



**Nutrition and Aging
Resource Center**

Evaluation Report for the 2023 Evaluation Webinar Series

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Executive Summary

Program evaluation was identified as a top training need in the Nutrition and Aging Resource Center (NRCNA) 2022 Needs Assessment. To meet the aging nutrition network's training needs the NRCNA launched a four-part Evaluation Webinar Series (EWS).

Four one-hour webinars were hosted by evaluation experts focused on 1) leveraging community partnerships, 2) utilizing valid food security and nutritional risk screening tools, 3) culturally-appropriate program planning, and 4) grant funding. All webinars discussed best practices for and the importance of program evaluation.

The webinar series aims to increase attendees' knowledge of and familiarity with the subject matter and for attendees to utilize this knowledge for action in their programs and organizations. Following each webinar, viewers complete an online retrospective survey to evaluate the webinar's effectiveness (Step 5: Assessing Effectiveness of the Social Marketing Theory).

The survey assessed the key outcomes including attendance patterns, change in perceived subject matter knowledge and familiarity, level of behavioral intention to carry out recommended action steps, and webinar quality (i.e., overall satisfaction, professionalism, reliability, utility, understandability, and future attendance).

Key Take-Aways

Attendance

- Achieved a **high attendance rate (49.3%)** with 766 registered and 378 attending.
- Most utilized promotion strategies were **NRCNA e-newsletter, email listserv and peer-to-peer sharing.**
- Engaged newly aware, new users and veteran NRCNA users.

Outcomes

- **Increased** perceived **knowledge and familiarity** with webinar subject matter.
- **Elicited high behavioral intention to carry out recommended action steps.**
- **Achieved high satisfaction** and webinar quality outcomes (scoring higher than 4 out of 5-point scale).
- **Almost all (99%)** would **attend future NRCNA-sponsored training** and **recommend them to a colleague.**

These findings indicate that webinars continue to be a successful and effective service provided by the NRCNA. To ensure continued webinar success we suggest:

- Utilizing popular promotion strategies including the NRCNA e-newsletter and listserv
- Creating easily sharable promotional materials to encourage peer-to-peer sharing
- Encouraging organizational engagement (e.g., promoting watch parties and meetings with supervisors or team following the webinars, facilitating peer-to-peer discussions, etc.)

Introduction

The Nutrition and Aging Resource Center (NRCNA) webinar topics are based on the 2022 NRCNA comprehensive needs assessment findings. Program evaluation activities were identified as the top training needs, or low familiarity and high interest, by the national aging network. 'Program evaluation' is defined as, *"the systematic collection of information about activities, characteristics, and outcomes of programs, for use by people to reduce uncertainties, improve effectiveness, and make decisions"* (Patton, 2008, p. 39).

The Center for Disease Control and Prevention (CDC) lists some reasons for program evaluation:

- "To monitor progress toward the program's goals,
- To determine whether program components are producing the desired progress on outcomes,
- To permit comparisons among groups, particularly among populations with disproportionately high-risk factors and adverse health outcomes,
- To justify the need for further funding and support,
- To find opportunities for continuous quality improvement,
- To ensure that effective programs are maintained, and resources are not wasted on ineffective programs."

The Senior Nutrition Program has minimum requirements for program evaluation, including meals served, participation rates, nutritional risk of participants, nutrition analysis of meals to meet the nutrition requirement, staffing, and hours of nutrition counseling and education provided. States and local service providers engage in additional program evaluation activities for the above reasons. Since program evaluation is a broad topic, we chose experts who could tie program evaluation to other high-interest topics. These topics included community partnerships, culturally diverse menu planning, prioritization, malnutrition, funding sustainability, and utilizing data.

This report reviews the Evaluation Webinar Series (EWS) and summarizes the impact assessment from a post-webinar survey. This report completes step five (Assessing Effectiveness) of the Social Marketing Theory, which is the program planning model used by the NRCNA (Appendix A Webinar Program Planning Model & Appendix B NRCNA Logic Model).

Descriptions of Webinars

Connecting the Dots: Utilizing Data to Build Strong Partnerships (May 2022)

Dr. Karon L. Phillips, PhD, MPH, MS, CHES, CAPS, FGSA

Biography:

Dr. Karon L. Phillips is a public health gerontologist working in the Washington, D.C. area, as the Policy Development Manager at Trust for America's Health, co-leading the age-friendly public health systems initiative. Dr. Phillips also serves as an adjunct professor for the University of Maryland, Baltimore County and University of Maryland Global Campus.

She identifies herself as a public health gerontologist, community engagement specialist, storyteller, and educator. Dr. Phillips' current

research interest is centered on the study, and ultimate elimination, of health disparities among older historically marginalized populations through cultural competence, improving health literacy, and community-based interventions. Dr. Phillips has been engaged with the field of aging for over 15 years. Most recently she served as the Program Manager for n4a. In this role, she developed content and resources for enGAGED, The National Resource Center for Engaging Older Adults. Prior to her work at n4a, she served as a Scientific Review Officer contractor for the Center for Scientific Review at the National Institutes of Health (NIH). In this position, she supported the scientific review of research grant applications made to the NIH. She also has experience leading the implementation of programs and services focused on health promotion, including chronic disease self-management and falls prevention, and developing new partnerships to provide community-based services to older adults. Dr. Phillips has significant experience conducting and coordinating coalition building and programmatic activities to promote healthy aging and health equity. She has extensive training in community-based interventions and the development of community-based partnerships. Along with facilitating the addition of new programs and services, she has developed and led numerous research projects and multi-site needs assessments in several communities that serve older adults.



