SURVEILLANCE& EVALUATION



Increase state and local capacity to obtain and use data and other evidence to prevent obesity and promote health in a systematic way.



vision 2020:

Effective, flexible systems for sharing evidence are in place to enable state and local partners to use the best available evidence for implementing and measuring strategies. High-level intermediate and long-term indicators are clearly defined in order to track progress towards key outcomes.

rationale:

The ability to obtain and effectively use the best available evidence, including surveillance and evaluation data, new research, and other resources for evidence-based practice, is critical to the success of efforts to prevent obesity and promote healthy behaviors. Access to high quality evidence and the ability to use it appropriately is critical to every step in public health practice including assessment, planning, implementation, and evaluation. Key evidence can also unify diverse groups of stakeholders to work toward common goals. Evidence collected through evaluation can demonstrate the effectiveness of initiatives to stakeholders, including target communities or populations; alert partners of a need to adapt plans or procedures; guide decisions about further dissemination or scaling, and provide accountability to funding organizations.

SURVEILLANCE & EVALUATION STRATEGIES

strategy SE1: Plan and begin to develop one or more coordinated systems among partners for obtaining and sharing data and other types of evidence and the knowledge and standards needed to use these appropriately, to foster and maintain an effective, sustainable systems approach to obesity prevention throughout the state.

strategy SE2: Maintain and continue to develop surveillance and monitoring systems and foster the development, sharing, and use of evaluation resources to support the various levels and approaches of state and local obesity prevention efforts throughout the state.

strategy SE1

Plan and begin to develop one or more coordinated systems among partners for obtaining and sharing data and other types of evidence and the knowledge and standards needed to use these appropriately, to foster and maintain an effective, sustainable systems approach to obesity prevention throughout the states.

Objective SE1.1:

By 2014, develop a scientific advisory group to provide recommendations about evidence-based frameworks, methods, and key indicators to foster the development of an aligned systems approach to obesity prevention throughout the state. (Baseline= no advisory group)

Objective SE1.2:

By 2014, plan and begin to develop the means to effectively share data, evidence, methods, tools, and related knowledge, with diverse partners throughout the state, to support a sustainable systems approach to obesity prevention (Baseline = no systematic network).

suggested actions:

supportive policies

- Develop policies within institutions and organizations to foster the development of community-academic relationships, the translation of evidence-based resources, and trans-disciplinary research, to prevent obesity and improve population health
- Obtain funding from local, state or national sources to develop and sustain information systems that enable partners to effectively

exchange various types of evidence and the knowledge and tools needed to use it appropriately

infrastructure

- Work with diverse partners to plan and develop a scientific advisory group
- Work with the advisory group to develop key indicators that can be tracked as a common outcome data set for partners
- Identify or create indicators to assess overall capacity and capacity dimensions related to obesity prevention, for use in state and local strategic planning
- Identify and disseminate standard tools or indicators to align surveillance and evaluation activities across the state
- Create learning groups within and across organizations to better incorporate a systems perspective into ongoing obesity prevention efforts
- Develop statewide scientific capacity for using systems methods and tools
- Integrate surveillance and evaluation information and expertise more fully into state and local strategic planning activities
- Regularly conduct and disseminate an evaluation of State Plan objectives

resources and training

 Provide and update training and information to public health practitioners, epidemiologists, researchers, and students to create and sustain a common knowledge base regarding an evolving systems approach to obesity prevention

local implementation

 Participate in statewide networks or partnerships (e.g., WiPOD, WIPAN) to enhance the exchange and use of high quality evidence, methods, and tools for obesity prevention efforts

- Identify and learn to use methods and tools likely to foster a global view of an intervention context or help engage key non-traditional partners likely to further a systems approach (e.g., Geographic Information Systems (GIS) mapping, the Community Health Assessment and Group Evaluation (CHANGE) tool, and Health Impact Assessments (HIA))
- When evaluating interventions, include indicators for key changes in partner capacity

strategy SE2

Maintain and continue to develop surveillance and monitoring systems and foster the development, sharing, and use of evaluation resources to support the various levels and approaches of state and local obesity prevention efforts throughout the state.

Objective SE2.1:

By 2018, increase by 50% the number of available indicators for areas identified as key gaps in surveillance and monitoring systems for obesity prevention, such as indicators for policy, systems, and environmental change and representative rates for unhealthy weight and risk behaviors for children and health-equity related populations. (Baseline = Developmental).

