

Creating an Evidence Base: Tips and Tools

Alana Knudson, PhD
Michael Meit, MA, MPH

November 3, 2011

330A Grant Evaluation Partners

NORC Walsh Center for Rural Health Analysis

- Michael Meit, MA, MPH
- Alana Knudson, PhD

University of Minnesota Rural Health Research Center

- Ira Moscovice, PhD
- Michelle Casey, MS
- Walt Gregg, MA, MPH

National Rural Health Association

National Organization of State Offices of Rural Health

ORHP Leading the Way in Establishing an Evidence Base of Effective Rural Health Programs

What is evidence?

Evidence involves “the available body of facts or information indicating whether a belief or proposition is true or valid.”

Source: The New Oxford American Dictionary

Different Forms of Evidence

- Scientific literature in systematic reviews
- Scientific literature in one or more journal articles
- Public health surveillance data
- Program evaluations
- Qualitative data
 - Community members
 - Other stakeholders
- Media/marketing data
- Word of mouth
- Personal experience

Objective



Subjective

Figure 2

Different forms of evidence. Adapted from Chambers & Kerner (37).

Evidence-Based Practice

- Developed from Scientific evidence and/or have been found to be effective based on the results of rigorous evaluations.
- Examples:
 - Diabetes Prevention and Control: Case Management Interventions to Improve Glycemic Control
 - Obesity Prevention and Control: Behavioral Interventions to Reduce Screen Time

Where is Evidence-Based Practice Used?

- Evidence Based Medicine (EBM)
 - Deemphasize unsystematic clinical experience and place greater emphasis on evidence from clinical research
 - Scientific rigor
 - Randomized controlled studies
 - Funding and Dissemination
 - Agency for Healthcare Research and Quality
 - National Institutes of Health

Where is Evidence-Based Practice Used?

- Evidence-Based Public Health
 - Conscientious, explicit, and judicious use of current best evidence in making decisions about the care of communities and populations in the domain of health protection, disease prevention, and health promotion. (Adapted from Jenicek)
 - Cross-sectional studies
 - Funding and Dissemination
 - The Robert Wood Johnson Foundation
 - Centers for Disease Control and Prevention

What influences decision making?



Figure 1

Domains that influence evidence-based decision making [from Spring et al. (151, 152)].

Data Sources

- Centers for Disease Control and Prevention
 - Behavioral Risk Factor Surveillance Survey
 - Youth Risk Behavioral Survey
- Local and State Health Departments
 - Community Health Assessments
- Human Services
 - Medicaid and Children's Health Insurance Programs
- Kaiser Family Foundation

Key Attributes of EBPH

- Making decisions using the best available peer-reviewed evidence
- Using data and information
- Applying program-planning frameworks
- Engaging the community in assessment and decision making
- Conducting evaluation
- Disseminating lessons learned

Selecting a program or intervention...

- What is the size of the rural health problem?
- Are there effective interventions to address the problem?
- What information is available locally to help decide if an intervention is appropriate?
- Is there an intervention that has been used successfully to address the health problem given the local context?
 - Is there a targeted population?

Classifying Interventions


Category	How Established
Evidence-based	Peer review via systematic or narrative review
Effective	Peer review
Promising	Written program evaluation without formal peer review
Emerging	Ongoing work, practice-based summaries, or evaluation in process

Who is interested in Evidence Based Practice?

- ORHP, HRSA, and HHS
- Potential and current funders
- Administrators
- Program Directors
- Policy Makers
 - Local, State, Tribal, Federal and International
- Stakeholders
- Researchers

Evidence-Based and Promising Practice Model Resources: Guide to Clinical Preventive Services

Guide to Clinical Preventive Services

[The Guide to Clinical Preventive Services](#)  contains the U.S. Preventive Services Task Force (USPSTF) recommendations on the use of screening, counseling, and other preventive services that are typically delivered in primary care settings. The USPSTF, an independent panel of experts supported by the Agency for Healthcare Research and Quality (AHRQ), makes recommendations based on systematic reviews of the evidence related to the benefits and potential harms of clinical preventive services.

