Using an empowerment evaluation approach with community-based programs

Reflections from the front line

Identifying the most appropriate approach for small-scale program evaluation remains a vexed issue for both the researchers who design and implement evaluations, and for the service provider organisations that seek to ensure that they can use the findings as evidence for further program funding. This article reflects on our experiences and the issues encountered in attempting to undertake useful small-scale, community-based program evaluation, particularly in regional settings, where the evaluation capacity, practices and cultures of organisations are still evolving.

Cognisant of increasing funder–fundee tensions arising from more externally controlled social program evaluations and considering varied organisational, program, personnel, funding and broader political needs and influences, we have focused on tailoring evaluation approaches to ensure they are robust, relevant and responsive to the varied organisational contexts in which we are endeavouring to strengthen evaluation capacity. The approach that has emerged over the past eight years fits most closely with an empowerment evaluation framework that, although theoretically well suited, has had to be adapted in order to respect, and work productively with the frequently competing imperatives of the different stakeholders involved.

**Introduction**

Over recent years we have witnessed a considerable shift in Australia in the way child and family initiatives are funded. This has involved the devolution of funding to a wide range of non-government and community-based organisations that have carriage of implementing and evaluating some quite complex program initiatives with varied goals, objectives, strategies and accountability requirements. An example of one such major initiative was the second phase (2004–2009) of the Department of Families, Housing, Community Services and Indigenous Affairs’ Stronger Families and Communities Strategy (SFCS), which distributed over $500 million across hundreds of locally driven projects aimed at ‘giving families, their children and communities the opportunity to build a better future’ (Australian Institute of Family Studies 2004, p. 3). A number of organisations based in the region where our research centre is located were successful in securing SFCS funding, ranging from a few thousand dollars for small-scale projects to almost $4 million for a community-wide needs assessment and subsequent service provision over five years. With their funding agreements all specifying various evaluation and reporting requirements, many of these organisations approached our centre for support with these activities. Over the next few years, we witnessed ongoing demand

Sallie Newell
Anne Graham

Sallie Newell (left) is a Senior Research Officer at the Centre for Children and Young People, Southern Cross University, Lismore, NSW.
Email: <sallie.newell@scu.edu.au>

Anne Graham (right) is the Director of the Centre for Children and Young People, Southern Cross University, Lismore, NSW.
Email: <anne.graham@scu.edu.au>
for such support, as increasing amounts of government
and philanthropic funding for child and family
programs were directed through local, community-based
organisations (Rawsthorne & Shaver 2008). The nature
of these funded programs was well aligned with our
centre’s primary aim of enhancing the safety, wellbeing
and participation of children, young people and families,
particularly in regional and rural areas.

Concurrent with these developments in the
outsourcing of government services through non-
government and community-based organisations,
there were increasing calls for improved understanding
around evaluation and for legitimising a broader range
of approaches beyond ‘gold standard’ experimental
approaches that were not necessarily viewed as the
best ‘fit’ with existing organisational capacities,
needs and program requirements. This was evidenced
in documents such as The Community Manifesto,
produced by the Our Community group, elucidating
the kind of challenges being navigated by the
non-government sector with the shift to increased
responsibilities and accountabilities (Our Community
2003). The top five challenges were identified as
improving socio-epidemiological research, improving
assessment and evaluation processes, increasing
the diversity of the population engaged with their
programs, improving governance and enhancing
organisational infrastructure and organisational
capacity. Embedded in such discussions were increasing
tensions between funders and service providers around
the former’s privileging of certain kinds of evaluation
approaches, namely externally controlled, experimental
methodologies that often delivered evaluation tools
not well suited to organisations’ clients, programs or
circumstances (McCall & Green 2004).

Over time, there was a growing acknowledgement
in the wider evaluation literature that such
methodologies may limit community organisations’
ability to deliver flexible, responsive and innovative
services, hinder efficient resource use and result in data
of questionable meaning, especially when aggregated
across multiple services or sites (Aldridge et al. 2009;
Australian Council of Social Service 2009; Eakin 2007;
Keevers, Treleaven & Sykes 2008; Muir et al. 2009;
Rawsthorne & Shaver 2008). Consequently, the 2003
concerns and conflicts were still evident in a 2009
review of the non-profit sector within Australia:

Most NFPs agree that significant financial support
warrants accountability (such as audited accounts
and business plans) and demonstrable results.
However, many argue that current requirements are
not appropriate, impose compliance costs without
commensurate benefits and are lacking any sense of
proportion in regard to the size of the organisation
or scale of the undertaking. (Productivity
Commission 2010, p. xxx)

Such debates are also echoed internationally, with a
recent survey of non-profit organisations in the United
States finding that many reported a need for additional
support, resources and/or capacity in relation to
evaluating their services (Carman 2010).

