

The Alaska Children's Trust: Program Evaluation Guidebook

Prepared by:

Marc Bolan, PhD, Marc Bolan Consulting

Terry Horton, Senior Consultant, The Foraker Group

Michael Walsh, PhD, Vice-President, The Foraker Group

EXECUTIVE SUMMARY

The Alaska Children's Trust (ACT or the Trust) contracted with The Foraker Group and Marc Bolan Consulting in Seattle to develop an overall framework for continued evaluation of the Trust's programming and grant-making efforts. In the project there were two primary goals: 1) develop a theory of change model to support the design of an evaluation framework; and 2) provide grantees with a greater capacity to implement their own evaluation efforts.

Using a collaborative process that included Trust staff, board members and grantee staff, we successfully developed a theory of change model that describes both the impacts of ACT's community based strategies and the impacts of the funded direct service efforts on individuals, youth, families and communities. (See Appendix C) The presentation of this model is aligned with the Protective Factors framework, a nationally accepted overarching theory based on research that suggests there is a set of five "protective factors or constructs" crucial to having positive impacts through child abuse and neglect prevention efforts. In addition, as a means of building long-term capacity, ACT grantees participated in a training workshop with an emphasis on developing program logic models, identifying meaningful outcomes that align with the Protective Factors framework, specifying appropriate indicators and finding appropriate data collection instruments.

Now, with the theory in place and with grantees receiving guidance on their own evaluation efforts, the Trust is well positioned to further integrate evaluation into its planning and assessment efforts. Within this document we present a number of recommendations on how ACT board and staff can use the theory models and enhanced local capacity to accomplish four primary tasks:

- 1) identify priority outcomes and measurable indicators
- 2) provide continued guidance and direction to local grantees
- 3) make more strategic decisions about program grantees
- 4) improve monitoring of grantee efforts and impacts

Simply stated, this document describes the development of an ongoing evaluation framework that the Alaska Children's Trust (ACT) can implement over time to answer two very important questions: First, is the Alaska Children's Trust making a difference in the lives of Alaska children and families. Second, and more concretely stated, how can we effectively assess the impact of ACT's funding and advocacy efforts in order to make sure it is as successful as it can be in meeting the Trust's mission?

In answering those two questions, this report serves in two different and important capacities – it is a guidebook summarizing the work of this project, and a toolbox providing the necessary guidance to help the Trust effectively implement a program outcomes evaluation framework to enhance its own ability to meet its important mission.

The hope is that the Trust will actively use the tools and materials developed in this project to help in efforts to serve children and families in Alaska.

INTRODUCTION

In the first section of the guidebook we present a summary of evaluation-related tools that illustrate the Trust's theory of its impacts through a combination of community wide and funded direct service strategies. In the second section of the guidebook we discuss some of the future directions the Trust may pursue in using an evaluation framework in assessing impacts, selecting grantees, formulating strategies and monitoring progress over time.

There has been considerable nationwide work in evaluating state-based funders of child abuse and neglect prevention efforts. The organization FRIENDS has served as a national resource center for Community-Based Child Abuse Prevention (CBCAP) programs, and has developed materials regarding outcome accountability for such programs. They provide an evaluation tool kit, and have developed a compendium of available data

collection tools and instruments. (See <http://www.friendsnrc.org/outcome/index.htm>) In addition, Organizational Research Services, a private evaluation firm in Seattle, has worked with the Council for Children and Families in Washington, and the Hawaii Children's Trust, in formulating evaluation frameworks for their state based evaluation efforts. We have drawn on these high quality, reliable and valid resources in this project.

SECTION 1: EVALUATION FRAMEWORK DEVELOPMENT PROCESS

Grantee Interviews

The Alaska Children's Trust contracted with The Foraker Group and Marc Bolan Consulting to provide guidance and technical assistance in formulating the evaluation framework. From the outset it was crucial to establish a process whereby ACT Board and staff members, along with grantees, had the opportunity to provide input into the development of the framework. In the first phase of the project Foraker and Bolan Consulting conducted telephone interviews with staff from nine of the current ACT grantees. These initial conversations provided a wealth of information on the current program activities, program outcomes and impacts, and the grantees experience with evaluation.

