

A PARTICIPATORY APPROACH TO THE DEVELOPMENT OF AN EVALUATION FRAMEWORK: PROCESS, PITFALLS, AND PAYOFFS

Mary Frances MacLellan-Wright
Public Health Agency of Canada
Edmonton, Alberta

San Patten
Alberta Community Council on HIV
Edmonton, Alberta

Añiela M. dela Cruz
Public Health Agency of Canada
Edmonton, Alberta

Annette Flaherty
Alberta Health and Wellness
Edmonton, Alberta

Abstract: Much literature exists on participatory approaches to developing and implementing program evaluation. Little is documented, however, about participatory approaches to developing an evaluation framework. This article reports a case study of implementation of a participatory evaluation approach and examines the results in light of participatory evaluation theory. A participatory approach was used to develop a provincial evaluation framework for a unique, collaborative community/provincial/federal funding program for community-based HIV/AIDS service organizations in Alberta, Canada. The participatory process resulted in significant capacity building, mutual learning, and relationship development, as well as a comprehensive and user-friendly provincial evaluation framework. The purpose of this article is to share our process, the pitfalls, and the payoffs to our participatory approach in developing an evaluation framework.

Résumé : Il existe beaucoup d'écrits sur les démarches participatives au développement et à l'application de l'évaluation de programme. Mais très peu portent sur les démarches participatives pour le développement d'un cadre d'évaluation. Cet article traite

Corresponding author: Mary Frances MacLellan-Wright, 9704 - 89 Avenue, Edmonton, AB T6E 2S2; <mfran1971@yahoo.ca>

d'une étude de cas de l'application d'une démarche participative d'évaluation et examine les résultats à la lumière de la théorie d'évaluation participative. Une démarche participative a servi à développer un cadre d'évaluation provincial pour un programme de financement collectif unique à l'échelle de la communauté, de la province et du fédéral, pour des organismes communautaires VIH/SIDA en Alberta, au Canada. Le processus de participation a mené à un développement significatif de leur capacité, de l'apprentissage mutuel, et de leur réseau de ressources ainsi qu'à la création d'un cadre d'évaluation provincial complet et convivial. Le but de cet article est de partager le processus, les entraves rencontrées, et les gains obtenus par cette démarche participative au développement d'un cadre d'évaluation.

BACKGROUND

All AIDS service organizations (ASOs) in Alberta are members of a provincial coalition called the Alberta Community Council on HIV (ACCH), and receive pooled federal and provincial operational funding. ACCH provides stewardship for this pooled funding and meets regularly to share resources and information, develop skills, and engage in joint advocacy and strategic planning. Previous efforts to collect ASO evaluation data by the ACCH and provincial and federal health departments included developing a provincial database for collecting output data and using narrative reports for collecting output, process, and outcome data. All ASOs have a limited budget allocated to evaluation, and evaluation is integrated to varying degrees into their programming. While ASOs make much effort to collect evaluation data, an evaluation framework to guide data gathering and analysis did not exist. As a result, data collected through the provincial database and individual program narrative reports remained unanalyzed.

In the fall of 2001, representatives from ACCH and both health departments placed renewed priority on developing a provincial evaluation framework. Recognition was growing for the need to examine outcomes of ASO work, and the role of a framework in complementing current and upcoming HIV/AIDS evaluation activities. Participants at the fall 2001 ACCH meeting decided they needed to develop a provincial evaluation framework. Interested representatives from ASOs were invited to join an evaluation working group to participate in its development. Diverse representation was encouraged from rural, urban, Aboriginal, harm reduction, and palliative care-focused organizations, to ensure that broad experiences and perspectives

from community-based HIV/AIDS programs and communities were captured in the process. This article reports systematically collected interview data about the success of the participatory process and the challenges that it posed. The article concludes with lessons learned from the experience.

LITERATURE REVIEW

Before embarking on a participatory process to develop the evaluation framework, the evaluation working group sought guidance from the literature. It became readily apparent that a wide variety of terms are used to describe the spectrum of stakeholder involvement. The most common examples are empowerment evaluation (Fetterman, 1996; Schnoes, Murphy-Berman, & Chambers, 2000); participatory evaluation/participatory action research evaluation (Acharya, Kumar, Satyamurti, & Tandon, n.d.; Cousins & Earl, 1992; Patton, 1997; Poland, Tupker, & Breland, 2002; Vander Stoep, Williams, Jones, Green, & Trupin, 1999); community-based evaluation (Cockerill, Myers, & Allman, 2000); inclusive evaluation (Schnoes et al., 2000); and the classic stakeholder-collaborative evaluation (Ayers, 1987).

The term *participatory evaluation* most closely describes our process, which reflected the following participatory evaluation principles presented by Patton (1997): involving participants in learning evaluation logic and skills, selecting processes and outcomes that participants consider important, ensuring all aspects are understandable and meaningful to participants, and having the evaluation consultant act as a facilitator and collaborator who recognizes and values participants' views and expertise. The use of the term *participants* in this context refers to "people who have a stake or vested interest in evaluation findings" (Patton, 1997, p. 41). In our case, the primary intended users were ASO staff, fund administrators, and government staff. Typically, participatory evaluation starts with the evaluator interacting with primary intended users to develop a mutual understanding about the purpose of the evaluation and the processes to be used. The evaluator may provide some education on evaluation-related concepts to enable full participation in technical decision-making. Depending on the stage of the evaluation, participants may be involved in defining evaluation questions, selecting methods and sources, data analysis, and interpretation (Patton, 1997; Weaver & Cousins, 2004). By contrast, a non-participatory consultant-led process involves the evaluator making technical decisions and conducting

data collection, analyses, and interpretations independently (likely with input from a limited number of stakeholders).

