Fall 2012 Program Proposal Template
http://www.bettycjung.net/Pch201grids.htm

Instructions

- **Save this template to your computer and rename it: PP-Lastname.doc (e.g., PP-jung.doc)**

- **YOU MUST USE THIS TEMPLATE TO WRITE YOUR PROGRAM PROPOSAL. I WILL NOT ACCEPT ANY PAPERS THAT DO NOT USE THIS TEMPLATE.**

- The purpose of this template is to help you complete this assignment satisfactorily by ensuring you have all the required components. Instructions are in red and once you have completed reading the instructions, you can then delete everything in red from the final program proposal paper. You may want to print this out and read it through a couple times and have it handy as you write the paper.

- Change the footer to your information. I have created a footer for you already. To change the footer to your information, go into the "Insert" tab, and then choose "Footer". When you are in the Footer menu, choose "Edit Footer."

- Save the Blue and Green headings for your program proposal paper. You can delete the blue Internet links that are part of the instructions.

- Delete all the red text once you have read and understood the directions.

- See me before or after class if you have any questions about this template. Or, you can E-mail me between classes at bcjungmph@yahoo.com or the Contactify link on the Class Web site (http://www.bettycjung.net/Pch201index.htm)

- Submit paper on the due date. Incomplete and late assignments will be penalized 20-40%.

Formatting

- All assignments must be word processed, using Microsoft Office Word (NOT Microsoft Works).

- Microsoft Office for MAC is free from SCSU, and only cost $7.50 for PCs. See IT for details.

- You can also use OpenOffice, which is free and can be downloaded from http://www.openoffice.org/download/

- OpenOffice includes a suite of productivity software, and its "Writer" is a word processing program that allows you to save your documents in MS Word format (Save as Word 97-2003 document format). This template is already in Word 97-2003 format.

Remember the grid

- **THREE POINTS will be deducted for each assignment that is missing a grading grid.**

- **Use the grid as cover sheet, stapled to the paper.**
- **Cite all sources you use in your paper!!!**

Summary of Required Program Proposal Assignment

The purpose of this assignment is to provide you with the opportunity to create two interventions to address a current public health issue/problem.

On the first day of class, you picked a topic for this paper. It was one of the following: Social Environment, Violence, Motor Vehicle Injuries, Oral Health, Alcohol, Tobacco, Physical Activity, Vaccine-Preventable Diseases, Diabetes, Cancer or Worksite Health Promotion.

For your topic of interest, you will conduct an assessment of what is already known about the public health problem/issue, and what the Healthy People objectives are that need to be addressed by an intervention/program. You will also review what has already been done by others in addressing your topic, the successes and failures, the barriers, etc. Based on the information you have gathered from your assessment, you will then create two interventions to address your topic.

Background

Issue vs. Problem

All the topics are considered Public Health issues or problems that impact the Public's Health, at the individual and population levels. Here is a simple explanation of the difference between "issue" and "problem."

"An issue also holds potential. When you discover that there is great potential for a situation to have a large impact, it is still, by definition, an issue. The issue mutates into a problem when the potential is realized. For instance, when a restaurant chef realizes that part of the batch of fish they are serving for the night has gone bad, they have an issue, because it holds the potential to make a lot of people sick, cause people to sue, and ruin the establishment's reputation. If no one has eaten, or has had a bad reaction to the fish, then it remains an issue. Once someone becomes ill and accusations start to surface, the issue is now a problem."
(Source: http://www.differencebetween.net/language/difference-between-issue-and-problem/)

Evidence-based Interventions

For your program proposal, you will develop two interventions to address the issue/problem at the population level. The reality is that money (funding) is needed to address issues/problems at such a broad level. To ensure that money/funding is being used appropriately, proposed interventions/ programs must show that they are effective.

How is this done? The Utah SPF SIG developed "Evidence-Based Intervention Guidelines" which provide a detailed definition of what makes for good interventions, which are usually based on evidence, thus, evidence-based interventions.

