

Reducing Fear and Loathing of Evaluation: *Making Good Evaluation Choices for EPHTN Efforts*

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Why We Evaluate...

“... The gods condemned Sisyphus to endlessly roll a rock up a hill, whence it would return each time to its starting place. They thought, with some reason...



Why We Evaluate...

***...there was no punishment
more severe than eternally
futile labor....”***

The Myth of Sisyphus

Objectives

- Typical “roadblocks” in doing good evaluation
- CDC’s Evaluation Framework as way to surmount roadblocks
- How to apply key Framework steps to ensure strongest program evaluation
- Set-up for afternoon TA session...



Today's Focus

**Top Roadblocks on the
Road to Good Evaluation**



Roadblock #7

Defining “program
evaluation” too narrowly...

Defining Evaluation

- **Evaluation** is the systematic investigation of the merit, worth, or significance of any “*object*”

Michael Scriven

Program is any organized public health action/activity implemented to achieve some result



Roadblock #6

Not understanding where
evaluation “fits in” ...

These must be integrated...

■ Continuous Quality Improvement (CQI) cycle.

- **Planning**—*What* actions will best reach our goals and objectives.
- **Performance measurement**— How are we doing?
- **Evaluation**—*Why* are we doing well or poorly?





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...”

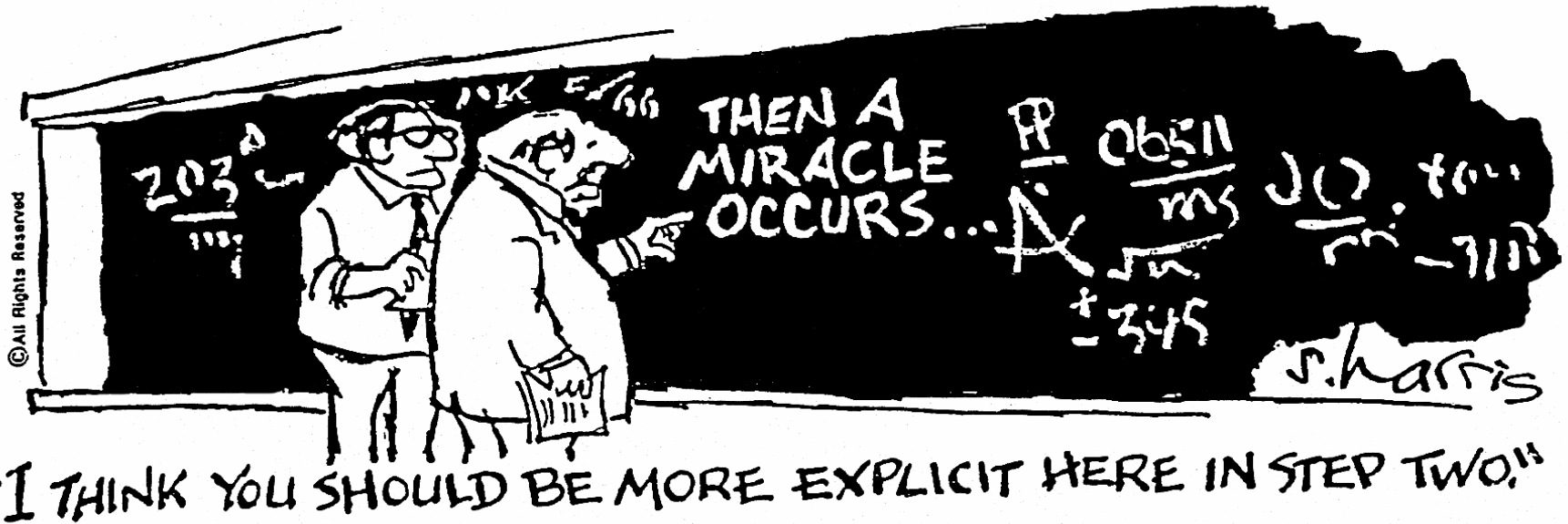
(New York Times, 3/4/99)



Roadblock #3

Neglecting intermediate
outcomes....

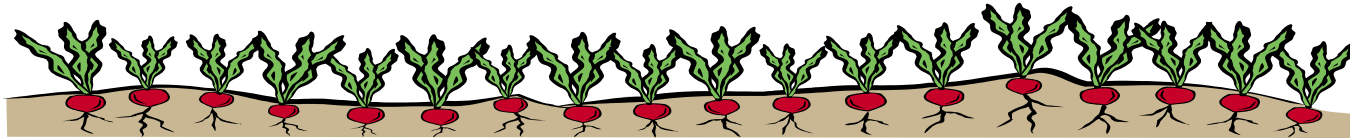
Forgetting Intermediate Outcomes



Good evaluation broadens our focus:

Not just: Did it work?

How many tomatoes did I get?

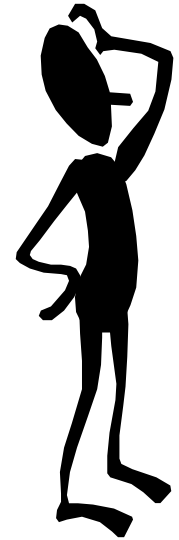
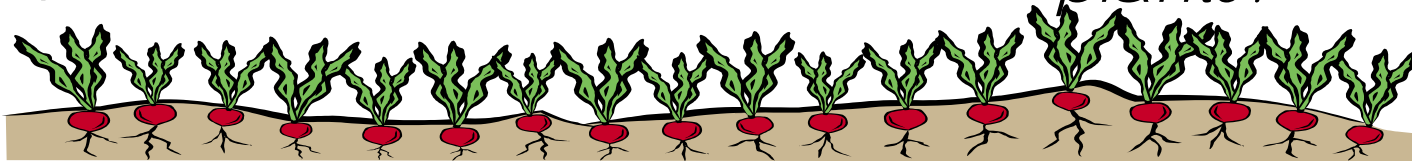


But also: Is it working?

