Knowledge Transfer:
Disseminating, Implementing, and Evaluating Knowledge in the Field

Making a Measurable Difference
Strategies Tailored for Diverse Audiences and Rapidly Changing Technologies

AFYA, Inc. (AFYA), is a technical and professional services firm founded in 1991. The word “afya” means health in Swahili. AFYA is dedicated to improving the health and well being of underserved populations by eliminating health disparities, ensuring access to care, and transferring knowledge of up-to-date, evidence-based healthcare information to a variety of stakeholders. Since AFYA received its first contract from the U.S. Department of Health and Human Services (HHS), our Analytical and Technical Services Division (ATSD) has grown to become a trusted partner of HHS. We manage complex projects and teams to achieve successful outcomes for our clients in the area of knowledge transfer (KT). Our expertise is in formative research, strategic KT planning, developing new evidence-based tools and materials, implementing a variety of KT strategies and tactics, evaluating data and metrics, Web conferencing (including knowledge cafes), publications design, and conference support. We have expertise in disseminating data through a variety of delivery mechanisms, including research reports and other print materials (brochures, factsheets, posters, and newsletters), video and teleconferences, help lines, online learning communities, conferences, videos, social media, and Web sites.

A Snapshot of Some of AFYA’s KT Work in Public Health

Agency for Healthcare Research and Quality (AHRQ) KT Indefinite Delivery Indefinite Quantity (IDIQ) Contract

Recently, AFYA became a prime contractor on this IDIQ, which is designed to accelerate the dissemination and implementation of evidence-based tools, products, and research findings to target audiences, including decisionmakers in the fields of clinical care, healthcare systems, business, and public policy, as well as patients and consumers.

“Educating the Educators – Dissemination of Patient-Centered Outcomes Research (PCOR) to Health Educators”

PCOR addresses the need for current, evidence-based information about the effectiveness, benefits, and harms of different treatment options for AHRQ priority health conditions. As more of the U.S. population faces serious healthcare needs, health educators will play a greater role in teaching consumers, patients, and caregivers how
to interpret and utilize PCOR and effectively engage in shared decisionmaking with their healthcare team. AFYA is working with AHRQ to better understand the needs of health educators—across several disciplines—for PCOR information and how to increase the use of and improve these tools. AFYA is conducting formative research to gain a greater understanding of health educators’ needs for PCOR information, developing a strategic plan to implement tools and accredited materials, and developing impact measures. We will conduct “train-the-trainer” workshops and webinars across the country to target populations in geographic areas with significant health disparities. Through the use of webinars and a learning network, we will provide the tools needed to apply PCOR topics to everyday practice.

“Public Information and Communication Services” For the National Institutes of Health (NIH) and its component institutes and centers, AFYA was awarded an IDIQ contract to provide a range of programmatic activities from answering questions from consumer-oriented public affairs clearinghouses to developing national exhibit programs and comprehensive public awareness, education, and prevention campaigns.

“Health Communications Services for the Centers for Disease Control and Prevention (CDC) Division of Cancer Prevention and Control (DCPC)” AFYA provided ongoing support related to communicating, collaborating, and disseminating information among internal and external partner organizations that work in public health and/or cancer prevention and control and to the public. Among other tasks, AFYA responded to and monitored inquiries from the general public, governments, and special interest groups. AFYA reviewed the existing response manual (to frequently asked questions) and made necessary revisions, producing educational tools, including newsletters, brochures, and factsheets.

“Training and Technical Assistance (TA) for the National Center for Injury Prevention Control (NCIPC)” AFYA supported CDC staff as they developed and enhanced the skills needed to establish, nurture, and evaluate partnerships with public and private sector organizations involved in injury prevention and control. We designed, tested, refined, and delivered training in building partnership relationships, health communications, and social marketing. Training goals focused on strengthening injury prevention programs, influencing and changing policies, increasing knowledge, and shaping attitudes and behaviors. This project also involved media outreach,
Web and other electronic communication, marketing and research, and evaluation activities.

“HHS Evaluation of the Implementation of Multiple Chronic Conditions (MCC) — A Strategic Framework” (HHS/Program Support Center [PSC]) AFYA evaluated the state of Federal and non-Federal programs, activities, and initiatives related to providing care for individuals with MCC or co-occurring disorders. Deliverables included a Web-searchable inventory of non-Federal activities and innovations, and a booklet of innovative approaches aimed at improving the lives of people with MCC. AFYA identified gaps in the activities to address the goals outlined in the MCC Strategic Framework and facilitated meetings with public and private stakeholders to promote the development and implementation of work in these strategies.

