

GUIDANCE ON EVALUATION OF SMALL-SCALE

SOCIAL MARKETING PROJECTS

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"I know of no more encouraging fact than the unquestioning ability of man to evaluate his life by a conscious endeavour."

Henry David Thoreau

Aim of this paper and target audience

The purpose of this paper is to provide brief guidance for an evaluation of awareness and behaviour change in relation to the prevention and early diagnosis for cancer (hereafter referred to as 'projects'). It is aimed at staff engaged in small- to medium-sized projects (under £50,000). The guide is not comprehensive, rather it seeks to introduce a number of essential issues and procedures that need to be addressed by those planning and implementing projects. The guide is intended as a starting point for developing an evaluation plan (see Appendix 1).

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Why we need to evaluate and what it is

It is vital to be clear about what cancer awareness, knowledge and behaviour change projects are trying to achieve. Evaluations are helpful to demonstrate good management, learn lessons for future projects, and show that we are accountable for our work. It is difficult to evaluate human behaviour and social process, so there is no single process for measuring the success of projects. Evaluation can be defined as:

A process which sets out to determine systematically and objectively the effectiveness, efficiency and relevance of activities based on specified objectives. It is a process for improving both current activities and future planning, programming and decision making.

Evaluation is about making a judgement about the value of something by looking critically at it, often by identifying and ranking what happened against a pre-agreed set of criteria based on a set of explicit criteria. The evaluation process is focused on gathering information which makes it possible to assess the extent to which objectives are being met.

Evaluation comes in three basic forms: summative evaluation, process evaluation and formative evaluation.

- **Summative evaluation**
 - Assesses/describes the extent of the intervention's impact. Summative evaluation comes in two forms: impact evaluation (short-term effects) and outcome evaluation (long-term effects).
- **Process evaluation**
 - Assesses/describes the intervention's processes, including the features of context and delivery. Aims to provide an explanation of how or why the intended outcomes of the project were (or were not) brought about. Describes what happens when a project is implemented.
- **Formative evaluation**
 - Undertaken during the early stages of an intervention. The intervention plan is modified on the basis of the findings. Formative evaluation is used to help develop a programme and its implementation. It is often focused on finding out about the target group's needs/concerns, helping to establish and clarify aims and objectives, establishing knowledge or attitude baselines, and/or identifying the barriers to implementation, pretesting and piloting projects.

3-step approach to project evaluation

Evaluation can be broken down into three key steps: first, setting clear aims and objectives; second, selecting evaluation methods; and thirdly, analysing and learning from the results.

Step 1: Setting aims and objectives

Evaluation is impossible without first setting clear aims and objectives for projects as part of the planning.

An AIM is: A broad statement of strategic purpose. AIMS can be long term, medium term or short term.

An OBJECTIVE is: A specific measurable goal whose achievement will contribute towards the aim. Objectives come in three forms:

Cognitive:	to measure knowledge and understanding
Affective:	to measure emotional beliefs and attitudes
Psychomotor:	to measure behaviour

All objectives need to be written as a **SMART** if they are to be evaluated. **SMART stands for:**

- **Specific:** not open to different interpretations
- **Measurable:** it must be able to be measured, preferably numerically
- **Achievable:** realistic with the resources that are available
- **Reliable:** relevant and consistent data can be gathered
- **Time bound:** can be measured within the time-frame of the intervention

SMART objectives need to be agreed and written down for all projects before an evaluation can start.

Step 2: Choosing and applying evaluation methods

You will need to put together a plan for your evaluation (**see Appendix 1**) for an outline plan that you can use. Each of the elements of the plan is described below and tips are given to help you complete your plan.

Governance

You will need to agree and record why the evaluation is being done and who the evaluation report will be submitted to. You will also need to set out who has the authority to sign off or agree the evaluation report, who the report will be shared with, and who has permission to use its findings.

If the evaluation is a requirement of an external funding organisation, you will also need to include details of how the funder will be informed about the evaluation plan and results.