It was against this backdrop that we undertook to
engage more critically with, and to document closely,
the process of working productively with the needs,
debates and tensions inherent in program evaluation
with smaller non-government and community-based
organisations. With our focus on capacity building, and
in light of these ongoing methodological conflicts, it
was evident that more collaborative and participatory
evaluation approaches may be better suited to
community-based programs. Such approaches were
well supported in the wider evaluation literature and
were already being utilised by some non-government
organisations. For example, the James Irvine
Foundation asserted that an optimal social program
evaluation should actively engage all stakeholders
in its activities, with evaluators seen as ‘catalysts for
organisational change’ instead of ‘neutral recorders of
program processes and outcomes’ (Hasenfeld, Hill &
Weaver 2002, p. 2).

After a period grappling with how best to advocate
for and implement such an approach, we had the
opportunity to explore more closely the concept of
empowerment evaluation (Fetterman 2001), through
an Australasian Evaluation Society workshop led
by its founder, David Fetterman. This approach
resonated strongly with what we were striving to
achieve, with its stated aim ‘to increase the probability
of achieving program success by (1) providing
program stakeholders with tools for assessing the
planning, implementation and self-evaluation of their
program and (2) mainstreaming evaluation as part
of the planning and management of the program/
organisation’ (Fetterman & Wandersman 2005, p. 28).
Furthermore, its 10 key principles (detailed in Table 1),
along with their associated roles and responsibilities
for all stakeholders, provided a clear action-oriented
framework and offered particular promise for
navigating many of the funder–service provider
tensions being encountered.

This article aims to contribute to ongoing dialogue
about optimum approaches and methods in social
program evaluation. It is not our intention to assert or
privilege one methodology over another, but instead
to share some of the insights from our own rich and
nuanced story of engaging with the vexed issue of
robust, relevant and respectful evaluation in the context
of smaller non-government and community-based
organisations. In doing so, we analyse the potential of
an empowerment-oriented approach as a possible way
forward, highlighting some of the challenges, tensions
and possibilities we’ve encountered in collaborating
around and implementing such an approach.
TABLE 1: THE 10 KEY PRINCIPLES OF EMPOWERMENT EVALUATION (EE)

| 1 Improvement | A high value is placed on the improvement of people, practices, programs, organisations and communities. Practice and program improvement is seen as a means to enhance sustainable results. A developmental perspective must guide decision-making about implementation of strategies and assessing results. |
| 2 Community ownership | The community has the right to make decisions about actions that affect its members’ lives. Implementation of evaluation activities will be determined by the local context and the decisions of stakeholders. Evaluation is most likely to lead to program improvement when the community is empowered to exercise its legitimate authority to make decisions that direct the evaluation process. |
| 3 Inclusion | Inclusion of diverse perspectives and knowledge in the evaluation process is valued. Direct participation by key stakeholders in decision-making is used whenever possible. Evaluation is most likely to lead to program improvement when inclusive decision-making is integrated into planning and practice. |
| 4 Democratic participation | Active participation by all in shared decision-making is valued. Democracy is seen as a personal way of life based on a belief in the capacity of all for intelligent judgement and action when supplied with the right conditions. EE is a fundamentally democratic process based on deliberation, communicative action and authentic collaboration. |
| 5 Social justice | EE places a high value on addressing the larger social good of practices and programs. EE is committed to fostering the conditions that enable all individuals to develop their capacity for intelligent judgement and action as a means to achieving a more just society. EE is viewed as a means to help people address inequities in their lives by developing their capacity to implement and sustain programs that achieve results. |
| 6 Community knowledge | Community-based knowledge and wisdom is valued and utilised. Identifying and sharing tacit knowledge within a community of learners to create new knowledge is viewed as essential for implementing EE. The experience of the community is seen as an essential resource for making decisions about evaluation activities, contextualising evidence-based strategies and interpreting evaluation results. |
| 7 Evidence-based strategies | A high value is placed on providing logical and empirical justification for action. The collective inquiry of scholars, researchers and practitioners engaged in identifying and developing evidence-based strategies is highly valued. Evidence-based strategies should be used to guide decision-making about the implementation of strategies and activities. |
| 8 Capacity building | A high value is placed on building the capacity of individuals and organisations to evaluate their own programs. EE is based on a belief that all individuals and organisations are capable of conducting evaluation when provided with the necessary tools and conditions. EE requires individual changes in thinking and behaviour and program changes in practices, procedures and culture. |
| 9 Organisational learning | A higher value is placed on improvement, innovation and systems change than on maintaining the status quo. The use of evaluation results to guide improvement is seen as an essential activity of successful organisations. Full implementation of EE requires an organisation to be, or to become, a learning organisation. |
| 10 Accountability | Empirical evidence is valued when determining the worth of interventions. A commitment to results-based interventions is essential for honest, accurate evaluation. The greatest probability for the sustained achievement of results occurs when evaluation is employed in the spirit of continuous improvement. |

Reproduced from Lentz et al. 2005, pp. 158–162
The nature of the evaluation challenge

Having committed to program evaluation support for community-based organisations working with children, young people and families, we faced a number of challenges. As elaborated below, the overarching challenge was to develop relevant, appropriate methods capable of providing credible and meaningful results across a broad diversity of projects and contexts, usually within very limited budgets and/or time frames. Given the unpredictability and complexity of human lives, and the political landscape, there was also a need for methods that could adapt to the varied, and often changing, needs of individual projects and organisations.

