

Planning for the Sustainability: lessons learned from project BEAUTY and HEALTH, North Caroline, USA

Planejamento para a Sustentabilidade: lições aprendidas a partir do projeto BEAUTY and HEALTH, Carolina do Norte, EUA

Planificación para la Sustentabilidad: lecciones aprendidas a partir del Proyecto BEAUTY and HEALTH, Carolina del Norte, EUA

Received: 11/05/2013

Approvate: 23/02/2014

Laura Ann Linnan¹

The objective of this article is to describe the training of licensed cosmetologists to promote health in beauty shops and the key factors that were considered for "planning for sustainability" of the intervention. Furthermore, describes features within the broader community, factors within organizations, and program design and implementation factors, as well as key components of the RE-AIM framework, that were considered when "planning" for sustainability of an effective intervention component of the North Carolina BEAUTY and Health Project. The sustainability of effective health promotion programs warrants special consideration given the paucity of literature on this topic, as well as the important cost savings of maintaining critical health benefits and capacity-building efforts. **Descriptors:** Health promotion; Program development; Health behavior.

Este artigo tem como objetivo relatar a experiência de formação de esteticistas licenciados para promover saúde no salão de beleza e descreve os recursos necessários dentro da comunidade em geral, os fatores dentro das organizações, o design de programas e os fatores de implementação, bem como outros componentes essenciais do modelo RE-AIM, que foram considerados no "planejamento" para a sustentabilidade de um componente de intervenção eficaz do projeto *BEAUTY and Health* (Beleza e Saúde) no Estado da Carolina do Norte, EUA. A sustentabilidade de programas de promoção da saúde eficazes merece consideração especial dada à escassez de literatura sobre o tema, bem como para a redução de custos de manutenção de importantes benefícios críticos para a saúde e os esforços de capacitação.

Descritores: Promoção da saúde; Desenvolvimento de programas; Comportamentos saudáveis.

Este artículo tiene como objetivo relatar la experiencia de formación de esteticistas licenciados para promover salud en el salón de belleza y describe los recursos necesarios dentro de la comunidad en general, los factores dentro de las organizaciones, el diseño de programas y los factores de implementación, así como otros componentes esenciales del modelo RE-AIM, que fueron considerados en la "planificación" para la sustentabilidad de un componente de intervención eficaz del proyecto *BEAUTY and Health* (Belleza y Salud) en el Estado de Carolina del Norte, EUA. La sustentabilidad de programas de promoción de la salud eficaces merece consideración especial dada la escasez de literatura sobre el tema, así como para la reducción de costos de mantenimiento de importantes beneficios críticos para la salud y los esfuerzos de capacitación.

Descriptores: Comportamientos saludables; Desarrollo de programas; Promoción de la salud.

¹ Health Educator. Health Education Specialist. Master of Education in Public Health. Doctor of Health and Social Behavior. Teacher of Master in Public Health and Doctorate Course in Health Behavior and Health Education. Department of Health Behavior and Health Education, University of North Carolina at Chapel Hill, USA. linnan@email.unc.edu.

INTRODUCTION

he sustainability of effective health promotion programs warrants critical consideration.

First, the cost of program start-up and development is high so that if a program has positive health outcomes, sustaining that program (vs. enduring the burden of another start-up) makes sense.

Second, sustainability helps effective programs endure beyond initial funding cycles. If a program is effective, (e.g. intended benefits are realized), then continuing those benefits is a highly desirable outcome.

Third, effective programs often produce unintended beneficial consequences such as jobs, capacity-building, and trust. Fourth, there is a paucity of literature on sustainability of public health programs with notable exceptions¹⁻⁵.

The study of sustainability is in its' infancy at a time when the need for identifying and maintaining effective programs is great. This paper will offer a working definition of sustainability; and apply key aspects of the Shediac-Rizkallah & Bone¹ framework related to an effective training workshop that emerged as worthy of "sustaining" via continuing education (CE) This training workshop was programs. developed as part of "The North Carolina BEAUTY and Health Project" (aka "the BEAUTY Project").

Sustainability is described as "the extent to which an evidence-based intervention can deliver its intended benefits over an extended period of time after external support from the donor agency is terminated".