Selecting evaluation methods

You will need to select which type of data you will collect to evaluate progress towards the project's goals and how you will collect these. Basically you can choose to collect quantitative (numerical) data or qualitative data (descriptive data) or a combination of the two. **Quantitative methods** and designs (e.g. control groups and quasi-experimental or experimental designs) look at how much change occurred, how many people adopted the desired practice, etc. **Qualitative methods** and designs get at the "why" and the "how" of something that worked or didn't work. **Mixed method** designs can powerfully triangulate various forms of data.

Some of the main ways to collect data are as follows:

- Media analysis which shows how much coverage was achieved and whether it was positive or negative.
- Satisfaction studies which show user and participant satisfaction with services, information, products or processes (e.g. websites, telephone services, events)
- Document analysis, reviews of printed material, policy documents records etc.
- Surveys (e.g. face to face, mail, telephone, or Internet)
- In-depth, face-to-face interviews
- Case studies, including informal interviews and anecdotal remarks
- Observation (e.g. buying behaviour in a grocery store)
- Focus groups (e.g. what was least useful, most helpful?)
- Records reviews (e.g. requests for materials, clinic visits, enrolments in cancer awareness sessions, etc.)
- Collecting stories and experiences
- Video, audio, photographic, art records and visual and document analysis
- Observational studies, watching/listening to what people are doing and saying
- Experimental studies, experiencing what the target group do or experience including customer/patient journey mapping

Selecting indicators

Identification of the relevant indicator/data is vital. If the aim of a project is, for example, to increase awareness of bowel and lung cancer in men aged 55 years and over, it is critical that awareness levels are measured. If a project has more than one aim, all the measures need to establish whether the SMART objectives that relate to the aims have been achieved. So if, as well as raising awareness of bowel cancer symptoms, the project aims to encourage men with potential cancer symptoms to seek medical advice, a way of assessing men's advice-seeking behaviour related to a defined SMART objectives would also be needed for the evaluation..

As set out above there are many ways to collect data. The data that flow from various forms of collection can be described as being direct, intermediary or indirect.

Direct indicators – these are data sources that can be used for outcome evaluations:

- Prevalence statistics – for example, changes in the number of people smoking
- Attendance – for example, an increase in the number of people accessing a service
- Self-reported behavioural change
- Measure behavioural change via observation studies
- Increased uptake of a particular product or service
- Changes in footfall in an area – for example, are more people walking into a smoking cessation clinic?

Intermediary indicators – these are indicators that can be precursors to behaviour change:

- Measuring changes in awareness, knowledge, beliefs, and attitudes
- Media analysis – for example, column inches, quality of coverage, campaign mentions
- Analysing helpline data, such as number and quality of calls
- Stakeholder analysis – looking at the views of people delivering work on the ground
- Service data – who is using the service and what do they think?

Indirect indicators – these may not be a direct objective or cause of your intervention. However, they can prove to be important indicators of its impact:

- Looking at indirect sales data – for example, is the consequence of a sun safe intervention an increase in sun screen sales?
- The quality of materials and services provided
- Looking at the impact on policy decisions or the law
- Affect on opinion formers – has their attitude changed?
- Changes in the social climate – for example, this would be important when assessing a campaign to reduce fear of cancer
- Looking at the skills acquisitions and increasing levels of empowerment of the intervention team.

In your evaluation plan set out both the methods you will use to collect the data and the form of those data.

Internal or external evaluation?

A further aspect to consider is if you should commission the evaluation for your project from an external provider or do it yourself. When undertaking this you will need to think about the following three questions:

1. Do you have the skills to undertake the evaluation?
2. Is it important to funders and others that there is an independent evaluation?
3. Do you have the time and resources to do the evaluation?

The answers to these questions should inform your decision. It's important that you explicitly set out in your evaluation plan the reasons for why you have chosen either to do the evaluation yourself or have brought in an external evaluator to do the work.

