

The Need to Build Reach into Results Logic and Performance Frameworks

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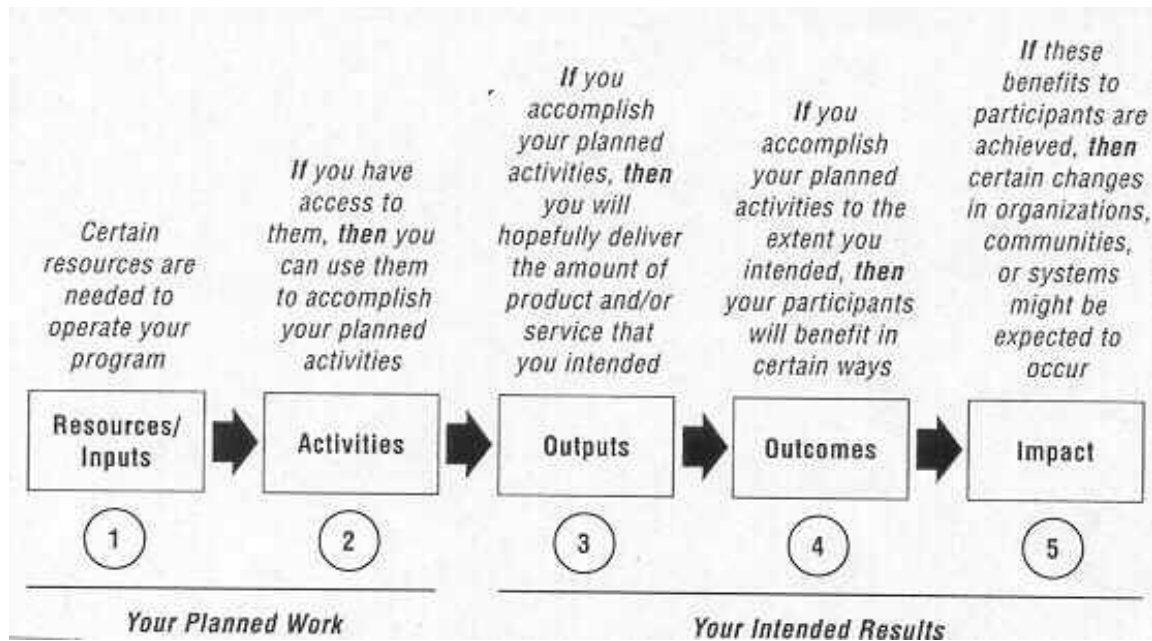
Agenda

1. The Case for Reach in Results Logic
2. Practical Examples and Uses
3. Workshop
4. Summary Conclusions, Key Concepts and Questions

Background

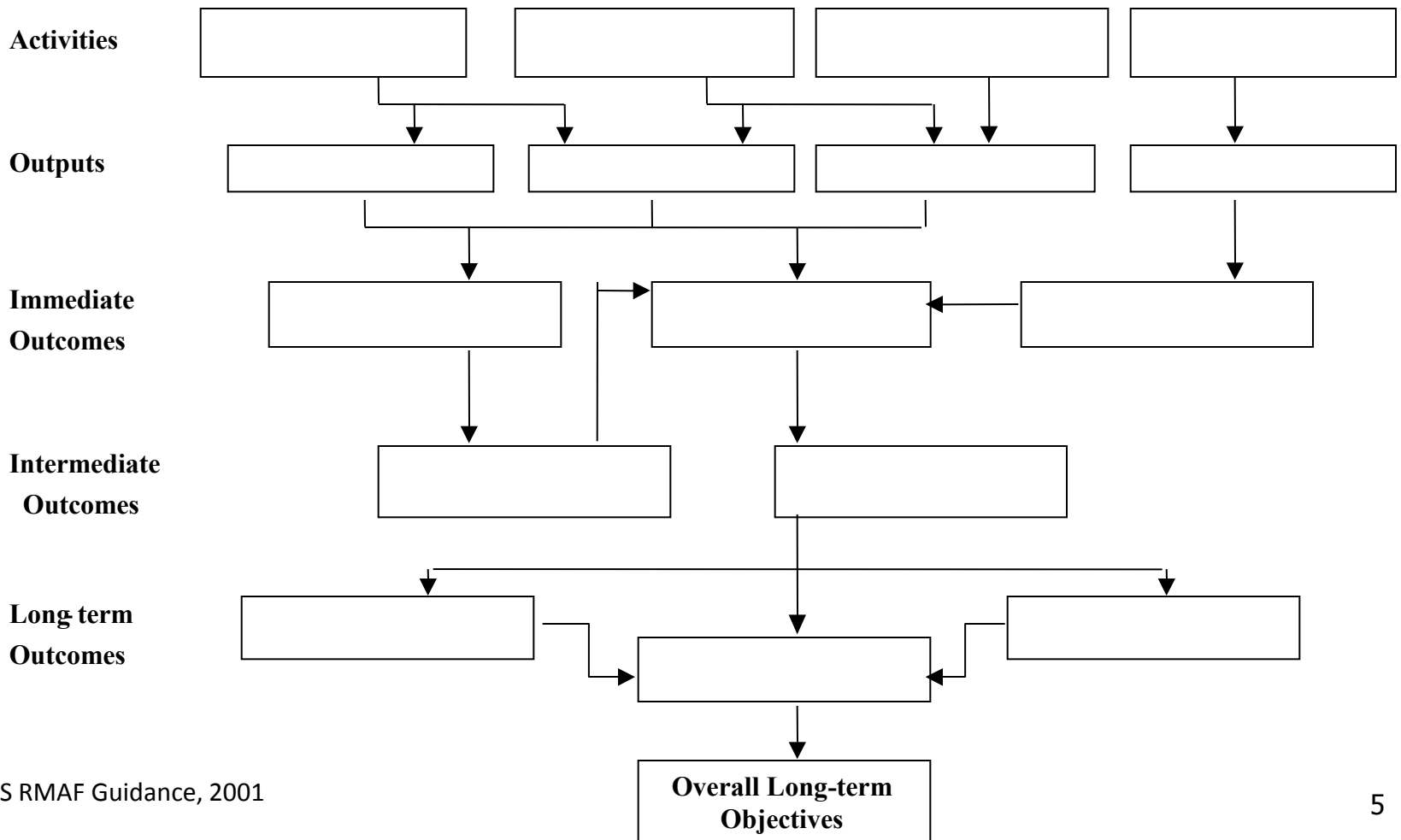
- Describing policies and programs in terms of results logic is a 30(+) tradition
- Various formats used, but current ones tend to:
 - Be linear
 - Miss outside factors (context)
 - Focus on how and what (not who)

