

APPLICATION OF THE THEORY-DRIVEN APPROACH
TO EVALUATION IN PROGRAM PLANNING

BY

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A Practicum Report Submitted to the Faculty of Graduate Studies
In Partial Fulfillment of the Requirements for the Degree of

MASTER OF SOCIAL WORK

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of Manitoba in partial fulfillment of the requirements of the degree**

of

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Abstract

The present practicum with the Manitoba Healthy Child Initiative involved the development of an implementation plan and evaluation plan with an established interorganizational committee comprised of senior managers from education, social services and mental health. The proposed program is a multi-faceted education-based program for children under the age of twelve with severe emotional and behavior disorders currently not attending school. The use of the theory-driven approach during planning is undocumented and the literature and the practicum offered the unique experience to apply this approach at the stage of program planning. The activities of the practicum included reviewing the literature related to the program's proposed interventions; developing program outcomes; articulating the program's theory, based on the literature and the implicit logic model of the committee members; and the creation of an evaluation framework. The temporal replacement of evaluation planning to the program planning stage, in particular the application of the theory-driven approach at this stage has implications to evaluation use theory and the role of the evaluator. Some of the potential uses of this approach to evaluation are improved stakeholder conceptualization of the program, clarification of stakeholders' values and increased stakeholder commitment. These potential uses are of particular importance with an interorganizational committee where perceptions of the target population, needed interventions and expected outcomes can vary. The use of the theory-driven approach offers an opportunity for the evaluator to facilitate agreement among a diverse group of stakeholders and in turn, potentially alter the traditional role of the evaluator as a neutral researcher to one of a more involved policy actor. The most significant potential benefit

of this approach is developing social programming research, based on evaluation results that can be shared across jurisdictions. However, the political dynamics of an interorganizational collaboration, combined with the inherent political nature of evaluation and planning, impacts the extent to which the rational theory-driven approach is feasible. Some of the potential issues of the approach include the cost in evaluator time and resources, the practical and ethical implications of the changing role of the evaluator and the extent to which the approach can be applied prior to program implementation.

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Chapter I

Introduction

Program evaluations serve several functions. A primary function of program evaluation is to assist program managers to better understand the decisions they have to make to improve program effectiveness. In the last twenty years the use of evaluations has shifted from simply assisting program planning efforts to justifying program interventions and the need for continuing program resources. The use of evaluations for program accountability has been highlighted in an era of decreasing resources to public and voluntary human service organizations. As the competition and struggle for financial resources and program legitimation has increased between organizations, evaluation has played an increasingly important role in the argument for why a program should continue to receive funding. The structures of many program evaluations have emphasized cost-effectiveness and outcomes to accentuate the program's worth to funders.

The present practicum is set in the provincial agency Healthy Child Initiative (HCI). The purpose of HCI is to develop cross department coordination to solve problems and develop services for children and youth. The agency acts as a coordinator for relevant provincial departments, an incubator for program development and evaluators for programs both originating within the agency and outside the agency. HCI operations exemplify the trend of programs not only being judged and funded based on the results they produce, but further on the results they *plan* to produce. The traditional model of program planning is modified and begins first with the development of desired program outcomes and then the construction of program components thought to be the most effective mechanism to achieve these outcomes. This model is popular with provincial

governments throughout Canada (e.g., Alberta and Ontario) as it ensures that the funded human service programs are those that demonstrate effectiveness through results.

The program that is the focus of this practicum, the COACH Program, is an education-based, individualized program for children five to eleven years old who have extreme behavior problems. The program is a collaborative endeavor that proposes small classroom settings with the use of child care 'coaches' who will work with the children and their families both in the school setting and at home. The program will be coordinated by a psychologist and include a teacher and social worker for the eight to twelve child participants. The collaborators of the proposed program include representatives from Winnipeg Child and Family Services, Winnipeg School Division #1, Child Guidance Clinic and Healthy Child Initiative.

The Unique Nature of the Practicum

There are a number of reasons that this practicum is unique. First, this practicum offered the opportunity to experience and work with the integration of program planning and evaluation planning. This is a unique use of evaluation planning and an area where there is a gap in the literature. The influence of evaluation on the implementation planning of a program seems to be a direction that has developed out of the political need for programs to demonstrate their effectiveness. This practicum offered a unique opportunity to experience and understand the influence of evaluation on planning and planning on evaluation as an integrated step in the traditional planning process.

The second reason that this practicum is unique is that the project itself is a collaborative cross department initiative that involves stakeholders from different organizations. The last decade has seen a resurgence of interest in program collaboration

and integration of service administration and delivery. The COACH program offered an experience with a group of influential agency leaders in order to understand the dynamics of interorganizational relations and collaboration.

The development and coordination of the COACH program by an interorganizational committee reflects the nature of the program's intervention. COACH proposes to provide school-based services to children with comprehensive individualized family services. This comprehensive approach to services for multi-need children and families is a unique alternative to traditional stovepipe delivery of services from several service systems.

The integration of evaluation planning with program implementation in combination with the cooperation of diverse program stakeholders to develop the implementation plans of an innovative program has made this practicum experience a rich, dynamic and unique experience.

Learning Objectives

There were several learning objectives for this practicum. The three primary learning objectives and five secondary objectives are identified below.

Primary Learning Objectives:

- To gain knowledge and experience in working with a diverse group of program stakeholders.
- To have the experience of working as a team to develop an implementation plan.
- To develop an evaluation plan for a collaborative program.

Secondary Learning Objectives:

- To improve skills related to diplomacy, verbal and written communication and presentation through work with a diverse group of stakeholders.

- To learn more about the day-to-day activities of professional program evaluators.
- To participate in educational opportunities related to children, youth and families as they are available.
- To develop a thorough understanding of service delivery models and evaluation models for collaborative or coordinated programs for multi-need children in school and in their homes as related to the COACH Project.
- To learn more about the process of program proposal development, submission and funding for a cross-department initiative.

The evaluation of these objectives was based on feedback forms developed in consultation with the advisor and completed by people who also worked with the COACH program. Another important source for the evaluation and analysis was the practicum log that was used to reflect on process issues.

Background of the Practicum

Healthy Child Initiative

This practicum was primarily attached to the Healthy Child Initiative (HCI), formally the Child and Youth Secretariat. The change in provincial government following an election last fall has resulted in ongoing changes to the Healthy Child Initiative. The agency was developed and continues to be a cross department coordinator for the development and evaluation of programs for children and youth. Until the most recent change, the staff complement consisted of staff seconded from the four primary departments: Family Services, Health, Education and Justice. In March 2000, the newly elected NDP government renamed and reorganized the Children and Youth Secretariat so that the staff came under the auspices of the Department of Family Services and Housing.

Thus far, the role of the Healthy Child Initiative has not changed drastically. In June 2000, after eight months in power, the Healthy Child Committee of Cabinet had their inaugural meeting and established the Healthy Child Initiative Deputy Ministers Committee. In July 2000 a new director was appointed to HCI. In September 2000, the Healthy Child Committee of Cabinet approved a new mission statement and seven guiding principles of the Healthy Child Initiative. The mission states:

the Healthy Child Initiative works across departments and sectors to facilitate a community development approach for ensuring the well-being of Manitoba's children, families, and communities. The priority focus will be on conception through infancy and the preschool years (HCI, 2000).

The seven guiding principles are more detailed than presented here, but include developing policies and programs that are: 1) community-based, 2) inclusive, 3) comprehensive, 4) integrated, 5) accessible, 6) emphasize quality assurance through evaluation and 7) and are accountable to the public. These seven principles are not drastically different than the way in which the former Child and Youth Secretariat operated.

The four main policy areas of the Healthy Child Initiative are: 1) focusing on the early years (prevention and early intervention), 2) strengthening families and communities, 3) recognizing and respecting Aboriginal culture and 4) reducing barriers to coordinated services for children (MCYS, 1998).

More practically, the HCI acts as: 1) a place for government departments to resolve interdepartmental issues, 2) an incubator for program development and 3) an agency to conduct program evaluation to determine the most effective programs for achieving positive outcomes for children and youth. The Child and Youth Secretariat, and now the

HCI, works to effect system change and create an atmosphere where senior department decision-makers think about children first when making decisions.

The unique nature of the Healthy Child Initiative facilitates the development of cross-sector programs, like the one in the present practicum. Although the HCI is now under the auspices of one department, the cross-department coordinating role of the agency is not lost. The Healthy Child Initiative receives funding from each of the major partnering departments (e.g. Family Services, Health, Justice, Education and Aboriginal and Northern Affairs) as well as directly from the provincial purse. The HCI is mandated to develop or coordinate policies and programs that will achieve cross-sector outcomes. A few examples of cross-sector outcomes include improved child health, reduced numbers of children and youth involved with the justice system and increased number of youth completing school (HCI, 2000). Without the coordinating role of the HCI, a program like COACH would have difficulty developing. The HCI provides the place for the interorganizational groups to meet and has included in their budget, the money to develop such programs that emphasize outcomes for the whole child.

Development of the COACH program

The role of HCI in COACH began in 1997/98. Several school divisions approached the organization with the problem of non-attending school children under age twelve with extreme emotional and behavior problems. A committee of government and quasi-government organizations was struck to examine and address the issue of the lack of coordinated children's mental health services. In the beginning the emphasis was on the children's mental health service system, of which a needed day program, like COACH, was one part. There was a group of children that although they would qualify for a part-

time or full-time teacher's aid, they were still unable to function in a classroom setting. The other groups present in the initial development of the COACH program included representatives from the Child Guidance Clinic (CGC) and Child and Family Services (CFS). Over the last couple of years, the committee has varied in representatives and in focus. For example, CFS was a part of initial discussions about the need for coordinated mental health services, then many months later after the school divisions did some work on their own, CFS returned to sit on the COACH Steering Committee. Two other significant partners have also been identified for the COACH Steering Committee, but to date a representative has not been identified: Manitoba Education and an Aboriginal social services agency. In the interim, the Aboriginal liaison from CFS has been associated with the Steering Committee. It seems it has been difficult to persuade Manitoba Education to become involved.

The program proposal

At the time the present practicum began, the COACH program had recently submitted a proposal to the Provincial Treasury Board. Many of the partners represented on the Steering Committee were offering financial support or services in kind, however the significant cost of the coaches' salaries was requested through HCI to the Treasury Board. The money available through the Treasury Board was earmarked in the HCI annual estimates for the 1999-2000 year for a program that was cross-sector and benefited children with mental health needs. The COACH program proposal outlines a multi-faceted program to support children between the ages of five and eleven who have emotional and behavioral disorders and can not function in a classroom setting. The program structure consists of twelve children divided into four groups of three with two

coaches assigned to each group. The children have academic instruction half-days and community involvement for the other half of the day. Each of the children has a 24-hour plan in place, developed primarily by the home support social worker. The social worker and the coaches work with the families in the evenings and on weekends, in their home or in the community. The family intervention component is intended to be flexible and individualize the mix of services needed by each family while trying to minimize the number of professionals directly involved with each family. The goal of the program is to return children to their local school system as soon as possible. In the original proposal there were fifteen process objectives listed, but no outcome objectives.

In response to this proposal, Treasury Board gave a grant of \$25, 000 to the Steering Committee to develop “a comprehensive, cost-effective and culturally appropriate implementation plan” (HCI, memo, April 26, 2000). The first meeting of the Steering Committee I attended was in April 2000. The subject of the meeting was how to best use this grant to develop a more detailed plan. My role, through the Healthy Child Initiative, was negotiated and included working with a writer to develop the implementation plan while also developing the evaluation plan for the program. I was involved with the COACH program from April to August 2000.

Chapter II

Literature Review

There are several areas of literature that are relevant to the present practicum.

First, literature related to interorganizational collaboration is important as it helps to understand the program planning process with a diverse group of stakeholders and the dynamics of the COACH Steering Committee. Second, an extensive description of the theory-driven approach to evaluation provides the context for the practicum activities. Third, a brief review of evaluation use is included to understand how the integration of evaluation planning with program planning modifies the traditional understanding of evaluation use. Fourth, literature related to traditional program planning and implementation lays the foundation for the description of the COACH planning process as well as the later discussion of the implications of moving evaluation planning to the program planning stage. Finally, the political nature of evaluation and planning as value-laden activities is explored through the literature, including the role of the evaluator as a neutral or involved actor in the evaluation process.

Interorganizational Collaboration

The COACH program is the result of an interorganizational collaborative effort. The primary partners are from different organizations, broadly categorized as education, mental health and social services. Further to the differences that stem from organizational differences, there are different disciplines represented that struggle to find a common language and perception of the program. The interorganizational collaboration of the program planners is extended to the composition of the program in the form of wrap around services coordinated by professionals from different disciplines.

Theories of interorganizational relationships grew out of the set of organizational theories, which viewed the organization as an open-system, interacting with its environment (Aldrich & Pfeffer, 1976). Although some of these open-system theories were developing in the 1950's, it appears that the late 1960's and the 1970's were the apex of literature emphasizing interorganizational theory versus intraorganizational theory (Evan, 1976). The political economy perspective emerged as one theory to explain interorganizational interaction. It appears to be the most comprehensive theory explaining interorganizational relations.

The political economy perspective of organizations was developed and explained primarily by Zald (1970), Benson (1975) and Hasenfeld (1983). This perspective views "the environment within which organizations exist as comprised of competing interest groups, each vying for power and resources needed to achieve its goals" (Streeter, Sherraden, Gillespie and Zakour, 1986, p. 33).

