Improving the Health of Adolescents & Young Adults: A Guide for States and Communities

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Worksheet 1: A Coalition Planning Tool

This form should be completed by a steering committee, a community group, or others who have come together to start an adolescent health initiative. Completing this form will help the group begin to shape the initiative and determine who should be involved. In the spaces provided, please answer the questions listed, which are about history, norms, and politics around the Critical Health Objectives; which key stakeholders should be involved; what resources are needed; what other efforts are taking place in the community; and what is the best course of action for engaging the community to meet the needs of adolescents. This form can also be used to facilitate a group discussion.

What are the history and status of adolescent health and the Critical Health Objectives in the community?

How does the community view these issues? What is the current political and social climate in relation to these issues?

Who is concerned about and affected by these issues? Who has participated in the past? What is their relation to these issues?

Who has not participated, and why haven't they been involved in these issues?

What existing youth-focused groups or efforts address these issues? With which, if any, could we collaborate?

Do we have sufficient information and resources?

What information and resources (administrative, financial, and structural) do we have right now to work on this issue?

What resources are we lacking?

Does a current needs-and-assets assessment exist in the community?

What are the advantages or disadvantages of using this assessment?

What are the possible benefits and challenges of conducting a new needs-and-assets assessment?

Is working as a collaborative or a coalition the optimal option?

Will working as a group help achieve goals that cannot be achieved independently?

What are the pros and cons of working in a coalition or a collaborative right now?

How official or formal do we want to be?

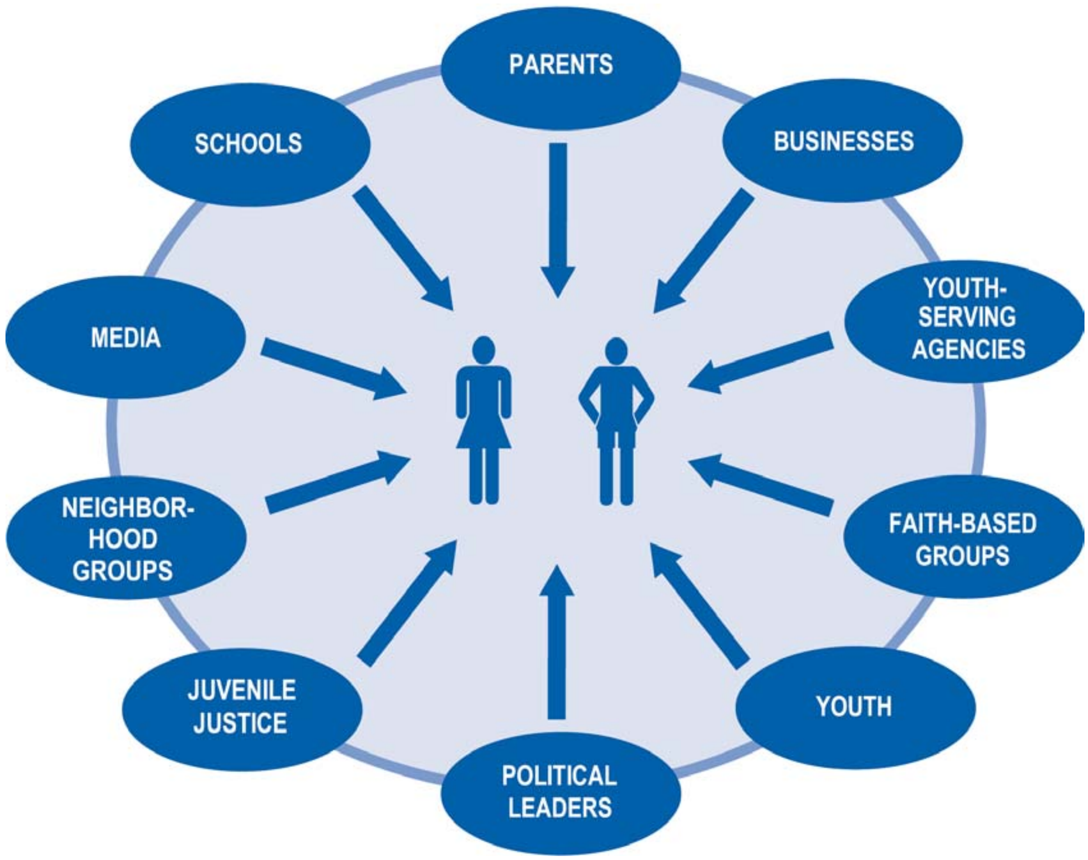
Do we want to be identified with another organization working on this issue or in a parallel area? Why or why not?

What do we want to accomplish in the short term?

Do we have a long-term goal? What do we want to accomplish in the future?

Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health; Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health; National Adolescent Health Information Center, University of California, San Francisco. *Improving the Health of Adolescents & Young Adults: A Guide for States and Communities.* Atlanta, GA: 2004.

