February 6, 2021

Brant County Health Unit
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RE: Evaluation of 'Drive to Five' Program

To Whom It May Concern:

Footprint Consulting would like to present Brant County Health Unit (BCHU) with our evaluation proposal for the Drive to Five Program (D5), as requested. We are proposing a combined process and outcome evaluation with a goal-based, equity approach to assess the reach, uptake and impact of Drive to Five. We are pleased to have the opportunity to collaborate with Brant County Health Unit in order to facilitate an evaluation of the Drive to Five program, and hope our proposal fits your needs.

Please find attached our proposal, which includes the following:

- Brief overview of Brant County Health Unit and description of Drive to Five program and its stakeholders;
- Understanding of the evaluation need;
- Proposed program logic model and accompanying narrative;
- Recommended evaluation design (type, approach, and data collection methodology)
- Evaluation matrix with key evaluation questions;
- Table of anticipated challenges and proposed mitigation strategies;
- Description of Footprint Consulting's demonstrated competencies of the Canadian evaluation practice.

Our team is composed of skilled and passionate evaluators with expertise in public health, community engagement and participatory approaches, mixed-methods research, knowledge translation, and graphic design. At Footprint Consulting, we value equity-focused and goal-based approaches and to evaluation to provide top-level results for our clients. Of particular interest to this evaluation, we have a proven record of working with organizations focused on enhancing the health outcomes of communities. We are dedicated to providing comprehensive evaluation services and hope to work collaboratively with Brant County Health Unit to ensure the success of Drive to Five program evaluation.

If you have any questions or need clarifications, please do not hesitate to contact us. We welcome any suggestions to the proposal to ensure the evaluation is feasible and meets the needs of Brant County Health Unit and relevant stakeholders. We thank you for this opportunity and look forward to working with you.

Sincerely,

FOOTPRINT
Consulting

EVALUATION OF THE BCHU DRIVE TO FIVE PROGRAM

Prepared by:

Prepared for:
Brant County Health Unit

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1.0 Understanding of Requirement

1.1 Program Overview

Brant County Health Unit (BCHU): Established in 1945 and one of the 34 public health units in Ontario, it serves the residents in the City of Brantford and the County of Brant, which comprises a diverse population of more than 136,000 people and is governed by the Health Protection and Promotion Act and the Ontario Public Health Standards. Their aims are to enhance the health status of its communities by facilitating equity focused health-promotion, protection and prevention activities for its residents with the penultimate goal of optimal health status of the communities. One of the main goals of the BCHU is to improve the well-being of children by encouraging them to engage proactively in physical activities, as only 26% of children are currently attaining the daily recommended 60 minutes of physical activity. To promote increased physical activity levels among school children, BCHU implemented Drive to Five, an active school travel program.

Drive to Five Program: The primary objective of the D5 program is to promote walking or wheeling to school with the overall goal of increasing physical activity levels among children to meet their recommended daily activity levels. The program is implemented with the aid of several stakeholders that engage children and their guardians to inculcate the practice of active travel to school through various initiatives. This program has been piloted in six schools in the City of Brantford and the County of Brant with the goal of positively impacting the health of children as well as the community. Fostering healthy children and communities along with enhanced pedestrian safety are the main outcomes of this program. Currently, the BCHU intends on improving the participation and uptake of the program that has been impacted by COVID-19 by determining factors that enable or impede participation. In addition to this, BCHU also plans to modify and make changes to the current program to address the needs of the communities before implementing the program in other schools.

1.2 Program Stakeholders

Our team has identified key stakeholders for the D5 program based on the information provided by the BCHU. Children attending school in the City of Brantford and County of Brant and their guardians are classified as the primary stakeholders. The various partner organizations in the city and county have been categorized as secondary stakeholders. Footprint Consulting will consult BCHU to understand how best to involve stakeholders to generate buy-in for conducting the evaluation and to act on the findings.

1.3 Evaluation Purpose

The main objectives of the evaluation are to:

1. Assess the resources currently used to implement the D5 program;
2. Measure participation levels among parents and children considering equity, diversity, inclusion principles;
3. Identify the factors that facilitate or hinder participation;
4. Assess the outcomes (health, environmental and pedestrian safety) of the D5 program
5. Assess and provide recommendations for how the D5 program should be adjusted and expanded to other schools, and what support is required to scale up the program to all schools in the Brant / Brantford area.

