

ASSESSMENT OF TEXAS SCHOOL CAPACITY AND INFRASTRUCTURE FOR TOBACCO PROGRAM IMPLEMENTATION TWO YEARS AFTER START-UP

Executive Summary

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EXECUTIVE SUMMARY

Purpose

This report is one in a series of evaluations whose purpose is to bridge the gap between research and real-world results for the *Texas Tobacco Prevention Initiative* coordinated through the Texas Department of Health (TDH). It constitutes the School Capacity and Infrastructure Assessment component of the University of Houston's "Texas Tobacco Pilot Study." Report objectives are to: (1) provide capacity analysis and infrastructure assessment for school-based programs in 2002; (2) compare results by Public Health Region (PHR) and other groupings to locate concentrations of schools with high probability of future success; (3) compare the current situation with the situation reported at "baseline" in 2000; and (4) examine utility of the model used in these analyses by evaluating predictive validity and by obtaining narrative feedback of school representatives' perceptions of the most important factors that helped or hindered implementation of their school's tobacco program. This report is designed to complement the following report: *School tobacco prevention and control status two years after initiation of the Texas Tobacco Prevention Initiative: Comparison of intervention and non-intervention schools* (Boerm & Gingiss, 2003).

Method

Middle schools and high schools in East Texas that received resources from TDH's *Texas Tobacco Prevention Initiative* during 2000-2002 were invited to participate in the current capacity analysis and infrastructure assessment (N=164). A 72% participation rate was achieved. Fifty of the 118 schools that participated in the assessment in 2002 had also participated in the baseline assessment in 2000. Criteria and methods for conducting the capacity analysis and infrastructure assessment were based on a decision support system named *Bridge-It*. It is designed to help plan for, manage, and evaluate use of new school-centered health and education programs. This system used a written questionnaire to collect campus-level data about the following:

- Key characteristics of the schools' implementation goals for their Tobacco Prevention and Control (TPC) programs;
- Status of environmental, organization, work unit, implementer, and other factors which influence the implementation of schools' TPC programs; and
- Likelihood of future or continued implementation of schools' TPC programs given their current situations.

Results

In 2002, secondary schools in East Texas that received resources from TDH to support their TPC initiatives were better situated to achieve future and/or continued implementation success than was the case for schools at baseline in 2000. Local implementation goals identified by the majority of schools in 2002 were to provide in-class education for students, student projects, out-of-class activities, auditorium style presentations, and incentives for TPC. The initiatives often were targeted to the schools' younger students and usually were intended to reach more than a single classroom of students. The schools' plans and goals typically anticipated involvement of a wide array of school faculty and staff, including teachers, counselors, peer leaders, school administrators, nurse/health professionals, and athletic directors/coaches.

In the majority of schools in 2002, perceived strengths included the following:

- *Compatibility:* TPC initiatives were compatible with priorities, structure, student needs, and culture of the schools;
- *Innovation Characteristics:* The adopted initiatives were advantageous, not too complex, and easy to use or implement;
- External Leadership: TPC campus-level coordinators had access to an active champion at the district level;
- *Implementers:* Campus-level implementers had skills and motivation to support successful implementation of TPC initiatives; and
- External Environment: External forces were supportive of campus-level TPC.

Substantially more than one-third (41%) of schools participating in the 2002 assessment were forecast to have a medium or high probability of future and/or continued implementation success for their TPC initiatives. These results will improve further as schools resolve "don't know" issues. This result represents notable improvement over baseline, where only 28% of schools had at least medium probability of achieving implementation success. Schools most likely to be poised for future implementation success were those in their second year of TPC implementation.

Significant increases were documented from baseline to follow-up in the extent to which the *External Environment* is supportive of campus-level TPC and in the extent to which *Implementers* (e.g., teachers and/or staff) are willing and able to implement TPC initiatives.

The factors measured at baseline in each school that proved most useful in predicting implementation success in 2002 were *Facilitation Processes* (e.g., planning, training, assisting, monitoring, communicating), *Resources* (e.g., funds, staffing, time, materials, facilities), and the *External Environment* (e.g., consistency with external mandates and policies, support from parents and community, lack of turmoil and lack of opposition in the community outside the school). School representatives' narrative perceptions of factors with the most influence were similar to the quantitative results. Teachers, counselors, and other school representatives identified resources (e.g. time, funds) and facilitation processes (e.g., assistance from specialists) as key factors. They also reported leadership and implementer enthusiasm as important influences.

Constraints were identified that can pose barriers to long-term success. For example, *Facilitation Processes* and *Resources*, as noted above, are two of the factors most frequently stated to be keys to successful implementation. These two factors also were the ones that most often had low scores in campus assessments in 2000 and again in 2002. The specific concerns expressed that pertained to these two factors are as follows:

- Very few schools have written plans to guide their implementation efforts or procedures for providing on-going training, coaching, technical assistance, or monitoring and feedback.
- The majority of schools indicated they do not have the right numbers of the right kinds of staff to support effective implementation of TPC or enough daily time allocated for planning and support of the program.

• Actual implementation time lines for TPC initiatives at the schools tend to be short or unknown.

Other matters of concern also were identified in the current assessment.

- Although local plans and goals were focused on implementing initiatives that are heavily classroom based, the programs often did not involve as much as 15 hours of engaged time for the students. The programs rarely involved parents or included cessation services for students or staff and their families.
- Tobacco prevention and control was reported to be a top priority for only a few school principals; at many schools, the principal was not actively engaged with the program.
- Many schools in their second year of implementation were more favorably situated than those in their third year to achieve future or continued implementation success.
- Separate analyses of the situation at schools with predominately minority populations showed that a lower chance for implementation success was evident in schools in which more than half of the student body is Hispanic. Low scores for factors pertaining to *School-based Leadership* and *Implementer Characteristics* were more often present in these schools.

Recommendations

Options for building on identified strengths and continuing to increase capacity and infrastructure for school-based tobacco prevention and control include:

- Sharing results of this report with participating schools. Establishing a feedback loop would provide opportunities for special recognition by state, regional, and campus leaders for the substantial progress made since the baseline year of 2000. It also would provide information to assist with planning for the future.
- Developing and distributing "prototypes" of multi-year written plans for implementing comprehensive school-based TPC. This kind of action planning could fortify schools' facilitation processes and be a major time saver for campus-level planning teams and program implementers. This strategy also could help to encourage campus-level leadership teams to expand their school-based TPC programs to include cessation services, parent involvement activities, and other elements of comprehensive school-based TPC. Tobacco program directors/coordinators on the campuses identified in this assessment as having achieved implementation success may be experienced, motivating consultants.
- Establishing a system for ongoing dialogue with school principals. Two-way communications between campus-level leaders and program managers at state and regional levels would encourage and reinforce the school principal's active support of TPC. Program managers at regional and state levels can help campus-level coordinators increase the principal's involvement by offering seminars, personal correspondence, or other activities specifically designed to persuade school principals of the merits of school-based tobacco prevention and control. Principals on campuses where support of school leaders was cited as a positive influence would be valuable consultants in the design of a system for ongoing dialogue.

- Conducting follow-up research to identify reasons why schools in their third year of implementation and schools in which the majority of the student body is Hispanic were shown in the study to have relatively lower chances for future and/or continued implementation success. Such follow-up could help to identify important issues for continued efforts to reduce health disparities and promote sustainability.
- Exchanging information with program managers and evaluators in other states regarding the utility of using tools like *Bridge-It* to help measure and strengthen capacity and infrastructure for effective implementation of school-based tobacco prevention and control.

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