Running Head: Senior Health Awareness & Prevention Education (SHAPE)

Senior Health Awareness & Prevention Education (SHAPE):
A Washington County senior health project

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Spring 2009
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Executive Summary

SHAPE: A Washington County senior health project

The ‘Senior Health Awareness & Prevention Education’ (SHAPE) program, based in Washington County, Georgia, was designed to target seniors aged 65 years and above. A needs assessment was conducted by collaborating with the Archway Partnership Project, reviewing existing literature, and analyzing current secondary data. The needs assessment process identified two main areas of concern related to health among seniors: Preventive practices among the target population were fairly low and the existing Community Health Centers were being underutilized. The need to promote screening behaviors and social support for health screening were both identified as key components of the program.

Based on our findings from the needs assessment, we identified the behavior risk factor of “not getting screened” and the environmental risk factor of “lack of social support,” and we aimed to increase the performance of both these factors through our program. The measureable objective for promoting screening practice among the seniors is to “increase the number of seniors utilizing the Community Health Centers for health screenings by 10% within 2 years of program implementation,” while the measureable objective for the environmental factor is to “increase the number of seniors who report strong social support for health screenings by 30% within 6 months of program implementation.” We thereafter defined several performance and change objectives that will capture the measureable objectives. We also developed our performance and change objectives based on the Transtheoretical Model. Determinants such as beliefs, attitudes, knowledge, self-efficacy, social norms, outcome expectation, cues to action, access to resource and reinforcement were generated from existing literature and theories.

Various methods and strategies were used in our program, including modeling, tailoring, individualization, gain-frame, cues, persuasive communication, guided practice, reinforcement, stimulating communication, and mobilizing social support. Each of these methods was based on theories and empirical evidence. A key aspect of the program was the development of the acronym ‘SHAPE,’ which not only signifies the positive association between screening and health, but can also be extrapolated to other health related behaviors. Messages and materials, such as brochures to promote screening and social support, as well as a poster, were developed that not only had role model stories, but also basic information related to screening. Each of
these resources contains simple yet essential messages for increasing screening. We also
developed supplemental resources for the community partners, i.e. the Washington County
Senior Center and the Community Health Centers, which would act as cues to action and ensure
proper program implementation.

The scope of this program is to provide tailored resources and messages to the target
population. The materials were pre-tested with members of the target audience, community
partners/stakeholders and peers, and revised accordingly. The ‘SHAPE’ program will be
launched through a formal introduction of the program to the community partners, followed by
dissemination of materials to the target audience. The two delivery mechanisms that will be
used for our program are interpersonal communication and display of print materials.

The Intervention Mapping process has been used throughout the development of the
SHAPE program and a complete review of the steps follows in the body of this paper.
Step 1: Needs Assessment Summary

Priority Group and Project Setting

Located in East Central Georgia, Washington County (WaCo) was the 10th county to be formed in Georgia (Washington County Chamber of Commerce). It has a total population of 20,937 out of which 13% (2761) are adults aged 65 years and above, with a majority of them being white (56%) and female (63%) (Georgia Department of Human Resources, 2009). With respect to economy, at least 21.5% of older adults in WaCo live below the Federal Poverty Line as compared to the state level of 14% (US Census Bureau), although at least 92% of them were covered by Medicare part B (Department of Health & Human Services). At the same time the standard morbidity ratio of WaCo for 2007 was found to be higher than the state ratio reflecting the poorer health status of this population. The age adjusted morbidity rate was high at 25,841.2 as compared with that of the state (10,527.4) (Georgia Department of Human Resources, 2009).

The land area of WaCo is 680 square miles with a population density of 31.1 as compared with the state population density of 141.4, designating it to be a rural county (US Census Bureau). Research shows that compared to their urban counterparts, rural residents are less likely to attain preventive health care services and also lag behind urban residents to meet the Healthy People 2010 goals (Casey, Thiede Call, & Klingner, 2001). Another study based in North Carolina showed that although there was no difference between inpatient and out-patient services among older adults living in urban or rural areas, cost of health care was a significant barrier to utilization of health care among rural seniors (Blazer, Landerman, Fillenbaum, & Horner, 1995). Another study on African Americans showed that although there was no significant difference in the utilization of health care services among rural and urban participants, those living in the rural areas were less likely to receive counseling on physical activity and smoking (Hueston & Hubbard, 2000), thus emphasizing the need to develop preventive services in rural areas. In sum, the need to increase community based health promotion programs in the rural areas has been well established.

The Archway Partnership Project is actively involved in public health programs in WaCo. Considering the health facts of seniors in this county, the need to focus on this population was realized. Thus, in collaboration with the Archway Partnership Project, the Washington County senior health project was designed to target older adults, aged 65 years and
Information on health needs of the older adults in the community was obtained from focus groups and surveys conducted by the Archway Partnership Project in 2008.

Health Issues and Behavioral/Environmental Factors

Older adults suffer from several chronic diseases, resulting in reduced quality of life, increased healthcare costs, and the need for long-term care. According to reports from the Centers for Disease Control and Prevention (CDC), nearly 80% of older adults suffer from at least one chronic disease (arthritis, cancer, cardiovascular health and obesity) (CDC, 2007). Health behaviors such as smoking, lack of physical activity, and poor eating habits are major predictors of these chronic diseases and each of them can be addressed through promotion of healthy behavior choices, health education and community policies and practices. Research has proven the need for preventive health services for reducing morbidity and mortality in older adults and also to preserve function and quality of life. In order to promote this, the CDC recommends timely immunization and regular health screenings (CDC, 2007).

Behavioral Factors. The US National Report Card on Aging reflects that the country has achieved 4 of the 15 indicators measured by the Healthy People 2010 goals, which include mammogram, colorectal and cholesterol screening (CDC, 2007). On the other hand, screening practice is comparatively low in Georgia, and ranks 38 and 37 for mammography and colorectal cancer screening respectively out of the 50 states.

Research on behaviors associated with screening practices has revealed that threat and beliefs play a significant role in determining screening behaviors in older adults (Wardle, et al., 2000). Screening practice has also been found to be low in groups with lower income and education (Breen, Wagener, Brown, Davis, & Ballard-Barbash, 2001). Thus health promotion programs should be targeted towards this vulnerable section of the population. With respect to the need for increasing screening practices and the current morbidity rate, we prioritized this health behavior and addressed it through our program.

Environmental Factors. The program setting has one hospital, Washington County Regional Medical Center (WCRMC), and three Community Health Centers, operated by Community Health Care Systems, Inc. WCRMC has a high occupancy rate of 51.2, and almost 62% of hospital admissions occurred directly from the Emergency Room (Archway Partnership Project, 2008), indicating the burden on the health system. The number of physicians per
100,000 population in WaCo is only 168 as compared with 202 for Georgia. This reflects the lack of adequate health infrastructure, and emphasizes the need to focus on the Community Health Centers. Results from the focus group discussions and surveys also indicate the underutilization of the Community Health Centers: 96% of the older adults received their health care from WCRMC, 68% used it for emergency services and at least 80% used it for inpatient or outpatient services. On the other hand, only 40% of them were using the Community Health Centers. In order to improve access to screening services and relieve the burden on WCRMC, the need to promote the Community Health Centers was well established.

We assessed the environmental factors affecting the quality of life through brainstorming among peers and identified absence of inadequate promotion of physical activity, lack of tailored information for at-risk populations and absence of social support for promotion of health screening practices as the key determinants. Focus group findings of from the Archway Partnership Project revealed several other environmental factors affecting health issues in the target population, i.e. access to specialized services and lack of proper transportation. 12% of the focus group participants also expressed that they had no knowledge on “where to go” for these services (Archway Partnership Project, 2008). It was also found that public education programs and communication about health information was lacking in this community.

Health promotion programs based on the social network and social support theory has been widely tested in different settings and population, specifically in the older age group. A study on African-American women showed that women who participated in church programs and had increased social ties were more likely to obtain routine mammography (Kang, Bloom, & Romano, 1994). Social support has also been identified as “a motivator of healthy practice” (Miller & Iris, 2002). The positive effects of social support were also established in breast cancer screening practices among post-menopausal women. The study found that with a decrease in emotional and informational support, there was also a decrease in the screening rate for breast-cancer among the study participants (Messina et al, 2004). Through our project, we wanted to target the screening practice among older adults and also capture the importance of the Community Health Centers. On further discussion with the Archway Partnership Project and based on previous findings, the need to develop social support and network was identified. We therefore decided to develop a social support system by focusing on seniors who were getting screened and also utilize the Community Health Centers for promoting social network.
Step 2: Matrices of Program Change Objectives

Measurable Objectives

To formulate measurable objectives, the behavioral risk factor of “not getting screened” and the environmental condition of “poor social support” are redefined in terms of what is to be accomplished through the program (Bartholomew, Parcel, Kok, & Gottlieb, 2006, p. 254). In the needs assessment, Washington County seniors are identified as being at increased risk for morbidity due to poor screening and preventive practices. Therefore, when determining the behavior related objective, this risk is redefined in terms of a health-promoting behavior: Getting screened. The intention in this case is to protect against the potential risk caused by the lack of screening through the promotion of secondary prevention. To facilitate evaluation, the health behavior objective is phrased as follows: Increase the number of seniors utilizing the Community Health Centers for health screenings by 10% within 2 years of program implementation.

Since environmental factors also influence risk behavior, the environmental condition of “poor social support” is likewise reexamined prior to forming the program’s measurable objectives. As part of the interpersonal environment, social support “may provide modeling and reinforcement for the practice of specific health behaviors” (Bartholomew et al., 2006, p. 260). In the case of the Washington County senior health project, the intention is to improve social support in the interpersonal environment for the sake of promoting screening and preventive practices, the program’s intended health-related behavior. Again bearing the evaluation process in mind, the environmental condition objective is phrased as follows: Increase the number of seniors who report strong social support for health screenings by 30% within 6 months of program implementation.

Performance Objectives

Once measurable objectives are established for both the behavioral and environmental outcomes, performance objectives are defined for each. Performance objectives break down both the behavioral and environmental changes into recognizable components and “help ensure the appropriateness” of program expectations (Bartholomew et al., 2006, p. 265).
The Washington County senior health project performance objectives are firmly grounded in DiClemente’s and Prochaska’s Transtheoretical Model (TTM). This theory has been applied to screening behaviors in the past, including “mammography and other cancer screening,” and to “physicians practicing preventive medicine” (Prochaska, Redding, & Evers, 2008, p. 98). Both the behavioral and environmental changes are broken down using the stages of change construct. The performance objectives for the behavioral outcome move a precontemplator, someone who is not even considering getting screened in the next six months, along the continuum of behavior change and into the maintenance stage of annual screening (see Table 1). The performance objectives for the environmental change similarly move a precontemplator, someone who has not considered providing social support for screening, through the stages and into action, talking to their peers about screening (see Table 2).

Table 1: Behavioral Performance Objectives and Stages of Change

<table>
<thead>
<tr>
<th>Performance Objective</th>
<th>Stage of Change</th>
<th>Description of Participant</th>
</tr>
</thead>
<tbody>
<tr>
<td>PO.1. Recognize importance of getting screened</td>
<td>Precontemplation</td>
<td>Maybe considering getting screened within the next 6 mos</td>
</tr>
<tr>
<td>PO.2. Decide to get screened</td>
<td>Contemplation</td>
<td>Planning to get screened within the next 30 days</td>
</tr>
<tr>
<td>PO.3. Go get screened</td>
<td>Preparation</td>
<td>Getting screening</td>
</tr>
<tr>
<td>PO.4. Maintain annual screening practices</td>
<td>Action</td>
<td>Getting screening regularly for longer than 6 mos</td>
</tr>
</tbody>
</table>

Table 2: Environmental Performance Objectives and Stages of Change

<table>
<thead>
<tr>
<th>Performance Objective</th>
<th>Stage of Change</th>
<th>Description of Participant</th>
</tr>
</thead>
<tbody>
<tr>
<td>PO.1. Recognize implications of low prevalence</td>
<td>Precontemplation</td>
<td>Not considering providing social support for screening</td>
</tr>
<tr>
<td>PO.2. Learn more about screening process</td>
<td>Contemplation</td>
<td>Providing social support for screening within the next</td>
</tr>
<tr>
<td>PO.3. Identify peers who are not getting</td>
<td>Preparation</td>
<td>Planning to providing social support for screening within</td>
</tr>
<tr>
<td>PO.4. Talk to those peers about screening</td>
<td>Action</td>
<td>Providing social support for screening</td>
</tr>
<tr>
<td></td>
<td>Maintenance</td>
<td></td>
</tr>
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</table>
Determinants

Perhaps the most important task in Step 2 is the selection of personal and external determinants. Bartholomew et al define determinants as the factors “that can be hypothesized to mediate the behavior of the at-risk group or modification of the environment by the responsible agent” (p. 276). The core processes are particularly useful in the selection of determinants and involve brainstorming, reviewing exiting literature and theories for pertinent constructs, and collecting additional required data from the target audience. The most relevant and changeable determinants were selected and a brief discussion on each follows.

Personal Determinants. Personal determinants are those which lie within the individual and are therefore under his/her control. For screening behaviors, the selected personal determinants are beliefs, skills/self-efficacy, knowledge, and outcome expectations. For increasing social support, the selected personal determinants also include beliefs, skills/self-efficacy and knowledge.

- **Beliefs.** Many articles show an association between seniors’ beliefs about health screening and their actual screening behavior (Blair, 1998; Kelly, Dickinson, DeGraffinreid, Tatum, & Paskett, 2007). Specifically, the belief that a doctor is only used when one is sick appears to be a barrier to seeking preventive care among the elderly (Casey et al, 2001; Stegbauer, Sandstrom-Wakeling, Nied, Gambino, Zak, & Duffy, 2003). In terms of providing social support, seniors must first firmly believe in the benefits of preventive care, both for themselves as well as their peers.

- **Skills/Self-efficacy.** Taken from the Social Cognitive Theory, self-efficacy refers to “beliefs about personal ability to perform behaviors that bring desired outcomes” (Viswanath, 2008, p. 171). The idea of empowering seniors to share in the responsibility of their healthcare management through development of specific skills which enable them to bring about change is a common theme in the literature (Blair, 1998; Gulitz, Bustillo-Hernandez, & Kent, 1998; Schofield, Kerr, & Tolson 2007). The need for improved self-efficacy is echoed in data collected by Archway during a 2008 focus group with Washington County seniors (Archway Partnership Project, 2008). Self-efficacy will also help determine
whether or not a senior feels comfortable providing social support when discussing screening practices with peers.

- **Knowledge.** Unfortunately, many seniors are simply not aware of recommended screening guidelines (Blair, 1998; Schulmeister, 2000). Furthermore, few seniors can name specific screening tests (Kelly et al, 2007). In terms of providing social support, many seniors are likewise unaware of how influential they are in their peers’ decisions or of the overall impact on society of poor screening practices among their peers.

