A Snapshot of Your Community: Understanding Resources and Needs Assessments

Office of Adolescent Health
January 27, 2011

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A national non-profit membership organization that connects professionals to one another in the field of adolescent reproductive health.

- Networking
- Training & Technical Assistance
- Resources & Publications
Objectives

• Explain at least 3 benefits of a needs and resources assessment

• Describe the 5 steps to conducting a needs and resources assessment

• Explain the relationship between assessment and program outcomes
BENEFITS OF A NEEDS & RESOURCE ASSESSMENT
What is a Needs and Resource Assessment?

• A needs and resource assessment is a **systematic** way of gathering information that describes, in **detail**, the needs and resources of the **priority population** and the community.
What Is A Need?

- A need is a lack of some resource, tool, or program that puts youth at a disadvantage, or puts them at risk for negative health or social outcome such as teen pregnancy, substance abuse, or poor academic achievement.
What Is A Resource?

- Resources are a type of **support, service, or program** that are available in the community.
  - Reproductive health care clinic
  - Faith-based community youth ministry
  - Youth-friendly radio station
  - Schools
Benefits of Conducting A Needs Assessment

- Identify **priority population** by assessing the data

- Learn more about suspected needs & possibly **uncover** new ones

- Identify prevalent sexual risk-taking **behaviors**

- Identify the **determinants** (i.e., risk and protective factors) of those behaviors
Benefits of Conducting A Needs Assessment

- **Design** programs more strategically
- Gather **baseline data** that can help with program planning and evaluation
- **Strategic use** of resources (i.e., staff, funding, materials)
- Gain **support** from stakeholders through strategic planning
- Develop better **grant proposals**
Benefits of Conducting A Needs Assessment

• Update information about your priority population and program participants

• Review for program improvement

• Use for future program planning
For Example: Fayetteville Youth Network (FYN)

Community-based organization that promotes positive youth development and provides substance abuse services.

FYN is a fictitious organization, developed by Jen Duffy (USC) and enhanced by Gina Desiderio (HTN) for the CDC PSBA-GTO project.
THE FIVE TASKS OF NEEDS & RESOURCES ASSESSMENT
The 5 Tasks:

1. Establish a Work Group
2. Develop a Data Collection Plan
3. Collect the Data
4. Analyze the Data
5. Link Assessment Findings to a Logic Model
Task 1: Establish a Work Group

- Identify **key participants** (e.g., program manager, educators, evaluator, parents, youth, school personnel, etc.)
- Offer **initial data** to start process and get things going
- Determine participants’ **role** (e.g., group leader, support)
- Determine a **timeline** for completion of the assessment
FYN’s Work Group

- FYN staff members
- Community advocates
- School personnel
- A parent of a Fayetteville High School student

- Leader: Jordyn, Health Education Specialist at FYN
Task 2a: Develop Assessment Questions
Question #1: Demographics

1. How would you describe the demographics of the youth in your community?
Question #2, Part A: Prevalence and Incidence

Among youth in your community, what is the **prevalence and/or incidence** of the following?

- Pregnancy
- Birth
- Abortion
- Sexually transmitted infections (STI)
- HIV/AIDS
FYN: Birth Rates

- Using state data, it was determined that the highest incidence of teen births was concentrated in one zip code.

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Question #3: Sexual Behaviors

What are the common sexual risk-taking behaviors among the youth in your community?
Question #4: Determinants

What are important determinants (i.e., risk/protective factors) that influence the sexual risk-taking behaviors described above?
Determinants

1. Knowledge about the risks of having sex, pregnancy, STI, and/or HIV and methods to avoid these outcomes

2. Perception of risk, including susceptibility and severity of risk

3. Personal values and peer norms about sex

4. Attitudes and peer norms about condoms and contraception
Determinants (cont.)

5. Skills (refusal, condom use, condom negotiation) and self-efficacy to use those skills

6. Communication with parents or other adults

7. Intentions
Question #5: Existing Resources

What existing programs, services, and resources in your community address adolescent pregnancy, STI, and HIV?

Where are there gaps in services or weak approaches?
Question #6: Collaborations

What potential collaborations or partners might you leverage to support your efforts?
Task 2b: Develop a Data Collection Plan

a. Plan to collect existing data & new data
Where to Collect Existing Data

National

- ADD Health (www.cpc.unc.edu/projects/addhealth)
- Census Bureau (www.census.gov/)
- Centers for Disease Control & Prevention (www.cdc.gov)
  - Division of Adolescent and School Health (www.cdc.gov/HealthyYouth/index.htm)
  - Youth Risk Behavior Surveillance System (YRBSS) (www.cdc.gov/HealthyYouth/yrbs/index.htm)
  - Division of Health and Human Services, HIV Surveillance (www.cdc.gov/hiv/)
  - Division of Reproductive Health (www.cdc.gov/teenpregnancy/)
  - Healthy People (www.cdc.gov/nchs/healthy_people.htm)
- Find Youth Info (www.findyouthinfo.org/)
Where to Collect Existing Data

