

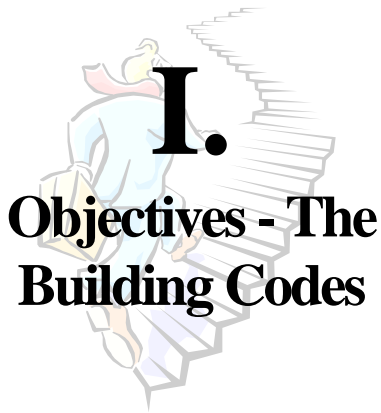
Of the four priority areas, AmeriCorps programs addressing other human needs issues cover perhaps the broadest range of activities. They provide services, such as health checks or housing, to community groups, including the elderly, the homeless or destitute, and families with special needs. These services not only improve the lives of beneficiaries; they create more stable and livable communities. There are two broad categories of human needs activities: “health” and “home.” Health includes activities focused on home-based health care, community-based health care, and independent living. Home activities include rebuilding neighborhoods, assisting the homeless, and distributing food for those in need. A sample of both home and health activities are listed in the table below.

All programs addressing these types of issues share the common characteristic of providing services to individuals who have limited access to the services needed to improve their quality of life. As you may have already discovered, there are challenges to evaluating these programs. This is a review of common issues you may face.

Chapter 10 Other Human Needs



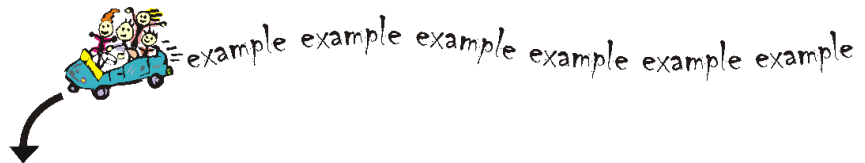
Health Activities	Respite care	Home Activities
	Health education	
	In-home health care for the elderly	
	Training for parents of children with disabilities	
	Crisis intervention	
	Information and referral services	
	Home repair and rehabilitation	
	Homeless shelter assistance	
	Distributing clothing and food	
	Case management	
	Shelter rehabilitation	



Objectives are your building codes for getting things done. Like building codes, objectives are measurable and contain clear criteria for program success. As with other AmeriCorps priority areas, writing objectives requires a description of activities, results, measures, standards of success, and beneficiaries. The following are some tips and issues to consider. See Chapter 1 or “Writing Outcome Objectives” in the reference section for more information.

Activities

For short-term contact with beneficiaries, focus on meaningful outcome. Programs sometimes have members in community institutions such as clinics and shelters where they may provide a variety of services. It is important to identify the *primary* activity your member will be doing at the site, not simply to state that the members are located at the site. Discuss your activity in detail so readers know what service you are providing.



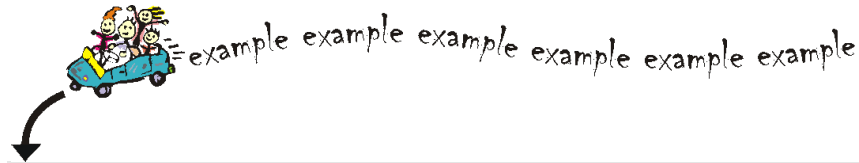
Activity: Seven AmeriCorps members will conduct intake interviews for counseling services with homeless youth, ages twelve to eighteen, at the Lakeview Community Center.

Results

For an objective focusing on direct services, such as finding housing for homeless people, indicate immediate outcomes in your result statement. However, also provide a perspective on how these services have longer-term impact to show how you are contributing to the solution of an overall problem. Showing outcomes within one year may be a challenge for programs that meet basic human needs such as food, shelter, or medical attention. For these activities, it may be important to know if the quality of services provided was high enough to create the positive impacts expected. Consider using professional inspections (e.g., of housing or repairs), client/service recipient satisfaction, or increased utilization of appropriate services (e.g., immunization, or prenatal visits).

Distinguish between what people “know” and “do.”

Programs addressing human needs issues often provide education and information designed to *change how people behave*. Whether it is reasonable to expect a *change in knowledge* only or a *change in knowledge and behavior* depends on the level and type of service you provide. In fact, changes in behavior can be the most difficult. Often new knowledge, skills, and attitudes need to be firmly in place *before* behavior will occur with any consistency.



Knowledge Change

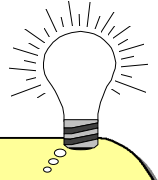
Activity: Twelve members will provide twenty one-time health presentations to 600 grade school students.

Result: Participants will be able to identify ways to prevent heart disease.

Behavior Change

Activity: Twelve members will give twenty presentations on adopting a healthy lifestyle to the same thirty students over the course of a year, and the students will keep a daily record.

Result: Students will change their behaviors to reflect more heart-healthy lifestyles.



