CDC PS18-1807 Success Story Guidance

A success story is a powerful tool to communicate your program's accomplishments and gain support for continued program implementation from partners, decision-makers, and funders. Often, the biggest challenges in creating a success story are deciding what aspects of your program to highlight and how to best communicate your success. There are various staff within the Division of Adolescent and School Health (DASH) and funded non-governmental organizations (NGOs) who can assist with developing your story.

DASH Program Consultants, and Policy and Communication Subject Matter Experts can help you identify program activities to highlight and the best way to disseminate information about your successes. NGOs funded by DASH can also help identify possible stories based on their knowledge of your work. Evaluators in DASH can help you consider programmatic and surveillance data to demonstrate your success and strengthen your story.

This guidance is intended to help you communicate your story. CDC will use the information you provide to talk about the impact and success of your program. Answering the prompts below as completely as you can will help to develop the story and highlight your work.

Although a success story is required with each annual report, you are encouraged to share your successes as they happen. The guidance below will help you capture information to share. Your submission is the first step in the process to develop a polished story that is succinct and impactful. DASH staff will work with you to further refine the information you share.

How You Can Use Success Stories:

- To celebrate your success with community champions (e.g., your School Health Advisory Committee or youth advisory group).
- To help community members understand the role of schools in promoting adolescent health.
- To promote your work to stakeholders.
- To demonstrate progress with school boards and administrators.
- To justify requests for resources or decisions to continue current activities.
- To meet PS18-1807 program requirements.

How DASH Uses Success Stories:

- To demonstrate the impact and effectiveness of CDC funding.
- To emphasize program activities that have the greatest impact.
- To prepare information for the Federal budget submission.
- To respond to requests from the CDC, the Office of Management and Budget, other federal offices, Congress, and the public.
- To communicate program efforts with internal and external audiences through presentations, websites, social media, and other channels.

How to Develop Your Success Story

Provide the "Bottom Line Up Front" (BLUF): What is the main point or bottom line of this story? Write a statement that provides the main points, i.e., the bottom line up front.

> Example: *Fort Worth Independent School District (FWISD), with funding from CDC, ensured the selection of a quality sexual health education curriculum for all middle and high school students throughout the district.*

It may be easier to write this after you have drafted the story. You can then read back through the story to make sure that it is focused around the main point. The BLUF will also be helpful for developing a story title.

> Title Example: *Selecting a Quality Sexual Health Education Curriculum, Fort Worth Independent School District*

Highlight the outcome: What positive change(s) did you see as a result of this activity or program? How can you best demonstrate this outcome? Highlight this in 1-2 sentences.

Outcomes can look different based on your activities and the stage of work you are in. The outcomes can be highlighted through data, new partnerships, policies, or practices.

- Look to your Program Evaluation Reporting System (PERS) and additional evaluation questions, School Health Profiles (Profiles), and Youth Risk Behavior Survey (YRBS) for data to include.
- The ultimate outcome may be different than the early ones. As the work progresses, go back to the original story and revise or update the content based on additional outcomes or successes.
- If you introduce the reach of your efforts here, focus on the reach of your activities rather than counting the number of events. For example, highlight the number of students reached by teachers who completed professional development, instead of the number of professional development events implemented.

> Example of Final Outcome: *FWISD's new medically accurate and age-appropriate curriculum is now required in all middle and high school health education classes throughout the district*

Describe the most pivotal activities for success: In 2-4 sentences, describe the key activities that led to the positive change. What activities were most important/necessary for this success?

> Example: *FWISD used CDC's Health Education Curriculum Analysis Tool (HECAT) to review and develop an appropriate and effective sexual health education curriculum. The HECAT provided a neutral and transparent process to choose the best curriculum for students. Before selecting the curriculum, stakeholders, such as FWISD's HIV Program Review Panel, community partners, and health education teachers, received training on CDC's HECAT. The School Board approved the selected curriculum with unanimous support from the School Health Advisory Committee, which includes parents.*

Summarize the largest barriers: Were there particularly difficult barriers you overcame? Briefly summarize which activities were most important to overcoming these barriers. This may not make up much, if any of your final story. However, to better articulate how you were successful, it can be helpful to think about what barriers you overcame. You can then go back to your description of activities and reframe these barriers as accomplishments/activities that were necessary for success. It is also helpful for DASH to have this information as we further develop the story.

