Health Promotion Foundations Series
Part 2 - Webinar 3 of 3

Intervention Planning and Evaluation Models and Reflective Health Promotion Practice
This tool may be freely used without permission for non-commercial purposes only and provided that appropriate credit is given to Public Health Ontario. No changes and/or modifications may be made to the content without explicit written permission from Public Health Ontario.
Welcome, Introductions

• About the facilitators

• ‘Housekeeping’ items for webinar

• Agenda for webinar
Agenda

• June 18 homework review

• Key models for planning, implementing and evaluating health promotion initiatives:
  • Precede-Proceed
  • Intervention Mapping
  • RE-AIM framework
  • Other models

• Self-reflective health promotion practice.

• Course evaluation and wrap-up.
Learning objectives

By the end of this webinar you will:

1. Understand how planning and evaluation models are useful tools for guiding the development of health promotion interventions;

2. Identify the strengths and limitations of these models (what they can and cannot do for you);

3. Describe ethical principles in planning/evaluating health promotion programs and the importance of these principles;

4. Understand the key principles of self-reflective practice and how these principles can be applied to foster learning and innovation in health promotion.
Darryl is a fifteen year old living in Toronto. He came to Canada last year to live with his father, step-mother and a younger half-brother. His parents arranged for the move, because they thought he would benefit from being with a male role model.

When he came to Canada, the reunion with his father was initially happy. However, tensions within the family have developed over the past six months. Things reached a low point last week when Darryl’s step-mother discovered a large quantity of marijuana in his room – a find which supported her suspicions that he had become involved in gang activity.

Darryl was a good student in his home country, but he feels disconnected from his new school and family in Canada. At the moment, his major goal in life is to fit in with the other students at school. He was interested in basketball for a while, but stopped playing after he failed to make the school team.

His stepmother thinks he should be sent back to live with his mother. She is particularly concerned about the example Darryl is providing for his half-brother. His father protests when his wife demands that Darryl be sent back but admits that he doesn’t know what to do. Darryl says he doesn’t care one way or the other.
1. What are the health issues faced by the individual(s), family and community described in the scenario?

2. Describe how the health promotion strategies identified in the last two modules could be applied to address the health issues outlined in the scenario.
• A collection of strategies, activities, methods, or tactics
• Designed to improve some aspect of the physical, mental or social well-being of a specific group of people
Step-by step processes
Guide the collection and application of information
To choose strategies
To achieve an outcome for a population
TYPES OF INFORMATION

Theory; Data; Experience
To get from your starting point to your desired end point.
• Planning is a series of decisions,
• from general strategic to specific operational details,
• based on the analysis of a wide range of information.
• To help direct resources to where they will have the greatest impact.
• To ensure the development and implementation of effective and appropriate health promotion programming.
Think of a time when the planning and implementation of a health promotion intervention did not go as well as expected due to incomplete information. How could you have been more open to feedback from the situation, from cues and clues that offered possibilities of learning and change?
THREE MODELS

1. Precede-Proceed model
2. Intervention Mapping Approach
3. RE-AIM Framework
## PRECEDE-PROCEED MODEL

<table>
<thead>
<tr>
<th>Stage</th>
<th>Process</th>
<th>Acronym</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Precede</strong> implementation</td>
<td>with a complete understanding of the problem (diagnosis)</td>
<td>Predisposing, Reinforcing, Enabling, Enabling Constructs, Educational/ ecological Diagnosis, Evaluation</td>
</tr>
<tr>
<td><strong>Proceed</strong> with implementation</td>
<td>evaluating and reflecting along the way</td>
<td>Policy, Regulatory, Organizational Constructs, Educational, Environmental Development</td>
</tr>
</tbody>
</table>
## PRECEDE-PROCEED MODEL

<table>
<thead>
<tr>
<th>Stage</th>
<th>Process</th>
<th>Phase</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Precede</strong> implementation</td>
<td>with a complete understanding of the problem (diagnosis)</td>
<td>1. Social Assessment and Situational Analysis</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Epidemiological Assessment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3. Educational and Ecological Assessment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4. Administrative and Policy Assessment and Intervention Alignment</td>
</tr>
<tr>
<td><strong>Proceed</strong> with</td>
<td>evaluating and reflecting along the way</td>
<td>5. Implementation</td>
</tr>
<tr>
<td>implementation</td>
<td></td>
<td>6. Process evaluation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7. Impact evaluation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8. Outcome evaluation</td>
</tr>
</tbody>
</table>
Strengths

