

# MISRGO Evaluation

## 2010 Annual Report

Dr. David Fetterman

Table 1. Creating Individual Tobacco-Free Environment Program Dashboard: Change in Knowledge of Acts 8 and 13 Collected from Home Visits and Community Meetings					
	Year 1	Year 2	Year 3	Year 4	Year 5
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Benchmarks	2800	3600	4400	5200	6000
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Evaluation Dashboard: Goals, Benchmarks,  
Actual Performance, and Baselines

August 21, 2010

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## **Introduction**

This purpose of this report is to highlight MISRGO grantee performance for 2010. In addition, this report briefly discusses the new evaluation format implemented, as well as technical support provided during this period. (See Appendix A for more detail concerning evaluation technical assistance.)

Individual grantees are making significant progress concerning the implementation of their grants. These efforts include educational programs, adult and youth pledges not to use tobacco, media campaigns, use of the Quitline, and tobacco-free policies. A detailed review of their accomplishments is provided in this report.

In addition to these programmatic accomplishments, a new evaluation monitoring system was implemented. The system, as reported in the February 2, 2010 evaluation progress report, was developed in consultation with the Arkansas Department of Health. MISRGO grantees are making progress using the new evaluation monitoring system, however, additional training is merited.

Each grantee is required to establish a baseline, specify program goals, and develop realistic benchmarks. The benchmarks are designed to help them monitor program performance. It is also a useful tool to evaluate grantee performance, building on the existing evaluation framework. This evaluation approach is in the process of being integrated into the online tracking system called Grant Evaluation and Management Solutions (GEMS). The remainder of this report discussed the methodology used, a summary of findings, and detailed findings and recommendations.

## **Methodology**

The data for this report is based on a detailed review of MISRGO grantee/evaluator annual reports. They cover grantee activity between July 1, 2009-June 30, 2010. The data was extracted from the reports and coded by intervention area. Patterns were identified, such as education, media campaign, and use of Quitline. There are 17 grantees. All but three grantees submitted reports for this analysis. AR Human Development Corporation, East Arkansas Enterprise Community and UAMS/ACRC/CCOC were not included in the sample.

In addition, relevant data was collected during evaluation workshops and the *Clearing the Air in Communities of Color* conference. The findings are also based on interviews and discussions with the Mosaic Network Project Associate. She is responsible for designing and supporting the GEMS system. Dr. Fetterman also participated in a GEMS training webinar in order to familiarize himself with the new online data collection system and help integrate the evaluation function into the online system.

Individual interviews were also conducted with grantees and evaluators. The entire evaluation effort is guided by an empowerment evaluation approach, which is designed to help people learn how to evaluate their own programs and use that information to inform decisions and accomplish their objectives (Fetterman and Wandersman, 2005; Fetterman, Deitz, and Gesundheit, 2010).

## Summary

MISRGO grantees and evaluators are making progress concerning the implementation of their tobacco prevention projects. The majority of grantees are working in the following intervention areas: **Promoting Quitting Among Youth and Adults** and **Identifying and Eliminating Tobacco-Related Disparities Among Population Groups**. An equal number are working in the following intervention areas: **Eliminating Exposure to Second Hand Smoke, Preventing Initiation Among Youth and Adults, and Creating Tobacco Free Environments**. The smallest group of grantees is working on **Reducing Youth Access to Tobacco**.

**Highlighted accomplishments** include:

### *Education*

- 50,000 educated about ills of tobacco use
- 16,766 readers of tobacco information
- 1020 were taught about Acts 8 & 13
- 157 educated about Acts 8 & 13
- 2400 educated about smoke-free ordinances
- 318 pregnant, low-income & homeless people received tobacco prevention education
- 300 Hispanics received tobacco prevention information

### *Pledges*

- 1448 youth pledged to be smoke free
- 200 parents pledged not to use tobacco in their homes or in their cars

### *Media*

- 35,000 exposed to radio adds about tobacco consumption
- 3 television spots aired concerning the ills of tobacco use

### *Quitline*

- 948 used Quitline

### *Tobacco-free policy*

- 3 parks were designed as smoke-free parks
- 1 tobacco-free policy at the University of Arkansas at Hope
- 1 tobacco-free policy at the University of Arkansas at Little Rock
- 4 churches adopted smoke-free policies
- 1 Sweet Home Community Park adopted a smoke-free policy

## **New Evaluation Framework**

In addition to these accomplishments, the new evaluation and reporting framework was implemented and welcomed by most grantees and evaluators. It includes: identifying baselines, establishing goals, formulating benchmarks to monitor program progress, and comparing actual performance with benchmarks.

