

Taking Program Evaluation Local

Developing *The Right To Know*
Evaluation Chapter

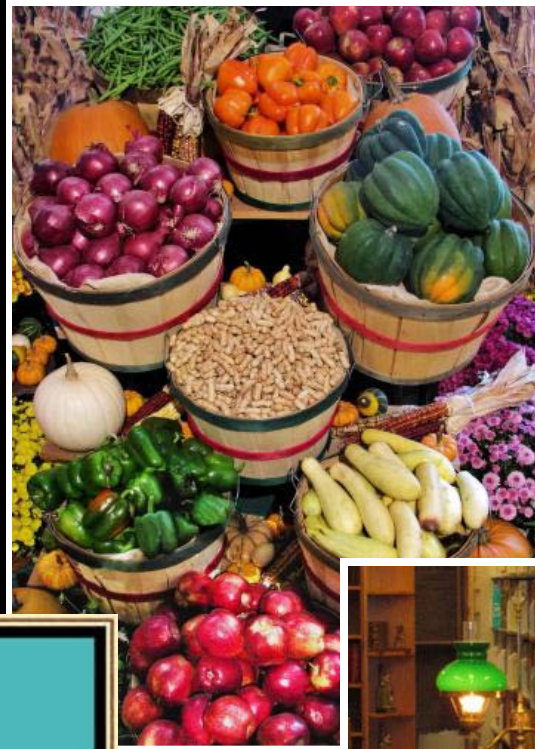
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Discussing
CDC's *The
Right To
Know*
Evaluation
Chapter
Development

- Campaign background
- Need for an expanded chapter
- Using campaign logic model
- Types of evaluation for campaign
- Tools for local evaluation

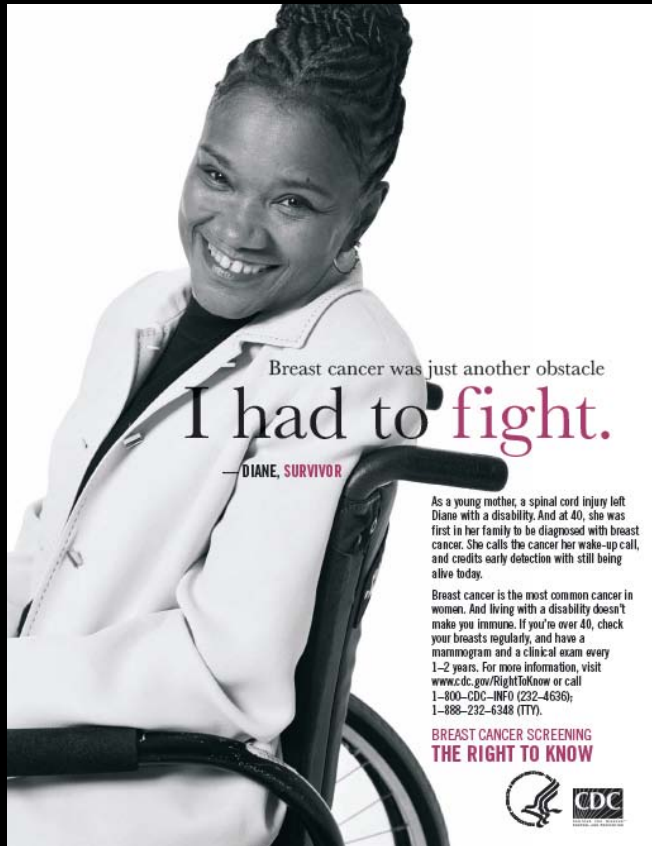
Going Local...



Why conduct evaluation locally?

- Assess the best opportunities for reaching your audience with your messages
- Use evaluation data to improve program
- Use evaluation data to secure future funding

The Right To Know Campaign



- Health promotion program from CDC to educate women with disabilities about their risk for breast cancer and encourage them to get screened
- Dissemination guide now available for communities to implement
- Module B implementation

The Right To Know

Campaign Evaluation

- Process evaluation chapter included with dissemination guide
- CDC working with Porter Novelli to expand the chapter to include outcome evaluation



It's your life.

And no one can protect it better than you.

