Reducing Fear and Loathing of Evaluation: Making Good and Practical Evaluation Choices

By:

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Objectives

- Program evaluation and typical "roadblocks" in doing good evaluation
- CDC's Evaluation Framework as way to surmount roadblocks
- How key Framework steps ensure strongest program evaluation
- HDSP as example



Today's Focus

Top Roadblocks on the Road to Good Evaluation



Roadblock #7

Defining evaluation too narrowly...



Roadblock #6

Not understanding where evaluation "fits in" ...



What is Evaluation?

- Evaluation is...
 - the systematic investigation of the merit, worth, or significance of an "object"
 - Michael Scriven
- Program is...
 - any organized public health action(s)/activity(ies) to achieve some intended result

Planning, Evaluation, and Performance Measurement are Companion Processes... What do

- Planning asks what do we do/should we do to reach our goals
- Perf Measurement monitors <u>how well</u> it's going
- Evaluation tells us why it's going well or poorly.



How do we do it?



How are we doing?

we do?



Roadblock #5

Making the "perfect" the enemy of the "good"



Every Little Bit Helps...

"...The biggest mistake is doing nothing because you can only do a little..."

Anonymous



Roadblock #4

Evaluating only what you can "measure"...



Measuring the Right Thing...

"...Sometimes, what counts can't be counted. And what can be counted doesn't count...."

Albert Einstein



You Get What You Measure...

"...In Poland in the 1970s, furniture factories were rewarded based on pounds of product shipped. As a result, today Poles have the world's heaviest furniture..."

(New York Times, 3/4/99)



Roadblock #3

Neglecting intermediate outcomes....

Good evaluation broadens our focus:



Not just: Did it work?

How many tomatoes did I get?



But also: Is it working?

Are planting, watering, and weeding taking place?

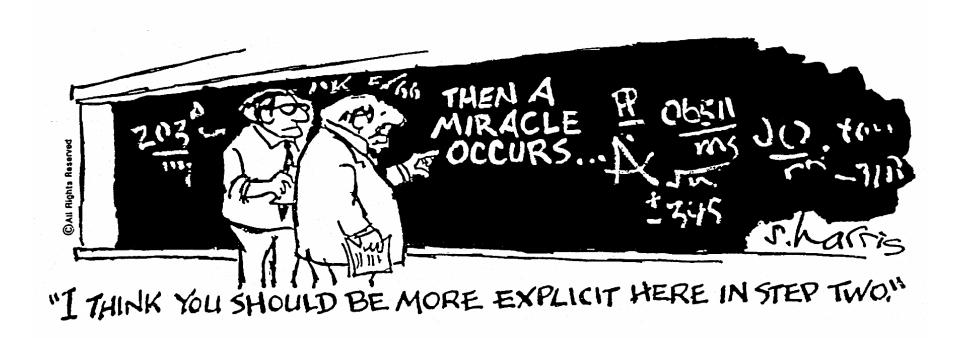
Have the blossoms "set"?

Are there nematodes on the plants?



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Forgetting Intermediate Outcomes





Finding Intermediate Outcomes

- What is the ultimate outcome I'm seeking?
- Who (besides me)needs to take action to achieve it?
- What action do they need to take?

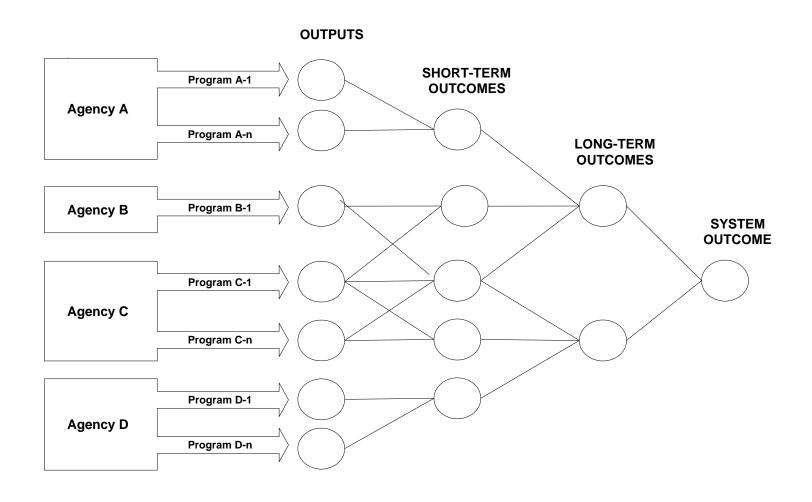


Roadblock #2

Confusing attribution and contribution...