As noted by others (Hasenfeld, Hill & Weaver 2002; Head 2006), the predominant challenge encountered was the diverse nature of the projects seeking evaluation support, with regard to their stakeholders, nature and contexts. The collaborating organisations were mostly non-government organisations but also included government agencies, usually as the funding body. Most organisations operated at a local (town) or regional level and they spanned a wide range of disciplines, with family relationships, community services, education and health featuring most commonly. Most had limited, ambivalent or negative previous experiences with evaluation. Some organisations indicated that their projects had been subjected to evaluations that they felt had failed to accurately capture what the programs involved and were achieving. At the same time, taking up substantial amounts of time that could have otherwise been allocated to service delivery.

The duration of projects varied (ranging from just a few months to over five years, with most lasting less than one year), as did their budgets (ranging from $0 to over $100,000, with most less than $10,000). While most projects covered nearby or broader regions, about half involved collaborating organisations based in the same city as our centre, with most others based in towns within the broader region. The projects were conducted across a wide variety of settings, although community services, high schools and other community settings featured most commonly. Almost all the projects were multidimensional and targeted children and/or young people, with about three-quarters also targeting families and about half targeting workers and/or services. The projects had a median of five separate intended outcomes, with most less than one year, as did their budgets (ranging from $0 to over $100,000, with most less than $10,000). While most projects covered nearby or broader regions, about half involved collaborating organisations based in the same city as our centre, with most others based in towns within the broader region. The projects were conducted across a wide variety of settings, although community services, high schools and other community settings featured most commonly: Almost all the projects were multidimensional and targeted children and/or young people, with about three-quarters also targeting families and about half targeting workers and/or services. The projects had a median of five separate intended outcomes, again spanning a very broad range but with the most common being: children and young people’s social-emotional development or wellbeing; parental knowledge, attitudes or skills; workers’ knowledge, attitudes or skills; service delivery or accessibility; children and young people’s physical development or wellbeing; children and young people’s cognitive development or academic achievement; and reducing inequities between population subgroups.

The projects targeted a wide range of children and young people (from 0 to 25 years old), with some targeting only particular subgroups, while others used universal approaches and others employed a combination of both approaches. In terms of sample size, the projects tended to be skewed towards involving less than 200 or over 1000 children or young people. Many projects involved large proportions of children from potentially vulnerable groups including, most commonly, those from low socioeconomic backgrounds, living with parental conflict or violence, of Aboriginal descent or living with parental mental illness.

There was also considerable variation between projects’ stages of implementation at the point when evaluation support was sought: some programs were still being developed, others were developed and due to begin in the very near future, while others had already begun implementation. There were also quite frequent changes within many of the programs being evaluated, in response to changes in the needs they sought to meet, the nature or content of the strategies being delivered, staff changes or turnover and/or changes in the broader social, economic or political context in which they operated (Hasenfeld, Hill & Weaver 2002).

This brief overview points to the many challenges often facing those responsible for evaluating community-based programs, namely:

- overcoming organisational inexperience and/or scepticism about the value of evaluation processes (Australian Council of Social Service 2009; Eakin 2007; Keevers, Treleaven & Sykes 2008; Rawsthorne & Shaver 2008)
- navigating often competing stakeholder needs and expectations, both between and within collaborating organisations (Aldridge et al. 2009; Carman 2010; Skolits, Morrow & Burr 2009)
- designing evaluation tools and processes appropriate to programs’ unique characteristics, clientele and starting points, and capable of accommodating any mid-program changes (Hasenfeld, Hill & Weaver 2002)
- delivering meaningful and credible evaluations with often limited resources and/or time frames (Bamberger et al. 2004; Cheverton 2007; Muir et al. 2009; Rawsthorne & Shaver 2008).

