



**FINAL REPORT TO**  
**NEW EDITIONS CONSULTING**  
**ON THE EVALUATION OF THE**  
***I CAN DO IT, YOU CAN DO IT***  
**HEALTH PROMOTION INTERVENTION**

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This project, including project design, protocols, instruments and recruiting materials used, was reviewed by the Human Research Review Committee (HRRC) of the Health Sciences Center of the University of New Mexico. The HRRC determined that the research project provides adequate safeguards for protecting the rights and welfare of subjects involved in the study and is in compliance with HHS regulations 45 CFR 46 and FDA regulations 21 CFR 50, 56. The HRRC Approval number is 06-001.

The forms used in the program, including registration forms, goal setting and monitoring worksheets and evaluation instruments, were also approved for use by the Office of Management and Budget. Copies of the OMB Approval are on file at the Office on Disability, U.S. Department of Health and Human Services.

## ■ FOR MORE INFORMATION

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## ■ BACKGROUND OF THE INTERVENTION

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Originally developed by the Office on Disability of the U.S. Department of Health and Human Services, the *I Can Do It, You Can Do It* health promotion intervention is targeted at youth with a wide range of physical and cognitive disabilities. The program uses a one-on-one mentoring approach that has been well-documented in the research literature as efficacious in changing the attitudes, knowledge and health behaviors of individuals with and without disabilities.<sup>1</sup> The program has three primary goals – to:

- Increase the awareness and knowledge among participants about the value of physical activity and good nutrition;
- Increase the knowledge of participating youth about types of physical activities available to them and how to make better nutritional choices; and
- Increase participants' physical activity and healthy eating choices.

This program, like other public health interventions designed to combat alarming increases in physical inactivity and poor nutrition among youth and adolescents with (and without) disabilities, is a potentially powerful tool within the wide range of actions called for in the May 2010 White House Task Force On Childhood Obesity Report To The President, *Solving The Problem Of Childhood Obesity Within A Generation*.

In collaboration with the American Association on Health and Disability of Rockville, Maryland, the Division of Disability and Health Policy at the University of New Mexico School of Medicine's Center for Development and Disability has been involved in two prior projects that both evaluated the intervention and made significant changes to the program design and content based on evaluation results. A detailed description of project activities and evaluation results for these two prior projects<sup>2</sup> may be found at

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<sup>1</sup> N. Wilson, S. Dasho, A. C. Martin, N. Wallerstein, C. C. Wang, and M. Minkler **Engaging Young Adolescents in Social Action Through Photovoice: The Youth Empowerment Strategies (YES!) Project** *The Journal of Early Adolescence*, May 1, 2007; 27(2): 241 - 261; Dubois, D. and Karcher, M., editors. *Handbook of Youth Mentoring*. Thousand Oaks, California: Sage Publications, 2005; Catalano, r., Berglund, M., Ryan, J., Lonczak, H., and Hawkins, J. Positive Youth Development in the United States: Research Findings on Evaluations of Positive Youth Development Program. *The ANNALS of the American Academy of Political and Social Science*, Vol. 591, No. 1, 98-124 (2004) Beier, S. R., Rosenfeld, W. D., Spitalny, K. C., Zansky, S. M., & Bontempo, A.N. (2000). The potential role of an adult mentor in influencing high-risk behaviors in adolescents. *Archive of Pediatric and Adolescent Medicine*, 154, 327-331; McLearn, K. T., Colasanto, D., Schoen, C., & Shapiro, M. Y. (1999). Mentoring matters: A national survey of adults mentoring young people. In J. B. Grossman (Ed.), *Contemporary issues in mentoring*. Retrieved from [http://www.ppv.org/ppv/publications/assets/37\\_publication.pdf](http://www.ppv.org/ppv/publications/assets/37_publication.pdf); Rhodes, J. E., Grossman, J. B., & Resch, N. L. (2000). Agents of change: Pathways through which mentoring relationships influence adolescents' academic adjustment. *Child Development*, 71, 1662-1671; Sipe, C. L. (1999). Mentoring adolescents: What have we learned? In J. B. Grossman (Ed.), *Contemporary issues in mentoring*. Retrieved April 8, 2002, from [http://www.ppv.org/ppv/publications/assets/37\\_publication.pdf](http://www.ppv.org/ppv/publications/assets/37_publication.pdf)

<sup>2</sup> *Final Report to the Office on Disability of the United States Department of Health and Human Services*

A **Pilot Study in 2005 and 2006** performed an initial impact and process evaluation of the version of the intervention developed earlier by Partners for Youth With Disabilities (PYD) of Boston. The pilot study revealed several significant issues with the intervention, including:

- unacceptably high non-response rates (an average of 27.7% for combined pre- and posttests, with some sections of the instruments having non-response rates ranging from 41.9% to 65.5% for posttest nutrition items) and counter-intuitive findings;
- overly complex and long evaluation instruments, which also required respondents to recall specific behaviors several weeks after the fact, including exact portion servings of numerous types of foods that they consumed;
- Significant challenges in coordination and technical assistance at participating agencies;
- A lack of fidelity to program design content and inclusion criteria for participants among performance sites, including inclusion of children as young as six years old as program participants. Since program materials, resources and evaluation instruments were normed at a 5.6 grade comprehension level, future participation was limited to individuals with this comprehension level and above.

Based on the results of the pilot study, AAHD and Division staff made multiple revisions to every aspect of the program, including:

- program materials and manuals for agencies and mentors;
- recruiting materials for participating agencies, participating youth and mentors;
- materials for use by participants including goal setting worksheets and other material; and
- evaluation instruments based on existing normed, validated instruments targeted at the domains of interest.

An on-line, turn-key project evaluation management system was also developed that allowed:

- participants to register and complete evaluation instruments on-line;
- coordinators at participating agencies to manage information about participating youth; and
- agency coordinators, mentors and participating youth to view or download program materials.

