



205556 Increasing access to care, and promoting healthy lifestyles by a reopened clinic on the Navajo Reservation: A community-academic partnership improves monitoring and evaluation for long term sustainability

Tuesday, November 10, 2009: 5:00 PM

Jillian Fry, MPH, Johnson & Johnson Community Health Care Scholar, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD
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Background: The Navajo Lutheran Mission (NLM) is located in a designated Medically Underserved Area (MUA) within the Navajo Nation. With funding from the Johnson & Johnson Community HealthCare Program, the NLM has reopened a health care clinic which has been closed for a decade. With the newly added capacity to provide regular medical care and wellness programs comes the need to evaluate the services provided.

Methods: Through a participatory approach, the Johns Hopkins Bloomberg School of Public Health (JHSPH) has trained NLM staff to design and conduct an evaluation program using a conceptual framework of activities and intended outcomes. Based on this framework, the partners created measures of program implementation and effectiveness, in addition to a data management system using Epi Info.

Results: Halfway through a two year collaboration, the NLM's capacity to conduct program evaluation and use the results to make programmatic improvements has increased. This was achieved through the utilization of specific evaluation skills, including creation of a conceptual framework of program activities, development of appropriate indicators to measure effectiveness, and data collection, management and analysis.

Conclusion: Partnerships between community organizations and academic institutions provide a valuable opportunity to increase the sustainable in-house capacity for program evaluation and to provide increased understanding of key determinants essential for improving the access to and quality of medical services for Navajos living in MUAs.

Learning Objectives:

1. Describe the benefits of using a conceptual framework as a basis for program evaluation.
2. List three challenges arising in participatory research.
3. Obtain publicly available software and support materials for data management, analysis and presentation.

Presenting author's disclosure statement:

Qualified on the content I am responsible for because: I am the student collaborator on the project. I am responsible for providing training and technical assistance to the staff of the Navajo Lutheran Mission Clinic.

Any relevant financial relationships? No

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See more of: [Culturally Relevant Approaches to Reducing Health Disparities](#)
See more of: [Community Health Planning and Policy Development](#)



203320 Improving children's vision health in Alabama: A community-academic partnership to build monitoring and evaluation capacity for long-term sustainability

Monday, November 9, 2009

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Background:

A comprehensive and timely vision health program for young children is crucial to their educational development. With funding from the Johnson & Johnson Community Health Care Program, the Sight Savers America (formerly the Sight Savers of Alabama) expands eye care services, including screening for vision problems, comprehensive follow-up and treatment, to 6th grade children in Alabama's Black Belt region. Along with this growth comes the need to evaluate the quality and effectiveness of services provided.

Methods:

Through a participatory approach, the community and academic partners refined project goals, objectives, indicators, and conceptual framework. Based on the conceptual framework, the project staff created measures of program implementation and effectiveness, as well as a data management system. They collected, analyzed, and reported data for program monitoring and evaluation using EPI Info.

Results:

After two years of community-academic collaboration, the Sight Savers America has used the conceptual framework and indicators to perform program evaluation. Using the newly developed database, they assessed and disseminated its implementation and effectiveness. The project also utilized the evaluation skills in a separate setting. The ability to monitor and evaluate the program's process and effectiveness, as well as the partnership established have helped the organization to obtain additional funding, and to expand its operations to neighboring states.

Conclusions:

Program evaluation helps this community-based program to monitor their progress and effectiveness. A participatory approach between community organizations and academic institutions can increase a program's sustainability.

Learning Objectives:

List three components for a successful community-academic partnership working to improve in-house capacity in the design and implementation of program evaluation. Describe the steps necessary to increase in-house capacity for a community children's vision health program monitoring and evaluation. Identify two major challenges that a community based children's vision health program face in the implementation of an evaluation plan.

Keywords: Community Health Programs, Evaluation

Presenting author's disclosure statement:

Qualified on the content I am responsible for because: I have planned and coordinated the endeavors discussed in this abstract and presentation.