"Networked" Interventions





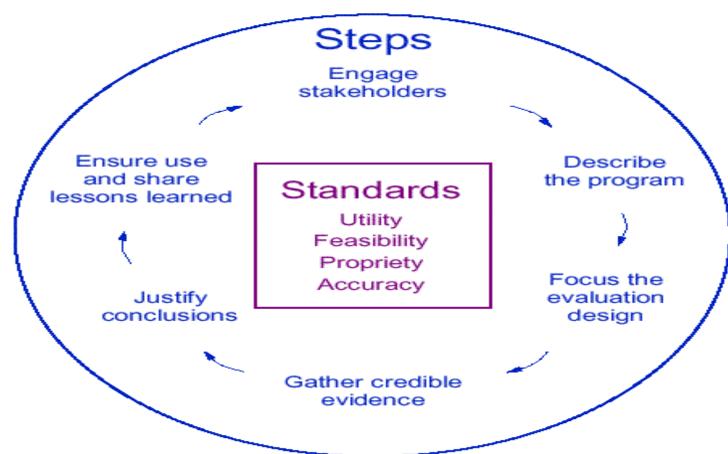
Roadblock #1

Not asking: "Who (else) cares...."



Framework for Program Evaluation

FIGURE 1. Recommended framework for program evaluation





Underlying Logic of Steps

- No eval is good unless... results are <u>used</u> to make a difference
- No results are used unless... a market has been created prior to creating the product
- No market is created unless.... the eval is well-focused, including most relevant and useful questions
- And...



Establishing the Best Focus Means...

Framework Step 1: Identifying who cares about our program besides us? Do they define program and "success" as we do?"

Framework Step 2: What are milestones and markers on the roadmap to my main PH outcomes?



The Four Standards

No one "right" evaluation. Instead, best choice at each step is options that maximize:

- Utility: Who needs the info from this evaluation and what info do they need?
- Feasibility: How much money, time, and effort can we put into this?
- Propriety: Who needs to be involved in the evaluation to be ethical?
- Accuracy: What design will lead to accurate information?



Step 2. You Don't *Ever* Need a Logic Model, BUT, You *Always* Need a Program Description

Don't jump into planning or eval without clarity on:

- The big "need" your program is to address
- The key target group(s) who need to take action
- The kinds of actions they need to take (your intended outcomes or objectives)
- Activities needed to meet those outcomes
- "Causal" relationships between activities and outcomes



Logic Models and Program Description

Logic Models: Graphic depictions of the <u>relationship</u> between your program's activities and its <u>intended</u> effects

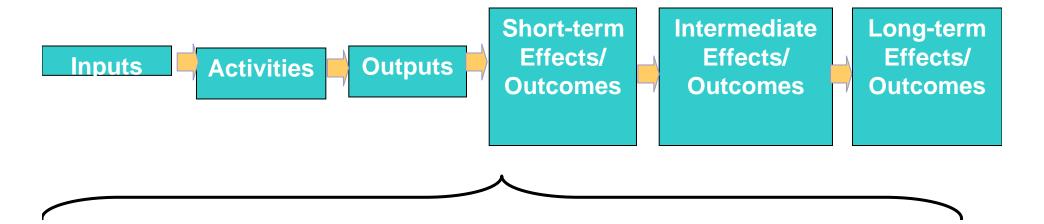


Hence...

Logic models make things clear, they don't make them true!