Several aspects of this definition are noteworthy. First, it focuses on "evidence-based" interventions, which assumes that some evidence of effectiveness is available via peer-reviewed literature, compendium documents such as the Centers for Disease Control and Prevention's (CDC) Guide to

Community Preventive Services, or Cochrane Collaboration reviews.

Second, this definition articulates that effective interventions should deliver benefits "over an extended period of time after external funding... is terminated". This definition does not impose a specific, fixed timeframe for producing effects which recognizes that interventions are often at different stages of implementation when external funding is completed. Some effects happen quickly, while others may not surface until much later. Moreover, if effective programs terminated are prematurely, it may bring hardship, broken relationships, and mistrust or apathy to those involved with the programs, such that future efforts within a particular group or community are less likely to be successful.

This definition also implies that sustainability is not an all or none proposition, it is a process. The effects of sustainability include the potential for effective programs to be routinized or institutionalized within a system or organization; for programs to continue or expand intended health benefits for intended beneficiaries; and/or, for programs to help build or enhance capacity within an organization or group.

This happy triad of benefits occurred with a physical activity (PA) program that the Pawtucket Heart Health Program developed in the mid-1980's as part of a large cardiovascular disease intervention trial⁶, which was successfully transferred to the local Young Men's Christian Association (YMCA).

The members of the YMCA staff were trained to deliver the PA program and added the course to the menu of offerings. The YMCA recruited new members, received additional training for their staff (enhanced capacity), added a successful program to their menu of PA offerings (institutionalize) and extended their reach into the community (extended health benefits).

Thus, measuring sustainability should begin early in the planning process, and continue throughout so that programs can be maintained over time. The objective of this article is to describe the training of licensed cosmetologists to promote health in beauty shops and the key factors that were considered for "planning for sustainability" of the intervention.

DESCRIBING THE EXPERIENCE

Planning for Sustainability - An Example

This research teams have taken seriously the notion of "planning for sustainability" using the conceptual framework (Figure 1) first

articulated by Shediac-Rizkallah & Bone¹. The Table 1 summarizes the key guidelines used to describe factors in the broad community environment; factors within the organizational setting; and project design and implementation factors that are believed to influence program sustainability. Its provide brief background information about the NC BEAUTY and Health research study, and then describe how we planned for the long-term sustainability of one effective component of our intervention – training of licensed stylists - to promote health within the beauty salon.

Table 1: Sustainability Considerations for the North Carolina BEAUTY & Health Project, NC, USA.

NC BEAUTY and Health Project - Continuing Education Workshops for Licensed Cosmetologists

Factors in the Broader Social, Political, Regulatory and Economic Environment

Program Design & Implementation Features -Project negotiation

- process -Project effectiveness
- -Project duration
- -Project financing
- -Training

The North Carolina State Board of Cosmetic Art requires that cosmetologists obtain 24 continuing education credit hours every 3 years in order to maintain licensure (political). BEAUTY Advisory Board members and participating stylists recommended that the training workshops for stylists from the BEAUTY study be adapted and then submitted for CE credit approval (community participation). Few courses were available when this new mandate went into effect, and the CE course costs were often prohibitive (economic).

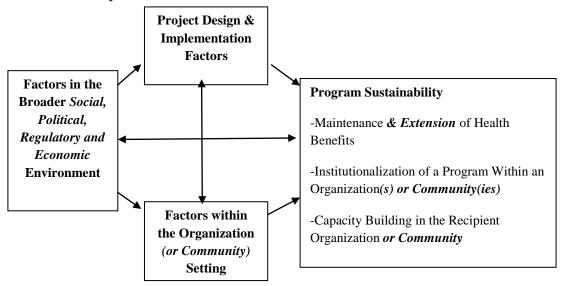
Six 4-hr stylist training workshops were created as part of the NC BEAUTY and Health Project. Stylists who participated in the research study asked research team members to turn these workshops into continuing education opportunities. (negotiation) Evidence suggests that stylists who participated in the training workshops improved their selfefficacy to deliver key health messages and were willing to participate in future trainings¹² (effectiveness). And, if observed that individuals who reported talking more with their stylists had reported more behavior change¹² (effectiveness). Original training workshops were 4 hrs, and 6 different workshops were developed. Thinking about CE courses for licensed stylists which are typically offered as half or a full-day workshops, we decided to offer an 8hr CE course initially. (duration) And, after market research with licensed stylists, it priced the training workshops at a low cost (\$40 for 8 CE credits) relative to other CE training courses and still it covered the expenses of offering the training workshop because only one of the three trainers received payment for their contributions while the other two provided "in-kind" services. (funding) Multiple individuals were involved in the six training workshops offered as part of the NC BEAUTY and Health project. In the CE training workshops, two members from the research team and a member of the NC BEAUTY Advisory Board who also works professionally as the director of a school of cosmetology served as trainers. This arrangement reflected the partnership between UNC researchers and beauty salon industry and secured required expertise for the task. Although not complicated, CE requirements mandate that 50% of the program covered cosmetology-related topics. The CE workshop was originally designed for an 8 hr session because licensed stylists requested this option; however, it is possible to offer a 4hr/4 credit version of this workshop as well.