A native of Atlanta, GA, Dr. Phillips received her undergraduate degree in English and Women's Studies from Cornell University, a Master of Public Health with a concentration in Health Policy and Management, and a PhD in Aging Studies from

the University of South Florida. She is a proud member of Delta Sigma Theta Sorority, Inc and Bataala Washington, an all-female Afro-Brazilian drumming group.

Presentation Summary:

The first webinar in our 2023 four-part webinar series will discuss the importance of collecting evaluation data to inform partners. Dr. Karon Phillips will share her expertise in aging and public health to guide participants in identifying ways that data sharing can enhance relationships and build coalitions with current associates, potential funders, and future stakeholders. Using data to lead decision-making, one can then demonstrate a program's impact to prospective and existing partners through sharing outcomes and activities that lead to healthy aging and health equity.

Learning Objectives:

1. To describe best practices when sharing data with partners.
2. To share examples of how data has led to stronger partnerships

Action Step:

Identify how you can translate your work back to the community (e.g., the methods, practices, or approaches you can/will use).

Placing the 'Value' in Evaluation: Practical Tips for Measuring Impact (June 2022)

Seanna Marceaux, MS, RDN, LD

Biography:

Seanna Marceaux, MS RDN LD, brings 15+ years of experience in the provision of nutrition services to some of the most vulnerable community members in Austin, TX. In addition to overseeing a commercial kitchen producing approximately 3,500 meals each day including medically tailored diets, Seanna also develops and implements evaluation methods to objectively allocate limited resources, prioritize services and measure programmatic impact. Healthcare system approaches that address social determinants of health, which positively impacts health outcomes, saves the healthcare system and taxpayers money as well as helping people live with dignity and independence in their own homes. Seanna has a Master of Science degree in Human Nutrition from Texas State University and is a licensed and registered dietitian nutritionist. She and her colleagues were published in the Journal of Nutrition, Health and Aging—"Impact of home-delivered meals on nutrition status among older adults in central Texas (2018)." Seanna has been honored for her commitment to the ideals of 'Scholarship, Leadership and Services' by the National Society of Collegiate Scholars, and has received awards for 'Innovations in Dietetics Practice and Education' by the Academy of Nutrition and Dietetics as well as 'Leadership, Research and Academic Excellence' by the School of Family & Consumer Sciences, Nutrition & Foods, Texas State University.



Presentation Summary:

Do your programs or services make an impact on those you serve? How do you know? How do you measure it? Or have you ever had to reduce participants in a program because funding was cut? Or do you have a wait list for services – how do you decide who gets enrolled first? As community based and social service agencies, it can seem daunting to measure our success, to show the impact we are making, especially when evaluation isn't something funders typically fund. Join us as we discuss why evaluation is important, how it can be used to help objectively prioritize limited resources, and how to get started

Learning Objectives:

1. To discuss why evaluation is important in the work we all do.
2. To share real-life examples of how to evaluate programs internally using instruments that measure nutrition status and food insecurity.

3. To share new and upcoming trends in this landscape that will further demonstrate the clinical impact community-based nutrition programs have on participants.

Action Step:

Explore the use of a tool to measure food insecurity or nutrition status (e.g., adding to your operational workflow, identifying where in the process the tool will be used, discussing it with leadership, conducting a feasibility pilot, etc.).

Using Data and Satisfaction Surveys to Solicit the Voice of the Customer in Diverse and Culturally Appropriate Menu Planning (July 2022)

Dr. Nancy Munoz, DCN, MHA, RDN, FAND

Biography:

Nancy Munoz, DCN, MHA, RDN, FAND, is an UMass, Amherst Nutrition Department instructor. For 35 years, She functioned in a number of clinical nutrition and food service management leadership roles, for Genesis Healthcare. Most recently, Nancy serves as the Chief of Nutrition and Foodservice for the Southern Nevada Healthcare System, overseeing the care provided to 72,000 Veterans in the Las Vegas Valley. Nancy serves on numerous committees, including the National Pressure Injury Advisory Panel, WoundSource, Dietetics in Healthcare Communities, the Healthy Aging Dietetics Practice Group of the Academy of Nutrition and Dietetics, and several others. Dr. Munoz received her Doctorate in Clinical Nutrition from Rutgers University, School of Health-Related Professions and her Master of General Administration (with a concentration in Health Care) from the University of Maryland.



Presentation Summary:

Institutions that provide meals to diverse populations can be challenged with securing data and program participant input to create appealing, culturally appropriate menus, within financial and supply constraints, and produce minimal waste. Securing program participant input is essential to ensure that menus and meals are adequate to promote maximum acceptance and meet program participants' needs. In this webinar, the presenter will discuss how to utilize and evaluate data to make menu and food system modifications that meet institutional constraints, cultural, and nutritional needs; as well as discuss the use of customer satisfaction surveys to obtain the voice of the customer for menu and meal planning.