JUDI, BREAST CANCER SURVIVOR

If you're over 40, check your breasts regularly, and have a mammogram and a clinical exam every 1–2 years. For more information, visit www.cdc.gov/RightToKnow or call 1–800–CDC–INFO (232–4636); 1–888–232–6348 (TTY).

**BREAST CANCER SCREENING
THE RIGHT TO KNOW**



Evaluation Chapter

- A step by step guide to conducting evaluation for an experienced program manager
- Designed to give teams implementing *The Right To Know* campaign the tools they need to conduct process and outcome evaluation





It may take more energy, but
it's worth it.

JUNE, BREAST CANCER SURVIVOR

June, who was born with cerebral palsy, knows first-hand that we're not immune to breast cancer just because we live with a disability. She tells us to ask for an accessible screening and not let the system decide what's best.

Finding her cancer early allowed June to go on with her life. Screening allowed her to take control. If you're over 40, check your breasts regularly, and have a mammogram and a clinical exam every 1-2 years. For more information, visit www.cdc.gov/RightToKnow or call 1-800-CDC-INFO (232-4636); 1-888-232-6348 (TTY).

**BREAST CANCER SCREENING
THE RIGHT TO KNOW**



Six Step Plannin g Process

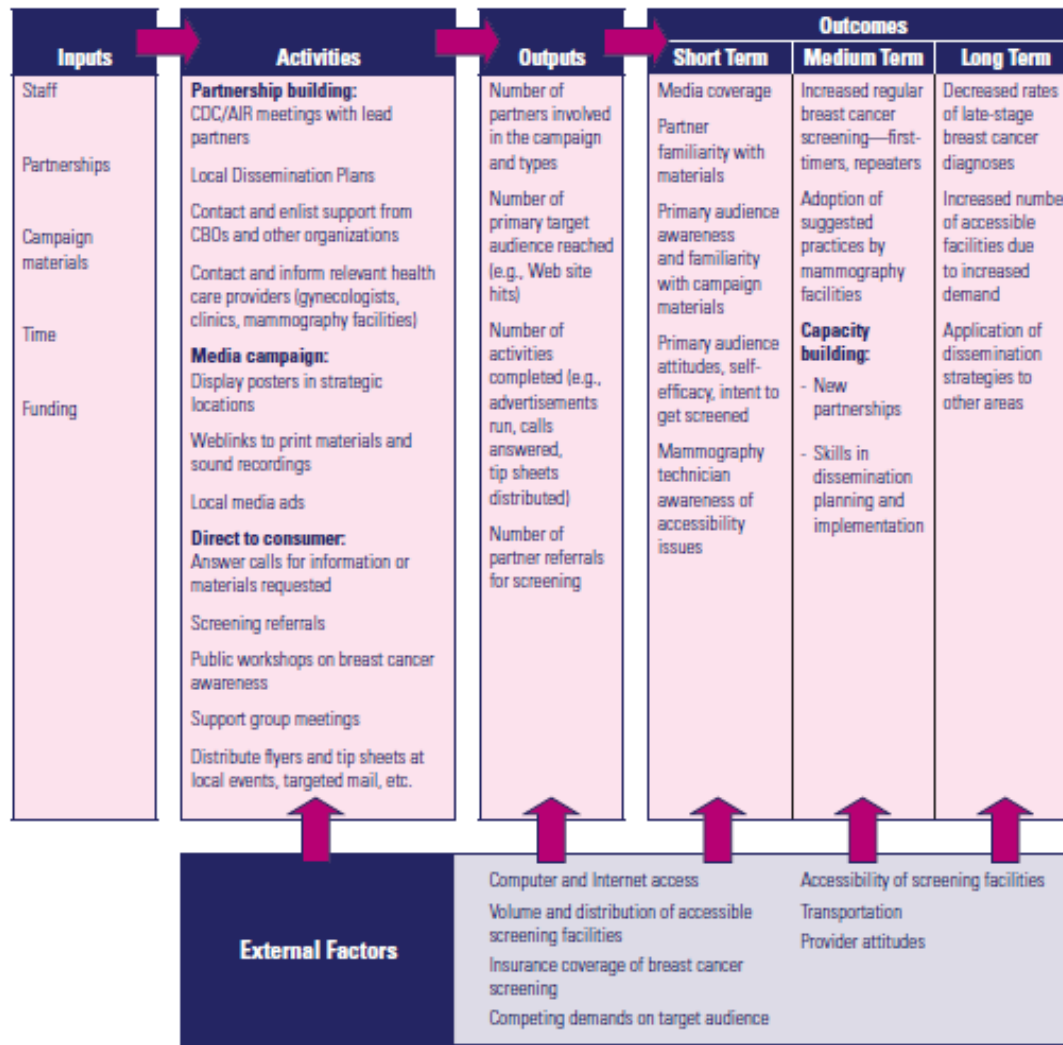
- Engaging stakeholders
- Selecting key evaluation questions
- Identifying program elements to monitor
- Determining how to collect information
- Developing data analysis and reporting plan
- Using and sharing lessons learned.

