

Texas WIC Toolkit for Planning and  
Evaluating Special Projects

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Contents

Introduction.....	1
Why evaluate? .....	2
Why talk about planning in an evaluation toolkit?.....	3
Planning with evaluation in mind .....	4
Step 1: Identify the issue .....	5
Step 2: Assess related factors .....	7
Step 3: Focus your project .....	12
Step 4: Outline your activities .....	14
Step 5: Plan the evaluation .....	16
Putting it all together .....	20
Program Overview .....	21
Appendix A: Program Scenario Samples .....	25
Appendix B: Additional Resources for Program Planning .....	35
Appendix C: Evaluation Tools .....	42
Evaluation Tools from FY07 Local Agency Obesity Prevention Projects .....	54
Appendix D: Supplements on Objectives, Social Marketing, Data Analysis and	

Interpretation, and Report Writing.....	75
De-mystifying Objectives.....	76
Why Social Marketing.....	78
Making Sense of Your Data.....	81
Creating Meaningful Reports.....	88
WIC Special Projects Planning and Evaluation Toolkit	

WIC Special Projects Planning and Evaluation Toolkit

Page 1

Introduction

Texas WIC local agencies are engaged in a variety of innovative and exciting nutrition education and physical activity projects. Many go above and beyond basic WIC services to enhance the health and well being of staff, clients, their families and the communities.

Evaluating these efforts can provide valuable information both to the agency implementing the program and to other agencies that might be interested in trying something new. For example:

- \* You can learn about the needs, interests, abilities and resources of your participants, staff and community.
- \* You can monitor what is working and make changes to the program to address what is not working.
- \* You can show partners and funders how your efforts are supporting your goals and objectives.
- \* You can use what you learn to plan future projects.
- \* You can share your successes and lessons learned with others.

This toolkit provides an overview of planning and evaluation, worksheets, and tools for planning and evaluating special projects within WIC. Please note that there are many different planning and evaluation models that use different terminology.

For more background on planning and designing evaluations,  
see the websites below:

<http://www.ttac.org/power-of-proof/index.html>

[http://www.wicworks.ca.gov/education/nutrition/toolKit/1\\_index/toc.htm](http://www.wicworks.ca.gov/education/nutrition/toolKit/1_index/toc.htm)

Page 2

WIC Special Projects Planning and Evaluation Toolkit

Why evaluate?

Evaluation can answer many questions, such as:

- \* What are the needs and resources in my area?
- \* What is the best way to allocate scarce resources?
- \* Are my activities and materials appropriate for my audience?
- \* Was the program implemented as planned, and if not, why not?
- \* Are my efforts creating the desired outcomes?
- \* Did I meet my objectives? Why or why not?
- \* What do you want to know?

Just as there are different stages of program delivery, there are different stages of evaluation.

The table below shows three stages of evaluation.

Stages of Evaluation

Assessment/ Development

Implementation

Outcome

When?

Before program starts

During program

End of program efforts

Why?

- \* Learn about clients' needs and wants
- \* Assess your resources

- \* Make sure materials and activities are appropriate
- \* Track whether program is being carried out the way you planned it
- \* Document participation
- \* Make changes if needed
- \* Explain outcome results
- \* Did change happen?
- \* Was the change positive?

How?

- \* Look at existing information about your clientele, including data from the WIC participant survey, risk codes
- \* Ask staff for input on logistics
- \* Ask clients to review materials
- \* Observe group sessions
- \* Identify and document approaches used
- \* Allow opportunities for feedback from clients and staff
- \* Keep a log of participation or materials distributed
- \* Analyze pre-post surveys or measurements
- \* Conduct follow-up interviews
- \* Compare participants with non-participants

Keep it simple!

With limited time and resources, evaluation can sometimes seem like an added burden. You can get useful evaluation information by:

Asking clients to review materials at the end of their group class time•

Talking to clients in the waiting room•

Having a group class discussion to field-test materials•

Using information that you are already collecting•

Using Foxfire to collect information•

Creating simple checklists to document activities done and materials distributed•

Why talk about planning in an evaluation toolkit?

While you can evaluate a short-term program after it is completed, designing a program with evaluation in mind can yield richer insights and can help improve the program as it is happening.

A systematic approach to program and evaluation planning ensures that evaluation activities are built in as the project is developed. Evaluation will help you to shape the program activities, assist you in making improvements along the way and, when you reach the end, you will be able to assess the implementation and outcomes of your program. The model below shows how evaluation can help you answer your questions at each stage of program design.

evaluation chart

Planning with Evaluation in Mind

Planning Process

Example

Step 1

Identify the issue or problem that you plan to address and state your goal.

What is the goal of your project?

Goal = Healthy home cooked meals

Step 2

Assess the factors that are related to your issue.

What behaviors, knowledge, attitudes, skills, policy and/or environmental factors affect the issue you are addressing?  
What are the needs and resources in your community?

Factors:

what is "healthy?," cultural traditions, cooking skills, cooking equipment, taste preferences, misconceptions, unfamiliarity with lower-fat cooking, societal movement to lower fat products

Resources: community garden, agriculture extension, cookbooks

### Step 3

Focus  
your project.

What behavior will you target?

What specifically do you want to accomplish by the end of the project?

Participants will increase the frequency of cooking meals at home with their children.

Participants will increase the use of herbs and decrease the use of unhealthy fat in cooking.

### Step 4

Outline your activities.

What will you actually do in implementing this project?

Single  
session demonstration classes on cooking with herbs instead of fats with 10-15 participants each (moms with kids).

Give herbs to families. Demonstrate how to care for and use plants that will enhance home-cooked meals.

### Step 5

Planning the evaluation.

What do you want to know?

How will you determine success?

Does  
participation in the class change the way moms prepare meals for their families?

Measured by: pre-post survey about cooking at home, fats used in cooking, herbs used in cooking.

Step 1: Identify the issue or problem you plan to address and state your goal.

Most program planners start out with a general idea of the problem they want to address. For WIC local agencies, the issue might concern child or adult eating and physical activity patterns; staff wellness; or organizational structure, practices or policy. Issues are opportunities.

Whatever issue you choose will inform the goal of your program.

What is a goal?

A goal is a desired future state or condition. Goals are usually long-term and not directly measurable.

As you think about the goal of your project, also think about:

- \* What makes this goal worth pursuing?
- \* What behaviors or practices are involved?
- \* Why do you want to do it?
- \* What difference will it make if you reach your goal?

Examples of Goals:

- \* To promote healthy eating among children in WIC.
- \* To increase physical activity among women in the community.
- \* To reduce staff stress.
- \* To offer more client-centered options in nutrition education.

Worksheet Step 1:

Identifying the issue and stating the goal.

1. What are issues you would like to address?
2. What is the goal of your project?
3. Why is this goal worth pursuing?
4. What difference will it make if you reach your goal?

Step 2: Assess the factors that are related to your issue and goal.

Assessment provides an opportunity to think about what behaviors are related to your goals, what knowledge, attitudes, beliefs, and skills influence behaviors, and what policy and environmental factors influence the behaviors being targeted or the goal directly. The simple logic model below provides a visual representation of the relationship between these factors. An understanding of these relationships will help you shape your effort for maximum results.

A thorough assessment also allows you to understand the needs of the population, the resources available to you, and to uncover barriers and facilitators to change.

Goal

Behaviors

Knowledge

Attitudes

Beliefs

Environment

Groups

Organizations

Community

Society

Assessing the problem

Issues like "obesity" and "wellness" are complex. A small local project is not likely to address all of the factors that contribute to obesity. However, it can be useful to look at the big picture to identify appropriate targets for intervention.

The next several pages are devoted to thinking about the larger picture when thinking about your intervention through the use of the "social ecological model."

Step 2: Continued

Socio-ecological model

The socio-ecological model offers a framework for looking at issues in a broader context. This perspective highlights multiple levels of influence and multiple points of intervention. It also highlights where individuals interact with their physical and social environments. The model below demonstrates the social-ecological model.

Social Ecological Model for Obesity Prevention

social ecological model

## Step 2: Continued

### Socio-ecological model levels defined

#### Level

#### Definition

##### Individual

Characteristics of a person that influence behavior, such as skills, attitudes, beliefs, knowledge and perceptions, age, gender, genetics

##### Group

Interpersonal connections such as family, friends and peers that provide support and establish norms

##### Organization

Local organizations that interact directly with the individual, such as schools, worksites, churches, and businesses

##### Community

Features of the community, such as the physical environment, local ordinances, and local media, that can support or hamper behavior

##### Society

Public policy, media and other factors that establish societal rules and norms

For example, suppose a mother of three children does not participate in regular physical activity. At the individual level, her lack of activity may be due to her perception of what "exercise" is and her low confidence for trying something new. At the group level, her family and friends might not engage in physical activity or may not support her efforts. At the organization level, her worksite might not offer the opportunity for fitness breaks or she might not know of existing fitness opportunities in her area. At the community level, there may not be safe walking routes. An effective obesity prevention program might address one or multiple socio-ecological levels that affect a single behavior.

Assessing needs and resourcesAn assessment of your clients' and community's needs can help you determine the most appropriate targets for change. You can do this by:

- \* Reviewing participant survey data for your agency
- \* Analyzing Foxfire data
- \* Talking to clients
- \* Talking to staff

An assessment of your resources will help you create a program that is feasible.

Some questions

to consider include:

- \* How much staff time can be devoted to this project?
- \* What organizations in the community can you partner with?
- \* What is your budget?
- \* What skills, knowledge and perceptions do your participants have that can facilitate change?

Worksheet Step 2:

Assessing the Issue

1. Brainstorming the issue

Knowledge, Attitudes, Beliefs & Skills

Behaviors

Goal

Environment

3. Identify needs, resources, and barriers to change:

Needs:

Resources:

Barriers:

2. Identify which factors are related to your goal at each level of the SE Model:

Individual:

Group:

Organization:

Community:

Society:

Worksheet Step 2:

Example - Assessing the Issue

1. Brainstorming the issue

Goal

Reduce child traffic injuries and fatalities

Knowledge, Attitudes, Beliefs & Skills

Knowledge of appropriate ages and weights for car seats and front seats

Belief that if there is no law, it is okay to put children in the front seat or not use a car seat

Parents don't know how to properly install car seats

Parents attitudes of " I never used a booster seat and I turned out okay"

Behaviors

Putting children in age and size- appropriate car seats

Always belting older children

Having children ride in the back seat, especially in cars with airbags

Environment

National Highway Transportation Safety Administration  
(NHTSA) recommendations

States set policies/laws and most are not consistent with  
NHTSA recommendations

Lack of enforcement

Many people drive pick-ups or cars without a back seat

Kids pressure parents to ride in front

Cost of car seats

Child Passenger Safety technicians to educate parents and  
install car seats in cars

3. Identify needs, resources, and barriers to change:

Needs: interagency partnerships, affordable car seats and booster seats for low-income families

Resources: organizations committed to safety; free car seat program in our area; Child Passenger Safety technician in our area

Barriers: cars with no backseat; social norms; high cost of car seats

2. Identify which factors are related to your goal at each level of the SE Model:

Individual: knowledge of appropriate restraints; belief that if there is no law it is okay; type of car a person drives

Group: older child wants to ride in front; grandparents say that it's okay to hold baby in lap

Organization: hospitals, WIC, pediatricians, public safety officials can promote; Child Passenger Safety Technicians available in our area

Community: enforcement of traffic safety laws; health department programs

Society: limited regulations in Texas for older children; NHTSA recommendations; new technology makes car seat installation easier

### Step 3: Focus your project and define objectives

After assessing the behaviors, environment and policy related to your goal, the needs of your community and the resources you can invest, it is time to focus your project by choosing one behavior or area to address and defining the objectives for your project. Your objectives will be used to plan activities and, ultimately, will provide a framework for your evaluation.

What specific behavior, organizational structure or policy do you hope will change as a result of your program? As you choose a focus for your project, think about what you learned in your assessment:

How changeable is it? •

How relevant is it to your population?•

Do you have the resources to address it?•

What is an objective?

An objective is a short-term, measurable activity or outcome with a specific time limit. In other words, objectives are the expected results of the program. Each objective is a partial accomplishment of the goal and should directly address your target for change.

