

# *Developing a Successful Community Program Evaluation: Keys and Examples*

*Dr. Ronda Sturgill  
Associate Professor  
Allied Health, The University of Tampa*

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*The University Of*  

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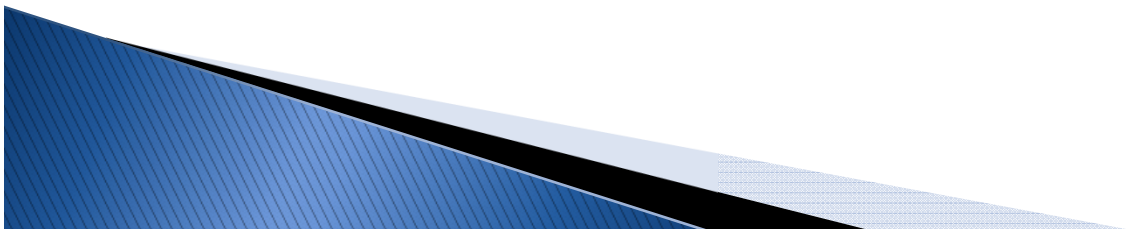
**T A M P A**

# Introduction

- ▶ Evaluation, defined as “the systematic process of collecting and analyzing data in order to determine whether and to what degree objectives have been or are being achieved,” is common to all community health education programs (Boulmetis & Dutwin, 2000).
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# What is evaluation?

- ▶ A systematic process
  - Should be a planned and purposeful activity; not conducted as an afterthought
- ▶ Involves collecting data regarding questions or issues about society in general and organizations and programs in particular
- ▶ Process for enhancing knowledge and decision making



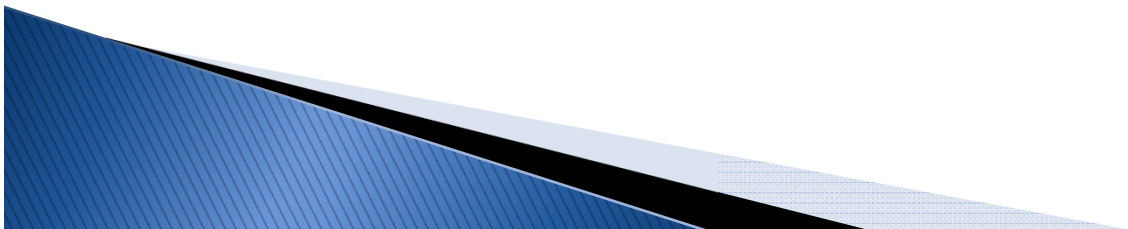
# Program Evaluation Importance

- ▶ Documentation of program results for stakeholders
- ▶ Funding agencies require evaluation plans which list goals and objectives in a quantifiable form
  - Need to determine accountability of scarce funds and the level at which the project meets overall objectives
- ▶ Ultimately – what difference did the program make in the lives of the participants or the community?



# Three Example Programs

- ▶ All 3 programs funded by SAMHSA (Substance Abuse and Mental Health Services Administration)
  - **STARS**
    - Assertive adolescent and family treatment program
  - **ROCS**
    - Youthful offender reentry program
  - **SHAPE**
    - Behavioral health and supportive services project for chronically homeless individuals and families



# Keys to a Successful Community Program Evaluation

- ▶ Communication and collaboration
- ▶ Training
- ▶ Targeting the population
- ▶ Reporting



# Communication & Collaboration

- ▶ Overcome built-in communication barriers
- ▶ Evaluators and program staff have different perspectives
- ▶ Evaluators provide the information that the program needs to see the forest not just the trees!



# Communication and Collaboration

- ▶ Information sharing between evaluation team and treatment team
  - Occurs frequently – several times a week if not daily
  - Frequent check-ins to update client tracking as clients move not only when it is time to interview them
  - Evaluators attend monthly Steering Committee meetings
  - Evaluators train staff and have consistent contact with Project Director
  - Weekly Hot-Sheets





# Collaboration and Follow-Up

- ▶ Critical that the evaluation team is fully integrated with the treatment team
  - Meet with GPRA interviewer is part of intake/discharge process
- ▶ Work together with treatment team
  - If possible, incentives for interviewers



# Training

- ▶ Training should be hands on
- ▶ Purpose is to answer questions and teach documentation of data that will be used in evaluation reports
- ▶ Both initial and ongoing training are critical!



