

Building Residency Program Capacity for Community Health and Advocacy Training: Collaborations with Community Partners to Foster Healthy Active Living

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Background & Program

Summary: Results are presented for the evaluation of a grant program aimed at helping pediatric residency programs sustainably increase their organizational capacity for training residents in community health and advocacy through projects related to healthy, active living.

Rationale

- Advocacy training is a required component of pediatric residency training, but considerable variability exists among residents' exposure to this training and competency in community pediatrics.

- Pediatric residency programs are complex organizational systems, so the effectiveness of advocacy training programs can be impacted by a multitude of factors.

- A better understanding is needed of components of organizational capacity to inform advocacy training efforts.

Grant Program

- From 2009-2015, the American Academy of Pediatrics (AAP) Community Pediatrics Training Initiative and Institute for Healthy Childhood Weight supported three cohorts of grantees, representing 17 residency programs.

- To build advocacy capacity, residency programs collaborated with community-based organizations (CBOs) to implement programs for children and families to improve nutrition and physical activity behaviors.

- Grantees had access to tools and coaching from AAP staff and mentors.

Method

- 59% of faculty who led the grant projects (n=10) participated in semi-structured interviews (≤1 hour) between July-September 2015.

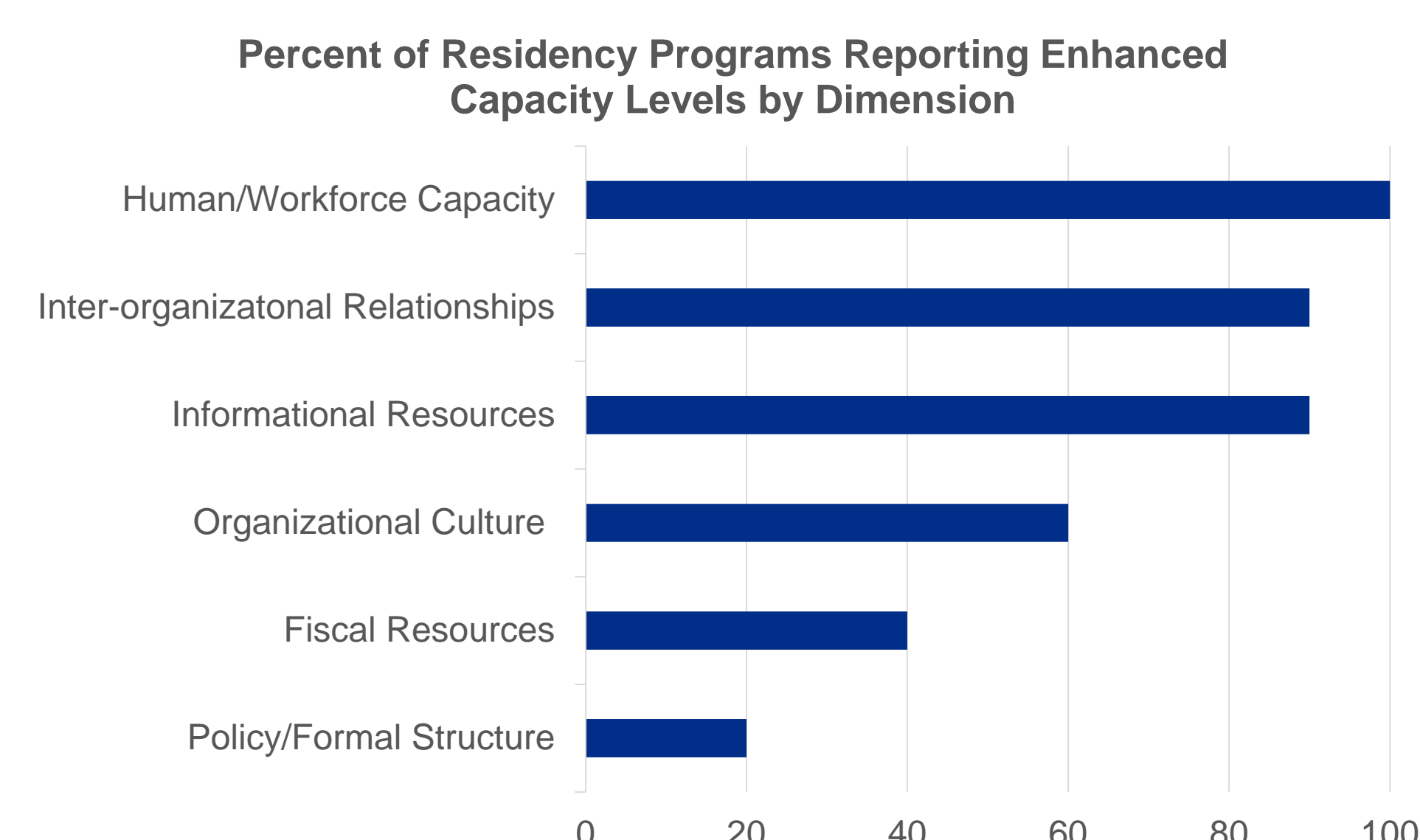
- Non-response was primarily due to loss of contact or inability to find a convenient time during the interview period.

