

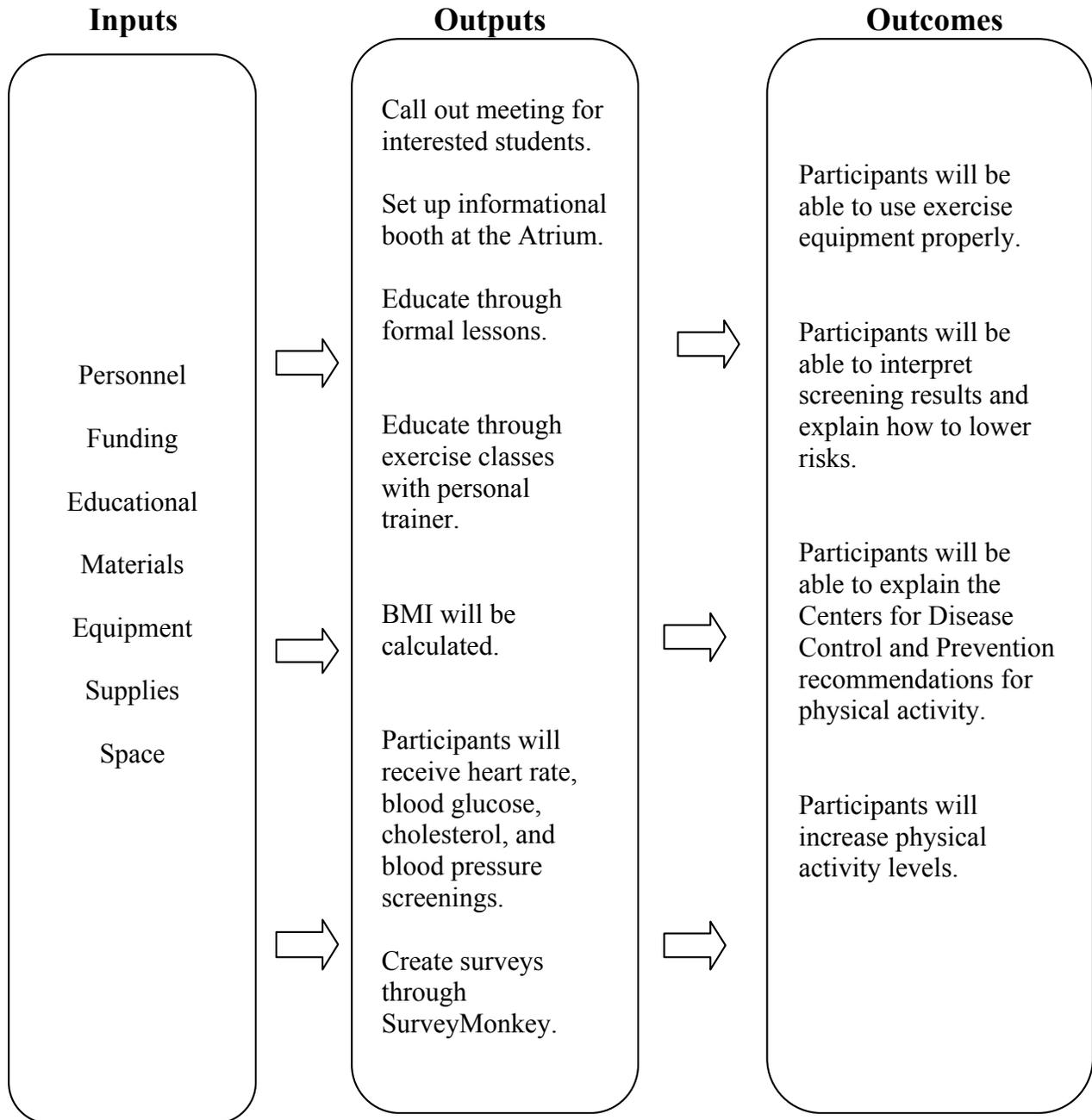
*Steps to a Healthier Life*  
Ball State University Students  
Muncie, Indiana

Kendra Ham  
Jessica Hoover  
Lyndsay Perrine  
LaMonica Smith

## **Executive Summary**

“Steps to a Healthier Life” (See Figure 1) is a semester long program designed to help its priority population, Ball State University students, lead a physically active lifestyle. Data show that Ball State University students do not know the definition of physical activity, nor do they know the recommended amount of physical activity they should be getting each week. One of the objectives for the program is to get the priority population to build physical activity into their day. Another objective of the program is to make sure the participants of the program know and can demonstrate how to properly use exercise equipment. “Steps to a Healthier Life” will also teach participants the importance of being physically active and the health benefits that can be obtained from leading an active lifestyle. Through the program, participants will learn the importance of physical activity and how to fit physical fitness into their lives. The program will consist of educational lectures given by Julie Sturek that will make students aware of the consequences of leading a sedentary lifestyle. The program will also allow participants to free access to personal trainers and monthly lessons that will show students ways to fit physical activity into their daily routines. Each week, there will be a new activity for participants. To determine if participants were satisfied with the program, the program planners will conduct a process evaluation immediately after the program.

**Logic Model**  
*Steps to a Healthier Life*



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## **I. A Rationale for “Steps to a Healthier Life”: A Program to Enhance the Health of Ball State University students and faculty.**

Obesity is a worldwide problem that can lead to many medical problems or chronic diseases such as heart disease, diabetes, and hypertension. Being overweight and obese can be determined by calculating a person’s body mass index. Many people are overweight because they are not burning the calories they take in. In other words, they are physically inactive or underactive. Unfortunately, physical inactivity is affecting nations all around the world.

Physical inactivity is high in almost all developed and undeveloped countries. “At least 60% of the world's population fails to complete the recommended amount of physical activity required to induce health benefits” (World Health Organization [WHO], 2009). There are several reasons for this. One reason for this high percentage is that individuals do not engage in physical activity during their free time. A second reason is an increase in sedentary behaviors, and third is the large numbers of people who rely on convenient modes of transportation instead of physical activity.

In developed countries more than 50 percent of adults do not meet the recommended amount of physical activity that is required. Some reasons why communities may be less active are: population overcrowding, increased poverty, high-density traffic, low air quality, increased levels of crime, and the lack of parks, sidewalks and sports/recreation facilities. From a global point of view, physical inactivity is most common in young people, women and older adults. In addition, physical inactivity has been linked to many non communicable diseases that threaten the lives of many all around the world (WHO, 2009).

In the United States, physical inactivity is lower than global rates, but it is still a problem that should be addressed. More than 72 million adults in the United States are obese.

Additionally, obesity related illness claims over 100,000 deaths each year. In 2000, overweight and obesity health care costs reached an estimated \$117 billion (Centers for Disease Control and Prevention [CDC], 2009a). Only 75.4% of adults in the United States engaged in physical activity during the past month compared to 24.8% of the population that did not (CDC, 2009b). In 2008, 77% of males engaged in physical activity compared to 73% of females (CDC, 2009b). Research shows that 77.4% of Caucasians engage in physical activity compared to 68.5% of African Americans (CDC, 2009b). Not only is physical inactivity a problem for the country but it is also a problem for all states including Indiana.

In the past month 75.3% of males in Indiana engaged in physical activity, while only 69.5% of females in Indiana reported involvement in physical activity. This shows that Indiana males are more likely to engage in physical activity than females (CDC, 2009b). Also, Indiana adults, ages 18-54, have a higher percentage of engaging in physical inactivity than those ages 55+.

