

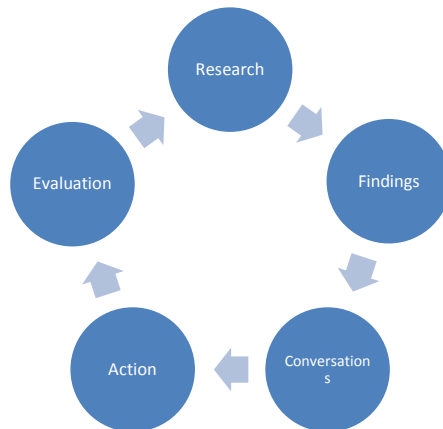
ACHPP's Research-Driven Approach to Pipeline Development

Introduction

This report presents findings from a review of data collection and evaluation activities conducted by the Alameda County Health Pipeline Partnership (ACHPP) between June 2009 and September 2012. The purpose of the report is to document how ACHPP's program development process and priorities are driven by an iterative process of research and evaluation that engages the ACHPP partners in conversations about how to work collectively, how to develop effective referral systems and how to establish priorities for joint undertakings. The ACHPP research cycle is depicted below (Figure I). It includes five steps beginning with research to investigate high priority issues related to ACHPP members' individual and collective work. When the research has been conducted, findings are presented and discussed in ACHPP steering or committee meetings. The next step may be action to improve or add to the existing ACHPP services or infrastructure. Once these changes are in place, ACHPP evaluates their impact and the cycle starts again.

Figure I: Phases in the ACHPP Research Cycle:

1. Research
2. Findings
3. Conversations
4. Action
5. Evaluation



Research & Evaluation Activities Reviewed June 2009 – June 2012

Review of Research & Evaluation Activities Supporting & Guiding ACHPP's Agenda: The report that follows includes a brief discussion of each data collection and evaluation activity the ACHPP has implemented to date, a review of the findings that were generated and the conversations and action that followed.

Research/evaluation activities conducted to date and in progress include:

1. Survey and focused conversations to document infrastructure in place and gaps in services
2. Survey to assess ACHPP partners' satisfaction with and priorities for ACHPP's work
3. Focus Groups with young men of color to address three questions ACHPP partners wanted to answer to better serve this target group
4. Survey of ACHPP-sponsored Life Coaching training to determine awareness of, satisfaction and interest in replication of this type of curriculum
5. Baseline survey of partners' capacity to serve local youth and the infrastructure of collaboration in place, including outreach and services provided to East Oakland youth
6. Focused conversations with East Oakland agencies to identify opportunities for collaboration
7. Focused conversations with ACHPP partners to assess feasibility of mentorship hub
8. Survey of students preparing for admission to medical school and other post-baccalaureate health care degree programs
9. Survey of participants in Summer 2012 internships

1. Documentation of Infrastructure and GAP analysis

The first part of the information gathering took place in April 2009. Using a research design that combined surveys with focused conversations, ACHPP collected information to describe partner programs in terms of their years in operation, populations served, services provided and health occupations targeted. Process outcome data was also requested in the form of participant/applicant ratios and retention rates. A final question asked participating programs about the challenges they experience.

The findings were translated into a series of charts that were presented to the ACHPP programs in a Steering Committee meeting in Summer 2009. The presentation graphics made it easy to determine where ACHPP's programs are concentrated geographically and which age groups have access to different ACHPP programs. Additional graphics pointed to the broad career focus that most ACHPP program's share and ranked the frequency with which ACHPP participants offer different types of services. The presentation culminated in a visual depiction of the services each partner program offers, pointing to existing and potential referrals that are or could be developed to create and strengthen the pathways taken by participating youth.

2. Partner Assessment of ACHPP's Work and Priorities

This research was an extension of a GAP analysis conducted to gather input from ACHPP's partners on ACHPP's work and achievements during the first two years of collaboration and to solicit input on future priorities.

Survey questions explored what ACHPP partners believe they gain from participating in ACHPP, what they would like ACHPP to prioritize and how they envision ACHPP could solidify and

increase member participation. Additional questions focused on each program's individual priorities and the challenges they confront.