Figure 3: Community Partnership For Youth



Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health; Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health; National Adolescent Health Information Center, University of California, San Francisco. *Improving the Health of Adolescents & Young Adults: A Guide for States and Communities.* Atlanta, GA: 2004.

Worksheet 2: Coalition Self-Assessment

This form should be completed by coalition members to assess how the group is functioning. Answers will be used to determine areas in which the coalition can improve. Respondents should rate how well the coalition measures up to each statement below. Using a scale of 1 to 5, circle the number that best fits your opinion. Please answer each question as honestly as possible. Your name will not appear anywhere on this form.

Staffing and Resources	Not At All		Somewhat	Outstanding	
The coalition has stable staff.	1	2	3	4	5
The coalition has a designated person to serve as the coordinator of the coalition.	1	2	3	4	5
The coalition has secured diverse funding streams.	1	2	3	4	5
The coalition has secured needed in-kind contributions (meeting space, volunteer time, supplies, etc.).	1	2	3	4	5
The coalition uses existing resources.	1	2	3	4	5
Leadership	**Not At All**		**Somewhat**	**Outstanding**	
The coalition leadership is committed to the coalition's mission.	1	2	3	4	5
The coalition leadership has knowledge in the content area.	1	2	3	4	5
The coalition leadership promotes equal status and collaboration among members.	1	2	3	4	5
The coalition leadership provides an opportunity for different points of view to be heard.	1	2	3	4	5
The coalition leadership is competent in negotiation, problem solving, and conflict resolution.	1	2	3	4	5
The coalition leadership is effective in managing meetings.	1	2	3	4	5
The coalition leadership values members' input.	1	2	3	4	5
The coalition leadership celebrates accomplishments of the coalition and its members.	1	2	3	4	5
Structure	**Not At All**		**Somewhat**	**Outstanding**	
The coalition provides a forum for joint planning.	1	2	3	4	5
The coalition has bylaws/rules of operation.	1	2	3	4	5
The coalition has a clear mission statement in writing.	1	2	3	4	5
The coalition has goals and objectives in writing.	1	2	3	4	5
The coalition has an action plan.	1	2	3	4	5
The coalition has regular, structured meetings.	1	2	3	4	5
The coalition has a process for decision making.	1	2	3	4	5
The coalition has a mechanism for holding members accountable for completing tasks in a timely manner.	1	2	3	4	5
Membership	**Not At All**		**Somewhat**	**Outstanding**	
The coalition has been successful in bringing together people with different views about how to approach adolescent health.	1	2	3	4	5

Members share the coalition's mission.	1	2	3	4	5
Members actively plan, implement, and evaluate coalition activities.	1	2	3	4	5
Members regularly attend meetings.	1	2	3	4	5
The coalition includes key players in the community.	1	2	3	4	5
The coalition includes young people in planning and decision making in a meaningful and substantive way.	1	2	3	4	5
The coalition includes members who are knowledgeable about the adolescent health issue being addressed and ways to prevent it.	1	2	3	4	5
Function	**Not At All**		**Somewhat**	**Outstanding**	
The coalition has conducted a needs assessment/drawn up a resource map to establish areas of need.	1	2	3	4	5
The coalition has established a formal, comprehensive plan of action.	1	2	3	4	5
The coalition has engaged diverse partners to take part in implementing the action plan.	1	2	3	4	5
The coalition has been successful in instituting new programs in the community.	1	2	3	4	5
The coalition has been successful in getting new policies implemented.	1	2	3	4	5
The coalition has been successful in getting stakeholders to work together more effectively.	1	2	3	4	5
Community	**Not At All**		**Somewhat**	**Outstanding**	
The coalition is able to obtain political support at the community level.	1	2	3	4	5
The coalition has credibility within the community.	1	2	3	4	5
The coalition engages the community as its partner with decision-making power.	1	2	3	4	5

Currently, how involved are each of the following groups in your coalition?	Not At All		Somewhat	Very Much	
Youth	1	2	3	4	5
Parents	1	2	3	4	5
Business leaders	1	2	3	4	5
School administrators and school board members	1	2	3	4	5
Teachers	1	2	3	4	5
Grassroots or neighborhood groups	1	2	3	4	5
Youth-focused organizations	1	2	3	4	5
Health care providers	1	2	3	4	5
Juvenile justice	1	2	3	4	5
Social service providers	1	2	3	4	5
Media	1	2	3	4	5
Political leaders	1	2	3	4	5
Clergy/religious leaders	1	2	3	4	5

Do you have any comments on how to improve the coalition's functioning?

Any other comments?

Thank you!