The political economy perspective... is the study of the interplay of power, the goals of the power wielders, and the productive exchange systems. It focuses on the interaction between the political and economic forces both within and without the organization that shape its basic structure and processes. Political refers to the process through which power and legitimation... are acquired... Economic refers to the processes by which resources needed for the service technologies of the organization... are acquired... (Hasenfeld, 1983, p. 43 citing Zald, 1970).

Johansson (1994) argues that the nature of society, including the market and political system of democracy is understood as relations between and within organizations. It is the interplay of power, competition or cooperation and negotiation between organizations that comprises much of our society, including our individual market and political

interactions. Interorganizational theory understands power as relational- in the context of other organizations. Power is the capacity to act in a way that influences other organizations to carry out your intentions or interests despite the other organization's intentions (Johansson, 1994). The assumption underlying this view is that organizations operate solely in self-interested ways to protect their resources and domain.

Benson (1975) states the political economy of interorganizational networks is “concerned with the distribution of two scarce resources, money and authority” (p. 229). Authority is slightly different than power and depends on external “legitimation of activities, the right and responsibility to carry out programs...” (Benson, 1975, p. 232). Although resources can include funding, personnel, information and products and services, Benson, (1975) highlights money as the most important to an organization.

A political economy perspective suggests that an organization will work well with other organizations when there are benefits to doing so and their flow of money and sources of authority are not threatened. Organizations will work through a variety of mechanisms of power to ensure they remain in a strong position within their interorganizational network (Benson, 1975; Meyers, 1993; Streeter et al, 1986; Reitan, 1993).

Integrated Service Delivery

Kahn and Kamerman (1992) define service integration as “a systematic effort to solve problems of service fragmentation and the lack of an exact match between an individual or family with problems and needs and an integrative program or professional specialty” (p. 5). The goal of service integration is to create a “coherent and responsive human services systems” (p. 8). Hassett and Austin (1997) state that service integration efforts

have fallen under a variety of labels including collaboration, coordination and one-stop shopping, but all basically refer to “efforts to reduce or eliminate divisions or boundaries between categorically defined and provided services” (p.10).

The concept of service integration is understood at the provincial level of government. In the present practicum, the nature of the work by the Healthy Child Initiative can be understood as an effort toward service integration. The relationship between the organizations on the Steering Committee of COACH can be understood in the context of collaboration among few organizations within a larger interorganizational network. The Steering Committee is the primary vehicle for developing an integrated program and system. Partners from traditionally distinct networks (e.g., Family Services and Education) work together to form new networks to “reduce the division...between categorically defined...services” (Hassett & Austin, 1997, p.10) for children.

Wrap around services are the service delivery level effect of well-coordinated and integrated services. Wrap-around services refer to a style of service delivery where the problem is defined by the needs of the family and not by predetermined program categories (Halley, 1997). Malloy, Cheney and Cormier (1998) suggest there are five points to describe wraparound services to children.

1. Wrap-around services focus on the strength of the child, family, school and community.
2. They are driven by the needs of the child as opposed to the needs of the agencies.
3. Wrap-around services deal with all aspects of the child's life.

4. They provide for the child and family in natural settings and use the social networks such as family and friends.
5. Wrap-around services concentrate on the needs that are basic to all individuals, including basic physical, intellectual, and emotional needs.

Collaborative efforts of service organizations that span a continuum of services are able to provide wrap-around services to particular target groups. The political economy perspective suggests that organizations that can gain additional resources or legitimation through such collaboration are the organizations most likely to participate. Although collaboration requires cooperation, it can often lead to competition to promote the agenda that best meets the needs of an individual organization.

This first section of the literature review attempts to address the most important concepts related to interorganizational collaboration and service delivery. This brief review lays a broad foundation for a detailed presentation of the related issues in Chapters III and V.

Program Evaluation and the Theory-driven Approach

Modern program evaluation began in the United States in the 1960's in response to the huge development of federal social programs (Shadish, Cook & Levinton, 1991). Political concerns for accountability and control in the implementation of programs led the United States federal government to enact mandatory evaluation of social programs in 1962. By 1967 there were several acts that funded and compelled the evaluation of federal and state funded programs (Shadish, Cook & Levinton, 1991). The profession of program evaluation grew out of many social science disciplines after it became apparent

that the accountants and economists of the civil service were overwhelmed at trying to measure the impact of social programs (Shadish, Cook & Levinton, 1991).

The diversity of professional practice developed in response to the government's need to understand how social programs impacted social problems. The diversity of the response came in the form of emerging firms of professional evaluators or university researchers who contracted with the government and the development of government evaluation departments (Shadish, Cook & Levinton, 1991). The evaluators themselves were specialized in a number of diverse areas including education, health, criminal justice and a variety of other areas. This diversity has extended into the profession in the form of debate over the evaluators role as a program content specialist or a generalist familiar with evaluation design, measurement and data analysis (Bickman, 1989).

Program evaluation is the systematic analysis of a service or intervention to understand if a service or intervention is working the way it was intended and if it is producing the results it was intended to produce (Mayne & Hudson, 1992). Others suggest that there are many forms of program evaluation research (e.g., Patton, 1987), however, the term program evaluation is most often used to describe research that emphasizes the effectiveness of the process and outcome of a program (Rutman, 1980). In order to study the effectiveness of program outcomes, an evaluator must ensure several preconditions exist: "1) the program is clearly articulated; 2) the goals and/ or expected effects are clearly specified; and 3) the causal assumptions linking the program to the goals and/or effects are plausible" (Rutman, 1977, p. 59). When these conditions are not met it is difficult, if not impossible, to evaluate the program's processes or outcomes and the results will likely be invalid (Wholey, 1977).

Evaluators recognized the need for a full program description as early as the 1950's and 1960's (Conrad & Miller, 1987). However the sudden rush of social programs in the 1960's and the need for timely evaluations, along with the strong conviction that these social programs would work, led to the decline of process research and an increase in research intended to evaluate the input-output links of programs (Conrad & Miller, 1987). In the 1980's there was a renewed interest in explaining program methodology. Chen and Rossi (1983) wrote a seminal article, "Evaluating with sense: The theory-driven approach" explaining the approach and creating a wave of renewed discussion. Evaluators began to question the effectiveness of traditional 'black-box' outcome evaluations. There was less interest in understanding whether a program worked or not and more interest in discovering how and why a program worked (Chen & Rossi, 1983).

The term program theory is different from a theory-driven approach to evaluation, although the terms are sometimes used interchangeably. Program theory can simply refer to "the construction of a plausible and sensible model of how a program is supposed to work" (Bickman, 1987, p. 5). This is certainly a part of the theory-driven approach. The theory-driven approach to evaluation includes not only the explicit articulation of a model to explain the causal connection between the program's interventions and outcomes, but also the description of the program structure and the connection of this to social research. Program theory is the model developed for a program through the use of a theory-driven approach. For example, an evaluability assessment includes articulating the theory of the program, but is not a comprehensive use of the theory-driven approach in and of itself. The theory-driven approach can range from a simple articulation of the program's logic to a more comprehensive approach that includes a review of the literature, intensive work

with stakeholders to identify program values and the explication of why it is believed that the program's interventions will lead to the expected outcomes.

Many terms and definitions are used in the literature related to theory-driven evaluation. Program philosophy is used by Conrad and Miller (1987) to describe "a system of theories and values that defines and guides the structure, population, process and outcomes of the program" (p. 22). Some define program theory to include scientific explanations and implicit theories, policy statements and models of inputs, processes and outputs (McClintock, 1987). Others limit program theory as the connection between the program resources and activities to the program outcomes (Wholey, 1987). Definitions of program theory are diverse, but all appear to include a connotation of either or both normative theory and causal theory. The most comprehensive application of the theory-driven approach would include the articulation of both normative and casual theory.

Normative Theory

Chen (1989) articulates the framework for theory-driven evaluation. This appears to be the most comprehensive examination of the theory-driven approach and outlines the six domains in which theory can be developed for a program. Chen (1989) states that there are two sub-theories to program theory: normative theory and causal theory.

Normative theory provides theoretical guidance on how to design and implement a program. It provides the rationale for the program structure, specifically what kinds of goals the program should pursue, the kinds of treatments that should be developed, and the required implementation procedures. There are three domains that are pertinent to normative theory: the treatment domain, the implementation environment domain and the outcome domain.

Treatment is the basic element in a program that produces the intended changes. The treatment needs to be designed with the program structure to allow for systematic evaluation of the treatment process and outcomes. However, treatment is not always delivered as intended, and strategies to examine the differences between the planned treatment and the intervention treatment are necessary. In this domain, the issues addressed include the conceptualization, design and measurement of treatments.

The implementation environment domain recognizes that a program can be implemented in different ways with different results. This domain attempts to understand the nature and effect of the implementation environment on the treatment. Understanding the implementation environment is useful to improving the implementation process or adjusting the treatment for more effective delivery.

The last domain associated with normative theory is the outcome domain; that is, the intended goals or outcomes of a program. It is important that the theory of this domain is clearly articulated as it is the outcomes that are used by program managers use to make decisions about resource allocation and the effectiveness of the program. In addition to the intended outcomes, it is important that possible unintended outcomes are also addressed through theory and evaluation.

The evaluation of normative theory provides program stakeholders with a stronger conceptualization of the program and its assumptions. It helps to identify the critical issues in the program design and the implementation process through evaluating the “consistency between the theoretical program structure and the implemented program structure”(Chen, 1989, p. 392).

Conrad and Miller (1987) use the term program philosophy to describe the normative theory of a program. The evaluation of a program's philosophy includes measures of the group's consensus of theories and values. Conrad and Miller (1987) distinguish between theories and values in programs: "values determine the goals to be accomplished and the theories employed to accomplish them... theories tell us how to accomplish the goals" (p. 23). Recognizing the value-laden nature of programs allows program developers to make their values explicit. Although theories of social or behavioral change may be value-free, the choice in which theory to employ to accomplish the program's goals is not. This is a useful distinction for an evaluator who is actively involved in the definition of program theory. This is discussed further, later in the chapter.

Causal Theory

When the term program theory is used, it is commonly a reference to the program's causal theory; that is, the specification of "how the program works and under what conditions it will have what kind of consequences and processes" (Chen, 1989, p. 391). It is the description of the causal mechanisms that underlie and link the treatment variables and the outcomes variables.

There are three domains associated with the causal program theory: impact, intervening mechanism and generalization (Chen, 1989). The impact domain assesses the impact of treatment on the outcome. The issue to be addressed in this domain is the ability of the evaluation to provide a strong causal inference about the impact of the treatment on the outcome. Evaluation of this domain is the focus of traditional evaluations (Chen, 1989).

The intervening mechanism domain investigates the causal processes that connect the implemented treatment to the outcomes. It specifies the processes by which the program treatment affected the program outcomes either in producing the intended outcomes or failing to produce them (Chen, 1989). This domain reflects on the implemented program and cannot be articulated prior to the start of the program. This domain is concerned with why a program works or does not work.

The last domain associated with causal theory is the generalization domain. This domain articulates the stakeholders' expectations about how the evaluation results will be used in the future in a particular setting or population. If stakeholders plan to use the evaluation results for other groups or in other settings, the evaluation must provide information about how the results can be generalized (Chen, 1989). However, the importance of this domain is elevated through the increased use of evaluation results by other jurisdictions. An evaluation theory must describe how relevant the results of an evaluation are to other settings or populations, perhaps even if the stakeholders of the program do not intend to generalize the results.

An evaluation of a program's causal theory is helpful in providing information to assess the program's capacity to produce the expected outcomes. The development of a causal theory allows the underlying intervening mechanisms to be made explicit and studied to understand why the program worked or did not work. Chen (1989) outlines a typology of nine theory-driven evaluations. The first six are based on the six domains. For example, a normative treatment domain may assess the congruence between the intended treatment and the treatment delivered. The other three types of evaluation are composite types. These include the treatment-impact evaluation, the implementation

environment- impact evaluation and the outcome-impact evaluation. The normative treatment-impact evaluation is intended to specify the essential components of treatment that affect the outcomes. The normative implementation environment-impact evaluation examines the extent to which the program was implemented as planned. It seeks to identify the factors in the implementation environment that impact the failure or success of the program. The normative outcome-impact evaluation is used to gain sensitivity to both the intended and unintended outcomes of a program. Outcomes that are policy relevant as well as derived theoretically can be included.

Program Theory

Sources of program theory

As stated earlier, program theory or logic is a part of the theory-driven approach to evaluation. Chen (1989) outlines a comprehensive typology of theory-driven evaluations that far exceeds the study of the program's logic model. Often program theory is used to explain the program's structure and logic model, but the term is also used to include the use of social theory in the development of the program's components and the interpretation of the stakeholders' implicit program logic.