1.4 Evaluation Scope

BCHU's D5 pilot program in six schools will be the main focus for this evaluation and will not include any other schools or BCHU programs. A draft logic model has been developed (see Appendix #1), and will be enhanced and refined through collaboration with program stakeholders through the D5 Evaluation Advisory Group. The evaluation, as requested by BCHU, will be a process and outcome evaluation, with a strong equity-focused approach. It will focus on short term, intermediate, and long-term outcomes but data collection will primarily be based on short and immediate outcomes. Finally, evaluation of the process and outcomes of D5 will be limited to communities and schools part of the D5 pilot.

2.0 Logic Model and Logic Model Narrative

2.1 Logic Model

Please see *Appendix #1* for our team's proposed logic model of the Drive to Five Program.

2.2 Logic Model Narrative

Footprint Consulting has created a program logic model for the Drive to Five pilot. The logic model visually demonstrates the links between how the program resources and activities impact the overall results, or outcomes, influenced via the proposed causal linkages represented by the arrows (McDavid, Huse, and Hawthorn, 2019). As the D5 program pilot supports a diverse community, our logic model is specially designed to incorporate tools that focus on describing equity including careful consideration of the contextual frameworks and potential off-target impact on equity.

The proposed logic model is built on the program assumption that active school travel programs have a variety of benefits for students and communities, such as decreased BMI, better mental health and less traffic which leads to better air quality. It is also assumed that households are within walking/biking distances from their school, allowing them to partake in the program. Our team sees children's safety when walking or wheeling to school as a risk. We also see risk in the potential for unequitable implementation of this approach if there's insufficient engagement of diverse community populations. If not properly addressed, not only would the D5 program not be meeting the equity, diversity, inclusion (EDI) principles, but the program would not be involving diverse, marginalized populations, who are often affected by decreased access to community programs and could have poor health outcomes due to systematic or structural factors.

External factors which play a role in program success includes changes in the Ontario Public Health Standards, changes in school board policies and adapting to a global pandemic. Prior to the logic model finalization, we would like to have a working meeting with BCHU's key stakeholders and key partnerships to ensure the model fully fits into the organization's vision. Overall, this model represents the theory of change of BCHU's D5 pilot. Active transportation awareness raising, and family, youth and community involvement activities help provide accurate information about the health benefits of the D5 program and how families can participate. Successful engagement leads to higher participants rates, which leads to healthier students, communities and safer environments for pedestrians.

3.0 Proposed Evaluation Methodology

3.1 Evaluation Design

BCHU has created and piloted the D5 Program in six schools, and seeks to evaluate the reach and uptake of the D5 Program, the extent to which the program's activities were implemented and adapted during the COVID-19 pandemic, as well as the effects of the D5 program on their students and fellow Brantford and Brant community members. Based on BCHU's needs, we are proposing a combined process and outcome evaluation. Process evaluation is used to determine if programs are implemented as intended, how well they are working and their accessibility and acceptability to their target population. Outcome evaluation is typically used to measure the effectiveness of a program's activity in achieving its objectives. We believe a combination of these two evaluation designs will allow us to evaluate the reach and uptake of the D5 program by students and their guardians, and the engagement levels between schools and community stakeholders in Brantford City and Brant County. Furthermore, it will allow us to measure the outcomes of the D5 program's activities among participating students and families. Resources currently used to implement the

program will be documented in collaboration with stakeholders. Program records will be reviewed to support this.

3.2 Evaluation Approach

A goal-based approach, with a strong equity lens, is best suited for this evaluation, as it's an impact assessment approach that supports both accountability and learning. This approach will assess whether D5 achieved its major outcomes equitably, efficiently and sustainably, while also assessing unintended impacts.

