

Using Data and Evaluation to Tell Your Story

Georgia Pitching Prevention Conference Callaway Gardens, Pine Mountain, GA August 1-3, 2016

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Substance Use in Georgia

A Mountain to Climb

Drug Use Trends in Georgia

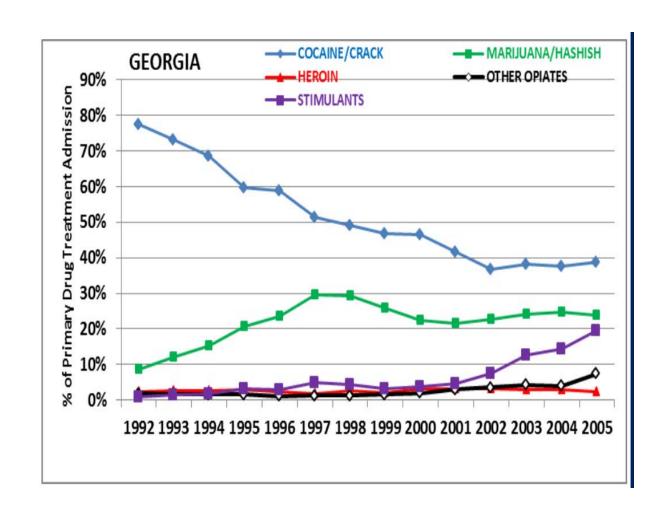
- The National Survey on Drug Use and Health (NSDUH) reports <u>7.32</u> percent of Georgia residents reported using illicit drugs in the past month.
- The national average was <u>8.82</u> percent.
- Additionally, 3.26 percent of Georgia residents reported using an illicit drug other than marijuana in the past month. (The national average was 3.6 percent.)

Drug-Induced Deaths in Georgia (2009)

- As a direct consequence of drug use,
 1,043 persons died in Georgia in 2009.
 This is compared to the number of persons in Georgia who died from motor vehicle accidents (1,356) and firearms (1,247) in the same year.
- Georgia drug-induced deaths (10.6 per 100,000 population) were lower than the national rate (12.8 per 100,000).

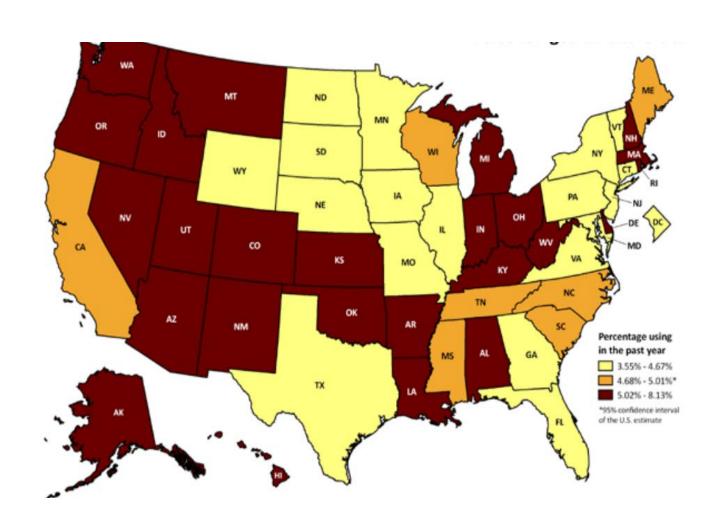
Substance Abuse Treatment Admissions Data

The graph on the right depicts substance abuse primary treatment admissions in Georgia from 1992 to 2005. Data has not been collected in Georgia since that time. The data show cocaine was the most commonly cited drug among primary drug treatment admissions in Georgia



Non-medical Use of Pain Relievers Data

The image on the right depicts the average past year prevalence of non-medical use of pain relievers for persons ages 12 and older in Georgia (2009).

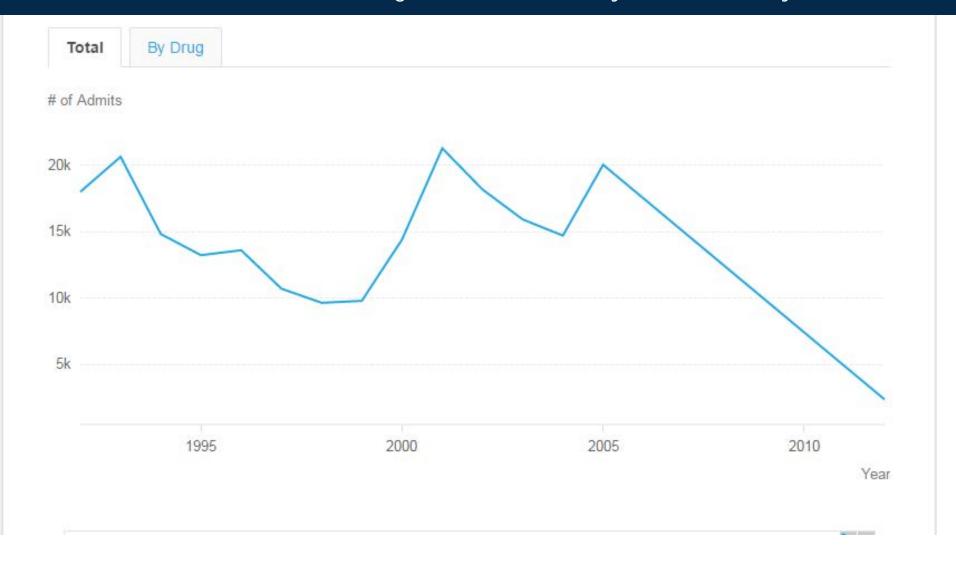


Rehabilitation Admission Data: Highest Admissions by Substance

In 2012, there were 44,560 users who checked into rehab in Georgia. With 0.46% of the total population receiving treatment for substance-abuse, Georgia had average rates of rehab admittances compared to other areas in the United States.