Benefits of a Participatory Approach

The participatory approach, while not universally appropriate, is sensitive and responsive to program uniqueness and captures variations in stages of program development, geographical locations, and level of stakeholder participation (Acharya et al., n.d.; Cockerill et al., 2000; Fetterman, 1996, 1997; Schnoes et al., 2000; VanderPlaat, Samson, & Raven, 2001). The importance is magnified when considering involving multiple programs across multiple organizations and sites. The engagement and relationship building that occurs through participation produce innovative indicators that are relevant and reflective of important or complex aspects of programs (Guba & Lincoln, 1989; VanderPlaat et al., 2001), improve the quality of data (Poland et al., 2002), and more meaningful use of evaluation results in the future (Ayers, 1987; Cockerill et al., 2000; Gilliam et al., 2002; Guba & Lincoln, 1989; Vander Stoep et al., 1999). Furthermore, participatory evaluation approaches bridge the gap between theory and practice (Gilliam et al., 2002; Vander Stoep et al., 1999) and create opportunities for mutual learning (Amo & Cousins, 2006; France, 2001; VanderPlaat et al., 2001; Vander Stoep et al., 1999).

Capacity-building is inherent to participatory approaches. Several authors have noted outcomes at an individual (e.g., beliefs) and an organizational (e.g., procedural changes, culture) level that result from involvement in the process and that are unrelated to the evaluation outcomes (Amo & Cousins, 2006; Patton, 1997). France (2001) reports that participation may actually help overcome people's prior unfavourable experiences with evaluation. Ayers (1987) states that participation places stakeholders in an excellent position to gain a number of evaluation skills. Furthermore, participants develop practical skills that can be transferred to other projects, such as interviewing techniques and communication skills (Acharya et al., n.d.; Ayers, 1987; Fetterman, 1996; Gilliam et al., 2002; Poland et al., 2002; Schnoes et al., 2000; VanderPlaat et al., 2001).

In summary, the benefits of participatory evaluation can be both instrumental (an aid to enhancing quality, relevance, and uptake) and transformative (leading to individual and organizational development) (Amo & Cousins, 2006).

Challenges of a Participatory Approach

A frequently articulated limitation of a participatory approach is that it requires considerable investment of resources (i.e., time, energy, personnel, and funding) by all participants, including those for whom evaluation may not be a daily priority activity (Acharya et al., n.d.; Gentry, Gilliam, & Scott, 1999, cited in Gilliam et al., 2002; Poland et al., 2002; Schnoes et al., 2000). France (2001) and Schnoes et al. (2000) report that participant commitment may be difficult to sustain throughout the project, particularly if staff turnover is high, organizational sustainability is uncertain, or community members do not see benefits to participation. They also report that participants may resist full involvement if they are concerned about demonstrating their program's worth to attract external funding, if they fear that their program will be critiqued, or if they fear that evaluation results will be used against them (France, 2001; Schnoes et al., 2000).

Consideration of the nature of power is key in participatory processes. If participation is not accompanied by an opportunity for real involvement and influence, it may cause more harm than good. Ayers (1987) states that participants may feel disillusioned with the process and with their participation if recommendations are not fully implemented in a timely fashion. Morris (2002) warns that participatory evaluations may actually be disempowering for participants, particularly if they are not involved from the outset of the process or not given a choice regarding how they are expected to participate. A participatory approach also brings the challenge of having to develop common outcomes that capture diversity and that are acceptable to all participants (Vander Stoep et al., 1999).

Gaps Identified in the Literature and Rationale for Approach

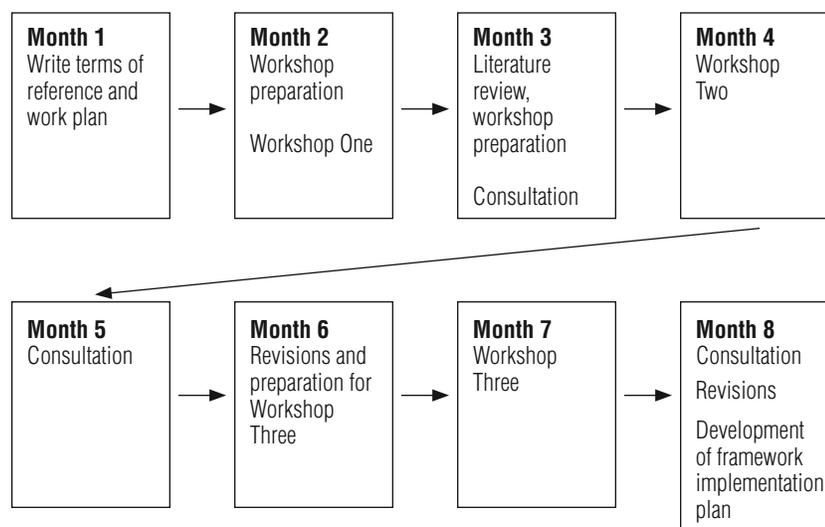
Some gaps in the participatory evaluation literature were identified. First, the literature focuses primarily on the participation of stakeholders during the implementation of evaluation, and not during the development of an evaluation framework. True participatory evaluation begins when the parameters for program evaluation are defined (i.e., when the evaluation framework is being developed). Second, there is much deliberation about the benefits and limitations of using a participatory approach to ensure acceptable products and satisfied participants. Save for a few exceptions (Ayers, 1987; Gilliam et al., 2002; Schnoes et al., 2000; Weaver & Cousins, 2004), the literature fails to provide detailed descriptions of appropriate

