral Skills Model
- Social Support
- Social Influence
- Stress and Coping



Theories and Models

- **Community**
 - Community Organizing/Mobilizing
 - Organization Change Theory
 - Diffusion of Innovations
 - Communication Theory
 - Theory of Gender and Power
- **Other Models**
 - PRECEDE/PROCEED
 - Ecological Framework
 - Social Marketing
 - Coalition Building



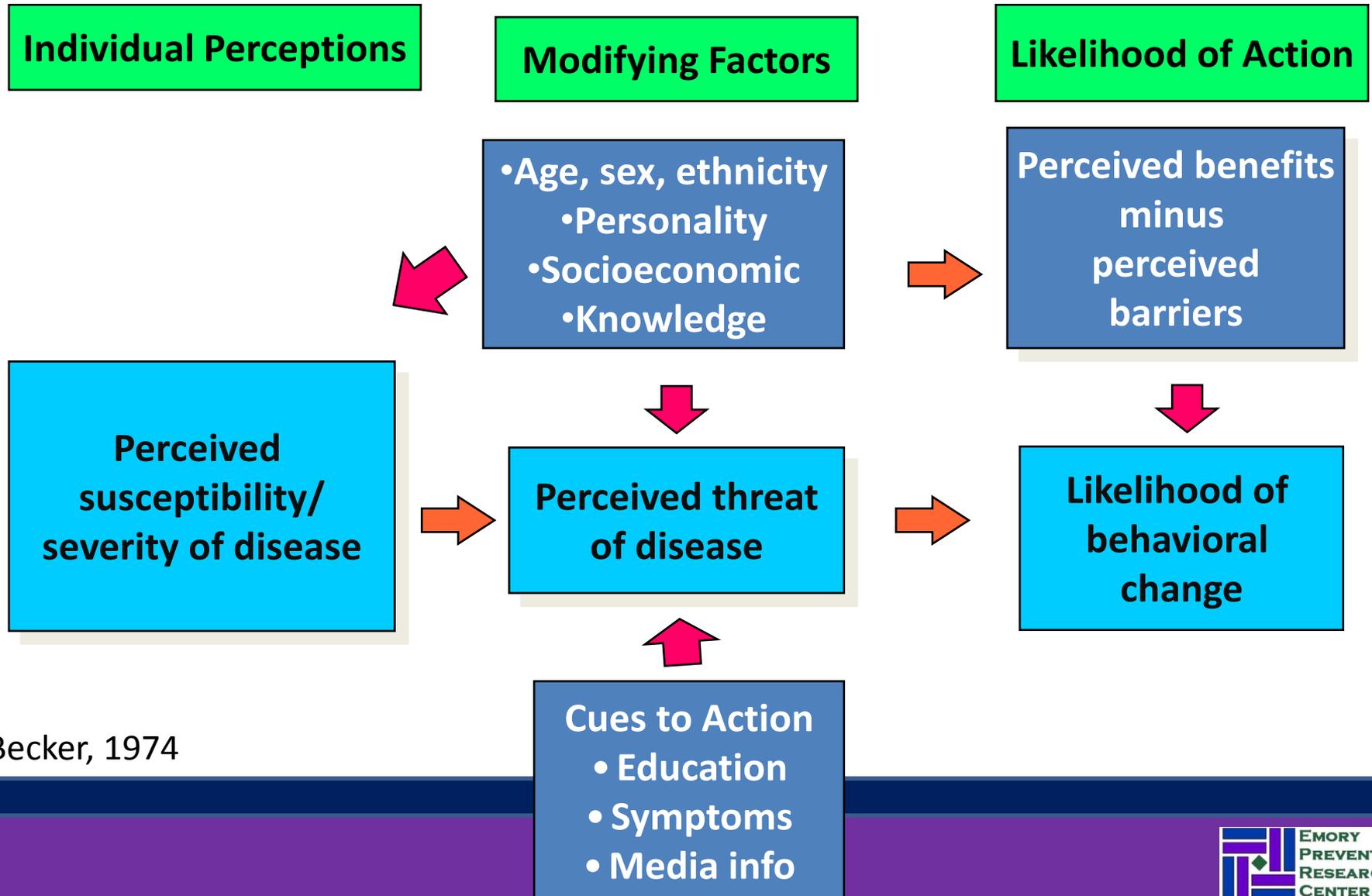


INDIVIDUAL LEVEL THEORIES

Health Belief Model

- Value expectancy theory
- People will adopt health behavior depending on:
 - desire to avoid illness or get well (value)
 - belief that the behavior will prevent the illness (expectancy)

