

Linking policy analysis and program evaluation: the Canberra syringe vending machines trial

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Summary

Policy analysis and program evaluation are two of the eight or so stages of the policy cycle model of public policy processes. The policy cycle model is generally portrayed as a number of stages from issues identification, to policy analysis, to decision-making, to program implementation and then on to program evaluation, although the validity of the model is sometimes contested. The manifestations and contributions of evaluation are different at different stages of the cycle, with a useful conceptualisation being to differentiate between evaluation *for* policy, on the one hand, and evaluation *of* policy, on the other.

The differences between evaluation *for* policy and evaluation *of* policy are illustrated by evaluation's role in the 2005-2006 Syringe Vending Machines Trial in Canberra, ACT, Australia. In this case the author, an external contractor to a government instrumentality, was involved in policy analysis for the trial, and was then responsible for evaluating it, with the findings of the program evaluation feeding back into the policy cycle.

The contested issues of the 'independent evaluator', and of the desirability or otherwise of including recommendations in the findings of evaluations, are illustrated in this case. They have particular salience when an individual or organisation fills multiple roles in the policy cycle (including analysis for policy and analysis of policy), a familiar situation in small and under-resourced organisations in both wealthy and developing nations of the Asia-Pacific region.

Introduction

In this paper I discuss the relationships between policy activity and evaluation, with a particular focus on the place of evaluation in the so-called 'policy cycle' and the potential challenges for evaluators working at more than one stage in the policy cycle. My own experiences as a pubic servant when I had responsibility for a jurisdiction's substance abuse policy, for funding substance abuse prevention and treatment programs and for evaluating the funded services, along with more recent experiences in Canberra, Australia's national capital, where I was involved in both policy analysis

and program evaluation of a substance abuse intervention, illustrate some of the issues involved.

The concept of policy

Many different definitions exist of the term 'policy'; elsewhere colleagues and I have quoted 12 of them (McDonald, Bammer & Breen 2005, p. 4). A dictionary definition is 'A course of action adopted and pursued by a government, party, ruler, statesman, etc.; any course of action adopted as advantageous or expedient' (Oxford English Dictionary Online, 2006). A particularly useful definition of 'policy', for the purposes of this paper, is

A statement of government intent, and its implementation through the use of policy instruments (Bridgman & Davis 2004, p. 184).

The same authors go on to define 'public policy' (the area of policy that is the focus of this paper) as

- 1. intentions and deeds of a government
- 2. descriptions of principles governing the way decisions are made (op. cit., p. 185).

Another significant aspect of the concept of policy is the answer to the question 'where is policy made?'. Colebatch (2002) responds, drawing attention to the vertical and the horizontal perspectives. In the vertical perspective, policy decisions are made at the top by authorised decision makers such as Ministers. The implication is that one looks for the structures through which policy advice is created and transmitted to the authorised decision-makers.

In the horizontal perspective, policy activity is seen as structured interaction between various groups and individuals, including officials, subject matter experts, advocates, etc. This perspective draws attention to the continued interactions that make possible the authorised decisions of people at the top. The contributions of evaluation to policy activity differs between these two perspectives.

A third perspective is seeing policy activity as 'an exercise in social construction' (Colebatch 2006) in which 'What are seen as matters for policy attention reflect the way in which participants make sense of the world: what knowledge is seen as valid and relevant, and who can command attention' (op. cit., p. 8).

The policy cycle

We are interested in the different roles of evaluation at different stages in the policy cycle—so what is the policy cycle and how valid is the concept? Figure 1 illustrates the policy cycle. Note that it commences with 'identify issues' (which can also be thought of as agenda setting) and ends with 'evaluation'.





Bridgman, P & Davis, G 2004, *The Australian policy handbook*, 3rd edn, Allen & Unwin, Crows Nest, N.S.W., p. 26.

