Improving the Prospects for a Successful Relationship between Community and Evaluator

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Abstract:
The success of a community-based program evaluation can be enhanced by using a screening tool to delineate the program's evaluative needs, resources, and commitments.

Article:
Growth in community-based programming and the demand for valid and meaningful evaluations have fueled the need to ensure that these evaluations are conducted in timely manner and are useful to program administrators, staff, and other community entities (Brunner and 1989; Fawcett and others, 1996). Community projects and settings pose and unique challenges in designing and implementing sound evaluations. Community-based programs usually evolve in response to a mutually recognized need by community stakeholders, with emphasis on the social, emotional, and political aspects of service delivery (Cottrell, 1976; Rothman and Tropman, 1987). Such differences in programmatic emphasis and direction may create a lack of conceptual and practical fit between service providers and evaluators. This disparity is illustrated by what one hospital-based outreach program staff person described as the difficult process of "evaluator shopping" to find an evaluator who is competent and adheres to a philosophy and orientation of service delivery methods compatible with that practiced by an organization or program (their "program theory") (Chen, 1994; Weiss, 1997).

Contours of Community-Based Evaluation
In community-based evaluation, the evaluator who serves the community has a responsibility to facilitate, support, and engage in the problem-solving aspects of these activities rather than accept definitions of activities, objectives, or criteria that were developed by outside funders and other stakeholders. In this regard, the evaluator becomes a collaborator in the enabling process of capacity building and empowerment, ideally leading to skill development and self-determination (Fetterman, 1996; Stringer, 1996; Wallerstein, 1992). As a collaborator, the community-based program evaluator can benefit significantly from the recent expansion of work in collaborative and participatory forms of evaluation (Bailey, 1992; Cousins and Earl, 1992, 1995; Fetterman, 1996; Horsch, 1997).

Evaluation practice in community settings requires a diverse, eclectic toolbox of knowledge and skills that will allow evaluators to engage community stakeholders in a flexible yet rigorous evaluation process. The difference between community-based evaluation and other types of evaluation lies in understanding and accommodating the situation or fit of communities, of their leadership, and their perception of needs—termed the cultural reality of communities. This distinction has its intellectual foundation in ecological psychology

Evaluators become involved with community-based programs by being asked to be the outside evaluator by an authoritative person at the federal, state, or local level; by asking to become involved (for example, in response to a grant announcement); or as part of the community team, adding the target problem to their evaluation agenda (Herman, Morris, and Fitz-Gibbon, 1987; Rossi and Freeman, 1993; Whyte, Greenwood, and Lazes, 1991). How evaluators become involved usually dictates the evaluative approach (formative or summative), design (experimental, quasi-experimental, or something else), and model (traditional or community-based) they will use. Evaluators may recognize that a more participatory and collaborative evaluation is needed in the community-based setting, but there is concern that the scientific rigor of evaluations produced with such models might be compromised (Cousins and others, 1996; Weiss, 1983). Community programs need engagement with an evaluation approach that is eclectic, flexible (allowing for as needed changes), integrative of relevant concepts and components from existing evaluation models, incorporative of scientifically sound principles, and balanced, maintaining the integrity and rigor that evaluators have demanded for the past three decades. From work with a number of small to moderate-sized service-oriented programs, we have learned that lack of evaluation engagement may result in unplanned and unavoidable difficulties as the evaluation process progresses.

Successful Community-Based Evaluations

One of the primary concerns that evaluators of community programs and agencies have is to ensure that the evaluation endeavor is deemed mutually successful by the evaluators themselves and by the community entity. It is understood that to achieve this assurance, engagement in a process of negotiation toward clarity of purpose for the evaluation, as well as its expected results, tasks, and outcomes, is required. For our purposes this process is termed *front loading the evaluation*. It is part of the planning and preevaluation assessment and is based on the concepts that underlie the performance of an evaluability assessment (Rossi and Freeman, 1993; Wholey, 1987). Although used primarily at the state and national levels, this technique can be adapted for use at the local level (Leviton, Collins, Laird, and Kratt, 1998). Evaluability assessment is a set of procedures that includes and takes into account the interest of community entities in order to maximize the utility of the evaluation (Rossi and Freeman, 1993). This type of assessment necessitates a participatory or collaborative approach to arrive at the ultimate goal of clarifying the intended use of the evaluation information. For our purposes, this assessment is likely to contribute to the following:

- A helpful solving of problems that might otherwise inhibit useful community-based evaluation
- Directions for improved program performance or success
- A clarification of the program's intent from the point of view of the community entity
- An exploration of the cultural reality of the program to clarify the plausibility of stated objectives and the "feasibility of performance measurement" or achievement of these objectives (Wholey, 1987)
- An assessment of the likelihood of a good fit between the evaluators' talents and the communities' perceived needs for, commitment to, and use of evaluation (Patton, 1997).

In regard to the last, in our experience with several rural social and health services programs serving African Americans, we have found that additional labor must be put into understanding and achieving this fit if the evaluation effort is to have a chance of succeeding. However, given the unique and varied nature, function, and characteristics of community entities and the circumstances under which evaluators are engaged with them, this front loading does not always occur in a timely manner. The consequence of this delay is a diminution of the relationship between community entity and evaluator and the potential success of the evaluation process.

We have observed that the demand for accountability of community-based services and related programs has been spurred by the growing emphasis of public and private funders (mostly foundations) on outcome-based community service programs. As one executive director of a twenty-five-year-old community-based program serving African Americans stated, "They [foundations] know we have done it and can do it [effectively serve clients], but now they want us to prove it. So we need help." We have also observed an exponential increase in requests for assistance in community-based evaluations. As a result, we developed the Evaluation Pre-Screening Tool (EPST), which is used prior to finalizing evaluation agreements and allows for the assessment of the likelihood of a good fit between the evaluators' talents and the communities' perceived commitment to, and needs and resources for, evaluation. In short, it allows both to come to a mutual agreement as to the feasibility of conducting an evaluation of a program or service and to lay the groundwork designed to increase the probable success of such an endeavor.

Review of the many returned EPSTs has taught us that the logical order of the questions should move from a descriptive overview of the existing program and its services to a description of the anticipated evaluation assistance that will be needed. In addition, the order of the questions is designed to help the community entity focus, going from the broad generalizations of the program or service area to specifics about what is needed. The latter is something that should occur but often does not when evaluators work with community-based programs.

Use of the Evaluation Pre-Screening Tool
Community entities are asked to complete the EPST in reference to those who are, or are expected to be, involved with the project(s) (when possible). Throughout the EPST document, the involved staff are referred to as "YOUR TEAM." We make this request because most often when the evaluator is asked to provide assistance to community-based programs, it is the program or executive director who provides him or her with the information to plan and implement the evaluation. The problem is that these staff members are not responsible for the agency's or program's "grunt" work (for example, provision of services to clients, recruitment of clients, interviewing clients using evaluation data forms). Also, if the project is a collaborative one, these executive or program directors may lack adequate information on the functions, resources, and politics of their collaborators. The line (nonadministrative) staffs do the "grunt work." Our experience suggests that because of the size, nature, structure, and function of many of these community-based programs, the line staffs are very aware of and involved in the day-to-day issues of the program or agency Leaving them out of the initial planning constrains their buy-in to the eventual plan and may result in the exclusion of key insights, causing difficulties at different points in the evaluation process. In addition, we have found that because change is the one constant for community entities, initial agreements of understanding between potential collaborators often have to be adjusted as the particulars of projects are finalized. Excluding these collaborators (or their representatives) can also lead to potential implementation difficulties down the line.

The EPST's three sections describe the existing programs and services, the programs and services to be included in the proposed evaluation collaboration, and the proposed program and services that will be needed to develop and maintain the proposed evaluation collaboration. In addition, we include a list of logistical and related information that will be needed. We list potential agreements that may or will be needed to bring closure to the decision phase of the preassessment process, which may not have been covered, in the main body of the EPST. After each question, blank lines are provided for the recording of responses arrived at by the team. The respondents are told to use extra pages if needed. Also, respondents are asked to provide additional materials (for example, brochures, reports) that would help clarify the nature, scope, content area, and history of the program and the services it provides.