Substance	% of Admits
Alcohol	43.1%
Marijuana/Hashish	19.9%
Cocaine/Crack	10.8%
Other Opiates and Synthetics	6.9%
None	6.4%

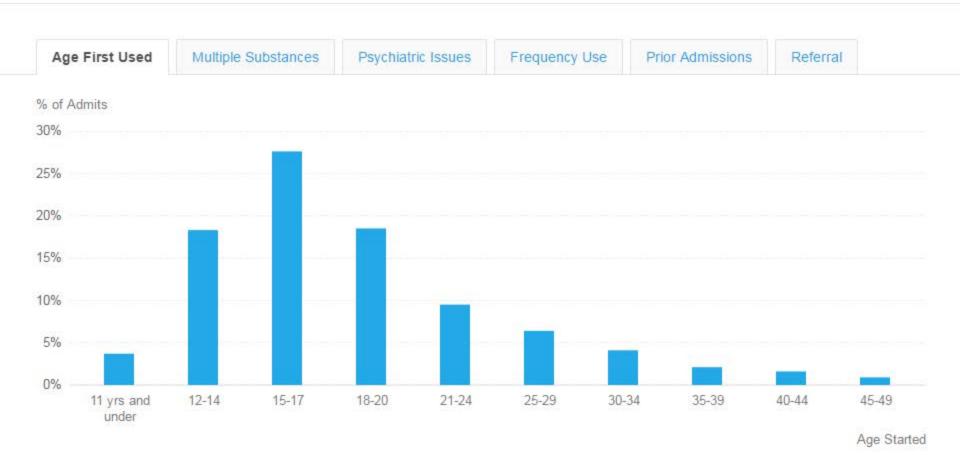
Rehabilitation Admission Data: Highest Admissions by Substance (By Years)



Rehabilitation Admission Data: Highest Admissions by Substance (By Age)

Usage Statistics

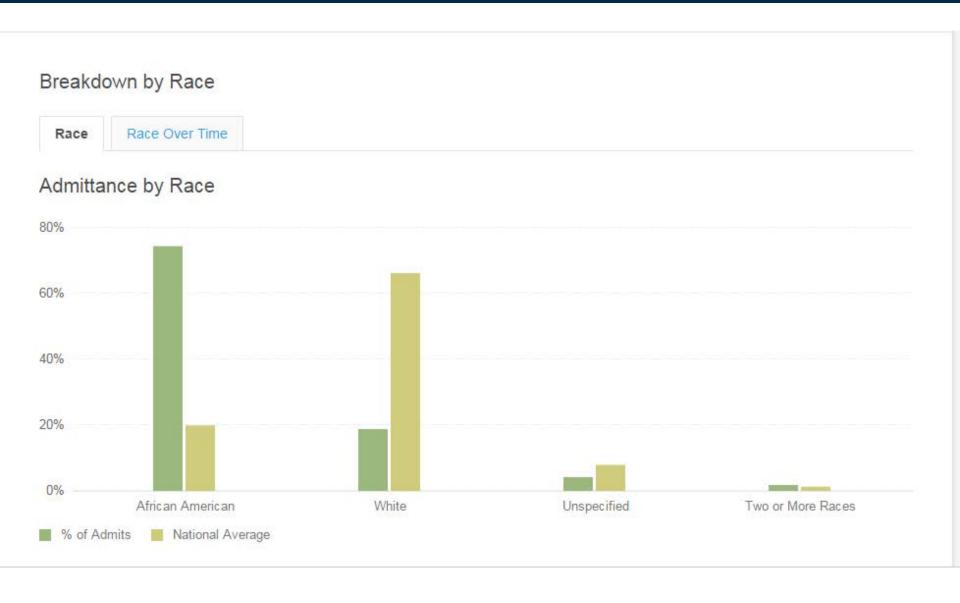




Most rehab admits from Georgia began using when they were years old, which is earlier than the average starting age for most other areas.

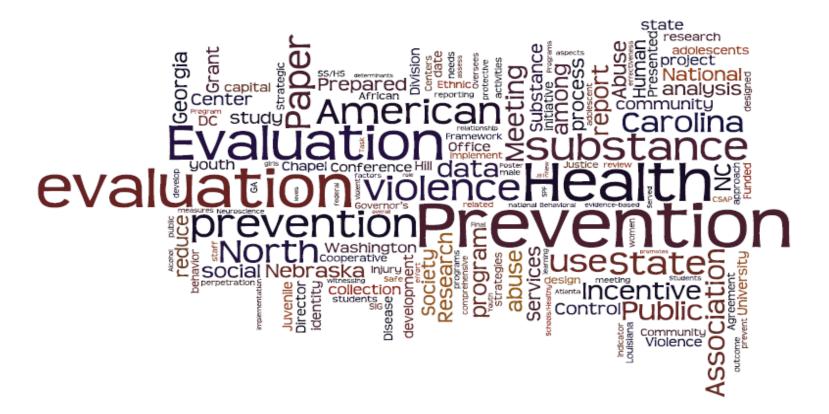
Abuse at younger ages can prove especially dangerous as drug interactions may impair or alter brain development.

Rehabilitation Admission Data: Highest Admissions by Substance (By Race)



What does this mean and what is Georgia's Story?

This is my story



And this is my work life



"My question is: Are we making an impact?"

Word Association-Evaluation

• When you think of the word evaluation, what one word comes to mind to describe your general feelings about how it is used????

• When you think of a "tipping point" what comes to mind???

We Must Describe the Program Before We Can Begin Monitoring and Evaluation

- Describing the program includes:
 - Identify what activities you will do based on the needs identified from the data
 - Clearly outline what the activities will accomplish immediately
 - Clearly outline the impact the activities will have in the longer term

Why do we evaluate what we do?

Accountability

 Accountability can be to any of a number of stakeholders (funder, program staff, youths, parents, community, etc.).

Program improvement

Evaluation helps us improve existing programs.

Knowledge development

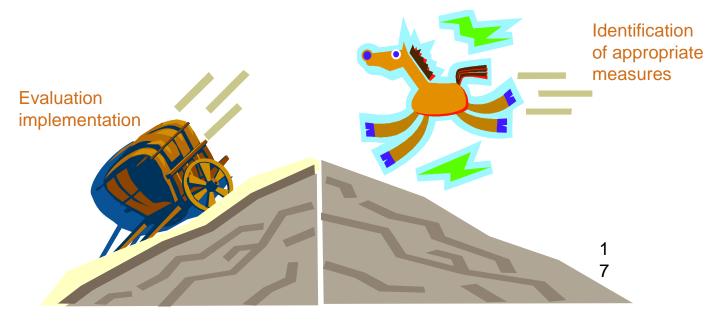
Evaluation helps us plan future programs.

Social justice

 Evaluation can tell us if the most vulnerable populations are receiving appropriate and effective services.