- The interview guide was based on a model of organizational capacity dimensions developed by Meyer, et al. (2012).

- Interviewees used a rating scale to assess the level of collaboration with CBOs.

- Transcribed interviews were analyzed for existing and novel themes by an AAP staff evaluator who had not been involved in administering the grant program or interviews.

Results



Overall Capacity Changes

- 100% of residency programs reported sustainable increases in the capacity of faculty leaders/ key staff relevant to community pediatrics.
- 90% reported developing sustainable relationships with CBOs and enduring resources, including curricular changes for residents and tools for CBOs and clinics.
- More than half (60%) reported improvements in aspects of organizational culture, representing changes at a relatively high socio-ecologic level that were not directly included as aims of the grant.
- 40% reported receiving additional funding to extend their work in community pediatrics or sustain aspects of their projects.
- Relatively few (20%) reported changes to formal organizational policy, such as the amount of designated program or faculty time.

Collaboration Scale

	Networking: 1	Cooperation: 2	Coordination: 3	Coalition: 4	Collaboration: 5
Relationship Characteristics	<ul style="list-style-type: none"> Aware of organization Loosely defined roles Little communication All decisions are made independently 	<ul style="list-style-type: none"> Provide information to each other Somewhat Defined roles Formal communication All decisions are made independently 	<ul style="list-style-type: none"> Share information and resources Defined roles Frequent communication Some shared decision-making 	<ul style="list-style-type: none"> Share ideas Share resources Frequent and prioritized communication All members have a vote in decision-making 	<ul style="list-style-type: none"> Members belong to one system Frequent communication is characterized by mutual trust Consensus is reached on all decisions