- Reports published by NGOs
  - Healthy Teen Network (www.healthyteennetwork.org)
  - Advocates for Youth (www.advocatesforyouth.org)
  - Annie E. Casey Foundation, Kids Count (www.aecf.org/MajorInitiatives/KIDSCOUNT.aspx)
  - Bixby Center for Global Reproductive Health (www.bixbycenter.ucsf.edu/index.html)
  - Child Trends (www.childtrends.org)
  - ETR Associates (www.etr.org)
  - The Guttmacher Institute (www.guttmacher.org)
  - Joint Center for Political and Economic Studies (www.jointcenter.org/)
  - Kaiser Family Foundation (www.kff.org)

- Peer-reviewed journal articles
Where to Collect Existing Data

State and Local

- State or local health departments
- State or local departments of education
- Reports completed by non-profit organizations, universities, and foundations in your community
- Previous information collected by your organization
Methods to Collect New Data

- Surveys
- Focus groups
- In-depth interviews
- Observations
- Conversations
FYN: Task #2

- Developed assessment questions

- Identified and planned to collect existing and new data
Task 3: Collect Data

- Collect and assess new and existing data
FYN: Task #3

- Collected data from state health surveys, and YRBSS
- Surveyed high school students
- Conducted focus group with school staff
**Task 4: Analyze Data**

- Describe your priority population
- Identify which sexual behaviors are important
- Identify important determinants that affects those behaviors
- Describe what resources are in the community

*Next,*
- *Share the data with key leaders and stakeholders*
- *Use the data to drive program development and implementation*
FYN: Demographics

Using state health surveys with data by zip code, Fayetteville’s demographic “snapshot” of their youth ages 11-19 is…

- 55% African-American, 25% Latino, 15% Caucasian, 5% Other
- 53% female, 47% male
- 90% English speaking, 7% non-English speaking
FYN: Establishes its Goal

To reduce teen birth rates in the Fayetteville School District among students ages 13-18.
FYN: Sexual Behaviors

Using the Youth Risk Behavior Surveillance System, data show...

- 85% of students had sexual intercourse at least once
- 14% of students had experienced a pregnancy or had gotten a partner pregnant
- 39% had been treated for a STI
FYN: Targeted Sexual Behaviors

- Decrease frequency of sexual intercourse
- Increase correct & consistent use of condoms
- Increase correct & consistent use of contraception
FYN: Targeted Determinants

- Increased self-efficacy for using condoms
- Increased knowledge about pregnancy, HIV, and other STIs
FYN: Existing Resources

- Youth Focused Community Organizations
- Health Educators
  - Schools
  - Community
- School Outreach Program
FYN: Collaborations

- Fayetteville High School
- Planned Parenthood of Fayetteville
- Fayetteville Health Department
- Youth Spirit Teen Center
Task 5: Link to Logic Model

- Logic model: A tool to strategically, purposefully and scientifically identify the causal pathways between health goals and interventions.
**Interventions**

- Students illustrate the human reproductive anatomy on newsprint.
- Students state the function (i.e. and physiology) of the human reproductive system.
- Students learn where & how fertilization occurs.
- Require students to practice using condom on a model
- Role play condom negotiation

**Determinants**

- Increase knowledge about pregnancy, HIV and other STIs
- Increase self-efficacy in using condoms & contraception

**Behaviors**

- Decrease frequency of sexual intercourse
- Increased correct and consistent use of condoms
- Increased correct and consistent use of contraception

**Health Goal**

- Reduce teen birth rates in their school district among students age 13-18
LINKING A NEEDS ASSESSMENT TO PROGRAM OUTCOMES
Evaluation Plan

- Logic Model is foundation for evaluation plan
- Behaviors and determinants → outcome objectives
- Intervention activities → process objectives
FYN: Intervention & Evaluation

- Making Proud Choices!
- Process Indicators:
  - 96 out of 100 attended the program at least once, participating in the evaluation
  - Demographics: Ages 13-18, in grades 9-12
  - All activities were implemented as written
**FYN: Intervention & Evaluation**

- **Outcome indicators** (immediate posttest)
  - **Knowledge, Skills, & Attitudes** (Determinants)
    - 97% of students reported an increase in their knowledge about pregnancy, STIs, and HIV
    - 92% of students reported an increase in skills using a condom correctly
    - 96% of students reported an increase in self-efficacy using condoms and contraception
    - 33% of students reported a decrease frequency of sexual intercourse
    - 55% of students reported an increased correct and consistent use of condoms
    - 41% of students reported an increased correct and consistent use of contraception
FYN: Intervention & Evaluation

**Outcome indicators (immediate posttest)**

**Behaviors**
- 33% of students reported a decrease frequency of sexual intercourse
- 55% of students reported an increased correct and consistent use of condoms
- 41% of students reported an increased correct and consistent use of contraception
What Happens When the Expected Outcome is Achieved?

- Celebrate!!!
- Improve!!!
- Replicate!!!
- Evaluate!!!
What Happens When the Expected Outcome is NOT Achieved?

• Verify the needs assessment was **thorough & complete**

• Determine if **additional existing and/or new data** will inform the process
What Happens When the Expected Outcome is NOT Achieved?

• Check to see if the intervention was appropriate for the priority population

• Confirm that the determinants targeted were appropriate for the behaviors

• Be sure to the organization has the capacity to implement the intervention as it is written
CLOSURE
Thank you!

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