Lipsey and Pollard (1989) identify three sources from which program theory can be developed: "(a) bringing in prior theory and research from academic social sciences, (b) exploratory research directed toward discovering the underlying casual mechanisms of a program, and (c) extraction of the stakeholders' implicit program theory" (p. 301). The first source for program theory is the academic literature and theory that is already established. This includes both specific theory and more global approaches. Developing program theory based on specific documented social theory can be more difficult because

of the lack of such theory (Chen & Rossi, 1983). A more global use of theory, for example, includes the general principles of behaviorism in a broad framework to predict how a target group may respond to program interventions. A more specific theory would specify the intervention and the expected results. There is less available specific theory that can be readily adapted for a program. Lipsey and Pollard (1989) also suggest that social theory can be used by treatment programs to “identify the cause of the problem then ‘reverse it’ to extract the corresponding theory about how to solve the problem” (p. 324). This can be a starting point for developing the logic of a program. For example, COACH is aimed at stabilizing the behavior of children unable to function in a classroom setting. The program developers have different ideas about why the children’s behavior is unstable: lack of parent involvement; unstable placements, including multiple moves; lack of stable school placement to apply for the appropriate funding and/or the inability or unwillingness of some organizations or the parents to follow the provincial protocol for emotional and behavior disordered children. By examining the assumptions about the cause of a particular problem one is able to develop a set of interventions to solve the problem. However, as with most problems the different ideas about the cause will lead to different interventions (Gottfredson, 1984). If the cause of the problem is believed to be a lack of willingness of parents to participate in the child’s education, then the intervention may be aimed at the parents. If the assumed cause is a lack of stable school placements or the unwillingness of an organization to participate in the provincial protocol, an intervention may be aimed at reforming some segment of the service system. This process of working from the problem cause backwards, demonstrates the value of the

theory-driven approach. Applied at the program planning stage the theory-driven approach can facilitate the articulation of stakeholders' assumptions.

A second source of program theory is exploratory research (Lipsey & Pollard, 1989). This refers to the work of the evaluator to understand the program's operations through interviews with program staff and observation of the program. Exploratory research is used when there is no well-articulated program theory already present for the operating program. The program model is developed through formal or informal data collected by the evaluator and used to describe the central program processes and their effects. This theory development is very similar to the manager's model developed through an evaluability assessment (Rutman, 1984). The model can also be done a priori, identifying variables that are considered important for the success of a treatment intervention. However, the a priori model may well change after program implementation.

The third source of program theory is the implicit program theory used by the program designers. This is extracted when the program's interventions are not explicitly connected to outcomes in the program and the theory cannot be easily identified through program observation and interviews. Implicit program theory is developed through challenging the program planners to specify what they believe are the program's intended effects, the treatment in the intervention and how one will lead to the other. Lipsey and Pollard (1989) suggest that the techniques of causal maps and concept mapping can be used to assist in this task.

These three sources of program theory are very useful in extending the concept of the theory-driven approach to evaluation. It expands the concept of program theory beyond

the articulation of the program's logic and connects it to evaluability assessment and social problem and social programming research.

Forms of program theory

Another significant contribution of Lipsey and Pollard (1989) is their identification of four forms of program theory. The first of the four forms is causal modeling. This is the program theory form that is referred to the most in the literature. There are two forms of causal modeling: conceptual and analytic. The conceptual component represents the researcher's statement of the presumed casual relations. The conceptual component can include a few steps about how the problem will be affected by the intervention to result in the anticipated outcome. The analytic component extends beyond this and also includes the data analysis procedures that are "applied to the empirical correlations among variables in order to test whether those correlations are consistent with the presumed casual model" (Lipsey & Pollard, 1989, p. 319). The full analytic model includes an understanding of how extraneous variables impact the conceptual model, the measures and measurement error. The analytic model is very similar to the model described by Chen and Rossi (1987) in their article "The theory-driven approach to validity". The focus of the present discussion is on the conceptual component of casual modeling.

The advantage of causal modeling is that it forces the evaluator to think in terms of cause-effect sequences. This is the intent of most interventions- to produce a change- and thus, this is an appropriate way for an evaluator to conceptualize the program. A disadvantage of causal modeling, identified by the Lipsey and Pollard (1989), is that it explains the relationships among variables and variables are rather abstract entities. The use of variables often makes it more difficult to understand specifically what is

happening to the people involved. An alternative is presented in the third form of program theory.

The second form of theory outlined is the basic two-step. This is the casual model stripped down to the bare minimum. It is the articulation of the relationship between 1) the program to the intervening variable and 2) the intervening variable to the outcome. Although this is not as developed as the casual model, it is considered to be better than nothing. It minimally provides the necessary information to interpret an evaluation's results: confirmation of whether the treatment was delivered, whether it brought about the expected changes and whether those changes led to the desired outcomes. The two-step model can distinguish between implementation failure and program failure.

The third form of theories are the stage-state models. These are not based on variables, but rather on the status of program participants. This approach requires the "identification of the major stages through which persons progress in the context of interest and the possible stages or statuses within each stage" (Lipsey & Pollard, 1989, p. 321). Rather than postulating the relationships between variables, the stage-state models, assess the status of each participant. The authors provide a clarifying example. To assess a program reducing homelessness, a variable oriented statement is: 'to discover whether homelessness was reduced'. On the other hand, a person-oriented statement is: 'to determine the number and types of persons whose status changed from homeless to housed'. This is an interesting form of program theory. It describes how the program affects the participants rather than postulates about relationships between more abstract, less real variables. Unfortunately, Lipsey and Pollard (1989) report that its use in program evaluation has not been documented.

The fourth and final form of program theory is the substantive model. These are treatment process models usually used with physical or biological processes. Substantive models about social and psychological processes are simply not available. They are detailed and comprehensive descriptions of how something works. An example of a substantive theory is how a clock works or how hormones affect eating behavior (Lipsey & Pollard, 1989). When they are available, they are very useful because they are so detailed.

The four forms of program theory are useful to developing a context for understanding program theory. Although the most commonly used forms appear to be the causal model and the two-step model, the stage-state models and the substantive theory have the potential to be useful forms of program theory when the circumstances allow.

The functions program theory

Bickman (1987) lists ten functions of program theory:

1. Contributing to social science knowledge
2. Assisting policymakers
3. Discriminating between theory failure and program failure
4. Identifying the problem and the target group
5. Providing program implementation description
6. Uncovering unintended effects
7. Specifying intervening variables
8. Improving formative use of evaluation
9. Clarifying measurement issues
10. Improving consensus formation

This list is somewhat self-explanatory. Program theory allows evaluators to use and contribute to the development of social problem and social programming research. By specifying the theory of the program, the external validity is improved (Chen and Rossi, 1987). That is, when the conditions under which the program is or is not successful in achieving intended outcomes are specified, the evaluation results can more readily be assessed for their usefulness to other similar programs. Evaluation is a powerful tool for contributing to the body of knowledge about program interventions that change our lives. However, if evaluation is not conducted in a way that allows the expansion of its use beyond specific sights, then its power is diluted. A theory-driven approach to evaluation allows the black box of program intervention to be opened so that the specific mechanisms behind *how* the intervention achieves or does not achieve program outcomes can be understood. The development of a comprehensive program theory postulates how implementation and extraneous variables mitigate the impact of the intervention on the target population to further improve the clarity of understanding of how program interventions operate. In addition, program theory allows the stakeholders of the evaluation to develop a consensus of their perceptions, assumptions and values about the program. The theory-driven approach strives for the articulation of specific program goals and intervention processes, rather than the vague goals and indeterminate technologies often needed for diverse stakeholder agreement. However, despite this passionate endorsement of theory-driven evaluation, it is not without its problems.

The problems of the theory-driven approach

The problems of the theory-driven approach to evaluation are significant. This is apparent in its documented lack of use. Lipsey, Crosse, Dunkle, Pollard and Stobart

(1985) sampled 122 evaluation studies and found that only 9% of them had an explicit a priori theory of the program and less than 30% contained any theoretical description of the casual assumptions underlying the program. Further, in a search of the literature for this review, it was difficult to find any literature dated after 1990. The most prominent literature regarding theory driven evaluation and program theory comes from Chen and Rossi (1983, 1987, 1989) and three special journal issues in *New Directions for Program Evaluation* (1987; 1990) and *Evaluation and Program Planning* (1989). As Bickman (1989) states: “If theory-driven evaluations are so good why are they not used more frequently?” (p. 388).

There are four significant problems with the theory-driven approach to evaluation that must be overcome to improve the frequency of program theory use. The first is the cost of theory-driven evaluation, both in time and money. Theory-driven evaluation can be expensive and time-consuming (Chen & Rossi, 1989). This approach to evaluation takes more time to plan and in most cases the evaluator will need to develop the program theory (Bickman, 1989). Further, compared to black-box experimental designs, the variables being measured may require new measurements to be developed. Although this presents a problem to the evaluator trying to win their bid on an evaluation contract, in the long run the expense put into a theory-driven approach will offer more to the development of social theory (Bickman, 1989). An evaluator can use the simple two-step approach described by Lipsey and Pollard (1989) to minimize the time and cost, and work to inform and educate program stakeholders about the benefits of the approach to the development of their program.

The second significant issue is the lack of available theory (Chen & Rossi, 1989).

There is a lack of theory related to most social programs and when the theory is present in academic sources it is often too general to be used to model specific programs (Chen & Rossi, 1989). However, as discussed earlier, the use of general social theory can offer a starting point for the development of theory for a specific program and a well-designed evaluation will contribute to building this body of knowledge.

The third problem with the theory-driven approach is its relevancy. This is probably the most difficult problem to overcome. Bickman (1989) states that program stakeholders often want to know if a program worked, not how it worked. Patton (1989) argues: 1) that the theory-driven approach is only applicable to outcome-based evaluations that strive for generalizability, and 2) that even then the approach is esoteric. Patton (1989) claims that to the front-line evaluators, the theory driven approach is too abstract to relate to program stakeholders and too complex to be useful. His argument is based on the more complex analytic component of a program casual model described by Chen and Rossi (1987). Patton (1989) supports generating program theory, termed 'the program's theory of action', from the stakeholders. Again, one way to overcome this criticism of the theory-driven approach is through keeping the program theory relatively simple and stressing the relevancy and usefulness of program theory to stakeholders.

The last issue raised about the theory-driven approach is the change that it brings to the role of the evaluator. This is a valid problem with two parts. First, the theory-driven approach demands more skill from an evaluator both in technical knowledge to construct the theory and in content knowledge of the program (Bickman, 1989). Despite, Bickman's (1989) claim that this approach requires an evaluator have the skills of a

philosopher-king, this need not be the case if an evaluator works in collaboration with the program developers. The evaluator requires the skills to extract implicit program theory from the stakeholders, but the stakeholders, presumably, will have the content knowledge of the problem that the program is attempting to address.

The second part of the changing role of the evaluator is the extent to which the evaluator, through the use of the theory-driven approach, becomes involved in the program and is therefore less neutral. As the evaluator develops the theory for a program, will he or she have the authority to make changes to the program implementation? This is another argument for the collaboration between the evaluator and the program stakeholders. The evaluator cannot conceptualize the program and develop theory without the consultation of the program stakeholders, staff and clients. Although some would claim that the evaluator should remain neutral and merely facilitate agreement from the stakeholders about the program theory, others argue that evaluators are, in fact, stakeholders in the program as they represent and promote the stake they have in the evaluation itself (Chen & Rossi, 1989).

There are solutions to the problems with the theory-driven approach to evaluation. There are means to overcome the issues of time, money and lack of theory as well as renegotiating the role of the evaluator and making the approach more relevant to program stakeholders. However, these issues appear to have affected the predominance of this approach to evaluation as demonstrated by the lack of literature in the last ten years. In its most comprehensive application, it is easy to understand why the theory-driven approach is not used. However, the use of program logic and the development of programs based on what is known in the social problem and social programming literature is imperative

to the development of theory. There are examples of programs being replicated and research from other jurisdictions being cited as the reason to start politically favorable programs in other places. The application of the theory-driven approach to evaluation allows for the appropriate use of such research and evaluations.

This section of the literature review described the theory-driven approach to evaluation. This description sets the context for the evaluation planning of the present practicum. Specifically, the use of the theory-driven approach to evaluation planning at the program planning stage is useful for promoting the articulation of the program theory and stakeholders' assumptions. The theory-driven approach is not without its failures, but also has a lot to contribute to evaluation. The integration of the theory-driven approach to evaluation with program planning allows for the unique application of this approach. However, there are also limits to the extent to which detailed theory can be developed prior to program implementation.

Evaluation use

Evaluation use is an important link in the program planning and modification cycle. In the rational planning model, programs are planned, implemented, evaluated and modified as necessary. Some argue that there is no reason for program evaluation other than the intended use by intended users (Patton, 1987). In fact, it is argued that a measure of the success of an evaluator is: "were the results used".

Levinton and Hughes (1981) define evaluation use and outline three types of use. Their initial definition of use, and the popularly accepted definition, is limited to the use of evaluation results (e.g. Shulha & Cousins, 1997; Weiss, 1987, 1998). Levinton and Hughes (1981) operationalize use with two criteria 1) a serious discussion of the results

about a particular policy or program, by stakeholders and 2) evidence that those engaged in policy or program activities would have thought or acted differently in the absence of the evaluation results. Weiss (1987) concurs with this definition of evaluation use, stating that evaluations have been used “when they begin to shape the way that decision makers think about an issue” (p. 17).

The three types of use are instrumental, conceptual and persuasive. Instrumental use of evaluation refers to the use of evaluations by program managers and operators to make decisions and solve problems about the program (Levinton & Hughes, 1981). The evaluation contributes to the program managers and stakeholders making wiser decisions about the program either in modification of activities, training of staff to improve implementation or to cease funding the program (Weiss, 1998).

