

## The Illinois WISEWOMAN Lifestyle Intervention

**Please Note:** After the Center TRT completed the translation process in December 2007, the Illinois WISEWOMAN program revised its lifestyle intervention to incorporate results from its' June 2008 Facilitator Evaluation Report. Illinois WISEWOMAN consolidated the 12-week intervention, described below, to a 4-week intervention, resulting in a change in dose and intensity. The Illinois WISEWOMAN Program reports that the core elements remain intact. The newly revised manuals for the participant and interventionist/facilitator can be found in the Emerging Tools section of the website.

### INTENT OF THE INTERVENTION

The Illinois WISEWOMAN Lifestyle Intervention is a practice-based intervention designed to reduce modifiable cardiovascular disease risk factors by:

- improving dietary behaviors and dietary composition
- increasing physical activity
- enhancing interpersonal relationships through social networking
- increasing awareness of personal cardiovascular risk status

This lifestyle intervention addresses the intra-and inter-personal levels of the socio-ecological model.

*The Illinois WISEWOMAN Lifestyle Intervention was developed and evaluated within the context of the [CDC's WISEWOMAN Program](#) and users of this template should understand the context before they can determine the appropriateness of this intervention for their particular populations and settings.*

### OVERVIEW

The Illinois WISEWOMAN Lifestyle Intervention was developed collaboratively by the Illinois Department of Public Health, The Cooper Institute, and the Center for Excellence in Women's Health at the University of Illinois Chicago, as a component of an enhanced state WISEWOMAN Program. This intervention is an adaptation of the research-tested interventions, *Project ACTIVE (now Active Living Every Day 2001)* and *The Lifestyle Nutrition Study (now Healthy Eating Every Day 2005)*, developed by The Cooper Institute.

This is an intensive behavior-change intervention that occurs over a 24-month period. It includes 12 weeks of facilitator-enhanced group meetings followed by 14 mailed postcards, three phone "check-ins" and three face-to-face coaching sessions that are scheduled during follow-up screening visits. The intervention is designed to provide participants with the knowledge, skills and social support to improve dietary behaviors and increase physical activity.

**Intended Population:** The *Illinois WISEWOMAN Lifestyle Intervention* is designed for use with:

- Low-income, mid-life women between the ages of 40 and 64
- Women with or without identified cardiovascular disease risk factors
- English and Spanish speakers
- Adults with limited literacy

**Setting:** This intervention can be implemented in clinical, worksite, faith-based, and other community settings.

## CORE ELEMENTS

*This section outlines the aspects of an intervention that are central to its theory and logic and that are thought to be responsible for the intervention's effectiveness. Core elements are critical features of the intervention's intent and design and should be kept intact when the intervention is implemented or adapted.*

1. **Multiple sessions:** Sessions are facilitated by an interventionist with training in the principles of adult learning, behavior change strategies, and group facilitation. Multiple contacts offer more opportunities for skill building and feedback, which facilitate behavior change.
2. **Goal-setting:** During each session, participants set behavioral mini-goals (small, achievable goals) to work on until the next session.
3. **Guidelines and strategies:** A detailed curriculum provides the key concepts, content, and skill-building activities to help participants adopt healthy lifestyle behaviors. There is a participant guide to healthy eating and physical activity, and take-home tip sheets on ways to meet behavioral goals.
4. **Self-monitoring:** Monitoring of behavior change goals occurs during the "check-in" or "talking circle" portion of each group session. Participants are encouraged to share successes and challenges and problem-solve as a group.
5. **Skill building activities:** The intervention employs skill-building activities in each session, to increase participants' confidence (self-efficacy) to make lifestyle changes.
6. **Social support via group interaction:** Group sessions provide opportunities for peer support and reinforcement so that participants can discuss their progress making lifestyle changes and receive support and suggestions from other members of the group.
7. **Intensive follow-up:** After the completion of the facilitated group sessions, there is intensive follow-up with participants to reinforce behavior change.

