

HEALTH OPPORTUNITIES THROUGH PEOPLE EMPOWERMENT (H.O.P.E) PROJECT EVALUATION

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MASTERS OF PUBLIC HEALTH – PHYSICAL ACTIVITY CONCENTRATION

PRESENTATION OUTLINE

PART 1: SCOPE OF THE HOPE PROJECT

PART 2: LEARNING OBJECTIVES & PROJECT
DESCRIPTION

PART 3: INTERPRETATION OF RESULTS

PART 4: DISCUSSION

PART 5: COMPETENCIES



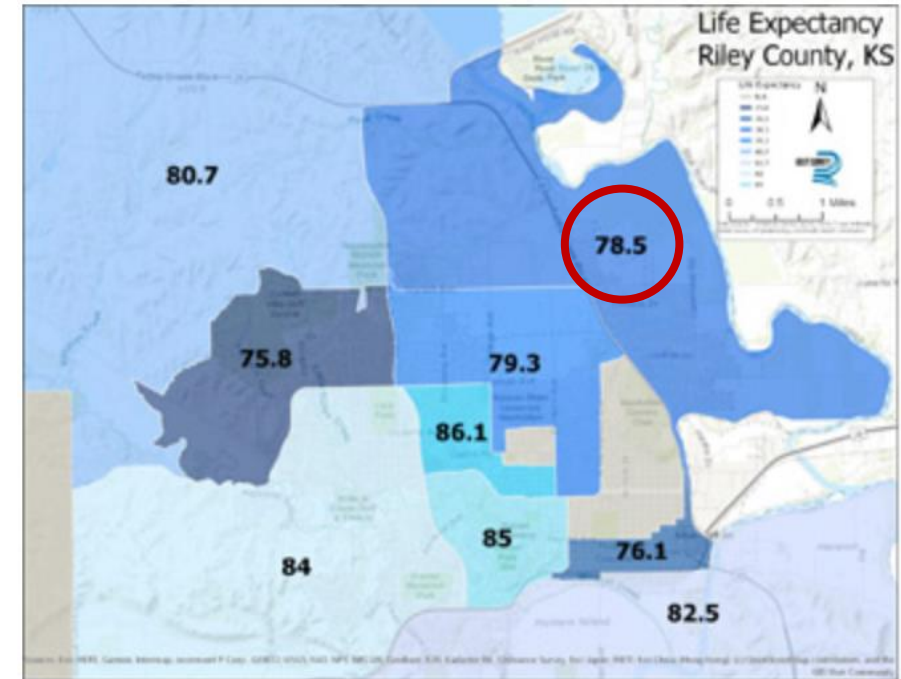
PART I: SCOPE OF THE HOPE PROJECT

HEALTH EQUITY AND HEALTH DISPARITIES

- **Health Equity** - “The absence of disparities or avoidable differences among socioeconomic (SE) and demographic groups or geographic areas in health status and health outcomes such as disease, disability, or mortality.” (Health Resources and Services Administration, 2018)
 - Health Inequity is the opposite, or the presence of these conditions
- **Health Disparities** – “Differences in society, economy, environment, or structure that results in poorer health outcomes for different groups of people in within the same society.” (Bauciu et al., 2017)
 - Examples of health disparities in the United States include:
 - Neighborhoods experiencing decreased life expectancy (Wilson & Daly, 1997)
 - Higher maternal death rates for certain demographics (Fang, Madhavan, & Alderman, 2000)
 - Children in lower SE groups have less access to opportunities compared to children in middle or higher SE classes (Epps, 1995)