Conceptual use refers to the influence of the program evaluation in assisting program stakeholders to understand what their program is and what it does (Weiss, 1998). Conceptual use refers to a change in the policy-maker’s thinking about an issue although this does not lead to action (Levinton & Hughes, 1981). When the organizational conditions are more responsive to change, the manager’s changed conceptual understanding can be translated into instrumental action (Weiss, 1998).

Persuasive use is also referred to as political or symbolic use of evaluations. It is the use of evaluation results to convince others to support a political position or to defend a position from attack (Levinton & Hughes, 1981). Within the program, the evaluation results are used to mobilize support for a position that people already have about changes to the program (Weiss, 1998). It is the use of evaluations to legitimate the program operator’s position and is used to persuade others for needed program resources.

Weiss (1998) added a fourth form of evaluation use: enlightenment. This form of use refers to the use of evaluation results as they influence people in other programs. This use refers to broad outcomes that are established based on multiple evaluations of similar programs (e.g. Head Start). Although the results of the evaluation may not be used in a particular program setting, they may contribute to a body of knowledge that influences people outside the program. This widespread influence of evaluation, in its contribution to social theory is, in part, the goal of theory-driven evaluation. It is the external validity of program evaluation results for use by other program sites or jurisdictions. The implications of evaluation use in evaluation planning during program planning are discussed in Chapter V.

Program Planning and Implementation

In a rational model of program planning, program evaluation is often conceptualized as the last step in a linear process (Kettner, Moroney & Martin, 1999). The steps of a rational planning method usually include first, identifying a problem or need; second, establishing program goals and objectives; third, designing a program, including a budget and information system; fourth implementing the program and finally, evaluating the program (Kettner et al, 1999). Often in reality the planning process is more cyclical rather than linear and as some component of the program is understood, planners must return to an earlier stage and make changes. For example, as obstacles to program design emerge, objectives of the program may be changed accordingly. Or once the program is implemented the planners may discover that the need for the program was underestimated. Planning is a continual process of making discoveries and making changes. At the end of the process, after the program is implemented, there is some kind

of evaluation of the program's interventions. Ideally, the evaluation will be used to direct changes to the program that improve the quality of the intervention or service to the program's clients.

Programs are developed and designed in a variety of environments. Organizational theory contributes to our understanding of the environments, internal and external to an organization, in which programs and policies are developed. Programs are planned through the development of micro policy, which is intended to regulate the implementation of the program. There are many models of policy development: the rational model, incrementalism, mixed scanning, the value criteria model and the garbage can model (Wharf & McKenzie, 1998). However a program or policy develops, whether rationally or through the 'policy window of opportunity' described in the garbage can model, it must pass through to the stage of implementation where the intent of the policy, micro or macro, may be distorted or lost.

Implementation is important to evaluation. The failure of a program cannot be determined unless there is first, some certainty that the program was implemented correctly. The theory-driven approach to evaluation emphasizes the need for implementation research in evaluation (Scheirer, 1987). A comprehensive use of the theory-driven approach includes the description of the implementation domain (Chen, 1989).

There are different approaches to understanding implementation. Palumbo and Oliverio (1989) outline four of these: top-down or backward mapping (Sabatier & Mazmanian); bottom-up or forward-mapping (Elmore, 1979); adaptive (Berman, 1980)

and evolutionary (Majone and Wildavsky, 1986). Each of these approaches has different assumptions about the best way to ensure appropriate implementation of programs.

The top-down approach is similar to Berman's (1980) programmed implementation process. This approach conceptualizes implementation as originating in a centralized organization with control deriving from the top. This view assumes social policy is formulated through a rational decision process and implementation is the next rational step that is to be executed with congruence and fidelity to the original plan (Palumbo & Oliverio, 1989). Sabatier and Mazmanian (1979) list the five required criteria for successful top-down implementation to take place:

1. the program is based on a sound theory relating changes in the target group behavior to achievement of the desired end-state (objectives);
2. the statute (or other basic policy decision) contains unambiguous policy directives and structures the implementation process so as to maximize the likelihood that target groups will perform as desired;
3. the leaders of the implementing agencies possess substantial managerial and political skills and are committed to the statutory goals;
4. the program is actively supported by organized constituency groups and by a few key legislators (or the chief executive) throughout the implementation process, with the courts being neutral or supportive;
5. the relative priority of statutory objectives is not significantly undermined over time by the emergence of conflicting public policies or by changes in relevant socioeconomic conditions that undermine the statute's "technical" theory or political support.

These five conditions are obviously related to federal macro-policy, but are relevant to micro-policy implementation as well. The authors describe how these five conditions are often not met, compromising the effectiveness of the top-down approach. First, the program objectives are often not based on sound theory in micro-program policy or even national or provincial statutory policy. Second, regardless of the form of the policy statements, the decisions and directives must be definitive and include the process of implementation. Third, those involved in implementing the policy statement of program description must be committed to the original program goals and must have the managerial skills to oversee and redirect program implementation accurately. Fourth, although this may be less of a threat to smaller program development, there must be environmental support for the program. The fifth point is also less imposing on a smaller program, but there must not be conflicting policies that impede the program from faithful implementation. Finally, whether on the program level or through provincial or federal law, these five conditions are difficult to achieve. Further, even when these conditions are met, the front-line worker can use their discretion in implementing a program or policy. The top-end centralized authority cannot fully control the actions of street-level bureaucrat (Lipsky, 1980).

The second approach to implementation, then, recognizes the influence of the front-line implementer. The bottom-up approach asserts that because the implementing staff work closely with clients, they should contribute to the development of policy. However, Palumbo and Oliverio (1989) caution that the discretionary power and closeness of the staff to the clients need not become a prescription for implementation in all circumstances. Their argument is that given the discretion of front-line workers, they

already have a significant impact on the direction of program implementation. However, including implementers in the process of either initial policy development or in the development of the implementation process may allow for a better evaluation of the problems and changes to the process of implementation.

The third approach to implementation recognizes that it is difficult to predict how the planned program or policy may need to change to achieve program objectives or the needs of the clients. The adaptive approach is articulated by Berman (1980) and distinguishes between adaptive and programmed implementation.

Programmed implementation is the approach that promotes the precise specification of policy implementation at the decision-making stage. This is similar to the top-down approach that specifies how a program is to be implemented prior to the implementation phase. At this stage, the mechanisms for implementation are clearly detailed so that implementation may be accurate. From this perspective, implementation problems are viewed as stemming from “three sources: (1) ambiguity in policy goals resulting in or caused by misunderstanding, confusion, or value conflict; (2) participation of too many actors with overlapping authority; and (3) implementer’s resistance, ineffectualness, or inefficiency” (Berman, 1980, p. 208).

Adaptive implementation, on the other hand, asserts that there are implementation problems because of the over specification of goals and the decision-making fails to include the relevant actors. Adaptive implementation supports only general, or even vague, descriptions of goals. Adaptive implementation recognizes that the environment in which policies are developed and then implemented are different, and that there must be leeway for adjustments and implementers’ discretion.

Adaptive implementation is concerned with establishing acceptable rules of the game that would allow multiple participants to bargain and compromise during the course of implementation (Berman, 1980, p. 211).

The programmed approach to implementation is appropriate when the goals are specific and the technology is definitive. For example, a standard financial benefit for a target group is limited in variation for implementation- there are only so many ways to get a check to a client. The adaptive approach, however, is most appropriate when the goals are ambiguous and the technology for achieving those goals is unknown or undefined (Palumbo & Oliverio, 1989). Based on these criteria, most human service interventions would employ the adaptive approach to implementation (Wharf & McKenzie, 1998). Similar to the bottom-up approach, adaptive implementation allows for more influence by the service delivers. However, the adaptive approach need not allow all the discretion in adaptation to lay with staff. Changes to program design and the program's theory can be revisited by the original program developers in consultation with staff.

The final approach to implementation described by Palumbo and Oliverio (1989) is the evolutionary approach (Majone & Wildavsky, 1986). This approach is similar to the adaptive approach in that both approaches assume that the programs must change while they are being implemented. The evolutionary approach sees program improvements through the implementation of the program plan: "as we learn from experience what is feasible, or preferable, we correct errors" (Majone & Wildavsky, 1979 as cited by Palumbo & Oliverio, 1989, p. 342). The evolutionary approach recognizes that planners cannot know in advance what will work and not work in implementation. It is through the

implementation that the conditions are better understood and the actions of the program adjusted.

Implementation Subsystems

Chen and Rossi (1983) describe six subsystems of an implementation system. These are worth reviewing here as they describe the areas of implementation that may be susceptible to implementation problems. The six subsystems are: the implementing organization, target groups, environmental context, characteristics of treatments, resources and interorganizational transactions. The implementing organization is the organization with the mandate to deliver the program. Its characteristics include authority structure, composition of personnel and existing standard operating procedures that affect how services are delivered. In COACH this will be the staff group that is assembled to deliver the program.

The target group subsystem refers to the extent to which the target group's participation and cooperation in receiving the service affects the implementation of the program. For example, in COACH, the plan is to implement a comprehensive family intervention component. However, the delivery of this component is contingent on a family's willingness to participate.

The environmental context refers to the environment in which implementation takes place. The environment contains other organizations, competing programs and political structures. The environment can impact on the program affecting the implementation of interventions.

The characteristics of treatment are the fourth subsystem of the implementation system. This is the subsystem that addresses the intrinsic nature of some treatments as

easier to deliver than others. Some treatments are capable of being delivered as intended, regardless of the activities of the person responsible for delivering them. In contrast services that allow service delivery discretion are much more difficult to assess in their accuracy of implementation. “Treatments that involve tailoring interventions to the characteristics of targets usually involve allowing considerable discretion to the frontline implementer, a circumstance that may considerably distort program intentions” (Chen & Rossi, 1983). This will likely be the most significant issue in the implementation of COACH: discretion of the program staff in implementation. Another characteristic of treatment is dosage. The amount of an intervention is an important concern in understanding problems of implementation.

The resources of a program is the subsystem that refers to the need for a program to be adequately funded in order to deliver the intended interventions. Without appropriate levels of funding, program staff may not be able to deliver services as planned.

The last subsystem is interorganizational transactions. This subsystem refers to the impact of other organizations that the program may rely on to deliver complementary services. For example, the willingness or ability of the Youth Emergency Crisis Stabilization System to respond to a student in COACH may affect the implementation of the program’s intended treatment to the child.

Chen and Rossi (1983) explain that the lack of a program implementation description leads to ambiguity in evaluation. A poor understanding of the implementation system makes it difficult for evaluators to assess if “the program or the implementation system were at fault in a demonstrated failure to achieve outcomes” (p. 299).

The program planning and implementation section of the literature review provides the context of the present practicum. The temporal replacement of evaluation in the rational planning process and the connection of implementation with evaluation are necessary to understanding the implications of moving evaluation planning to the beginning of the planning process.

Evaluation planning prior to implementation is somewhat limited. The extent to which the evaluation is planned, is based only on the theoretical model of the program and cannot include the issues that naturally arise through the implementation process. The application of the theory-driven approach prior to the operation of the program is helpful in laying a plan for the program to follow and the development of an intended implementation plan. However, it is important that an adaptive approach, as described by Berman (1989), is used to allow the program to develop as makes sense in the implementation environment. The rational model of planning and evaluation is only useful insofar as the program planners and implementers are open to adjusting program theory to include the unique characteristics of the implementation environment. The rational process must be cyclical, allowing the intended program model and evaluation framework to shift as the realities of program implementation are known.

The Political Nature of Evaluation and Planning

In contrast to the rational model of program planning is the political influence to the planning process. The rational model of planning and the theory-driven approach to evaluation planning do not include the influence of the perceived power of program stakeholders. The present practicum integrates evaluation planning with program planning making it difficult to discern the political nature of evaluation from program

planning. However, both are inherently political in their value-laden nature. I will first examine the nature of evaluation and then the planning process.

The political nature of evaluation comes from the role of values in program evaluation. Michael Scriven's work on values is explained in detail in Shadish, Cook and Levinton (1991). Scriven describes the four steps of the logic of valuing that are used to determine the value of a program. These steps are: 1) the selection of criteria of merit, 2) setting standards of performance, 3) measuring performance, and 4) synthesizing results into a value statement. Scriven claims that evaluation *is* the science of valuing and that through such a framework, an evaluator can objectively determine the value of the program. Scriven further asserts that the effect of a program should not be evaluated based on the goal of the program (as the theory-driven approach may suggest), but rather that the evaluator is less biased if he or she examines all the effects of the program and assesses how the program meets the needs of those served by the program.

Scriven's prescription about the science of valuing demonstrates the inherent nature of evaluation as a value-laden profession. Scriven assumes that the evaluator can remain value-free in determining if a program is 'good' or 'bad'. Although Scriven asserts that program stakeholders only want to know if a program is 'good' or 'bad' and if it is good, what about it is good, he fails to acknowledge the relative perception of such labels. The values of the stakeholders, which are likely not congruent, determine what is perceived as bad or good. For example, some stakeholders of COACH would define the program as 'good' if it gives non-attending children a place to go to school. In fact, this would meet the requirements of the Public Schools Act of Manitoba (SM, 1987). However, others would not assert the COACH program was 'good' until it succeeded in addressing the

underlying issues that had prevented the child from attending in the first place. If evaluation is the science of valuing, then there has to be a way to make the implicit assumptions of stakeholders and the evaluator explicit. McLemore and Neumann (1987) cite Myrdal (1969) to make this point: “Research is always and by logical necessity based on moral and political variations, and the researcher should be obligated to account for them explicitly” (p. 85).

