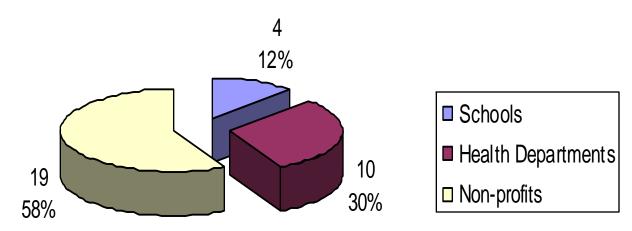
Preliminary Results from an Evaluation of Obesity Prevention Programs in Missouri

Missouri Foundation for Health

- Nonprofit organization focused on health outcomes in the state of Missouri.
 - Address gaps in care and serve un- and underserved populations across the state on a wide range of health issues.
- Awarded just over \$11.4 million in 2007 for programs targeting obesity prevention, diabetes management and other community-based health interventions.

- One of four initiatives charged by MFH with the distribution of these funds
 - 33 Grantees targeting obesity prevention in 2005 (15) and 2006 (18)

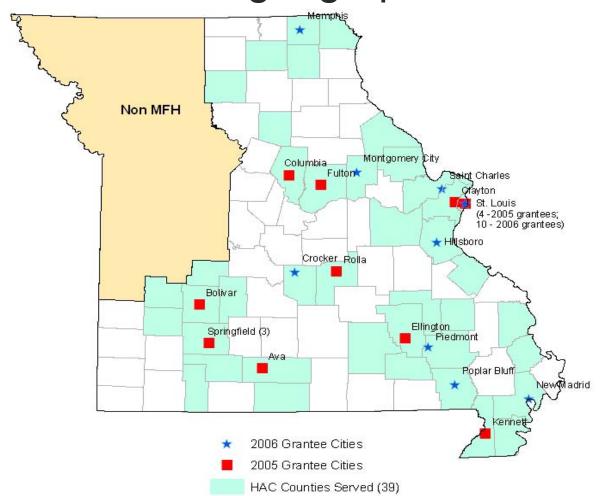


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Target a wide variety of populations

- School 58.1%, After-School 51.6%, Preschool 23.3%, Community 76.7%, Worksite 53.3%, Healthcare 40.0% Seniors 9.0%
- Heavy but not exclusive focus on Youth

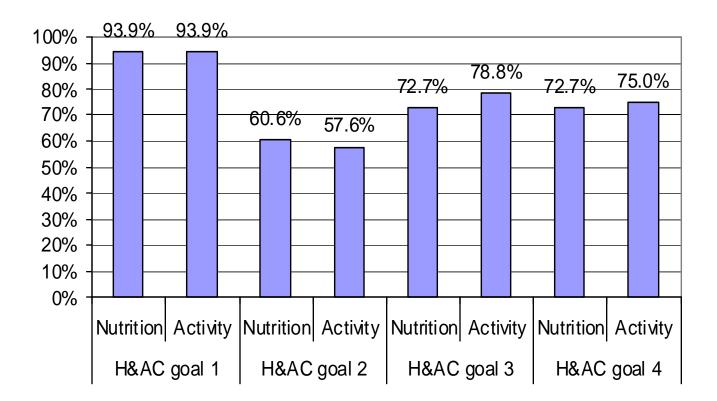
Sites over a wide geographic area



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- Funded programs must align with at least one of the foundation's four goals for the initiative.
 - <u>Goal 1</u>: Increase the proportion of adults, adolescents or children who implement sound principles toward achieving and/or maintaining a healthy weight, which includes healthy eating, regular physical activity and positive behavioral strategies.
 - <u>Goal 2</u>: Increase the proportion of community coalitions, faithbased organizations or local and state health agencies that provide community education on the importance of good nutrition, physical activity and healthy weight.
 - <u>Goal 3</u>: Increase community access to physical activity opportunities and healthful foods.
 - <u>Goal 4</u>: Develop or strengthen collaborative efforts to implement local public policies that promote physical activity and healthy eating.