*Are planting,
watering, and
weeding taking
place?*

*Have the
blossoms
"set"?*

*Are there
nematodes
on the
plants?*





Finding Intermediate Outcomes

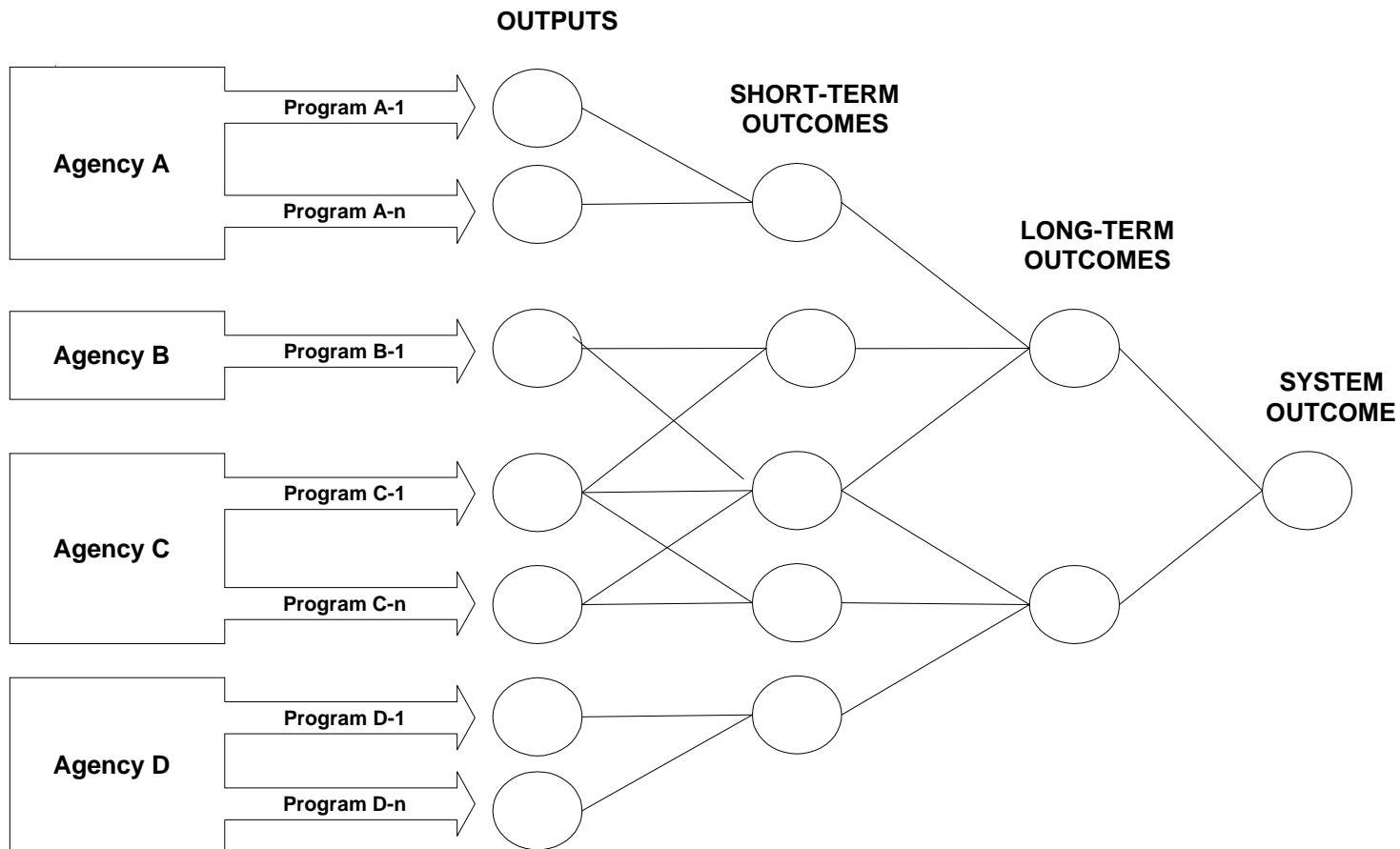
- What is the ultimate outcome I'm seeking?
- Who (besides me) needs to take action to achieve it?
- What action do they need to take?



Roadblock #2

**Confusing attribution
and contribution...**

“Networked” Interventions



Roadblock #1

Not asking:

“Who (else) cares.....”

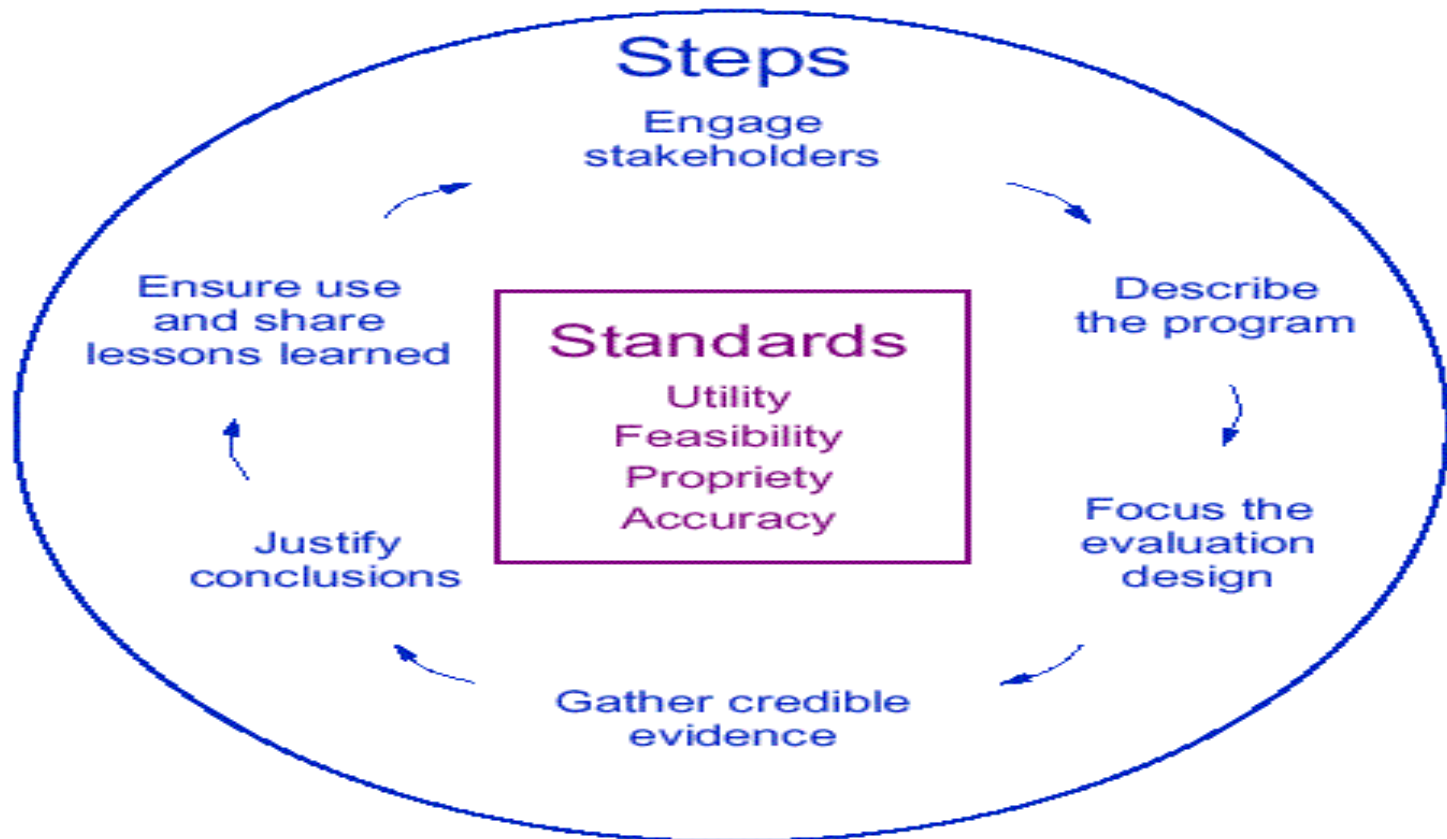


Reducing Fear and Loathing of Evaluation

The CDC Evaluation
Framework

Framework for Program Evaluation

FIGURE 1. Recommended framework for program evaluation



Underlying Logic of Steps

- **No eval is good unless**... results are **used** 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...