The perceived potential of an empowerment evaluation approach

Faced with this array of challenges, as well as the broader contextual conflicts, empowerment evaluation, with its 10 key principles (detailed in Table 1) and overarching mission ‘to try to understand a situation from the participant’s own perspective as accurately and honestly as possible, and then to proceed to improve it with meaningful goals and strategies and with credible documentation’ (Fetterman 2001, p. 4), appeared potentially well suited to this particular program evaluation context.
The focus of this approach is on ‘improving’ rather than ‘proving’ by emphasising what is learned about a program’s strengths and limitations and how these learnings can enhance future programs. This approach acknowledges organisations’ primary focus on improving their clients’ outcomes, rather than on proving that they have done so. In conjunction with the collaborative and participatory emphases, this was seen as important for overcoming any initial organisational reluctance and actively engaging staff in the evaluation of their programs. Such engagement was considered critical in enabling the development of evaluation tools and processes that enhanced, rather than detracted from, the practitioner–client relationship (Cheverton 2007).

This capacity-building intent, which resonated with the centre’s educational function, was in keeping with the growing demand for improved evaluation processes and capacity within community organisations (Head 2006; Melville 2008; Millar & Guenther 2007; Our Community 2003). Establishing the organisational capacity, tools and processes for ongoing data collection and reporting also provided the theoretical potential to generate more extensive and rigorous ‘practice-based evidence’ (Centre for Community Child Health 2011) capable of informing practitioners and policymakers.

The collaborative approach and methodological flexibility facilitated the development of evaluation tools and processes based on their contextual and practical relevance. Such tailored and embedded approaches were intended to increase the likelihood of capturing consistent client and service delivery information for all (or almost all) clients, which seems unachievable with externally collected data (National SFCS Evaluation Team 2009; Ryan 2003; Tannous & Katz 2008). Such approaches had proved particularly useful for those working with more vulnerable or disadvantaged groups, including Indigenous communities (Australian Health Ethics Committee 2005; Cousins & Whitmore 1998; Hasenfeld, Hill & Weaver 2002; Schwandt 2005). Actively engaging organisations in collecting routine evaluative data was also a way to reduce the financial costs of achieving a comprehensive program evaluation, by limiting external data collection requirements. It was also expected to contribute to enhancing the organisations’ program planning and evaluation capacity (Hasenfeld, Hill & Weaver 2002) while providing them with rich iterative feedback capable of enhancing their current and future outcomes by facilitating the tailoring of services to best meet the needs, preferences and existing capacities of the target client group (Muir et al. 2009; Ryan 2003).

The reality
As Albert Einstein reputedly suggested, ‘In theory, theory and practice are the same … in practice, they’re not’. Such a view captures well our experiences with trying to implement an empowerment evaluation approach. The following sections present our own and some of our collaborating organisations’ reflections in relation to the approach’s 10 key principles. The latter data were collected in May 2008, through telephone interviews with a purposive, broadly representative sample of the individuals, projects and organisations with whom we had collaborated. Interviews were completed with 25 respondents (comprising 12 senior managers, nine with a dual program management/worker role and four front-line workers), representing almost three-quarters of the 35 evaluation projects conducted to date, two-thirds of the 29 organisations and a quarter of the 107 individuals involved in those projects. A comparison of the characteristics of the projects and organisations represented and not represented among the 25 respondents showed high levels of comparability in terms of the numbers and/or types of commissioning organisations, program delivery settings, geographical ranges covered, beneficiary groups, children and/or young people targeted (including potentially vulnerable sub-groups), recruitment methods, intended outcomes, evaluation support provided, data collection methods and tools involved, groups data were collected from and by, and methodological and analysis techniques. The interviews followed a structured script, with both open-ended questions and rating scales, and explored respondents’ expectations of, and satisfaction with, their collaboration with the centre and whether they perceived any benefits from the collaboration, in relation to five learning, five practice-related and five program-related indicators. Before, throughout and at the end of their interview, respondents were encouraged to provide critical, constructive feedback and to comment about their ratings.

Principle 1: Improvement
This principle was probably the most readily implemented, with our centre and most collaborating organisations already articulating predominantly strengths-based, improvement-focused philosophies. The data from the feedback interviews indicated the most common expectations of collaborating with the centre were: to learn something about their programs’ effectiveness, strengths and/or weaknesses (mentioned by 5/12 senior managers, 8/9 program managers and 1/4 front-line workers) and to get advice or support with their programs’ planning, evaluation and/or funding applications (mentioned by 2/12 senior managers, 4/9 program managers and 1/4 front-line workers). These expectations appear to have been reasonably well met, with 11 respondents mentioning their projects’ results among the aspects with which they were most satisfied. Respondents described the results as having either confirmed or challenged their existing knowledge or practices and helped in refining them and/or having been useful for funding applications. Five senior managers also indicated that collaborating with the centre had raised their program’s profile and/or credibility, resulting in them securing additional funding.
Program manager: We were able to look at improvements we could make to the project because the evaluation was really comprehensive and pointed out what we needed to do to improve outcomes for the client group.

Senior manager: Being able to circulate the very good evaluation outcomes has really raised the profile of the program and it has received very positive feedback.

Program manager: Having the evaluation, the way it was done and the results it showed, it really helped us secure further funding.

