

Evaluation as an intervention to help you achieve results -Empowerment Evaluation

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Background paper.

More and more funders, practitioners, communities, and evaluators want an evaluation approach that helps achieve effective programs. Traditional and audit approaches to evaluation have legitimate roles to play in answering the question, “What happened?”. However, many funders and communities are frustrated with the norm of evaluation reports that say the program was not effective. Are there other roles that program evaluation can play? My colleagues and I have developed an approach to evaluation called empowerment evaluation (EE) that aims to help practitioners and communities to achieve results using the theory, logic, and tools of evaluation. Given the needs of our societies to obtain meaningful outcomes, empowerment evaluation is worth your consideration.

Table 1 provides basic information about EE.

Table 1. The Why, What, When, Where, How, and Who of Empowerment Evaluation

Why was EE developed?

There is a commonly held perception that many program evaluations tend to show few, if any, outcomes. This has led to tremendous dissatisfaction and disappointment with programs and with program evaluation. There are many reasons EE was developed. However, a major motivation for the creation of EE was to offer an alternative that is sensitive enough to detect and document program outcomes and that helps programs work better.

What is EE?

“EE aims to increase the probability of achieving program success by: (a) providing program stakeholders with tools for assessing the planning, implementation, and self-

evaluation of their program, and (b) mainstreaming evaluation as part of the planning and management of the program/organization” (Wandersman et al, 2005, p. 28).

When is EE appropriate?

EE is well-suited as an evaluation approach when the primary goal of the evaluation is to help place evaluation tools in the hands of program participants and staff members in order to help programs achieve results. EE is particularly appropriate if the stakeholders are interested in having the evaluators involved at the beginning with program planning and implementation. If the primary goal of the evaluation is to examine whether or not a program worked according to a predetermined theory and without influence from the evaluator, then the “hands-off” stance of traditional evaluation is more likely to be a suitable approach.

Where is EE used?

EE is used in health and human service programs, nonprofits, education, business, foundations, synagogues, and government. It is also used at multiple levels, including program, organization, municipality, state, nationally, and internationally. The EE approach can be useful in a variety of settings as long as the evaluation needs fit the Why and When of EE.

How is EE practiced?

The application of the principles of EE (*Improvement, Community Ownership, Inclusion, Democratic Participation, Social Justice, Community Knowledge, Evidence-based Strategies, Capacity Building, Organizational Learning, and Accountability*) guide the practice of EE. Multiple methods, including traditional evaluation methodology, Fetterman’s Three Step approach, and the Getting to Outcomes 10 step approach can be used to implement the values of the approach. EE is not defined by its methods, but by the collaborative manner in which methods are applied according to the EE principles.

Who uses EE?

EE involves key program stakeholders, including funders, practitioners, program staff members, participants, and evaluators. These stakeholders hold each other accountable to an interdependent, results-based approach to evaluation.

Some Current Projects Using EE

Tobacco Prevention Programs

The tobacco industry is spending over \$97 million a year to encourage minority youth to use tobacco in the State of Arkansas. The Minority Initiative Sub-Recipient Grant Office (MISRGO) at the University of Arkansas at Pine Bluff is responsible for coordinating a State-wide effort to respond to the tobacco industry’s efforts. MISRGO has

awarded contracts to community-based organizations throughout the State to help reduce tobacco consumption. An empowerment evaluation approach has been adopted to guide this tobacco prevention effort and coordinate evaluation efforts throughout the State.

One of the areas of weakness identified by the group involved the absence of a systematic data collection system (to record the number of people who quit smoking). This self-evaluation finding was a result of the “taking stock” exercise, in the 3-step empowerment evaluation process. In response to this weakness, the group developed an “evaluation monitoring system” which enables grantees to document their effectiveness by recording the number of people who quit smoking or the number of lives saved. The grantees also translated these findings into dollars saved, specifically in terms of reducing excess medical costs for the State. They multiplied the number of people who quit smoking by the average excess medical costs per person. The total saved, combining the efforts of all the grantees to date, is in excess of \$84 million (see <http://homepage.mac.com/profdavidf/Tobacco.htm>).