processes, explanations of how to design an effective evaluation tool, or guidance on how to implement a participatory evaluation. In the absence of a pre-established path, and recognizing the importance of our unique context, the working group was well positioned to create its own customized participatory approach to developing an evaluation framework. The gap in the literature also supported building in a case study approach to our process — implementing the process and gathering information on it at the same time — which led to this study.

THE EVALUATION FRAMEWORK DEVELOPMENT PROCESS

Seven representatives from a cross-section of ASOs, a representative from each of the provincial and federal health departments, the ACCH community-based research coordinator, the fund administrator from ACCH, and an evaluation consultant from the federal health department formed the evaluation working group. The evaluation consultant facilitated the process and led the groundwork (i.e., researching other frameworks) and logistical work in an effort to minimize the burden on the working group members between meetings. The eight-month framework development process included three face-to-face workshops, interspersed with conference calls, and several consultation activities (see Figure 1).

Figure 1
Chart of Timelines and Activities



The working group chose a participatory approach for a number of reasons. First, it was believed that this approach would ensure the relevance of the final framework and increase stakeholder commitment to the framework. Second, the use of this approach was consistent with the principles that guide the unique funding program/partnership, namely collaboration, community development, capacity building, and health promotion.

Initial Development and Groundwork

All members of the working group were asked to identify their interests in participating in the framework development process. Their responses included improving and simplifying data collection, ensuring that the framework would not create more work or ignore important elements of their work, and learning more about evaluation.

The working group created terms of reference, which included standard clauses: project description, membership, term of office, accountability standards, remuneration of expenses, and confidentiality. As well, working group members identified guiding principles for the process:

1. Stakeholders will participate throughout the evaluation process (designing framework, implementing framework, and interpreting evaluation results);
2. Information will be collected and communicated in a manner that is sensitive and responsive to the needs, requirements, and values of stakeholder diversity;
3. All members will have an equal voice in the process and will respect the contributions of others throughout the process; and
4. Information will be collected that is meaningful and useful at the local, provincial, and national levels.

It was agreed that organizations not participating in the working group would receive and be consulted on process documentation. Furthermore, all ASOs would potentially be involved in ongoing data collection and analysis.

Challenges during the initial stage included how to recognize and provide compensation for the contributions of community representatives and addressing concerns about how an evaluation framework might affect the current workload of ASOs. One health department paid

for participants' travel and meal costs at meetings. The concern for increased workload was responded to in two ways. First, the purpose of a provincial evaluation framework was clarified within the working group. While not expected to replace individual project activities, it was believed that the framework could streamline data collection and assist agencies with evaluation planning. Second, recognition of the significant amount of preparation and administrative work required for the framework development process led to the decision to form an administrative group that would record minutes, draft agendas, undertake literature reviews, and prepare background materials. No ASO representatives were on the administrative group, thereby reducing the burden of work for community organizations. Membership in the working group remained stable throughout the process, with only one member of the working group leaving midway as a result of taking a leave from her ASO.

Workshop One

Following agreement on the project work plan, a one-day workshop was held with the entire working group. The aim of this workshop was to generate a provincial logic model that would accurately describe current activities, outputs, and desired outcomes of ASOs. To support this activity, a summary of other provincial HIV/AIDS frameworks was created. Alberta ASO funding proposals and final reports were also reviewed to develop an inventory of activities, outputs, and outcomes.

The workshop began with a review of basic evaluation terms (i.e., activities, outputs, outcomes, indicators, etc.) and discussion on the purpose of a provincial evaluation framework. Participants were divided into three groups, each at their own table, and were assigned one or two of the five activity areas for which funding is allocated in the province: Creating Supportive Environments, Health Promotion for People Living with HIV/AIDS, Prevention Initiatives, Strengthening Community-Based Organizations, and Harm Reduction. Participants received the inventory of activities, outputs, and outcomes taken from ASO project proposals and final reports. They were encouraged to draw on the inventory as well as their own experiences to compile the key common elements (i.e., activities, outputs, and outcomes) under each of the five broad activity areas. Next, all groups shifted tables. At their new table, they reviewed what the previous group had placed on the page and added or moved elements as they saw appropriate. They also looked for themes or natural "clusters." Finally,

all groups shifted one more time to ensure that all participants had an opportunity to have input into each activity area. Participants were asked to reflect on the question: “Does this provide a complete picture of the work being done in this activity area?” and then made amendments accordingly. One member of the administrative group remained at each table throughout the exercise to provide continuity between groups and facilitate as required.

The final activity planned for the day was to have each group present their chart for the activity areas they last worked on. The intent was to allow all participants to make final revisions and test the logic of the flow from activities, outputs, and outcomes identified in the logic model. The first exercise of the day took longer than anticipated. In addition, it became clear that some work was required to compare and revise the charts to ensure consistent language (i.e., the way outcomes were written). Participants did a brief review of each chart. A small group of people volunteered to further revise the charts after the workshop for consistent language. The agenda for Workshop Two was discussed, and a workshop evaluation form was completed. After the workshop, a conference call was held with the entire working group to ensure there was consensus on the accuracy and representativeness of the final set of charts.

