

CONSULTATION WORKSHOP

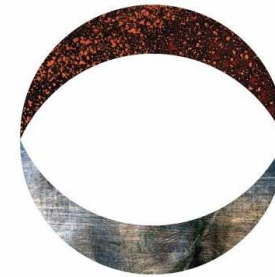


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AIM OF THE WORKSHOP

- Present an outline the current structure of the PLA Toolkit
- Through a plenary Q&As session and roundtable discussions, seek initial feedback from you on
 - the perceived usefulness of such a Toolkit;
 - the use of the PLA as a framework for the Toolkit; and
 - the Toolkit as it is currently structured.

OUTLINE OF PRESENTATION

1. BACKGROUND
2. PROGRAMME LOGIC APPROACH (PLA)
3. THE PLA TOOLKIT
4. APPLICATION TO THE DFfA INTERVENTION

BACKGROUND

BACKGROUND

Decent Food for All (DFfA)

ADHAZ - Programme delivery

Armagh and Dungannon Health Action Zone

Intervention period – initially 3 years, 1 year extension

IPH – Research and evaluation

Used the PLA to design the evaluation

FSPB & FSA – Core funding

INIsPHO

Focuses on the practical issues associated with generating, sharing and using health intelligence

WHY A TOOLKIT?

Agreed expectation to:

- Be accountable
- Incorporate evidence
- Contribute experience

Lack of practical tools and resources on the island

Complex problems require complex solutions and a systematic framework can guide us through these complexities.

Programme Logic Approach (PLA) is such a framework when supported by appropriate tools and resources, and illustrated by Irish examples.

PROGRAMME LOGIC APPROACH (PLA)

PROGRAMME LOGIC APPROACH

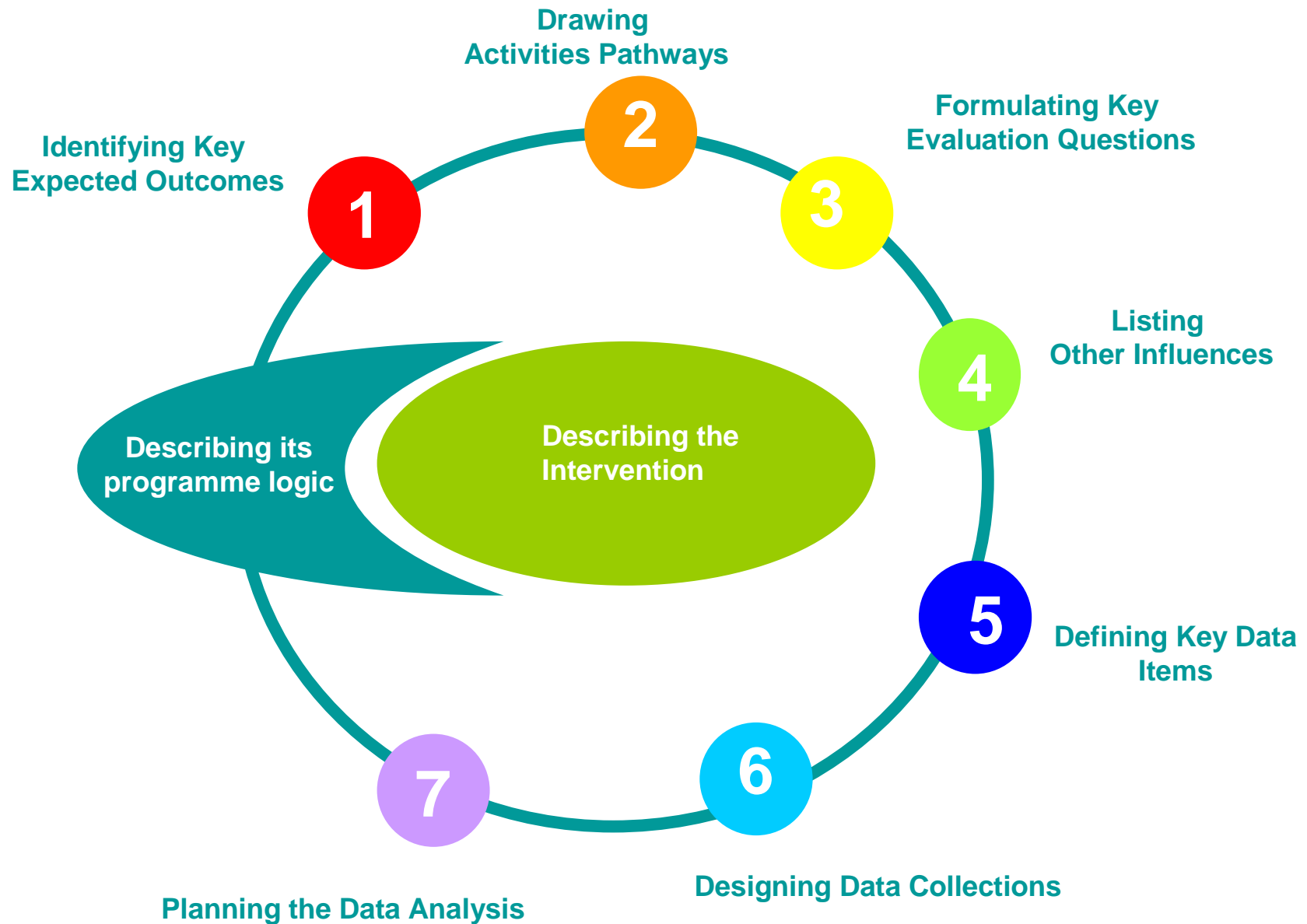
Methodology for developing, evaluating and monitoring complex interventions.