This self-assessment data has been instrumental in helping grantees monitor their effectiveness. The collective nature of the effort has served as peer pressure to maintain the effort. The data generated from this evaluation monitoring system has also been used to influence policy decision-making, including appearances before the Black legislative caucus in the State. Grantees have also successfully shared this data with the news media to influence a concerned citizenry. Outcomes in this case example, can be expressed in terms of dollars and cents, as well as increased capacity.

Multi-state Prevention Efforts

The scale and scope of empowerment evaluations are continually growing. We believe that in order to build capacity and reach outcomes in large scale programs, it is

increasingly necessary to develop an empowerment evaluation system that includes tools, training, technical assistance (TA), and quality improvement/quality assurance (QI/QA) (Wandersman, 2007). These are all key ingredients of a full Getting To Outcomes (GTO) system. Wandersman and colleagues are developing GTO systems that work at multiple levels. They are working with the CDC to achieve outcomes by promoting science-based approaches.

The Promoting Science Based Approaches to Teen Pregnancy Prevention (PSBA) project is a 5-year, capacity-building, cooperative agreement between 16 (national, regional, and state level) grantees and the Centers for Disease Control and Prevention (CDC). All grantees are charged with building the capacity of their own organization to serve as a technical assistance (TA) provider in science-based approaches to teen pregnancy prevention and to build the capacity of others, particularly at the local level. Ultimately, the aim of the project is to improve the likelihood that local prevention delivery partners will select, implement, and evaluate a science-based approach to prevent teen pregnancy by building their capacity to do so (Lesesne, et al., 2008).

Wandersman and colleagues are also working with two state agencies and multiple counties in New York State to promote results-based accountability. The projects also have an explicit emphasis on outcomes. The projects will represent another set of test cases concerning how large-scale empowerment evaluations might function.

Next Steps

Technology

Empowerment evaluators have long realized the benefits of the Internet, ranging from web pages to listservs and videoconferencing to online surveys (Fetterman 2001, p. 129-

140). Technology is, in part, responsible for the exponential growth of the approach in a relatively short period of time. And, it appears that this relationship is only beginning to blossom.

The American Evaluation Association Collaborative, Participatory, and Empowerment Evaluation topical interest group (TIG) recently created an interactive blogⁱ to enhance evaluative dialogue in the field. In addition, a team of empowerment evaluators at Stanford University's School of Medicine are using interactive, collaborative writing software owned by Google called Writely. It allows us to collaboratively write IRBs, evaluation plans, reports, and articles on the Internet together. The Arkansas team of empowerment evaluators are using an interactive, collaborative spreadsheet owned by Google to manage incoming data concerning numbers of people who quit smoking and how this translates into dollars saved in terms of excess medical costs.

In addition, Zhang and Wandersman and colleagues have a technology transfer grant (STTR) from the National Institute on Alcoholism and Alcohol Abuse and Alcoholism to develop an interactive web based Getting To Outcomes system and to research its utilization. In this grant, the iGTO system is being rolled out in two states in over 30 coalitions with more than 50 programs. The system will be used at multiple levels: program, coalition, state. Data will be gathered and *used* at each level for program improvement and program accountability purposes and travel up to a higher level to promote appropriate technical assistance support as well as quality assurance. iGTO is more than a hierarchical reporting system. It builds in guidance for how to do each of the 10 steps and then helps the user answer each of the steps with their data. This helps them fulfill results-based accountability.

The immediate future promises to build on this type of dynamic cyber-tradition in empowerment evaluation. This web-based engagement has produced innovations, created new opportunities for collaboration, and taught numerous lessons about process use and knowledge use that extend far beyond the walls of empowerment evaluation. The lessons learned from this exchange are applicable to evaluation as a whole as the entire field grows and evolves in the digital age.

Conclusion

Empowerment evaluation has captured the imagination of many evaluators, program staff, and program participants who are committed to achieving outcomes on important educational, health, and human service concerns. We have made advances in conceptual clarity, methodological specificity and rigor, and documentation of outcomes. We are eager to seize this opportunity to continue to work with communities, as we all expand our understanding and insight into empowerment evaluation.

Selected References

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