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Evaluation of the Kansas Health Foundation's Healthy Living Focus Area

Executive Summary 2015

Prepared for

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EXECUTIVE SUMMARY

This report describes Healthy Living Focus Area (HLFA) evaluation activities conducted during 2015. These activities include the following:

- Theory of change (TOC) updates
- Alignment of grantee efforts and objectives with the TOC
- Assessment of policy, systems, and environmental (PSE) measures and relationships
- Update of behavioral outcome and health impacts
- Project-specific evaluations
- Dissemination and utilization of findings

All evaluation activities are designed to produce data that inform the Foundation's work—from examining the extent to which grantees are implementing efforts and working toward objectives consistent with the Foundation's long-term goals to ensuring that key findings are disseminated quickly to the appropriate audiences.

- **TOC Updates.** We mapped objectives for 39 PSE change pathway grant initiatives to the TOC. As a result of this process, we revised the TOC to better reflect activities grantees conduct to build the infrastructure needed for sustained change: three changes were made to expand the PSE change pathway, and one was made to reflect grantees' monitoring and evaluation efforts. For example, an intervention to ensure that schools adopt physical activity programs requires that leaders and instructors within those schools have the capacity to implement a physical activity program; otherwise, the program is not sustainable. As the HLFA investment matures, the Foundation may want to examine the extent to which these infrastructure development activities have succeeded and the extent to which infrastructure in Kansas has served as a barrier or facilitator to the success of the Foundation's initiatives.
- **Alignment of Grantee Efforts and Objectives with the TOC.** This report also summarizes the extent to which grantee efforts and objectives align with the TOC, using grant agreements and status reports. We found that 62% of objectives partially or fully mapped to the TOC. Most objectives aligned with *Build capacity among implementers to support PSE change efforts* (Box 2) and *Policy maker/influencer education, advocacy* (Box 3c), followed by objectives that mapped to *Public education, outreach, awareness campaigns* (Box 3a). After examining the 38% of grantee objectives that did not map to the TOC, we concluded that these could be incorporated into the TOC if it were slightly modified. As a result, we more broadly conceptualized and changed the title of the box *Build capacity among implementers to support PSE change efforts* to *Build infrastructure necessary to implement PSE change efforts*. The modified TOC is reflected in this report. This analysis provides concrete information about what TOC areas grantees are working in and where more work is needed, which can inform future grantmaking. Mapping grantee objectives to the TOC also highlights opportunities for the Foundation to develop reporting requirements that shape grantee efforts. For example, if grantees

are required to establish SMART (specific, measurable, attainable, relevant, and time-bound) objectives that are relevant to activities, outputs, and outcomes in the TOC, the more grantee interventions are likely to reflect HLFA's vision for achieving intended healthy eating and active and tobacco-free living outcomes.

- **Assessment of PSE Measures and Relationships.** Section 4 describes the results of statistical modeling we conducted to test the relationships in the PSE pathway of the TOC. We examined the relationships between short-term outcomes of grantee activities (for example, increased awareness of obesity in the community) that would be expected to occur within a few years of high quality activities that reach a significant proportion of Kansans and the longer-term outcomes of policy support. Grantees cannot be held completely accountable for outcomes that are out of their control. For example, the political environment may be a significant barrier to public health policy changes. However, well-implemented grantee activities can increase awareness about the obesity issue and can change beliefs about the needs for policy change among the public and opinion leaders. Our findings support the relationships between these short-term, achievable outcomes and policy change. Therefore, the Foundation can more confidently continue investing in grantee activities that lead to such changes and consider modifying the activities/requirements of grantees that have not had such a measurable impact. In addition, these findings, and the content of the specific survey items, can be used to further develop, implement, and test communications designed to complement and amplify the messaging grantees convey to the general public and opinion leaders as they build awareness, change beliefs, and eventually build support for policy change.
- **Update of Behavioral Outcome and Health Impacts.** This report summarizes the current status of obesity, tobacco use, and their associated behaviors among Kansans. Where new data were available, we updated previously reported findings; where no new data were available, we documented the current status of these outcomes among Kansans. In general, we found little change in the prevalence of obesity, tobacco use, physical activity, and healthy eating among Kansans. These findings are not surprising and emphasize the challenges inherent in changing these outcomes and the need for sustained, population-level interventions, such as the HLFA, to decrease them.
- **Project-specific Evaluations.** The next section focuses on project-specific evaluations conducted during Year 3 and evaluability assessments conducted to assess the costs and benefits of evaluating specific initiatives. We first describe our assessment of how HLG has been implemented and then summarize results of evaluability assessments conducted for the Community Engagement Initiative (CEI), WorkWell Kansas, and the Breastfeeding Initiative.
 - **HLG Evaluation.** The Foundation funded high-capacity organizations with experience implementing PSE interventions. We found that even among well-established organizations, new PSE interventions involve some level of infrastructure support and capacity building. Although most grantees reported that they did not require technical assistance (TA) to complete their HLG work or knew how to access TA through local consultants and content matter experts, a subset of grantees asked about TA the Foundation offers, should a need arise. Barriers identified in the HLG progress report reinforce that making small changes to TA, monitoring activities, and application requirements may enhance implementation efforts. The most common implementation barriers reported in Year 1 of HLG were lack of stakeholder engagement, staff turnover, technology