Based on “Programme Logic” that focus on the components of an intervention and how they are assumed to achieve the intervention’s objectives

Well established methodology: CDC and CVD, etc;
Kellogg Foundation, etc

This version adopted for community-based interventions

STEPS OF THE PLA



FEATURES & BENEFITS OF THE PLA

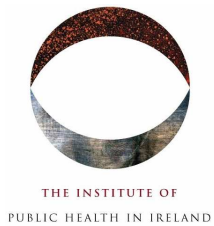
Features

- Focuses on interventions and their programme logics
- Applied in a flexible, iterative manner
- Involves collaborative effort between intervention and evaluation personnel.
- Applies to broad range of complex interventions

Benefits

- Evaluations focus on how interventions work and (if they don't work) what components that need to be strengthened
- Promotes realistic understanding of strengths & limitations of evaluations
Incorporates traditional knowledge base into intervention design
- Incorporates appropriate methodology into evaluation plans
- Captures practitioner experiences and incorporate them into knowledge base
- New insights can be incorporated into an improved intervention design
- Emerging issues can be carried forward to later steps for more valid evaluations

PLA TOOLKIT



AIMS OF THE PLA TOOLKIT

Target audience

Personnel who are involved in the design, delivery, evaluation and monitoring of complex interventions.

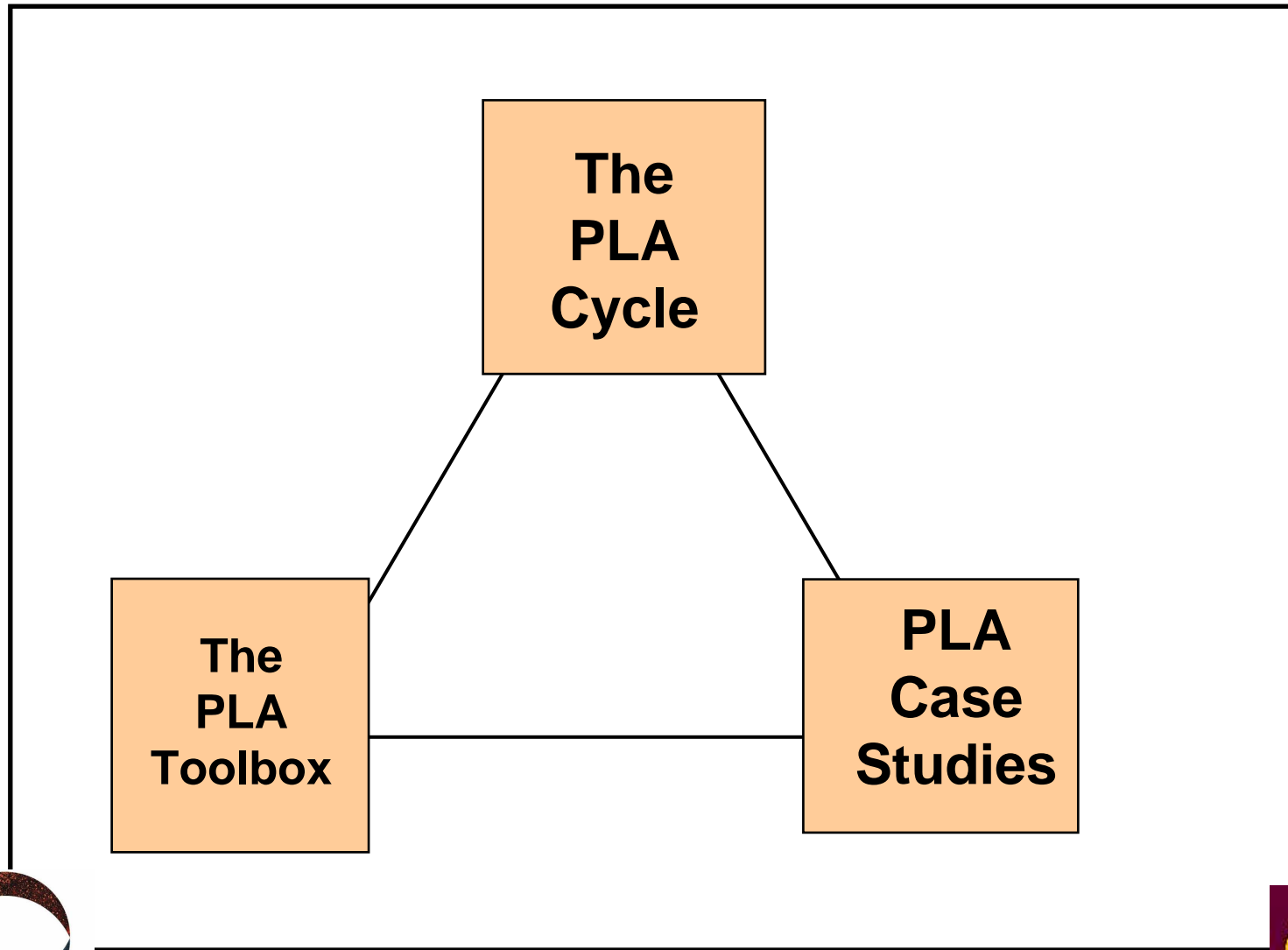
Aim

To provide the target audience with practical tools and resources to carry out this work.

This version

Focuses on community-based interventions. Later versions could include applications to service delivery and policy interventions