Any relevant financial relationships? No

I agree to comply with the American Public Health Association Conflict of Interest and Commercial Support Guidelines, and to disclose to the participants any off-label or experimental uses of a commercial product or service discussed in my presentation.

See more of: [Eye Health Promotion Programs](#)

See more of: [Vision Care Section](#)



208831 Door-to-door outreach in New Orleans: A community-academic partnership expands in-house capacity to monitor and evaluate the Health Care For All program in Katrina's aftermath

Monday, November 9, 2009

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Background: The Kingsley House Health Care For All (HCFA) Program, through its Walker/Talker outreach model has connected New Orleans families in need with access to healthcare and social service programs. The HCFA facilitates applications for Food Stamps, Medicaid and SCHIP, as well as providing referrals to local social services. The HCFA Program has recently extended its services and implemented home-based health and nutrition education sessions, utilizing social networks and peer education to increase knowledge and influence behavioral change regarding nutrition and exercise. This expansion provides an opportunity for a joint partnership in monitoring and evaluating the HCFA program.

Methods: HCFA program evaluation was jointly conceived by the HCFA staff and J&J Community HealthCare Scholars Program. A conceptual framework was developed, identifying intended outcomes and informing the development of project goals, objectives and indicators. In addition, a data management system was developed. HCFA staff received bi-annual trainings in evaluation design, database creation, analysis and data reporting.

Results: HCFA resulted in over 1,000 successful applicants to assistance programs, up more than 20 % from the preceding year. Preliminary results show improved nutrition knowledge and increased self-efficacy in preparing healthy meals among program participants. Proficiency in monitoring and evaluation methods was realized by Kingsley House staff.

Conclusion: Expanding in-house capacity in evaluation methods promotes the sustainability of organizations addressing critical gaps in healthcare access, and expands the skill sets of community healthcare workers.

Learning Objectives:

Describe the benefits of expanding capacity in evaluation methods for Community-Based Participatory Projects.

Keywords: Community Health, Evaluation

Presenting author's disclosure statement:

Qualified on the content I am responsible for because: I have been actively involved in the evaluation process of the Health Care for All Program

Any relevant financial relationships? No

I agree to comply with the American Public Health Association Conflict of Interest and Commercial Support Guidelines, and to disclose to the participants any off-label or experimental uses of a commercial product or service discussed in my presentation.

See more of: [Healthy and Prepared Communities: Poster Session](#)

See more of: [Community Health Planning and Policy Development](#)



208485 Building capacity in the evaluation of an integrative program to improve knowledge, access to care, and healthy behaviors among underserved African American populations at risk for diabetes and cardiovascular diseases in rural South Carolina: A community-academic partnership

Tuesday, November 10, 2009: 1:50 PM

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Background: SharedCare, a community-based organization which provides access to care for the uninsured, created an integrative health program with local churches to provide basic diabetic and cardiovascular disease care and educational programs to address the growing medical needs in the rural, underserved populations in Horry County, South Carolina. With funding from the Johnson & Johnson Community HealthCare Program, SharedCare, the Horry County Cedar Branch Community, and the Johns Hopkins School of Public Health formed a community-academic partnership to evaluate this integrative community program.

Methods: Using a hands-on, participatory approach, the community and academic partners collaboratively designed and implemented the program evaluation using a conceptual framework of program activities and intended outcomes. Based on this framework, the partners created measures for evaluating program implementation and effectiveness, in addition to building a data management system using Epi Info software.

Results: While the need for quality health care and access to care remains in the rural areas of South Carolina, this integrative approach to program implementation has narrowed the service gap in the targeted population. After one year of collaboration, both SharedCare and the Horry County Cedar Branch Community have developed their in-house capacity to design and conduct evaluations, and gained valuable skills in the analysis and interpretation of the program results.

Conclusion: Partnerships between community-based organizations and academic institutions in integrative health programs provide a unique platform for multiple stakeholders in the community to increase their sustainable in-house capacity for program evaluation and their ability to make evidence-based decisions in program strategies.

Learning Objectives:

At the conclusion of this session the participants will be able to: Describe how a community-academic partnership can improve in-house capacity in program evaluation for an integrative rural faith based program. List three benefits of using a conceptual framework in evaluation training.