Writing measurable objectives:

SMART Approach

Objectives lay the groundwork for both program planning and program evaluation. Clearly written objectives specify the intention of the program and provide a basis for evaluating the program. Objectives should be SMART:

S = Specific: What exactly are we going to do, with or for whom?

M = Measurable: Is it measurable and do we have the capacity to measure it?

A = Achievable: Can we get it done in the allotted time?

R = Relevant: Will the objective lead to the desired outcome?

T = Time-bound: When will we accomplish the objective?

Another approach to writing SMART objectives is to think of the following question:

"WHO will do WHAT by HOW MUCH by WHEN?"

Two types of objectives that you will need to plan for include:

\* outcome objectives that specify the end-result to be achieved as a result of the program. These could be behavior, knowledge, attitudes, or health indicators.

\* implementation objectives that specify how the program will operate. These focus on the activities of the program.

Step 3: Continued

Examples of outcome objectives:

\* By the end of the project, 75% of parents in the program will report that their children drink less than 6 ounces of juice per day.

\* By September 2009, 50% of program participants will initiate a new physical activity program.

Examples of implementation objectives:

\* By the end of the project, the staff will distribute 200 6-ounce sippy cups to parents with children under age 5.

\* By December 2008, 75% of staff will be trained in client-centered nutrition education techniques.

Examples of objectives from Healthy People 2010:

\* Increase by 75% the proportion of people aged 2 years and older who consume at least two daily servings of fruit.

\* Increase by 50% the proportion of people aged 2 years and older who consume at least three daily servings of vegetables, with at least one-third being dark green or orange vegetables.

\* Increase by 50% the proportion of persons aged 2 years and older who consume at least six daily servings of grain products, with at least three being whole grains.

\* Increase by 75% the proportion of persons aged 2 years and older who consume less than 10 percent of calories from saturated fat.

\* Increase by 65% the proportion of persons aged 2 years and older who consume 2,400 mg or less of sodium daily.

\* Increase by 75% the proportion of persons aged 2 years and older who meet dietary recommendations for calcium.

\* Increase by 85% the proportion of worksites that offer nutrition or weight management classes or counseling.

\* Increase by 75% the proportion of physician office visits made by patients with a diagnosis of cardiovascular disease, diabetes, or hyperlipidemia that include counseling or education related to diet and nutrition.

\* Reduce by 20% the proportion of adults who engage in no leisure-time physical activity.

\* Increase by 30% the proportion of adults who engage regularly, preferably daily, in moderate physical activity for at least 30 minutes per day.

Much of the time, evaluation questions will flow naturally from your objectives. They should clearly indicate to you whether or not the objectives have been met.

For instance, if one of your objectives is for clients to prepare more meals at home using fresh herbs, you should ask them how often they prepare meals at home using herbs. If you wrote clear, measurable objectives, the evaluation questions will be obvious.

#### Step 4: Outline your Activities

Now that you have a goal, a sense of the context and your resources and a focus for your program, you can outline your activities. Program activities should support your objectives. In other words, doing the activities will help you meet your objectives.

As you plan your activities, think about:

\* What kinds of activities will help you meet your objectives?

\* Who is your target audience?

\* How will you recruit participants?

\* How will you keep the participants involved throughout the program?

\* How many sessions will you have?

\* Do your activities form a coherent program?

\* Keep in mind:

\* What people know, think and feel affects how they act.

\* "Why to" knowledge is different from "how to" knowledge.

\* Knowledge is important, but not enough for most behavior changes.

\* Behavior is influenced by perceptions, emotions, motivations, skills, and the social and physical environment (access and availability).

(Adapted from: Theory at a Glance: A Guide for Health Promotion Practice, U.S. Department of Health and Services, National Institutes of Health)

Worksheet Steps 3 & 4:

Objectives & Activities

Instructions: State your goal and write two SMART outcome objectives. For each outcome objective, outline activities that will help you meet your objective. For each activity, write a SMART implementation objective.

GOAL:

Outcome Objective #1 (Who will do what by how much by when)?

What activities can help you reach this outcome objective?

Activity

Implementation Objective

(Who will do what by how much by when?)

Outcome Objective #2 (Who will do what by how much by when)?

What activities can help you reach this outcome objective?

Activity

Implementation Objective

(Who will do what by how much by when?)

Step 5: Plan the Evaluation

Evaluation offers a way to judge whether your program plan was implemented in the ways you intended and whether doing the program

produced the results you expected.

Five questions to help guide your evaluation are:

1. What do you want to know?
2. Compared to what?
3. What is the timing?
4. What will be measured?
5. How are measurements made?

What do you want to know?

There are many aspects of a program that can be measured. You need evaluate only what you want to know. For example, if you want to know if offering a walking program to new moms helps them shed post-pregnancy pounds, then you would measure pre and post program weight. However, if you want to know whether the same program helps reduce baby blues, you would use a brief depression questionnaire. Likewise, if you want to know if new moms would like to participate in such a program, you might informally survey clients during certifications to gauge the interest level.

As you decide what to evaluate, also consider what other stakeholders, including your funder, staff and participant, might want to know.

Compared to what?

There are many ways to make comparisons:

- \* Compare participants' scores on a pre-test to those on a post-test survey they complete once the program is over.
- \* Compare one activity to another. For example, discussion lessons vs. videos or hands-on cooking classes vs. demonstrations.
- \* Compare similar populations - within your agency, you can compare clients who participated in the program with those who did not or you could roll-out your program clinic by clinic and compare clients at different clinics.
- \* Finally, you can compare participants to your standards or Healthy People 2010 standards.

What is the time frame?

There are several points in time to take measurements. Your choice will depend on what you want to learn and what comparisons you will make.

- \* Before the program begins- to have something to compare to end measurements
- \* At each session- to keep track of attendance and get feedback

- \* Right after the program- to compare to pre-test
- \* 3-6 months after the program ends - to learn whether changes are sustained after the program is over

#### Step 5: Continued

What will be measured?

Most of the time, your evaluation questions will flow naturally from your outcome and implementation objectives. Having established criteria for success (measurable objectives), you are now ready to measure them.

How are measurements made?

At this stage, think about what is practical and appropriate for your participants. When writing surveys, think about the readability level of the questions and the literacy level of your clients.

Types of data

Quantitative data focuses on capturing the numbers of your program.  
For example:

- \* Average pounds lost
- \* Number of minutes of physical activity
- \* Number of fruit and vegetable servings
- \* Number of people who attend sessions
- \* Percent of people who switch from whole milk to low fat or fat-free

Qualitative data provides the words that people use to describe your program.  
For example:

- \* Discussion groups with target audience to determine needs, interests and resources
- \* Participants' descriptions of the strengths and weaknesses of the program
- \* Participants' report of what new things they will try
- \* Photo-journals of family meals
- \* Observations of sessions

Examples of evaluation questions are presented in the Appendix.

After you have collected data

Once you have gathered your data, sift through all of your sources of information and begin to judge what you have. Look for trends in the data. For example, do the numbers demonstrate that a certain component of the program was successful in changing behavior (quantitative data)? Does a certain client comment reflect how the program was received (qualitative)? Also recognize surprises among the measurements. What might have happened in your program that you weren't expecting? When you have identified the trends and surprises in your data, you begin to put together a story of what happened.

As you write a report or prepare a presentation based on your conclusions, consider who your audience is. Create the report or presentation so that it provides the information that your audience needs. Program details and evaluation data can support your conclusions and help you present a well-rounded story.

#### Worksheet Step 5:

##### Planning the Evaluation

What kinds of data will help you learn if you have met your outcome objectives?

Height/weight measurements..

Client self-report..

Staff self-report..

Other biometrics..

Foxfire reports..

Interviews..

Other: \_\_\_\_\_..

What kind of data is feasible to collect and analyze?

Height/weight measurements..

Client self-report..

Staff self-report..

Other biometrics..

Foxfire reports..

Interviews..

Other: \_\_\_\_\_..

What are the best ways for you to collect data?

Paper and pencil survey..

One-on-one conversations with .. participants

Group discussions..

Foxfire reports..

Other: \_\_\_\_\_..

How will you make sense of data you collect?

Analysis using Excel..

Graphing results..

Looking at frequencies..

Looking at means..

Summarizing client comments..

Other: \_\_\_\_\_..

When will you collect your data?

Before class..

After the class..

At each session..

Follow-up 3 months after the project .. ends

Other: \_\_\_\_\_..

Worksheet Step 5:

Planning the Evaluation Continued

What will you use as a comparison group?

Clients at another clinic within your ..

agency

Clients who do not participate..

Participant survey data..

No comparison group..

Other: \_\_\_\_\_..

How will you know whether or the  
project was implemented as planned?

Attendance records..

Notes from sessions..

Logs of material distribution..

Client self-report on survey of what they ..  
received

Other: \_\_\_\_\_..

What will you want to tell other  
people?

Description of the problem..

Whether objectives were met..

Description of the program activities..

Participation levels..

Participants satisfaction..

Other: \_\_\_\_\_..

How will you report your findings?

Report for WIC..

Presentation..

Article for WIC News..

Other: \_\_\_\_\_..

Putting it All Together

The following three templates provide you with a format to pull together all of your work into a concise description of your program or work plan.

Program Overview allows you to describe the purpose of your program, summarize what you will use from your assessment, and detail the logistics of the program. You will answer the following questions:

- \* What is the goal of your program?
- \* Why is this issue relevant in your clinic/agency? This is an opportunity for you to indicate why you need this project.
- \* What factors are related to your issue? Describe the behaviors that are related to your goals, the knowledge, attitudes and beliefs that influence behaviors, and the policy and environmental factors that influence the behavior or the goal directly.
- \* What resources do you have to address this issue? List the resources in your agency, community and client population that your program can draw from.
- \* On what level(s) of the socio-ecological model will your program operate (e.g., individual, interpersonal, group, organizations, community)?
- \* What specific behaviors are you going to address?
- \* Who is your target audience? Will your program be geared toward WIC clients, WIC staff, staff at other organizations, children, etc.?
- \* How will you recruit participants?
- \* How many sessions or contacts will you have? Indicate the number of sessions, the number of contacts per participant, or both.
- \* How will you keep the participants involved throughout the program?
- \* What is your proposed budget?
- \* Who will staff the project?
- \* What other resources will be needed?
- \* What training will staff need to be able to carry out the program?
- \* How will you know if your program succeeds? Describe the primary outcomes you hope to see as a result of your program.

Program at-a-Glance is a 1-page model of your program. You will write your program goals and objectives and show how activities and evaluation support your goals and objectives.

Program Timeline offers a visual display of your project milestones and deadlines.

Use your worksheets from each step of this toolkit to fill in the sections on the Program Overview and Program at-a-Glance.

Program Overview

Name of Program:

Program Purpose

What do you want your program to do?

The goal of this project is to: (Insert goal here)

Program Context

Why is this issue relevant in your clinic/agency?

Insert why you need this project.

What factors are related to your issue?

Describe the behaviors that are related to your goals, the knowledge, attitudes and beliefs that influence behaviors, and the policy and environmental factors that influence the behavior or the goal directly.

What resources do you have to address this issue?

List the resources in your agency, community and client population that your program can draw from.

On what level(s) of the

socio-ecological model will your program operate?

Indicate which of the following: Individual, Interpersonal, Group, Organizational, Community

What specific behaviors are you going to address?

Insert target behaviors you want to change.

Program Logistics

Who is your target audience?

Will your program be geared toward WIC clients, WIC staff, staff at other organizations, children, etc.?

How will you recruit participants?

Insert how you plan to recruit participants.

How many sessions or contacts will you have?

Insert the number of sessions you will have or the number of contacts per participant or both.

How will you keep the participants involved throughout the program?

Describe how you will keep participants involved.

What is your proposed budget?

Give your proposed budget: \$\_\_\_\_\_.

Who will staff the project?

Name the staff involved in the project.

What other resources will be needed?

List the resources you will need in order to carry out your program.

What training will staff need to be able to carry out the program?

Describe the training your staff will need.

How will you know if your program succeeds?