Logic Model

The *Right To Know* evaluation chapter uses a logic model to guide evaluation development and implementation.

Pilot Campaign Logic Model

Dissemination and Evaluation of Breast Cancer Screening Materials for Women with Physical Disabilities



Outputs

Number of partners involved in the campaign and types

Number of primary target audience reached (e.g., Web site hits)

Number of activities completed (e.g., advertisements run, calls answered, tip sheets distributed)

Number of partner referrals for screening

Process Evaluation

- Is the program operating as planned?

- How many and what types of partners are involved in the campaign?
- How many hits has the website received?
- What activities are being completed?
- Are events well attended? Are event participants getting what they expect out of events?
- Are advertisements being run?
- Are tip sheets being distributed and to whom?
- How many referrals did partners give to screening?
- Is the intended target audience being reached with campaign messages and materials?

Outcomes		
Short Term	Medium Term	Long Term
Media coverage	Increased regular breast cancer screening—first-timers, repeaters	Decreased rates of late-stage breast cancer diagnoses
Partner familiarity with materials	Adoption of suggested practices by mammography facilities	Increased number of accessible facilities due to increased demand
Primary audience awareness and familiarity with campaign materials	Capacity building:	Application of dissemination strategies to other areas
Primary audience attitudes, self-efficacy, intent to get screened	- New partnerships	
Mammography technician awareness of accessibility issues	- Skills in dissemination planning and implementation	

Outcome Evaluation

- Is the program achieving its objectives?
 - How aware are mammography technicians of accessibility issues?
 - How many people in the target audience believe they can be screened?
 - How many people in the primary target audience intend to be screened?
 - How much has breast cancer screening increased in the target audience?
 - Have mammography facilities implemented improved practices for women with disabilities?
 - Are facilities in the community accessible?

Example:

Measuring a medium term outcome

- Adoption of suggested practices by mammography facilities



Evaluation that matters locally

Using evaluation to develop a local resource guide



- Florida & Oregon Module B programs both developed plans and tools to learn about facility accessibility
- Survey, interview, and observation data are being collected
- Results will inform development and updating of resource guide on accessible facilities

Sample Tools for assessing accessibility

Radiology supervisor (telephone survey)

- Customer service
- Facility access
- Building
- Waiting area
- Dressing room
- Restroom
- Mammography suite

Usability Profile

(conducted on-site by
program staff)

- Patient arrival (approach to building, ramps, signage)
- Public facilities (seating, passageways, elevators, restrooms)
- Access to primary care services (exam table, dressing room, mammography machine)

Going local doesn't mean going it alone

- Fast Stats A-Z:

<http://www.cdc.gov/nchs/fastats/Default.htm>

- Finding and Using Health Statistics:

<http://www.nlm.nih.gov/nichsr/usesstats/index.htm>

- Behavioral Risk Factor Surveillance System (BRFSS):

<http://www.cdc.gov/brfss/>



Tiene que **cuidarse**
primero para poder cuidar a otros.

HELEN, SOBREVIVIENTE DEL CÁNCER DE SENO

Si usted ya cumplió 40 años, hágase examinar los senos periódicamente y hágase una mamografía cada 1 o 2 años. Para obtener más información visite www.cdc.gov/RightToKnow o llame al 1-800-CDC-INFO (232-4636); 1-888-232-6348 (TTY).

**EXÁMENES MÉDICOS PARA
DETECTAR EL CÁNCER DE SENO
EL DERECHO DE SABER**



Questions for Discussion

- What tools would be most helpful in assessing outcomes for health promotion programs in a community?
- What should an evaluation “how to” guide include to make evaluation simple and easy?