Using the redesigned program materials, evaluation instruments and on-line management system completed in the Pilot Study, **a randomized longitudinal control group study in 2006 and 2007**

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*and the Division of Nutrition Research Coordination National Institute of Child and Human Development National Institutes of Health on the Evaluation of the I Can Do It, You Can Do It Health Promotion Intervention.* Albuquerque, Center for Development and Disability, 2007.

assessed the impact of the intervention among 167 participating youth at six performance sites in eight states. The program had a weak-to-moderate impact on two areas - general health, including secondary conditions, and nutrition, but had no statistically discernable impact on physical activity of participants who completed the program. In sum, the randomized control group study could not conclude that the intervention was efficacious.

The report containing the results of the impact evaluation also made a number of recommendations for further revisions to program design, content and evaluation. These recommendations were not implemented by the Office on Disability before the start of the project described in this report.

*The longitudinal, randomized control group study of the intervention conducted by Division staff and AAHD in 2006 and 2007 could not confirm the overall efficacy of the intervention.*

In addition to these projects in which the Division collaborated closely with the American Association on Health and Disability, the Office on Disability also initiated additional implementations of the project in which the Division and AAHD were not involved. In 2008, the Office on Disability facilitated a partnership with the Foundations of the National Institute of Health and the National Institute for Child Health and Human Development. With funding provided to the Foundation from the CVS Foundation, the Program was implemented at Miami-Dade Public Schools, Slippery Rock University in Pennsylvania, and The Hudson Valley Cerebral Palsy Association in Patterson, New York. An additional three-year award was also made to Slippery Rock University for implementation and evaluation of the program.

Since these additional implementations of the project were outside the scope of the projects in which the Division and AAHD were involved, their status, including fidelity of these implementations to program requirements and evaluation of participants, are unknown.

## ■ NEW EDITIONS PROJECT: 2008 - 2010

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### ■ OVERVIEW OF THE EVALUATION

In 2008, the Office on Disability entered into a contract with New Editions Consulting, Inc., to implement an additional round of *I Can Do It, You Can Do It* at multiple sites across the country. New Editions in turn, entered into a Memorandum of Understanding with the Division of Disability and Health Policy to conduct an impact evaluation of the program.<sup>3</sup>

The project, originally scheduled to end in December, 2009, was extended to June, 2010 due to delays in securing approval from the Office of Management and Budget for use of the evaluation forms. Tasks for the Division under the Memorandum of Understanding with New Editions included:

- Preparing materials for the application to the University of New Mexico's Institutional Review Board (protection of human subjects) and receiving IRB approval;

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<sup>3</sup> New Editions entered into a separate contract with the American Association on Health and Disability to provide technical assistance to performance sites on program implementation.

- Preparing materials for the application to the Office of Management and Budget for OMB approval for use of the evaluation instruments;
- Participating in the development of the Request-For-Proposals materials and the evaluation process led by New Editions which would select the sites at which the intervention would be conducted;
- Maintaining the on-line evaluation system through which participating sites, participating youth and mentors could register, obtain program materials, and complete required program forms, including (for participants) a registration form as well as the pretest, first posttest and second posttest;
- Providing technical assistance regarding the evaluation system to performance sites; and
- Analyzing completed evaluations from performance sites and preparing a report on the efficacy of the intervention.

Through the competitive Request-For-Proposals process, contracts to implement the intervention were given to:

- The North Dakota Center for Persons with Disabilities at Minot State University;
- The Adapted Physical Activity Program, Department of Physical Education, Slippery Rock University; and
- The University of Montana Rural Institute.

The agreement between New Editions and these organizations called for each site to conduct two waves of the *I Can Do It* program, each with sixty participants in each wave, for a total of three hundred sixty participants – a number sufficiently large for analysis. Performance sites agreed to a wide range of tasks, including

Recruiting mentors and participating youth;

- Using materials provided by AAHD and the Division available on the program website, conducting training programs for mentors and conducting criminal background checks on all mentors;
- Facilitating the completion of required programs forms and instruments by participants, including registration forms, medical releases to participate in the program, and a pretest, a first posttest at the completion of the eight week program, and a second posttest eight months after the completion of the program;<sup>4</sup>
- Using tools provided by AAHD and the Division available on the program website, providing resources and assistance to mentors as they worked with the participating youth to whom they had been assigned; and

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<sup>4</sup> The period for the second posttest was subsequently shortened to six months due to difficulties encountered by performance sites in recruiting and maintaining contact with sufficient numbers of participating youth.

- Working with AAHD and Division staff to manage the progress of participating youth through the program.

There was no control group in this implementation.

## ■ THE EVALUATION INSTRUMENT

The instrument that was used for the evaluation was the one developed during the 2006 – 2007 longitudinal randomized control group study, also funded by the Office on Disability. Using normed and validated items from the Behavioral Risk Factor Surveillance System (BRFSS), the National Health Interview Survey and other instruments, the instrument contained thirty three core items, some with sub-items, divided into five categories (see Attachment A for a copy of the instrument).

- **General:** three items asked respondents why they joined the program and if they had assistance in completing the instruments.
- **Physical Activity:** eight core items asked respondents about their levels of physical activity, sedentary activities such as watching television, involvement in sports and attitudes towards physical activity.
- **Nutritional and Eating Habits:** ten core items asked respondents about their nutritional habits across multiple types of foods and their attitudes about their weight.
- **Health Care and General Physical Health, Including Independence and Secondary Conditions:** eight core items asked respondents about frequency of visits to a primary health care provider and reasons for those visits, weight and height, and attitudes about their general health status. Two core items asked respondents about their level of independence in daily functional tasks and the extent to which twelve secondary conditions were impediments to independence. Two items asked about their tobacco-smoking habits.
- **Social Health:** four core items asked respondents about their general socio-emotional health status.

There were forty one impact items contained on the instrument – that is, forty one items measured the impact of the program on the physical activity, nutritional and eating habits, general health and social health.

## ■ SITE PERFORMANCE AND EVALUATION-RELATED TECHNICAL ASSISTANCE

Together, the three performance sites yielded fifty one participants who completed the first post-test and thirty two who completed the second posttest; a far smaller number than originally planned for and considerably less than the number required for meaningful statistical analysis (see Table Two). Data from seventeen participants under the age of ten from one performance site, Slippery Rock University, were removed from the analysis file. As discussed above, the program materials and evaluation instruments have a reading and comprehension level of approximately 5.6 grade level, making the results from these participants unreliable. Even with these seventeen participants, however, the usable numbers remain far below what is needed for all but the most basic analysis. Agency coordinators gave a variety of reasons for the difficulty in recruiting participants, including:



- A number of participants are on some form of medical assistance program which limits the number of visits to health care providers, making a visit to a provider for the medical release difficult or impossible.
- It proved more difficult than expected in some cases to get parents to complete forms and/or give permission for their child to participate in the program.
- The design and content of the program are complex and overly time-consuming.
- There were difficulties in completing background checks for mentors given the limited time available for agency coordinators.
- Sites had difficulty in recruiting, given the small size of the communities in which they were located.

