

**March of Dimes**  
**Chapter Community Grants Program**

**PROGRESS REPORT 7/1/05 – 12/31/05**

**1. Progress meeting the project objectives:**

**Objective #1:** To evaluate the effectiveness of *An Ounce of Prevention* curriculum in the first six months of the project.

**A survey instrument was developed and distributed** to evaluate usage and effectiveness of the curriculum. A contact list of 600 educators and health professionals who obtained the curriculum from 2000-2004 was compiled, with corrections and updates to positions and mailing addresses made as possible. The survey was distributed to the 600 educators and health professionals with a cover letter explaining the project. The letter included the *An Ounce of Prevention* cover as a logo. An insert with 3 commemorative postal stamps was also included as an incentive. The commemorative stamps used were Prevent Family Violence and Breast Cancer Prevention. All surveys were distributed by postal service and used the Sickle Cell Anemia stamp. (Please see the attached sample.) The Office of Socio Economic Data Analysis at the University of Missouri compiled a data collection system for compiling responses and will complete an analysis of the data returned. Recipients returned 209 surveys and 27 surveys were returned due to mailing errors. Since the target response rate of 30 percent or 180 respondents was exceeded, follow-up telephone calls were not required.

**Objective #2:** To implement the *An Ounce of Prevention* curriculum in the 11 school districts that participate in the Missouri School Health Services program and elected to increase folic acid education.

A list was compiled of the nurse managers from the 11 school districts that elected to increase folic acid education. The nurse managers were contacted by electronic mail and invited to participate in the direct intervention project by implementing the *An Ounce of Prevention* curriculum. Six school districts elected to participate in the project and attend curriculum implementation training. (Please refer to the attached list.) Training was conducted at the Schools and Public Health: Connecting for Healthier Communities Conference in Osage Beach, Missouri, on March 8 and 9, 2005. A third training session was held in Jefferson City, Missouri, on March 18, 2005, for the nurse managers and educators who were unable to attend one of the earlier sessions. The central Missouri location was selected to accommodate the diverse locations of the participating school districts.

Pre and post test instruments were designed and provided to the school districts participating in the project. The instruments designed included Survey 1, to be

administered prior to teaching the unit, and Survey 2, to be completed immediately after teaching the curriculum material and again 6 months later. Each survey was completed for 3 grade levels: grades 5/6, grades 7/8, and grades 9 – 12. (Please see attached surveys.) Five of the school districts in the project implemented the curriculum, Survey 1 and Survey 2 prior to the end of the 2004-2005 school year. One school district decided to wait until the 2005-2006 school year to start the An Ounce of Prevention curriculum due to the approval process and scheduling issues in each school. The 5 school districts that have implemented Survey 1 and Survey 2 will administer the 6 month follow-up at the beginning of the 2005-2006 school year.

**2. Barriers which have interfered with meeting objectives and steps taken to address these challenges:**

**Objective #1:** Locating current addresses was a challenge in preparing the contact list of survey recipients. Some of the original recipients had either retired or relocated to another school. Their replacement was either unaware of the An Ounce of Prevention curriculum or could not locate the copy in their agency or department. Receipt of the survey itself increased awareness of the curriculum. In some instances new school personnel were able to locate the curriculum and plan to use it in the 2005-2006 school year.

**Objective #2:** Five of the school districts that elected to increase folic acid education decided not to participate in the school intervention project. Concerns were expressed about fitting the curriculum into pre-existing lesson plans and adapting the material to younger students. These concerns were addressed in the curriculum implementation training sessions. Examples were provided for adapting the curriculum components to various time frames. The training sessions also identified learning activities for varied grade levels. To further address this concern, as stated earlier, each survey was also completed for 3 different grade levels.

**The six month follow up surveys were somewhat difficult to implement with the exact same students, due to student movement and class schedules that made accessibility to the students something of a challenge. Input from the facilitators for the six month follow up was not provided for**

**3. Have you identified any need to modify the program from its original design since the last report?**

The program has not been modified, but DHSS is requesting a budget modification. Due to the opportunity to provide curriculum implementation training at the Schools and Public Health: Connecting for Healthier Communities Conference in March 2005, it will not be necessary to use the training expenditures as indicated in the original grant proposal and budget. Since the third training session was conducted in Jefferson City, Missouri, at a state site, there was no cost associated with the training.

DHSS is proposing to use a portion of the training money to support the attendance of Brenda Bell and the project contact, Leslie Seifert, at the Missouri Educators of Family and Consumer Sciences (MoEFACS) Annual Conference in Springfield, Missouri, on July 27, 2005. Brenda Bell will be conducting An Ounce of Prevention curriculum training at the conference. The remaining balance from the initial training allowance will be used to purchase additional copies of the revised An Ounce of Prevention curriculum. A copy of the curricula will be distributed to participants who attend the MoEFACS Annual Conference training session. Recipients of the evaluation survey who could not locate the curriculum at their school but expressed an interest in obtaining a copy will also be provided a revised curriculum.