COMMUNITY NEEDS ASSESSMENT FOR RILEY COUNTY

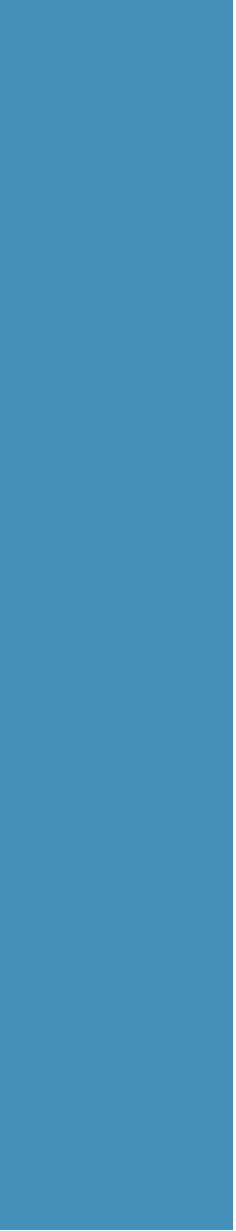
- Revealed health disparities throughout Manhattan, including:
 - Housing
 - Transportation
 - Access to food
 - Access to healthcare services
- Northview Neighborhood was chosen, but not the only area that experiences these disparities




FLINT HILLS WELLNESS COALITION

- “The focus is to improve health and equity through policy, system, environmental, and personal change” (HOPE Project Statement)
- Preceptor:
 - Brandon Irwin, PhD in Kinesiology
- Evaluation team members:
 - Kerry Priest, PhD
 - Susan Rensing, PhD
 - Frank Bailey, K-State Student in Ethnic Studies