Study design

When planning the evaluation think about which 'design' it is going to take. The first two parts of the MRC guidance for Developing and Evaluating Complex Interventions (see the 'further reading' section) outline some of the key points to consider and describe a range of different evaluation designs. Evaluation study design is potentially a complex subject, but for small-scale projects the two main questions you need to answer in your plan are:

1. Do I have a representative sample in my evaluation group that will help me understand the effect of the project on the entire population I am interested in?
2. Have I reduced as far as I can the chance that other factors will have created a change in the group I am concerned with?

To deal with the first question you will need to look at the total size of the target group you are dealing with and make a judgement about the size of the evaluation group you need and set out a justification for this. This is what is called agreeing an appropriate representative sample for the project. You will also need to think about which factors are important for the project (such as gender, age, ethnicity, occupation etc.) as you will need to ensure there are people in the evaluation group who will represent all the various kinds of people you are concerned with.

Unfortunately there is no magic formula for selecting what is called a representative sample as it also depends on the type of study you are conducting (i.e. is it a quantitative or a qualitative study?). This is an area that it is recommended you seek some professional evaluation advice on (see the sources of help section at the end of this guidance).

The second question is about reducing possible biases (i.e. getting the results that you want to hear) and also reducing the chance of other factors being the cause of any change in the target group.

There are many forms of study design to reduce biases, but for small-scale projects two good ways to do so are to have external people conduct your evaluation, and to have other people repeat your approach and see if they get the same results.

The second issue is of reducing what are called 'external variables' i.e. things other than your project that could have had an impact on cancer awareness or service uptake.

It is difficult to identify, reduce or eliminate all the factors that may have had an effect on your target population, but one way to do this is to simply collect some data related to your objectives before the study starts and at the end to see if the project is having an effect on the group. This is called pre and post evaluation and can become more sophisticated by collecting data at agreed time intervals during the project to track the impact over time. If you get improvements that coincide with big pushes in the project you can infer that the project has had an effect.

You can also (if you have the resources and the time) set up what is called a control group, namely a group of people that match as closely as you can the people your project is working with. You then work with your project group and do nothing with the control group, and measure what happens to both groups. If your project group changes but the control group does not you can conclude that the project has had an impact.

Ethical issues

Some awareness, attitude and behaviour interventions may need ethical approval from a local ethics NHS ethics group but many will not. Local ethics groups are concerned with research projects (i.e. projects that are seeking to test a hypothesis) and are less concerned with surveys, audits and evaluations. If you are not sure if your project needs approval speak with your local ethics committee; your Primary Care Trust will be able to put you in contact with the group.

Allocating resources

As with all elements of any project, an evaluation needs to be properly resourced. There are no hard and fast rules about how much of a budget to allocate to this. The important message is not to skimp and to plan it into the budget from the start.

Opinions vary as to what percentage of your project budget should be dedicated to the evaluation. For small projects about 10% should be allocated. Projects with short time-frames might allocate more. This could also be the case with new pilot projects that have never been run before.

It is possible to get free or low cost support for evaluations from local universities and Higher Education establishments. Local public health departments and other local public sector and NGO information offices may also be able to help. Hospitals and universities often have research groups and individuals that can assist and this is also true of local authorities. It is also worth contacting local marketing and market research organisations who may be willing to provide free support for project evaluation.

For small projects it is also important to record who will lead the evaluation, how much time they will have to do this, and what other resources might be allocated, such as local volunteers distributing surveys or undertaking observations.

A key resource will be the team of people that you assemble to lead the evaluation. You should set out in your evaluation plan who will be involved in the evaluation, what they will do, and when they will do it. You should also make sure the team has all the skills you will need to complete the evaluation.

Step 3: Analysis, dissemination and learning

Analysis

As part of your evaluation plan you should set out not only the data that you will collect related to your objectives but also how these will be analysed and presented. It is vital that you consider this at the start of the process and don't leave it until you have a pile of forms or recorded interviews that you will then need to collate in some way. When you are constructing the results of the evaluation answer these questions:

- What happened as a result of the project in terms of its objectives?
- What worked best and why?
- What should change in the future delivery of the project in terms of process and cost efficiency?
- What improvements to the research methods should be made next time?
- What further information do we need?