- **Outcome Expectancies.** Also taken from the Social Cognitive Theory, outcome expectancies refer to the “beliefs about the likelihood and value of the consequences of behavioral choices” (Viswanath, 2008, p. 171). Ageism (Balducci, 2005) and fatalism (Blair, 1998; Gulitz et al, 1998) can both lower seniors’ outcome expectancies for screening services. Furthermore, few seniors can describe the benefits associated with screening (Busch, 2003; Casey et al, 2001).

**External Determinants.** External determinants are not under the individual’s control and usually refer to social or structural influences (Bartholomew et al, 2008, p. 277). For screening behaviors, the selected external determinants are cues to action and social norms. For increasing social support, the selected external determinants are access to resources and reinforcement.

- **Cues to Action.** Taken from the Health Belief Model, these prompts provide the extra push needed to trigger behavior change and can include reminder systems, interpersonal communication, and printed materials that raise awareness about screening.

- **Social Norms.** Drawing upon concepts from the Theories of Reasoned Action and Planned Behavior, “social norms” refer to the perceptions of peer behaviors and beliefs that influence individual behavior. Therefore an important part of increasing social support for screening is having seniors share their experiences with screening (Miller & Iris, 2002).

- **Access to Resources.** Drawing upon the Social Cognitive Theory’s concept of facilitation, “access to resources” involves increased availability of tailored
messages and is helpful in promoting the provision of social support and screening practices.

- **Reinforcement.** Drawing upon the Social Cognitive Theory’s concept of incentive motivation, “reinforcement” involves the use of rewards and praise and is helpful in promoting modeled behaviors.

*Change Objectives*

Combining the selected determinants with the performance objectives results in the creation of change objective matrices. Both the behavioral and environmental matrices for the Washington County senior health project focus on the interpersonal level. Specific change objectives are formed for relevant determinants with the Transtheoretical Model’s “processes of change” construct in mind (see Table 3) (Prochaska et al, 2008). These theory-based change objectives help move the subject from one stage – in this case, one performance objective – to the next. Please see Appendix A for complete behavioral and environmental matrices of change objectives.

*Table 3: Change Objectives and Processes of Change*

<table>
<thead>
<tr>
<th>Change Objectives</th>
<th>Behavioral Change</th>
<th>Environmental Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Related to PO.1</td>
<td>Consciousness raising</td>
<td>Consciousness raising</td>
</tr>
<tr>
<td>Related to PO.2</td>
<td>Self-reevaluation</td>
<td>Environmental reevaluation</td>
</tr>
<tr>
<td>Related to PO.3</td>
<td>Self-liberation</td>
<td>Helping relationships</td>
</tr>
<tr>
<td>Related to PO.4</td>
<td>Social liberation</td>
<td>Social Liberation</td>
</tr>
</tbody>
</table>

*Step 3: Methods and Strategies*

The methods and strategies are important to the design of the intervention. The methods and strategies are theoretically based and are used to determine material types and messages. As mentioned in the previous section, the methods and corresponding theories used in this intervention are tailoring and individualization (TTM); gain-frame and cues (HBM); modeling, persuasive communication, guided practice, facilitation, and reinforcement (SCT); and stimulate
communication and mobilizing social support (theories of social networks and social support).
See Appendix B for tables of methods and strategies for change objectives.

Message tailoring is one of the most important methods used in this intervention. Messages tailored to a specific target audience can provide more relevant information, address common questions or concerns, and be of greater interest to that target audience than general, non-specific messages (Williams-Piehota, Schneider, Pizarro, Mowad, & Salovey, 2003). Tailored messages have been shown to have a positive affect on changing health behaviors including cancer and cholesterol screening (Skinner, Stretcher, & Hoppers, 1994; Kreuter, Oswald, Bull, & Clark, 2000). Tailoring can be based on personal factors such as demographic information (Williams-Piehota, Schneider, Pizarro, Mowad, & Salovey, 2003), or behavior change such as the stages of the transtheoretical model (TTM) (Rakowski, Ehrich, Goldstein, Rimer, Pearlmen, Clark, et al., 1998). Tailoring messages based on the stages of TTM has been shown to increase rates of mammography more than non-tailored messages (Rakowski, Ehrich, Goldstein, Rimer, Pearlmen, Clark, et al., 1998).

This intervention targets senior citizens who are either in the precontemplation and contemplation stages, or the action and maintenance stage. Tailored messages specifically designed for precontemplators and contemplators include basic information about the “Why,” “What,” “How,” and “Where,” of screenings. A list of specific screenings important to maintain senior health is included to increase the relevancy of the message. A different set of tailored messages were created for the seniors in the action and maintenance stage. These messages are focused on increasing social support among seniors. Messages such as, “share your positive screening experiences with others,” and “make an appointment with your friend to go get screened together,” encourages the seniors to discuss screening and identify those seniors who are not getting screenings. In addition to using tailored messages, the materials provide individualized instructions for the seniors depending on their TTM stage. For the precontemplators and contemplators, instructions about where to go to get screened including the addresses and phone numbers of the community health centers will be included. For those in the action or maintenance stage, materials to increase social support include simple instructions regarding which people the seniors should be sharing their screening experiences with, how to approach other about screenings, and how to help others go and get screened.
The messages created for this intervention were framed in terms of the benefits associated with screenings according to the health belief model (Champion & Skinner, 2008). Emphasizing the benefits of performing a health behavior is known as gain framing (Rothman & Salovey, 1997). Gain-framed messages have been shown to be effective in increasing preventive health behaviors (Rothman & Salovey, 1997; McCaul, Johnson, & Rothman, 2002). Because getting screened is considered to be a prevention behavior, gain framed messages are more appropriate and more effective to use than loss framed or risk-related messages (Rothman & Salovey, 1997). Health screenings can evoke feelings of discomfort, uncertainty, and fear for many seniors. Some seniors have reported that they are afraid of finding colon cancer if they get screened (Berkowitz, Hawkins, Peipins, White, & Nadel, 2008). This fear can prevent seniors from receiving the screenings that they need to maintain their health. Therefore, using gain-frame messages that emphasize the benefits of health screenings, could then increase positive beliefs and outcome expectations towards screenings, and influence the seniors to go get screened.

One strategy for using gain frame messages is to associate getting screened with maintaining independence and preventing disability. Maintaining an independent lifestyle and preventing disability are important to many seniors, so highlighting these outcomes as benefits to getting screened could make the seniors more likely to engage in screening behavior. Key words and phrases such as “healthy,” “active,” “maintain health,” and “feeling great,” are used to remind the seniors of the benefits of screenings. These gain framed messages can lead seniors to articulate the benefits of getting screened, express positive feeling towards getting screened, and express the feeling that screening helps maintain independence and prevents disability.

Cues to action, also part of the HBM (Champion & Skinner, 2008), are used as a method not only to increase screening activity, but also to support the maintenance of screening behavior. In the materials for the precontemplators and contemplators, cues to action will be posters hung up in the Senior Center and in the Community Health Centers. In the Senior Center, the posters will be hung in close proximity to fliers, which will contain addresses and telephone numbers of the local Community Health Centers. When the seniors see the posters, they will be reminded that they need to make an appointment. Including the telephone numbers on the back of the fliers can also serve as a reminder to make a screening appointment.
After the seniors get screened, they will receive another flier and a sticker with their next appointment time on it. The purpose of this sticker is to mark the date of their next appointment on their calendar as a reminder. In addition, the Community Health Center will either call or mail a written reminder to the senior a few days prior to the appointment time. Reminders such as these have been shown to aid the screening behavior (Fernandez, Palmer, & Leong-Wu, 2005). Some women reported that they would not have a mammogram if they did not have some sort of reminder (Fernandez, Palmer, & Leong-Wu, 2005). Therefore, cues to action are important in the maintenance of the screening behavior, and are crucial to the success of this intervention.

Many of the methods used in these materials are derived from the social cognitive theory, (SCT). SCT posits that behavior is a product of an interaction between personal, environmental, and behavioral influences (McAlister, Perry, & Parcel, 2008). According to Bandura (2004), the core determinants of SCT include “knowledge of health risks and benefits of different health practices, outcome expectations about the expected costs and benefits for different health habits […], and the perceived facilitators and social and structural impediments to the changes they seek.” The methods used in this intervention are modeling, persuasive communication, guided practice, facilitation, and reinforcement.

Modeling can promote changes in health behavior through vicarious experiences provided by social models (Bandura, 2004; Bandura, 1998). The materials include role model stories about other seniors who have had positive screening experiences. These role models in the stories look and speak the same way as the target audience, so the target audience identifies with them. The role model stories show the seniors that others like themselves get screened, which can lead to increased positive feelings about screenings (Bandura, 1998). Persuasive communication is used to demonstrate to the seniors that screenings are simple and easy. The emphasis is that the screenings are so simple that they can be performed in the senior’s regular healthcare provider’s office or at the local Community Health Centers. Contact information for the Community Health Centers is included to highlight the different locations in which seniors can receive screenings. The materials also include instructions about how to get screened. These instructions offer a step-by-step guide for the seniors to follow before getting screened, after getting the results, and when speaking their friends and family about getting screened. A brochure to increase social support will also include instructions to guide the seniors when
talking to friends and family members about getting screened. The instructions included in the materials will offer guided practice for the seniors to develop the skills they need to get screened (Bandura, 2004).

The external factors, discussed in SCT, are important in this intervention (Bandura, 1998; 2004). Both the environments of the Senior Center and the Community Health Centers are crucial to the sustainability and success of this program. Letters given to the CHC staff and the Senior Center staff will encourage them to facilitate the intervention by displaying the materials, and promoting discussion about screenings among the seniors. The Senior Center staff in particular should reinforce social support behavior by encouraging seniors to talk to their friends and family about screenings. This reinforcement will come in the form of verbal praise, which can, in turn, increase the senior’s self-efficacy toward sharing their experiences (Bandura, 2004).

The final method used in this intervention is to stimulate communication and mobilize social support. This method comes from the theories of social networks and social support. Social networks can positively impact health-related behaviors (Kinney, Bloor, Martin, & Sandler, 2005). Research indicates that people with larger social networks engage in more preventive health behaviors such as screenings (Kinney, Bloor, Martin, & Sandler, 2005). Therefore, it is important to increase social support among the seniors. Materials such as a social support brochure are designed to facilitate discussion among seniors and increase social support. The purpose of the social support brochure is to get the seniors who have already been screened to assess the health practices of their peers including mobility limitations and activity levels. Messages such as “buddy up!” and “offer your friend a ride to the appointment” are used to get seniors to encourage one another to get screened. Through this discussion about screenings, social networks can be strengthened and extended.

Step 4: Program Design

Scope

The scope of this project is to deliver tailored messages promoting health screening to the seniors of Washington County. The messages will be tailored for two distinct groups: Seniors in the precontemplation or contemplation stages regarding regular health screening practices, and seniors in the action or maintenance stages regarding regular screening practices.
To reach the first group, the precontemplators and contemplators, materials designed to motivate seniors for regular screening will be distributed through the Washington County Senior Center. These materials will encourage seniors to progress through the Transtheoretical Model’s continuum of behavior change by raising awareness and self-efficacy through the provision of basic information needed to prepare for and execute the screening process. The Senior Center was selected as the primary distribution channel because of its client base of local seniors. There is potential for expansion of distribution channels to include local area churches in the future, which may further increase the scope of this program.

To reach the second group, those seniors already in the action or maintenance stages of screening, program materials will be distributed at the local Community Health Centers, operated by Community Health Care Systems, Inc. These resources will both reinforce the senior’s screening practices and also encourage him/her to provide social support to peers for regular health screening. The Community Health Care Systems, Inc, network was selected as the primary distribution channel as a result of findings from the needs assessment performed in Step 1. Capable of accepting new patients, offering sliding scale fees and screening services, and underutilized in the community, these three centers provide an ideal setting. By tapping seniors who already use the Community Health Centers for screening services, the program will in effect create informal peer educators who are knowledgeable of the process and possibly able to buddy up with new screeners, thereby easing transportation issues for some. Should the project expand to surrounding Glascock, Hancock, Jefferson, Johnson, and Warren counties in the future, program planners should consider involving Tri-County Health System, Inc, which operates three additional health centers in the area (see Figure 2).

The Washington County senior health project hopes to create a partnership between local healthcare providers and community leaders, a strategy recommended in the literature (Gulitz et al, 1998; Mullins et al, 2005). According to Gulitz et al, “perhaps the most effective programs have been those in which primary care providers and their office staff collaborate with community leaders and institutions in developing protocols to help women locate transportation, financial, and social support resources for screening and follow-up care” (Gulitz et al, 1998, p. 294).
The launch of the Washington County health senior project will involve the formal introduction of the program design and materials to staff members of both the Senior Center and the Community Health Centers. Although members of each organization have been involved in the planning process, a meeting to discuss program details will be necessary to facilitate proper implementation. Once the materials have been disseminated and processes reviewed, the target audience will be formally introduced to the program.

Precontemplators and contemplators will first encounter the program at the Senior Center. Active and maintenance screeners utilizing the Community Health Centers will first encounter the program at their next appointment. A unique feature of this program is that it incorporates a self-sustaining element: When a precontemplator successfully progresses along the continuum of behavior change and gets screened at a Community Health Center, he/she will then re-encounter the program as an active screener, thus receiving the program materials designed to increase social support. A cycle is created as this senior then continues on to share
his/her experience and potentially “recruit” other precontemplators and contemplators to follow his/her example.

The program adopters at the Senior Center and Community Health Centers will periodically assess the amount of program resources they have available and notify the Archway Partnership Project if they need additional materials. Archway staff will also periodically check-in with the Senior Center and Community Health Centers to ensure that the program continues to be implemented properly.

**Delivery Mechanisms**

Two major communication channels are utilized in the SHAPE program: Interpersonal and display print. Interpersonal vehicles include target audience peers and staff members of both the Senior Center and the Community Health Centers. Miller and Iris describe the importance of interpersonal channels, specifically the sharing of expertise and experience, in the promotion of healthy lifestyles for older adults (Miller & Iris, 2002). Peers offer an affordable way to disseminate messages by stimulating discussion and sharing experiences throughout the target audience. However, the quality of information passed through this informal peer network may be difficult to monitor. At the moment, SHAPE provides informal education through printed materials rather than the formal training that true peer educators receive. Staff members, another vehicle of the interpersonal channel, serve as influential and trusted message sources to the target audience.

The display print communication channel will have many vehicles. This channel was selected due to the large amount of information being conveyed. Gulitz et al articulate the need for “culturally sensitive, tailored messages and media” and encourage the “development of resources to identify affordable screening options rapidly” (Gulitz et al, 1998, p. 293, 294). Due to concerns related to target audience education levels and visual limitations, all materials developed will use simple, clear language and large, easy to read fonts. The following resources will be developed:

- Brochure tailored for precontemplators and contemplators explaining the why, what, where and how of health screening
• Brochure tailored for seniors in action and maintenance stages of regular health screening reinforcing their behavior and encouraging an increase in social support for health screening
• Poster providing a cue to action for and raising awareness of health screening
• Two-part stickers to reinforce screening behaviors, encourage discussion about screening, and serve as a cue to action (calendar reminder)

All materials will be neatly packaged and include a tailored instruction letter for each site, as well as a table tent with program reminders to serve as a point-of-contact prompt for staff members during interaction with the target audience.