The 'Classic' Results Logic Model



Source: Rogers, Patricia (2006) *Using Programme Theory for Complex and Complicated Programmes* EES-UKES Conference London 2006

The [Canadian] 'Classic' Results Logic



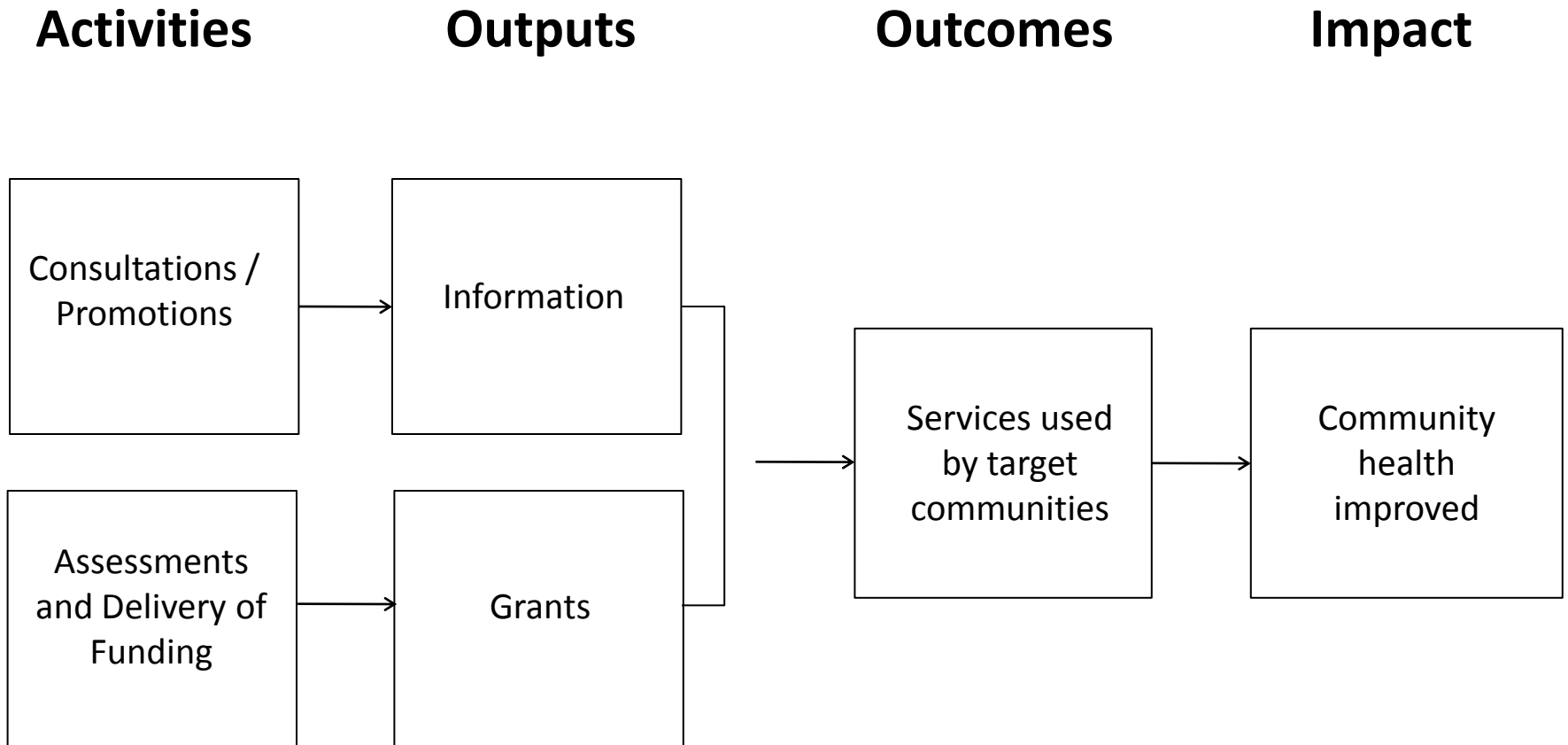
Reach Defined