To ensure all stakeholders are engaged in an equitable manner, we will develop a D5 Evaluation Advisory Group (D5 EAG) composed of students, guardians, BCHU members and members from BCHU partnerships. Our team will work closely with the D5 EAG to first develop an understanding of D5's current goals and how these goals were established. We will then conduct an environmental scan of the school neighborhoods to understand the programs demographics and diversity representation. This is important to ensure D5's reach is diverse. Once we understand why and how the outcome goals were developed, we will analyze and compare actual outcomes to expected outcomes. Once a complete picture of D5's outcomes are identified, we can analyze if the necessary resources were allotted accurately to each outcome. Results from data collection methods about increased health outcomes, program activities and levels of engagement will help demonstrate D5's success. Based on our findings, we will meet with D5 EAG to recommend how the program should be adjusted and expanded to other schools, and what resources are needed for our recommendations.

Creating the D5 EAG will help generate stakeholder buy-in for the evaluation and help ensure the EDI principles are in all stages of the evaluation. Ideally, D5 EAG members will be of differing ages, backgrounds and lived experiences. D5 EAG engagements will be accessible online and in-person depending on the Ontario Public Health Standards relating to COVID-19.

This framework has been designed in accordance with the evaluation standards put forth by the Joint Committee on Standards for Educational Evaluation and adopted by the Canadian Evaluation Society (Yarbrough, D. B., 2011). Standards of utility, feasibility, propriety, accuracy and accountability have been considered in the development of this document.

3.3. Evaluation Matrix

Please see *Appendix #2* for the Evaluation Matrix including key evaluation questions, indicators, data sources and collection methods/tools.

3.4 Data Collection Methods and Analysis

To comprehensively evaluate the D5 program, we propose a mixed-methods design using qualitative and quantitative data collection methods. To ensure feasibility, we will sample one school from the rural location and urban location. We chose simple data collection methods that aim to reduce the burden on schools, teachers, students, and guardians while collecting quality data to support evaluation. Furthermore, we consider EDI principles throughout our data collection methods and analyses.

Community and School Demographic Scan

Before beginning the evaluation process, a community environmental scan will be conducted to better understand the community and neighborhood characteristics. Furthermore, we will collect demographics of students and families, particularly focusing on ethnic identity, Indigenous identity, individual ability, and neighborhood location, using school records. This will support understanding of key equity considerations in our evaluation.

Survey
A survey measuring student and guardian participation in the program, engagement in type of transportation to school, access to technology and internet, and engagement in physical activity levels will be conducted. A paper survey will be sent with all students in participating schools, with the option to complete the paper survey or follow a link to complete an online survey on the parent portal. For guardians who need support with completing the survey, a phone number will be provided. Access to translators will be available to support those whose primary language is not English. These approaches will help reduce barriers to participating in the survey.

Record Document Review
Reviews from program activities, school records, program records, to assess the reach of the program as well as how the program changed after the pandemic and to what the effects of the program are for the student body and community.

Poll (teacher meeting)
We will ask principles at selected schools in their meetings to assess how many teachers are engaged in sharing information about D5 to students. This information will allow us to see if teachers are aware of the program and how D5 could promote more awareness.

Distance Calculation
We will use school records to look into where individuals are living in the community of Brantford. Using this knowledge, we will calculate the distance from neighborhood to school to assess if distance is a barrier for individuals participating in the D5 program.

Observation
Footprint will make observations at 5 time points on safety program changes implemented by the school during Covid-19, student pedestrian safety, and community pedestrian safety. The observations for students will allow our consulting team to assess the safety concerns of the students and community to see if it plays into whether or not they participate in the D5 program. During the observation we will collect notes on what we see and use content analysis to find common themes and compile our analysis.

Smiley Face Scale
This is a qualitative method that allows us to assess the students involved in the D5 program. This is the only direct method we have to understand student's perspectives on the D5 program. We chose this method as it identifies student's feelings towards how safe they may feel and their mental wellbeing during pilot training. We will compile responses and identify common themes among students by which responses student's chose.This methods will provide information on personal expression of students as the program is created for their physical and mental wellbeing.

Pre- and post-monitoring after program pilot
Through the Government of Canada index website, we will assess air quality of Brantford before and after the pilot program is implemented. This can allow us to assess the changes within a 6 month window. Contributing to the goals of the program of improved environmental capacity for the time.

Online newspaper poll
We propose embedding an online poll on community safety into the local newspaper of Brantford expose (local newspaper). This poll will assess how safe the community feels walking, biking, etc in the school neighborhood.