Tip: Focus on change.

For activities that focus on providing information, such as at block parties or health fairs, specify the information you will be providing to the greatest extent possible. Focus your activity’s result on how your program enables your beneficiaries and their communities to change as a result of your activities. Your results reflect changes in behavior or knowledge.

Measures and Standards

For programs that focus on activities, such as case management, it is challenging to monitor the effectiveness of services on behalf of clients. These activities assist beneficiaries, but do not solve their problems directly. Agency staff may be helpful in setting standards; they have experience with case management and know the current standards used at that agency or in the field.



Tip: Focus on members' direct outcomes.

Your program may address only a limited piece of multifaceted problems such as unemployment or homelessness. Focus the result on the outcome of the specific services provided by AmeriCorps members.



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Activity: Four AmeriCorps members will identify needs for the health of elderly they serve and maintain or increase community resources.

Result: There will be an increase in matching clients to appropriate services.

Measures: Survey of the clients and individuals in the agencies who are responsible for overseeing case management.

Activity: Five AmeriCorps members will provide job search training to unemployed immigrants.

Result: Ability to look for work will improve. (An inappropriate result for this activity would be the number of jobs taken by participants. The AmeriCorps members are helping those beneficiaries learn how to look for jobs. Unless the program is providing additional vocational training, job search training alone may not affect the hiring decision.)

Measure: Completion of job interviews and applications.

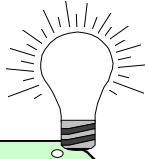


II. Evaluation Plans - The Blueprints

Evaluation plans are the “blueprints” that lay out a plan for implementation according to the building codes. They describe an overall picture of what the evaluation entails and include specific information on when data will be collected, how often, and by whom. Evaluation plans consist of information in the objectives, including program activities, beneficiaries, results, instruments to be used, and standards for success. In addition, the plans identify who will be responsible for analyzing and reporting results. The following are specific tips and considerations for programs addressing other human needs issues. The table on the following page discusses possible short-term and long-term indicators. See Chapter 2 or “Evaluation Plans” in the reference section for more information.

Confidentiality

Gathering needed data may be difficult. In some cases, individuals may be unwilling or reluctant to provide information needed for determining the outcome of an activity. Confidentiality issues are particularly important to consider given the sensitive nature of other human needs issues, such as sexuality or homelessness. For instance, participants of a teenage pregnancy presentation may not want to discuss (in writing or orally) their future sexual behavior. Host agency staff may not be allowed to provide information about their services due to confidentiality. Use aggregate data or anonymous data collection techniques to avoid confidentiality issues. Investigating a variety of methods for collecting data before committing to one method will help ensure a successful evaluation.



Tip: One way to begin your investigation is to speak with stakeholders.

Discuss your intended results and your evaluation needs with your stakeholders. They may provide ideas for more appropriate means of gathering data, availability of data, expectations of reasonable outcomes, and perspectives on meaningful indicators of change.



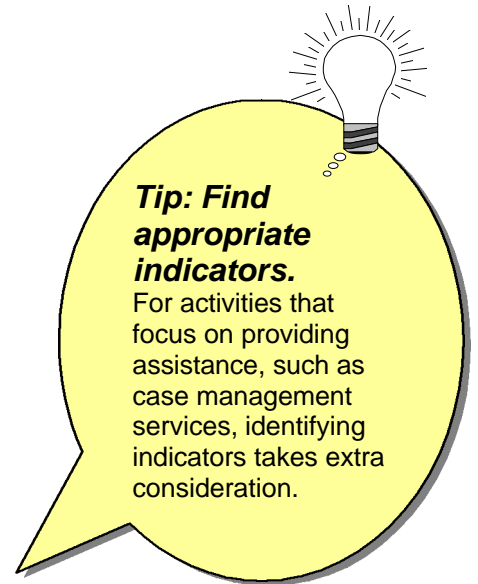
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Activity: Sixteen AmeriCorps members will provide case management services to support independent living of elderly citizens.

Result: Success in independent living will increase.

Indicators: Proper management of medication, ability to buy groceries.

Measures: Client interviews regarding medication practices and daily living skills.



Tip: Find appropriate indicators.

For activities that focus on providing assistance, such as case management services, identifying indicators takes extra consideration.





Short-term and Long-term Indicators

Indicator	Questions To Ask To Help Identify Appropriate Indicators
<i>Nutritional improvement</i> (short-term)	<ul style="list-style-type: none"> • Was the food provided specifically designed to be nutritious for young children? • Were families made aware of the program goal? Were strategies developed for continuing this level of nutrition? • Have recipients of the food distribution centers made use of the information provided on nutritional content? How or in what ways?
<i>Monetary benefits for the family</i> (long-term)	<ul style="list-style-type: none"> • Did access to two week's worth of food, rather than just one day's worth, have an impact on families' ability to save money on expenditures for food? • If so, what did they do with the money they saved?
<i>Improvement of community collaboration</i> (long-term)	<ul style="list-style-type: none"> • Were new alliances formed in food collection or distribution that may have enduring benefits (e.g., a better restaurant day-old food collection system, or involvement of businesses in distribution)? • How or in what ways?