Good Evaluation Starts with

- Appropriate measures of key concepts and constructs
- Appropriate alignment of the unit of analysis and program impact



Evaluation Approaches

Traditional	Collaborative
Done to the program	Done with the program
Evaluator operates apart from the program	Evaluator operates in concert with the program
Evaluator decides	Evaluator advises
Evaluator retrieves information from program staff as needed to plan and carry out the study	Program staff are participants in planning and carrying out the study
Evaluator interacts relatively infrequently through the program director	Evaluator interacts regularly through the program staff and other stakeholders
	1 8

Introductions and Challenges

Small Group Exercise

Introductions, Challenges, and Key Questions

- Who are you?
- What has been the biggest challenge to telling that story?
- What has been your biggest success?
- Who do and have you told your story?

What story and to Whom?

Funders, Stakeholders, and Decision-Makers

Rankings: Raw Rates vs. Construct Scores

	Risk Construct	Indicator Rates	s/Percentages	Risk Construct	Indicator	Rates/Percentages
County	Juvenile Liquor and Drug Law Arrests	Juvenile Arrest Rate for Liquor Law Violations	Juvenile Arrest Rate for Narcotic Violations	Lack of Commitment to School	Dropout Rate	Percentage of Eligible Students Not Graduating High School
Bacon	130	101	147	135	127	132
Bibb	40	22	76	144	137	145
Camden	109	124	66	53	92	30
Chatham	25	17	45	120	130	101
Clarke	104	87	117	134	144	114
DeKalb	12	10	23	54	15	103
Dougherty	16	21	22	142	134	140
Floyd	13	20	14	36	20	59
Hall	22	22	31	98	109	82
Johnson	31	22	58	116	123	111
Lincoln	48	90	37	31	17	49
Lowndes	92	80	98	82	55	93
Muscogee	77	41	127	73	78	69
Telfaire	150	61	157	112	121	100
Whitfield	34	71	24	89	105	77

Comparison of 2006 vs. 2008 SIS Ranks

		2006		2008				
	Risk Construct	Indicator Rates	/Percentages	Risk Construct	Indicator Rates	s/Percentages		
County	Juvenile Liquor and Drug Law Arrests	Juvenile Arrest Juvenile Arrest Rate for Liquor Law Violations Violations		Juvenile Liquor and Drug Law Arrests	Juvenile Arrest Rate for Liquor Law Violations	Juvenile Arrest Rate for Narcotic Violations		
Bacon	147	135	148	130	101	147		
Bibb	46	27	74	40	22	76		
Camden	146	137	143	109	124	66		
Chatham	26	12	45	25	17	45		
Clarke	123	118	122	104	87	117		
DeKalb	12	3	19	12	10	23		
Dougherty	17	33	14	16	21	22		
Floyd	18	37	15	13	20	14		
Hall	14	12	17	22	22	31		
Johnson	7	4	13	31	22	58		
Lincoln	66	74	78	48	90	37		
Lowndes	101	103	105	92	80	98		
Muscogee	66	47	96	77	41	127		
Telfaire	113	87	131	150	61	157		
Whitfield	57	90	50	34	71	24		

Rates, Rankings & Actual

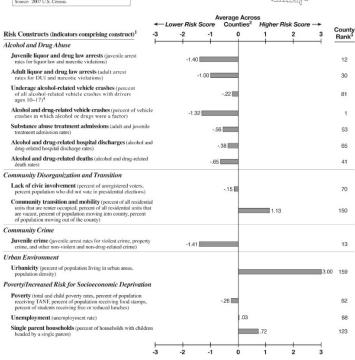
Prevention Needs Assessment Profile for **Dekalb County**

County Population Characteristics 2007 Total Population: 737,093 2007 Population Age 17 and Younger: 178,533 2007 Racial/Ethnic Composition: White 30.9% Other 5.4%

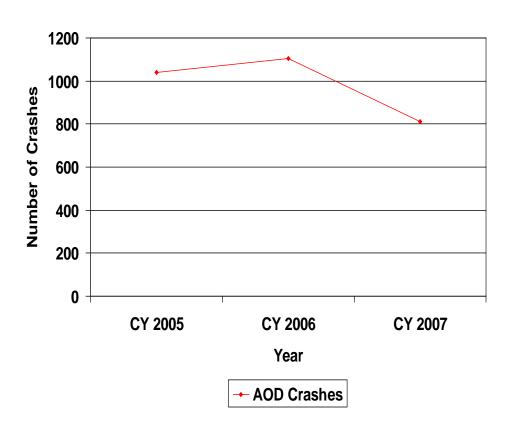
Black 53.6% Hispanic/Latino 10.1%







Crashes Involving Alcohol or Drugs



What is your question??? Rates vs. Actual Numbers

COUNTY	AOD-Related Crashes 2005	AOD-Related Crashes 2006	AOD-Related Crashes 2007	Total Crashes 2005	Total Crashes 2007	Total Crashes 2008	Total AOD- Related Crashes	Total Number Vehicle Crashes	Percentage
FULTON	1692	1647	1425	49602	49518	46006	4764	145126	3.28%
GWINNETT	1281	1447	1260	30080	31019	29921	3988	91020	4.38%
COBB	1326	1277	1256	27138	26495	26121	3859	79754	4.84%
DEKALB	1040	1104	811	34004	32626	33303	2955	99933	2.96%
СНАТНАМ	772	760	693	12952	13629	13014	2225	39595	5.62%
RICHMOND	634	618	622	10296	9667	9114	1874	29077	6.44%
CLAYTON	576	514	443	11927	11597	10223	1533	33747	4.54%
MUSCOGE E	463	481	505	8659	8174	8347	1449	25180	5.75%
HALL	474	489	449	6387	6172	6154	1412	18713	7.55%
CLARKE	388	424	341	5362	5111	4826	1153	15299	7.54%

WHAT IS THE QUESTION?



What is the question?



 What are the top 10 counties with the highest number of alcohol and drugrelated crashes?

What is your question??? Rates vs. Actual Numbers

COUNTY	AOD-Related Crashes 2005	AOD-Related Crashes 2006	AOD-Related Crashes 2007	Total Crashes 2005	Total Crashes 2007	Total Crashes 2008	Total AOD- Related Crashes	Total Number Vehicle Crashes	Percentage
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What story do you want to tell??? Rates vs. Actual Numbers

COUNTY	AOD-Related Crashes 2005	AOD-Related Crashes 2006	AOD-Related Crashes 2007	Total Crashes 2005	Total Crashes 2007	Total Crashes 2008	Total AOD- Related Crashes	Total Number Vehicle Crashes	Percentage
ECHOLS	30	26	18	50	43	46	74	139	53.24%
WHEELER	20	17	13	62	53	42	50	157	31.85%
ATKINSON	36	23	27	81	112	88	86	281	30.60%
LONG	30	37	18	110	142	125	85	377	22.55%
WILCOX	12	24	16	95	72	79	52	246	21.14%
QUITMAN	4	8	6	35	26	26	18	87	20.69%
LANIER	22	20	20	81	120	108	62	309	20.06%
JENKINS	15	14	20	95	45	107	49	247	19.84%
WEBSTER	8	6	9	46	37	36	23	119	19.33%

WHAT IS THE STORY???