- **Engaging Stakeholders**—Framework
Step 1: Identifying who cares about our program besides us? Do they define program/“success” as we do?”
- **Program Description**—Framework
Step 2: What are milestones and markers on the road to my main PH outcomes?

The Four Standards: *Matching Evaluation to the Situation*

Best options at each step 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?

You Don't *Ever* Need a Logic Model, BUT, You *Always* Need a “Program Description”

- 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* to make those outcomes happen
- *“Causal” relationships* between activities and outcomes

Logic Models and Program Description

- ***Logic Models*** : *Graphic depictions of the relationship between your program's activities and its intended effects*

Constructing Logic Models: *Start with a Simple Table...*

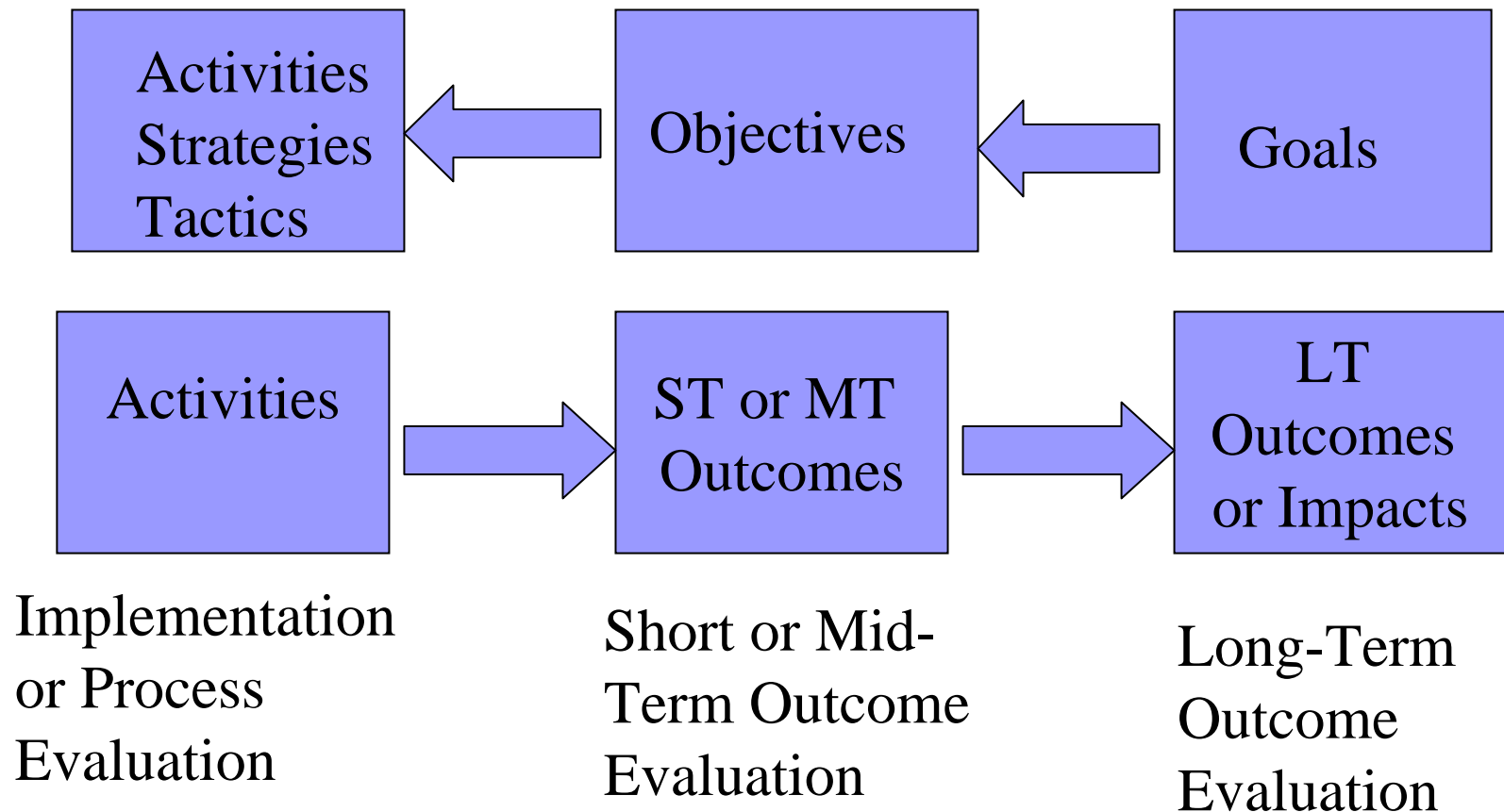
■ **Column 1: Activities:**

- What does the “program” and its staff do?

■ **Column 2: Targets and Outcomes:**

- Who are we trying to change?
- How do we want them to change?

Linking Planning and Evaluation: Evaluation



Case Example:

Lead Poisoning—The Issue

- Lead poisoning is a widespread environmental hazard facing young children, especially in older inner-city areas. The main sources of lead poisoning in children are paint and dust in older homes with lead-based paint. Lead poisoning effects can be ameliorated through a combination of medical and nutritional interventions. But, ultimately, the source of lead in the environment must be contained/ eliminated through renovation or removal of the lead-based paint by professionals, although some reduction can be realized through various intensive housekeeping practices.

Case Example:

Lead Poisoning—The Program

- County X has a problem with high numbers of lead-poisoned children and has received money from CDC for a Childhood Lead Poisoning Prevention Program. The program aims to screen children, identify those with elevated blood lead levels, assess their environments for sources of lead, and case manage both their medical treatment and the correction of their environment. While as a grantee they can assure medical treatment and reduction of lead in the home environment, the grant cannot directly pay for medical care or for renovation of homes.

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*

Then...Do Some Sequencing...

- Divide the **activities** into 2 or more columns based on their **logical** sequence. Which activities have to occur before other activities can occur?
- Do same with the **outcomes**. Which outcomes have to occur before other outcomes can occur?

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 in-home techniques

Assess environment of EBLL child

Refer environment for clean-up

Early Outcomes

Then....

Providers treat EBLL kids

Family performs in-home techniques

Lead source identified

Housing authority removes lead source

Later Outcomes

And then...