Research results show that 83.3% of college graduates engage in physical activity; however, only 67.4% of people with a high school diploma and 48.6% of people who did not complete high school engaged in physical activity. From these data, one could assume that by continuing one's education, one learns more about the benefits of physical activity and the effects that it has on one's body (CDC, 2009b). Physical activity is very important to one's health, and if it is disregarded, there is a greater chance of health problems in the future. However, on many college campuses, such as Ball State University, physical inactivity proves to be an issue as well.

Ball State University is located in Muncie, Indiana. Although the CDC recommends 150 hours of moderate physical activity or 75 minutes of vigorous physical activity each week (CDC,

2009c), only 56.3% of Ball State college students who participated in a survey met these recommendations (American College Health Association [ACHA], 2009). After examining the data on Ball State University students, one can assume that there is a significant problem concerning physical inactivity among the priority population. Although Ball State University requires a fitness/wellness course of all students and offers fitness classes through Ball State University Recreation Services many are still inactive. It may be because of the high cost of fitness classes offered.

The “Steps to a Healthier Life” program is targeting students at Ball State University who are in need of more physical activity. A needs assessment has shown that students at Ball State University are not knowledgeable about the negative effects of physical inactivity. The program will focus on increasing the percentage of physical activity on campus by providing students with free access to a personal trainer for the duration of the program. The personal trainer will provide training sessions on proper equipment use, muscle strengthening, and cardiovascular workouts. Along with the presentations and personal trainer, the program will offer monthly workshops containing information on the effects and consequences of physical inactivity.

“Steps to a Healthier Life” has all the resources needed in order to insure Ball State students that this program will be successful. According to the Community Guide (The Community Guide, 2009), having individually adapted health behavior change programs and social support will increase the likelihood of the program’s success. The necessary resources are available to allow participants to become physically active and maintain a healthy lifestyle. The individually adapted health behavior change programs include personal trainers tailoring exercise programs to the participants needs. The social support aspect will come from the graduate student in Counseling Psychology and Guidance Services. This counseling student will allow

students to discuss their struggles and successes throughout the program. Also, the participants will provide social support for one another. The program has been carefully planned and designed to address the needs and wants of the priority population. Therefore, there is no better time than now to take advantage of the “Steps to a Healthier Life” program.

## **II. Planning Committee Members**

The planning committee will consist of a number of representatives from several stakeholder groups. Members of this group come from several different professions from around Ball State University which allows for various view points. The members include:

Kendra Ham, Health Science Major

Jessica Hoover, Health Science Major

Lyndsay Perrine, Health Science Major

LaMonica Smith, Health Science Major

Representative from Ball State University Recreation Services

Representative from the Health Education Department

Graduate Assistant from the Ball State University Exercise Science program

Graduate Assistant from the Counseling Psychology and Guidance Services program

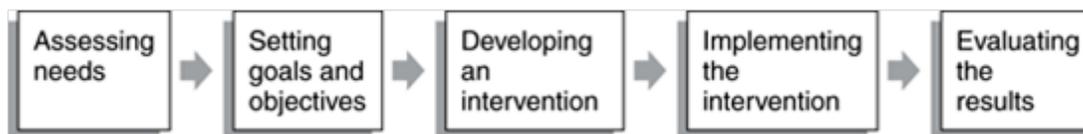
Two Ball State University students living on-campus

Two Ball State University students living off-campus

## **III. Planning Model Used**

The generalized model for program planning (McKenzie, Neiger, & Thackery, 2009) was used in creating this program (See Figure 2). The generalized model for program planning has

the basic components found in most program planning models. This model consists of five basic steps. The first step is to assess needs. Assessing the needs of the priority population is a key step to figuring out what the population wants/needs. The second step of the generalized model is to set goals and objectives. By knowing what the priority population needs/wants, it only makes sense that setting goals and objectives for the program would follow. In this step, goals and objectives will be set for the program; things that the stake holders would like to achieve throughout the duration of the program. After setting goals and objectives, the next step is to develop an intervention. The intervention includes the activities used to reach the goals and objectives. The intervention will be tailored to meet the needs of the priority population as well as the desired goals of the program. Then, the next step is to implement the intervention. During this stage, the program will be made available to the priority population. After the program is implemented and finished, the last step is to evaluate the results. During evaluation, planners will review how effective the program was and how the priority population felt about the program. Program planners will review the evaluation and determine what could have been done better and what changes will be made the next time.



(Figure 2. The Generalized Model for Program Planning)

#### **IV. Needs Assessment: Steps to a Healthier Life**

Needs assessments are used to identify, analyze, and prioritize the needs of a priority population. The information collected from this needs assessment was used to help determine

the focus of the program plan.

### Step 1: Determining the Purpose and Scope

The purpose and scope of the needs assessment was to gather data from Ball State University students to determine the knowledge, beliefs, behaviors and attitudes they had about physical activity. In addition, demographic data were collected to determine how age and sex affect beliefs, behavior and knowledge about physical activity.

### Step 2: Gathering Data

Both primary and secondary data were collected. Primary data were collected from Ball State University students using two different methods. The first was to get students to complete a needs assessment (See Appendix A). Those students were selected via the non-probability grab sampling technique. Four planning committee members administered 20 self-report single-step need assessments for a total of 80 completed surveys (See Appendix B). The second method used to collect primary data was observation (see Appendix C). Again, four planning committee members used a convenient sample to observe twenty individuals each. The secondary data used were the American College Health Association National College Health Assessment for Ball State University (American College Health Association [ACHA], 2009). The data used from the ACHA were numbers showing how much students reported being physically active within the last thirty days as well as their attitudes about wanting to learn more about physical activity.

### Step 3: Analyzing the Data

From the primary data it was found that almost half of the students that took the elevator were females with an object (See Appendix D). In analyzing the observational data, program planners found that males carrying no object were inclined to take the stairs and males carrying an object took the elevator. Females, when carrying an object, were prone to take the stairs than

men carrying an object. Females outnumbered the males who were carrying an object and took the stairs. Overall, the observations showed that students were apt to use the elevator; however, when asked on the questionnaire, students reported using the stairs more often than the elevator. Unfortunately, no conclusion could be made about the use of the elevator versus stairs due to “using stairs” being a socially acceptable answer on the written question.

After analyzing the data generated by the written questionnaire, it was evident that Ball State University students did not know the Centers for Disease Control and Prevention’s recommendations for physical activity. Also, students were unable to clearly define exercise. The planning committee found that most students admitted to being physically active zero to three days a week; however, the CDC recommends that students should be exercising at least five days a week. Although program planners thought that time would be the reason why most students reported not getting enough exercise each week, the opposite was true. Students reported that time was not a barrier to exercising. It was concluded that Ball State University students are not engaging in enough physical activity each week for reasons other than lack of time.

According to the secondary data, 61.4% of Ball State students were not interested in receiving information about physical activity. From this information, the planning committee concluded that students are not interested in learning about physical activity and thus are less likely to possess adequate knowledge about physical activity.

In conclusion, program planners found the problem to be that students are not adhering to nor following the physical activity recommendations set forth by the CDC, and are increasingly becoming unhealthy and are at risk for becoming overweight and obese and in turn developing chronic diseases.

#### Step 4: Identifying the Risk Factors Linked to Health Problem

With overweight and obesity and the potential of developing chronic diseases as the problem, dealing with the risk factors is important.

