# MANAGING EVALUATION: RESPONDING TO COMMON PROBLEMS WITH A 10-STEP PROCESS

Donald W. Compton Centers for Disease Control and Prevention Atlanta, Georgia

Michael Baizerman Ross VeLure Roholt University of Minnesota, School of Social Work Saint Paul, Minnesota

#### Abstract:

There is now a clear choice of frameworks for managing program evaluation—the managing of one or more studies or the managing of an evaluation capacity building structure and process. This is a distinction with a difference, and this article conceptualizes that difference and shows how the two frameworks understand three problems common to program evaluation: (a) lack of systematic integration within a larger program improvement process, (b) difficulty in finding an appropriate evaluator, and (c) lack of appropriate conceptualization prior to the inception of the evaluation study. Two practice-based approaches to these problems are presented and interpreted using the two frameworks. These frameworks show clear distinctions and differences between the two managerial approaches. These are practice-tested approaches developed over 30 years of doing and managing evaluations in an evaluation unit in the United States, where there are seemingly clear differences with Canada in at least the public sector and in practices around stakeholder participation in relation to use practices. Our experience shows that program managers and managers of program evaluation services have clear choices in how they manage program evaluation in the public and nonprofit sectors across public health and other human services, and these choices have implications for organizational development, managing an evaluation unit, and interorganizational relations.

**Résumé:** Il y a maintenant un choix clair de cadres pour gérer l'évaluation des programmes, la gestion d'une ou plusieurs études, ou la gestion de la structure et du processus de renforcement des capacités d'évaluation. C'est une distinction avec une différence,

Corresponding author: Donald W. Compton, Centers for Disease Control and Prevention, Division of Nutrition, Physical Activity, and Obesity, 2824 Livsey Trail, Tucker, GA, USA 30084; <a href="mailto:chiral-research: centers">chiral-research: centers for Disease Control and Prevention, Division of Nutrition, Physical Activity, and Obesity, 2824 Livsey Trail, Tucker, GA, USA 30084; <a href="mailto:chiral-research: centers">chiral-research: centers</a> for Disease Control and Prevention, Division of Nutrition, Physical Activity, and Obesity, 2824 Livsey Trail, Tucker, GA, USA 30084; <a href="mailto:chiral-research: centers">chiral-research: centers</a> for Disease Control and Prevention, Division of Nutrition, Physical Activity, and Obesity, 2824 Livsey Trail, Tucker, GA, USA 30084; <a href="mailto:chiral-research: centers">chiral-research: centers</a> for the centers of the centers

et cet article conceptualise cette différence et montre comment les deux cadres comprennent trois problèmes communs à l'évaluation de programme : (a) la non-intégration systématique dans un processus d'amélioration d'un programme plus important, (b) la difficulté à trouver un évaluateur adéquat, et (c) l'absence de conceptualisation adéquate avant le lancement de l'étude sur les évaluations. Deux approches à ces problèmes, basées sur la pratique, sont présentées et interprétées en utilisant les 2 cadres. Ces cadres montrent des distinctions et des différences évidentes entre les 2 approches de gestion. Il s'agit d'approches mettant à l'essai des pratiques développées au cours de 30 ans d'évaluations effectuées et gérées par une équipe d'évaluation aux États-Unis, où il semble y avoir des différences évidentes avec le Canada, au moins dans le secteur public, et dans les pratiques entourant la participation des intervenants et l'utilisation. Notre expérience montre que les gestionnaires des programmes et les gestionnaires des services d'évaluation des programmes ont des choix clairs sur la façon de gérer l'évaluation des programmes des services de santé publique et autres services à la personne dans le secteur public et des organismes à but non lucratif, et ces choix ont des implications pour le développement organisationnel, la gestion d'une équipe d'évaluation, et les relations interorganisationnelles.

#### INTRODUCTION

This article is for program managers and managers of program evaluation services ("programs" being defined broadly to include policies or interventions) more than for scholars. It builds on more than 30 years of practice doing and managing evaluation studies and evaluation units in public agencies and NGOs in the United States. There are clear distinctions and meaningful differences between United States and Canadian evaluation practice around use, as CJPE reviewers of this article pointed out. Among these may be more developed infrastructures and practices around use in the public sector in Canada. In this article, we describe two distinct frameworks for managing program evaluation and how each is used to respond to three common problems faced by managers of these evaluations: (a) lack of systematic integration within a larger program improvement process, (b) difficulty in finding an appropriate evaluator, and (c) lack of appropriate conceptualization prior to the inception of an evaluation study.

After 30 years of managing program evaluation at the local, state, national, and international levels, we prefer one approach, as we make clear.

#### THREE COMMON PROBLEMS IN PROGRAM EVALUATION

The first problem in managing program evaluation is that the program evaluation process often is not systematically integrated into a larger program improvement process (see Compton, Baizerman, Farris, & Zhang, 2010). Consequently, program evaluation processes and results may contribute less than they could toward making programs more effective and accountable. Causes of this problem include the absence of a structure and process for integrating the program evaluation process into the program improvement process, the selection of evaluators not oriented toward producing results that can actually be used to improve the program, and the failure of program evaluation managers and program managers to recognize the importance of managing their evaluations from the beginning so as to produce practical, timely, and useful results.