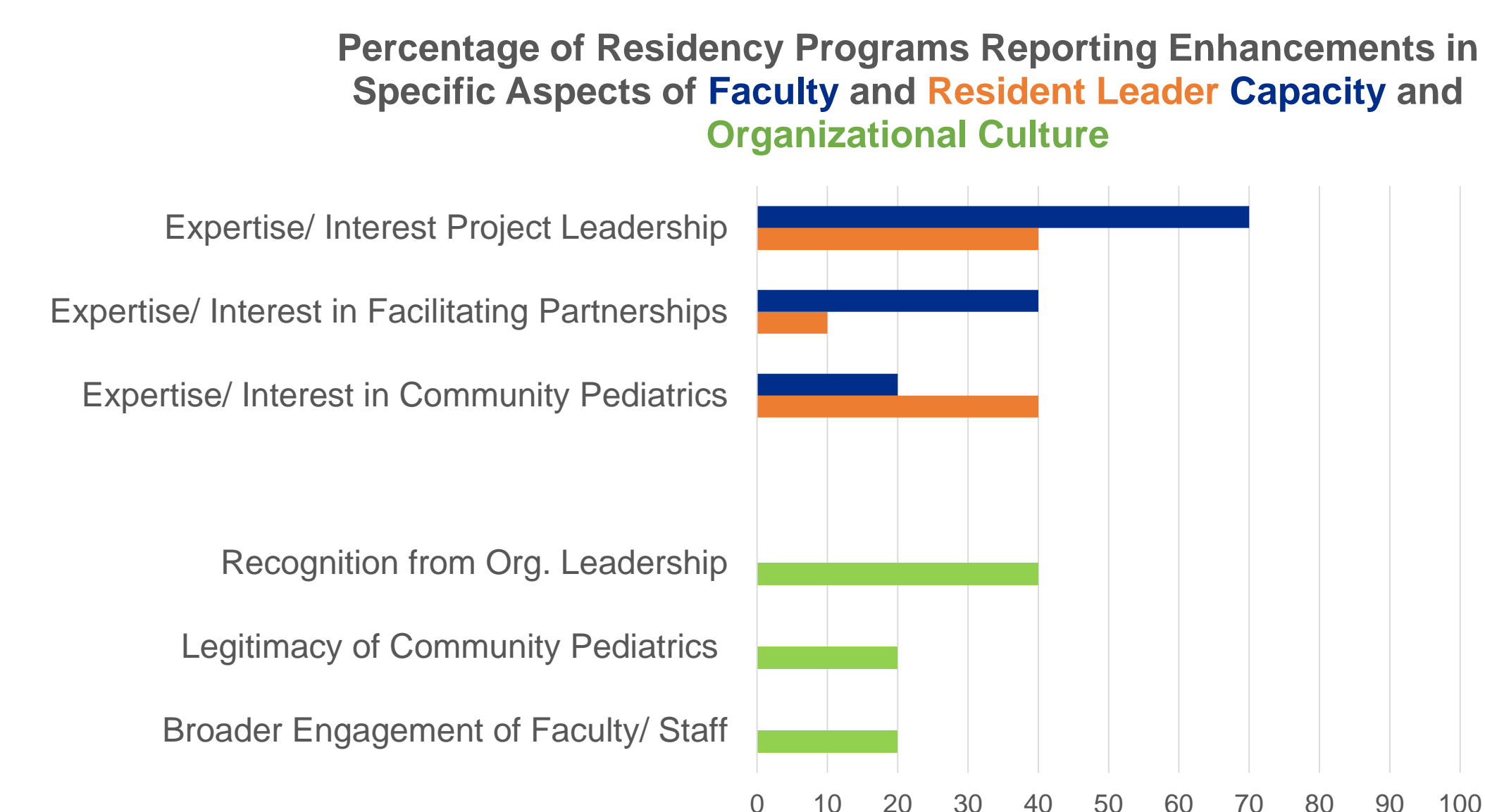
Inter-organizational Relationships

- Programs reported their level of collaboration with CBOs (n=8) increased during the grant from a median of 1.25 to 4 (see above).
- 70% of residency programs also reported developing sustained educational trainings or resources for use in CBOs.

Novel Themes

- Pre-existing relationships with CBOs provide cultural insights.
- Encouraging autonomy and flexibility fosters success.

Results (Continued)