Some environmental risk factors include weather, peers, school work load, jobs, as well as involvement in extracurricular activities. For example, if it is snowing outside students are less inclined to walk to the gym to workout. Also, if a student's peers are not engaging in physical activity, he or she is more inclined to lead a sedentary lifestyle.

Some behavioral risk factors include choosing to take the stairs instead of the elevator or choosing to go to the gym instead of going out to dinner with friends. Also, choosing to take the shuttle instead of walking to class would be an example of a behavioral factor. Choosing to eat an unhealthy diet, driving to campus instead of walking, as well as smoking can all lead to a sedentary lifestyle.

#### Step 5: Identifying the Program Focus

There are several factors associated with the risk factors of obesity and chronic disease. Lack of knowledge about exercise is a predisposing factor that has been found among Ball State University students. Students are not aware of the recommended amount of physical activity for each week. According to the secondary data, students are just not interested in obtaining information about physical activity. Also, according to the primary data, students are aware of the resources Ball State University has to offer. Students possess the awareness of where workout facilities are located on campus, but they do not take full advantage of them.

An enabling factor that can relate to the risk factors is the fact that students are not aware of the operating hours of exercise facilities. Some exercise facilities on Ball State University's campus are open to students 21 hours a day. Another enabling factor is the availability of resources through the Ball State University Health Center. The Health Center offers information

that helps students avoid weight gain and stay healthy.

Reinforcing factors include compliments from peers, professors, and family members. Recognition of weight loss and physical appearance from others, admiration of commitment to exercise regimens, and an increase in self-esteem are all examples of reinforcing factors.

Because of these factors, the focus of “Steps to a Healthier Life” program will be on educating students about physical activity and lifestyle changes and increasing physical activity levels among students. By educating and encouraging positive lifestyle changes, it will reduce health risks and increase physical activity among Ball State University students.

#### Step 6: Validating the Prioritized Need

The prioritized need was validated by a certified health education specialist through reexamining the needs assessment data before the program plan was developed.

### **V. Mission Statement, Goal and Objectives**

*Mission Statement:* The mission of “Steps to a Healthier Life” is to provide all Ball State University students with knowledge about physical activity to enable them to live a more active lifestyle.

*Goal:* Increase the number of Ball State University students who are physically active in order to reduce their health risks.

*Objectives:*

*Process/Admin:* By December 2010, committee members of “Steps to Healthier Life” will hold a callout meeting for all students interested in physical activity.

*Awareness:* After attending the callout meeting, 70% of students who attended will be able to list the exercise facilities located on Ball State University’s campus.

*Knowledge:* When asked in a survey, 30% of “Steps to a Healthier Life” program participants will be able to explain the Centers for Disease Control and Prevention’s recommended amount of physical activity one should engage in each week.

*Attitude:* By 2011, 75%, an increase of 5% compared to the baseline data, of all Ball State University students will express, through a survey, that they believe physical activity is fun and enjoyable.

*Skills:* After the training session, 50% of all participants will be able to demonstrate how to properly use three different pieces of exercise equipment.

*Behavior:* By 2010, 60%, an increase of 5% according to baseline data, of all Ball State University students will build additional physical activity into their daily routine.

*Environmental:* By 2011, the Ball State Recreation Center will offer one free exercise class to all program participants.

*Outcome:* Upon completion of the “Steps to a Healthier Life” program, participants will be screened and at least 45% will show decreased blood pressure, glucose, and cholesterol levels as compared to pre-program levels.

## **VI. Intervention**

The program planners of the “Steps to a Healthier Life” program used the Transtheoretical model to guide the development of the program intervention. The program planners also used three intervention strategies to implement the program. These strategies are education, behavioral modification, and incentives.

The constructs of the Transtheoretical model were most applicable to the purpose of the program for the priority population than other models or theories. By using this model the

program planners could determine what stage participants were in and tailor the message accordingly. During the callout meeting, the participants will be staged using stages of change in the Transtheoretical model. The Transtheoretical model is better for long term changes. The process of change construct was used throughout the intervention, to help move the participants through the stages.

The process of change construct is defined as “activities that people use to progress through the stages” (McKenzie et al., 2009, p. 178). This construct was used throughout the program to assist and encourage participation as they moved from one stage to the next. Activities such as the meet and greet session, scavenger hunt, and educational session will increase motivation among participants.

The stages of change construct is made up of six stages: precontemplation, contemplation, preparation, action, maintenance, and termination. During the first meeting, a questionnaire will be distributed to determine what stage each participant is in. However, program planners hypothesize that most participants will be in the contemplation or preparation stage. A participant in the contemplation stage is contemplating making a change within the next six months. A participant in the preparation stage plans on changing his/her behavior in the next 30 days. The construct was also used at the end of the program; as part of the summative evaluation, a questionnaire was given to participants to determine if they were maintaining the newly adopted behavior.

Decisional balance was the next construct used in the intervention. Decisional balance allows for a person to weigh the pros and cons of the health behavior he/she is deciding to adopt. There will be two charts given to the participants for them to keep track of stair use and total step count. This will allow students to think about the pros and cons of using the elevator versus the

stairs before choosing which to take. Also, the chart to count total steps taken will allow time for participants to reflect on the benefits of getting the suggested number of steps in each day.

Beginning in December 2010, the “Steps to a Healthier Life” program will set up an informational table to advertise the program. There will also be a meet and greet with the program planners to allow students to feel like the program is more personalized. Taking place the second week of December will be a callout meeting. The callout meeting will allow interested students to sign up for the program as well as to hear about all the events taking place throughout the program. The callout meeting will allow interested students to sign up for the program as well as to hear about all of the events taking place throughout the program. Once all events are discussed a questionnaire will be given to participants at the conclusion of the meeting to assess their attitudes towards physical activity. Following the callout meeting, students will have the opportunity to attend a tour of the exercise facilities located on campus. The tour will allow students to become familiar with the facilities that they will be using.

When students return from winter break the “Steps to a Healthier Life” program will begin. Each week there will be an activity, for example, educational lectures, exercise session, and support group meetings. The educational lecture, “Fat Factor”, will discuss information, facts, and statistics on the relationship between obesity, weight control and physical activity. Also, program participants will have the opportunity to have their BMI calculated as well as have their glucose and cholesterol levels tested. The exercise sessions will take place in Ball and Irving gyms. The participants will learn the proper use of exercise equipment as well as having a workout plan based on their physical ability. For the details on X-UR-SIZE, Fat Factor, Are You Happy in Your Skin, and Counting Steps, refer to Appendix E. Also, in the month of April, if participants attend an educational lecture or exercise session, the participant and a friend of their

choice will receive a free session with a personal trainer. Support group meetings will also be held once a month to allow participants to share difficulties as well as accomplishments they have made. For a detailed description of the intervention activities refer to Appendix E.

## **VII. Resources**

“Steps to a Healthier Life” will require several resources to run smoothly. These resources include personnel, curriculum and educational materials, space allocation, equipment and supplies, as well as funding.

### Personnel

Personnel for the program include several Health Science majors; Kendra Ham, Jessica Hoover, Lyndsay Perrine, and LaMonica Smith. The duties of the Health Science majors, who are also the program planners, include overseeing “Steps to a Healthier Life.” The Health Science majors will be responsible for reserving classrooms and weight rooms for educational lectures, workshops, and exercise classes and training sessions. The program planners will also be responsible for recruiting participants for the program, getting into contact with the other members of the planning committee, as well as contacting sponsors to receive money for program funding.