An additional difficulty for the Minot site was that delays in program implementation and staff turnover resulted in a delay in implementing the second wave. Some participants who had completed the program but had not yet taken the second posttest had to be excluded from the study given the project termination date and deadline for the final report.

Division staff provided three hundred and seven hours of evaluation-related technical assistance to performance sites during the project period (see Table One).

**Table One**  
**Summary of Hours of Evaluation-Related Technical Assistance**  
**Provided By Quarter, January, 2008 – June 15<sup>th</sup>, 2010**

Quarter	Hours of TA Provided
January 1 – March 31 <sup>st</sup> , 2008	7
April 1 – June 30 <sup>th</sup> , 2008	8
July 1 – September 30 <sup>th</sup> , 2008	46
October – December 31 <sup>st</sup> , 2008	100
January 1 – March 31 <sup>st</sup> , 2009	63
April 1 – June 30 <sup>th</sup> , 2009	16
July 1 – September 30 <sup>th</sup> , 2009	5
October 1 – December 31 <sup>st</sup> , 2009	32
January 1 – March 31 <sup>st</sup> , 2010	21
April 1 – June 15 <sup>th</sup> , 2010	9
<b>Total</b>	<b>307</b>

Table Two

Completion Rates At Performance Sites For Participants Aged Ten and Older,  
*I Can Do It, You Can Do It*, New Editions Implementation,  
 Waves One and Two Combined

Performance Site	Goal	Completed Registration	Completed Pretest	Completed First Posttest	Completed Second Posttest	% Completion – Registered to Second Posttest	% Completion – Goal to Completed Second Posttest
Minot State University	120	15	15	15	4*	26%	.03%
Slippery Rock University	120	31	18	16	11	35%	9.2%
University of Montana	120	33	29	20	17	51.5%	14%
<b>TOTALS:</b>	<b>360</b>	<b>79</b>	<b>62</b>	<b>51</b>	<b>32</b>	<b>40.5%</b>	<b>8.8%</b>

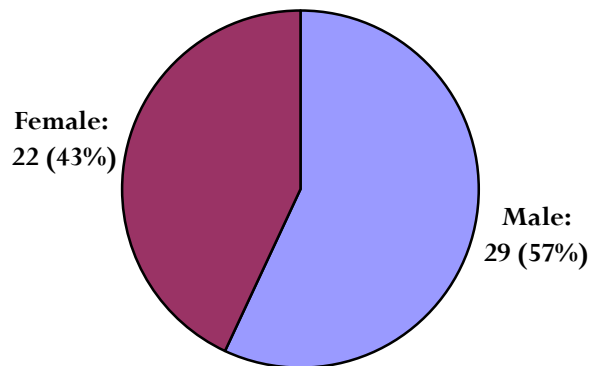
\*: The Minot State site had seven additional participating youth who had completed the program and could have potentially completed the second posttest. However, due to reporting deadlines, the data collection period had to be closed before the six month time period had elapsed for these participants.

## ■ ANALYSIS AND FINDINGS

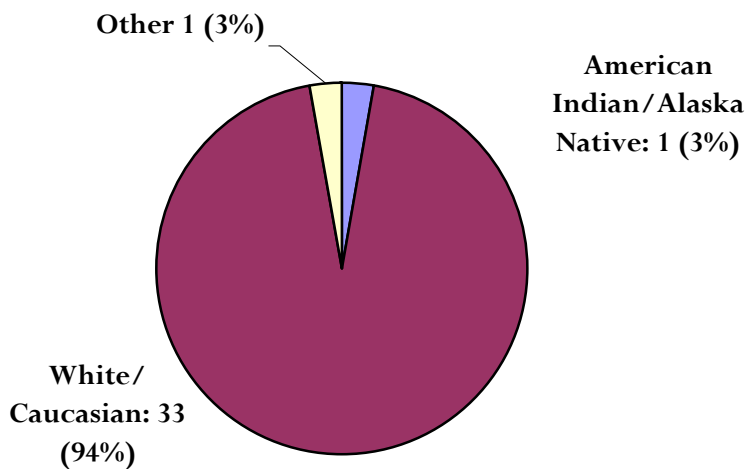
### *DEMOGRAPHIC CHARACTERISTICS OF PARTICIPANTS*

- 57% of the fifty one participants were male, while 43% were female (Figure One).
- The overwhelming majority of participants identified themselves as White or Caucasian (Figure Two).
- 45% of families of participants included an individual who had completed an undergraduate degree program (Figure Three).

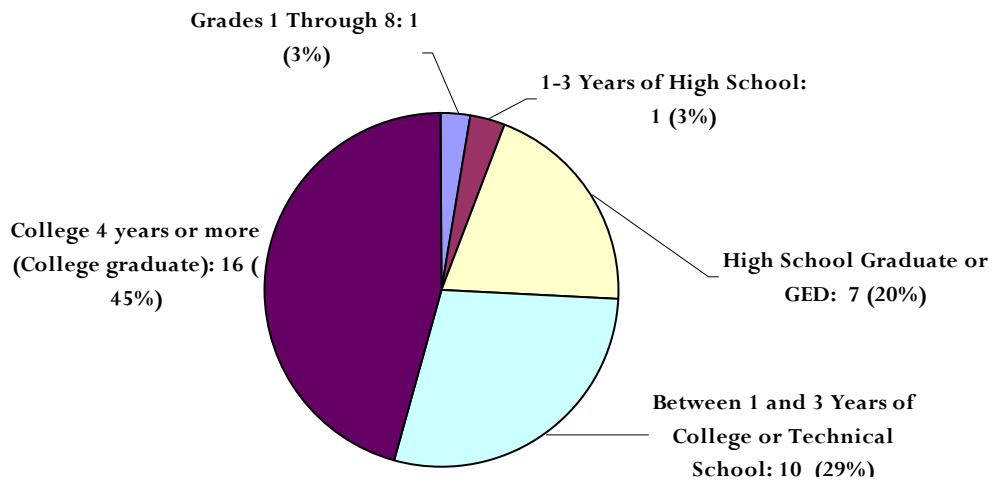
**Figure One**  
**Gender Of Participants Completing The First Posttest**  
N=51