Adapted from: Brindis, C.D., & Davis, L. (1998). Mobilizing for action. In Advocates for Youth, *Communities responding to the challenges of adolescent pregnancy prevention, Vol. 1*. Washington, DC: Advocates for Youth. North Carolina Department of Health and Human Services, North Carolina Diabetes Prevention and Control Unit. (2000). *Coalition self-assessment tool*. Retrieved September 23, 2002, from *http://www.ncdiabetes.org/WhatWeDo/pdf/Coalition_Self-Assessment_Tool.pdf*

Worksheet 3: Needs Assessment Team Planning Tool

Use this worksheet to identify the skills, resources, and expertise the coalition will need to conduct a needs assessment; how to access those resources within the community; and who should serve on the needs assessment team. The list of resources will most likely include items such as research and data skills, expertise in the area of best practices, entrée into the schools, and funding. In creating such a list, the coalition may find that many of the resources it needs can be found within the coalition. For missing resources, this tool can help the group identify organizations with which it might want to partner or contract, and people it might recruit to participate in the needs-and-assets assessment process.

Skills Resources, or Expertise Needed (e.g. in-kind, technical expertise, skills, funds)	Individual, Organization, or Institution That Can Provide Resources	Contact Information	Person Willing to Contact

Source: Card, J., Brindis, C.D., Peterson, J., & Niego, S. (2001). *Guidebook: Evaluating teen pregnancy prevention programs* (2nd ed, Chapter 4). Los Altos, CA: Sociometrics.

Worksheet 4: Needs Assessment Questions

Use this worksheet to brainstorm a list of questions to guide the needs-and-assets assessment. You may find that, depending upon the topic the community is exploring, all the questions may not be relevant. After brainstorming, the coalition will need to narrow the list by prioritizing questions. Prioritizing should be guided by the resources available to the coalition, the previously agreed-upon scope and depth of the assessment, and the relevancy of the questions.

Youth Profile Questions

Our top three questions about the demographics and socioeconomics of young people in our community are:

1.____________________

2.____________________

3.____________________

Our top three questions about [insert adolescent health issue being addressed] and its antecedent factors are:

1.____________________

2.____________________

3.____________________

Our top three questions about school-related issues are:

1.____________________

2.____________________

3.____________________

Our top three questions about other related health and social issues facing young people are:

1. ______

2. ______

3. ______

Community Resources Questions

Our top three questions about health and social services available to young people in the community are:

1. ______

2. ______

3. ______

Our top three questions about best practices are:

1. ______

2. ______

3. ______

Our top three questions about school resources in our community are:

1. ______

2. ______________________________

____

____

3. ______________________________

____

____

Our top three questions about youth development efforts in our community are (for example, volunteering, employment, civic engagement, mentoring, and relationships with adults):

1. ______________________________

____

____

2. ______________________________

____

____

3. ______________________________

____

____

Our top three questions about adolescent health and youth development initiatives in our community are:

1. ______________________________

____

____

2. ______________________________

____

____

3. ______________________________

____

____

Environment and Norms Questions

Our top three questions about community attitudes and perceptions of [insert adolescent health issue being addressed] are:

1. ______________________________

____

____

2. ______________________________

____

____

3. ______________________________

____

____

Our top three questions about Federal, State, and city/county policies and laws related to [insert adolescent health issue being addressed] are:

1. ______________________________

____

____

2. ______________________________

____

____

3. ______________________________

____

____

Our top three questions about funding are:

1. ______________________________

____

____

2. ______________________________

____

____

3. ______________________________

____

____

Sources: Card, J., Brindis, C.D., Peterson, J., & Niego, S. (2001). *Guidebook: Evaluating teen pregnancy prevention programs* (2nd ed, Chapter 4). Los Altos, CA: Sociometrics. Brindis, C.D., Card, J.J., Niego, S.. & Peterson, J. L. (1996). *Assessing your community's needs and assets: A collaborative approach to adolescent pregnancy prevention*. Los Altos, CA: Sociometrics.

Worksheet 5: Needs Assessment Data Chart (Youth Profile)

Use these worksheets (5, 5.1, 5.2) to map out what information is needed to answer each needs-and-assets assessment question, the sources of data, how data will be collected, who will collect it, and the time frame. Complete the applicable worksheet for each segment of the assessment (youth profile, community resources, environment and norms).

Needs Assessment Question	Information Needed to Answer Questions	Sources of Existing Data	Data to be Collected (if existing data are not available)	How Data Will Be Collected	Persons/ Group Responsible	Time Frame
Question 1: Example: What is the economic profile of young people and their families in our community?	% adolescents living in poverty by race/ ethnicity	US Census			Graduate student intern	2 weeks
	% adolescents living in single-parent Households by race/ethnicity	US Census			Graduate student intern	2 weeks
	% adolescents receiving free or reduced-cost lunch	US Department of Agriculture, School district			Graduate student intern	2 weeks
Question 2:						
Question 3:						

Source: Card, J., Brindis, C.D., Peterson, J., & Niego, S. (2001). *Guidebook: Evaluating teen pregnancy prevention programs* (2nd ed, Chapter 4). Los Altos, CA: Sociometrics.

