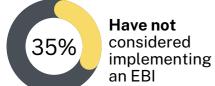




# **Experiences using Evidence-Based Interventions in Iowa Micropolitan Communities**

The University of Iowa Prevention Research Center for Rural Health surveyed and interviewed staff from local public health and community based organizations to learn more about experiences using evidence-based interventions (EBIs) to improve health outcomes. We define EBIs as intervention strategies that are proven to improve health outcomes. We focused on lowa's micropolitan areas (communities with a population between 10,000 and 50,000 people) because EBIs are not often used outside of urban centers despite being effective tools to address health issues. Here is what we found from 87 survey responses and 16 follow-up interviews.

#### **Implementing EBIs**



Are currently implementing an EBI



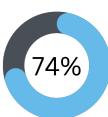
## Attitudes Towards EBIs



Agreed that their organizations prioritized selecting programs that have proven to be effective

#### Organizational Readiness for EBIs

Agreed that they were confident their staff had the needed skills to implement EBIs



### **Challenges of Using EBIs**

#### **Overall Challenges of EBIs**

Interview respondents said:



- It is difficult to identify quality interventions
- Databases are complicated
- Research publications are hard to read



- Programs are overly complicated
- Toolkits are outdated and not user friendly
- Programs are designed for urban areas
- Participants in rural areas may have limited internet access



- Requirements for licensing of EBIs are expensive and hard to maintain
- Evaluation and fidelity requirements take too much time
- Technical assistance is needed from experts

#### Staffing Challenges of EBIs

Survey respondents said staffing concerns of using EBIs included:

staff expertise

staff buy-in

Interview respondents expanded on barriers to staffing for EBIs:

- Lack of staff with training to work with specialized populations
- Time commitment needed to travel to rural areas
- Staff burnout
- Responding to urgent needs and emergencies take staff away from EBI implementation

#### **Funding and Community Resource Challenges of EBIs**

Survey respondents reported barriers such as:

**76% 44%** 

overall cost of implementation lack of supportive resources

#### **Participant and Community Engagement** Challenges of EBIs

Survey respondents identified a lack of:

56% 55% 44%

buy-in

interest in community community participant programs resources support

Interview respondents expanded that:

- Financial support from local government is needed
- · Grants are difficult to obtain
- Grant restrictions limit ability to pay for staffing and sustaining of programs

Interview respondents discussed barriers like:

- Accessibility of programs (ex: literacy levels)
- Lack of resources to support programs being offered in all needed languages
- Target audience does not see program topic as a priority for themselves
- Difficulties in advertising programs
- Organizations need to work together to reduce duplication of services
- Lack of transportation in rural areas

#### **COVID-19 Related Concerns**

COVID-19 was a common theme in interviews:

- Some participants are hesitant to come to in-person programming
- Some participants lack digital literacy needed for online programming
- There is too much need in the community because of the pandemic
- Staff are confused about their roles after the pandemic
- Communication channels to reach community members have changed

**Funding Statement:** This document is a product of a Health Promotion and Disease Prevention Research Centers supported by Cooperative Agreement Number (U48DP006389) from the Centers for Disease Control and Prevention. The findings and conclusions in this document are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.