Logic model is always evolving, as evaluation and reflection provide insights on what works and doesn't work

Step 2: Describing the Program: Complete Logic Model



Context
Assumptions
Stage of Development



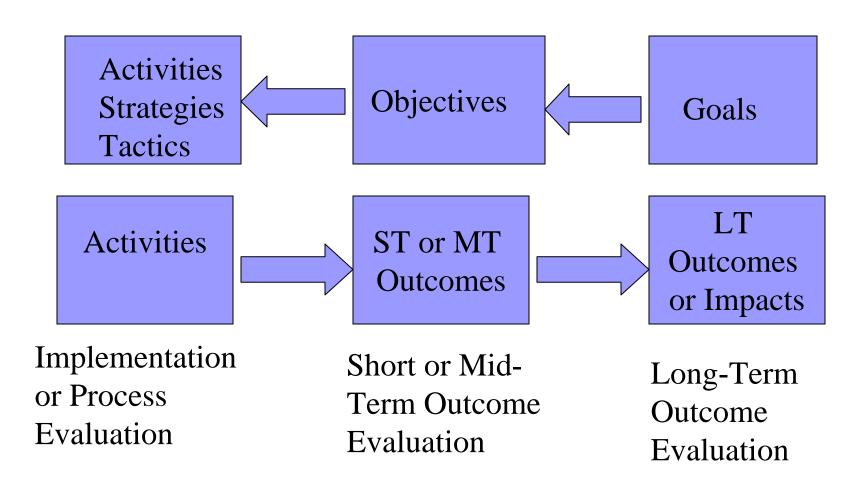
Logic Model Terminology

Activities: What the program and its staff actually do

Effects/Outcomes: The changes that result in someone or something other than the program and its staff.



Linking Planning and Evaluation: Evaluation





(More) Logic Model Terminology

■ Inputs: The "platform" of resources that are needed to mount the program's activities.

Outputs: The tangible, countable "products" that are produced by the activities. Don't confuse with "outcomes"



Constructing Logic Models: Three Ways to Find Activities/Outcomes

- Examining program descriptions, MISSIONS, VISIONS, PLANS, ETC and extracting these from the narrative, <u>OR</u>
- 2. Starting with outcomes, ask "how to" in order to generate the activities which produce them, *OR*
- 3. Starting with activities, ask "so what" in order to generate the outcomes that are expected to result



Next: Do Some Sequencing...

Sequence activities into 2+ columns--Which activities have to logically occur before other activities can occur?

Sequence outcomes into 2+ columns--Which outcomes have to logically occur before other outcomes can occur?



Listing Activities and Outcomes: Lead Poisoning

- Activities
 - Outreach
 - Screening
 - □ Case management
 - □ Referral for medical tx
 - Identification of kids with elevated lead (EBLL)
 - □ Environmental assessment
 - □ Referral for env clean-up
 - Family training

- Effects/Outcomes
 - □ Lead source identified
 - Families adopt in-home techniques
 - Providers treats EBLL kids
 - ☐ Housing Authority
 eliminates lead source
 - □ EBLL reduced
 - □ Developmental "slide" stopped
 - □ Q of L improved

Global Logic Model: Childhood Lead Poisoning Program

Early Activities

If we do...

Outreach

Screening

ID of elevated kids

Later Activities

And we do...

Case mgmt of EBLL kids

Refer EBLL kids for medical treatment

Train family in inhome techniques

Assess environment of EBLL child

Refer environment for clean-up

Early Outcomes

Then....

EBLL kids get medical treatment

Family performs in-home techniques

Lead source identified

Environment gets cleaned up

Lead source removed

Later Outcomes

And then...