Worksheet 5.1: Needs Assessment Data Charts (Community Resources)

Needs Assessment Question	Information Needed to Answer Questions	Sources of Existing Data	Data to be Collected (if existing data are not available)	How Data Will Be Collected	Persons/ Group Responsible	Time Frame
Question 1: Example: Are teen-friendly clinical services available to adolescents in the community?	Are there health care centers that serve teens?		No. of health care centers that serve teens	Survey of health care centers	Dr. Smith, with assistance from other Needs Assessment team members	2 months
	Do health care centers have policies and procedures that reduce barriers for teens to access care?		No. of teen-friendly practices implemented by health care centers	Survey of health care centers	Dr. Smith, with assistance from other Needs Assessment team members, including two youth	2 months
Question 2:						
Question 3:						

Source: Card, J., Brindis, C.D., Peterson, J., & Niego, S. (2001). *Guidebook: Evaluating teen pregnancy prevention programs* (2nd ed, Chapter 4). Los Altos, CA: Sociometrics.

Worksheet 5.2: Needs Assessment Data Charts (Environment and Norms)

Needs Assessment Question	Information Needed to Answer Questions	Sources of Existing Data	Data to be Collected (if existing data are not available)	How Data Will Be Collected	Persons/ Group Responsible	Time Frame
Question 1: Example: Why is there low utilization of health services among young people?	What are the attitudes and perceptions of young people when it comes to accessing health care?		▪ Perceived barriers to accessing health care ▪ Perceived benefits of seeking health care	Focus groups	Superintendent Jones; Boys and Girls Club staff	2 months
Question 2:						
Question 3:						

Source: Card, J., Brindis, C.D., Peterson, J., & Niego, S. (2001). *Guidebook: Evaluating teen pregnancy prevention programs* (2nd ed, Chapter 4). Los Altos, CA: Sociometrics.

Worksheet 6: Prioritization

On a scale of 1-5, please indicate the degree to which you think each proposed strategy will be effective and supported by the community. All answers will be averaged and used to help prioritize strategies for the community action plan.

Proposed Strategy	Community Support					Effectiveness				
	Weak			Strong		Low			High	
	1	2	3	4	5	1	2	3	4	5
	1	2	3	4	5	1	2	3	4	5
	1	2	3	4	5	1	2	3	4	5
	1	2	3	4	5	1	2	3	4	5
	1	2	3	4	5	1	2	3	4	5
	1	2	3	4	5	1	2	3	4	5
	1	2	3	4	5	1	2	3	4	5

Source: Adapted from: Wadud, E. (2002). Rating community goals. In *Community Toolbox: Part J, Chapter 38, Section 3*. Retrieved September 29, 2002, from *http://crb.lsi.ukans.edu/tools/en/sub_section_main_1365.htm*

Instructions for Using the Prioritization Survey

- Use this survey with a group that offers broad representation of community stakeholders and viewpoints.
- Results may be used to prioritize strategies, or they may indicate a need to revise strategies and survey the group again.

1. Distribute the survey and describe to respondents what is meant by community support and effectiveness:
    - Community Support—Will the community find this strategy controversial, culturally appropriate, or a necessary expense? Will it consider the strategy a priority? These are examples of what respondents should consider when ranking each strategy for community support.
    - Effectiveness—Respondents should consider whether each strategy is based on best practices, whether the strategy will target young people most at risk, and whether the community has the resources to implement it.
2. Review survey responses: Someone will need to average the ratings for community support and effectiveness for each strategy. The results can be summerized in a table similar to this one:

Strategy	Community Support	Effectiveness
1. Change school lunch menus	3.7	4.5
2. Do away with candy machines on school grounds	1.8	3.9

3. The coalition will need to decide what strategies constitute higher and low priority for community members based on these ratings. One way to use this information to prioritize strategies is to create a ranking system similar to this one:

High Priority = high community support, high effectiveness
Priority = low community support, high effectiveness
Low Priority = high community support, low effectiveness
Last Resort = low community support, low effectiveness

Worksheet 7: Writing Goals and Objectives

Use this worksheet to create goals and objectives for your intervention. Copy extra sheets as needed.

Goals are *long-term outcomes* of an intervention that a community hopes to achieve over a significant period of time. A typical intervention has only one or two major goals, which may be pursued through multiple objectives.

Objectives are *short-term outcomes* and should be thought of as pathways to goals. They can be measured at the completion of a program or several months afterward.

When developing goals and objectives for an action plan, it is important to:

- Clearly **link** each objective to a goal.
- Be sure that both goals and objectives are **measurable**.
- Be specific about the **geographic area**, **target population**, and **time frame** of each goal and objective.