The political nature of planning suffers from the same value-laden impact as evaluation. The value criteria model (Dobelstein, 1990 described by Wharf & McKenzie, 1998) applies a similar four-step valuing process as that described by Scriven for program evaluation. First, the problem and policy alternatives are defined; second, criteria are established to evaluate the alternatives; third, data is gathered to assess each alternative and fourth, an alternative that maximizes the value criteria is recommended. This approach makes the values of the planning stakeholders explicit, but does not address their likely incongruence.

The garbage can model to policy-making (Kingdon, 1995 described by Wharf & McKenzie, 1998) accounts for the diversity of stakeholder values. Although the title appears to minimize the importance of policy and program development, the approach considers the political will of the policy actors including the funding government and their obligation to public perception. This model identifies three streams of processes: problems, policies and politics. The window of opportunity for a policy to develop occurs when the three streams come together. The problem must be recognized by the government and this often means it must be a problem that is recognized by the public. The stream of policies or solutions always exists, with different possible solutions

floating around in a 'primeval soup'. Some solutions to problems are taken seriously, while others are not. The political stream is the recognition of the role of public opinion, ideological shifts in power and lobbying interest groups. The contribution of this perspective is the recognition that the identified problem and corresponding solution are identified based on political pressure and will, rather than some objective criterion such as the number of people affected by the problem, or the cost of leaving the problem unattended. This perspective would acknowledge the role of the rash of arsons in Winnipeg in 1999 as contributing to the recognition of the problem of young children being out of school and thus, the political will to develop the COACH program.

In addition to these perspectives of policy development, the political economy perspective suggests that the stakeholders of a program will assert their values through the organization or program. Given this assumption, the stakeholders of a program would likely define the problem, its cause and the solution in terms of meeting their own group or organization's needs. For example, if the problem of the children in the COACH program is defined by the behavior disorders of the children, then the psychologists within the program can promote their set of intervention strategies; if it is defined by dysfunctional family dynamics, then the social workers can promote their strategies for interventions. This distinction can fall down the lines of professional legitimacy or organizational legitimacy. For example, one organization may provide services from more than one discipline. The political economy perspective allows one to examine specific organizations and networks of organizations to understand how their relations may be influenced by their pursuit of legitimacy and resources.

The Role of the Evaluator

McLemore and Neumann (1987) point to a traditional definition of program evaluation: “a pronouncement concerning effectiveness of some treatment or plan that has been tried or put into effect” (p. 83, citing Deming, 1975). The authors use this definition to demonstrate how evaluation has been temporally placed in relation to programs. Language in the past tense, assumes an evaluator is external to the program and is simply there “to ensure adequate policing of federal funds” (McLemore and Neumann, 1987). Their argument is that an evaluator must recognize and respond to the political environment in which evaluation exists through a stakeholder approach with more activity than this definition allows. This recognition of the relationship between the evaluator’s role and the place of evaluation (i.e., after program implementation) offers to the possibility that the evaluator’s role could become more integral to the program and the politics by introducing evaluation at the time of program conception.

In the debate between Wodarski and Hudson (1994), Hudson argues that the role of the evaluator should be as a contributor to the program development process, at least in a global sense. He states that social workers should make their value positions explicit and use their collective voice to initiate action at the policy level. This is directed at a provincial or federal government level, but may have implications to the program development level, as well. Chen and Rossi (1989) state that the evaluator is a policy actor insofar as the evaluator holds a specific interest in the evaluation itself. McClintock and Colosi (1998) are more explicit describing the role of the evaluator stating that evaluators should transform from their roles as “unrealistic neutral informants into policy actors” (p. 672) and “infiltrate policy debates” (p. 670). The assertion of these latter

authors is that through the use of theory, evaluators can influence policy-makers to articulate the causal assumptions behind a policy or program. There may be greater potential for influence when evaluation planning is placed in the program development stage. The evaluator can offer information to the stakeholders from the literature while he or she is reviewing related social theory to develop the causal model of the program. This is the theory-driven approach. This should lead to more informed decision-making, influencing the development of program components. As implied in the above description, there appears to be a continuum of ways to understand the evaluator's role: from neutral informant to involved policy actor.

The role of the evaluator is a sensitive one that should be played with some caution. Although there are many benefits to the evaluator's contribution to program conceptualization and development, whether prior to program implementation or after, there are practical and ethical implications. These are further addressed in Chapter V.

This section of the literature review outlined the basis of the political and value-laden nature inherent in evaluation and planning. The choice of problems and coresponding solutions demonstrate the values of the planners. The use of criteria to evaluate a program as good or bad, highlights the role of valuing, inherent in evaluation. The role of the evaluator was discussed to highlight the continuum of involvement of an evaluator from neutral informant to policy actor. The integration of evaluation planning with program planning has implications for the role of the evaluator.

Conclusion

The literature assists in laying the theoretical foundation for the practicum activities and analysis. The sections addressed here were: interorganizational collaboration,

including integrated service delivery; the theory driven approach to evaluation; evaluation use; program planning and implementation and the political nature of evaluation and planning. Each of these sections is relevant to the present practicum. The relationships between the COACH Steering Committee members are understood through the interorganizational relations literature, particularly the political economy perspective. The approach to the present practicum intervention, an evaluation plan for the COACH program, is a theory-driven approach. The program planning and implementation literature expands the student's understanding of the issues that arise in the implementation of a program and evaluation. How a program or evaluation plan is implemented can vary and the process is generally wrought with potential threats to implementation fidelity. Evaluation use literature provides the basis for understanding potential new uses for evaluation when it is integrated with program planning. The political nature of evaluation and planning and the changing role of the evaluator provide a context to understanding the implications of moving evaluation planning to the front-end of program planning. This review provides the basis for the practicum activities and the analysis of those activities.

Chapter III

Practicum Activities

This chapter reviews the background and activities of the practicum. In the first section, the process for Treasury Board Submissions is described. The role of the Treasury Board Financial Analyst is discussed to provide a context to the COACH program proposal process. This process is described from the initial working group recommendations that identified the need for a program like COACH, to the present stage of the program proposal process. In the second section, the activities of implementation and evaluation planning are outlined. This section is substantially abbreviated with reference to four lengthy appendices: A) the COACH program proposal, B) the literature review of the program, C) the Draft I version of the evaluation plan and D) the final version of the evaluation plan. The other activities of the practicum are reviewed in Chapter IV.

Background

Treasury Board Submission Process

The Treasury Board is a sub-committee of the provincial government cabinet. The Treasury Board is responsible for the fiscal management and reporting of the Manitoba government (Treasury Board Secretariat (TBS), May 2000). This includes the annual budget process for government departments as well as other expenditures that may arise throughout the year and require approval. Treasury Board consists of five ministers, and the Minister of Finance (Honorable G. Selinger) is the chair. The Board meets every Tuesday morning.

The Treasury Board's responsibilities are more complex than the simple description above and require support from a multitude of staff. The Treasury Board Secretariat is the primary office of their support, but other resources available to the Treasury Board include the Federal- Provincial Relations and Research Division, the Comptroller's Division, the Civil Service Commission, the Policy Management Secretariat and other provincial offices. The emphasis here is on the role of the Treasury Board Secretariat in the submission and approval of the COACH proposal.

Financial Analysts at the Treasury Board Secretariat complete the actual work for the annual estimates process and the ongoing submissions. There are additional operational units within the secretariat, but the Financial Analysts work within one of three analytic units: Human Services, Economic Development and Resources and Community Services. The analyst for the COACH Project is responsible for the Department of Family Services and Housing, including the Healthy Child Initiative, and works in the Human Services operational unit. In this role, the analyst is responsible for:

1. Providing ongoing analysis, advice and recommendations in support of the Treasury Board decision-making process related to program, policy and financial direction to departments;
2. Monitoring, analyzing, and advising on departmental activities to ensure the effective, efficient and consistent delivery of government policies and priorities;
3. Providing support and assisting with the activities of the Fiscal Planning Office (an operational unit within the secretariat);
4. Providing advice and guidance to assigned departments in the preparation of their estimates;

5. Evaluating whether departmental estimates meet fiscal guidelines;
6. Providing advice and recommendations to Treasury Board on program, policy and resource allocation issues;
7. Communicating and reviewing Treasury Board decisions with assigned departments;
8. Reviewing departmental Treasury Board Submissions and providing assessments and recommendations;
9. Participating in departmental reviews and studies;
10. Providing advice to departments on Treasury Board guidelines and procedures, policy and financial issues;
11. Monitoring the program and financial status of departments;
12. Analyzing and reporting on departmental financial information to ensure compliance with government policy and financial objectives; and
13. Working with senior departmental personnel to ensure that the necessary communication between Treasury Board and departments is maintained (Treasury Board Secretariat, 1999).

This extensive description outlines the relationship between the Treasury Board analyst and the departments with whom they work. The role of the analyst is to protect the provincial purse and ensure that the recommendations made to Treasury Board are financially sound and promote the government's objectives. There is room for the analyst to work with managers within the department to encourage changes to program plans that will be more likely to meet with Treasury Board's approval. The analyst works with the

assigned department intensively through the estimates process prior to the final provincial budget and then throughout the year.

When the provincial government determines the annual budget, money is earmarked to meet particular government priorities. As the Family Services analyst explained it to me, the budget opens a bank account with a particular amount of money set aside for a particular goal. As departments wish to access the money in these budget accounts, they submit proposals outlining how their program will meet the government objectives for which the money was earmarked. This process is considered by some to be very closely managed by Treasury Board. Another alternative, for example, would be that the government department managers are given the money in their annual budget and are responsible for directing activities that meet the decided goal. However, in Manitoba the process for accessing earmarked funds is through Treasury Board Submissions.

Treasury Board Submissions are a prescribed format for matters requiring Treasury Board approval. Submissions identify the decision(s) to be made and present the information needed by Treasury Board to make a clear and concise decision. There are two kinds of Treasury Board Submissions. 'Category A' includes major items referred to as 'A minutes'. These are items considered to be significant either in terms of financial cost or policy implications and require the specific review by Treasury Board. The actual submission is reviewed as well as the analysis of the item provided by the Secretariat Financial Analyst. 'Category B' includes minor items referred to as 'B minutes' that are of a routine nature and can be reviewed with approval recommended by secretariat staff. The Treasury Board reviews summaries of these items, but not the actual submission.

The COACH proposal is of significant policy and financial implications and it is considered an A Minute. The proposal that goes to Treasury Board includes a three to four page analysis of the program proposal completed by the Financial Analyst; a three to four page summary of the program completed by the Healthy Child Initiative staff and attachments. The final proposal that the Steering Committee approved would be attached. The analysis and summary of the proposal would be at the front and the original program proposal and other attachments (in the case of COACH, the literature review and evaluation plan) would be included behind these.

Treasury Board assesses proposals put forward by departments in terms of: “the current strategic policies and priorities of government; the financial cost of commitment to the government; the economic and/or social benefits to Manitoba and any political or intergovernmental issues” (TBS, May 2000). The Financial Analyst for Family Services stated when asked, that she uses “common sense” as a the criterion for evaluating policies. Primarily, she looks are whether the program is economical, efficient and effective and tries to ensure the program proposal does not duplicate existing services. The analyst stated that she examines similar programs and their evaluations from other jurisdictions, when they are used locally in support of a program, to understand if the results were positive and valuable.

COACH Proposal Development Process

There was a lot of preliminary work that was completed before the proposal for the COACH program was developed. It is valuable to review this to understand the long process that takes place before a program is developed and formally proposed.

In 1997/98, several school divisions, including Winnipeg #1, asked the Child and Youth Secretariat (now the Healthy Child Initiative) to facilitate a working group of government and quasi-government service providers to children, under the age of twelve, who have extreme emotional and behavioral problems. The consensus of this working group was that these children and their parents are of major concern to the child and family services, school, mental health and justice service systems (Manitoba Healthy Child Initiative (HCI), March 2000). The working group made four recommendations:

1. that the mental health system provide an inventory of existing services and programs for children under twelve;
2. that the Youth Emergency Crisis Stabilization Services (YECSS) be supported and identified as the central triage as entry to the system;
3. that mental health dollars be redirected to children under twelve and their families and
4. That a 'best practice model' of focused intervention with these children and their families be developed and evaluated (HCI, March 2000).

There has been progress in meeting these recommendations. The fourth recommendation resulted in the current Steering Committee of COACH to "develop a transdisciplinary wrap-around model for a demonstration project for children with severe emotional/ behavioral problems and their families" (HCI, March 2000).

In the Estimates Process of 1999/00, prior to the change in the provincial government, the Child and Youth Secretariat was approved a portion of money "to demonstrate positive outcomes for children with extreme behavioral/ emotional needs and their families, including the approval of start-up funding" (HCI, March 2000). In March 2000

the preliminary draft of the COACH project was submitted as an A minute to the Treasury Board through the Financial Analyst. Based on the recommendations of the Financial Analyst, the COACH program was approved in principle with an initial \$25,000 directed to developing a detailed implementation plan that is 'comprehensive, cost-effective and culturally appropriate'. The Financial Analyst provided specific recommendations to improve the program proposal and requested a timeline for the implementation of the program plan.