Factors Within
Organization or
Community Setting
-Program
champion/leadership
-Integration with
existing
programs/services
-Institutional
strength

Program champions include members of the research team, Advisory Board members, and members of the State Board of Cosmetic Art who approved this course to receive CE credits. In addition, the original research study participants (e.g. more than 40 beauty salon owners and over 70 licensed stylists) also served as program champions who helped promote this workshop. Because this CE workshop is made available as part of the NC State Board of Cosmetic Art menu of CE offerings, it is a vertically integrated operation. To meet state CE requirements, the goals of the CE training workshop are specified and are consistent with the mission of the CE. Both UNC and the State Board of Cosmetic Art have institutional strength, and can support new programs as the menu of offerings continues to grow overall.



Figure 1: An Adaptation* of Shediac-Rizkallah & Bone¹ Framework for Conceptualizing Program Sustainability



^{*}Items in *bold italics* were adaptations on the original framework¹.

Background - North Carolina Beauty and Health Project

Since 2000, an interdisciplinary team of researchers at the University of North Carolina Chapel Hill have worked in partnership with beauty salon and barbershop owners, stylists/barbers, and their customers to promote health within these important community settings^{7,8}.

Beginning with a series of beauty salon-based formative research studies, the research team learned that:

- 1) beauty salons are located in all communities large/small, urban/rural;
- 2) the stylist often has a unique and trusted relationship with his/her customers;
- 3) salon owners and stylists were eager partners in promoting health^{9,10};
- 4) customers were willing to receive health information from their stylists¹¹.

Stylist training workshops were a key component of the NC BEAUTY (*Bringing Education and Understanding to You*) and Health Project intervention. Initial research results revealed that stylists could be trained to deliver key health messages to their customers, that their knowledge and self-efficacy to deliver key health messages was

improved by workshop participation and those customers were pleased to receive health information from their stylists¹².

Six different stylist training workshops on topics related to physical activity, healthy eating, weight and cancer screening, were successfully implemented during the BEAUTY Project¹². Furthermore, we took one of the original BEAUTY training workshops and turned that workshop into a new continuing education (CE) workshop for licensed stylists in NC that would be sustained beyond the research funding period using the "planning for sustainability" framework.

Factors in the Broader Community

The North Carolina State Board of Cosmetic Art passed regulations requiring that all stylists complete up to 24 credits of CE every 3 years in order to maintain his/her cosmetology license. This requirement was instituted about the time our grant funded study was ending.

It received approval by the State Board to offer an 8 credit CE workshop for licensed stylists based on the successful training workshops we had offered as part of our grant funded study. Thus, the political, regulatory and economic conditions were favorable for us to launch a CE course for licensed stylists based on our original research-sponsored training workshops.

It partnered with local stylists and shop owners to help promote this workshop and invited previous research participants to attend the new workshops. We also invited highly respected Board members to serve as trainers in the approved course to help attract a wide range of licensed stylists.

Program Design and Implementation Factors

For program design-related factors, it did extensive market research to determine the timing, cost and content of the CE workshop. The BEAUTY Project had enrolled more than 70 stylists and over 40 salon owners into the study. All were polled to determine their opinions and interest in CE workshops. It also invited them to provide feedback on any/all aspects of the training workshops offered as part of the larger trial.

