

Nutrition Services, Population and Public Health Product Development Process (PDP) Frequently Asked Questions

Frequently Asked Questions:

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1. What is the Nutrition Services, Population and Public Health Product Development Process?

Nutrition Services (NS) Population and Public Health (PPH) PDP is a process NS PPH working group members use to address nutrition related issues and/or promote healthy eating behaviours. It supports the identification of the most efficacious and feasible ways to meet the target audiences’ needs and promote positive behaviour changes using the evidence gathered from the literature and the perspectives from groups whose nutrition related issues are being targeted. A clear understanding of the needs of the end-users (the consumer), as well as those of customers and other stakeholders, increases the likelihood that the product(s) reaches the intended consumers and is effective in promoting behaviour change.

NS PDP is an iterative process, meaning some sections may need to be repeated if there are still questions to be answered in that step (sometimes this is not clear until another step is being worked on). The important thing is that all steps have been investigated and completed to the degree required for a project. This process helps to define the scope of the project and its activities based on the target audiences’ needs.

See NS PPH Product Development Process At a Glance for a visual representation.

2. What supports are available with using NS PPH PDP?

The NS PDP provides templates (both required and optional), supporting documents and examples within each step.

- a) Required Template(s) – worksheets/ forms to document a summary of the step, including the actions taken by the group, main findings, and recommendations for moving forward.

Required Templates	
PID (Project Initiation Document) (Step 1)	Audience Analysis (Step 3)
Action Plan PPH (Step 2)	Data Extraction Table (Step 3)
INPWG Stakeholder Identification List (Step 2)	Data Extraction Table (Step 4)

- b) Optional Templates (s) – worksheets/ forms that are used only as needed (based on the nature and scope of the project).
- c) Supporting Documents – provide further understanding of the steps, including additional background information and ideas for activities (e.g. how to conduct focus groups, evaluation tools).
- d) Examples – templates that have been completed for projects in the past. These include projects led by Healthy Living and NS.

The NS PPH strategy director and the PPH Nutrition Provincial Lead for this project are working with WGs to explore ways to provide project groups with support as they work through the steps.

3. What is NS PDP based on?

NS PDP is based on a Health Product Development Model that was developed and used by Provincial Public and Indigenous Health Marketing and Reproductive Health/Early Childhood (now Healthy Living). The Model integrates commercial product development principles with health promotion theories and practice. The evaluation of Health Product Development Model found it is a helpful approach to frame the development of new provincial products; it ensures that the audiences' needs were addressed at all stages of product conception, development, and implementation.

The NS PDP tailors the Health Product Development Model for NS PPH working group projects through the integration of NS working group processes, documents, and guidelines into the model.

The Alberta Cancer Prevention Legacy Fund Health Marketing Team is also working towards a more formalized and comprehensive Health Product Development Model. Nutrition Services, Healthy Living, and Alberta Cancer Prevention Legacy Fund health marketing will continue to work together to achieve consistency as appropriate.

4. What are 'products'?

Products are anything that help end users (consumer) achieve specific positive health outcomes. It can be tangible or intangible. Examples of tangible products include manuals, handouts, displays, information sheets, presentations, guidelines, classes, books, promotional and educational materials. Most tangible products are included in Nutrition Education Resources (NER). Examples of tangible products that do not include NER are referral forms, newsletters for professionals (i.e. Putting Evidence into Practice), protocols/ procedures, or guidelines for professionals. Examples of intangible products include support networks, coalitions or groups, policies, social media and/or some services and programs. A combination of different products is usually required to support end users with behaviour change.

5. Who is our audience? Why are they important?

Our audience includes anybody directly or indirectly impacted by the product. They are all parties who have a direct or indirect tie, influence, or stake in the process steps and/or outcome of the change process. This would include consumers, customers, and other stakeholders.

Consumers are end users of a product while *customers* are those who use a product to better the health of the consumer and/or assist in the distribution of a product to the consumer. *Stakeholder(s)* is a broader term that may include the consumer and customers, but also includes other people or groups of people or organizations (termed other stakeholders) that may influence the success of this work. Stakeholders may be internal or external to AHS. Stakeholders are often used for the purposes of consultation, environmental scan, and review of drafts, and/or communication/dissemination.

As behaviour is shaped by individuals' attitudes, skills, and resources as well as by physical and social environments, choosing an effective product to promote behaviour change will be driven by needs and beliefs of consumers (end user) and customers (distributor of product). A detailed audience analysis uncovers individual and environmental barriers and enablers to health behaviour change. An understanding of individual and community needs, and context can support the development of end products that best meet the needs of the consumers and customers.

6. When is NS PDP needed?

NS PDP is to be used within PPH working groups to guide the development and implementation of nutrition related health promotion products that support behaviour change. Working group members need to use their critical analysis skills to assess relevancy of process to the work at hand (i.e. process may be bypassed if evidence is already there) as not every issue will need to go through PDP. This will likely be assessed on a case-by-case basis.

The following are examples of where the NS PDP may not be needed:

- NS PDP is *not intended* for use when developing nutrition guidelines. Nutrition products are informed by evidence and best practice and will use nutrition guidelines where available.
- NS PDP may not be possible to complete in its entirety when an immediate need has been identified. In this case, the principles of the process would be applied and as many of the steps as possible.
- NS PDP may not be needed where a product(s) has previously been identified as an effective tool for Stakeholder groups. Case-by-case, a discussion with NS Director, PPH Strategy will determine strategy direction.

7. Is PDP applicable to work outside of working groups?

NS PPH PDP is based on health promotion principles and is applicable to all NS PPH working group work. However, the rigor in which the process and steps are followed varies based on each projects' context. Documentation of recommendations, decisions and rationale for decisions made is important for all work moving forward, though requirements may vary. Ask your working group chair or manager if you have any questions specific to your project.

8. How long will PDP take?

How the individual steps are carried out will vary substantially by the identified need, the stakeholders involved, the scope of the work, timeline for the project, the working group's capacity, the setting and financial resources. While it may take more time to complete and document each step, it can help to define the scope of the project. A well-defined project can save time by focus and streamline project activities. PDP also increases the likelihood that the product(s) reaches the intended consumers and is effective in promoting behaviour change.

Efficiencies can also be realized through exploring work that have already been completed by other projects. For example, evidence review or audience analysis that has been completed for the same target population.

9. When would you use NS PDP vs. Nutrition Education Resources guideline, “Developing Nutrition Education Resources”?

NS PPH PDP integrates all NS working group processes, documents, and guidelines into one process. Prompts are provided within each step on when working group needs to consult other guidelines or other groups within NS (e.g. NER, communication advisor, PPH Strategy Director).