- Reach is defined as the target that a given program or organization is intended to influence, including individuals and organizations, clients, partners, and other stakeholders.

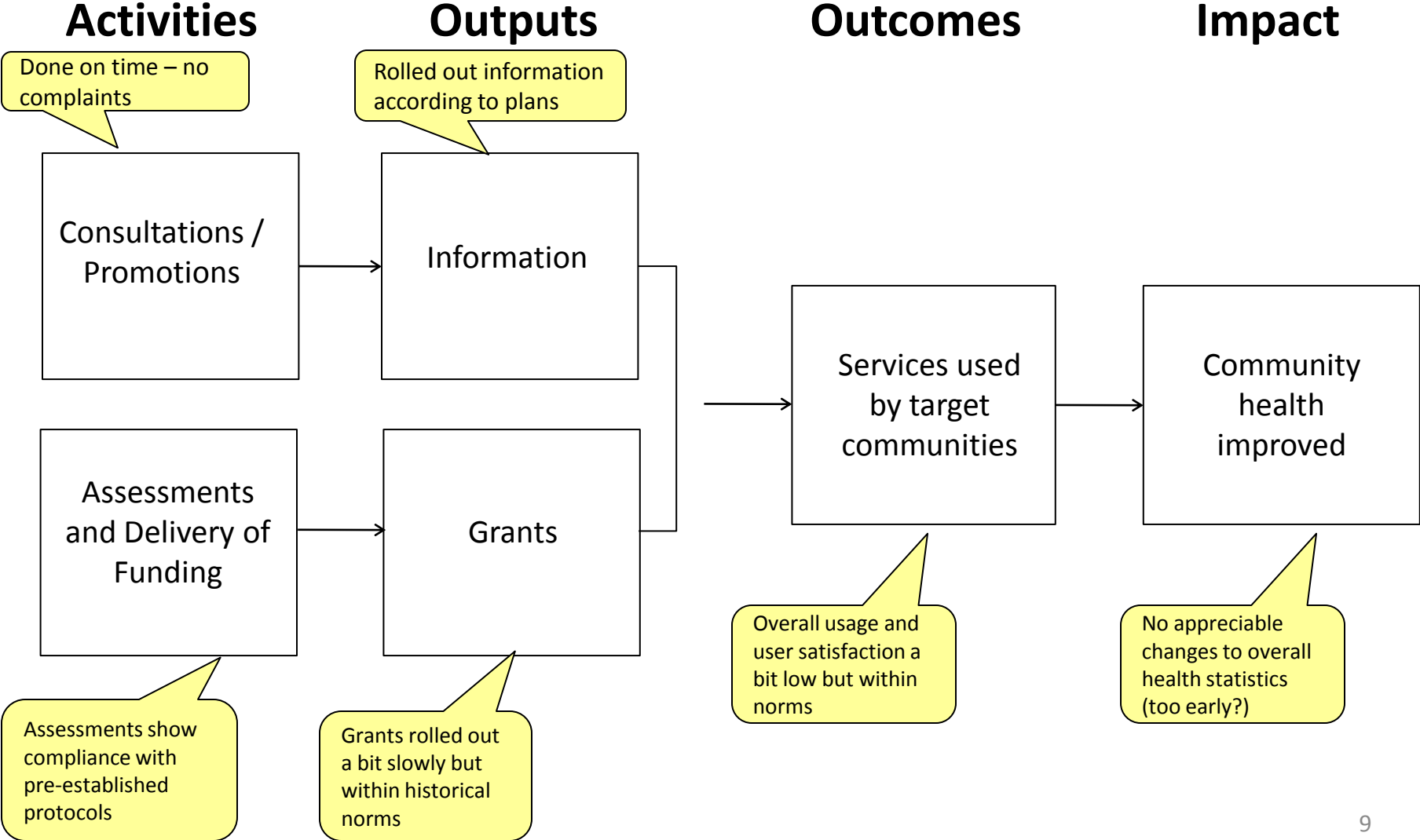
Logic Models and Frameworks Without Reach

