



Evaluation Report

Prepared for:

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Community Health Action Coalition (CHAC)
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Introduction

The Community Health Action Coalition (CHAC) is entering its fifteenth year as an open, collaborative coalition promoting health and wellness. As “the coordinating body for communication, collaboration, education and other health related activities in La Plata County,” CHAC advocates for “the prevention of disease and disability, healthy lifestyles, and integrated health services that are accessible and affordable to everyone” (CHAC Mission Statement). CHAC values “person-centered health and wellness that honors the whole human within the context of family and community, including mind, body, emotions and spirit.”

To achieve its mission, CHAC hosts monthly meetings that are regularly attended by a wide representation of community nonprofits, businesses, coalitions, and community members. CHAC also conducts educational and outreach projects, including ongoing work to promote behavioral health awareness and wellness education.

In 2015, CHAC goals were revised to include:

1) Impact and Education

- Positively impact community-wide population health outcomes;
- Improve and increase relationships among service providers, non-profits, businesses, and other sectors related to CHAC’s mission;
- Improve and increase awareness of prevention and health promotion;
- Increase knowledge about integrated health care models and services.

2) Convening, Networking and Involvement

- Increase and improve involvement in CHAC and its various teams (Summit/Education; Messaging; Marketing; Membership; Behavioral Health; and Oral Health).

3) CHAC Resources and Sustainability

- Increase exposure and knowledge about CHAC throughout La Plata County; Increase capacity and resources – financial and human – so that CHAC can accomplish its mission.

In 2016, CHAC engaged an external evaluator to evaluate two community educational/outreach events.



Events: Purpose & Outreach

CHAC's first outreach event was titled "New Bugs, New Problems: Emerging Infections" and was co-hosted on March 3, 2016, with the Lifelong Learning Series at Fort Lewis College. The event was presented by Dr. Bob Cox, a semi-retired infectious disease specialist who serves on the Board of Directors for CHAC. The purpose of this event was to increase understanding of emerging infectious diseases and preventive measures to reduce exposure, while increasing awareness of CHAC in the community. The event was from 7-8:30 PM and was widely promoted several weeks prior to the event, including via: Lifelong Learning Series brochure (emailed to their mailing list); the Durango Herald; CHAC listserv; SWCAHEC Pathways newsletter; flyers posted around the county; Mercy Regional Medical Center internal newsletter; and PSAs via newspaper and radio the week of the event.

The second event, titled "Depression...Share the Secret," was hosted on March 15, 2016, at the Durango Recreation Center from 5:30-7:30 PM. The purpose of this event was to discuss the stigma surrounding depression, depression symptoms, approaches for treatment, and local resources to support wellness, while increasing awareness of CHAC. This event was promoted with the same methods; in addition, targeted emails and phone calls were sent or made to some local businesses.

Methods

To evaluate both events, paper surveys were developed and administered to all event participants and collected after the events. (See Appendices A and B.) Survey designs were developed in collaboration with and reviewed by CHAC staff and committee team members to ensure utility.

Results

Survey results were compiled with online survey software for simplified analysis.

(Continued on next page.)



Event & Date	Response Rate (RR) (# Attendees/# Responses)	% Somewhat or Very Knowledgeable about topic PRIOR to event	% Increased understanding of topic AFTER event
Emerging Diseases Outreach Event March 3, 2016	n=126, 73 responses RR: 58%	68%	98%
Behavioral Health Outreach Event March 15, 2016	n=62, 35 responses RR: 56%	85%	91%

Emerging Infectious Diseases Event (3.3.16)

Demographics

Attendees: 25% were students in a health-related field, 21% were currently working, and 42% were retired. 34% had a Bachelor degree and 31% held a graduate or professional degree. The majority of attendees were 60 years or older (50%), while the second most represented age group was between 18-22 years old (34%).

Survey Results (Summarized)

98% of respondents indicated that they knew a little or a lot more about emerging infectious diseases after the event. 75% of attendees were NOT aware of CHAC prior to this event (n=44). Among those who had previously heard of CHAC, this was the first CHAC-related event for 45% of responders (n=32). The majority of attendees heard about the event from Lifelong Learning Series promotion (42%), while a friend, colleague, professor, outreach at FLC, or “other” reached an additional 45%.



Open-ended Responses

In the future, what are some other health-related topics you might be interested in learning about during a short training or educational event? (For example, empowering patients, holistic healing, Veterans' health, etc.)

Responses cited at least twice included: holistic treatment/healing; Veterans' health; information about other diseases/infections; cost of healthcare/medicine.

Please use this space to share any comments, feedback, or questions with us. What did you learn from this event?

Selected responses:

"I should get flu shots"; "I had not been aware that Zika could be transmitted by body fluids from a person bitten by a carrying mosquito"; "Great information. More people need to be educated in this field."; "Excellent and keep up with the 'preaching' regarding antibiotics. Would like to encourage you to include effect of climate change - esp. with vector borne 'bugs'"; "excellent presentation."

