

CDC's WISEWOMAN Program Year 3 Evaluation Survey: Part III

Introduction

We would like to thank you for agreeing to complete this survey about the WISEWOMAN program. In concert with our continued assessment of the quality and impact of programs, this survey will focus on non-WISEWOMAN resources, relationships with community-level organizations, and data use and sharing.

Responses provided to this survey are considered those of individual WISEWOMAN programs—not those of individuals—and all responses provided will be maintained securely by ICF Macro staff.

We anticipate sharing preliminary findings during the 2011 Annual WISEWOMAN Meeting in Atlanta, and we will share an executive summary and facilitate a Webinar after all data analysis has been completed before the end of this year.

We would like to thank you for agreeing to complete this final survey, and ask that you respond to the questions that follow.

Public reporting burden of this collection of information is estimated to average 35 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0864).

Informed Consent Statement

ICF Macro is conducting this survey as part of the evaluation of the CDC's WISEWOMAN program. The purpose of this survey is to better understand WISEWOMAN program implementation in your State/Tribe, including:

- how programs maximize reach to priority populations
- specific training and technical assistance needs
- how programs develop and use quality assurance protocols
- programs' use of non-WISEWOMAN resources to provide services
- program sustainability
- data use
- supplemental program activities

Participation in the survey is voluntary; you may choose to end the survey at any time for any reason with no penalty and may choose not to answer any questions at any time for any reason. Your participation in the survey poses few, if any risks to you and you may choose not to participate in the survey for any reason.

ICF Macro evaluation staff will know which program has provided responses. This will allow us to follow up with programs should any responses require clarification. In addition, ICF Macro staff will track responses from each of the 3 surveys to link a given program's responses across the 3 data collection points. All responses provided to CDC will be in aggregate—across all programs—and without linking specific responses to the programs that provide them.

Your answers will help CDC assess how well WISEWOMAN is able to meet its objectives, and your responses will help CDC work with program staff to improve the program in the most sustainable manner moving forward.

If you have any questions about this survey, or evaluation, please contact Mr. Lawrence Scholl, ICF Macro Senior Project Manager, at Phone: (404) 433-0735, E-mail: lscholl@icfi.com.

UNLESS OTHERWISE INDICATED, THESE QUESTIONS RELATE TO YOUR CURRENT PROGRAM ACTIVITIES. PLEASE ANSWER ALL QUESTIONS ABOUT YOUR CURRENT ACTIVITIES, PERFORMED DURING THE PERIOD OF THE CURRENT FUNDING OPPORTUNITY ANNOUNCEMENT (DP08-804, JUNE 30, 2008-PRESENT).

SECTION A: WISEWOMAN SUSTAINABILITY

The WISEWOMAN Program is interested in learning about any activities and data collected that are specific to the sustainability of the program. The WISEWOMAN Program acknowledges that your funded program may operate differently than others. Responses to these questions will not impact your funded program negatively, and programs will not be penalized in any way.

1. Which of the following activities aimed at promoting program sustainability does your program conduct? Select all that apply.
 - a. Additional resources (e.g., in-kind donations, monetary donations)
 - b. Integration with essential clinical services
 - c. Integration with essential community services
 - d. Partner advocacy
 - e. Legislation
 - f. Internal newsletter publications
 - g. External media announcements (e.g., newsletter, newspaper, magazine, radio)
 - h. Peer-reviewed articles
 - i. Informational fact sheets and pamphlets
 - j. Other activities (please specify) _____
 - k. None - we have not conducted any activities to promote sustainability
 - l. Do not know

2. What types of non-WISEWOMAN resources (i.e., additional external resources, such as community support services) does your program use to provide WISEWOMAN services? [*Open entry*]

3. What are barriers to using non-WISEWOMAN resources to provide WISEWOMAN services? Select all that apply.
 - a. Limited access to non-WISEWOMAN resources
 - b. Policies within your organization that limit use of non-WISEWOMAN resources
 - c. Not enough time to seek out non-WISEWOMAN resources
 - d. Not enough knowledge of non-WISEWOMAN resources
 - e. Lack of internal support
 - f. Lack of support from partner organizations
 - g. Lack of support from direct service providers
 - h. Other barriers (please specify) _____
 - i. None - we have not had any barriers
 - j. Do not know

4. How can CDC help you access non-WISEWOMAN resources to provide WISEWOMAN services? Select all that apply.
 - a. Formal training (e.g., Webinar)

- b. Technical assistance (TA) (e.g., individual consultation, assistance with developing tools)
 - c. Guidance (e.g., emails, documents, and tools to provide suggestions or advice based on policies or evidence)
 - d. Other assistance (please specify) _____
 - e. None - we do not need assistance from CDC (Skip to *Question #6*)
 - f. Do not know (Skip to *Question #6*)
5. Please describe the training, technical assistance, and guidance (e.g., emails, documents, tools) that would help you access non-WISEWOMAN resources to provide WISEWOMAN services. [*Open entry*]

SECTION B: COMMUNITY SUPPORT SERVICES

In Program Year 2, we learned that some funded programs use community support services to help sustain the program. In the following questions, we would like to learn about your program's activities related to community support services. The WISEWOMAN Program acknowledges that your funded program may operate differently than others. Responses to these questions will not impact your funded program negatively, and programs will not be penalized in any way.

