



COMMUNITY-BASED HEALTH INTERVENTIONS

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II. COMMUNITY - BASED HEALTH INTERVENTIONS OVERVIEW

OUTLINES

1. Rationale for the development and implementation of community intervention
2. Contextual framework of Community-Based interventions
3. Advantages of Community- level interventions
4. Pathways to community intervention
5. Community involvement
6. Theoretical Frameworks for Planning Community – Based Health interventions
7. Evaluation of Community-Based Health Interventions

I. Overview

- Efforts to change high- risks behaviors remain the best mean
- Prevention should use appropriate behavioral change interventions
- Changing behavior is a complex decision- making process
- Making a lasting change in behavior is rarely a simple process, and usually involves a substantial commitment of time, effort and emotion.

2. Contextual framework of Community-Based interventions - Individualistic perspective -

- **Individual Focus**: Health and illness as a functions of an individual's behavior
- Psychologists developed a number of ways to effectively help people change their behavior and proposed theories to explain *how* change occurs.
- Psychological Theories of behavior change dominated and adapted to health behavior
 - **Theory of Reasoned Action (Ajzen & Fishbein, 1980)**
 - **Social Cognitive Theories (Bandura, 1977, 1997)**
 - **Stages of change (DiClemente & Prochaska, 1998);**
- Individual- level HIV risk – reduction intervention based on these theories
- Addressing risk behaviors : Knowledge, attitudes, beliefs, motivation , peer norms, risk- reduction, self – efficacy , and skill acquisition
- More evidence in their effectiveness in reducing HIV- risks behavior



❑ Individual – level HIV Prevention interventions

- Direct interaction between implementers of the program and its recipients
 - Small group
 - Face- to – face interventions
- Intensive and personalized program
- Target high- risk individuals within communities
- Focus on recipients' barriers to adopting and maintaining HIV – Protective behaviors.

Contextual framework of these interventions

- Community perspective -

- Broader Contextual Perspective Focus
- Focus on the individual – within- community
- Health and illness as a functions of multiplicity of factors: Social, environmental, familial and relational influence
- Multiple source of influences impact individual decision – marking process
- Many researchers indicated :
 - Characteristics of communities have an important influence on Health outcomes and Individual risks behaviors (Robert, 1998; Cohen, Scribner & Farley, 2000)
 - Ecological model documented associations between Community- level social and economic conditions and a variety of health outcomes (Acevedo- Garcia, 2001; Cohen et al. , 2000. etc.)
 - Community characteristics are associated with individual's risks for poor health outcomes (Diez- Roux et al., 1997; etc)
 - Researchers suggested that community/ system approaches are the most appropriate and feasible method for stimulating health , enhancing behavior through multi- dimensional community interventions (Green & Raeburn, 1990)



❑ **Community – level HIV Prevention interventions**

- Expanded to the community
- Numbers of people exposed to the intervention increased
- Do not target the entire population,
- But an identified at risk subgroups within the community
- Seeking to change not simply individuals
- Utilize Multidimensional community interventions and strategies
 - channels of influence: Social / friendship networks;
 - Social institutions : media , social venues
- Promote widespread behavior change

3. Advantages of Community- level interventions

- Reaching a broad proportion of people
- Targeting structures or social networks
- Results in changing existing community norms
- Enhancing health protection behavior
- Strategies used integrate multiple level of influences
- Community remains the most appropriate level to intervene with Health Prevention interventions

4. Pathways to community interventions :

*Community intervention can facilitate the adoption of HIV behavior through **2 pathways**:*

I. Direct intervention effects

- Effects produced through methods used in individual- level program
- Community participants interact with program interveners or change agents
- trained outreach workers or health educators approach provide brief, counseling , prevention materials, printed materials, etc

Pathways to community intervention (Cont'd)

2. Indirect intervention effects:

- Effects produced through methods unique to community intervention program
- No interaction with behavioral change agents for the intervention to have an impact
- Behavioral change requires simultaneous multi-faceted intervention within the community

5. Community Involvement

- The success of community intervention requires active involvement of community stakeholders
- **Goals:**
 1. **Ensuring buy-in by community members**
 2. **Increasing Acceptability , ownership and sustainability after the initial intervention**

N.B:

- No intervention can be successful without being accepted by the audience it was designed for
- Community members should be involved in whole process of community intervention (Community analysis, design and initiation, : implementation, maintenance and consolidation , and dissemination and reassessment of the process)

5. Planning community intervention

5 fundamental planning factors enhancing the success of community intervention:

- A. Conducting a comprehensive a needs assessment
- B. Adopting a theoretical framework for guiding development , implementation and program evaluation of community
- C. Integrate socio- ecological theories of behavioral change into the intervention
- D. Use implementation model to guide intervention delivery
- E. Use diverse intervention modalities



A. Factor I: Conducting a comprehensive needs assessment

- Collecting qualitative and quantitative needs assessment
- Collecting Data on social, economic, educational, epidemiological and organizational factors influencing health status
- Involving individuals knowledgeable in these procedures
- Defining the target group in the community
- Take into considerations: culture, beliefs and needs of the target population
- Involving key stakeholder within the community

Factor 2: Adopting a theoretical framework

- Having a theoretical model on which to base the needs assessments is important
- Helping to ensure that all relevant information is gathered
- Facilitating the assessment process
- Assessing community factors: intrapersonal, interpersonal, institutional, community or public policy factors that may influence individual and community health morbidity
- Guiding the development of appropriate interventions

Factor 2: Adopting a theoretical framework (Cont'd)

- Community planning framework guide the design, implementation and evaluation of interventions for specific at- risk subgroups within a community
- Most used models to facilitate the planning , implementation and evaluation of specific community interventions:
 - **PRECEDE- PROCEED Model (Green and Kreuter , 1991)**
 - **PATCH (USA Public Health Services in 1981)**
 - **MATCH (Simons- Morton, Greene & Gottlieb)**

a) PRECEDE- PROCEED Model

- PRECEDE: **P**redisposing , **R**einforcing and **E**nabling **C**onstructs in **E**ducation **D**iagnosis and **E**valuation
- PROCEED: **P**olicy, **R**egulatory, **O**rganizational , **C**onstructs in **E**ducational and **E**nvironmental **D**evelopment
- Most used planning model: focus predominantly on an extensive NEEDS ASSESSMENT
- ❖ **Helping in multidimensional diagnosis of the population, its needs, and other factors influencing health status in both individuals and community,**
- ❖ **Helping in negotiating with organizational structure to access available resources.**
- ❖ **Inviting participation from community members**
 - ❖ **The model has the potential to increase community ownership of the intervention**

a) PRECEDE- PROCEED Model (Ctd)

- **PRECEDE** provides the structure for planning a targeted and focused public health intervention/program
- **PROCEED** provides the structure for implementing and evaluating the public health intervention/program

HOW?

a) PRECEDE- PROCEED Model (Ctd)

- **PRECED** assesses community factors:
 - **Social assessment:** Determine the social problems and needs of a given population and identify desired results
 - **Epidemiological assessment:** Identify the health determinants of the identified problems and set priorities and goals
 - **Ecological assessment:** Analyze behavioral and environmental determinants that predispose, reinforce, and enable the behaviors and lifestyles are identified
 - Identify administrative and policy factors that influence implementation and **match appropriate interventions** that encourage desired and expected changes
 - **Implementation** of interventions

a) PRECEDE- PROCEED Model (Ctd)

- **PROCEED** identifies desired outcomes and program implementation:
 - **Implementation:** Design intervention, assess availability of resources, and implement program
 - **Process Evaluation:** Determine if program is reaching the targeted population and achieving desired goals
 - **Impact Evaluation:** Evaluate the change in behaviour
 - **Outcome Evaluation:** Identify if there is a decrease in the identified negative behavior or an increase in identified positive behavior

B) PATCH (USA Public Health Services in 1981)

Planned **A**pproach to **C**ommunity **H**ealth

- Developing interventions that are truly community interventions/programs
- Interventions/Programs adapted to local characteristics and needs
- Use 3 major components:
 1. **Community mobilization**
 2. **Community diagnosis**
 3. **Community intervention followed by evaluation**

MATCH

Multilevel Approach to Community Health

- Involving the local community in planning and implementation of health interventions
- Assess various factors influencing the health status of individuals and community
- N.B: Each model shares common elements with PRECEDE – PROCEED.



NOTE:

- **PROCEDE- PRECEED** : focus predominantly on an extensive **NEEDS ASSESSMENT**
- **PATCH** emphasizes collaboration between the community and local, State and federal partners
- **MATCH**: stresses the implementation of an intervention
- **N.B: Each model shares common elements with PRECEDE – PROCEED.**



PRECEDE/PROCEED Framework (1)

PRECEDE

- Predisposing, Reinforcing, and Enabling Constructs in Educational/environmental Diagnosis and Evaluation.