The intervention may be considered evidence-based if:
Definition 1: It is included on Federal Lists or Registries of evidence-based interventions
Definition 2: It is reported (with positive effects) in peer-reviewed journals
Definition 3: Documented effectiveness supported by other sources of information and the consensus judgment of informed experts, as described in the following set of guidelines, all of which must be met: *(Please note that all four criteria must be met):*

a. The intervention is based on a theory of change that is documented in a clear logic or conceptual model; and

b. The intervention is similar in content and structure to interventions that appear in registries and/or the peer-reviewed literature; and

c. The intervention is supported by documentation that it has been effectively implemented in the past, and multiple times, in a manner attentive to scientific standards of evidence and with results that show a consistent pattern or credible and positive effects; and

d. The intervention is reviewed and deemed appropriate by a panel of informed prevention experts that includes: well-qualified prevention researchers who are experienced in evaluating prevention interventions similar to those under review; local prevention practitioners; and key community leaders as appropriate, e.g., officials from law enforcement and education sectors or elders within indigenous cultures. *The Evidence- Based Workgroup will serve as the informed experts for the Utah SPF-SIG.* **(Source: http://www.dsamh.utah.gov/spf/pdf/evidence_based_intervention_guidelines_final.pdf)**

In summary, an intervention is an action taken to address an identified issue/problem. For any particular issue/problem, many interventions (actions) may need to be implemented. Sometimes, these interventions are integrated into what is called a program. The interventions covered in the Community Guide meet Definitions 2 and 3's criteria for evidence-based interventions.

Types of Interventions

There are three commonly used types of interventions:
- Education interventions: Increase knowledge and skills, improve attitudes and intentions, positively impact beliefs (e.g., teaching stress management skills to people who decided to quit smoking)
- Policy interventions: Modifying existing policies, developing new policies, or enacting new laws (e.g., smoke bans) to support a desired population change

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- Environmental interventions: Changes the physical environment that would support desired changes in the individual and population (e.g., smoke-free workplace and restaurants). Many times environmental changes require policy to make them happen, so you may see references to "policy and environmental change."

Intervention Strategies

To address an issue or problem that affects the population, researchers and experts have found that having one intervention may not be enough to make the effort effective. Meta analysts have defined two strategies for creating Public Health programs:

A. ***Community-wide multicomponent programs:*** use combinations of individually directed strategies, mass media campaigns, and environmental and policy changes in an integrated effort in a defined geographic area.
B. ***Comprehensive community-wide interventions***: multi-level (i.e., those that include multiple individually directed, setting-specific, and community-wide components), addressing a substantial proportion of the population in a defined area, and lasting longer than one year.
(Source: Community Guide, Chapter 4 Cancer, p. 165)

The Guide to Community Preventive Services: What Works to Promote Health?

http://www.thecommunityguide.org/library/book/index.html

Fortunately, for your paper, there is a resource available that will provide you with everything you need to conduct your assessment. This document, "The Guide to Community Preventive Services: What Works to Promote Health?" (AKA, The Community Guide) is available online, at the above link.

As an online digital source, you can access the PDF file for each chapter. Except for the two topics, Alcohol and Worksite Health Promotion, there is a chapter in the Community Guide for each of the other topics. Read the chapter pertaining to your topic to conduct the assessment. There is also updated information for each topic (new data and information since 2004), beyond the required chapter, that you can read for your assessment and for ideas for your program proposal. Those who picked Alcohol or Worksite Health Promotion can find Community Guide-related sources for their topics at the links provided. I have compiled all the relevant links to the Community Guide and related documents at:

http://www.bettycjung.net/Pch201grids.htm

The first thing you should do is to find the online resource that you will be using to conduct your assessment and download the chapter and related Webpages pertaining to your topic to your computer. The chapters are in PDF, but related sources are Webpages. If you want, you can print the chapter, or just read it off your computer. You should do

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this in the event that you may lose Internet access, for whatever reason, as I will not excuse tardy papers because you could not access these online sources.

Healthy People 2020 Webpage

http://www.bettycjung.net/Hp2020.htm

One of the major findings I have come across in reading the Community Guide (yes, I have read the entire document) is that many interventions and programs were not effective, and therefore, could not be used to make recommendations for their use with other populations and/or locations.

This was because the program designers and implementers did not bother to collect any data, or collected data in such a haphazard or inconsistent fashion that the findings conflicted, thus, ended up being unusable. So, if you read a report about this particular intervention/program, you would not know if it worked. Maybe it did, but only for a specific group, etc. This was the main reason why those conducting the systematic reviews for the Community Guide had to eliminate many studies from their reviews.