Consultation One

A consultation process was designed to ensure broad input into the framework development process. For consultation, each member of the working group was paired with an ASO not represented on the working group, representatives of the ACCH, and senior provincial and federal health department staff. A short list of consultation questions was developed to accompany the charts provided for the first consultation:

1. The three-page chart is meant to reflect key common elements of work undertaken by ASOs in the province. Are any key activities, outputs, or outcomes missing?
2. Are any of the activities, outputs, or outcomes listed unnecessary (i.e., too minor to be included or duplicative)?
3. a) What would you like to know about the collective picture or achievements of the work being done in the province?
b) Of the outputs and outcomes listed, are there any that are particularly important to track? Why?

- c) What do you see as key success indicators of the work being done in the province? How will we know that the outcomes of ASO's work have been achieved?
4. Other comments or observations?

Preparation for Workshop Two

A conference call was held with all working group members to discuss results of the consultation and review the agenda for Workshop Two. The evaluation consultant created a logic model summarizing the charts. A literature review on how other organizations have measured similar outcomes was conducted, and a glossary of terms was developed.

Workshop Two

The second two-day workshop began with a working group discussion on the use of the evaluation framework and resulting information. Next, a brief presentation on developing evaluation questions was provided, highlighting evaluation questions from other HIV-related frameworks. The working group also reviewed the consultation feedback on respondents' evaluation questions of interest. The group brainstormed 48 evaluation questions, which were then grouped into themes and reduced to 15 broad evaluation questions.

On day two, a brief presentation was provided on outcome indicators with examples from the literature review and those suggested in the consultation. The group then worked to develop indicators for the 15 evaluation questions. Finally, plans for the second consultation were developed.

Consultation Two

Consultation materials were developed and distributed and included a summary of Workshop Two, tips on the characteristics of a good evaluation question and indicator, and the following consultation questions:

1. Will these evaluation questions be relevant/of interest to your organization?
2. Is this the type of information you think we should be generating at the provincial level?

3. For those questions that you think are important, have we listed the best indicators?

An evaluation consultant from another province was also consulted to test logic from an “outsider” perspective.

Preparation for Workshop Three

Measurement tools identified in the literature review or currently in use in the province were gathered to create a package of evaluation tools. Indicators identified in the literature review were also summarized. The results of Consultation Two and the agenda for Workshop Three were discussed via a conference call with working group members.

Workshop Three

This two-day workshop began with a review of the package of existing evaluation tools. This was a very positive exercise for many of the participants because it was the first time that tools currently being used by ASOs (e.g., client tracking forms) were shared. Next, participants were divided into three small groups. Each group reviewed 5 of the 15 proposed evaluation questions and indicators to suggest data sources. Data collection approaches of other provinces and existing data collection tools in the province were considered. Each group presented its recommendations to all working group members. The group prioritized each question according to the availability of data to answer the question and the importance of the evaluation question. Eleven evaluation questions were selected for inclusion in the framework.

The working group established timelines for data collection and reporting, and identified stakeholders responsible for summarizing, analyzing, and reporting provincial results. Issues related to data ownership and access were also discussed. Recommendations for the framework implementation, including enhancements to existing data collection tools, were documented.

Framework Dissemination

A complete draft of the evaluation framework was written by the evaluation consultant and disseminated to all stakeholders for feed-

back. The framework was designed to guide the documentation of the collective results of ASOs in the province. An implementation work plan with resources (i.e., time, people, and money) was added to the framework once all stakeholders approved it. The framework is now being implemented.

METHODS USED TO COLLECT PARTICIPANTS' REFLECTIONS ON THE PROCESS

Immediately after the final workshop, all working group members provided confidential written feedback ($n = 11$). The members were asked to describe their experience with the process, what (if anything) they had gained or learned, and any aspects of the process that they would have changed or eliminated. Six months later, follow-up interviews were conducted by the ACCH Community-Based Research Coordinator with two groups of individuals: (a) four members of the evaluation framework working group, and (b) four representatives from consulted ASOs. All participants in the framework development process were invited to participate in an interview on a voluntary basis. Interviews were about 30 minutes in duration. Interview questions focused on the interviewees' reflections on the framework development process and are presented in Table 1.

RESULTS

Data from the post-workshop feedback and the follow-up interviews are presented below by theme. Representative quotations are included where appropriate.

Time Investment

Working group members' feelings about the amount of time dedicated to the framework development varied. One working group member felt that too little time was invested in the process:

Maybe it was too much for the people doing the work behind the scenes, but too little time was put in to give us a really good framework. I think it's an important piece of work, but some of the agencies weren't supportive of the time needed. I think we could have used time more intensely within the year. I would like to have given us more time for plugging in people's programs, actually

testing the framework — does it make sense, what we use as indicators, how would we measure, some real-life examples, especially qualitative indicators.