Health Belief Model



Becker, 1974



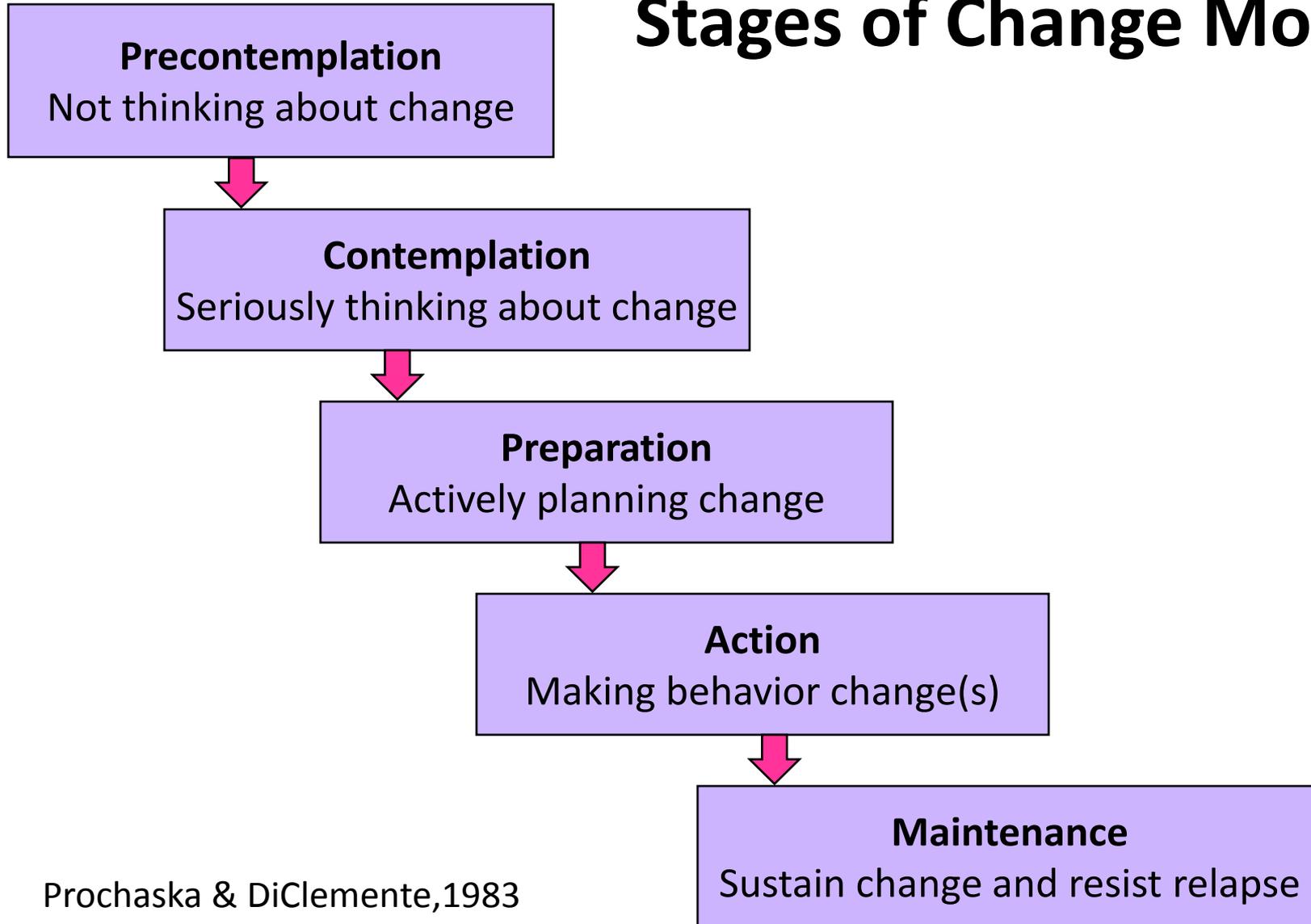
Health Belief Model

- *Perceived susceptibility*: Person's opinion of the chances of getting a disease, illness, or disability
- *Perceived severity of disease*: Person's opinion of the seriousness of a disease and its consequences
- *Perceived benefits*: Person's opinion of effectiveness of the recommended action to reduce the risk or the seriousness of the disease

Health Belief Model

- *Perceived barriers*: Person's opinion of the psychological and tangible costs or impediments of the recommended action
- *Cues to action*: Strategies that motivate an individual to take action
- *Self-efficacy*: Confidence in a person's ability to take action

Stages of Change Model



Prochaska & DiClemente, 1983

Critical Assumptions

- Majority of at-risk populations are not prepared for action and will not be served by traditional action-oriented prevention programs
- Specific processes and principles of change need to be applied at specific stages if progress through the stages is to occur
- Without planned interventions, populations will remain stuck in the early stages. There is no inherent motivation to progress through the stages of change

Stages of Change Model

Key concepts:

- Applies principles of change from across major theories of intervention
- People are in different stages of readiness to change

Core Constructs:

- Stages of Change: time dimension
- Processes of Change: covert and overt activities people use to progress through the stages
- Decisional Balance: weighing pros and cons of changing
- Self-Efficacy

Processes of Change

- **Consciousness Raising:** seek new information and to gain understanding and feedback about the problem behavior
- **Dramatic Relief:** express feelings about the problem behavior and potential solutions
- **Environmental Reevaluation:** assess how the problem behavior affects the physical and social environment
- **Self-Reevaluation:** appraise values with respect to the problem behavior
- **Social Liberation:** increase awareness and acceptance of alternative, problem-free lifestyles

Processes of Change

- **Self-Liberation:** commit to change the problem behavior
- **Helping Relationships:** use and accept support of others during attempts to change
- **Reinforcement Management:** rewarding oneself or being rewarded by others for making changes
- **Counterconditioning:** substitute healthy alternatives for the problem behavior
- **Stimulus Control:** take control of situations and other causes which trigger the problem behavior

Stages of Change in Which Change Processes Are Most Emphasized

Stages of Change

Precontemplation

Contemplation

Preparation

Action

Maintenance

Consciousness Raising

Dramatic Relief

Environmental Reevaluation

Self-Reevaluation

Self-Liberation

Reinforcement Management

Helping Relationships

Counterconditioning

Stimulus Control

Stages of Changes: Application

- **Precontemplation**
 - Increase awareness of need for change, personalize information on risks and benefits
- **Contemplation**
 - Motivate, encourage to make specific plans
- **Preparation (Decision)**
 - Assist in developing concrete action plans, set gradual goals
- **Action**
 - Assist with feedback, problem solving, social support
- **Maintenance**
 - Assist in reminders, coping; avoiding relapses

Activity 3:

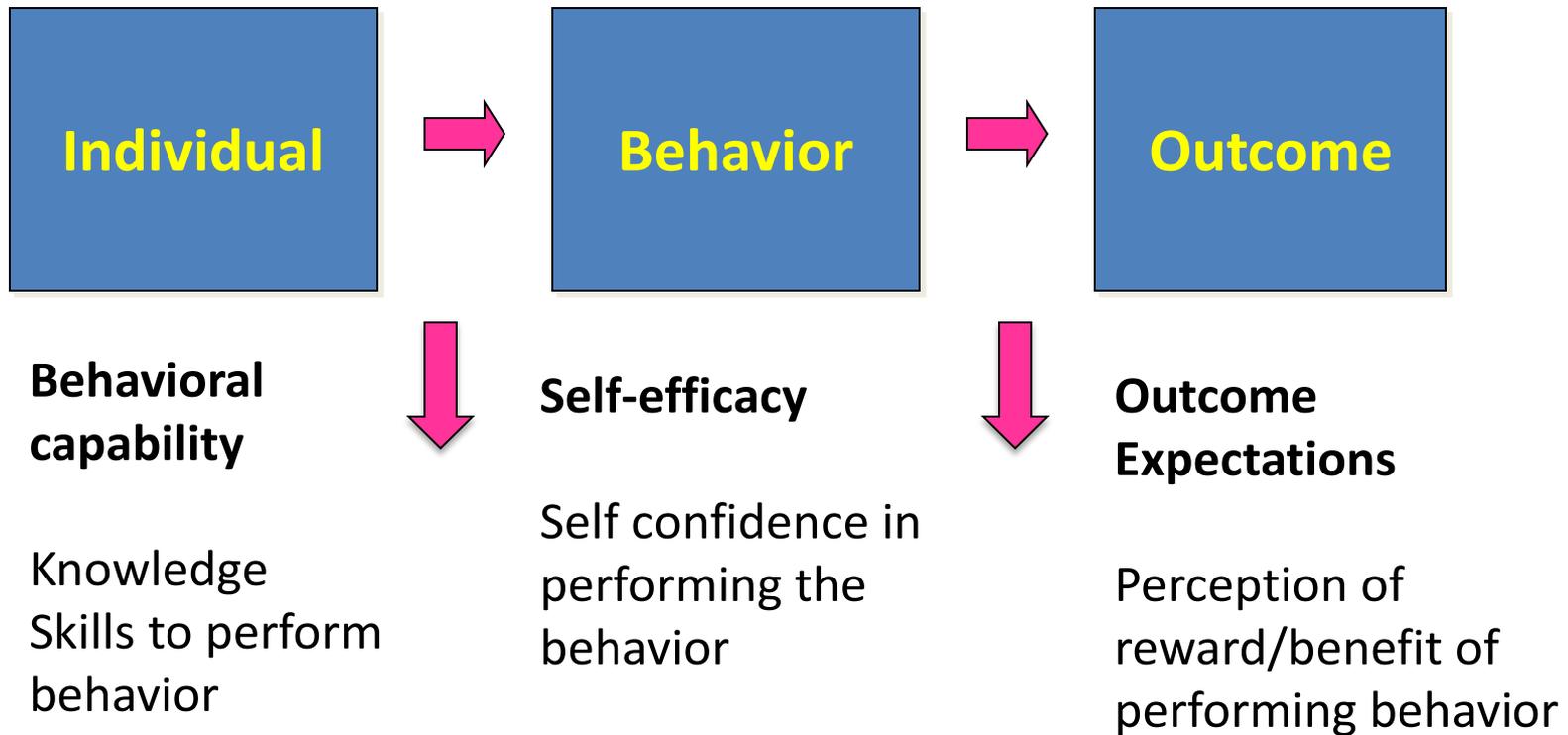
Individual Theory Application





INTERPERSONAL THEORY

Social Cognitive Theory



Bandura, 1972

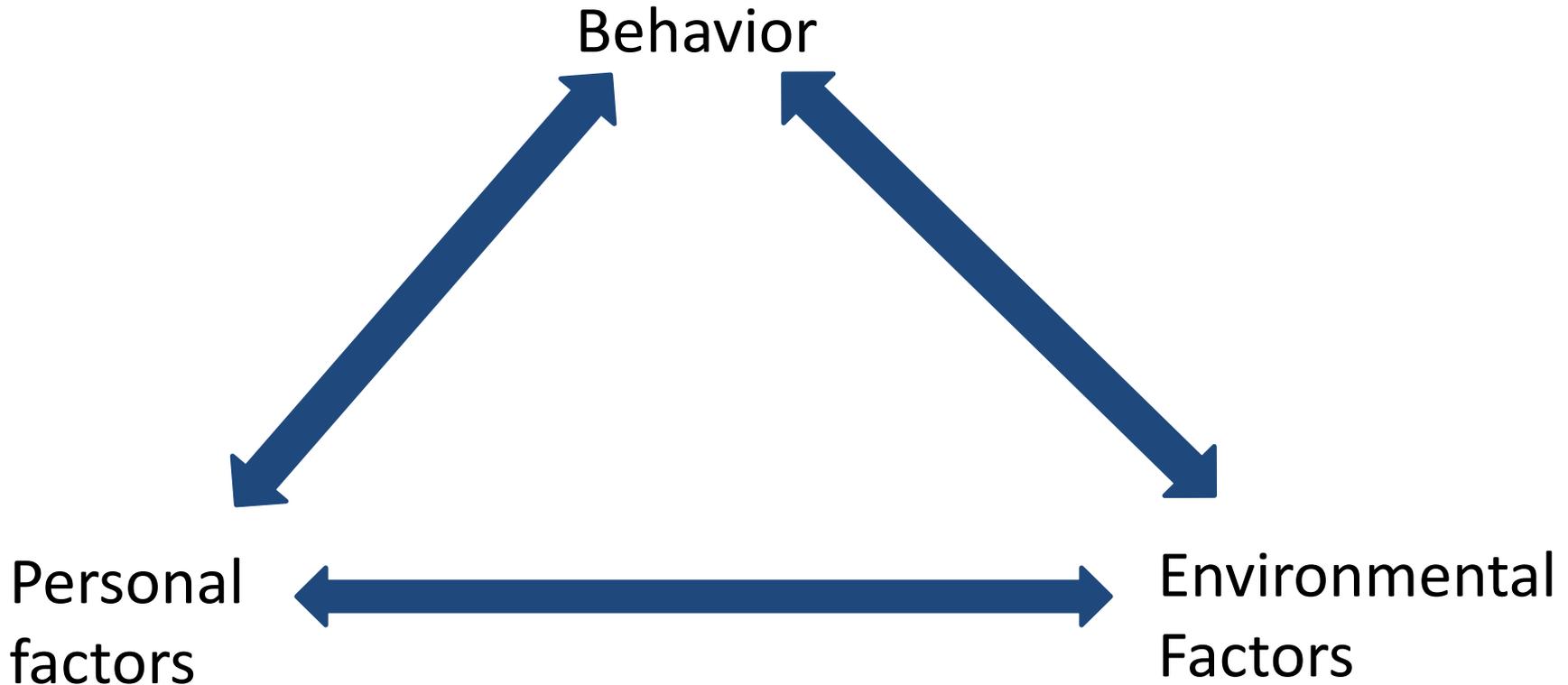
Social Cognitive Theory

- *Behavioral Capability*: Knowledge and skills about a behavior
- *Expectations*: Person's perception of the outcomes of a behavior
- *Expectancies*: The values that an individual places on a given outcome of a behavior
- *Observational Learning*: Behavior change resulting from watching the behaviors or actions of others
- *Environment*: Factors physically external to the person

Social Cognitive Theory

- *Reinforcement*: Responses to a person's behavior that may increase or decrease the future occurrence of that behavior
- *Self-efficacy*: Person's confidence in his ability to take action
- *Reciprocal Determinism*: Interaction of an individual, behavior, and environment; they all affect each other

Reciprocal Determinism



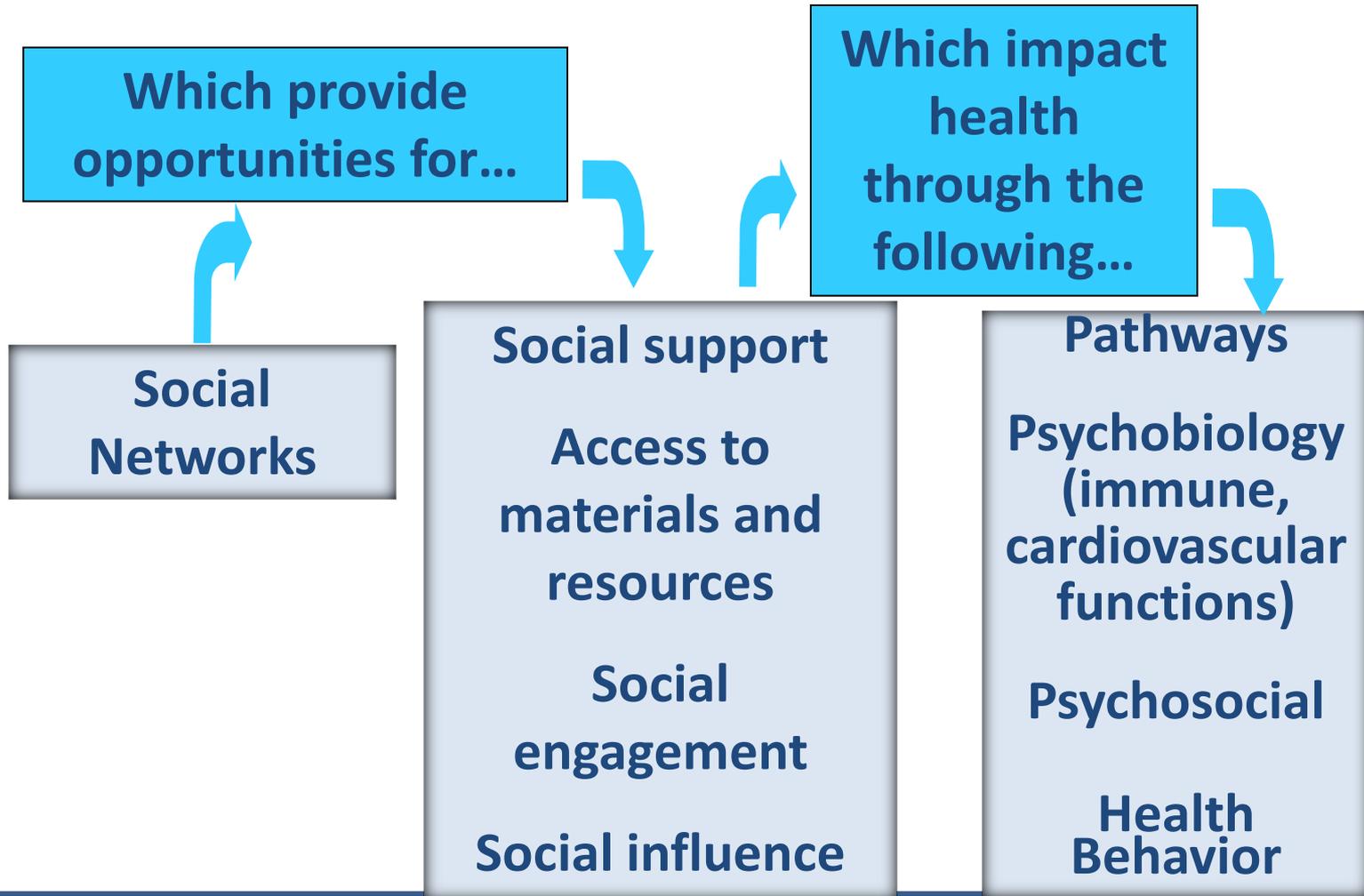
Dynamic interaction of the person, the behavior, and the environment in which the behavior is performed