A representative from the Ball State University Recreation Services will also be needed. The representative will be responsible for helping facilitate tours of the gyms around campus as well as assuring proper space and equipment are provided for the exercise classes and training sessions.

A representative from the Health Education Department will also be used. This representative will help to provide content for the presentations and workshops throughout the program.

A graduate assistant from the Ball State Exercise Science program will also be an important resource to the program. This person will be responsible for providing content on how to properly use exercise equipment as well as how to properly exercise; for example, how to train certain muscle groups and how to do cardio.

Four Ball State University students, two who live on campus and two who live off of campus, will serve as members on the planning committee. These students will be helpful in providing feedback and insight on how to make the program more appealing to their peers. This includes providing information on how to better relate to the students and how to best market the program.

#### Curriculum and Educational Materials

The curriculum used in this program will be an in-house curriculum consisting of four lessons (See Appendix F). These lessons will be presented using PowerPoint software. Other educational materials will include fact sheets and brochures. These materials will be used throughout the program at educational lectures and workshops. The program planners selected these materials because they are convenient and easily accessible to members of the priority audience. PowerPoint presentations are more mobile and members of the priority audience are use to receiving educational information in this fashion. The fact sheets and brochures will be a summary of the information provided in the educational lectures and workshops.

#### Space Allocation

“Spaces” that will be used to implement the program include classrooms around campus, weight rooms in Ball and Irving gyms, and table space at the Atrium. Classrooms and table space will be free of charge; these spaces will need to be reserved ahead of time. Weight rooms in Ball and Irving gym will be reserved for allotted amounts of time.

### Equipment and Supplies

Equipment for the program includes tables, computers, projectors and gym equipment. Supplies for the program include paper, staplers, staples, tape, disposable cameras, t-shirts (which will be used as incentives), pens, pencils, and fees for developing pictures from the disposable cameras. The program planners will obtain the equipment through Ball State University. The program planners will use the classrooms for educational lectures and workshops; the classrooms have tables, computers and projectors in them. The gyms on campus will also provide the exercise equipment needed to facilitate the program. Supplies will be obtained by purchasing them with donations.

### Funding for “Steps to a Healthier Life”

Program planners anticipate paying for the program through participant fees and gifts from sponsors (See Appendix G).

## **VIII. Marketing**

“Steps to a Healthier Life” is geared towards reducing the incidence and prevalence of physical inactivity among Ball State University students. This will be accomplished by increasing knowledge about the relationship between obesity and physical inactivity. The program will include a callout meeting for all students interested in becoming more physically active. During this meeting, a scavenger hunt will take place to get participants more familiar with the exercise facilities on campus. Activities taking place during the program include an educational session that provides content on physical inactivity and its affect on obesity. There will also be exercise classes and counseling services offered to participants of the program.

This program will offer the benefits of learning correct and up to date knowledge about physical activity and obesity. Participants will also learn where exercise facilities are located on campus which will enable people to exercise in a safe environment. A third benefit participants will receive from the program is information on obesity and how being obese affects their health. One final benefit the participants will gain is possible development of social networks of people to continue exercising with after the program is completed.

The segmented population is Ball State students interested in becoming more physically active. The participants lack the knowledge of the recommended amount of time to be physically active each week and the skills to exercise properly. Individuals involved in the program also lack motivation to be physically active. Participants of the program are interested in changing their exercise habits.

Participants will be charged a \$30 participant fee. This money will be used to help with expenses for the program (See Appendix G). Participants will also have nonmonetary costs for the program. Some of the nonmonetary costs include:

Behavioral: Participants are going to have to change their daily routine as well as adopting new behaviors they are not used to doing, such as using the stairs instead of the elevator and increasing physical activity.

Time: Participants will have to set aside time to engage in physical activity instead of other free time activities. This time will be given up when participants attend the program's educational sessions and exercise classes.

Effort: There will need to be a great effort made among participants to change their old behavior. Participants are going to have to make a conscious effort to attend the program activities as well as engage in the recommended amount of physical activity each week.

Physical: Participants will have to endure the pain that comes along with starting a new exercise routine. They will also experience the discomfort that comes from the cholesterol and glucose testing.

Psychological/Emotional: Program participants will need to increase their confidence level. For example, a participant who is overweight will need to overcome the embarrassment of one's appearance. Participants will also need to be realistic when thinking about results. They will need to be patient and stick with the program for results to take place.

Social: Participants may feel pressured by friends and families to spend more time with them rather than going to the gym to exercise. Friends and families may not support the change because they do not value the importance of exercise.

The program will be placed in different locations depending on which activity is taking place. The program will be placed in Ball or Irving gym for the exercise classes. The exercise classes will encourage physical activity and knowledge of how to use the machines correctly. The program planners chose these locations because the participants are going to be taught the correct ways to use the machines. Participants also may not have transportation to get to another exercise facility located off campus, so using free facilities on campus will be convenient for participants. Activities taking place for the program will be held in the evening to better suit participants' schedules.

The educational lectures will be held in classrooms around campus that will be reserved by the program planners. Again, participants in the program may not have transportation to another location off campus, and these classrooms are free of charge. These activities will also take place in the evening for better convenience for the participants.

The program planners are going to use flyers and posters to promote the program. The planners will get the flyers and posters approved by the appropriate Ball State office and then hang them around campus. These flyers and posters will be put up two weeks in advance to the callout meeting to give participants time to think about making the commitment to join the program (See Appendix H).

## **IX. Implementation**

There are five phases for the “Steps to a Healthier Life” program participants to progress through for the program to be completed. Those five phases are: Phase One-Adoption of the program, Phase Two- Identifying and Prioritizing the Tasks To Be Completed, Phase Three- Establishing a System of Management, Phase Four- Putting the Plans into Action, Phase Five- Ending or Sustaining a Program.

### **Phase One: Adoption of the Program**

Phase one of implementation is adoption of the program. Throughout the planning process the planners have worked to create an intervention that would meet the needs and appeal to the priority population. A needs assessment was administered to a convenience sample of the priority population before the program began. Based on the results of the needs assessment program planners created activities tailored to the needs of the participants. “Steps to a Healthier Life” will provide students, faculty, and staff with information about physical activity. For those who are interested, a call out meeting will be held that will provide further details about the program. Marketing will also be used to gain the attention of the priority population. The marketing will provide a brief overview of the program as well as information on how to get

involved with the program. For a better description of the program's marketing strategy, see page 23.

#### Phase Two: Identifying and Prioritizing the Tasks To Be Completed

Identifying and prioritizing the tasks to be completed is phase two of implementation. The program will run for one semester. Some tasks need to be completed before the program starts while others will take place during the program; therefore, in order for the program to succeed a timeline will be put in place so program planners can stay organized (See Appendix I).

#### Phase Three: Establishing a System of Management

The third phase of implementation is establishing a system of management. The program has many different classes and benefits it will be offering. Because of the different activities, there will be a variety of people helping with the program. The informational booth, call out meeting, and the program's intervention activities will be organized by the program planners. A representative from the Health Education Department will give the educational lectures regarding physical activity. A graduate assistant from the Exercise Science program will calculate BMI and administer glucose, blood pressure, blood cholesterol, and heart rate screenings. The graduate assistant will also help lead the exercise classes. Representatives from Recreation Services will assist participants in learning proper techniques for using exercise equipment.