The Steering Committee met in April and May and a writer for the implementation plan was hired June 1, 2000. The writer and I worked together to develop an implementation plan and reviewed it with the Steering Committee on June 19, 2000. The Steering Committee met again in July and by mid-August, the new proposal went forward to the Financial Analyst who will eventually present recommendations to the Treasury Board. The delay at this stage was primarily related to key people being on holidays and then a turnover in the Financial Analyst position at the Treasury Board Secretariat. Throughout this time, the staff member from HCI worked with the Financial Analyst from Treasury Board to fine tune the document for approval prior to it being submitted to Treasury Board. Not all of the analyst's recommendations for revisions were met by the Steering Committee and this will likely be highlighted to the Treasury Board. It was expected that the submission would be presented to the Treasury Board in August, however the legislature, and hence the Treasury Board, went into recess for several weeks immediately prior to the COACH program submission. It is anticipated that the Treasury Board will review submission by mid-October. This, of course, has caused delays for the implementation of the program.

The activities of the present practicum primarily took place from April to August: after the funding for the development of the implementation plan and before the next submission to the Financial Analyst in early August. During this time, I was involved in the development of program outcomes, the implementation plan and the evaluation plan. This process will be briefly reviewed here.

Implementation and Evaluation Planning

Developing Outcomes

Prior to beginning work with the implementation plan writer (to be referred to as the writer), the evaluation team of the Healthy Child Initiative met to develop outcomes and an evaluation framework for the program. The discussion centered on the perceived causes of the problem of non-attending children, primarily the role of non-participating parents in following the Emotional and Behavior Disorder Interdepartmental Protocol for obtaining needed funding for their children. The EBD protocol is a process that requires the key people involved with children with an emotional or behavior disorder to meet as a group to establish a 24-hour coordinated plan with the family's agreement and across departments before receiving funding for classroom support for the child. One belief discussed at this initial meeting about outcomes was the need to improve the parents' willingness and ability to recognize their child's needs and work with professionals to develop the 24-hour plan. A series of outcomes for parents, possible interventions and data collection instruments were discussed. There was an agreement that an evaluation of each child and family was necessary as the specific goal for each child and family would vary greatly. An initial evaluation design proposed a series of case studies.

One source of theory in the theory-driven approach is the prior theory and research from academic sources (Lipsey & Pollard, 1989). I began a review of the literature about children with emotional and behavior disorders. At this initial stage the emphasis was on classroom based interventions and parent training programs.

The next stage was working with the writer who began on June 1, 2000. After meeting together, we began to meet with members of the Steering Committee to extract their conception of the program and develop an understanding of the issues that still needed to be agreed to between the committee members. Through these meetings, the writer and I developed an idea of the implicit program theory of the stakeholders (Lipsey & Pollard, 1989). The difficulty at this stage was determining the differences in perception among stakeholders about the program. The belief about the underlying cause of the problem was not congruent. Some viewed the cause of the problem of the non-attending children to be the children's unmanageable, often violent behavior while others saw the problem stemming from dysfunction in the family of origin. This leads to a different emphasis in interventions. Although COACH was developed to be multi-faceted, gaining recognition of the family intervention component was a struggle on a committee with many people from education who emphasize the sole need for an appropriate day program.

Through the ongoing literature review, the program's outcomes were established. Stakeholders contributed to the rewording of outcomes and suggested additional outcomes. The three categories of outcomes are: child, parent and program. The initial program proposal submitted in March 2000, only listed one outcome objective: to return children to the existing school system with level three funding (that is, the highest level

of funding for a full-time teacher's assistant). This is the goal of the program and was listed with a series of process outcomes about the program's implementation. The development of the outcome objectives attempted to set the broad criteria for the children and parents in the program. The program outcomes are related to an improved service delivery system. The outcomes for the program are listed in the COACH Program Proposal in Appendix A. This is the program proposal in its entirety as submitted to the Treasury Board in August 2000.

Developing the Implementation Plan

Early in the implementation planning stage, I wrote up the outcomes, a brief description of the evaluation framework and the literature review in draft format. Throughout the process each piece became more refined. The outcomes shifted slightly as the literature provided direction. The literature review itself, in a draft form, informed the writer of key pieces of program intervention and provided some of the language for the program description. Eventually the literature review was attached as an appendix to the implementation plan, but part of it was also incorporated in the program plan.

The writer and I met with the Steering Committee members and staff from external agencies that were believed to have experience to offer to the plan. The following is a list of those who were consulted during the implementation plan writing:

Steering Committee members:

- Representative from Child and Family Services
- Program Manager from Child and Family Services
- Representative from Winnipeg School Division #1, Student Support Services
- Representative from Winnipeg School Division #1, Superintendent's Office

- Representative from the Child Guidance Clinic (writer alone)

- Representative from the Healthy Child Initiative (writer and student separately)

External Programs:

- Staff from the Triagency Program in White Oaks School Division.

- Staff from the school at the Knowles Residential Center

As the writer and I met with Steering Committee members, the literature review began to evolve. Almost every committee member had an idea of what program in another jurisdiction shared similarity with COACH or what part of the literature should be included. The representative from Child and Family Services suggested that the parents of the children may be labeled ‘neglectful’ and suggested that the literature review examine interventions with such parents. As this was near to the beginning of the literature review and was a primary piece of the program that need to be added before the proposal went back to Treasury Board, a significant piece regarding interventions with ‘neglectful’ parents was added to the literature review. Other committee members suggested programs from other jurisdictions that should be reviewed. One member from Winnipeg SD #1 suggested that the Minister of Family Services was asking if the COACH program was similar to a program from Ontario called Earls court. There had been a recent seminar on the program. As this program appeared politically favorable, it was examined in the literature review and comparisons to COACH were made. The final copy of the literature review is provided in Appendix B. This was included as an appendix to the program proposal and submitted to Treasury Board. Because of the delay related to holidays and a new analyst, the program implementation proposal was not

submitted on schedule. The evaluation plan was developed and also submitted with the program proposal to Treasury Board.

Developing the Evaluation Plan

The evaluation plan developed out of the outcomes established in the implementation plan. Although some may argue that the evaluation should emphasize program process, rather than outcomes, the HCI emphasizes the use of outcomes in all of the program evaluations. The framework for the evaluation was a series of case studies using a repeated measures design. This was fairly straightforward for the child outcomes, but less so for the parent outcomes. The difficulty with planning an evaluation for this type of individualized program is the guesswork involved. Once the program is implemented, there will be a clearer idea of the program components for parents and the best way to measure changes. This impacts the effectiveness of the theory developed prior to program implementation. The theory for the parent component of the program will have to be refined after it is implemented. A significant implementation problem with the parenting component will likely be the willingness of the parents to participate. The use of a stronger process-based evaluation would address this. The evaluation plan was developed in two versions. The first is a lengthy discussion of the issues of evaluation for this program- intended for the evaluators of the program. This is referred to as Draft I and is included in Appendix C. The second version is shorter and intended for the Treasury Board. This final copy is included in Appendix D. The student completed the evaluation plan as the primary activity of the practicum.

The Theory-driven Approach

The development of the program plan and the evaluation plan was based in a theory-driven approach. As described in Chapter II, the application of this approach can range from a simple description of the program's causal model of the program's (Lipsey & Pollard, 1989) to the more complex application developing theory for as many as six domains of a program's theory (Chen, 1989). In the present practicum, the theory-driven approach was used, but not in its most comprehensive form. Social theory literature directed the development of program outcomes and interventions as well as the conceptual causal model (Lipsey & Pollard, 1989). This model connects the program interventions to outcomes and was developed based on findings in the literature and the perception of the program stakeholders. The use of the theory-driven approach at this time of program planning has laid the foundation for the continued development of theory after the program has been implemented.

In terms of normative theory, a conceptual structure model of the program was developed in the first program proposal, submitted in April. This is a diagrammatic description of the program components. A program mission statement was not developed, nor any overarching program value statements, but the program proposal outlines principles of program delivery and several process objectives describing program interventions and their delivery. The evaluation plan further describes how the interventions are conceptualized and how they will be tracked and measured. The piece of normative theory that is missing, is related to the implementation environment. Theory for this domain is typically developed after the program is operating and describes the unique features of the implementation environment (Chen, 1989). An adaptive approach

to implementation and an assessment of the program's theory after implementation will be necessary to ensure the a priori theory is applicable.

Conclusion

This chapter synthesized the relevant background and activities for the present practicum. The process of Treasury Board submissions and the process of the COACH proposal were reviewed along with the process of planning and evaluation, including the application of the theory-driven approach. This chapter was brief as it was intended only to provide an outline of the basic activities of the practicum. Further detail of the practicum interventions is offered through the inclusion of the four appendices: A) the COACH Program Proposal, B) the literature review, C) Draft I of the evaluation plan and D) the final evaluation plan.

Chapter IV

Student Evaluation

This practicum had several objectives, outlined in the introductory chapter. They are repeated below and provide the structure for this chapter.

Primary Learning Objectives:

- To gain knowledge and experience in working with a diverse group of program stakeholders.
- To have the experience of working as a team to develop an implementation plan.
- To develop an evaluation plan for a collaborative program.

Secondary Learning Objectives:

- To improve skills related to diplomacy, verbal and written communication and presentation through work with a diverse group of stakeholders.
- To learn more about the day-to-day activities of professional program evaluators.
- To participate in educational opportunities related to children, youth and families as they are available.
- To develop a thorough understanding of service delivery models and evaluation models for collaborative or coordinated programs for multi-need children in school and in their homes as related to the COACH Project.
- To learn more about the process of program proposal development, submission and funding for a cross-department initiative.

The methods for student evaluation were established in the practicum proposal and include: 1) the student's ongoing documentation in a practicum log for the purposes of self-assessment; 2) feedback from the evaluation team of the Healthy Child Initiative; 3)

feedback from the Steering Committee of the COACH program and 4) feedback from the practicum advisor.

A practicum log was kept and is used as the basis of this chapter. In consultation with the practicum advisor, feedback from the Steering Committee was not solicited. It was decided that there was not enough interaction between the committee and the student to allow the feedback to be useful. However, feedback was received from the implementation plan writer on the student's role in the planning phase and from the evaluation team regarding the draft and final forms of the evaluation plan. This feedback was positive and there were no issues about the student's work reported. However the ongoing and informal feedback provided a better opportunity for learning. This is discussed further below. The practicum advisor also provided verbal feedback to the student on the literature review, program proposal and evaluation plan and this is also considered in the student evaluation.

Primary Learning Objectives

The primary objectives for the practicum were met. The planned activities of working with the Steering Committee, participating in the implementation planning and writing the evaluation plan were all completed. I gained knowledge and experience through working with a diverse group of program stakeholders, worked as part of a team to develop an implementation plan and I developed an evaluation plan for a collaborative program.

My performance in working with a diverse group of program stakeholders was adequate. The frustration I had was expressed through the practicum log rather than inappropriately to program stakeholders. There was a lot of frustration with the process

that came from several sources. The first was the consistent insecurity about the program's survival, which at the beginning seemed like a threat to the present practicum. The second was the inconsistent perceptions between Steering Committee members. As the writer and I met with different stakeholders, it seemed as if there were two or more programs being planned. One stakeholder would see the COACH program simply as an alternative classroom program and others would emphasize the program's family intervention component as the most important. There was disagreement about the role of the program coordinator versus the home support social worker and the coach. It was hard to believe that this group of people had been planning the program together for two years off and on. A third source of frustration was related to the timing of planning the program in June when educators are exceptionally busy and then developing the evaluation plan in July and August when people are typically on holidays. The committee members were all very rushed and busy through the month of June when the writer and I were trying to meet with them. For example, in one short meeting with a committee member the writer and I were left twice so that the administrator could take important phone calls. This lack of time for program development is also related to the high status of the Steering Committee members. The COACH program Steering Committee is only one small part of their responsibilities.

I think I gained knowledge and insight into the dynamics of working with a diverse group of stakeholders. I have a strong theoretical understanding of interorganizational relations and some first hand experience working with a diverse group of stakeholders. However, being present at meetings to observe the group's dynamics and meeting with

stakeholders one to one further contributed to this understanding. The benefits and problems of interorganizational collaboration are discussed in further detail in Chapter V.

The second learning objective, working as part of team to develop the implementation plan, was met. I worked with the writer for three to four weeks and wrote the literature review, the abbreviated version of the evaluation for the program proposal document and the program objectives. I think my work in this area was above average and without issues. A feedback form for the writer was developed in consultation with the practicum advisor and a blank copy of the form is included in Appendix E. The writer's feedback on the student's work was exceptional. The writer ranked the student with the highest score and only gave exceptionally positive feedback. The ongoing informal feedback with the writer was more valuable. The writer provided feedback about the formatting of the literature review and the way it was introduced. This was valuable in developing insight about how to write for stakeholders, rather than professors. Although I have had some of this experience, I did view the literature review as an academic exercise when, to be useful, it needed to be accessible to Steering Committee members who would not have the time to read the entire document. To compensate for the length and academic format of the literature review, I tried to provide a detailed introduction and table of contents so that a reader could go to a particular section of the paper without reading the whole thing. In the end, the verbal feedback about the literature review from the committee was positive. The literature review was attached to the COACH program proposal and submitted to Treasury Board.

My work on the outcomes and abbreviated version of the evaluation was directed by the suggestions for revisions made by the Steering Committee. This was part of the planning process. There were no concerns with my work as far as I know.