Environmental Scan of Current Girl/Adolescent Activities for the Development of a National Girl/Adolescent Health and Wellness Initiative” (HHS/Office on Women’s Health [OWH]) AFYA conducted formative research to inform the process of developing a strategic framework for a new initiative. We collected statistical information on priority health issues that affect girls/adolescents, identified evidence-based health programs, and identified potential government and nongovernment partners. We facilitated focus groups with girls/adolescents to understand their needs and perceptions. AFYA facilitated discussions with target populations in geographical areas across the country to elicit how each age group describes themselves, what they know regarding their health, and how they receive information regarding their health. The project culminated in a final report of recommendations and a presentation to OWH on findings.

“Evaluation of the District of Columbia Tobacco-Free Families Campaign (DCTFF)” For the American Lung Association of DC (ALADC), AFYA staff conducted a process and outcomes evaluation of this campaign committed to reducing and eliminating death and disease caused by tobacco use in the District of Columbia, particularly among the low-income and medically underserved population. We observed organizational activities, conducted site visits to community partners, and analyzed changes in smoking prevalence over the course of the campaign. On a second project for ALADC, AFYA conducted focus groups with targeted minority populations to assess the effectiveness of the project’s media campaign.
“Outreach and Program Management Services for the Regional Education About Choices in Health (REACH) Program” AFYA assisted the Centers for Medicare & Medicaid (CMS) in conducting a national education and publicity campaign for all Medicare beneficiaries about their Medicare and Medicare+Choice options. The REACH program increased awareness and information for populations not reached by national efforts due to barriers such as location, literacy level, language, and/or culture. We identified and recruited regional and local organizations not traditionally involved in the Agency’s national promotional campaigns to make the campaigns more inclusive. Additionally, AFYA identified media outlets to promote REACH program activities. Several events supported by AFYA included both live and Internet simulcast events to increase participation. We designed culturally sensitive promotional materials for each meeting (targeted to specific partners and populations).

Substance Abuse and Mental Health Services Administration (SAMHSA)-Wide IDIQ Vehicle AFYA is a prime contractor to provide services under three domains: program support, training and technical assistance (TA), and health communications. Projects under this IDIQ contract (and previous SAMHSA contracts) include the following:

“Eliminating Mental Health Disparities” (SAMHSA/Center for Mental Health Services [CMHS]) The mission of this project was to ensure that services and supports were accessible and culturally and linguistically competent to meet the mental health needs of diverse populations, without regard to race, ethnicity, gender, gender expression, sexual orientation, disability, religion, geography, socioeconomic status, language, immigration status, or family status. We provided focused TA sessions and advised on agenda and program content as well as curriculum development for national policy and leadership summits, knowledge cafes, town hall meetings, and a national conference on cultural competence. An AFYA staff member served as the onsite Cultural and Linguistic Competence (CLC) Liaison working with CMHS to increase the CLC of all staff within its offices and infusing cultural competence into every level of its initiatives through outreach, education, and training. We helped engage communities and expand partnerships by facilitating channels of communication with CMHS stakeholders.

“Racial and Ethnic-Specific Knowledge Exchange and Dissemination” (SAMHSA/Center for Substance Abuse Prevention [CSAP]) AFYA designed, planned, and conducted focus groups to provide CSAP with stakeholder advice on enhancing the
cultural competence of SAMHSA-funded substance abuse prevention programs. We worked with CSAP to develop a logic model for the development and delivery of culturally competent and proficient prevention services, to discuss current racial and ethnic-specific substance abuse prevention issues, and to assist CSAP in identifying experts to review and recommend performance measures. This project helped CSAP discern the important and subtle characteristics of each minority group, which helped the Agency strengthen partnerships with these communities.

“Technical Assistance and Training for Grassroots Faith and Community Based Organizations” (SAMHSA/CMHS) AFYA is helping SAMHSA meet training and TA objectives by ensuring that communities have access to the technical support needed to succeed in the delivery of effective behavioral health and recovery support services, help develop best business practices, and build the organizational and community partnership capacity to respond to the needs of individuals affected by substance use and mental health conditions. We are developing and convening numerous community/coalition TA meetings, capacity-building and community partnership development meetings, the Community Leaders and Interfaith Partnership Summit, focus groups, and virtual learning opportunities, which provide ongoing up-to-date support to leaders as they build community capacity. Complementing the effort are companion booklets, which accompany the existing One Voice, One Community: Building Strong and Effective Partnerships Among Community and Faith Organizations guide, and a video that highlights successful programs.
**Key Staff and Consultants**