1. Lack sensitivity to the impacts on different participant groups
2. Miss engagement as an important result
3. Do not recognize reach vs. results tradeoffs
4. Conspire against equity issues

Consider an Example



The Findings From 3 Year Review



Adherence, Averages and Aggregations Hide the Reality and Hinder Analysis

- The information generated:
 - Quantifies process and speed
 - Averages and aggregates use and acceptance (e.g. satisfaction)
 - Gives broad statistics on longer term outcomes
 - These measures mask the real situation for key processes and results for key groups
 - A more precise implementation and results logic (with reach) can enlighten

Demonstration Case: A G&C Program to Improve the Health of an 'At Risk' Group

A health promotion program is initiated to reach a key at risk community to help them achieve health improvements. This can be represented as a logical sequence as follows:

- ① Consultations and initial information on the program is provided to organizations / institutions eligible to deliver in conjunction with / on behalf of
- ② Consultation / information is provided to target 'at risk' community
- ③ Organizations / institutions eligible to deliver services to target community appropriately apply for funding
- ④ An agreement is signed and appropriate resources are used by organizations / institutions deemed eligible and deserving of assistance from
- ⑤ Assisted delivery organizations demonstrated the capacity, ability, skills competence, capability and commitment to deliver appropriate services to target community
- ⑥ Service delivery is integrated, coordinated and appropriately targeted to the 'at risk' community
- ⑦ Target community members become better aware of risks and / or key factors and available supports and resources
- ⑧ Target community members (in sufficient #s, appropriately) use resources and services
- ⑨ Target community members gain the ability, skills competencies and ultimately the 'capability' to cope and to take actions to reduce their risks
- ⑩ Target community members adopt and / or adapt actions to lower their health risks
- ⑪ Health is improved in target community

A General Results Map

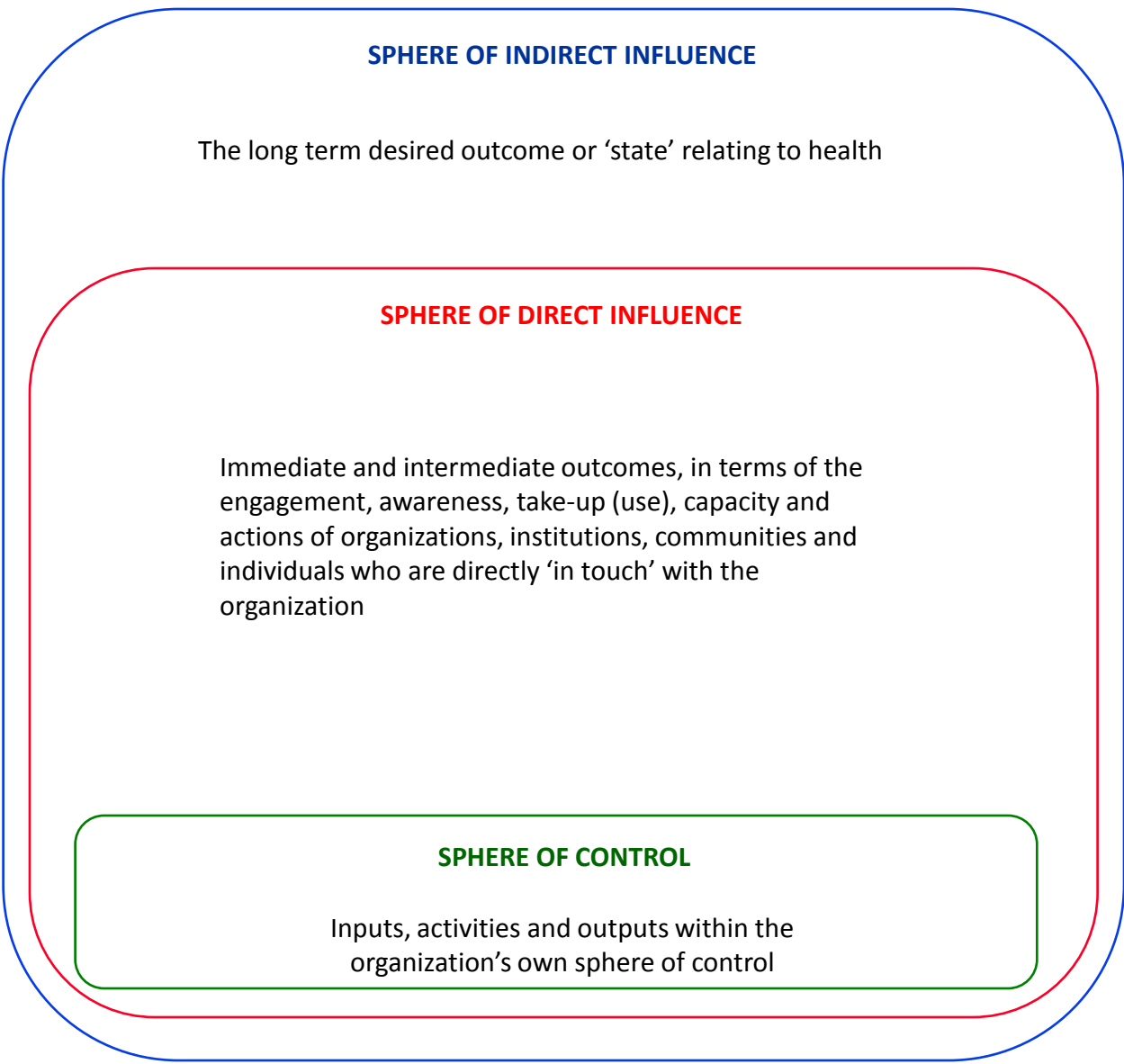
The 'Main Routes'