The second and related problem is difficulty in finding an appropriate evaluator. This occurs because people who do program evaluation or receive contracts to do program evaluation are often social scientists with little or no training in how to conduct useful program evaluation studies. In public health in the United States, this is true for policy evaluations, the current focus of many evaluation studies. Program staff and others often have difficulty finding appropriately trained and experienced evaluators because they do not have such evaluators on staff or they tend to have limited connections to college and university faculty and to contractors who have the appropriate training and experience. Indeed, program managers may not know how to find and select the most appropriate evaluator.

Identification of an inappropriate evaluator leads directly to the third problem: a lack of appropriate conceptualization of the evaluation prior to the inception of the evaluation study. Social researchers who are not trained evaluators, especially those not trained in utilization-focused methods (Patton, 2008), serve programs poorly when they design and implement their evaluation in isolation from program staff and other stakeholders. Such lack of involvement by important program stakeholders contributes to evaluation studies not meeting use-demands.

Taken together, these three common problems keep program evaluation from contributing to program improvement and accountability as much as they might. Yet program managers must respond to the everyday demands for evaluation. What can they do? We suggest that managers have a clear choice between two broad managerial

orientations to evaluation: managing discrete studies or managing for evaluation capacity building (ECB).

#### MANAGING EVALUATION: TWO ORIENTATIONS

Other than in Bamberger, Rugh, and Mabry (2006), Lunt, Davidson, and McKegg (2003), and Compton and Baizerman (2009), little attention has been given to models for managing evaluation appropriate for both evaluators and evaluation managers. Based on this literature and our own experience, we discern two major frameworks for managing evaluation: the managing of one or more specific studies and the managing of an ECB structure and process (Compton, Baizerman, & Stockdill, 2002). See Table 1.

Table 1
Differences Between Managing Program Evaluation and Managing Evaluation
Capacity Building

	Program evaluation	Evaluation capacity building (ECB)
Overall process	A process of systematically using a recognized model in accordance with at least the Joint Committee's standards (1994) to complete an agreed-upon program evaluation study.	A context-dependent intentional action system of guided processes and practices for bringing about and sustaining a state of affairs in which quality program evaluation and its appropriate uses are ordinary and ongoing practices within and/or between one or more organizations/programs/sites.
Actual practices	Doing quality program evaluations using acceptable models (e.g., Stufflebeam, 2001).	Ongoing guided processes and practices for bringing about and sustaining a state of affairs in which quality program evaluation and its appropriate uses are ordinary and ongoing practices within and/or between one or more organizations/programs/sites.
Occupational orientation and practitioner's role	Occupational orientation to carrying out a study and enhancing its likely uses according to the norm of the discipline/profession/field.	Occupational orientation to try to keep evaluation as a necessary, everyday administrative part of an organi- zation's structure, culture, and work practice internally and in relation to other entities in its environment.

# Managing Discrete Evaluation Studies

Most program managers, evaluation managers, and evaluators manage structures and processes specific to one or more studies (Compton & Baizerman, 2009). Contracts for evaluators of discrete studies or groups of studies follow explicit project protocols about product, process, payment, and the like and focus on "getting the study done" in mutually beneficial ways. Items specified in the contract include the contractor's data needs, due dates for draft and final reports ("products"), the payment schedule, and evaluation costs. Contracts for such

evaluations seldom specify the structures and processes the contractor is to use in conducting the study. The same holds for the internal evaluator, who of course is not a contractual evaluator. The managing of such contracts is oriented toward efficient, product-driven completion, and not necessarily to the explicit use of the findings for program improvement, accountability, or policy.

# Managing Evaluation Capacity Building

The second framework for managing evaluation is to work on the structure and processes necessary to make evaluation and its use a routine part of an organization's work. The focus here is on the infrastructure that allows and supports the conduct and use of actual evaluation studies. We have defined ECB conceptually as "a context-dependent, intentional action system of guided processes and practices for bringing about and sustaining a state of affairs in which quality program evaluation and its appropriate uses are ordinary and ongoing practices within and/or between one or more organizations/ programs/sites" (Compton et al., 2002, p. 8). Operationally we defined ECB as "the intentional work to continuously create and sustain overall organizational processes that make quality evaluation and its uses routine" (p. 14). Recent work has expanded and otherwise modified our conceptions (Duignan, 2002; Gibbs, Napp, Jolly, Westover, & Uhl, 2002; Naccarella et al., 2007; Preskill & Boyle, 2008). However, sustaining this ongoing process requires changes in both the culture and everyday practices of an organization (Carman & Fredericks, 2010). ECB challenges organizations to develop new ways of thinking about how to use program evaluation results and other empirical data in their routine decision-making, so as to develop a long-term infrastructure necessary to sustain evaluation activities. Here too recent work is instructive (Fleming & Easton, 2010; see also Beere, 2004). These structures are basic to what an evaluation unit is and can become as a unit, and also to managing this unit, its "knowledge workers" (i.e., contractors), and its work, which is the production of evaluation studies that are used (Baizerman, 2009). How this can be conceptualized and implemented is central to Compton and Baizerman's conception of managing evaluation units. Managing for organizational development/ECB as strategies and practices are embedded in their discussions. Also crucial is how to place a person or group in charge of coordinating the multiple activities necessary to create demand for evaluation as a regular and routine part of an organization's work. Done well, this person or group consistently questions what will be left after each discrete study is completed and monitors for increases in sustainable systems and structures as evidence of increased evaluation capacity.