However, the new system remains a work in progress with a tremendous amount of variability in terms of reporting practices and report formats. It is clear that grantees and evaluators are still learning how to present the data in a consistent and meaningful format. Adherence to the new format is improving. The new evaluator staffing arrangement, reducing the number of evaluators and establishing a small pool of carefully screened evaluators, should improve consistency in reporting format. Additional training is warranted in this area and is scheduled for October 13-14, 2010.

## Evaluation Findings

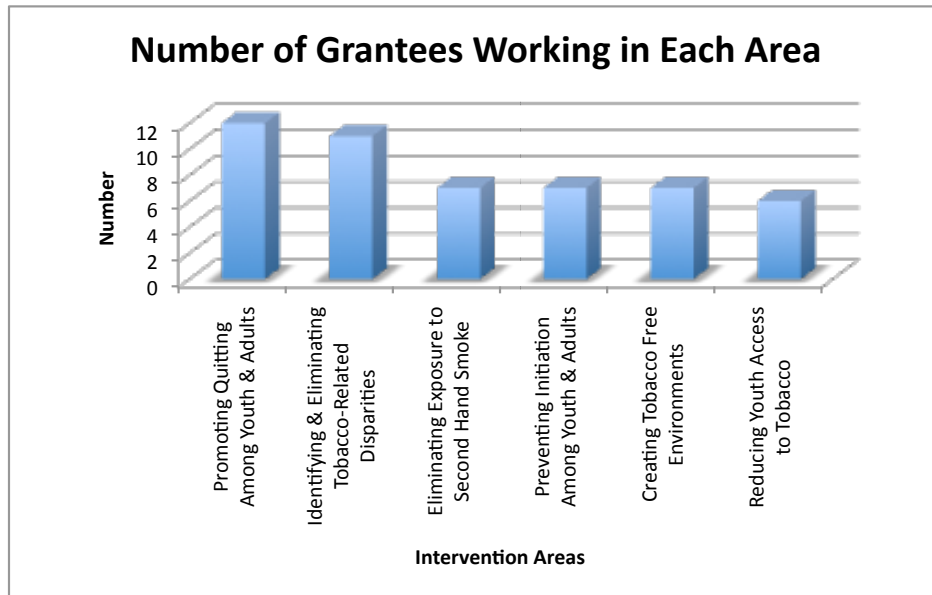
The remainder of this report is divided into two sections. The first section focuses on program findings and accomplishments. The program or grantee findings are organized into the following categories: intervention areas, accomplishments categorized by intervention area, and recommendations.

The second part of this report highlights the new evaluation framework that is being implemented. It highlights the use of program baselines, goals, benchmarks, and actual performance.

### Intervention Areas

All of the grantees are operating within 6 major MISRGO intervention areas, as specified in the MISRGO RFP and their individual contracts. The distribution of grantees by intervention area is provided below:

- I. Promoting Quitting Among Youth and Adults (12 grantees)**
- II. Identifying and Eliminating Tobacco-Related Disparities Among Population Groups (11 grantees)**
- III. Eliminating Exposure to Second Hand Smoke (7 grantees)**
- IV. Preventing Initiation Among Youth and Adults (7 grantees)**
- V. Creating Tobacco Free Environments (7 grantees)**
- VI. Reducing Youth Access to Tobacco (6 grantees)**



## **Accomplishments**

The grantees have met and in many cases exceeded their goals. A few of the most significant accomplishments by intervention area are provided below:

### ***Identifying and Eliminating Tobacco Related Disparities***

#### ***Education***

- 50,000 educated about ills of tobacco use
- 318 pregnant, low-income & homeless people received tobacco prevention education

#### **Tobacco-free policy**

- 4 churches adopted smoke free policy
- Hispanic Market became smoke free
- McGill Retirement became smoke free