Describe the primary outcomes you hope to see as a result of your program.

## Appendix A:

### Program Scenario Examples

This appendix describes three programs scenarios using the Program Overview, Program-at-a-Glance, and Program Timeline templates from the toolkit. The program examples are based on activities undertaken by local agencies in previous years and include:

1. Cooking Class
2. Walking Program
3. Community Collaboration

## Appendix A .

### Program Overview

Name of Program: Cooking With Herbs Instead of Fat & Salt  
Program Purpose

What do you want your program to do?

The goal of this project is to:

Teach clients to use herbs and spices instead of fat and salt to prepare flavorful recipes.

Program Context

Why is this issue relevant in your clinic/agency?

Obesity rates are increasing by 60% in our LA and much of it is related to what people eat and how they prepare meals at home.

What factors are related to your issue?

High fat food preparations are high in calories; offering a substitute such as herbs and spices can reduce fat content in recipes and provide flavorful meals with fewer calories and less salt.

What resources do you have to address this issue?

USDA, Agri-life, WIC staff and nutritionists

On what level(s) of the

socio-ecological model will your program operate?

Individual, Group (family)

What specific behaviors are you going to address?

Cooking skills, awareness and knowledge about ways to prepare low-fat dishes using herbs & spices.

Demonstration of how to grow herb in a pot.

Program Logistics

Who is your target audience?

WIC clients in General Nutrition (GN) Classes

How will you recruit participants?

Participants who come to a GN class Thursdays at 9:20 or 10:20 from June 7 through August 23rd, 2007

How many sessions or contacts will you have?

12 classes; 2 contacts per client (1 class and 1 follow-up)

How will you keep the participants involved throughout the program?

By scheduling the obesity prevention class during regular WIC classes.

What is your proposed budget?

\$8000

Who will staff the project?

Master Gardener, WIC Nutritionists

What other resources will be needed?

Herbs and potting supplies, ingredients for cooking demonstrations, cookbooks, cooking supplies

What training will staff need to be able to carry out the program?

Facilitated discussion training; experience teaching previous WIC classes; basic cooking skills

How will you know if your program succeeds?

Clients will report that they prepare more meals at home with herbs and spices and less fat and salt.

#### Program Overview

Name of Program: Walk with WIC

#### Program Purpose

What do you want your program to do?

The goal is to: Increase access and opportunities for physical activity by providing a safe and encouraging environment and chances to network with people to walk with outside the WIC scheduled walks.

#### Program Context

Why is this issue relevant in your clinic/agency?

High rates of overweight among post-partum women

What factors are related to your issue?

Individual - new moms don't know what exercise is safe for post-partum women

Group - people tend to be more active if their family and friends are active  
(social norms)

Organization - difficult to find childcare for exercise

Community - limited safe walking routes; lack of affordable health clubs

What resources do you have to address this issue?

WIC staff (not just nutritionists)

On what level(s) of the

socio-ecological model will your program operate?

Individual, Group, Community

What specific behaviors are you going to address?

Walking, stretching and strength training with bands

Program Logistics

Who is your target audience?

Women at least 8-weeks post-partum

How will you recruit participants?

Counseling sessions

How many sessions or contacts will you have?

2 weekly sessions for 12 weeks

How will you keep the participants involved throughout the program?

Completion of the program counts as class credit

What is your proposed budget?

\$15000

Who will staff the project?

WIC staff

What other resources will be needed?

Incentives - water bottles

Walking routes

What training will staff need to be able to carry out the program?

Physical activity basics; how to start a walking program; how to use therabands;  
safe stretching instruction

How will you know if your program succeeds?

Participants will report increased physical activity compared to non-participants.

#### Program Overview

Name of Program: Linking Resources for Better Health

#### Program Purpose

What do you want your program to do?

The goal of this project is to:

Establish collaboration between WIC and local pediatricians to increase referrals to WIC and to provide consistent messages about child overweight and nutrition.

#### Program Context

Why is this issue relevant in your clinic/agency?

This issue is relevant in our community because 64% of people report food insecurity, and at the same time, 40% of children are overweight. Currently, physicians in our community don't refer to WIC, and don't usually discuss children's weight status and nutrition with their parents.

What factors are related to your issue?

Individual -Staff at WIC and pediatrics clinics are busy

Group - Lack of communication between WIC and pediatricians - Need for a community-wide childhood obesity prevention effort so that parents are hearing consistent messages about child nutrition and overweight

What resources do you have to address this issue?

WIC staff, 1 interested pediatrics clinic

On what level(s) of the

socio-ecological model will your program operate?

Individual, Group, Community

What specific behaviors are you going to address?

This project will address program and clinical interactions with WIC clients, to ensure that nutrition messages are consistent, and that children are being referred to WIC when appropriate

#### Program Logistics

Who is your target audience?

Pediatricians and pediatric nurses that work with low-income populations

How will you recruit participants?

WIC staff will contact clinics, ask for a contact person, and determine interest.

How many sessions or contacts will you have?

4 contacts per community partner in 1 year

How will you keep the participants involved throughout the program?

WIC staff will ask for a one-year commitment from the other partners. Regular communication initiated and maintained by WIC staff.

What is your proposed budget?

\$12,000 for meeting spaces, staff time, communication, and materials.

Who will staff the project?

WIC NE coordinator, director, one clerk

What other resources will be needed?

Internet connection; e-mail; meeting space; extra NE materials from State WIC office; BMI tear-off pads for doctors to give patients.

What training will staff need to be able to carry out the program?

WIC IDL training on good interpersonal skills and communication

How will you know if your program succeeds?

Participating pediatricians will share BMI information with parents. Increase of referrals to WIC.

#### Appendix B:

##### Additional Resources for Program Planning

This section is provided as things to think about when developing a nutrition education/obesity prevention project.

Topics in this section include:

- 1.How People Learn
- 2.The Adult Learner
- 3.Beyond Knowledge in Nutrition Education
- 4.Self-efficacy
- 5.Tips for Incorporating Self-efficacy in WIC Programs
- 6.Focus on the Client

Appendix B .

How People Learn

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Link:

<http://teacherworld.com/potdale.html>

The Adult Learner

"Never do for the learner what they can do for themselves"

- David Miere

Have you ever thought about how you can make a difference in your clients' learning experience? Or better yet, how do your clients learn best?

Adult learners:

- Like to learn useful knowledge and skills that they can apply immediately
- Are experts in their own lives.
- Like to learn from peers and share their own unique experiences
- Like to feel they are in charge of their learning.

Need to know why they need to learn something before they decide to learn it.

- For the most part, are active learners. They learn more from doing and saying.
- Don't have time to waste.
- Don't like to be told what to do - they like to choose whether or not they apply the information.
- Are motivated intrinsically (internally) by: self-esteem, quality of life, job satisfaction, and health and avoidance of disease.
- Need to "own" the problem in order to solve it.

Influences on adult learners:

- Current life stage
- Past experiences
- Current beliefs
- Attitudes
- Expectations

You can provide your clients with a great learning experience.

- Create a non-threatening environment, and a comfortable setting, in which they feel accepted and respected.
- Provide information in manageable amounts = just a couple of key points at a session.
- Establish clear & attainable expectations for meeting their personal goals.
- Allow opportunities for peers to share practical solutions to everyday problems.
- Respect their points of view and remember that they are not always open to others' points of view.

Beyond Knowledge in Nutrition Education

How do Texas WIC families feed their children?

How can WIC Nutrition Education most effectively promote healthy child feeding?

These are some of the questions addressed by the Texas WIC Child Feeding Study.

Keep up the good work! WIC clients:

- eat fast food less often & home cooked meals more often than other children.
- are more likely to look at Nutrition Facts than other low-income parents.
- are less likely to perceive their children to be picky eaters.
- are more likely to initiate breastfeeding than other low-income women.

Keep in mind:

- Nutrition knowledge is not associated with healthy eating.
- Move past knowledge to promote healthy behaviors.
- Use adult learner strategies to determine what information will be relevant.
- Parents with higher self-efficacy (confidence) report that their children ate more fruits & vegetables & fewer sweets.
- Use activities that build self-efficacy (e.g., hands-on experiences, role playing, peer modeling, goal setting) to promote healthy eating.
- WIC parents are concerned about their children's weight.
- Parents who are concerned about their children's weight may be ready to make healthful changes.
- WIC clients are more food insecure than other low-income parents.
- Parents are more concerned with cost than nutritional content.
- WIC households spend the least amount of money per week on food (not counting WIC vouchers and other food assistance).
- Providing enough food for the family may be your clients' biggest concern.
- Be sensitive to clients' hunger issues.
- Work with clients to make nutritious food choices on a budget.
- Parents choose what to feed their children based on child preference, not nutritional content.
- Work with clients to create healthy menus and recipes with child appeal.
- Get the kids involved to increase desire for healthy foods.

For more information on the Texas Child Feeding Study,  
go to the following website:

[www.dshs.state.tx.us/wichd/nut/riskreport-nut.shtm](http://www.dshs.state.tx.us/wichd/nut/riskreport-nut.shtm)

## Self-Efficacy

Behavior change requires both skills and the confidence to use them effectively.

The Texas WIC Child Feeding Study found that parents' confidence in their ability to buy, prepare, and serve fruits and vegetables for their children was strongly linked with actual fruit and vegetable intake. This confidence is also referred to as self-efficacy.

What is self-efficacy?

Confidence in one's ability perform specific behaviors in specific situations•

Includes confidence to overcome barriers •

A thought that influences action•

Not focused on reaching a goal, but the specific actions necessary to reach goal•

People with high self-efficacy:

Are motivated•

Persevere in the face of barriers•

Persist over time•

Are more likely to take action•

What Builds Self-Efficacy?

Learning through personal  
experience

Be • specific about the desired behavior

Approach behavior change in • small, manageable steps  
to build confidence

Give participants a chance to practice each step along •  
the way

Set • goals

Learning through observation

Role-play, use peer models or demonstrate desired •  
behaviors

Positive feedback,  
encouragement, and  
reinforcement

Help clients identify barriers and strategies to •  
overcome them

Encourage clients in their efforts•

Understanding body signs and  
signals related to the behavior  
and creating strategies to cope  
with them

Talk about soreness or fatigue clients might feel when •  
starting a new physical activity program

Work with clients to recognize their own internal •  
hunger and satiety cues

Develop coping strategies for dealing with feelings of •  
stress

Building Self-Efficacy in WIC NE Programs

Example 1: Building self-efficacy through cooking classes

1. Class members talk about experiences they have had with substituting low-fat ingredients for higher fat ingredients.

2. Instructor demonstrates how to chop ingredients and asks class members to help.

3. Class members practice preparing a recipe.

4. Class members sample the foods they have prepared.

Example 2: Building self-efficacy through physical activity classes

1. Clients share ways that they are physically active and address solutions to common barriers.

2. Instructor demonstrates stretches and strength-building activities that can be done while sitting in a chair or working in the kitchen.

3. Clients try out exercises, walk around the block.

4. Clients share how they felt during and after the walk.

5. Clients set a small goal that they can accomplish for the next week/month -

For example:

add 10 minutes of light to moderate activity on most days.

6. Instructor tells clients that some feelings of discomfort (soreness) are normal when starting an exercise program. Instructor provides ways to decrease discomfort (rest days between exercise, etc.) and addresses what are signs of injury and what are signs that body is getting stronger.

What are some other ways you can build self-efficacy in WIC clients?

Focus on the Client

What is client-centered nutrition education?

Focuses on clients' concerns & interests.

Uses discussion & hands-on learning instead of detailed lesson plans.

Encourages client participation.

Moves the instructor role from "teacher" to "guide" in helping WIC clients make healthy choices.

Can take many forms: from facilitated discussion to "action-oriented" classes that involve

clients directly in the learning experience

Benefits of client-centered nutrition education:

Keeps staff and clients engaged.

Well suited for adult learners.

More interesting and relevant for clients.

Can be tailored to agency staff and client backgrounds and experiences.

Increases clients' sense of social support in WIC

What is social support and how can client-centered NE provide it?

Social support is help that is exchanged through social relationships and interactions.