It also assessed project effectiveness (e.g. actual effects, including perceptions, visibility, and secondary effects). The pilot training workshops revealed that both stylists and customers were pleased with the trainings.

The length of the CE program was extended from 4 to 8 hours because stylists told us they preferred to get more of their CE credits "at one time/in one place". The four hr BEAUTY workshops were easily extended to eighth hr by adding the 50,0% of content that was required to be "cosmetology-related" to meet CE requirements. It assessed program development costs, recurrent costs, and made plans for an online version of the training course which has been approved for implementation.

As for program implementation factors, it considered instructor training (e.g. type of personnel/expertise required), maximizing flexibility, and minimizing complexity. Two research team members and a member of the Advisory Board were the key instructors for this CE course. Each had been involved in the development of the

BEAUTY training workshops, and the Board member was also the Director of the School of Cosmetology at the Guilford County Community College. It minimized complexity of implementing the course by having portions that were consistently delivered by video. Training manuals were developed so that new/different instructors could easily implement specific sections of the workshop.

Factors within the Organizational and/or Community Setting

The BEAUTY training workshops were to be sustained within the menu of CE courses offered by the NC State Board of Cosmetic Art. A key program champion was helped establish the CE program for licensed stylists.

On the recommendation of stylists personnel and beauty school interviewed, we decided not to integrate training of stylists into the requirements for student training/licensing of cosmetologists. and instead, integrated it into the (new) CE requirements. The CE program mission is entirely compatible with the original BEAUTY training workshops. The strength of the institutions involved - University of North Carolina and the State Board of Cosmetic Art - bode well for long-term sustainability.

DISCUSSION

Community-based interventions that plan for sustainability have the best chance for maintaining or extending intended health benefits, building capacity within intended partner organizations or communities, and/or institutionalizing the program within an intended organization or community.

In other words, planning helps ensure that effective programs "stick" and build the type of relationships and trust that will support ongoing programming. Glasgow and colleagues developed the original RE-AIM framework¹⁴ to help plan and evaluate different interventions based upon reach, effectiveness, adoption, implementation and maintenance. Today, RE-AIM has been



applied to a wide range of health issues, and more than 100 articles have been published on its use in program planning, evaluation, and translation of research to practice (see http://www.re-aim.hnfe.vt.edu/about re-aim/what is re-aim/index.html)15.

The workshop approved for CE of licensed cosmetologists will be evaluated along these same constructs. Specifically, "reach" will measure the absolute number, proportion and/or representativeness of individuals who enroll in the CE program.

"Efficacy" is the impact of the training workshop on key outcomes (e.g. change in stylist knowledge or self-efficacy or behavior) and includes potential negative effects, quality of life, and economic outcomes.

"Adoption" is the absolute number, proportion, and representativeness of settings and/or intervention agents (people who deliver the program) who are willing to initiate a program. In the case of the CE workshops, adoption would be the number of groups (e.g. franchise salons or beauty schools) who are willing to sponsor and/or promote the CE workshops to licensed stylists.

"Implementation" refers to the fidelity that each trainer has to the original training workshop protocol, including consistency of delivery, time and cost of the intervention.

individual At the level. implementation refers to clients' use of each component of the intervention strategies, while "maintenance" refers to the extent to which the CE workshop becomes institutionalized as part of the menu of offerings that the NC State Board of Cosmetic Art offers for CE credits to licensed cosmetologists. In addition, maintenance at the individual level refers to the long-term effects of the CE workshop on key stylist outcomes six or more months post-training. Thus, RE-AIM constructs are best utilized as part of the planning process.

Each of the RE-AIM constructs should be carefully operationalized, monitored, and utilized as a means of enhancing efforts to plan for sustainability. Specifically, if the CE workshop for licensed stylists has high levels of reach, efficacy, adoption, implementation, maintenance and takes into account factors in the broad social environment, in the organizational or community setting, and program addresses key design and implementation factors, the likelihood of sustaining the program will be enhanced.

CONCLUSION

Unfortunately, it is not the norm for program planners to take time to articulate these factors in advance of program development and/or implementation. Thus, typically get to the end of initial intervention funding and then begin to think about how to sustain a program.

Attention to the RE-AIM framework and planning for sustainability approaches are necessary, but not fully sufficient for sustaining program effects, building capacity and/or institutionalizing CE workshops.