#### ***Other***

- 32 compliance checks were conducted
- 100 minority adults were surveyed concerning tobacco awareness
- 22 multicultural organizations promoted tobacco control

### ***Eliminating Exposure to Second Hand Smoke***

#### ***Tobacco-free policy***

- Sweet Home Community Park adopted smoke free policy
- University of Arkansas Little Rock adopted smoke free policy
- 2 parks were designed as smoke free parks

### ***Preventing Initiation Among Youth and Adults***

#### ***Education***

- 226 youth advocates were trained in tobacco use prevention strategies
- 8 retailers received educational information about selling to minors

#### ***Pledges***

- 1448 youth pledged to be smoke free

## ***Promoting Quitting Among Youth & Adults***

### ***Quitline***

- 948 used Quitline
- 46 enrolled in smoke cessation via SOS fax system

### ***Media***

- 3 television spots concerning ills of tobacco use

### ***Education***

- 16,766 readers of tobacco information
- 80 day care staff trained about tobacco use

## ***Creating Tobacco Free Environments***

### ***Tobacco-free Policy***

- 5 tobacco free environments
- 1 smoke free park established (see also Eliminating Exposure to Second Hand Smoke)
- 1 tobacco free policy at the University of Arkansas at Hope

### ***Education***

- 1020 were taught about Acts 8 & 13
- 25 daycare staff trained about tobacco use
- 175 youth informed about smoking

### ***Media***

- 35,000 exposed to radio adds about tobacco consumption

### ***Pledges***

- 244 pledges to make houses smoke free

## ***Reducing Youth Access to Tobacco***

### ***Education***

- 2400 educated about smoke free ordinances

***Pledge***

- 5 retailers pledge not to sell to minors
- 200 parents sign pledge not to use tobacco

***Media***

- 3 newspaper articles written

**Detail by Grantee**

A matrix was developed to manage and sort program data. It also provides a more refined view of individual grantee performance. The matrix is organized into the following categories: grantee name, baseline (if available), planned and actual performance (as available), and goal (if available).

The planned activities are in plain text and the actual performance is in bold to highlight the difference between grantee benchmarks and actual performance. The data are presented by intervention area.

**Identifying and Eliminating Tobacco Related Disparities**

<b>Grantee</b>	<b>Baseline</b>	<b>FY2010 (Planned/Current Performance)</b>	<b>FY2014 (Goals)</b>
We Can		18 planned presentations <b>20 actual presentations</b> 1521 planned surveys <b>372 actual surveys</b>	
WCAAA		5400 planned – educate about ills <b>50,000 actual – educated about ills</b>	
WBYD		200 indiv report workshop increased awareness plan <b>200 indiv report workshop increased awareness actual</b>	1000 increased awareness via tobacco educ workshops
SWACDC		6 churches adopt smoke free policy – plan 4 churches adopt smoke free policy – actual (plan to work with SWACDC)	30 smoke free policies in African American churches
St. Edward	5 Hispanic contacted Quitline 10 in cessation program	350 Hispanics will receive cessation information planned <b>300 Hispanics received information actual</b> 20 in cessation program planned 9 activities planned <b>9 activities actual</b> <b>Hispanic market smoke free</b> <b>McGill Retirement smoke free</b>	Decrease use of tobacco by 15%
MCCTFA	4	10 advocates educating underserved plan <b>14 advocates educated underserved actual</b>	75 advocates educating underserved

Legacy		20 compliance checks planned <b>32 compliance checks actual</b> 100 survey minority adults plan <b>100 surveyed minority adults actual</b>	Eliminate discovered disparities using compliance rates and survey results
FYEN	3	4 physicians agree to use AHRQ plan <b>4 physicians agree to use AHRQ actual</b>	80% physicians urged to use AHRQ guidelines (70% agree)
Future Builders	200	300 youth aware plan <b>300 youth aware actual</b>	5000 eliminate disparities
EBCTAP	1	10 multicultural organizations promote tobacco control plan <b>22 multicultural organizations promote tobacco control actual</b>	50% increase in public awareness
APCSFA		50 pregnant, low income & homeless educ plan <b>318 pregnant, low income &amp; homeless educ actual</b>	50% increase pregnant, low-income, and homeless inform about tobacco