EBLL reduced

Develop'l slide stopped

Quality of life improves



You May Be Done: *Less is More...*

Some move to “flow chart” logic models

- Not a different logic model, just different formatting of the same information
- Conveys more detail on “cause” and relationship

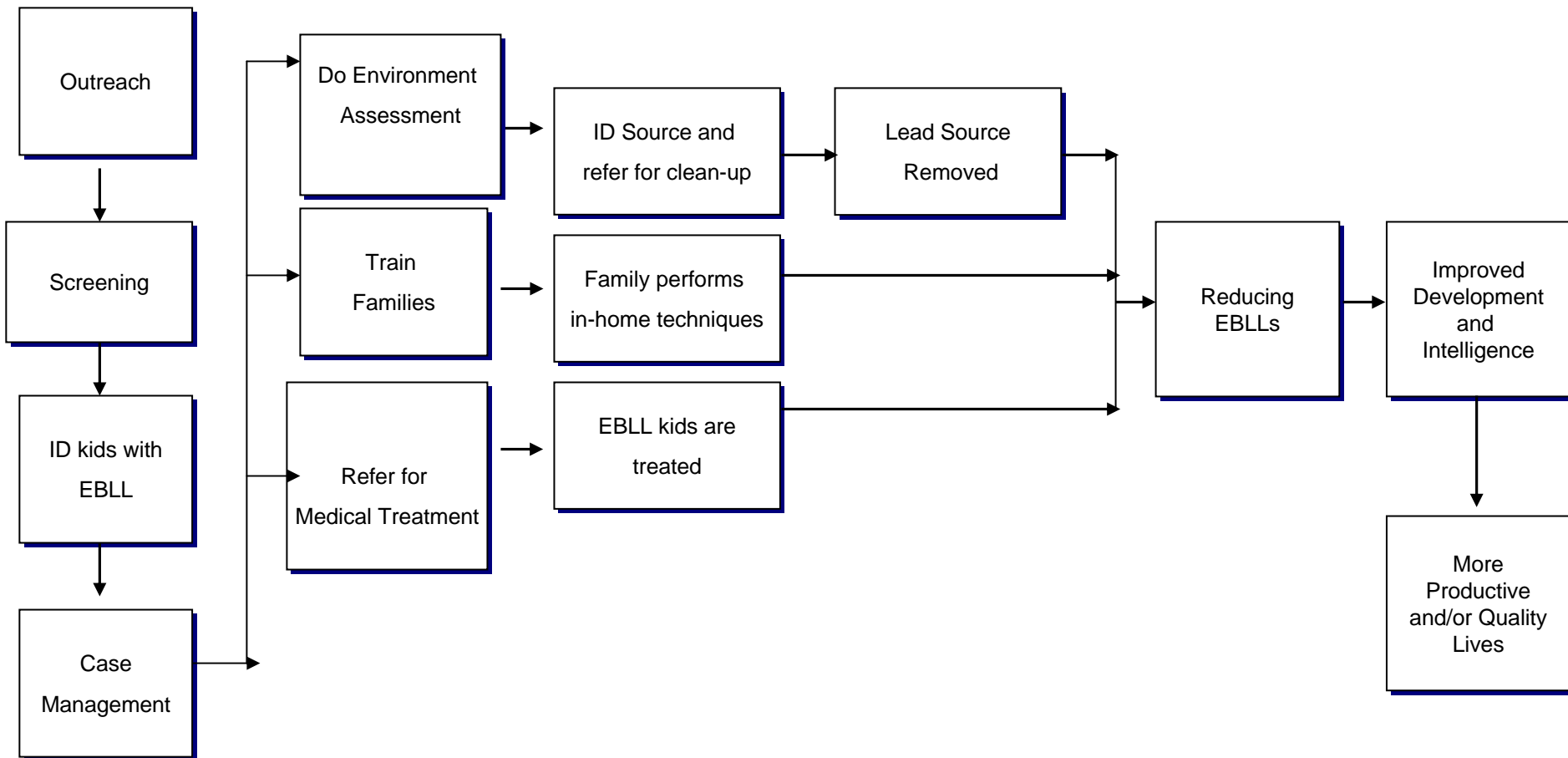
Global Logic Model: Childhood Lead Poisoning Program

Inputs	Early Activities	Later Activities	Outputs	Early Outcomes—	Later Outcomes
Funds	Outreach	Do case mgmt	Pool (#) of eligible kids	Providers treat EBLL kids	EBLL reduced
Trained staff	Screening	Refer for medical treatment	Pool (#) of screened kids	Family performs in-home techniques	Develop'l slide stopped
R'ships with orgs for med tx and clean up	ID of elevated kids	Train family in in-home techniques	Referrals (#) to medical treatment	Lead source identified	Quality of life improves
Legal authority		Assess environ't	Pool (#) of "leaded" homes	Housing authority removes lead source	
		Refer house for clean-up	Referrals (#) for clean-up		

Lead Poisoning: "Causal" Roadmap

Activities

Outcomes



Why Bother?

- **Clarity** on the program and what “success” means
- **Consensus** among team and stakeholders on the program and what “success” means
- Makes it easier to address planning and eval questions **you must address anyway**
 - Where should I focus my evaluation?
 - What is my vision/mission and goals and objectives?
 - Where is my critical path?

EPHTN Logic Model: Raw Material

- **Vision:** Communities are better protected from adverse health effects because of/through the integration of public health and environmental information systems.
- **Mission:** To provide information from a nation-wide network of integrated environmental monitoring and public health data systems so that all sectors can take action to prevent and control environmentally related health effects.

EPHTN Logic Model: Raw Material

- ***Goals: A mix of insights on our “activities” and our “intended outcomes”***
 1. Build and Maintain a Sustainable, National Environmental Public Health Tracking Network.
 2. Increase Environmental Public Health “Tracking” Capacity.
 3. Disseminate Credible Information
 4. Advance Environmental Public Health Science and Research.
 5. Bridge the Gap Between Public Health and the Environment.

EPHTN Activities

■ CDC and Grantee Activities:

- Partnerships **(G-5)**
- Communication **(G-3)**
- Education and Training
- Legislation and Policy
- Research **(G-4)**
- Data and Technology
- Methods

EPHTN Outcomes

- An EPH tracking network with will be created and sustained **(G-1)**
- All actors/all levels will have skills, knowledge, capacity and motivation to use tracking network effectively **(G-2)**
- All actors/all levels will use tracking network effectively
- PH and env info systems are integrated **(Vision, G-5)**
- Links between health and environmental hazards are detected **(G-4, G-5)**
- Public health policies, programs, and other actions are taken **(Mission)**
- Communities are protected **(Vision)**

Global Logic Model: EPHTN

Early Activities

If CDC does this...

Partnerships

Communication

Education and Training

Legislation and Policy

Research

Data and Technology

Methods

Later Activities

And grantees do this...

Partnerships

Communication

Education and Training

Legislation and Policy

Research

Data and Technology

Methods

Early Outcomes

Then....

An EPH tracking network with will be created and sustained

All actors/all levels will have skills, knowledge, capacity and motivation to use tracking network effectively

All actors/all levels will use tracking network effectively

Later Outcomes

And then...

PH and env info systems are integrated

Links between health and environmental hazards are detected

Public health policies, programs, and other actions are taken

Communities are protected

Global Logic Model: EPHTN

Early Activities

If CDC does this...

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Later Activities

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Early Outcomes

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Global Logic Model: EPHTN

Early Activities

Later Activities

Early Outcomes

Later Outcomes

If CDC does this...

And grantees do this...

Then....

And then...

