

Partners in Evaluation & Research Center

VISION:

- Leading **collaborative evaluation** and research to improve the health of communities.

MISSION:

- To implement collaborative and meaningful evaluation and research by
- Designing projects which answer relevant questions
- Providing results that help organizations learn and take action

The PiER Center exists to support Kaiser Permanente Colorado's (KPCO) **social mission** to improve the health of the communities we serve.

Today's Presentation

PART 1: COMMUNITY COALITIONS ROLE

- Evaluation Approach
- About the Project
- Coalition Capacity
 - Structure & Functioning
 - Ingredients for Success

****Break/Questions****

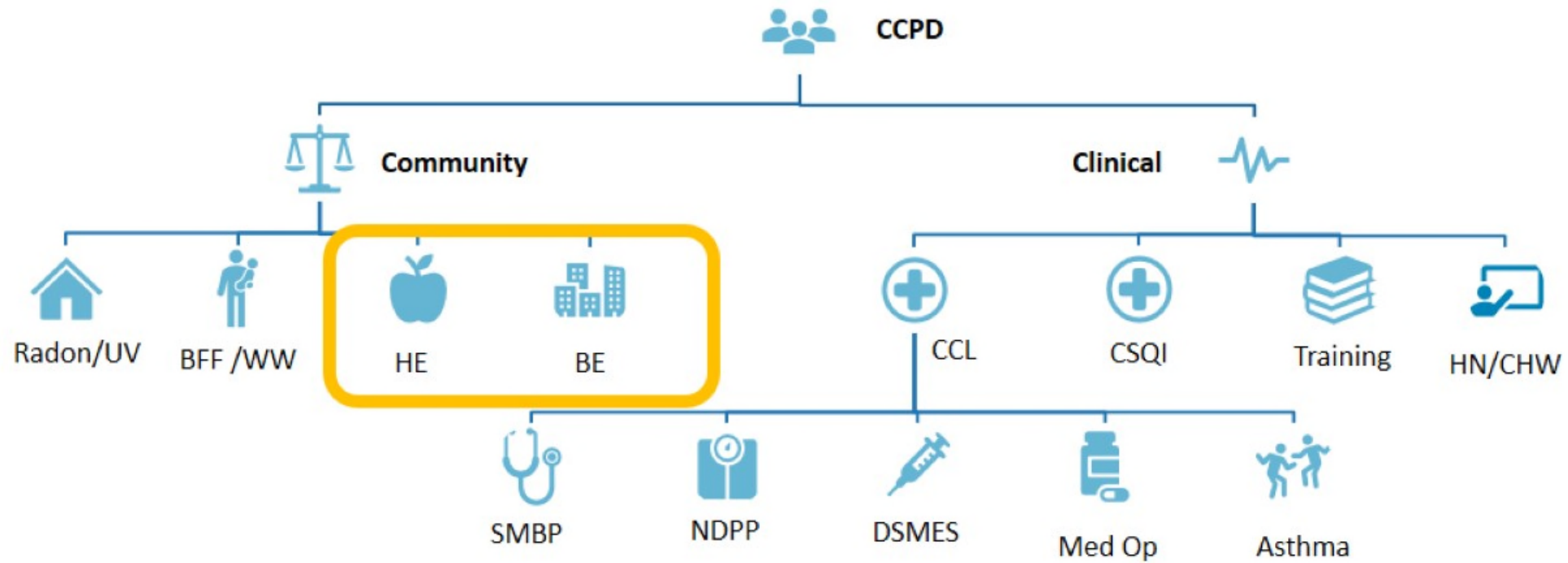
PART 2: POLICY & ENVIRONMENT CHANGES

- Coalition Successes
- Impact on HEAL
- Lessons Learned
 - Unintended Consequences
 - Implications

****Questions****

CO Dept. Public Health & Environment's Cancer, Cardiovascular, and Pulmonary Disease (CCPD) Grant Program

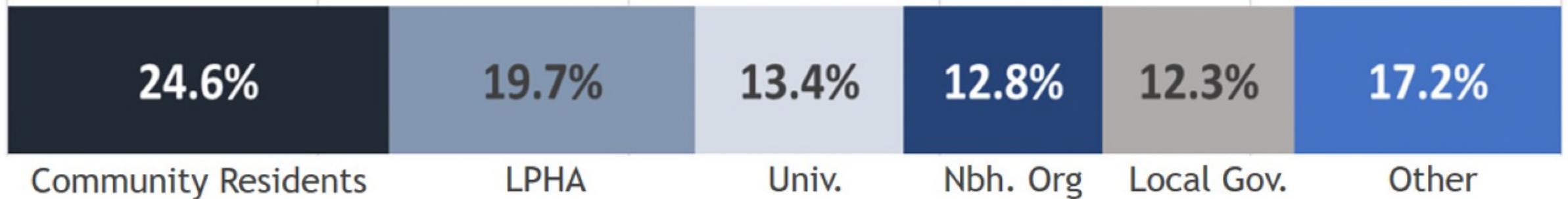
FY2016-2018 | \$46M Invested | 63 Programs | 17 Strategies



About the Coalitions



HEAL Community Coalition Partners:



EVALUATION QUESTION

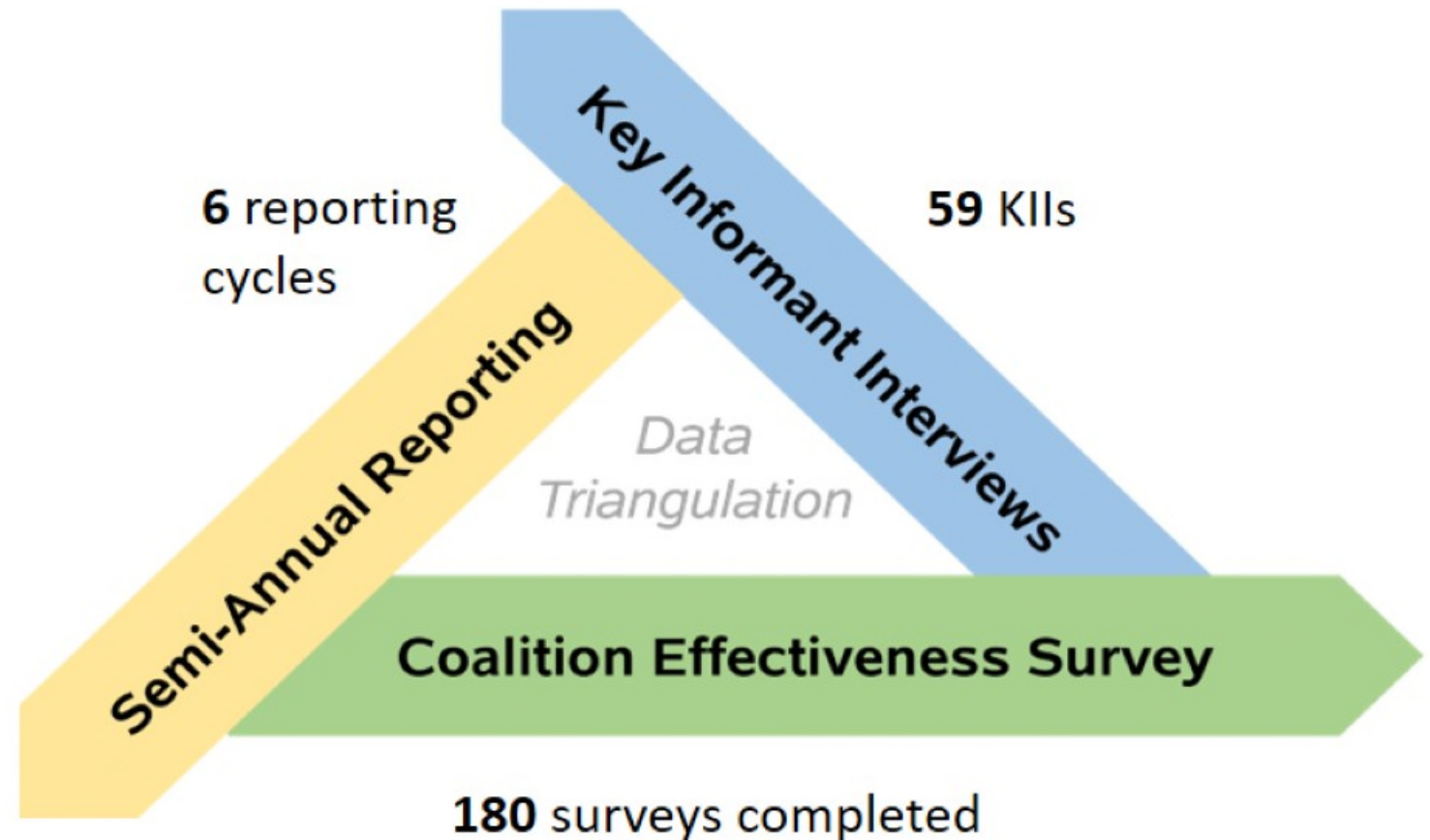
To what extent have **community coalitions** been effective at changing policies, practices, and environments to support **HEAL**?

What factors help to explain **successes or challenges**?

EVALUATION APPROACH

*Mixed-methods
evaluation design*

*Applied a
population health
perspective*



EVALUATION APPROACH



**Phase 1:
Capacity**

(KII, CE, SAR)



**Phase 2:
Adoption**

(KII, SAR)



**Phase 3:
Implementation**

(KII, SAR)



**Phase 4:
Impact**

(KII, SAR)