The primary care interventions reviewed by the USPSTF and included in the Clinical Guide can provide support to community interventions as health care providers are typically the gatekeepers to health services for their patients. Similarly, the community-based and health system-based interventions reviewed by the Community Guide can provide support to primary care interventions by:

- Reinforcing health care providers' recommendations to their patients
- Identifying effective community-based and health care system-based programs to which providers can refer their patients for additional education and support (e.g., quit lines that supplement physician smoking cessation counseling)
- Identifying effective health system supports for health care providers (e.g., provider reminder systems)

Health care providers can also help, both in their local communities and nationwide, to support community-based efforts that assist them in meeting the public health needs of their patients and others.

Together, the Clinical and Community Guides provide evidence-based recommendations across the prevention spectrum of clinical practice and public health.

Task Force Meetings

Slides and Promotional Materials

The Guide to Clinical Preventive Services

Systematic Review Methods

Economic Reviews

Systematic Review Teams

Community Guide Publications

Ways to Use the Guide

Collaborators

History

Glossary

News and Announcements

News Archive

Did You Know?

Topics

NORC

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FOR RURAL HEALTH ANALYSIS

Rural Health Research Center
UNIVERSITY OF MINNESOTA

Evidence-Based and Promising Practice Model Resources: Community Guide

Adolescent Health

Alcohol

Asthma

Birth Defects

Cancer

Diabetes

Health Communication

HIV/AIDS, STIs & Pregnancy

Mental Health

Motor Vehicle

Nutrition

Obesity

Provider-oriented

Interventions in community settings

Behavioral interventions to reduce screen time

Mass media interventions to reduce screen time

Technology-supported interventions

Worksite programs

School-based programs

Supporting materials

Oral Health

Physical Activity

Obesity Prevention and Control: Interventions in Community Settings



Reviewed interventions include programs designed to reduce screen time, technology-based strategies, and interventions specific to worksite and school settings.

Summary of Task Force Recommendations & Findings

This table lists interventions reviewed by the Community Guide, with Task Force findings for each ([definitions of findings](#)). Click on an underlined intervention title for a summary of the review.

Interventions to reduce screen time (e.g., time in front of a TV, computer monitor)	
Behavioral interventions to reduce screen time	Recommended
Mass media interventions to reduce screen time	Insufficient Evidence
Technology-supported interventions (e.g., computer or web applications)	
Multicomponent coaching or counseling interventions:	
To reduce weight	Recommended
To maintain weight loss	Recommended
Interventions in specific settings	
Worksite programs	Recommended
School-based programs	Insufficient Evidence

For More On This Topic

[CDC, Overweight and Obesity](#)

[Healthy People 2020](#)

[Healthy Weight](#)

[Recommended Community Strategies and](#)

Related Topics

[Adolescent Health](#)

[Cancer Prevention and Control](#)

[Promoting Good Nutrition](#)

[Promoting Physical Activity](#)

Overview of the Evidence Based Toolkit Series

- A compilation of evidence based practices related to rural health issues/ initiatives
- One toolkit each year on a different topic
- Toolkit organized in a Q&A format to seed thinking
- Useful for grantees, future applicants & other rural communities
 - Identify & apply models and resources that relate to projects
- Recognizes that everyone has different levels of knowledge/ different stages of implementation
- Publicly available on Rural Assistance Center (RAC)

Importance of Building Evidence Based Toolkits

- ORHP is working to align grantee program activities and evidence based practices
- Identifying evidence based models and resources, and making them accessible to other rural communities, will help to facilitate replication of programs that are supported by research and/or experience
- Ensuring that programs are based on proven models of practice will help leverage resources for sustainability

Developing an Evidence Based Toolkit

1. Identify priority rural health topic
 - Year 1: Community health workers (CHW) programs
 - Year 2: Obesity prevention programs
2. Review literature on the topic to identify evidence based models and resources
3. Identify 330A grantees that are engaged in the topic by reviewing grantee applications
4. Explore whether their work aligns with identified models through grantee interviews
5. Build toolkit with evidence based models and resources and post on RAC website www.raconline.org

Community Health Gateway

[Community Health
Workers Toolkit](#)

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Community Health Gateway

Build What Works

Starting a new health or human service program can be difficult, but you're not alone. The Community Health Gateway helps you build effective community health programs, improve services you offer and develop new programs. Resources in this Gateway are chosen for effectiveness and adaptability.