Objective SE2.2:

By 2014, assess the surveillance and evaluation capacity of state and local partners and create goals and objectives for improvement (Baseline: no capacity assessment)

suggested actions:

supportive policies

 Develop state and local policies that enhance the availability of surveillance information related to obesity prevention in Wisconsin children

infrastructure

- Regularly update and disseminate list of available policy, systems and environmental change indicators and identify gaps and recommend additional indicators to fill those gaps
- Strengthen or develop surveillance and evaluation partnerships, to help fill identified gaps in evidence and methods
- Assess the surveillance and evaluation capacity of partners and create a plan to address needs
- Regularly monitor surveillance and evaluation needs of diverse partners to inform strategic planning for state and local obesity prevention efforts
- Identify and disseminate standards of quality for evidence and indicators related to obesity prevention
- Annually develop and disseminate surveillance and evaluation reports as specified in state plan reporting plan

resources and training

- Compile, disseminate and provide training on evidence-based surveillance and evaluation methods, tools, and indicators to support local obesity prevention efforts
- Regularly update training and resources to include new evidence and methods or indicators related to surveillance and evaluation

local implementation

- Foster and sustain academic-community partnerships across the state to help support local obesity prevention efforts
- Participate in collaborative or mentoring relationships to enhance or leverage surveillance and evaluation capacity

OTHER RESOURCES

Strategy SE1: Systems Resources

Centers for Disease Control and Prevention

Division of Nutrition, Physical Activity, and Obesity. Atlanta, GA (2011). Developing and Using an Evaluation Consultation Group. Atlanta, GA. www.cdc.gov/obesity/downloads/ EvaluationConsultationGroup.pdf

Strategy SE2: Surveillance & Evaluation Resources

Obesity, Nutrition, & Physical Activity in Wisconsin www.dhs.wisconsin.gov/physical-activity/Data/index.htm

Centers for Disease Control and Prevention

- Behavioral Risk Factor Surveillance System www.cdc.gov/brfss
- Youth Risk Behavior Surveillance System www.cdc.gov/HealthyYouth/yrbs/index.htm
- School Health Profiles www.cdc.gov/healthyyouth/profiles

United States Department of Agriculture Food Environment Atlas. www.ers.usda.gov/ data-products/food-environment-atlas.aspx

County Health Rankings www.countyhealthrankings.org

CDC Data Access Tools www.cdc.gov/nchs/data_access/data_tools.htm

Wisconsin Department of Health Services WIC Data. www.dhs.wisconsin.gov/wic/WICPRO/data/index.htm

CDC Program Evaluation Framework & evaluation resource page. www.cdc.gov/eval/index.htm

Recommended Community Strategies and Measurements to Prevent Obesity in the United States. www.cdc.gov/obesity/downloads/ community_strategies_guide.pdf

American Evaluation Association: Public e-library

http://comm.eval.org/resources/librarydocumentlist/?LibraryKey=1eff4fd7-afa0-42e1-b275-f65881b7489b

Community Commons

www.communitycommons.org

UW Partnership for Fitness

For the past three years, Dr. Aaron Carrel and his colleagues have been working with middle schools throughout the state of Wisconsin to measure the fitness levels of Wisconsin youth. In partnership with the Department of Public Instruction and the Department of Health Services, Dr. Carrel and his colleagues began implementing a program called the Wisconsin Partnership for Childhood Fitness in Wisconsin middle schools. This program, funded by the UW School of Medicine and Public Health, Wisconsin Partnership Program, utilizes FitnessGram to measure several health indicators for each child, including aerobic capacity, muscular endurance, and muscular strength. Dr. Carrel then compares these scores to metabolic health markers for similar aged youth, which he explains "provides us with a direct link between the child's fitness score and metabolic health markers, something that is very beneficial for physicians when evaluating children's health."

Implementing this program in middle schools has allowed the Wisconsin Partnership for Childhood Fitness to use this data as a benchmark for determining how youth in Wisconsin can improve their fitness, as well as compare to the rest of the nation. The partnership also demonstrates the feasibility of performing, reporting and generating standardized childhood fitness percentiles based on age and gender. Such data can be useful in comparing populations and evaluating initiatives that aim to improve childhood fitness.