**Figure Two**  
**Racial Identity of Participants Completing The First Posttest**  
N=35

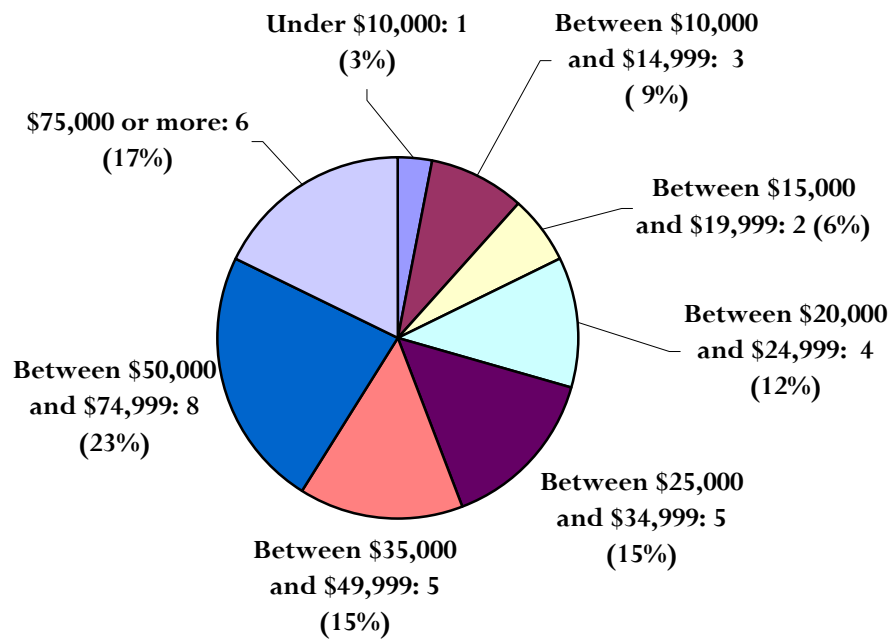


**Figure Three**  
**Educational Attainment of Parents or Guardians of**  
**Participants Completing The First Posttest**  
**N=35**



- The mean income from all sources of participants’ families was between \$35,000 and \$99,999. See Figure Four for a distribution of family incomes.

**Figure Four**  
**Household Income of Participants From All Sources**  
**N=34**



- Four participants (11%) described themselves as Hispanic, while the remaining 32 (89%) who responded to this question did not.

## *ANALYTIC METHODS*

The small number of participants who completed the first and second posttests significantly limited the types and sophistication of analysis that could be performed. Small-sample, two-tailed t-tests were conducted to determine whether changes in impact variables from the pretest to the first and second posttest were statistically significant. Two analyses were performed: one for the pretest – first posttest and a second for the pretest – second posttest.

Statistical significance in this case means the probability of an observed difference not being due to chance - in effect, whether it is a "real" difference or not. It speaks to the level of certainty that a true difference not due to chance exists. A two-tailed test of significance simply looks for any difference and does not presume or hypothesize the direction of the difference (e.g., that the experimental group will move in a predicted direction).

Two sets of tests were conducted - one between the pretest and first posttest and a second between the pretest and second posttest, which occurred six to eight weeks after the conclusion of the intervention for the treatment group. Analyses were conducted at the 95% confidence interval; simply meaning that we are 95% confident that the interval contains the true difference between the two (pretest - first posttest and pretest - second posttest) means.

## *FINDINGS*

Based on the results of the paired sample t-tests, there is little evidence that the *I Can Do It, You Can Do It* program is efficacious in its current form. Based both on the relatively small number of statistically significant findings as a proportion of the total items tested by the survey instrument, as well as the weak-to-moderate levels of statistical significance, the program appears to have made little difference in levels of physical activity, nutritional health, general health or socio-emotional health of participants. This confirms the results of the 2006 – 2007 randomized control group study.

*Based on the findings reported here, the I Can Do It Program appears to have made little difference in levels of physical activity, nutritional health, general health or socio-emotional health of participants, confirming the findings of the 2006 – 2007 randomized control group study of the program.*

Table Three below summarizes statistically significant and non-significant impact indicators, while tables Four and Five contain detailed information on statistically significant impact indicators in the areas of physical activity and general health.

Seven of the forty one impact indicators showed a statistically significant change from the pretest to either the first or second posttest indicating that the intervention may have had an impact in some behaviors of participants. It should be noted, however, that the small-sample t-tests performed here indicate only that the difference in the significant findings was not due to chance; they do not present evidence that it was the program that caused the changes observed. Other tests, such as odds ratios, would need to be performed to explore that hypothesis.

### Physical Activity

- In response to the question “During the past 7 days, on how many days were you physically active for a total of at least 30 minutes per day?,” participants reported increasing the number of days in which they were physically active for at least thirty minutes per day from 4.6 days to 5.38 days from the pretest to the first posttest (N=50) and 4.42 days to 5.1 days from the pretest to the second posttest (N=31).
- In response to the question “During the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day?,” participants reported increasing the number of days on which they were physically active for at least sixty minutes per day from 3.1 to 3.75 days from the pretest to the first posttest (N=51).

### General Health

- Participants reported being slightly less happy with their weight from the pretest to the first posttest.
- In response to the question “During the past 30 days, how often have you felt worn out and tired?,” participants reported a slight decrease in the number of days they felt “worn out and tired.”
- In a counter-intuitive finding, participants reported feeling slightly less independent in two activities of daily living – taking care of their washing and dressing needs and taking their medication – after completing the program.