No number of single studies necessarily results in enhanced organizational evaluation capacity. One of the difficulties of ECB is that most evaluators are primarily interested in conducting individual evaluation studies that meet the program evaluation standards of the Joint Committee on Standards for Educational Evaluation (1994) and the needs of their clients, rather than in improving their client's organizational capacity to conduct ongoing program evaluations.

Managing for ECB is never-ending; it is an ongoing, intentional effort to develop and sustain evaluation capacity. It requires emphasis on long-term infrastructure development and sustainability, as well as short-term evaluation studies (Compton & Baizerman, 2008).

# TWO PRACTICE-TESTED APPROACHES TO MANAGING PROGRAM EVALUATION

## Stakeholder Participation

Participatory evaluation (Cousins, Goh, & Elliott, 2007; Johnson et al., 2009; Preskill, 2008; Whitmore, 1998) is a school of evaluation practice that emphasizes stakeholder involvement in program evaluation studies. Program stakeholders may include program funders, staff, clients, subject experts, and other agencies with similar or complementary interests. With this approach, stakeholders who provide input into evaluation studies are treated as co-creators of the study. Evidence has shown that the involvement of a broad group of stakeholders in evaluation design and implementation will lead to more appropriate and effective reports and, in turn, to more effective use of findings for program improvement (Torres, Preskill, & Pointek, 1996). This evidence corroborates the belief that people who contribute to an evaluation have a higher stake in the outcome of that evaluation. To exclude those who are interested in the program being evaluated is to lessen the likelihood that evaluation findings will be used for program improvement and/or other purposes.

Participatory models of evaluation that engage stakeholders in advisory roles have been shown to create a sense of ownership in the evaluation (Church et al., 2002; Greene, 1988). A participatory approach also leads participants to better appreciate the value of program evaluations in general and thus to support the ongoing use of

evaluation information in everyday program decision-making after a particular evaluation has been completed.

# Organizational Collaboration

Because public health and human service organizations and programs operate in complex organizational environments, they need to employ collaborative strategies in order to survive and grow. Such collaboration can prevent organizational or programmatic fratricide, thus potentially increasing the amount and types of available services (Mattessich, Murray-Close, & Monsey, 2001). This is especially true in the current (2011) fiscal and philosophical climates in in the United States, with reduced funds and challenges to public services.

Like stakeholder participation, organizational collaboration involves the encouragement of input from a broad group of interested parties. By participating in the design and implementation of evaluations or evaluation capacity building, these individuals, groups, and organizations are more likely to support the use of evaluation findings for program improvement. One simple type of structure for input is evaluation advisory/consultative committees (Centers for Disease Control and Prevention [CDC], 2011.)

Specifically, three factors most likely to increase evaluation use include planning for use of a study at the beginning of the evaluation, identifying and prioritizing this intended use of the evaluation, and developing a communicating and reporting plan (Fleischer, 2007). Each of these is best accomplished with the authentic participation of primary intended users and stakeholders, as stated.

#### MANAGING EVALUATION: A 10-STEP PROCESS

The following 10-Step Process for managing evaluation is a practical approach that clearly defines the role of the evaluation facilitator and the evaluator as they work closely with an advisory group consisting of primary intended users and stakeholders (Centers for Disease Control and Prevention, 2011; Compton, Glover-Kudon, Avery, & Morris, 2001). It has been practice-tested over a 5-year period and is now sometimes used by the CDC's Division of Nutrition, Physical Activity, and Obesity. It clearly defines the roles of the evaluation advisory group, the evaluation facilitator (typically the manager of the program being evaluated or her designee), and the evaluator. This

process increases the likelihood that evaluation results will be used for some purpose such as program improvement by institutionalizing the participation of the advisory group at each step of the evaluation. It also builds program evaluation capacity by creating a common understanding of what evaluation is and a systematic process for designing and implementing it, and it enhances the evaluator's ability to collaboratively plan and implement a utilization-focused evaluation (Patton, 2001, 2002). It is a necessary model because of the practice in the United States of outsourcing evaluation, thus increasing the likelihood that the evaluator will have no to little involvement in the use of the study.