How the Community Health Gateway helps you

Gateway resources showcase program approaches that adapt to fit your community and the people you serve, allowing you to:

- Research approaches to featured community health programs
- Discover what works and why
- Learn about common obstacles
- Explore funding opportunities
- Connect with program experts
- Grow your project and build on its success

All examples and methods are evidence-driven, meaning that they are proven effective by programs with a strong history of service and community success. Toolkits in the Gateway are continually evaluated for effectiveness by the National Opinion Research Center (NORC) at the University of Chicago.

What's available

[Community Health Workers Toolkit](#)

Community health workers (CHWs) work with local health care systems to deliver some health services in rural communities. Find out more about CHWs, how CHW programs work and how to use community health workers in your community.

Still to come

More toolkits are being developed to help improve your community's health:

- Obesity Prevention Programs
- Chronic Illness

More useful tools for you

[Economic Impact Analysis](#)

Show how your program's grant funding affects your community's economic well-being and share this information with sponsors, funders and your community

[Success Stories & Lessons Learned](#)

See how other programs have succeeded and adapt their methods to help strengthen your program

About the CHW Toolkit

Modules

- 1: [Community Health Workers](#)
- 2: [Program Models](#)
- 3: [Training Approaches](#)
- 4: [Program Implementation](#)
- 5: [Planning for Sustainability](#)
- 6: [Measuring Program Impact](#)
- 7: [Disseminating Best Practices](#)
- 8: [Program Clearinghouse](#)

[Contact Us](#)

About the Community Health Workers Toolkit

Development of this toolkit is provided by the Office of Rural Health Policy (ORPH), Health Resources and Services Administration, in collaboration with the Rural Assistance Center. Information and resources included in the toolkit are compiled using the following criteria:

- Evidence-based models
- Appropriateness for rural populations
- Feasibility of programs
- Effectiveness of programs

Ongoing CHW programs were also reviewed in the development of this toolkit. Examples of some of these programs are available in the [Program Clearinghouse \(Module 8\)](#) section.

Funder

The Office of Rural Health Policy coordinates activities related to rural health care within the U.S. Department of Health and Human Services. ORPH administers grant programs designed to build health care capacity at local and state levels.

[Visit the ORPH website](#)

[About the CHW Toolkit](#)

Modules:

1. [Community Health Workers](#)
2. [Program Models](#)
3. [Training Approaches](#)
4. [Program Implementation](#)
5. [Planning for Sustainability](#)
6. [Measuring Program Impact](#)
7. [Resources and Best Practices](#)
8. [Program Clearinghouse](#)

Community Health Workers Toolkit

Welcome to the Community Health Workers (CHW) Toolkit. This toolkit will help you evaluate opportunities for developing a CHW program as well as provide resources and best practices other CHW programs have developed.

[Learn more about this Toolkit](#)

Toolkit Modules

The CHW toolkit is made up of several modules, each concentrating on different aspects of CHW programs. Modules also include resources for you to use in developing a program for your area.

- [Module 1: Introduction to Community Health Workers](#)
An overview of Community Health Workers and their roles.
- [Module 2: Program Models](#)
Elements of differing models for CHW programs.
- [Module 3: Training Approaches](#)
Available training materials and procedures for CHWs.
- [Module 4: Program Implementation](#)
Building a program from the bottom up.
- [Module 5: Planning for Sustainability](#)
How to ensure your CHW program functions properly.
- [Module 6: Measuring Program Impacts](#)
Methods that allow you to measure the effectiveness of your program.
- [Module 7: Disseminating Resources and Best Practices](#)
Letting other people know what you have done with your program.
- [Module 8: Program Clearinghouse](#)
Examples of and contacts for successful CHW programs.

[Funding](#)[Information Guides](#)[News & Events](#)[Experts & Organizations](#)[Publications & Maps](#)[Success Stories](#)[State Resources](#)[Community Health Gateway](#)[Community Health Workers Toolkit](#)[Modules](#)[1: Community Health Workers](#)

- [Who Are CHWs?](#)
- [Roles of CHWs](#)
- [Advantages of CHWs in Rural Programs](#)

[2: Program Models](#)[3: Training Approaches](#)[4: Program Implementation](#)[5: Planning for Sustainability](#)[6: Measuring Program Impact](#)[7: Disseminating Best Practices](#)[8: Program Clearinghouse](#)[Home](#) > [Community Health Gateway](#) > [CHW Toolkit](#) > Module 1[Print Page](#)

Module 1: Community Health Workers

Community health worker (CHW) is an umbrella term describing community members who provide certain health services not requiring in-depth education. They may work for pay or volunteer in association with a local health care system. They usually share ethnicity, language, socioeconomic status and life experiences with community members they serve, and:

- Are selected by the community
- Are answerable to the community
- Have training in context of interventions
- Have training recognized by health services and certification authorities
- Do not have professional or paraprofessional certification or degree post-secondary education

CHWs and their duties are as diverse as the communities they serve, and are dependent on those communities for support.