Social Networks

- The web of social relations or ties that surround us
- The larger a person's social network, the greater the benefits to health
- Measures:
 - Size
 - Frequency
 - Geographic proximity
 - Intensity
 - Density
 - Reciprocity
 - Homogeneity



How Social Networks Impact Health



Types of Social Support

Type	Application
Emotional support	Provide help with dealing with an illness Listen to people about difficulties with behavior change Provide follow-up visits
Instrumental support	Provide tangible assistance <ul style="list-style-type: none">• provision of transportation• money Address barriers to behavior
Information support	Offer advice, suggestions, and information Educate on health topics
Appraisal support	Assist individuals in self-evaluation

Types of Social Network Interventions

Intervention: Enhancing existing social network linkages

Example Intervention Activities

- Skill-based training of network members for providing support
- Training in mobilizing and maintaining social networks
- Systems approach (for example, wellness coaching)

Lay Health Model and Natural Helper Model

- A model to enhance communities' health and competence



Definitions of Helpers



Lay health advisor

- Paid employee of an agency, such as a paraprofessional or outreach worker
- Provide social support to individuals who may or may not be a part of his or her social network

Natural helper

- Individuals whom others naturally turn to for advice, emotional support or aid
- Contribute to the health and competence of their community through information distribution, assistance and organization of community building activities within their social networks

Activity 4:

Interpersonal Theory Application





COMMUNITY LEVEL THEORIES

Community Organizing

- *Community organizing*: A process through which communities are helped to identify common problems or goals, mobilize resources, and in other ways develop or implement strategies for reaching their goals which they have collectively set.

Community Organizing

The health education professional who begins with the community's felt needs, rather than with a personal or agency-dictated agenda, will be far more likely to experience success in the change process and to foster real community ownership of programs and actions than if he or she were to impose an agenda from outside.

Minkler & Wallerstein, 2002 p.280

Definitions

- *Citizen participation*: The bottom-up, grass-roots mobilization of citizens for the purpose of undertaking activities to improve the condition of something in the community.
- *Community capacity*: community characteristics affecting its ability to identify, mobilize, and address problems.
- *Empowered community*: A community in which individuals and organizations apply their skills and resources in collective efforts to meet their respective needs.

Community Organizing Model



Selecting Program Activities

- Using the most appropriate theory and practice strategies for a given situation greatly enhances the chances for effective health promotion practice (*Glanz et al. 2002*)
- But how do we know if we are applying theory correctly?

Applying Theory

- Have a basic grasp of the theories
 - Take time to review theories and not depend on memory
 - Look for theory updates and new theories
- Examine the applicability to the health problem
 - Look for evidence that theories or models will work
 - Synthesize and integrate the theory to your health problem

Applying Theory

- Use more than one theory
 - Seldom does a single theory address all the complexities of the health problem
 - Keep variables of the theory consistent – do not cut and paste constructs or pieces of theory
- Select a theory that makes sense to your behavior/educational/environmental objectives

Resources

PRECEDE-PROCEED

- <http://www.lgreen.net/precede.htm>

Prevention Research Centers

- <http://www.cdc.gov/prc/index.htm>

The Community Guide

- <http://www.thecommunityguide.org/>

The Community Toolbox

- <http://ctb.ku.edu/en/>

Theory At A Glance: A Guide For Health Promotion Practice

- <http://www.nci.nih.gov/PDF/481f5d53-63df-41bc-bfaf-5aa48ee1da4d/TAAG3.pdf>



Step 4: *Preparing and organizing your ingredients*

USING LOGIC MODELS TO PLAN YOUR PROGRAM

What are Logic Models?

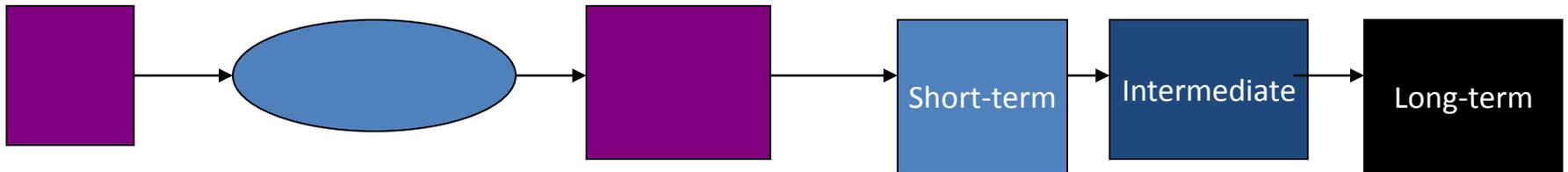


Logic Models

- Provide a visual depiction of how a program is supposed to work
- Describe the inputs, activities and outcomes of a program
- Visually connect program inputs with short-term and long-term outcomes
- Specify how the program activities relate to the ultimate outcomes of the program
- Provide causal links between the operations of the program to short-term and long-term outcomes
- Clarify the relationship between the program and the problem (and its determinants)

Logic Model Components

Inputs → **Activities** → **Outputs** → **Outcomes**



Logic Model Components

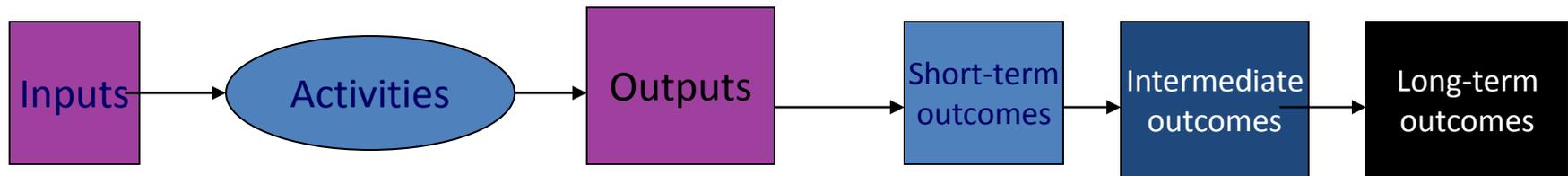
Inputs: Resources that go into a program