So that you will learn how to do this the right way, I will expect you to come up with a way to measure what you are doing, and to find a data source that will supply you with data that will help you monitor the progress your proposed interventions should be making. And, if it is not making progress, having the data will help you to refine the interventions, should you be so lucky to get your proposed program funded.

Because you will be including Healthy People objectives and baselines, it will mean that someone else or some entity is probably collecting data to meet the Healthy objectives you have chosen. If you can't find any data source, then you will have to come up with how you will collect data for your interventions.

Let's say you decided to educate pregnant mothers who gave up smoking on ways to handle stress better. You read that such classes are effective if held for at least 6 weeks, but then they relapsed 2 weeks after the classes stopped. So, for your proposal, you will conduct 2 interventions: A longer series of classes, and phone follow-up.

You propose to provide classes for 8 weeks, and after they finished the program, you will call them every 2 weeks to see how they are doing, until they have their baby. So, how will you collect data to show your proposed interventions will work?

You propose that you will ask two questions during each class and each phone call you make: 1) Since you last attended class (or, since I last called you), have you smoked? Yes or No. If they answer yes, you will ask what caused them to smoke again. (2) Is there anything going on in your life since the last class (or, since I last called you) that you consider stressful?

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While your assessment may show that classes helped pregnant women to manage stress better, you may not know for sure that a longer program will be more effective, or that phone calls every two weeks will reduce relapse. But if you should get funding to do this, you will at least know if these two interventions will work or if not, because you have collected data to monitor your progress.

The following is the grading grid you should include with your program proposal. Use this as checklist for what I will be grading the proposal on. Following the grading grid is the template to use to write your paper. Keep all the green headings and blue subheadings to help you structure your paper in a logical manner. There are 3 main sections: Assessment, Program Proposal and Summary. Main headings are in green, and subheadings are in blue.

The paper should be no shorter than 5 pages. Type this paper single space under each heading.

Here is an example:
http://www.bettycjung.net/201/Wsreports/PPolsen.pdf

Submit this grading grid with your Program Proposal Paper

Program Proposal Paper
http://www.bettycjung.net/Pch201grids.htm

Due Date: _____
Proposal Topic: _____
Name: _____

CATEGORY			POINTS	SCORE
Used Template Clarity of Thought Coherence in organization Grammar Punctuation Spelling 5 - 6 pages			3	
Assessment: Definition of the Public Health Problem/Issue (Why is it problem?)			3	
Assessment: Description of Successful Programs/ Interventions (What makes them successful?)			6	
Assessment: List of barriers that have been identified (What caused some programs to fail, or deter their success?)			5	

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Program Proposal: What specific problem are you addressing?	**3**	
Program Proposal: Which target population will be benefiting from your interventions and why this population?	**3**	
Program Proposal: Describe what your 2 interventions are, and how they will work. Identify type (educational, policy, environmental)	**7**	
Program Proposal: Which Healthy People objective will you be addressing; include a Data Collection Plan	**5**	
Summary: What were your major assessment findings? What are your two interventions, and what kind of impact will they make? List any potential harms that may occur from the proposed two interventions, and what data will you be using to monitor progress?	**5**	
SUBTOTAL	**40**	
LATE/INCOMPLETE (- 20% of total points)	**(-20%)**	
Missing grading grid	**(-3)**	
FINAL TOTAL POINTS	**40**	

Here is the template to use for writing your Program Proposal Paper

Proposal to address (Your Topic)

ASSESSMENT

Definition of the Public Health Problem/Issue

(Why is it an issue/problem?)

In this section, provide a brief narrative of why your topic is considered a public health issue or problem. What impact does your topic have on the population if something is not done about it? If the issue/problem is not solved, who will be impacted the most?

Include a description of which agencies and organizations are currently involved with addressing the issue/problem. For example, tobacco is addressed by many federal agencies (e.g., CDC, FDA, etc.) as well as non-profit organizations such as the American Heart Association, American Cancer Society, American Lung Association, etc. List any advisory groups that are involved with studying the issue and have released recommendations. Who are they, and what have done?

