

## Sigma Theta Tau International's 29th International Nursing Research Congress

### Community-Coalition Based Wellness Efforts: Evaluation of Policy, Systems, and Environmental Changes Through an Academic-Community Partnership

**Vicki L. Simpson, PhD, RN, CHES**

*School of Nursing, Purdue University, West Lafayette, IN, USA*

**Purpose:** Noncommunicable diseases (NCDs) remain a strong public health challenge, having impacts both in terms of human suffering and socioeconomic harm. NCDs are the leading cause of death globally, and account for greater than 40% of premature deaths in those under the age of 70, with the greatest impact occurring in low-to middle-income countries (World Health Organization [WHO], 2017). To address these issues, a culture of health must be created, targeting individuals where they live, work and play (Robert Wood Johnson Foundation [RWJF], n.d.). The purpose of this study was to evaluate the effectiveness of a community-based wellness program offered by a local grassroots coalition in a poor, underserved, rural, Midwest, largely Hispanic county. Monthly health screenings and education as well as referrals to local resources are provided at a variety of sites (manufacturing, low-income housing, service, and faith-based) to address the multiple determinants which underlie chronic disease development. Additionally, the coalition provides feedback to the sites concerning health needs of the population. An academic-community partnership between a nurse researcher and the coalition was created with the support of a Clinical and Translational Sciences grant to collect information concerning policy, systems and environmental changes (PSE) secondary to this program. Partnerships such as these support use of approaches which equitably involve community partners in research, helping to develop best practices which meet the needs of the population and benefit the community (Viswanathan et al., 2004; Minkler & Wallerstein, 2013). This approach can be particularly useful in rural settings; sharing power throughout the research process helps to equalize power dynamics, leading to improved community outcomes (Young-Lorion et al., 2013; Belone et al., 2016).

**Methods:** Qualitative and quantitative methods were used to collect data over a two-year time frame at all sites receiving coalition provided wellness programming. The Centers for Disease Control and Prevention (CDC) Community Health Evaluation and Group Assessment (CHANGE) tool was used to evaluate quantitative changes. This tool was completed by coalition staff at the start of the community-based wellness programming and repeated one year later. This assessment helps to identify and monitor important policy, systems, and environmental changes over time at a variety of community-based sites. Policy and environment scores are summarized for five sectors (physical activity, nutrition, tobacco use, chronic disease management, and leadership). Low scores for a module indicate that policy and environmental change strategies are not occurring at the site, while high scores indicate the site has begun to implement strategies or already has strong strategies in place (CDC, 2010). Qualitative data was collected by coalition staff each month at the sites during wellness programming and logged in an online document. Pre-and post CDC CHANGE module score summaries for all sectors and online logs of changes reported by the sites were reviewed for common themes by both the researcher and community partner.

**Results:** According to the CDC CHANGE re-assessments one year after program implementation, policy and environmental changes are occurring in all sectors (physical activity, nutrition, tobacco use, chronic disease management, and leadership), with scores reflecting increased implementation of strategies at the sites to support healthy lifestyles. Changes included reduced prices for healthy vending and cafeteria food items, offering biweekly exercise programs, implementing a diabetes prevention program at the local YMCA and offering free YMCA membership to those completing the diabetes program, establishing a tobacco-free workplace, creating worksite wellness teams, and increasing monetary support for employee health, including the supplies needed for the screenings (xxxx, Price, Archibald, & Smith, 2017).

**Conclusion:** This program is reaching vulnerable populations and creating PSE changes which support healthy policies across all sites and the community, thereby maximizing health outcomes and encouraging the community to enhance efforts to sustain and continue such changes. Long-term academic-community partnerships can support efforts to document these changes.

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**References:**

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**Abstract Summary:**

Formalized wellness efforts by community-based coalitions can provide support for policy, systems and environmental changes which support healthy lifestyles across a variety of community settings. The impact goes beyond the settings to the community as a whole, emphasizing the impact of such changes on health outcomes.

**Content Outline:**

**Introduction:**

Overview of Academic-Community Partnership approaches to community-engaged research  
Description of the community-based coalition wellness program

**Methodology:**

Qualitative and quantitative approaches to data collection  
Description of CDC CHANGE as a tool to evaluate Policy, Systems and Environment Changes at wellness program community sites

**Outcomes:**

Discussion of changes in sector scores (physical activity, nutrition, tobacco use, chronic disease management, and leadership) for Policy and Environment at community wellness programming sites  
Description of changes implemented across sites

**Conclusions:**

Overall community impact  
Implications for practice and community-based wellness

First Primary Presenting Author

***Primary Presenting Author***

Vicki L. Simpson, PhD, RN, CHES  
Purdue University  
School of Nursing  
Assistant Professor  
West Lafayette IN  
USA

**Professional Experience:** 2016-present Assistant Professor, Purdue University School of Nursing 2007-2016 Director of Undergraduate Education, Clinical Assistant Professor, Purdue University School of Nursing, West Lafayette, IN 1983-2007 Community Coordinator, Nursing Faculty, St. Elizabeth School of Nursing, Lafayette, IN 1981-1983 Visiting Nurse, Visiting Nurse Home Health Services, Lafayette, IN 1979-1981 Psychiatric Charge Nurse, Wabash Valley Mental Health Center, West Lafayette, IN Responsible for curriculum design, support and evaluation for the past 15 to 20 years in BSN nursing curriculums. Author/Co-Author of 7 peer-reviewed publications related to public health nursing education, nursing education and worksite health. Author/Co-Author of 15 presentations/poster sessions at state, national and international conferences. Certified as a Community Health Education Specialist.

**Author Summary:** I am an Assistant Professor at Purdue University School of Nursing where I teach public health nursing and population health. My research focuses on health promotion and disease prevention at both the individual and population level across a variety of settings (local to global). Using community-engaged research approaches. I study determinants and factors which impact the ability to be healthy; using this data to inform development of strategies to support healthy lifestyle behaviors.