WHAT IS THE STORY???



- WHAT COUNTIES
HAVE THE HIGHEST
PERCENTAGE OF
ALCOHOL AND DRUGRELATED CRASHES?

What story do you want to tell??? Rates vs. Actual Numbers

COUNTY							Total AOD- Related Crashes	Total Number Vehicle Crashes	Percentage
ECHOLS							74	139	53.24%
WHEELER							50	157	31.85%
ATKINSON							86	281	30.60%
LONG							85	377	22.55%
WILCOX							52	246	21.14%
QUITMAN							18	87	20.69%
LANIER							62	309	20.06%
JENKINS							49	247	19.84%
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Conclusions & Questions

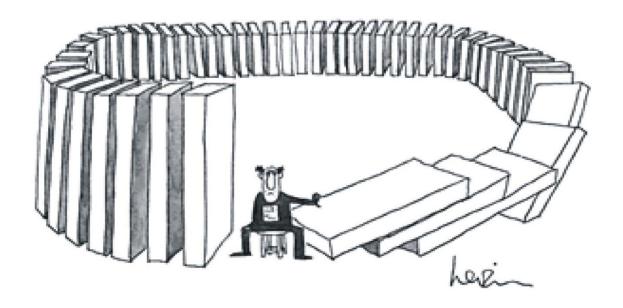
- We need to be very thoughtful about how we use data
- We must know the question you want to answer or
- We must know the story we want to tell
- Data is your FRIEND!!!!!

What story do you want to tell and to whom?

- Provide one (1) example of what a funder needs to know.
- Provide one (1) example of what stakeholders need to know.
- Provide one (1) example of what decision-maker need to know.

Developing a Feedback Loop

Developing a Feedback Loop



No problem, I created a feedback loop.

How can a stable organization whose goal is to maintain itself and endure be able to change, evolve, and use evaluation to it's advantage?

What is a Feedback Loop?

A pathway whereby information about the results of a program is sent back to the input of the system in the form of meaningful data.







Why Bother with Feedback?

- Facilitate and accelerate development or progress
- Make shifts to stabilize and/or improve the system
- Identify points along the system where additional information is required

Strategies for Creating a Feedback Loop

- Reinforce the importance of a learning organization
- Use your logic model as a starting point
- Recognize that evaluation questions provide a "domain" of feedback
- Find or create practical information outlets
- Prioritize information sent back into the system
- Formalize mechanisms for moving feedback through the system
- Commit to the feedback loop

Utilization of Evaluation Results

Direct Utilization

 documented and specific use of evaluation findings by decision makers and other stakeholders

Conceptual Utilization

influences thinking about issues in a general way

Persuasive Utilization

supports or refutes political positions

General Evaluation Reporting Guidelines

- Think of your evaluation within the context of the Strategic Prevention Framework:
 - Needs identified
 - Strategic Plan to address these needs
 - Implementation Plan/Activities to meet the goals and objectives set forth in your Strategic Plan

Variables That Affect Utilization

- Understand how decision makers think
 - What do they want to learn from the conduct of the evaluation?
 - Is the design tailored to provide this information?
- Timeliness
- Respect all stakeholders
 - How are all stakeholders engaged in the evaluation enterprise; To what end?
- Plan for use and dissemination up front
 - What do you want others to learn from the evaluation?
- Evaluate use

Organizational Factors That Affect Utilization (Blending Art & Science)

- Commitment
- Information Needs
- Competing Information
- Personal Characteristics
- Decision-Making Climate
- Political Climate
- Financial Climate



The feedback loop allows us to *reframe* program imperfections and related processes.



Where can I find good data?

BTW, we do not have a lot of money!!!!!!

Showing Process and Outcome Data

- Process-Related Data
 - What did you do?
 - Activities and Outputs

- Outcomes-Related Data
 - ExistingData/Archival/Trends
 - Primary

Data Sources

- Primary—new data collected to evaluate the effectiveness of your intervention
- Secondary—data collected for a different purpose
- Archival data that are records based
 - Can be primary (e.g., review attendance records at targeted schools to calculate drop-out rates) or secondary (e.g., draw school drop-out rates from a school district annual report)



Advantages of Archival/Secondary Data

- Easier and less time-consuming than collecting all the data yourself.
- Possibly already processed by people with more statistical expertise than you, making it easier to use in analysis.
- Possibly already organized and prepared (transcription of interviews, entry of numbers into a spreadsheet or specific software, etc.), even with raw data, again saving time and resources.
- May have identified patterns or relationships you would not have looked for.

Advantages of Archival/Secondary Data

- May have eliminated the need to correct for such problems as lack of inter-rater reliability or observer bias.
- Open to the possibility of looking at the effects of your work over time.
- Helpful for small organizations with limited resources to conduct thorough evaluation studies.

Advantages of Archival/Secondary Data

- Provides standardized data across targeted unit of analysis (e.g., geography, population).
- Typically archived for numerous years to allow for multiple time points within and outside of the initiative period (allowing for different types of analysis).
- Effective means of tapping into identified mediators.
 - Mediators are the knowledge, attitudes, beliefs, and skills that programs directly target in order to effect change on sexual behavior (e.g., knowledge about contraceptive methods, social norms about sexual behavior, sexual communication skills).

2

Getting from What and Where to Why

- State-level data generally describe the condition or status of outcomes.
- However, state-level data alone do not tell us why the condition or status changes over time.



Adapted from McCaston (2005)

Unit of Analysis and Geographic Level

- Data relevant to evaluation models may come from different levels – school, individual, state.
- For example, change in norms cannot be assessed at the individual level, but may be estimated at the school level.
 - Schools can be assigned to App or non-APP location
 - Using multilevel modeling, with students nested within school, can estimate change in norms from Time 1 to Time 2 at the school level.
 - Intervention effect would be any differences in change over time attributable to the timeby-group interaction
 - Norms, or the change in norms, can then be related to substance use rates at the county level.