Messages

The key messages for the Washington County senior health project are listed below and will be discussed in further detail as they pertain to each of the program’s resources.

• Health screenings must be regular
• Even those who eat right and are active should be screened regularly
• Health screenings help maintain independence and avoid disability
• Community Health Centers provide convenient access to screening services

Themes

The acronym “SHAPE,” short for Senior Health Awareness & Prevention Education, was chosen as the overall theme for the Washington County senior health project because it reinforces a key message that even those who eat right and are active are only in “shape” if they also engage in regular screening practices. Senior Health Awareness & Prevention Education (SHAPE), although currently focused on health screening, could be expanded to include other services to promote healthful living for Washington County seniors.

The Cherokee rose, the Georgia state flower, was selected for the logo because it embodies beauty and vitality (see Figure 2). The Cherokee rose logo and SHAPE theme will be used on all program materials.
Parameters of Setting and Intervention Context

The parameter of the setting is the Washington County Senior Center and the Community Health Centers. The screening brochures and posters will be displayed in the Senior Center, and the social support brochure will be given to seniors after they have been screened at the Community Health Center. If this intervention is successful, then there could be an opportunity to disseminate similar materials to other doctor’s offices, Washington County Regional Medical Center, or at the Washington County annual health fair.

The context of these settings is important to the continuation and success of the intervention. The Washington County Senior Center provides a warm and friendly environment for the seniors to socialize. Many of the seniors attend the Senior Center to talk to their friends, and to participate in planned activities. The social interaction between the seniors allows for discussion about screenings. When speaking to seniors at the Senior Center, many of them openly discussed their health status including what doctors they went to and what type of chronic conditions they had. The seniors who discuss their health status with others can promote this intervention by asking their friends if they have been screened. At the Senior Center, seniors can also strengthen their social networks by reaching out to others who may not have transportation or are too afraid to go to the doctor’s office. When the seniors share their screening experiences...
or lend instrumental support to their peers, then their social networks are strengthened and there is increased social support to get screened.

Program Materials and Feedback

Please see the following relevant Appendices for additional material:

- Appendix C: Informed consent and evaluation tool
- Appendix D: Feedback summary tables and original feedback forms from target audience members, stakeholders, and peers
- Appendix F: Revised resources, supplemental resources, and original resources

SHAPE Screening Brochure

The screening brochure is specifically designed to deliver the why, what, how, and where messages of health screening services. The goal for this resource is to motivate precontemplators and contemplators to engage in screening practices by improving the health literacy of seniors, advocated by Mullins et al (2005), and facilitating preventive healthcare visits, advocated by Patel et al (2004). A review of recommended screening guidelines found in the literature yielded a list of potential screening tests for seniors, from which a few were selected based on their importance, complexity, invasiveness, and overall ease. These factors were chosen since fear of pain, fear of expenses, length of test (time consumption), and embarrassment have been reported as common barriers to some screening tests (Busch, 2003).

The screening brochure utilizes the themes and key messages of SHAPE (Step 4, Messages and Themes). Most importantly, the brochure is intended to convey how simple, easy, and convenient the screening process can be. The brochure addresses a plethora of behavioral change objectives, including B.1, K.1, OE.1, SSE.2, K.2.1, K.2.2, SSE.3.1, K.3, OE.3, B.4, K.4, SSE.4.2 (see Appendix A for specific change objectives).

A variety of theory-based methods were used to develop the screening brochure. First, all messages have been tailored for seniors in the precontemplation and contemplation stages of health screening. Second, persuasive communication is found throughout the brochure and highlighted in the “Tips!” sections as a way to encourage seniors to overcome specific barriers, including the lack of a primary care provider, questions regarding health insurance, and concerns about cost. Third, the information has been individualized to the senior population and includes
simple messages in large, crisp font to facilitate readability among those with visual and literacy limitations. Fourth, all messages have been composed using a “gain frame” to highlight the benefits of health screening, including the maintenance of independence and avoidance of disability. Finally, coping models with similar characteristics of the target audience provide quotes to help motivate the precontemplators and contemplators.

Overall, the feedback on the screening brochure was favorable. It was pretested with members of the target audience (n=10), stakeholders (n=3), and peers (n=10). A summary of the results as well as copies of the original evaluation tools can be found in Appendix D. The most valuable information learned from the target audience concerned the brochure’s readability. All target audience members surveyed were able to read and fully understand the entire brochure. They also reported liking the layout, the logo, and the information provided on the Community Health Centers. While a few of them were aware of the Community Health Centers, only one mentioned using them. One key recommendation from the target audience was to include the digit-based phone number for Medicare, rather than the letters, to ease the dialing process for seniors. This suggestion was incorporated into the revised brochure (see Appendix F).

For the most part, stakeholders and peers reiterated the clarity of message content while also contributing valuable formatting suggestions. Of most concern was the “wordiness” and lack of “white space” on the brochure, which made it seem “too busy.” To address this issue, messages were streamlined and font size reduced by one point. The readability was also improved and certain messages highlighted by the changing of box color from gray to soft yellow. Feedback indicated that the gray was too drab. Also of tremendous concern was the resolution of many photos. The photos had originally been selected because of the diverse populations they represented, a feature which was praised by one stakeholder. For printing purposes, all low-resolution photos were replaced with higher-resolution ones. Attempts are being made to likewise improve the logo by obtaining a high-resolution Cherokee rose from the Washington County Chamber of Commerce (results still pending). Fortunately, one stakeholder spotted an error in the contact information for the Community Health Centers, which was corrected. In the revised brochure, one additional message was added to bring home the SHAPE point: “Being in SHAPE means staying active, eating right, and getting screened regularly.”

One peer indicated that perhaps the language used to describe the recommended screening tests would not be understood by the seniors. However, this suggestion was not
incorporated into the revisions. We believe that giving the proper names for the tests is most appropriate. Then, perhaps, a senior may be able to ask for the test by name when discussing screening with his/her provider.

SHAPE Social Support Brochure

The social support brochure is specifically designed for those seniors who are in the action and maintenance stage. These seniors have already been screened and are more knowledgeable about the screening process than a senior who has never been screened. The theme of the social support brochure is to increase social support for screenings through interpersonal communication between a senior in the action/maintenance phase and a senior in the precontemplation/contemplation stage. The purpose of this brochure is to increase awareness that not all seniors are getting screened, and to facilitate conversation between those who are getting screened and those who are not. This type of interaction will lead to increased social support to get screened among the senior population.

The central message of this brochure is “Help your friends and family get into SHAPE. Ask them if they’ve been screened.” The goal of this message is to remind seniors that the people they care about, their friends and family, may not be receiving the healthcare that they need. To show their friends and family that they care about them, the seniors need to check to see if everyone is getting their health screenings. The brochure includes other people such as church members and neighbors that seniors might not automatically think to talk to about screenings. These groups of people are mentioned in order to broaden social networks and facilitate conversation and support among the seniors. The social support brochure also includes messages about how to help those who are not getting screened. These messages are short and simple. Not much technical information is included in this section because that might intimidate the senior and prevent him/her from talking to others. The seniors who are getting screened can share their screening experiences, answer questions, “buddy up!” or make an appointment with someone who may be too afraid to go alone, and offer a ride to another senior with limited mobility.

The feedback from the target audience, stakeholders, and peers was generally positive. The target audience liked the layout of the brochure and the picture of the Cherokee rose. They thought it was easy to read and understand. Some of the target audience members knew to talk
to their friends about getting screened, but others found the idea novel. One senior commented that she had not ever been asked by her friends and family if she had ever been screened. Another senior thought it was a great idea to get screened together and offer each other a ride to the doctor’s office. Another woman said she took a taxi to the doctor’s office. This woman would benefit from messages encouraging seniors to drive one another and schedule their appointments at the same time so that they could ride together. Most of the seniors stated that they would take this brochure if they saw it displayed at a doctor’s office. One target audience member, however, did not feel that a brochure about social support would help her. She said she did not talk to anyone but her children, and would therefore not need any type of information about social support.

The feedback from the stakeholders consisted of suggestions for formatting changes and ways to make the messages clearer. Both of the stakeholders stated that the less text was better for the seniors to read. One of the suggestions was to change the font from Times New Roman to another font that is easier to read. Also, a suggestion was made to highlight certain portions of the text to emphasize particular portions. In the section “think about the important people in your life,” one of the stakeholders suggested to reduce the amount of text to emphasize the important people. The questions “have your friends been screened? What about your brothers and sisters? Members of your church? Neighbors?” were replaced with “your friends, brothers and sisters, members of your church, neighbors.” Then the question “have they been screened?” was included underneath that to provide emphasis.

The class, like the stakeholders, wanted the brochure to have a more attractive font. Most of the class members, however, responded well to the “thank you” at the top of the brochure, and stated that a message like that would make them feel good about getting screened. Others also stated that the brochure held their interest and they would continue reading it after seeing it for the first time. One class member did offer some constructive feedback. In the original brochure, on the backside of the brochure, one the ways to help was “share your positive screening experiences with others.” One responder wrote that some of the seniors might interpret this sentence to mean “testing positive” for something, so the line was changed to “share your positive experiences with others.” Some of the other comments were to include information about how to contact a doctor with questions. Since the target audience for this brochure as seniors who are already in the action or maintenance stage, they have the information for the
doctor. In addition, the screening brochure will be available at the Senior Center and the Community Health Centers, so seniors can obtain the screening brochures for their friends at those locations.

Another comment was to add information about the types of screenings the seniors should be receiving. That type of information does not fit with the theme of this brochure, which is to increase social support. This brochure is primarily just to get seniors talking to their friends and family about screenings. If too much medical information is included in the brochure, the senior may find it too intimidating to talk about. Instead of including the medical information, there was a reassuring message stating “it’s OK if you don’t know the answers. You can call your healthcare provider if you need more information about screenings.” This type of message takes the burden of having to know a lot of medical information off of the seniors, and instead promotes conversation.

**SHAPE poster**

The poster has been designed to target those seniors who are not practicing regular screening behavior. It was also designed with the objective of providing basic information on screening benefits. The poster revolves around the idea of increasing screening practices by emphasizing on its benefits, thus reinforcing the need to get regular screening. The main methods employed in developing the poster are modeling, tailoring and verbal persuasion.

Modeling has been used specifically to emphasize screening benefits and share the positive experience of screening. This has been done by the use of a model case (The faces of happy and healthy senior couple), sharing how they have a hold on their life as they practice regular screenings. Thus this form of verbal persuasion will motivate seniors who are not in the habit of getting screened. The use of simple language and bright colors has been used to tailor this material for the specific target audience.

The main message of the poster is delivered through the model case which focuses on both self-efficacy and reinforcement. It is an example of how a senior who gets screened needs to share his/her experience about screening to motivate their peers. The statement “Stay safe, remain in shape, live life. Get screened today!” This not only clearly indicates the benefits of regular screening, but also addresses the general belief that older adults cannot live healthy and enjoy life.
The poster has information on the common screening practices that need to be followed, and also pursues (persuasive communication) its audience to ask their health care provider about the process, “Ask your local health care provider about regular screening”. This message emphasizes the need to communicate with health care providers and seek information on this health behavior. The poster also includes photographs of common screening procedures, such as bold sugar and blood pressure. It also has a photograph of patient-physician counseling session, again reinforcing the message of talking to health care providers about screening. Finally the poster has the “SHAPE” logo, thereby relating to the other two materials. Overall, the poster generates messages for practicing regular health screening among the target audience.

The poster was pre-tested with the stakeholders and peers, and received positive feedbacks from both groups. The photographs and color were liked by the stakeholders, and they also commented that it was both attractive and was able to communicate its intended message. The stakeholders also provided several suggestions on the layout of the photographs and the message in the poster. One particular suggestion was to include the words “LIVE LIFE,” to stress on the importance that with regular screening older adults can enjoy a happy and healthy life.

In class peer feedback mainly consisted of suggestion on the text and photographs. The suggestion was to use photographs with higher resolution and to make the text crisper and to the point. Few commented on the use of less bright colors. For the question “was there any new information on the poster” most commented “No” but since the overall goal of the poster was to promote screening, it did not have any technical information. Also, the poster was designed for older adults, and hence both the text and the messages were kept simple and understandable. Few suggestions were also on the inclusion of common screening practices, and this has been included in the revised version. There was also one suggestion on the inclusion of contact information. Although this has been included in the revised version, no specific information has been given, as this could vary between the Community Health Centers or the Archway Partnership Project.
References