Partnerships
Communication
Education and
Training
Legislation and
Policy
Research
Data and
Technology
Methods

Partnerships
Communication
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An EPH tracking network will be created and sustained

All actors/all levels will have skills, knowledge, capacity and motivation to use tracking network effectively

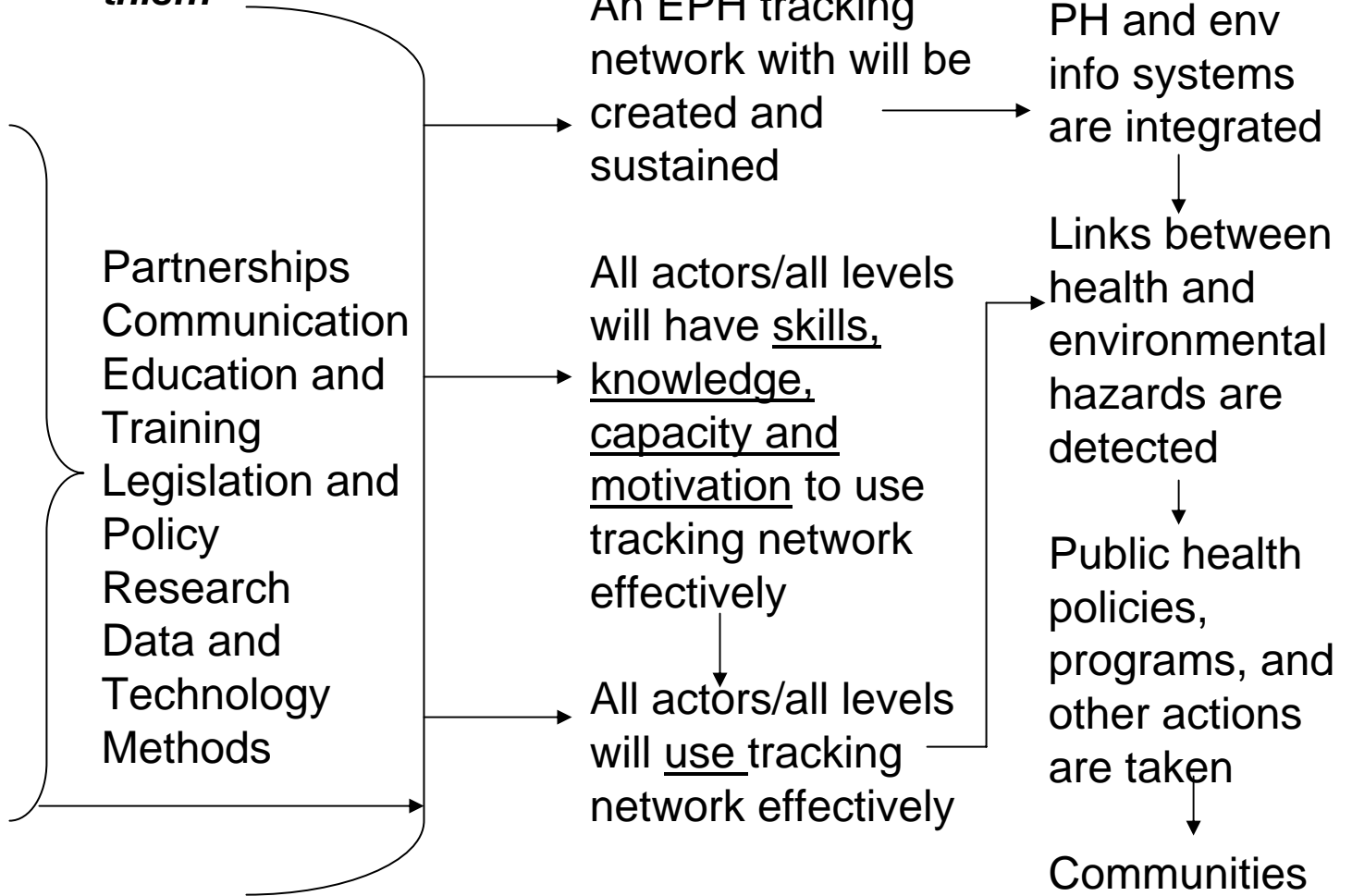
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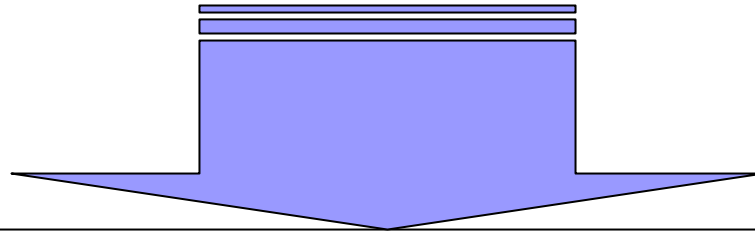
Which S'holders Matter Most?

Who is:

Affected by the program?

Involved in program operations?

Intended users of evaluation findings?



Of these, who do we most need to:

Enhance credibility?

Implement program changes?

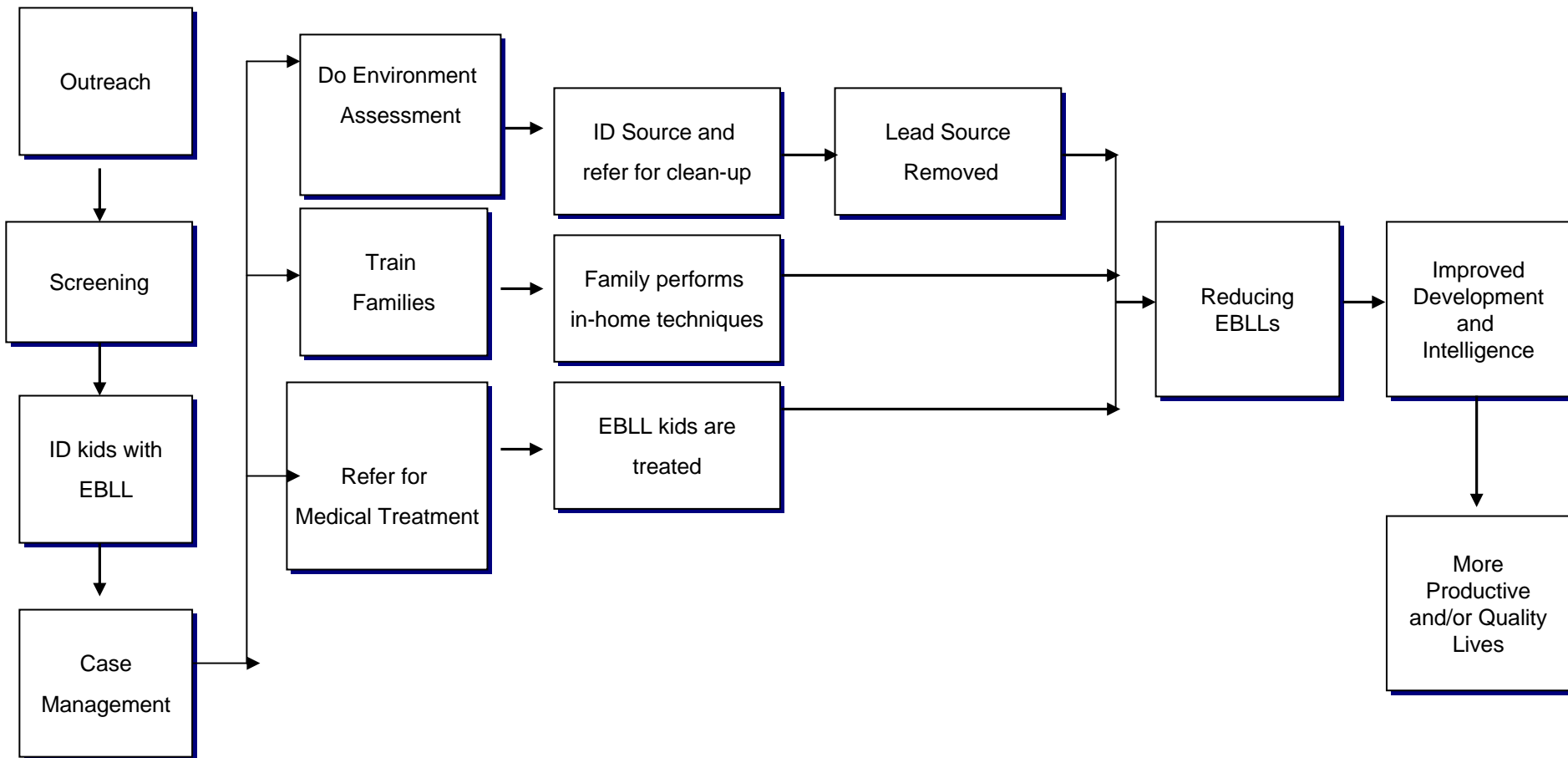
Advocate for changes?