Keywords: Evaluation, Community Participation

Presenting author's disclosure statement:

Qualified on the content I am responsible for because: I am currently a second year public health doctoral student specializing in health systems in lower and middle income countries. Prior to receiving a master degree in public health (MPH), I worked as a family practice physician assistant for two and a half years in the underserved Latino population. I am currently serving as a Johnson & Johnson Community Healthcare Scholar for the community-based health program in Loris, South Carolina to build in-house capacity for community organizations in the design and implementation of evaluation plans. I am also involved as a research associate for the M&E component of a multi-country results-based health financing program for the World Bank.

Any relevant financial relationships? No

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See more of: [Leading Collaborative Community Health Efforts](#)
See more of: [Community Health Planning and Policy Development](#)



206886 Promoting healthy lifestyles for chronic disease prevention among Hispanic farmworking families along the US-Mexico border: A community-academic partnership

Tuesday, November 10, 2009

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Background: Hispanic farmworkers face severe socioeconomic disadvantages and have one of the highest burdens of chronic disease in the United States. The goal of the Campesinos Sin Fronteras (CSF), a non-profit, grassroots organization, is to serve Hispanic farmworkers and their families in Yuma County, Arizona. The organization's Familias Sanas Initiative aims to prevent chronic disease and childhood obesity through health education, outreach and referral to appropriate services. With funding support from the Johnson & Johnson Community Health Care Program, the CSF and the Johns Hopkins School of Public Health designed and implemented an evaluation of the Familias Sanas Project. **Methods:** The community and academic partners collaboratively designed the CSF Program evaluation plan using a conceptual framework of program activities and intended outcomes. Based on this framework, the partners created measures by which to evaluate program implementation and effectiveness. They also built a data management system using EpiInfo for data collection and analysis. **Results:** As a result of the partnership, the CSF project's capacity to conduct program evaluation has increased by utilizing specific evaluation skills. These include creating conceptual frameworks of program activities and developing appropriate indicators to measure program effectiveness, as well as collecting, managing and analyzing data. **Conclusions:** Partnerships between community-based organizations and academic institutions provide a valuable opportunity to increase the sustainable in-house capacity for program evaluation. These partnerships also enhance understanding of factors critical to promoting the health of Hispanic farmworking families along the U.S.-Mexico border.

Learning Objectives:

- Identify the ways in which a conceptual framework is a valuable tool for program evaluation in community-based organizations
- Apply conceptual frameworks in community-based program evaluation efforts
- Describe the benefits and challenges of engaging in academic-community partnerships
- Obtain publicly available software for data management and analysis

Keywords: Chronic Diseases, Latino Health

Presenting author's disclosure statement:

Qualified on the content I am responsible for because: I am a student at the Johns Hopkins Bloomberg School of Public Health, in the Johnson and Johnson Community Health Scholars Program. I am a student scholar who has been matched with Campesinos Sin Fronteras to help provide technical assistance in various areas of program evaluation

Any relevant financial relationships? No

I agree to comply with the American Public Health Association Conflict of Interest and Commercial Support Guidelines, and to disclose to the participants any off-label or experimental uses of a commercial product or service discussed in my presentation.

See more of: [Prevention of chronic diseases in Latino communities](#)

See more of: [Latino Caucus](#)



184013 Sustaining quality health care for Latinos through capacity building in evaluation: Lessons learned from 17 community/academic partnership in 14 states

Tuesday, October 28, 2008: 3:06 PM

Fannie Fonseca-Becker, DrPH, MPH, Johns Hopkins Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD

Background:

Community health care organizations (CHCOs) serving US Latinos, the largest, fastest growing, medically underserved minority population, often lack the in-house capacity needed to evaluate their programs' outcomes. Having the in-house capacity for designing, conducting and presenting evaluation results can be a determining factor in a CHCO's long-term sustainability in this era of increased competition for limited funding. An innovate program that partners CHCOs and academia, with funding support from the Johnson & Johnson Community HealthCare Program, is helping bridge this evaluation gap by translating knowledge into practice.