6. What types of non-WISEWOMAN community support services does your program use to help sustain your program? Select all that apply.
- a. Local affiliates of national organizations (e.g., nonprofit organizations, for-profit associations, sororities) Please specify _____
 - b. Local schools, colleges, or universities Please specify _____
 - c. Local community health organizations Please specify _____
 - d. Other (non-health related) local community organizations Please specify _____
 - e. Other types (please specify) _____
 - f. None - we do not use non-WISEWOMAN community support services
 - g. Do not know
7. How does your program access non-WISEWOMAN community support services to help sustain your program?
- a. [*Open entry*]
 - b. None - we do not access community support services
 - c. Do not know
8. What are barriers to accessing non-WISEWOMAN community support services? Select all that apply.
- a. Limited access to community support services
 - b. Policies within your organization that limit use of community support services
 - c. Not enough time to seek out community support services
 - d. Not enough knowledge of community support services
 - e. Lack of support from partner organizations
 - f. Lack of support from direct service providers
 - g. Other barriers (please specify) _____

- h. None - we have not had any barriers
 - i. Do not know
9. What assistance can CDC provide to help you access non-WISEWOMAN community support services? Select all that apply.
- a. Formal training (e.g., Webinar)
 - b. Technical assistance (TA) (e.g., individual consultation, assistance with developing tools)
 - c. Guidance (e.g., emails, documents, and tools to provide suggestions or advice based on policies or evidence)
 - d. Other assistance (please specify) _____
 - e. None - we do not need assistance from CDC (*Skip to Question #11*)
 - f. Do not know (*Skip to Question#11*)

10. Please describe the training, TA, and guidance (e.g., emails, documents, tools) that would help you access non-WISEWOMAN community support services.
[Open entry]

SECTION C: RELATIONSHIPS WITH COMMUNITY-LEVEL ORGANIZATIONS

The WISEWOMAN Program is interesting in learning about your program's relationships with community-level organizations. The WISEWOMAN Program acknowledges that your funded program may operate differently than others. Responses to these questions will not impact your funded program negatively, and programs will not be penalized in any way.

11. What types of community-level organizations have you developed relationships with to make resources and services available to WISEWOMAN participants to help participants maintain healthy behaviors? Select all that apply.
- YMCA/YWCA
 - Local hospitals and health centers
 - Local schools and colleges
 - American Heart Association chapters
 - American Stroke Association chapters
 - Cooperative Extension Service
 - Support groups (please specify) _____
 - Other types of community-level organizations (please specify) _____
 - None - we do not partner with community-level organizations
 - Do not know
12. How does your program work with community organizations to help WISEWOMAN participants maintain healthy behaviors? Select all that apply.
- Agreements with community organizations to allow WISEWOMAN participants to utilize the organization's services at free or reduced cost
 - Promote community organization services to WISEWOMAN participants
 - Arrange for community organizations to recruit WISEWOMAN participants to their programs
 - Provide incentives to WISEWOMAN participants to use services provided by community organizations
 - Other ways your program works with community organizations (please specify) _____
 - None - we do not work with community organizations to help WISEWOMAN participants sustain the health benefits of the program
 - Do not know
13. What are barriers to developing relationships with community-level organizations to help WISEWOMAN participants maintain healthy behaviors? Select all that apply.
- Limited time to develop relationships
 - Limited funding to develop relationships
 - Limited expertise with developing relationships
 - Lack of involvement from partner organizations
 - Lack of involvement by direct service providers
 - Other barriers (please specify) _____

- g. None - we have not had any barriers
- h. Do not know

14. How can CDC help you develop relationships with community-level organizations? Select all that apply.
- a. Formal training (e.g., Webinar)
 - b. Technical assistance (TA) (e.g., individual consultation, assistance with developing tools)
 - c. Guidance (e.g., emails, documents, and tools to provide suggestions or advice based on policies or evidence)
 - d. Other (please specify) _____
 - e. None - we do not need assistance from CDC (*Skip to Question #16*)
 - f. Do not know (*Skip to Question #16*)

15. Please describe the training, TA, and guidance (e.g., emails, documents, tools) that would help you develop relationships with community-level organizations. [Open entry]

SECTION D: DATA USE AND SHARING LESSONS LEARNED

The WISEWOMAN Program is interesting in learning about your program's use of data and how your program shares data. The WISEWOMAN Program acknowledges that your funded program may operate differently than others. Responses to these questions will not impact your funded program negatively, and programs will not be penalized in any way.