The work of evaluation planning, the third primary learning objective, was interrupted with members of the evaluation team being on holidays and the practicum advisor being at a conference. This appears to be the reality of a summer practicum. The format for developing the evaluation plan was for the student to prepare a draft, meet with the evaluation team and then prepare the final report. Formal feedback was sought through a form given to the evaluation team after the final evaluation plan was complete. This form requests feedback about the draft and the final version of the evaluation plan. As it worked out, each member of the evaluation team gave feedback at different times between the draft copy and the final copy. Further, because these interim meetings were with individual members of the evaluation team, there was contradictory direction from the evaluation team members about the needed evaluation design, frequency of data collection and use of particular measurement instruments. Despite the student's frustration through this time, in the end all three members of the evaluation team provided feedback on the draft evaluation plan that contributed to the development of the final plan. There is room for further refinement in the final plan that likely will not occur until after program implementation. The evaluation plan is tight and logical at this stage, but there will likely be changes once some of the program implementation issues are understood. The most significant difference between the draft and the final report was that the draft was written for an audience of program evaluators and was tentative with suggestions and a discussion of issues related to evaluation design and measurement. The

final copy was written for Treasury Board; thus it was concise and written in language that was certain about what the evaluation would and would not do. The final copy of the evaluation plan was attached to the COACH program proposal and submitted to Treasury Board.

All three members of the evaluation team provided formal written feedback after the final copy of the evaluation plan was complete. The form was developed in consultation with the practicum advisor and a blank form is included in Appendix E. The feedback from the evaluation team regarding the draft and the final copy was positive. The team indicated that the evaluation plan was adequate in capturing the main program components for evaluation; the evaluation design was reasonable and the final evaluation plan incorporated the suggestions made about the draft. Overall, there were no complaints about the student's work.

Secondary Learning Objectives

There were five secondary learning objectives and throughout the practicum some were met more completely than others. The first is related to improving skills related to diplomacy, communication and presentation to a diverse group of stakeholders. I think that I gained experience, through this practicum, in observing and working with a diverse group of stakeholders. At times in Steering Committee meetings I was frustrated by the lack of clear language. There seemed to be more than one conversation going on and a lack of understanding through the use of different language. There was often also a group frustration over which copy of the program proposal was the most current. At some meetings there was less tension than others and because I felt somewhat removed from the group I could, for the most part, observe the tension without feeling a part of it. I

think that diplomacy is likely one of the most important skills in interorganizational collaboration and although my diplomacy was not tested in the same way as the Steering Committee members, I could observe the difference between those with the ability to be diplomatic in a particular moment and those without it.

As I was present at Steering Committee meetings, I became more involved. I cited literature in discussions about program interventions. At the smaller meeting in July, I was very involved in clarifying what was written in the implementation plan and where the writer and I found discrepancies in the perceptions of Steering Committee members. This increased involvement was due, in part, to the fact that the writer had finished her contract, but the Steering Committee still needed to resolve some issues.

There was little significant discussion about the evaluation plan. The program logic was discussed, but Steering Committee members did not have the opportunity to provide direct feedback to the student about the evaluation framework. Given the uncertainty of the program's approval and the number of immediate issues that the committee had limited time to resolve, the introduction of the detailed evaluation framework was not possible. However, the stakeholders' implicit program logic was solicited through individual meetings. Through committee meetings the program's causal model was discussed in relation to the program's structure. Committee members did provided input into the program outcomes and objective indicators used to measure program success. The outcomes were included in the program proposal. The indicators were considered in the evaluation plan. At the final meeting I attended in August, I gave a summary of the evaluation plan and highlighted the issues that would require the committee's attention. I

think, overall, my role in working with the Steering Committee was appropriate given the circumstances.

The second learning objective, to learn more about the day-to-day activities of professional program evaluators, was also achieved. I met with the two primary evaluators from the Healthy Child Initiative and discussed their work and issues in evaluation planning as well as their own perception of the work demands. It was hoped that there would have been more of an opportunity to shadow the evaluators, however due to a light summer schedule this was not possible. The topics for discussion with the two evaluators included the involvement of stakeholders in evaluation planning, data management and data analysis problems and issues in results presentation. There were many interesting points in the discussion, one of which has particular relevance to the implications of the HCI method of integrating evaluation with program planning. Through the HCI, the evaluator's plan evaluations through consultation with stakeholders. This is used as an opportunity to promote the ownership of the program and thus, the sustainability of a program in particular sites. That is, the evaluators will try to involve the local stakeholders of a program in evaluation planning in order to also secure the stakeholders' interest in implementing the program accurately. For example, in the province-wide program, Baby First, the community nurses were engaged through sessions held by the evaluators in each of the regional health authorities. Through working with the program staff with regard to the evaluation process and their role in data collection, the hope is that the person will 'buy-in' to the program. This has implications to the use of evaluation in program planning, or early program implementation stages.

The third objective included participating in educational opportunities related to children, youth and families were met through my attendance at two lectures. There were three opportunities and I participated in two. The first presentation was in early May and Dr. Satay Brink, the director of the National Longitudinal Survey of Children and Youth, spoke about the survey and the initial results. The seminar focused on the results of the survey rather than the methodology, but was informative nonetheless.

The second presentation was part of the Pediatric Lecture Series at the Health Sciences Centre. Dr. Dan Offord spoke about the impact of poverty on children. Dr. Offord is the primary researcher for the Ontario Health Study from the 1980's and discussed the 'casualty class of kids'. These are children that grow up, not to contribute to society, but take from it. To reduce this class of children, there needs to be both universal as well as targeted programs for children. Dr. Offord is also the author of the Early Development Inventory used to assess children's readiness to learn when they begin school.

Although these seminars were not directly related to the COACH program, they provided insight into the picture of children's health in Canada and current thoughts about solutions. The relevance to COACH is in how the program fits on the continuum of needed services to vulnerable children.

Through the literature review and the meetings with Steering Committee members individually, I gained a thorough understanding of service delivery and evaluation models for multi-need children as related to the COACH Project. This was the fourth learning objective. Although there is a plethora of literature in this area, I think that the literature review was fairly thorough in its coverage of models related to the interventions of the

COACH program and well written, for the most part. The writer, who used the literature review to assist in the implementation plan, thought it was very valuable for her task. Further, the Steering Committee expressed appreciation for it. One committee member stated it was one of the most thorough literature reviews of the topic that she had ever seen.

I learned more than I expected about program proposal development, submission and funding for a cross-department initiative, the fifth learning objective. My understanding of the process was developed through meeting with Leanne Boyd from the Healthy Child Initiative and the Financial Analyst from the Treasury Board Secretariat. Through these meetings I came to understand the process in detail. This was a very valuable experience.

I have used the objectives of the practicum as my guide to assessing my work. I have met the expectations I had in this practicum and I have gained knowledge and experience I would not have had otherwise. I have gained insight into the planning process and felt the uncertainty and frustration of planning in the 'real world'. I also think that the skills of working diplomatically with others, particularly with an interorganizational committee continue throughout one's professional life and I have had only a brief connection to those dynamics through this practicum.

The evaluation planning could have gone more smoothly if the order of feedback was better organized. This was a difficulty due to the time of year and likely my inability to anticipate the scheduling problems. In retrospect, it would have been better if the draft was read by the practicum advisor and revised and then read by the evaluation team with one meeting between the student and the evaluation team. The final copy of the evaluation plan then could have been completed and the formal feedback form sent out to

the evaluation team. However, the chaotic reality of a well-intended rational plan seems to exemplify the planning process in this practicum. The influence of the political world disrupts textbook intentions.

Chapter V

Implications and Conclusion

The intent of this chapter is to discuss the implications of the practicum activities in view of the literature. This is the most interesting piece of practicum work- converging theory and practice in order to strengthen one's understanding of a particular process and contribute to a larger body of knowledge that can be used by others. Implications are discussed in relation to the following areas: 1) the dynamics of interorganizational collaboration in program planning; 2) the political nature of planning and evaluation in government; and 3) the integration of the theory-driven approach to evaluation with program planning. Following this discussion, a review of the student's experience in using this approach is offered to examine some the 'real world' experience of applying the theory-driven approach to evaluation in planning. The chapter concludes with a summary of some of the benefits and drawbacks of using this approach to planning and evaluation.

Interorganizational Collaboration

The members of the COACH Steering Committee are from three general service systems: family services, education and mental health. The members represent at least five organizations and four different disciplines. The variance among members is exemplified through their different perceptions of the cause of the problem that the COACH program is attempting to address, the role of various professional disciplines within the program and the language used to describe the interventions. This is the content for the discussion in the first subsection. In the second subsection, the political economy perspective is applied to a discussion of the dynamics of the COACH Steering

Committee. In the final sub-section the implications of interorganizational collaboration on program planning and evaluation are discussed with attention to the benefits and problems of interorganizational planning.

Problem Definition, Professional Roles and Language

A fundamental issue related to the dynamics of the committee is the lack of agreement about the cause of the problem. Lipsey and Pollard (1989) suggest that social theory can be used by treatment programs to “identify the cause of the problem then ‘reverse it’ to extract the corresponding theory about how to solve the problem” (p. 324). This can be a starting point for developing the logic of a program. The difficulty with the COACH program is the lack of agreement about the problem. This is likely a part of the nature of interorganizational collaboration. Is the cause of the problem of non-attending children simply the child’s anti-social behavior; is it the lack of family participation or the lack of political willingness of a school division to participate in the established interdepartmental protocol? This lack of agreement translates into neutral, politically safe language in the program proposal that is more easily agreed to by program planners. The Treasury Board Financial Analyst pointed out that there was not a significant difference between the first version of the program proposal and the second ‘detailed implementation plan’. The reason for this, in part, is the lack of agreement between committee members about the cause of the problem and the needed solution. Although there had a been a representative from Child and Family Services involved in the first committee in 1997-98, the present representative from CFS was invited to the COACH Steering Committee after planning was already underway. Child and Family Services is a necessary partner in the development and management of the family intervention

component. One important role for CFS is to hire and supervise the coaches, as they cannot be hired as teacher's aids, by the school division, and work with families outside of the classroom. Although the original committee from 1997-98 included a diverse membership of representative government and quasi-government agencies, the current COACH committee has been numerically dominated by people from the education system, to some extent slanting the committee towards a problem definition emphasizing the need for the children to be in a school placement. It was a struggle throughout the implementation-planning phase to try to develop and direct resources to the family intervention component of the program.

This underlying struggle between education and social services is magnified through the discussions of different roles for the professional staff in the program. For example, the coordinator of the program is a psychologist. The rationale was to reduce program costs by combining the positions of the clinician and administrator. The committee discussed the possibility of only having a portion of the funding to begin the program. The priorities of the members became clear as they decided which positions should be filled first. The representatives from education claimed the teacher and the coordinator would be the most necessary, while others saw the coaches, social worker and then teacher as the most important positions to initially secure. Other issues about staff included who would supervise whom and who would deliver services directly to the family. These decisions are part of any program development and planning, but in interorganizational collaboration there appears to be a greater ability to predict members' positions, based on their organizational affiliation or professional discipline.

The different perceptions of the representative disciplines were articulated through the use of different language. Members from mental health (the implementation plan writer was also from mental health), used language from the medical model (e.g., accessing relevant diagnostic data about the child to develop treatment plans), whereas the representatives from family services, including the student, used language from a social work service delivery model (e.g., using past assessments to develop a service plan with the family). There was little argument about language use, but there were times when the use of different language seemed to inhibit clear communication.

The Political Economy Perspective

The political economy perspective provides insight into the motivation and actions of the Steering Committee members through examining the “interplay of power, the goals of the power wielders, and the productive exchange systems” (Hasenfeld, 1983, p. 43 citing Zald, 1970). The application of the political economy perspective to the COACH planning process allows for some interesting insights. My time as a practicum student was limited to only five months with the program committee and the observations made here are based on my interaction with committee members and their perceptions of the process, their role and other members’ roles. The difficulty with interorganizational relations lies in the multiple and varied perspectives that are brought to the group. The comments made here reflect individual perspectives and most likely would not be shared by all members of the committee. In most cases, comments should be considered either the perspective on one member or student speculation.

The power of the Steering Committee members within each of their organizations is significant. All the members have senior management positions within their own

organizations. They are able to speak for their agency and make decisions on behalf of the agency represent in relation to the COACH program. The benefit of having high-powered members on the committee is that they are the ones most likely to have the political ties needed to lobby for program funding. These are the people that know how to frame the program so that it will be accepted by funders. These are also the people most likely to connect with the key people in power to make decisions about the program. The difficulty with the members being senior managers is that they are the least likely to have the time to spend to develop the program plan and negotiate issues about the program structure and logic.

In the current committee composition, the power is imbalanced between the members from education and from social services. The Child Guidance Clinic representative has a mental health perspective, but is employed through the participating school division, and is viewed as an education representative. The only social service representative is from Winnipeg Child and Family Services, although the committee is attempting to recruit a member from an Aboriginal social services agency. And although the auspices of the Healthy Child Initiative is the Department of Family Services, the member's role in facilitating this cross-sector program is unique and is not classified into one service system. Additional power struggles arise from historically poor relationships between the representatives from education- the school division, Student Support Services, the Child Guidance Clinic and Manitoba Education. This appears to be a divisive group with historical conflicts. In the five Steering Committee meetings I attended, Manitoba Education never attended and members stated that they had difficulty even making contact with the anticipated representative. This is discussed further below.