Data Sources



- What sources of data do you use?
- What sources of data would you like to use?

A Picture is worth....

Data Visualization

Resources and Ideas for Tobacco Work

Arizona Department of Health Services Bureau of Tobacco and Chronic Disease

Fact Sheet

COUNTY	ADULT SMOKING	YOUTH	YOUTH CHEWING TOBACCO
	Behavior Risk Factor Surveillance System (BRFSS) 2011	Arizona Youth Survey (AYS) 2010	
National %	21.2%	18.1%	7.7%
Arizona %	19.2%	14.7%	5.1%
Apache	23.5%	19.4%	12.9%
Cochise	22.9%	17.7%	7.1%
Coconino	21.8%	17.8%	9.1%
Gila	23.0%	24.6%	9.4%
Graham	20.8%	19.7%	9.2%
Greenlee	17.8%	24.6%	19.2%
La Paz	38.1%	11.6%	6.1%
Maricopa	17.3%	13.2%	4.2%
Mohave	24.3%	15.0%	5.1%
Navajo	19.7%	17.0%	8.8%
Pima	20.2%	20.1%	5.2%
Pinal	20.6%	17.0%	5.7%
Santa Cruz	26.8%	22.6%	4.7%
Yavapai	18.2%	16.3%	8.0%
Yuma	18.1%	12.5%	3.5%

Costs to Arizona¹

- Annual Smoking Caused Health Costs in AZ \$1.3 billion
- Per Day health care costs associated with smoking is approximately \$3.6 million

Arizona Adults²

- There are over a million adult smokers in Arizona.
- More than half of adult smokers tried to quit within the past year.
- Currently, around 2% of adult men and 0.5% of adult women use smokeless tobacco.

Arizona Vouths³

- Student smoking steadily increases with age.
- Among current Arizona youths that have tried smoking, the average age of first use was 12.

Harmful Effects⁴

- Tobacco is the leading preventable cause of death.
- Cigarette smoking is responsible for specific cancers: lung, oral cavity, pharynx (throat),
- esopnagus and biadder.

 Cigarette smoking causes an estimated 1 out of every 5 deaths each year.

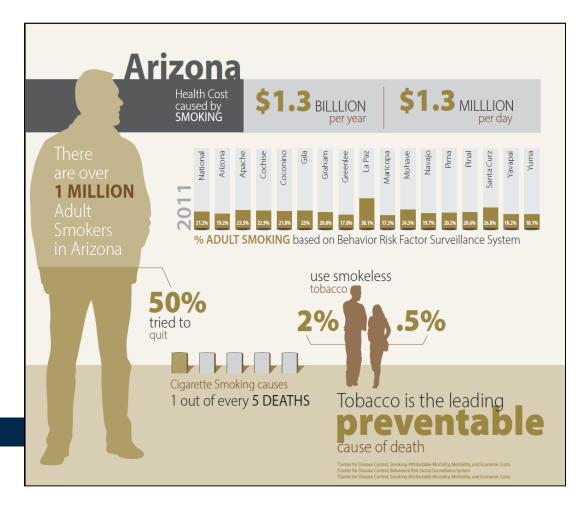
¹Center for Disease Control, Smoking-Attributable Mortality, Morbidity, and Economic Costs

Center for Disease Control, Behavioral Risk Factor Surveillance System

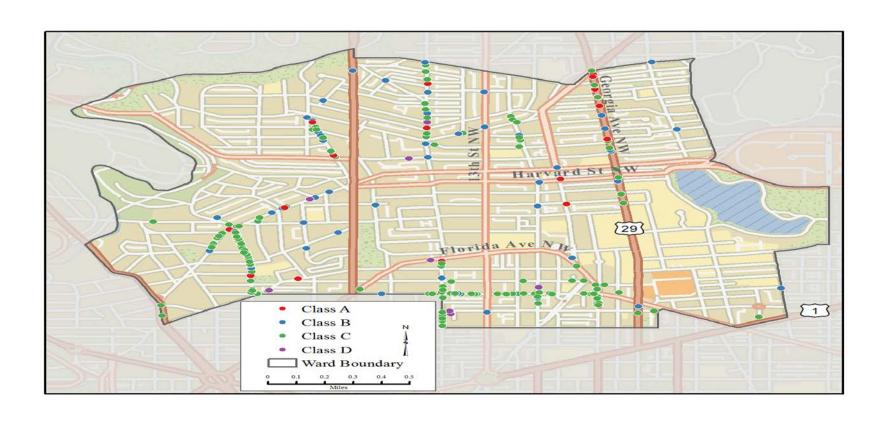
³Arizona Youth Survey 2010

⁴Center for Disease Control, Smoking-Attributable Mortality, Morbidity, and Economic Costs

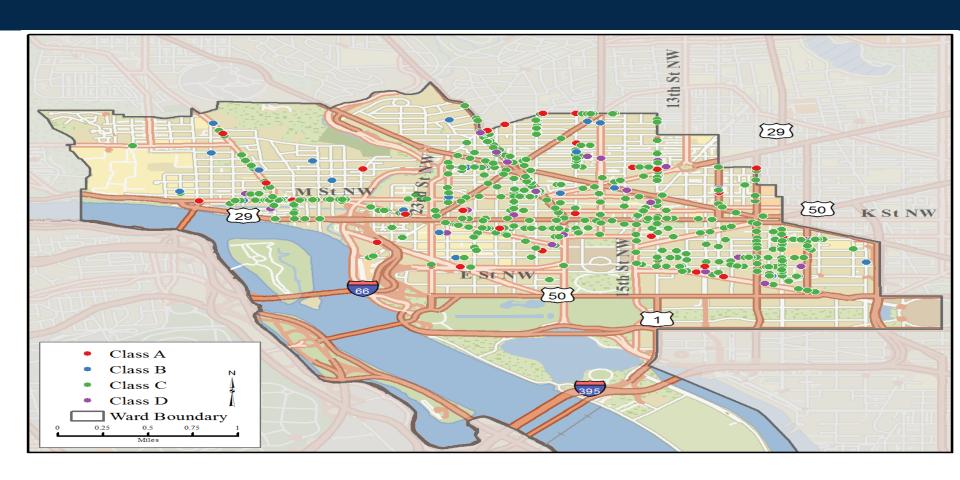
Resources and Ideas for Tobacco Work



Fact Sheets: Locations of Licensed Alcohol Retailers by License Class in Ward 1 during 2011