This 10-Step Process requires the participation of three major parties: an advisory group, an evaluation facilitator, and a program evaluator. The advisory group's purpose is to contribute throughout the evaluation, from conception to use, by providing advice during the evaluation, helping the evaluator think through various program issues, reviewing drafts of the evaluation plan and data collection instruments, providing insights into what the collected data mean, and making recommendations based on the study's findings. The advisory group also provides insights into the social or political context of the program being evaluated. (For more information on the role of an evaluation advisory group in a US public health agency, see CDC, 2008, 2011.) This may be a good example of where United States and Canadian use practices in public agencies are similar.

The evaluation facilitator, usually the program manager or her designee, manages the program's relationship with stakeholders and the evaluator, helps to select an evaluation design suited to the purpose of the evaluation, garners organizational and political support to implement the evaluation, provides technical and logistical assistance, and facilitates the use of evaluation results by program stakeholders. The evaluation facilitator serves as the primary contact for all stakeholders and as the link between the advisory group and the evaluator. The evaluation facilitator also plays a critical role in evaluation capacity building by identifying and selecting an appropriate evaluator and by working with the evaluator to provide the advisory group with a comprehensive introduction to key evaluation concepts. It is not a common practice in NGOs or in the public agencies in the United States to have such explicit and formalized roles.

The evaluator is responsible for making final decisions about the evaluation's design, data collection instruments and methods, and

data analysis, and for communicating the study's findings. The evaluator is also responsible for the ethical and professional conduct of the evaluation and for facilitating the advisory group members' activities. Although the evaluator may need to negotiate certain issues with the advisory group, the evaluator is ultimately responsible for carrying out the evaluation. Table 2 provides an overview of the four stages of the 10-Step Process. Note that, in the United States, use is almost always a goal and a philosophical belief, however infrequently it is fully carried out because of time, cost, political and managerial changes, and/or other constraints.

Table 2
Overview of the 10-Step Process for a 12-Month Study

Stage	Steps	
I. Groundwork In this stage, evaluation begins when the project begins and continues throughout the process. In Steps 1–3, constructing the evaluation, attention is given to how the evaluation process and findings will be used in decisions about policy and programmatic modification or termination. The construction of the study's purpose, questions, and methods are to be determined and the intended uses and users identified.	1–3 Approximately 11 weeks	
II. Formalization In this stage, the formal agreements, supporting infrastructure, and details of implementation are negotiated and agreed upon. This stage includes development of the proposal and data collection instruments and compliance with Institutional Review Board (IRB) policies.	4–5 Approximately 11 weeks	
III. Implementation In this stage, the program evaluation is conducted and concluded, with preliminary analysis. Special attention is given to tentative findings and possible recommendations. In Step 8, there is greater formalization of the study's outcomes and their potential contribution; these outcomes are then reviewed by the evaluation advisory group and others.		
IV. Utilization In this stage, the findings are translated into decisions for action.	9–10 Approximately 7 weeks	

Immediately before starting the 10-Step Process, the evaluation advisory group should be provided a brief introduction to the fundamentals of utilization-focused evaluation, for example, Patton (2008). This introduction will help engage participants; enhance ECB and organizational development; and prepare evaluation advisory group members to assist with identifying how evaluation findings are to be used, prioritizing key evaluation questions, and identifying appropriate data collection methods. Ideally, the evaluation facilitator and the evaluator will participate in this introduction as a way to build rapport with the evaluation advisory group members. In the United States, there are typically so many players in a program or service field that it is common for individuals to not know one another and

hence to have no to little working experience together. In part, this simple practice "builds trust," and this is crucial to the quality of assistance provided by the advisory group over the life of the study and planning for its use.

Based on our experience, we use these criteria to identify programs or interventions that should be evaluated:

- The selected program should be of sufficient importance that the evaluation and report will be seriously reviewed in policy and program decisions.
- The program should be significant and important to its parent organization.
- The program staff/stakeholders should have practical questions that an evaluation could address.
- There must be a desire to do the evaluation and to use evaluation results to improve the program.
- The evaluation must be able to provide data that address the questions being asked by the program staff/stakeholders.
- There must be agreement that the program can be evaluated within the agreed-upon cost and time frame.
- The evaluation should be sensitive to a wide range of constituents.
- The data to be produced by the evaluation must be useful for decision-making on different levels (e.g., policy, program, or management).
- Program/client data, other inputs, as well as other evidence about the program, should be available.

The evaluation facilitator should be the program manager or a designee who is integrally involved in the program. Having the evaluator serve as both evaluation facilitator and evaluator will negate the benefits of the 10-Step Process and increase the risk of designing an evaluation without meaningful programmatic insight; this could ultimately reduce ECB and the use of evaluation results. Table 3 provides a protocol for implementing the 10-Step Process and makes explicit the responsibilities of the evaluation facilitator and the evaluator. To Canadian evaluators, this may look simplistic and unnecessary, but in the United States where this is not a common practice, it is a necessary overview. Canadian evaluators may wish to critique this, present their models, and enter into a conversation about this.