## RESOURCES REQUIRED

*This section describes the resources used by the Illinois WW Program to implement this intervention. Please note that the resources needed to implement the intervention in your community may vary and are dependent upon your existing infrastructure and how the intervention is adapted for your community. When determining the resources required, consider the intervention delivery method(s) (e.g. will the intervention be delivered in groups, one on one, self-study etc.); the planned exposure to the intervention including the number (dose) and length (intensity) of contacts; the number of sites that need to be staffed; and the knowledge, skills and abilities of staff.*

**Staff:** Facilitators/interventionists for the lifestyle intervention must have good communication skills and familiarity with nutrition, physical activity and health. Illinois employed public health educators, registered nurses, and physical education majors as interventionists. Illinois estimates that a facilitator can teach 12 sessions and provide follow-up to 4 groups of 20 women every three months or approximately 1.0 FTE facilitator for every 240 women.

**Materials:** Illinois WISEWOMAN Lifestyle Intervention uses the following materials:

- The Facilitators Guide (English or Spanish) includes key concepts, objectives and materials needed for each session as well as detailed instructions for the facilitator. Complete guides need to be printed and made available to each facilitator.
- Overhead transparencies for teaching classes must be available at each site. The masters for transparencies are in the Facilitators Guide. Funds to support duplication of overhead transparencies must be available for each site.

- Participant handouts must be printed for each session. The developers suggest that handouts be three-hole punched and inserted into a participant binder. Funds to support duplication of participant handouts must be available for each site.
- Post-cards for follow-up lifestyle tips. Post cards include a photograph (optional) of the group session and tips for healthy lifestyle changes.
- Incentives: (optional) The Illinois WISEWOMAN Program has built incentives into the curriculum that relate to the topic of each specific session. Incentives include: duffel bags, Calorie King book, Dynabands (resistance bands), step counters, George Foreman Grills, cookbooks, T-shirts, strobe safety light, stress card, 5-A-Day pencil, magnet, lunch tote, and stress ball. The estimated cost per participant is \$90 - \$95.
- Door Prizes (optional): are provided five times during the 12-week program and are related to the curriculum content. They are NOT provided to all participants in the intervention. These include items such as cutting board, colander, apple cutter, measuring cups, measuring spoons. The estimated budget is \$15 - \$20 per 12 week program.

**Training:** Training is dependent on the knowledge, skills and abilities of the facilitators. A comprehensive training and support system was designed to enhance the capacity of the facilitators in Illinois. All facilitators complete a needs assessment to identify their level of confidence in implementing key components of the lifestyle intervention. Facilitators attended a two-day training workshop that was tailored to the group's needs. Training included instruction on cardiovascular disease, nutrition, physical activity, strategies for influencing behavior change, and the specific materials and resources used in the lifestyle intervention. Facilitators were provided opportunities to practice small group and individual facilitation skills. In addition to the workshop, facilitators received ongoing technical support from the intervention developers. This included a secure online facilitators' website where facilitators participated in online discussions and problem solving.

#### **Other Costs:**

- Supplies for classes: approximately \$50 per site (depends on number of groups run each year). Supplies include flip chart pad, markers, cassette recorder and tapes (optional)
- Digital camera (optional): one for each site to take photos (with consent) for the follow-up postcards cost approximately \$100.00
- Three-inch three-ring binders for facilitator guides
- One-inch three-ring binders for participant guides

## **IMPLEMENTATION**

*NOTE: This section of the template provides a succinct outline of the basic steps to implement the intervention. For many interventions, a more detailed implementation protocol is also available, and provides a more thorough description of the implementation process. This section also may describe the methods of delivery and the dose and intensity that have been found to be effective in prior tests of the intervention. This does not rule out the possibility that other methods, doses, and intensity may be effective.*

#### **How It Works:**

The Illinois WW Lifestyle Intervention consists of twelve facilitated group sessions followed by over a year of mail and phone follow-up and face-to-face discussions. A facilitator guide with lesson plans and handouts is available. Women are enrolled in the lifestyle intervention following screening for cardiovascular risk factors through the WISEWOMAN Program.