Evaluation of HEAL Policy Change Process

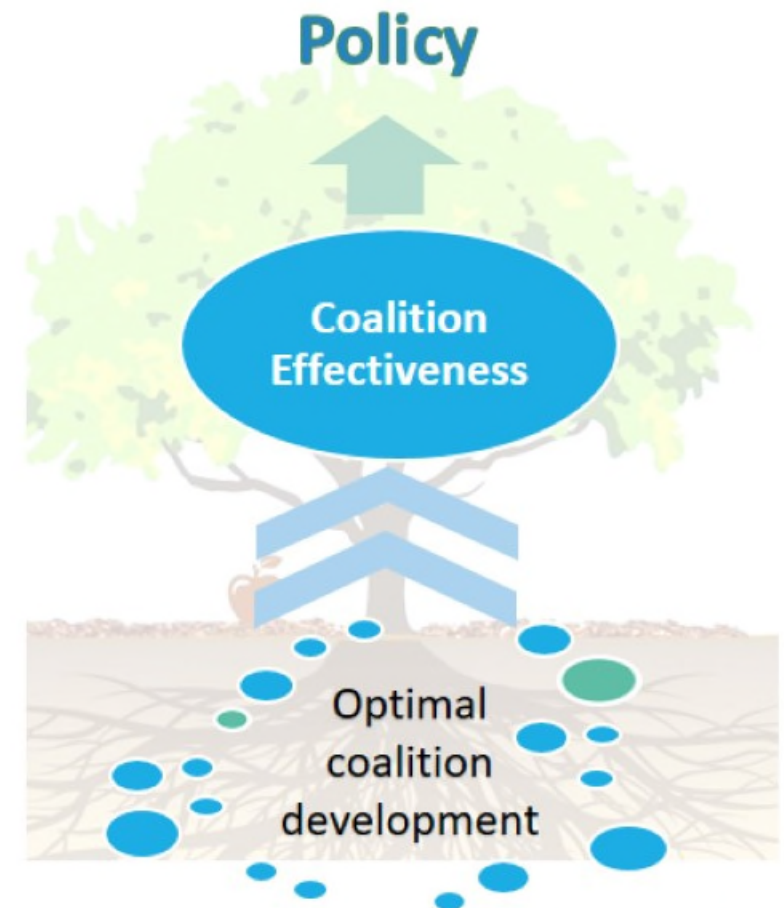
Coalition Capacity & Functioning

EVALUATION FINDINGS - PHASE 1

EVALUATION FINDINGS

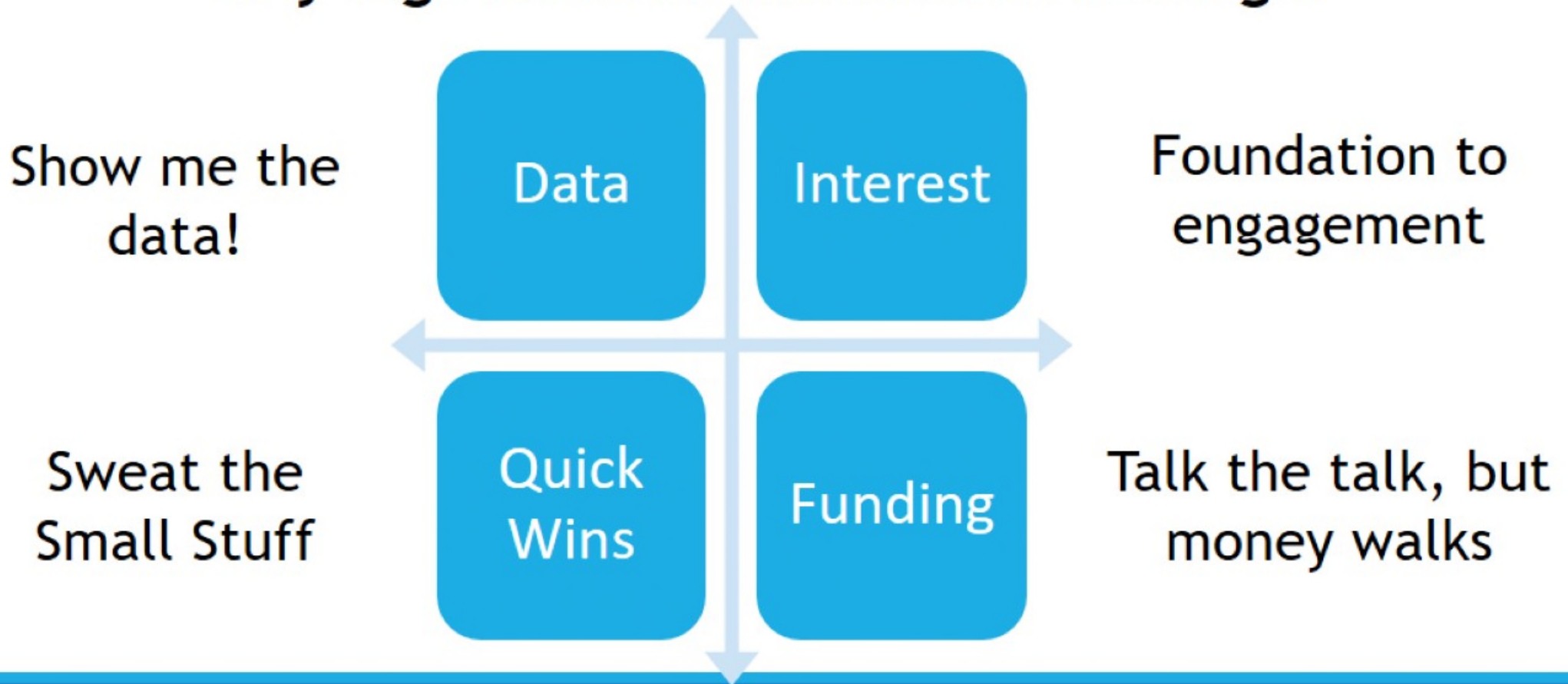
Key Informant Interview (KII) Results:

- (1) **“Key Ingredients”**: contextual factors that facilitate changes
- (2) **“P’s of Policy”**: components of policy transformation that contribute to coalition development and success in community change