Activities: Actual events or actions

Outputs: Direct results of program activities

Outcomes: Sequence of changes triggered by the program

Goal: Overall mission or purpose of the program



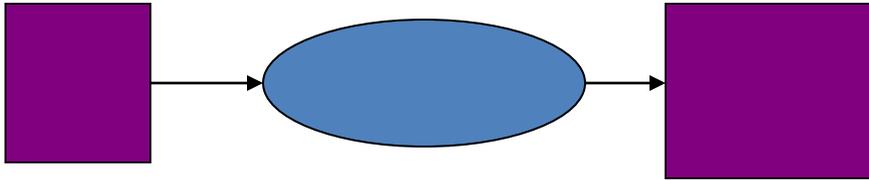
Program Theory and Logic Models

Logic models:

- Assist practitioners in making explicit their assumptions about linkages between inputs, activities, immediate outputs, intermediate outcomes and long-term outcomes or goals.
- Help to identify beliefs about cause-effect relationships that can be tested in an evaluation.
- Help to identify gaps in the program theory that may help focus the evaluation and/or intervention.

Logic Model Components: Process and Outcome

Inputs → **Activities** → **Outputs**



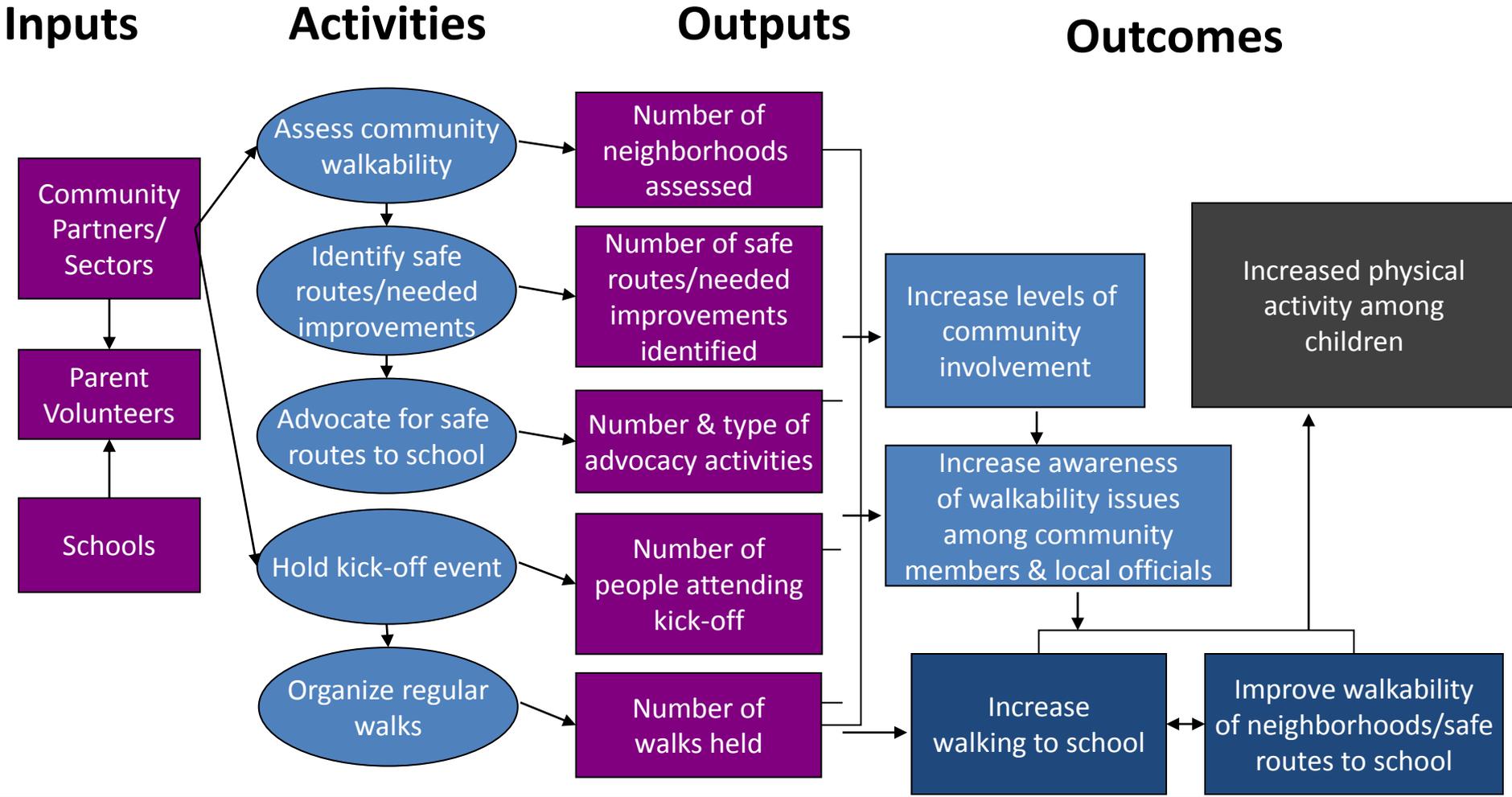
→ **Outcomes**



Process Evaluation

Outcome Evaluation

Logic Model for Kids Walk-to-School



Additional Resources

- Enhancing Program Performance with Logic Models, Univ. of Wisconsin Extension (free online course)
<http://www.uwex.edu/ces/lmcourse/>
- Community Toolbox: Developing a Logic Model or Theory of Change, Univ. of Kansas
http://ctb.ku.edu/tools//section_1877.htm
- W.K. Kellogg Foundation Logic Model Development Guide
<http://www.wkkf.org/Pubs/Tools/Evaluation/Pub3669.pdf>
- CDC Evaluation Working Group Resources
<http://www.cdc.gov/eval/resources.htm>

Step 5: *Following the recipe*



USING EVIDENCE-BASED INTERVENTIONS OR STRATEGIES

Question

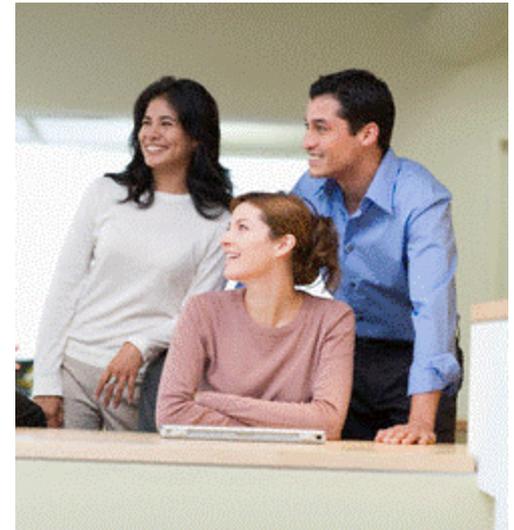
What do you think of when you hear the term “evidence-based”?



Answer

Evidence-based means a program or strategy has been:

- Implemented with a group
- Evaluated, and
- Found to be effective.