#### Phase Four: Putting the Plans into Action

A pilot test will be conducted for "Steps to a Healthier Life" to make sure the program runs smoothly and that it is implemented correctly. Program planners will pilot the program on one floor of a selected residence hall. The pilot test will begin in January 2010. Throughout the pilot test, program planners will make sure the program is implemented correctly and that tasks

were completed in a timely manner. Program planners will also make sure marketing strategies worked as well as make sure there are sufficient resources for the program to continue. After the pilot test, program planners will revise anything that needs to be fixed.

Next, beginning in August 2010, the program will be phased in. The program will be phased in by first focusing on students who live on campus, since they are easier to access. Program planners will set up booths in the residence halls to advertise the program and allow for students to gain information about the program. The following semester, students who live off campus will be phased in with a kick off of the program in the Ball State University Village. This will allow for interested students to see a brief overview of the program. The kick off for the program will create excitement for the program and potential participants. To continue the kick off of the program, a callout meeting will be held for interested students. The callout meeting will give a detailed description of activities taking place during the program. The callout meeting will also give participants a chance to meet and greet the program planners. This will allow for participants to feel as though the program is more personalized and hopefully this will heighten enthusiasm. The meeting will also have a sign up sheet so interested students can sign up for the program. A needs assessment will also be distributed. After phasing in the program, total implementation will take place beginning in August 2011. Ball State football players will be present at the kickoff to help promote the program as well as Ball State radio station, WCRD. Players will be handing out and autographing free t-shirts (See Appendix G).

#### Phase Five: Ending or Sustaining a Program

The final stage of implementation is ending or sustaining the program. An evaluation will be done at the conclusion of the program to determine both the effectiveness and quality of the program. If the goals and objectives were met or exceeded, then the program will be

sustained for the following semester. However, if they were not met, then the program planners will consider discontinuing the program. Participant satisfaction also plays a big role in continuing the program. If participants are not happy with the program, or the program does not receive enough interested students, then the program will not take place. If participants are happy and show interest in the program, then the program will continue in the next semester.

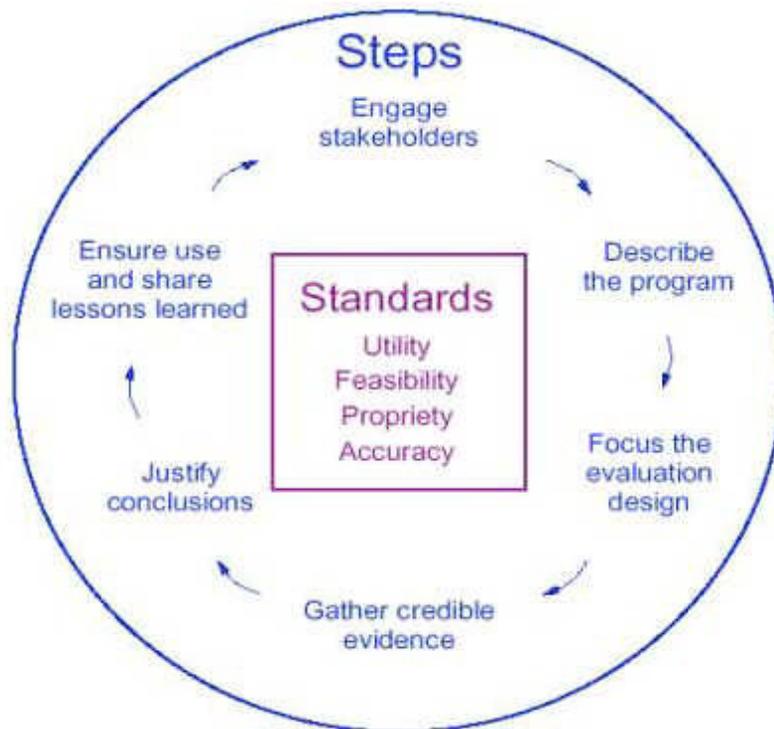
### Additional Concerns

The Graduate Assistant from the Exercise Science program needs to be CPR certified in order to run the exercise classes. Recreation Services representatives will need to be CPR certified as well as trained in emergency responding. Participants of the program will also fill out an informed consent (See Appendix J) before starting the program. This will allow students to express any concerns they might have as well as list any medical concerns they feel the planning committee members should know about. The program planners will have each participant also fill out a medical information card, which will be kept on record. Participants will receive a participant's manual only after the consent form and medical information card has been returned. Also, all program planners must be prepared to appropriately address any ethical issues participants may have, which may include confidentiality, safety, and participants/planner relationships. In addition, the program planners will use the Ball State University lawyer to assist the program planners in any legal issues that may arise.

### **X. Evaluation**

The purposes for the evaluation of the “Steps to a Healthier Life” program are to determine if the program could be improved and to determine if the intervention was successful. To determine whether the program was successful, the goals and objectives (See page 15) of the “Steps to a Healthier Life” program must be reached or surpassed.

The framework used to plan the evaluation of the “Steps to a Healthier Life” program was the six-step framework created by the Centers for Disease Control and Prevention (CDC) (See Figure Below).



#### Six Step Framework for Evaluation

Source: Centers for Disease Control and Prevention. (2008). Evaluation model. Retrieved December 2, 2009, from [www.cdc.gov](http://www.cdc.gov).

*“Step 1- Engaging the stakeholders:* Stakeholders must be involved to make sure their perspectives are understood.

*Step 2- Describing the program:* The program must be described in enough detail that the mission, goals, objectives are understood.

*Step 3- Focusing the evaluation design:* Make sure the interests of the stakeholders are addressed while using time and resources efficiently.

*Step 4- Gathering credible evidence:* Evaluators need to decide on the measurement indicators, sources of evidence, quality and quantity of evidence, and logistics for collecting the evidence.

*Step 5- Justifying conclusions:* Comparison of the evidence against the standards of acceptability; interpreting those comparisons; judging the worth, merit, or significance of the program; and creating recommendations for actions based upon the results of evaluation.

*Step 6- Ensuring use and sharing lessons learned:* The dissemination of the evaluation results. The needs of each group of stakeholders must be addressed.” (McKenzie et al., 2009, pp. 341-342)

The evaluation of the “Step to a Healthier Life” program includes both process and summative approaches. The process evaluation will examine the following elements: support, accountability, reach, and satisfaction. The data will be collected using the results of a survey participants will complete and a focus group. The participants for this data collection will include all who complete the “Steps to a Healthier Life” program. The process evaluation data will be gathered at the completion of the program after the participants have had their last glucose, cholesterol, and blood pressure screenings. The survey will be available on *Survey Monkey* to collect the process evaluation. A copy of the instrument used to collect the process evaluation data is presented in Appendix K.

A non-experimental design will be used for the summative evaluation of the “Steps to a Healthier Life” program. More specifically, the non-experimental pre-test, post-test no comparison group design will be used. This design is represented as:  $O_1 \quad X \quad O_2$ . In this design  $O_1$  = pre-test, X= intervention,  $O_2$  = post-test.

The variables that will be measured in the summative evaluation will include awareness, knowledge, attitudes, behavior, and health outcomes. The data collected to measure the variables will be both qualitative and quantitative in nature. The summative data will be collected at the completion of the program after students have their screening of glucose, cholesterol, and blood

pressure levels. These data will be collected from participants using a survey instrument and by the results of screenings. A copy of the survey instrument used to collect the summative evaluation data will be the same used for the needs assessment (See Appendix A).