EBLL reduced

Develop'l slide stopped

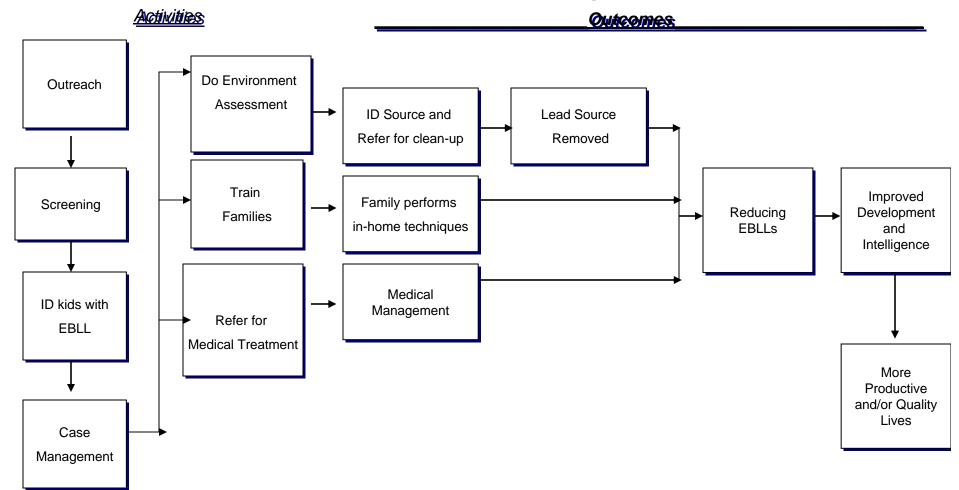
Quality of life improves

For Planning and Evaluation "Causal" Arrows Can Help

- Not a different logic model, but same elements in different format
- Arrows can go from:
 - □ Activities to other activities: Which activities feed which other activities?
 - □ Activities to outcomes: Which activities produce which intended outcomes?
 - □ Early effects/outcomes to later ones: Which early outcomes produce which later outcomes

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Lead Poisoning: "Causal" Roadmap





Global Logic Model: Provider Education

Early Activities

Do outreach to providers

Develop newsletter

Develop Tool Kit **Later Activities**

Distribute newsletter

Conduct immuno trainings

Nurse educator LHD presentations

Physician peer ed rounds

Early Outcomes

Provs read newsletters

Provs attend trainings and rounds

Provs receive and use tool kits

LHD nurses do private prov consults **Later Outcomes**

KAB increases

Know policies

Know registry

Motivation increases

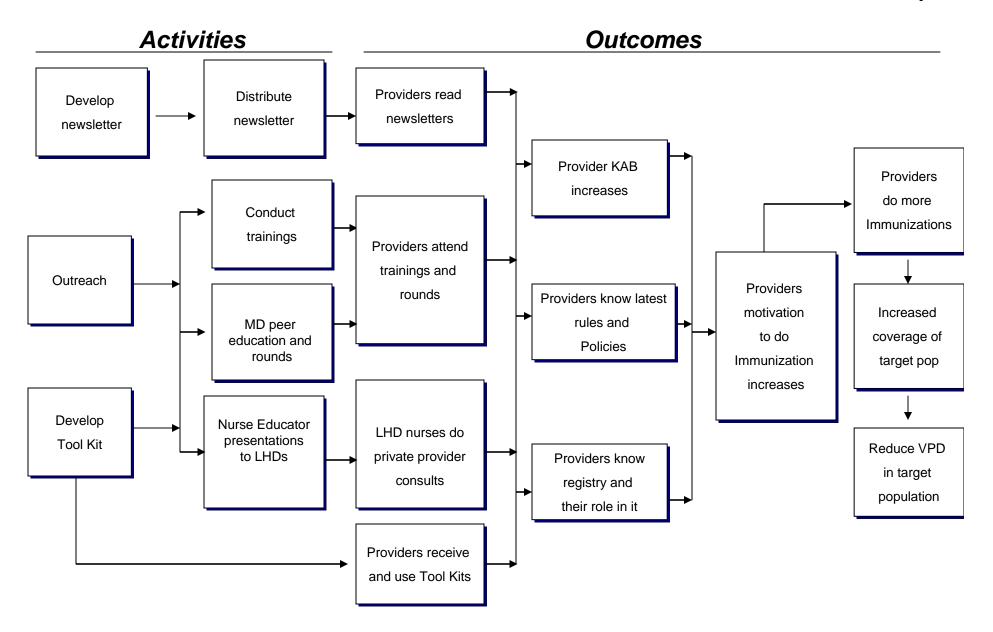
Do more immuno

Coverage increases

VPD reduced

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Provider Education: "Causal" Roadmap



HDSP—Activities and Outcomes

HDSP—Logic Model

DHDSP

Provide funding to states for CB and BI

Provide TA in coordination of monitoring and other data systems

Collaborate with states and partners to develop and disseminate recommendations for policy and environmental interventions, including the measurement of progress