16. When does your program use the data your program collects? [Open entry]

17. How does your program use the data your program collects? [Open entry]

18. For what purposes does your program share your program's lessons learned with individuals or organizations outside the program? Select all that apply.
- a. Program improvement
 - b. Program sustainability
 - c. Recruitment of participants
 - d. Development of relationships with new partners
 - e. Development of relationships with direct service providers
 - f. Other reasons (please specify) _____
 - g. None - we do not share lessons learned with people or organizations outside the program
 - h. Do not know

19. What strategies does your program use to improve (upon) the (existing) program? Select all that apply.
- a. Conduct conference calls to share lessons learned
 - b. Conduct program evaluations
 - c. Offer technical assistance to staff or partners
 - d. Other strategies (please specify) _____
 - e. None - we do not use strategies for the purpose of program improvement (*Skip to Question #21*)
 - f. Do not know (*Skip to Question #21*)

20. With whom do you share lessons learned for program improvement Select all that apply.

- a. Direct service providers
- b. Internal partners (e.g., other groups or divisions within your agency)
- c. External partner organizations
- d. Other (please specify) _____
- e. Do not know

21. How can CDC facilitate sharing lessons learned for program improvement?
[Open entry]
22. What strategies does your program use to share lessons learned for program sustainability? Select all that apply.
- Distributing success stories
 - Developing and issuing press releases
 - Contributing to news stories
 - Creating promotional products
 - Giving presentations at community meetings
 - Regularly share program progress with senior leadership
 - Other strategies (please specify) _____
 - None - we do not share lessons learned for the purpose of program sustainability (*Skip to Question #24*)
 - Do not know (*Skip to Question #24*)
23. With whom do you share lessons learned for program sustainability? Select all that apply.
- Direct service providers
 - Internal partners (e.g., other groups or divisions within your agency)
 - External partner organizations
 - Other (please specify) _____
 - Do not know
24. How can CDC facilitate sharing lessons learned for program sustainability? [Open entry]
25. What strategies has your program used (within the past 3 years of the current FOA—since June 30, 2008) to communicate your lessons learned to the field of public health? Select all that apply.
- Produce articles for publication in public health-related peer-reviewed journals
 - Produce articles for distribution in newsletters
 - Give presentations (paper or poster) at public-health-related professional meetings
 - Give presentations at community meetings
 - Post lessons learned on program web sites
 - Post lessons learned on partner web sites
 - Other strategies (please specify) _____
 - None - we do not communicate our lessons learned to contribute to the public health knowledge base
 - Do not know

SECTION E: PERCEIVED IMPACT OF THE WISEWOMAN PROGRAM

The WISEWOMAN Program is interesting in learning about your view of your program's impact on the clinical health and health promotion services offered by WISEWOMAN—both to non-WISEWOMAN and WISEWOMAN patients. Please rate the extent you agree with each statement. Responses to these questions will not impact your funded program negatively, and programs will not be penalized in any way.

26. As the result of the WISEWOMAN Program, direct service providers provide WISEWOMAN services to non-WISEWOMAN patients.
- Strongly disagree
 - Somewhat disagree
 - Neither disagree or agree
 - Somewhat agree
 - Strongly agree
 - Do not know
27. As the result of the WISEWOMAN Program, direct service providers have changed how they intervene with the majority of patients (including non-WISEWOMAN patients) about physical activity.
- Strongly disagree
 - Somewhat disagree
 - Neither disagree or agree
 - Somewhat agree
 - Strongly agree
 - Do not know
28. As the result of the WISEWOMAN Program, direct service providers have changed how they intervene with the majority of patients (including non-WISEWOMAN patients) about healthy eating.
- Strongly disagree
 - Somewhat disagree
 - Neither disagree or agree
 - Somewhat agree
 - Strongly agree
 - Do not know
29. As the result of the WISEWOMAN Program, community partners (e.g., community gardens, local grocery stores) are doing more to promote cardiovascular health within your community.
- Strongly disagree
 - Somewhat disagree
 - Neither disagree or agree
 - Somewhat agree
 - Strongly agree
 - Do not know
30. As the result of the WISEWOMAN Program, local political leaders are doing more to promote cardiovascular health within your community.
- Strongly disagree
 - Somewhat disagree
 - Neither disagree or agree
 - Somewhat agree
 - Strongly agree
 - Do not know

31. As the result of the WISEWOMAN Program, there have been improvements made to parks, gyms, and other established recreation areas within your community.
- a. Strongly disagree
 - b. Somewhat disagree
 - c. Neither disagree or agree
 - d. Somewhat agree
 - e. Strongly agree
 - f. Do not know

32. As the result of the WISEWOMAN Program, there have been improvements made to residential neighborhoods to promote physical activity (e.g., sidewalks; street lights; walking trails)?
- a. Strongly disagree
 - b. Somewhat disagree
 - c. Neither disagree or agree
 - d. Somewhat agree
 - e. Strongly agree
 - f. Do not know

CLOSING

These are all of the questions that we have for now. Thank you for taking the time to complete this survey today. Should you have any questions about this survey or the evaluation overall, please contact Mr. Lawrence Scholl, ICF Macro Senior Project Manager, at Phone: (404) 404-0735, E-mail: lscholl@icfi.com.