Learning Objectives:

1. Utilize and evaluate data to make menu and food system modifications that meet institutional constraints, cultural, and nutritional needs.
2. Understand the use of customer satisfaction surveys as a tool to collect data to make system changes.
3. Implement purposeful quality improvement activities.

Action Step:

Evaluate the appropriateness of your menus given your current site profile.

Using Data Effectively in Federal Grant Applications (August 2022)

Jane Goeken

Biography:

Jane Nolan Goeken has been a Community Development Specialist with Iowa State University Extension and Outreach for 21 years. She has a bachelor's degree in journalism/mass communications and a master's degree in public administration, both from Iowa State University. Jane has 35 years of experience writing and reviewing grant applications and working with various federal, state, local and private foundation grant programs. She developed and presents ISU Extension and Outreach's Grant Writing 101 and Grant Writing 201 workshops. Jane's office is in Spencer, IA.



Presentation Summary:

In this webinar, Ms. Goeken will share her 35+ years of cumulated knowledge on creating successful evaluation plans for grant applications. There will be useful information on grant applications, including data sources, collection, and reporting while going through a real example. Mr. Goeken will provide tips and practical examples on connecting your organization's activities, goals, and values to the purpose of the grant. Lastly, to ensure attendees can utilize the webinar's content in their own grant writing experiences, the presentation will provide a template for creating a strong grant application.

Learning Objectives:

1. Identify at least one type of primary data that could be used in an evaluation plan for a grant project.
2. Identify at least one source of secondary data that could be used in an evaluation plan for a grant project.
3. Collect secondary data related to senior nutrition programs for your specific community.

Action Step:

Initiate (or review existing) qualitative data-gathering activity that will engage clients and other stakeholders in identifying a problem or need. Example activities include needs assessment, surveys, focus groups, etc.

Survey

Evaluation Design

A retrospective 23-item online Qualtrics® survey was utilized to assess the impact and quality of the Evaluation Webinar Series.

Data Collection

The survey QR code and link were provided on the ending webinar PowerPoint slide and in the webinar chat multiple times. The moderator reminded attendees of the survey, and ISU sent a follow-up email immediately following the webinar and one week after the webinar. We received 138 evaluations (36.5% of attendees).

Webinar	Registered (n)	Attended (n)	Attendance Rate (%)	Survey Responses
#1	215	106	49.3%	38
#2	150	62	41.3%	25
#3	208	111	53.4%	49
#4	193	99	51.3%	26
Total	766	378	49.3%	138 (36.5%)

Questions

The NRCNA aims to increase **familiarity** and **knowledge** of relevant and useful topics and provide resources that **enable the Aging Nutrition Network to better serve their aging community**. Therefore, the main outcomes for the EWS were familiarity, knowledge, and behavioral intention.

Respondents were asked to reflect on their **familiarity** and **knowledge** of the webinar's content BEFORE and AFTER the webinar using a 5-point Likert scale. The familiarity question was on a slide from 0 to 5. Zero was included to ensure respondents moved the slider (1=Not familiar; 5= Very familiar). Knowledge was a multiple-choice question with the following options that progress in knowledge level (Table 1).

Table 1. Knowledge Question Description with Levels.

Response Option	Prompt	Knowledge Level
Not at all (1)	I have never heard of it or have heard of it but don't know anything about it.	No knowledge
Slightly (2)	I can recall basic elements or facts but refer to resources when I need to.	Factual knowledge
Moderately (3)	I can relate the facts in a meaningful way.	Conceptual knowledge
Very (4)	I can apply the concepts.	Procedural knowledge
Extremely (5)	I have a thorough understanding of concepts and facts and am able to explain/teach to a variety of audiences.	Metacognitive knowledge

The Theory of Planned Behavior (TPB) was utilized to assess the **respondent's intention** of carrying out the webinars' recommended action steps (Ajzen, 1991; Figure 1).