One important finding from these interviews was that many of the programs are trying to achieve similar outcomes and impacts. This included a diverse group of programs, working with very different populations of families and parents, who have some common expectations around knowledge gain, skill and attitude change, and behavioral change. This preliminary insight was quite helpful in the theory development efforts, in thinking about the general activities, and in describing impacts outlined in the overall theory.

Theory of Change Development

The next phase of the project involved the development of a theory of change model that identifies the short and long-term impacts of the Trust and grantee programmatic efforts. In general, theory of change models describe a belief system (e.g., assumptions, "best practices," experiences) and strategies for making positive change in the lives of individuals and the community. They provide a clear expression of the apparent relationships between actions and hoped-for results. Theory of change frameworks are highly individual and reflect an organization's or community's unique needs and preferences for what kind of changes it wants to make as a result of its efforts.

At the completion of the grantee interviews a working group of ACT board members and current grantees convened to discuss the range of activities and strategies implemented by the Trust as a whole and by the grantees. The intent was to illustrate the connections between these activities and some of the expected short and long-term outcomes on program participants, providers, organizations, communities and the overall population.

In this work there was an attempt to align the models with the Protective Factors framework, an overarching theory based on research suggesting there is a set of five "protective factors or constructs" crucial to having positive impacts through child abuse and neglect prevention efforts. This approach has been advocated by the FRIENDS National Resource Center, and the Council for Children and Families Washington (CCF) uses a modified version with eight different factors. In addition, this framework is one of the cornerstones of the Strengthening Families approach for early childhood programs promoted by the Alaska Office of Children's Services. The definitions of these factors are presented below:

- 1) ***Social and Emotional Competence in Children.*** Activities that increase the quality of nurturing and attachment include those that teach parents and caregivers to respond appropriately to the basic needs of their babies and young children, to learn ways to stimulate healthy brain development and develop a positive and secure attachment with their child.
- 2) ***Parental Resilience.*** Activities for increasing parental resilience include those that teach parents and caregivers skills for managing both crisis and the everyday challenges of family life, activities that address the physical, emotional and cognitive impacts of stress, and activities that develop skills in daily family life management and economic self-sufficiency.
- 3) ***Knowledge of Parenting and Child Development.*** Activities that increase knowledge of parenting and child development include group or individual programs (such as home visiting) which teach parents

and caregivers the usual steps in their child's development, how to recognize if their child needs special help and how to promote healthy development. Additionally, the activities should enable parents to learn developmentally-appropriate and culturally-relevant discipline and guidance methods.

- 4) ***Social Connections.*** Activities that reduce social isolation and assure families the ability to access needed informal resources are those that give parents opportunities to engage with others in a socially acceptable/positive manner and develop informal relationships with others who are caring for children.
- 5) ***Concrete Supports in Times of Need.*** Activities that assist families to receive concrete supports in times of need are those that reduce social isolation and provide the necessary information, referrals and supports for families to access needed formal community resources.

A theory of change model can be the starting point for ongoing program/grant planning efforts, and for evaluation of Trust and grantee activities. The expectation was that the Trust would share this vision of its short and long-term impacts with the Board and interested audiences, and that the Trust would initiate a more formal evaluation process of its current programs and activities. Such a process will help the Trust in efforts to demonstrate how it is contributing to meaningful differences in the lives of Alaskans.

With respect to the overall impacts of the Trust on the “community,” there was a need to identify outcomes and measurement strategies to understand some of the important changes in the population – among providers and organizations, among policy makers, and in the system of supports and services. With respect to evaluation of direct service activities implemented by ACT grantees, there is a need to work with these organizations in identifying meaningful outcomes and indicators, and using appropriate tools to collect outcome data.