Washington County Chamber of Commerce. from http://www.washingtoncounty-ga.com/
<table>
<thead>
<tr>
<th>Health Behavior</th>
<th>Get screened</th>
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<tbody>
<tr>
<td><strong>Measurable Objective</strong></td>
<td>Increase the number of Washington County seniors utilizing the Community Health Centers for health screenings by 10% within two years of program implementation.</td>
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<tr>
<td><strong>Performance Objectives (Seniors at WaCo Senior Center)</strong></td>
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<td><strong>Personal Determinants</strong></td>
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<td>Beliefs</td>
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<tr>
<td>PO.1 Recognize importance of getting screened</td>
<td>B.1 Express positive feeling toward being screened</td>
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<tr>
<td>PO.2 Decide to get screened</td>
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<td>PO.3 Go get screened</td>
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<td>PO.4 Maintain annual screening practices</td>
<td>B.4 Express positive feeling towards regular screening</td>
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<tr>
<td>Environmental Condition</td>
<td>Increase social support</td>
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<td><strong>Measurable Objective</strong></td>
<td>Increase the number of seniors who report strong social support for health screenings by 30% within 6 months of program implementation</td>
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<td><strong>Performance Objectives (Seniors at CHCs)</strong></td>
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<td><strong>Beliefs</strong></td>
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<tr>
<td>PO.1 Recognize implications of low prevalence of peer screening practices</td>
<td>B.1 Express feeling that screening helps maintain independence and prevents disability</td>
</tr>
<tr>
<td>PO.2 Learn more about screening process</td>
<td>SSE.2 Express confidence in ability to seek clarification of screening process from healthcare provider</td>
</tr>
<tr>
<td>PO.3 Identify peers who are not getting screened</td>
<td>SSE.3 Practice approaching peers about health topics</td>
</tr>
<tr>
<td>PO.4 Talk to those peers about screening</td>
<td>SSE.4 Express confidence in ability to share information on screening process</td>
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Appendix B
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<tr>
<th>Determinants and Change Objectives</th>
<th>Methods</th>
<th>Strategies</th>
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<tbody>
<tr>
<td><strong>Beliefs</strong></td>
<td></td>
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</tr>
<tr>
<td>B.1 Express positive feeling toward getting screening</td>
<td>Gain Frame</td>
<td>Brochure A provides messages about maintaining independence and preventing disability Quotes provide role model stories using coping models</td>
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<tr>
<td></td>
<td>Modeling</td>
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<tr>
<td>B.4 Express positive feeling towards regular screening</td>
<td>Gain Frame</td>
<td>Brochure A provides messages about maintaining independence and preventing disability Quotes provide role model stories using coping models</td>
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<td>Modeling</td>
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<tr>
<td><strong>Skills/Self-Efficacy</strong></td>
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<tr>
<td>SSE.2 Express confidence in ability to get screened</td>
<td>Tailoring</td>
<td>Brochure A provides information for Precontemplators, contemplators, and low SES. The brochure uses large font and simple language</td>
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<td>Individualization</td>
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<tr>
<td>SSE.3.1 Call CHC to schedule appointment</td>
<td>Cues</td>
<td>Brochure A provides telephone numbers for specific CHCs</td>
</tr>
<tr>
<td>SSE.3.2 Go to appointment</td>
<td>Cues</td>
<td>Brochure A is a cue to get screened. Calling the CHCs to make an appointment is a cue to get screened</td>
</tr>
<tr>
<td>SSE.4.1 Express confidence in ability to maintain regular screening</td>
<td>Modeling</td>
<td>Role model stories of other seniors who get screened regularly</td>
</tr>
<tr>
<td>SSE.4.2 Mark calendar with next appointment</td>
<td>Cues</td>
<td>Stickers to mark next appointment time</td>
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<tr>
<td><strong>Knowledge</strong></td>
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<tr>
<td>K.2.1 Identify location of nearest/most convenient CHC</td>
<td>Persuasive communication</td>
<td>Brochure A provides information about the location of the CHCs. The seniors decide where they want to go.</td>
</tr>
<tr>
<td>K.2.2 Contact insurance company with questions and concerns</td>
<td>Persuasive communication</td>
<td>Brochure A provides information about calling insurance company</td>
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<td>K.3 Verbalize understanding of screening results</td>
<td>Discussion</td>
<td>Seniors discuss screenings with their healthcare provider</td>
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<td>K.4 Share knowledge of screening process with peers</td>
<td>Discussion</td>
<td>Seniors speak to other seniors about getting screened</td>
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<td><strong>Outcome Expectations</strong></td>
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<tr>
<td>OE.1 Articulate benefits of getting screened</td>
<td>Gain Frame</td>
<td>Brochure A provides messages about maintaining independence and preventing disability</td>
</tr>
<tr>
<td>OE.3 Demonstrate importance of following up with PCP for abnormal results</td>
<td>Gain Frame</td>
<td>Brochure A reminds seniors to follow up with their doctor to maintain health</td>
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<tr>
<td><strong>Cues to Action</strong></td>
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<tr>
<td>CA.1 Senior center staff displays and distributes screening information</td>
<td>Facilitation</td>
<td>The table tent and letter remind the senior center staff to display Brochure A and the poster</td>
</tr>
<tr>
<td></td>
<td>Persuasive Communication</td>
<td></td>
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<tr>
<td>CA.4 CHCs mail reminders</td>
<td>Cues</td>
<td>Reminds seniors of upcoming appointments</td>
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<tr>
<td><strong>Social Norms</strong></td>
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<td>SN.2 Senior Center staff encourages seniors to share positive screening experiences</td>
<td>Stimulate communication and mobilizing social support</td>
<td>Seniors discuss screenings with peers, encourage their peers to get screened Staff provide positive feedback, encouragement when a senior gets screened</td>
</tr>
<tr>
<td></td>
<td>Reinforcement</td>
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<tr>
<td>SN.4 Senior Center staff and peers reiterate importance of regular screenings</td>
<td>Stimulate communication and mobilizing social support</td>
<td>Seniors discuss screenings with peers and encourage their peers to get screened</td>
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<tr>
<td>Determinants and Change Objectives</td>
<td>Methods</td>
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<tr>
<td><strong>Beliefs</strong></td>
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<tr>
<td>B.1 Express feeling that screening helps maintain independence and prevents disability</td>
<td>Gain Frame</td>
<td>Brochure B associates screenings with staying healthy and active</td>
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<tr>
<td><strong>Skills/Self-Efficacy</strong></td>
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<tr>
<td>SSE.2 Express confidence in ability to seek clarification of screening process from healthcare provider</td>
<td>Tailoring</td>
<td>Brochure B encourages the seniors to call their doctor if they have a question about screenings</td>
</tr>
<tr>
<td>SSE.3 Practice approaching peers about health topics</td>
<td>Modeling</td>
<td>The seniors who have already been screened will talk to their peers about screening and will become an informal model</td>
</tr>
<tr>
<td>SSE.4 Express confidence in ability to share information on the screening process</td>
<td>Modeling</td>
<td>The seniors who have already been screened will talk to their peers about screening and will become an informal model</td>
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<tr>
<td><strong>Knowledge</strong></td>
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<tr>
<td>K.1 Realize that many seniors are not getting screened</td>
<td>Tailoring</td>
<td>Specific messages about the screening habits of other seniors</td>
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<tr>
<td>K.2 State facts related to screening process, such as benefits, locations, and frequency</td>
<td>Persuasive communication</td>
<td>Brochure B encourages seniors to share facts about screenings and incorporate their personal experiences, thus increasing learning</td>
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<td>K.3 Assess health practices of peers – who can drive, who is active</td>
<td>Stimulate communication and mobilizing social support</td>
<td>Using a buddy system to ensure that seniors with limited mobility get screened</td>
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<tr>
<td>K.4 Share facts about screening process with peers</td>
<td>Discussion</td>
<td>Brochure B encourages seniors to speak to family members and friends about the benefits of getting screened</td>
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<tr>
<td><strong>Access to Resources</strong></td>
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<tr>
<td>AR.1 CHC staff provides information on screening</td>
<td>Facilitation</td>
<td>The table tent and letter to the Community Health Center instructs the staff to disseminate the screening brochures</td>
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<tr>
<td>AR.4 CHC staff provide easy to understand materials on screening</td>
<td>Facilitation</td>
<td>The table tent and letter to the Community Health Center instructs the staff to disseminate the screening brochures</td>
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<tr>
<td><strong>Reinforcement</strong></td>
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<td>R.2 CHC staff praises seniors for seeking information</td>
<td>Reinforcement</td>
<td>Praising the seniors for getting screened is a positive reinforcement</td>
</tr>
<tr>
<td>R.4 Peers review screening materials together</td>
<td>Stimulate communication and mobilizing social support</td>
<td>Reviewing the brochures in a group setting will increase discussion about screenings and increase social support among the seniors</td>
</tr>
</tbody>
</table>
Appendix C
Dear Participant,

You are invited to participate in a project conducted as part of the requirements for a class in the College of Public Health at the University of Georgia. For this project I will be asking you some questions to examine what you like and do not like about the program materials we have designed. The research will be supervised by the course instructor: Dr. Su-I Hou.

The purpose of this research project is to help beginning researchers learn more about resource development. All information obtained will be treated confidentially.

For this project, you will answer some brief questions.

For this project, I will read the materials with you and write down your answers.

You are free to withdraw your participation at any time should you desire. If you have any questions or concerns, feel free to contact me at (706) 389-6099. I hope you will enjoy this opportunity to share your experiences and viewpoints with us. Thank you very much for your help.

Sincerely,

Clare Reidy, Joy Ferlisi, & Priyanka Chakraborty

Dr. Su-I Hou
Professor, College of Public Health

By completing the survey items, you are indicating your consent to participate.

For questions or problems about your rights please call or write: The Chairperson, Institutional Review Board, University of Georgia, 612 Boyd Graduate Studies Research Center, Athens, Georgia 30602-7411; Telephone (706) 542-3199; E-Mail Address IRB@uga.edu.
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<th>PEER FEEDBACK</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Was the brochure/poster easy to read?</td>
<td></td>
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<tr>
<td>Additional Comments</td>
<td></td>
<td></td>
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</tbody>
</table>
Feedback Summary Tables
### SCREENING BROCHURE

<table>
<thead>
<tr>
<th>Content</th>
<th>Target Audience (N=10)</th>
<th>Stakeholder (N=3)</th>
<th>Peer (N=10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>What do you think this brochure is telling you to do?</td>
<td>• Find help and get screened; contact a CHC (1, 4, 5)</td>
<td>• Get screened (1)</td>
<td>• Get screened (1, 3, 4, 7, 8, 9, 10)</td>
</tr>
<tr>
<td></td>
<td>• Keep up with your health (2, 5, 6)</td>
<td>• Importance of screening of for your health (2)</td>
<td>• Why, what, and where to get screened (2)</td>
</tr>
<tr>
<td></td>
<td>• Get regular check-ups (3)</td>
<td>• Seniors need to get health screenings (3)</td>
<td>• Screening is important (6)</td>
</tr>
<tr>
<td></td>
<td>• Ask questions about your health (8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td>• Talk to someone – they might be able to help you fix your health problem before it gets bad (1, 4)</td>
<td>• Get screened (1)</td>
<td>• Catch potential problems (1, 3)</td>
</tr>
<tr>
<td></td>
<td>• The value of healthier living (2)</td>
<td>• Screenings save lives (2)</td>
<td>• Get screened (2, 7, 9)</td>
</tr>
<tr>
<td></td>
<td>• Live to be 100 years old (3)</td>
<td>• The What, Why and How about health screenings (3)</td>
<td>• Info needed to get screened (5, 6, 10)</td>
</tr>
<tr>
<td></td>
<td>• Be aware of your health status (6, 7)</td>
<td></td>
<td>• Take responsibility (8)</td>
</tr>
<tr>
<td></td>
<td>• The advantages of getting screened (4, 5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• To go for regular screening (8, 9, 10)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there anything the brochure makes you want to do?</td>
<td>• Get help (1)</td>
<td>• Get screened and call your healthcare provider or a CHC (1)</td>
<td>• Talk to my doctor (1)</td>
</tr>
<tr>
<td></td>
<td>• No (2, 3)</td>
<td>• No, the brochure stresses the importance of screening, but you must still decide what to do (2)</td>
<td>• Get screened (2, 5, 7)</td>
</tr>
<tr>
<td></td>
<td>• Want to know more about health (4, 6, 7)</td>
<td>• Encourage my parents to be screened and for me to live a healthier lifestyle (3)</td>
<td>• Call and make appointment (3, 8)</td>
</tr>
<tr>
<td></td>
<td>• To ask more questions about screening (8, 9)</td>
<td></td>
<td>• Find out about health screenings (6)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Find closest screening location (9)</td>
</tr>
<tr>
<td>Is there any information in the brochure that you already knew?</td>
<td>• Knew about the CHCs and sliding fees – she says they’re very accommodating with payment issues (1)</td>
<td>• Yes (2, 3)</td>
<td>• Yes – screening is good (2, 7)</td>
</tr>
<tr>
<td></td>
<td>• The importance of screening (2, 3, 4, 6)</td>
<td></td>
<td>• Yes (3, 5, 8)</td>
</tr>
<tr>
<td></td>
<td>• Getting regular screening for blood sugar since I am a diabetic (8, 10)</td>
<td></td>
<td>• Yes – screening is simple (9)</td>
</tr>
<tr>
<td>Did you find any new information in the brochure useful?</td>
<td>• Information about CHCs will be very valuable to those who don’t already know (1)</td>
<td>• CHC locations (2)</td>
<td>• Yes (5, 7)</td>
</tr>
<tr>
<td></td>
<td>• No (2, 3, 6)</td>
<td>• Yes (3)</td>
<td>• Yes - local resources like phone numbers, addresses, directions (1, 2, 3, 6, 8, 9)</td>
</tr>
<tr>
<td></td>
<td>• Yes, information about the different places where we can get screened (1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Importance of regular screening (9, 10)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td>• Yes. Most seniors would be able to read and understand this brochure (1, 4, 5, 6, 7)</td>
<td>• Yes (1, 2, 3)</td>
<td>• Yes (1, 2, 5, 7, 8, 9, 10)</td>
</tr>
<tr>
<td></td>
<td>• Yes (2, 3, 8-10)</td>
<td></td>
<td>• Too busy (3, 6)</td>
</tr>
</tbody>
</table>
## SCREENING BROCHURE

<table>
<thead>
<tr>
<th>Attractiveness and Acceptability</th>
<th>Target Audience (N=10)</th>
<th>Evaluator</th>
<th>Peer (N=10)</th>
</tr>
</thead>
</table>
| Did you find anything attractive in the brochure? | - Nice pictures, very pleasing in general (1,6)  
- Looks fine (2,3)  
- Likes the acronym SHAPE (4)  
- Glad there are numbers included (6,7)  
- Likes information about insurance (6)  
- The whole brochure is very attractive (8-10) | - Yes – colors, pictures and graphics (1)  
- Colorful, attractive, good representation of senior population (2)  
- Yes (3) | - Yes – colors (1,2,8)  
- Yes – logo (3,7,10)  
- Yes – fonts (2,7,8)  
- Yes – quotes (2,9)  
- Yes – very professional (5,6)  
- Yes – photos (3,4) |
| Did you want to continue reading it after seeing it for the first time? | - Yes (1,4,5,6,7,8,9,10)  
- No (2,3) | - Yes (1,2,3) | - Yes (1,2,3,4,8,9,10)  
- No (7) |
| Do you like the way the brochure has been presented? Is there anything you would like to add or remove from the brochure? | - Yes, please add something about healthy food options (1)  
- Brochure looks fine (2,3,4,5,6,7,8,9,10) | - See edits on brochure (1)  
- Yes. Maybe should add local health department information for blood pressure checks, etc. (2)  
- Yes, No (3) | - Yes, No (1,2,7,9)  
- Blurry pics (8) |
| Is there anything in particular that you dislike in the brochure? | - No (1,4,6)  
- No comment (2,3,5,7,8,9,10) | - The gray boxes, the font, and it’s a bit too wordy (1)  
- No (2,3) | - Blurry pics (1,6,7)  
- Change color behind text (10)  
- Some people in pics look too old and unhealthy (3) |
| Was the brochure easily readable? | - Yes. Even if seniors can’t read, they would ask one of their children to read the brochure to them (1)  
- Yes. Easy to read and understand (4,6,7,8,9,10)  
- Yes (2,3) | - Yes, except for the wordiness – it looks a little too full (1)  
- Yes (2,3) | - Yes (1,2,3,7,8,9,10)  
- Too much info/text (4,6) |