Senior manager: As an organisation, we have a fairly well-established model but the work that we’ve done with the centre has enhanced this and shown we’re on the right track—the results will certainly change the ways that some of our practitioners handle child consults.

As shown in Figure 1, respondents (especially the program managers and front-line workers) perceived some improvements in basic program indicators, especially regarding worker satisfaction and client benefits. These ratings were reinforced by 18 respondents making additional positive comments while rating these items.

Similarly, when asked how they, or their organisation, may have benefited from collaborating with the centre, eight respondents perceived some improvement in the quality, or value, of their programs and five commented that workers were now more confident and/or optimistic about their programs.

Front-line worker: The changes we’ve made as a result are really working—that’s the best thing.

Senior manager: It confirmed what the staff knew from running the program, like the anecdotal evidence, which was then confirmed by the evaluation report.

Senior manager: Once they’ve read the evaluations, they seem a bit more linked to the project—more enthusiastic or confident about it.

Principle 2: Community ownership

This principle was approached primarily through the collaborative planning and development of evaluation tools and processes, tailored around each program’s unique needs and characteristics. Wherever relevant and feasible, these tools typically aimed to facilitate routine recording of: the number and relevant socio-demographic characteristics of those engaging with

**Figure 1: Collaborators’ Ratings of any Perceived Changes in Program Factors**

![Figure 1: Collaborators’ Ratings of any Perceived Changes in Program Factors](image)

* The difference between the ‘senior managers’ and the (‘program managers’ + ‘front-line workers’) is statistically significant (*p* < 0.05, unmatched *t* = 2.2511)
Principle 4: Democratic participation

Most of the community organisations with whom we collaborated had limited internal evaluation expertise and very heavy service delivery workloads. Therefore, although keen to be actively involved in shaping how their programs would be evaluated, and quick to respond to individual-level data, they were generally less inclined and/or able to actively participate in the program-wide data analysis and synthesis phases. Consequently, although collaboration was sought at all stages, most of the program evaluations conducted could not be argued to have fully achieved this principle. The interview feedback also suggested that our collaborative efforts could have been more equitably applied: while 14 respondents (comprising 11/13 program managers and front-line workers but only 3/12 senior managers, Fisher’s Exact Test p<0.005) mentioned the ‘supportive’, ‘encouraging’, ‘open’ or ‘relationship’ approach among the aspects with which they were most satisfied, six respondents (comprising 5/12 senior managers but only 1/13 program managers and front-line workers) expressed wanting to have been more involved in particular aspects of the projects’ development and/or implementation among the aspects with which they were least satisfied.

Program manager: It was a very supportive working relationship—I really enjoyed it.

Front-line worker: The centre kept in touch with us, gave us ideas, gave us feedback—it was a really ongoing process.

Senior manager: The big challenge was the distance bit so most communication was by email—I would have liked a local representative that I could go and brainstorm with or update—so I found it a challenge to keep as involved as I wanted to be.

Senior manager: Our expectations for the report were different—while we should have provided some sort of feedback, the centre should have had more contact with us before they wrote the report so we could have had some discussion around and understanding of what would be contained in that report.
Principle 5: Social justice
Many of the collaborating organisations and their projects sought to address social inequities and we promoted the routine collection of socio-demographic information as a means to enable organisations to understand who they were and were not reaching. The active engagement of organisations and program participants in the evaluation process was seen as a prerequisite for gathering optimal information about program activities and outcomes and, therefore, a socially ethical and just way of operating, in light of increasing discussions about the importance of these elements in contemporary evaluation practice (Kushner 2003; Schwandt 2003; Schweigert 2007).

Principle 6: Community knowledge
Each project began with centre staff meeting and sharing relevant documents with the collaborating organisation in order to develop an understanding of each other’s values, goals, priorities and philosophies and to negotiate the expectations, roles, responsibilities, rights, obligations, funding and time frames associated with the specific project. The second phase involved centre and collaborating organisation staff reviewing any relevant resources, systems and processes they were already using, in order to determine any gaps or opportunities to strengthen their program planning, monitoring and evaluation practices. Although organisations appreciated the collaborative approach, the interview feedback highlighted the challenge of successfully addressing all stakeholders’ needs, with mixed responses to a question about how well we had understood respondents’ needs. While this item prompted the joint highest amount of positive comments (from 12 respondents) and received a mean satisfaction rating of 8.1 from a possible 10 points, this represented the lowest satisfaction level across seven ‘quality’ indicators and seven respondents (mostly senior managers) expressed some concern or dissatisfaction in their corresponding comments. This again reinforces the need to remain mindful of all stakeholders’ perspectives throughout the evaluation process.

Program manager: In our initial discussions, staff were really good at listening to us and then teasing out what it was exactly that we wanted—what we thought we wanted, what was possible and working out what could and could not be achieved, from both sides.