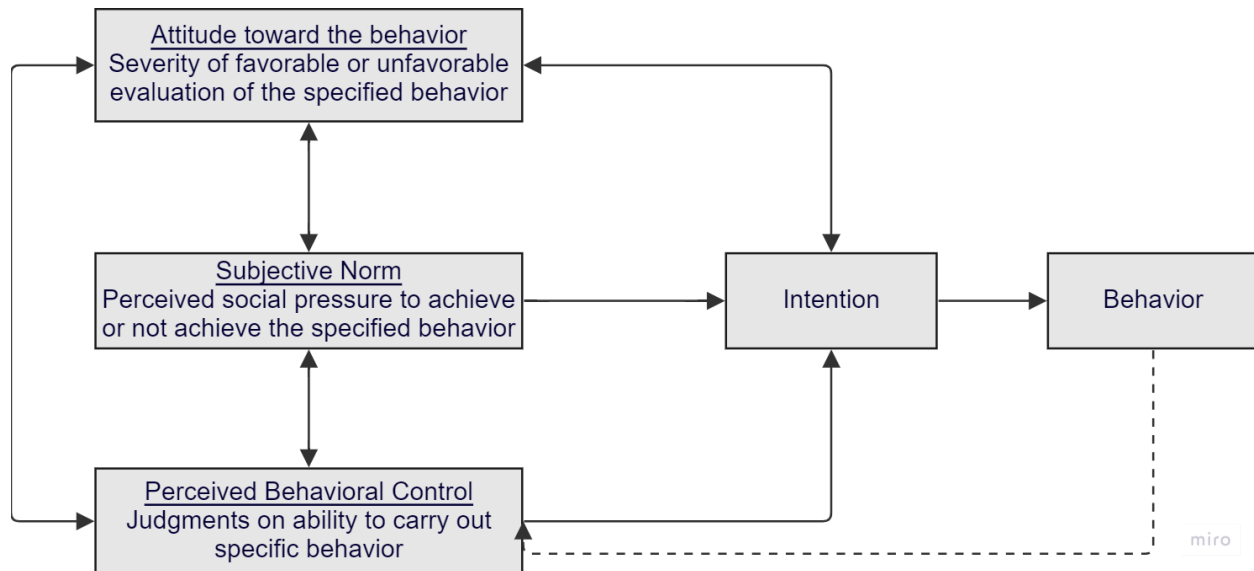


Figure 1. Theory of Planned Behavior Constructs.

Respondents ranked their level of agreement for TPB statements on a 7-point Likert scale (1=strongly disagree; 7=strongly agree). These questions were only asked AFTER the webinar.

Data Analysis

Data from the webinars were consolidated to show the impact of the overall series. All data were analyzed via descriptive statistics. Wilcoxon signed-rank tests were performed to determine familiarity and knowledge changes from BEFORE the webinar to AFTER.



Results

Participant Characteristics

Respondents were mostly female (80%), non-Hispanic (90%), White (81%) and with some post-graduate work or advanced degree (60%). The average age was 48 years old with one in three (34%) participants being 60 years and more (Table 2). One-third (33%) of respondents were government employees, and 24% were program managers or directors.

Table 2. Respondent Demographics.

Demographics	Number	Percentage
Gender (n=92)		
Female	80	87.0
Male	9	9.8
Gender variant/Non-conforming	-	-
Prefer not to answer	3	3.3
Age (years) (n=73)		
20-39	22	30.1
40-59	34	46.6
60+	17	23.3
Race (n=88)		
American Indian or Alaskan Native	2	2.3
Asian	4	4.5
Black or African American	8	9.1
White	71	80.7
Native Hawaiian/Other Pacific Islander	-	-
North African or Middle Eastern	-	-
Not listed	-	-
Do not wish to answer	5	5.7
Spanish, Latino, or Hispanic (n=89)		
No	80	89.9
Yes	4	4.5
Do not wish to answer	5	5.6
Education (n=91)		
High School Diploma	5	5.5
Some College	7	7.7
Bachelor's Degree	24	26.4
Some post-graduate work or advanced degree	55	60.4

During in Aging Network (n=87)			
	Less than 2 years	23	26.4
	3 to 5 years	16	18.4
	6 to 10 years	12	13.8
	11 to 15 years	13	14.9
	More than 15 years	23	26.4
Service Area (n=87)			
	Rural	34	39.1
	Suburban	22	25.3
	Urban	31	35.6

The top three ways respondents reported learning about the webinar were the **NRCNA e-newsletter, email listserv, and colleague or friend (Figure 2)**. Only two people indicated learning about the webinar through the NRCNA promotional videos.



Figure 2. Webinar promotion (n=121, multiple response).

The webinars engaged new and past NRCNA consumers. About **one-half (47%) have been aware of the NRCNA for less than two years** and **42% have been aware for more than two years.**

One in five respondents at the first webinar were **hearing about the NRCNA for the first time**. The proportion of newly aware respondents decreased with each webinar (Figure 3).

Furthermore, almost **one-half (46%)** of respondents at the first webinars **reported NOT using the NRCNA website or other resources and services prior to the webinar.**