In this module

- [Learn more about who CHWs are](#)
- [Roles of CHWs](#)
- [Advantages of CHWs in rural programs](#)

[Community Health Gateway](#)[Community Health Workers Toolkit](#)[Modules](#)[1: Community Health Workers](#)[2: Program Models](#)

- [• Different Models](#)
- [• How Communities Are Served](#)
- [• Adapting Programs to Your Community](#)

[3: Training Approaches](#)[4: Program Implementation](#)[5: Planning for Sustainability](#)[6: Measuring Program Impact](#)[7: Disseminating Best Practices](#)[8: Program Clearinghouse](#)[Home](#) > [Community Health Gateway](#) > [CHW Toolkit](#) > [Module 2](#)[Print Page](#)

Module 2: Program Models

Community health worker (CHW) programs vary based on the circumstances in which they operate. In this section, you will find resources about the differing models, how they can serve communities and information on adapting a program to meet your community's needs.

Different Models

CHW programs are carefully tailored to meet the unique needs of a community. To meet those needs, there are six different categories, though the models are not mutually exclusive. Some programs may fall into more than one category, allowing for greater flexibility in program design.

- [• Learn more about Program Models](#)

How Communities are Served

CHW programs are often designed to serve populations in rural, frontier, and tribal communities, assuring people get services they need. Programs can help communities build partnerships with health care delivery systems and provide education about health issues.

- [• Learn more about How Communities are Served](#)

Adapting Programs to Your Community

Each community has unique demographic, locational, economic, social and cultural perspectives. This site provides examples and resources to show how programs can be adapted to fit a community's particular needs.

- [• Learn more about Adapting a Program to Your Community](#)

- 1: [Community Health
Workers](#)
- 2: [Program Models](#)
- 3: **Training
Approaches**
 - [CHW Curriculum](#)
 - [Training
Materials](#)
 - [State
Certification
Programs](#)
 - [How Programs
Train CHWs](#)
- 4: [Program
Implementation](#)
- 5: [Planning for
Sustainability](#)
- 6: [Measuring
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- 7: [Disseminating Best
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Module 3: Training Approaches

Initiatives for community health worker (CHW) training tend to come from local and regional efforts, CHWs or CHW organizations. Among these are state and local health agencies, service provider professionals and organizations, community-based organizations and other voluntary associations and health advocacy groups, academic and education centers, and other categories of interested parties.

CHW training can be viewed differently depending on a group's perspective:

- **Healthcare systems**
Allows for a broader and more strategically controlled access to health services and better quality of care assurance
- **Community**
Translates into access to new healthcare resources and points of service, as well as enhanced recognition of CHWs as valuable community human capital
- **CHW**
Validates the value of the work of CHWs, provides greater opportunities for reimbursement of CHW services, equips them with greater community building capacity, and offers opportunity for personal growth

In this module

- [Is there a standard curriculum for training CHWs?](#)
- [Training materials for CHW programs](#)
- [Does my state have a CHW certification program?](#)
- [How programs have trained CHWs](#)

[Community Health Gateway](#)**Community Health Workers Toolkit**

Modules

1: [Community Health Workers](#)2: [Program Models](#)3: [Training Approaches](#)4: **Program Implementation**• [Resources Needed](#)• [Recruiting & Hiring](#)• [CHW Compensation](#)• [Implementation Challenges](#)5: [Planning for Sustainability](#)6: [Measuring Program Impact](#)7: [Disseminating Best Practices](#)8: [Program Clearinghouse](#)[Home](#) > [Community Health Gateway](#) > [CHW Toolkit](#) > Module 4: Program Implementation[Print Page](#)

Module 4: Program Implementation

When implementing a community health worker (CHW) program, the sponsoring organization is typically responsible for all aspects of implementation, from providing training to program evaluation. Basic tasks in implementation include:

- Determine community to be served (needs assessment)
- Program coordination responsibilities
- Recruitment and supervision of CHWs
- Staff retention

Program scope and scale also factor into program implementation and may vary with the type of program. Examples of program models are available [in Module 2](#).