**Table Three**  
**Non-Statistically Significant Impact Indicators for the New Editions Implementation of the**  
***I Can Do It* Study**

(✓ represent statistically significant differences from the pretest at the .05 level of significance)

Variable #	Item	Pre- 1 <sup>st</sup> Post	Pre-2 <sup>nd</sup> Post
3	How much do you enjoy physical activity?		
4	During the past 7 days, on how many days were you physically active for a total of at least 30 minutes per day?	✓	✓
5	During the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day?	✓	
6	On an average school day, how many hours do you watch TV?		
7	On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, PlayStation, Xbox, computer games, and the Internet.)		
8a	Are you currently enrolled in a physical education (PE) class?		
8b	In an average week when you are in school, on how many days do you do physical education (PE) classes?		

**Table Three, Continued**

9	During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.)	✓	
10	During the past 7 days, how many times did you drink 100% fruit juices such as orange juice, apple juice, or grape juice? (Do not count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)		
11	During the past 7 days, how many times did you eat fruit? (Do not count fruit juice.)		
12	During the past 7 days, how many times did you eat green salad?		
13	During the past 7 days, how many times did you eat potatoes such as mashed potatoes, boiled potatoes, etc.? (Do not count French fries, fried potatoes, or potato chips.)		
14	During the past 7 days, how many times did you eat carrots?		
15	During the past 7 days, how many times did you eat other vegetables? (Do not count green salad, potatoes, or carrots.)		
16	During the past 7 days, how many times did you drink a can, bottle, or glass of regular (not diet) soda or pop, such as Coke, Pepsi, or Sprite?		
17	During the past 7 days, how many glasses of milk did you drink? (Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)		
18	Are you happy with your weight?	✓	
20	In the last 30 days, how many times did you visit a primary health care provider (e.g. your regular doctor's office or other regular health care provider)?		
20	In the last 30 days, how many times did you visit a primary health care provider (e.g. your regular doctor's office or other regular health care provider)?. Other		
20a	How many of these visits were for regular or routine annual checkups?		
20b	How many of these visits were for specific problems you were having?		
23	In general, which of the following choices best describes your health?		
24	During the past 30 days, how often have you felt active and full of energy?		
25	During the past 30 days, how often have you felt worn out and tired?	✓	
26	Can you take care of your basic needs the areas of washing, dressing, taking medications, and toileting?		
26	How much assistance do you need with your basic bathing/washing needs?	✓	
26	How much assistance do you need with basic dressing needs?		
26	How much assistance do you need with basic toileting needs?		
26	How much assistance do you need with taking medications?	✓	
26	How much do contractures limit your activity and independence?		
26	How much do circulatory problems limit your activity and independence?		
26	How much do joint and muscle pain limit your activity and independence?		
26	How much do sleep problems/disturbances limit your activity and independence?		

**Table Three, Continued**

28	Which of the following statements most closely matches how you feel: I am a very happy person Mostly I am happy, but there are a few things I wish were different I'm neither happy nor unhappy - most of the time I feel just okay Some things about my life are good, but there is a lot I wish was different Mostly I am unhappy and dissatisfied with my life		
29	During the past 30 days, how often have you felt so sad and down in the dumps that nothing could cheer you up?		
30	How satisfied are you with your friendships and social life?		
31	Have you ever had counseling or been treated by a mental health professional?		
32	Have you ever smoked cigarettes?		
32a	Do you now smoke cigarettes?		
32b	How often do you smoke?		
32c	How many cigarettes do you smoke per day on each of the days that you smoke?		



**Table Four**  
**Statistically Significant Physical Health and Activity Indicators For the *I Can Do It* Study**

*Note: Statistically significant probabilities are bolded in green. Items with a single \* are significant at the 95% confidence level.*

<b>Item One:</b>									
During the past 7 days, on how many days were you physically active for a total of at least 30 minutes per day? (Physically active means engaging in activity that increases your heart rate and makes you breathe hard some of the time.) Where 1=0 days; 2=1 day; 3=2 days; etc.									
<b>N - Pre- 1<sup>st</sup> Post</b>	<b>Pre Mean</b>	<b>1st Post Mean</b>	<b>Change Pre - Post</b>	<b>Sig (2-tailed)</b>	<b>N - Pre- 2<sup>st</sup> Post</b>	<b>Pre-Mean</b>	<b>Second Post Mean</b>	<b>Change Pre - 2<sup>nd</sup> Post</b>	<b>Sig (2-tailed)</b>
50	4.60	5.38	-.780	<b>.010*</b>	31	4.42	5.10	-.677	<b>.048*</b>
<b>Item Two:</b>									
During the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day? (Physically active means engaging in activity that increases your heart rate and makes you breathe hard some of the time.) Where 1=0 days; 2=1 day; 3=2 days; etc.									
<b>N - Pre- 1<sup>st</sup> Post</b>	<b>Pre Mean</b>	<b>1st Post Mean</b>	<b>Change Pre - Post</b>	<b>Sig (2-tailed)</b>	<b>N - Pre- 2<sup>st</sup> Post</b>	<b>Pre-Mean</b>	<b>Second Post Mean</b>	<b>Change Pre - 2<sup>nd</sup> Post</b>	<b>Sig (2-tailed)</b>
51	3.10	3.75	-.647	<b>0.50*</b>					
<b>Item Three:</b>									
During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.) Where 1=None; 2= 1 team; 3=2 teams; and 4=3 or more teams									
<b>N - Pre- 1<sup>st</sup> Post</b>	<b>Pre Mean</b>	<b>1st Post Mean</b>	<b>Change Pre - Post</b>	<b>Sig (2-tailed)</b>	<b>N - Pre- 2<sup>st</sup> Post</b>	<b>Pre-Mean</b>	<b>Sec-ond Post Mean</b>	<b>Change Pre - 2<sup>nd</sup> Post</b>	<b>Sig (2-tailed)</b>
					31	1.87	2.13	-.258	<b>.018*</b>

**Table Five**  
**Statistically Significant General Health Indicators For the *I Can Do It* Study**

*Note: Statistically significant probabilities are bolded in green. Items with a single \* are significant at the 95% confidence level.*