Both qualitative and quantitative data will be collected and the beginning and end of the program by the program planners. Some of the qualitative data will be collected at the completion of the program by having participants fill out a process evaluation survey about their satisfaction with the program. The quantitative data will come from the results of screenings taken by the GA of the exercise science department with the participant's cooperation. For a more detailed look at how participants will be evaluated, see appendices A and K. The data will be analyzed by the program planners with help from the Graduate Assistants from the Exercise Science Department.

The limitations of using the summative evaluation design described above include the following; participants must attend every educational session and exercise class of the "Steps to a Healthier Life" program to have a chance at incentives. Program planners understand if there are some conflicts with sessions, but ask that participants try their best to make it. The "Steps to a Healthier Life" program understands that school work does get hectic, but the one point of the program is to help participants learn how to make time for exercising. This may cause participants to drop out throughout different times of the program, this would be an example of mortality which is a threat to internal validity. "Steps to a Healthier Life" is using a pre-test, post-test no comparison design for the evaluation of the program. The results of the post-test given may show an increase because of participants learning information from the pre-test survey given, this is an example of "testing" threat to the internal validity. However, program

planners are hoping that the majority of the increase will come from the participants understanding and applying information taught in educational sessions and exercise classes.

At the conclusion of the program the program planners will conduct a survey through Survey Monkey. This will provide feedback about their personal progress and the program's usefulness. Through these surveys, program planners will be able to determine the parts of the program that need to be changed for the following year.

## **XI. References**

American College Health Association. (2009). *American College Health Association-National College Health Assessment II: Ball State University Executive Summary Spring 2009*.

Baltimore: American College Health Association.

Centers for Disease Control and Prevention [CDC]. (2009a). *Behavioral risk factor surveillance system*. Retrieved October 27, 2009 from <http://www.cdc.gov/brfss/>.

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The Community Guide. (2009). *Promoting Physical Activity: Behavioral and Social Approaches*. Retrieved December 9, 2009 from

<http://www.thecommunityguide.org/pa/behavioral-social/index.html>.

McKenzie, J.F., Neiger, B.L., & Thackeray, R. (2009). *Planning, Implementing and Evaluating Health Promotion Programs (5<sup>th</sup> Ed.)*. San Francisco: Pearson Education, Inc.

World Health Organization [WHO]. (2009). *Physical inactivity: A Global Public Health Problem*. Retrieved October 28, 2009, from World Health Organization:

[http://www.who.int/dietphysicalactivity/factsheet\\_inactivity/en/](http://www.who.int/dietphysicalactivity/factsheet_inactivity/en/)

## Appendix A - Needs Assessment Instrument

### A. Awareness

1. Where on campus are workout places found?

### B. Knowledge

1. According to the CDC, how often should you engage in aerobic exercise each week?
  - a. 30 minutes
  - b. 60 minutes
  - c. 90 minutes
  - d. 150 minutes
2. How do you define exercise?

### C. Attitudes

1. I don't have enough time to exercise

Strongly Disagree

1      2      3      4      5      6      7      8      9      10

Strongly Agree

### D. Behavior

1. Most of the time I use the:
  - a. Stairs
  - b. Elevator
2. How often do you engage in exercise per week?

### E. Demographic

1. How old were you on your last birthday?
2. Have you been diagnosed with a physical disability that would hinder your ability to walk up stairs?
3. Sex: (Circle one)  
Male  
Female

## Appendix B - Summary of Needs Assessment Data from Written Instrument

### A. Awareness

1. Where on campus are workout places found?  
Irving Gym= 60  
Ball Gym= 64  
Residence Halls= 35  
Other= 10

### B. Knowledge

1. According to the CDC, how often should you engage in aerobic exercise each week?  
A= 7  
B= 10  
C= 36  
D= 27
2. How do you define exercise?  
Cardio= 5  
Weight Training= 9  
Increasing Heart Rate= 29  
Physical Activity= 13  
Other= 8

### C. Attitudes

1. I don't have enough time to exercise:  
1 (Strongly Disagree) = 11  
2= 2  
3= 14  
4=11  
5= 11  
6= 12  
7= 13  
8= 5  
9= 1  
10 (Strongly Agree) = 0

### D. Behavior

1. Most of the time I use the:  
Stairs= 65 Elevator= 15
2. How often do you engage in exercise per week?  
0-3 days= 39 4-5 days= 28 6-7 days= 5 Other= 8

### E. Demographic

1. How old were you on your last birthday?  
18= 8

19=7  
20= 23  
21= 23  
22= 10  
23= 3  
24=2  
26= 1  
27= 1  
48= 1  
51= 1

2. Have you been diagnosed with a physical disability that would hinder your ability to walk up stairs?  
No= 79  
Yes= 1
3. Sex;  
Male= 36  
Female= 44

Appendix C - Observation Instrument

	<b>Male or Female</b>	<b>Object or No Object</b>	<b>Stairs or Elevator</b>
<b>1</b>	M F	O NO	Stairs Elevator
<b>2</b>	M F	O NO	Stairs Elevator
<b>3</b>	M F	O NO	Stairs Elevator
<b>4</b>	M F	O NO	Stairs Elevator
<b>5</b>	M F	O NO	Stairs Elevator
<b>6</b>	M F	O NO	Stairs Elevator
<b>7</b>	M F	O NO	Stairs Elevator
<b>8</b>	M F	O NO	Stairs Elevator
<b>9</b>	M F	O NO	Stairs Elevator
<b>10</b>	M F	O NO	Stairs Elevator
<b>11</b>	M F	O NO	Stairs Elevator
<b>12</b>	M F	O NO	Stairs Elevator
<b>13</b>	M F	O NO	Stairs Elevator
<b>14</b>	M F	O NO	Stairs Elevator
<b>15</b>	M F	O NO	Stairs Elevator
<b>16</b>	M F	O NO	Stairs Elevator
<b>17</b>	M F	O NO	Stairs Elevator
<b>18</b>	M F	O NO	Stairs Elevator
<b>19</b>	M F	O NO	Stairs Elevator
<b>20</b>	M F	O NO	Stairs Elevator

## Appendix D - Summary of Observations

### Code for Abbreviations

MOS= Male, Object, Stairs

MNOS= Male, No Object, Stairs

MOE= Male, Object, Elevator

MNOE= Male, No Object, Elevator

FOS= Female, Object, Stairs

FNOS= Female, No Object, Stairs

FOE= Female, Object, Elevator

FNOE= Female, No Object, Elevator

### Summary of Observation

MOS= 9

MNOS=5

MOE=14

MNOE=1

FOS=19

FNOS=3

FOE= 29

FNOE= 0

Appendix E

**INTERVENTION FORM**

Program Title: Steps to a Healthier Life

<p><b>Goal:</b> Reduce the prevalence of physical inactivity among Ball State University students</p>			
<p><b>Theory/Model:</b> Transtheoretical Model</p>			
<p>Intervention Strategies:</p> <ol style="list-style-type: none"> <li>1. Education</li> <li>2. Behavior Modification</li> <li>3. Incentives</li> </ol>			
	<p>Construct</p>	<p>Person/ Agency Responsible</p>	<p>Start/End Dates</p>
<p><b>Process Objective:</b> By December 2010, committee members of “Steps to Healthier Life” will hold a callout meeting for all students interested in physical activity.</p>	<p>Decisional Balance</p>		
<p>1. Activity: An informational table will be located in the Ball State University Village to reach students from of all ages and groups. The table will advertise the “Steps to a Healthier Life” program and provide information about the upcoming callout meeting. A meet and greet session will also be held for students interested in the program. This will provide students with an opportunity to meet the program committee and become acquainted with those in charge. There will also be a display table set up in Bracken Library with informational pamphlets about the program.</p>		<p>Program Planners</p>	<p>December 2009</p>
<p><b>Awareness Objective:</b> After attending the call-out meeting, 70% of the students attending will be able to list all exercise facilities located on campus.</p>	<p>Processes of change</p>		
<p>1. Activity: An informational table will be located in the Ball State University Village to reach students from of all ages and groups. The table will advertise the “Steps to a Healthier Life” program and provide information about the upcoming callout meeting. A meet and greet session will also be held for students interested in</p>		<p>Program Planners</p>	<p>December 2009</p>