Methods:

CHCOs and doctoral students (guided and supervised by a faculty member) are paired for a period of two years to improve the CHCOs' capacity in evaluation. In-house capacity is built using evaluation methodologies specifically developed to provide a standardized approach that can also be adapted to the needs of individual CHCOs.

Results:

At the end of a two-year period, CHCO program staff is able to create appropriate goals, SMART objectives, identify and organize into a conceptual framework those key variables needed to measure their program's outcomes. CHCO staff also learned how to develop data collection tools, create databases, and enter and analyze data using EPI-INFO, an user-friendly, free software created by the CDC. The staff also gained skills for presenting data in a clear, concise manner. In addition, the doctoral students developed their skills in translating knowledge into practice in an easy-to-understand, culturally appropriate and scientifically sound manner.

Conclusions:

CHCO/academic partnerships are effective in increasing the monitoring and evaluation capacity of community health care organizations providing care to Latinos across the country.

Learning Objectives:

At the conclusion of the session, the participant in this session will be able to: 1. List three components necessary for successful community/academic partnerships that aim to improve in-house capacity in the design and implementation of evaluation of programs serving Latinos. 2. Describe the steps necessary to increase in-house capacity for program monitoring and evaluation. 3. Identify two major challenges that CHCOs providing care to the Latino population face in the implementation of an evaluation plan.

Keywords: Community Health Centers, Evaluation



172873 Bridging cultural and language boundaries to improve knowledge, access to services, and healthy behaviors among Latinos at risk for HIV infection: Lessons from a community-academic partnership

Tuesday, October 28, 2008

Annie Michaelis , Department of Health Policy & Management, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD

Amy Huffman , Latino Outreach, Columbus AIDS Task Force, Columbus, OH

Fannie Fonseca-Becker, DrPH , Director, J&J Community HealthCare Scholars Program, Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD

Background: The Columbus AIDS Task Force (CATF), a community-based organization that provides comprehensive care services, educational programs and HIV testing to underserved populations in central Ohio, launched its Latino Outreach Program in 2006 to address the needs of the growing Latino population, comprised of many recent immigrants whose primary language is Spanish. As part of this initiative, CATF and the Johns Hopkins School of Public Health, with funding support from the Johnson & Johnson Community Health Care Program, formed a community-academic partnership to evaluate the Latino Outreach Program. Methods: Using a hands-on, participatory approach, the community and academic partners designed the evaluation plan using a conceptual framework of program activities and intended outcomes. Based on this framework, the partners created measures for evaluating program implementation and effectiveness, and built a data management and reporting system using Epi Info software. Results: While language barriers, cultural norms, and the presence of misinformation and stigma surrounding HIV provide challenges to the implementation and evaluation of the Latino Outreach Program, these challenges have been met through culturally sensitive, confidential programming and creative, adaptive methods for tracking program success. After two years of collaboration, CATF has developed its in-house capacity to conduct evaluations, increasing its ability to make evidence-based decisions about program strategies. Conclusions: The synergy stemming from partnerships between community organizations and academic institutions aids in the construction of programs that bridge cultural divides in a respectful, client-centered manner while still allowing for thorough data collection that feeds into future evidence-based program improvements.

Learning Objectives:

At the end of the presentation, participants will be able to: 1) Identify 3 ways in which conceptual frameworks are valuable tools for program evaluation. 2) Discuss challenges stemming from cultural and language barriers and possible solutions. 3) Describe how a community-academic partnership can benefit both organizations and academic partners.

Keywords: Community-Based Partnership, Evaluation

Presenting author's disclosure statement:

Qualified on the content I am responsible for because: I was integrally involved in the research presented in the abstract and I have no conflicts of interest.

Any relevant financial relationships? No

I agree to comply with the American Public Health Association Conflict of Interest and Commercial Support Guidelines, and to disclose to the participants any off-label or experimental uses of a commercial product or service discussed in my presentation.