<b>Item Four:</b>									
Are you happy with your weight? Where 1=Yes and 2=No									
<b>N - Pre- 1<sup>st</sup> Post</b>	<b>Pre Mean</b>	<b>1st Post Mean</b>	<b>Change Pre - Post</b>	<b>Sig (2-tailed)</b>	<b>N - Pre- 2<sup>st</sup> Post</b>	<b>Pre-Mean</b>	<b>Second Post Mean</b>	<b>Change Pre - 2<sup>nd</sup> Post</b>	<b>Sig (2-tailed)</b>
49	1.57	1.37	.204	<b>.001*</b>					
<b>Item Five:</b>									
During the past 30 days, how often have you felt worn out and tired? Where 1=None of the time; 2= A little of the time; 3=Some of the time; and 4=Most of the time									
<b>N - Pre- 1<sup>st</sup> Post</b>	<b>Pre Mean</b>	<b>1st Post Mean</b>	<b>Change Pre - Post</b>	<b>Sig (2-tailed)</b>	<b>N - Pre- 2<sup>st</sup> Post</b>	<b>Pre-Mean</b>	<b>Second Post Mean</b>	<b>Change Pre - 2<sup>nd</sup> Post</b>	<b>Sig (2-tailed)</b>
50	2.48	2.24	.240	<b>.044*</b>	32	2.44	2.16	.281	<b>.048*</b>
<b>Item Six:</b>									
How much assistance do you need for your basic dressing needs? Where 1=I am independent; 2= I need partial assistance; and 3= I need full assistance									
<b>N - Pre- 1<sup>st</sup> Post</b>	<b>Pre Mean</b>	<b>1st Post Mean</b>	<b>Change Pre - Post</b>	<b>Sig (2-tailed)</b>	<b>N - Pre- 2<sup>st</sup> Post</b>	<b>Pre-Mean</b>	<b>Second Post Mean</b>	<b>Change Pre - 2<sup>nd</sup> Post</b>	<b>Sig (2-tailed)</b>
19	1.42	1.63	-.211	<b>0.42*</b>					

Table Five, Continued

<b>Item Seven:</b>									
How much assistance do you need for taking your medications? Where 1=I am independent; 2= I need partial assistance; and 3= I need full assistance									
<b>N - Pre- 1<sup>st</sup> Post</b>	<b>Pre Mean</b>	<b>1st Post Mean</b>	<b>Change Pre - Post</b>	<b>Sig (2-tailed)</b>	<b>N - Pre- 2<sup>st</sup> Post</b>	<b>Pre-Mean</b>	<b>Second Post Mean</b>	<b>Change Pre - 2<sup>nd</sup> Post</b>	<b>Sig (2-tailed)</b>
18	2.33	2.78	-.444	.016*					

## ■ CONCLUSION: RECOMMENDATIONS REGARDING *THE I CAN DO IT* HEALTH PROMOTION INTERVENTION

Neither this project or the 2006 – 2007 randomized control group study demonstrated that the *I Can Do It* program is efficacious. The program in its current form is untenable as an on-going intervention. Like many other health promotion interventions, it is resource-intensive in terms of the support needed for performance sites, the amount of coordination needed on the part of agency coordinators and mentors and the extensive programmatic support needed. In the absence of evidence that the program has a broad-based impact on the physical and nutritional behaviors of participants, it is unclear why additional resources should be devoted to the program at this time.

However, both studies showed that the program does have some limited positive effect on a limited number of positive health activities and the general health of participants. The question becomes: with revisions, could the program be improved to become more effective? This question takes on significance beyond the program itself given the increasing attention that is being given on the federal level to the deteriorating physical and nutritional health of youth and adolescents, particularly those with disabilities, briefly referenced in the Introduction of this report.

The New Editions Implementation of the *I Can Do It* Program did not include a formal process evaluation. However, the input received from agency coordinators during the monthly technical assistance calls during this project mirrored many of the observations and recommendations received from agency coordinators during the 2006 – 2007 randomized control group study.

Based on these observations across both studies, the following four recommendations are offered.

### *RECOMMENDATION ONE*

Further resources should not be devoted to the *I Can Do It, You Can Do It* Program until (a) significant revisions are made to the design and evaluation of the program (see Recommendation Two) and (b) a more structured, integrated system of program administration and evaluation is put in place to ensure fidelity to program goals and design as well as consistency across implementation sites (see Recommendation Three).

### *RECOMMENDATION TWO*

Three areas within the program are in need of significant revisions.

- **More resources for mentors to use with participants:** While the program web site contains a manual for mentors with suggestions and resources as well as a mentor training program, more resources are needed to use with participants in the areas of physical activity and nutrition. These resources should be based on existing models of behavior change theory in the areas of motivation, role

*In light of the lack of efficacy as well as the resource-intensive nature of the program, I Can Do It in its current form is untenable as an on-going intervention. The question becomes: with revisions, could the program be improved to become more effective? Until and if such revisions are made, we recommend that additional resources not be devoted to the program.*

modeling and group dynamics. A more robust set of activities, information and resources that link to program goals could potentially result in greater positive impacts. These resources exist in numerous sites of public, private and non-profit organizations and could easily be adapted for use in this program.

- **Greater parental involvement:** increased participation by parents and/or other family members could result in positive impacts on participants. In the 2006 – 2007 randomized control group study, both agency coordinators and mentors were clear that not having a role for parents in the program was a significant impediment to educating and motivating participants. While the level of parent involvement would of course vary, having materials for parents about the program, a section in both the agency coordinator and mentor manuals concerning the importance of parental involvement as well as tips and techniques for involving parents as supports would significantly improve the program.
- **Incorporating group activities:** the one-on-one mentor – participant nature of the program presents a serious resource issue. In addition, limiting interaction to one mentor and one participant ignores the value that can be added by social and group interaction among participants trying to achieve the same set of goals. The program should be redesigned to incorporate group interaction, with the one-on-one relationship between the mentor and the participant used as a secondary, supporting activity.

### *RECOMMENDATION THREE*

In its commitment to “prime the pump” and get the *I Can Do It* Program established, the Office on Disability used a variety of largely uncoordinated funding and dissemination mechanisms to implement the program across the country. The difficulty with this approach is that it runs the risk of implementing programs that have little fidelity to program goals and design, and makes a systematic, large-scale evaluation of the program impossible. More structure and central coordination among implementation sites is needed if the program is to be continued.