In addition to the MoEFACS Annual Conference in July 2005, An Ounce of Prevention will also be exhibited at the 14<sup>th</sup> Annual Coordinated School Health Conference in December 2005. Training funds from the grant will be used to pay the exhibitor fee and travel expenses for Brenda Bell and Leslie Seifert.

DHSS anticipates that with this budget change the entire grant amount of \$12,923 will be spent. A Budget Revision and cover letter will be submitted next week after the project contact has an opportunity to speak with Pat Plumley regarding the budget revision process.

#### **4. What, in your opinion, have been the major successes resulting from this project?**

**Objective #1:** The major success thus far is the return rate of the survey respondents. There have been 209 responses to the 600 surveys that were distributed for a return rate of 34.8 percent. A brief overview of the results indicates a very favorable response. A copy of the anecdotal comments from the surveys is attached.

**Feedback from the respondents validated the premise that the curriculum is a reliable resource for teachers, and health professionals. Written and verbal feedback from the respondents is very positive and indicates a high level of acceptance of this curriculum.**

**Objective #2:** A major success is the opportunity to implement the An Ounce of Prevention curriculum and conduct Survey 1 and Survey 2 in 5 Missouri school districts to approximately 450 students. A second success is the opportunity to distribute the An Ounce of Prevention curriculum statewide to Missouri school districts and health departments. Presentation of curriculum implementation training at the Schools and Public Health: Connecting for Healthier Communities Conference opened the training to all conference participants. Each participant received a copy of the updated curriculum. The response to the training and the curriculum was consistently very positive.

#### **5. Summarize results of any program evaluation efforts.**

**Objective #1:** As stated above 209 surveys were returned by recipients for a

34.8 percent rate of return. An additional 27 surveys were returned due to mailing errors. The target response rate of 30 percent or 180 respondents was exceeded. Responses were compiled in a data collection system developed by the Office of Socio Economic Data Analysis (OSEDA) at the University of Missouri. OSDEA also completed an analysis of the data returned. **Highlights are recorded as follows:**

**35% of the recipients returned their surveys. The primary users were public high school teachers who teach family and consumer sciences. 85% of them teach the curriculum as a unit within a course, with 12% who use the curriculum as a professional resource. ( That is probably the health professionals from the public health offices and other health services agencies). The teachers spend one to six hours over one to three days to teach this curriculum. 76% are still using the curriculum, with those who are not using it are no longer teaching a course in which to integrate the topic. A total of 6289 to 15,450 students have completed the curriculum, with an anticipated number of 6,450 who will receive instruction in the next year. 75% of the respondents have been using the curriculum for 2 to 4 years, and rate the 12 components referenced to the format of the curriculum as excellent to good. The resources included were rated excellent to good, including the March of Dimes Fact Sheets. 34% rated the suggested videos as good to excellent, with 66% indicating the question did not apply. It is likely that time did not allow teachers to include the videos, or accessibility was a factor. Even though six sets are housed in as many locations in the state for a free loan use, the process for acquiring and returning the videos may prohibit some from using them. Over half the respondents reported student knowledge and behavior was changed, with 33% of those reaching that assessment through the pre and post tests, the chapter tests and observation. The majority of the respondents will continue to use the curriculum.**

**Frequency Per Cent**

**Institution type:**

**74% Public School**

**25% Health Dept.**

**Institution level**

**85% High School**

**4% Middle School**

**7% College**

**4% Other**

**Job Classification**

**80% Teacher/Educator**

**2% Counselor**

**14% Nurse/health Professionals**

**3% Other**

**Presentation style**

**69% Unit within course**

**14% Special program**

**>1% Special course**

4% One-on-One setting  
1% Literature Packet Only  
12% Curriculum materials used as professional  
Resource only

**Instructional Hours**

14% Less than 1 hour  
44% 1 to 3 hours  
32% 4 to 6 hours  
7% 7 to 10 hours  
3% More than 10 hours

**Instructional days**

21% 1 day  
16% 2 days  
23% 3 days  
13% 4 days  
11% 5 days  
16% More than 5 days

**Is curriculum currently being used**

76% Yes  
23% No

*Some respondents may have checked no based on the timing of their response. It is likely that many of these will be using the curriculum in another month of the year.*

**If no then why is it not being used**

49% No longer teach course  
27% Found better program  
24% Other

**Approximate # students who completed curriculum**

24% 0 to 25 (0- 1000)  
24% 51 to 100 (1326- 2550)  
10% 101 to 200 ( 2040-40000)  
4% 201 to 300 (1717-3400)  
5% Over 300 ( 2700)  
Total (6289 to 15,450)

**Anticipated number who will receive instruction from the curriculum next year- 6450**

**Curriculum has been in use for:**

9% Less Than One Year  
10% One Year  
36% Two Years  
27% Three Years  
11% Four Years  
6% Five Years