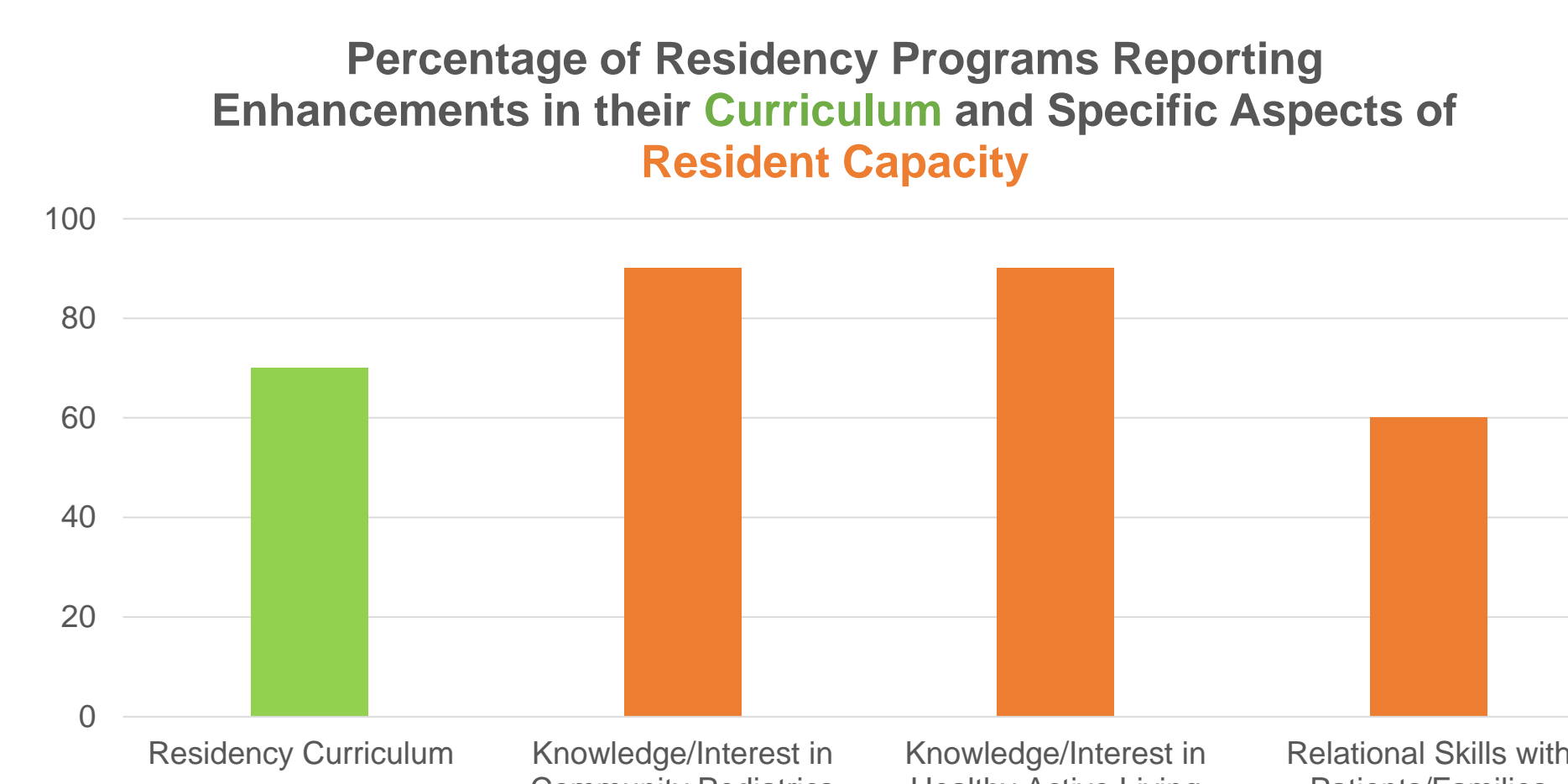


Leader Capacity & Organizational Culture

- All respondents reported increased faculty expertise/motivation related to leading community projects and/or facilitating partnerships.
- 70% reported substantial capacity gains in resident leaders related to leadership skill and/or content knowledge.
- Cultural changes within organizations most commonly involved enhanced support from leadership but included greater legitimacy of community pediatrics and broader engagement by faculty/staff.

Novel Themes

- Resident champions help drive overall engagement by residents.
- Faculty leaders' knowledge & skills are important success factors.
- Organizational support arises from observable outcomes of projects and sparks additional capacity development.



Curricula and Resident Capacity

- 70% of residency programs reported making sustained changes to the residency curriculum.
- 90% of programs reported that residents substantively increased their knowledge/interest in community pediatrics and healthy active living.
- More than half of programs reported that residents developed enhanced relational skills with families.

Novel Theme

- Fostering a patient-centered focus facilitates learning and the application of knowledge across community and practice settings.

Limitations & Conclusions

Limitations

- Interpretation is limited somewhat by the response rate, as well as potential biases, inherent to self-report data.

Conclusions

- Pediatric residency programs were typically able to build varied aspects of organizational capacity for community advocacy training

- The vast majority of programs achieved coalition levels of collaboration during the grant and developed sustainable community relationships, likely to bolster their odds of continued success.

- Passion and expertise for community pediatrics, developed in faculty and student leaders, helped foster project success, as well as broader interest/engagement by residents and the larger organization.

- The development of curricula and enduring community resources also appear likely to help maintain a high level of quality of resident training in community pediatrics.

- Engaging with families in the community during training may also help residents meet the needs of patients in clinical settings.

- Significant barriers to success include staff turnover (residency program or CBO) and overcoming a lack of internal organizational support that limits available resources (e.g. faculty time).

References

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Meyer A-M, Davis M, Mays GP. Defining organizational capacity for public health services and systems research. *Journal of Public Health Management and Practice*. 2012;18(6):535-544.

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