What is Evidence-Based?

“...the development, implementation, and evaluation of effective programs through systematic uses of data and research information, and appropriate use of theory-based program planning models.”



Brownson et al., *Journal of Public Health Management Practice*, 1999,5:86-97.

Terminology

- Theory-based
- Best practices
- Evidence-based
- Research-tested



Evidence-Based Program Factors

Effective community-based program design involves a combination of:

- **FIDELITY:** incorporate scientific expertise and core components completely into a program
- **FIT:** include setting and audience characteristics in planning through adaptation

Minkler & Wallerstein, *Community-Based Research for Health*, 2003

Why Focus on Evidence-Based Programs?

- More federal funders are requiring program planners to use evidence-based programs
- The best evidence may be a combination of research and practice

Advantages of Evidence-Based Programs

- Proven effective in the study populations
- Cost effective
- Shorten the time it takes to develop a program
- Reduce the time it takes to research a community
- Help narrow the evaluation

More Advantages of Evidence-Based Programs

- Add value to a grant application
- Increase likelihood of success
- Save time and resources during planning and implementation



Which would you rather choose?

Option 1



Option 2



Types of Evidence

- **Evidence-based strategy:** Promoting informed-decision making for cancer screenings
- **Evidence-based policy:** Points of decision prompts for physical activity
 - “Take the Stairs” campaign
- **Evidence-based program:** Coordinated Approach to Child Health (CATCH), program that implements physical activity and nutrition for school and after-school settings

Where Can I Find Evidence-Based Strategies?

- **Community Guide to Preventive Services:**
Summarizes what is known about the effectiveness, economic efficiency, and feasibility of interventions to promote community health and prevent disease
<http://thecommunityguide.org>
- **Other systematic reviews:**
Cochrane or review articles from the research literature
<http://www2.cochrane.org/reviews/>
- Journals that report on evidence-based programs, such as *Evidence-Based Healthcare and Public Health*



What is the Community Guide?

The Guide to Community Preventive Services is a free resource to help you choose programs and policies to improve health and prevent disease in your community. Systematic reviews are used to answer these questions:

- Which program and policy interventions have been proven effective?
- Are there effective interventions that are right for my community?
- What might effective interventions cost; what is the likely return on investment?

More than 200 interventions have been reviewed and the [Task Force on Community Preventive Services](#) has issued [recommendations](#) for their use. Learn more about the [guide](#), our [systematic review methods](#), and the [Community Guide team](#).

All Community Guide Topics

- Adolescent Health
- Alcohol
- Asthma
- Birth Defects
- Cancer
- Diabetes
- HIV/AIDS, STIs & Pregnancy
- Mental Health
- Motor Vehicle
- Nutrition
- Obesity
- **Oral Health**
- Physical Activity
- Social Environment
- Tobacco
- Vaccines
- Violence
- Worksite

Ways To Use The Community Guide

Policies

Legislation, organizational policies...

Research

Identifying gaps, setting priorities, study quality

News & Announcements



Evidence-based Findings on Worksite Health Promotion Interventions

Evidence-based recommendations to assess health risks and reduce tobacco use are now available in a newly published Community Guide systematic review.

[More »](#)



Prompting Healthcare Providers Can Increase Cancer Screenings

Systems that inform healthcare providers when individual clients are due or overdue for specific tests can increase cancer screenings.

[More »](#)



Did You Know?

April is National Child Abuse Prevention Month. Learn about childhood home visitation programs to prevent violence.

[More »](#)

Text size:

Email page

Print page

Bookmark and share

Get email updates

To receive email updates about The Guide to Community Preventive Services, enter your email address:

[What's this?](#)

Task Force Meetings

2010

February 17-18

June 16-17

October 20-21

2011

February 16-17

June 15-16

October 19-20

Other Key Information

- [Tell others about the Community Guide](#)
- [About the Community Guide](#)
- [Message from the Community Guide Director](#)

Contact Us:

 Community Guide Branch
National Center for


Community Guide

- Adolescent Health
- Alcohol
- Asthma
- Birth Defects
- Cancer
- Diabetes
- HIV/AIDS, STIs and Pregnancy
- Mental Health
- Motor Vehicle
- Nutrition
- Obesity
- Oral Health
- Physical Activity**
- Campaigns and informational approaches
- Behavioral and social approaches
- Environmental and policy approaches
- Social Environment

[Community Guide Topics](#)
Text size: **S** M L

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Get email updates

To receive email updates about Promoting Physical Activity, enter your email address:

[What's this?](#)

The Guide to Clinical Preventive Services

Together, the Community Guide and the Clinical

Promoting Physical Activity



- Studies show that regular physical activity can cut the risk for developing depression, diabetes, heart disease, high blood pressure, obesity, stroke, and certain kinds of cancer.
- Less than half of U.S. adults get the amount of physical activity that [CDC](#) recommends.

Following are the recommendations for:

- [Children](#)
- [Adults](#)
- [Older adults](#)

Community Guide Systematic Reviews

The Community Guide includes systematic reviews of interventions in the following areas:

[Campaigns and informational approaches](#)

[Behavioral and social approaches](#)

[Environmental and policy approaches](#)



[Community Guide Topics](#) > [Physical Activity](#)

Promoting Physical Activity: Environmental and Policy Approaches



Environmental and policy approaches are designed to provide opportunities, support, and cues to help people be more physically active. They may involve:

- The physical environment
- Social networks
- Organizational norms and policies
- Laws
- Public health professionals, community organizations, legislators, departments of parks, recreation, transportation, and planning, and the media

Task Force Recommendations & Findings

This table lists interventions reviewed by the Community Guide, with Task Force findings for each ([definitions of findings](#)). Click on an underlined intervention title for a summary of the review, and where available, [Research-tested Intervention Programs \(RTIPs\)](#)

Community-scale urban design and land use policies	Recommended
Creation of or enhanced access to places for physical activity combined with informational outreach activities	Recommended
Street-scale urban design/land use policies	Recommended
Transportation and travel policies and practices	Insufficient Evidence
Point-of-decision prompts to encourage use of stairs	Recommended

Text size: **S** M L XL

Email page

Print page

Bookmark and share

The Guide to Clinical Preventive Services

Together, the Community Guide and the Clinical Guide provide evidence-based recommendations across the prevention spectrum.

[More >>](#)

Contact Us:

Community Guide Branch
National Center for Health Marketing (NCHM)
Centers for Disease Control and Prevention
1600 Clifton Road NE
Mailstop E-69
Atlanta, GA 30333

[Community Guide](#)

Where Can I Find Evidence-Based Programs?

- Cancer Control PLANET—
<http://cancercontrolplanet.cancer.gov>
Look under Research-tested Intervention Programs (RTIPs)
- SAMHSA - National Registry of Evidence-Based Programs and Practices (NREPP)
<http://nrepp.samhsa.gov/>



Research-tested Intervention Programs (RTIPs)

- It is a database of actual programs and products that you can adapt for your own use
- It provides:
 - **program summaries**, including a list of journal articles about the program
 - **actual program materials** (e.g., brochures, implementation manual, fliers, handouts) or ways to access them
- It is linked to the *Community Guide to Preventive Services* recommendations

RTIPs Program Summary

- The Need
- The Program
- Community Guide Finding
- Time Required
- Intended Audience
- Suitable Settings
- Required Resources
- About the Study
- Program Scores
 - Dissemination Capability
 - Cultural Appropriateness
 - Age Appropriateness
 - Gender Appropriateness
 - Research Integrity
 - Intervention Impact
- Publications





Plan, Link, Act, Network
with Evidence-based Tools

Cancer Control P.L.A.N.E.T.