'The Terrain'

Conditions / Factors

- Socio-economic, political, technological, environmental factors
- Existing practices
- Existing capacity
- Current support 'climate'
- Existing relationships
- Organizational, systems, activities and resources

Results Map



SPHERE OF INDIRECT INFLUENCE

The long term desired outcome or 'state' relating to health

SPHERE OF DIRECT INFLUENCE

Immediate and intermediate outcomes, in terms of the engagement, awareness, take-up (use), capacity and actions of organizations, institutions, communities and individuals who are directly 'in touch' with the organization

SPHERE OF CONTROL

Inputs, activities and outputs within the organization's own sphere of control

'Check Points'

Progress Indicators

'State' or level of health, disease, incidence etc.



or % of entities or individuals showing (intended) actions / adoptions



Level (% , #) of participation by key stakeholders, and their constructive early 'reactions' (e.g. take-up, expressed feedback)



of outputs (information, \$, service transactions)

Delivery milestone achievement

Level of expenditure

Conditions-Results-Indicators: A G&C Program to Improve Health of At Risk Group

Conditions / Factors Determinants of Health

1. Income & social status
2. Social support networks
3. Education & literacy
4. Employment & working conditions
5. Social environments
6. Physical environments
7. Healthy child development
8. Biology & genetic endowment
9. Health services
10. Gender
11. Culture

12. Personal health practices & coping skills

Existing practices
Specific gaps in health practices

Gaps in existing capacity
Gaps in coping skills

Current support
'climate' gap

Gaps in existing awareness of resources, relationships and program participation

Organizational, systems, activities and resources

Expected Results 'Terrain'

SPHERE OF INDIRECT INFLUENCE

The long term desired outcome or 'state' relating to the health impacts

SPHERE OF DIRECT INFLUENCE

Improved health practices in specific at risk group

Improved ability to cope in specific at risk group

Improved support climate for specific at risk group

Improved relationships between groups and participation in program offerings

SPHERE OF CONTROL

Inputs, activities and outputs within Ministry / Department / Agency sphere of control: investment and delivery of new (improved) programming

Progress Indicators

'State' or level of health, disease, incidence etc.
Improved health status in target group

or % of entities or individuals showing (intended) actions / adoptions / adaptations to address gaps and cope

Level (% , #) of participation by key stakeholders, and their constructive early 'reactions' (e.g. take-up, expressed feedback)

of outputs (information, \$, service transactions)

Delivery milestone achievement

Level of expenditure

A G&C Program to Improve the Health of an "At Risk" Group – 'The Basic Pathways and Relationships'