The policy cycle is a contested construct, with some academics and policy people finding it a fair explanation of policy activity. Others, however, suggest that it lacks validity as it portrays a linear set of stages from 'issues identification' through 'decision' and on to 'evaluation' when, in real life policy work, the process can start at various places in the 'cycle', feedback loops operate within it and some steps can be omitted altogether. None-the-less, as we have argued elsewhere (and demonstrated with respect to Australian illicit drug policy-making), 'it is a useful heuristic, one which many people engaged in policy activity find to be a reasonable description of how they work, or would like to work given ideal conditions' (McDonald, Bammer & Breen 2005, p. 6).

Another approach is to simply see it as a useful checklist of the elements of policy work, with no emphasis on steps or stages.

Evaluation in the policy cycle

An advocate of the policy cycle heuristic, Wayne Parsons, has made a significant contribution in suggesting that we can understand policy activity—and by extension evaluation's contribution to policy—by differentiating between analysis *of* policy and analysis *for* policy. He clarifies the differences as follows

- *analysis of the policy process*: how problems are defined, agendas set, policy formulated, decisions made and policy evaluated and implemented;

- analysis in and for the policy process: this encompasses the use of analytical techniques, research and advocacy in problem definition, decision-making, evaluation and implementation (Parsons 1995, p. xvi)

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If we look back at Figure 1 we can see that evaluation *of* the policy process might well entail investigating each of the eight stages detailed there; for example

- in what ways and how well each was developed and implemented, and with what outcomes
- > how they joined up, with each stage feeding into the next
- how efficiently the process operated and if an alternative approach may have been more efficient and, perhaps, more effective
- the concordance between the needs analysis, policy analysis findings, decisions made and evaluation stage findings
- how the findings and recommendations of the program evaluation stage were used
- ▹ etc.

In other words, we could treat the whole of the policy activity as the evaluand, describing it and making judgements as to its merit, worth and value, as Scriven (1991, p. 139) puts it.

On the other hand, we can focus upon the 'evaluation' stage of the policy cycle, the final one of the eight in Bridgman and Davis's model. Here we have evaluation *for* policy. The evaluation stage comes after the policy analysis has been conducted, consultations undertaken, decisions made and the resulting program implemented. Evaluation's role is to answer questions about the implementation of the policy as realised in programs on the ground.

Furthermore, evaluation sometimes has an important contribution at the policy analysis stage, for example when we conduct *ex ante* evaluations such as modelling competing scenarios.

Evaluating *of* policy and evaluating *for* policy are fundamentally different roles for evaluation, and for evaluators, in public policy activity. I will return to this, discussing some of the implications of the two roles, after presenting a brief case study that illustrates the issues.

Case study: the Canberra Syringe Vending Machines Trial

The Government of the Australian Capital Territory (ACT) is currently conducting a trial of syringe vending machines in Canberra. Its Department of Health and Community Care has contracted an NGO to manage the installation and maintenance of syringe vending machines, one each at four Community Health Centres. The machines commenced operating on 4 February 2005 on a 12 month trial basis. They operate 24 hours per day, seven days per week, dispensing rigid plastic FitPacks[®] containing four syringes and associated injecting equipment at a cost of \$2.00 for each FitPack[®].

The syringe vending machines are intended to supplement, not replace, the other sources of sterile injecting equipment, namely community pharmacies, community health centres and NGOs that serve people who inject illegal drugs. Overseas studies have shown that syringe vending machines can attract clients who are less likely to visit other outlets, including young injectors, people who do not identify as injectors

and others reluctant (for whatever reasons) to use the other outlets which operate on a face-to-face basis.

The context of the trial is the epidemic of blood borne diseases among people who use illicit drugs, especially users who share injecting equipment and contaminated injecting environments, placing them at high risk of infection by the hepatitis C virus (Crofts, Aitken & Kaldor 1999; Dore et al. 2003). Sound evidence now exists as to the effectiveness, and cost-effectiveness, of programs providing sterile injecting equipment to people who inject illegal drugs (e.g. Wodak & Cooney 2005).