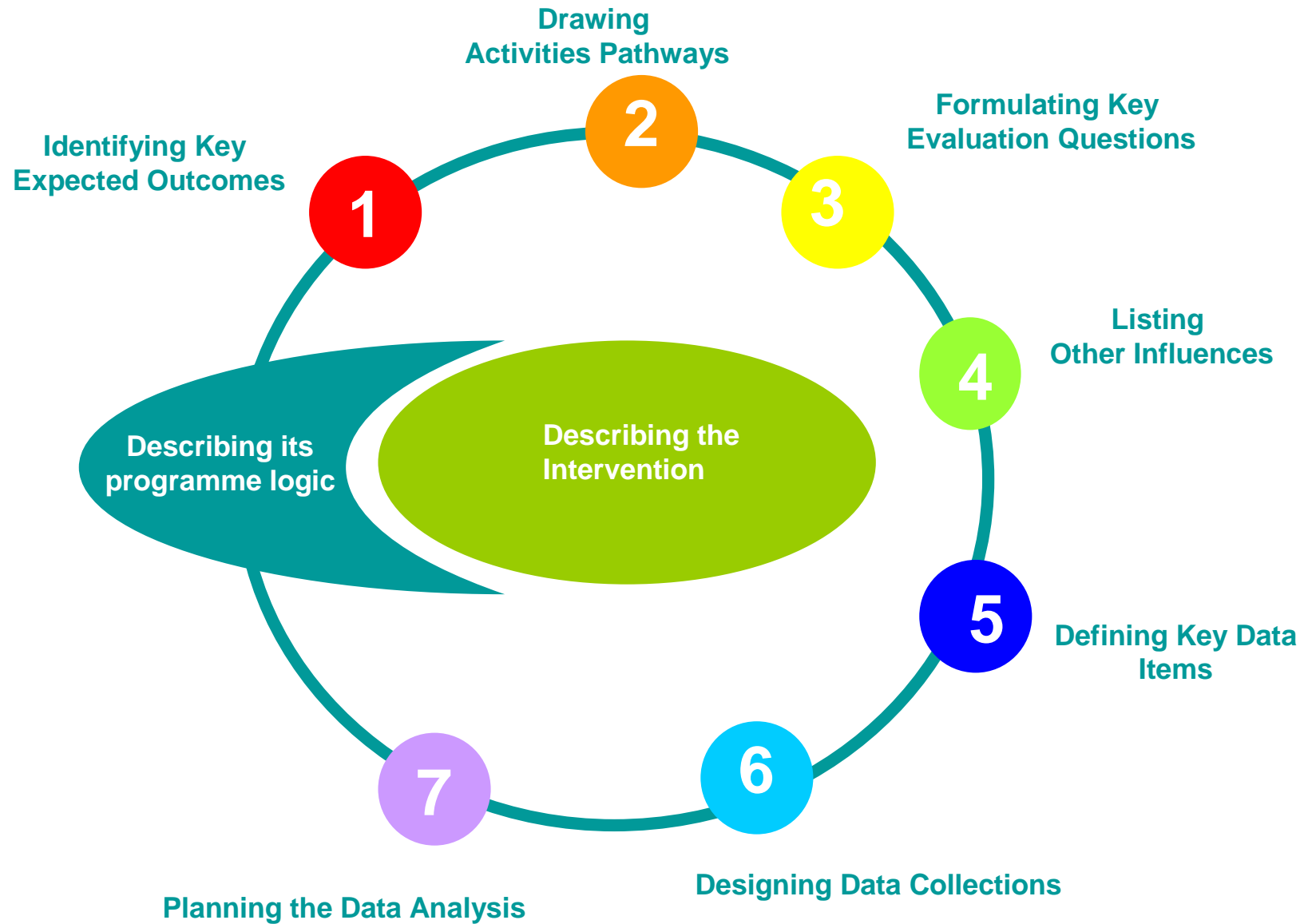
ELEMENTS OF THE PLA TOOLKIT



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THE PLA CYCLE



THE PLA TOOLBOX

Tools and resources to help the team ...

- Describe the intervention and its programme logic
- Develop the evaluation and monitoring
- Record the outputs of the PLA Cycle
- Facilitate of the team working and decision making

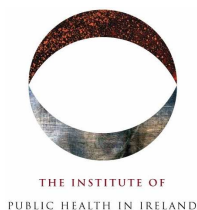
PLA CASE STUDIES

“Decent Food for All (DFfA)” community-based food poverty intervention, conducted in the Armagh and Dungannon Health Action Zone in Northern Ireland.

Used to

- Anecdotally illustrate the steps of the PLA
- Provide examples of completed PLA outputs

APPLICATION TO THE DECENT FOOD FOR ALL (DfFA) INTERVENTION



DFfA INTERVENTION & RELATED ACTIVITIES

Programmes

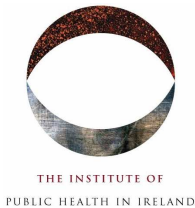
- Cook It!
- Balanced Beginnings
- My Body
- Looking Good Feeling Better

Workshops

- Healthy Eating / Fruit Tasting
- Food Safety
- Oral Health
- Food Labelling
- Food Budgeting

Other related programmes

- Fresh Fruit in Schools (DHSSPS)
- Community Food Gardens (F&A LSP)
- Community Food Co-op (D LSP)
- Breakfast Club (Big Lottery Fund)



KEY EXPECTED OUTCOMES - DFfA

Ten KEOs into four domains:

- Local Regeneration (2)
- Individual, Household and Community Change (5)
- Research and Knowledge (1)
- Policy Change (2)

Two over-arching themes:

- “Reduction in Inequalities”
- “Settings (Community / Home / School / Workplace)”

Expected Outcome 1.1 Improved accessibility to affordable safe and healthy food

Key Expected Outcome 1.2 Stronger local food production and supply economies with a greater emphasis on affordable safe and health food

Key Expected Outcome 2.1 Improved awareness/knowledge

Key Expected Outcome 2.2 Greater demand for affordable safe and healthy food.