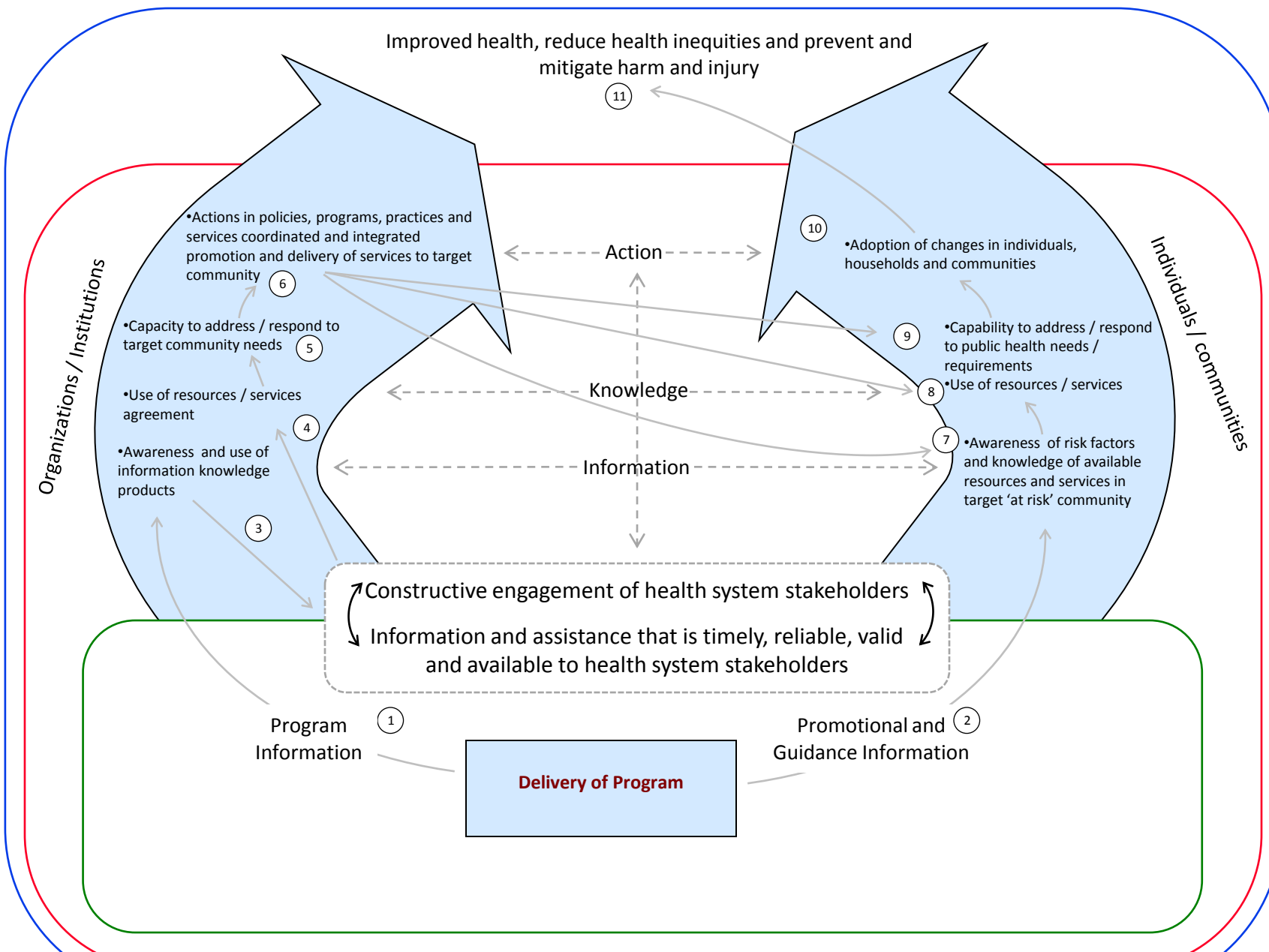
Long Term Outcomes

Intermediate Outcomes

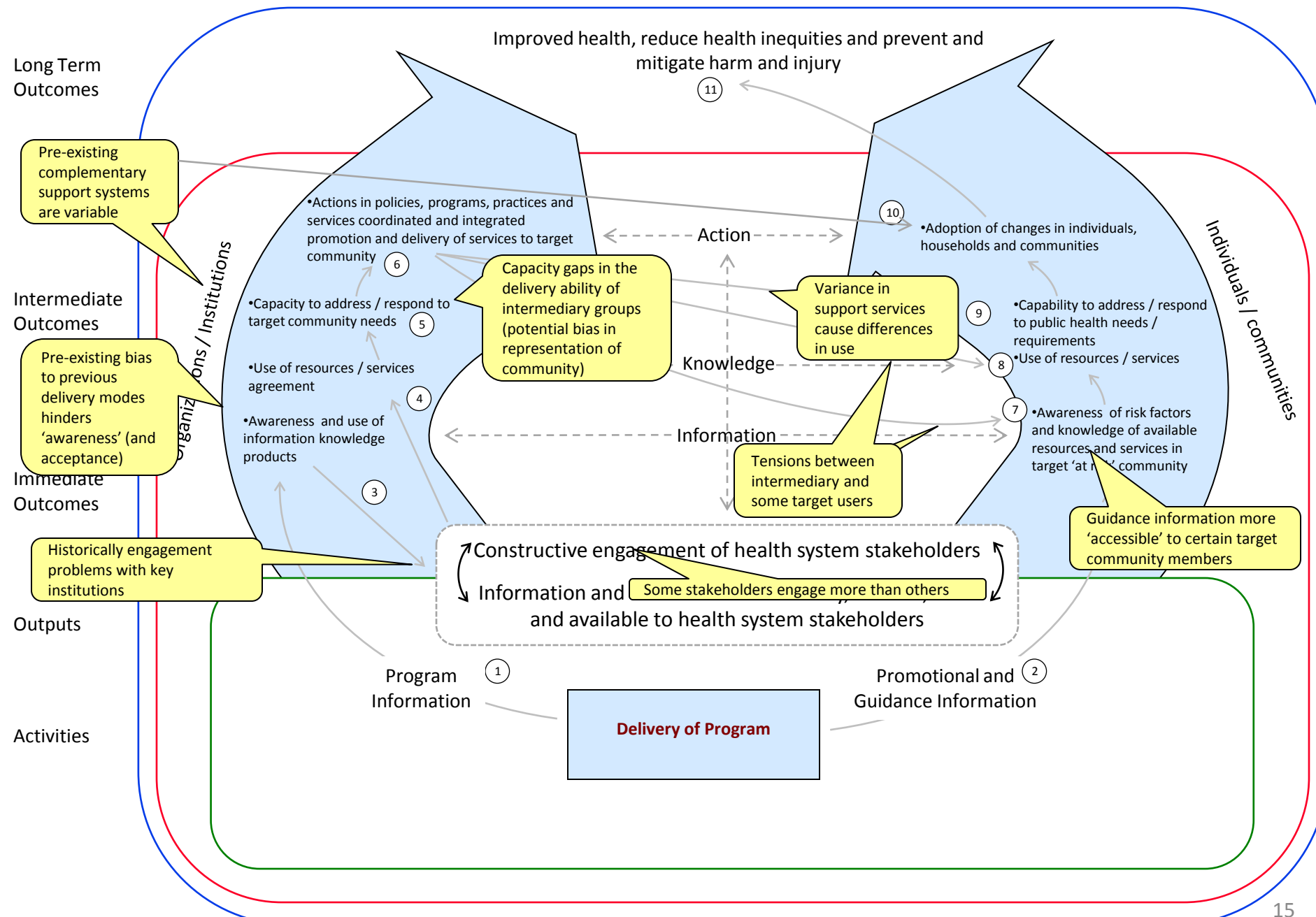
Immediate Outcomes

Outputs

Activities



A G&C Program to Improve the Health of an "At Risk" Group – 'The Basic Pathways and Relationships'



Reach Provides Insight

- Intermediary reach (quality and quantity) explains use and success with target groups
- Engagement and reaction processes create virtuous and vicious circles
- Tradeoffs emerge between reach and results (and resource 'efficiencies')

Some Reach and Results Indicators