## Eliminating Exposure to Second Hand Smoke

Grantee	Baseline	FY2010 (Planned/Current Performance)	FY2014 (Goals)
We Can		200 surveyed <b>382 actual surveys</b> Sweet Home Com Pk smoke free plan <b>Sweet Home Com Pk smoke free actual</b> <b>413 pledges smoke free house/car actual</b> [UA Little Rock Smoke Free] smoke free fair 4 presentations 200 pledges smoke free house/car plan	8 parks smoke free 1000 pledges to support smoke free policies
WCAAA		18 bld widen buffer zone plan 13 bld widen buffer zone actual	
SWACDC		25 families promote smoke free homes and cars plan <b>75 families promote smoke free homes and cars actual</b>	100 family adopt smoke free homes and cars
St. Edward		5% increase in smoke free properties	25% increase in smoke free properties
NATFC	0	8 educate businesses about second hand smoke planned <b>8 educated businesses about second hand smoke actual</b> 4 increase perimeter	40 educate restaurant owners about dangers of second hand smoke 4 increase perimeter
FYEN	1	2 smoke free parks	2 smoke free parks 20% increase in smoke free homes
APCSFA		148 participate in Act 8 & 13 educational program plan <b>157 participate in Act 8 &amp; 13 educational plan actual</b>	20% increase in Perimeter Law

## Preventing Initiation Among Youth and Adults

Grantee	Baseline	FY2010 (Planned/Current Performance)	FY2014 (Goals)
We Can		5 perimeter law & lock & key plan <b>5 perimeter law &amp; lock &amp; key actual</b> <b>26 agree w/perimeter law actual</b>	25 stores keep tobacco under lock & key or behind counter and establish perimeter law
WCAAA		1400 youth pledge smoke free plan <b>1448 youth pledge smoke free actual</b>	
SWACDC		1.4 schools provided with tobacco prevention information plan <b>2 schools provided with tobacco prevention information actual</b>	7 schools provided with tobacco prevention information
St. Edward	9 on team 6 smoke free programs	50 youth participate plan (revised was 300)  4-6 smoke free programs	25% increase in youth participation in anti-tobacco programs 6-30 smoke free programs
NATFC		100 youth advocates trained in tobacco use prevention strategies planned <b>226 youth advocates trained in tobacco use prevention strategies actual</b>	400 youth advocates will be trained in tobacco use prevention strategies
FYEN		8 retailers receive education about selling to minors plan <b>8 retailers receive education about selling to minors actual</b> 6 pledge not to use tobacco plan <b>6 pledge not to use tobacco actual</b>	28 retailers not sell to minors (70% of 40 retailers) 80% of youth pledge not to use tobacco
APCSFA	180	170 youth educated plan <b>218 youth educated actual</b>	20% decrease no. not educated about tobacco

## Promoting Quitting Among Youth & Adults

Grantee	Baseline	FY2010 (Planned/Current Performance)	FY2014 (Goals)
We Can		9 promote quitting activities plan <b>9 promote quitting activities actual</b> 5 SOS events 5 free & clear signs 413 youth saw skit	2128 of 10141 information about second hand smoke
WCAAA		45 enroll smoke cess via SOS fax plan <b>46 enroll smoke cess via SOS fax actual</b>	
WBYD		25 tobacco Quitline client plan <b>45 tobacco Quitline client actual</b>	125 Tobacco Quitline client (ATQ counseling fax)
SWACDC	22	17.6 calls to Quitline plan <b>29.75 calls to Quitline actual</b>	110 monthly calls to the Quitline
NATFC	3	10 fax back referrals to SOS Quitline plan <b>40 fax back referrals to SOS Quitline actual</b>	50 – increase faxback referral to SOS Quitline
MCCTFA		5 refer to Quitline planned <b>3 refer to Quitline actual</b>	50 decrease number of smokers
Legacy		1 community partnership to inform of services and distribute literature 4 physicians agree to distribute lit 440 calls to Quitline 186 smokers used fax referral 5 stop smoking plan <b>9 stop smoking actual</b>	20% informed of program activities 4% users decrease 25 stop smoking
FYEN	32 Quitline – SOS fax back	13 SOS fax back referral plan <b>48 SOS fax back referral actual</b>	20% increase in SOS fax back referrals
Future Builders		15 SOS fax back referrals plan <b>18 SOS fax back referrals actual</b>	5000 youth raise awareness of adverse effects
EBCTAP	29	31 SOS fax back referrals plan <b>59 SOS fax back referrals actual</b>	20% increase referrals
CTFA (HSECofC)		2 radio spots plan <b>1 radio spots actual</b> 2 TV spots plan <b>3 TV spots actual</b> <b>5 parents trained Pub Service Announce plan</b> <b>1 parent trained Pub Service Announce actual</b>	50% awareness of SOS 25% contact SOS
APCSFA		45 use SOS fax referral plan <b>85 use SOS fax referral actual</b> 4000 readers of tobacco information plan <b>16766 readers of tobacco information actual</b> 80 staff view video plan <b>80 staff view video actual</b> 80 day care staff trained plan <b>80 day care staff trained actual</b>	10% increase in Quit line