> **Example:**
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> *Challenges: There is a high turnover of teachers at about 30%. The amount and type of training our teachers received prior to certification is varied. Many of the middle school classes are large, with around 40 students. We are having push back from a small number of citizens questioning some of our instruction, particularly on sexuality.*
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> *Solutions: We have created a fairly extensive professional development model for all of our new teachers, including 8-12 hours before they attend our training for all teachers, and providing support in their rooms. Class sizes remain a constant challenge due to funding and priorities. We are working regularly with principals on this but, progress is slow. The parents voicing concern are ongoing, but are a minority.*

List the most important partners: What partners were necessary to achieve the outcome? How did they help facilitate your success? Describing the role your partners played to support the work versus the work that was conducted with CDC funding is a great way to thank them for their support. If partnerships were newly formed as a result of your work, briefly describe the importance of the partnership in continuing to improve the health of adolescents in your community. This may be more common in the beginning of your work. Explain this in 1-3 sentences.

Describe reach: Who did the positive change reach? How many? To calculate reach, consider how you can get to the largest number of individuals reached by the positive change. For instance, if a school established a new student-led inclusive club, all of the students enrolled in that school would have access to the club. Therefore, your reach would be the school's total enrollment. If you trained all of the 9th grade health education teachers in your district and health education is required for all 9th grade students, your reach would be the total number of 9th grade students in the district.

Many times, reach will be the number of students; however, it may also include parents/families, teachers, nurses, or other school staff. If you are calculating the number of teachers, nurses, or staff reached or trained, your story will be strengthened with the inclusion of the number of students these professionals reached. Once reach is calculated, include the data source for reference.

> **Example***: Because health education is required in 6th grade and once in grades 9-12, the new sexual health education curriculum will reach more than 24,000 middle and high school students in Fort Worth.*

Describe the importance of the positive change: In 1-2 sentences, describe why the change demonstrated at the beginning of your story (with an outcome) matters for youth in your community. It may be helpful to refer to the Program Guidance and PS18-1807 outcomes to assist in developing language framed in the context of the 1807 goals.

In the example below, the reach and importance were combined. This will vary in your stories.

> Example: *Today and into the future, more than 24,000 middle and high school students in Fort Worth have access to quality sexual health education, enhancing the knowledge and skills of students to prevent negative sexual health outcomes.*

How it all comes together: The paragraph below provides an example of how all of the information above can come together to form a succinct, impactful success story. You will notice that some of the information provided in the examples was not included in the story. Even though it is not in the story, it provided helpful background to create a succinct, impactful story.

Selecting a Quality Sexual Health Education Curriculum

Fort Worth Independent School District

Fort Worth Independent School District (FWISD), with funding from CDC, ensured the selection of a quality sexual health education curriculum for all middle and high school students throughout the district.

FWISD used CDC's Health Education Curriculum Analysis Tool (HECAT) to review and develop an appropriate and effective sexual health education curriculum. The HECAT provided a neutral and transparent process to choose the best curriculum for students. FWISD's new medically accurate and age-appropriate curriculum is now required in all middle and high school health education classes throughout the district. Before selecting the curriculum, stakeholders, such as FWISD's HIV Program Review Panel, community partners, and health education teachers, received training on CDC's HECAT. The School Board approved the selected curriculum with unanimous support from the School Health Advisory Committee, which includes parents. Students in FWISD are required to take health education in sixth grade, and once in grades 9-12 to graduate. All high school health education classes implemented the curriculum in the fall of 2014. The curriculum was expanded to all sixth grade health education classes in 2015. Today and into the future, more than 24,000 middle and high school students in Fort Worth have access to quality sexual health education.

As your work progresses, your story will evolve. It is important to revisit stories that were previously submitted to update the content and progress. Your Program Consultants will work with the appropriate DASH and NGO staff to help you develop and complete your success story. We look forward to hearing about all the wonderful successes under PS18-1807!