- Widely refined and applied over three decades

Limitations:

- Heavily data driven
- Requires significant time and resources
- Does not emphasize specifics of intervention development
• Application of **theory** and **evidence** are important

• Detailed framework for applying theoretical and empirical evidence
1. Conduct a needs assessment
2. Create matrices of change objectives
3. Select theory-based methods and practical applications
4. Organize methods and applications into an intervention
5. Plan for adoption, implementation, and sustainability
6. Generate an evaluation plan
INTERVENTION MAPPING APPROACH

Strengths
• Enables selection of theory-based interventions that can then be operationalized

Limitations
• List of potential interventions can sometimes exceed available time and resources
• Time-consuming to apply
Consider essential evidence-informed program elements
• Improve sustainable adoption and implementation of effective interventions
## RE-AIM FRAMEWORK

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Guiding questions</th>
</tr>
</thead>
</table>
| Reach       | • What percentage of the population is contacted/reached?  
             • Does the intervention reach priority or target populations? |
| Effectiveness| • Does the intervention achieve its targeted outcomes?  
               • Does the intervention produce unintended effects  
               • How does it affect the quality of life? |
| Adoption    | • What percentage of target settings and organizations will participate or apply the intervention?  
             • Will organizations with underserved populations use it? |
| Implementation| • How many intervention staff participate in applying the intervention?  
                 • Are different parts of the intervention delivered as intended? |
| Maintenance | • Are the effects of the intervention sustainable?  
             • Is the intervention sustainable over time? |
Strengths
• Can be applied to both planning and evaluation

Limitations
• Doesn’t consider social, political, economic, environmental barriers
If this webinar was a sales pitch trying to convince you to ‘buy’ one of the three models, which one would you ‘purchase’?

a) Precede-Proceed
b) Intervention Mapping
c) The RE-AIM Framework
d) All of the above
e) None of the above
The application of systematic methods to address questions about program operations and results
WHY EVALUATE?

Improve effectiveness
Improve efficiency/cost effectiveness
EVALUATION APPROACHES

- Goal-based
- Participatory
- Developmental
- Continuous quality improvement
- Empowerment
Goals should be related to the improvement of the public’s health

1. Interventions must provide a reasonable chance of being effective

2. Known and potential burdens resulting from the program should be acknowledged and addressed
4. Burdens should be minimized through alternative approaches where possible
5. Benefits of the intervention should be distributed fairly and evenly
6. Benefits and burdens must be fairly balanced
• Examples:
  – Cancer Control P.L.A.N.E.T. Canada
  – Evaluating Health Promotion Programs Workbook
  – The Bhatti cube model
  – WHO equity team Social Determinants Model
SELF REFLECTIVE PRACTICE

- Describing the experience
- Reviewing reactions
- Analyzing what happened
- Synthesizing and applying
• What if different partners had collaborated?
• What if you had been guided by a different theory?
• What if you were to be engaged in this project for years to come?
• What if you had different reporting requirements?
• What if you had the opportunity to start over again?
• Supports: the things that drive and carry you closer to your ideal health promotion practice
• Barriers: the things that restrain/limit your progress
Skills and capacities required to be an effective health promotion practitioner

There are a variety of development lists, profiles and survey instruments
POLL QUESTION

Please select up to three of the following:

• Health Communication
• Health Education
• Self Help Mutual Aid
• Organizational Change
• Community Mobilization/Development
• Policy Development
• Advocacy
• Intersectoral Collaboration
• Holistic View of Health
• Participatory Approaches
• Determinants of Health
• Focus on Strengths and Assets
• Using Multiple Complementary Strategies
• Theories of change
• Expressing values (Empowerment, Social Justice and Equity, Inclusion, Respect)
QUESTIONS/COMMENTS?
Evaluation

Please follow the link below to complete a short survey:

PHO Health Promotion Capacity Building

• For service request inquiries, including consultations, webinars, workshops, or to sign up for our mailing list, please go to:

http://www.publichealthontario.ca/en/ServicesAndTools/HealthPromotionServices/Pages/service-request-form.aspx

• Our events calendar is at:

http://www.publichealthontario.ca/en/LearningAndDevelopment/Events/Pages/default.aspx

Thank-you!