# Training

- ▶ Examples used in STARS, ROCS, SHAPE
  - Develop consistent ID numbers for clients
  - Development and use of locator forms for follow-up interviews
    - Ex. Locator Form
  - Development and use of Substance Abuse Therapist Log and Case Manager Log
  - Development and use of Critical Events Summary Sheet



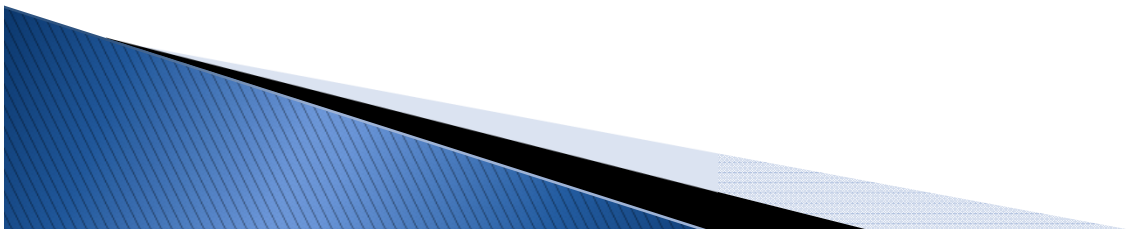
# Targeting the Population

- ▶ Know and understand the population involved
- ▶ What is important to the specific population?
  - Incentives
- ▶ How can they be reached?
  - Locator forms
  - Current information on where they live, how they can be contacted (Incentives, drawing ex.)
- ▶ Benefits of consumers / people in recovery as data collectors
  - Tied into recovery community



# Targeting the Population

- ▶ Examples:
  - At-risk substance abusing adolescents – STARS
  - Success and challenges working collaboratively with jail/prison systems for access/entry to collect data – ROCS
  - Homeless population – SHAPE



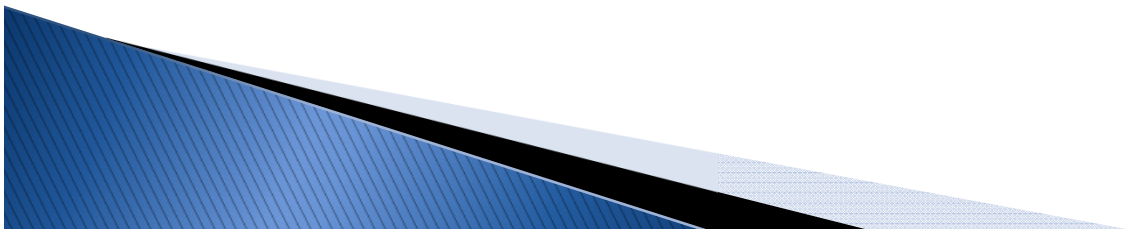
# Reporting

- ▶ Critical for evaluation team to provide frequent feedback in an understandable and usable format
- ▶ Types and frequency of reports
  - Quarterly reports – every three months
  - Annual reports – at conclusion of each year
  - Final report – at conclusion of project
- ▶ Make data driven recommendations for problem-solving and program improvement



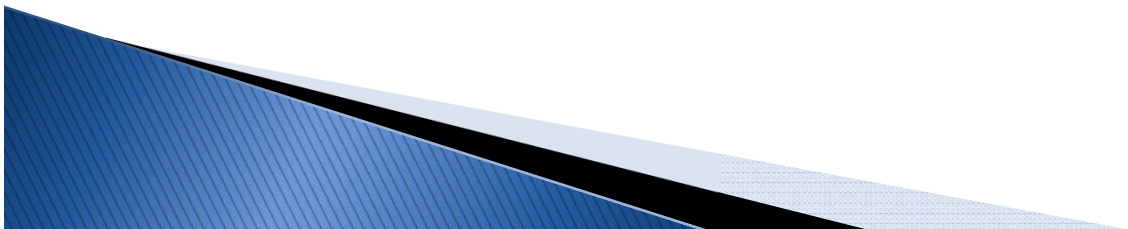
# Example of Data Driven Recommendations

- ▶ Not admitting enough clients to meet admissions target
- ▶ A few clients get almost all services
- ▶ Low retention – completion rates
- ▶ Few caregivers attend ACRA sessions



# Quarterly Reports

- ▶ Start-up – Tasks planned and completed
  - Reminder of tasks to be accomplished for successful program operation
- ▶ Clients admitted
- ▶ Client profiles
- ▶ Services provided
- ▶ Outcomes
  - Aggregate individual successes
- ▶ Progress towards goals
  - Provide comparisons to targets and goals





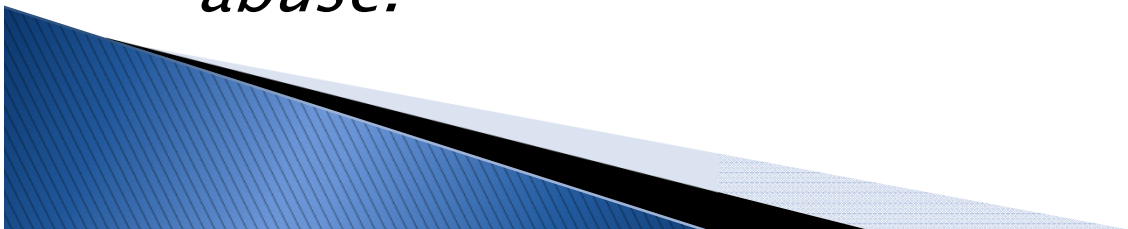
# Make Evaluation Reporting Useful!