Table 3 Staff Responsibilities in the 10-Step Process

Evaluatio	on Facilitator Action	Evaluator Action	
STAGE	I. GROUNDWORK		
STEP 1:	Identify evaluation project and evaluator		
a.	Meets with program manager and key staff to identify priority evaluation project		
b.	Identifies contractor or in-house evaluator		
STEP 2:	Schedules conference call/meeting with program manager and evaluator		
a.	Schedules conference call/meeting with program manager and evaluator to discuss basic information needed to develop project (e.g., purpose of the evaluation; logic model; identification of intended users, uses, and stakeholders)	Participates in conference call or meeting	
STEP 3:	Evaluation advisory group contributes to the development of the project		
a.	Identifies evaluation advisory group	Provides input into the identification of a diverse advisory group	
b.	Schedules meeting or call with the advisory group and the evaluator (2 hours) to get input into the  users of the evaluation uses of the evaluation evaluation questions methodologies political considerations	Participates in meeting	
STAGE	II. FORMALIZATION		
STEP 4:	Proposal and data collection instruments are drafted, distributed, and reviewed		
a.		Drafts proposal and draft data collection instruments (e.g., written surveys, telephone surveys, personal/ group interviews, analysis of existing data)	
b.	Reviews draft proposal and data collection instruments with program manager and recommends changes if necessary; approves proposal, instruments, and plan for participant protection		
C.	Once approved by program manager, distributes plans to evaluation advisory group for 2-week review		
d.	Collects feedback on proposal and data collection instruments from evaluation advisory group and forwards to evaluator		

Evaluation	on Facilitator Action	Evaluator Action	
STAGE	II. FORMALIZATION		
STEP 5:	Proposal and data collection instruments revised, finalized, and submitted for IRB approval/contract signed if using external evaluator		
a.	Approves final proposal and data collection instruments with program manager	Finalizes proposal and dat collection instrument/work to comply with IRB proces	
b.	Ensures appropriate staff sign the proposal, which is attached to contract if using an external evaluator	Signs proposal	
STAGE	III. IMPLEMENTATION		
STEP 6:	Data collection, entry, and analysis		
a.		Collects, enters, and analyzes data; prepares preliminary findings; send findings to evaluation facilitator	
b.	Reviews preliminary findings/shares with program manager		
STEP 7:	Preliminary findings are shared with evaluation advisory group		
a.	Distributes findings to evaluation advisory group		
b.	Schedules call or meeting with evaluation advisory group to discuss findings and identify format for reporting findings	Participates in evaluation advisory group meeting	
STEP 8:	Draft report prepared, distributed, reviewed, and finalized		
a.		Prepares draft report	
b.	Reviews report and shares with program manager		
C.	Once approved by program manager, distributes to advisory group for 2-week review		
d.	Collects feedback from advisory group and forwards to evaluator		
e.		Finalizes report	
	IV. UTILIZATION		
STEP 9:	Meeting to wrap up evaluation study and discuss utilization of findings/dissemination of report		
a.	Schedules meeting with evaluator to review the evaluation process and discuss how the evaluation can be used and, if appropriate, the development of the next evaluation	Participates in meeting	
b.	Disseminates report to intended users/stakeholders and others		
STAGE	IV. UTILIZATION		
	: Development of action plan and process for utilization		
a.	Develops action plan with program manager; processes it for implementation and monitoring	Participates as appropriate	
b.	Continues evaluation process; targets area for evaluation from first year or identifies new priority topic for evaluation		

Stage I activities focus on engaging the evaluation advisory group and developing a feasible evaluation plan. The initial advisory group meeting (Step 3b) is a critical milestone in the evaluation. Effectively engaging the advisory group in the evaluation planning will set the stage for continued success throughout the evaluation process. Careful preparation will help ensure the active participation of all participants in critically assessing the core components of the evaluation plan.

During Stage II activities, the evaluation plan is formalized. If an outside evaluator is used, the final plan should be part of the statement of work in the formal evaluation contract. However, if the evaluator's contract is not finalized before the evaluation work begins, the request for proposal and statement of work should be as clear as possible regarding the evaluation stance and the framework the evaluator will use in developing and conducting the evaluation. Explicitly telling the evaluator to engage primary evaluation users throughout the evaluation project will help prevent later frustration. Too often contractors work independently of the program staff and primary evaluation users and, as a result, produce final reports with little to no information useful for program improvement, monitoring, or accountability purposes. This may be more a United States practice and problem, but evaluation managers in other countries likely share the difficulties of their structural and legal and practice arrangement.

Evaluation implementation (Stage III) takes the longest time to complete. Implementation involves data collection and analyses, as well as meetings with the evaluation advisory group to help interpret the findings. These meetings are critical because the advisory group will have valuable insight into programmatic issues that may affect the results of the evaluation.