There are two other documents presenting the Trust’s overall theory of change model.

The first “model” (see Appendix C, page 1) focuses on the general strategies and the overall impact of the Alaska Children’s Trust (see “*General Community Strategies*” model). It looks beyond the direct role of ACT as a funder of direct services programs, and more at the ACT strategies targeted at families, communities, providers, organizations, and policy and decision makers. The types of outcomes portrayed in the model focus on changes in the population as a whole, for those who implement programs and services, and for those involved in setting policy and making decisions.

The second “model” (see Appendix C, page 2) looks more concretely at the outcomes for participants involved in the programs partially funded by the ACT (see “*Program Direct Services Strategies*” model). The intent of the model is to understand the progression of changes experienced by individuals and families as they engage and participate in these services, and how these changes support stronger family relationships and households. The types of outcomes in this part of the model reflect changes in individuals’ knowledge, attitudes, skills and behaviors.

Each of the two models are described in more detail below.

General Community Strategies Model

The General Community Strategies model shows the potential impacts of the Trust on three different target audiences: families/communities, providers/organizations and policy/decision makers. In each of these strands, the Trust is implementing specific activities and there is some discussion of the outcomes associated with the implementation of the strategies. The belief is that the combination of strategies targeted at these audiences, in combination with the successful delivery of direct service programs, should contribute to the goal of “Safe and Nurturing Families and Communities.” What follows is a brief synopsis of each strand of the model.

Strategies Targeting Families and Communities

ACT is currently involved in the implementation of the Social Marketing Campaign and overseeing the delivery of the Warm Line for community members to access information and resources that help with parenting and family management. The belief is that this combination of population-based interventions should build “parental knowledge” and increase “family awareness of services and resources.” This, in turn, will result in “more interest and use of parenting and support programs.” This interest and

utilization of support programs builds the need for direct service programs that work with families, parents and youth, thus providing an important resource for the “Direct Services Strategies” model.

Strategies Targeting Providers, Organizations and Those “in the field”

ACT can play an important role in communicating to providers the importance of the Protective Factor framework, and in working with providers and organizations to build local capacity for program implementation. The hope is that over time, funded and non-funded programs may build their abilities to use best practices, apply the Protective Factor framework, and work with populations in need. As the providers enhance these skills, they can more successfully affect the parents and families they work with in the ways presented in the “Direct Services Strategies” model. The hypothesis is that ACT capacity building and technical assistance can help local providers do a better job of what they are doing and help serve the needs of targeted populations.

Strategies Targeting Policy and Decision Makers

The ACT has the opportunity to play an active role in influencing and shaping policy around the issues related to child abuse and neglect prevention. The hope is that through advocacy, lobbying and involvement in policy development, the Trust can enhance its visibility, build awareness of policy issues, garner support for legislation and policies, and influence decisions as related to the issues. The outcomes of policy change, financial support and program funding will support the local program efforts to impact families and communities as shown in the “Direct Services Strategies” model.

The ACT is also currently playing an important role in facilitating the development of the statewide prevention plan around Child Abuse and Neglect prevention. At present, the planning process is building interest in the issues and support for some policies, and the belief is that in the future the final strategic prevention plan will drive decision making around policies and funding and set benchmarks for progress in this area.

Program Direct Service Strategies Model

The Trust’s primary strategy to date has been funding programs providing direct services to families, parents and communities. The Direct Service Strategies model shows the connections between the range of activities funded by the Trust and the short and long-term outcomes for participants, families and communities. As discussed earlier, there are three important “community” outcomes that would support the direct services model:

- 1) Interest in and utilization of services in the community,
- 2) Agencies/organizations with the capacity to implement effective services, and
- 3) Funding and financial support for implementation of these programs.