Here are different types of social support and some examples of how social support can

be incorporated into WIC nutrition education. Can you think of others?

## Type of Social Support

### Examples

Expressions of empathy, love, trust, and caring

Class leader establishes ground rules for fair, safe discussions •

Class leader and members express empathy with parents' concerns about their children •

Tangible aid and service

Recipes and cooking classes for items in WIC food package, in addition to vouchers •

Nutrition education activities for children while parents attend class •

Advice, suggestions, and information

Recommendations for portion sizes, cost savings in the supermarket, and physical activities •

Information that is useful for self-evaluation

Parents' and children's BMI information provided to clients •

Clients share how they approach feeding issues •

### Sources:

Evaluation of Client-Centered NE Pilots in 8 Local Agencies, UT Austin NE Team, 2007.xx

Contento, Isobel R. Nutrition Education: Linking Research, Theory, and Practice, 2007. Jones and xxBartlett Publishers, Sudberry, Massachusetts.

Glanz, Rimer, and Lewis, Editors. Health Behavior and Health Education: Theory, Research, and xxPractice, 3rd Edition. 2002, Jossey-Bass, San Francisco.

### Appendix C: Evaluation Tools

There are many different types of tools that can be used to help you evaluate your programs.

Surveys and tracking logs are two commonly used evaluation tools. Surveys are a way to

measure behavior, knowledge, and attitudes related to your program objectives. "Tracking logs" are tools that can be used to keep track of behaviors and activities over time. Logs can be used to keep track of program attendance, weight, exercise minutes/miles, food intake, or simply tracking the distribution of program materials. This appendix includes examples of questions that you might include in surveys to evaluate your projects, followed by examples of surveys and tracking logs used by local agencies to evaluate their obesity mini-grant projects.

#### How to Choose Evaluation Tools

When choosing evaluation tools:

Think about your outcome and implementation objectives. What types of information do you need in order to learn if you are meeting your objectives?

Keep your materials as short and simple as possible, while still getting all of the information you need.

Limit the questions to the things that relate directly your objectives and your evaluation questions.

Whenever possible, use or adapt something that has already been created. This will save you time and keep you from "re-inventing the wheel."

For example, if your program objectives are to reduce soda consumption and increase water intake among children, you should ask direct questions about soda and water intake. You can also ask questions about the factors that you think influence the behaviors and that your program addressed, such as availability of soda in the home or receipt of a water bottle incentive item.

Think about how you will analyze the data. Closed-ended questions can be entered into a database, such as Excel, relatively easily. Checklists and attendance records can be quickly tallied. Open-ended questions, on the other hand, can sometimes require more time to summarize and can lead to a more subjective measure.

In addition to the resources in this appendix, the following websites include more detailed information on creating evaluation tools:

<http://www.ttac.org/power-of-proof/index.html>

[http://www.wicworks.ca.gov/education/nutrition/toolKit/1\\_index/toc.htm](http://www.wicworks.ca.gov/education/nutrition/toolKit/1_index/toc.htm)

## Sample Survey Questions

### Fruits & Vegetables

- 1.How many servings of fruit does your child eat each day? \_\_\_\_\_
- 2.How many servings of vegetables does your child eat each day? \_\_\_\_\_
- 3.Does your child eat more than 1 kind of fruit a day?
- 4.Does your child eat more than 1 kind of vegetable a day?
- 5.Does your child eat 2 or more servings of vegetables at his/her main meal?
- 6.Does your child eat fruit or vegetables as snacks?

### Response options:

02 Always 01 Sometimes 00 Never

### General Diet

- 1.Would you describe this child's diet as excellent, very good, fair, or poor?

03 Excellent 02 Very good 01 Fair 00 Poor

- 1.Does he/she drink milk daily?

02 Always 01 Sometimes 00 Never 088 Don't know

- 2.About how many cups of milk does he/she usually drink each day? \_\_\_\_\_

088 Don't know

- 3.What kind of milk does he/she usually drink?

00 Skim/Fat Free 01 1% / Low-fat 02 2%/ Reduced-fat 03 Whole

04 Soy 05 Formula 06 Breast milk

### Milk Intake

### Juice Intake

- 1.Does he/she drink 100% fruit juice daily?

02 Always 01 Sometimes 00 Never

- 2.About how many ounces of juice does he/she usually drink each day? \_\_\_\_\_

088 Don't know

Sample Survey Questions Continued

Sweet Beverages

1.How often does your child drink regular (non-diet) soft drinks?

2.How often does your child drink Kool-Aid, Gatorade, Sunny Delight, or other fruit drink or punch?

Response options:

03 Daily 02 Weekly 02 Monthly 00 Never

Sample format for food frequency questionnaires:

How many times in the past week did your child have [substitute foods related to your outcome objectives]:

0 1 2 3 4 5 6 7+

Apples, applesauce, or pears 00 01 02 03 04 05 06 07

Carrots 00 01 02 03 04 05 06 07

Spinach 00 01 02 03 04 05 06 07

Food Frequency

1.How often do you plan your child's meals ahead of time?

2.When deciding what to feed your family, how often do you think about healthy food choices?

3. How often do you prepare meals at home?

4.How often does your child help you prepare meals at home?

Response options:

00 Almost Never 01 Sometimes 03 Almost Always

1.How often does your child eat fast-food?

2.How often does your child eat a home cooked meal for his or her main meal?

Response options:

00 Never 01 Less than once a week 02 1-3 times a week

03 4-6 times a week 04 Every day

How many times a day does your child eat a snack?

00 Never 01 Once 02 Twice

03 Three times 04 Whenever he/she asks for something

Besides you, who else regularly fixes food for your child?

01 Other parent or step-parent 02 Grandparents 03 Brothers or sisters

04 Aunt or Uncle 05 Day care 06 School

07 Babysitter / Nanny 08 Themselves

Meal Planning

Sample Survey Questions Continued

Family Mealtime

Please mark how often each statement is true for your family:

1.The TV is turned off during meals.

2.My family sits down to eat meals together.

3.Mealtime with my family is enjoyable.

Response options:

00 Almost Never 01 Sometimes 03 Almost Always

Food Shopping

How many times did you or someone in your household shop for food last week?

\_\_\_\_\_

1.How often do you shop with a grocery list?

2.How often do you compare prices before you buy food?

3.When shopping, how often do you use the Nutrition Facts on the food label to choose foods?

Response options:

00 Never 01 Rarely 02 Sometimes

03 Often 04 Almost Always

On average, how much do you spend each week on groceries, not counting WIC vouchers, EBT, and/or Lonestar cards?

01 Less than \$25 02 \$25-\$50 03 \$51-\$75

04 \$76-\$100 05 More than \$100

## Food Security

1. Do you run out of food before the end of the month because you can't afford to buy more?

2. Do you worry that you will run out of food before you can afford to buy more?

Response options:

02 Always 01 Sometimes 00 Never

## Sample Survey Questions Continued

**Moderate Physical Activity:** activities that take a medium amount of physical effort and make you breathe somewhat harder than normal (minimum 10-minute sessions).

[Note: The following question addresses stages of change for physical activity. Questions like this can be useful for assessing how ready a participant is for adopting a new behavior.]

When it comes to doing moderate physical activity for at least 30 minutes on 5 or more days of the week, I am: (Check the answer that best describes your behavior.)

01 Not thinking about doing it 04 Already doing it, but for less than 6 months

02 Thinking about doing it 05 Already doing it for 6 months or more

03 Planning to do it

[Note: When analyzing the next two questions, multiply the response on the first by the one on the second to get a total physical activity score. You can compare these scores pre- and post-program.]

1. On average, how many days a week do you do physical activities that take a medium amount of effort and make you breathe somewhat harder than normal? (Check the answer that best describes your behavior.)

00 Zero days 01 1 day 02 2 days 03 days

04 4 days 05 5 days or more

2. On the days that you did do moderate physical activity, for about how many total minutes per day were you active? (Check the answer that best describes your behavior.)

00 <10 minutes 03 30 - 44 minutes

01 10-19 minutes 04 45 - 59 minutes

02 20-29 minutes 05 60 minutes or more

Please mark how often the following are true for you:

1. My child sees me being physically active.
2. I participate in physical activities with my child.

Response options:

00 Almost Never 01 Sometimes 03 Almost Always

Physical Activity

Sample Survey Questions Continued

Behavior Intention & Change

Intention: In the next three months, do you plan to do any of the following?

Change: In the past three months, have you tried to do any of the following?

[Note: Choose behaviors that are related to your outcome objectives.]

Examples of behaviors:

1. Lose weight
2. Be physically active most days of the week
3. Watch less TV
4. Eat low fat foods
5. Eat more fruits and vegetables
6. Buy fruits and vegetables at a Farmer's market
7. Cook more meals at home

Response options:

01 Yes 00 No  
Parental Attitudes

How much do you agree or disagree with the following statements?

Sample items:

1. My child asks for the foods he or she sees on TV.
2. The way a family eats can be related to weight problems in children.
3. The way my child eats can help prepare him/her to do well at school.

4.If Type 2 diabetes runs in your family, the way you eat can help you prevent it.

5.It's too expensive to eat a lot of nutritious foods.

Response options:

00 Disagree a lot 01 Disagree a little 02 Agree a little 03 Agree a lot

#### Sample Survey Questions Continued

#### Self-Efficacy Scale

[Note: The following eight questions are intended to be used as a set. When analyzing the responses, add up the item scores and divide by 8 (the number of items) for a "scale score."]

1.How sure are you that you know which vegetables to buy for your child?

2.How sure are you that you can make vegetables in ways that your child will like?

3.How sure are you that you can serve your child one new vegetable each week?

4.How sure are you that your child will eat the vegetables you serve?

5. How sure are you that you can buy more fresh fruit in place of chips, crackers, candy and cookies?

6.How sure are you that you can give your child fruits and vegetables at snack time?

7.How sure are you that your child will eat fruits and vegetables at snack time?

8.How sure are you that you can get fruit for your child instead of French fries when you eat out?

Response options:

00 I don't feel sure 01 I feel a little sure 02 I feel fairly sure 03 I feel very sure

#### Knowledge

[Note: Use knowledge questions sparingly and ask only questions about topics which are covered specifically by your program.]

1. How many servings of fruits and vegetables should a child eat every day?

01 1-2 02 3-4 03 5-9 04 10-15 088 I don't know

2.What is the maximum amount of 100% fruit juice that is recommended for a child each day?

01 None 02 11-3 ounces 03 4-6 ounces

04 7-12 ounces 088 I don't know

3.How much milk is recommended for a child (age 1-5) to drink each day?

01 8 ounces or less 02 12 ounces 03 16 ounces

04 20 ounces 088 I don't know

4.At what age should a child switch from whole milk to low fat or fat free milk?

01 1 02 2 03 3 04 4 088 I don't know

5.Is a typical restaurant serving size too big, too small, or just right?

01 Too big 02 Too small 03 Just right 088 I don't know

#### Demographics

#### Sample Survey Questions Continued

How old are you?

01 15 younger

02 16-18

03 19-29

04 30 or older

How many children do you have? \_\_\_\_\_

How old is your child? \_\_\_\_\_

What is your relationship to the child(ren) on WIC?

01 Mother

02 Father

03 Foster parent

04 Grandparent

05 Other: \_\_\_\_\_

What is the highest level of school you have finished?

01 1st to 6th grade

02 7th to 9th grade

03 10th to 12th grade

04 High school or GED

05 Trade or technical school

06 College

What is your race or ethnicity? (Mark all that apply.)

01 Hispanic or Latino

02 White

03 Black

04 Asian or Pacific Islander

05 Native American or Alaskan

06 Mixed race

What is the main language spoken in your home?

01 English

02 Spanish

03 Both English and Spanish

04 Other: \_\_\_\_\_

#### Example of a DVD Evaluation

Thank you for choosing the Zobey take-home lesson and DVD. We would like to learn more about your child's reactions to the video. Please take a few minutes to complete this short survey and return it to the front desk at the WIC clinic. Your answers will be private.

Gracias por elegir la lección de Zobey y el DVD para llevar a casa. Nos gustaría conocer más acerca de la reacción que tuvo su niño al video. Por favor tome unos minutos para contestar este cuestionario y regréselo al mostrador en su clínica de WIC. Sus respuestas serán mantenidas en privado.