**Curriculum materials divided into logical and meaningful units**

40% Good  
56% Excellent  
Does not Apply

**Curriculum materials formatted for easy presentation**

69% Good  
56% Excellent

**Units equally challenging, interesting and informative**

41% Good  
53% Excellent

**Curriculum was internally consistent and structurally complete**

36% Good  
58% Excellent

**Curriculum contains all the materials needed for successful presentation**

37% Good  
56% Excellent

**Curriculum and unit goals and objectives are clearly stated and performance oriented**

67% Good	67	38.29
56% Excellent	98	56.00

**Learning activities are appropriate for the academic level of students, subject matter and class time**

43% Good  
49% Excellent

**FACS & Science Competencies**

36% Good	62	35.8
55% Excellent	96	55.49

**Assessment instruments adequately measure course goals, objectives and key concepts**

44% Good	74	44.31
44% Excellent	75	44.91

10% Does not Apply

**Case Studies and Discussion Questions**

44% Good  
42% Excellent  
10% Does not Apply

**Overheads**

**34% Good**  
**51% Excellent**  
**13% Does not Apply**

**March of Dimes Fact Sheets**

**32% Good**  
**61% Excellent**  
**6% Does not Apply**

**Brochures and other materials in Resource Packet**

**37% Good**  
**54% Excellent**  
**8% Does not Apply**

**Teacher Background Information**

**40% Good**  
**46% Excellent**  
**13% Does not Apply**

**Videos**

**14% Good**  
**17% Excellent**  
**66% Does not Apply**

**The level of impact the curriculum had on my students was**

**47% Good**  
**42% Excellent**  
**Does not Apply**

**Curriculum changed students:**

**56% Knowledge level**  
**Behavior – Not reported**  
**44% Both**

**Assessment of change based on: Pre- & Post-Tests provided in curriculum**

**32% Yes**  
**67% No**

**Assessment of change based on: Chapter tests**

**33% Yes**  
**67% No**

**Assessment of change based on: Other assessment**

**16% Yes**  
**84% No**

**Assessment of change based on: Observation**

31% Yes  
69% No

### **Evaluation feedback for the School Intervention Project:**

**Objective #2:** Survey 1 and Survey 2 have been administered in the participating school districts. Survey 2 will be administered again as a 6-month follow-up when the students return to school in the fall for the 2005-2006 school year. Students have been assigned a number that matches their first name and last initial. This tracking system will be used to assure confidentiality when the 6-month follow-up survey is distributed. Survey 1 and Survey 2 results are being collected and compiled.

**Survey 1 and Survey 2 were administered in the participating school districts. Survey 2 was to be administered again as a 6-month follow-up when the students returned to school in the fall for the 2005-2006 school year. Students have been assigned a number that matches their first name and last initial. This tracking system will be used to assure confidentiality when the 6-month follow-up survey is distributed. However, three of the target schools did not complete the follow up survey, two are planning to complete this stage in March, 2006..**

- 6. Complete a budget report showing project expenditures from 1/1/05 to 6/30/05. Please make sure that expenditures are shown in comparison to current year budget figures as listed in the original grant proposal budget, and that the budget sheet is signed.**

On June 22, 2005, "An Ounce of Prevention" Curriculum Evaluation contract was finalized between the Missouri Department of Health and Senior Services and the University of Missouri (MU). The contract amount is \$6,857.00 and the contract period is February 15, 2005 - December 31, 2005. Brenda Bell, MS Ed., County Program Director, Howell County Extension, is the Principal Investigator. Ms. Bell is an original co-author of the *An Ounce of Prevention* curriculum and a former high school Family and Consumer Sciences (FACS) teacher. Finalization of the contract was delayed due to negotiations between the DHSS and MU. Since the contract has only been in effect for a short period, an invoice has not yet been submitted for services provided under the leadership of Ms. Bell.

Project expenditures reimbursed to date are recorded on the attached Budget Form. Revised copies of the *An Ounce of Prevention* curriculum were purchased at a 20 percent discount rate of \$64/copy due to the quantity being purchased. The total cost of 20 curricula was therefore \$1,280 rather than \$1,600.

Expenses reported to date by MU but not yet invoiced due to the contract delay are reported on the attached Budget Form A. **MU requires a copy of the final report to be enclosed with the final invoice.** The mail processing expense of \$479 varies from the original proposed budget amount of \$240 due to the amount of time required to update contact information for prior recipients of the *An Ounce of Prevention* curriculum.

**7. Discuss project sustainability after the grant period ends.**

The *An Ounce of Prevention* curriculum will continue to be implemented after the grant period ends. Those who have received the updated curriculum have expressed their enthusiasm for the resource. An initial review of the survey indicates that a major portion of the respondents expect to continue to use the curriculum. The Department of Health and Senior Services has ordered additional copies of the curriculum and plans to provide further curriculum implementation training as needed and requested. If the school intervention project determines that the curriculum is effective, this will establish *An Ounce of Prevention* as an evidence-based intervention for folic acid education and use of multivitamins among adolescents and women of childbearing age, justifying broader use and promotion.

**Because the curriculum was revised and updated in March, 2005, the information is y current, and will be useful for a number of years as either an active teaching tool, or as a professional resource. Interest has been shown by several individuals to host further trainings and continued distribution of the curriculum. The curriculum is available for purchase from University of Missouri Extension Publications on an ongoing basis.**