Collaborate with appropriate organizations to coordinate cohesive national program

Provide training and TA regarding coordination of interventions, policy and environmental strategies, and population-based strategies

Provide Training/ TA in program evaluation

Provide funding to evaluate promising practices

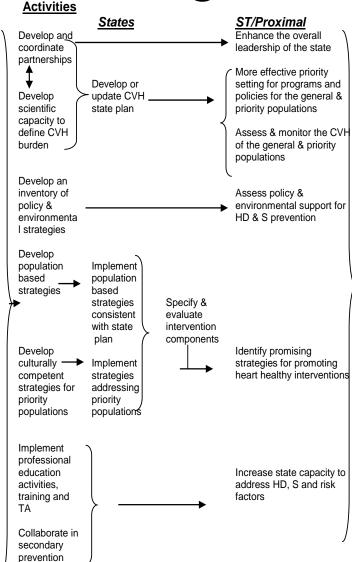
Develop MIS system for performance monitoring and reporting

Develop HD&SP indicators in healthcare and worksite settings

Collaborate with Division partners to improve S&E activities

Promote HDSP in a variety of settings

strategies



Outcomes

MT /Intermediate

LT/Distal

Increase in resources being spent by states & partners for CVH promotion, disease prevention and control



Implement intervention "models that work" in improving CVH and preventing or controlling CVD Increase policy & environmental change to promote HDSP through change agents

of care

Control high blood pressure

Control high cholesterol

Improve emergency response

Occurred pre-transport deaths

Decrease disparities in HD&S and related

Improve

Increase

signs,

knowledge

symptoms

and need to call 9-1-1

quality

Decrease death and disability
transport deaths

Decrease disparities in HD&S and related

risk factors /

Reducing Fear and Loathing of Evaluation

Putting Your Logic Model to Use in Program Evaluation



Using the Logic Model

In F'work Step 1. Engage Stakeholders:

- □ Who are major stakeholders for our efforts?
- □ Where in this model do they want to see success?
- Who needs to be engaged upfront to ensure use of results?

In F'work Step 3. Setting Eval Focus:

- □ Today, 1 year, 5 years, where in the model should I be measuring changes?
- □ If no change, where should I look for problems?



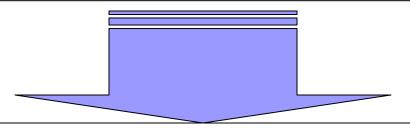
Which S'holders Matter Most?

Who is:

Affected by the program?

Involved in program operations?

Intended <u>users</u> of evaluation findings?



Of these, who do we most need to:

Enhance *credibility?*

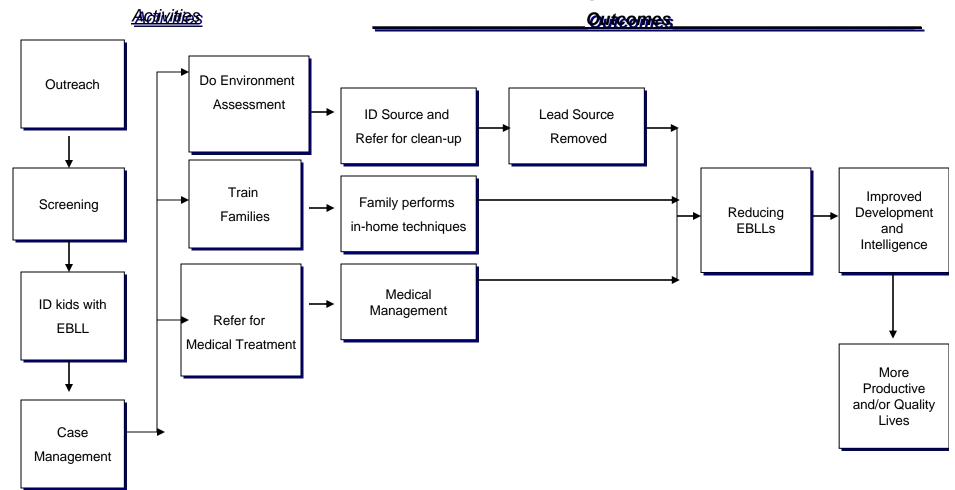
Implement program changes?