 2005/2006 programs broadly distributed across these goals



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Evaluation Challenges

- Multiple program types, multiple target populations, multiple locations (some multisite), multiple organization types
 - Did not have ability to pre and posttest or establish control groups in most programs
 - Limited experience with data collection among some grantees
 - Organizational rather than individual level data on outcomes for most sites
 - Relatively limited number of sites (limiting available analytical approaches)

Evaluation Model

- Examine self-identified levels of success on initiative goals previously identified by grantees
- Chose to focus first on organizational capacity as the most generalizable correlate of success or failure across disparate programs
- Evaluation will ultimately examine interaction of organizational and community factors

Conducting the Evaluation

- Information collected via:
 - Initial interviews with directors
 - Grantee surveys
 - Follow up site visits
 - Collection of site documentation (e.g. interim reports to MFH)
- Values for major indicators scored by Institute researcher who visited site and Principal Investigator
- Will rely on community "informants" for community readiness indicators

Measuring Success

- Use a measure developed by the Colorado Trust for similar types of evaluations (including obesity prevention); created from grantee responses to 6 questions
 - 1) Did the program accomplish its specific objectives?
 - 2) Did the project accomplish more than its original goals?
 - 3) Did the project have a concrete impact on the root problem it targeted?
 - 4) Did the project lead to other projects or efforts?
 - 5) Did the project help change the way the community works together on public issues?
 - 6) Did the project lead to some individuals becoming new leaders or more engaged community members?

Measuring Success

- Measure of total success is an additive index of yes/no responses.
 - Components were internally consistent with a Chronbach's Alpha of .66
 - Ranges from 0 to 6, with a mean of 3.26
 - Measure is uncorrelated with poverty or level of urbanization

Measuring Organizational Capacity

- Use the Modified McKinsey Capacity Assessment Grid
 - Measures capacity on a set of subcomponents including aspirations, strategy, performance management, planning, fund-raising/revenue generation, external relationship building/ management, other organizational skills, human resources, and infrastructure
 - Asks evaluator to rank capacity from 1 (Clear need for increased capacity) to 4 (High level of capacity in place) on elements of each of these subcomponents
 - Elements of subcomponents were internally consistent
 - Subcomponents were internally consistent except for fund raising capacity and monitoring of the environment (Chronbach Alpha> .7)

Relationship Building Example

Capacity	1	2	3	4
	Need for Increased	Basic	Moderate	High
Partnerships and alliances development and nurturing	Limited use of partnerships and alliances	Beginning to build relationships	Effectively built and leveraged some key relationships	Built, leveraged, and maintained strong, high- impact, relationships
Local community presence and involvement	program's presence either not recognized or generally not regarded as positive	program's presence somewhat recognized, and generally regarded as positive	program reasonably well-known within community, and perceived as open and responsive	program widely known within larger community, and perceived as actively engaged with and extremely responsive to it

- Positive relationships between most individual measures of organizational capacity and Program Success
 - Interestingly few correlations between individual measures of capacity
 - For example, those organizations with plenty of experienced staff and strong support from superiors are often not the same ones that have well developed performance planning and management capabilities
- Human resources capabilities (comprised of staffing and board support) show the largest bivariate association with success

- The number of partnerships formed by an organization is also a strong correlate of success.
 - Interestingly, while relationship building capacity is not a direct predictor of success, it does correlate significantly with partnership activity
 - suggests an indirect relationship for organizational capacity

- School based programs tend to achieve higher levels of success.
 - Perhaps due to the greater overall capacity of these well established organizations.
 - The number of schools involved in a program does correlate positively with most measures of capacity

- Factors in the community moderate the impact of these predictors of success
 - As very coarse interim indicators of community conditions we explore the impact of poverty and population density
 - Neither is correlated directly with success, however...
 - Partnerships have a larger impact on success in areas where the poverty level is above the state average.
 - School based programs have even greater success in impoverished areas

Conclusions

- Previous research often focuses on one type of intervention providing little information on factors that might increase the impact of various disparate programs
 - This evaluation offers some generalizable correlates of success
- Honing tools for evaluating multi-site, multiprogram, multi-organization programs becoming increasingly important as more foundations like MFH fund broad and ambitious initiatives such as Healthy and Active Communities