The evaluation advisory group will also play a critical role in determining the best format for reporting results that will be used in program decision-making. Historically, evaluations have culminated in lengthy final reports structured like scientific research papers—that is, methodology, findings, and conclusions. Unfortunately, this structure often becomes a barrier for using the evaluation information for program improvement. The evaluation group's involvement will help ensure that evaluation results are reported on a timeline and in a format most useful to those who need them. For example, they could help ensure that evaluation process information is provided quickly

so that the evaluation advisory group can use it to make midcourse changes in the evaluation. Clarifying the form and structure in which evaluation information is communicated should be an iterative process based on the changing needs of the primary users of that information. Following are some of the formats in which evaluation results can be reported (Torres et al., 1996):

- short communication (e.g., memorandum, e-mail)
- personal discussions with stakeholders
- interim/progress reports
- executive summaries
- chart essays
- verbal presentations
- newsletters, bulletins, and brochures
- videotape presentations
- poster presentations
- public meetings
- news media communication

Here too may exist cultural differences in practice based in part on what types of formats are shown to be normatively most useful.

Stage IV of the evaluation process includes engaging "primary intended users" (Patton, 2008) in a discussion of the findings and how these can be used to improve the program. Also discussed is the dissemination of the report to other stakeholders for their use. Note that creation of the dissemination plan is distinct from the evaluation plan: although the primary users of evaluation findings may be included in the dissemination plan, primary and secondary stakeholders may also be involved. (For a more detailed program improvement model that builds on use throughout the evaluation, see Compton et al., 2010.)

Although the 10-step evaluation process we described divides program evaluations into four stages, suggests realistic time horizons for completing each stage, and clarifies the roles of evaluation team members, it does not prescribe or proscribe the use of particular evaluation methods. Instead, it has the flexibility to address local context, purpose, content, and the differing needs of a wide variety of programs. And although the 10-Step Process was designed to have evaluations completed in approximately 12 months and to be repeated in multiyear evaluations, the same process can be used in evaluation studies of different lengths.

# HOW THE 10-STEP APPROACH CAN HELP IN ADDRESSING THE THREE PROGRAM EVALUATION PROBLEMS

Managing Discrete Evaluation Studies

Problem 1: Lack of systematic integration within a larger program improvement process

The 10-Step Process increases the likelihood that program evaluation efforts will be integrated into a larger program improvement process because of its focus on how evaluation results are to be used and on the early and continuous involvement of stakeholders (Patton, 2008). By encouraging key stakeholders and the evaluator to work together and clearly defining the roles and responsibilities of each, the 10-Step Process helps reduce communication problems among members of the evaluation team and ensure that everyone is "on the same page." (See Compton et al., 2010, on one program improvement model that focuses on use.)

Problem 2: Difficulty in finding an appropriate evaluator

The 10-Step Process increases the likelihood that an appropriate evaluator will be selected by providing the program manager with clear selection criteria, including an understanding of and experience with the Utilization-Focused Evaluation (UFE) model (Patton, 2008), previous involvement with program stakeholders (CDC, 1999, 2008), and collaboration (Joint Committee on Standards for Educational Evaluation, 1994). It also helps find and choose an evaluator with a commitment to the use of the study for program improvement, accountability, and policy.

Problem 3: Lack of appropriate conceptualization prior to the inception of an evaluation study

The 10-Step Process prevents this problem by involving the evaluator with a stakeholder group at the early stage of study conceptualization and encouraging both to devote a significant amount of time to conceptualizing the study, again articulating how study results will be used for program improvement. This planning helps prevent the evaluation from becoming a mere academic exercise divorced from the larger program improvement effort and ensures that the practical interests of important stakeholder groups and program staff members are taken into account.

## Managing Evaluation Capacity Building

Problem 1: Lack of systematic integration within a larger program improvement process

A major aim of ECB is to establish an organizational approach to program evaluation whereby every evaluation study is designed to produce results that will be used to improve the program being evaluated. The 10-Step Process requirement that stakeholders be involved in the evaluation process can also lead to changes in the host organization, leading to organizational development and, in turn, the organization's relationship to other organizations. By helping an organization stay in touch with its stakeholders, the 10-Step Process can increase the extent to which evaluation study results are used to improve program effectiveness, as well as for other purposes.

Problem 2: Difficulty in finding an appropriate evaluator

Because the 10-Step Process emphasizes collaboration among multiple organizations, it serves to build the capacity of evaluators employed in or by those organizations to work in a utilization-focused frame (Patton, 2008) with participating stakeholders. The use of faculty-supervised graduate students also builds capacity, as shown in the American Cancer Society Collaboration Evaluation Fellows Project (Preskill and Compton, 2001). Collaboration on evaluation studies results in ongoing relationships among participating organizations and contractors who tend to reach a common understanding of UFE through this process and an appreciation of the importance of producing evaluation results that can be used for program improvement and of working collaboratively with stakeholders.

The 10-Step Process makes it easier for the managers of ECB to find appropriate evaluators, and it facilitates the contracting process by institutionalizing the evaluator's role. Each study then becomes part of an ongoing tradition of studies.

Problem 3: Lack of appropriate conceptualization prior to the inception of an evaluation study

Because ECB serves to open study conceptualization, design, and implementation to scrutiny by program staff, it helps keep evaluations focused on producing results that can be used to improve the programs being evaluated, as well as on producing results that are understood and accepted by stakeholders, program staff, and others in the program's interorganizational field. This is done in the 10-Step Process.