### Additional Comments

- **Note:** This lady was already screening regularly – she was referred to the CHCs because of their sliding scale fees by her daughter. She takes a taxi to the Tennille CHC. She spoke a lot about how help is available but many people are afraid or embarrassed to ask for it. (1)  
- **Note:** These ladies were already active screeners and not very interested in brochure A. (2,3)  
- Make sure to hand out screening brochures prior to the semianual health fairs. The brochures can serve as reminders for seniors to get screenings.  
- It is easier to call if the numbers of Medicare are available instead of the text  
- **Note:** The ladies were already getting screened for blood sugar and hypertension, and they were being helped by their family members (children).  
- Tennille CHC is actually on Smith Street. Great job! Thanks for sharing your project with the WaCo Senior Center! (2)  
- Nice job (3)  
- **Note:** Good job (1,2)  
- Nice logo (5)  
- Photo quality needs improvement (4,5)  
- Do seniors understand all the tests/language? (10)
<table>
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<tr>
<th>Content</th>
<th>Target Audience (N=10)</th>
<th>Stakeholder (N=3)</th>
<th>Peer (N=10)</th>
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</table>
| What do you think this brochure is telling you to do? | • Ask a friend to do something (1)  
• Talk to your friends (2,3,4,5,6,7)  
• Help a friend to get screened (8,9,10) | • Encourage others to get screened (1)  
• Be a positive screening example and share with others the importance of it (2)  
• Thank you for getting a screening and how to encourage others (3) | • Convince my friends to get screened (1)  
• Tell others to get screened (2,7,9)  
• Thanking you (3)  
• Telling you to tell family and friends (3)  
• Tell others about SHAPE (4)  
• Get screened (5)  
• Encourage others to be screened, even go with a friend to get screened (6)  
• Share screening experiences with others (8) |
| What do you think is the main idea it is trying to get across? | • Show concern for your friends (1)  
• Tell your friends to get screened (4,9) | • Encourage others to get screened (1)  
• Help others to be screened (2)  
• Thank you for getting a screening and how to encourage others (3) | • Important for people you care about to be screened (1)  
• Take care of others’ health too (2)  
• Spread the word! (3)  
• Tell others (4,9)  
• Screening (5)  
• Screening is something that everyone in your life needs to do (6)  
• Encouraging others to be screened, helps them stay healthy (7)  
• Share screening experiences with others (8) |
| Is there anything the brochure makes you want to do? | • Tell your friends about screening (1,2,3,7,8)  
• Stay active (6)  
• Ask the doctor questions (6)  
• Offer a friend a ride to get screened (4,5) | • Help your friends and family get screened (1)  
• No, you make your own decisions (2)  
• Encourage others to have a health screen (3) | • Give my friend a ride to the doctor (1)  
• Think about people in my life that need to get screened (2)  
• Tell people about screening (3,6,8,9)  
• Tell others (4)  
• Get screened (5) |
| Is there any information in the brochure that you already knew? | • Getting a ride can be difficult (she likes the “offer a ride” part – she takes a taxi to the Tennille CHC) (1)  
• No (4,5,8) | • Yes (2,3) | • A little (1)  
• Those that exercise and eat right need to be screened (3)  
• The importance of getting screened (5)  
• Yes (6)  
• Talk to friends, support their health (7)  
• Importance of social support and removal of barriers, i.e giving friends [a ride] (8) |
| Did you find any new information in the brochure useful? | • She likes the “buddy up” part – she compares it to the buddy system for getting mammograms (2)  
• One respondent said she didn’t have any friends, so social support doesn’t apply (7) | • No (2)  
• Yes (3) | • The “Thank you” would make me feel good (1)  
• Good tips on how to help (3)  
• Yes (5,6)  
• No (8) |
<table>
<thead>
<tr>
<th>SOCIAL SUPPORT BROCHURE</th>
<th>Target Audience (N=10)</th>
<th>Stakeholder (N=3)</th>
<th>Peer (N=10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td>Yes (1, 2, 3, 4, 5, 6, 7, 8, 9, 10)</td>
<td>Yes (1, 2, 3)</td>
<td>The “share your positive screening experiences” line may be misunderstood as “testing positive” for something (1) Yes (3, 4, 5, 6, 7, 8) Yes, great simple layout</td>
</tr>
<tr>
<td>Did you find anything attractive in the brochure?</td>
<td>It’s nice (1)</td>
<td>Yes – the whole thing is attractive (1, 3)</td>
<td>The big “thank you” was nice to see (1) Yes, professional flower, bold (3, 9) Font and colors (4, 5) Cherokee rose (5) Yes (6, 8) Very clear and attractive (7)</td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td>Yes (1, 2, 3, 4, 5, 6, 7, 8, 9, 10)</td>
<td>Yes, very much (1) Yes (2, 3)</td>
<td>Yes (3, 4, 6, 7, 8, 9) Yes, it was concise enough to keep my interest (1) No (5)</td>
</tr>
<tr>
<td>Do you like the way the brochure has been presented? Is there anything you would like to add or remove from the brochure?</td>
<td>Yes (1, 2, 3, 4, 5, 6, 7, 8, 9, 10)</td>
<td>See edits on brochure (1) Yes; Nothing to add or remove (2, 3)</td>
<td>Add kinds of screenings: diabetes, cardiovascular, etc. (2) Yes, maybe add contact info if they or family/friends have more questions (3) Yes (4, 5, 8) I think this one is great. Gets to the point and there is not too much information (6) Like the way the brochure is presented (7) Different/more attractive font on back (9)</td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure?</td>
<td>No (1, 8, 9, 10) No comment (5, 7)</td>
<td>See edits on brochure (1) No (2, 3)</td>
<td>No (1, 3, 5, 6, 7, 8)</td>
</tr>
<tr>
<td>Was the brochure easily readable?</td>
<td>Yes (1, 2, 3, 4, 5, 6, 7, 8, 9, 10)</td>
<td>Yes (2, 3)</td>
<td>Yes (1, 2, 3, 4, 5, 6, 7, 8, 9)</td>
</tr>
<tr>
<td>Additional Comments</td>
<td>Note: These ladies were not very talkative (2, 3)</td>
<td>Note: see brochure for additional feedback (1) Nice Job</td>
<td>Get in shape for me means to exercise (2) Love it (7) Great “Thank You” design (9)</td>
</tr>
<tr>
<td><strong>Content</strong></td>
<td><strong>POSTER</strong></td>
<td><strong>Evaluator</strong></td>
<td></td>
</tr>
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</tr>
<tr>
<td><strong>Target Audience</strong></td>
<td><strong>Stakeholder (n=2)</strong></td>
<td><strong>Peer (n=10)</strong></td>
<td></td>
</tr>
</tbody>
</table>
| What do you think this poster is telling you to do? | • To go and get screened  
• The model story is encouraging | • Get screened  
• Be like the healthy people on the poster  
• Ask your doctor about screening  
• Stay in shape  
• Get screened to ensure better life |
| What do you think is the main idea it is trying to get across? | • To go for regular screening | • Get screened every year  
• Disease can happen to anyone  
• Get screened, remain in shape  
• Talk to my health care provider |
| Is there anything the poster makes you want to do? | • To practice regular screening | • Call my grandparents  
• Get screened  
• Be healthier by getting screened  
• Call health care provider |
| Is there any information in the poster that you already knew? | • Yes | • Yes  
• Some yes  
• The importance of getting screened |
| Did you find any new information in the poster useful? | • Yes | • No |
| Were you able to understand the content? Was the language simple and easy to read? | • Yes | • Yes  
• Yes, liked the model case story |
<table>
<thead>
<tr>
<th>POSTER</th>
<th>Target Audience</th>
<th>Stakeholder (n=2)</th>
<th>Peer (n=10)</th>
</tr>
</thead>
</table>
| Did you find anything attractive in the poster? | • Yes the poster is attractive with a nice layout | • Yes | • Yes, liked the bright colors
| | • Yes | • Liked the pictures | • Use red for the word ‘SHAPE’ to match the logo
| | • Yes | • Put shape in capital letters | • Picture is blurry
| | • Yes | • Cherokee rose | • Fonts
| | • Yes | • Straight to the point | • |
| Did you want to continue reading it after seeing it for the first time? | • Yes | • Yes | • |
| Do you like the way the poster has been presented? Is there anything you would like to add or remove from the poster? | • Yes the poster has been presented in a nice way. I like the use of the flower and ‘SHAPE’.
• No, but you could change the presentation of the model story, make it more crispy.
• The photographs in the poster needs to have even corners | • Too many colors | • The colors could make it difficult to read
• No | • Faces too dark and out of focus
| Is there anything in particular that you dislike in the poster? | • No | • |
| Was the poster easily readable? | • Yes | • Yes | • Do people in general know what screening means? Add-get tested for diabetes, heart disease, etc.
| Additional Comments | • | • | • |
Target Audience Feedback Forms

\( n = 10 \)
Evaluation questions for pre-testing brochure

Evaluation of content:

1. What do you think this brochure is telling you to do?
   - [ ] Find help and be screened
   - [ ] Get in touch with CTC
   - [ ] Asking a friend to do something

2. What do you think is the main idea it is trying to get across?
   - [ ] Talk to someone - they could point you in the right direction to get things fixed before it gets bad.
   - [ ] Show concern for your friends

3. Is there anything the brochure wants to make you do?
   - [ ] Get help
   - [ ] Tell your friends

4. Is there any information in the brochure that you already knew?
   - [ ] Knew about CTCs & Sliding Fees - says they’re very accommodating.
   - [ ] Payments are bad about giving advice.
   - [ ] Getting to the CTC can be difficult - she likes the offering of a ride (she takes a taxi to the Tenille one)

5. Did you find any new information in the brochure useful?
   - [ ] Lots of people don’t know about the CTCs and the sliding fees so that’ll be helpful

6. Were you able to understand the content? Was the language simple and easy to read?
   - [ ] Yes - very clear, she thinks most seniors would be able to understand this
   - [ ] Same as A
Evaluation of attractiveness and acceptability

1. Did you find anything attractive in the brochure?
   - nice pictures, very pleasing
   - nice

2. Did you want to continue reading it after seeing it for the first time?
   - yes
   - yes

3. Do you like the way the brochure has been presented? Is there anything you would like to add or remove from the brochure?
   - healthy food options (odd)

4. Is there anything in particular that you dislike in the brochure?
   - no
   - no

5. Was the brochure easily readable?
   - yes. even if they couldn’t read, their kids would read it to them.
   The language is very clear

Additional comment:

This lady is very proactive with her health.

She spoke a lot about networks here and the willingness of doctors/clinics to help those in need. BUT people are afraid to ask for assistance.
Pretesting of brochure- SHAPE

Evaluation questions for pre-testing brochure

Evaluation of content:

1. What do you think this brochure is telling you to do?
   (A) keep up with health!
   (B) regular check-ups

2. What do you think is the main idea it is trying to get across?
   (A) healthful living
   (B) live to be 100

3. Is there anything the brochure wants to make you do?
   (A) they already screen regularly (both) so it doesn't make
   (B) me want to do anything

4. Is there any information in the brochure that you already knew?
   (A) importance of screening (both) (B) is a retired nurse

5. Did you find any new information in the brochure useful?
   (A) already screening
   (B) buddy-up (similar to breast cancer)

6. Were you able to understand the content? Was the language simple and easy to read?
   (A) yes - both were able to read and understand all material
   (B) same as A
Evaluation of attractiveness and acceptability

1. Did you find anything attractive in the brochure?
   - [ ] looked fine (both)

2. Did you want to continue reading it after seeing it for the first time?
   - [ ] did not seem interested in reading the screening brochure
   - [ ] yes

3. Do you like the way the brochure has been presented? Is there anything you would like to add or remove from the brochure?
   - [ ] looks fine
   - [ ] want

4. Is there anything in particular that you dislike in the brochure?
   - [ ] no comment

5. Was the brochure easily readable?
   - [ ] yes

Additional comment:
Evaluation questions for pre-testing brochure

Evaluation of content:

1. What do you think this brochure is telling you to do?
   A. How to get screenings
   B. Tell friends to get screened

2. What do you think is the main idea it is trying to get across?
   A. Take advantage of getting screened
   B. Tell friends

3. Is there anything the brochure wants to make you do?
   A. Make you more aware
   B. Would offer a friend a ride

4. Is there any information in the brochure that you already knew?
   A. Already knew about screening
   B. Haven't seen this already

5. Did you find any new information in the brochure useful?
   A. No
   B. Haven't seen this already

6. Were you able to understand the content? Was the language simple and easy to read?
   A. Easy to understand
   B. Easy to understand

- Good to get osteoporosis, blood sugar
- Advantage of
- Like the pictures
Evaluation of attractiveness and acceptability

1. Did you find anything attractive in the brochure?
   - Really liked it.
   - liked the acronym SHAPE. Spoke about staying in Shape. Both talked about weight and what types of food they ate.

2. Did you want to continue reading it after seeing it for the first time?
   - Would take it home from doctor's office.

3. Do you like the way the brochure has been presented? Is there anything you would like to add or remove from the brochure?
   - they liked the flowers.

4. Is there anything in particular that you dislike in the brochure?
   - nothing.

5. Was the brochure easily readable?
   - yes, easy to read. Easy to understand. Women seemed to be able to read and comprehend what the brochures were saying.

Additional comment:
- make sure to give out screening brochures before the semiannual screenings at the hospitals.
- make sure to emphasize free screenings.
Evaluation questions for pre-testing brochure

Evaluation of content:

1. What do you think this brochure is telling you to do?
   A. Be aware of a lot things
   B. Not afraid to ask questions
      - talk to your friends

2. What do you think is the main idea it is trying to get across?
   A. Being aware of what your problem is.
   B. Ask for help.

3. Is there anything the brochure wants to make you do?
   A. Wants to know more about health.
   B. Wants to make you stay active
      - ask the doctor questions. Talk to friends

4. Is there any information in the brochure that you already knew?
   A. Already knew about
      - want to doctor to get blood sugar checked every 3 months
   B. Already knew most of stuff

5. Did you find any new information in the brochure useful?
   A. Already knew about most stuff
   B. Don't really have social support.
      One woman said she doesn't talk to anyone but her children.

6. Were you able to understand the content? Was the language simple and easy to read?
   A. Yes. Easy to read
   B. Easy to read

Both women diabetics, one woman had open heart surgery, a tumor removed
Evaluation of attractiveness and acceptability

1. Did you find anything attractive in the brochure?
   - like the pictures
   - glad there were numbers included
   - liked insurance info

2. Did you want to continue reading it after seeing it for the first time?
   - yes, would pick it up in doctor's office
   - one would show the brochure to her friend

3. Do you like the way the brochure has been presented? Is there anything you would like to add or remove from the brochure?
   - really liked it

4. Is there anything in particular that you dislike in the brochure?
   - nothing

5. Was the brochure easily readable?
   - yes, easy to read, easy to understand

Additional comment:
- most of women had chronic conditions. Diabetes was problem for both women.
- one took her blood sugar every morning. The other one just followed a diet, but didn't measure blood sugar
Evaluation questions for pre-testing brochure

Evaluation of content:

1. What do you think this brochure is telling you to do?
   A. I should keep up with this, so I know what's going on in my body. It is telling me that it is a good thing to know this.  
   B. Trying to keep in change.

2. What do you think is the main idea it is trying to get across?
   B. Help others.

3. Is there anything the brochure wants to make you do?
   A. Yes—to keep going
   B. Help friends and family to get screened.

4. Is there any information in the brochure that you already knew?
   A. Blood pressure, diabetes, did not know where these tests are available, did not know that they are available in CMC.
   B. No.

5. Did you find any new information in the brochure useful?
   A. Yes
   B. Yes

6. Were you able to understand the content? Was the language simple and easy to read?
   A. Yes.
   B. Yes
Evaluation of attractiveness and acceptability

1. Did you find anything attractive in the brochure?
   A - Yes, gives you a good idea.
   B - Yes, very good.

2. Did you want to continue reading it after seeing it for the first time?
   A - Yes.
   B - Yes, good to read, don't take long to read.

3. Do you like the way the brochure has been presented? Is there anything you would like to add or remove from the brochure?
   Yes, easy to read, large letter.
   Yes.

4. Is there anything in particular that you dislike in the brochure?
   A - No, it is good. I can read & understand. Clear Copy.
   B - No.