As an example of items to consider when implementing a program, migrant communities may be best served by seasonal programs are common, while other communities may require year-round programs. As a program is implemented, CHWs themselves may also be able to provide valuable data to help improve the implementation process.

In this module

- [Resources needed for implementation](#)
- [Recruiting and hiring considerations](#)
- [CHW compensation](#)
- [Implementation challenges](#)

- 1: [Community Health Workers](#)
- 2: [Program Models](#)
- 3: [Training Approaches](#)
- 4: [Program Implementation](#)
- 5: **Planning for Sustainability**
 - [How to Plan](#)
 - [Why Plans are Needed](#)
 - [Community Resources](#)
 - [Program & Research Support](#)
- 6: [Measuring Program Impact](#)
- 7: [Disseminating Best Practices](#)
- 8: [Program Clearinghouse](#)

Module 5: Planning for Sustainability

Three critical issues are linked to the sustainability of community health worker (CHW) programs:

- Evaluation
- Financing
- Credentialing

Evaluation

CHW programs with an evaluation component are better able to convey the impact of their programs. Rigorous program evaluations may enable the program to demonstrate the return on investment (ROI) for utilizing CHWs. Programs could use ROI information to demonstrate program effectiveness to community partners, some of which may be willing to invest resources in program sustainability. To date, few rural CHW programs have had resources to calculate ROI. Additional information on evaluation is [available in Module 6](#).

Financing

CHW programs should identify financial models for sustaining activities post-funding. Most CHW programs receive support through federal or state grants and foundations. Another potential financial model is third-party reimbursement for CHW services. Several rural communities have explored third-party reimbursement for CHW's health education services through Medicaid. Some states have expressed concern third party reimbursement would necessitate rigorous credentialing of CHWs.

Credentialing

Credentialing is a controversial topic as opponents suggest widespread credentialing would limit the scope of CHW activities and reduce flexibility in responding to a community's needs.

Impact of health care reform

Health reform legislation may offer new opportunities for sustaining CHW programs. The Patient Protection and Affordable Care Act (PPACA) recognizes CHWs as members of the health care work force and allows Congress to establish a federal grant program to support use of CHWs in medically underserved areas. Grants for CHW programs would be available to health departments, clinics, hospitals, federally qualified health centers and other private organizations.

In this module

- [How to plan for sustainability](#)
- [Why sustainability plans are needed](#)
- [Community resources for sustainability planning](#)
- [Organizations that have funded programs and research](#)

[Funding](#)[Information Guides](#)[News & Events](#)[Experts & Organizations](#)[Publications & Maps](#)[Success Stories](#)[State Resources](#)[Community Health Gateway](#)[Community Health Workers Toolkit](#)[Modules](#)[1: Community Health Workers](#)[2: Program Models](#)[3: Training Approaches](#)[4: Program Implementation](#)[5: Planning for Sustainability](#)[6: Measuring Program Impact](#)[• Evaluating Impact](#)[• Commonly-Used Metrics](#)[7: Disseminating Best Practices](#)[8: Program Clearinghouse](#)[Home](#) > [Community Health Gateway](#) > [CHW Toolkit](#) > Module 6[Print Page](#)

Module 6: Measuring Program Impact

Community health worker (CHW) programs may lack funding, time or expertise to conduct rigorous program evaluations. Despite these challenges, most CHW programs are collecting some type of qualitative and/or quantitative data that can be used for evaluation purposes.

Even with limited data, it may be possible to evaluate the

- Effectiveness of processes and activities
- Achievement of program objectives
- Potential for program sustainability
- Impact of the CHW program on outcomes such as health care access and quality

To date, few evaluations have focused on the cost-effectiveness of CHW programs. That may change as program numbers grow and information about return on investment (ROI) and economic impact is needed to demonstrate program effectiveness.