## Creating Tobacco Free Environments

Grantee	Baseline	FY2010 (Planned/Current Performance)	FY2014 (Goals)
WBVD		5 tobacco free environments plan <b>5 tobacco free environments actual</b>	25 bus/comm create tobacco free environments
COEHP	2000	2800 know about Acts 8 & 13 plan <b>1020 know about Acts 8 &amp; 13 actual</b> 250 home visits Acts 8 & 13 planned <b>255 home visits Acts 8 &amp; 13 actual</b>	6000 know about Acts 8 & 13
MCCTFA		1 smoke free park plan <b>1 smoke free park actual</b>	10 smoke free parks (second hand smoke)
Legacy	2 of 35 smoke free parks	35,100 exposed to radio ads several presentation made 4 pledged to use quite line <b>1 tobacco free policy UofA at Hope</b>	3 parks tobacco free policy 3 colleges tobacco free policy
Future Builders	200	25 adults informed about smoking plan <b>25 adults informed about smoking actual</b> 175 youth informed about smoking plan <b>175 youth informed about smoking actual</b>	1000 reduction youth smoking in public places
EBCTAP		2 no smoking parks plan <b>9 parks - no smoking signs actual (not ordinance)</b>	20% increase - smoke free nursing homes and parks
CTFA (HSECofC)	2000 survey	100 house smoke free plan 244 house smoke free pledge actual parent survey plan parent survey actual 80 parents view video plan <b>80 parents view video actual</b> 25 daycare trained plan <b>25 daycare trained actual</b>	80% homes smoke free and car

## Reducing Youth Access to Tobacco

Grantee	Baseline	FY2010 (Planned/Current Performance)	FY2014 (Goals)
WBVD		100 educate about ordinances plan <b>2400 educate about ordinance actual</b>	1 community pass smoke free local ordinance
MCCTFA		4 focus groups how train planned 4 focus groups conducted on how to train actual	100 educated employers about laws concerning sales to minors
Legacy		263 compliance checks (93%-100%) <b>2 stop selling tobacco products</b>	5 discontinue selling tobacco products
Future Builders		5 retailers pledge not to sell to minors plan <b>5 retailers pledge not to sell to minors actual</b>	150 tobacco retailers informed about tobacco laws
EBCTAP	50	5 educational workshops plan <b>5 educational workshops actual</b>	80% increase retailers pledge not sell to youth
CTFA (HSECofC)		100 reduce no of households 10 day care pledge card drive 200 parents sign pledge card plan <b>200 parents sign pledge card actual</b> 24 letter writing plan <b>48 letter writing actual</b> 2 newspaper articles plan <b>3 news paper articles actual</b>	80% youth reduction to tobacco home and vehicle 50% aware of SOS 25% contact SOS