Table 1
Six-month Follow-up Interview Questions for a Sample of Participants

Interview questions for working group members and/or consulted organizations	Working group members	Consulted ASOs NGOs
Why did you join the Evaluation Working Group?	X	
In your own words, how would you describe the process of developing the evaluation framework?	X	X
What parts of the process worked well? What parts did not work well? (Probes: Phases, participation, logistics, consultations)	X	
Was too much or too little time invested in the process?	X	
How would you rate the organization of the workshops? Was there a good balance between completing tasks, facilitation of discussion, and training in evaluation concepts?	X	
What were your expectations? How closely did the experience match your expectations?	X	
How did your involvement compare to prior experiences with evaluation? Has this experience changed any of your opinions about evaluation?	X	
How would you describe your role on the Evaluation Working Group?	X	
Did you feel that your input was valued? What was the value of having funders (feds/province) in the process?	X	X
Did you feel that you had adequate opportunity to give input into the development of the evaluation framework (even though you were not a member of the Working Group)?		X
What do you think you gained by participating in the Evaluation Working Group? (Probes: Learning about evaluation? Working with others?)	X	
What do you think you gained by participating in this process? (Probes: Learning about evaluation? Working with others?)		X
How has (or will) your involvement in developing the evaluation framework changed your work within your own organization? (Probe: Have you used the framework so far? How?)	X	
Looking back, do you think your organization would have benefited more by being on the Evaluation Working Group?		X
To what extent do you feel that you contributed to the development of the evaluation framework? Were you satisfied with this level of involvement?		X
How satisfied are you with the final product? Does the evaluation framework make sense from the perspective of your organization (and the type of work that you do)?	X	X

From the perspective of another participant, the development of the evaluation framework seemed to be a long and cumbersome process, which required a substantial time investment on the part of the working group members. Other working group members felt that the appropriate amount of time was spent in the development of the evaluation framework. For example, "It was a big time investment, but worth the effort. All the meetings seemed relevant and we were working towards something."

Consultations and Opportunity for Input

Working group members valued the incorporation of diverse perspectives, input from face-to-face meetings, and opportunities to connect with each other. As one member put it, "It was great to be able to work with other people from the field with experience." The face-to-face meetings required travel but were more effective than teleconferences.

Most of the consulted organizations expressed satisfaction with the consultation process and the opportunities for input that were available to those not directly involved on the working group. For example, the consultations, quarterly updates at ACCH meetings, and e-mail correspondence were helpful to those organizations not involved in the working group, as suggested by this comment: "It was good because people could get as involved as they wanted."

Working group members were generally able to adequately respond to the questions posed to them by consulted agencies. Several working group and consulted members appreciated seeing immediate response to consultation feedback. According to one consulted organization, "the committee worked hard. They were fairly diligent in soliciting feedback." A person from another agency commented, "It didn't feel like our input just sat there. It's important to keep the momentum going."

Effectiveness of Workshops

Feedback from working group members on the workshops indicated that workshops were a very efficient way to develop the framework, and that they were well organized and facilitated. A few participants identified the need for basic evaluation training. Although working group members were not provided with any direct training in pro-

gram evaluation or framework development, standardized evaluation terminology and basic concepts were presented at the beginning of the process and progressively at each workshop. Some working group members felt that providing a common understanding of evaluation concepts and terms was important, the following quotation being a case in point.

There was an assumption that people in the working group already had good knowledge of evaluation and evaluation frameworks, which was not necessarily the case for everyone.

However, others expressed an interest in receiving more in-depth training. For example,

There were definitely different levels of experience and background on the working group, and perhaps we could have moved a bit faster if we were all on the same level with theoretical background.

Ownership of the Process

Several of the working group members felt that the initiation of the evaluation framework was important, but that it was funder-driven. One member put it this way, "The government initiated the framework — it was done for them, they asked for it, although it was very important for us."

Most of the working group members felt increased ownership and understanding of the framework development process as the project progressed: "At first, it seemed that the framework was being pushed from a [funder] perspective, but that changed as we went along."

Participation Levels

The framework development process sought multiple levels of participation from stakeholders. Consulted organizations were asked if they felt their organization could have benefited more by participating as a member of the working group. Some organizations did not think there would have been any added benefit beyond the in-depth consultation opportunities already provided. The following comment provides an example:

I didn't have the time to sit on the working group and I wanted to be able to give full work and attention to it if I did join. I was pleased that I was able to participate to the extent that I did.

Several organizations, however, noted barriers to participating on the working group. Participants noted that they did not have enough staff to participate in the initiative, particularly those who worked in small, rural-based agencies. As well, some working group members found it challenging to meet ongoing agency obligations while participating on the working group.

Motivations for Joining the Working Group

Working group members were asked why they decided to participate on the working group. Some members joined because of personal interest or experience in evaluation, or because it was consistent with their staff duties. One member of the working group provided a more proactive rationale for her involvement:

[Our organization] has a unique perspective in the province. I wanted to make sure that the framework addressed our needs, especially the true community development stuff, quality of life stuff, involvement of target groups, and having an input into how we measure involvement of target group and quality of life. I wanted to be involved in figuring out if we make a difference. I wanted to learn about evaluation, and see what other organizations thought was the most important indicators to be measuring.

Working Group Member Roles

Working group members were asked to describe the role that they think they filled. In part, the aim was to assess efforts made to engage representatives from a variety of organizations to integrate a comprehensive range of perspectives. One working group member described her role:

I fill the niche of pushing for the target audience of support programs, from a non-academic community perspective. I felt valued, but I did not always feel respected because

I don't have an academic background. I don't always use the right words but I understand the concepts.