III. Instruments - The Hammers and Saws

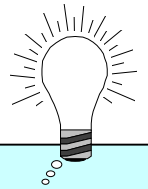
Your evaluation. They measure the services of your program and collect information needed to determine your outcomes. As with carpentry, there is no one all-purpose tool; you need special tools for particular tasks. The more specific the instrument is to your measurement task, the more likely you will achieve a high-quality result. With a wide range of evaluation methodologies available, consider what you want to measure, who will provide the data, and what resources are available for data collection as you choose your instruments. The table below presents various considerations regarding instruments for programs addressing other human needs issues. See Chapter 3 or “Instrument Development” in the reference section for more information.

Typical Other Human Needs Methods and Instruments

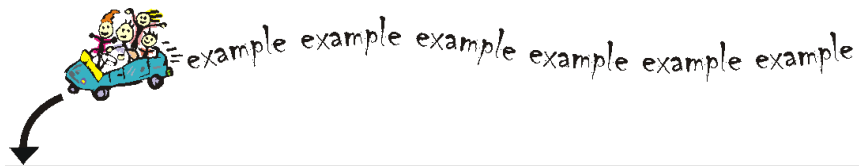
<p>Program-Based Measurements Examples: client impact surveys, skills tests, quality of life interviews</p> 	<p>Advantages: All data are directly related to program activities. Can be structured to provide both quantitative and qualitative data. Can be used to collect data for continuous improvement as well as impact.</p> <p>Constraints: Time-consuming to develop. No way to check validity or reliability. May not see enough variation in data. May not make a compelling case, as the instrument would not be nationally recognized.</p>
<p>Skills Demonstrations Examples: CPR certification, parenting skills checklists</p> 	<p>Advantages: Provides direct demonstration of impact on participants' skills. Can provide both quantitative and qualitative information.</p> <p>Constraints: May be difficult to compile and generalize. Needs a very specific guideline for consistency. It is time-consuming to administer.</p>
<p>Logs Of Critical Incidents Examples: respite/home health care log, food distribution log</p> 	<p>Advantages: Useful for tracking process data. Easy to use.</p> <p>Constraints: Limited information about impact.</p>
<p>Case Management Notes and Observations Example: crisis hotline case notes</p> 	<p>Advantages: Provides useful data for continuous improvement. Good qualitative picture of progress.</p> <p>Constraints: Difficult to compile and generalize. Needs a very specific guideline for consistency.</p>

Combine Methods

The use of multiple methods, sometimes called triangulation, will provide richer, more believable data than single methods. If your program was presenting health issues to fifty high school students, consider using more than one instrument to measure your success. For example, survey parents and interview students on students' health habits. Use of multiple measures requires a significant time commitment and skilled interviewers. It would not be sufficient to interview just one or two students if fifty students attended the health presentations, (see "Sampling Issues" in Chapter 3) unless you are simply verifying the accuracy of data collected through other means. A brief knowledge test that focuses on just two or three of your most important learning objectives for that presentation provides data on the students' immediate gain of knowledge. If access to these same students were possible later, an even better option would be the administration of a test immediately after the presentation and after a set period of time.



Tip: Existing information. Use existing information, such as that found in agency records or government statistics, for baseline or other comparative information. Use caution to ensure that the data used is truly comparable. Depending on the data, it must refer to the same geographic location in which your program is active or to a population similar to the one you serve.



Activity: Two AmeriCorps members will conduct classes on effective parenting for ten parents of children with disabilities at Cloudrim High School.

Methods: *Observe parents during class.* This provides more detailed information about the implementation of the parents' new knowledge than would be provided by interviewing those parents outside the class.

IV.

Data Collection – Gathering the Raw Materials

Much like lumber and brick, data serve as the “raw materials” to build your evaluation. You must obtain these materials to build your evaluation. Data collection involves administering instruments, gathering responses, and organizing responses before analysis. Perhaps the biggest issue for data collection is availability of or access to respondents. Activities such as presentations, health fairs, information and referral, and case management activities are based on very limited contact with beneficiaries. The following are some tips and considerations regarding data collection. See Chapter 4 or “Data Collection” in the reference section for more information.

Tip: Select data collectors carefully.

Do not ask your member to collect data on their own case management issues (e.g., client satisfaction, changes in client beliefs). The close relationship your members have with their clients may change how the client responds.