The starting point for public health professionals in comprehensive cancer control planning

[Contact Us](#)

These countries offer comprehensive cancer control resources through their P.L.A.N.E.T portals:

- [United States](#)
- [Canada](#)

If your country does not have a P.L.A.N.E.T. portal, consider using these international agency resources for comprehensive cancer control planning, implementation, and evaluation:

- [World Health Organization \(WHO\):
Cancer control: knowledge into action](#)
- [International Union Against Cancer \(UICC\):
National cancer control planning resources](#)

Cancer Control P.L.A.N.E.T. portals include 5 steps for developing a comprehensive cancer control program:

Step 1 Assess program priorities

Statistics for prioritizing cancer control efforts

Step 2 Identify potential partners

Contact information for program partners and research partners

Step 3 Research reviews of different intervention approaches

Recommendations for population-based intervention approaches

Recommendations on screening, counseling, and other clinical regimens

Step 4 Find research-tested intervention programs and products

Summary statements, ratings, and products from cancer prevention and control programs tested in research

Step 2 Move from research to practice

[Research to Reality](#) (NCI)

- Interactive community of practice for discussion, learning, and enhanced collaboration around evidence-based practice

[Find Program Partners in Cancer Control](#)

[Find Research Partners in Cancer Control](#)

- Contact information for ACS, CDC, NCI, and CoC program and research partners by state and region

Step 3 Research reviews of different intervention approaches

[Guide to Community Preventive Services](#) (Federally sponsored)

- Recommendations for population-based intervention approaches

[U.S. Preventive Services Task Force](#) (Federally supported)

- Recommendations on screening, counseling, and preventive medications

[Evaluation of Genomic Applications in Practice and Prevention](#) (EGAPP)

- Recommendations for public health genomics

[Additional Research Evidence Reviews](#)

Step 4 Find research-tested intervention programs and products

[Research-tested Intervention Programs \(RTIPs\)](#) (NCI, SAMHSA)

- Summary statements, ratings, and products from cancer prevention and control programs tested in research

Step 5 Plan and evaluate your program

[Comprehensive Cancer Control Plans](#)

[Comprehensive Cancer Control Budgets](#)

- [Survivorship](#)
- [Tobacco Control](#)

Sponsors



E-newsletter

- [Sign up](#) to receive monthly updates on Cancer Control P.L.A.N.E.T.

We welcome your feedback on the Cancer Control P.L.A.N.E.T. and its satellite web sites. To submit feedback, please [contact us](#). Thank you for helping to improve this site for the cancer control community.

Note: This web site is best viewed in [Internet Explorer](#) (version 5.0 or higher) or [Netscape](#) (version 7.0 or higher) at a [screen resolution](#) of 1024 by 768 or more.

New! - We've changed the way you select programs. Now, rather than just viewing lists by topic, you can select a number of other criteria, and you can see a list that contains programs from several topics.

Select from 102 Intervention Programs

RTIPs is a searchable database of cancer control interventions and program materials and is designed to provide program planners and public health practitioners easy and immediate access to research-tested materials.

[Register your program now](#) and be part of the RTIPs Community.

RTIPs and Research Reviews



The [Guide to Community Preventive Services](#) evaluates the effectiveness of types of interventions (as opposed to individual programs) by conducting [systematic reviews](#) of all available research in collaboration with partners. The [Task Force on Community Preventive Services](#) then uses the systematic review findings as the basis for their recommendations for practice, policy and future research. The symbol above links to applicable Community Guide findings.

If you use tobacco and are trying to quit, please visit [Smokefree.gov](#)

New on RTIPs:

- Breast Cancer Screening Promotion
 - ★ - [Proactive System to Improve Breast Cancer Screening \(Post date: March 2010\)](#)
 - [Project SAFe \(Post date: February 2010\)](#)
 - [Breast Health Education Among Hispanic Elderly Women \(Post date: December 2009\)](#)

★ New programs are released periodically. Please check for updates.

Tools Available:

- [Using What Works](#): a train-the-trainer course that teaches users how to adapt a research-tested intervention program to the local community context

We welcome your feedback on the Research-tested Intervention Programs Website. To submit feedback or a program for review, please [contact us](#). Thank you for helping to improve this site for the cancer control community.

Search

Select program attributes (if you like) and then click the button at the bottom of the page to get a list of relevant programs. Multiple selections within a category expand your criteria; selections in different categories narrow them.

Topics

- Breast Cancer Screening
- Cervical Cancer Screening
- Colorectal Cancer Screening
- Diet/Nutrition
- Informed Decision Making
- Physical Activity
- Sun Safety
- Survivorship
- Tobacco

Setting

- Community
- Religious establishments
- Rural
- Suburban
- Urban/Inner City
- School-based
- Clinical
- Workplace
- Home-based
- Day care / Preschool

Materials

- Available on RTIPs
- Partially available on RTIPs
- Available from third party only

Origination

- Canada
- United States

Age

- Children (0-10 years)
- Adolescents (11-18 years)
- Young Adults (19-39 years)
- Adults (40-65 years)
- Older Adults (65+ years)

Race/Ethnicity

- (of of the study population)
- Alaskan Native
 - American Indian
 - Asian
 - Black, not of Hispanic or Latino origin
 - Hispanic or Latino
 - Pacific Islander
 - White, not of Hispanic or Latino origin

Gender

- Male
- Female



Intervention Programs

Search Criteria Used: Religious establishments

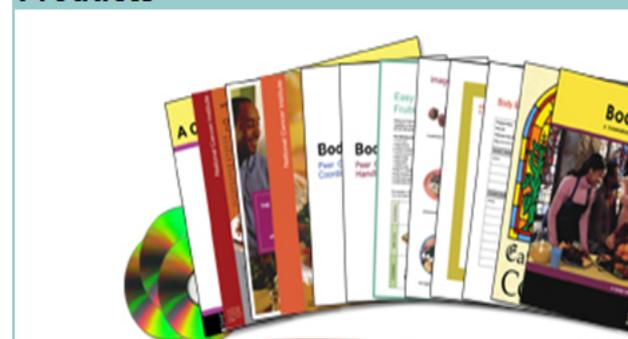
[Refine Your Search](#)

Program Title & Description (9 programs listed)	Program Focus	Populat
<p>1. Body & Soul Community-based program designed to increase fruit and vegetable consumption. (2004) NCI (Grant number not available.) , American Cancer Society (Grant number not available.) Criteria Matched: Religious establishments</p>	Behavior Modification	Faith-base
<p>2. Eat for Life Community-based program designed to promote healthy dietary habits. (2001) NCI (Grant number: CA69668) Criteria Matched: Religious establishments</p>	Behavior Modification	Faith-base
<p>3. Eating for a Healthy Life (EHL) Project Designed to promote healthy dietary habits among religious community members. (2009) NCI (Grant number: R01-CA-79077) Criteria Matched: Religious establishments</p>	Behavior Modification and Motivation	Faith-base
<p>4. Healthy Body Healthy Spirit</p>	Behavior Modification	Faith-base

Body & Soul

- [The Need](#)
- [The Program](#)
- [Time Required](#)
- [Intended Audience](#)
- [Suitable Settings](#)
- [Required Resources](#)
- [About the Study](#)
- [Program Scores](#)
 - [Research Integrity](#)
 - [Intervention Impact](#)
 - [Dissemination Capability](#)
- [Categories](#)
- [Publications](#)

Products



[Preview, download, or order free materials](#)

For optimal printing results, it is recommended to use the landscape orientation when printing program summary pages.