Another working group member felt that she had made significant contributions to the development of the framework:

I felt important to the process because I brought the perspective of work that I do in [my organization] as someone who is removed from the everyday services of the people, looking more at concepts of evaluation, and less focused on direct service provision.

Some working group members expressed worry that they were not adequately contributing to the process or adequately representing their organizations. Other working group members took on increasingly active roles as their confidence increased: "I have felt more comfortable and confident as time dedicated to this has increased. I like it now."

Several members positively noted the role of the evaluation consultant, as a facilitator. In the words of one participant: "[The process would have been] impossible without the evaluation consultant." The facilitating role appeared to bridge views of diverse stakeholders and support participants' enjoyment of the process. The following comment conveys this sentiment, "For the diversity of people represented from around the province, it ran very smoothly. It was definitely a process that I enjoyed being a part of."

Perceived Benefits

Building evaluation capacity and skill

All working group members felt that they had developed a stronger appreciation for the value of evaluation and learned more about the concepts and challenges of planning for evaluation. For example, "I have a better understanding of outputs and outcomes, what is measurable for the work we're doing provincially as well as individual organizations." One member felt that her credibility was enhanced within her own organization as someone experienced in evaluation and qualified to plan evaluation activities. She suggested that skills gained through participation in the working group could be officially recognized by one of the government health departments by giving a certificate to working group members. Other working group mem-

bers also highlighted access to new evaluation tools, alleviation of “fears” about evaluation, and overall learning about evaluation as an organizational development tool. “I’ve learned that evaluation is a necessary part of growth. I am able to see how evaluation can support organizational effectiveness” reflects the view of one participant. Another working group member highlighted a better understanding of how to integrate evaluation into work plans: “Now I do a work plan with the evaluation in mind.”

Some working group members also highlighted learning about the participatory process of framework development. Here are two examples:

I learned about how to standardize everything so that everyone’s viewpoints are incorporated through good consensus building. I learned that you need good participation from all groups involved to get good results, and make it meaningful.

Community participation is essential when implementing programs or initiatives that impact them. I also learned some negotiation skills when it came to differing community perspectives. And that working with a large group requires time, patience and extra energy.

Stakeholder involvement

Several of the working group members highlighted the benefits of including the funders (i.e., the provincial and federal health departments) in the development of the evaluation framework to enhance mutual learning. One member put it this way: “It was great to have the funders because we could get to know them better, and hopefully they learned something about us.” Another working group member also appreciated the experience of working alongside representatives from the health departments but thought that their involvement changed the interpersonal dynamics on the working group:

I think we tend to not say all that we think, but the funders’ presence was completely necessary for what they would be ultimately be looking for in the data that we’re collecting. But it felt quite collaborative. There was not much of a hierarchy between funders and community people.

Working group members felt that relationships with government representatives had been strengthened, and that staff of the health departments had gained a better understanding of the pressures faced by ASOs.

Benefits to organizations

Working group participants described many benefits for their organizations as a result of their involvement. They reported gaining a better understanding of priorities of other community-based HIV/AIDS organizations, the structure of the provincial community council and the collaborative funding program, the distinction between various service areas, and other people working in this field. In the words of one participant: “Overall, I developed a better clarity about programs in the province. Also, it was great getting to know others on the working group.”

At the time of the follow-up interviews, many organizations had not yet applied the evaluation framework, but did expect that their organization would benefit. The following reflection provides some insight.

Hopefully my organization — board and staff members — will have better buy-in, and have a better understanding of why evaluation is important, and be more willing to pick up some evaluation activities.

Consulted organizations reported they appreciated the opportunity to gain the perspective of colleagues specializing in other types of HIV/AIDS services. “I think I have a better understanding of others’ work and others’ issues” was how one organization member framed it.

Satisfaction with the Final Product and Implementation Plans

Consulted organizations were asked about their satisfaction with the final product and the extent to which the evaluation framework makes sense from the perspective of their organization. Most consulted organizations felt that the framework makes sense and provides a useful provincial snapshot of HIV/AIDS community service work. For example, “It created a balance for everybody’s role and it especially will be useful in the debate about funding. It helped to bring to light all the pieces from a provincial perspective, seeing how everything falls into place.” The framework was described as a good tool for capturing the work of ASOs around the province and for “looking at the bigger picture.”

Many working group members described potential uses of the framework in terms of simplifying funding applications and reporting, and increasing the availability of data for analysis and program improvement. Some had already used it to initiate evaluation-related discussions with their boards, to explain their work and the funding program to staff and board members, and as a basis for staff workshops on program planning and evaluation. One working group member expected that the evaluation framework would be a useful tool for her organization to gauge how their work compares provincially, as well as to assess the provincial effectiveness of HIV/AIDS work. Plans for use of the evaluation framework included reviewing the framework with staff during staff meetings, using the framework to write program proposals and reports, developing program work plans, planning and conducting program evaluations, and sharing it with community partners.

Some working group members expressed concerns about the viability of fully implementing the evaluation framework as planned. According to one member,

My expectations were to create a realistic framework to be implemented with ease. Staffing, more funds, or both were needed to coordinate the implementation. I still have some concerns about the capacity to continue full implementation with current workloads.

DISCUSSION: LESSONS LEARNED FROM THE PARTICIPATORY PROCESS

In examining participant reflections on the evaluation framework development process, we documented some of the factors that contributed to the success of the overall process, as well as factors that would require consideration for future, similar participatory processes.

