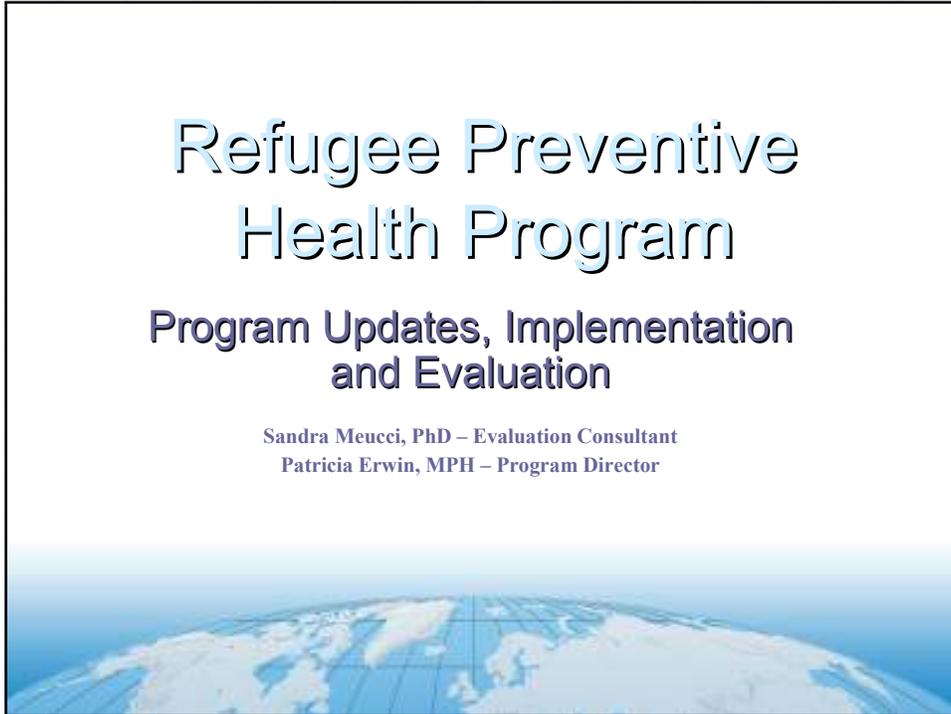


Refugee Preventive Health Program

Program Updates, Implementation and Evaluation

Sandra Meucci, PhD – Evaluation Consultant
Patricia Erwin, MPH – Program Director



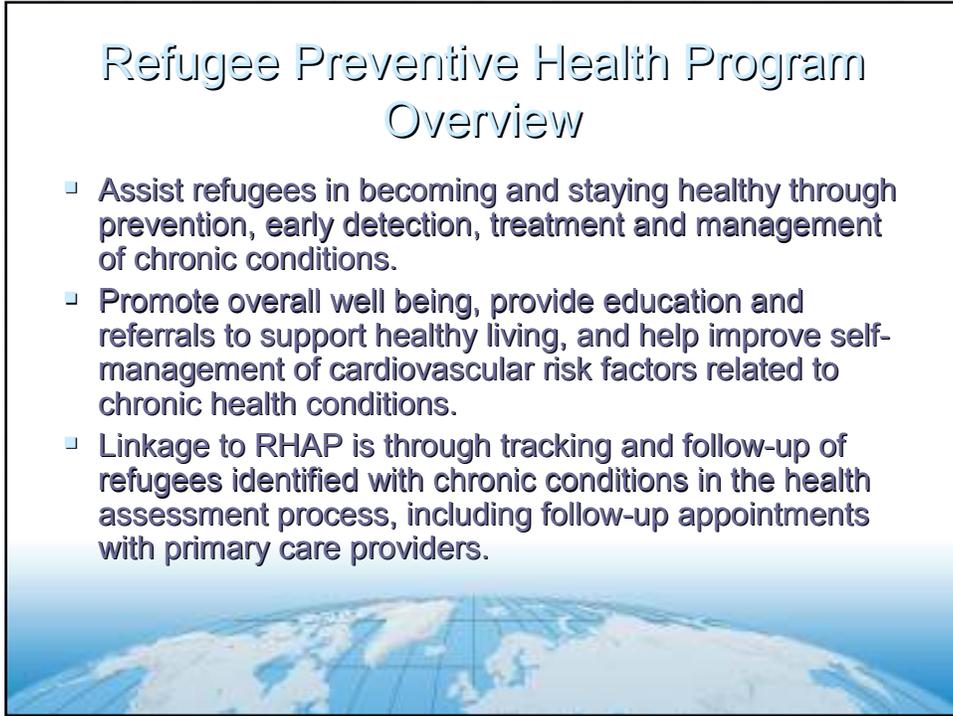
Presentation Overview

- Status of Grant – Year Three of Five
- Program Implementation Year 4
- Reporting Requirements
- Evaluation Findings for Year Three:
 - Health Education, Action Planning for Behavior Change, and Tracking & Follow-Up



Refugee Preventive Health Program Overview

- Assist refugees in becoming and staying healthy through prevention, early detection, treatment and management of chronic conditions.
- Promote overall well being, provide education and referrals to support healthy living, and help improve self-management of cardiovascular risk factors related to chronic health conditions.
- Linkage to RHAP is through tracking and follow-up of refugees identified with chronic conditions in the health assessment process, including follow-up appointments with primary care providers.