The Need

Church-based nutrition interventions offer a unique opportunity to increase fruit and vegetable consumption among African Americans. For fruit and vegetable programs to be widely implemented, they must be proven effective even when delivered by nonprofessional personnel, who receive less training and supervision carrying out efficacy studies. Black Churches United for Better Health and Eat for Life are two nutrition education programs that have been efficacy tested and undergo effectiveness testing in this investigation.

The Program

Body and Soul is a combination of the effective components from the Black Churches United for Better Health and Eat for Life programs. The components include:

Body & Soul: Products

ATTENTION: Program materials used in this research project may be downloaded and saved from this site. The material may be used "as is" or may be modified and adapted for your context.

Adaptation Guidelines

[Program Adaptation Guidelines](#): provides tips on how to ensure your program's optimal success in your community's setting when adapting materials that were designed and tested within a controlled research study. Before adapting programs, users should review current literature, guidelines, and other evidence reviews to update the program materials.

[Using What Works](#): a train-the-trainer course that teaches users how to adapt a research-tested intervention program to the local community context.

You may review each item individually by selecting the links provided or, unless indicated otherwise, you may order a copy of the program's product materials by using the Order link to the right:

The program CD-ROM is not copyrighted, please feel free to duplicate the program CD-ROM as needed.

[Order Free CD-ROM](#)

Body & Soul: A Guide for Your Church

Program guide

[Average Readability Score: Grade 10.3](#)

[Preview](#)

File type: PDF
[PDF Information](#)

[Download](#)

File type: PDF
[PDF Information](#)
File size: 4.25 MB
Download time: 10 minutes,
using a 56K modem.

[Eat for Life Cookbook](#)

Additional Resources

- Using What Works
http://cancercontrol.cancer.gov/use_what_works/start.htm
- Promising Practices Network on Children, Families and Communities
<http://www.promisingpractices.net/programs.asp>
- Diffusion of Effective Behavioral Interventions (DEBI) project
<http://www.effectiveinterventions.org/>



Step 6: *Serving your meal*

IMPLEMENTING A PROGRAM OR STRATEGY

Considerations in Implementation

- Staff
 - Capacity
 - Workload
 - Motivation
- Training
- Resources



- Organizational climate
 - Leadership
 - Feasibility
 - Sustainability
- Costs
- Partnerships

Pre-Implementation

- Hiring staff or recruiting volunteers
- Program staff orientation
 - Program overview
(e.g., components, outcomes)
 - Materials
 - Logistics



Pre-Implementation

- Training
 - Program (e.g., core elements)
 - Logistics for each component
 - Necessary knowledge about topic
 - Necessary skills for program (e.g., counseling/education, computer, etc.)
- Technical assistance
 - Program developers or interventionist
 - Defining core elements of program (materials/components)
 - Updating or adapting materials/components



Pre-Implementation

- Enlist community/stakeholder input
 - Best outreach/recruitment strategies
 - Estimate number in target population
- Incorporate previous needs assessment data
- Conduct formative research on any adapted materials
 - Feedback from expert panel
 - Focus groups/discussion with target populations
 - Pilot testing

Implementation

- Conduct program promotion and/or recruitment
- Track implementation of core elements of program (e.g., each component, length/# of sessions)
- Collect process measures (e.g., attendance, timeliness of activities, etc.)
- Monitor program activities

Examples of Maintenance Activities

- Referrals for further service, if needed
- Seek additional funding
- Secure a program champion
- Make program a part of organizational services

Activity 5: Organizational Readiness Checklist





Step7: *Evaluating your meal*

INTRODUCTION TO PROGRAM EVALUATION

Types of Evaluation

- Process Evaluation: Measuring the delivery of the program, rather than its effect
 - What and Who are involved to implement the program
- Outcome Evaluation: Assessing whether the program has achieved its goals and objectives
 - Awareness or knowledge change
 - Behavioral or environmental/policy change
 - Change in health status or incidence of disease

Process Evaluation

- Process evaluation can find problems **early on in the program**
- It includes an assessment of the staff, budget review, and how well the program is doing overall
- It measures various areas about the program: adoption, reach, participation, implementation, satisfaction, exposure, barriers and facilitators, and maintenance
- Common data collection methods: databases, registration sheets, surveys, and interviews

Windsor et al., 1994

Typical Process Evaluation Questions

- Who participated in the program?
- To what extent was the program implemented as intended?
- How many materials were distributed?
- How satisfied are clients with the program?
- How were participants recruited?
- How many sessions were conducted?

Outcome Evaluation

- Focuses on short-term, intermediate, or long-term outcomes
- Determine whether or not program goals/objectives were met
- To justify the need for further funding
- To ensure that only effective programs are continued

Typical Outcome Evaluation Questions

- Did program activities lead to the desired change?
- What changes occurred as a result of the program?
- Did the program increase positive behaviors?



Activity 6: Program Work Plan



Wrap Up

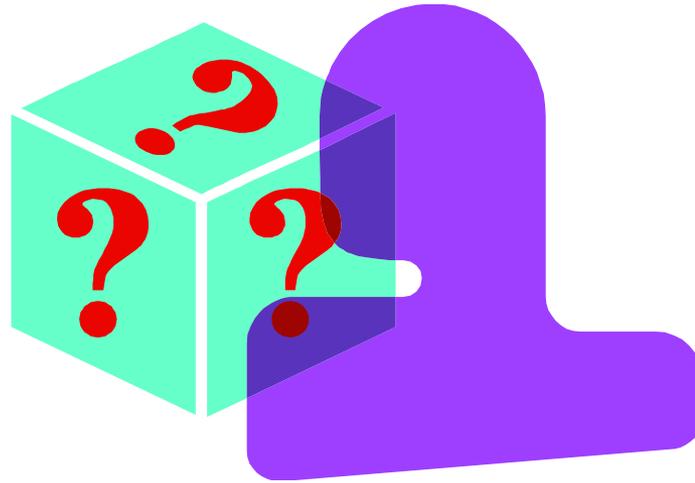
- Taking time to plan for your program is essential.
- Engaging stakeholders at the beginning of the planning process is good practice.
- Creating goals, SMART objectives, and your target audience will help you define your program and measure its effectiveness.
- Evidence-based programs/ strategies have been proven to work.

Wrap Up

- You can find evidence-based programs/strategies online at The Community Guide and Cancer Control Planet.
- Consider pre-implementation issues such as staff, resources, training, and costs prior to starting your program.
- Remember to evaluate your program.

Contact Information

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Questions?