Michelle Bieber-Tregear, Ph.D., has 15 years of experience in evidence-based health research, complex project management, program evaluation, evidence-based health technology assessment, clinical writing, experimental and clinical research, survey design, statistical analysis, and quality assurance. She has more than 10 years of experience with AHRQ’s target audience, stakeholders, and partners, serving as the Project Director for the AHRQ KT IDIQ contract and task order manager for “Educating the Educators – Dissemination of PCOR to Health Educators.” She also serves as Project Director for AFYA’s Performance Measure-ment Support contract with AHRQ, which involves 13 work assignments for the Agency and its portfolios, such as case study evaluations of AHRQ dissemination efforts and support for the development of AHRQ’s strategic plan, among others. She also served as Project Director and Principal Investigator for AFYA’s evaluation of the implementation of the MCC Strategic Framework for the contract with PSC. On all projects, she reviews and approves deliverables, directs senior staff, and ensures that deliverables are submitted on time and within budget. Dr. Bieber-Tregear holds a Ph.D. and M.A. in Psychology from the University of Colorado.

Jann Keenan, Ed.S., has more than 20 years of experience designing, managing, and evaluating social marketing campaigns,
using effective health education theories and adult education models. She also has 22 years of experience writing and designing low-literacy print and multimedia materials using health literacy principles and adult learning theory models. She has managed more than two dozen comprehensive, culturally appropriate, health promotion campaigns. Some of her successful initiatives have focused on heart health, weight control, diabetes, asthma, stress reduction, nutrition, physical activity, reducing sexually transmitted diseases, HIV/AIDS, smoking cessation, communicable diseases, women’s health, suicide prevention, and violence prevention. Ms. Keenan earned an Ed.S. and an M.S.Ed. in Instructional Systems Technology from Indiana University.

Donna Lloyd-Kolkin, Ph.D., has more than 30 years of experience in health communication, health promotion, and social marketing. She specializes in the translation of health-related scientific research into forms accessible by an array of target audiences. Exemplar projects have included developing online webinars for quality improvement consultants to reduce racial and ethnic disparities in ambulatory care, developing print training materials about traumatic brain injury for caregivers of service members returning from Iraq and Afghanistan, designing and implementing a statewide campaign in California to reduce the stigma of mental illness by raising awareness of new brain research, and implementing a national campaign targeting audiences with multimedia materials on recovering from alcohol and drug abuse. She earned a Ph.D. in Communication Theory and Research from Stanford University and an M.A. in Communications from The Annenberg School for Communication at the University of Pennsylvania.

Gloria Stables, Ph.D., RD, has more than 25 years of experience in cancer communication and education, and behavior change research and practice. She managed AFYA’s health communications project for the CDC/DCPC, and served as the National Director for the National Cancer Institute (NCI) 5 A Day for Better Health Program, a nationwide social marketing campaign with a budget of $2 million/year. For that project, she provided oversight for message development, media campaign components, public/private strategic partnership and coalition development, program design, and evaluation. She has been a consultant for several NIH institutes, the CDC, and other State and local government agencies, focusing on health education, strategic planning, and scientific writing. Dr. Stables earned a Ph.D. and M.S. in Human Nutrition and Adult Learning from Virginia Polytechnic Institute and State University. In 2010, she received an award from the American Dietetic Association, which recognizes innovation, creativity, and leadership in community nutrition practice.
**Maxine Fuller, M.S.,** is experienced in all aspects of training and TA for health communications projects. She has more than 20 years of experience in organizational development, strategic planning, and group facilitation. She directed AFYA’s partnership development training contract for CDC’s NCIPC and worked with CDC personnel to develop and test training modules designed to help staff implement effective outreach and partnership initiatives with key stakeholders. She led workshops for CSAP’s Strategic Prevention Framework leaders and community advocates, served as an instructional designer and facilitator for the Prevention Fellowship Program, and developed curriculum for the Center for Substance Abuse Treatment (CSAT) Opioid Treatment Accreditation Technical Assistance Project. Ms. Fuller holds an M.S. in Personnel and Human Resource Management from The American University and a certificate in qualitative market research from the RIVA Training Institute.

**Lola Oguntomilade, M.P.H.,** has expertise in cultural and linguistically competent approaches to address disparities in healthcare. She is skilled in public health research, health promotion, and program planning and evaluation, particularly as they relate to the needs of vulnerable populations. As the onsite CLC liaison on the “Eliminating Mental Health Disparities” project, she helped CMHS leadership integrate CLC practices into all aspects of program management, planning, and implementation. She also planned leadership and policy academies for Federal, State, and local government officials on this project. She has designed and delivered cross-cultural competence workshops to researchers working with diverse populations abroad and served as the Project Director for the HHS/OWH “Environmental Scan of Current Girl/Adolescent Activities.” At the Johns Hopkins Center on Health Disparities Research, she coordinated activities related to international collaborations for global health disparities research initiatives. Ms. Oguntomilade earned an M.P.H. from The George Washington University, specializing in maternal and child health and women’s health.