5. Was the brochure easily readable?
   A - Yes. B - Yes.

Additional comment:
Social network - family members take care
I think it will help lot of people to know about this.
Evaluation questions for pre-testing brochure

Evaluation of content:

1. What do you think this brochure is telling you to do?
   A. Be checked regularly.
   B. Help to get screened.

2. What do you think is the main idea it is trying to get across?
   A. If you get checked you can prevent illness.
   B. Get screened.

3. Is there anything the brochure wants to make you do?
   A. Easy to read, big print, simple, yes it makes us want to get checked.
   B. Get screened.

4. Is there any information in the brochure that you already knew?
   Yes need to get checked but not everything.

5. Did you find any new information in the brochure useful?
   A. Yes.
   B. Yes.

6. Were you able to understand the content? Was the language simple and easy to read?
   Yes.
Stakeholder Feedback Forms

$n=3$
Evaluation questions for pre-testing brochure

Evaluation of content:

1. What do you think this brochure is telling you to do?
   A. get screened
   B. encourage others to get screened

2. What do you think is the main idea it is trying to get across?
   See above

3. Is there anything the brochure wants to make you do?
   A. get screened or call your health provider or the
   B. Help your friend to get screened

4. Is there any information in the brochure that you already knew?

5. Did you find any new information in the brochure useful?

6. Were you able to understand the content? Was the language simple and easy to read?
   A. yes
   B. yes
Evaluation of attractiveness and acceptability

1. Did you find anything attractive in the brochure?
   A - yes - colors, pictures, graphics
   B - yes, the whole thing is attractive

2. Did you want to continue reading it after seeing it for the first time?
   A - yes
   B - yes, very much

3. Do you like the way the brochure has been presented? Is there anything you would like to add or remove from the brochure?
   A - see edits on brochure
   B - see edits

4. Is there anything in particular that you dislike in the brochure?
   A - the gray, the font, a bit too word
   B - see edits on panel

5. Was the brochure easily readable?
   A - yes - except for the word "ever" (it looks a bit funny)

Additional comment:
Evaluation questions for pre-testing POSTER (stakeholder – poster only)

Evaluation of content:

1. What do you think this brochure is telling you to do?
   Get Screened

2. What do you think is the main idea it is trying to get across?
   Screening is important for health

3. Is there anything the brochure wants to make you do?
   Get screened

4. Is there any information in the brochure that you already knew?
   Yes

5. Did you find any new information in the brochure useful?
   Yes

6. Were you able to understand the content? Was the language simple and easy to read?
   Yes, very simple and easy to understand
Evaluation of attractiveness and acceptability

1. Did you find anything attractive in the brochure?

   Yes, love the colors, the couple picture, the quotation is motivating. Tells that getting screened will keep you healthy

2. Did you want to continue reading it after seeing it for the first time?

   Yes

3. Do you like the way the brochure has been presented? Is there anything you would like to add or remove from the brochure?

   Yes
   Change the pictures
   Align the text boxes
   Can also use the logo as borders
   Can also make the text crisper

4. Is there anything in particular that you dislike in the brochure?

   No

5. Was the brochure easily readable?

   Yes

Additional comment:

   Very good, like it
Evaluation questions for pre-testing brochure

Evaluation of content:

1. What do you think this brochure is telling you to do?
   (A) Importance of Screenings for your health
   (B) Be a "positive" screening example and share with others the importance of it

2. What do you think is the main idea it is trying to get across?
   (A) Screenings Save Lives
   (B) Help Others to Be Screened

3. Is there anything the brochure wants to make you do?
   (A) No, stresses importance of screening, but you decide what to do
   (B) No, you make your own decision to help

4. Is there any information in the brochure that you already knew?
   (A) Yes
   (B) Yes

5. Did you find any new information in the brochure useful?
   (A) Community Health Care Locations
   (B) No

6. Were you able to understand the content? Was the language simple and easy to read?
   (A) Yes
   (B) Yes
Evaluation of attractiveness and acceptability

1. Did you find anything attractive in the brochure?
   A. Colorful, Attractive, well represented of Sr. population
   B. Colorful and Creative

2. Did you want to continue reading it after seeing it for the first time?
   A. Yes
   B. Yes

3. Do you like the way the brochure has been presented? Is there anything you would like to add or remove from the brochure?
   A. Yes; perhaps local health dept. information for blood pressures, etc.
   B. Yes; No

4. Is there anything in particular that you dislike in the brochure?
   A. No
   B. No

5. Was the brochure easily readable?
   A. Yes
   B. Yes

Additional comment:

Address for Temple Community Health Center is Smith Street.

GREAT JOB!
Thanks for sharing your project with the Waco Sr. Center!
<table>
<thead>
<tr>
<th>FEEDBACK</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td>Seniors need to get health screenings</td>
<td>Thank you for getting a screening and how to encourage others</td>
<td>Encourages seniors to get health screenings</td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td>The What, Why and How about health screenings</td>
<td>Thank you for getting a screening and how to encourage others</td>
<td>Encourages seniors to get health screenings</td>
</tr>
<tr>
<td>Is there anything the brochure/poster makes you want to do?</td>
<td>Encourage my parents to be screened and for me to live a healthier lifestyle</td>
<td>Encourage others to have a health screen</td>
<td>Encourages seniors to get health screenings</td>
</tr>
<tr>
<td>Is there any information in the brochure/poster that you already knew?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Did you find any new information in the brochure/poster useful?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>FEEDBACK</td>
<td>Brochure A: Screening Brochure</td>
<td>Brochure B: Social Support Brochure</td>
<td>Poster</td>
</tr>
<tr>
<td>----------</td>
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<td>--------</td>
</tr>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td>Yes No</td>
<td>Yes No</td>
<td>Yes No</td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Additional Comments</td>
<td>Nice Job</td>
<td>Nice Job</td>
<td>Nice Job</td>
</tr>
</tbody>
</table>
Peer Feedback Forms

\[ n=10 \]
<table>
<thead>
<tr>
<th>PEER FEEDBACK</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td>get health screening!</td>
<td>talk to peers/friends/ others</td>
<td>get screened</td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td>catch potential problems</td>
<td>encouraging others to be screened helps them stay healthy</td>
<td>get screened in work for peers</td>
</tr>
<tr>
<td>Is there anything the brochure/poster makes you want to do?</td>
<td>talk to my doctor</td>
<td>talk to my friends support their health</td>
<td>call my grandparents</td>
</tr>
<tr>
<td>Is there any information in the brochure/poster that you already knew?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you find any new information in the brochure/poster useful?</td>
<td>yes, who to contact, when I could seek resources.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td>yes.</td>
<td>yes.</td>
<td>yes.</td>
</tr>
<tr>
<td>PEER FEEDBACK</td>
<td>Brochure A: Screening Brochure</td>
<td>Brochure B: Social Support Brochure</td>
<td>Poster</td>
</tr>
<tr>
<td>---------------</td>
<td>--------------------------------</td>
<td>-----------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>layout very nice</td>
<td>really very clean</td>
<td>nice use of color</td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td>I do like the way brochure is presented</td>
<td>I like the way brochure is presented</td>
<td>yes</td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td>image of man on inside is pixelated. otherwise perfect</td>
<td>no</td>
<td>I think putting quotes in some kind of script font would look better</td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Additional Comments</td>
<td>rocks</td>
<td>love it!</td>
<td>very nice</td>
</tr>
</tbody>
</table>

This was all amazing, obviously a lot of thought went into your project.
<table>
<thead>
<tr>
<th>PEER FEEDBACK</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td>Why, what a waste to get screened</td>
<td>Thanking you</td>
<td>get screened</td>
</tr>
<tr>
<td></td>
<td>get screened</td>
<td>helping you to tell family &amp; friends</td>
<td></td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td>get screened</td>
<td>spread the word</td>
<td>get screened - if you happen to anyone</td>
</tr>
<tr>
<td></td>
<td>tell people about screening</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there anything the brochure/poster makes you want to do?</td>
<td>screening is good!</td>
<td>Those that are left behind need to be screened</td>
<td></td>
</tr>
<tr>
<td></td>
<td>gave lots of good info I didn’t know</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there any information in the brochure/poster that you already knew?</td>
<td>yes!</td>
<td>good tips on how to contact health center</td>
<td>yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>not really</td>
</tr>
<tr>
<td>Did you find any new information in the brochure/poster useful?</td>
<td>yes!</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>giving reference to contact community health center</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td>yes!</td>
<td>yes!</td>
<td></td>
</tr>
<tr>
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</tr>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>n/a setup</td>
<td>good use of colors</td>
<td>great picture</td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td>yes, liked</td>
<td>yes, may be add more contact info</td>
<td>yes</td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td>no</td>
<td>no</td>
<td>no</td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Additional Comments</td>
<td>good job!</td>
<td>yay</td>
<td>wooo00!</td>
</tr>
<tr>
<td>Content</td>
<td>Brochure A: Screening Brochure</td>
<td>Brochure B: Social Support Brochure</td>
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</tr>
<tr>
<td>PEER FEEDBACK</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td>Get screened for various medical conditions</td>
<td>convince my friends to get screened</td>
<td>Be like the healthier people on the poster and get screened!</td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td>Get screened because it will help prevent illness.</td>
<td>It's important for people you care about to be screened.</td>
<td>Get screened every year.</td>
</tr>
<tr>
<td>Is there anything the brochure/poster makes you want to do?</td>
<td>Call &amp; make a screening appt.</td>
<td>Give my friend a ride to the doctor</td>
<td>Be healthier by getting screened!</td>
</tr>
<tr>
<td>Is there any information in the brochure/poster that you already knew?</td>
<td>Yes... but I'm a pre-med student so you target audience might not know it.</td>
<td>A little</td>
<td>Some, yes.</td>
</tr>
<tr>
<td>Did you find any new information in the brochure/poster useful?</td>
<td>Yes - the part about who to contact if you're uninsured.</td>
<td>The &quot;Thank You&quot; would make me feel good.</td>
<td></td>
</tr>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td>Yes, but it's just a little &quot;busy&quot;.</td>
<td>*The &quot;Share your positive screening experience&quot; line may be misunderstood as &quot;testing positive&quot; for something.</td>
<td>Yes, I liked that the exampleample couple had a medical abnormality when screened but is now happy healthy.</td>
</tr>
<tr>
<td>PEER FEEDBACK</td>
<td>Brochure A: Screening Brochure</td>
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<td>--------</td>
</tr>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>I like the flowers &amp; the pictures.</td>
<td>The big 'thank you' was nice to see.</td>
<td>Yes. Liked the bright colors a lot.</td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td>Yes.</td>
<td>Yes, it was concise enough to keep my interest.</td>
<td>Yes.</td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td>I like the quotations from real seniors.</td>
<td></td>
<td>£££.</td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td>Some of the people in the back pictures are really old &amp; don't look too healthy.</td>
<td>No</td>
<td>I like the poster very much.</td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td>Easy enough.</td>
<td>Yes</td>
<td>Yes.</td>
</tr>
<tr>
<td>Additional Comments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<tr>
<td>------------------------------------------------------------------------------</td>
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<td>--------</td>
</tr>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Get screened</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there anything the brochure/poster makes you want to do?</td>
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<td>Is there any information in the brochure/poster that you already knew?</td>
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<tr>
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<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
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<td>PEER FEEDBACK</td>
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</tr>
<tr>
<td>---------------------------------------------------</td>
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<td>--------</td>
</tr>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>loved the photos!</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Additional Comments**

- Excellent job on matching COs with brochure messages.
- Anyways, I have the following questions:
  - Some of the pics?
  - We need for the word "SHAPE" to be consistent in your logo.
  - Very nice.
  - Love the sticker.
<table>
<thead>
<tr>
<th>PEER FEEDBACK</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td>&quot;Why what, were, has about screening.&quot;</td>
<td>&quot;Encourage others to be screened, even go with a friend to get screened.&quot;</td>
<td>Get screened</td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td>&quot;All the information these mo need to know about screening.&quot;</td>
<td>&quot;Screening is something that everyone in your life needs to do.&quot;</td>
<td>Get screened</td>
</tr>
<tr>
<td>Is there anything the brochure/poster makes you want to do?</td>
<td>&quot;Moles meant to get screened.&quot;</td>
<td>&quot;Tell someone to get screened.&quot;</td>
<td>Get screened</td>
</tr>
<tr>
<td>Is there any information in the brochure/poster that you already knew?</td>
<td>Yes</td>
<td>Yes</td>
<td>N/A</td>
</tr>
<tr>
<td>Did you find any new information in the brochure/poster useful?</td>
<td>Yes</td>
<td>Yes</td>
<td>N/A</td>
</tr>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>PEER FEEDBACK</td>
<td>Brochure A: Screening Brochure</td>
<td>Brochure B: Social Support Brochure</td>
<td>Poster</td>
</tr>
<tr>
<td>---------------</td>
<td>--------------------------------</td>
<td>-------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td>3rd yes, and then when I opened it there was so much information.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td>Some information</td>
<td>I think this one is great. Gets to the point. Also does not have too much information.</td>
<td>Yes (kind) No I would not remove anything.</td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td>€</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td>No too much information</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Additional Comments</td>
<td>Love the pictures &amp; quotes. Love the logo! Pictures are a little pixelated.</td>
<td>Out of shape in some areas. Comes in shape in all capital letters. Picture is blurry.</td>
<td></td>
</tr>
</tbody>
</table>

Washington County Senior Health Project
<table>
<thead>
<tr>
<th>PEER FEEDBACK</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td>That health screenings are important &amp; how to get them</td>
<td>Tell others about getting screened</td>
<td>Ask your doc. about screening</td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there anything the brochure/poster makes you want to do?</td>
<td>Find out about health screenings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there any information in the brochure/poster that you already knew?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you find any new information in the brochure/poster useful?</td>
<td>Local resources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact info</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yes, but too busy for seniors</td>
<td>Yes, great, simple layout</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

GREAT FLOWER LOGO
<table>
<thead>
<tr>
<th>PEER FEEDBACK</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>Professional looking</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td></td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td></td>
<td>Different, more attractive font on back</td>
<td>Too many colors</td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td>Distorted pictures</td>
<td></td>
<td>Where did the quote come from?</td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td>Too much text/diff. fonts</td>
<td>Yes</td>
<td>The colors could make it difficult to read</td>
</tr>
<tr>
<td>Additional Comments</td>
<td></td>
<td>Great &quot;Thank you&quot; design</td>
<td></td>
</tr>
<tr>
<td>PEER FEEDBACK</td>
<td>Brochure A: Screening Brochure</td>
<td>Brochure B: Social Support Brochure</td>
<td>Poster</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------------</td>
<td>-------------------------------</td>
<td>------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td>Get screened</td>
<td>Get screened</td>
<td>stay in shape</td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td>Screening</td>
<td>Screening</td>
<td>Screening</td>
</tr>
<tr>
<td>Is there anything the brochure/poster makes you want to do?</td>
<td>Get screened</td>
<td>Get screened</td>
<td>Get screened</td>
</tr>
<tr>
<td>Is there any information in the brochure/poster that you already knew?</td>
<td>The importance of getting screened</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you find any new information in the brochure/poster useful?</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Peer Feedback</td>
<td>Brochure A: Screening Brochure</td>
<td>Brochure B: Social Support Brochure</td>
<td>Poster</td>
</tr>
<tr>
<td>---------------</td>
<td>--------------------------------</td>
<td>-----------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>Cherokee Rose in fonts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td>Yes</td>
<td>No</td>
<td>A</td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td>Some pictures were a little blurry</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Additional Comments**