Status of Grant Activities

- Accomplishments in first 3 years of 5 year program:
 - initial planning processes completed
 - all grantees have trained CHAs working
 - providers trained by all grantees
 - health education sessions being implemented and evaluated
 - tracking and follow-up systems developed and being used
 - improved and simplified reporting process initiated
 - site visits to all grantees conducted in 2008-09



Program Implementation 2009-2010

- Objectives for 2009-2010 revised and simplified
- Focus for 2009-2010 for grantees:
 - conducting health education sessions and focusing on behavior change for participants
 - offering trainings for new providers,
 - developing and sharing health education materials (RHIN),
 - strengthening systems to identify, track and follow up on RHAP patients with chronic health conditions, and compile information,
 - implementing evaluation plans,
 - continue with CHA trainings as needed, and planning processes for new populations

Program Implementation 2009-2010

- Support for grantees:
 - visits to grantees by evaluation and program technical assistance consultants
 - RHIN trainings for RPHP and RHAP staff and collaborating partners offered at your site
 - Technical assistance as needed on evaluation and program implementation, including behavior change strategies
 - Evaluations analyzed and compiled for grantees and statewide

Progress Report Requirements and Due Dates

■ **Semi-Annual Progress Reports**

■ *First Progress Report*

- Period Covered: 7/1/2009-12/31/2009
- Due Date: Friday 1/15/2010

■ *Second Progress Report*

- Period Covered: 7/1/2009-6/30/2010
- Due Date: Tuesday 6/15/2010



Invoices/Fiscal Report Due Dates

■ *First Quarter Invoice*

- Period Covered: 7/1/2009-9/30/2009
- Due Date: Friday 11/13/2009

■ *Second Quarter Invoice*

- Period Covered: 10/1/2009-12/31/2009
- Due Date: Monday 2/15/2010

■ *Third Quarter Invoice*

- Period Covered: 1/1/2010-3/31/2010
- Due Date: Friday 5/14/2010

■ *Fourth Quarter Invoice*

- Period Covered: 4/1/2010-6/30/2010
- Due Date: Friday 8/13/2010



Evaluation Forms Requirements and Due Dates

- Distribute evaluation forms to all health education participants, and participants in provider or CHA trainings
- Submit all completed evaluation forms at the end of every month
- Translate all comments into English before submitting
- Final due date for any evaluation forms not submit on monthly schedule: Friday 5/28/2010

Evaluation Summary 2008-09: County / Groups Served

County	Refugee/Asylee Groups	Number – Health Education Evaluations Collected 2008-09
Alameda	Burmese	11
Contra Costa	Iranian / Vietnamese	16
Los Angeles	Chinese / Iraqi/ Vietnamese	129
Sacramento	FSU / All Who are Russian - speaking	59
San Francisco	China, FSU / Ukraine / other	224 group; 110 individual
San Diego	Iraqi	180
Santa Clara	Bhutanese / Congolese / Burmese / Iraqi / Iranian	57
Stanislaus	Assyrian / Iraqi	18

Evaluation Summary 2008-09: Health Conditions

	High BP	High LDL	Overweight	Diabetic
Alameda	83% (9)	50% (6)	33% (4)	17% (2)
Contra Costa	38% (6)	44% (7)	44% (7)	10% (2)
Los Angeles	15% (19)	11% (14)	5% (6)	6% (8)
Sacramento	67% (40)	33% (19)	52% (31)	18% (11)
San Diego	52% (11 of 21)	38% (8 of 21)	38% (8 of 21)	29% (6 of 21)
San Francisco (group)	10% (22 of 224)	10% (22 of 224)	7% (16 of 224)	5% (11 of 224)
San Francisco (individual)	38% (42 of 110)	17% (19 of 110)	48% (53 of 110)	10% (11 of 110)
Santa Clara	33% (19)	13% (7)	40% (23)	13% (7)
Stanislaus	33% (6)	22% (4)	56% (10)	33% (6)

Health Education Objective

- The evaluation will show at least 70% of the participants' will increase knowledge of, or intention to, and/or confidence in their ability to adopt healthy behaviors by the end of the sessions.

Behavior Change - Eating

County	% thinking about /begun eat better
Alameda	100% (3)
Contra Costa	88% (14)
Los Angeles	73% (94)
Sacramento	73% (42)
San Diego	74% (14)
San Francisco – Grp	46% (101) – There were 50% already eating well
San Francisco – Ind.	70% (76)
Santa Clara	63% (32) – There were 35% already eating well
Stanislaus	84% (17)

Behavior Change – Exercise

County	% thinking about /begun exercise most days
Alameda	100% (3)
Contra Costa	88% (14)
Los Angeles	83% (111)
Sacramento	89% (46)
San Diego	68% (13) – There were 16% already exercising most days
San Francisco – Grp	59% (132) – There were 36% already exercising most days
San Francisco – Ind.	60% (66)
Santa Clara	62% (33) – There were 34% already exercising most days
Stanislaus	88% (15)

Behavior Change – Managing Stress

County	% thinking about /begun managing stress better
Alameda	100% (3)
Contra Costa	82% (13)
Los Angeles	62% (81) – There were 30% already managing stress well
Sacramento	83% (56)
San Diego	67% (12) – There were 22% already managing stress well
San Francisco – Grp	60% (131) – There were 33% already managing stress well
San Francisco – Ind.	69% (74) – There were 17% already managing stress well
Santa Clara	62% (30) – There were 33% already managing stress well
Stanislaus	83% (15)

Individual Behavior Plans

- Alameda – 100% (3)
- Contra Costa – 100% (16)
- Los Angeles – 84% (108)
- Sacramento – 94% (48)
- San Diego – 100% (16)
- San Francisco – 83% (169) & 67% (69)
- Santa Clara – 87% (42)
- Stanislaus – 88% (14)

Congratulations and many thanks to everyone for your commitment and dedication!



Questions??