Managing ECB involves managing the organizational structures and process used in program evaluations so that every evaluation study is appropriate, well conceptualized, and designed to produce results that can be used for program improvement and accountability (see Table 4).

Table 4
Common Problems Encountered in Managing Evaluation Studies and Evaluation
Capacity Building (ECB) and Some Suggested Solutions

Problem		Suggested solutions for evaluation managers	Suggested solutions for ECB managers
1.	Program evalua- tion is not systematically integrated into a larger program improvement process Focus:	<ul> <li>Participation as "input" and "feedback"</li> <li>Collaboration of individuals</li> <li>10-Step Process</li> <li>Identification early on of stakeholders, users, and uses</li> <li>Training in 10-Step Process</li> </ul> Working on the level of person	<ul> <li>Participation as true collaboration</li> <li>Collaboration of individuals as organizational agents/representatives</li> <li>10-Step Process</li> <li>Collaboration of stakeholders for program and organizational change through use of evaluation</li> <li>Training in ECB and the 10-Step Process</li> </ul> Working on the levels of organization and group
2.	Difficulty in selecting an appropriate evaluator	<ul> <li>Search market for evaluator</li> <li>Use as criteria UFE and Joint Standards</li> <li>Must understand and accept ethos, structure, and practices of 10-Step Process</li> <li>Must focus on use</li> </ul>	<ul> <li>Capacity building and interorganizational work produce groups of evaluators oriented to use UFE and Joint Standards</li> <li>Evaluator familiar with 10-Step Process</li> <li>Ongoing capacity building of evaluators within and across organizations</li> <li>Ongoing evaluation capacity building of one's own and collaborating organizations</li> </ul>
	Focus:	Individual contractor trained to work with use-imperative	Organizational and interorganizational, as well as individual, evaluation capacity building Sustaining structures and process
3.	Lack of appropriate conceptualization prior to the inception of the evaluation process	<ul> <li>10-Step Process initiates evaluator into ethos and practices of use</li> <li>Explicit practices for stakeholder involvement in study conceptualization, design, and use</li> <li>Stakeholder pressure for practical, usable study completed in a reasonable time to fit organization's decision-cycle</li> </ul>	<ul> <li>ECB-oriented and trained evaluators know UFE and Joint Standards</li> <li>Agency and interagency stakeholders represent problem-field and program-field</li> <li>Evaluation use can impact problem definition, program-theory, program logic model, leading to program improvement</li> <li>Each evaluation strengthens the institutionalization of ECB on how studies are to be done and used</li> </ul>
_	Focus:	All individuals on the same page	Organizational representatives working collaboratively on agreed-upon issues in a structured, systematic way to influence and use an evaluation on an ongoing basis

#### CONCLUSION: A DISTINCTION WITH A DIFFERENCE

We have described two broad frameworks for the managing of program evaluation—the managing of one or more discrete evaluation studies and the managing of an ECB structure and process designed to produce ongoing evaluation-based program improvement of the function, an evaluation culture in the organization itself, and the development of the organization itself.

If the goal of an organization's program evaluation efforts is continuous program improvement, then that organization's primary managing framework should be ECB. We believe the model of managing for ECB that we described is consistent with the United States CDC's "Framework for Program Evaluation in Public Health" (1999); can be adapted for use by most governmental and not-for-profit organizations; and, by stressing the involvement of program partners and stakeholders, provides a good complement to the use of experts in program design and evaluation.

This is our choice based on our practice experience in the United States implementing evaluation studies and managing evaluation units. It may be that normative Canadian evaluation practice does not require, need, or want a specific practical process such as the one presented. If so, read this article to learn how far advanced your use practices are compared to ours—that is, not to our talk but to our everyday work.

We believe that it will take a concrete, specific, practical process such as this one to make evaluation use an everyday way of working, and to do so in ways that enhance organizational development, possibly through an ECB-like process.

#### ACKNOWLEDGEMENTS

The findings and conclusions in this article are those of the authors and do not necessarily represent the views of the Centers for Disease Control and Prevention. The authors thank Lei Zhang, Ph.D., for her editorial support in preparing this article.

#### REFERENCES

Baizerman, M. (2009). Deepening understanding of managing evaluation. In D. W. Compton & M. Baizerman (Eds.), New Directions for Evaluation, 121, 96.