PART 2: LEARNING OBJECTIVES & PROJECT DESCRIPTION



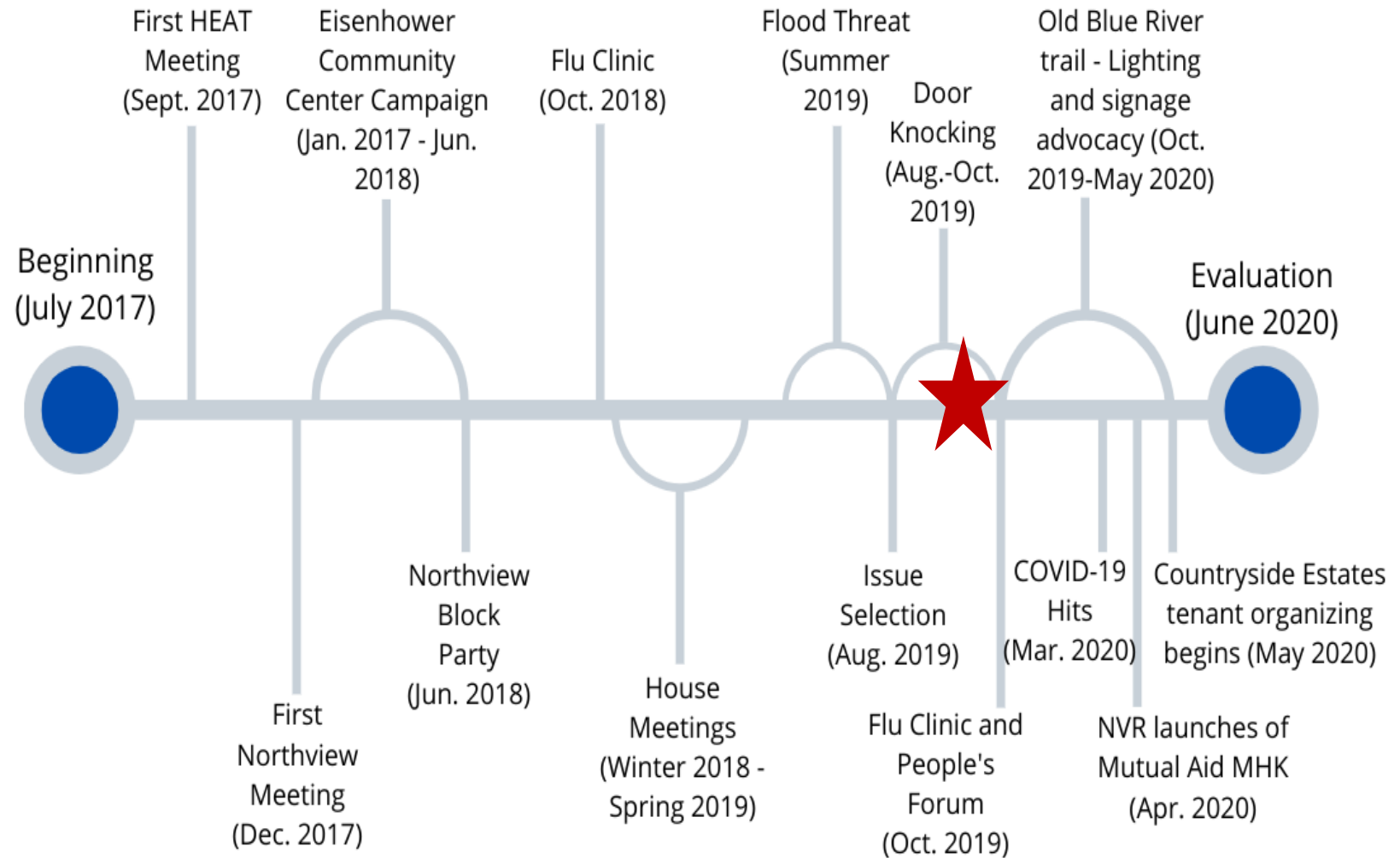
EVALUATION OF THE HOPE PROJECT

■ Background

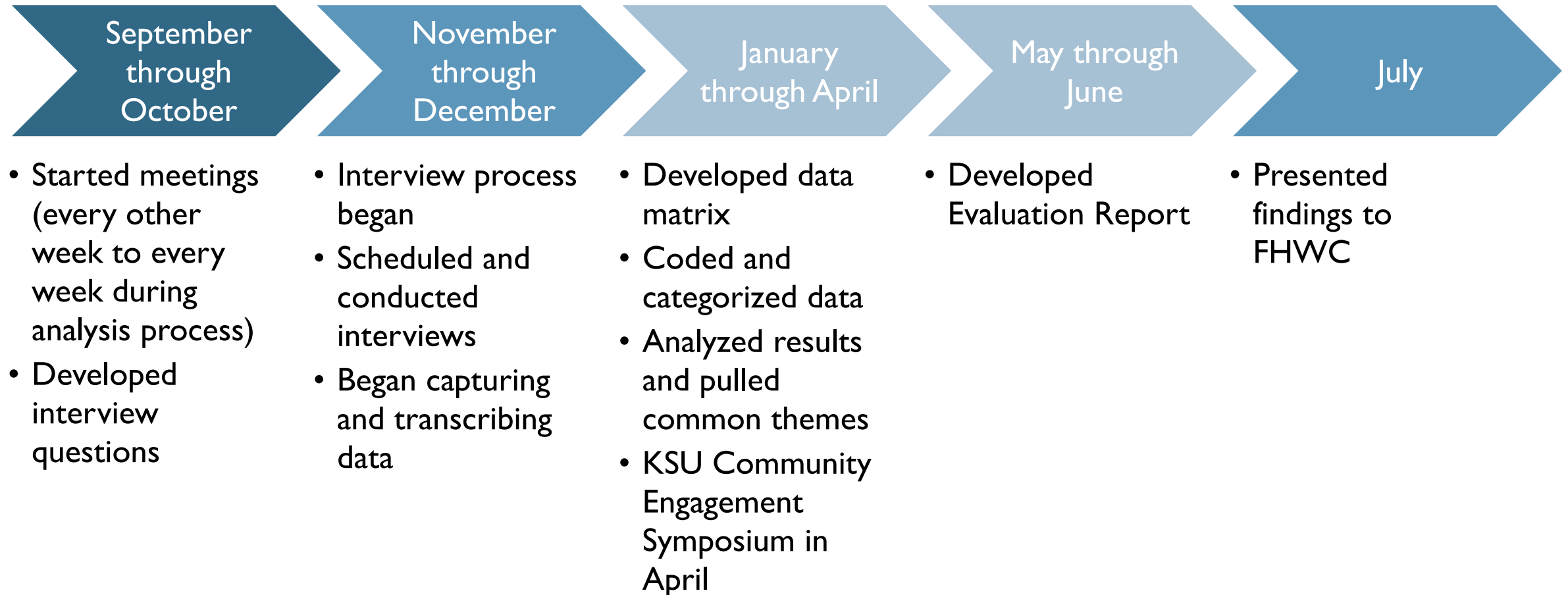
- Began in July 2017
- Ending date of Dec 2020
- Grant Funded by Kansas Health Foundation