### Recommendations

1. **Modeling.** Share data across grantees. This will enable grantees to see how their colleagues, other grantees, are categorizing, measuring, and recording data, focusing on goals, baselines, benchmarks, and current status. (Grantee variability concerning recording programmatic data is discussed in the new evaluation format section of this report.)
2. **Cluster approach.** Convene a technical assistance session to facilitate information sharing and brainstorming. The grantees could be grouped by intervention area. Grouping grantees according to intervention area will enable them to share problems and solutions with each other – with a common intervention area. This would be more productive than having grantees continue to reinvent the wheel. In addition, this grouping approach will build affinity groups – providing them with a functional and concrete basis for interacting with each other throughout the year.
3. **Narrow scope.** Use this data to generate a dialogue about narrowing the scope of program activities. The grantees as a group could have more of an impact across the State if they reduced the variety of activities they are engaged in. If they select a few activities they have in common and implement them across the State they would increase “the dose effect.” Categories might include: education, media, pledges, Quitline use, and policy-free policy.

## New Evaluation Framework

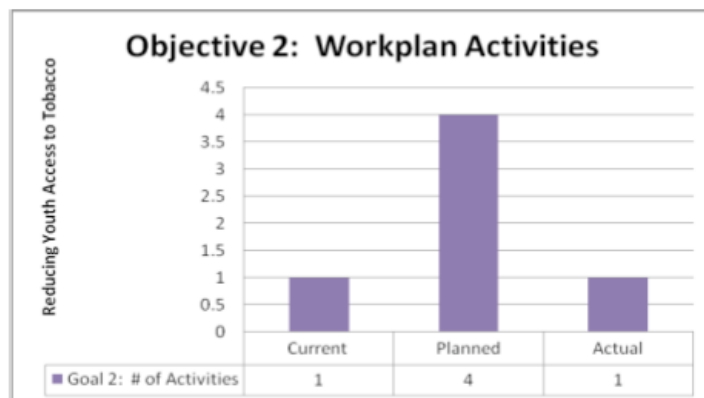
The majority of grantees/evaluators have established baselines, goals, and annual, as well as quarterly, benchmarks and actual performance records in comparison with the benchmarks, concerning their tobacco prevention activities. Typically the benchmark numbers are the result of dividing the long-term goal by 5 (the number of years associated with the project). Alternatively, they are equal or unequal amounts added to each year totaling the goal figure, This calculation is based on grantees’ best estimates of realistic levels of performance over time (See Figure 1.)

Table 1. Creating Individual Tobacco-Free Environment Program Dashboard: Change in Knowledge of Acts 8 and 13 Collected from Home Visits and Community Meetings					
	Year 1	Year 2	Year 3	Year 4	Year 5
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Benchmarks	2800	3600	4400	5200	6000
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*Note. 255 families interviews, we assume all four family members are knowledgeable about Acts 8 and 13.*

**Figure 1. Baseline, Goal, Annual Benchmarks, and Actual Performance**

In addition, many grantees are using the Evaluation Monitoring System, which is used to collectively track the number of people who stop using tobacco based on grantee efforts. Many grantees are also using the Visual Alert System, which is designed to help plan their activities and compare their plans with their actual performance (see Figure 2).



**Figure 2. Visual Alert System - used to monitor program activities**

## Utility

The new matrix format is designed to help grantees accomplish their objectives by providing them with a tracking or monitoring tool. In addition, it enables MISRGO to monitor progress across grantee programs. It provides MISRGO with an evaluation dashboard, an easy to read summarization and comparison of grantee performance by intervention area.

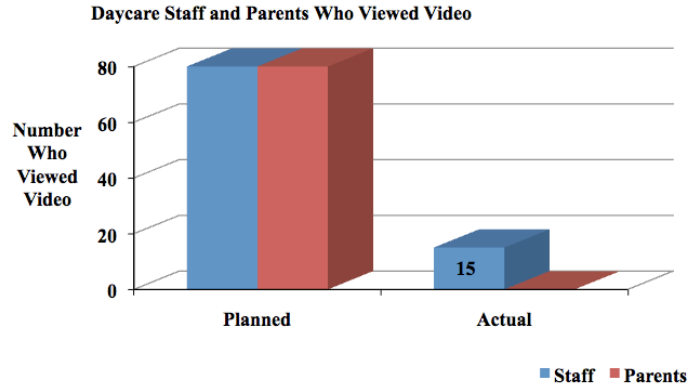
For example, under the intervention area of Creating Tobacco-Free Environments, the Mississippi County Coalition for a Tobacco-Free Arkansas (MCCTFA) had a goal of increasing the number of public buildings with smoke-free policies by 15% (22 of 157) by 2015. They divided their long-term goal of 22 by 5 years. This resulted in equal benchmarks of 4.5 each year. (Approximately 5% of public buildings in their area have already been identified as having smoke-free policies, representing their community baseline. (These goals were later revised based on feedback on their performance.) (See Figure 3.)