Locations of Licensed Alcohol Retailers by License Class in Ward 2 during 2011



Possible Community Change Components

DCPC Monthly Report

- # of CPNs
- · # of community meetings being held
- # of community events
- # of drug-free events
- # of substance use town hall meetings
- # of youth forums (youth-led)
- # of policy-related presentations to Ward Council members
- # of neighborhood clean-up events
- # of efforts to restrict the sale of alcohol
- # of substance abuse related trainings provided

PFS Coor. Monthly Report

- # of CPNs
- # of community meetings being held
- # of community events
- # of drug-free events
- # of substance abuse related trainings provided

CPN Monthly Report

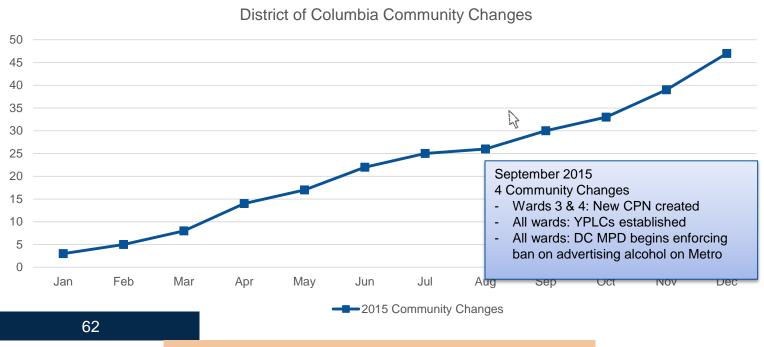
- # of CPN action plans
- # of new evidence-based programs or practices
- # of new environmental strategies
- # of efforts to restrict the sale of alcohol
- # of neighborhood clean-up events

Data from other sources

- # of substance use prevention policy changes voted on or passed by Ward Council
- # of substance use media campaigns
- # of district- or ward-level substance use initiatives begun and completed
- # of other drug-free events
- # of new community services available
- # of changes to police/enforcement policy
- # of new grants or funding mechanisms for prevention

Example: Community Changes Graph

Clicking on points on the Community Changes Graph displays details about Community Changes for that month.



Eventually, multi-year graphs can be generated.