Goals	Objectives
By 2006, motor vehicle injuries among teenagers living in the state aged 16–19 will decrease by 20%.	By 2003, there will be a 25% decrease in the number of adolescents aged 16–19 who have ridden in a car with someone who has been drinking.
	By 2004, 75% of adolescents will be able to identify at least four strategies for preventing motor vehicle injuries.
	By 2005, the number of adolescents aged 16–19 who wear a seatbelt will increase by 25%.

Source: Card, J., Brindis, C.D., Peterson, J., & Niego, S. (2001). *Guidebook: Evaluating teen pregnancy prevention programs* (2nd ed, Chapter 4). Los Altos, CA: Sociometrics.

Worksheet 8: Linking Program Components with Goals and Objectives

Once goals and objectives have been identified, use this worksheet to link them with program components or activities. If matching a particular component to your goals and objectives seems difficult, you may need to abandon this approach and find a more appropriate strategy. Completing this worksheet will help the coalition focus its efforts. Complete the table from right to left by first filling in the Goals and Objectives columns, then filling in the program components that relate to them. It may help to draw arrows between program components and the goals and objectives to which they correspond, as some components will address more than one goal and objective.

Level	Program Component	Objectives	Goals
Individual/Family			
School/Peers			
Community			
Policy/Society			

Source: Card, J., Brindis, C.D., Peterson, J., & Niego, S. (2001). *Guidebook: Evaluating teen pregnancy prevention programs* (2nd ed, Chapter 4). Los Altos, CA: Sociometrics.

Worksheet 9: Action Plan Worksheet

Use this worksheet to create an action plan, or work plan, that will guide implementation efforts. A separate sheet can be completed for each program component. Make copies as needed.

Program Component:

Action Step	Person(s) Responsible	Data to be Completed	Resources Required	Potential Barriers or Resistance	Collaborations
Example Recruit, train, retain, and supervise a youth advisory board to assist in the development of a campaign.	Adult leaders, college mentors, Emilio, Cathy.	April 30, 2007.	Transportation, handouts, easel, paper, food, supervision, stipend.	Transportation, inability to recruit interested youth, parents concerned about their children participating.	Principal, PTA, student council, minority student union, business leaders (to pay stipends).

Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health; Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health; National Adolescent Health Information Center, University of California, San Francisco. *Improving the Health of Adolescents & Young Adults: A Guide for States and Communities.* Atlanta, GA: 2004.

Worksheet 10: Creating a Logic Model

This worksheet will help you create a logic model, which clarifies the links among the antecedent factors of the health issue, the intervention's goals and objectives, and the intervention strategies. Complete the worksheet from left to right, listing the following: 1) Antecedent Factors identified in your assessment process, 2) your theory of change (explaining why program components will bring about change), 3) program components, 4) indicators that will help monitor whether program components are being implemented as planned, 5) short- and long-term outcomes that the intervention is expected to bring about (short-term outcomes should correspond to objectives and long-term outcomes to program goals), 6) indicators that will serve as benchmarks of progress toward outcomes, and 7) sources of existing data or methods for collecting data to measure indicators.

Example: Sample logic model to reduce overweight and obesity rates among youth in the community.

Antecedent Factors	Theory of Change	Program Components	Process Indicators	Outcomes	Outcome & Impact Indicators	Methods/Data Source
Knowledge levels about nutrition. Eating habits established by parents and/or at home (e.g., sit-down dinners, parent/child cooking). Access to fast food vs. healthier selections at school. School funding (uses funds generated by sales of fast foods to fund lunch service program, sports, etc.).	What youth eat in schools affects their eating habits outside of school. Some youth will change their eating habits if given healthier, appetizing, inexpensive options. Publicizing changes in menu along with information on eating healthy will encourage students to eat healthier.	Provide nutrition and cooking classes for students and parents. Offer more healthy food options on school lunch menu and in school vending machines.	No. of nutrition and cooking classes offered. No. of people attending cooking classes. No. of healthier food options on menu. No. of healthier food options in vending machines. No. of parents involved in cooking meals with their teens.	**Short-term** Students and parents have increased knowledge of good nutrition practices and how to cook nutritious foods. Schools/ school board will adopt policies that promote healthier eating through nutrition classes, school cafeteria, and vending machines. No. of healthier foods, items sold increases. Decrease in No. of foods sold with high-fat, calorie, and sodium contents. Increase in number of students who eat recommended daily amounts of fruits and vegetables. Decrease in students' daily intake of foods with high-fat, calorie, and sodium contents.	**Outcome** Increased knowledge of good nutrition practices and how to cook nutritious foods. Policies regarding nutritional content of school meals. Cafeteria and vending machine sales. Servings of fruits, fruit juices, and vegetables yesterday. Servings of foods high in fat, sugar, and sodium. No. of times a student ate a meal at a restaurant. No. of meals from fast food restaurant.	Pre- and post-tests administered to nutrition/cooking class participants. School district records. School food service sales receipts. Student food logs.