Please answer the questions thinking about your oldest child in WIC who watched Zobey.

Por favor, conteste las siguientes preguntas sobre su hijo mayor inscrito en WIC que haya visto el video de Zobey.

1. My child's age is / Mi hijo/a tiene:

2. My child is a / Mi hijo es un/a:

\_\_\_\_\_ Years / Años \_\_\_\_\_ Months / Meses

\_\_\_\_\_ Boy / Niño \_\_\_\_\_ Girl / Niña

3. Which Zobey video did your child watch? (circle one)

¿Cuál de los videos de Zobey vió su hijo? (circule uno)

A Trip to Bugland/ Searching for a Rainbow/ Both/ Neither/

Un Viaje a Insectolandia Buscando un Arco Iris Los dos Ninguno

4. My child watches the video in (mark one) / Mi hijo vio el video en (marque uno):

\_\_\_\_\_ English/ Inglés \_\_\_\_\_ Spanish /Español \_\_\_\_\_ Both/Ambos

5. How many times has your child watched the video? / ¿Cuántas veces ha visto su hijo el video?

\_\_\_\_\_ Has not watched it yet/ No lo ha visto todavía

\_\_\_\_\_ 1 time/ vez

\_\_\_\_\_ 2-5 times/ veces

\_\_\_\_\_ 6-9 times/ veces

\_\_\_\_\_ 10-15 times/ veces

\_\_\_\_\_ Too many times to count / Demasiadas veces para saberlo

6. Does your child ever ask to see Zobey? / ¿Alguna vez le pidió su hijo ver el video de Zobey?

\_\_\_\_\_ Yes/ Sí \_\_\_\_\_ No

A trip to Bugland DVD

Searching for a Rainbow DVD

DVD Evaluation Continued

7. Did your child start asking for any of the following foods more often after watching Zobey?

¿Empezó a pedir su hijo alguno de estos alimentos más seguido después de ver el video de Zobey?

a. Water/ Agua

\_\_\_Yes/Sí \_\_\_No

f. Cantaloupe/Melón

\_\_\_Yes/Sí \_\_\_No

b. Apples/Manzanas

\_\_\_Yes/Sí \_\_\_No

g. Tomatoes/ Tomates

\_\_\_Yes/Sí \_\_\_No

c. Mangoes/Mangos

\_\_\_Yes/Sí \_\_\_No

h. Grape/Uvas

\_\_\_Yes/Sí \_\_\_No

d. Oranges/ Naranjas

\_\_\_Yes/Sí \_\_\_No

i. Strawberries/Fresas

\_\_\_Yes/Sí \_\_\_No

e. Carrots/ Zanahorias

\_\_\_Yes/Sí \_\_\_No

j. Green Beans/ Ejotes

\_\_\_Yes/Sí \_\_\_No

8. On a scale of 1 to 4, circle how much you agree with each of the following statements:

En una escala del 1 al 4, marque el número que indica cuánto está de acuerdo con lo siguiente:

Not At All

Nada

Very Much

Mucho

a.I liked the video.

Me gustó el video.

1

2

3

4

b.My child liked the video.

A mi hijo le gustó el video.

1

2

3

4

c.The video gave me new ideas for helping my child be active.

El video me dió nuevas ideas para ayudar a mi hijo a ser activo.

1

2

3

4

d.WIC should have more videos like this.

WIC debería tener más videos como éste.

1

2

3

4

e.The video helped me offer fruits and vegetables to my child.

El vídeo me ayudó a ofrecer frutas y verduras a mi niño.

1

2

3

4

9. On a scale of 1-4, circle how often the following statements are true for you:

En una escala del 1-4, para usted que tan frecuente son ciertos los siguientes comentarios:

Never

Nunca

Always

Siempre

a. There is enough space for my child to move around in front of the TV.

Hay suficiente espacio para que mi niño se mueva enfrente de la TV.

1

2

3

4

b. I let my child move around or dance while watching TV.

Permito que mi hijo se mueva o que baile mientras ve la TV.

1

2

3

4

c. My child danced to the video when she/he watched it.

Mi niño bailó mientras veía el vídeo.

1

2

3

4

d.I danced to the video with my child.

Bailé con mi hijo mientras veíamos el video.

1

2

3

4

DVD Evaluation Continued

10. Did you get the book, "A Trip to Bugland?"

¿Recibió el libro "Un viaje a Insectolandia?"

Yes/Sí \_\_\_\_\_

No\_\_\_\_\_

11.

Did you get a Zobey magnet?

¿Recibió un imán de Zobey?

Yes/Sí \_\_\_\_\_ No\_\_\_\_\_

12.Did you get a Zobey coloring book?

¿Recibió un cuaderno para colorear de Zobey?

Yes/Sí \_\_\_\_\_

No\_\_\_\_\_

13.Did you get a Zobey sticker?

¿Recibió una estampa de Zobey?

Yes/Sí \_\_\_\_\_ No\_\_\_\_\_

14.My ethnic group is (check all that apply) / Mi grupo étnico es (marque todas las que apliquen):

White/ Blanco  Asian/ Asiático  
 Hispanic/ Hispano  Native American/ Nativo americano  
 African American/ Afro americano  Other/ Otro

Appendix C continued:

Evaluation Tools from FY07

Local Agency Obesity Prevention Projects

This section includes evaluation tools that were used by local agencies during the FY07 grant period.

1. "Reading Initiative" survey
2. "Healthy Living" evaluation materials for WIC clients (children and adults) and staff
3. "Viva Saludable" pre- and post-tests
4. "WIC Workout: Fitness is Fun" survey
5. "Fit Kids Wellness Program" evaluation materials
6. "Childhood Obesity Prevention Workshop" survey

WIC Reading Initiative Survey

Pre-test/Post-test

(This type of survey could also be used to evaluate a DVD)

Child's Name: This survey is about \_\_\_\_\_

(Child's Name)

1. How old is your child? \_\_\_\_\_ years & \_\_\_\_\_ months
2. Did you or someone else read to or look at a book with your child yesterday?  
\_\_yes \_\_no
3. How many days during the past week did you or someone else look at or read a book with your child? \_\_\_\_\_
4. How many children's books do you have in your home?  
\_\_ 0 \_\_ 7-9

1-3  10-15

4-6  16 or more

5. How many cups of water does your child usually drink each day? \_\_\_\_\_

6. How many times a day does your child usually eat fruit (not juice)? \_\_\_\_\_

7. How many times a day does your child usually eat vegetables? \_\_\_\_\_

8. How many times a week does your child usually play outdoors or at a playground?

Never

1

2

3

4 or more

9. How much time each day does your child usually spend in front of a TV or computer screen (including video games)?

None

Less than 1 hour

1-2 hours

More than 2 hours

WIC Reading Initiative Survey continued

10. Does your child enjoy reading or looking at books?

Not at all

A Little

A Lot

11. Do you enjoy reading or looking at books with your child?

Not at all

A Little

A Lot

12. Will reading or looking at books with your child help him or her to be smarter or more successful?

Not at all

A Little

A Lot

13. Would you like to have children's books available in the WIC Lobby?

Not at all

A Little

A Lot

14. Has your child ever received a book from WIC?  yes  no

15. Did your child receive A Zoo Friend's Lunch from WIC?  yes  no

16. Have you completed the Self-Paced lesson called "Reading to Your Young Child?"  yes  no

17. What describes your highest level of education?

6th grade or less  7th - 9th grade

10 - 11th grade  High School Graduate

Vocational/Technical School  Some College

Associate Degree  Bachelor's Degree

Graduate School

### Child Survey

This questionnaire is only for kids 2 years and older. You do not need to fill in the gray shaded areas. This is not a test. There are no wrong answers.

Name \_\_\_\_\_ ph# \_\_\_\_\_ D.O.B \_\_\_\_\_

Please mark the box that best answers each question.

Does your child eat more than 1 kind of fruit daily?

Yes

No

How many servings of fruit does your child eat each day?

Does your child eat more than 1 kind of vegetable a day?

Yes

No

How many servings of vegetables does your child eat each day?

Does your child eat fruits or vegetables as snacks?

Yes

No

How often in a week does your child eat at fast-food restaurants?

Less than  
once a  
month

Once a  
month

Once a  
week

Twice a  
week

Three  
times a  
week

More than  
three  
times a  
week

How often do you give you child reduced fat (2%) or low-fat (1%) or non-fat milk?

Don't  
drink milk

Never

Rarely

Sometimes

Almost  
Always

Always

Does your child eat any whole grained foods such as  
100% whole wheat bread, brown rice, cereals made with whole grains?

Never

Rarely

Sometimes

Almost

Always

Always

How often does your child drink regular sodas?

Never

Sometimes

Often

Daily

More than

1 can a  
day

Does your child have Kool-Aid, Gatorade, Sunny Delight,  
or other fruit drink/punch?

Never

Rarely

Sometimes

Almost

Always

Always

How much water does your child drink during the day?

None

4 oz

8 oz

12 oz

16 oz

32 oz

Approximately how much 100% fruit juice does your child have in a day?

Less than

4 oz

4 oz

6 oz

8 oz

12 oz

More than

16 oz

How many times a week does your child play outdoors?

Less than once a week

Once a week

Twice a week

3 times a week

4 times a week

5 or more times a week

Height \_\_\_\_\_ Weight \_\_\_\_\_ BMI \_\_\_\_\_

Adult Physical Activity & Nutrition Survey

with Goal Setting

Name

Height

Weight

BMI

Note: BMI = [ Weight in Pounds / ( Height in inches ) x ( Height in inches ) ] x 703

### Current Eating patterns

(Choose yesterday or a typical day's diet as the basis)

Food

Amount

Sodas per day (# and oz.)1.

2. Fruits and vegetables (cups per day)

3. Amount of water/day (oz)

4. Amount of Juices/day (oz)

5. Amount of Chips/ fries per day (cups)

### Current Physical Activity

Moderate Physical Activity: activities that take moderate physical effort and make you breathe somewhat harder than normal (minimum 10-minute sessions).

On average, on how many days a week do you do physical activities that take a medium amount of effort and make you breathe somewhat harder than normal? (Check the answer that best describes your behavior.)

Zero days  1 day  2 days  3 days  4 days  5 days or more

For about how many total minutes per day were you active on the days that you did participate in moderate physical activity? (Check the answer that best describes your behavior.)

<10 minutes  30 - 44 minutes

10-19 minutes  45 - 59 minutes

20-29 minutes  60 minutes or more

Nutrition Goals:

Exercise Goals:

"Viva Saludable" Class Pre-Test

El siguiente cuestionario es para evaluar los conocimientos que ustedes tienen anteriormente y después analizar los logros de haber participado en el curso de peso saludable. Les agradecemos su participación. Esta encuesta nos ayudara analizar la eficiencia de las clases. Por favor conteste una respuesta por pregunta. Contestar las preguntas de acuerdo con el consumo de alimentos de su niño/nina.

1. Cuanto jugo toma su hijo en un día?

- a. Entre 4 y 6 onzas al día
- b. Menos de 4 onzas al día
- c. Entre 6 y 12 onzas al día
- d. Mas de 12 onzas.