This model follows a common outcome progression. The programs work directly with parents and families either through classes/workshops or on a one-on-one basis, and that intervention helps build individual knowledge, awareness, and skills. This in turn helps influence attitudes about parenting and eventually shapes parental and family behaviors. As individuals start to modify their behaviors with their children and build a system of supports and resources, we expect to see less stress, stronger relationships, and positive households.

In the model, we also attempted to show the interconnection between the hypothesized outcomes and the Protective Factors framework discussed earlier. We believe this is important since many of the evaluation systems in place for outcome reporting across different programs use the Protective Factors as a framework for common outcome areas. In each outcome, we present the different CBCAP Protective Factors that best align. In many instances, the outcome appears to align with multiple factors.

Grantee Capacity Building – Utilizing The Foraker Group’s Logic Model

If a funder such as the Alaska Children’s Trust implements an evaluation system that relies, in part, on local information from grantees, it is crucial that these grantees have the capacity to formulate and implement

evaluation efforts. In the current project the Trust's ability to speak to the aggregate impacts of the local programs on the outcomes specified in the Program Direct Services Strategies model is dependent on the collection of the right data on the right outcomes and indicators.

The initial set of interviews suggested that while local programs were collecting "evaluation" data on their programs, it was clear that many of them were unfamiliar with doing outcomes evaluation and perhaps not collecting the most useful outcome data. Moreover, with funders mandating more systematic evaluation of the local programs, it was important to provide the ACT grantees with some basic training on evaluation, with a particular emphasis on the development of program logic models, and the specification of measurable indicators.

In December 2008 all current ACT grantees were invited to an evaluation training workshop that addressed areas of logic model development, indicator selection and an introduction to a compendium of available data collection tools. The presentation, and associated work, on the logic models emphasized the importance of connecting local program activities and outcomes to the Protective Factors framework and aligned these with one of the five stated factors. Each of the grantees was given the opportunity to receive ongoing technical assistance on the development of the logic models.

The Foraker Group Logic Model

The focus of the December 2008 grantee training was introducing the concept of outcomes evaluation, utilizing Foraker's outcomes evaluation curriculum with associated logic model and indicator development exercises. By definition, a logic model describes a way to think about something. In this regard, Foraker's logic model provides a succinct and accessible way to think about outcomes evaluation. Using the logic model, grantees were tasked with developing a logic model for a part of their program that is funded by the Trust. Through a series of steps, grantees were able to articulate short-term, mid-term, and long-term outcomes for specific programs. Appendix A provides a brief description of Foraker's logic model and development steps. Part of developing a useful logic model is coming up with meaningful and measureable indicators of success. Foraker utilizes an exercise to help with indicator development and selection – that exercise appears in Appendix B.

SECTION 2: ACT IMPLEMENTATION OF THE EVALUATION FRAMEWORK – RECOMMENDATIONS FOR FUTURE USE

The hope of this project has been to develop tools and a framework that the Alaska Children's Trust will embrace, adopt and put into practice for agency-wide and local program evaluation efforts. With the overall theory of change models in place, and a means for providing grantees with local capacity building, there are a number of avenues the Trust may pursue in starting to use this framework for program improvement efforts.

Using General Community Strategies Theory of Change Model for Evaluation of Trust Impacts

The Trust should consider using the model to start gathering data on community impacts. The model highlights the many short and long term impacts for families, communities, providers, policy and decision makers that may result from strategies such as marketing campaigns, capacity building and advocacy efforts. To better understand the Trust's role in influencing these changes over time the staff and board should:

- 1) **Identify some priority outcomes in the theory of change model** – these might include a smaller set of short and/or long term outcomes in the model that, with data, would help convey some of the key impacts of the Trust efforts. It would make sense to identify at least one priority outcome under each of the "strategy" areas (i.e., those targeting families/communities, providers/those in the field, and policy/decision makers)
- 2) **Identify appropriate measurable indicators for the chosen priority outcomes** – as we have taught the local grantees how to better specify indicators for chosen outcomes, it will be crucial for the Trust to "define" what they mean by the priority outcomes chosen. As an example, in the case of the outcome "Increased use and application of the Protective Factors framework in service delivery" it is necessary to define what "use and application" of the framework would look like for a program in support of trying to get accurate data on whether this has occurred over time

