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Improving Healthy Living Youth Development Program Outreach in Extension: Lessons Learned from the 4-H Health Rocks! Program

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Improving Healthy Living Youth Development Program Outreach in Extension: Lessons Learned from the 4-H Health Rocks! Program

Abstract

This article discusses a qualitative evaluation of the Florida 4-H Health Rocks! program aimed at youth alcohol, tobacco, and other drug use prevention. A questionnaire was distributed to Extension professionals across Florida to gain insight into the strengths and barriers they faced with programming. Programmatic strengths included targeting a significant issue, using experiential activities, building life skills, and emphasizing youth-adult partnerships. Major programmatic barriers included time constraints, unsuccessful recruitment of volunteers, and an inability to fulfill implementation requirements. Specific recommendations are proposed to Extension professionals in order to improve overall Extension programming.

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Background

The prevention of adolescent substance use is a priority in Extension outreach. A national Healthy Living mission mandate for youth includes "prevention of alcohol, tobacco, and other drug use (ATOD)" (4-H National Headquarters, 2011). In Florida, adolescent drug use was identified as a priority educational need by stakeholders participating in a statewide Extension Community Input Survey. Among the 4,294 participants, top priorities in youth outreach included teaching youth about: responsibility and positive alternatives to substance abuse (72.1%); developing healthy lifestyles (71.3%); and preventing drug and alcohol abuse (63.2%) (University of Florida Institute of Food and Agricultural Sciences [UF/IFAS], 2011).

According to the 2012 Florida Youth Substance Abuse Survey (FYSAS), nearly one-third (28.9%) of students reported having consumed alcohol in their lifetime, of which 12.3% reported having consumed alcohol in the past 30 days. 14.5% of Florida high school students reported starting cigarette smoking at age 13 or younger (Florida Department of Children & Families [FL DCF], 2013).

Introduction

The positive impact of 4-H on youth development has been widely documented (Boyd, 1991; Boyd, Herring, & Briers, 1992; Flynn, Frick, & Steele, 2010; Fox, Schroeder, & Lodl, 2003; Heinsohn & Cantrell, 1986; Radhakrishna, 2005; Seevers & Dormody, 1995). Adult 4-H alumni have reported overall positive experiences and satisfaction with the program's contribution to their technical, communication, and social skills, and personal and leadership development, including self-worth, responsibility, and goal-setting (Fox et al., 2003; Ladewig & Thomas, 1987; Radhakrishna & Sinasky, 2005).

In this article we present the results of a needs assessment of the Florida 4-H Health Rocks! program by Extension professionals. The assessment includes perceived program benefits and barriers, followed by recommendations to foster program development, particularly for youth-serving programs within the Healthy Living mission mandate.

Health Rocks! is an ATOD prevention program based in experiential education for elementary and middle school aged youth. Outreach goals for participating states ranged from 1,000 to 10,000 youth for at least ten hours of education per youth per program year. Since 2009, Florida's 4-H Health Rocks! Program has reached over a thousand youth in twelve of Florida's sixty-seven counties. The largest areas of outreach were in urban counties such as Duval (Jacksonville), with one of the highest rates of youth problem behaviors, compared to other Florida counties and state averages (FL DCF, 2013); and Broward, home to the nation's sixth largest public school district. Florida's Health Rocks! is delivered through community clubs, 4-H in the classroom, afterschool programs, and 4-H residential and day camps.

Health Rocks! curricula (National 4-H Council publications) includes recent social science research, such as reports from the Center for Disease Control's (CDC) Youth Risk Behavior Survey and the University of Michigan's Monitoring the Future Study. The primary emphasis and outreach of Health Rocks! in Florida involves working with middle school students using the intermediate level curriculum. The curriculum content meets National Common Core and Florida (Sunshine State) Health Education standards. Targeted life skills in the curriculum/program include: decision-making, critical thinking (e.g., analyzing media influences), communication, managing emotions, stress management, goal setting, community service, and refusal skills (National 4-H Council, 2009).

Methods

In an effort to investigate why Florida Health Rocks! outreach was limited at a time when Extension stakeholders prioritized youth ATOD education, the program team developed and distributed a needs assessment survey to assess barriers to program implementation and indicators of best practices in healthy living programs. The survey, distributed to all Florida 4-H Extension professionals via email through a Survey Monkey link was reviewed for content by several faculty with diverse Extension roles and responsibilities. Data collection lasted from the end of November to mid-December 2012. Among the approximately 60 4-H Extension educators contacted to complete the survey, 28 responded (response rate of 47%). The survey included closed- and open-ended items designed to determine the usage of Health Rocks! curricula and resources, perceived program effectiveness, and reasons for not using the program and/or resources.