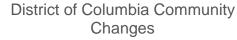
Example: Community Changes Dashboard

Wards 1 & 2 Community Changes



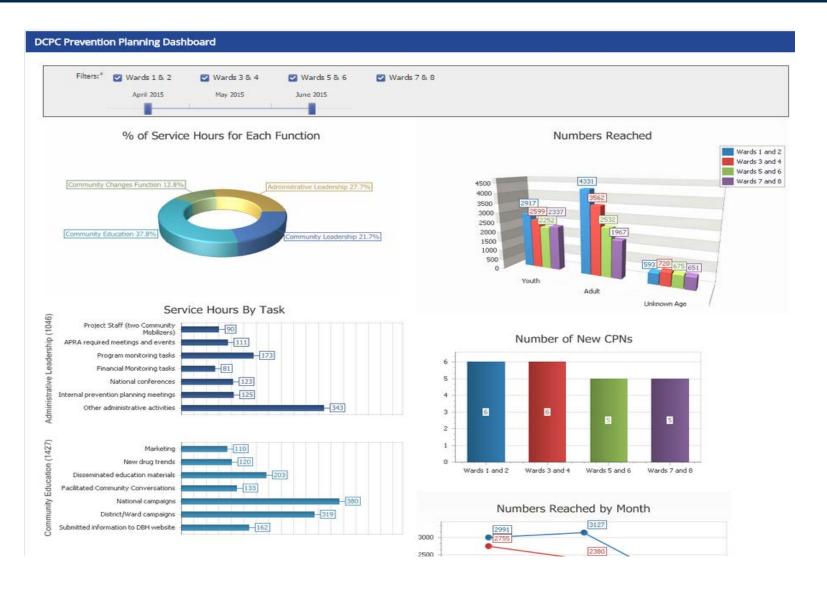
Wards 5 & 6 Community Changes



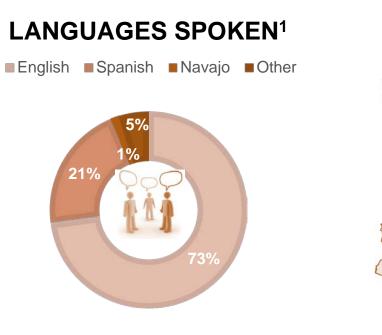




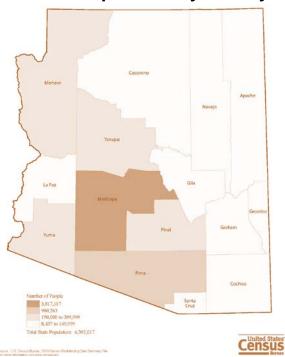
Example: Prevention Planning Dashboard



Special Populations in Arizona

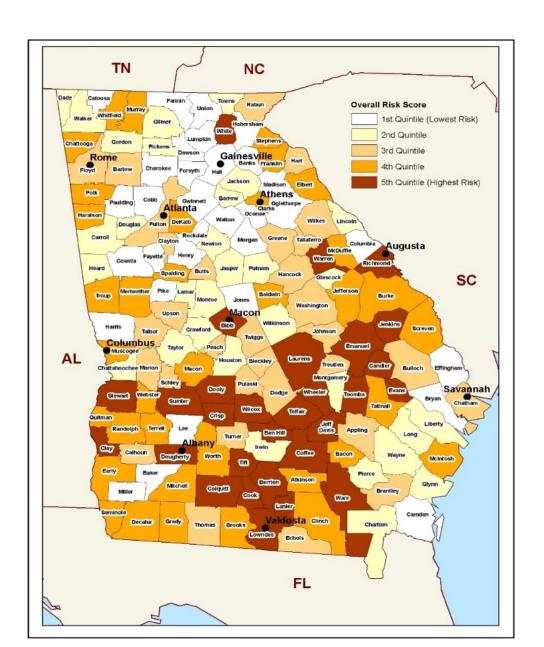


AZ Population by County

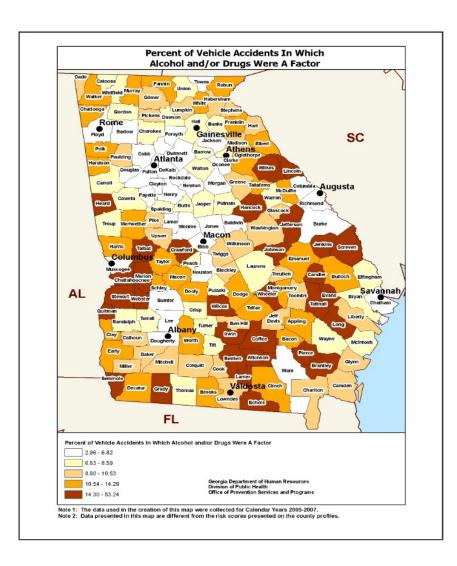


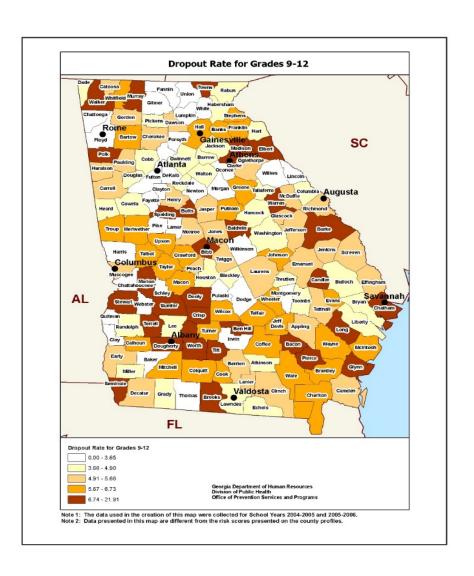
¹ Source: http://www.mla.org/cgi-shl/docstudio/docs.pl?map_data_results

Map of Overall Risk Rank

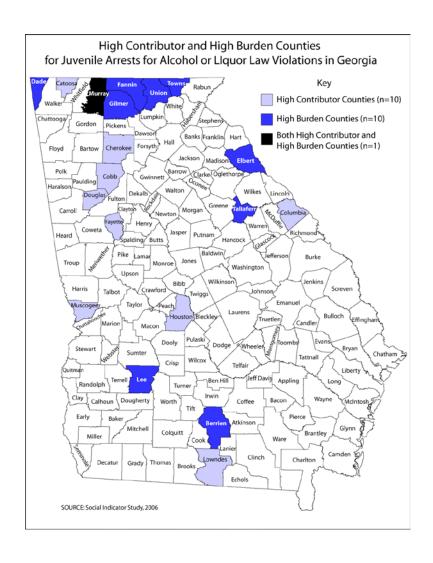


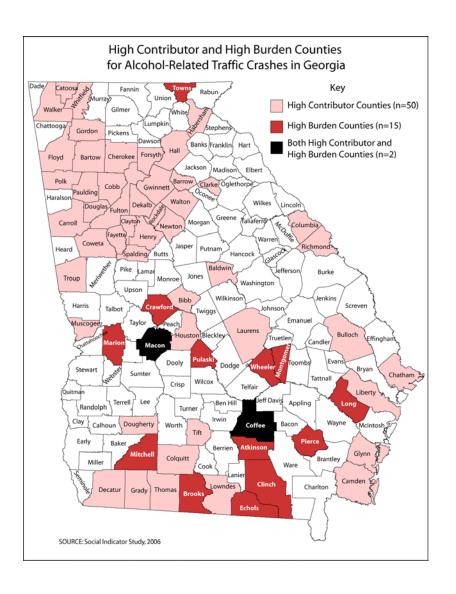
GIS Maps of Raw Data



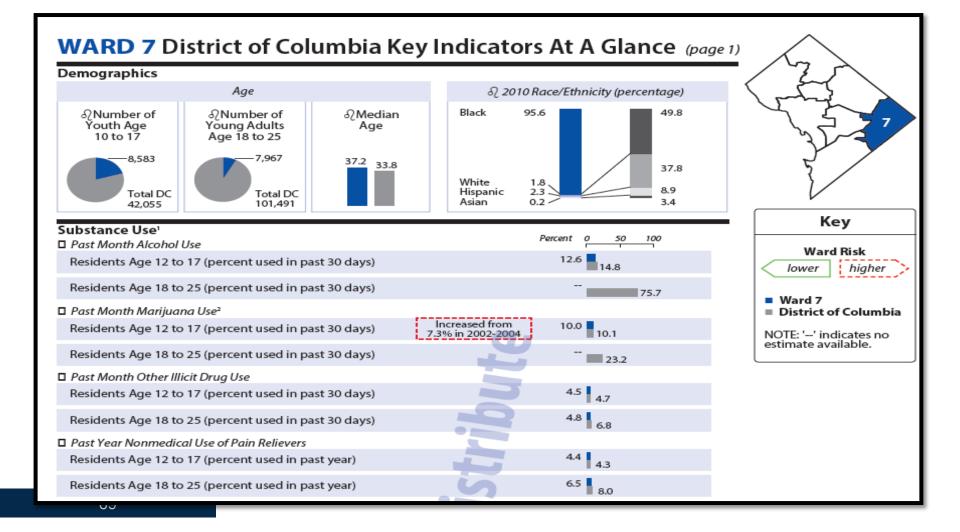


Potential Population Pool of SPF SIG Sub-recipients

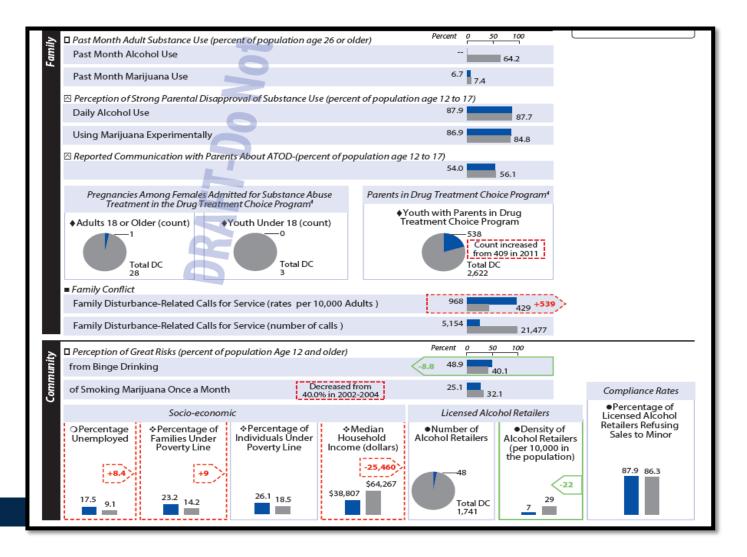




Epidemiological Profiles



Epidemiological Profiles





Playing with Real Data

How can you pull it all together????