The ACT Legislative Assembly's Standing Committee on Health, in its 2003 report *Access to needles and syringes by intravenous drug users*, recommended a Canberra trial of syringe vending machines. The Committee's enquiry was informed, in part, by published evaluations of syringe vending machines' provision, particularly in Sydney and Marseille (Berg 1994; Moatti et al. 2001). Syringe vending machines have been operating in various parts of the Australian State of New South Wales for over a decade.

I was engaged to evaluate the trial.¹ An interim report on the evaluation was presented at the end of the 12 month trial (McDonald 2006) and formed the basis of a decision to continue operating the vending machines until the final report is provided and considered by the Government in the second half of 2006.

The dual roles of the evaluator in the Canberra Syringe Vending Machines Trial

As mentioned above, I was contracted to evaluate the trial. The terms of reference (ToRs) for the evaluation included a provision that, 'Prior to the commencement of review, the consultant will conduct a literature search to address concerns that may be raised in the community in relation to the introduction of vending machines'. It was later specified that the product of the literature review would be in the form of a 'question and answer' document about injecting illegal drugs, providing sterile injecting equipment, experience of syringe vending machines in other jurisdictions, etc. The specific questions to be answered were specified in the ToRs.

This was a policy analysis task completed six months before the trial commenced: I was asked to collate, analyse and present, in a format suitable for use by Government, the media and the general public, a document detailing the rationale for the trial. It was a step in the policy cycle well before program (trial) implementation and before program evaluation.

The ToRs also specified that I undertake a process and outcome program evaluation of the trial.

¹ Ethical approval for the trial's evaluation was granted by the ACT Health and Community Care Human Research Ethics Committee on 13 December 2004.

Issues raised by the evaluator being involved in two stages of the policy cycle

My involvement in the trial had two facets: (1) documenting its rationale to provide research-based evidence for its proponents to use and (2) conducting an independent evaluation of the trial once implementation commenced. These dual roles at different stages of the policy cycle have two implications worthy of explication: the issue of the 'independent evaluator' and the role of recommendations in evaluation reports.

The independent evaluator role

I was recruited through a competitive tender process to be an expert, independent, external evaluator of a new initiative. This role has recently been characterised thus For an evaluation to be considered independent, the evaluator must be impartial, objective, unencumbered, and balanced...perceived independence is as important as independence itself...Overall, external evaluations tend to hold more credibility than internal ones because the external evaluator appears to have less to gain or lose from the evaluation findings and is less likely to experience a conflict of interest (Barrington 2005, p. 199).

This closely accords with the basis of Scriven's scathing dismissal of empowerment evaluation (Fetterman & Wandersman 2005) on the grounds that it is neither independent nor external: '...but the bottom line is still that amateurish self-evaluation, which the only professional around won't even co-sign, is an absurd model for serious evaluation' (Scriven 2005). Of course many disagree with Scriven on this, accepting Fetterman's argument about the important contributions of internal evaluation approaches, including empowerment evaluation, not least in circumstance where the transfer of evaluation skills to the evaluand has prominence.

The issue is bias, or perceptions of bias. To what extent can one be an independent evaluator if one has also been involved in earlier stages of the policy cycle, such as *ex ante* evaluations or collating the research evidence that contributed to the decision to implement a program? Many types of bias and sources of bias exist; they are discussed at length by epidemiologists (e.g. Last et al. 2001).

For our purposes, the important distinction is between (a) bias in the form of prejudice (a conscious or unconscious preference for a particular finding from the evaluation) and (b) bias derived from faulty study design, implementation and/or analytical techniques. If the former type of bias exists, perhaps arising from a conflict of interest, the evaluator should not be undertaking the evaluation. It should be noted, though, that having a detailed understanding of the issues addressed by the evaluation, perhaps through having researched the area or been a practitioner in it, should not be considered a conflict of interest. Indeed, an evaluator with expertise in the evaluator for whom the evaluand's field is a *tabula rasa*.