Community Collaboration

You may find useful existing information from other sources such as the host agency or local government agencies. This data can represent a baseline against which to compare the data you are able to collect during brief client contact. Involve the agency staff in the planning stages. This ensures that you will be able to collect these data. The information and referral agency where your member serves collects data on the number of services the average client accesses during one visit. Compare this information with data collected from the clients served by your member.

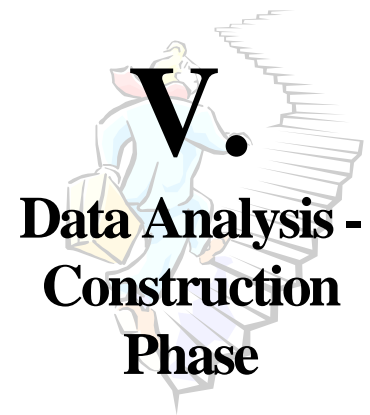
Tip: Use low burden methods where service is limited.

Consider collecting a small amount of data from a large group of beneficiaries, for example, a four question written or verbal survey. Another option is gathering more in-depth data from a small number of beneficiaries, such as a focus group.

Tip: Consider the meaning of the data.

Identify what information is both meaningful with respect to your results and available to you given the length of contact and ability for follow-up with your beneficiaries.

Devaluation, where you create a structure from your raw materials. The process of data analysis includes deciding on the appropriate analysis to conduct for each question or test item, preparing data for analysis, analyzing the data, and summarizing the results. For outcome data, the results of analysis should enable you to answer the question “What changed for your service recipients during your program year?” The following are tips and suggestion for programs addressing human needs issues. See Chapter 5 or “Data Analysis” in the reference section for more information.



Quantitative Measures

Your evaluation plan may rely on quantitative measures, such as knowledge tests and scaled surveys of client satisfaction. If you plan to collect data from a large number of beneficiaries, it is best to aggregate and analyze the data more than once or twice a year. For example, if 500 people attend presentations over the course of the reporting period and 75 percent of them complete a survey, you will accumulate 375 pieces of paper with data recorded on them. It will be much easier to take time periodically to tally the data than to wait until the end of the reporting period.

Qualitative Measures

Written and oral data often provide the most relevant information for programs addressing other human needs issues that focus on changing the quality of life of beneficiaries. For example, the data resulting from open-ended questions on surveys and interviews often provides the most detailed description of the outcome on beneficiaries beyond the most obvious or most easily stated. For homeless shelter residents, the care and attention paid by an AmeriCorps member who assists them as they check in may mean the difference between a frightening, uncomfortable night and a respite that allows them to face the adversity of the next day. The beneficiary’s description of this type of outcome can be invaluable. The drawback to this type of data is that it can present a formidable amount of material to analyze.



VI. Reporting - The “Open House”

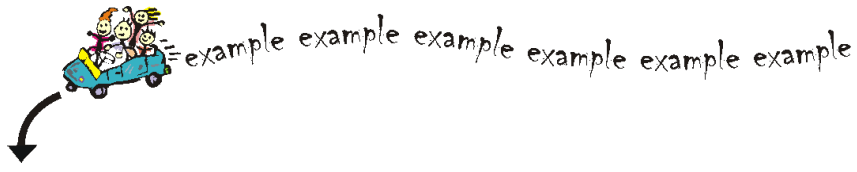
Reporting your results serves a similar function as an “open house” for a completed home. It lets consumers and funders know what you have accomplished. Reports can range from informal talks on the results of your evaluation to formal progress reports. In general, reporting your evaluation results should include a summary of your objectives, an outline of the steps you took in evaluating your activities, and a brief description of the instruments you used to collect data. It should provide the relevant statistics or qualitative information from your data analysis as well as stories or examples to illustrate your accomplishments. The following are tips and considerations for creating your report. See Chapter 6 or “Reporting Your Results” in the reference section for more information.

Multiple Presentations

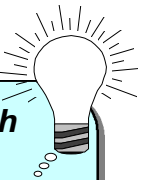
If your activity involves multiple presentations over the course of a program year, report the outcome of only the presentations completed by the due date of the report. Provide summarized results for all the presentations that quarter and “year to date.” At the end of the year, aggregating the results will provide a picture of the overall outcome. Show how far you have gone in reaching the result by stating what percentage of the result you have achieved to date.

Community Collaboration

Consult with stakeholders to see how their information needs fit with your evaluation plan. Plan for simple reports that provide new or interesting data to your partners. Data you have collected on changes in neighborhood infrastructure may be of interest to local government and provide data for community discussions on the topic.



You have statistics on test scores for a health class, as well as interview data about what the new knowledge has meant to the students and their families. An effective display would be a pie chart of test scores with relevant quotes next to the figure and text below on overall findings from these data.



Tip: Collect both qualitative and quantitative data.
Report the data together to give a fuller picture of the outcome of your services.