- glitches, seasonal delays, and coordination of voluntary staff. Recommended actions to address these barriers include improving grantee reporting requirements and providing TA and training support.
- **Evaluability Assessments.** These assessment focused on determining whether an independent evaluation of a program would be worthwhile in terms of benefits, consequences, and costs. We concluded that the evaluation proposed by the WorkWell Kansas grantee would meet the Foundation’s needs. We concluded that independent evaluations of the CEI and the Breastfeeding Initiative were of value to the Foundation, and these evaluations were separately funded. Systematically determining the need for and worth of an independent evaluation is a forced reflection on the strengths and weaknesses of a funded program, and at the same time, these reflections help determine where evaluation funds are most wisely spent by considering the likely strength of the program, the availability of data to measure key processes and outcomes, and the contribution of findings to the Foundation’s funding decisions.
 - **Dissemination and Utilization of Findings.** Section 7 summarizes dissemination activities. In 2015, we produced a series of products for dissemination to internal and external audiences. Dissemination of information generated from the evaluation directly contributes to program efforts, strengthens the visibility and status of the Foundation’s health-focused efforts, and enhances the sustainability of its approaches. Data collected from the Opinion Leader Survey (OLS) and the General Public Survey (GPS) were used, for example, to demonstrate public support for evidence-based tobacco and obesity policy interventions. Research has shown that public support—particularly in the form of polling data—is heavily weighted when policy makers consider which issues to support and advocate for. Kansans we surveyed were clearly in favor of policies consistent with the HLFA objectives: a majority supported increasing the tax on cigarettes, and most were very supportive of a small tax increase (\$50 per year) to support policies that would make it easier to exercise and eat healthy foods; indeed, they were significantly more supportive of these policies than were their opinion leader counterparts. Additional data from these and other surveys may be mined to support grantee efforts and inform Foundation public messaging. Conference presentations and published manuscripts raise the stature and visibility of the Foundation’s efforts among the science and practice communities. This positions the Foundation as a national leader in addressing these intransigent public health problems.
 - **Discussion, Implications, and Recommendations.** The final section of this report summarizes the findings from each of the evaluation activity areas. We highlight the central role of the TOC as an organizing structure for the HLFA evaluation and the importance of analyses conducted to ensure that it accurately reflects the relationships between grantee activities and the long-term objectives of the HLFA. We also demonstrate how the TOC was used to identify secondary data sources, data gaps, and its role in framing development of new measures and data collection systems. Finally, we describe how the components of a TOC-based evaluation like the HLFA evaluation can inform all stages of the grant funding process—from identifying important areas to fund, selecting the most qualified grantees, and monitoring progress in ways that inform when midstream initiative modifications are needed to ensure that goals are reached. We end this section by describing how the HLFA evaluation approach is a model for evaluating the Foundation’s new strategic areas: Health Equity and Civic Health.