Levels of health by key target community and sub-community

Levels of:

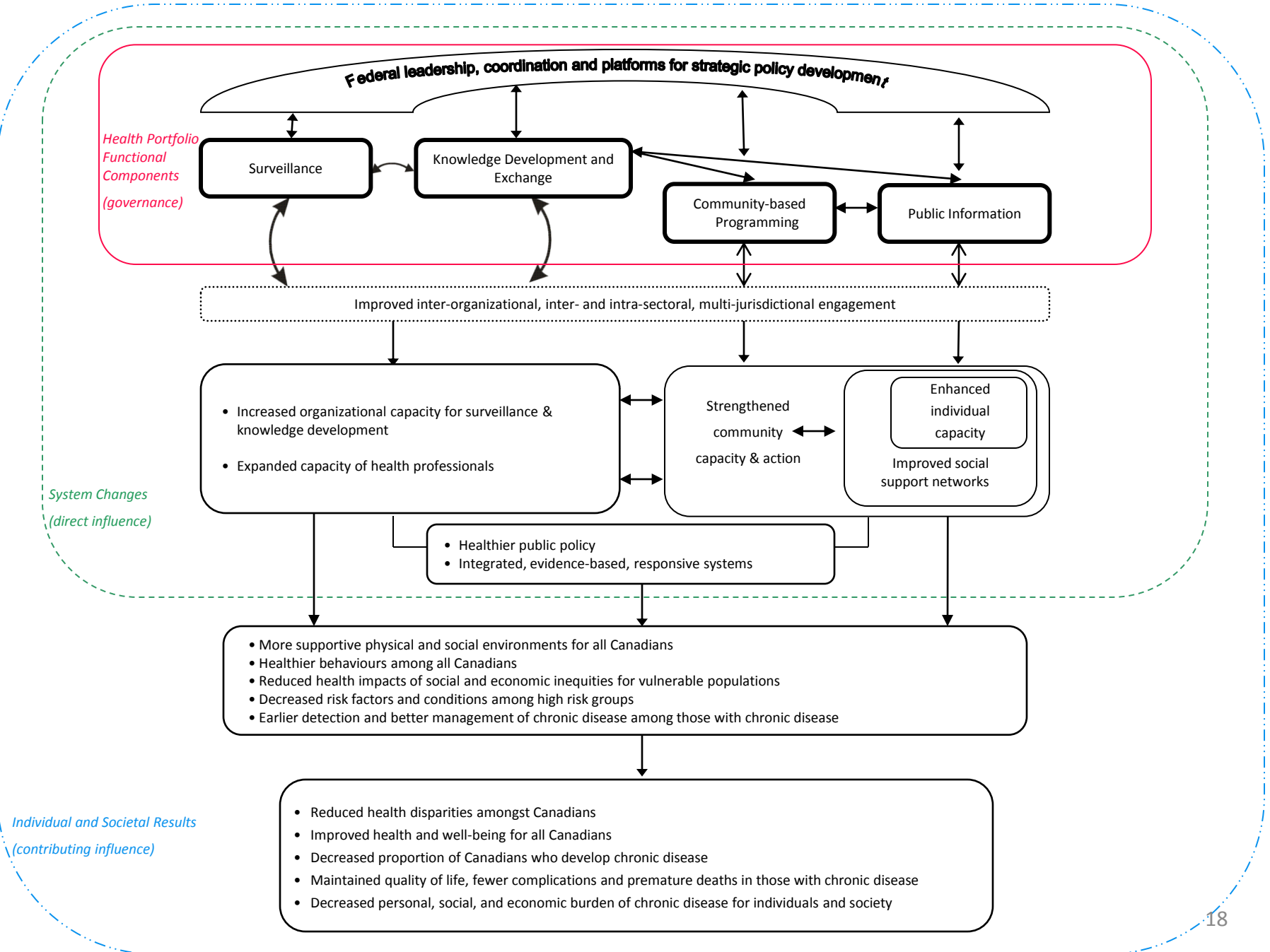
- Knowledge used to inform decision making for individuals or policy and practice
- Interactions between varied stakeholders in the production and use of knowledge, including the engagement of the target audience
- The use or application of knowledge, passive or active
- Cooperation, coordination, collaboration
- Shared vocabulary
- Reactions (e.g. satisfaction)
- #s and 'quality' of groups and individuals engaged

