

Evaluating the RD Parent Empowerment Program

A pragmatic approach within real-world constraints

Presenter Disclosures

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No relationships to disclose

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Presentation Aims

- Describe a common challenge
How do we meaningfully evaluate and disseminate programs responding to public health need and community demand?
- Offer a pragmatic approach based in theory and practice

A (R)Evolutionary Idea

- Program development & evaluation are evolutionary processes
 - Optimize the match between phases of program development and evaluation
 - Think in terms of evaluation *cycles*

Urban, Hargraves, & Trochim, 2014, *Eval & Program Planning*

The Need

- Well-documented problems with population diet and physical activity
 - Especially relevant for eliminating socioeconomic and racial disparities in chronic illness
- Communities want to do something!

Evidence for Intervening

- E.g., The Community Guide
 - Nutrition: “Insufficient Evidence”
 - Physical Activity
 - Multiple recommended strategies
 - Includes individually-adapted health behavior change programs

Limitations of the Evidence

- External validity (Glasgow 2008; Green & Glasgow 2006)
- Scale and scope of interventions (Brownson et al 2009)
- Dearth of evidence on viable programs (Chen 2010)
- Mismatch with community desire to *act*

The Real World

- A suite of programs serving lower-income families has been developed, refined, and adapted over 10+ years
 - Based on “8 Habits”
- Academy of Nutrition & Dietetics emerged as partner and leader
 - RDs support family-based changes

RD Parent Empowerment Program (RD-PEP)

- Multiple implementation cycles sparked paradigm shift for evaluation
 - Began with strenuous attempts to adapt research methods to constrained circumstances
 - Shifted to fitting evaluation to the program circumstances and needs

Key to the Change

- Family Nutrition & Physical Activity (FNPA) survey (Ihmels et al)
 - Contemporaneous evolution
 - Designed as intervention tool with empirical support
 - Unknown sensitivity to detect change

FNPA Survey



Family Nutrition and Physical Activity

<http://www.adaf.eatright-fnpa.org/public/partner.cfm>

- Next slides show examples of
 - survey item
 - reports: individual & group leader

FNPA Mock Report

Screen Time and Monitoring


1. My child spends less than 2 hours on TV, video games and/or computer per day.

Never
Sometimes
Usually
Always

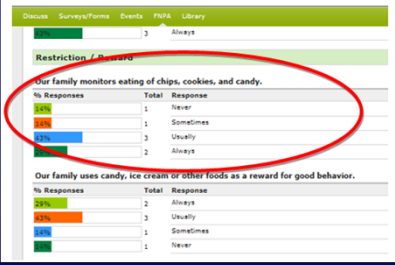
Your answer was "never" or "sometimes." With so much technology, it can be especially challenging for parents to Healthy kids need 60-min of screen time a day. For this survey.

Thank you! Following are your results. For additional information, contact your local registered dietitian.

Thank you for completing the survey. Your score is 64



FNPA Mock Group Report



% Responses	Total	Response
100%	3	Always

% Responses	Total	Response
33%	1	Never
33%	1	Sometimes
33%	3	Usually
0%	2	Always

% Responses	Total	Response
100%	2	Always
50%	3	Usually
50%	1	Sometimes
0%	1	Never

Evaluation: A Familiar Story

- Our version of the 3 R's
 - Resources
 - Rigor
 - Reality-based
- We developed *a priori* evaluation principles to guide evaluation design to maximize the 3 R's

Pragmatic Evaluation Principles

- Maximize resources
 - Project budget: money and time
 - Participant time and attention
- Maximize fit
 - Only collect key intervention goals
- Maximize validity
 - Use multiple methods, minimize bias

APPLYING THE PRINCIPLES

Integrate Data Collection Into Program Activities

- FNPA became intervention *and* evaluation tool
 - Ensured match between evaluation & intervention focus
 - Engaged, rather than burdened, participants
 - Provided data for tailoring

Mix the Methods

- Focus groups intentionally probed on behavior changes that could be detected by pre-post FNPA
 - Separate focus groups for parents & leaders helped further triangulate
 - Qualitative and quantitative data went hand in glove

Be Where We Are

- Acknowledge evolutionary phase of program *and* evaluation
 - Strive for good match
 - Contribute “the best evidence available” for decision-making

Challenge #1

- Publishing and disseminating this type of evaluation
 - public health vs. evaluation field
 - consequences of not publishing

Challenge #2

- Working with IRBs
 - Must, to publish and disseminate
 - Logistics of using an instrument for both intervention and evaluation
 - Administration issues
 - Timing issues

Challenge #3

- Facilitating the evolutionary process for programs *and* evaluations
 - How feasible is it to cross from pragmatic to higher levels of validity?
 - What are the barriers and facilitators?

Ideas & Guiding Examples

- Broader evaluation field
- SQUIRE guidelines
 - used in healthcare QI studies
 - adapt for program evaluation?
- CBPR and qualitative research in public health

Looking Ahead

- We continue to engage with these questions and ideas
- RD-PEP evaluation published
 - Hand, Birnbaum, Carter, Medrow, Stern, Brown in *JAND* – articles in press