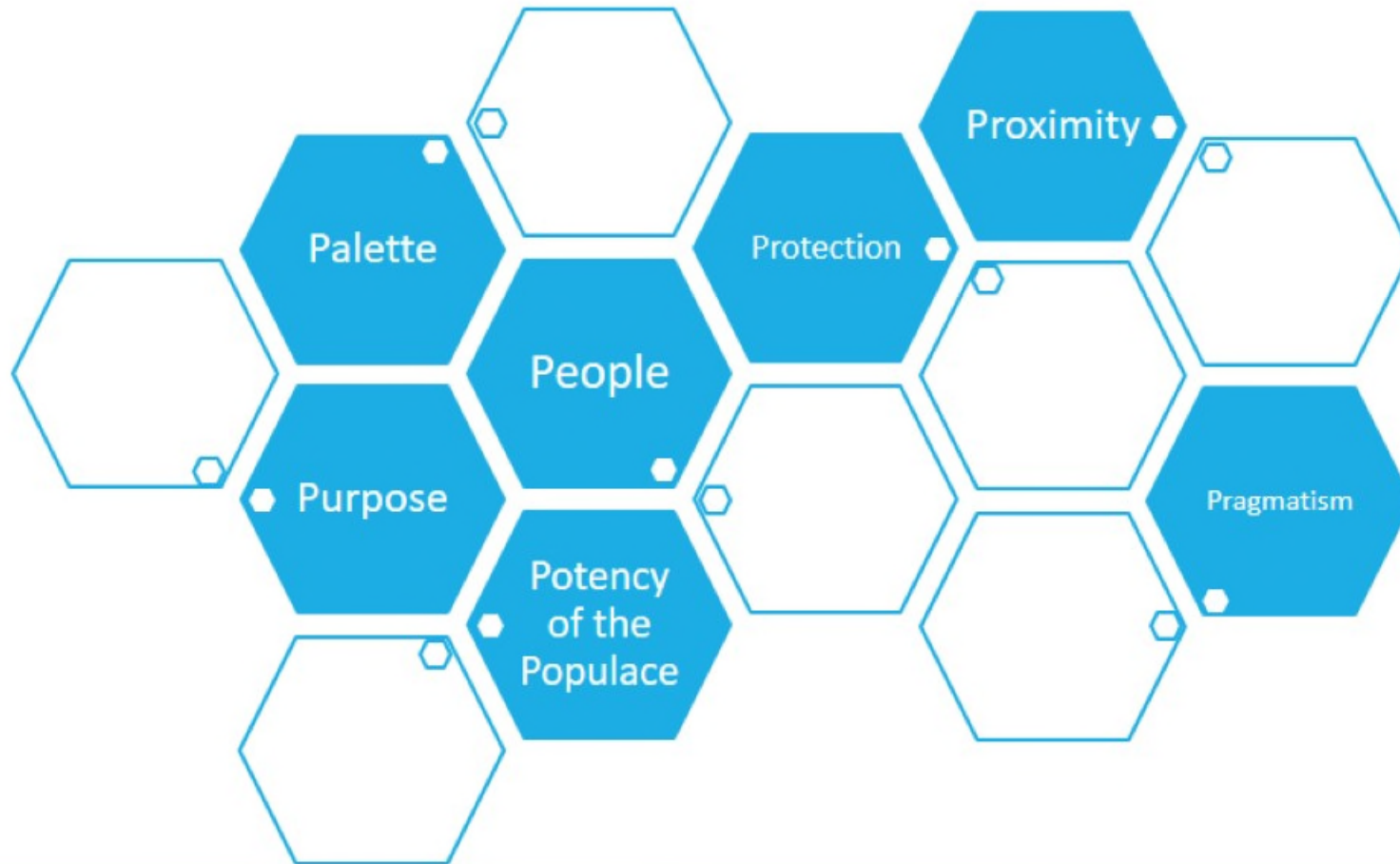
EVALUATION FINDINGS

Key ingredients that facilitate change:



EVALUATION FINDINGS

P's of Policy to support optimal coalition development

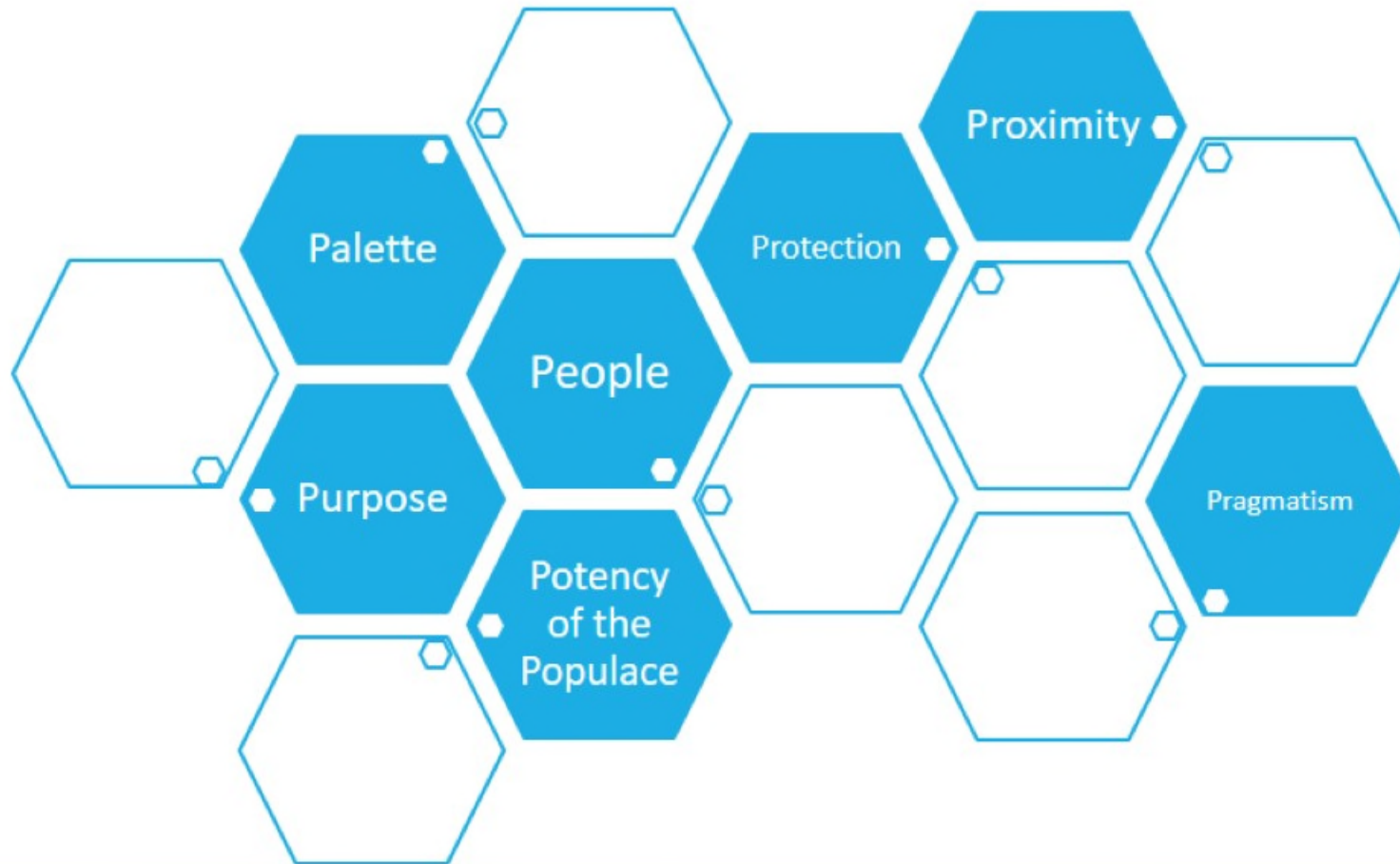


Purpose:

- Shared vision and belonging essential to mobilize
- Priorities give clear direction & keep momentum moving forward

EVALUATION FINDINGS

P's of Policy to support optimal coalition development

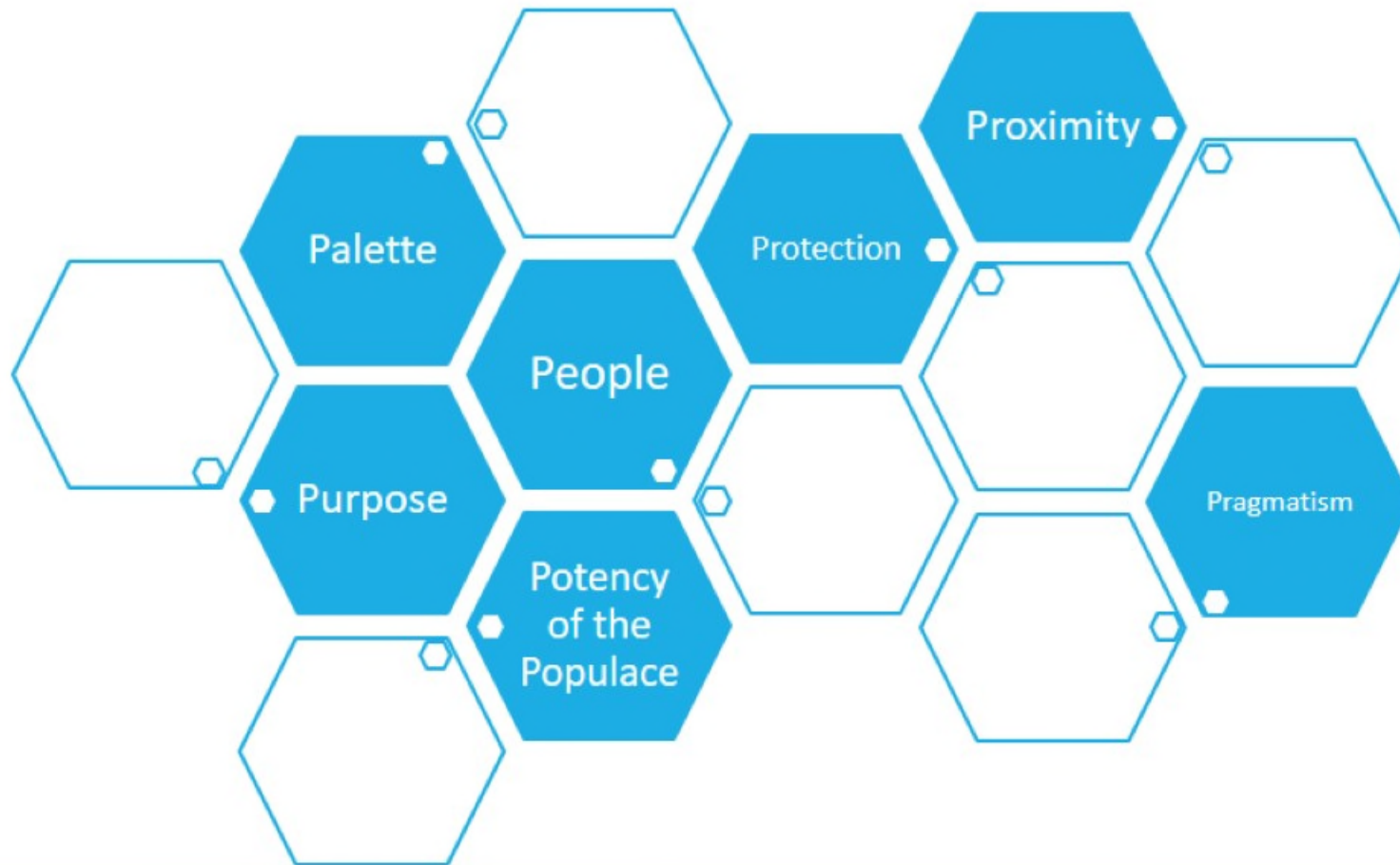


People:

- 'The right people at the right time'
- 'Strategic talent and pointed passion'