Because not all programs are of the same type, have the same focus or purpose, or have the same reasons for asking for evaluation assistance, the questions within the EPST are slightly modified for fit. For example, one program to which we were asked to provide assistance resided within a large state-level institution that had many layers of bureaucracy, from which approval was needed in order for work to get done. In the second section of the EPST, we usually ask the potential collaborators to describe the resources they would have available to support the evaluation effort. In most cases this question is answered in relation to personnel, financial (most often outside funders), and community supports; however, in the case of this program, we had to be more specific and add a question about the internal administrative support for the program's evaluation plans. In such institutions, a vision at the program level may not be shared at the institutional level. It is at the institutional level where the final approval for the program's going forward with any innovations or changes must be approved. Therefore, any evaluation efforts, no matter how carefully conceived or rigorously planned, can be disapproved for many reasons, some of which have nothing to do with the program. Unfortunately this is what happened in the case of the program mentioned above. One of the reasons for disapproval was that those at the higher administrative level did not want to invest any additional funds in it. By discovering this early on, all involved were clear that the consultation had to be delayed until the issue of financial support from the institution was resolved.

After the completed EPST is returned and analyzed, the evaluator provides verbal and written feedback to the community entity for the purpose of providing an appraisal of the status of the program and its services, clarifying the goal and objectives of the program for all involved, and providing information that will allow agencies or programs to decide if they want to discontinue the evaluation consultation, delay the consultation, or proceed with the consultation and, if so, at what level (for example, conduct a needs and asset assessment only or conduct a summative or a formative evaluation). Entities generally complete the EPST within 1 to 2 meetings. The results are then mailed to the evaluator, who reviews them in preparation for further work.

EPST Section I: Description of Existing Programs and Services. In this section, community entities are asked to provide the evaluator with a descriptive overview of its existing programs and services. This information assists the evaluator in gaining a critical understanding of the existing structural, social, political, and historical approach to, or philosophy of, service aspects and components of the target program or service. We ask community entities to address the following six questions, reminding them that for each question they are to answer in reference to those who are, or are expected to be, involved with the project ("YOUR TEAM"):

1. What are the critical/core activities, staffing, and administrative arrangements, etc. of your current program(s)?
2. How many participants (average # of clients) and staff (by type/title) are taking part in the programs/agencies activities? *(Please include in your answer* a summary of staff roles and specific activities clients take the lead or play a major role in—for example, consumer advisory councils.)
3. Which parts of the current program does your team consider its most distinctive characteristics (for example, its staff, location, type of clientele, etc.)—those that make it unique among programs of its kind? *(Please include in* your answer the distinctive characteristics of all those who would be participating in the proposed project.)
4. Who are your typical contact persons or agencies (collaborators) and what is your administrative relationship with them? That is, is there direct or indirect accountability with your office? Is your program a decentralized (autonomous of the health department or other funding agency) or centralized (direct responsibility to the health department or other funding agency) one?
5. Given that your program provides multiple types of services, how do the program components vary (if at all) (describe each: purpose, tasks and expected outcomes)? *(In your reply please include* the primary person(s) responsible for each component and the length of time this(ese) person(s) had worked with this(ese) components.)
6. (a) What are the goals of your current program? (b) What objectives and subobjectives are essential to the attainment of program goals? and (c) What gaps exist in the attainment of objectives or subobjectives?

A case example illustrates the need for these questions. In one project aimed at providing health outreach services to citizens in a small rural county, we did not use the questions contained in this section of the EPST in our planning with the lead agency. This agency had commitments from a number of past collaborating agencies to work with it on this recently funded federal project. These collaborators were not just co-service agencies, but because of the size of the county, members of the administrative staff work on committees and task forces, and many socialized with each other on a regular basis. A key component of the project's first year was to conduct a summative evaluation that would include the gathering of data to establish base rates for a list of health conditions and health and social services. These data were to be used to determine clients' health conditions and access to, and use of, health and social services that were to be the targets of the funded intervention.