Consider something doing something to set apart from other rose petals.
<table>
<thead>
<tr>
<th>PEER FEEDBACK</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td>Health Screening</td>
<td>Tell others about SHAPe.</td>
<td>Ask about screening.</td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td>Get informed. Take responsibility.</td>
<td>Tell others.</td>
<td>Ask about screening.</td>
</tr>
<tr>
<td>Is there anything the brochure/poster makes you want to do?</td>
<td>Call health care provider or health center.</td>
<td>Tell others.</td>
<td>Call health care provider.</td>
</tr>
<tr>
<td>Did you find any new information in the brochure/poster useful?</td>
<td>Addresses + Phone #.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td>Yes. Yes.</td>
<td>Yes. Yes.</td>
<td>Yes. Yes.</td>
</tr>
</tbody>
</table>
## Washington County Senior Health Project

<table>
<thead>
<tr>
<th>Peer Feedback</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>Font + Colors</td>
<td>Font + Colors</td>
<td>Colors, Pictures</td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td>Yes, graphics could be less pixelated</td>
<td>Yes</td>
<td>Make text in orange larger</td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Additional Comments</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Attractiveness and Acceptability**
<table>
<thead>
<tr>
<th>PEER FEEDBACK</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td>Get screened &amp; where to go</td>
<td>Share screening experiences with others</td>
<td>Get screened to ensure a better life</td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td>Get screened &amp; direct family &amp; friends do so.</td>
<td>Tell others the importance of screening</td>
<td></td>
</tr>
<tr>
<td>Is there anything the brochure/poster makes you want to do?</td>
<td>- Get screened  - find the closest place to get screened!</td>
<td>Importance of social support &amp; removal of barriers/giving friends</td>
<td></td>
</tr>
<tr>
<td>Is there any information in the brochure/poster that you already knew?</td>
<td>Most screening tests are simple  - early detection thanks to screening is important to healthy living</td>
<td>Importance of screening</td>
<td></td>
</tr>
<tr>
<td>Did you find any new information in the brochure/poster useful?</td>
<td>Direction to centers</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td>Yes - like &quot;why&quot;, &quot;what&quot;, etc being obvious on the brochure</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>PEER FEEDBACK</td>
<td>Brochure A: Screening Brochure</td>
<td>Brochure B: Social Support Brochure</td>
<td>Poster</td>
</tr>
<tr>
<td>------------------------------------------------------------------------------</td>
<td>--------------------------------</td>
<td>-----------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>Yes</td>
<td>Yes</td>
<td>love the colors</td>
</tr>
<tr>
<td></td>
<td>- great pictures</td>
<td>- everything</td>
<td>- Great pictures</td>
</tr>
<tr>
<td></td>
<td>- I like the use of a quote</td>
<td></td>
<td>- Straight to the point</td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Additional Comments**
- I think your additional materials are great
- great directions in letters

- on "lents" may be highlighted
- SHAPE in the top portion
  "Senior Health... Senior"
<table>
<thead>
<tr>
<th>Peer Feedback</th>
<th>Brochure A: Screening Brochure</th>
<th>Brochure B: Social Support Brochure</th>
<th>Poster</th>
</tr>
</thead>
<tbody>
<tr>
<td>What do you think this brochure/poster is telling you to do?</td>
<td>get screened</td>
<td>tell others to get screened</td>
<td>talk to health care provider about screening</td>
</tr>
<tr>
<td>What do you think is the main idea it is trying to get across?</td>
<td>why would you want to be screened for health problems</td>
<td>take care of others' health too</td>
<td>get screened - remain in shape</td>
</tr>
<tr>
<td>Is there anything else the brochure/poster makes you want to do?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there any information in the brochure/poster that you already knew?</td>
<td></td>
<td>think about people in my life that need to get screened</td>
<td></td>
</tr>
<tr>
<td>Did you find any new information in the brochure/poster useful?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were you able to understand the content? Was the language simple and easy to read?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PEER FEEDBACK</td>
<td>Brochure A: Screening Brochure</td>
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<td>Poster</td>
</tr>
<tr>
<td>---------------</td>
<td>---------------------------------</td>
<td>-------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Did you find anything attractive in the brochure/poster?</td>
<td>very attractive love the flower idea!</td>
<td></td>
<td>Colors + pictures</td>
</tr>
<tr>
<td>Did you want to continue reading it after seeing it for the first time?</td>
<td>yes</td>
<td>yes</td>
<td></td>
</tr>
<tr>
<td>Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?</td>
<td></td>
<td>add kinds of screenings - diabetes - cardiovascular etc. (Heart disease)</td>
<td></td>
</tr>
<tr>
<td>Is there anything in particular that you dislike in the brochure/poster?</td>
<td>maybe the beige color over the text</td>
<td></td>
<td>faces too dark + out of focus</td>
</tr>
<tr>
<td>Was the brochure/poster easy to read?</td>
<td>yes like the quotes</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td>Additional Comments</td>
<td>health care provider ( = doctor) not sure all senior understood</td>
<td>get in shape for me means to exercise</td>
<td>do people in general know what screening means?</td>
</tr>
<tr>
<td></td>
<td>obesity = body mass index</td>
<td>concerned = worried</td>
<td>get tested for - diabetes heart disease etc.</td>
</tr>
<tr>
<td></td>
<td>clinical breast</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix E
Senior Health Awareness & Prevention Education (SHAPE)

A program for Washington County seniors

Priyanka Chakraborty
Joy Ferlisi
Clare Reidy

Step 1: Priority Group & Setting

- Washington County, Georgia
- Adults aged ≥65 (14%)*
  - 61% is female*
  - 58% are white*
  - 94% have Medicare Part B**
  - Age adjusted morbidity rate was higher in 2006 than the state rate***

**2007 Medicare county enrollment data from http://www.cms.hhs.gov/MedicareEnrpts
EXCESS MORBIDITY DUE TO PREVENTABLE CONDITIONS

- Diabetes
- Obesity
- Heart disease
- Hypertension
- Stroke
- Asthma
- Cancer
- Arthritis

Isolation d/t mobility and transportation issues

Victimization by telemarketers d/t vulnerability

Financial costs d/t medication, supplies, care

Decreased comfort d/t pain, financial restraints

Disability d/t sensory impairment, amputations, ulcers

Societal costs of medical care

Step 1: Health Issue and QoL

Step 1: Environmental & Behavioral Factors

ENVIRONMENTAL
- Promoting unhealthy foods
- Facilitating sedentary lifestyles
- Not promoting available programs
- Not providing transportation options
- Not providing social support for screening

BEHAVIORAL
- Not getting screened
- Not getting immunized
- Not monitoring for s/s of complications or illness
- Not adhering to medication regimen
- Eating the wrong foods
- Remaining sedentary
- Not participating in available health management programs
- Not performing proper self-care
- Not seeking regular health care
- Not discussing health problems with caregivers
- Not adhering to medication regimen

Identified by community in focus group discussions

Selected risk factors
Step 2: Measurable Objectives

- Behavior
  - Increase the number of seniors utilizing the Community Health Centers for health screenings by 10% within two years of program implementation

- Environmental
  - Increase the number of seniors who report strong social support for health screenings by 30% within 6 months of program implementation

Step 2: Evidence Based Determinants

- Determinants for performance objectives selected based on:
  - Theoretical evidence
    - Health Belief Model
    - Social Cognitive Theory
    - Theory of Planned Behavior
    - Transtheoretical Model
  - Literature/empirical evidence
### Step 2: Behavioral Matrix with Change Objectives

<table>
<thead>
<tr>
<th>Behavior</th>
<th>Measurable Objective</th>
<th>Performance Objectives (Seniors at the Senior Center)</th>
<th>Personal Determinants</th>
<th>External Determinants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get Screened</td>
<td>Increase the number of seniors utilizing the Community Health Centers for health screenings by 10% within two years of program implementation</td>
<td>PO.1 Recognize importance of getting screened</td>
<td>B.1 Express positive feeling toward getting screened</td>
<td>K.1 Know that screening tests can help detect problems early</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PO.2 Decide to get screened</td>
<td>SSE.2 Express confidence in ability to get screened</td>
<td>K.2.1 Identify location of nearest/most convenient CHC</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PO.3 Go get screened</td>
<td>SSE.3.1 Call CHC to schedule appointment</td>
<td>K.3 Verbalize understanding of screening results</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PO.4 Maintain regular screening practices</td>
<td>SSE.4.1 Express confidence in ability to maintain regular screening</td>
<td>K.4 Share knowledge of screening process with peers</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>SSE.3.2 Go to appointment</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>K.4 Share knowledge of screening process with peers</td>
<td></td>
</tr>
</tbody>
</table>
### Step 2: Environmental Matrix with Change Objectives

<table>
<thead>
<tr>
<th>Environmental Condition</th>
<th>Measurable Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase social support</td>
<td>Increase the number of seniors who report strong social support for health screenings by 30% within 6 months of program implementation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performance Objectives (Seniors at the CHCs)</th>
<th>Personal Determinants</th>
<th>External Determinants</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Beliefs</td>
<td>Skills/Self-Efficacy</td>
</tr>
<tr>
<td>PO.1 Recognize implications of low prevalence of peer screening practices</td>
<td>B.1 Express feeling that screening helps maintain independence and prevents disability</td>
<td>K.1 Realize that many seniors are not getting screened</td>
</tr>
<tr>
<td></td>
<td>SSE.2 Express confidence in ability to seek clarification of screening process from healthcare provider</td>
<td>K.2 State facts related to screening process, such as benefits, locations, and frequency</td>
</tr>
<tr>
<td>PO.2 Learn more about screening process</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PO.3 Identify peers who are not getting screened</td>
<td>SSE.3 Practice approaching peers about health topics</td>
<td>K.3 Assess health practices of peers – who can drive, who is active?</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PO.4 Talk to those peers about screening</td>
<td>SSE.4 Express confidence in ability to share information on screening process</td>
<td>K.4 Share facts about screening process with peers</td>
</tr>
</tbody>
</table>

### Step 2: Environmental Matrix (cont)

<table>
<thead>
<tr>
<th>Performance Objectives (Seniors at the CHCs)</th>
<th>Personal Determinants</th>
<th>External Determinants</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Beliefs</td>
<td>Skills/Self-Efficacy</td>
</tr>
<tr>
<td>PO.3 Identify peers who are not getting screened</td>
<td>SSE.3 Practice approaching peers about health topics</td>
<td>K.3 Assess health practices of peers – who can drive, who is active?</td>
</tr>
<tr>
<td></td>
<td></td>
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</tr>
<tr>
<td>PO.4 Talk to those peers about screening</td>
<td>SSE.4 Express confidence in ability to share information on screening process</td>
<td>K.4 Share facts about screening process with peers</td>
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Step 3: Methods and Strategies

<table>
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<tr>
<th>Determinants</th>
<th>Method</th>
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<tr>
<td>Beliefs and Knowledge</td>
<td>Tailoring, persuasive</td>
<td>Tailored information provided to</td>
<td>Brochures, poster and sticker,</td>
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<tr>
<td></td>
<td>communication, individualization</td>
<td>target audience</td>
<td>acronym (SHAPE)</td>
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<tr>
<td></td>
<td>, gain frame, modeling</td>
<td></td>
<td></td>
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<tr>
<td>Skills/Self-Efficacy</td>
<td>Persuasive communication,</td>
<td>Instructions on why and where to</td>
<td>Brochures and poster</td>
</tr>
<tr>
<td></td>
<td>guided practice</td>
<td>get screened</td>
<td></td>
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<tr>
<td>Cues to Action</td>
<td>Persuasive communication,</td>
<td>Instructions on the use of resource</td>
<td>Table tent &amp; letter for Senior</td>
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<tr>
<td></td>
<td>Tailoring</td>
<td>materials</td>
<td>Center</td>
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<tr>
<td>Access to resources</td>
<td>Tailoring, guided practice</td>
<td>Information for seniors on where</td>
<td>Table tent &amp; letter for Community</td>
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<tr>
<td></td>
<td></td>
<td>to obtain information on</td>
<td>Health Centers</td>
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<td></td>
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<td>screening</td>
<td></td>
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<tr>
<td>Reinforcement</td>
<td>Tailoring, modeling</td>
<td>Tailored information on screening</td>
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<td>benefits, when and where to get</td>
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<td>screening</td>
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</table>

Step 4: Program Design

- **Scope**
  - Delivery of tailored messages and materials to promote regular screening among Precontemplators and Contemplators (P/C) and reinforce regular screening among Action and Maintenance screeners (A/M)
  - **Sequence is Cyclic!**
    - **Step 0** – One time, repeat as needed
      - SC receives screening information materials
      - CHC receives social support information and reinforcement materials
    - **Step 1** - Ongoing
      - P/C receives screening information materials at SC
      - A/M receives social support information and reinforcement materials at CHC
    - **Step 2** - Ongoing
      - P/C gets screened, receives social support information and reinforcement materials at CHC (becomes A/M in Step 1)
Step 4: Program Design

- Delivery Mechanisms
  - Selection Process

<table>
<thead>
<tr>
<th>Channel</th>
<th>Vehicles</th>
<th>Uses &amp; M/S</th>
<th>Pros &amp; Cons</th>
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<tbody>
<tr>
<td>Interpersonal</td>
<td>Peers</td>
<td>Social Reinforcement</td>
<td>Affordable</td>
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<tr>
<td></td>
<td>CHC &amp; SC Staff</td>
<td>Modeling</td>
<td>No formal training</td>
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<tr>
<td>Display Print</td>
<td>Screening Brochure</td>
<td>Personal Risk / Gain Frame Modeling</td>
<td>Lots of information Written out</td>
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<tr>
<td></td>
<td>Social Support Brochure</td>
<td>Skill Training</td>
<td>Influential / Trusted Busy</td>
</tr>
<tr>
<td></td>
<td>Poster, Stickers</td>
<td>Cues, Reminders</td>
<td>Attention grabbing Expensive</td>
</tr>
</tbody>
</table>

Intervention Context
- Takes place within the Senior Center and the Community Health Centers

Parameters of the Setting
- Social interaction allows for discussion about screenings
- Seniors develop social networks
- Staff provide reinforcement and encouragement
Development of Evaluation Tool

Content
- What do you think this brochure/poster is telling you to do?
- What do you think is the main idea it is trying to get across?
- Is there anything the brochure/poster makes you want to do?
- Is there any information in the brochure/poster that you already knew?
- Did you find any new information in the brochure/poster useful?
- Were you able to understand the content? Was the language simple and easy to read?