Survey findings were summarized and distributed to ACHPP participants. They were then reviewed and discussed at a subsequent Steering Committee meeting where they prompted a decision by the ACHPP to establish as a high priority the recruitment and retention of young men of color. The decision reflected the partnership's commitment to equity as well as the fact that all ACHPP partners who want to serve young men of color struggle to do so effectively.

In response, one of ACHPP's four sub-committees has been staffed and directed to make progress in this area and to develop strategies and approaches that can inform action ACHPP participants can take individually and collectively to reach and retain this high-need, yet persistently underserved population. An early recommendation made by the sub-committee was that ACHPP sponsor a "Train-the-Trainer" Life Coaching session with Valerie Street who for the past several years has provided Life Coaching activities to youth at Camp Sweeney. This recommendation was subsequently implemented (see #4 below).

ACHPP partners also expressed interest in strengthening their capacity to document and evaluate outcomes, while pointing to limitations in their ability to assign staff to support this priority.

In response to the interest in evaluation, ACHPP invited Kevin Barnett from the Public Health Institute (PHI) to present findings from the Connecting the Dot Initiative's research on pipelines. Called "If it's a Pipeline, Why Isn't There More Diversity at the Other End?" Barnett's workshop engaged participants in a lively discussion about different approaches they are or may use to assess outcomes they are achieving individually as well as collectively.

Additional priorities identified in the survey included an interest in ACHPP identifying and sharing effective practices. There was also interest in increased collaboration, particularly in the areas of referrals and grant applications.

3. Focus Groups with Young Men of Color

In Spring 2010, ACHPP used its extensive network of community-based stakeholders to conduct four focus groups with 32 young men of color. They included 6 middle school, 16 high school, 6 college and 4 Camp Sweeney students. The largest group of participants (44%) was African American, followed by Latinos (20%). The largest group of participants reported residing in Oakland (44%). The purpose of the focus groups was to address three research questions:

- Why are African American and Latino males underrepresented in ACHPP programs?
- What are barriers and motivations to increased participation in health pipeline programs and health jobs/careers?
- What are recommended strategies to better recruit and retain African American and Latino males in ACHPP programs?

Each session was led and facilitated by a young man of color – a few years older than the participants. All facilitators were trained so that the focus groups were conducted in a consistent and structured manner. Focus group protocols were developed, reviewed and revised with input from ACHPP participants who had most experience working with and serving the target populations. Outreach to recruit the target groups was conducted by ACHPP through its extensive network of stakeholders Efforts were made to include young men of color who spanned the range of participation in ACHPP programs – from no participation to engagement.

The focus group findings were analyzed and compiled in an extensive report completed in 2010. The report was co-authored by Gonzalez, Lee, and Okwandu.

In 2012, ACHPP used the focus group findings to deepen its examination into what type and combination of barriers challenge and support participation of young men of color among ACHPP programs. The conversations and presentation of findings and recommendations were organized around different points in students' trajectory, including middle school, high school, college. These points mirrored the focus groups, including one that targeted high school youth at Camp Sweeney.

For each of these groups, ACHPP identified different types of barriers and corresponding supports needed to address these obstacles. The barriers included external, internal, school and health job/career barriers as well as barriers directly related to participation and persistence in pipeline programs. As an example, "lack of motivation" in middle school students and "self-doubt " in college students represent internal barriers that may compromise achievement. Similarly, "lack of early engagement" might represent a barrier to participation and persistence in pipeline programs.

Supports ranged from "more outreach" and "better communication about expected benefits" to encourage participation in pipeline programs to "[encouragement of] early interest in math and science" for middle school students.

The analysis of obstacles and supports culminated in a series of recommendations that included actions different stakeholders can take to increase resilience, academic preparation and achievement and participation in pipeline programs. From this summary, the ACHPP team identified ten recommendations for ACHPP program action. These include helping YMOC show resilience in the face of negative external perceptions and peer pressures, earlier outreach to this group, increased academic and social supports, contextualized learning about the health field as well as staff support and work-based learning opportunities such as mentorship.

Overall, and based on the information and perspectives gathered, ACHPP identified two key interventions as priorities for supporting young men of color: hands-on-exposure to work opportunities and careers and mentorships.