The plan was to conduct surveys on a random-probability sample of households to gather this information. All of the preparation for this task was carried out between the evaluator and the lead agency, as was agreed on by the project's collaborators. It was an innovation of the grant that a local evaluation committee consisting of representatives from each of the collaborators and some consumers developed the data collection survey tool. However, members of the local team reported to, but were not members of, the executive committee who oversaw and made decisions about the functioning of the project. It was never clear how much the executive committee understood about the first phase of the project, which would have been a key area of discussion if the first section of EPST questions had been used. Thus, when it came to implementation of the survey, none of the collaborators, save one, was involved. The primary reason for this lack of involvement was the fact that executive committee members had not thought through the resources they would need to commit to this phase of the project. They had given their verbal and conceptual support to the project, but found they could not meet their required in-kind contributions.

As a consequence, the lead agency and the evaluator had to draw up an alternative plan for a reduced sample size. The administrative staffs of the collaborators were only peripherally rather than fully engaged in the dialogue regarding the logistics of carrying out the well-laid-out assessment plan developed by the local evaluation committee. Therefore, the details of what they would need to contribute were significantly underestimated. Despite the close working relationship that collaborators had with one another, because they did not fully explore or get questioned about the existing resources and capacities, implementation problems occurred at a point in the early stages of the project.

Of course, there is no guarantee that all resource problems would have been avoided by asking the questions in section I of the EPST, but the exploration process might have proved worthwhile in anticipating them and thus planning in advance how to address them.

EPST Section II: Description of Program and Services. In this section, community entities are asked to provide the evaluator with a description of the rationale, goals, and objectives of the program; the potential evaluation; and the focused program or service areas of the potential evaluation. Information on the resources available to support the evaluation is also requested. This information assists the entity and the evaluator in gaining a critical understanding of the level of forethought and planning prior to seeking the consultation.

This set of questions provides a road map for the work that is to be carried out and the extent to which the work can be accomplished. Potential collaborators are asked to examine and discuss both internal and external supports and barriers. Issues of maintenance and sustainability of effort are addressed. In this section of the EPST we ask community entities to address the following five questions:

1. *In relation to the proposed program evaluation collaboration:* (a) What component(s) of the program would your team like the proposed evaluation collaboration to address? (b) What will the proposed evaluation collaboration add? Do you see these as short- or long-term additions? (c) How will the components of the proposed evaluation/research collaboration be integrated into your existing program?
2. *In relation to the proposed evaluation collaboration:* Why does your team think evaluation collaboration is needed? That is, what is your team's rationale for what makes it important, who will benefit, and why?
3. In *relation to the proposed evaluation collaboration:* (a) What does your team see as the primary goals of the evaluation collaboration? (b) What objectives and subobjectives does your team think are essential to the attainment of the evaluation collaboration goals? and (c) What are the anticipated

short- and long-range outcomes (or impact) of the proposed evaluation/research collaboration? That is, what does your team hope the institution of the proposed evaluation consultation will accomplish?

4. *In relation to the evaluation collaboration:* (a) What does your team anticipate as the supports (for example, resources or politics, etc.) for the development and maintenance of the proposed evaluation collaboration beyond the initial term? (b) What are the anticipated obstacles (for example, political, technical, or logistical, etc.) to the evaluation collaboration's development and maintenance (long-term evaluation collaboration)?
5. In *relation to the proposed evaluation collaboration:* (a) What does your team see as the central activities related to the proposed evaluation collaboration? (b) What resources (for example, budget, personnel) and materials (for example, on-site computers, other equipment) does your team anticipate to be available to carry out the evaluation collaboration activities?

EPST Section III: Description of Program and Services. In this section, community entities are asked to provide the evaluator with a description of the assistance they anticipate will be needed from the evaluator. Entities are asked to be as thorough as possible, basing their answer on their team's understanding of what will be needed to develop and maintain the proposed evaluation collaboration. Although this section assists the evaluator by asking the entity to describe why it needs help from the evaluation consultant, it usually brings up important questions for the entity itself, such as the qualifications, ability, potential compatibility (fit), and requested resources by the evaluator (for example, personnel and financing). We have found that often the evaluator is requested in order to get some clarity on what can and cannot be asked for. This is particularly true for small to moderate-sized programs that have limited funds to spend on the evaluation.