Creating Tobacco-Free Environments								
Grantee	Baseline	FY1	FY2	FY3	FY4	FY5	LT Object	
MCCTFA	7.85	4.5	4.5	4.5	4.5	4.5	22	
UofA	no data							
CTFA	2000	320	320	320	320	320	1600	constructed
EBCTAP	1	3.6	3.6	3.6	3.6	3.6	18	
FB	107	62	62	62	62	62	312	
Legacy	2	1		1		1	3	
WBVD	5	0.3	0.3	0.3	0.3	0.3	1.25	
WCAA	10.6	8.6	8.6	8.6	8.6	8.6	40.28	
We Can	0	1	2	2	2	2	8	

**Figure 3. MCCTFA Example: Baseline, Goals-LT Objective, and Annual Benchmarks**

This enables grantees and MISRGO to provide timely feedback concerning performance, make mid-course corrections, as needed, and increase the probability of grantees accomplishing their programmatic objectives. It also provides a social or evaluative norm for the group – providing them with cross-site comparisons and thus a context in which to interpret their own performance.

The same system can be applied to quarterly benchmarks within each year. Many grantees use the Visual Alert System to map their quarterly and annual goals. The Visual Alert System helps grantees compare their planned activities with their actual behavior or performance to determine if they are progressing toward their larger, long-term goals. (See Figure 4.)



**Figure 4. Visual Alert System: CTFA Example of Planned Activities Compared with Actual**

## Variability

Although, most grantees and evaluators have made a conscientious effort to create accurate baselines, realistic benchmarks, meaningful goals, and descriptions of actual performance, there is considerable variation concerning the use of the new evaluation monitoring and reporting tools.

In some cases the data needed to be extracted from the text and then calculated, instead of completing the computations and presenting them in bar charts. One grantee discussed percentage increases and decreases without anchoring the increases in a baseline figure. Another grantee provided some description of activities but no baseline, goal, or benchmark data. Other problems including problems match data in the text with data represented in the figures and bar charts.

## Critique & Training

Fetterman & Associates' next step will be to provide diplomatic, but clear and direct feedback concerning how to improve reporting practices to ensure greater uniformity and comparability. Training promises to be more effective with the new plan of selecting a limited number of screened evaluators to assist in the effort. Fetterman & Associates is working with MOSAICS to refine the GEMS system to incorporate baseline, goal, benchmark, and actual performance data.

The upcoming evaluation training workshop, scheduled for October 13-14, 2010, will focus on these reported variability issues. In addition, a comparison of grantee performance across organizations will be discussed at the next formal workshop. This training will ensure that the data is more meaningful, accurate, and relevant. Once the data quality is enhanced more meaningful analyses can be conducted concerning grantee progress and performance. The exchange will facilitate learning and improve both program and evaluation practice.

## Conclusion

This report highlights two items: 1) programmatic findings and the 2) new evaluation format. Concerning the findings, grantees have made progress in a number of areas including: providing educational programs, increasing the number of adult and youth pledges not to use tobacco, implementing media campaigns, encouraging use of the Quitline, and securing tobacco-free policies.

In addition, MISRGO is building on its existing monitoring and evaluation system, by implementing more systematic and reliable evaluation tools; both online and on paper. Grantees and evaluators have conscientiously attempted to adhere to the training document guidelines and instructions (Fetterman and Delaney, 2009). However, variability in reporting practices was observed. This next workshop will focus on:

- 1) **modeling** – sharing data in order to learn how to improve evaluation documentation efforts from each other
- 2) **clustering** – grouping grantees by intervention, program outcomes, or activities in order to share knowledge and learn how to improve program performance across grantees
- 3) **narrowing** the scope of activities conducted by each grantee or focusing on a few activities that they can all agree to hold in common in order to increase the overall impact of the MISRGO's efforts

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## References

Fetterman, D.M., Deitz, J., and Gesundheit, N. (2010). Empowerment evaluation: a collaborative approach to evaluating and transforming a medical school curriculum. *Academic Medicine*, 85(5):813-820.