### *RECOMMENDATION FOUR*

The evaluation instruments developed for the 2006 – 2007 randomized control group study and used in the New Editions project were designed within a context of a research project which had as its goal assessing the efficacy of the program. Such tools would be needed again, if a redesigned *I Can Do It* program is implemented at some point in the future. However, consideration should be given to assessing the instruments to identify items that can be removed while still producing valid, reliable information about the impact of the program. For example, one of the secondary conditions listed, anemia, is a diagnosed condition that many participants might not be able to self-identify. In the same vein, "access," another secondary condition listed, is not something that is likely to be affected by the intervention.

■ ATTACHMENT A: EVALUATION INSTRUMENT

# PARTICIPANT PRE-ASSESSMENT SURVEY



## *I CAN DO IT, YOU CAN DO IT!*

***Instructions:***

*The following questions will help us understand our program participants better and help us improve our programs. We're not asking for any names, and all of the information will be kept strictly confidential. You can fill out the forms by yourself or with the help of a parent/guardian or another adult family member (not a mentor or agency representative). Adults who are helping should make every effort to have you give your own answers to questions.*

***Thank you for your help!***

Date:

Username:

Password:

**SECTION ONE**  
**GENERAL INFORMATION**

**1. Are you completing this survey with help from someone else?**

- Yes (please answer question 1A)
- No (please go to question 2)

**1a. Who is helping you fill out this survey?**

- Parent or guardian
- Family member other than parent or guardian
- Agency coordinator
- Other (please specify): \_\_\_\_\_

**2. Why did you join this program?**

- I enjoy being physically active
- I need to be more physically active
- I enjoy eating healthy foods
- I need to eat more healthy foods
- Other people encouraged me to join
- Other (please specify): \_\_\_\_\_

**SECTION TWO**  
**YOUR PHYSICAL ACTIVITY**

**3. How much do you enjoy physical activity?**

- I love it!
- I like it.
- It is okay, I neither like nor dislike it.
- I dislike it most of the time.
- I really dislike it.

**4. During the past 7 days, on how many days were you physically active for a total of **at least 30 minutes per day**? (Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.)**

- 0 days
- 1 day
- 2 days
- 3 days
- 4 days
- 5 days
- 6 days
- 7 days



5. During the past 7 days, on how many days were you physically active for a total of **at least 60 minutes per day**? (Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.)
- 0 days
  - 1 day
  - 2 days
  - 3 days
  - 4 days
  - 5 days
  - 6 days
  - 7 days
6. On an average school day, how many hours do you **watch TV**?
- I do not watch TV on an average school day
  - Less than 1 hour per day
  - 1 hour per day
  - 2 hours per day
  - 3 hours per day
  - 4 hours per day
  - 5 or more hours per day
7. On an average school day, how many hours do you **play video or computer games or use a computer for something that is not school work**? (Include activities such as Nintendo, Game Boy, PlayStation, Xbox, computer games, and the Internet.)
- I do not play video or computer games or use a computer for something that is not school work
  - Less than 1 hour per day
  - 1 hour per day
  - 2 hours per day
  - 3 hours per day
  - 4 hours per day
  - 5 or more hours per day
8. Does your school offer physical education (PE) classes?
- Yes
  - No
9. Are you currently enrolled in a physical education (PE) class?
- Yes
  - No
- 9A. If Yes for #9:** In an average week you are in school, on how many days do you do physical education (PE) classes?
- 0 days
  - 1 day
  - 2 days
  - 3 days
  - 4 days
  - 5 days
10. During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.)
- 0 teams
  - 1 team
  - 2 teams
  - 3 or more teams

## SECTION THREE

### YOUR EATING HABITS

The next 8 questions ask about food you ate or drank during the past 7 days.

Think about all the meals and snacks you had from the time you got up until you went to bed. Be sure to include food you ate at home, at school, at restaurants, or anywhere else.

11. During the past 7 days, how many times did you drink **100% fruit juices** such as orange juice, apple juice, or grape juice? (Do **not** count punch, Kool-Aid, sports drinks, or other fruit-flavored drinks.)

- I did not drink 100% fruit juice during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

12. During the past 7 days, how many times did you eat **fruit**? (Do **not** count fruit juice.)

- I did not eat fruit during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

13. During the past 7 days, how many times did you eat **green salad**?

- I did not eat green salad during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

14. During the past 7 days, how many times did you eat **potatoes**? (Do **not** count French fries, fried potatoes, or potato chips.)

- I did not eat potatoes during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

15. During the past 7 days, how many times did you eat **carrots**?

- I did not eat carrots during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

16. During the past 7 days, how many times did you eat **other vegetables**? (Do **not** count green salad, potatoes, or carrots.)

- I did not eat other vegetables during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

17. During the past 7 days, how many times did you drink a can, bottle, or glass of **soda or pop**, such as Coke, Pepsi, or Sprite? (Do **not** include diet soda or diet pop.)

- I did not drink soda or pop during the past 7 days
- 1 to 3 times during the past 7 days
- 4 to 6 times during the past 7 days
- 1 time per day
- 2 times per day
- 3 times per day
- 4 or more times per day

18. During the past 7 days, how many **glasses of milk** did you drink? (Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)

- I did not drink milk during the past 7 days
- 1 to 3 glasses during the past 7 days
- 4 to 6 glasses during the past 7 days
- 1 glass per day
- 2 glasses per day
- 3 glasses per day
- 4 or more glasses per day

19. Are you happy with your weight?

- Yes                       No

20. Which of the following are you trying to do about your weight?

- Lose weight
- Gain weight
- Stay the same weight
- I am not trying to do anything about my weight

**SECTION FOUR**  
**HEALTH CARE YOU'VE RECEIVED**

**21.** In the last 30 days, how many times did you **visit a primary health care provider** (e.g., your regular doctor's office or other regular health care provider)?