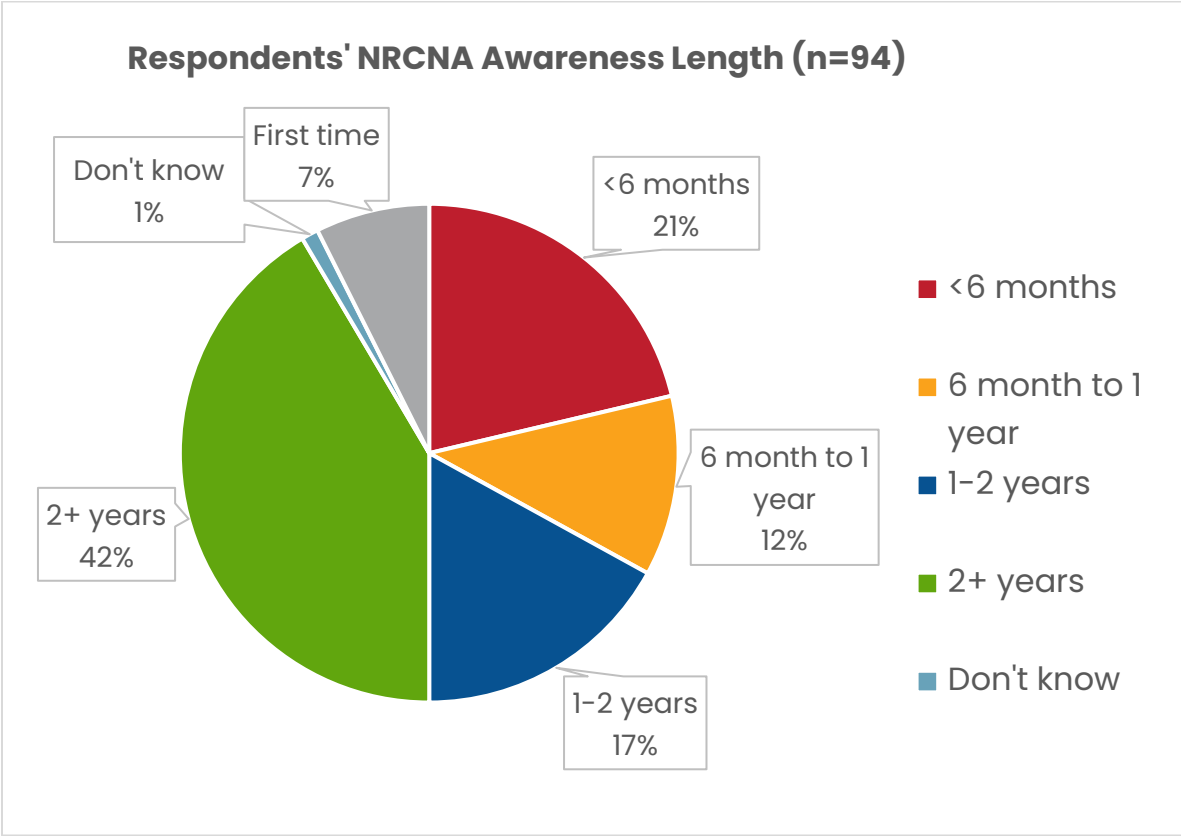


Figure 3. NRCNA awareness length.

At the first webinar, **two-thirds of respondents were experiencing NRCNA-sponsored training for the first time (Figure 4)**. At the last webinar, one-third of respondents were experiencing NRCNA-sponsored training for the first time. **This trend is desirable because it shows participants are likely returning**, and there was a consistent flow of new attendees.

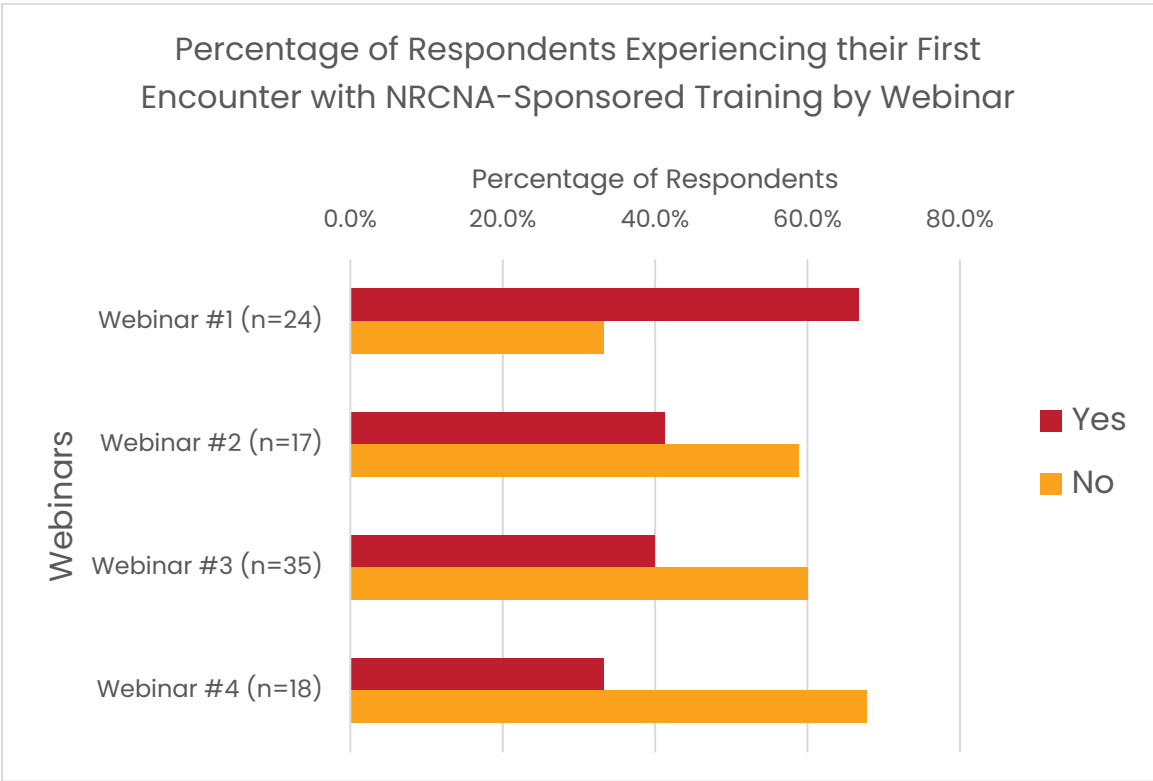


Figure 4. Percentage of respondents experiencing their first encounter with NRCNA-sponsored training by webinar.