Behavioral Health Event (3.15.16)

Demographics

56% of attendees were currently working in a health-related field; 19% were working in a NON-health related field and 19% were retired. 50% held a graduate or professional degree, while an additional 26% held a Bachelor degree. Almost 30% of the attendees were between 30-39 years old, and another 30% were 60 years or older.

Survey Results (Summarized)

94% of respondents either agreed or strongly agreed that they had "learned about new resources, referral systems or other ways to help address depression or stigma that I personally can use or integrate, or that I can share with colleagues or clients." 76% agreed or strongly agreed that they "have a deeper understanding of the stigma surrounding depression." 76% also agreed that they had "a deeper understanding of how sadness and/or depression can be normal phases of life." 50% were NOT aware of CHAC prior to this event (n=17). Among those who were previously aware, 37% indicated that this was their first participation in a CHAC-related event. Attendees heard about this event from a range of outreach methods: friend or colleague (n=12); CHAC outreach (listserv/meeting; n=6); flyer/public posting (n=9); email or listserv (n=5).



Open-ended Responses

What is the most useful information from this event?

Selected responses: “committing to what works for you”; “the attempts of this community to be proactive in addressing stigma and mental health through education and social/emotional learning and mindfulness in schools”; “different viewpoints on depression, treatments, and reaching out being key to prevention and treatment”; “the community is invested in education and promoting wellness”; “wonderful panelists! I think the message I’m taking away from this most is that it is important to look at depression *holistically*...looking at 8 Dimensions of Wellness, genetic vulnerability with other factors, etc.”; “the Eight Dimensions of Wellness Wheel, the fact that social stigma plays a huge role in preventing and treating depression.”

Analysis

Event Content

The majority of attendees at both events were already at least a little or somewhat knowledgeable about the event topic(s) prior to the event. Participants from both events demonstrated exceptionally high levels (94-98%) of improved knowledge or understanding about each event’s topic(s) AFTER the event. Most comments from open-ended questions were positive, thankful for the events, and appreciative of the topic(s) covered.

For the behavioral health event, ~94% of respondents indicated that they either agreed or strongly agreed that they had increased awareness of local resources that they could utilize; in addition, over 75% agreed that they had a deeper understanding of other key objectives from this event: understanding the “normalization” of sadness or depression and of the surrounding stigma.

CHAC Awareness

75% of attendees from the first event and 50% from the second event had NO prior awareness of CHAC. Among those who were previously aware, an average of ~40% of respondents indicated that this was their first involvement directly with CHAC. The outreach methods including PSAs, local newsletters, emails, calls, flyers, and other media announcements may have contributed to an increased organizational awareness for over sixty community members through these two educational events.



Response Themes

- Appreciation of high-quality and relevant speakers/panelists for each event.
- Appreciation of event content and utility.
- Appreciation that our community is responsive to, and involved with, behavioral health issues and prevention.

These themes, along with increased CHAC awareness, indicate a successful response to previous evaluation recommendations to organize events with high-quality speakers and to outreach to new audiences (CHAC Evaluation, 2015).

Limitations/Considerations

There is inherently bias in any research methods that are not randomized, controlled studies. As such, surveys are often subject to respondent bias, especially “acquiescence bias.” Acquiescence bias is a category of response bias in which respondents to a survey have a tendency to agree with all the questions or to indicate a positive connotation (Wikipedia). In addition, the lack of response from those who did not complete surveys should be considered. Response rates of 68% and 85% are high rates, especially for evening events. However, attendees from either event who did not complete a survey may have had more disagreeable ratings or feedback, which were not collected from the surveys completed.



Recommendations

1. Continue outreach to a broad audience, including less-represented and/or less-educated demographics throughout La Plata County. Utilize a variety of outreach methods, including PSAs, newsletters, media coverage, and other avenues to reach new audiences.
2. Consider summarizing information from events into handouts and/or recordings that can be widely disseminated to additional community partners who may not be able to attend events. If possible, provide materials in Spanish.
3. Continue planning events with high-quality speakers and/or panelists to provide a variety of perspectives but consistent messaging. Engage local and statewide professionals to contribute expertise or different perspectives.

Conclusion

Despite reduced funding, CHAC has continued to plan high-quality educational events for La Plata County that are relevant to its mission and to the community. It has demonstrated investment in evaluating its work and seeking continued funding to maintain a strong community presence and continue growing membership. CHAC is responding to current healthcare issues by planning outreach about advanced care planning. CHAC should continue to engage diverse members and demographics throughout La Plata County to increase organizational awareness, garner membership and increased financial support, and to share important health topics and events more widely.



Appendices

- A: EMERGING INFECTIOUS DISEASE SURVEY**
- B: BEHAVIORAL HEALTH SURVEY**
- C: EMERGING INFECTIOUS DISEASE SURVEY RESULTS**
- D: BEHAVIORAL HEALTH SURVEY RESULTS**
- E: EIGHT DIMENSIONS OF WELLNESS**