- 0 times
- 1 to 2 times
- 3 to 5 times
- 6 to 10 times
- 11 to 15 times
- 16 to 20 times
- 21 to 25 times
- More than 25 times

**21a.** If 1 or more times, how many visits were for regular or routine annual check ups?

- 0 times
- 1 to 2 times
- 3 to 5 times
- 6 to 10 times
- 11 to 15 times
- 16 to 20 times
- 21 to 25 times
- More than 25 times

**21b.** If 1 or more times, how many of these visits were for specific problems you were having?

- 0 times
- 1 to 2 times
- 3 to 5 times
- 6 to 10 times
- 11 to 15 times
- 16 to 20 times
- 21 to 25 times
- More than 25 times

**SECTION FIVE**  
**YOUR GENERAL HEALTH**

**22.** About how much do you **weigh without shoes on?**    •    \_\_\_\_\_ pounds

**23.** About how **tall are you without shoes on?**    •    \_\_\_\_\_ feet \_\_\_\_\_ inches

**24.** In general, which of the following choices **best describes your health?**

- Excellent
- Very Good
- Good
- Fair
- Poor

25. During the **past 30 days**, how often have you **felt active and full of energy**?

- Most of the time
- About half the time
- Some of the time
- A little of the time
- None of the time

26. During the **past 30 days**, how often have you **felt worn out and tired**?

- Most of the time
- About half the time
- Some of the time
- A little of the time
- None of the time

## SECTION SIX

### YOUR ACTIVITY AND INDEPENDENCE

27. Can you take care of all of your **basic needs such as washing, dressing, taking medications, and toileting**?

- Yes
- No

27a. If No, there are 4 types of personal care listed below, please check how much assistance you need:

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	I am independent	I need partial assistance	I need full assistance
Basic bathing/washing needs			
Basic dressing needs			
Basic toilet needs			
Taking medications			

28. Please tell us how much each of the following conditions has affected your activity and independence in the last 30 days. If you have not experienced a condition in the last 30 days, please check “None, Rarely, Never”.

**Condition: Injuries due to loss of sensation**

**Description:** People who have a disability that causes them to not feel in their arms or legs (for example, spinal cord injury or Multiple Sclerosis) get injuries because they can't feel pain. Getting burned from a hot pan or from sitting too close to a fire or getting frostbite are examples of injuries due to loss of sensation.

**How Much Does This Condition Limit Your Activity and Independence?**

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week

**Condition: Contractures**

**Description:** A contracture is when you can't fully move a joint like your elbow or hip. This condition is usually painful.

**How Much Does This Condition Limit Your Activity and Independence?**

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week

**Condition: Arthritis**

**Description:** You can get arthritis when a joint is inflamed. Pain and swelling around the joint usually happens with this condition.

**How Much Does This Condition Limit Your Activity and Independence?**

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week

**Condition: Fatigue**

**Description:** Fatigue is a tired feeling after physical or mental activity.

**How Much Does This Condition Limit Your Activity and Independence?**

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week

Condition: Eating or Weight Problems

**Description:** Over-eating, under-eating, vomiting food, unwanted weight gain or weight loss are all examples of this condition.

**How Much Does This Condition Limit Your Activity and Independence?**

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week

Condition: Circulatory Problems

**Description:** This condition includes swelling of veins, feet, or having blood clots.

**How Much Does This Condition Limit Your Activity and Independence?**

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week

Condition: Joint and Muscle Pain

**Description:** People who have a disability that causes them to have trouble moving may get muscle or joint pain.

**How Much Does This Condition Limit Your Activity and Independence?**

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week

Condition: Isolation

**Description:** Isolation is feeling alone or lonely. Not having regular visits with friends or family may cause this condition.

**How Much Does This Condition Limit Your Activity and Independence?**

--	--	--	--

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week

**Condition: Access Problems**

**Description:** Access problems are when a person has trouble getting to a place or doing an activity. One example is not being able to use a sidewalk if there are no curb cuts. Not having a ride to where you want to go is also an access problem.

**How Much Does This Condition Limit Your Activity and Independence?**

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week

**Condition: Equipment Failures**

**Description:** Equipment failures, such as a broken walker or brace, can make it harder to go places you want to go or do things you want to do.

**How Much Does This Condition Limit Your Activity and Independence?**

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week

**Condition: Anemia**

**Description:** Anemia is a low level of iron in the blood and often happens with pressure sores. You might feel low in energy or fatigued. A doctor usually tells you if you have this condition.

**How Much Does This Condition Limit Your Activity and Independence?**

Rarely or Never Limits Me	Limits me 1-5 hours per week	Limits me 6-10 hours per week	Limits me 11 or more hours per week



**Condition: Sleep Problems/Disturbances**

**Description:** Difficulty falling asleep or staying asleep, difficulty staying awake during the day, or waking up too early are all sleep disturbances.

**How Much Does This Condition Limit Your Activity and Independence?**

<b>Rarely or Never Limits Me</b>	<b>Limits me 1-5 hours per week</b>	<b>Limits me 6-10 hours per week</b>	<b>Limits me 11 or more hours per week</b>

**SECTION SEVEN**  
**YOUR SOCIAL HEALTH**

**29.** Have you ever had **counseling or been treated by a mental health professional?**

- Yes
- No

**30.** Which of the following statements **most closely matches how you feel?**

- I am a very happy person
- Mostly I am happy, but there are a few things I wish were different
- I'm neither happy nor unhappy—most of the time I feel just okay
- Some things about my life are good, but there is a lot I wish was different
- Mostly I am unhappy and dissatisfied with my life

**31.** During the **past 30 days**, how often have you **felt so sad and down in the dumps that nothing could cheer you up?**

- Most of the time
- About half the time
- Some of the time
- A little of the time
- None of the time

**32.** How satisfied are you with your **friendships and social life?**

- I'm very satisfied
- I'm somewhat satisfied
- They are just okay
- I'm somewhat dissatisfied
- I'm very dissatisfied

**SECTION SEVEN**  
**YOUR LIFESTYLE BEHAVIOR**

**33. Have you ever smoked cigarettes?**

- Yes *(Please answer questions 31A)*
- No

**33a. Do you now smoke cigarettes?**

- Yes
- No

**33b. If yes, how often do you smoke?**

- Every day
- Most days
- About every other day
- About once per week
- About once per month or less often

**33c. If yes, how many cigarettes do you smoke per day on each of the days that you smoke?**

- 1 to 5
- 6 to 10
- 11 to 15
- 16 to 20
- More than 20

***Thank You For Completing This Form.***  
***Remember, All Your Answers Are Confidential!***