Furthermore, having an evidence-based view of the most likely outcomes of the program being evaluated is also not a form of prejudice, of bias. Indeed, in evaluation research designs that involve the testing of hypotheses, this is a core component of the research process.

The second type of bias mentioned above comes from faulty study design, implementation and/or analytical techniques. For example, collecting data from those program participants who complete the program, but not from program drop-outs, can introduce a systematic bias that could result in invalid evaluation findings. The recently published handbook on 'RealWorld evaluation' (Bamberger, Rugh & Mabry 2006) deals with this issue thoroughly, with Realworld evaluation being defined as 'An approach developed for evaluations operating under budget, time, data and political constraints intended to maximize the rigor of methods and the validity of findings' (op. cit., p. 439).

Bias linked to evaluation research design, implementation or analysis is minimised by using high quality research methods, making transparent the research processes undertaken and by using program logic to avoid the 'black boxes' too often intervening between data and findings in evaluation research.

Making recommendations

The second issue that I wish to discuss flowing from the dual roles of involvement in the early stages of the policy cycle and in the final stages as the program evaluator, concerns the evaluation's recommendations. Should evaluation reports include recommendations at all? If so, should they be confined to particular types of evaluations or clients? What form should they take? (These and other issues concerning evaluation recommendations are canvassed in the literature (e.g. Iriti, Bickel & Nelson 2005; Sadler 2005; Scriven 1991, pp. 303-4)).

One approach to answering these and related questions is to be explicit about the purpose of the evaluation, and to clarify this through discussions between the evaluator and the client before the evaluation commences and before the draft report is written. Specifically, it is important to differentiate between evaluation undertaken for *knowledge support*, on the one hand, and evaluation for *decision support*, on the other. (This section is adapted from Mays, Pope & Popay 2005.)

- Evaluation for knowledge support concludes with the presentation of evidence about the evaluand, such as how the program was implemented and with what outcomes, positive and negative, intended and unintended. It pays only limited attention to the context within which the decision-maker who receives the evaluation report operates, and does not include recommendations about what actions the decision maker should take. As Lipton (1992) wrote, many policy makers believe that their job is to do as their constituents want, even if that is contrary to evaluation research findings. 'Their attitude mandates [evaluation] reporting that focuses on findings critical to policy issues, presents jargon-free findings concisely and clearly, avoids making recommendations, and relegates discussions of methodology to the appendix' (p. 175).
- In contrast, evaluation for decision support includes the knowledge support activity just described plus attending to the decision-maker's context. This will include the values, priorities and tasks which are part of the decision-making process. The evaluator will be familiar with these aspects of the decision-maker's world and will take them into account, along with the evaluation's findings, in making recommendations.

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A researcher involved in a number of stages of the policy cycle, including the policy analysis, consultations about program design and implementation, developing recommendations to decision-makers to proceed with a program or trial, and then evaluating the resulting intervention, will frequently have the necessary knowledge and insights to produce sound, practical recommendations from the evaluation. This is in contrast to the 'external, independent evaluator' who knows the evaluand well, through the evaluation process, but does not have the understanding of the context within which the decision-maker operates that will enable her or him to produce valid and useful recommendations.

Conclusion

The reality in many settings is that one person or small team will fill multiple roles in the policy cycle, just one of which is conducting the evaluation of a program or policy. I have illustrated this through my involvement in the Canberra Syringe Vending Machines Trial evaluation.

In many developing countries of the Asia/Pacific region only limited personnel resources are available for policy activity and evaluation. The same applies in small, under-resourced community agencies in wealthy countries. People operating in these settings should not avoid undertaking evaluations, and should not feel that such evaluations are necessarily of lesser validity than those undertaken by disinterested, external, independent evaluators. What is important is that evaluators in this situation are aware of the threats to the validity of their evaluation work, including the possible conflicts of interest and perceptions of bias that are linked to their multiple roles in the policy cycle.

These threats to the validity of evaluation can be dealt with through high quality evaluation research designs and transparency about evaluators' multiple roles in the policy cycle.

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