PROCEED

- Policy, Regulatory, and Organizational Constructs in Educational and Environmental Development



PRECEDE/PROCEED Framework (2)

Health Education

- any combination of learning experiences designed to facilitate voluntary actions conducive to health

Health Promotion

- the combination of educational and environmental supports for actions and conditions of living conducive to health

PRECEDE/PROCEED Model

PRECEDE

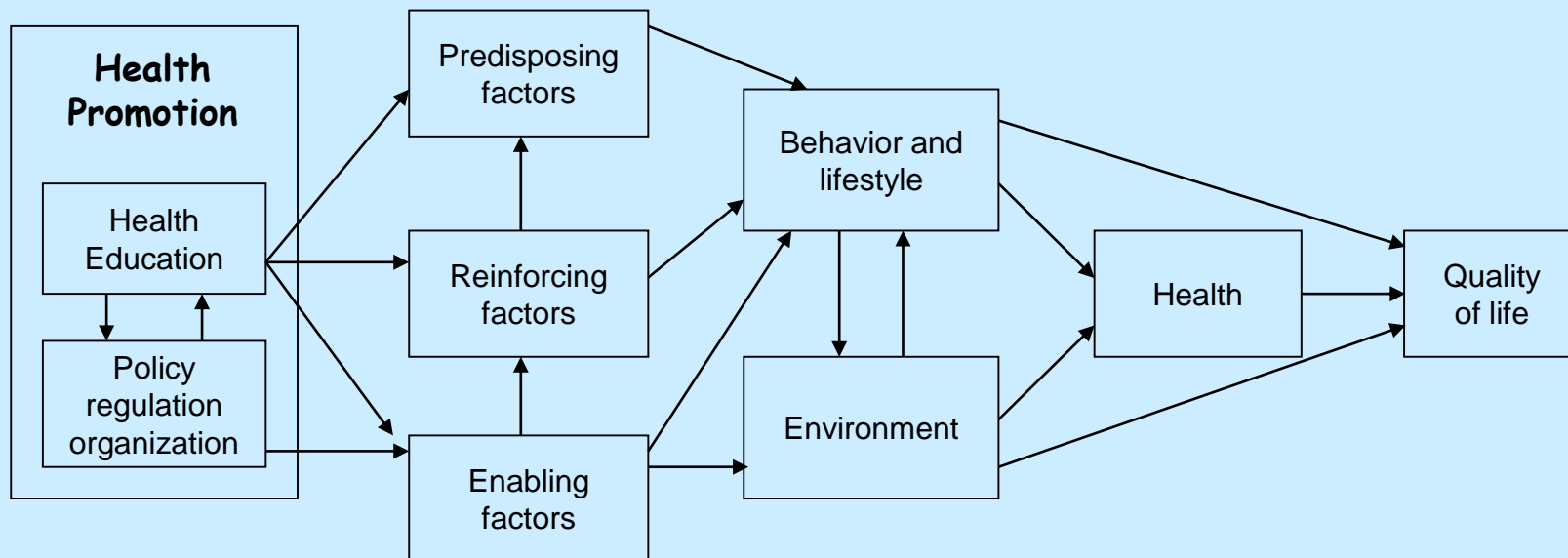
Phase 5
Administration
& Policy
Diagnosis

Phase 4
Educational &
Organizational
Diagnosis

Phase 3
Behavioral &
Environmental
Diagnosis

Phase 2
Epidemiological
Diagnosis

Phase 1
Social
Diagnosis



Phase 6
Implementation

Phase 7
Process
Evaluation

Phase 8
Impact
Evaluation

Phase 9
Outcome
Evaluation

PROCEED

PRECEDE – PROCEED MODEL

- ➔ It's a planning framework for interventions
- ➔ Combines intervention planning and evaluation
- ➔ PRECEDE (Green et al, 1981) late 1970s
- ➔ In 1991: PROCEED was added to PRECEDE to include environmental determinants of health and health behaviors
- ➔ In 2005: PRECEDE - PROCEED model was revised to combine epidemiological and behavioral assessment (& allow skipping this step if evidence is available)