**Robin Pugh Yi, Ph.D.,** has more than 20 years of experience as a health services and social science researcher, and in evaluation research. She managed the task order for AHRQ that synthesized lessons learned from implementing State and regional demonstrations of health information exchange. She also was the liaison for AHRQ’s Patient Safety and Prevention/Care Management portfolios on AFYA’s “Conducting Measurement Activities” task order. She managed AFYA’s evaluation of the ALADC DCTFF Campaign and presented results of the role of community partners in the success of this campaign at the American Public Health Association’s national conference. She has extensive
experience with study design and planning, and conducting qualitative and quantitative analysis. She has trained data collectors for such projects as the Drug Abuse Warning Network and National Cancer Institute’s (NCI’s) Community Networks Program national evaluation. Dr. Pugh Yi received her Ph.D. in Research Psychology from the University of California at Riverside and she completed a postdoctoral fellowship at the Johns Hopkins University School of Public Health.

**Key Subcontractors**

**Enrique Martinez-Vidal, M.P.P., AcademyHealth,** serves as the Vice President for State Policy at AcademyHealth and Project Director for the AHRQ KT project, overseeing the firm’s work with the Medicaid Medical Directors Learning Network and Medicaid Network for Evidence-Based Treatment project. As the Director of state coverage initiatives for the Robert Wood Johnson Foundation, he provides timely, experience- and research-based information to State leaders to help them move healthcare reform forward. He was appointed to the Maryland Health Benefit Exchange Board by Governor O’Malley. As Project Director for the State Quality Improvement (QI) Institute, a commonwealth funded learning collaborative and TA project, he has assisted States with developing and implementing sustainable QI strategies. For the Maryland Health Care Commission, he had oversight of Maryland’s small group insurance market reforms, the annual evaluation of the State’s mandated health insurance benefits, and collection and dissemination of quality and performance data. Mr. Martinez-Vidal holds an M.P.P. from Georgetown University.

**Andrew Gluck, M.B.A., ICF International,** is an expert in strategic planning and performance measurement and management, especially as they relate to Government Performance Results Act (GPRA) requirements. He co-authored a white paper “Performance Management, Measurement, and Budgeting: Successfully working with GPRA, PART, and other organizational assessments,” which lays out an eight-step approach to constructing, implementing, and improving an effective performance management system.

**Janet Van Ness, M.S.P.H., John Snow, Inc.,** has expertise in health program development and evaluation for health education, health promotion, clinical systems change, and all aspects of distance-learning training and development. She also has experience in high-capacity learning management, developing multimedia materials, and curriculum development for consumers and healthcare professionals. She directs three distance learning centers that host online courses,
continuing education curricula, large group webinars, and teleconferences. She also provides oversight for a fast-track, CDC-funded TA initiative, which involves the creation of Web-based training programs designed to assist healthcare providers in integrating evidence-based HIV medication adherence strategies into their daily practice. Ms. Van Ness received an M.S.P.H. from the University of Missouri Medical School.

Suzanne Niemeyer, PMP, Ketchum Inc., has more than 20 years of experience in communications, materials development, and publishing. She currently serves as the Strategic Planning Lead and Materials Development Director for the CMS ICD-10 Outreach and Education Campaign. Before joining Ketchum, she served as Deputy Director for the National Center for Complementary and Alternative Medicine (NCCAM) Clearinghouse. In this role, she provided oversight for a national exhibit program; developed evidence-based factsheets and a newsletter for consumers, patients, and healthcare providers; and responded to thousands of public inquiries each year via e-mail, live help, and phone. She has substantial project management experience on Government contracts and earned a Project Management Professional (PMP) certification from the Project Management Institute.

Beth Kosiak, Ph.D., The Lewin Group, has more than 20 years of research and health policy expertise, with a focus on developing and testing quality performance measures and designing and implementing QI efforts for healthcare providers. She was the Associate Executive Director of Health Policy for the American Urological Association, working with AHRQ grantees on innovative ways to incorporate guidelines into electronic medical records. As a senior social scientist at AHRQ, she co-authored the National Healthcare Quality Report (first ed.); served as National Quality Forum Liaison; and led survey development and testing efforts for the nursing home, dialysis facility, hospital, and clinician versions of the survey as the team lead for the Consumer Assessments of Health Providers and Systems. Ms. Kosiak earned a Ph.D. and an M.A. in Sociology from Princeton University.
Other AFYA Services

Formative research
Data collection and analysis
Program analysis and evaluation
Survey research/focus groups
Curriculum development
Training and technical assistance services
Health communications and social marketing
Strategic planning

“Achieving Excellence Through Service”

For more information about AFYA and any of our services, contact:
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