Source: Western Regional Center for the Application of Prevention Technologies. (2003). *Building a successful prevention program: Step 7, Evaluation*. Retrieved May 23, 2003, from *http://www.unr.edu/westcapt/bestpractices/eval.htm.*

Antecedent Factors	Theory of Change	Program Components	Process Indicators	Outcomes	Outcome & Impact Indicators	Methods/Data Source
				Long-term Reduce the proportion of teens who are overweight or obese.	**Impact** % Overweight.	

Worksheet 11: Communications Work Plan

Use this worksheet to create a plan, or road map, for the coalition's media and communications activities. Start by listing the different messages the coalition has developed in the left-hand column. For each message, list the target audience, strategy for communicating the message, and time frame for it. Some messages may be used for more than one target audience or communicated using several different strategies. It may be necessary to use arrows when completing the first three columns. In the Resources Available section, try to identify coalition members or other colleagues who might be able to connect the group with in-kind services or free advertising. Lastly, identify resources that need to be obtained (Resources Needed), such as supplies, specific expertise, and skills. These items should be factored into the cost. Some research may be needed to complete the cost column. For example, the coalition should research the cost of creating printed materials, placing a print ad, or running a radio spot.

Message	Target Audience	Strategy	Time Frame	Cost	Resources Available	Resources Needed

Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health; Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health; National Adolescent Health Information Center, University of California, San Francisco. *Improving the Health of Adolescents & Young Adults: A Guide for States and Communities. Atlanta, GA: 2004.*

Worksheet 12: Communications Evaluation

Use this worksheet to plan the coalition's evaluation of its media and communications strategy. This exercise will help to identify benchmarks of success for each strategy and sources of data for measuring the benchmarks.

Message	Target Audience	Strategy	Evidence of Success*	Data Source†

*Examples:
- Increase in people enrolled in program
- Increase in knowledge
- Increase in coalition members

†Examples:
- Enrollment forms
- Surveys/Qustionaires
- Membership lists

Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health; Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health; National Adolescent Health Information Center, University of California, San Francisco. *Improving the Health of Adolescents & Young Adults: A Guide for States and Communities. Atlanta, GA: 2004.*

Worksheet 13: Message Development

Use this worksheet to help develop media messages for different target populations. By identifying where the target group is most likely to seek health information, and how it currently perceives the health issue, as well as identifying best practices for communicating health messages, the coalition can tailor its media messages and determine the best communication channels for reaching its intended audience. Some research (e.g., conducting focus groups or literature reviews) may be necessary to complete this worksheet.

Target Audience	Information Sources	Perception of Issue	Places to Reach	Cultural Issues/Barriers	Research Shows

Source: Hutchins, J. (1999). Working with the media to promote teen pregnancy prevention. In T. Kreinin, S. Kuhn, A.B. Rodgers, & J. Hutchins (Eds). *Get organized: A guide to preventing teen pregnancy: Vol. 3.* Washington, DC.: The National Campaign to Prevent Teen Pregnancy.

Worksheet 14: Current Financial Standing

Use this form to allocate expenses to your various funding sources. The left-hand column should list all expenses, including salaries, supplies, space rental, utilities, etc. Under each funding source, list either the dollar amount or percentage that is going toward each budget item.

Expenses	Amount Budgeted	Funder #1:	Funder #2:	Funder #3:	Donations	Income from Events and Product Sales	Membership	In-Kind	Totals
Salaries									
Program Director	50,000	20,000	10,000						
Totals	Total Expenses:	Total Funder #1:	Total Funder #2	Total Funder #3:	Total Donations:	Total Sales:	Total Membership:	Total In-Kind:	Total Income:

Source: Rabinowitz, P. (2002a). Planning and writing an annual budget. In *Community Toolbox: Part L, Chapter 43, Section 1*. Retrieved September 29, 2002, from *http://ctb.lsi.ukans.edu/tools/en/sub_section_main_1303.htm*

Worksheet 15: Future Expenses and Income

Use this table to list projected expenses (the amount of money the coalition expects to spend in the coming fiscal year, broken down into established categories), projected income by source (the amount of money the coalition expects to have for the coming fiscal year, broken down by sources such as fundraising, memberships, and sales), and the interaction of expenses and income. Funding sources can be separated into general categories (e.g., fundraising, memberships, donations) or into more specific categories (e.g., the department of public health, the Health Foundation). Also, make sure to build in flexibility to make adjustments as the year goes on.

Expenses		Amount
	Salaries	
	Supplies	
Total Expenses		
Income		**Amount**
	Grants	
	Membership	
	Donations	
	Other	
Total Income		

Source: Rabinowitz, P. (2002a). Planning and writing an annual budget. In *Community Toolbox: Part L, Chapter 43, Section 1.* Retrieved September 29, 2002, from *http://ctb.lsi.ukans.edu/tools/en/sub_section_main_1303.htm*

Worksheet 16: Assessing availability of in-kind contributions and redeployment options

What in-kind resources exist that can be applied to the coalition's/project's strategies?