Fetterman, D.M. and Delaney, L. (2009). *Evaluation Training Manual*. Menlo Park, CA: Fetterman & Associates.

Fetterman, D.M. and Wandersman, A. (2005). *Empowerment evaluation principles in practice*. New York: Guilford Publications.

## Appendix A

### Evaluation Activities 2009-2010

Evaluation activities ranged from evaluation consultations with individual grantees to workshops for groups of grantees and evaluators. In addition, evaluation reports were produced throughout the year. Findings were disseminated in a professional association paper presentation, scholarly article, and a scholarly book. A blog was maintained to make the evaluation activities and findings easily accessible. These activities are briefly discussed below:

#### Individual Consultations

Individual consultations consisted of providing advice with grantees and evaluators concerning evaluation designs and findings, report formats, and tobacco-related research updates. Telephone and email were used to provide these consultations. Some drafts of MISRGO reports were also reviewed and edited before being submitted to MISRGO.

#### Grantee and Evaluator Workshops

An evaluation workshop was conducted September 25, 2009. It was designed for both MISRGO grantees and evaluators. Training both at the same time enhanced communication about evaluation between them. Invited faculty and the title of their workshop is provided below:

- Dean Stewart Donaldson. Workshop titled: *Practical Program Evaluation: A Program Theory Approach*.
- Dr. Tarek Azzam. Workshop titled: *Using Technology to Enhance Applied Research & Evaluation*
- Dr. Fetterman. Workshop titled: *Baseline, Benchmarks, and the Visual Alert System*

A second workshop was conducted March 25, 2010. It focused on Goals, Benchmarks, Actual – Current Status, and Baselines. The workshop was titled: “Telling Your Story.”

#### Virtual Training

Building on Dr. Azzam’s training on the use of Google Maps, a virtual training session was provided enabling each grantee to create a shared MISRGO map. This enabled the group to determine where there was MISRGO tobacco prevention coverage across the State. It also facilitated sharing between grantees and evaluators because the maps literally pinpointed the location of the agency,

provided contact information, and a description of the grantees' agency and activities.

### **MISRGO Evaluation Reports**

Evaluation reports were submitted throughout the year for the legislature, Arkansas Department of Health, MISRGO, and the MISRGO Advisory Board. A sample of submitted reports is provided below:

Fetterman, D.M. (2009). House & Senate Health Services Subcommittees Report. Menlo Park, CA: Fetterman & Associates.

Fetterman, D.M. (2010). MISRGO Evaluation: February 2010 Progress Report. Menlo Park, CA: Fetterman & Associates.

Fetterman, D.M. (2010). MISRGO Evaluation 2010 Annual Report. Menlo Park, CA: Fetterman & Associates

### **Dissemination**

The MISRGO evaluation also includes dissemination. The evaluation findings and data collection and reporting activities were shared with the scholarly community. The dissemination strategies employed this year were varied and extensive. They included:

1. **Professional Association and Annual Meeting Presentation**  
Empowerment evaluation: technological tools of the trade, American Evaluation Association. Focus on technological training tools used in the MISRGO evaluation, including online surveys, digital photography, and word clouds.
2. **Scholarly Book Publication**  
*Ethnography: Step by Step* – 3<sup>rd</sup> edition. Focus on MISRGO evaluation blog and workshop activities.
3. **World-wide Recognition Notice About Scholarly Article Publication**  
Empowerment evaluation: yesterday, today, and tomorrow, *American Journal of Evaluation*. Cited as most accessed article during the year. Focus on MISRGO empowerment evaluation.

The MISRGO Evaluation Blog was also maintained by Fetterman & Associates. It chronicled many of the evaluation training activities conducted throughout the year. In addition, all MISRGO evaluation reports are linked to the blog to facilitate access to MISRGO evaluation findings and recommendations. It is at: <http://tobaccoprevention.blogspot.com>