- 3) **Develop and implement an evaluation plan to gather information on the chosen outcomes** – with the chosen outcomes and specified indicators the Trust needs to develop a plan to gather appropriate information from communities/families, providers/organizations and policy/decision makers. Such a plan would likely include some quantitative and qualitative methods to inform the outcomes, and would specify how often the Trust might collect and report on this information to stakeholders.

Using Program Direct Service Strategies Theory of Change Model for Evaluation of Grantee Programs

The Direct Service Strategies model represents an initial presentation of the impacts of parent and families programs funded by the Trust. At this point the Trust requires very little with respect to local program evaluation, instead relying on the programs to report on what they have done, and then convey any information they have gathered on changes in participants. With this model in place and a mechanism for capacity building, the Trust can choose to carry out more purposeful and systematic evaluation. This could involve:

- 1) **Selection of priority outcomes in this theory of change model** – as in the Community model, there may be some change in knowledge, skills, attitudes and behaviors in this model that are both common across funded programs, and would help the Trust best present some of its aggregate impacts on families served through its grant support.
- 2) **Working with local grantees in the development of program logic models and measurable indicators** – the Trust could ask local programs to develop logic models that address these priority outcomes, and that align with one of the five protective factors. The Trust can further help the local programs find the right indicators for chosen outcomes.
- 3) **Working with local grantees in the identification of data collection tools and ways of reporting findings** – if the Trust is hoping to present some of the aggregate impacts of their funding through the services carried out by many different entities, there needs to be some coordination in how data is collected and reported. The Trust may have an interest in sharing these aggregate outcomes with stakeholders and audiences. As an example, the CCF in Washington has relied on the local program reporting of outcomes and indicators to be able to communicate about the aggregate impacts under each of the defined protective factors.

Modifications to Grantee Selection, Monitoring/Reporting, and Capacity Building

As systematic evaluation becomes more integrated in the Trust's work it is possible that some of the requirements placed upon local grantees might need to change to support the aims of the evaluation framework. Some of these are noted below:

- 1) **Selection of program grantees** – many funders and foundations that have engaged in similar theory building processes have used the theory and outcomes to help in their strategic planning areas. For some they have started to ask potential grantees to show how they may align with prioritized outcome areas, or in the case of CBCAP programs, how they align with prioritized Protective Factors. In this scheme a funder can be more intentional about the programs they choose to fund, showing that these programs will theoretically lead to greater changes in the outcomes they have prioritized. In terms of logistics this might involve asking potential grantees to submit logic models as part of the initial review process, and realistic evaluation plans once funded by the Trust.
- 2) **More systematic monitoring of grantees' progress** – currently the Trust asks for quarterly reports from the grantees that focus on how much is being done and how things are going. If there is a greater requirement for reporting on program impacts, the Trust should consider developing a reporting mechanism that gathers the right data from these programs at the appropriate time frames. Our experience suggests reporting on program outcomes once yearly is sufficient for allowing a program to work with enough clients/participants to have a sizable sample size and for a long enough period of time to effectively implement data collection. The Trust can develop a reporting format template that makes it easy for grantees to share the evaluation data need to convey their impacts for the Trust to use in their overall reporting efforts.

Logic Model Exercise

On the attached worksheet, document the following for one or more of your organizational programs:

1. Resources are the elements or ingredients that constitute your program. List the following:

- Who provides your program? (e.g. staff, volunteers, contractors)
- Who participates in your programs? (e.g. individuals, families, etc.)
- Where does the program take place? (e.g. clinic space, classrooms, etc.)
- How is the program funded? (e.g. foundation/government grants, participant fees, etc.)