Data analyses
Quantitative and qualitative analyses will be conducted. For the survey, record document review, teacher meeting poll, distance calculation, and online newspaper poll, statistical analyses of quantitative data will be conducted. For the smiley face scale, the common records will be compiled and analysed. For observation, field notes will be analysed using content analysis. All results will be stratified according to rural and urban locations and differences between schools will be considered. Once the initial analysis is completed, a session with the D5 Evaluation Committee will be conducted for the purposes of data sense making. Committee members will be requested to comment on results and consider how these results can be applied to the current programs and future implementation. For the physical activity measures, reported levels will be compared to previous levels to determine if there were improvements.

Data Triangulation
We will use multiple data sources to assess each indicator and triangulate qualitative and quantitative data where possible. This will minimize bias, ensure equity, and enhance the validity of the evaluation results. Triangulation does not simply aim to find the exact same responses from different methodologies; rather, it recognizes the variability in data collection techniques and works to reconcile discrepancies, such that a more equitable, reliable and comprehensive picture of the recorded outcomes can be obtained (Patton, 1999). Key opportunities for triangulation include comparing the responses from the D5 Evaluation Committee, online surveys and smiley face scales. Overall, our triangulation approach will integrate different forms of data to provide a comprehensive view of how the D5 program has been implemented and if it has achieved its desired outcomes.

Knowledge Translation
We will create a comprehensive final report, a one-pager summary, and an info for the students to view. We will incorporate participatory knowledge translation activities and data dissemination to three groups:
1) **BCHU**: Create a virtual meeting to share final report about improvements of resource allocation, D5 program outcomes and recommendations for scaling of program to other schools;
2) **Participants in the D5 program:** Create a virtual event to engage students to learn about the findings, compile their feedback and share next steps;
3) **All other stakeholders** (i.e community partnerships): Share final report, one-pager, update the D5 website with findings and recommendations, include findings in newsletter

4.0 Anticipated Challenges and Mitigation Strategies

Challenges	Proposed Mitigation Strategy
Internal	
Collecting demographic information including cultural diversity, income levels and neighbourhood data.	Tailored engagement to include and represent the demographic of Brant County.
Difficulty measuring long-term physical and mental health outcomes of students as there is a delayed latency period for such outcomes	Create a database to collect health outcomes completed by students. Allows schools access to database to compare and assess health changes in the future.
Availability and willingness of students, guardians, and other stakeholders to participate, especially due to COVID-19.	Schedule virtual meeting times at a convenient time. Suggest alternative solutions if technology is a barrier and create continuous opportunities for participants to disengage and re-engage. Create minimal commitment requirements
Ethical challenge working with students/ underage participants; under-aged participants cannot provide permission to participate in evaluation.	Create assent forms for students. Follow up to obtain consent from their legal guardians. Explain the evaluation purposes & goals in simple terms so students can understand, and provide consent forms and engagement in different languages.
External	
Changes in the Ontario Public Health Standards	Innovate news ways to engage and collect data that meets the new standards.

5.0 Demonstration of Competencies for Canadian Evaluation Practice

Footprint Consulting will follow the proper standards of practice, code of ethics and evaluation competencies outlined by the Canadian Evaluation Society (CES) to conduct a process and outcome evaluation. To successfully evaluate the impact of BCHU's Drive to Five Program, the following skills have been identified under the five evaluation competencies (CES, 2018).

Competency	Evidence in Proposal
3.2 Identifies stakeholders' needs and their capacity to participate, while recognizing, respecting, and responding to aspects of diversity.	1. Involvement of stakeholders, including guardians from different areas of Brant County and Brandfort City to ensure diverse perspectives and voices are included. 2. Creation of opportunities for stakeholders to participate in evaluation activities at their own convenience. 3. Data collection activities have been designed to be low impact to the school staff to prevent overburdening them with extra tasks.

	4. Data collection activities have been adapted for participants with differing levels of technological literacy, or ability to access technology. 5. Evaluation activities have been planned in accordance with the current provincial COVID-19 guidelines to avoid outbreaks and contain the spread of infection.