Are there better ways to use existing resources and facilities?

Who else is serving the same population or working on the same issues?

What resources can be pooled to maximize their potential?

What does the coalition have to offer other groups?

Source: Brindis, C.D., & Davis, L. (1998). Building strong foundations, ensuring the future. In *Communities responding to the challenges of adolescent pregnancy prevention: Vol. 2.* Washington, DC: Advocates for Youth.

Worksheet 17: Grantwriting Grid

Use this grid to gather information about potential funders. Completing this form will help determine which funders are strong matches and help you create a timeline or work plan for writing proposals based on their funding cycles. It is helpful to have information on hand as the funding needs change across time. List the name of the funder in the top row and fill in answers in the columns below.

	Potential Funder			
	#1	#2	#3	#4
Applied to this source in the past?(Y/N, date, result)				
Funder's priority area(s) that match coalition goals				
Has funder made awards to similar projects in the recent past?				
Areas funder tends to support (start-up, capacity building, etc.)				
Average award				
Proposal due dates				
Dates awards are made				
Name of coalition member who has a personal contact				
Name of contact person at funding organization				
Contact information				

Source: Berkowitz. B. (2002). Applying for a grant: The general approach. In *Community Toolbox: Part L, Chapter 42, Section 4.* Retrieved September 29, 2002, from *http://ctb.lsi.ukans.edu/tools/en/sub_section_main_1300.htm*

Worksheet 18: Background for Writing a Grant Proposal

Provide a clear description of the coalition's mission and goals and the project the group hopes to carry out with the requested funds.

List past accomplishments (e.g., needs-and-assets assessment, youth development work) that provide proof of the coalition's ability to carry out the proposed project.

List at least three reasons why the targeted Critical Health Objective (or cluster of objectives) is important – to the coalition, the community, and the potential funder.

Describe why the approach was selected. How is it known to be effective (e.g., it is based on a successful model, is it supported by research)? How is it innovative? What criteria will be used to measure success?

List at least three reasons why the coalition's project demonstrates a strong commitment to the community (i.e., that the coalition is dedicated to working with and within the community to effect positive change).

Provide at least three clear reasons why the approach will be effective for the population and community.

Provide three reasons why the group is interested in this particular funder. How does the coalition's project relate to the funder? How will involvement in this project benefit the funder? For example, will it help it demonstrate its connection to the community;? Does it fit its mission?

Source: Butts, D. (1999). Raising funds for teen pregnancy prevention. In T. Kreinin, S. Kuhn, A.B. Rodgers, & J. Hutchins, *Get organized: A guide to preventing teen pregnancy: Vol. 3.* Washington, DC.: The National Campaign to Prevent Teen Pregnancy.

Worksheet 19: Assessing Program Readiness for Evaluation

The purpose of this form is to assess whether a program is ready to conduct a formal evaluation or whether additional program changes are needed. This form should be completed by program managers and staff and by coalition members. The assessment can be completed as part of a staff meeting or coalition meeting. After compilation, the answers will be used to help decide which aspects of the program need work to improve its readiness for a more thorough assessment.

Answer the following questions using a scale of 1-5. Space is provided below each question and at the end of the form to list suggestions for improving the program. Respondents are encouraged to answer questions as honestly as possible. The forms can be completed anonymously.

	Not at All		Somewhat		Outstanding
The program/agency has been successful in retaining staff for 1 year or longer.	1	2	3	4	5
If not, why?					
Staff know the program's goals, objectives, and target group.	1	2	3	4	5
If not, why?					
Staff have all the skills they need to implement the program.	1	2	3	4	5
If not, why?					
Staff feel supported by management.	1	2	3	4	5
If not, why?					
Staff are given the opportunity to suggest program changes.	1	2	3	4	5
If not, why?					
Staff are enthusiastic about the program.	1	2	3	4	5
If not, why?					
The community is involved in developing the program.	1	2	3	4	5
If not, why?					

The coalition seeks input from community members in revising the program.	1	2	3	4	5
If not, why?					
Youth are involved in program development.	1	2	3	4	5
If not, why?					
The coalition seeks input from participants in revising the program.	1	2	3	4	5
If not, why?					
Sufficient time is available to deliver each program component.	1	2	3	4	5
If not, why?					
Supplies/physical resources are available to deliver each component.	1	2	3	4	5
If not, why?					
Each component is delivered as planned.	1	2	3	4	5
If not, why?					