■ Evaluation began Fall 2019

- Interviews in Nov thru Dec
- Analysis in Jan 2020



ACTIVITIES PERFORMED



SEPTEMBER THROUGH OCTOBER: APPRECIATIVE INQUIRY MODEL AND INTERVIEW DESIGNS



- Purpose of the Appreciative Inquiry design is to focus on the strengths, not the weaknesses, of a project or program (Cooperrider & Whitney, 2011).
- All 4 stages work together to point those interviewed to a common vision or goal, and allow for expansion of future work within the project (Benedictine University, 2017).
- Interview questions were based off the Discover and Dream stages of the project.
 - Discovery stage focuses on the highlights of the project; example questions include, “what do you most value about yourself, your work, and this project?” and “describe a high point in the project”.
 - Dream stage focuses on what a person would like to see in the future; example questions include, “in the future, what would you want to hear about this work?” and “what is your vision for the community?”

INTERVIEW QUESTIONS AND CONSENT FORM

Appendix 1 - Resident Interview Questions

Name:
Date:
Location:
Role in Project:

"Thank you for agreeing to participate in this interview. Today, I/we would like to ask you some questions about your experience with the Health Equity Project. You might be familiar with this project through your involvement in Northview Rising or the Greater Northview Action Team and the work happening in those spaces.

The purpose of this interview is to capture your experience and get your feedback on how you believe things are going. We want to respect your time. Feel free to answer as in depth as you would like; the more detail you provide, the more this helps us work together to make positive change in the community. During the interview, we will be taking notes to ensure we capture what you say accurately, so be assured that we are paying attention to what you are saying. We will provide an informed consent for you to sign. This is stating that we will not duplicate or give away any information that will identify you in this interview. Do you have any questions before we get started?"

1. Describe your involvement in the health equity/Northview work.
 - a. How did you get involved?
 - b. How would you describe the purpose of this work?
 - c. What has been your role in this work?
 - d. What influenced or motivated you to participate in this work?
 - e. What is it that you most value about yourself, your work, and this project?
 - f. Describe a high-point experience from your involvement in this work—a time when you were most engaged?
 - g. At what point did you take ownership of something in this work?
 - h. How did you connect with other partners in this project? Who did you interact with the most?
 - i. In your opinion, how is this work going?

- j. What are the core factors that make the project work, without which the work would be extremely difficult or challenging?
 - k. How have your feelings/attitude about yourself/your community changed with your involvement in this work?
2. What is your vision for the community? Goal for this work?
 - a. In the future, what would you want to hear about this work (in 6 months, 1 year, 5 years, etc.)?
 - b. What would be different in your community if this 'worked'?

3. Describe the changes you would make to this work.
 - a. What would enhance the impact and success of your work?
 - b. If you could do this over again, what would you do differently?

Is there anything else you want to add that we didn't ask about that you would like to share that would help us understand this work and how we can help support it?

Thank you for your time and feedback on this work. We would like to extend you an invitation to keep this conversation going with others in the community. Would you be interested in participating in a focus group? If so, we will email you with times and dates to see what would work best with your schedule.

- a. People you know, have interacted with
- b. Reputation in the community
- c. Projects they are working on

5. What are you seeing in that neighborhood work that you are excited about?
 - a. People, actions, projects, etc.
6. As an elected official/key stakeholder, what role do you play in this work?
7. What role do you play in advancing health equity in our community?
8. As an elected official/key stakeholder, what could this group do to be more effective?
 - a. In working with you, specifically
 - b. In general
9. Is there anything else that we haven't asked about that you think we should know about your perspective on this work?