Pulling it all Together

- What do we need to ask?
- Who do we need to ask?
- How do we need ask?
- When do we need ask?

Some Practical Tips About Getting the Word Out

- Develop a reporting strategy along with the evaluation design
- Determine the "best way" to communicate about evaluation findings to various audiences
- Plan for and allocate time, human and financial resources to effectively communicate evaluation findings
- Revisit the reporting strategy periodically and make necessary changes

Practical Tips on Getting The Word Out

- Determine the Needs, Purposes and probable audiences for your Evaluation Report ... (your key stakeholders and decision makers)
- Develop a report outline (based on Guidelines)
- Determine which reporting formats will be used (e.g. written hard copy, electronic copy, executive summaries, participant reports, fact sheets, etc.)

Practical Tips on Getting The Word Out

- Post the report online including authors of the report by section, stakeholders/audience, & dissemination plan
- Revise the report as necessary to incorporate key stakeholder input
- Draft press releases and PSAs & contact the media (print, radio, TV)
- Post on social marketing sites

A Way to Think About Dissemination: Key Factors

Key Factors to Consider

Factor	Question for Each Factor				
Audiences	Who will be receiving this? What are their special needs?				
Rationale	Why are you doing this? What do people hope to accomplish?				
Content	What type of information will it contain?				
Purpose/Use	Why is this necessary? What could this be used for?				
Timing	When will this be completed? When in the cycle will it be distributed?				
Development	When in the cycle will be distributed? What else needs to be done before this gets done?				
Special Issues/Constraints	What else is unique about this; must it be accompanied by other information? Are there certain requirements for accessing or understanding it?				
Distribution	In what ways will it be distributed? Will different groups, people receive it differently?				

Create a Plan for Each Component of the Evaluation Findings

Developing a Dissemination Plan

Factor	Full Report	Executive Summary	Powerpoint	Fact Sheet	Online Stat Sheet	Online Analytical Processing Cube
Audiences						
Rationale						
Content						
Purpose/ Use						
Timing						
Development						
Special issues/ constraints						
Distribution						
Special Concerns						

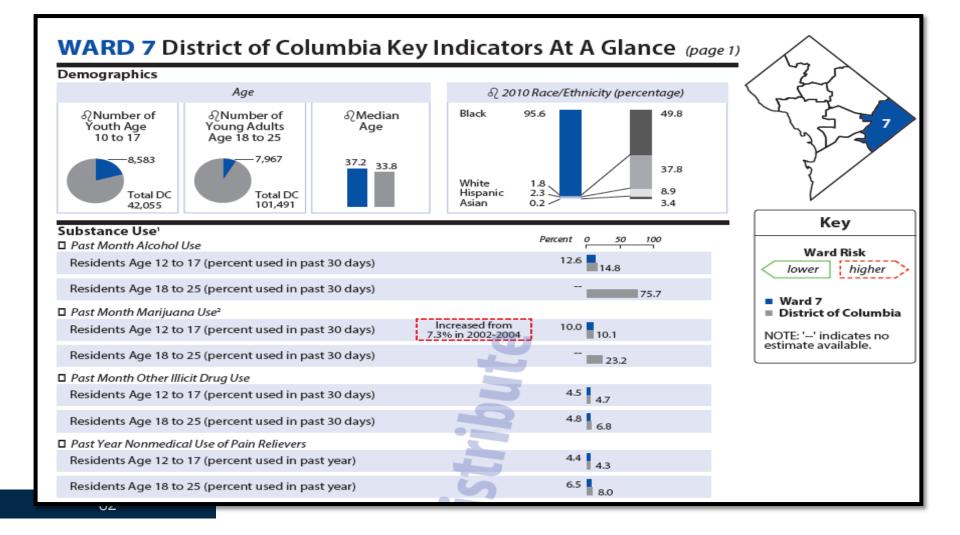
Key Factors for Dissemination

Factor	Full Report	Executive Summary	Power Point	Fact Sheet	Online Stat Sheet	Online Analytical Processing Cube
Audiences	Local sites, participants	Congress State Legislature Board	Congress, legislators, Board, educators, general public, participants	Congress, legislators, media, program officers/funders	Public, program officers, funders	Program officers/funders, university researchers
Rationale		Brief & transportable		Quick easy release of data	Generate interest in topic/teaser	Tailored information for research & projects
Content	Full status report	Summary of full report				Data sets
Purpose/ Use						Exploration of ideas
Timing	2-3 mos.		After Exec. Summary		Immediate	After full report
Development	Based on reporting requirements			Based on reporting requirements		
Special issues/constraints	Very long			Very short, may pose questions		
Distribution		Electronic & print		Electronic copy posed on web	Web based only	Web -based
Special Concerns	Few read it					

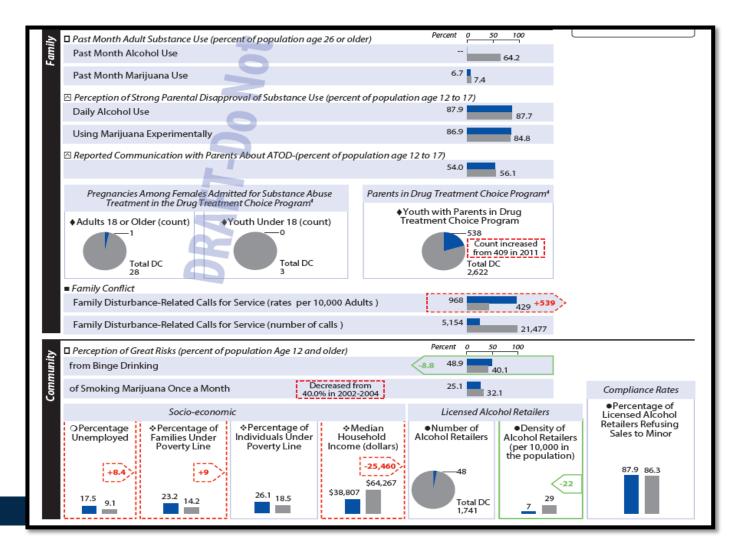
Telling a Good Story (Exercise)

- Review the data at your table
- Tell your story to a Local Foundation
- Tell your story to your coalition members/stakeholders
- Tell your story to your local decision-makers

Using Epidemiological Profiles



Using Epidemiological Profiles





Reporting Out

- Who is your audience?
- What are the most important findings?
- What story does your data tell?

Wrap-Up: Questions???



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