See more of: [Community Service Partnerships: Getting Rid of the Town vs. Gown Dichotomy](#)
See more of: [Latino Caucus](#)



174789 Building capacity to evaluate a unique program for maltreated children in Mississippi: A community-academic partnership

Monday, October 27, 2008: 12:30 PM

Jennifer S. Mendel, Department of Health Policy and Management, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD

Elizabeth Hocker, JD, Executive Director, Children's Justice Center, Jackson, MS

Fannie Fonseca-Becker, DrPH, Director, J&J Community HealthCare Scholars Program, Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD

Background: The Child Abuse Referral and Examination (CARE) clinic at Children's Justice Center (CJC) in Jackson, MS is the only community-based organization providing non-traumatic, child-friendly forensic medical assessment and health care to victims of child abuse and neglect in the state of Mississippi. With funding from the Johnson & Johnson Community HealthCare Program, CJC has opened 2 satellite CARE clinics in remote areas of the state with the aim of increasing access to CJC's services. With this expansion comes the need to evaluate access to and quality of the services provided.

Methods: Through a participatory approach, the Johns Hopkins Bloomberg School of Public Health (JHSPH) has trained CJC staff to design and conduct a program evaluation using a conceptual framework of activities and intended outcomes. Based on this framework, the partners created measures of program implementation and effectiveness, in addition to a data management system using Epi Info for data collection and analysis.

Results: After two years of collaboration, the CJC's capacity to conduct program evaluation and use the results to make programmatic improvements has increased. This was achieved through the utilization of specific evaluation skills, including creation of conceptual frameworks of program activities, development of appropriate indicators to measure effectiveness, and data collection, management and analysis.

Conclusion: Partnerships between community organizations and academic institutions provide a valuable opportunity to increase the sustainable in-house capacity for program evaluation and to provide increased understanding of key determinates essential for improving the access to and quality of medical services for maltreated children.

Learning Objectives:

At the conclusion of the session, the participants will be able to: Describe the benefits of using a conceptual framework as a basis for program evaluation. List three challenges arising in participatory research. Obtain publicly available software for data management, analysis and presentation

Presenting author's disclosure statement:

Qualified on the content I am responsible for because: I have planned and coordinated the endeavors discussed in this abstract and presentation.

Any relevant financial relationships? No

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APHA 135TH ANNUAL MEETING AND EXPO
NOVEMBER 3-7, 2007 WASHINGTON, DC

APHA Scientific Session and Event Listing

3312.0: Monday, November 05, 2007 - 3:00 PM

Abstract #150055

Is moving health prevention to the mountain an effective intervention to increase access to care for exceptional remote communities in Northern Arkansas? A community-academic partnership helps answer that question

 [Audio \(mp3\) recording](#)

 [Slides \(pdf\) or Handout](#)

 [Multimedia recording](#)

Marguerite Baty, MSN, MPH, RN, Johns Hopkins University School of Nursing, 525 N. Wolfe Street, Baltimore, MD 21205; a baty1@son.jhmi.edu
Fannie Fonseca-Becker, DrPH, Director, J&J Community HealthCare Scholars Program, Bloomberg School of Public Health, Johns Hopkins University, 111 Market Place, Suite 310, Baltimore, MD 21202, and Sara Bates, Community Wellness, Ozark Mountain Health Network, 2500 Hwy 65S, Clinton, AR 72031.

Background: The Ozark Mountain Health Network (OMHN), a network of providers, health educators, and pharmacists in Searcy and VanBuren counties of Arkansas, launched the Reach Out and Connect (ROAC) program to improve health awareness of the medically underserved in these counties. Health screenings and education on cholesterol, diabetes, and high blood pressure are delivered to exceptionally remote communities. As part of this initiative, the OMHN and the Johns Hopkins School of Public Health, with funding support from the Johnson & Johnson Community Health Care Program, formed a community-academic partnership to develop a program evaluation of the ROAC Project. Methods: The community and academic partners collaboratively designed the ROAC Program evaluation plan using a conceptual framework of program activities and intended outcomes. Based on this framework, the partners created measures by which to evaluate program implementation and effectiveness and built a data management system using EpiInfo for data collection and analysis. The methods emphasize a hands-on, participatory approach. Results: As a result of the partnership, the ROAC project's capacity to conduct program evaluation has increased by utilizing specific evaluation skills that included creating conceptual frameworks of program activities, developing appropriate indicators to measure program effectiveness, in addition to data collection, management and analysis. Conclusions: Partnerships between community organizations and academic institutions provide a valuable opportunity to increase the sustainable in-house capacity for program evaluation and to provide increased understanding of key determinates essential for improving the health and health awareness among the people in these remote and medically underserved communities.