If you are going to be analysing numerical data you will need some expertise either internally or externally in producing summary tables of the data, presenting these in forms such as bar charts, data tables or time trends. It is a good idea to think about the five or six charts or tables that you will need to assess the project before you start collecting the data as this will help you decide which data to collect.

You may also want to consider cross tabulating the data you collect, for example how many older men with a previous history of long-term illness as opposed to older women with long-term illness have a high score for awareness about cancer symptoms.

If you are collecting qualitative data to evaluate your project you will again need to consider before you start collecting such data how these will be analysed, summarised and reported. For example, you could transcribe interviews and search these for common themes. These themes could then be described using some representative quotations from the evaluation group. Again, you may need some external expert advice when dealing with qualitative data analysis, interpretation and reporting.

Disseminating and learning

Lots of different people will want to know about the project and its evaluation, including those involved in developing, delivering, receiving, or funding that project. People outside of the locality will also be keen to learn more. It is therefore essential that plans are made for disseminating the evaluation. Options include presenting the project and evaluation at conferences, either in the form of a presentation or a poster, making the report available on a website, and writing articles for journals/professional magazines. You should consider how you will undertake:

- feedback to the target group
- feedback to the project workers
- feedback to the funders and or sponsors
- feedback to others running or planning to run similar projects

Moving forward depends on learning about what does work as well as what doesn't, and we would strongly encourage everyone to share their evaluation, irrespective of the impact. Remember that an evaluation is about leaving a legacy of your project so that others can learn from what worked well and what did not. We all have a duty not only to deliver work that helps people prevent and deal with cancer, but also to promote learning about what works and what does not, as evaluating is our key tool for improving practice.

Further useful information can be found in the following:

- The CONSORT statement for transparent reporting of randomised clinical trials www.consort-statement.org/?o=1001
- The TREND statement for transparent reporting of non-randomised evaluations www.ajph.org/cgi/content/full/94/3/361
- MRC (2008) *Developing and Evaluating Complex Interventions: New Guidance*. www.mrc.ac.uk/complexinterventionsguidance
- Centre for Disease Control and Prevention (2006) *Get Smart Program Planners Evaluation Manual*. Atlanta, GA: Centre for Disease Control and Prevention.
- Centre for Reviews and Dissemination (2009) *Systematic Reviews: CRD's guidance for undertaking reviews in health care*. www.york.ac.uk/inst/crd/systematic_reviews_book.htm
- Department for International Development (2007) *Monitoring and Evaluating Information and Communication for Devildom (ICD) Programmes: Guidelines*. London: DIFD.
- Eagle, L. (2008) *Social Marketing Ethics*. London: National Social Marketing Centre.
- Pawson, R. and Tilley, N. (1997) *Realistic Evaluation*. London: Sage.
- Tones, K. and Tilford, S. (2001) *Health Promotion: Effectiveness, Efficiency and Equity* (3rd edn). Cheltenham: Nelson Thornes.
- World Health Organization (1981) *Health Programme Evaluation: Guiding Principles*. Geneva: WHO.

Appendix 1: Outline template for evaluation plan

Title of project being evaluated:

Details and contact address of person completing the plan:

Step 1

Introduction. including details of the problem, location and need for the evaluation:

Reporting and governance arrangements, including who owns the intellectual property rights of the evaluation, who it will presented to, who can sign the report off:

Project aim/s:

Project objectives:

Step 2

Ethical considerations and approval process if necessary:

Evaluation methodology (set out which tools will be used to collect data and references to any theoretical models used and how the evaluation will be run):

Evaluation timetable (set out who will do what by when):

Evaluation resources (set out all the resources that will be used and any budget you will allocate and how it will be used: this should include details of the team who will lead the evaluation and their responsibilities):

Step 3

Results (set out how the data will be gathered, analysed and presented: if possible set out how the data related to the formative, process and summative evaluation, both impact and outcome, will be shown):

Dissemination of results (set out the process for sharing the results of the evaluation and how this will feed back into the further development of services or other projects):

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