the program. This will provide students with an opportunity to meet the program committee and become acquainted with those in charge. There will also be a display table set up in Bracken Library with informational pamphlets about the program.			
2. Activity: At the end of the callout meeting there will be sign up sheets available for students interested in participating in the program. There will also be information about all the other events taking place throughout the program. Participants will also have the opportunity to attend a tour of the exercise facilities located on campus. The tour will allow students to become familiar with the facilities they will be using.		Graduate Assistant from Exercise Department	December 2009
<b>Knowledge Objective:</b> When asked in a survey, 30% of the program participants will be able to state the recommended amount of physical activity one should engage in each week.	Processes of change		
1. Activity: Participants will attend “Fat Factor,” an educational session providing information, facts, and statistics on obesity and the relationship with physical activity. Recommendations for physical activity will be discussed during this session. Also, participants’ BMI will be calculated and they will receive cholesterol and glucose screenings.		Graduate Assistant from Exercise Department	January 2010
2. Activity: Participants will attend “Are You Happy in Your Skin,” a session about the negative messages and images portrayed by the media about various body types. There will also be a graduate student in Counseling Psychology Department who will discuss ways to cope with these issues.		Graduate Assistant from Counseling Psychology Department	January 2010
3. Activity: Participants will attend “Counting Steps”, a session about the amount of steps one should take each day, the benefits of getting the recommended amount of steps into their day, and simple ways to do this. Participants will receive pedometers to track their steps		Program Planners	January 2010
<b>Attitude Objective:</b> By 2011, 75%, a 5% increase over baseline data, of the participating Ball State University students will express through a survey, that they believe physical activity is fun and enjoyable.	Decisional Balance		
1. Activity: A survey will be given to participants at the first educational session to assess their attitudes toward physical activity.		Program Planners	December 2009

2. Activity: Students will complete the same survey last educational session. This survey will provide the program planners with the information needed to assess, evaluate, and adjust the program for the following year.		Program Planners	January 2010
<b>Skill Objective:</b> After the presentation on equipment use, 50% of all the participants will be able to demonstrate how to properly use three different pieces of exercise equipment.	Processes of Change		
1. Activity: After participants attend “X-UR-SIZE,” an educational session about proper equipment use, they will divide into groups of four to demonstrate and explain to their group the proper use of three pieces of exercise equipment. If they can correctly demonstrate the proper use, participants will receive a reusable water bottle.		Graduate Assistant from Exercise Department	February 2010
<b>Behavior Objective:</b> By December 2010, 60%, a 5% increase over needs assessment data, of Ball State University Students will take the stairs instead of an elevator on a daily basis.	Self-efficacy		
1. Activity: Participants will be asked to tally the number of times they used the stairs for one week. Program planners will collect the charts at the following monthly educational session and give five points for each time the participants use the stairs and zero points for each time the elevator was used. The participant with the highest score will receive a pass to a free exercise class of their choice.		Program Planners	March 2010
2. Activity: Pedometers will be given to each participant at the first educational lecture. They will be asked to track their total steps each day for one month. This will help the participants meet the recommended amount of 10,000 steps per day.		Program Planners	March 2010
<b>Environmental Objective:</b> By 2011, all program participants will receive one free exercise class from the Ball State University Recreation and Wellness staff.	Processes of Change		
1. Activity: During the month of April, if participants bring one friend to a workshop or exercise class the participant and their friend will receive a one on one session with the personal trainer.		Program Planners and Graduate Assistant from Exercise Science Department	April 2010
<b>Outcome Objective:</b> After being screened, 45% of the program participants who complete the program	Stages of Change		

will show a decreases in blood pressure, blood glucose, and blood cholesterol.			
1. Activity: Program planners will conduct a survey through Survey Monkey to collect feedback about the program, behavior changes, and the results they have experienced from participating in the program. the completion of the program, each participant will receive a t-shirt to remind him/her to continue the routine he/she has started.		Program Planners	January 2012
2. Activity: Program planners will have graduate assistants from the Exercise Science Department screen participants for blood glucose and cholesterol levels, as well as take blood pressure readings.		Program Planners	January 2012

Appendix F - LESSON PLAN

<p>Title of Program: "Steps to a Healthier Life"          Title of Lesson: "Fat Factor"          Page 1 of 3          Unit: Benefits of Physical Activity          Lesson No.: 1          Priority Population: Ball State University Students          Length of Lesson: 1 hour and 30 minutes</p>		
Resources &References	Content	Teaching Method
<p>WebMD. (2009). <i>Cholesterol management guide</i>. Retrieved from <a href="http://www.webmd.com/cholesterol-management/guide/cholesterol-management-overview">http://www.webmd.com/cholesterol-management/guide/cholesterol-management-overview</a></p> <p>Centers for Disease Control and Prevention. (2009a). <i>Obesity and overweight</i>. Retrieved November 14, 2009 from <a href="http://cdc.gov/obesity/index/html">http://cdc.gov/obesity/index/html</a></p> <p>American Heart Association. (2009). <i>Prevent and treat high blood pressure</i>. Retrieved on November 14, 2009 from <a href="http://www.americanheart.org/presenter.jhtml?identifier=2133">http://www.americanheart.org/presenter.jhtml?identifier=2133</a></p>	<p><b>Introduction:</b>          The introduction to the program will include a welcoming to all participants. Program planners and participants will introduce themselves. Also, the guest lecturer will introduce herself. The guest lecturer will be Julie Sturek. Participants will then be divided into four groups and break off into screening sessions.</p>	<p>Lecture          (5 minutes)</p>
	<p><b>Body:</b></p> <ol style="list-style-type: none"> <li>1. <b>Overview about the importance regular screenings.</b></li> <li>2. <b>Screenings</b> <ul style="list-style-type: none"> <li>• Blood Pressure</li> <li>• Cholesterol and Glucose</li> <li>• Heart Rate</li> <li>• Body Mass Index</li> </ul> </li> </ol>	<p>Physical Activity          (30 minutes)</p> <p>Each participant will have his/her blood pressure, cholesterol and glucose, heart rate, and body mass index taken. Each student will receive a chart that he/she can record his/her results on.</p>