Outputs: # and to whom

Activities completed

Inputs spent (by area)

Reach Applied to a Conventional Model – PHAC’s Integrated Strategy for Healthy Living and Chronic Disease (2007)



Workshop

1. Review a conventional logic model
2. Consider:
 - Reach
 - Engagement as a non-linear outcome
 - Some potential measures
3. Could this work for you?

Commentary

- Can the consideration of reach help improve the treatment of equality issues?

Some Key Principles for Integrating Reach into Performance Frameworks

Consider:

- **Who** is in your sphere of influence?
- **What** are the roles of **groups** in your sphere of influence?
- **What** actions do you need to see in **key groups** for the initiative to be successful?
- **What** level of engagement do we want or expect from **whom**?
- **How** does the **engagement** of **key groups** effect delivery and results over time?

The Beginnings of a Reach and Engagement ‘Rubric’ / Assessment Model

1. What roles do the engaged parties play vis a vis your initiative (e.g. assistance recipient, consulted party, co-delivery agent).
2. What level of relationship or collaboration do we expect?

Five Levels of Collaboration and Their Characteristics					
	Networking	Cooperation	Coordination	Coalition	Collaboration
<ul style="list-style-type: none"> ▪ Relationship Characteristics 	<ul style="list-style-type: none"> ▪ Aware of organization ▪ Loosely defined roles ▪ Little communication ▪ All decisions are made independently 	<ul style="list-style-type: none"> ▪ Provide information to each other ▪ Somewhat defined roles ▪ Formal communication ▪ All decisions are made independently 	<ul style="list-style-type: none"> ▪ Share information and resources ▪ Defined roles ▪ Frequent communication ▪ Some shared decision making 	<ul style="list-style-type: none"> ▪ Share ideas ▪ Share resources ▪ Frequent and prioritized communication ▪ All members have a vote in decision making 	<ul style="list-style-type: none"> ▪ Members belong to one system ▪ Frequent communication is characterized by mutual trust ▪ Consensus is reached on all decisions
Source: Frey, Lohmeier, Lee, Tollefson <i>Measuring Collaboration Among Grant Partners</i> <u>American Journal of Evaluation</u> September 2006 p387					

Some Key Engagement Dimensions

- Communication is / was frequent
- Information on plans is / was shared
- Information on delivery and operations is / was shared
- Information on results is / was shared
- Roles are / were clearly defined
- Funding is / was consistent
- Contribution, grant or contract resources are / were shared
- Human resources in terms of FTEs or time are / were shared
- There is / was a veto power' over each other's plans
- The risks or liabilities for the initiative are shared
- There is joint communication to outside stakeholders with regard to the initiative
- Trust is needed
- A positive personal relationship exists

An Invitation

- PHAC is currently working on an engagement measurement tool
- Contact Nancy Porteous or Steve Montague if you have an interest in sharing information, tools, models or simply an interest in measuring engagement

Summary: The Benefits of Including Reach in a Logic Model / Performance Framework

- The inclusion of 'who' is reached tends to breed equity and fairness discussions
- Articulating reach helps systems thinking
- Describing reach shows the true complexity of some seemingly simple initiatives
- The notion of engagement (quality and quantity) is encouraged by including reach (and vital to most initiatives)
- Outcome statements are rendered more tangible when you ask 'who' as well as 'what'
- Non-linear patterns can be more easily recognized when reach is considered

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