Webinar Quality

The overall webinar satisfaction score was 4.6 out of 5. Similarly, respondents highly rated the other webinar quality metrics (Figure 5).

Additionally, **almost all** respondents indicated they **would attend a future NRCNA-sponsored resource (99%)** and would **recommend them to a colleague (99%)**.

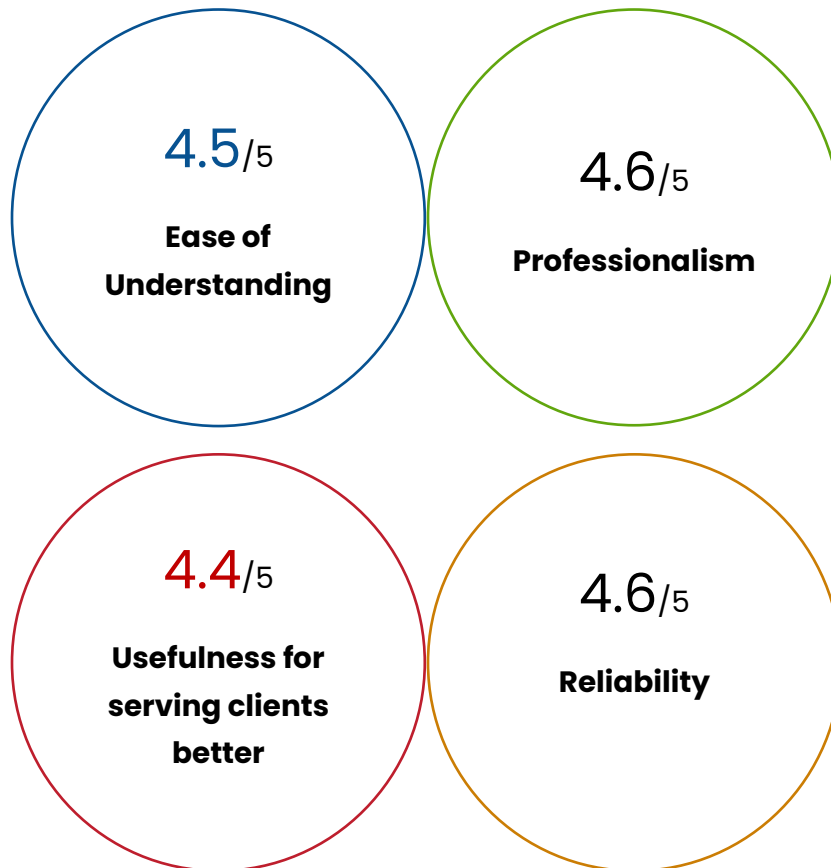


Figure 5. Webinar quality ratings.

Webinar Outcomes

The primary outcomes of the webinars were subject matter **knowledge** and **familiarity**. There was a **significant increase in both** from BEFORE to AFTER the webinar (Figure 6). The average “AFTER” knowledge score indicates procedural knowledge, or that the **attendees are now able to apply the concepts** discussed during the webinar.