2. Activities are what you do. These are the processes or events that you undertake using the resources available. List your major programmatic activities. Examples: “Meal Delivery Program,” “Smoking Cessation Program”

3. Outputs describe the number and type of participants served; the number and duration of events, and all products produced by your activities. Please list:

- The number, type and duration of program events or interactions, and the number of program participants. Example: “30 single moms receive one hour of weekly one-on-one counseling on coping skills.”
- The number and types of any products that are created by the program. Example: “1,200 newsletters mailed to clients”

4. Outcomes are what you cause to happen, and describe changes in *beliefs*, *attitudes*, *knowledge*, and *behaviors* that the program produces. Now describe appropriate outcomes for your programs at the individual, organizational, and community level. Example: “Decrease smoking and drug use among low-income youth.” As you identify your program outcomes, determine whether these are short-term, intermediate, or long-term outcomes of your program work. Please structure your outcome statements using the following format:

The Desired Effect	In What	For Whom
Increase	Attitude	Program Participant
Decrease	Perception	Client
Maintain	Knowledge	Individual
Improve	Skill	Family
Reduce	Behavior	Neighborhood
Expand	Condition	Organization
Etc.	Etc.	Community

5. Goals are the ultimate impacts your program expects to make, and are consistent with the larger mission and vision of your program. Goals are often influenced by other factors in addition to your program.

Indicator Selection Exercise

Select one or more outcomes from your logic model to which you believe your program can be held accountable. Use the attached worksheet as you do the following:

1. Decide upon up to three indicators that are most appropriate for the outcome(s) you have selected. Indicators provide specific, observable and measurable evidence that outcomes are being achieved. Before you settle upon a specific indicator, ask yourself the following questions:

- What could you see, hear, or read that would tell you that this outcome is being achieved?
- Do the indicators make sense in relation to the outcomes they are intended to measure?
- Are the indicators specific and measurable in some way?
- Are the indicators useful to your organization in determining your effectiveness?
- Based on the nature of your interactions with your target audience, can your program have a meaningful impact on this indicator?

2. Describe some data gathering strategies that might be appropriate for the indicators you've selected, such as:

- Polls, Surveys or Questionnaires
- Interviews or focus groups
- Direct observations
- Client records
- Official documents
- Tests

