

When is an Evidence-Based Program No Longer Evidence-Based?

Aging services agencies search for ways to deliver healthy living programs during the Covid-19 lockdown.

By Jennifer Davis, August 2020



With support from a [Harvard Pilgrim Health Care Foundation](#) grant, Elder Services of the Merrimack Valley and North Shore (ESMV) has collaborated with community-based organizations in Massachusetts, New Hampshire, and Maine to offer programs that help older people optimize their health and quality of life as they age.

Harvard Pilgrim Health Care Foundation has targeted two evidence-based programs that address key challenges to healthy aging – maintaining balance and supporting caregivers who care for family members with dementia.

- Balance is critical to falls prevention, which is the leading cause of injury and death among older Americans. According to the Center for Disease Control (CDC), this represents 29 million falls, 3 million emergency department visits, 800,000 hospitalizations, and 28,000 deaths.
- Likewise, dementia significantly impacts quality of life for those living with cognitive decline, as well as their families and friends. The Alzheimer’s Association reports that one in ten Americans 65 and older has Alzheimer’s disease – the most commonly diagnosed form of dementia.

A Matter of Balance (MOB) and Savvy Caregiver programs are two evidenced-based programs that address these health challenges. But how do you continue to offer them when the Covid-19 pandemic has most older adults confined to their homes? And can you claim that they’re still evidenced-based?

The term “evidence-based” denotes an approach to medicine, education, and other disciplines that emphasizes the practical application of findings from the best available current research. Evidence-based programs have been rigorously tested in controlled settings and proven effective. The overwhelming efficacy of both the MOB and Savvy programs is based on statistical analysis gleaned from programs delivered in person.

“Technically we can’t call these programs evidence-based because they haven’t been tested, researched, studied, and approved on a virtual platform,” says Crystal Polizzotti, CDP, Healthy Aging Program Manager with ESMV. “But we can still say that they are “evidence-informed,” and large funders like the [National Council on Aging \(NCOA\)](#) and the [Administration for Community Living](#) have given most grantees the OK to move forward with programs remotely, at least until September, 2021. They’re allowing adjustments in funding to be made for virtual delivery and have been very understanding. But they also want to know if programs are working on virtual platforms.”

Crystal serves as operations consultant for the [Evidence-Based Leadership Collaborative \(EBLC\)](#), which is working to validate health and education programs delivered virtually, and explains steps EBLC is taking to accomplish this goal.

“The developers of evidenced-based programs like A Matter of Balance and Savvy Caregiver have created guidance documents for leaders, which are being continuously updated as those who are running these programs report back,” says Crystal. “[NCOA](#) has a full page dedicated to the remote delivery of health promotion programs, and EBLC shares the guidance documents on the [EBLC website](#).”

She goes on to say, “Two EBLC directors, Dr. Kate Lorig from [The Self-Management Resource Center](#) and Lesley Steinman, a research scientist from the University of Washington, have developed a [survey](#) that is an ongoing, living document. Once leaders have filled out the survey, they are contacted every month to resubmit the survey so we can track any changes over time. The survey covers everything from demographics to challenges the seniors they serve report such as chronic conditions, social isolation, and increased depression because of Covid. We’re trying to gather as much information as we can.”

Renee D’Argento is Healthy Living Coordinator for [BayPath Elder Services](#) and [HESSCO](#) (Health and Social Services Consortium), which serve as Aging Services Access Points and Agencies on Aging for a large swath of Massachusetts aging service areas. She was trained as an MOB master trainer and Savvy Caregiver leader through the Harvard Pilgrim Health Care Foundation Grant to ESMV, and is a Chronic Disease Self-Management Program master trainer as well as Diabetes Self-Management Program leader.

On the job for less than a year, she found herself facing the challenge that the Covid lock-down presented just as she was working to increase participation in existing in-person programs. When she first joined BayPath she discovered that staff were not aware of all of the programs offered. She redesigned a survey of programs and was working to get them integrated into case managers intake and referral processes before Covid hit. But she remains optimistic about the future of healthy living programs.

“Here’s the thing, this is going to be the new reality going forward for years to come,” says Renee. “We’re going to continue to have pandemics. With virtual delivery of programs, we’re starting to reach not only the population who have been using senior centers or other places in person to get information, but also others who may not have taken part in programs in the past because they couldn’t attend in person for whatever reason – whether it’s because they were still working, lacked proper transportation, or had mobility issues. So, I feel like we should be offering these programs both in person and virtually from now on, if we can prove that they’re effective when offered online.”

As is often the case, challenges offer opportunity. As senior service providers continue to explore virtual delivery of wellness programs, these programs may actually reach even more people than before Covid-19 changed our lives for now and probably in the months to come. More than ever, older adults need access to programs that help them maintain good health and a sense of wellbeing.

Making Evidence-Based Programs Possible

Recruiting and training A Matter of Balance and Savvy Caregiver leaders has been made possible in part by a [grant](#) from Harvard Pilgrim Health Care Foundation. Funding of regional trainings began in September of 2018. Since then, 38 additional Master Trainers in MOB have been trained, for a total of

76 new program practitioners, coaches and master trainers in Massachusetts, New Hampshire, and Maine.

These programs are examples of the evidence-based programs supported by Elder Services of Merrimack Valley and North Shore's Healthy Living Center of Excellence, which means their benefit has been proven or informed by research and evaluation. These programs are designed to promote healthy aging among older people.