2. Con cuales tipos de aceites o mantecas cocina usted?

- a. Manteca de cerdo
- b. Mantequilla
- c. Margarina
- d. Aceite Canola
- e. Otros aceites líquidos

3. Que tipo de granos (pan, cereal, pasta, tortilla) consume su hijo(a)?

- a. Blancos/refinados (tortilla de harina, pan blanco, pasta regular)
- b. Granos refinados y integrales
- c. Granos integrales (pan integral, arroz marron, pasta integral)

4. En una semana, con cuanta frecuencia realizan sus hijos actividades físicas durante 20 a 30 minutos por lo menos?

- a. Tres veces por semana
- b. Una vez por semana
- c. Todos los días
- d. Ocasionalmente
- e. Nunca

5. En un día, Cual es la máxima cantidad de horas que su hijo(a) pasa frente al televisor?

- a. No mas de una hora
- b. Una hora
- c. Entre una o dos horas
- d. Mas que dos horas
- e. Todo el dia

6. Cuales tipos de leche consumen sus hijos?

- a. Leche entera (tapa roja o negra)
- b. Leche al 2% (tapa azul)
- c. Leche al 1% (tapa celeste, verde, o amarilla)
- d. Leche descremada o skim (tapa morada o rosada)

7. Cuales son los bocadillos/meriendas que usted ofrece a sus hijos entre comidas?

---

---

"Viva Saludable" Class Pre-Test continued

8. Entender las etiquetas o "Food Labels" en los productos que consumimos nos sirve para:

- a. Identificar los ingredientes incluidos en ese producto
- b. Saber cuantas calorías contiene el producto
- c. Saber la cantidad de vitaminas que contiene
- d. Saber si es alto en grasa o azúcar
- e. Todas las anteriores.
- f. Yo no se, porque nunca la miro
- g. No la entiendo

9. Si en la "Nutrition Facts" del producto, leemos que contiene menos de 3g de grasa este es un alimento bajo en grasa.

Cierto\_\_\_\_\_ Falso\_\_\_\_\_

10. Dentro del grupo del pan, cereal, pasta, tortillas, galletas, cuales son mas saludables?

---

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11. Dentro del grupo de las proteínas (carne, pollo, puerco, pescado, frijoles, lentejas, nueces, huevos), cuáles contienen menos grasa? Como se puede bajar la grasa de las carnes?

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12. Cuáles son las consecuencias para un niño que está sobrepeso?

- a. Enfermedades crónicas como diabetes
- b. Tener el colesterol alto
- c. No poder hacer ejercicios como otros niños
- d. Puede ser que otros niños le hagan chistes sobre su peso
- e. Todas las opciones anteriores

13. Cuáles son sus expectativas con estas clases? Como podemos ayudarles?

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14. Que temas les gustarían aprender en estas clases?

---

---

15. Cuáles son las actividades físicas favoritas de su hijo(a)?

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16. A cuántas clases planean asistir? Que tipos de incentivos podemos darles?

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"Viva Saludable" Class Post-Test

El siguiente cuestionario es para evaluar los conocimientos adquiridos y los logros después de haber participado en el curso de peso saludable, le agradecemos su participación. Sus respuestas nos ayudarán

para otros cursos en el futuro. Por favor conteste una respuesta por pregunta. Contestar las preguntas de acuerdo con el consumo de su niño/nina.

1. Cuanto jugo toma su hijo en un dia?

- a. Entre 4 y 6 onzas al dia
- b. Menos de 4 onzas al dia
- c. Entre 6 y 12 onzas al dia
- d. Mas de 12 onzas.

2. Con cuales tipos de aceites o mantecas cocina usted?

- a. Manteca de cerdo
- b. Mantequilla
- c. Margarina
- d. Aceite Canola
- e. Otros aceites liquidos

3. Que tipo de granos (pan, cereal, pasta, tortilla) consume su hijo(a)?

- a. Blancos/refinados (tortilla de harina, pan blanco, pasta regular)
- b. Granos refinados y integrales
- c. Granos integrales (pan integral, arroz marron, pasta integral)

4. En una semana, con cuanta frecuencia realizan sus hijos actividades fisicas durante 20 a 30 minutos por lo menos?

- a. Tres veces por semana
- b. Una vez por semana
- c. Todos los dias
- d. Ocasionalmente
- e. Nunca

5. En un dia, Cual es la maxima cantidad de horas que su hijo(a) pasa frente al televisor?

- a. No mas de una hora
- b. Una hora
- c. Entre una o dos horas
- d. Mas que dos horas

e. Todo el dia

6. Cuales tipos de leche consumen sus hijos?

a. Leche entera (tapa roja o negra)

b. Leche al 2% (tapa azul)

c. Leche al 1% (tapa celeste, verde, o amarilla)

d. Leche descremada o skim (tapa morada o rosada)

7. Cuales son los bocadillos/meriendas que usted ofrece a sus hijos entre comidas?

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---

"Viva Saludable" Class Post-Test continued

8. Entender las etiquetas o "Food Labels" en los productos que consumimos nos sirve para:

a. Identificar los ingredientes incluidos en ese producto

b. Saber cuantas calorías contiene el producto

c. Saber la cantidad de vitaminas que contiene

d. Saber si es alto en grasa o azúcar

e. Todas las anteriores.

f. Yo no se, porque nunca la miro

g. No la entiendo

9. Si en la "Nutrition Facts" del producto, leemos que contiene menos de 3g de grasa este es un alimento bajo en grasa.

Cierto\_\_\_\_\_ Falso\_\_\_\_\_

10. Dentro del grupo del pan, cereal, pasta, tortillas, galletas, cuales son mas saludables?

---

---

11. Dentro del grupo de las proteínas (carne, pollo, puerco, pescado, frijoles, lentejas, nueces, huevos), cuales contienen menos grasa? Como se puede bajar la grasa de las carnes?

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12. Cuales son las consecuencias para un niño que está sobrepeso?

- a. Enfermedades crónicas como diabetes
- b. Tener el colesterol alto
- c. No poder hacer ejercicios como otros niños
- d. Puede ser que otros niños le hagan chistes sobre su peso
- e. Todas las opciones anteriores

13. Después de haber recibido el curso de peso saludable, ¿cuántos cambios han hecho usted y su familia en su estilo de vida en los últimos 5 meses?

- a. Un cambio
- b. Dos cambios
- c. Tres cambios
- d. Cuatro o más cambios.

14. Cuales de sus expectativas con las clases fueron cumplidas? Cuales no fueron?

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15. ¿Cuál fue la actividad favorita de su hijo(a) durante las clases?

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"Viva Saludable" Class Post-Test continued

16. ¿Que otros temas cree que deberían incluirse durante este curso?

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17. ¿Que más podríamos hacer para ayudarle a su familia a desarrollar hábitos saludables?

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18.De zero a dies, cuanto usted estuvo satisfecha con las clases

19.Usted recomendaria estas clases a una conocida?

Comentarios:

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Muchas gracias por su tiempo y opinion!

Follow-Up Survey:

"WIC Workout: Fitness is Fun / Ejercicio es Divertido"

The last time you came to WIC, you attended a class called "WIC Workout: Fitness is Fun." Please answer the following questions in regard to that lesson.

La ultima ez que vino a WIC vino a una clase llamada "WIC Workout: Ejercicio es Divertido." Por favor de contestar estas preguntas sobre la clase.

1. Compared to 3 months ago, how much do you exercise?

Comparado a 3 meses atras, cuanto ejercicio haces?

I exercise more often now. Yo hago mas ejercicios.

I exercise about the same now. Yo hago meno ejercicios.

I exercise less often now. Yo hago la misma cantidad de ejercicios.

I never exercise. Yo nunca hago ejercicios.

2.Have you used the "WIC Workout Rap" at home to help you or your child exercise?

Ha usado el rap de WIC en su casa para ayudar a sus ninos o usted hacer mas ejercicio?

Yes / Si

No

3.Have you or your child used the "WIC Workout Chart" to mark the days you worked out?

Ha usado sus niños o usted el diagrama de ejercicios para notar los días que hacen ejercicio?

Yes / Si

No

4. How much did the WIC lesson, "Fitness is Fun," influence your decision to exercise or not?

Cuanto le ayudó el rap de WIC hacer ejercicio?

I wanted to exercise more. Yo quise hacer más ejercicios.

I wanted to exercise the same as before. Yo hice la misma cantidad de ejercicios.

I did not want to exercise. Yo no quise hacer ejercicio.

5. Compared to 3 months ago, how much water do you drink?

Comparado a 3 meses atrás, ¿qué cantidad de agua tomas?

I drink more water now. Tomo más agua.

I drink about the same amount of water now. Tomo la misma cantidad de agua.

I drink less water now. Tomo menos agua.

I don't drink water. No tomo agua.

6. Have you or your child used the water bottle from WIC to help you drink more water?

Ha usado su niño o usted la botella que le dio WIC para tomar más agua?

Yes / Si

No

#### Fit Kids Wellness Program PES Documentation

Example of internal documentation that could be used for implementation or outcome evaluation

Name: \_\_\_\_\_ Sample \_\_\_\_\_

DOB: \_\_\_\_\_ 01/01/06 \_\_\_\_\_

Today's Date: \_\_\_\_\_ 09/19/08 \_\_\_\_\_

FID: \_\_\_\_\_ 10000 \_\_\_\_\_

PROBLEM:

Overweight/inappropriate feeding habits

ETIOLOGY/CAUSE:

Empty calories

Diet - excess fatty foods (chips, cookies, soda, Kool-aid)

No fruits or vegetables

Lack of knowledge - parents

SIGNS/SYMPTOMS:

>95% BMI for age

GOALS:

Educate parents

- offer healthier snacks
- include variety in meal plan -

Include all food groups

PLAN:

Focus on healthy snacks

Handout - Tips for feeding 1-3 year old

OUTCOME:

\_\_\_\_\_ WIC Dietician

Fit Kids Wellness Program

Name: \_\_\_\_\_ FID: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Incentives

Item

Date / Initials

Ball

Water Bottle / Bag

Zowzoo Video

#### Pre-Evaluation Interview

- 1.What type of physical activity does your child do each day and for how long?
- 2.What kind of liquids does your child drink and how many ounces of each liquid does he/she drink in a 24 hour period?
- 3.Why it is important for your child to be at a healthy weight?

#### Fit Kids Wellness Program continued

#### Post-Evaluation Interview

- 1.What type of physical activity does your child do each day and for how long?
- 2.What kind of liquids does your child drink and how many ounces of each liquid does he/she drink in a 24 hour period?
- 3.Why it is important for your child to be at a healthy weight?

#### Program Evaluation

1. Name three things you and your child learned while on the WIC Kids Wellness Program.
- 2.Do you think this program helped you and your child? If so, what suggestions were most helpful?
- 3.Would you like your child to continue this program? Explain why?
- 4.Do you have any suggestions that might help other families make healthier lifestyle choices?

#### Childhood Obesity Prevention Workshop II Survey

- 1.Since attending the workshop, what changes have you made in regards to feeding your children or in regards to physical activity? Circle all that apply.
  - a. Planning meals and snacks for my children.
  - b. Providing more balanced meals and snacks.

- c. Serving smaller portions.
- d. Offering less sweetened beverages and more water.
- e. Allowing more time for physical activity.
- f. None
- g. Other: \_\_\_\_\_

2. What benefits do you see as a result of these changes? Circle all that apply.

- a. My children are on a regular eating schedule.
- b. My children are eating healthier snacks and less junk food.
- c. I feel better about the foods and/or drinks I provide for my family.
- d. My children are drinking more water and fewer sweetened beverages.
- e. My children are more physically active.
- f. None
- g. Other: \_\_\_\_\_

3. Are there any changes you could make that would benefit your family that you have not made yet? Circle all that apply.

- a. Offering my child water when thirsty instead of juice, soda, Gatorade, Kool-Aid, or flavored milk.
- b. Planning healthy meals and snacks at consistent times.
- c. Serving smaller portions to my children.
- d. Offering more fruits and vegetables to my children.
- e. Offering my child water when thirsty instead of juice, soda, Gatorade, Kool-Aid, or flavored milk.
- f. Taking time to be physically active with my children.
- g. None
- h. Other: \_\_\_\_\_

4. What would help you in making these changes? Circle all that apply.

- a. An individual appointment with the dietitian.
- b. More information (pamphlets, brochures, videos.)
- c. Support group.
- d. Workshops like this one.

e. Nothing

f. Other: \_\_\_\_\_

Appendix D:

Supplements on Objectives,  
Social Marketing,  
Data Analysis and Interpretation,  
and Report Writing

Appendix D .

De-mystifying Objectives:

Writing outcome and implementation objectives for your program

Writing Measureable Objectives

When writing objectives for your program, keep the following four questions in mind:

1. Who will receive the program?
2. What health benefit should they receive?
3. How much of that benefit should be achieved?
4. By when should it be achieved, or how long will the program run?

Comparison of Outcome and Implementation Objectives

Outcome Objectives

Implementation Objectives (sometimes called Process Objectives)

Answer the question:

What changes do you expect to happen (for clients, staff, policy) as a result of doing your program?