An Inclusive and Participatory Process

Although government stakeholders and only a few community stakeholders initially proposed the idea of creating a provincial evaluation framework, it was critical for community stakeholders and the ACCH to also support the idea and the work. It was unlikely that this process would have been successfully completed without mutual feelings of interest, perceived benefit, and value of this work (Patton, 1997).

The meaningful inclusion of stakeholders contributed to a shift in ownership during the process and increased interest in the final product (the evaluation framework), as other authors have found (e.g., Amo & Cousins, 2006; Weaver & Cousins, 2004). Participants reported that involvement from the government health departments enhanced the mutual learning and relationship building between community organizations and government representatives. Of particular importance to ASOs was their perception that staff of the funding program, including the government representatives, gained a better understanding of the pressures faced by ASOs in the province. In addition, ASOs appreciated the opportunity to learn about each others' work and evaluation tools. Thus they experienced benefits that extended beyond contributing to the framework.

Participants were not equal in terms of position (funder versus recipient), knowledge, or access to human resources. Several processes seemed to help alleviate potential imbalances. With respect to differences in positional power, representatives from ASOs outnumbered funder/government representatives (approximately 3:1 ratio). In another participatory evaluation case study of a hospice/palliative care unit, authors reported that having several program volunteers (rather than one) on the committee "helped them feel more powerful as a group" (Weaver & Cousins, 2004, p. 30). In addition, quick responses to input and consultation feedback seemed to contribute to working group members' and consulted organizations' sense of being valued contributors. In terms of knowledge, participant feedback supported the importance of building in time for knowledge and skill development. Because each participant contributed different evaluation experiences and skills, the working group quickly learned that each individual also had different understandings and uses of evaluation terminology. Thus it was important that all members gain a shared understanding of evaluation terminology at the beginning of the process to promote effective communication. At the end of the process, participants identified increased appreciation for the value of evaluation and research, increased evaluation skills and knowledge, and increased awareness of the challenges of planning program evaluations. In terms of access to human resources, the use of an inclusive, participatory process required more time for all participants than the traditional "consultant-led" approach (Acharya et al., n.d.; Gentry, Gilliam, & Scott, 1999, cited in Gilliam et al., 2002; Poland et al., 2002; Schnoes et al., 2000). Thus use of this approach must be considered in terms of the potential benefits to participants and the time requirements (and financial implications if the consultant

must be hired). The time requirement was more challenging for organizations with few staff and limited evaluation resources. Creating an administrative group was one strategy aimed at alleviating the burden on smaller ASOs. As well, the consultation process enabled organizations to be involved with reduced burden.

Evaluation Leadership

As Patton (1997) outlines as a key principle in participatory evaluation, the leadership of the evaluation consultant was critical to the success of the participatory process. For the duration of the framework development, the evaluation consultant provided a supportive and strong facilitative role. Despite the extensive consultation that took place for the duration of the framework development, including gathering of input from many sources, the process ran quite smoothly because one person took the lead in facilitating the workshop and assembling consultation input. The evaluation consultant was committed to carrying out all aspects of the framework development using principles of community development and participation. The evaluation consultant also ensured that each workshop and consultation was planned and implemented with working group members, and that all feedback was compiled and integrated in a meaningful, timely way into the final framework. The literature provides guidance on the roles, principles, and requirements of the “consultant.” Such requirements include trust; shared power; respect for the knowledge of people in the field; and belief in expert knowledge from stakeholders, in ethical behaviour, and in emancipatory politics (McHardy, 2002). Morris (2002) also describes elements required for successful participatory evaluation, which include having a leader with adequate training and expertise in research, who is accessible for participant activities, who is motivated to work directly with participants, and who has a tolerance toward problems and imperfection. As McHardy (2002) and Ayers (1987) have noted, the evaluator or facilitator must give up autonomy and ownership of process and be accountable to and directed by participants, something that was reflected in the process described in this article.

Planning for Implementation

Although many working group members felt that the potential results from the framework would be useful and valuable in future program planning and evaluation, there were concerns about the resources

(time, human, financial) needed to coordinate the implementation of the framework. To address these issues, an “implementation working group” was formed following the framework development process. However, planning for implementation should ideally be included as part of the overall framework development process.

SUMMARY

This article describes the participatory process used to develop an evaluation framework. The decision to use a participatory approach reflected both the principles and the underlying values of the unique funding program in Alberta and the need to create a framework that would be relevant and useful to all stakeholders. The components of the framework were created and validated by those who were directly involved with community-based HIV/AIDS programs in the province. Participant feedback indicated that the results of the process had both transformative and instrumental benefits and led to a useful framework. Lessons learned from this process include the importance of ensuring time for stakeholder engagement; seeking strategies that overcome differences in positional power; recognizing the different levels of skill and knowledge among stakeholders and ensuring that all participants have a common understanding of evaluation terminology and the components of the evaluation framework; having a committed individual or group of individuals to coordinate and facilitate the planning, consultation, and compilation of consultation results into the final product; and discussing the resources required to implement and maintain the evaluation framework. Further research is warranted on the conditions that foster effective participatory process and on the impacts of varying degrees of participation on participants and the process outcome.

POSTSCRIPT

Following the framework development process, an interested group of representatives from ASOs and the ACCH formed a committee to develop organizational-level indicators based on the provincial framework and individual organizational data collection needs. An ongoing challenge for ASOs has been the provision of outcome data. The provincial fund reporting forms are being modified to support data collection for the framework. Finally, the framework was used to guide the mid-point and final evaluation of the fund.