### Facilitated Group Sessions

Twelve group sessions are conducted by a trained facilitator (nurse, health educator or physical education teacher). Sessions are sequential, targeting readiness to change lifestyle behaviors early in the program and progressing to behavioral processes in later sessions. Each session includes:

- a. A check-in, where participants share their successes and struggles and review weekly goals
- b. Shared discussion of a cognitive or behavioral process of behavior change (e.g. identifying benefits and barriers to change, setting good short-term and long-term goals, and self-monitoring of eating and physical activity behaviors), as well as a nutrition or physical activity topic
- c. An activity that allows participants to practice the new skill
- d. Handouts that reiterate the topics discussed during the session

### Follow-up Postcards

A series of fourteen tailored postcards are mailed to participants beginning after group session six of the group sessions and through the 24-month WISEWOMAN re-screening appointment. Postcards include a physical activity or healthy eating tip and a photograph of the group the woman participated in. The first postcard is sent after week six of the intervention so that the facilitator can check with participants to verify that the card was received, the mailing address is correct, and to familiarize the participant with the postcard format.

### Follow-up Phone Calls

Group facilitators contact participants by phone three times for follow-up. Calls are approximately 30 minutes in length and are scheduled at approximately 5, 7 and 12 months after the group sessions end. These check-ins are designed to provide support and motivation and to promote retention in the program for future visits.

### Face-to-face Coaching

Participants receive a 15 – 20 minute individual counseling session following the 12<sup>th</sup> group session and at the 12- and 24-month WISEWOMAN rescreening visits. These contacts are designed to reinforce the group principals, specific behavioral skills, and program outcomes.

Dose/Delivery: The intervention, as evaluated, includes twelve 90-minute facilitated group meetings; 14 follow-up mailings of postcards; three telephone check-in calls; and, three face-to-face discussions with an intervention facilitator.

### **Keys to Success:**

The following keys to success should be considered when adopting/adapting the Illinois WISEWOMAN Lifestyle Intervention:

- Commitment from women to fully participate in the intervention and attend all sessions. The bond formed between women in each group motivates them to attend sessions and support each other.
- Selection of interventionists who are effective facilitators, enthusiastic about and personally committed to healthy eating and active living habits, and passionate about helping others to improve their health and well-being.
- Training and ongoing support for the interventionists (group facilitators). The curriculum provides guidance and structure for each session, however, ongoing training and technical assistance on the intervention content and delivery are important.
- Sufficient space for group sessions and activities.
- Dedicated time for the facilitator to prepare each session in advance of the group.

- A local community group of stakeholders to assist with recruitment of women.
- A list of community resources available to support lifestyle behavior change.
- Conducting the intervention as evaluated with twelve, 90 minutes sessions.

### **Barriers to Implementation:**

The following potential barriers to implementation should be considered when adopting/adapting the Illinois WISEWOMAN Lifestyle Intervention:

- The time commitment on the part of the participant, makes it difficult to recruit and retain participants for 12 sessions.
- The complexity of fully implementing the intervention as it was designed and evaluated. This is a multi-component intervention and requires committed staff and motivated participants to fully implement each component.
- The resources required to implement the intervention as it was designed. This intervention requires considerable staff time to prepare and deliver the intervention, to monitor participant progress, and provide feedback to participants.

## **EVIDENCE REVIEW SUMMARY**

### **Underlying Theory/Logic:**

- Transtheoretical Model (Stages of change) – addresses participants' readiness to attempt change toward healthy behaviors
- Social Cognitive Theory (self-efficacy) – incremental steps/successes create confidence and belief in being able to change behavior

### **Evaluation Outcomes:**

At the time of review, complete data were available from two of four implementation cycles (352 women). After 24 months of participation:

- There was no difference in clinical outcomes between the control and intervention groups.
- There was a modest increase in reported fruit and vegetable consumption in the intervention group compared to the control group.
- There was reported improvement in modifying meats to be lower in fat among the intervention group compared to the control group and no difference in overall dietary fat intake.
- There was a modest increase in reported hours per week of physical activity in the intervention group compared to the control group.