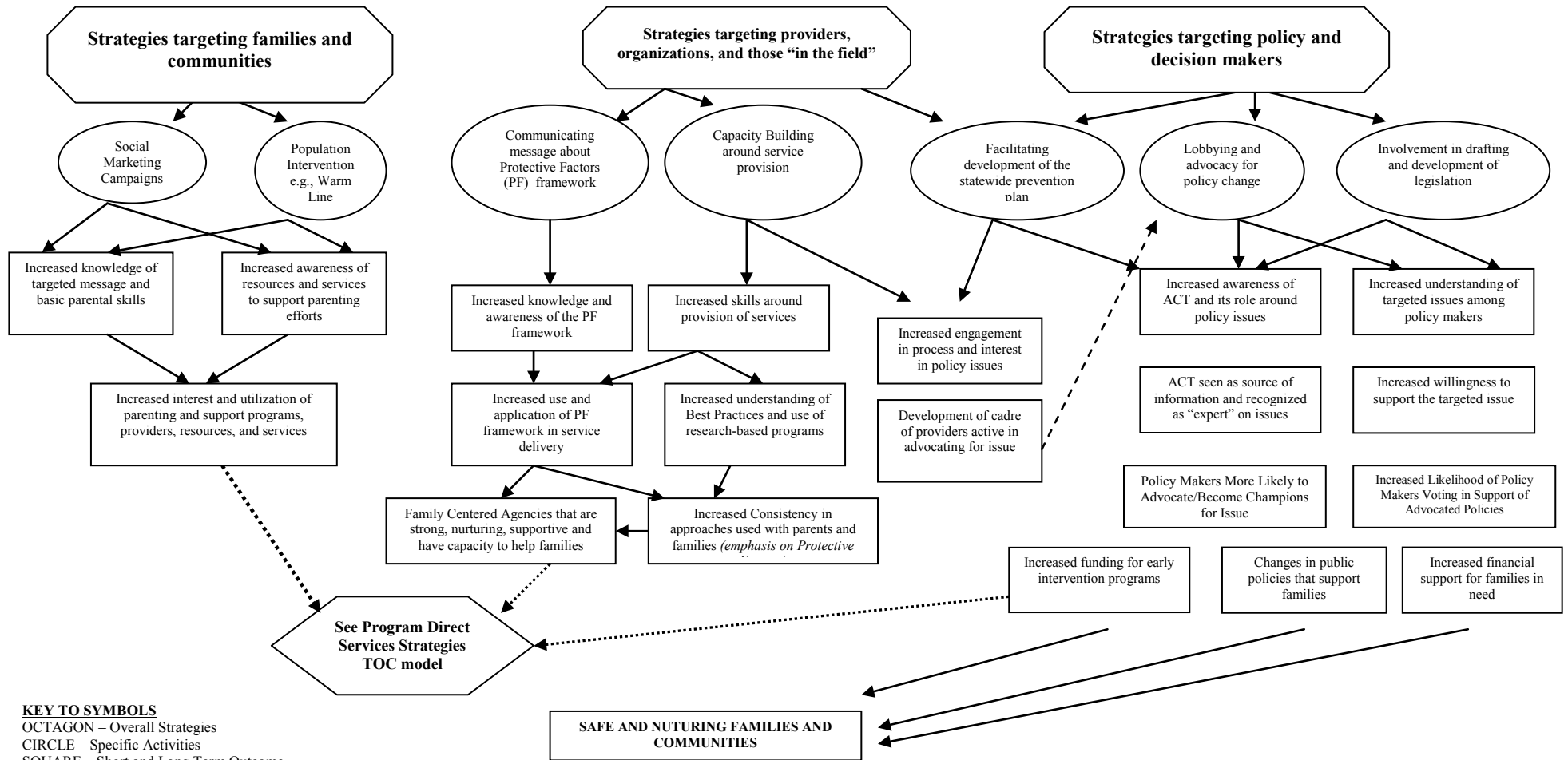
Consider the following examples from a child literacy program:

Outcome	Indicator	Data-gathering strategy
Increase parent-child interaction in reading	Amount of parent time spent on reading or storytelling	Survey or interviews with parents
Increase comprehension and use of language by children	Percent of children who demonstrate improved speaking skills	Observations by teachers
Increased reading skills among children	Number of children who read at or above their grade level	Testing by teachers

Table above includes information excerpted from *Outcomes for Success: 2000 Edition*, Evaluation Forum, 2000: Seattle, WA