ACKNOWLEDGEMENTS

The opinions expressed in this article are those of the authors and do not reflect the official opinions of Alberta Health and Wellness, the Alberta Community Council on HIV, or the Public Health Agency of Canada. The authors thank the following individuals for their involvement in the framework development process: Maggie McGinn, Marliss Taylor, H el ene Wirzba, Penny Archer, Eric Berndt, Denise Lambert, and Jackie May. We also thank Sharlene Minke for assistance with the literature review; Brenda Cantin, Sharlene Minke, and Taranjeet Birdi for their comments on the manuscript; and Judi Fielding for assistance with manuscript preparation.

REFERENCES

- Acharya, B., Kumar, Y., Satyamurti, V., & Tandon, R. (n.d.) *Reflections on participatory evaluation: The PVOH-II experience*. Retrieved November 22, 2002, from <http://www.pria.org/cgi-bin/projectsdesc.htm?r_reportid=39>.
- Amo, C., & Cousins, B. (2006, November). *Going through the process: An examination of the operationalization of process use in empirical research on evaluation*. Paper presented at the annual meeting of the American Evaluation Association, Portland, OR.
- Ayers, T.D. (1987). Stakeholders as partners in evaluation: A stakeholder-collaborative approach. *Evaluation and Program Planning, 10*, 263–271.
- Cockerill, R., Myers, T., & Allman, D. (2000). Planning for community based evaluation. *American Journal of Evaluation, 21*(3), 351–357.
- Cousins, J.B., & Earl, L.M. (1992). The case for participatory evaluation. *Educational Evaluation and Policy Analysis, 14*, 397–418.
- Fetterman, D. (1996). Empowerment evaluation: An introduction to theory and practice. In D. Fetterman, S. Kaftarian, & A. Wandersman (Eds.), *Empowerment evaluation: Knowledge and tools for self-assessment and accountability* (pp. 3–46). Thousand Oaks, CA: Sage.
- Fetterman, D.M. (1997). Empowerment evaluation: A response to Patton and Scriven. *Evaluation Practice, 18*(3), 253–266.

- France, A. (2001). Involving communities in the evaluation of programs with “at risk” children and young people. *Children & Society, 15*, 39–45.
- Gilliam, A., Davis, D., Barrington, T., Lacson, R., Uhl, G., & Phoenix, U. (2002). The value of engaging stakeholders in planning and implementing evaluations. *AIDS Education and Prevention, 14*(3 - Supplement Evaluating HIV Prevention Programs), 5–17.
- Guba, E.G., & Lincoln, Y.S. (1989). *Fourth generation evaluation*. Newbury Park, CA: Sage.
- McHardy, J. (2002). New partnerships require new approaches to participatory program evaluation: Planning for the future. *Canadian Journal of Program Evaluation, 17*(2), 89–102.
- Morris, D.B. (2002). The inclusion of stakeholders in evaluation: Benefits and drawbacks. *Canadian Journal of Program Evaluation, 17*(2), 49–58.
- Patton, M.Q. (1997). *Utilization-focused evaluation*. Thousand Oaks, CA: Sage.
- Poland, B.D., Tupker, E., & Breland, K. (2002). Involving street youth in peer harm reduction education: The challenges of evaluation. *Canadian Journal of Public Health, 93*(5), 344–348.
- Schnoes, C.J., Murphy-Berman, V., & Chambers, J. (2000). Empowerment evaluation applied: Experiences, analysis, and recommendations from a case study. *American Journal of Evaluation, 21*, 1–14.
- VanderPlaat, M., Samson, Y., & Raven, P. (2001). The politics and practice of empowerment evaluation and social interventions: Lessons from the Atlantic Community Action Program for Children regional evaluation. *Canadian Journal of Program Evaluation, 16*(1), 79–98.
- Vander Stoep, A., Williams, M., Jones, R., Green, L., & Trupin, E. (1999). Families as full research partners: What’s in it for us? *Journal of Behavioral Health Services & Research, 26*(3), 329–344.
- Weaver, L., & Cousins, J.B. (2004). Unpacking the participatory process. *Journal of Multidisciplinary Evaluation, 1*, 19–40.

Mary Frances MacLellan-Wright, M.A., is an evaluation consultant at the Public Health Agency of Canada. Current research interests are measurement of community capacity, and chronic and infectious disease prevention. Previous work has included working on community development projects in Scotland, West Africa, and Canada, and evaluation research in Edmonton and Halifax.

San Patten has an M.Sc. in community health sciences from the University of Calgary. She worked for the Alberta Community Council on HIV as their research technical assistant for four years, building the capacity of community-based HIV/AIDS organizations to use and conduct research. Currently, San is an independent HIV/AIDS research and evaluation consultant.

Añiela dela Cruz, R.N., M.Sc., is a program consultant at the Public Health Agency of Canada. She served as the federal government representative on the Alberta Community HIV Fund from 2001 to 2005. Research interests include population health promotion, HIV prevention, community-based program planning, and health policy development.

Annette Flaherty, M.Sc., is a project manager with Alberta Health and Wellness. She served as the provincial government representative on the Alberta Community HIV Fund Working Group from 2001 to 2004. Annette has worked in the areas of sexual and reproductive health and community development in Alberta and in various developing countries of Africa, Asia, and Latin America.