In this module

- [Evaluating your program's impact](#)
- [Metrics used in measuring impact](#)

[◀ Previous Page: Module 5, Program & Research Support](#)[Next Page: Evaluating Impact ▶](#)

[Community Health Gateway](#)**Community Health Workers Toolkit**

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Disseminating Best Practices

Sharing best practices benefits the community health worker (CHW) community, including:

- New programs
- Programs looking to refine or expand activities,
- Health care providers interested in contracting with CHWs
- Consumers

Some CHW programs have focused on sharing knowledge and information relating to the implementation, sustainability and evaluation of programs. They have identified these methods for dissemination of program materials and findings:

- Local and regional networks of community organizations and partners
- Participation at conferences
- General community outreach activities

Resources

These resources provide in-depth information about best practices in community health worker programs.

If you need assistance with downloading or accessing these resources, please [contact us](#)

[Unity Conference - National Community Health Worker Conference Website](#)

Unity is the Center for Sustainable Health Outreach's annual national conference for and about community health workers.

Organization: Center for Sustainable Health Outreach

[Moving Towards Best Practice: Documenting and Learning from Existing Community Health/Care Worker Programmes](#)

Reference

Discusses the extent CHW deployment has been addressing important health priorities, documents success stories and lessons, identifies champions and compiles recommendations and lessons learned to improve practice.

Organization: Health Systems Trust, Durban, South Africa

Author(s): Irwin Friedman, Mankuba Ramalepe, Frayne Matjuis, Lungile Bhengu, Bridget Lloyd, Alfred Mafuleka, Lucky Ndaba, Busi Boloji

Date: 9/2007

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- [Ben Archer Health Center](#)
- [Migrant Health Center](#)
- [Migrant Health Promotion](#)
- [Delta Health Alliance](#)
- [Clemson University](#)
- [Family Health Centers](#)
- [Kodiak Island Health Care Foundation](#)

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Program Clearinghouse

The HRSA Office of Rural Health Policy funded rural communities to implement community health worker (CHW) programs as part of the 330A Outreach Authority program. This program focuses on reducing health care disparities and expanding health care services in rural areas.

Examples of current 330A Outreach Authority grantees that developed a CHW program in a rural community are available below. CHW program model information is [available in Module 2](#).

- **[Ben Archer Health Center](#)**
Project Title: Health Without Borders
Synopsis: Reduce health disparities related to chronic diseases through health education
- **[Migrant Health Center, Western Region, Inc.](#)**
Project Title: Health Education for Farmworkers in Puerto Rico
Synopsis: Prevention of diabetes, HIV/AIDS, domestic violence; work toward program sustainability
- **[Migrant Health Promotion](#)**
Project title: Futuros Saludables (Health Futures)
Synopsis: Improve access to primary and mental health services, and nutrition and physical fitness education, for uninsured and medically disenfranchised Latinos
- **[Delta Health Alliance](#)**
Project title: The Delta Community Health Worker Program
Synopsis: Improve health outcomes for patients diagnosed with diabetes, cardiovascular disease or hypertension
- **[Clemson University](#)**
Project title: Health Coaches for Hypertension Control
Synopsis: Train Health Coaches to provide services to patients referred by a family physician practice
- **[Family Health Centers](#)**
Project title: Rural Health Care Services Outreach Grant Program
Synopsis: Provide comprehensive health services and culturally and linguistically appropriate health information to migrant and seasonal farmworkers and their families
- **[Kodiak Island Health Care Foundation \(Kodiak CHC\)](#)**
Synopsis: Increase access to health care for underserved populations

Obesity Prevention Evidence Based Toolkit

1. Year 2 toolkit focuses on obesity prevention
 - Rates of obesity have increased dramatically
 - Obesity rates in rural areas are particularly high
 - Evidence base is still being compiled
 - Little information is available on rural models/approaches
2. Reviewed the literature on evidence based models of obesity prevention
3. Identified 9 330A grantees that have implemented programs
 - Reviewed the program applications
 - Conducted interviews with grantees and 1 non-grantee
4. Next steps: Explore grantee projects alignment with models; build toolkit; identify resources; post on RAC

Contact Information

Alana Knudson, PhD

Co-Director, Walsh Center for Rural Health Analysis

301-634-9326

knudson-alana@norc.org

Michael Meit, MA, MPH

Co-Director, Walsh Center for Rural Health Analysis

301-634-9324

meit-michael@norc.org