Senior manager: They not only understood our needs, they value-added to them.

Front-line worker: Generally, the centre had a good understanding of what we were trying to do—the only issue was the priority we give different parts of the project—as clinicians, we’ve always prioritised the face-to-face stuff, rather than the data-keeping.

Senior manager: Initially there was poor information from the funders, to both sides—so we had to do a lot of communicating to be clear about what we were both doing.

Principle 7: Evidence-based strategies
This principle was approached primarily by seeking to develop evaluation tools and processes capable of providing credible, comprehensive information about each program’s reach, acceptability and impact. This required navigating the methodological restrictions that often arose as a result of project characteristics. For example: programs having already begun their implementation phase precluded the collection of baseline levels of outcome indicators; the diversity of outcomes and the changeability within many individual programs limited the use of rigid and/or standardised evaluation tools; while the vulnerability of some client groups or the sensitivity of some program topics limited the collection of much baseline data and/or the gathering of any data by unknown, external researchers. Approaches to minimise the impact of these limitations included careful question development (so as not to ‘lead’ respondents towards any particular answer), the use of triangulation, comparison groups and other techniques to strengthen confidence in the usually internally collected, and often subjective, evaluation data. Establishing open, trusting and respectful relationships between the centre and the collaborating organisations was also considered important (Australian Health Ethics Committee 2003; Hasenfeld, Hill & Weaver 2002; Head 2006; Taut & Alkin 2003), particularly for minimising the natural inclination towards socially desirable response biases (Bradburn & Sudman 1979). These relationships sought to establish each person’s ‘truth’, with its positive and negative elements, as the desirable response and to provide the conditions and processes whereby organisations, staff and/or program participants felt safe and encouraged to share it. The interview feedback indicated that high-quality methods were the primary expectation for senior managers from the collaborating organisations and that the vast majority of respondents were very satisfied with the ‘overall quality’ and ‘professionalism’ of our approach (mean rating of 8.8 from a possible 10 points on each). Almost three-quarters of respondents also mentioned the quality of the methods among the aspects with which they were most satisfied, describing them as ‘rigorous’, ‘critical’, ‘academic’ and/or ‘comprehensive’.

Principle 8: Capacity building
Despite the increased time requirements, this principle was one of our main priorities across these program evaluation projects. The primary approach to achieving it was through seeking the active involvement of the collaborating organisations throughout all stages of the evaluation’s development and implementation. This
included training and supporting their staff to utilise the developed evaluation tools and processes, working with them to iteratively review the collected client and service delivery data (to ensure that they were being collected consistently and to inform any refinements needed) and, ultimately, seeking their review and feedback regarding any meta-level analyses and reporting. The interview feedback suggested that some progress was made in relation to this principle: while only one senior manager and one program manager mentioned expecting to learn about evaluating their programs, Figure 2 indicates that this achieved the joint highest rating of the five ‘learning’ indicators.

This message was reinforced by three-quarters of the 22 eligible respondents (6/10 senior managers, 6/8 program managers and 4/4 front-line workers) nominating evaluation learnings in response to an open-ended question about how they, or their organisation, may have benefited from collaborating with the centre: 13 respondents mentioned having learned about ‘how to collect better data’ or ‘how to ask better questions’; nine respondents mentioned having learned about the importance of evaluation, especially including it from the start of programs; and five respondents mentioned having learned about different evaluation approaches.

Front-line worker: I’d never done any form of evaluation before this—so when the centre told me about their evaluations and how they’re doing them, I really picked up ways of how we could introduce it to our workplace and programs and how we could incorporate that sort of information into our reports.

Senior manager: If you do a program you have to plan the evaluation—that’s what we’ve learned—we need to be a lot more vigilant about it and do it in as many and varied ways as possible.

**Principle 9: Organisational learning**

The approach to this principle was closely intertwined with the previous capacity-building principle. As shown in Figure 2, respondents also perceived moderate levels of learning in relation to what they were doing well and areas where they could do better, awareness of other services (especially the program managers and front-line workers), and planning their programs. These rankings of learning indicators were also largely reflected in additional comments made by respondents while rating these items, with positive comments made more often about indicators rated higher and less often about indicators rated lower. Overall, 19 respondents made some additional comment about things they had learned through their collaboration with the centre. Apart from learning about evaluation, the other main learning, expressed by nine respondents, was an increased understanding about their clients, in terms of their diversity, the challenges they may be facing.

---

**Figure 2: Collaborators’ Ratings of Any Perceived Learnings**

![Figure 2: Collaborators’ Ratings of Any Perceived Learnings](image-url)

* The difference between the ‘senior managers’ and the (‘program managers’ + ‘front-line workers’) is statistically significant (p<0.05, unmatched t = 2.5333, 1.8701 and 2.4017 respectively)
and/or the need for a variety of approaches to best meet their needs.