Program champions and leadership (or lack thereof) is critically important in sustaining program effects. Ability to keep the program content current in the face of changing information or changing credentialing requirements may influence long-term sustainability of these workshops.

Upfront planning for sustainability clarifies many important factors that influence the likelihood that intended program benefits are realized over time, and are maintained after initial funding is no longer available.

REFERENCES

1. Shediac-Rizkallah MC, Bone LR. Planning for the sustainability of community-based health programs: conceptual frameworks and future directions for research, practice and policy. Health Educ Res. 1998; 13(1):87-108.

- 2. Alexander JA, Weiner BJ, Metzger ME, Shortell SM, Bazzoli GJ, Hasnain-Wynia R, et al. Sustainability of collaborative capacity in community health partnerships. Med Care Res Review. 2003; 60(4 Suppl):130S-59S.
- 3. Scheirer MA. Is sustainability possible? A review and commentary on empirical studies of program sustainability. Am J Eval. 2005; 26(3):320-47.
- 4. Pluye P, Potvin L, Denis JL. Making public health programs last: conceptualizing sustainability. Eval Program Plann. 2004; 27(2):121-33.
- 5. Israel BA, Krieger J, Vlahov D, Ciske S, Foley M, Fortin P, et al. Challenges and facilitating factors in sustaining community-based participatory research partnerships: Lessons learned from the Detroit, New York City and Seattle Urban Research Centers. J Urban Health. 2006; 83(6):1022-40.
- 6. Carleton RA, Lasater TM, Assaf AR, Feldman HA, McKinlay S, et al. The Pawtucket Heart Health Program: community changes in cardiovascular risk factors and projected disease risk. Am J Public Health. 1995; 85(6):777-85.
- 7. Linnan LA, D'Angelo H, Owens-Ferguson Y, Thomas S. Health education and community building in African American barbershops and beauty salons: an innovative approach to addressing health disparities. In: Minkler M, editor. Community organizing and community building for health and welfare. 3rd ed. New York: Rutgers Press; 2012.
- 8. Linnan LA et al. The North Carolina BEAUTY and Health Project: preventing cancer in African American beauty salons. In: Elk R, Landrine H, organizers. Interventions to reduce cancer disparities: research funded by the American Cancer Society. New York: Springer, Inc; 2011.
- 9. Solomon F, Linnan LA, Wasilewski Y, Lee AM, Katz ML, Yang J, et al. Observational study in ten beauty salons: using formative research results to inform development of

- the North Carolina BEAUTY and Health Project. Health Educ Behav. 2004; 31(6):790-805.
- 10. Linnan LA, Kim AE, Wasilewski Y, Lee AM, Yang J, Solomon F, et al. Working with licensed cosmetologists to promote health: results from the North Carolina BEAUTY and health pilot study. Prev Med. 2001; 33(6):606-12.
- 11. Kim K H, Linnan LA, Kulik N, Carlisle V, Enga Z, Bentley M, et al. Linking beauty and health among African American women: using focus group results to build culturally and contextually appropriate interventions. J Soc Behav Health Sci. 2007; 1(1):41-59.
- 12. Linnan LA, Ferguson YO. Beauty salons: a promising health promotion setting for reaching and promoting health among African American women. Health Educ Behav. 2007; 6(37):517-30.
- 13. Linnan LA, Rose, JM, Carlisle VA, Evenson KR, Mangum A, Hooten E, et al. The North Carolina BEAUTY and Health Project: overview and baseline results. Community Psychol. 2007; 40(2):61-6.
- 14. Glasgow RE, Vogt TM, Boles SM. Evaluating the public health impact of health promotion interventions: the RE-AIM framework. Am J Public Health. 1999; 89(9):1322-7.
- 15. Implementation Science: Integrating Science, Practice, Policy. http://www.re-aim.hnfe.vt.edu/about_re-aim/what_is_re-aim/index.html (citado em 17/02/2014) (atualizado em 01/01/2014).

CONTRIBUTIONS

Laura Ann Linnan Conceptualized the study, described the project, and wrote the manuscript draft.

ACKNOWLEDGEMENTS

Support for this work provided by American Cancer Society (TURSG-02-190-01-PBP).