Development of Evaluation Tool

Attractiveness and Acceptability
- Did you find anything attractive in the brochure/poster?
- Did you want to continue reading it after seeing it for the first time?
- Do you like the way the brochure/poster has been presented? Is there anything you would like to add or remove from the brochure/poster?
- Is there anything in particular that you dislike in the brochure/poster?
- Was the brochure/poster easy to read?
Pre-Testing SHAPE Materials

- Stakeholders (N=3)
  - Senior Center staff member
  - Archway Partnership community partner
  - Health Committee member
- Target Audience Members (N=10)
  - Senior Center members
- Peers (N=10)
  - Classmates from HPRB 7270
Screening Brochure

- Messages
  - Screening needs to be *regular*
  - Screening helps to maintain independence and avoid disability

- Themes
  - SHAPE logo
  - “Tip!” section

---

Original Screening Brochure

---
Original Screening Brochure

Why? Health screenings allow you to catch potential problems before they get big. Simple tests can help detect new conditions as well as complications of your existing chronic conditions. With regular screening, you can stay healthier longer—that means maintaining your independence and avoiding disability.

“Twice my independence so I made sure to get screened regularly.”

Tip! Concerned about cost? Many insurance plans cover simple screening tests, including Medicare. Call your plan or 1-800-MEDICARE to see what they cover. No insurance? Check with a Community Health Center near you for information on fees (see back panel).

What? There are many different screening tests available today—so it’s ok to feel confused by all the options. Ask your healthcare provider about these simple screening tests to get you started:

- Heart—blood pressure, cholesterol
- Obesity—body mass index
- Diabetes—glucose level
- Cancer—clinical breast exam, fecal occult blood test
- Vision and hearing

Tip! If you don’t have a regular healthcare provider, contact your nearest Community Health Center today (see back panel).

How?
1. Call your healthcare provider or a Community Health Center near you (see back panel) and schedule your appointment.
2. After you have been screened, discuss your results with your healthcare provider.
3. Know when to schedule your next appointment and mark your calendar. Remember: regular screening is the key!
4. Share your experience with your friends. Let them know how important screening is for an active, healthy, independent lifestyle.

Stay in SHAPE...get screened!

Feedback on Screening Brochure

- General
  - Messages were understood!
  - Liked the logo
- Target Audience
  - Readable, understandable
  - Replace 1-800-MEDICARE with numbers
  - Liked information about the CHCs
Feedback on Screening Brochure

- **Stakeholder**
  - Liked the diverse population represented by photos
  - Too wordy
  - Font, color changes
  - Address correction for Tennille CHC

- **Peer**
  - Liked the quotes
  - Need higher quality pictures
  - Too busy
  - Simpler language?

Revised Screening Brochure
Revised Screening Brochure

**WHY?**
Regular screening can help you stay healthier longer—that means maintaining your independence and avoiding disability. Simple tests can help detect new conditions as well as complications of chronic conditions.

"I used to think ‘I get sick, I get sick.’ And that’s that. But now I know it doesn’t have to be that way. Getting screened regularly will help me stay the way I like to be—active and feeling great!"

**WHAT?**
There are many different screening tests available today, so it’s to your benefit to find out all the options. Ask your healthcare provider about these simple screening tests to get you started:

- Heart—blood pressure, cholesterol
- Obesity—body mass index
- Diabetes—glucose level
- Cancer—clinical breast exam, fecal occult blood test
- Vision and hearing

**TIP!**
If you do not have a regular healthcare provider, contact your nearest Community Health Center.

**HOW?**
1. Call your healthcare provider or a Community Health Center near you, see back panel, and schedule your appointment.
2. After you have been screened, discuss your results with your healthcare provider.
3. Know when to schedule your next appointment and mark your calendar. Remember: regular screening is key!
4. Share your experience with your friends. Let them know how important screening is for an active, healthy, independent lifestyle.

---

Social Support Brochure

**Themes**
- SHAPE logo
- Associate screenings with being healthy and active

**Messages**
- By getting screened, you are in SHAPE
- Share your screening experiences
- *Buddy Up!* - make appointments together, offer each other a ride
- Help your friends and family get into SHAPE. Ask them if they’ve been screened.
Original Social Support Brochure

Thank you
for being screened

By getting screened, you are helping yourself stay healthy and active—
you are in SHAPE!

Now, it's your turn to help others.

Think about the important people in your life. Have your friends been screened? What about your brothers, sisters, parents, in-laws, or neighbors?

Some of these people may not be getting the screenings they need. Even those who exercise and eat right may not be screened regularly.

Share your friends and family that you care about them. Check to see if they are in SHAPE too.

Signature:
Health Promotion Coordinator

Here's how you can help:

- Ask your friends and family if they have been screened
- Share your positive screening experience with others
- Answer questions that your friends may have about screenings. But remember, it's OK if you don't know the answers. You can call your healthcare provider if you need more information about screenings.
- “Buddy up!” Make an appointment with your friend to go get screened together.
- Offer your friend a ride to the appointment.

Help your friends and family get into SHAPE. Ask them if they've been screened.

Feedback

Target Audience

- Attractive
- Easy to understand
- Liked the “buddy up” and “offer a ride” suggestion

Stakeholder

- Change the font
- Add color to sections to make the text stand out
Feedback

Peer

- “Share positive screening experiences” may be misunderstood as “testing positive” for something
- Different/more attractive font on back
- Add contact information if family/friends have more questions
- Add kinds of screenings (diabetes, heart)

Revised Social Support Brochure

- Color highlights important text
- Emphasizes the people you care about
- Single question more dynamic and attention-grabbing
- Used more appealing font
- Added emphasis
- Color change for better visual appeal
## Lessons Learned: SHAPE Poster

<table>
<thead>
<tr>
<th>Reviewer</th>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community partner</td>
<td>Colorful&lt;br&gt;Easy to understand the message&lt;br&gt;Could change quote&lt;br&gt;Photo could be changed&lt;br&gt;Use of ‘SHAPE’ and logo as top and bottom border&lt;br&gt;Text boxes and pictures needs to be aligned</td>
</tr>
<tr>
<td>Peers</td>
<td>Good use of color&lt;br&gt;Good pictures&lt;br&gt;Message clear and crisp&lt;br&gt;Photograph of the couple is pixelated&lt;br&gt;Could include contact information&lt;br&gt;Information on types of screening</td>
</tr>
</tbody>
</table>
Revised SHAPE Poster

“I know I have my diabetes
Under control and am able to
enjoy life! This is possible
because I go for regular
screening.”
“DO YOU???”

Ask your local health care provider about regular
screening of diabetes, blood pressure, cancer, vision and
hearing.......stay safe, remain in SHAPE, live life!

Get SCREENED today.
Contact: Community Health Care System
Most simple screening tests can be done right in your healthcare provider’s office.

Your local Community Health Centers also offer screening services. These Centers accept Medicare, Medicaid, and private insurance. Call today...

...and get in SHAPE

Community Health Care Systems, Inc.

Johnson County Center for Community Health
508 West Elm Street
Wrightsville, GA 31096
Phone: (478) 864-2600

Sandersville Community Health Center
616 Ferncrest Drive
Sandersville, GA 31082
Phone: (478) 552-1620

Tennille Community Health Center
116 Smith Street
Tennille, GA 31089
Phone: (478) 552-7384
**Why?** Regular screening can help you stay healthier longer—that means maintaining your independence and avoiding disability. Simple tests can help detect new conditions as well as complications of chronic conditions.

“I used to think ‘if I get sick, I get sick.’ And that’s that. But now I know it doesn’t have to be that way. Getting screened regularly will help me stay the way I like to be—active and feeling great!”

**How?**

1. Call your healthcare provider or a Community Health Center near you (see back panel) and schedule your appointment.

2. After you have been screened, discuss your results with your healthcare provider.

3. Know when to schedule your next appointment and mark your calendar. Remember: regular screening is the key!

4. Share your experience with your friends. Let them know how important screening is for an active, healthy, independent lifestyle.

**What?** There are many different screening tests available today—so it’s ok to feel confused by all the options. Ask your healthcare provider about these simple screening tests to get you started:

- Heart—blood pressure, cholesterol
- Obesity—body mass index
- Diabetes—glucose level
- Cancer—clinical breast exam, fecal occult blood test
- Vision and hearing

**Tip!** Many insurance plans cover simple screening tests. Call your provider to see what they cover (for Medicare, call 1-800-633-4227). No insurance? Check with a Community Health Center near you for information on sliding scale fees (see back panel)

**Tip!** If you do not have a regular healthcare provider, contact your nearest Community Health Center today (see back panel)

*Being in SHAPE means staying active, eating right, and getting screened regularly*
Thank you for being screened

By getting screened, you are helping yourself stay healthy and active—you are in SHAPE!

Now, it’s your turn to help others.

Think about the important people in your life...
- Friends
- Brothers and Sisters
- Members of your Church
- Neighbors

Have they been screened??

Some of these people may not be getting the health screenings they need. Even those who exercise and eat right need to be screened regularly!

Show your friends and family that you care about them. Check to see if they are in SHAPE too.

Senior Health Awareness & Prevention Education

Thank you for being screened

By getting screened, you are helping yourself stay healthy and active—you are in SHAPE!

Now, it’s your turn to help others.

Think about the important people in your life...
- Friends
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- Members of your Church
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- **Buddy up!** Make an appointment with your friend to go get screened together
- Offer your friend a ride to the appointment

Help your friends and family get into SHAPE. Ask them if they’ve been screened.
"I know I have my diabetes. Under control and am able to enjoy life! This is possible because I go for regular screening."

"DO YOU???

Ask your local health care provider about regular screening of diabetes, blood pressure, cancer, vision and hearing. . . . . . STAY SAFE, REMAIN IN SHAPE, LIVE LIFE!

Get SCREENED today.

Contact: Community Health Care System
7 April 2009

Community Health Care Systems, Inc.
616 Ferncrest Drive
Sandersville, GA 31082

Dear [head of Community Health Care Systems, Inc]:

Thank you for agreeing to be part of the Senior Health Awareness & Prevention Education (SHAPE) screening program. We appreciate all of your valuable contributions throughout the planning process and now welcome your assistance in the proper implementation of SHAPE. Together, we can improve the quality of life for so many of Washington County’s seniors by encouraging and facilitating access to preventive health practices and screening services.

Screening is a fundamental step towards maintaining the active, independent lifestyles that Washington County seniors enjoy. Unfortunately, Georgia seniors are not up to date on recommended preventive services – even those covered by Medicare. Making matters worse, the numbers show that rural residents are less likely to engage in screening practices than their urban counterparts. This means that Washington County seniors are at even greater risk for health problems that could be prevented!

By participating in the SHAPE screening program, you will be empowering local seniors to take the proper steps towards protecting their health and staying active. Follow these simple steps to help get Washington County seniors in SHAPE:

- Display the SHAPE table tent in your reception area so staff members may see the side with program reminders and seniors may see the “Ask how you can help” side
- If a patient is over 65 years of age and has engaged in health screening during that visit OR asks “How can I help?”:
  - Thank him/her for being proactive about health
  - Praise him/her for seeking information (if appropriate)
  - Give him/her a SHAPE brochure
  - Give him/her a SHAPE sticker and write in the date of his/her next recommended screening visit
  - Encourage him/her to bring a friend along to the next screening appointment

Should you need additional brochures or other materials, please call Archway Partnership: Health at (478) 552-2011. Again, we appreciate your participation in the SHAPE screening program and your dedication to improving the quality of life of Washington County seniors.

Sincerely,

The SHAPE Team
7 April 2009

Washington County Senior Center
446 North Hospital Road
Sandersville, GA 31082

Dear [head of WaCo Senior Center]:

Thank you for agreeing to be part of the Senior Health Awareness & Prevention Education (SHAPE) screening program. We appreciate all of your valuable contributions throughout the planning process and now welcome your assistance in the proper implementation of SHAPE. Together, we can improve the quality of life for so many of Washington County’s seniors by encouraging and facilitating access to preventive health practices and screening services.

Screening is a fundamental step towards maintaining the active, independent lifestyles that Washington County seniors enjoy. Unfortunately, Georgia seniors are not up to date on recommended preventive services – even those covered by Medicare. Making matters worse, the numbers show that rural residents are less likely to engage in screening practices than urban residents. This means that Washington County seniors are at even greater risk for health problems that could be prevented!

By participating in the SHAPE screening program, you will be empowering local seniors to take the proper steps towards protecting their health and staying active. Follow these simple steps to help get Washington County seniors in SHAPE:

- Display the SHAPE poster in a highly trafficked area
- Display the SHAPE table tent in your reception area so staff members may see the side with program reminders and seniors may see the “Ask for information” side
- Display the SHAPE brochures and encourage seniors to read them
- Encourage seniors to share positive health screening experiences with their friends
- If you hear seniors sharing their positive health screening experiences, praise them for raising awareness of preventive practices

Should you need additional brochures or other materials, please call Archway Partnership: Health at (478) 552-2011. Again, we appreciate your participation in the SHAPE screening program and your dedication to improving the quality of life of Washington County seniors.

Sincerely,

The SHAPE Team
I got screened... I'm in SHAPE!

ASK ME ABOUT IT

Next screening: ___________________

Place this sticker on your calendar as a reminder to stay in SHAPE!

Senior Health Awareness & Prevention Education

I got screened... I'm in SHAPE!

ASK ME ABOUT IT

Next screening: ___________________

Place this sticker on your calendar as a reminder to stay in SHAPE!

Senior Health Awareness & Prevention Education

I got screened... I'm in SHAPE!

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Senior Health Awareness & Prevention Education

I got screened... I'm in SHAPE!

ASK ME ABOUT IT

Next screening: ___________________

Place this sticker on your calendar as a reminder to stay in SHAPE!

Senior Health Awareness & Prevention Education

I got screened... I'm in SHAPE!

ASK ME ABOUT IT

Next screening: ___________________

Place this sticker on your calendar as a reminder to stay in SHAPE!
Many seniors are not getting the health screenings they need…

**Ask How You Can Help**

Stay healthy, stay active...

**Ask For Information On Health Screenings**

Thank you!

If you need more brochures, call the Archway Partnership Project at (478) 552-2011

<table>
<thead>
<tr>
<th>Senior Health Awareness &amp; Prevention Education</th>
<th>Senior Health Awareness &amp; Prevention Education</th>
</tr>
</thead>
</table>

If you need more brochures, call the Archway Partnership Project at (478) 552-2011

Thank you!

If you hear seniors sharing their positive screening experiences, praise them for raising awareness about health screenings.

Encouraging seniors to share their positive screening experiences.

Displaying the SHAPE brochure and poster.

If the patient:

- Is over 65 years old
- Received a health screening today (e.g., BP check, FOBT, CBE, etc)
- OR asks “how can I help?”
- Received a health screening today (e.g., BP check, FOBT, CBE, etc)
- Is over 65 years old

If the patient:

Remember to:

- Thank him/her for being proactive about health
- Praise him/her for seeking information (if appropriate)
- Give him/her a SHAPE brochure
- Give him/her a SHAPE sticker and fill in the date of his/her next screening appointment
- Encourage him/her to bring a friend along to the next screening appointment

Thank you!

If you need more brochures, call the Archway Partnership Project at (478) 552-2011

ASK FOR INFORMATION ON HEALTH SCREENINGS