At the community-based program level, many are beginning to understand the need for data from sound evaluations that can justify or support the existence of their program or the services it delivers. We have found, however, that these community entities do not understand what resources (personnel or financial) are needed in order to conduct even a basic evaluation. Many have had to scale back the level of their request because they lack the resources.

For example, a community-based service agency serving persons with a hematalogic blood disorder was asked by one of its hospital-based charity funders to conduct an efficacy study of one of its home health services. This was a first for the agency, and our evaluation team was asked to assist since we have had a five-year relationship with it. Meetings were conducted to clarify goals and objectives, what service components were to be assessed, why the funder was interested in these particular services, what was known about the services (from the literature, previous assessments, and the agency's experience to date), what the expected outcomes of the assessment were, and what resources were available to conduct such an endeavor. The community-based agency made it very clear that it did not want the assessment to be a "research study that gives us nothing we can use." The funders' expectations, however, translated into the need for a randomized control trial that would involve resources the agency did not have and was not initially willing to provide, as well as a sample size that was much larger than any obtainable by the agency.

To reconcile this difference, the evaluator used information gathered from the first two sections of the EPST, as well as being aided by a history with the agency and the background information on home health services provided at the community level, and with conducting rigorous assessments at the community level. At a follow-up meeting, a compromise was reached: the funders agreed to a quasi-experimental design (using quantitative and qualitative methods) that integrated their concerns with the agency's need for applied information. The agency's administrator was also able to get the funder to provide moderate support for the new design, reassign staff to assist with the special project, and allow staff to work with the evaluator to determine the most appropriate indicators and targets that would be needed for as rigorous an assessment as possible.

EPST Section IV: Needed Logistical and Related Information. Based on early pilot testing, we found that more facts are often needed to bring closure to the front-loading process, which may not be contained in the documentation from the previous three sections of the EPST. Therefore, the closing section of the EPST contains a list of logistical and related information that is needed to allow for agreements and decisions to be made that concludes the decision phase of the consultation. This list may be modified to address the unique characteristics of the program under consideration. The most common elements of the list that are requested (or to be considered) are as follows:

1. A description of the questions that will be addressed based on the collected data.
2. A description of the primary goals and objectives of the program.
3. The data collection methods you have planned, including sources, site, instruments or other data collection methods.
4. A time line for all planning, development, and maintenance of assessment and evaluation consultation activities.
5. An understanding and list of the tasks and responsibilities that program staff or others involved will undertake.
6. A schedule of required reports to and meetings with stakeholders (including auxiliary staffs, clients, and the community).
7. The budget available for planning, development, and long-term maintenance, and other anticipated costs of the program, as well as the evaluation consultation.
8. In line with the expected outcomes, a plan describing the best use of the collected data in the service of the clients and for other programmatic purposes (for example, grant development).
9. An outline of the *services* and assistance the evaluation team can provide.

Conclusion

In the use of the EPST, our focus is primarily on small to moderate-sized service-oriented programs and agencies; however, we have used it with programs and agencies of all sizes and types. Although no approach is perfect, the use of the EPST has resulted in about an 85 percent rate of achieving the evaluation process outcomes described above. Results from use of the EPST commonly fall into four broad categories:

- For a number of reasons (for example, limited funding, uneven commitment of personnel or administration, lack of political will) the community entity is not ready to engage in evaluation at the present time or at all.
- The EPST helped the community entity clarify redefine, or confirm the goals and objectives of the program, and, as one director of an urban, hospital-based, teenage pregnancy-prevention program stated, “It helped us confirm why we started this program in the first place.”
- Planned evaluation will need to be placed on hold until issues or problems influencing the community entity’s ability to engage in the evaluation process are resolved.
- What the community entity really wanted was either something less than an evaluation (for example, program monitoring or a needs assessment) or a specific type of evaluation (for example, a summative assessment of specific data or a longitudinal assessment that is parallel with the planned growth and development of the targeted program or one of its services).

Our experience suggests that many of the community-based entities find the EPST results helpful, since often these programs do not have the time or resources to conduct or obtain a professional audit.

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