Fund, authorize, expand program?

Lead Poisoning: "Causal" Roadmap

Activities

Outcomes



Global Logic Model: EPHTN

Early Activities

Later Activities

Early Outcomes

Later Outcomes

If CDC does this...

And grantees do this...

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And then...

Partnerships
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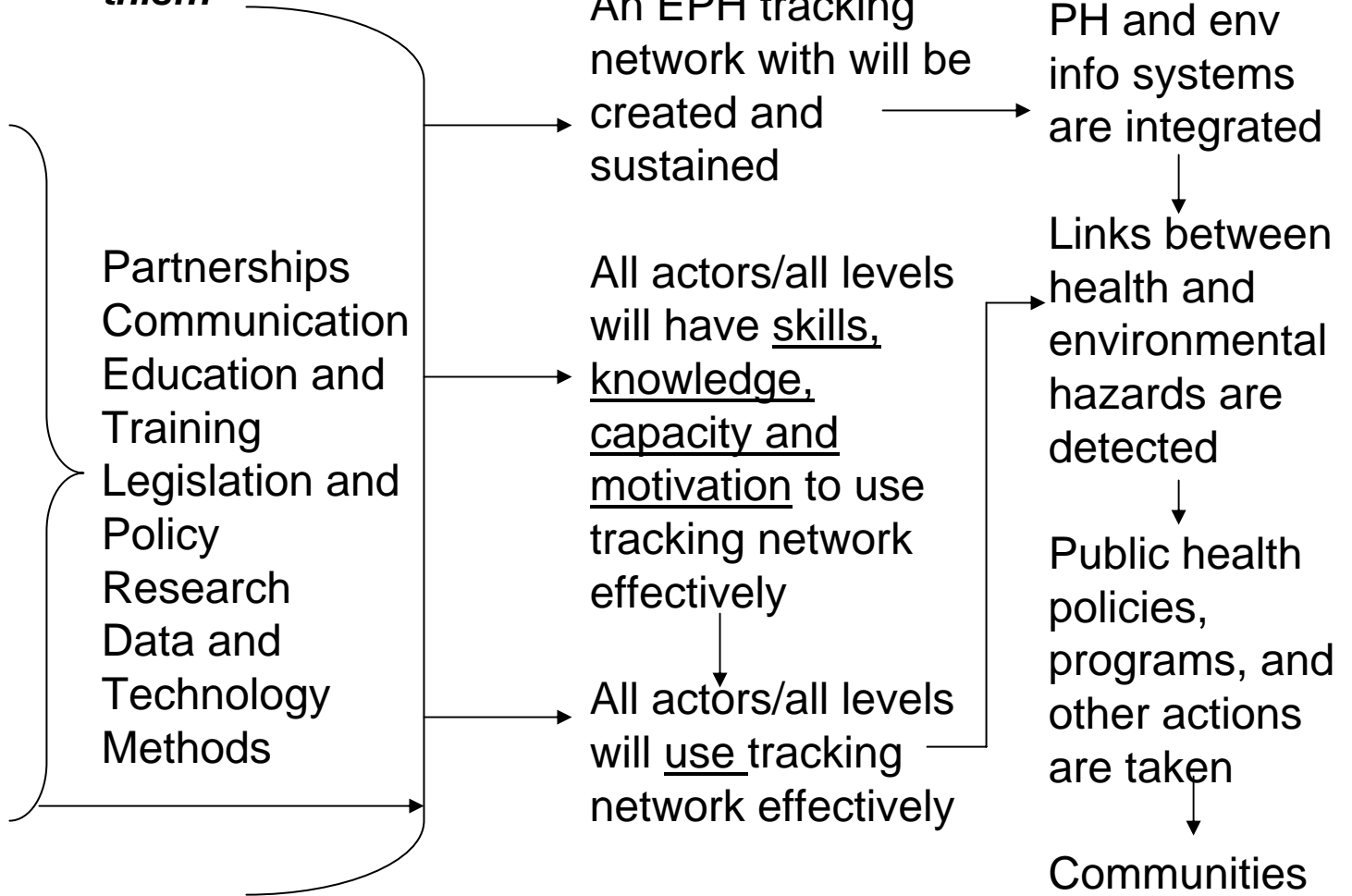
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Using the Logic Model with Stakeholders

- Who are major stakeholders for our efforts?
- What do we know about them and their preferences/opinions re:
 - What outcomes mean “success”?
 - How much progress on an outcome means “success”?
 - Preferences on data collection methods?
 - Standards and values they bring to judgment of evaluation results?
- Logic model can make the conversation easier

Some Stakeholder Preferences:

- Cost and cost-benefit
- Efficiency of delivery of services
- Health disparities reduction
- Population-based impact, not just impact on those participating in the intervention
- Zero-defects

Eval Plan vs. Eval Focus

- Eval **Plan**: How I intend to measure **all** aspects of my program---all the boxes (and arrows) in my logic model?
- Eval **Focus**: The part of my program that needs to be measured in **this evaluation, 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?

