

**A THREE-YEAR-OLD COLLABORATIVE EVALUATION TRAINING MODEL
LINKING COMMUNITY-BASED NON-PROFITS TO UNIVERSITIES: A PRACTICAL
SCHEME WHICH CAN BE ADAPTED**

Donald Compton, Ph.D.
Director, Division Evaluation Services
American Cancer Society
National Home Office
1599 Clifton Road, NE
Atlanta, Georgia 30329-4251

Terry Slevin, M.P.H.
Senior Manager, Education and Research
Cancer Foundation of Western Australia

Michael Baizerman, Ph.D., M.S. (Hyg.)
Professor
School of Social Work, Program in Youth Studies and
Adjunct Professor, School of Public Health and the College of Education,
University of Minnesota

BIOGRAPHICAL SUMMARY

Dr. Compton is Director, Division Evaluation Services, American Cancer Society, Atlanta, Georgia. For more than 20 years he has managed and carried out practical program evaluations, primarily in public education settings. He holds graduate degrees in sociology and educational administration and is adjunct faculty at the Rollins School of Public Health, Emory University. His primary interest is practical, low cost, real and useful program evaluation and capacity building within community-based organizations.

Terry Slevin (BA, hons, MPH) has been with the Cancer Foundation of Western Australia since 1994 and is responsible for all education and research programs and activities at the Foundation. He has been most involved in the area of skin cancer prevention and early detection, issues relating to screening for prostate and bowel cancer. He has been involved in public health policy, program design and evaluation for 15 years. He is currently President of the Public Health Association, WA Branch, and has been a member of the Australian Cancer Society Public Health Committee since 1996.

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ABSTRACT

The Collaborative Evaluation Fellows Project (CEFP) is a \$1.5 million five-year project funded by the Robert W. Woodruff Foundation, Inc. It is a collaborative effort between the National Home Office, American Cancer Society, Inc., its 17 regional offices, and local Schools of Public Health.

The purpose of the project is to build capacity for program evaluation within the American Cancer Society using a utilization-focused model while providing training opportunities in practical program evaluation for graduate students working under faculty supervision.

This presentation will provide an overview of the model and its potential application for building program evaluation capacity and its application in Australia. Practical program materials to develop and implement such a program will be reviewed and are available at no cost.

The Collaborative Evaluation Fellows Project has implications for universities interested in providing ways for graduate students to gain practical experience in program evaluation and for non-profit organizations seeking ways to respond to increased demand for program evaluation and accountability at low-cost.

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INTRODUCTION

The purpose of this paper is to provide an overview of the Collaborative Evaluation Fellows Project (CEFP) and issues to be addressed during a working session about how the project might be adapted for use in Australia. The CEFP is a nationally administered model for the development of local program evaluation capacity. It is innovative in that it requires collaboration between local American Cancer Society, Inc. offices and faculty and students from local universities to conduct practical program evaluations.

Human services and constituent agencies, programs and services are going through profound changes in their structure, activities and expectations for accountability (Newcomer, 1997). Public, private and voluntary agencies are required to assess each programmatic effort, its costs, and its effects (Perrin, 1998). For example, the United Way, the community-based funding mechanism for most not-for-profit service agencies, requires each of its funded projects to identify and document outcome measures for programmatic activities (Hatry, van Houten, Plantz & Greenway, 1996; Plantz, Greenway & Hendrix, 1997). Program evaluation is one response to the political and economic changes that have increased the demand for accountability in the human services sector.

The American Cancer Society, Inc. (ACS) is subject to the same expectations of accountability. This pressure to document program effects comes from not only the corporate and foundation

funding sources, but from the public, ACS regional offices, and ACS's leadership, which realizes the importance of successful programs. One response has been the development of the Collaborative Evaluation Fellows Project (CEFP), an innovative program that is designed to measure the outcomes and effects of its programs.

The ACS is an 86 year old agency and the United States' largest voluntary health organization with an estimated two million volunteers. The ACS's home office, located in Atlanta, Georgia, provides national leadership for the organization's research program and cancer control efforts. Seventeen Division offices manage ACS activities at the regional level and community-level offices (Units) and implement ACS programs through a staff-volunteer partnership. Current foci of ACS programs include research, advocacy, patient services, and health education. ACS is a national leader in cancer control through education and other national and local efforts that are carried out in a partnership between ACS staff and volunteers.

The ACS opened its first program evaluation unit in 1995, when it hired its first program evaluation director, with responsibility for providing professional evaluation services, primarily to the National Home Office. However, due to increasing demand for evaluation in the regional and community-level offices, the director soon became the primary contact for evaluation support throughout the 17 Divisions. As is the case for many internal evaluation units, the demands for evaluation support soon exceeded the capacity of the new director. The Collaborative Evaluation Fellows Project (CEFP) was developed in collaboration with faculty at the Rollins School of Public Health at Emory University as a means of responding to the demands for program evaluation while meeting the school's need to provide real-world work experience for its students.

The next section will provide a brief overview of the Collaborative Evaluation Fellows Project (CEFP) model.

THE COLLABORATIVE EVALUATION FELLOWS PROJECT MODEL

Three conceptual frameworks influenced the development of the Collaborative Evaluation Fellows Project model. First is Michael Patton's utilization-focused model (Patton, 1997). Patton defines evaluation as the systematic collection of information about a potentially wide range of topics for a variety of possible judgments and uses. Patton's model includes the requirement to specify intended use by intended users and considers use by intended users as the primary requirement for determining an evaluation's success. His model was selected because of its focus on practical program evaluation for program improvement and because his approach is consistent with American Cancer Society culture in terms of involving staff, volunteers and others in the development and implementation of the evaluation.