Open-ended items allowed county Extension faculty to make suggestions for improved Health Rocks!

and other healthy living program delivery. The qualitative comments were analyzed using qualitative thematic analysis (Vaismoradi, Turunen, & Bondas, 2013). Descriptive statistics are included in the following charts and tables.

Results

Reasons for Program Support

Results indicated the reasons why 4-H Extension professionals chose to implement Health Rocks!: a need for an ATOD prevention program for youth in their communities; appeal of experiential activities for youth and educators; and teaching of life skills like decision-making and stress management. The most appealing components were: teaching youth to make healthier life choices and learn useful life lessons and fostering/sustaining positive partnerships between youth and adults. Extension faculty who implemented Health Rocks! rated it as "decently-" to "extremely-accommodating" for the needs of youth in communities reached.

The following are quotes from county Extension faculty who were positively impacted by the program and had developed positive relationships with youth in their counties.

The Health Rocks! Program has provided me with many opportunities to talk about how important it is to live a Healthy Lifestyle, to live out a good example in my community because many youth these days in my community turn to drugs and alcohol and I have met many kids and youth that look up to me.

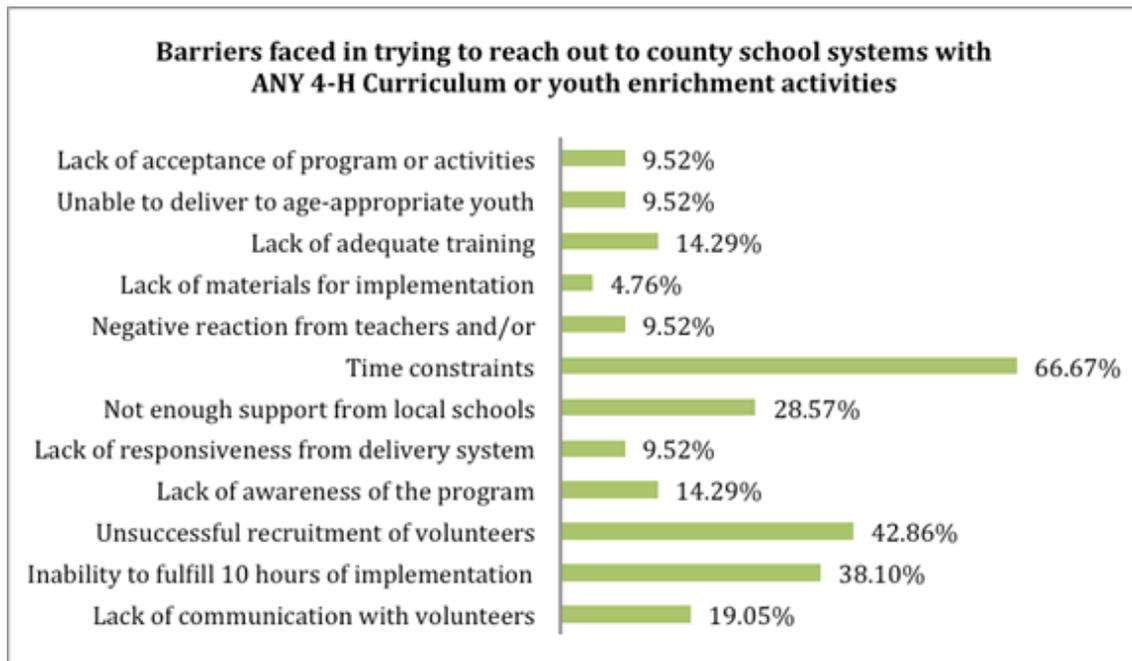
Health Rocks! can be very useful. It provides a great opportunity to reach youth in the county who may otherwise not participate in quality youth programs.

Barriers to Program Implementation

Thirty-eight of the sixty county 4-H Extension professionals contacted to participate in the survey were not participating in the Health Rocks! program. Among the 28 respondents, 19 reported participating in a Health Rocks! Training, with only six implementing the program and 21 not currently using the program. Figure 1 depicts survey responses regarding barriers faced during implementation of 4-H curriculum programming in school systems. Among these barriers identified, three major constraints are discussed below.

Figure 1.

Survey Responses from Extension Professionals Regarding Barriers Faced with Any 4-H Curriculum Programming (n=21*)



Includes counties that implement as well as do not utilize the Health Rocks! Program

1. The primary barrier to the use of 4-H curricula was time constraints. Implementing the Health Rocks! Program could pose time constraints due to: mandatory programmatic goals (10 hours per youth/year); time for activities; and scheduling with outreach sites.
2. The second most common barrier was unsuccessful recruitment of volunteers. Some volunteers who attended Health Rocks! did not continue with implementation. Communication barriers between agents and volunteers were an additional obstacle.
3. The third most common barrier was an inability to fulfill implementation requirements. In counties where 4-H outreach occurred primarily in schools, school board approval and endorsement was insufficient to alleviate communication issues with middle school health teachers and differing class schedule allotments.