Thank you for your time. If you have any other comments or questions, feel free to reach out to us.

Melanie McCarty - melanie16@ksu.edu
Frank Bailey - frank80@ksu.edu

Appendix 2 - HEAT Interview Questions

Name:
Date:
Location:
Role in Project:

"Thank you for agreeing to participate in this interview. Today, I/we would like to ask you some questions about your experience with the Health Equity Project. The purpose of this interview is to capture your experience and get your feedback on how you believe things went. We value your involvement in this project and want to respect your time. Feel free to answer all questions briefly, but the more detail you provide, the more this helps us work together to make positive change in the community. During the interview, we will be taking notes to ensure we capture what you say accurately, so be assured that we are paying attention to what you are saying. Do you have any questions before we get started?"

1. Describe your involvement in this work.
 - a. When did you get involved?
 - b. How would you describe the overall goal of this work?
 - c. What has been your role?
 - d. What influences or motivates you to participate in this work?
 - e. What is the gift you bring to this work that you are most proud of?
 - f. Describe a high-point experience in your experience with this project—a time when you were most engaged?
 - g. Who did you interact with the most?
 - i. How have you connected with other partners in this project?
 - h. How well is this work going?
 - i. What are the core factors that make the project work, without which the work would be extremely difficult or challenging?
2. What is your vision of the community?
 - a. In the future, what would you want to hear about this work (in 6 months, 1 year, 5 years, etc.)?
3. Describe the changes you would make to this work.
 - a. What would enhance the impact and success of your organization?
 - b. If you could do this over again, what would you do differently?

Appendix 4 - Informed Consent Form

INFORMED CONSENT (AUDIOTAPE) Consent Form for Audio taping and Transcribing Interviews Community Evaluation of HEAT

Researcher:

This study involves the audio taping of your interview with the researcher. Neither your name nor any other identifying information will be associated with the audiotape or the transcript. Only the research team will be able to listen to the tapes.

The tapes will be transcribed by the researcher and erased once the transcriptions are checked for accuracy. Transcripts of your interview may be reproduced in whole or in part for use in presentations or written products that result from this study. Neither your name nor any other identifying information (such as your voice) will be used in presentations or in written products resulting from the study.

Immediately following the interview, you will be given the opportunity to have the tape erased if you wish to withdraw your consent to taping or participation in this study.

By signing this form you are consenting to:

- ☐ having your interview taped;
- ☐ having the tape transcribed;
- ☐ use of the written transcript in presentations and written products.

By checking the box in front of each item, you are consenting to participate in that procedure. This consent for taping is effective until June 1, 2020. On or before that date, the tapes will be destroyed.

Participant's Signature _____ Date _____

Appendix 3 - Key Influencer Interview Questions

Name:
Date:
Location:
Organization/Role:

"Thank you for agreeing to participate in this interview. The purpose of this interview is to get your perspectives on the work happening in the Northview neighborhood that is aiming to advance health equity in our community. A key part of this work has involved interacting with elected officials. We would like to hear about your perceptions and experiences with the residents and this work. We will be using your responses to inform future iterations of our work in the Flint Hills Wellness Coalition and in Northview to make it more effective and responsive to the needs of the community.

We want to respect your time. Feel free to answer as in depth as you would like; the more detail you provide, the more this helps us work together to make positive change in the community. During the interview, we will be taking notes to ensure we capture what you say accurately, so be assured that we are paying attention to what you are saying. We will provide an informed consent for you to sign. This is stating that we will not duplicate or give away any information that will identify you in this interview. Do you have any questions before we get started?"