References

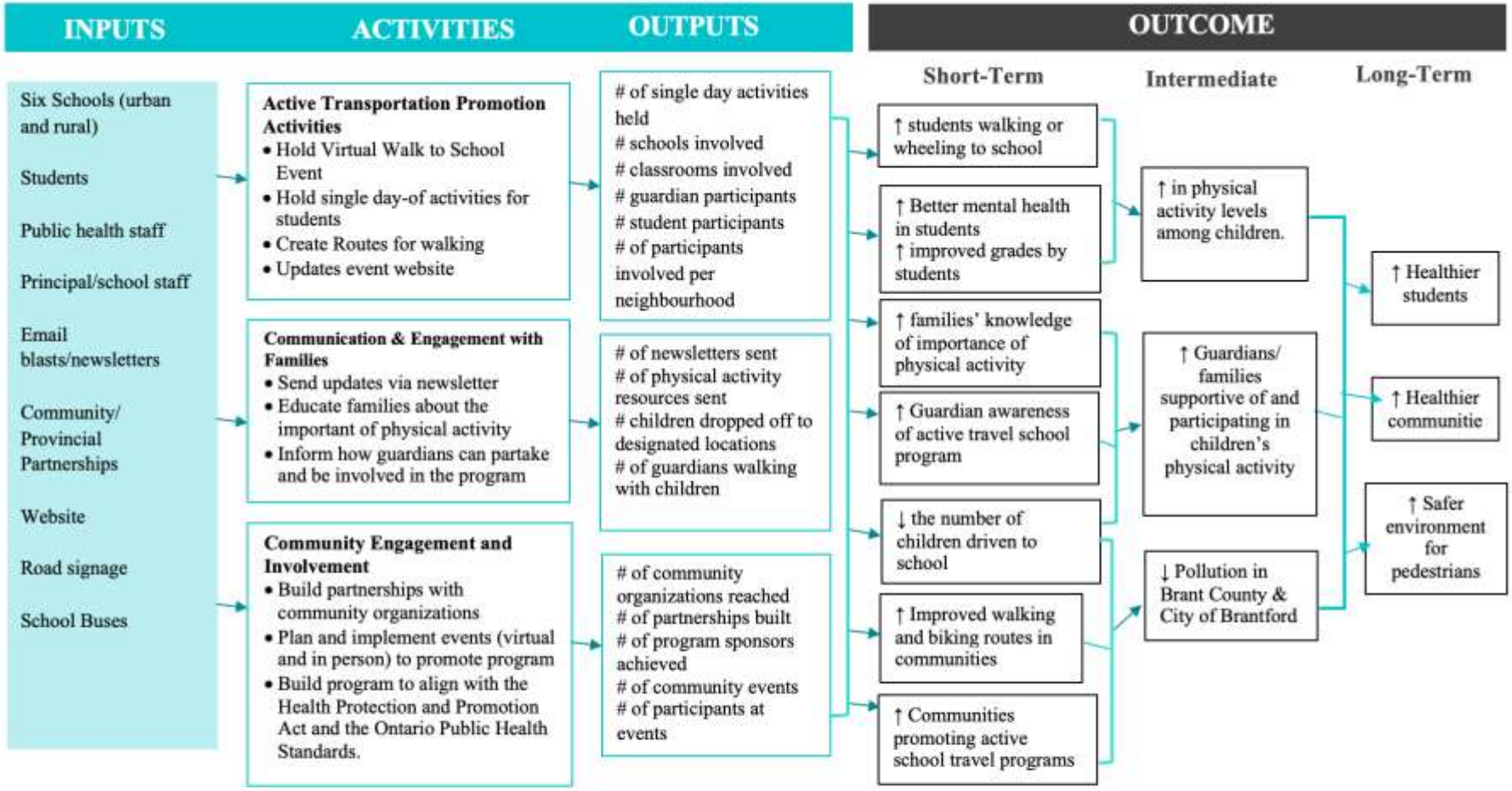
Canadian Evaluation Society (CES). (2018). *Competencies for Canadian Evaluators | evaluationcanada.ca*. Competencies for Canadian Evaluators. https://evaluationcanada.ca/competencies-canadian-evaluators

McDavid JC, Huse I, Hawthorn LRL. Program evaluation and performance measurement: an introduction to practice (2nd ed.). Thousand Oaks, CA: Safe Publications; 2019.

Patton, M. Q. (1999). Enhancing the quality and credibility of qualitative analysis. Health services research, 34(5 Pt 2), 1189.