To bolster its capacity to provide these services, ACHPP identified as its Summer 2012 mini-grant priority work-based learning and mentorship projects targeting young men of color. Six projects were selected for this project, including a group offering college preparation curriculum and site visits, mind-body awareness, and internship stipends to YMOCs.

ACHPP is presently collecting information from each participating program to assess the impact the programs had individually and collectively on increasing participation, retention and persistence in ACHPP programs by YMOC.

The ACHPP's work with YMOC provides a compelling example of the Collaborative's engagement in the research cycle. Step 1 was the focus groups. Step 2 compilations of the focus group findings. Step 3 structured conversations about the findings and their implication. Step 4 initial response to the findings in the form of the summer pilot projects. Step 5, in progress, evaluation of the summer pilots.

4. Satisfaction with ACHPP Professional Development Activity in Life Coaching

A Life Coaching session was delivered in June 2011 when Valerie Street provided 15 participants from ACHPP organizations with an overview of her 12-week Life Coaching Training Curriculum and with opportunities to test several Life Coaching activities.

ACHPP conducted a pre- and post-test at the session to determine how much ACHPP participants knew about Life Coaching at the beginning and end of the session. The survey also assessed participants' interest in providing Life Coaching services to their own clients. One concern expressed by ACHPP programs was that the Life Coaching curriculum was too time intensive and would compete with their main content and program activities. In response, Valerie Street developed an abbreviated Life Coaching curriculum that she subsequently helped pilot with one ACHPP program. The testing found that Life Coaching can in fact be effectively delivered in a more condensed format. Another lesson learned was that the curriculum is more effective for students with less motivation and academic success than for those who have the determination and/or the academic achievement required to move forward. ACHPP is currently following up with participants in the June Life Coaching training to determine how/if the curriculum was replicated, the response, and future plans among ACHPP members in using/incorporating Life Coaching elements into their programs.

5. Baseline of ACHPP's Work-Based Learning Activities and Capacity to Serve Youth, including those Residing in East Oakland

This survey was conducted to create a baseline describing the capacity of ACHPP partners to place youth in a range of work-based learning activities. The survey also sought to develop a baseline for ACHPP partner current engagement with East Oakland agencies.

The survey asked participants about the youth that apply to their program, those they enroll and those who complete their programs. Additional questions focused on referral activities

between the participating agencies and on the extent to which ACHPP partners have developed the capacity to track their inputs and outcomes.

The big-picture findings were reviewed at a Steering Committee meeting in September while a more detailed version of the survey responses were presented to each of the four sub-committees for discussion. The presentations were organized around a series of questions designed to engage participants in a conversation about the action-oriented findings emerging from the research.

One of the key findings was that there is an excess-demand for services provided by the ACHPP partners. Further, while the partners collectively provide a wide range of services to youth of high school age and older, only two programs serve younger students.

The findings about the programs' limited capacity to track input and outcomes confirmed earlier findings from the GAP analysis. Responding to this collective need and to the opportunity to collect input and outcomes across programs, ACHPP used grant funds to customize an existing software program to generate and connect data across ACHPP programs.

In terms of collaboration with East Oakland agencies, a limited amount of infrastructure is in place connecting ACHPP to youth in this targeted area. However, the survey findings supported ACHPP's decision to launch its outreach to East Oakland with an environmental scan of potential partners.

6. Focused conversations with East Oakland agencies to identify interest in and opportunities for partnership and collaboration

Using a protocol developed in collaboration with the external evaluator, ACHPP coordinators conducted a series of interviews with agency leaders and coordinators in East Oakland. The purpose of the conversations was to identify opportunities to increase collaboration between ACHPP partners and East Oakland (EO) based programs so that EO youth can gain increased access to academic support, leadership development and workbased learning experiences that introduce, expose and prepare them for careers in the health care sector

The interview findings were used to plan and prioritize activities for ACHPP's Spring 2012 convening for 50 participants representing foundations, health care providers, educators and others stakeholders. At the end of the convening, participants were asked to indicate their interest in meeting with ACHPP representatives to explore opportunities for collaboration. More than half of the participants responded in the affirmative and six new partnerships were formed, connecting ACHPP participants with local employers. Another outcome was formation of an industry-advisory council.