- Bamberger, M., Rugh, J., & Mabry, L. (2006). *Real world evaluation*. Thousand Oaks, CA: Sage.
- Beere, D. (2004, October). *Evaluation capacity building: A tale of value-adding*. Paper presented at the international conference of the Australasian Evaluation Society, Adelaide, South Australia.
- Carman, J., & Fredericks, K. (2010). Evaluation capacity and nonprofit organizations: Is the glass half-empty or half-full. *American Journal of Evaluation*, 31(84), 84-104.
- Centers for Disease Control and Prevention. (1999). Framework for program evaluation in public health. *MMWR Reports and Recommendations*, 48 (RR-11), 1-40.
- Centers for Disease Control and Prevention. (2008). Introduction to process evaluation in tobacco use prevention and control. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention.
- Centers for Disease Control and Prevention, Division of Nutrition, Physical Activity, and Obesity. (2011). *Developing and using an evaluation consultation group*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention.
- Church, M., Bitel, M., Armstrong, K., Fernando, P., Gould, H., Joss, S., ... Vouhe, C. (2002). *Participation, relationships, and dynamic change:*New thinking on evaluating the work of international networks (working paper #121). London, UK: University College.
- Compton, D., & Baizerman, M. (2008). Using evaluation capacity building (ECB) to understand evaluation in the United States National Tobacco Control Program. *Canadian Journal of Program Evaluation*, 23(3), 199–224.
- Compton, D. W., & Baizerman, M. (Eds.). (2009). Managing program evaluation: Towards explicating a professional practice. *New Directions for Evaluation*, 121.
- Compton, D., Baizerman, M., Farris, R., & Zhang, L. (2010). Enhancing evaluation use for accountability and improvement: A model and practical questions. Manuscript submitted for publication.
- Compton, D. W., Baizerman, M., & Stockdill, S. H. (Eds.). (2002). The art, craft, and science of evaluation capacity building. *New Directions for Evaluation*, 93.

- Compton, D. W., Glover-Kudon, R., Avery, E., & Morris, C. L. (2001). The Collaborative Evaluation Fellows Project: Background and overview of the model. *Cancer Practice*, 9(1), S4–S10.
- Cousins, B., Goh, S., & Elliott, C. (2007, June). Organizational capacity to do and use evaluation: Preliminary results of a pan-Canadian survey of evaluators. Paper presented at the annual meeting of the Canadian Evaluation Society, Winnipeg, MB.
- Duignan, P. (2002). Building social policy evaluation capacity. *Social Policy Journal of New Zealand*, 19, 179-194.
- Fleischer, D. (2007). Evaluation use: A survey of U.S. American Evaluation Association members (Unpublished master's thesis). Claremont Graduate University, Claremont, CA.
- Fleming, M. L., & Easton, J. (2010). Building environmental educators' evaluation capacity through distance education. *Evaluation and Program Planning*, 33, 172-177.
- Gibbs, D., Napp, D., Jolly, D., Westover, B., & Uhl, G. (2002). Increasing evaluation capacity within community-based HIV prevention programs. *Evaluation and Program Planning*, 25, 261-269.
- Greene, J. G. (1988). Stakeholder participation and utilization in program evaluation. *Evaluation Review*, 12(2), 91-116.
- Johnson, K., Greenseid, L., Toal, S., King, J., Lawrenz, F., & Volkov, B. (2009). Research on evaluation use: A review of empirical literature from 1986 to 2005. *American Journal of Evaluation*, 30(3), 377-410.
- Joint Committee on Standards for Educational Evaluation. (1994). *The program evaluation standards*. Thousand Oaks, CA: Sage.
- Lunt, N., Davidson, C., & McKegg, K. (Eds.). (2003). *Evaluating policy and practice: A New Zealand reader*. Auckland, NZ: Pearson Prentice Hall.
- Mattessich, P., Murray-Close, M., & Monsey, B. (2001). *Collaboration: What makes it work?* St. Paul, MN: Fieldstone Alliance.
- Naccarella, L., Pirkis, J., Kohn, F., Morley, B., Burgess, P., & Blashki, G. (2007). Building evaluation capacity: Definitional and practical implications for an Australian case study. *Evaluation and Program Planning*, 30, 231-236.

- Patton, M. Q. (2001). The CEFP as a model for integrating evaluation within organizations. *Cancer Practice*, 9(1), S11–S16.
- Patton, M. Q. (2008). *Utilization-focused evaluation*. Thousand Oaks, CA: Sage.
- Preskill, H. (2008). Evaluation's second act: A spotlight on learning. *American Journal of Evaluation*, 29(2), 127-138.
- Preskill, H., & Boyle, S. (2008). A multidisciplinary model of evaluation capacity building. *American Journal of Evaluation*, 29(4), 443-459.
- Preskill, H., & Compton, D. (Eds.). (2001). The American Cancer Society's collaborative evaluation fellows project: A nationwide program evaluation strategy. *Cancer Practice*, 9(1).
- Stufflebeam, D. L. (2001). Evaluation models. New Directions for Evaluation, 89.
- Torres, R. T., Preskill, H. S., & Pointek, M. E. (1996). *Evaluation strategies for communicating and reporting*. Thousand Oaks, CA: Sage.
- Whitmore, E. (1998). Understanding and practicing participatory evaluation. New Directions for Evaluation, 80.

**Donald W. Compton** is a Health Scientist, Division of Nutrition, Physical Activity and Obesity, Centers for Disease Control and Prevention, Atlanta, Georgia.

**Michael Baizerman** is Professor, Youth Studies, School of Social Work, University Of Minnesota

**Ross VeLure Roholt** is Assistant Professor in the School of Social Work, University of Minnesota.