Second, Arthur Himmelman has a model which identifies four strategies of organizations working together. These are:

- 1) networking, which is defined as exchanging information for mutual benefit
- 2) coordinating, which is exchanging information and altering activities for mutual benefit to achieve a common purpose
- 3) cooperating, which is defined as exchanging information, altering activities, and sharing resources for mutual benefit to achieve a common purpose and,
- 4) collaboration, which is defined as exchanging information, altering activities, sharing resources, and enhancing the capacity of another for mutual benefit and to achieve a common purpose.

Preskill, and Torres (1999) and Torres, Preskill and Piontek's (1996) view of evaluation as a catalyst for learning in organizations provided a focus on how evaluation can be a means for ongoing learning in organizations. Basic to how people learn in an organization are four learning processes that are integrated into the Collaborative Evaluation Fellows Project including asking questions, reflecting, having dialogue and identifying and clarifying values, beliefs, assumptions, and knowledge. These processes are carried out through three phases of inquiry: focusing inquiry, carrying out the inquiry, and applying learning from inquiry.

Taken together, each of these models informed the development of the Collaborative Evaluation Fellows Project to increase the likelihood of producing useful evaluations that would contribute to the integration of practical program evaluation into the American Cancer Society at the national, regional and local levels. From the beginning of the Collaborative Evaluation Fellows' Project development, these texts have been used to make explicit principles to guide the model building and to provide a common understanding of what evaluation is and how it can be done to improve programs and services to increase the effectiveness of American Cancer Society programs and services. In addition, the project embraces the professional evaluation standards of utility, propriety, accuracy and feasibility.

The following section will describe how the project is implemented.

IMPLEMENTATION OF THE COLLABORATIVE EVALUATION FELLOWS PROJECT (CEFP)

The Collaborative Evaluation Fellows Project is designed to increase the capacity for practical program evaluation within the American Cancer Society and to provide training opportunities for graduate students. Goals of the program are to institutionalize evaluation within the American Cancer Society, build permanent, long-term relationships with universities nationwide, provide training opportunities for students in program evaluation and to evaluate the model and share lessons learned with other organizations.

The Collaborative Evaluation Fellows Project is a nationally administered model. It requires collaboration between local American Cancer Society offices and faculty and students from local universities. Graduate students, primarily in public health, are selected by faculty to implement an evaluation of an agreed upon American Cancer Society program under faculty and ACS staff supervision. The projects typically are implemented over a six to nine month period and two products are often produced: an evaluation report for the ACS and a master's thesis or paper for academic credit within the university. During the first two years of the project, 50 evaluation studies have been completed nationwide.

A variety of documents and materials have been produced during the first two years of the project to guide its implementation. These include videotapes and brochures describing roles of project participants as well as materials about how to administer the project. Also, a database accessible from any web browser has been developed that includes all CEFP documents and reports and a private “chat room” for students to share information about their projects. Each year, a two-day planning meeting is held for all participants to provide an opportunity to share lessons learned and to plan for the upcoming year. A two-day annual training is held for ACS staff to provide them with the necessary skills to become more effective as evaluation facilitators in their local community.

Central to the CEFP is the 15-step process. Based upon the utilization-focused model, the 15-step process provides a protocol for ACS staff, faculty and students to follow throughout the evaluation project. The process includes four stages: Groundwork, Formalization, The Study, and Utilization. Each of these stages is described in a document disseminated to all project participants that outlines activities by role over a 6-9 month period.

Beginning in 1999-2000, the CEFP is being implemented at the ACS’s National Home Office, in 17 Divisions and in 18 universities. By the end of the five-year project, over 100 evaluations will have been produced. Viable partnerships are likely to have been formed between ACS offices and 18 or more universities and will have gained considerable experience using program evaluation for accountability, program improvement and other purposes. In addition, 100 or more graduate students will have gained cancer-focused program evaluation experience.

The longer term vision is for a collaborative relationship with 40 or more universities that benefits the ACS by working with university faculty and students to bring expertise to ACS’s efforts in program evaluation, program development and public health research. At the same time, the partnership provides paid work opportunities for graduate students, data for master’s theses and doctoral dissertations, experience in real world cancer control efforts and possible employment opportunities upon graduation. In sum, the CEFP is a five-year, innovative model

for education and capacity building in formal program evaluation. It is a win-win-win situation for the ACS, for universities and for graduate students.

ADAPTING THE CEFP IN OTHER SETTINGS

One of the goals of the CEFP is to systematically evaluate the project and share lessons learned with other public health and human service organizations. As a pilot-test of the adaptability of the model to other organizations, the Arthritis Foundation is implementing two studies in 1999-2000 and conversations are being held with the federal government's Centers for Disease Control and Prevention regarding the possibility of replicating the model in a local health department. In the future, it is anticipated that other non-profit agencies will collaborate with the ACS to adapt the model for their use.

A conversation has been underway over the past year with a representative of the Australian Cancer Society as he considers adapting the CEFP model to increase program evaluation capacity in Australia. Among the issues to be considered are:

Could the model be adapted for use in an Australian non-profit agency and with universities?

If so, what kind of agency and university might it be successful?

Within the university, what kind of department is appropriate?

Are there faculty who are knowledgeable about practical program evaluation?

How might such an effort be funded?

Would this project be of interest to Australian graduate students?

This session of the conference will provide an opportunity for those interested in utilization-focused evaluation and collaboration to learn about the CEFP and to review materials developed for the project. It is intended to be a working session to think through issues associated with the cross-cultural application of the model.

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