**Front-line worker:** It made me realise that we have to think like a customer and not like a librarian—that a library is a place where some people don’t understand it, they’re confused when they walk in—so now we try to think how someone would try to find something—it’s made us more people-friendly.

**Senior manager:** It increased my awareness of the challenges faced by culturally diverse communities, the need to be more sensitive to cultural difference and to get a better understanding, rather than making assumptions—it made me more aware of the diversity of approaches needed.

**Principle 10: Accountability**

This principle was seen as somewhat of an amalgamated embodiment of all the other principles, ideally resulting in a learning-focused organisational culture. Consequently, it was approached implicitly, particularly through the emphasis on improvement, capacity building, social justice and the shared responsibility for negotiating the reciprocal expectations and responsibilities regarding our partner organisations’ and program participants’ active engagement throughout the evaluation process. Again, the interview feedback suggested some degree of progress in relation to this principle: as shown in Figure 3, respondents perceived some moderate changes in their practice as a result of their collaboration with the centre. Higher levels of change were usually reported by the program managers and front-line workers, with these differences statistically significant in terms of overall change, the information collected about their programs and/or clients, and how that information was being used.

These reported ratings were reinforced by 17 respondents making an additional corresponding comment about the changes they felt had been made: 14 respondents commented about their increased levels of interaction with other relevant services and 12 respondents about changes in how they use information collected about their programs and/or clients.

**Front-line worker:** I’ve learnt ways of gaining knowledge from the community to help us benefit them—so we’re providing what they really need, rather than what we think they need.

**Senior manager:** There’s definitely been some partnerships that have been developed to provide better services to our community.

**Program manager:** It was useful in terms of creating the networks and seeing how different professionals

---

**Figure 3: Collaborators’ Ratings of Any Perceived Changes in Their Practice**

![Figure 3: Collaborators’ Ratings of Any Perceived Changes in Their Practice](image)

*The difference between the ‘senior managers’ and the (‘program managers’ + ‘front-line workers’) is statistically significant (p<0.05, unmatched t = 1.7685 and 2.4163 respectively)

**The difference between the ‘senior managers’ and the (‘program managers’ + ‘front-line workers’) is statistically significant (p<0.01, unmatched t = 2.9136)
could work together to make the project the sum of its parts.

**Senior manager:** We’re using the evaluation data as a marketing tool for the program.

A similar picture emerged when considering respondents’ comments made to the open-ended question about how they, or their organisation, may have benefited from collaborating with the centre: seven respondents mentioned using their data to show how they were achieving their goals, while four mentioned using their data to modify their programs, gathering more feedback from their clients, and including more children and/or young people’s perspectives in their feedback gathering.

**Discussion**

Overall, the feedback data presented in this article suggest that empowerment-oriented approaches hold considerable potential for delivering relevant and meaningful evaluations of community-based programs. Although not what collaborating organisations had typically expected, most commented on the collaborative approach among the aspects with which they were most satisfied and acknowledged having learned about the value, and ways, of evaluating their programs. They also perceived the evaluations to have been positive in a variety of ways, including: confirming some, and challenging other, aspects of their existing knowledge or practices; guiding them in refining their programs; assisting with funding applications and securing additional funds; and raising their programs’ profile or credibility. The empowerment-oriented approach proved reasonably useful for addressing the challenges identified earlier in this article, particularly in relation to overcoming organisational inexperience and/or scepticism about the value of evaluation processes and delivering meaningful, credible evaluations with often limited resources and time frames. While showing some positive signs, the varied interview feedback underlines the challenges involved in successfully navigating competing stakeholder needs and expectations and designing evaluation tools and processes appropriate to programs’ unique circumstances.

While the interview sample was small, it was broadly representative of the people, projects and organisations with whom we had collaborated to date. Their feedback, therefore, offers a modest contribution towards filling the near vacuum in information about service providers’ perceptions about and experiences of program evaluation. The only other related ‘recent’ evidence we could locate explored program staff’s views about barriers to external program evaluation, reaching a conclusion that hinted at the potential of empowerment-oriented approaches: ‘It is important to create a trusting relationship with those affected by the evaluation through continuous participation and communication, and to conduct carefully planned, methodologically appropriate evaluations’ (Taut & Alkin 2003, p. 213). Although the small sample offered limited statistical power, a number of significant differences did emerge, indicating that an empowerment-oriented approach was often perceived more positively by program managers and front-line workers than by senior managers. While this may be a reflection only on our own approach (which we have sought to address in more recent projects), it is something that others planning such approaches may want to consider. As it was not possible to include funding body representatives in our interview sample (primarily due to time and resourcing limitations), this also remains an important area for further investigation.