The following steps can improve staff retention:

1) ______________________________

____

2) ______________________________

____

3) ______________________________

____

The following steps can improve staff understanding of the program's goals, objectives, and target population:

1) ______________________________

____

2) ______________________________

____

3) __________

List three skill areas where staff capacity building is necessary and steps the program can take to ensure improved staff capacity:

Skill	Action Step
1)	1)
2)	2)
3)	3)

Management can take the following steps to be more supportive of staff:

1) __________

2) __________

3) __________

The following steps can give staff more opportunities to provide input on program operations and suggest program changes:

1) __________

2) __________

3) __________

The following steps can improve community input into the program:

1) __________

2) __________

3) __________

The following steps can improve youth input into the program:

1) __________

2) __________

3) ______________________________

____

The following steps can improve participant input into the program:

1) ______________________________

____

2) ______________________________

____

3) ______________________________

____

The following steps can ensure that sufficient time is available to deliver each program component:

1) ______________________________

____

2) ______________________________

____

3) ______________________________

____

The following steps can ensure that supplies/physical resources are available to deliver each program component:

1) ______________________________

____

2) ______________________________

____

3) ______________________________

____

The following steps can ensure that each program component is delivered as planned:

1) ______________________________

____

2) ______________________________

____

3) ______________________________

____

Thank you!

Source: Sedivy, V., & Brindis, C. (2001). Minimizing the Risk of Premature Evaluation: Lessons from an Evaluation of Seven Adolescent Pregnancy Prevention Programs. Manuscript submitted for publication.

Worksheet 20: Evaluation Timeline/Work Plan

Complete this timeline to determine what resources are available and what people, organizations, tools, etc. will be needed to conduct a program evaluation. Examples of tasks this timeline/work plan might include are to: decide on evaluation design, create/research data collection tools, recruit comparison/control group, train staff/community members in evaluation skills, obtain consent, pilot tools, collect data, analyze data, present findings.

Task	Time Frame	Resources Needed (e.g. staff time, school approval, specific skills)	Persons Responsible

Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health; Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health; National Adolescent Health Information Center, University of California, San Francisco. **Improving the Health of Adolescents & Young Adults: A Guide for States and Communities.** ***Atlanta, GA: 2004.***

Worksheet 21: Process Evaluation Planning Tool

The purpose of a process evaluation is to determine how well the program was actually implemented by comparing it with the original action plan. It examines whether a program has stayed true to its design and the extent to which it is producing all the materials and services promised. The left-hand column lists several questions that process evaluations often seek to answer. First select the questions to be used in the process evaluation, then use the subsequent columns to list the data the coalition can collect to answer the questions, sources of that data, and baseline measures that help gauge whether the program is achieving what it set out to do. The form is partially completed to provide examples of possible data and baseline measures.

Evaluation Question	Data Needed to Answer the Question	Data Source	Baseline Measure
Are appropriate personnel, equipment and financial resources available in the right quantity, in the right place, and at the right time to meet program needs? If not, what barriers exist?	• Staff skills, education, and training • Staff productivity • Perceived barriers	• Resumes • Staff activity logs • Schedules of program activities • Interviews with managers and staff	• Job descriptions • Staff work plans • Program activities
Is the program providing the expected services and reaching the target population?	• No. of program components implemented (No. of classes implemented, No. of events held, etc.) • Participant characteristics (age, sex, race, neighborhood of residence, etc.) • No. of sessions in which persons participate	• Program activity logs • Participant registration forms • Participant sign-in sheets for each activity	• Action plan/program plan • Grant proposal or program plan
How well is the program meeting the needs of participants, their families, and staff?	• Participant, parent, and staff satisfaction with the program	• Interviews with participants, parents, and staff • Client satisfaction forms	• Needs-and-assets assessment data
Are the activities being completed on time? Was sufficient time given in the timeline to reach the selected objectives? Are we reaching our target population?			

Is the program delivering an appropriate quantity of services?			
Is the program being implemented as planned?			

Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health; Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health; National Adolescent Health Information Center, University of California, San Francisco. **Improving the Health of Adolescents & Young Adults: A Guide for States and Communities.** ***Atlanta, GA: 2004.***

Worksheet 22: Evaluation Data Planning Tool

Outcome and impact evaluations indicate whether an intervention or initiative has accomplished its short- and long-term goals, respectively. This form helps identify what data need to be collected for the evaluation. List short- and long-term outcomes in the left-hand column, then list indictors for each outcome, sources of existing data, and the method that will be used to collect new data. Much of the information needed for this worksheet can be taken directly from the logic model worksheet.

	Indicators	Data Source	Data Collection Method
Short-Term Outcomes: Example: Schools/school board will adopt policies that promote healthier eating through enhanced nutrition curriculum, as well as changes in the schools' Good Service program and foods sold through vending machines.	Policies regarding nutritional content of school meals	School district records	Records review
Long-Term Outcomes: Example: Reduce the proportion of teens who are overweight or obese.	% of overweight teens (ages 10-19)	County health profile	

Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent and School Health; Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adolescent Health; National Adolescent Health Information Center, University of California, San Francisco. **Improving the Health of Adolescents & Young Adults: A Guide for States and Communities.** ***Atlanta, GA: 2004.***