EVALUATION FINDINGS

P's of Policy to support optimal coalition development

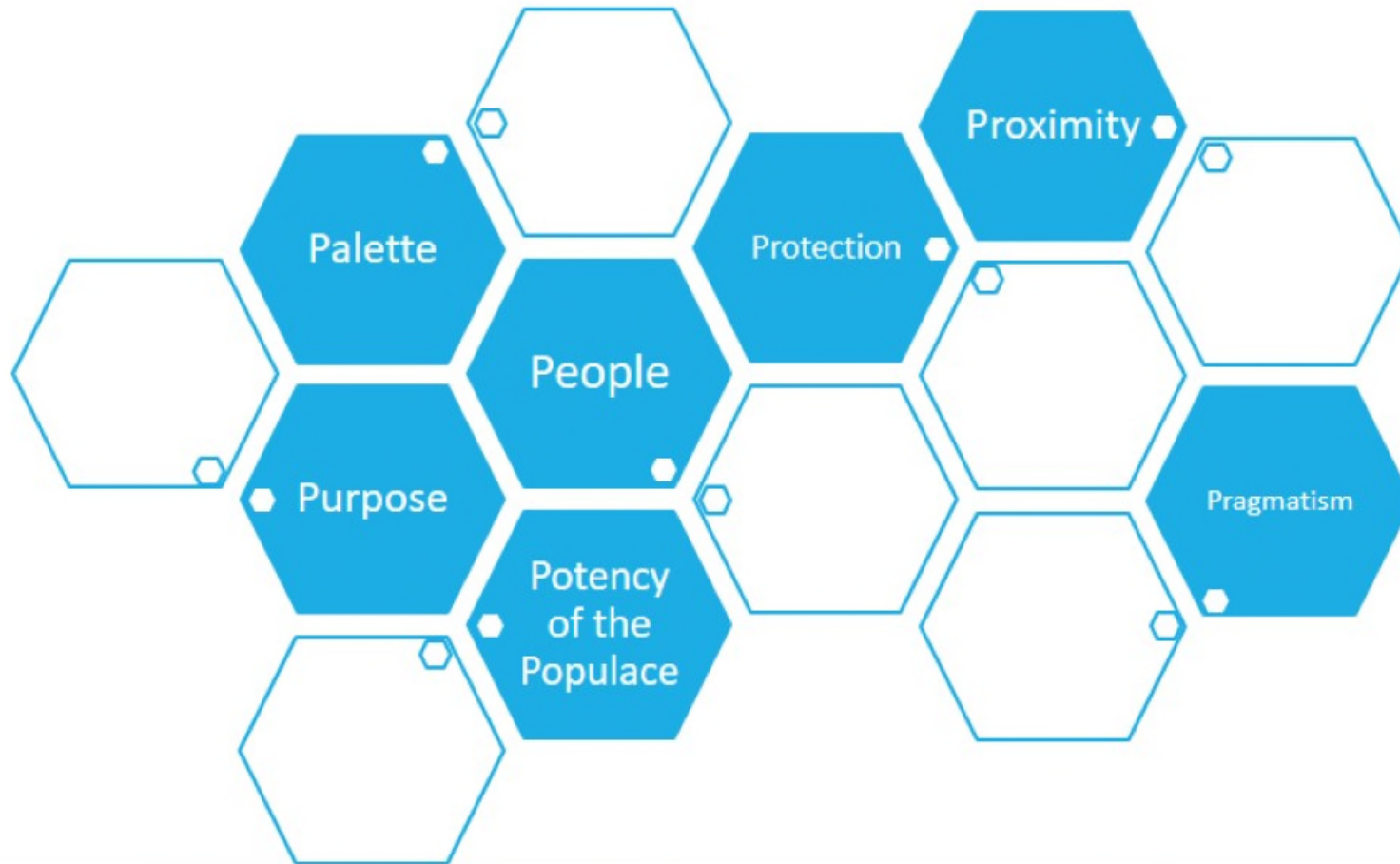


Palette:

- Everyone contribute to the BIG picture.
- Trust & collaboration
- 'It takes a village'