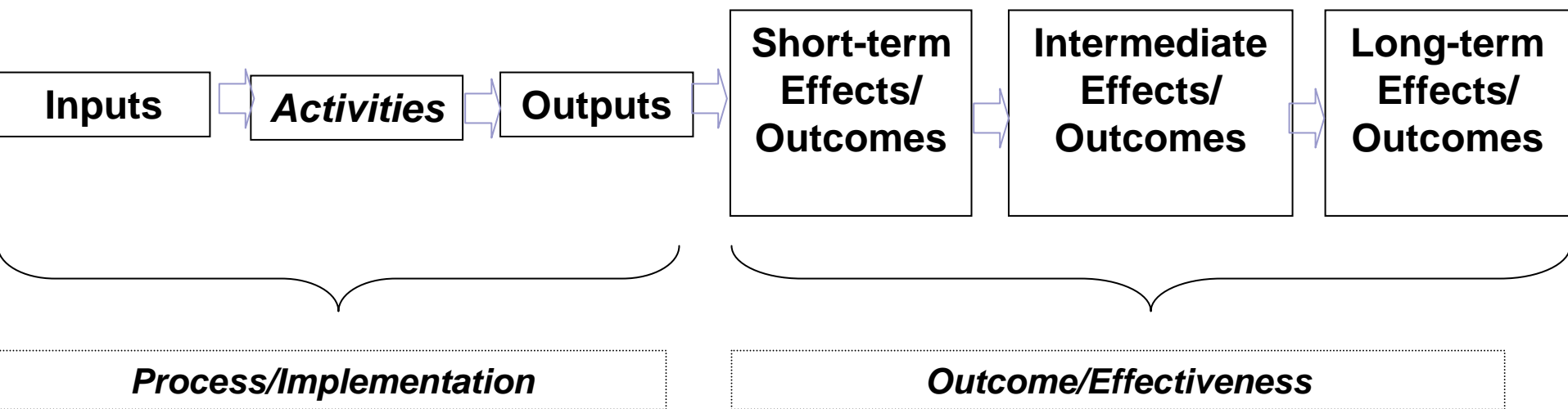
- **Efficiency**

- How much “product” is produced for given level of inputs/resources?

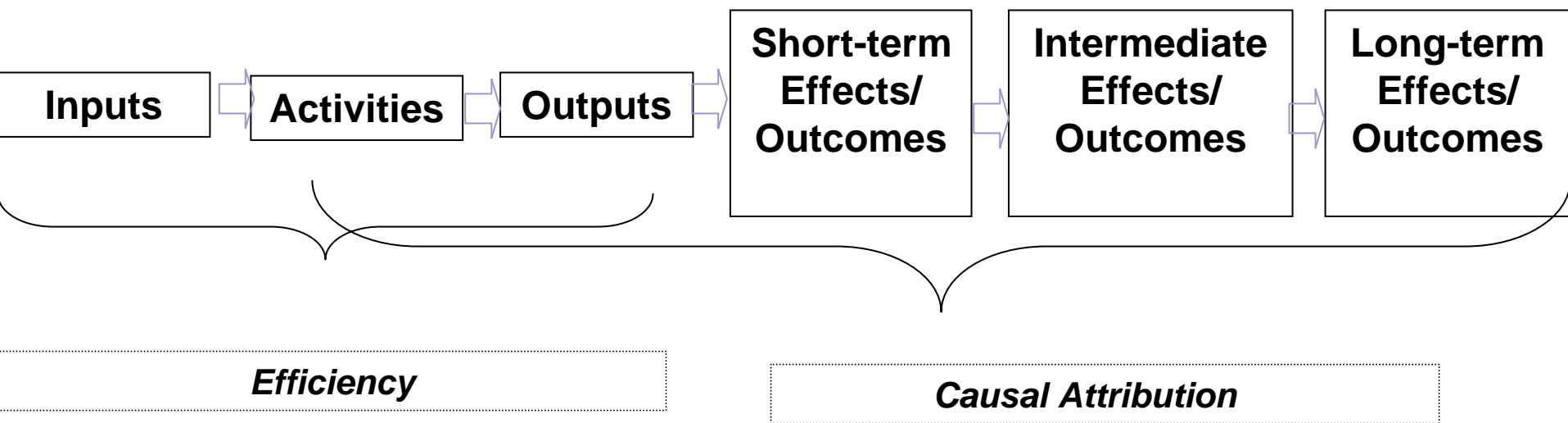
- **Causal Attribution**

- 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?

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?

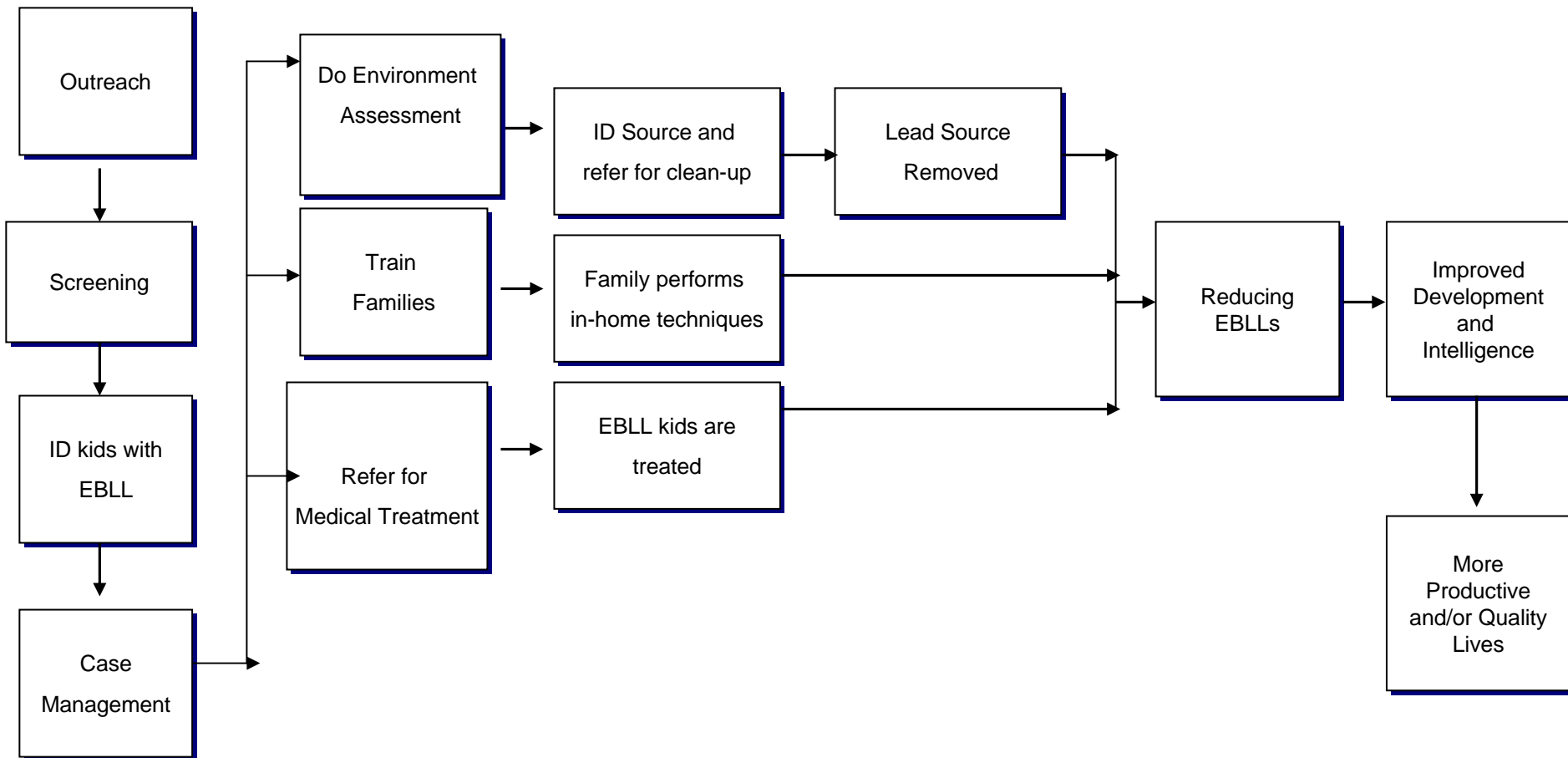
Some Program Evaluation Foci

- Year 1: YOU want to see if the model and approach is “ready for prime time” ...
- Year 3: ANOTHER ORG/COMMUNITY wants to adopt your approach but wants to know “what are they in for?” ...
- Year 5: YOU want to lure in another FUNDER to support expansion...