Advocate for changes?

Fund, authorize, expand program?

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Lead Poisoning: "Causal" Roadmap



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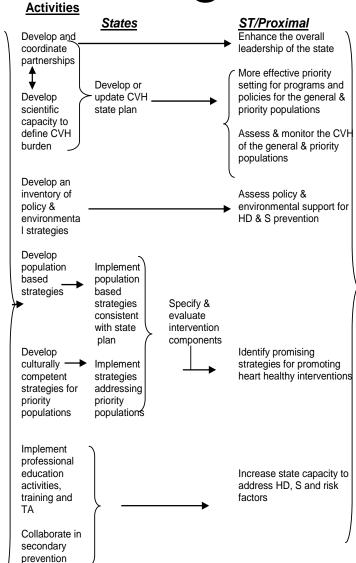
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Control high blood pressure Control high cholesterol Improve

Improve

quality

of care

emergency response Increase

knowledge signs, symptoms and need to call 9-1-1

Decrease Decrease death and predisability transport deaths Decrease disparities in HD&S

and related

risk factors /

Decrease disparity in HD&S deaths

Eval Plan vs. Eval Focus

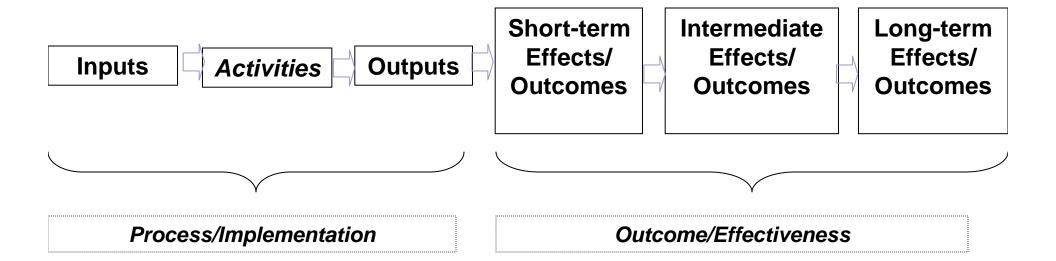
- Eval <u>Plan</u>: How I intend to measure <u>all</u> aspects of my program---all the boxes (and arrows) in my logic model?
- Eval <u>Focus</u>: The part of my program that needs to be measured in <u>this</u> <u>evaluation</u>, this time?
- Over life of the program:
 - □Eval plan may never change
 - Eval focus is always changing

Step 3. Key Domains in Eval Focus

- Implementation (Process)
 - □ Is program in place as intended?
- Effectiveness (Outcome)
 - □ Is program achieving its intended short-, mid, and/or long-term effects/outcomes?
- Efficiency
 - How much "product" is produced for given level of inputs/resources?
- Causal Attribution
 - Is progress on outcomes due to your program?

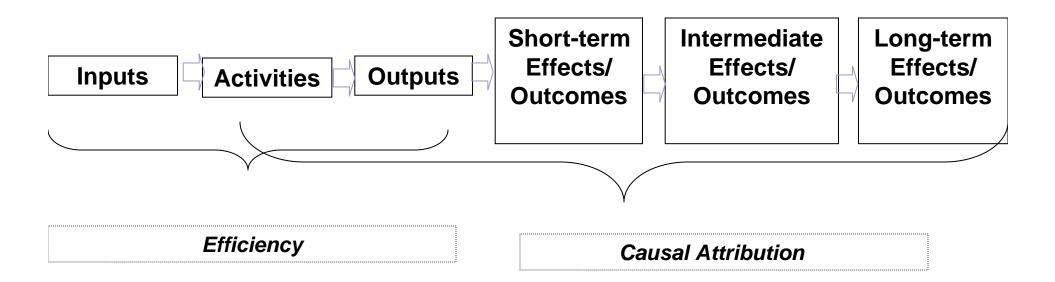


Evaluation Domains: Boxes





Evaluation Domains: Arrows





Setting Focus: Some Rules

Based on "utility" standard:

- Purpose/User: Who wants the info and what are they interested in?
- *Use:* How will they use the info?
- Needs of Key S'holders: What are key s'holders most interested in?