Of the 21 respondents not implementing the Health Rocks! Program, 14 Extension agents reported having too many other 4-H programs to manage. Other common reasons (n=5) were conflicting programming priorities for county youth and county agents (n=4) having completed the program yet moving on to other projects.

In addition to understanding the reasons for not implementing the program, county Extension faculty also provided comments on how Health Rocks! could be more useful to their counties. Common themes included: identifying appropriate areas/sites for implementation; receiving more information about the program (impacts, outcomes, success stories, appeal to membership); providing more trainings; and aligning more to current 4-H needs, such as using project books or implementing short term programs.

Recommendations

A needs assessment for implementation of 4-H healthy living programs, including Health Rocks! points to specific recommendations addressing each of three major constraints.

1. Time constraints. The results indicate the need for Extension professionals to clearly define and communicate their county's needs and priorities. Open communication between Extension professionals and state specialist teams is crucial in ensuring smooth program management. Partner input can relieve Extension professionals of additional responsibilities and ensure efficient program delivery.
2. Unsuccessful recruitment of volunteers. The Florida Health Rocks! team recommends that Extension professionals clearly communicate program requirements, job descriptions, and expectations to volunteers and use incentives to reduce volunteer attrition, including recognition, community service, or continuing education hours. Volunteer pools can be diversified by targeting community groups (e.g., parent associations and worship communities), using volunteer match websites, and contacting volunteer-based programs that require service opportunities.
3. Inability to fulfill implementation requirements. The Florida Health Rocks! team recommends that to improve program delivery, Extension professionals develop a county-specific plan of action in conjunction with the state specialist team. A comprehensive and effective implementation plan should account for various possible obstacles and barriers, including unresponsive volunteers and the length of school health classes. This issue should be clearly communicated from the county to the national level to ensure that goals of the program are supported by research-based evidence.

Discussion

The results of the needs assessment reported here can be used to: 1) Improve Extension program implementation and outreach; 2) Equip state specialists with more knowledge to enhance program support; and 3) Assess the efficacy of Extension curricula in fulfilling the needs of the counties across the state. The survey results and insights can also be applied to healthy living Extension programs and curricula for outreach with youth.

Thematic analysis of the data revealed that the benefits of the Health Rocks! Program included a hands-on learning approach, development of major life skills, and positive youth-adult partnerships. Perhaps a motivating factor for effective program implementation lies in the Extension educator's/county's perception of the need for a specific program. For state specialists, this could mean promoting healthy living programs to counties that consider the issue as a priority.

Healthy living programs can ask the following questions when developing their programs:

- What are relevant health issues affecting youth in your county? These issues can be based off national and local data e.g., YRBS stakeholder voices and community forums.
- What are the issues affecting other community youth-serving organizations? Whereas schools may value programs targeting issues identified by their school wellness committees, other nonprofit-based after-school programs may want physical activity or citizenship building programs.

How are you "packaging" and promoting your program? Critically analyze and evaluate the program's messages. Ensuring positivity and communication of message targeted to specific audiences will ensure effective delivery.

Responding to the constraints reported by Extension professionals, such as limited time, need for volunteer recruitment, and implementation requirements, questions to consider during program implementation include:

- What programs do stakeholders want? Schools, counties, and communities have initiatives. Identification of the issue and connection with the offered curriculum will ensure a supportive audience. Who can help you carry out the program? Find passionate individuals and groups that are willing to contribute to the program.
- What are your program requirements, and are you working with agencies that can realistically fulfill them? Make sure your partner agencies clearly understand program expectations and have the capacity and ability to reach them.

Implications for Practice

Land-grant Extension systems nationwide work toward initiatives through federal, state, and county networks. Feedback from county Extension faculty about local outreach needs is valuable for state specialists to improve statewide programs. Additional research can be conducted to better understand the factors that contribute to the attractiveness and feasibility of an Extension program, as well as Extension professionals' perceived constraints to implementing such programs. Lessons learned from the qualitative needs assessment can provide a framework for seeking further input from Extension professionals.

The strengths and weaknesses discussed in this article provide a broad perspective of the day-to-day challenges experienced by county Extension faculty. Many of these recommendations can be applied to Extension programs that involve volunteer management such as Master Food and Nutrition volunteers. Prior to program development, county Extension faculty can assess the strengths, weaknesses, opportunities, and threats (SWOT analysis) of their programming to strategically plan for success. Whereas healthy living programs are diverse, all programs in Extension share the same goal of effectively meeting and reaching their audiences' immediate, stakeholder-determined educational needs through proposed solutions to local issues and modeling best practices.

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