Process Evaluation – Tobacco Control

Paul W. Mattessich
Benefits of Process Evaluation

• Understand the “first three boxes” of the logic model
  – Inputs
  – Activities
  – Outputs

• Relate process to outcomes

• Obtain other information – in a standard, reliable way about program operations
Logic Model

Inputs → Activities → Outputs

Inputs → Initial Outcomes → Intermediate Outcomes → Long-Term Outcomes
Purposes of Process Evaluation

1. Program Monitoring
2. Program Improvement
3. Building Effective Program Models
4. Program Accountability
Program Monitoring

What you can do:
• Track, document, and summarize the inputs, activities, and outputs of a program.
• Describe other characteristics of the program and/or its context.

Sample questions:
• How much money do we spend on this program?
• What activities are taking place?
• Who is conducting the activities?
• How many people do we reach?
• What types of people do we reach?
• How much effort (e.g., meetings, media volume, etc.) did we put into a program or specific intervention that we completed?
Program Improvement

What you can do:

• Compare the inputs, activities, and outputs of your program to standards or criteria, your expectations/plans, or recommended practice (fidelity).

• Relate information on program inputs, activities, and outputs to information on program outcomes.

Sample questions:

• Do we have the right mix of activities?

• Are we reaching the intended targets?

• Are the right people involved as partners, participants, and providers?

• Do the staff/volunteers have the necessary skills?
Building Effective Program Models

What you can do:
• By understanding how process is linked to outcomes, process evaluation enables the tobacco-control field to identify the most effective program models and components.

Sample questions:
• What are the strengths and weaknesses within discrete components of a multi-level program?
• What is the optimal path for achieving a specific result (e.g., getting smoke-free regulations passed)?
Program Accountability

What you can do:

• Demonstrate to funders and other decision makers that you are making the best possible use of program resources.

Sample questions:

• Have the program inputs or resources been allocated or mobilized efficiently?

• How has implementation conformed to, and deviated from, the initial plan?
“Neutral, Objective Information”

• Process evaluation data are “neutral”. They describe.

• They do not assess, unless compared with standards, protocols, etc., to make judgments about quality of implementation.
Step 1: Engage Stakeholders

- People served/affected by program
e.g., patients, clients, advocacy groups, community members, elected officials

- People operating and/or funding program
e.g., staff, volunteers, partners, funders/payers, coalition members

- People who make decisions about the program
e.g., partners, funders/payers, legislators
<table>
<thead>
<tr>
<th>Potential Stakeholders</th>
<th>Involve? If yes: Who? (Identify specific people/organizations.)</th>
<th>Initial Engagement How will Stakeholder initially be notified and involved?</th>
<th>Ongoing Involvement? If yes: How and when?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program managers and staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local, state, and regional coalitions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Funding agencies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>State or local health departments and health commissioners</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local government, state legislators, and state governors</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health care systems and the medical community</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community organizations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>State agencies and related programs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Step 2: Describe the Program / Construct the Logic Model

**Inputs:** (Examples – Smoke-Free Initiative)
- Staff
- Money
- Expertise
- Other resources, capabilities
- Partnerships, coalitions
Activities:  (Examples – Smoke-Free Initiative)
• Rule making, interpretation, definition of the law
• Education of public and businesses
• Enforcement

Outputs:  (Examples – Smoke-Free Initiative)
• Number of businesses contacted for education/compliance
• Number of media messages
• Number of educational meetings with businesses and others
• Number of State Health Department regulations
Step 3: Focus the Evaluation

• Select evaluation questions, in collaboration with stakeholders

  (Examples provided earlier)
Step 4: Gather Credible Evidence

- Select indicators suitable for measuring the inputs, activities, and outputs you want to measure and for answering the questions you and your stakeholders want to answer.

- Develop and implement the methods best suited and feasible for these indicators.
<table>
<thead>
<tr>
<th>Item (For Process Evaluation)</th>
<th>Indicator</th>
<th>Data Collection Method</th>
<th>Who Will Collect? From Whom?</th>
<th>When Collected?</th>
</tr>
</thead>
<tbody>
<tr>
<td>INPUTS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACTIVITIES</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OUTPUTS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OTHER ITEMS NEEDED TO RESPOND TO EVALUATION QUESTIONS</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Step 5: Justify Conclusions

• Database construction
• Tabulation, summarization (quantitative and qualitative information)
• Description
• Interpretation
Step 6: Ensure Use of Evaluation Findings and Share Lessons Learned

• Identify:
  – Who should learn the findings
  – What they should learn
  – How they should learn

• Do reports and presentations
<table>
<thead>
<tr>
<th>Stakeholder / Audience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program managers and staff</td>
</tr>
<tr>
<td>Local, state, and regional coalitions</td>
</tr>
<tr>
<td>Funding agencies</td>
</tr>
<tr>
<td>State or local health departments and health commissioners</td>
</tr>
<tr>
<td>Local government, state legislators, and state governors</td>
</tr>
<tr>
<td>Health care systems and the medical community</td>
</tr>
<tr>
<td>Community organizations</td>
</tr>
<tr>
<td>State agencies and related programs</td>
</tr>
<tr>
<td>Etc.</td>
</tr>
</tbody>
</table>
Discussion