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Combining realism with rigour: evaluation of a national kitchen garden program in Australian primary schools

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Abstract

This paper will report on the framework and methods developed to evaluate the implementation and impact of a national garden and kitchen program in Australia.

Keywords

realism, rigour, evaluation, combining, national, schools, kitchen, garden, program, australian, primary

Disciplines

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Combining realism with rigour: evaluation of a national kitchen garden program in Australian primary schools

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This paper will report on the framework and methods developed to evaluate the implementation and impact of a national garden and kitchen program in Australia. The evaluation framework was developed to report on the child and health-related impacts of the program, as well as the factors considered important during implementation and evaluation of national health promotion initiatives in school settings. More effective health initiatives in schools provide potential to shape a better future for our children.

The Stephanie Alexander Kitchen Garden (SAKG) national program aims to promote pleasurable food education in 178 Australian primary schools. An evaluation was undertaken to determine the impact of the program and to inform future health promotion initiatives in schools. The impact of the program was evaluated at three levels: the students and families; the schools, including teachers, volunteers and the school community; and the education and health system. Cutting across these three levels were questions about program delivery (what did you do?), program impact (how did it go?), sustainability (can you keep going?), capacity building (what has been learnt?), generalisability (are your lessons useful for someone else?) and dissemination (who did you tell?).

Using a cross-section of Initiative (N=28) and Comparison (N=14) schools, semi-structured interviews (N=86) were undertaken with school based personnel and key stakeholders (N=29), together with focus group discussions with students (30 groups; N=229) and surveys of parents (N=300), students (N=491), teachers (N=62) and volunteers (N=60).

The SAKG model achieved overall improvements in student's food choices (as reported by students; $t = 2.26$, $p = 0.024$) and kitchen lifestyle behaviours (as reported by parents ($t = 2.35$, $p = 0.019$)); female students and students from provincial schools had statistically greater improvements in food choices than other students; and girls showed higher scores than boys ($t = 6.19$, $p < 0.001$).

At the program level, the SAKG incorporated many aspects of the Health Promoting School framework, including: a 'vision'; program champions; engaging the wider school community; involvement of specialist staff and volunteers; linkage with other school programs; and integration across the curriculum. Program enablers for some schools (e.g. clear implementation requirements) were barriers for other schools (e.g. 'too inflexible' or 'limited adaptability'). Key issues for program implementation and sustainability were identified – recognition and integration of the program and specialist staff within the school; specialist skills to recruit and support volunteers; (building & health) project management skills; and articulation of the program within the Australian Preventive Health agenda.

A skills based education initiative can lead to improvements in children's eating behaviours, food skills and confidence. Structured hierarchical, multi-component evaluation is needed to provide practical insights into effective health promotion initiatives in schools.