## **Evaluation Report Brief**

# **Hope Family Health Centers**: Si Texas HOPE Program



#### What is the community challenge?

Residents of the Rio Grande Valley region of Texas have among the worst health outcomes in the nation. Rates of chronic disease and related mortality among the general population exceed those in most other regions of the state and nation. Poverty is also pervasive along the Texas southern border with Mexico, placing border residents at higher risk for poor health status.

# What is the promising solution?

The Sí Texas HOPE Program is an enhanced integrated behavioral health (IBH) model that provides free medical, counseling, and case management services to uninsured individuals annually in the Rio Grande Valley of Texas. The program sought to identify and remove barriers to full integration of primary and behavioral health care in a charitable care setting to improve obesity, diabetes, and behavioral health (depression and anxiety) outcomes in the Rio Grande Valley. Program inputs included: primary care volunteers, counseling services, behavioral health specialists, care coordinators, the use of electronic medical records, and community based chronic disease programs.

#### **Program At-a-Glance**

CNCS Program: Social Innovation

Fund

Intervention: Si Texas HOPE

Program

Subgrantee: Hope Family Health

Center

Grantee: Methodist Healthcare Ministries of South Texas, Inc.

Focus Area: Healthy Futures

Focus Population: Uninsured Individuals Living at or Below 200% of the Poverty Line

Communities Served: Rio Grande Valley Region of Texas

## What was the purpose of evaluation?

The evaluation of Hope Family Health Center's Si Texas HOPE Program by Health Resources in Action began in 2015 and finished reporting in 2019. The implementation study sought to understand how the program was applied, determine if the program reached the intended target population, and identify which program components were most beneficial. The impact study sought to determine whether program participants experience the following improvements after 12 months, due to program participation: (1) reduced blood pressure, (2) improved HbA1c (diabetes) scores, (3) reduced BMI, (4) reduced depressive symptoms as measured by the PHQ-9, and (5) improved quality of life as measured by the Duke Health Profile. The study had a sample size of 583 individuals, with 271 treatment group members and 312 control group members.

#### What did the evaluation find?

As a grantee/subgrantee of the SIF, Hope Family Health Centers (HFHC) engaged an independent evaluator to evaluate the Sí Texas HOPE Program. The evaluators conducted an impact study that used an experimental randomized control trial design, and an implementation study that used semi-structured interviews and focus groups with surveys of the focus group participants. The evaluation observed the following positive findings:

- The evaluation observed a positive statistically significant impact of the program on depression symptoms as measured by the PHQ-9 at 12-months. On average, the PHQ-9 score of intervention participants was 1.67 points lower than the control participants.
- The Sí Texas HOPE Program successfully implemented their integrated health program with fidelity to the program model and reached the target population.

#### Notes on the evaluation

The impact evaluation observed several null findings. The evaluation found no impact on mean diastolic blood pressure and systolic blood pressure. The mean HbA1c (diabetes) and BMI levels at 12 months did not differ significantly by intervention status. The evaluation did not explore the impact on quality of life as measured by the Duke Health Profile as originally proposed because the information was not collected with consistency, and in some cases no information was collected at all.

# How is Hope Family Health Centers using the evaluation findings to improve?

HFHC plans to sustain its IBH approach and make it available to all of their patients. HFHC is also pursuing funding mechanisms to ensure its future sustainability. HFHC has made an investment in implementing an electronic medical record system, a step toward sustaining their new IBH-focused operational model. As HFHC moves ahead in its service implementation, it plans to continue its IBH model in its facility and to apply knowledge from this evaluation to obtain additional grant funding and to improve efficiency within the clinic.

#### **Evaluation At-a-Glance**

Evaluation Design: Randomized Controlled Trial (RCT) Impact Evaluation and an Implementation Study

Study Population: Uninsured Individuals Living at or Below 200% of the Poverty Line

Independent Evaluator: Health Resources in Action, Inc.

This Evaluation's Level of Evidence\*: Moderate

\*SIF and AmeriCorps currently use different definitions of levels of evidence.

The content of this brief drawn from the full evaluation report submitted to CNCS by the grantee/subgrantee. The section of the brief that discusses evaluation use includes contribution of the grantee/subgrantee. All original content from the report is attributable to its authors.

To access the full evaluation report and learn more about CNCS, please visit http://www.nationalservice.gov/research.

The Social Innovation Fund (SIF), a program of the Corporation for National and Community Service (CNCS), combines public and private resources to grow the impact of innovative, community-based solutions that have compelling evidence of improving the lives of people in low-income communities throughout the U.S. The SIF invests in three priority areas:

economic opportunity, healthy futures, and youth development.