Key Expected Outcome 2.3 Improved health behaviours

Key Expected Outcome 2.4 Greater social inclusion

Key Expected Outcome 2.5 Greater individual development

Key Expected Outcome 3.1 Enhanced knowledge base

Key Expected Outcome 4.1 Stronger food-related policy and strategy with a greater emphasis on (affordable) safe and healthy food

Key Expected Outcome 4.2 Stronger food and well-being networks for sharing, learning and support

KEY EVALUATION QUESTIONS - DFfA

Was the intervention delivered as planned?

Did each component of the intervention achieve its objectives?

Was any change observed at population level?

Could this population change be attributed to the intervention?

It is repeatable in other circumstances?

..... **Resources & activities monitoring**

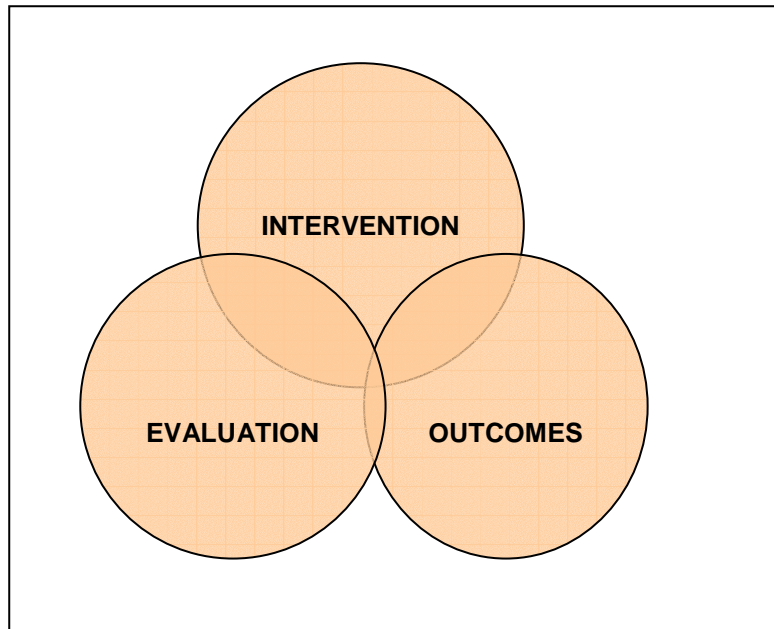
..... **Participant evaluations**

..... **Pre-test and post-test data collections (community surveys & food basket studies)**

..... **Use of comparison area and eliminate alternative explanations by adjusting for influences**

..... **Comparisons with other situations using external data sources**

OTHER INFLUENCES - DFfA



- Resources, staffing
- Associated food programme not originally part of DFfA
- External activities (eg *Safefood's* mass media campaigns)
- Changes in local food distribution (eg eating places, supermarkets in rural areas)
- Rising obesity
- Seasonality
- Poor survey response rates

DATA COLLECTIONS - DFfA

Resource and activities monitoring

Participant evaluations

Community surveys:

- Before and after
- Intervention and comparison areas

Food basket study / mapping of availability and cost

- Before and after
- Intervention area only

‘Ethnographic’ study of the culture of food

Evaluation of networks

KEY EXPECTED OUTCOME 1.1 - DFfA

Improved accessibility to (affordable) safe and healthy food:

- *Financial Access (benefit/budget maximisation)*
- *Physical Access*

Involves availability and cost, as well as other practical issues (eg, transport plus other costs)

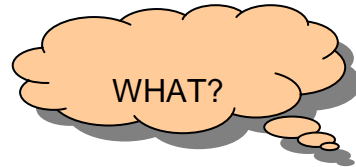
Also involves:

- Family composition and disposable income
- Social and cultural factors

Different data items needed to be collected in different ways:

- Food basket studies
- Ethnographic study
- Community surveys

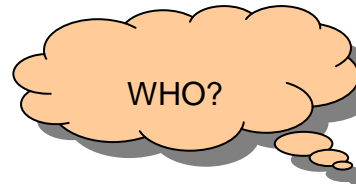
AVAILABILITY AND COST OF FOOD - DFfA



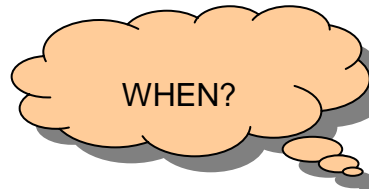
Availability and cost of food



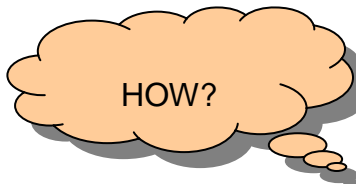
Intervention area



All shops in this area



Before and after the intervention



Classic food basket study

SOCIAL & CULTURAL FACTORS - DFfA

Aim



To explore the social & cultural issues associated with food purchasing, preparation and consumption

Method

Group interviews as purposeful conversations

Participants:

- 'Cook It' - a cooking course for young mothers
- The DFfA food co-op
- 'Balance of Good Health' information session
- ADHAZ staff





Food culture in rural Northern Ireland

Results from an exploratory ethnographic study undertaken in the 'Decent Food for All (DFfA)' study areas

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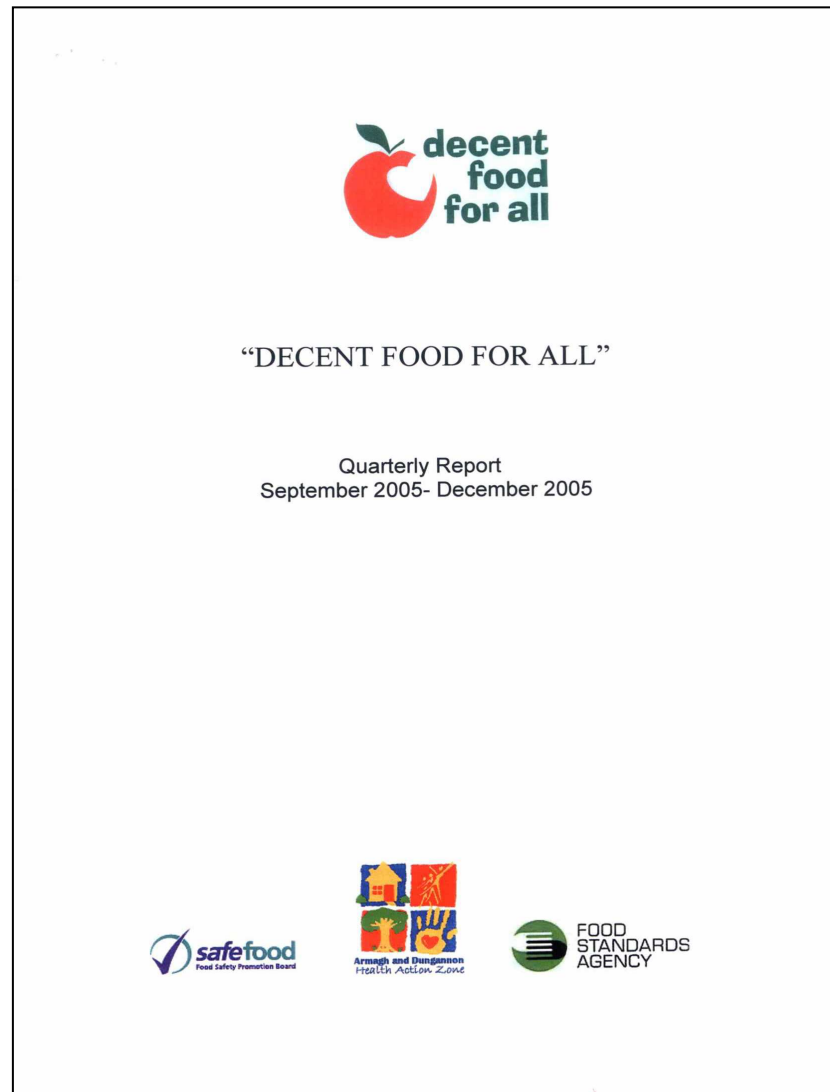
April 2007



RESOURCE & ACTIVITIES MONITORING - DFfA

Agreed template and database for internal activities

- Programme name
- Venue
- Date
- Number attending
- Target ward
- Gender
- Age
- Target group



QUESTIONS AND ANSWERS?