Reflecting back over our collaborative evaluation projects (including those conducted since the interviews reported here), we would point strongly to the critical role of relationships in realising the aims of an empowerment evaluation approach. The nature and quality of the relationship between centre evaluators and collaborating organisation staff emerged as a central factor in determining how actively that organisation engaged in the evaluation process. Similarly, the relationships between organisation staff and their clients influenced how actively those participants engaged in their programs and the evaluation process. Stronger relationships and engagement appeared more likely where all parties supported the following basic principles:

- being explicit about their own core values and priorities
- understanding and respecting the other’s core values and priorities, even if they didn’t share them
- being open and honest in all communications, even when it was uncomfortable
- implicitly trusting the integrity of the other’s intentions and actions, while sensitively raising any concerns
- acknowledging their own and each other’s expertise and limitations
- adopting a strengths-based approach to enhancing the other’s understanding and/or skills
- being realistic about what could be expected and achieved within the project’s context and resources
- accepting a shared responsibility for the ultimate outcome of the collaboration.

Responses to questions about how our approach could be improved reinforced the fundamental importance of ensuring good ongoing communication, collaboration and consultation across the multiple levels and layers of people and/or organisations involved in any given project.

These findings confirm the need for social program evaluators to be skilled in much more than evaluation methodology, for example ‘to be experienced in facilitating program changes … with the sensitivity
and skill to develop and maintain trusting relationships with a range of stakeholders in an ever-changing program’ (Hasenfeld, Hill & Weaver 2002, p. 2). As others have noted of the activities and relationships inherent in evaluating community-based social programs, we found ourselves fulfilling many different roles throughout the course of each evaluation, including: manager, detective, designer, negotiator, diplomat, researcher, judge, reporter, evaluation use of results advocate, and learner (Skolits, Morrow & Burr 2009). While it may not always be feasible to fully attain all 10 empowerment evaluation principles, we believe that they offer a timely and useful framework for reminding evaluators, practitioners, community organisations and funding bodies about these broader roles, responsibilities and potential avenues of influence. When considered together, they also serve to reinforce empowerment evaluation’s underlying tenet concerning people’s desire and capacity to understand their own situation and to create appropriate solutions, when provided with the necessary tools and conditions.

Another important insight concerns the substantial amount of time often required to build effective relationships, based on genuine understanding, and to develop evaluation approaches ideally suited to a program’s needs. In our work, this often took a number of iterations, especially where programs themselves were also evolving. Therefore, realising the potential of meaningful empowerment-oriented evaluations is likely to remain dependent on funding bodies’ willingness to allow and encourage the inclusion of realistic program planning and evaluation time frames and costings. A general guide is to allocate 5–10 per cent of a program’s total budget for evaluation purposes (WK Kellogg Foundation 2004), although at least one US government department suggests that 15–20 per cent may be a more realistic estimate for a comprehensive evaluation (Administration for Children & Families, Office of Planning Research & Evaluation 2010, p. 10).

Conclusions

The issue of how to undertake relevant, efficient and useful social program evaluation remains a vexed and contested matter. While acknowledging that no single approach will work for every organisation and in every context, we have explored the potential and lived reality of an empowerment-oriented approach. The findings presented indicate that such an approach, while needing to be tailored for different client, program and service contexts, can successfully and satisfactorily engage community-based organisations in evaluating their programs. In view of the increasing amounts of government and philanthropic funding being distributed through these types of programs and organisations, it is hoped that these learnings can contribute to ongoing dialogue about how best to evaluate the often complex, community-based programs, while advancing evaluative learning and reflective practices within the organisations implementing them.

Acknowledgements

The preparation of this article and the feedback study discussed were internally funded by the Centre for Children and Young People. The authors appreciate the contributions of Ms Wendy Britt in collecting and coding the feedback interviews and Dr Renata Phelps in providing critical feedback on earlier versions of this manuscript.

Note

1 The Centre for Children and Young People is a multidisciplinary centre based at Southern Cross University, which is a regional university. It was established in 2004 with the primary aim of enhancing the safety, wellbeing and participation of children, young people and families, particularly in regional and rural areas. The centre works towards this aim through three key functions: (1) undertaking research and evaluation activities that build on the existing knowledge base; (2) providing quality learning and professional development opportunities for those working with children and families; and (3) promoting the rights, interests and participation of children and young people.

References


Australian Health Ethics Committee 2005, Keeping research on track: a guide for Aboriginal and Torres Strait Islander peoples about health research ethics, Australian Government National Health and Medical Research Council, Canberra.


Eakin, L 2007, ‘We can’t afford to do business this way: a study of the administrative burden resulting from...
REFEREED ARTICLE


Our Community 2003, The community manifesto: valuing Australia’s community groups, Our Community Pty Ltd, Melbourne.


Ryan, P 2003, ‘I’m looking at the future’: evaluation report of Reconnect, Department of Family and Community Services, Canberra.


...