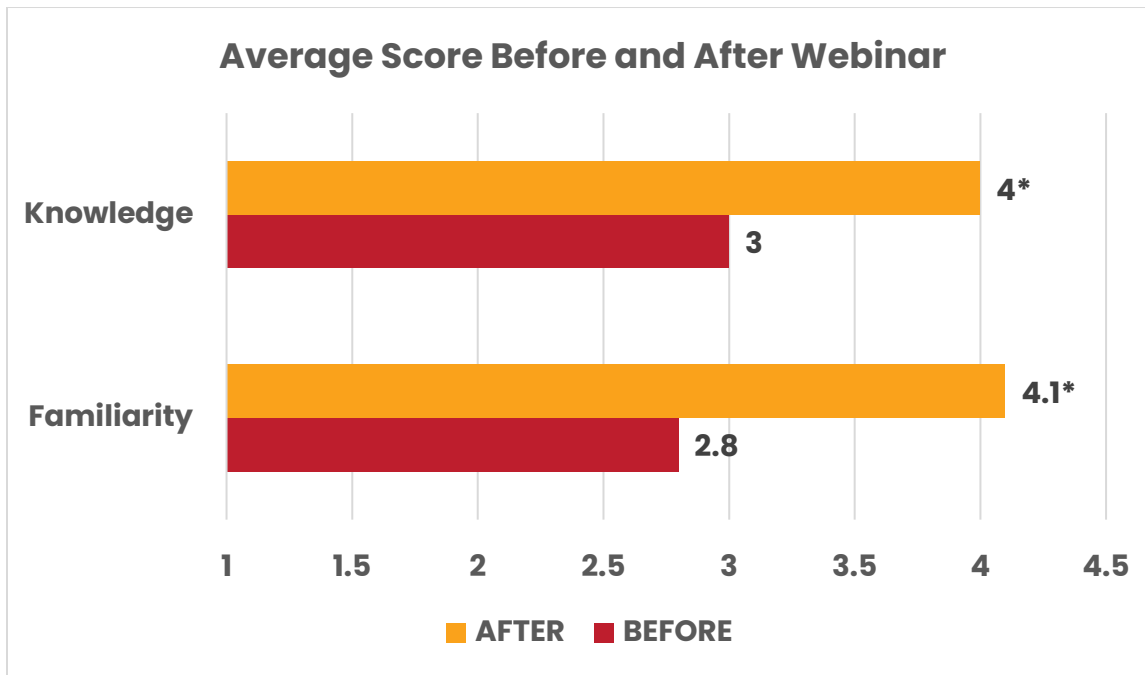


Figure 6. Significant increase in perceived knowledge and familiarity * p -value<0.001

Additionally, **respondents reported having high intentions of carrying out the recommended action step for each webinar** (Figure 7). The recommended action steps for each webinar are listed below (Table 3).

Table 3. Webinar Action Steps.

Webinar	Action Step
#1	Identify how you can translate your work back to the community (e.g., the methods, practices, or approaches you can/will use).
#2	Explore the use of a tool to measure food insecurity or nutrition status (e.g., adding to your operational workflow, identifying where in the process the tool will be used, discussing it with leadership, conducting a feasibility pilot, etc.).
#3	Evaluate the appropriateness of your menus given your current site profile.
#4	Initiate (or review existing) qualitative data-gathering activity that will engage clients and other stakeholders in identifying a problem or need. Example activities include needs assessment, survey, focus groups, etc.

Attendees had positive attitudes (average=5.5±1.4), perceived behavior control (average=4.3±1.4), and intent (average=4.7±1.2) for the action items. **This indicates the webinar series was effective at producing high intention to carry out the action item, which strongly predicts actual behavior.**

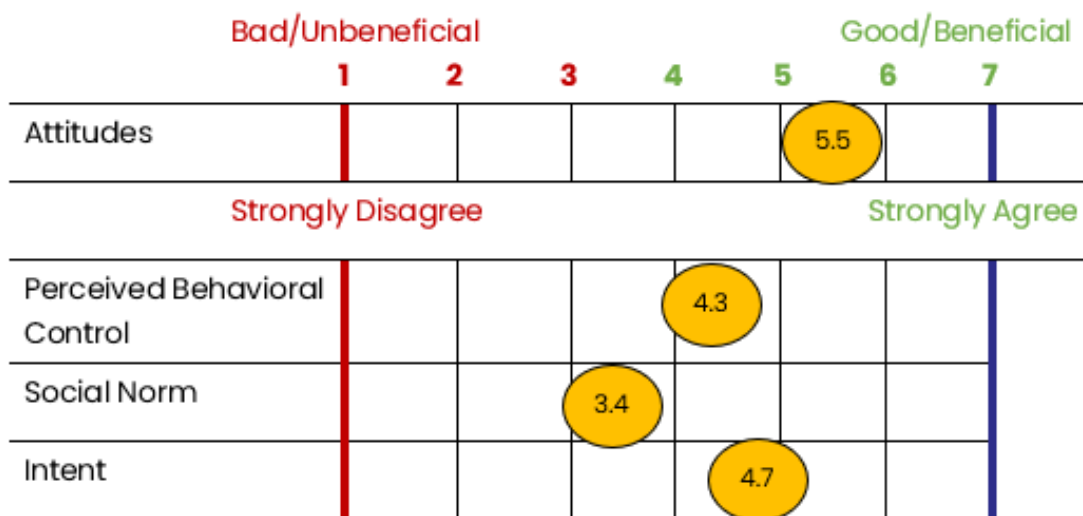


Figure 7. Behavior Outcomes for Webinar Series (n=104).

Social norm was close to neutral (average=3.4±1.2). Social norm statements included, "I feel social pressure to implement the recommended action step," "It is expected of me that I implement the recommended action step" and, "Most people whose opinions I value think that I should implement the recommended action step."

Respondents were able to share why they reported low social norm (n=13). The main themes were:

- **Lack of pressure or expectation (n=6, 46%)**
- **Not being in a position of power (n=4, 31%)**
- **Lack of awareness or peers/haven't see it done (n=3, 23%)**
- **New to job (n=2, 15%)**
- **Not part of their job/NA (n=2, 15%)**
- **Time/understaffing (n=1, 8%)**

Some direct responses include, *"I don't feel pressure but a desire to implement", "I have not really had any opinions encouraging the step", "I don't think anyone had this expectation of me, but again, it's TBD since I'm new", "Lack of awareness by my circle", "Organizational hierarchy- I am just not in charge and a lot of what I would LIKE to do doesn't get done" and "I have not seen this done previously."*

Future Planning

Almost one-half (44%) indicated needing additional resources to carry out the recommended action step. Some were already implementing the action step (19%) while 18% said they were not in a position to implement the action step .