What, specifically, will happen during the course of your project?

Specify:

The end-result to be achieved by doing the program. These results

might be related to behaviors, intentions, knowledge, attitudes, or health indicators.

How the program will operate.

These objectives focus on the planning, strategies, and activities of the program.

MAKE IT "SMART"

Use the following guidelines to write your objectives:

Outcome Objectives

Implementation Objectives

Specific:

Focus on one or two health indicators, behaviors, intention, attitudes, or knowledge areas.

Include objectives for each activity you will implement.

Measurable:

Keep in mind what is feasible and practical to measure with the resources available to you.

Keep in mind what is feasible and practical to measure with the resources available to you.

Achievable:

Think about what can be accomplished in your timeframe.  
Draw on previous experience, experience of others, or literature.

Think about what can be accomplished in your timeframe.  
Draw on previous experience, experience of others, or literature.

Relevant:

Make sure that your outcomes are directly related to the problem you are trying to address, the needs in your area, and the interests of your participants.

Make sure that your activities and strategies will help you reach your desired outcomes.

Time-bound:

Include a specific timeframe for accomplishing each objective.

Include a specific timeframe for accomplishing each objective.

## De-mystifying Objectives Continued

Choose active verbs when writing objectives. Action verbs can be associated with different levels of complexity of learning tasks as shown below:

Level of learning task

Knowledge

(Recalling information)

Comprehension

(Reporting information in a way other than how it was learned to show understanding)

Application

(Applying information to a new context)

Analysis

(Taking learned information apart)

Synthesis

(Putting together parts and elements into a unified whole)

Evaluation

(Judging the value of something using appropriate criteria)

Useful verbs

Define

List

Name

Recall

Describe

Discuss

Identify

Locate

Translate

Apply

Demonstrate  
Practice  
Analyze  
Categorize  
Compare  
Differentiate  
Design  
Organize  
Plan  
Choose  
Estimate  
Measure  
Rate

Source: Adapted from Contento, I.R. 2007. Linking Research, Theory, and Practice. Sudbury, MA: Jones and Bartlett Publishers, Inc.

Avoid the following verbs when writing objectives:

- Think
- Understand
- Know
- Be familiar with
- Remember
- Comprehend
- Enjoy

Why Social Marketing?

A Brief Introduction to Social Marketing Concepts

Social Marketing is...

- "The use of marketing principles to influence human behavior to improve health or benefit society." (The Basics of Social Marketing: How to Use Marketing to Change Behavior; The Social Marketing National Excellence Collaborative, 2003)
- A social or behavior change strategy
- A way of thinking about addressing problems
- A total package of strategies carefully chosen based on characteristics of the target audience

What it is not:

- Just advertising
- Just communication
- A media campaign
- A way to reach everyone
- A fast process

Social Marketing has 3 key components:

1. The role of marketing techniques, which require putting the target audience at the center of every decision.
2. A focus on voluntary behavior change.
3. The behavior change is for the benefit of the individual, group, or population, and not for profit or commercial gain.

What is the social marketing mindset?

- Decisions are made based on the customer or audience
- Start where they are and change behavior by meeting clients' needs and wants
- Understand your clients and how they make choices in the context of their lives (determinants of behavior)
- Address multiple factors associated with behavior (social, environmental, cultural) not just lack of knowledge or motivation

Social Marketing Continued

How to apply social marketing principles to program planning:

1. Know Your Audience

Ask yourself: Who are you trying to reach? What do you know about your participants that you can use to promote your projects?

Audience segmentation is often used in social marketing. This refers to identifying and selecting small groups of individuals for which uniquely appropriate programs and interventions can be designed. People are grouped together based on shared characteristics and attributes that are linked to the behavior. These may include values, knowledge, culture, behavioral determinants, opinions, beliefs, personality and the channels that can be used to communicate with them effectively.

## 2.It's About Action

"The process of heightening awareness, shifting attitudes, and strengthening knowledge is valuable if, and only if, it leads to action." (The Basics of Social Marketing: How to Use Marketing to Change Behavior; The Social Marketing National Excellence Collaborative, 2003)

When developing your program objectives and activities, be very clear about what it is you want your audience to do. For example, if your goal is to enroll people in your obesity prevention program, be specific about what time commitment you expect (number of sessions over a specified period of time), how you would like them to participate, and what action you want them to take as a result of participating in the project.

## 3.There Must be an EXCHANGE

Many projects within WIC are aimed at getting participants to change their diet or activity habits. If you want someone to give up or modify an old behavior or accept a new one, you must offer him or her something appealing in return. The exchange may be tangible (e.g., come to WIC and get free food) or intangible (e.g., come to WIC and feel good that you are doing something for their health of your child). Whatever you are offering must have appeal to the participant.

When marketing an obesity prevention program, think about what the client or staff will gain by coming to the session(s). It might be NE credit, new information or skills, the opportunities to network with other moms or fellow staff. Your goal is to make it worth his or her while just to show up.

When marketing a healthy behavior, think about how your message can be framed in terms of what participants will gain (e.g., energy, positive feedback, being a good role model) rather than what they will give up (e.g., time, some favorite foods).

## 4.Competition Always Exists

In the context of WIC special projects, competition may include other behavioral choices, other obligations competing for clients' time and interests, and conflicting messages clients may hear from other sources. It is important to acknowledge, understand, and address the competing influences on behavior. For example, if participants feel like exercise competes with family time, your program could explore ways to be physically active as a family.

## Social Marketing Continued

### 5. Marketing Mix: The 5 Ps of Social Marketing

**Product:** Obesity programs are "selling" two things: 1) the program and 2) the behavior or behaviors that are promoted by the program. In thinking about your project, consider:

- What is the program offering the audience? This may include new ideas and information, tangible products, or services that support or facilitate behavior change.
- What are participants encouraged to do?

When marketing your program, emphasize the benefit(s) to your audience. Think about benefits that your participants can identify with. Some benefits may not be directly associated with the desired behavior change, but can be framed as the positive results, feelings, or attributes the audience will obtain from the desired behavior change. For example, a participant may not see the immediate advantage of reducing heart disease risk, but may be encouraged by the idea of having more energy to get through the day.

**Price:** The costs of adopting the program or behavior may include money, time, pleasure, loss of self-esteem, or embarrassment. As you develop your strategy, think about ways to:

Reduce cost of product (e.g., take the class for NE credit so it is not an additional trip to WIC)

- Increase cost of competition

**Place:** Where & when will your program take place? Where will participants perform the target behavior? As you develop your strategy:

- Offer locations that are convenient and pleasant

Place information where participants are already thinking about product, such as WIC classrooms or waiting rooms or local markets

**Promotion:** Communication or education that promotes benefits, product, price and place of program. As you develop your strategy:

- Consider how best to reach your target audience
- Develop messages, materials, channels & activities that will effectively reach your audience

**Policy:** Laws and regulations may "influence" the desired behavior. For examples, local policy can require sidewalks to improve walk-ability or school district policy can require healthy options in the school cafeteria. As you develop your strategy:

- Think about the policies in place that affect your target behavior. How can you program build on or work around those policies.

## 6. Audience & the Marketing Mix

For maximum efficacy your audience should be somewhat similar in how they relate to the "P's."

For example, your audience should:

Face similar benefits and barriers•

Interact with the product in the same place•

Be available in the same place•

Respond to promotional strategy in similar ways•

## Making Sense of Your Data

### Plan Before you Begin

Before you start to analyze your data, think about what you want to know and how you will find out. For example, you might ask:

Do participants eat more fruit and vegetables after the program than before?•

Which incentives do participants like best?•

What changes will the participants make as a result of the program? •

Each of these questions will be answered by different methods so it is important to make sure you are capturing the data you need from the beginning. Decide what data tool (or tools) you will need to collect your data. This could be a survey, attendance records, chart records, logs, etc.

As you plan your analysis, think about the data collection tools you have used and identify which specific survey questions or measurements will answer your questions. Then, make an analysis plan that specifies what you will look at and how you will look at it.

Keep in mind that your plan may change slightly as you look at the data. Other questions may emerge and some things that you thought would be significant might not be; but starting with a plan provides you with a basic road map of where you are going. Making Meaning from Words (Qualitative Data)

Working with qualitative data involves three steps: 1) Reviewing the data and focusing on relevant information, 2) Grouping data into themes, and 3) Interpreting results.

1. Review the data and focus in on your purpose. Sometimes people will write a lot that isn't relevant to your evaluation or to the question you asked. Don't be afraid to weed out extraneous information. Look at your data and highlight the key points that are relevant to the questions you want to answer. If the data have been typed into a word processing or spreadsheet program, cut out the extraneous verbiage.

2. Summarize or theme the data by breaking written comments into chunks, group similar statements together. Once you have grouped the similar statements, you can combine them into one encompassing statement. Indicate the number of people who made that comment in parentheses. For reliability, ask a coworker to do the same to see if you get similar results.

3. Interpret your results by looking at the major themes that emerge. Draw conclusions from your data.

Report major themes and use the themes and even direct quotes from the data to illustrate results from the quantitative data.

## Making Sense of Your Data Continued

### Making Meaning from Numbers (Quantitative Data)

Working with quantitative data involves five steps:

1. Creating a system to code data
2. Entering data into a database or spreadsheet
3. Analyzing data
4. Interpreting the results
5. Creating a report

**Coding** 1. is a numbering system that you assign to the responses on your survey. You can code all types of data, including, multiple choice, true/false, scales, yes/no. You can even code write-in responses if consistent themes begin to emerge. A coding system makes data entry and analysis easier. It also makes it easier to identify mistakes in data entry and ensures consistency if different people are entering data.

To code a survey, take a blank copy of your survey and assign a number value for each response option. It is important to be consistent and to code both the Spanish and English versions of your survey in the same way. Make the coding scheme logical, with higher number values for Always, Often, Strongly agree, etc and lower number values for Never, Rarely, Disagree, etc.

Type it up or make copies of your coded survey and save it. This is your "coding sheet" and will be a useful reference for future surveys.

### Other Coding Tips

Common conventions:

1=Yes; 0=No

Start scales at 0 or 1

88 = I don't know

99 = Missing data or Refused

Enter height in cm or inches, not feet and inches.

Ex. 63 (inches) vs 5 ft, 3 in

Enter age in months for children

Ex. 38 (months) vs 3 yrs, 2 mo.

## Making Sense of Your Data Continued

### Sample Survey Coded

1. Is the child you brought to this WIC appointment 2 years or older?

1 - Yes 0 - No

2. Does your child (ages 2-5) drink milk daily?

2 - Always

1 - Sometimes

0 - Never

2a. If yes, about how many cups of milk does he/she drink each day?

0 - Less than 1 cup

1 - 1 cup (8 oz)

2 - 2 cups (16 oz)

3 - 3 cups (24 oz)

4 - 4 cups (32 oz)

5 - more than 4 cups

3. What type of milk does your child (ages 2-5) usually drink?

0 - Skim/Fat free

1 - 1% / Low-fat

2 - 2% / Reduced-fat

3 - Whole

4 - Soy

88 - Don't know

## Sample Survey

1. Is the child you brought to this WIC appointment 2 years or older?

- . Yes
- . No

2. Does your child (ages 2-5) drink milk daily?

- . Always
- . Sometimes
- . Never

2a. If yes, about how many cups of milk does he/she drink each day?

- . Less than 1 cup
- . 1 cup (8 oz)
- . 2 cups (16 oz)
- . 3 cups (24 oz)
- . 4 cups (32 oz)
- . More than 4 cups

3. What type of milk does your child (ages 2-5) usually drink?

- . Skim/Fat free
- . 1% / Low-fat
- . 2% / Reduced-fat
- . Whole
- . Soy
- . Don't know

## Making Sense of Your Data Continued

Entering Data2. into a spreadsheet or database allows you to consolidate your data. For most WIC local agencies, Microsoft Excel is a convenient, user-friendly option for data entry.