1. Are you aware of the Flint Hills Wellness Coalition?
 - a. People you know, have interacted with
 - b. Reputation in the community
 - c. Projects they are working on
2. What do you know about this org and what has been your experience with them?
 - a. People you know, have interacted with
 - b. Reputation in the community
 - c. Projects they are working on
3. Are you aware of the Greater Northview Action Team or Northview Rising?
4. What do you know about this org and what has been your experience with them?

NOVEMBER THROUGH DECEMBER: INTERVIEW PROCESS

- Interview process began
 - Scheduled and conducted interviews
 - 31 interviews were conducted
 - 58% response rate
 - Began capturing and transcribing data
 - Interviews were recorded and notes were transcribed after each interview

JANUARY THROUGH APRIL: DATA ANALYSIS PROCESS

- Developed data matrix
 - Interview question making column A
 - Participant name making row I
- Coded and categorized data
 - Each answer per question was reviewed
- Analyzed results and pulled common themes
 - All answers were categorized into major themes

KANSAS STATE UNIVERSITY COMMUNITY ENGAGEMENT SYMPOSIUM

- April – first product for the APE
- Originally a poster design, converted to an online platform due to COVID-19 pandemic
- Presentation for community
 - Adapted to a pre-recorded presentation
 - Link:
<https://ksu.zoom.us/rec/share/tMIQJq3y5GxOc8-X7F-FfrZ5WZrOaaa80SdMqPoNxUcZDrW9L9BwlrzdqoUTDNij>
 - Password is: G0=YJG03

MAY THROUGH JULY: EVALUATION REPORT

Developed Evaluation Report

- Answered the 4 questions based off the interviews:
 - What is working?
 - What is not working?
 - What is most important for resident led community organizing?
 - How well did the project align with the Theory of Change?

Reported findings to FHWC

- Presented findings via zoom to the FHWC.
- Paper was submitted mid-July

1	Learn about different methods of evaluation and different theories that aid in the evaluation process
2	Learn how to extract data from interview and focus groups (qualitative data)
3	Learn how to conduct effective interviews
4	Learn how to communicate efficiently and clearly to members of an interdisciplinary team
5	Learn how to communicate research findings effectively to the general public

LEARNING OBJECTIVES



PART 3: INTERPRETATION OF RESULTS

EVALUATION FINDINGS



What is working?

- Increased neighborhood connectedness
- Collaboration over common concerns
- Resident leadership and ownership
- Desire for sustainability
- Successful relationships with key influencers



What is not working?

- Population demographics are not fully represented
- Need for growth and expansion
- Confusion/Unclear vision in the beginning
- Need for financial sustainability



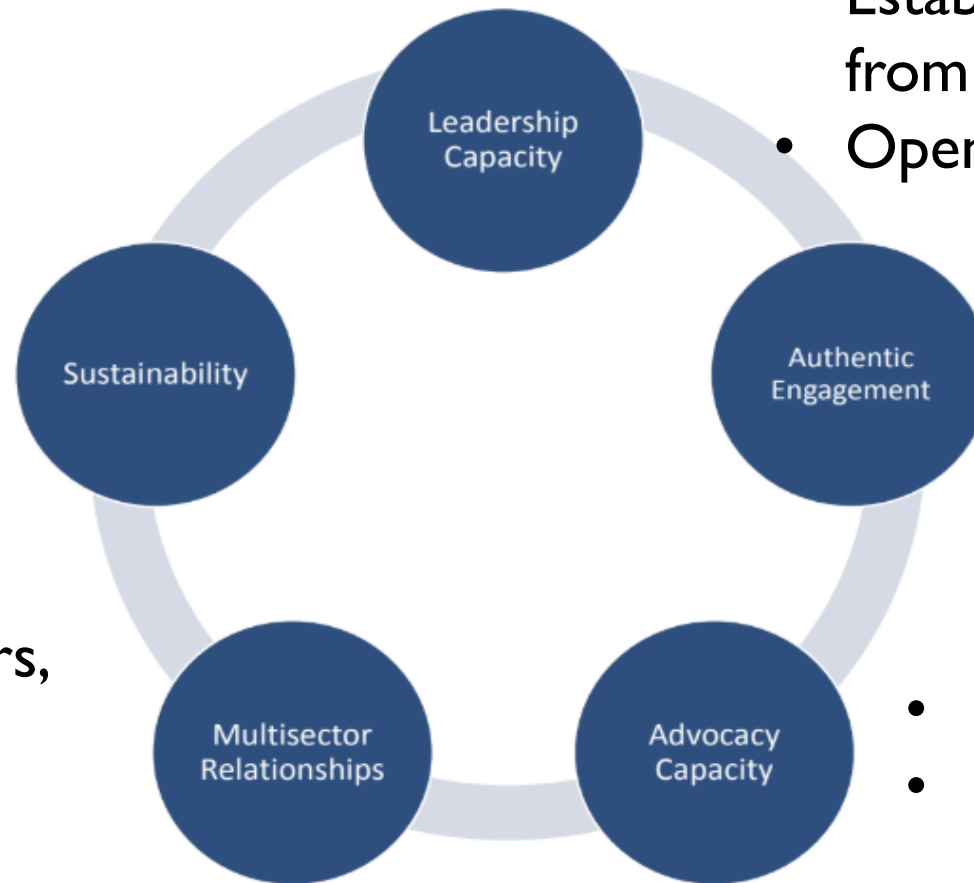
What is most important for resident led community organizing?