EVALUATION FINDINGS

P's of Policy to support optimal coalition development

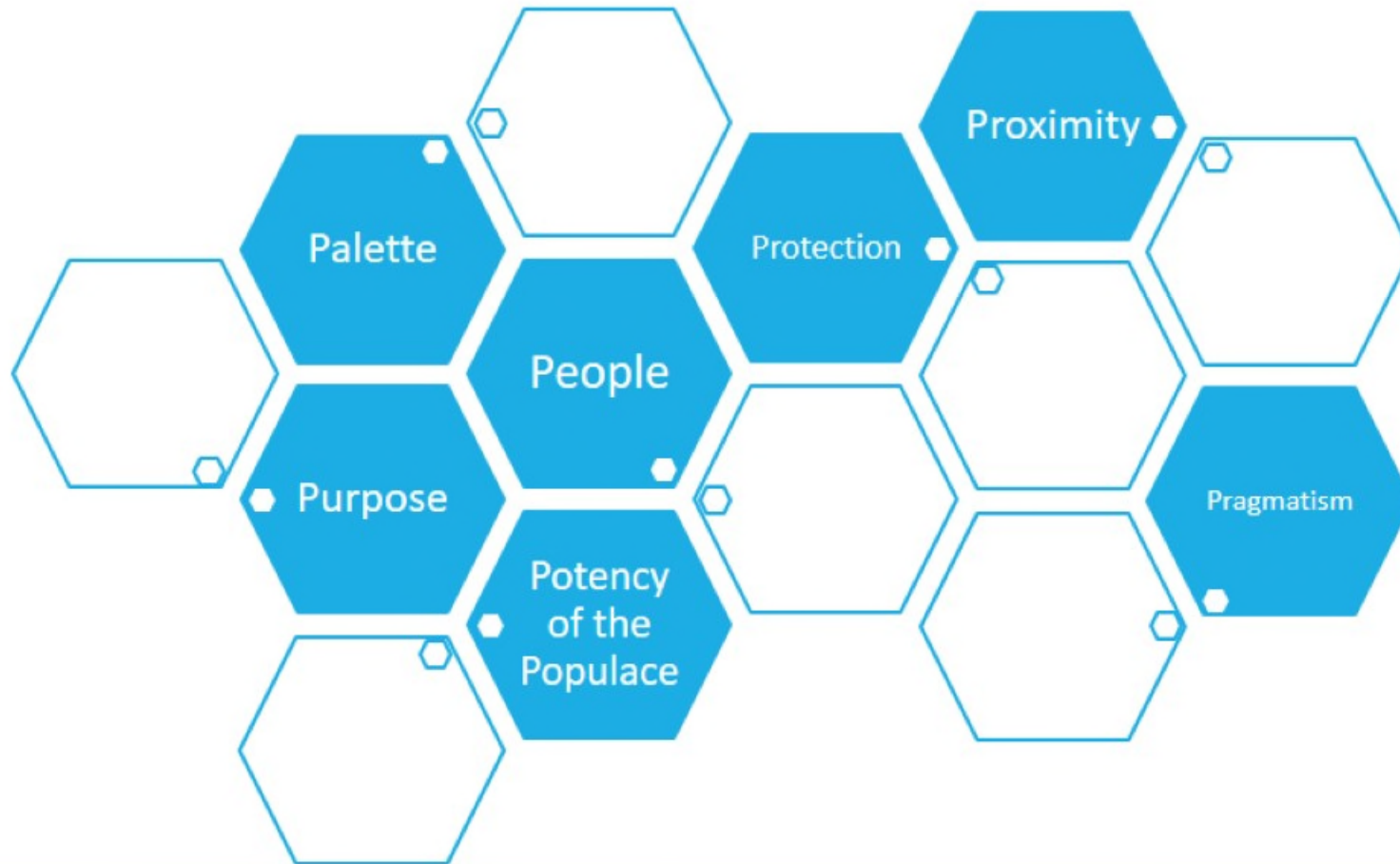


Proximity:

- Communities are the frontlines to solving problems
- Community offers unique perspective

EVALUATION FINDINGS

P's of Policy to support optimal coalition development



Pragmatism:

- Live within bandwidth and budget
- Essential to be practical

Activity Break

EVALUATION QUESTION

To what extent have **community coalitions** been effective at changing policies, practices, and environments to support **HEAL**?

What factors help to explain **successes or challenges**?

EVALUATION APPROACH



**Phase 1:
Capacity**

(KII, CE, SAR)



**Phase 2:
Adoption**

(KII, SAR)



**Phase 3:
Implementation**

(KII, SAR)



**Phase 4:
Impact**

(KII, SAR)

Evaluation of HEAL Policy Change Process

Policy and Environmental Changes

EVALUATION FINDINGS – PHASES 2 & 3

HEALTHY EATING

\$4.5M Invested | 6 Programs Funded | 11 Counties | 98 Sites

What was the goal?

↑ opportunities via policies, practices, & environmental changes


↑ increase consumption of healthy food and beverages




Who was targeted?

Employees, customers and guests of organizations and businesses that have policies and programs for healthy food and beverages

What did grantees achieve during the grant cycle?

 **55** policies were adopted & implemented (e.g., healthy vending policy)

 **54** practices were adopted & implemented (e.g., adding SNAP/WIC programs)

ACTIVE LIVING

\$3.3M Invested | 5 Programs Funded | 4 Counties | 62 Sites

What was the goal?


- ↑ opportunities via policy and environmental changes
- ↑ active transportation and physical activity




Who was targeted?

Community residents including youth and adults living in targeted neighborhoods or communities.

What did grantees achieve during the grant cycle?

 **16** policies adopted to support development of active living friendly environments

 **45** enhancements made to the built environment & **24** funding sources identified

EXAMPLES: Denver CALC



SRTS – Trevista Elementary School



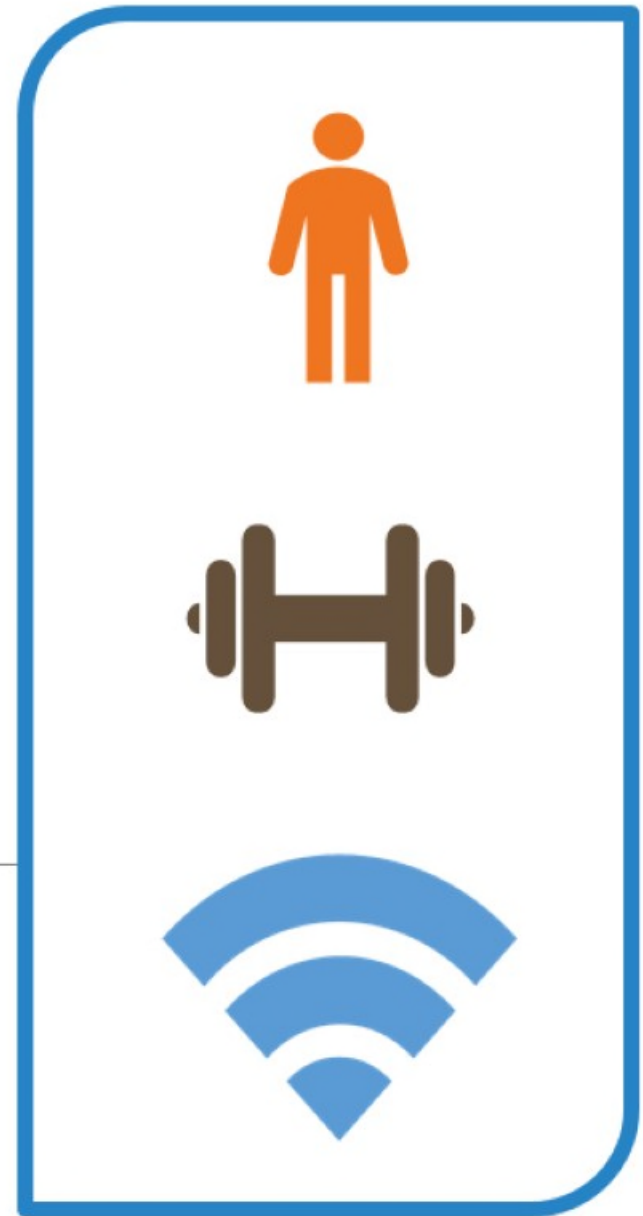
Barnum's Weir Gulch Trail - upgrade



Wayfinding Bike Tour

Impact on HEAL

EVALUATION FINDINGS -PHASE 4



Estimating Impact on HEAL: Population Dose

REACH



Coalition efforts estimated to directly impact ~**XXK** people
(~10% of individuals within scope of PSE)