To create a spreadsheet using Excel:

1. Open a new document or worksheet

2.Label the top row according to your questions

3.Include additional categories for Case Number, LA number, date, Pre-test/Post-test or any other relevant categories in the top row as well

A sample spreadsheet, using the coding from the sample survey, is shown below:

Case Number

Q1 - Child 2 or  
older

Q2 - Child drinks  
milk daily

Q2a - Amount of  
Milk

Q3 - Type of Milk

001

1

1

2

3

002

1

0

1

3

003

1

1

3

2

Etc.

Many surveys include questions with "check all that apply" responses. For example:

What types of herbs do you use when preparing vegetables for your family? (Check all that apply.)

. Basil . Oregano . Red Pepper . Cilantro . Thyme

The most efficient way to enter this type of data is to treat each response as if it were a separate item. Create a column in Excel for each possible response (in this case, 5 columns) and code each response option like a "yes/no" question. Then you can enter a "1" if the response is checked and "0" if it is not checked. (An example is shown below.) This method speeds up data entry and makes analysis easier.

Case Number

Basil

Oregano

Red Pepper

Cilantro

Thyme

001

1

1

0

0

0

002

0

1

0

1

0

003

1

1

0  
0  
1  
Etc.  
1  
0  
0  
1  
0

#### Making Sense of Your Data Continued

Analyzing Data.3. Data analysis usually begins with describing the data. Basic descriptive measures include:

Counting (frequencies) describes how many people chose each response option.

Measures of Central Tendency are numbers that indicate what is typical of a set of responses. There are three measures of central tendency. Look at each as you analyze your data to determine which is most useful in telling the story of your data.

Mode: The category with the most responses•

Median: The true midpoint of the responses•

Mean (average): The arithmetic average where all values are added together and then divided • by the total number of responses. This value is the best estimate of the true sample value but does not tell the whole story.

Spread describes the way the values in the sample are distributed around the central value (mean). The larger the spread, the greater the variation in responses. Two common measures of spread include:

Range: The difference between the highest and lowest values•

Standard deviation: Tells you how tightly clustered all the values are around the average•

#### Using Excel for Basic Descriptive Analysis

Adding up "check all that apply" responses in Excel

Using the example from above, you can find out how many different herbs people are using in their cooking by:

1. Creating a new column after your response option columns (Total).

2. Using the SUM function to count how many "1"s are recorded (See cells F2-F5 below).

3. This summing function can also be used to add up how many people said yes to a yes/no question (See cell A6 below).

A

B

C

D

E

F

G

1

Case  
Number

Basil

Oregano

Red  
Pepper

Cilantro

Thyme

TOTAL

2

001

1

1

0

0

0

=SUM(A2:E2)

3

002

0

1

0

1

0

=SUM(A3:E3)

4

003

1

1

0

0

1

=SUM(A4:E4)

5

Etc.

1

0

0

1

0

=SUM(A5:E5)

6

=SUM(B1:B5)

Making Sense of Your Data Continued

Using Excel for Averages and Medians

1. Click on "Insert" drop-down menu
2. Select "Function"
3. Under "Select a category," choose "Statistical"

The Excel formulas for calculating mean (average) and median are shown in the table below. Also notice how the mean and median may be similar or different. Note that the average value between 1 & 0 (yes and no) will be the percent of respondents who reported "Yes" to a question. In Column C in the table below, the average shows that 80% of respondents drink milk daily.

A

B

C

D

1

Case Number

Daily Fruit  
Servings

Daily Vegetable  
Servings

Drinks Milk Daily

2

001

1

0

1

3

002

0

1

1

4

003

3

3

0

5

004

2

4

1

6

005

2

2

1

7

Mean/ Average

=AVERAGE  
(B2:B5)

= 1.6

= AVERAGE  
(C2:C5)

= 2

= AVERAGE  
(D2:D5)

= .80

8

Median

=MEDIAN (A2:A5)

=2

=MEDIAN (B2:B5)

=2

Generally, one would not calculate a median for a yes/no question.

In addition to descriptive analysis of the data, you can also make comparisons between groups. For example, you can compare scores on a pre-test to those on a post-test; you can compare clients who participated in a program to those who did not; or you can compare two groups that are different from one another in one or more ways (e.g., pregnant vs. not pregnant, Clinic A vs Clinic B).

There are many statistical tests that can be used to make comparisons, depending on the type of data that you have. Many of these tests can be performed using Microsoft Excel or more advanced statistical software packages.

For a more detailed primer on hypothesis testing and statistical tests, visit:

<http://www.ag.uidaho.edu/critical/index.htm>

#### Making Sense of Your Data Continued

Interpreting Results<sup>4</sup>. involves integrating numbers with the details of your program and using the data to tell a story. As you do this, it is important to keep your interpretations specific to the sample you are looking at and the data you have. For example, if your program increases physical activity among WIC moms with children over age two, you would not conclude that the same program would be effective for post-partum WIC moms who might have different barriers and needs regarding physical activity.

First, look at your descriptive statistics (frequency counts, means, etc.) and use them to tell a story about your program and the participants.

If you have done some more advanced statistical tests (t-test, chi-square, ANOVA), consider which tests yielded a "statistically significant" outcome. P-values, which can be generated with more advanced statistical tests, are a way to determine if results are statistically significant. Even if you are not conducting more advanced analyses, p-values are commonly reported in journal articles or other descriptions of studies so it is important to know they mean (or how to interpret them).

A p-value is a basic probability and describes the odds of getting a particular result if there is really no difference between two or more groups. The smaller the p-value, the smaller the odds and the more confident we can be that our

results are true for the population from which the sample was drawn. If  $p = .05$  we can be pretty confident that the results that we find for our sample are true for the population we are studying.

For example, if a sample is taken from two groups and the results show:

Average daily fruit and vegetable intake among city dwellers = 2.5 servings.

Average daily fruit and vegetable intake among farm dwellers = 3.2 servings.

What is the chance that we would get these results if there was no true difference in fruit and vegetable intake between city and farm dwellers in fruits and vegetable intake in the population? If  $p = .05$  or less, there is a 5% chance or less than there is no difference between groups in the population and the results can be described as statistically significant.

Note that the two groups can also be the same group of individuals at two points in time, such as pre-intervention and post-intervention.

Beyond the statistics, look for the story behind the numbers. Sometimes in a large sample, it is possible to obtain a "statistically significant" result that is not particularly meaningful.

For example, a question asks participants to agree or disagree with the statement, "Cooking vegetables with herbs and spices makes them taste better." The item is coded as follows:

1. Strongly disagree
2. Disagree
3. Agree
4. Strongly agree

If the sample averages are Pre-test = 3.3, Post-test = 3.8, with a  $p < .05$ , the results are significant, but what is the story? On average, before the program participants agreed with the statement. After the program, they strongly agreed. Is moving from "agree" to "strongly agree" really a meaningful change?

## Creating Meaningful Reports

### Why Create Reports?

Organizations and program planners will have many opportunities and reasons to report on their programs and evaluations. In addition to meeting the requirements of funders, there are three compelling reasons to write a report:

1. To have a formal record of your program progress and outcomes
2. To help others who are planning similar programs
3. To have a foundation for future evaluation efforts

In addition to formal reports, program and evaluation data can be used when you:

- Make presentations
- Write press releases
- Create recruitment fliers
- Develop community outreach materials
- Write proposals to other funding sources
- Write newsletter articles

Before You Start

Plan your report by asking the following questions:

- Who is the intended audience of the report? (e.g., DSHS, other funder, community partners, other local agencies)
- What is the reader's relationship to the program? (e.g., finder, partner, participant)
- What information does this audience want? (e.g., details about program activities, end results, cost-effectiveness)
- Are there any specific reporting requirements that must be included? (e.g., what is stipulated by the grant or program to which you are reporting)

Keep in mind: Reports should be short and easy to read. They should provide a clear record of what you did, but do not need to be any longer or more formal than necessary to get the key points across to the reader.

Creating Meaningful Reports Continued

Components of a Report

A report or presentation can be structured around the following components:

1. Executive Summary: The purpose of an executive summary is to orient the reader to the report and summarize main points. Key elements of an executive summary are the purpose of program, a brief description of program activities, setting and population, the purpose of the evaluation, an overview of findings, and an overview of recommendations. Although the executive summary is the first part of a report, it is generally written last, after all other sections are complete.

2. Program Description: The program description serves to introduce readers to the program, present goals and objectives and explain how activities were intended to meet the objectives. This section often includes:

- Rationale for the program
- Program goal and objectives
- Program's purpose and key activities
- Target population
- When and where activities took place
- Significant programmatic changes

When describing activities, remember to consider the link between objectives and activities and explain how the activities were related to each objective.

3. Evaluation Methods: The purpose of this section is to demonstrate the planning that went into collecting data, explain how data was gathered, and provide documentation for staff to use in later projects. Include information about:

- The types of information collected and why (e.g., qualitative, quantitative, both)
- How information was collected (e.g., surveys, logs, interviews, observations)
- From whom information was collected (e.g., participants, staff, community members, comparison group)
- Who collected the information (e.g., program staff, outside evaluators, participants)
- How many participants were surveyed and how many complete responses were received

#### Creating Meaningful Reports Continued

4. Findings: The presentation of findings is the core of a report. It should be an organized summary of the information collected that describes how well each program objective was met. One way to present findings is to organize data based on objectives, analyze the data for each objective to answer your questions and then describe results using frequencies, percents or averages for quantitative data, and themes or quotes for qualitative data.

Organize data:

- Review objectives.
- Think about how the information you have gathered can be used to assess your progress in meeting each objective.
- Make sure that survey data has been entered into a database or tallied and that interview and focus group notes have been typed up.

### Analyze and Describe Data:

- Use summaries, charts, lists, and graphs to represent data in the simplest way.
- Address each program objective by stating the objective and presenting relevant data immediately below.
- What quantitative statistics did you find?
- What qualitative information did you find?
- What stories do you have that relate to your quantitative or qualitative data?
- When you have a draft of this section, share your write-up with a co-worker for feedback.

### Creating Meaningful Reports Continued

#### Example of Presenting Findings by Objective:

Objective: 60% of participants completing the 6-week program will acquire the skills needed to prepare family meals using foods in the new WIC food package.

#### Research questions:

1. What percentage of participants who completed the program use WIC foods regularly in their family meal planning?
2. After the program, did participants have the skills needed to prepare family meals using the new WIC foods?
3. Did the participants receive the information, support, and new skills they expected from the class?

#### Data collected:

- Pre- and post-program assessments of participants' skills and behaviors regarding preparing meals with WIC foods.
- Pre-program focus group with participants to determine their expectations and assess skill levels.
- Post-program focus group with participants to assess satisfaction with the program and whether expectations were met and new skills were acquired.

#### Presentation of findings by research question:

1. Number of program participants. Percent of participants who use WIC foods

in family meals before and after program.

2. Summarize pre- and post-program skills assessments. Describe how pre- and post-program results differed.

3. Use qualitative data to present participants' views on whether they felt prepared to use new WIC foods in regular meal planning based on what they learned in the program.

4. Summarize qualitative responses from focus groups to assess whether training met participants' expectations.

#### Creating Meaningful Reports Continued

5. Interpretation: This section allows you to give meaning to the information you reported in the findings section. Use the findings to explain the program's progress and challenges in meeting objectives. Compare results with expectations—examine which objectives were not met and what are some possible reasons why. Discuss outside circumstances that may have affected the program, such as other events or programs offering similar or competing messages. Finally, consider if there is anything you would like to know about your program that your results do not tell you. This may help in developing questions for an evaluation in the future.

6. Recommendations: A recommendations section is an opportunity to suggest improvements or strategies for future programs based on what was learned in the evaluation. Recommendations may be directed toward the program, organization, funder, or other stakeholders. One way to come up with recommendations is to consider objectives that were not met and think about what might be done to meet those objectives in the future or whether the objectives were reasonable in the first place. Be reasonable and specific in explaining how the recommendation will improve the program.

Consider including suggested next steps for your program. Ask yourself:

- What do your results mean in terms of what you will do next?
- What improvements do you plan?
- Will you expand this program?

For examples of how data can be presented in WIC reports, visit:

<http://www.dshs.state.tx.us/wichd/nut/riskreport-nut.shtm>