Factor 3: Integrate socio - ecological theories of behavioral change

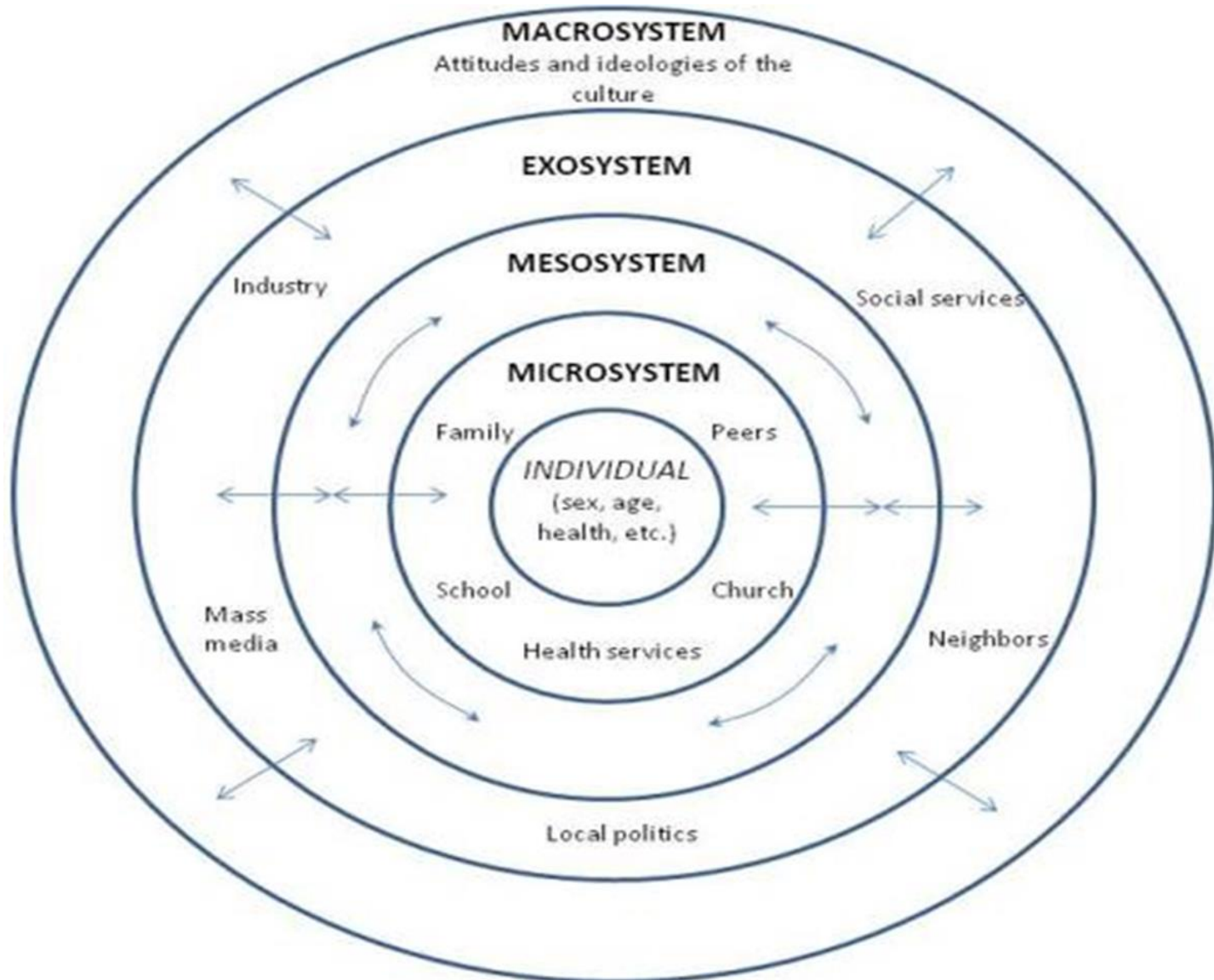
- Use of theories of behavioral change to plan and structure community interventions
- They are used to predict and explain why do people do or do not engage in preventive behaviors
- Newer models of behavioral change address the socio- ecological causes of risks and protective behaviors
- **Focus** : social environmental factors as key determinant of individual's behavior



Ecological Model of behavioral change

- It is a perspective that provides an understanding of person-in-environment transactions at various systems levels
- Appropriate changes in social environment will produce changes in individuals.
- It gives consideration to multisystem assessment and intervention.
- Community involvement is considered as integral for implementing environmental changes.

The Bronfenbrenner's Ecological Systems Theory (Bronfenbrenner, 1979)





Factor 4: Use implementation models to guide intervention delivery

- The designed community interventions should be implemented as planned
- Implementation models / frameworks are to be used to structure and execute the intervention

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- **Individual** behavioral change interventions **perspective**

Individual (more personalized: counseling , small group intervention sessions)

- **Community intervention program**

Reaching a community audience requires messages repeated using many channels and many different forms:

- Print media,
- Social marketing (using advertising techniques);
- Diffusion of innovation

Factor 5: Use diverse intervention modalities

- Put in place strategies and procedures increasing the probability that the intervention messages will reach, and be understood by members of the target population.
- Using a diverse group of intervention strategies:
- Choosing multiple implementation channels (Education materials, Peers, Outreach ,Traditional events, media, condom distribution, etc)