<p>WebMD. (2009). <i>Cholesterol management guide</i>. Retrieved from <a href="http://www.webmd.com/cholesterol-management/guide/cholesterol-management-overview">http://www.webmd.com/cholesterol-management/guide/cholesterol-management-overview</a></p> <p>Centers for Disease Control and Prevention. (2009). <i>Obesity and overweight</i>. Retrieved November 14, 2009 from <a href="http://cdc.gov/obesity/index/html">http://cdc.gov/obesity/index/html</a></p> <p>American Heart Association. (2009). <i>Prevent and treat high blood pressure</i>. Retrieved on November 14, 2009 from <a href="http://www.americanheart.org/presenter.jhtml?identifier=2133">http://www.americanheart.org/presenter.jhtml?identifier=2133</a></p> <p>Centers for Disease Control and Prevention. (2009b). <i>Physical activity and health</i>. Retrieved November 14, 2009 from <a href="http://cdc.gov/physicalactivity/everyone/health/">http://cdc.gov/physicalactivity/everyone/health/</a></p>	<p><b>2. Screening Results and what they mean</b></p> <p><u>Blood Pressure</u>: Students will be given educational information on what blood pressure screening results mean. Students will be educated on what it means to have good blood pressure as well as high blood pressure. The lecture will also provide information on how to maintain a healthy blood pressure.</p> <p><u>Cholesterol and Glucose</u>: Students will be given educational information on the meaning of cholesterol and glucose readings. Students will be educated on the differences between HDL and LDL as it pertains to cholesterol readings. Participants will be informed on the benefits of having normal glucose and cholesterol readings as well as how to maintain healthy cholesterol and glucose levels.</p> <p><u>Heart Rate</u>: Participants will be given educational materials on the meaning of heart rate screenings. Participants will be informed of their target heart rate.</p> <p><u>Body Mass Index</u>: Students will be informed of what Body Mass Index is. Participants will also be given educational information on what BMI screening results mean and how to maintain a healthy BMI.</p> <p><b>3. Benefits of Physical Activity</b></p> <p>In this portion of the lesson, students will receive educational information on the benefits of physical activity. Some topics that will be covered will be how physical activity can help control weight, improve mental health and mood, reduce risks of cardiovascular disease as well as reducing the risk of some cancers.</p>	<p>Lecture/Powerpoint (30 minutes)</p> <p>Each participant will receive a chart that they can take home that will have screening reading meanings.</p> <p>Lecture (20 minutes)</p> <p>Guest lecturer Julie Sturek will present this section. She will discuss the benefits of physical activity through an educational PowerPoint presentation. Julie will print off copies of her PowerPoint presentation that students can take home.</p>
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	<p><b>Conclusion:</b>  Program planners will summarize the content that has been presented. They will also thank everyone for participating. Program planners will also provide personal email addresses so that if any of the participants have any questions or comments they can email the program planners.</p>	<p>Lecture  (5 minutes)  Program planners will conclude the program.</p>
<p>Evaluation (How the learner will be assessed): Participants will be given a take home quiz that covers information covered in the lesson. Students who take the quiz home, fill it out, and return it to the program planners within a week will receive a five dollar gift card to Finish Line.</p>		

Appendix G - Budget

**PROGRAM TITLE: Steps to a Healthier Life**

<b>INCOME</b>	<b>AMOUNT</b>	<b>TOTAL INCOME/EXPENSES</b>
Participant Fee (15 participants @ \$30)	\$600	
Gifts from Sponsors	\$500	
Grant from local organization	\$1,400	
Pedometers (donated)	\$0	
<b>Sub-total</b>	<b>\$2,500</b>	<b>\$2,500</b>
<b>EXPENSES</b>		
<b>A. Personnel</b>		
Program Planners	\$0	
GA Exercise Science	\$0	
Representative from Health Science Department	\$150	
Recreation Center Staff	\$0	
Two Ball State students living off campus	\$0	
Two Ball State students living on campus	\$0	
Ball State University Lawyer	\$1,500	
<b>Sub-total A</b>	<b>\$1,650</b>	
<b>B. Expendable Supplies</b>		
Paper	\$100	
Tape	\$10	
Staples, Pens/Pencils	\$30	
Fee for Developing Pictures	\$3	
Disposable Cameras (4 cameras for \$16)	\$16	
T-shirts (20@ \$10 each)	\$200	
Cholesterol/Glucose Testing (15 @ \$20 each)	\$300	
Water Bottles (15 @ \$1.00 each)	\$15	
Finish Line Gift Card (15 @ \$5.00 Each)	\$75	
<b>Sub-total B</b>	<b>\$749</b>	
<b>C. Equipment</b>		
Tables (Donated)	\$0	
Computer (In the meeting space)	\$0	
Meeting space (Donated)	\$0	
Gym Equipment (Donated)	\$0	
Projector (In the meeting space)	\$0	
Workout Facility (Donated)	\$0	

	<b>Sub-total C</b>	<b>\$0</b>	
<b>D. Other</b>			
	Informational Table Fee	\$0	
	Rental fee for Fly Swatter for 1 week	<b>\$100</b>	
	<b>Sub-total D</b>	<b>\$100</b>	<b>\$2,499</b>
<b>BALANCE</b>			<b>\$1.00</b>

## Appendix H

### Flyer

Appendix I - Program Timeline

<u>Year 1</u>	J	F	M	A	M	J	J	A	S	O	N	D
Develop Program Rationale								X				
Conduct Needs Assessment									X			
Develop Goals and Objectives									X			
Create Intervention										X		
Conduct Formative Evaluation										X		
Assemble Necessary Resources											X	
Market Program												X
<u>Year 2</u>												
Pilot Test Program	X	X	X	X	X							
Refine Program						X	X					
Phase In Program								X	X	X	X	X
Refine Program												X
<u>Year 3</u>												
Phase in Program	X	X	X	X	X							
Refine Program						X	X					
Total Implementation								X	X	X	X	X
<u>Year 4</u>												
Collect and Analyze Data for Evaluation	X											
Prepare Evaluation Report		X	X									
Distribute Report				X								

**Continue with Follow-up for  
Long-Term Evaluation**

X

X

X

Appendix J - Informed Consent Form

**CONSENT FOR PARTICIPATION IN “STEPS TO A HEALTHIER LIFE” EXERCISE PROGRAM**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**I, \_\_\_\_\_, agree to participate in the “Steps to a Healthier Life” program.**

**I am aware that this program, and all the activities involved, is completely voluntary and all obtained participant information will remain confidential. I understand that glucose and cholesterol screenings will performed, but they are not mandatory.**

**I have received a copy, thoroughly read, and fully understand the program’s emergency procedures.**

**I have read the above statement and clearly understand its meaning. Further, I have been given an opportunity to ask and receive clarification for all of my questions.**

**Reviewed and Completed by:**

\_\_\_\_\_  
**Participant’s Signature** **Date:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Witness** **Date:** \_\_\_\_\_

Appendix K - Process Evaluation Instrument

In order to have a successful “Steps to a Healthier Life” program, we need your input! Please circle each answer. You do not need to include your name.

- 1= Strongly agree with statement
- 2=Agree with statement
- 3=Neutral
- 4= Disagree with statement
- 5= Strongly disagree with statement

I feel that...

The staff was knowledgeable.

1      2      3      4      5

The information was clearly presented.

1      2      3      4      5

The results of the glucose screenings were easily to understand.

1      2      3      4      5

The power point presentations were helpful to relate to daily routines.

1      2      3      4      5

The exercise classes were helpful to know how to do the techniques on my own.

1      2      3      4      5

I was satisfied with the program.

1      2      3      4      5

The staff and classes were organized.

1      2      3      4      5

How did you hear about the program?

What are ways the program could improve?

Would you recommend the program to friends?