Learning Objectives:

- Identify three ways in which a conceptual framework is a valuable tool for program evaluation
- Discuss how community-academic partnerships lay the foundation for in-house capacity building in program evaluation
- Apply conceptual frameworks in program evaluation for community-based health care organizations

Keywords: Evaluation, Community-Based Partnership

Presenting author's disclosure statement:

Any relevant financial relationships? No

Any institutionally-contracted trials related to this submission?

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 [Audio \(mp3\) recording](#)

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[Reducing Disparities: Issues in Rural Healthcare](#)

[The 135th APHA Annual Meeting & Exposition \(November 3-7, 2007\) of APHA](#)



APHA 135TH ANNUAL MEETING AND EXPO
NOVEMBER 3-7, 2007 WASHINGTON, DC

APHA Scientific Session and Event Listing

4088.0: Tuesday, November 06, 2007 - Board 7

Abstract #154039

Working to Effectively Meet the Health Needs of North West Arkansas' Uninsured: The Case of a Community-Academic Partnership

Pammie Gabrielle Renee Crawford, MPhil, SM, International Health, Health Systems Division/Department of Health Information Systems, Johns Hopkins University Bloomberg School of Public Health/Johns Hopkins University School of Medicine, 615. N. Wolfe Street, Baltimore, MD 21205,

George Benjamin, MD, Director, St. Francis Clinic of Siloam Springs, 304 S. Maxwell Street, Siloam Springs, AR 72761, and Fannie Fonseca-Becker, DrPH, Director, J&J Community HealthCare Scholars Program, Bloomberg School of Public Health, Johns Hopkins University

Background: St. Francis Clinic of Siloam Springs is a community-based organization (CBO) providing free health care services to uninsured and medically underserved population in Northwest Arkansas. The CBO services address Arkansas' high prevalence of obesity, diabetes, and chronic illnesses. A community-academic partnership between St. Francis Clinic and Johns Hopkins School of Public Health, funded by Johnson & Johnson's Community Health Care Program, is increasing the CBO's capacity to evaluate program effectiveness.

Methods: The partners worked collaboratively in designing the project evaluation, desired outcomes, conceptual framework, data collection instruments/analysis, and presentation. CBO staff were trained in using EpiInfo. The methods emphasize a hands-on, participatory approach. Partners developed compatible goals and timelines ensuring a clear commitment to the project and feasible implementation.

Results: During the collaboration, CBO staff learned: use of the conceptual framework for program evaluation, data management, basic statistical analysis and interpretation of the results to measure program effectiveness. The academic partner gained an understanding of special monitoring and evaluation needs of CBO programs. The CBO's capacity to conduct program evaluation increased through the partnership and utilization of evaluation skills.

Conclusions: CBO-Academic partnerships provide valuable opportunities to increase sustainable in-house capacity for program monitoring and evaluation. Collaborative partnering is a mutual learning process: academic partners gain hands-on experience while the CBOs achieve built-in capacity for long term sustainability. This specific partnership also provided increased understanding of key determinates essential for the reduction of cardiovascular disease.

Learning Objectives:

- Identify the roles/contributions of the CBOs and academic institutions in planning, management, monitoring and evaluation of the community health programs.
- Describe mutual benefits of CBO-academic partnerships, including strengthening in-house capacity
- Describe the value of using a conceptual framework as a tool for CBO program evaluation
- Identify publicly available software for data management, analysis and presentation

Keywords: Minority Health, Underserved Populations

Presenting author's disclosure statement:

Any relevant financial relationships? No

Any institutionally-contracted trials related to this submission?

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