The most common resources needed to carry out the action step were **funding (61%), time (58%) and paid personnel (47%)** (Figure 6). Next in the top five most needed resources were **how-to guides (44%) and more training (42%)**, which the NRCNA can create and promote. Noteworthy, 33% reported needing internal social support (i.e., support and encouragement from peers and supervisors within the organization). This relates to the low social norm scores. The NRCNA may have an opportunity to provide resources and technical assistance on effective strategies to facilitate organizational support for the webinar's action steps.

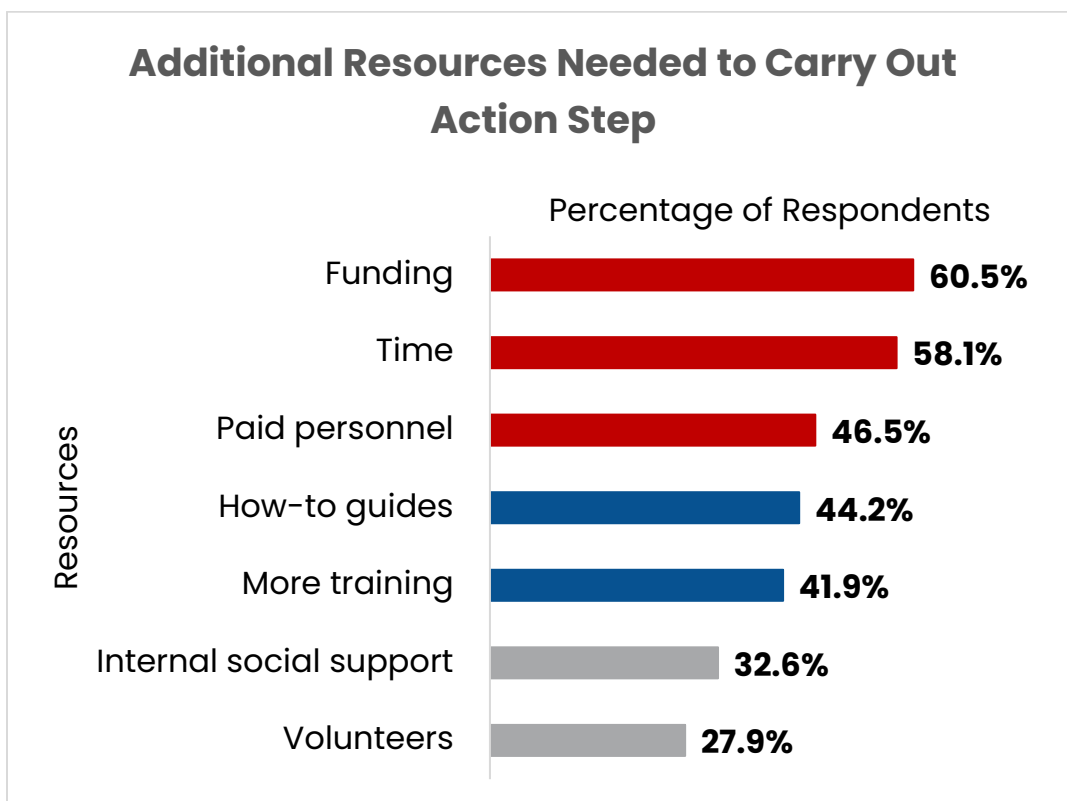


Figure 6. Additional Resources Needed to Carry Out Action Step. (n=43)

Conclusion

In conclusion, the Evaluation Webinar Series was successful and effective at 1) engaging new and current NRCNA users, 2) eliciting subject matter knowledge growth and high intention to act, and 3) providing quality training. intentions to act.

Moving Forward

There are three opportunities to enhance the NRCNA annual webinar series including marketing, webinar schedules, and encouraging organizational engagement.

Encouraging Organizational Engagement

The one outcome that did not meet the established quality standard was the social norm item or low social norm/support for the recommended action steps. Some ideas for the NRCNA to assist organizational engagement are by encouraging:

- Webinar watch parties,
- Referring the webinars to supervisors, peers, and teams,
- Scheduling meetings following the webinars with supervisors, peers, and teams to discuss webinar content and recommended action step and,
- Facilitate peer discussions through NRCNA monthly meetings and listservs.

Marketing

Future webinar marketing should continue to utilize popular promotion strategies including the NRCNA listserv, e-newsletter, and peer-to-peer sharing. To assist with peer-to-peer sharing, the NRCNA could create marketing material that is shareable.

Low responses for other NRCNA outreach methods could be from low exposure. NRCNA should promote webinars multiple times on each platform. Additionally, according to a webinar host organization, Tuesdays and Wednesdays are the best days to send invites to webinars (Livestorm, 2023).

Webinar Schedules

Webinars have been scheduled once a month on Fridays during lunchtime. According to a webinar host organization, the best days to schedule webinars are Wednesdays and Thursdays (Livestorm, 2023). Additionally, May and August have been reported to be harder months due to school and conference schedules. Therefore, this year, we are hosting webinars on Wednesdays every other week during June and July.

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