Yarbrough, D. B. (2011). The program evaluation standards: A guide for evaluators and evaluation users (3rd ed.). SAGE.

6. Appendix 1: Logic Model



ASSUMPTIONS:

- Active school travel programs have a variety of benefits for students and communities.
- Neighbourhoods are within walking/biking distances from school.
- Most students are attending school in-person.

RISKS:

- Children's safety
- Lack of engagement from diverse community populations
- Guardian push-back over dropping children off far away

EXTERNAL FACTORS:

- Adapting to a global pandemic.
- Changes in school board policies.
- Changes in the Ontario Public Health Standards.

7. Appendix 2: Evaluation Matrix

Evaluation Question	Indicator	Data Source	Data Collection
1. What is the reach and uptake for the D5 program?			
a. What is D5's reach, the number of students and guardians participating in the program?	For the selected schools in rural and urban locations: $Reach = \frac{\#\ of\ students\ who\ were\ served\ by\ program}{\#\ of students\ who\ could\ be\ served\ by\ program}$ # of student participating in the program # of guardian participants aware of the program # of guardian participants who understand program # of students who walk with guardian(s)	Students and guardians	Paper Survey or online survey to students and guardians
b. What is D5's reach, for schools and teachers in rural and urban locations ?	# of school boards contacted and responded # of schools contacted and responded # of teachers aware of the program # of teachers engaged in the program by sharing information with students and guardians	Program records Teachers	Record document review Poll at regular teacher meeting
c. What is D5's reach, for community members and organizations in rural and urban locations ?	# of community organizations contacted # of community organizations reached # of partnerships built # of program sponsors achieved # of community events # of participants at events	Program records	Record document review
d. How does reach vary based on student characteristics?	Variance in participation based on demographics of students and families (primary language spoken, Individuals with a disability, neighborhood). # of people who accessed information online	School records Students and guardians	Record document review Paper Survey or online survey to students and guardians
e. What are the factors that facilitate or hinder participation in the D5 program?	Distance from student home to schools # of students using public transportation # of students relying on a car to get to school # of students using active transportation (walk, bike, etc.) # of people who have access to technology/internet # of people who accessed information online	School records Students and guardians	Calculate distance Paper Survey or online survey to students and guardians Record document review

2. To what extent were D5 program activities implemented and adapted during the COVID-19 pandemic?			
a. Was the program reflective of the diverse demographic and needs of guardians and children?	Program activities and materials incorporate consideration of different demographics of students (abilities, ethnic identity, neighborhood location)	Program records	Community demographic scan Record document review
b. To what extent were the program activities implemented as planned before COVID-19?	# of single day activities # of classrooms who participated in virtual walk to school event # of road signs put up # of crossing guards # of promotional events	Program records	Record document review
c. To what extent were the program activities adapted to COVID-19?	# of COVID safety protocols implemented # of email newsletters about program changes sent to schools	School Program records	Observation Record document review
d. To what extent, did D5 seek the participation of teachers and principals?	# of email blasts sent # of meetings held with schools and teachers	Program records	Record document review
e. To what extent, did D5 seek the participation of community organizations and members?	# of email blasts sent # of meetings held with community organizations # of notices sent to community residents/notified	Program records	Record document review
3. What are the effects of the D5 program on students?			
a. To what extent has the student pedestrian safety improved?	# children dropped off to designated locations # of road safety incidents involving students # of children who feel safe walking to school	Students	Observation Smiley Face Scale
b. To what extent has the physical health of the study body improved?	# of students getting their recommended physical activity		Paper Survey or Portal Survey
c. To what extent has the perceived mental wellbeing of the student body improved?	Self-reported mental well-being Student performance	Students School records	Smiley Face Scale Record document review
4**. What are the effects of the D5 program on the Brantford Community?**			
a. To what extent has the environmental health of the community improved?	Air quality health index (AQHI) before and after program	Government of Canada index website	Pre- and post-monitoring after program pilot
b. To what extent has the pedestrian safety of the community improved?	Traffic volume at bell times/safer school zones # of road incidents in the community # community members who feel safe walking, biking, etc. in the school neighborhood	Community members Administrative records	Observation Record document review Online newspaper poll