- ▶ Example 1:
  - 45% had not graduated from high school or earned a GED
  - 85% were single mothers
  - 92% were unemployed
  - 79% had incomes below the poverty line for a family of two
  - 77% had a dual diagnosis of psychological disorders and AOD addiction
  - 72% had been in jail or prison



# Example 1: Useful Reporting

- ▶ *The typical woman admitted to Renaissance Place is white, between the ages of 25 and 36. She is a single mother who had never married and brings two children with her to Renaissance even though she may have lost custody of them previously. She has not completed high school. Before entering Renaissance Place, she was unemployed and lived on public assistance with a household income of less than \$5,000 a year. She has a criminal record and had been in jail more than once. Many, but not all, of her arrests were directly related to AOD abuse.*



## Example 2: Useful Reporting

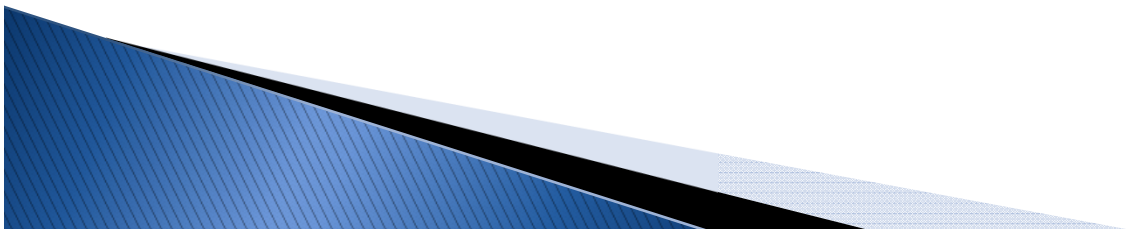
- ▶ 57% used Alcohol
  - ▶ 52% used Marijuana
  - ▶ 43% used Crack
  - ▶ 40% used Cocaine
  - ▶ 29% used Valium
  - ▶ 27% used Other Opiates
- ▶ *The typical Renaissance woman began using drugs and alcohol when she was 12 to 15 and has used multiple drugs including marijuana, cocaine, crack, opiates, and alcohol. Despite having been in 2 or more AOD abuse treatment programs previously, she continued to abuse alcohol and multiple other drugs in the six months prior to admission with her most serious problems on admission related to opiates, crack, or alcohol. She has a dual-diagnosis with anti-social personality trait disorder, anxiety reaction, and/or depression in addition to her addiction.*

# Example 3: Useful Reporting

- ▶ 74% had been physically abused
- ▶ 19% were homeless
- ▶ 66% of their children did not live with them
- ▶ 56% had no family or received no help from their families
- ▶ 41% said all or most of their friends got drunk regularly
- ▶ 51% said all or most of their friends used drugs
- ▶ *She lacks family or friends who will support behavioral change. Most of her friends use drugs and get drunk regularly. Few of her friends work regularly; they are more likely to engage in illegal activities. If she sees her family, they are unlikely to help with problems and are more likely to fight and argue. Some of her family and friends have even been physically abusive towards her.*

# Sustainability – Ultimate Goal!

- ▶ How have you used evaluation for sustainability?
- ▶ Examples:
  - Building internal and external community support—newsletters, press releases, speeches
  - Using evaluation data to apply for additional funding (grants and foundations, etc.)
  - Presenting evaluation data to local and state government bodies to support need for additional program funding



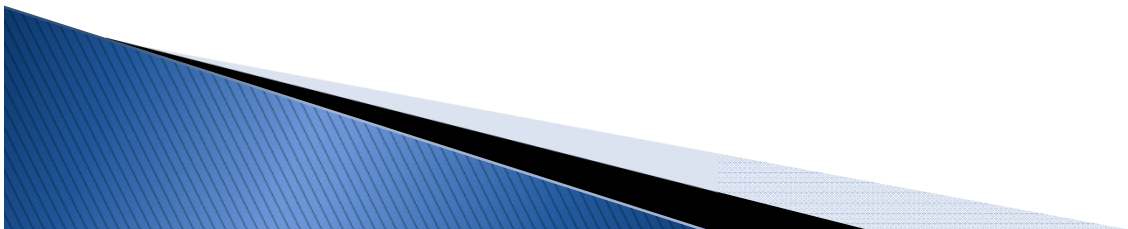
# Conclusions

- ▶ Successful community evaluation must include:
  - Consistent communication & collaboration
  - Frequent and usable reporting
  - Necessary training
  - Activities that target the intended population



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# CONTACT INFORMATION

## ▶ Dr. Ronda Sturgill

Associate Professor, Allied Health Program

University of Tampa

401 W. Kennedy Blvd.

Tampa, FL 33606

[rsturgill@ut.edu](mailto:rsturgill@ut.edu)

Office: 813-257-3445

<http://www.ut.edu/healthandhumanperformance>