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Setting Focus: "Reality Checking" the Focus

Based on "feasibility" standard:

- Stage of Development: How long has the program been in existence?
- Program Intensity: How intense is the program? How much impact is reasonable to expect?
- Resources: How much time, money, expertise are available?



Some Evaluation Scenarios

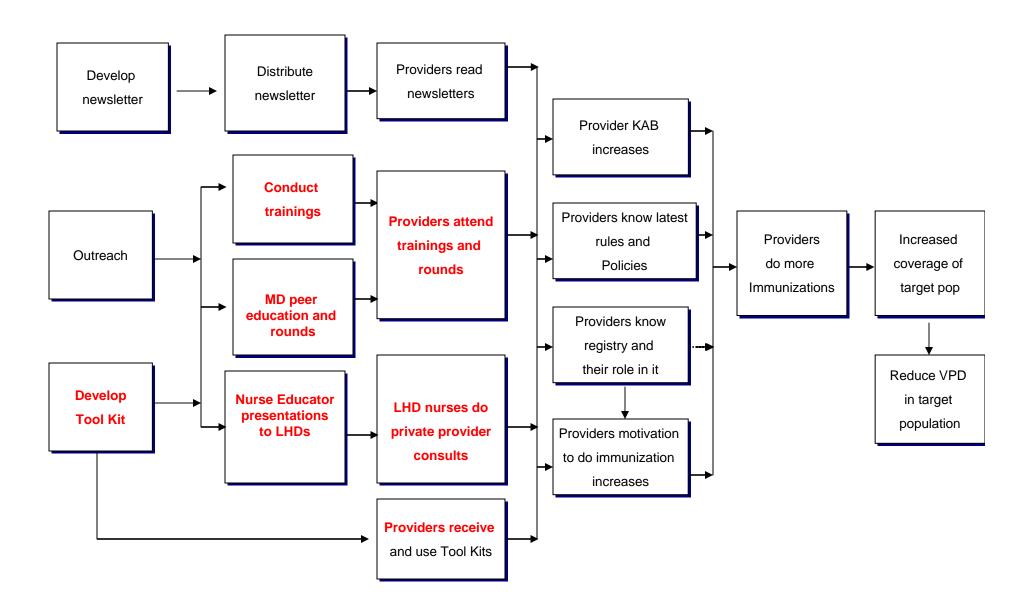
Scenario I: At Year 1, other communities want to adopt your model but want to know "what are they in for"



Scenario 1:

- Purpose/User: The "other community"
- Use: To examine your experience and make a determination whether they want to adopt this project or not?

Provider Education: "Causal" Roadmap



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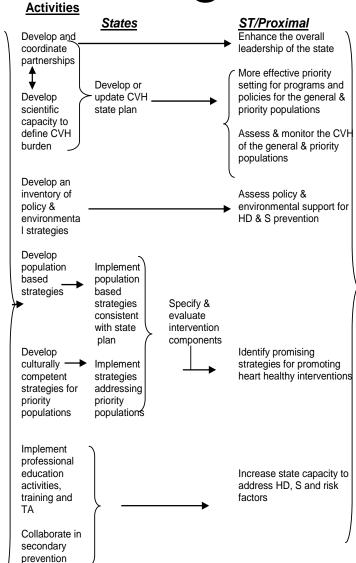
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Improve

quality

of care

emergency response Increase

knowledge signs, symptoms and need to call 9-1-1

Decrease Decrease death and predisability transport deaths Decrease disparities in HD&S

and related

risk factors /

Decrease disparity in HD&S deaths



Some Evaluation Scenarios

Scenario II: At Year 3, you are seeking funding from a large foundation with a community improvement focus so that you can extend the program to a second community.