Appendix C: Alaska Children's Trust Theory of Change

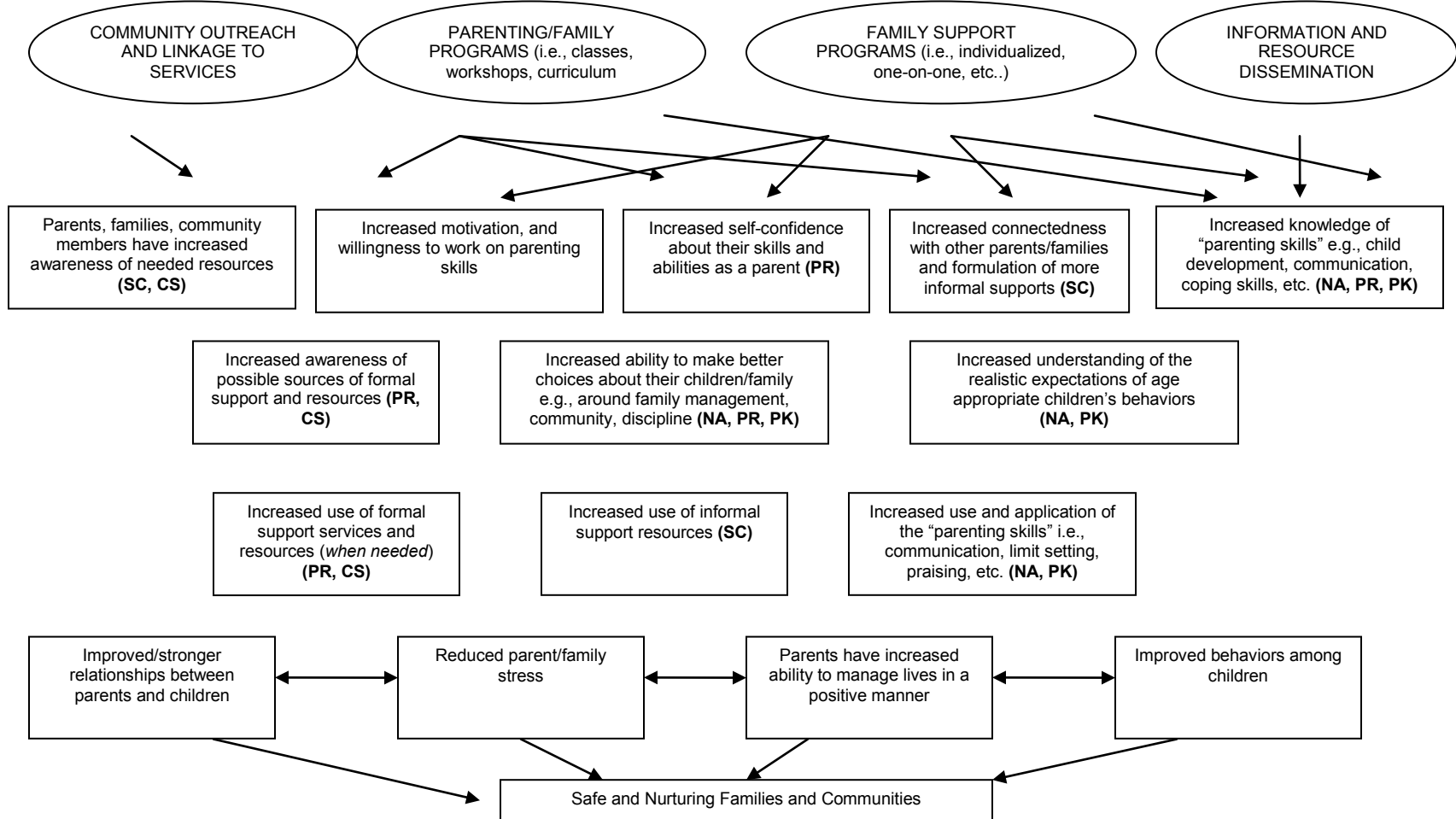
Page 1: ALASKA CHILDREN'S TRUST: THEORY OF CHANGE – General Community Strategies (8-1-08)



KEY TO SYMBOLS

- OCTAGON – Overall Strategies
- CIRCLE – Specific Activities
- SQUARE – Short and Long Term Outcome
- HEXAGON – reference to Direct Services Model

Page 2: ALASKA CHILDREN'S TRUST: THEORY OF CHANGE – Program Direct Service Strategies (8-1-08)



CBCAP Protective Factors Framework

- Parental Resilience (PR)
- Social Connections (SC)
- Knowledge of Parenting (PK)
- Concrete Supports (CS)
- Nurturing and Attachment (NA)

KEY TO SYMBOLS

- CIRCLE – Specific Activities
- SQUARE – Short and Long Term Outcome

Relevant Protective Factors presented in the outcome boxes above