Changes in outcomes were not stratified by number of sessions attended or type of follow-up provided. Therefore, the dose and intensity of exposure that produced the outcomes could not be determined. Additional data may help determine the number of sessions needed to produce these outcomes and also distinguish essential from less critical program components.

## **POTENTIAL PUBLIC HEALTH IMPACT**

This intervention has the potential for low to moderate public health impact based on its potential Reach, Effectiveness, Adoption, Implementation, and long-term Maintenance.

**Reach:** The Illinois WISEWOMAN Program delivers their lifestyle intervention to women in multiple community settings including worksites, health care settings, churches, and other community organizations. This is an excellent strategy for increasing the reach and acceptability of the intervention.

**Effectiveness:** This is a well designed intervention that is an adaptation of a research-tested intervention; uses evidence-based strategies and has a strong theoretical base and internal logic. There is direct evidence from program evaluation data that participation in the intervention results in modest improvements in a number of dietary behaviors and in hours per week of physical activity.

**Adoption:** This intervention has not been disseminated beyond Illinois so it is difficult to assess potential adoption. However, the resources required to adopt and fully implement the intervention as designed, may be beyond those generally available to public health care providers.

**Implementation:** The complexity of this intervention in its current format (12 group sessions with intensive mail, phone and face-to-face follow-up) makes it likely that considerable adaptation will be needed to increase the feasibility of implementation in many public health settings.

**Maintenance:** Long-term sustainability of the intervention may be compromised by the complexity and resources required to maintain it.

## INTERVENTION MATERIALS

*Reminder:* After the Center TRT completed the translation process in December 2007, the Illinois WISEWOMAN program revised its lifestyle intervention to incorporate results from its' June 2008 Facilitator Evaluation Report. Illinois WISEWOMAN consolidated the 12-week intervention, described below, to a 4-week intervention, resulting in a change in dose and intensity. The Illinois WISEWOMAN Program reports that the core elements remain intact. The newly revised manuals for the participant and interventionist/facilitator can be found in the Emerging Tools section of the website.

The materials used for this intervention include the Illinois WISEWOMAN Lifestyle Intervention Facilitator Guide, which contains details for each of the sessions and all of the participant handout materials for each session. The postcards were designed to be mailed to participants following completion of the sessions (starting after session six). Each postcard focuses on a targeted behavior change. The scripts are intended to guide conversations between facilitators and participants during the follow-up phase of the intervention. All materials may be downloaded from this site.

Materials for this intervention were last updated in 2003. Plans are in place to update curriculum materials in early 2008. Components to be updated include: MyPyramid, more specifics on decreasing saturated and trans fat, and the new Fruits and Veggies-More Matters campaign.

### Products

- Intervention Facilitator Guide which includes session plans (English)
- Intervention Facilitator Guide which includes session plans (Spanish)
- Participant handout materials for the group sessions (Spanish)
- Participant handout materials for the group sessions (English)
- Follow-up Intervention materials includes postcards and scripts for phone and individual coaching (English)

→ Follow-up Intervention materials includes postcards and scripts for phone and individual coaching (Spanish)

## TRAINING AND TECHNICAL ASSISTANCE

The information contained in this document provides an overview of this intervention and the evidence available to support it. If you would like to know more and/or want to explore possible adoption/adaptations of this intervention in your community, please contact:

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## ADDITIONAL INFORMATION

### Related Resources:

The Cooper Institute  
12330 Preston Road  
Dallas, TX 75230  
[www.cooperinstitute.org](http://www.cooperinstitute.org)

University of Illinois at Chicago  
Center for Research on Women and Gender  
1640 W. Roosevelt Rd  
Chicago, IL 60608  
[www.uic.edu/depts/crwg](http://www.uic.edu/depts/crwg)