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What do available statistics have to say about who is affected? Is everyone affected equally, or only certain population groups? For example, breast cancer affects women more than men (but, approximately 1.08 per 100000 men per year get breast cancer)

Description of Successful Programs/ Interventions

(What makes them successful?)

The Community Guide is a compilation of assessments conducted by experts familiar with the topics included. What the experts did was bring together all the research that has been reported on interventions/programs that have been conducted to address an issue/problem.

They then conduct a systematic review, analyzing all the studies they have on hand using a criteria of whether or not each study should be included to evaluate the successfulness of the intervention(s) reported in the study. These studies are called meta-analyses. If these experts find a study does not meet their criteria for quality, they will exclude the study from their analyses. Based on the analyses conducted, these experts issue recommendations on what they consider to be effective interventions, namely, that these interventions work, and declare other interventions to be not effective (or, don't waste your time and money on these).

In their reports, they will say why an intervention works (because there are data to show a percentage of improvement has been reported), or why it doesn't (not enough studies, population not big enough, small number of studies, poor study design, no data to support claims, percentage too low, evidence not sufficient to determine effectiveness, data show inconsistent results, etc.)

Sometimes, an intervention may really work, but because the intervention was poorly carried out and/or data were not collected, or improperly collected, the resulting report of that intervention may be discarded. Poor write-ups can also cause an intervention to be deemed unsuccessful. Therefore, creating interventions/programs should include thinking about what you really want to do, and what kind of data to collect at the start of planning so you can then document what you did along the way, and in a systematic fashion. If you do this, then what you have done can be replicated (reproduced) by others, thereby, increasing your efforts to affect more people.

Known as program evaluation, good documentation of all activities that are part of an intervention can help you identify weak areas in your interventions. It is more cost-effective to fix the areas that weren't working in a basically good program than it is to start from scratch.

Identified barriers to program success

(What caused some programs to fail, or deter their success?)

As you read through the chapter (and/or relevant Webpages) covering your topic, experts will sometimes identify barriers (or hindrances) that prevented the intervention from working. For example, laws enacted can have a positive impact on a problem (e.g., seat belts). However, it is not always easy to have laws passed as it requires a legislature to cast a certain number of votes to pass. Then, there are special interest groups, for whatever reason, that may lobby against the passage of a law that may be good for the Public's health, but may negatively impact them, possibly in monetary ways. For example, a new car company may not want to spend the money to include seat belts in the back seats because it would add to the cost of manufacturing the car and raise the asking price, making them less competitive against larger more established car manufacturers.

In this section, list the barriers identified by the meta analysts. Also, think of barriers that may not be explicitly mentioned that may have caused some programs to not work. Barriers will be something you need to think about when you create your own interventions to address your topic.

PROGRAM PROPOSAL

Specific Problem to be Addressed

For your particular topic, what is the exact problem your interventions will be addressing? Explain why you have chosen this particular area to address. It could be because your assessment showed that particular interventions work better than others, and have been shown to be effective.

For example, tobacco is a major Public Health problem because thousands die from smoking every year. Not only does it cause health problems for those who smoke, but smoking pollutes the environment and non-smokers are forced to inhale chemicals released by a burning cigarette that in turn can affect a non-smoker's health. Also, tobacco companies continue to target young children and minority populations to buy their products, etc.

If the issue is a real problem, it may make more sense to choose one area to concentrate on and develop a couple of interventions for that one area that will work than to try a host of interventions that have not been shown to be effective over several areas. Even if you address one area, you are still addressing the problem, and possibly in a more effective way.

Target Population

Which population will be benefiting from your intervention/program, and why this population?

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In this section, describe which population your intervention will be targeting to bring about change. You found that "Approximately 26 percent of adults in the United States currently smoke cigarettes, and 50 to 67 percent of children less than five years of age live in homes with at least one adult smoker." **(Source: http://www.entnet.org/HealthInformation/Secondhand-Smoke.cfm)**

For example, you are thinking about proposing two interventions to address environmental tobacco smoke. The first is an educational intervention for elementary school children to help them understand that breathing cigarette smoke will make them sick. Children with asthma already know this, but most children don't. The second is also an educational intervention to send flyers home with the children for parents and caregivers to raise awareness about the hazards of environmental smoke.