- It is a long process
- Resident involvement is key

EVALUATION FINDINGS CONTINUED

- Bylaws
- Handbook
- Future vision for group


- Relationships between residents, HEAT members, and community Liaison
- Relationships with Key Influencers



- Established roles and leadership from residents
- Open Leadership Concept

- Door to door engagement
- Living room huddles

- People's Forum
- Eisenhower Recreation Center



PART 4: DISCUSSION

STRENGTHS AND WEAKNESSES TO THE EVALUATION

Strengths

- Science-based evaluation approach
- Cost effective
- Replicable design
- Standards followed to ensure high quality data

Weaknesses

- Time Commitment
- Bias in interview answers



RESIDENT
INVOLVEMENT
IS THE KEY TO
SUCCESS IN
COMMUNITY
ENGAGEMENT
PROGRAMS



PART 5: COMPETENCIES

MPH FOUNDATIONAL COMPETENCIES

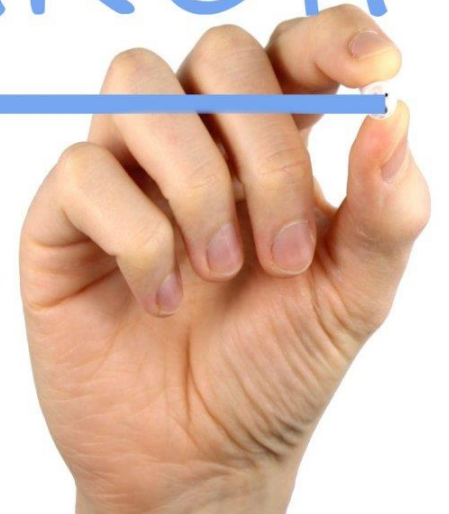
Number and Competency	
4	Interpret results of data analysis for public health research, policy or practice
11	Select methods to evaluate public health programs.
16	Apply principles of leadership, governance, and management, which include creating a vision, empowering others, fostering collaboration, and guiding decision making.
18	Select communication strategies for different audiences and sectors.
21	Perform effectively on interprofessional teams.