7. Focused conversations to assess opportunities to establish ACHPP mentorship hub

Working with an external evaluator, ACHPP coordinators developed an interview protocol that they are using to create a baseline of ACHPP mentorship activities and identify effective practices already in place among the partners. The purpose of the interviews is also to assess the interviewees' interest in collaborating on a joint, ACHPP-coordinated mentorship project. Accordingly, questions are designed to identify concerns partners may have about joining a mentorship hub and challenges they experience that such an infrastructure would address.

Once the interviews have been completed and the findings compiled and analyzed, the partners will have conversations about the findings, their interpretation and implication. Action will follow – either with a decision to move forward with a mentorship hub or to maintain the present decentralized system – and the resulting activities will be included in the ACHPP evaluation.

8. Survey of students preparing for admission to medical school and other post-baccalaureate health care degree programs

ACHPP developed and conducted a comprehensive survey designed to identify factors supporting and compromising progress toward enrollment and degree completion for under-represented minority (URM) students planning to attend medical school and other post-baccalaureate professional programs in the health sciences. The premise of the survey was the desire by ACHPP to test a hypothesis that many URMs who enroll in college with the intent to pursue a professional career in the health sciences complete their baccalaureate insufficiently prepared and equipped to achieve their goal. As a result, a substantial number of URM students opt to matriculate in post baccalaureate programs. Most formal post-baccalaureate programs offer “academic enhancer tracks”, which allow students the opportunity to improve their academic record by taking/re-taking upper-division science electives and pre-requisite classes. For these students, success in a post baccalaureate program is critical; it is their last opportunity to prove that they are academically prepared for matriculation in a graduate health program and subsequently enter health professions.

The ACHPP's Mentoring in Medicine has over the past year served this population, including many young people of color who after successfully completing a baccalaureate degree found that they still do not have the preparation and/or GPA required to enter medical and other professional health science programs. However, evidence was still needed to document that there is a substantial number of individuals out there who fit the profile and to identify approaches and strategies that ACHPP and possible partners can develop and implement to facilitate this target population's progress toward graduate health programs, including medical school.

The survey included 91 students from 24 educational institutions in California, including the University of California, California State Universities, California Community Colleges, and Private Universities.

The survey findings are currently being compiled in a report called “Survey to Recent College Graduates.” Key findings include information about the academic challenges students face, and specifically, data around students taking post-baccalaureate classes:

- 61.6% of survey participants listed “Low GPA” as a “Moderate to Significant Challenge” in pursuing a career in health.
- 49.5% of survey participants stated that tutoring to improve science skills and scores would be “Extremely Helpful” in helping them pursue a career in the healthcare field.

The survey also confirmed that for too many students from under-represented populations, the pipeline to graduate health profession programs is broken near the very end, leaving many young people who could contribute to diversity California’s future health workforce struggling to pass through the final, but for many daunting, barrier to a career in medicine. Specifically,

- 73.7% of survey participants listed the cost of attending college/university as a “Moderate to Significant Challenge” in pursuing a career in health.
- 32.9% of survey participants were currently taking post-baccalaureate courses.

The survey findings provide new insights and possibly a diagnosis that ultimately can lead to the development and funding of initiatives that can fix this part of the health pipeline. ACHPP staff is presently translating the findings into various formats, and a report will be provided to the Collaborative members for the purpose of engaging participants in conversations about next steps. More or less accurate?? What is the status of this work?

9. Survey of participants in Summer 2012 Internship Programs

This activity is in progress. Surveys will be distributed during the last week of September and due back two weeks later. The ACHPP also plans to interview internship hosts to collect their feedback, including ideas for expansion and improvement.

Conclusion

This report is a work in progress that will document and briefly describe research and evaluation activities conducted to inform and guide ACHPP’s efforts to develop and

continuously expand and improve a health pipeline partnership that will provide opportunities for under-served youth to prepare for and access the health workforce.

The activities that were highlighted in this report demonstrate the way that ACHPP relies on research to drive action. This has been the case as ACHPP developed, strengthened and expanded the framework for the partnerships that are already in place. Based on this achievement and a continuous commitment to research and evaluation, it is expected that the next phase of infrastructure development, including the expansion of services to East Oakland youth, will be similarly grounded in data-driven decision-making.