Scenario 2:

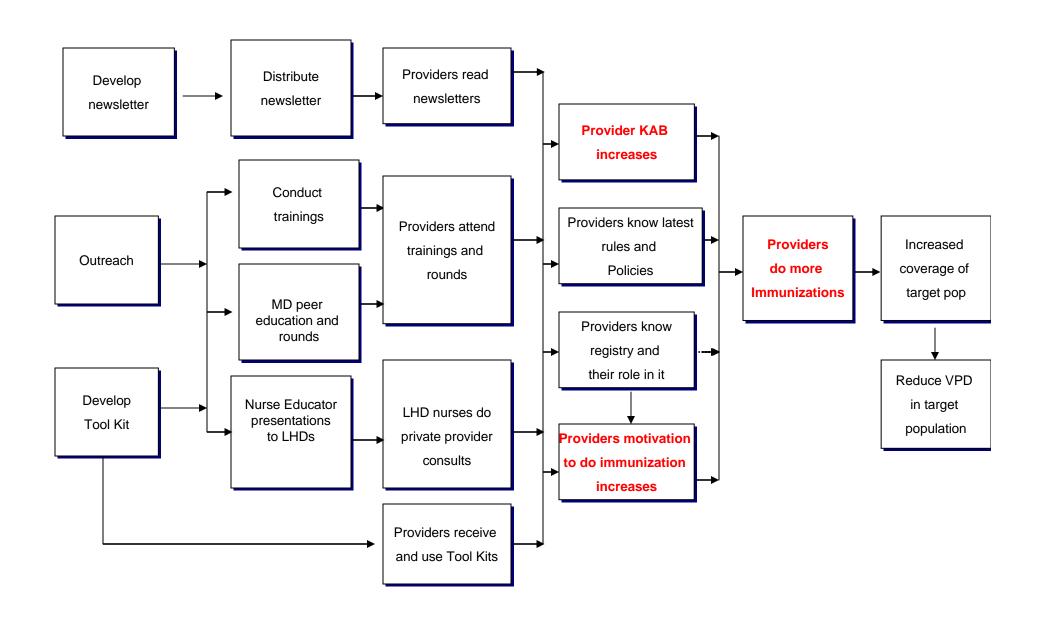
- Purpose/User: Either/both:
 - □ Your org
 - □ The foundation

■ *Use:*

- You want to muster evidence to prove to the foundation you are effective enough to warrant their funding
- They want you to show them evidence that proves sufficient effectiveness to warrant their funding

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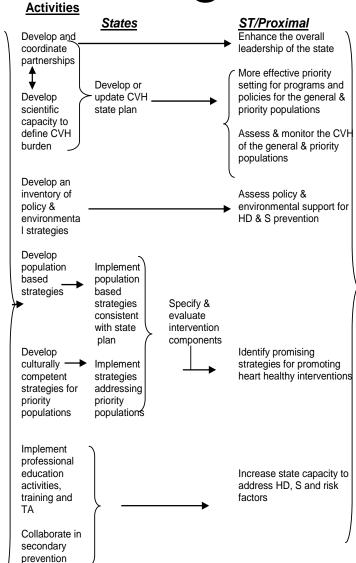
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Reducing Fear and Loathing of Evaluation

Next Steps



Where We've Been...

What we know:

- What our program is about
- Who care about it besides us
- What we need to measure in short and long run



Where Next....

- Identify evaluation questions
- Define indicators and data sources for questions
- Analyze data
- Draw conclusions and results
- Turn results into action



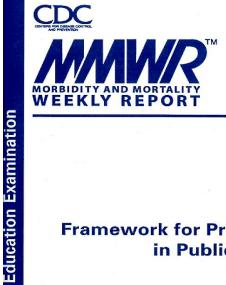
But...

Good results from Steps 4-6 more likely because we did a good job on Steps 1-3!!!

Reducing Fear and Loathing of Evaluation

Life Post-Session

Helpful Publications @ www.cdc.gov/eval



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Recommendations and Reports

Framework for Program Evaluation in Public Health



An Evaluation Framework for Community Health Programs

Helpful Resources: Web Based

NEW! Intro to Program Evaluation for PH Programs—A Self-Study Guide: http://www.cdc.gov/eval/whatsnew.htm

Innovation Network:
http://www.innonet.org/

W.K. Kellogg Foundation Evaluation Resources: http://www.wkkf.org/programming/overview.asp x?CID=281

University of Wisconsin-Extension: http://www.uwex.edu/ces/lmcourse/

Community Tool Box http://ctb.ku.edu