COMPETENCY 4:

Interpret results of data analysis
for public health research,
policy, or practice

-
- Oral presentation to the FHWC
 - Qualitative data analysis and interpretation

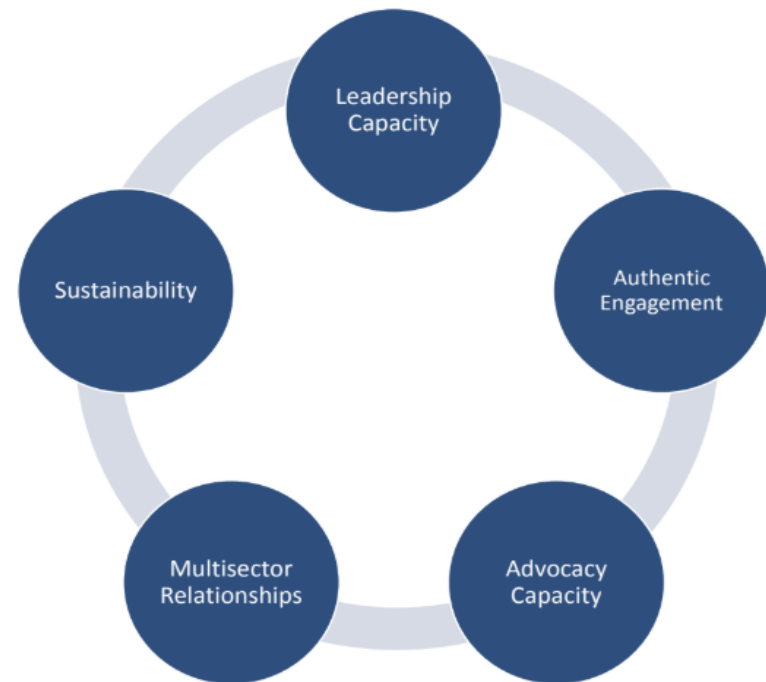
RESEARCH



COMPETENCY II:

Select methods to evaluate public health programs

- Designing interviews on Appreciative Inquiry model
- Kansas Health Foundation Theory of Change model for project evaluation



COMPETENCY 16:

Apply principles of leadership, governance, and management, which include creating a vision, empowering others, fostering collaboration, and guiding decision making.

-
- Communication lead
 - Emails and follow-up
 - Coordinating meetings
 - Sharing data analysis findings
 - Interview process

COMPETENCY 18:

Select communication strategies
for different audiences and
sectors

-
- Interview Process
 - Community engagement presentation
 - FHWC presentation

COMPETENCY 21:

Perform effectively on
interprofessional teams

- Team composition
- Guidance from people with different viewpoints and backgrounds



MPH EMPHASIS AREA COMPETENCIES

Number and Competency		Description
1	Population Health	Investigate the impact of physical activity on population health and disease outcomes
2	Social, Behavioral, and Environmental Influences	Investigate social, behavioral, and environmental factors that contribute to participation in physical activity
3	Theory application	Examine and select social and behavioral theories and frameworks for physical activity programs in community settings.
4	Developing and evaluating physical activities interventions	Develop and evaluate physical activity interventions in diverse community settings
5	Support evidence-based practices	Create evidence-based strategies to promote physical activity and communicated them to community stakeholders.

COMPETENCY I:

Population Health



- Focus on population health for HOPE project

COMPETENCY 2:

Social, behavioral, and
environmental influences

- Environmental factors, such as safety concerns, brought residents together for HOPE project



COMPETENCY 3:

Theory application

-
- Appreciative Inquiry model for interviews
 - Kansas Health Foundation Theory of Change for evaluation

COMPETENCY 4:

Developing and evaluating
physical activity interventions

-
- Evaluation of a project, though not directly dealing with physical activity

COMPETENCY 5:

Support evidence-based practice

-
- HOPE project had an evidence-based approach
 - Standards of qualitative data

SUMMARY

- Gained experience working on multidisciplinary teams within the Flint Hills Wellness Coalition
- Gained understanding for the evaluation process
- Gained understanding in qualitative analysis
- Gained experience with community led initiatives and projects

THANK YOU!

Graduate Committee

- Dr. Mary McElroy
- Dr. Susan Resning
- Dr. Gina Besenyi

Flint Hills Wellness Coalition

- Dr. Brandon Irwin
- Dr. Kerry Priest
- Frank Bailey

MPH Program

- Dr. Ellyn Mulcahy
- Barta Stevenson