A PROCESS EVALUATION OF THE IMPLEMENTATION OF ASSIST IN SCOTLAND

Methods

Background ASSIST (A Stop Smoking in Schools Trial) is a peer led smoking prevention programme that encourages the dissemination of non-smoking norms. Students (aged 11–13) are nominated by their peers to become peer supporters.

ASSIST is an evidence based programme with results from a large cluster randomised trial showing a reduction in smoking prevalence. However, these findings are now 13 years out of date and adolescent smoking prevalence has continued to decline. In 2014 ASSIST was piloted in Scotland. This presentation will present key findings from the Scottish evaluation offering points for consideration for the future delivery of ASSIST and further research areas.

Methods Mixed method study with a range of stakeholders using qualitative (school staff, trainers, students, policy and commissioning leads n=101) and quantitative methods (a before and after student survey across 20 secondary schools in Scotland n=2166, at follow-up).

Results Feedback was overwhelmingly positive regarding the wider benefits of taking part in ASSIST for peer supporters (i.e. personal and communication skills) but also for the school and communities. Findings showed less certainty regarding the extent of message diffusion and any impact this may have had on adolescent smoking. Student survey results showed no significant change in self-reported smoking prevalence with 1.6% of pupils (n=33) reporting that they smoked one or more cigarettes per week increasing slightly to 1.8% (n=38) at follow-up. The student survey also indicated that conversation recall was low at 9% (n=145)

Conclusion ASSIST is a well delivered, popular programme with additional benefit for students, their wider social network, school and community. Yet, there is uncertainty regarding the extent of message diffusion. Further research is needed to update the existing evidence base.

DEVELOPING ROBUST METHODS FOR A LARGE SCALE, MULTI-SITE QUALITATIVE POLICY EVALUATION

Background Non-communicable diseases (NCDs) are the leading health burden in all but the poorest countries, and there is an increasing interest in macro-level policy responses to tackle their upstream determinants. There is also an increasing use of qualitative methods for evaluation research, in particular when evaluating multi-component and multi-level initiatives. However, methodological opportunities offered by qualitative research, such as its strength to capture interconnections, complexities and inconsistencies, are limited by challenges, such as its small scale and in-depth rather than broad reach. We report methodological considerations, challenges and solutions.

Methods We conducted a qualitative evaluation study of seven Caribbean countries in 2015 to assess the progress made in NCD policy measures. This comprised policy document analysis, and 76 semi-structured interviews with 80 stakeholders inside and outside government. Interviews were conducted by six interviewers organised in regional teams, and analysed by an expanded team under the guidance of the authors. Data collection and analysis protocols for this relatively large-scale project were developed iteratively in workshops.

Results A first consideration was to purposively sample across settings, sectors and professional roles. This was a challenge of scale, as stakeholders were initially drawn from key informants and existing networks, and then cascaded by eliciting further recommendations to cover relevant sectors (government ministers, private, civil society), organisations within these sectors, and roles (technical, executive, elected). Some stakeholders were recommended because it was perceived as ‘politically’ important to include them, even if information elicited was less ‘rich’ in terms of relevant technical expertise or topic insight. Second, it was challenging to analyse and synthesise a large qualitative dataset across similar but distinct settings. Eleven researchers coded and categorised the data pragmatically according to the WHO NCD Action Plan, and this was guided by the Multiple Streams policy evaluation framework and realist evaluation principles to compare across contexts and themes. Later, the authors expanded the analysis to capture more inductive insights. Finally, there was an ethical challenge to secure anonymity of the participants as well as settings – e.g. not attributing policy shortcomings to individuals, organisations or even countries and their governments – while retaining relevant insights for each setting and political context.

Conclusion Qualitative policy evaluation requires careful consideration and adaptation of standard research methods, the use of clear theoretical frameworks, and transparent interrogation of limitations. Its increasing popularity and use, and its detailed description and discussion among the research community, should enable the development of robust processes.

HEALTH CARE PROFESSIONAL’S EXPERIENCES OF LIFESTYLE MANAGEMENT IN OVERWEIGHT AND OBESE PREGNANT WOMEN: A QUALITATIVE STUDY

Background Obesity during pregnancy is associated with a number of complications including gestational diabetes mellitus (GDM). Currently, little is known about guidelines in clinical practice and the challenges faced by health care professionals (HCPs). The aim of this study was to understand the