Proposed Interventions

Intervention #1 (educational, policy or environmental)

Intervention #2 (educational, policy or environmental)

You can use 2 of the same type (e.g., two educational interventions), or, a combination of 2 different types (e.g., policy and environmental).

Let's say you work for a local health department and you heard that the federal government will be providing funding to health departments that can show they have a tobacco problem in their communities. The federal government will consider any proposal that will reduce the number of people smoking in their community.

You can either come up with something original, but it must be based on your assessment of what you found to work, as reported in the Community Guide. For example, you read that an intervention works with all populations, but you have decided to concentrate on children attending elementary school.

In this section you actually describe each intervention that you have created to address your topic (see the previous section's example). Make a case for why it should be funded so you can implement it.

You need to provide some details about what you hope to accomplish, how the population you have chosen to receive these interventions will benefit from them, and how you can show that the interventions are working (what kind of data you will be collecting).

Or, you can choose an intervention that was found to have not worked but you think may work for the population you have chosen by addressing the barriers mentioned. In this

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case, you will have to explain that it was found to have not worked for whatever reason, but you will have come up with an alternative approach that may work better because you have read, for example, that such education targeting tobacco works (you will have to provide some research to support your claim. It could be from the Community Guide or related sources, or from another reputable source that you can cite).

Healthy People Objective(s)

For each topic, the Community Guide provides a listing of Healthy People 2010 objectives. In this section, include only those objectives that relate to your proposed interventions.

For example, you found for the Tobacco topic, the following objectives pertain to your proposed interventions to educate elementary school children and their caregivers about the hazards of tobacco smoke (You can call it the Local Environmental Tobacco Awareness Program):

Exposure to Secondhand Smoke (ETS)
Among children aged _6 years, Young children reduce the proportion of children who live in homes in which someone smokes inside the house _4 days per week (27–9)
Baseline: 27% (1994)
Healthy People 2010: 10%

Reduce the proportion of non-smokers aged _4 years with a serum cotinine level _0.10 ng/mL (27–10)
Baseline: 65% (1998-2004)
Healthy People 2010 Objective: 45%
(Source: http://www.thecommunityguide.org/tobacco/Tobacco.pdf, p. 6)

Looking at these data, baseline measures exceed the objectives set by Healthy People 2010, which is good. But, based on new data, Healthy People may decide to change their objectives because ideally, it should be 100% in both cases.

Think about how you would collect the data. If there was a baseline number, then someone somewhere collected the data. You may need to research this find out who, and how they did it.

Data Collection Plan

Fortunately, because we are using Healthy People to define the baselines and objectives, then data are probably being collected and compiled by the federal agencies responsible for implementing and monitoring the progress of Healthy People goals and objectives.

Start with CDC Wonder, Data2010
http://wonder.cdc.gov/data2010/

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Pick the "Focus Area" link
Once you are on the Focus Area Page, click on the menu to get a listing of the focus areas.
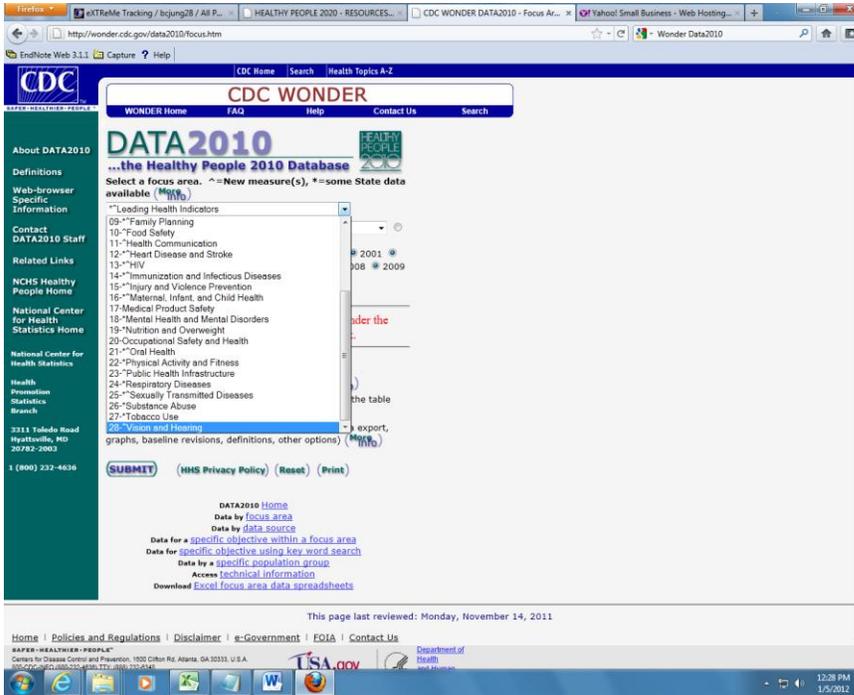
Then you choose what data for want to view. For this example, we are looking for tobacco statistics. So, make your choices, and it would look like this:

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Once you press the submit button, CDC Wonder will provide you with statistics for the demographics of children affected.

Since many of the Public Health Issues covered by the Community Guide deal with health behaviors, two good sources for behavioral data are:

- Behavioral Risk Factor Surveillance System
- http://www.cdc.gov/brfss/

- Youth Risk Behavior Surveillance System
- http://www.cdc.gov/HealthyYouth/yrbs/index.htm

Connecticut-specific data can be found on the state health department Web site
http://www.ct.gov/dph/taxonomy/v4_taxonomy.asp?DLN=46973&dphNav=|46941|4697

From this page you will be able to find other statistics related to your topic.

Other online sources of data can be found at:
http://www.bettycjung.net/Govstats.htm
http://www.bettycjung.net/Phdata1.htm
http://www.bettycjung.net/Phdata2.htm
http://www.bettycjung.net/Phdata3.htm

Information about Healthy People 2020
http://www.bettycjung.net/Hp2020.htm

You may need to say that there are ways to gather the data, but there might be barriers you need to overcome to get the data (e.g., getting parental permission), or you may be able to find a more creative way to gather the data you need. For example, you may just ask how many children in the class live in a home where someone smokes, just to get a baseline.

Of course, the best measure would be to take a blood specimen from children to measure cotinine levels. Issues that may arise include: Who would pay for the blood test, and children don't exactly like to be stuck with a needle.

Or, you may be able to come with up another way to collect data on an ongoing basis to gauge how well the interventions are working. Regardless, you will have to have some plan about collecting some data and how the data will be used.

In general, many national surveys are conducted that you may be able to use to set baselines or monitor progress for educational interventions. Plus, it will be easy for you come up with ways to show an increase in knowledge or awareness (through tests, etc.)

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It may be harder to find data sources to show what works for policy and environmental interventions. However, there are ways to measure tobacco in the body, but that may cost too much for your program to collect this. So, you may want to look for studies that show an intervention worked in your geographic area and/or population group from others doing what you are doing that has collected data, to start.

For example, how can you show that smoking bans really work to improve health? Here are the results of a published 2007 study:

Effects of the Irish Smoking Ban on Respiratory Health of Bar Workers and Air Quality in Dublin Pubs

1. **Patrick Goodman[1],**
2. **Michelle Agnew[2],**
3. **Marie McCaffrey[3],**
4. **Gillian Paul[4] and**
5. **Luke Clancy[5]**

Findings: Exposure study. There was an 83% reduction in $PM_{2.5}$ and an 80.2% reduction in benzene concentration in the bars. Health effects study. There was a 79% reduction in exhaled breath carbon monoxide and an 81% reduction in salivary cotinine. There were statistically significant improvements in measured pulmonary function tests and significant reductions in self-reported symptoms and exposure levels in nonsmoking barmen volunteers after the ban.

Conclusions: A total workplace smoking ban results in a significant reduction in air pollution in pubs and an improvement in respiratory health in barmen

(Source: http://ajrccm.atsjournals.org/content/175/8/840.full)

SUMMARY

Major Assessment Findings

In this final section of your paper, summarize all the main points from the assessment you conducted that you used as a foundation for developing your program proposal for 2 interventions.

Two Proposed Interventions

In this section, briefly provide a summary of what your two interventions are about, who you hope to impact with your two interventions, and include any possible harms can occur. This is to show that you have looked at all the possibilities, both good and bad.

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Finally, make sure you include what kind of data you will be collecting to monitor the progress of your program (include data sources), should you receive funding.