x

EFFECTIVENESS



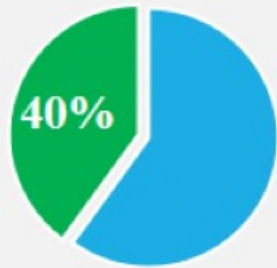
Estimated that policy/env. changes had a **small** effect on HEAL behaviors.

HEALTHY EATING

\$4.5M Invested | 6 Programs Funded | 11 Counties | 98 Sites

What was the potential impact on health?

ELIGIBLE



~ **550K** of 1.4M
people eligible for
initiative (40%)

REACH



MODERATE
~**50K** of 550K
people exposed to
initiatives (9%)

STRENGTH



LOW
Estimated little
effect on **healthy**
eating (<1%)

DOSE



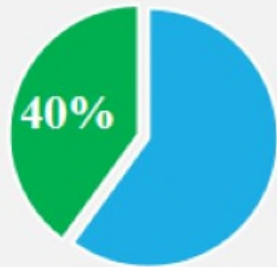
LOW
Unlikely to have
measurable impact
at population level

ACTIVE LIVING

\$3.3M Invested | 5 Programs Funded | 4 Counties | 62 Sites

What was the potential impact on health?

ELIGIBLE



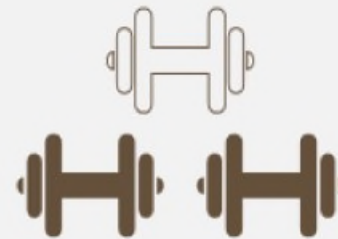
~ **363K** of 1.7M individuals eligible for initiatives (22%)

REACH



HIGH
~**36,287** of 363K people exposed to BE (10%)

STRENGTH



MODERATE
Estimated some effect on **active living** (2%)

DOSE



MODERATE
Likely impact **active living** but not measurable (2%)

Lessons Learned

SUMMARY | LESSONS LEARNED | IMPLICATIONS

Summary

- **47** policies adopted; **88** environmental changes implemented across **127** unique sites.
- An estimated **86,000** individuals were exposed to HEAL initiatives.
- The number and types of changes implemented varied reflected the nature of each coalition's work.

Lessons Learned

➤ Facilitators

- Leveraged partnerships have a snowball effect
- Small wins creating the ‘default healthy choice’

➤ Barriers

- Moving the needle takes time
- Authentic community engagement
- Perennial problem of public health (grant funding)

Implications

- Coalitions can share core commonalities, but each retains distinct qualities.
- Important to concurrently consider the factors of their unique contexts and how that will impact their success.
- Ongoing evaluation of the identified programs will be crucial to monitor the impact of these changes on healthy behaviors over time.

Acknowledgements



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Questions?

CCPD FY16-18 EVALUATION FINDINGS | HEAL INITIATIVES

Cross-Site Evaluation Approach

Reach

Reach is percentage of people from the target population who are touched by (exposed to) a strategy



Reach Rating Categories:	Low	Moderate	High
	<2%	<10%	≥10%

Cross-Site Evaluation Approach

Strength

Strength is change in health behavior or disease risk factor as a result of being exposed to a strategy

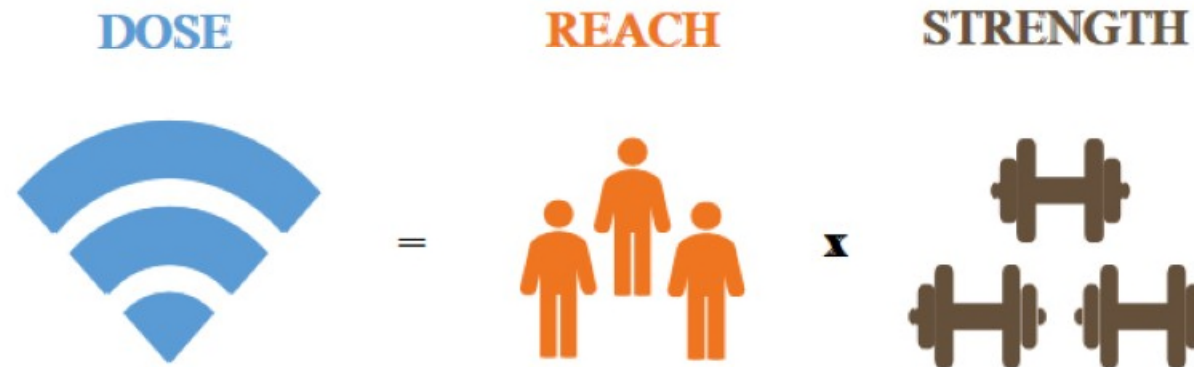


Strength Rating Categories:	Low	Moderate	High
	<20%	≥20%	≥50%

Cross-Site Evaluation Approach

Population Dose

Population Dose is a measure of potential impact on health-related outcomes across an entire population



Dose Rating Categories:	Low <2%	Moderate ≥2%	High ≥5%