Lead Poisoning: "Causal" Roadmap

Activities

Outcomes



Global Logic Model: EPHTN

Early Activities

Later Activities

Early Outcomes

Later Outcomes

If CDC does this...

And grantees do this...

Then....

And then...

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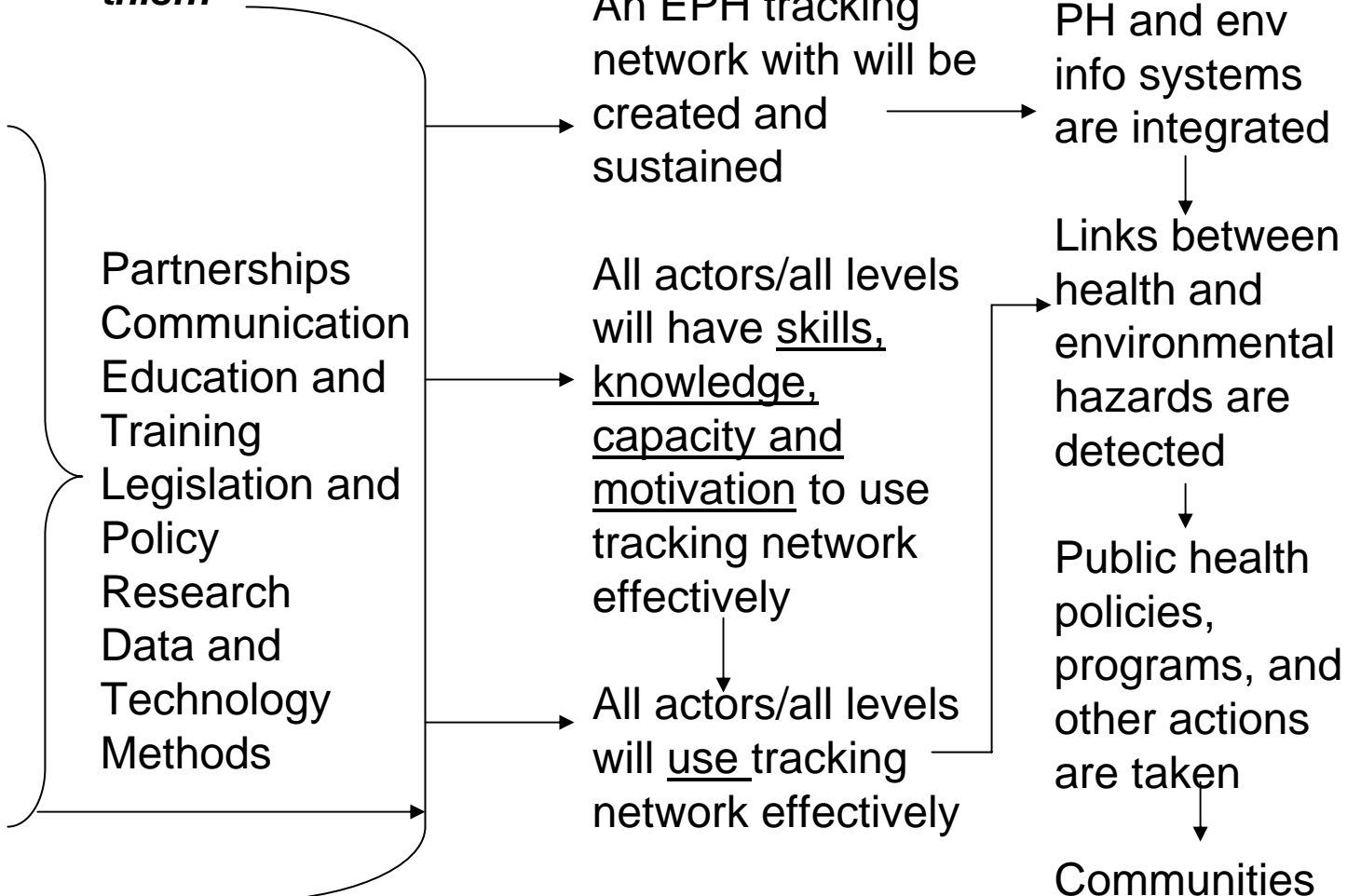
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Reducing Fear and Loathing of Evaluation

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 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.aspx?CID=281>
- University of Wisconsin-Extension:
<http://www.uwex.edu/ces/lmcourse/>

Helpful Publications @ www.cdc.gov/eval

CDC
CENTERS FOR DISEASE CONTROL
AND PREVENTION

September 17, 1999 / Vol. 48 / No. RR-11

MMWRTM
MORBIDITY AND MORTALITY
WEEKLY REPORT

*Recommendations
and
Reports*

**Framework for Program Evaluation
in Public Health**



**An Evaluation
Framework for
Community
Health Programs**

Community Tool Box


<http://ctb.ku.edu>

Home Tools Assistance Initiatives Links Comments

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A Framework for Program Evaluation: A Gateway to Tools

Contributed by Bobby Milstein, Scott Wetterhall, and the CDC Evaluation Working Group
Edited by Jenette Nagy and Stephen B. Fawcett

**Related Topics Section**

[Our Model of Practice: Building Capacity for Community and Systems Change](#)
[Our Evaluation Model: Evaluating Comprehensive Community Initiatives](#)
[Analyzing Community Problems](#)
[Conducting Focus Groups](#)
[Understanding and Describing the Community](#)
[Conducting Public Forums and Listening Sessions](#)
[Making Community Presentations](#)
[Conducting Needs Assessment Surveys](#)
[Identifying Community Assets and Resources](#)
[Developing Baseline Measures of Behavior](#)
[Conducting Concerns Surveys](#)
[Conducting Interviews](#)
[Developing a Plan for Communication](#)
[Involving Key Influentials in the Initiative](#)
[Involving People Most Affected by the Problem](#)
[VMOSA \(Vision, Mission, Objectives, Strategies, Action Plan\): An Overview](#)
[Obtaining Feedback from Constituents: What Changes are Important and Feasible?](#)
[Identifying Action Steps in Bringing About Community and Systems Change](#)
[Defining and Analyzing the Problem](#)
[Designing Community Interventions](#)