The historical struggles brought to the table, combined with the power imbalance between education and social services, led to a dynamic of fairly diplomatic yet tense discussions about what the COACH program needed. The representatives from education need the COACH program to place children in their school division that otherwise will not be in school. While the children are not in school, the school division is failing to comply with the legislation that governs them: The Public Schools Act (SM, 1987). The legislation gives the school division legitimation and although there are other sources of legitimation, ensuring that all the children within their division are in school is an important component. There is a view within the committee that this school division has acquired enough power that they tend to ignore direction from outside sources. That is, some may argue that the school division has the problem of non-attending children because they chose not to follow the interdepartmental protocol established for children with emotional and behavioral disorders. If the protocol to develop a multi-disciplinary 24-hour plan for the child was followed, the required funding for in-classroom support could be obtained. When a division (or parent) chooses not to follow the protocol, the child cannot receive level two or three funding for a teacher's aid. Manitoba Education does not appear to openly support the COACH program and at least one committee member believes that it is because Manitoba Education has historical power issues with the school division. Perhaps Manitoba Education believes the school division is using COACH as a means to develop their own system rather than complying with the protocol already established. This is a power struggle that threatens the possibility of program funding from Manitoba Education. However, through the COACH committee, the school division can use the HCI and the Treasury Board as a mechanism of power to ensure that

they stay in a strong position within their network (Benson, 1975). Treasury Board, as a committee of cabinet ministers, has the authority to direct Manitoba Education to provide program funding to the children in COACH. From this perspective, the non-participation of Manitoba Education is understandable if in fact, they would prefer that the school division work within the existing educational system- they too are trying to maintain power within their network. This is one perception of the impact of historical struggles between network members that is impacting the development of the COACH program.

The Child Guidance Clinic representative has managed decreased funding to his organization in the last few years. The COACH program represents an opportunity to improve legitimation and acquire needed resources through being an integral part of a new and innovative program. The fact that the coordinator for the program will be a psychologist and hired through the Child Guidance Clinic, allows the organization's power to grow, perhaps to counteract the past reductions to resources. The Child Guidance Clinic also has a lengthy history within the educational network and their presence on the COACH committee allows their representative to monitor and maintain the organization's power and legitimation within the network.

The current representative from Child and Family Services is supportive of the program and attends Steering Committee meetings, but perceives the role of Child and Family Services as more symbolic and less meaningful. Certainly the representatives from education do not appear to be as concerned about the family intervention piece of the program as they are with the day-program component. Child and Family Services is an important partner in identifying children for the program and offering their knowledge from experience in working with families, but the circumstance of the agency

representative being brought into the planning process after the school divisions had completed some of the planning, has influenced the extent to which the representative participates. It seems as if the organization maintains their involvement to ensure continued legitimation for the agency. That is, Child and Family Services should not appear uncooperative in a current environment that favors interorganizational partnerships. At the meeting in August, a new representative from CFS was appointed. This person may have a different attitude toward CFS's involvement on the committee and choose to take on a more participative role that promotes the importance of family intervention in the program.

A staff from an Aboriginal agency has yet to be successfully recruited to the committee. One executive director from an Aboriginal service agency was invited to sit on the committee, but either did not respond or refused the invitation. There may be several explanations for this, one of which is the lack of resources of the organization. The executive director is possibly too busy to sit on every committee that requires an Aboriginal representative. In recent years, the improved sensitivity to including Aboriginal people in planning services for Aboriginal families has led to an increased demand on leaders within this community. The political economy perspective of interorganizational collaboration suggests that organizations are more willing to participate when needed legitimation or resources can be secured through the participation (Benson, 1975; Meyers, 1993). In the case of the Aboriginal agency, perhaps participation means using resources (i.e.: executive director time) without gaining any benefits. Unlike the government organizations, with a direct stake in the program, a non-profit Aboriginal agency is unlikely to gain the same legitimation, power

or resources through participation. However, there may be other factors that prevent the Aboriginal service organization from participating including a history with the participating government agencies on the Steering Committee.

Interorganizational Collaboration and Planning

The interorganizational collaboration between the organizations on the COACH Steering Committee transcends traditional service system networks. For example, the organizations from education are from the same traditional service network, which is different from the network that includes Child and Family Services. There are benefits and problems to cross network or cross-sector interorganizational collaboration in planning and evaluation. Some of the issues have already been discussed, including problem definition, professional roles and the use of different language; other problems are addressed below.

Problems with interorganizational planning

The problems with interorganizational collaboration are mostly practical. One minor issue on the COACH committee was the administrative responsibility for the writer. The Child Guidance Clinic provided the work space and the Child Guidance Clinic representative gave verbal direction to the writer. However, the writer was ultimately responsible to the entire committee. The money to pay the writer was from the HCI budget appropriation and the check went through the superintendent's office for the school division. Ultimately, it was the representative from the Healthy Child Initiative who would take the program proposal forward to the Treasury Board analyst and have had the best insight into Treasury Board requirements. Interorganizational collaboration makes it more difficult to identify who is administratively accountable to whom. This

will likely be an issue as the COACH program organizes staff from different organizational networks.

Another issue with interdepartmental collaboration is in the number of funding sources and the subsequent problems this brings. The budget for the COACH program (included in the program proposal in Appendix A) specifies resources that each organization will contribute to the program either directly with funds or in-kind. The primary sources of funding for the program are the HCI's budget through the Treasury Board and additional dollars directly from Manitoba Education. It is hoped that Manitoba Education will provide program funding in lieu of individual funding that would normally be provided. Manitoba Education does not appear to be keen on providing program funding. The Steering Committee has the difficult job of 'selling' the program to the Treasury Board and to Manitoba Education. Related to the insecurity and confusion that comes with more than one funding source for the program, is the confusion in setting up the different pieces of the program.

Throughout the planning process, as one piece of the program was being developed, another already established piece seemed to be falling away. This may be the nature of planning, but I think it may be exaggerated with an interorganizational collaboration. For example, in the last year the children, the teacher and the location of the program were identified. However, now the teacher has found a new position and the list of identified children has become outdated. There seems to be a window of opportunity between the program pieces being in place, demonstrating to the funders that the program planners are ready to implement the program, and funding being secured so that the program can, in fact become operational. With the COACH program, the pieces have been in place

without the funding being secured and then pieces of the program that have been developed become irrelevant, such as the outdated list of children.

Benefits to interorganizational planning

The primary benefit of cross-departmental collaboration is improved integrated service delivery and the delivery of wrap-around services to families (Kahn & Kamerman, 1992; Hassett & Austin, 1997). Although, as the political economy perspective suggests, this is not necessarily the overriding goal of the organizations involved, it can lead to a more comprehensive and accessible service delivery system for children and their families. The role of the Healthy Child Initiative in the last five years has been to facilitate interdepartmental collaboration in order to reduce barriers to coordinated services for children (MCYS, 1998). The main vehicle for coordinating services is through committees of interdepartmental stakeholders for a particular issue or service area whether this is at the level of service agencies managers, deputy ministers or ministers. Interorganizational, including cross-sector, collaboration is paramount in the move towards coordinated services. The issue is to facilitate members' perspective of the needs of the larger service system and to move away from the narrow perspective of their organizations' needs to create a more effective service system overall to meet the holistic needs of the child and their family.

The Political Nature of Planning and Evaluation

The literature review in Chapter II addressed the broad issues of the value-laden nature of planning and evaluation; it also reviewed the rational planning process and more political descriptions of the planning process, such as the garbage-can model. This

section will rely on the literature to discuss the political influence on the program's implementation and evaluation plans.

A committee working towards the development of the COACH program has been in place, with a hiatus, for more than two years. However, only recently did the committee receive approval from Treasury Board with the allocation of \$25,000 for the development of the implementation plan. Throughout this lengthy planning period, the former Conservative government was replaced with a New Democratic government, threatening possible program funding. The delay in the planning process was exaggerated by the change of government. The NDP government had not been in power for more than eleven years when they took office in October 1999. It took several months before the new government's agenda was fully established and during this time there was intensive lobbying of the government to ensure they would continue to support programs, policies and agencies such as COACH and the Healthy Child Initiative. The first session of the legislature was unusually long because of the amount of work for the new government, and then the recess came immediately prior to the COACH proposal going back to the Treasury Board in August 2000. This significant change in government delayed the planning and approval process for the COACH program.

Although COACH has been approved in principle, the requested amount has yet to be officially granted. The thought of the Financial Analyst at the Treasury Board Secretariat is that COACH will be approved because "the minister likes the concept". The representative from the Healthy Child Initiative qualifies this comment by stating that it was only recently that 'the minister liked the concept' and after intense lobbying. Although this is not a program that the minister was initially favorable to, or has taken

risks to promote, the statement that ‘the minister like the concept’ still speaks volumes about the importance of the right people approving of the program. The garbage can model of policy development (Kingdon, 1995) recognizes the influence of political will for finding and funding a particular solution to a perceived problem. In the case of COACH, there is an argument to be made, based in the literature, that given a limited amount of money to target children with emotional and behavioral disorders, a more widely targeted program could be a better use of the money. A rational use of the theory-driven approach to planning and evaluation may have searched the literature for the best use of funds for decreasing violence among children and youth (assuming this was the perceived problem) and found a more cost-effective solution to maximize the number of children served. However, the political nature of planning and the use of the theory-driven approach, in this instance, meant that the literature review was used to refine the already chosen interventions for addressing the perceived problem of non-attending school children. The literature was used to promote the position of the COACH program as a good and necessary program and a flag to be waved to Treasury Board in support of the program. Further, the Steering Committee members helped shape the literature review through their suggestions that a particular piece of the literature or a program be reviewed in support of the program’s interventions. The literature review was both influenced by and hopefully will also influence the political process of proposal approval.

The political process of planning also influenced the logic model of the program. The logic model is included in Draft I of the evaluation plan. This model is based on Rutman (1984) and includes the program components, outputs, in-process outcomes, intermediate outcomes and impacts. After working through the evaluation to make it more acceptable

for Treasury Board, the staff at the Healthy Child Initiative and I reformatted the logic model. The HCI staff member wanted to include the essential content of the logic model in the top three pages of the Treasury Board Submission, rather than have it attached as a diagram further back in the submission. To include the logic model in the top few pages of the submission, it needed to: 1) not look like a diagram and 2) be framed as expected outcomes, rather than a basic logic model. The result was the removal of the squares and arrows, the abbreviation of the outcomes, the establishment of standards in the outcomes and the use of more politically acceptable language in the titles. The rationale for the change in language was the awareness that people from different service networks are comfortable with different language. It is important that people who are reading the logic model can understand it and relate to it. The second version, titled the “Program Logic and Expected Outcomes”, is included in final evaluation plan in Appendix D. In the evaluation plan, the diagram formatting kept. In the Treasury Board summary, it was removed.

The outcomes were abbreviated and framed in terms of what they were expected to achieve. Whereas the program logic model simply connected program components to anticipated outcomes (i.e.: child is able to function in a regular school setting), the second version used concrete standards, where possible (i.e.: decreased need for level 2/3 funding within three years of leaving COACH). Further, the titles of the outcomes were changed and included short-term indicators, outcomes, and longitudinal outcomes rather than in-process outcomes, intermediate outcomes, and impacts. This is more politically neutral language that retains essentially the same meaning while making the ideas more accessible to different groups of people.

Another influence of the political process on the program and evaluation planning was the prescribed nature of the evaluation. There is a strong argument that a program, such as COACH is necessary to ensure that non-attending children under twelve years of age have their right to an education met as required by The Public Schools Act (SM, 1987). The nature of the program as highly individualized and multi-faceted makes it a suitable candidate for an implementation process evaluation, rather than an outcome-based evaluation. However, the drive for government accountability is such that demonstrating a program's worth by showing that it achieved its goal is a necessary requirement for an evaluation. Although an outcome evaluation will provide useful information, it will only do so if the implementation of the program is also assessed (Wholey, 1977). The failure of a program cannot be determined unless there is first, some certainty that the program was implemented correctly (Scheirer, 1987). For the COACH program, there was never a choice, politically, to plan an evaluation emphasizing program processes. This may be in part, due to the front-end evaluation planning and this may change as implementation issues become clearer and take priority in understanding if the program can be deemed successful. Also the evaluation of the COACH program is intended to fit in with the other program evaluations completed by the Healthy Child Initiative. The evaluation team often uses similar measures so that cross-program comparisons of outcomes can be done. The evaluation for the COACH program had to be considered in the context of many cross-sector programs developed and evaluated by the Healthy Child Initiative.

The greatest influence of the political process on the present practicum was in the consistent uncertainty of the program's survival. The nature of the planning process is

such that up-front work must be completed prior to the proposal being accepted for funding. There is a certain amount of work done without direct compensation. However, when evaluation planning is included at this stage, there is more work added prior to securing program approval. The present practicum activities took place between the time the Steering Committee was granted the money to write a detailed implementation plan and the approval of the total program funding amount. Although the Treasury Board made a \$25,000 commitment, the committee was not certain that there would be more money to follow.

Another significant issue related to the insecurity of the program's survival was the multiple sources of funding. The COACH program sought funding directly or in-kind from more than one source. The two largest funders are the HCI via the Treasury Board approval, for the cost of the salaries of ten coaches and the provincial Department of Education. Funding for special needs children is individually approved based on assessments of the children. This funding, then, follows the child from one school to the next. The COACH program, seeks to stabilize children and their families so that assessments can be completed. As such, the COACH Steering Committee is requesting that Manitoba Education fund the program for the total amount that would otherwise be available to the children individually after their assessments and 24-hour plans were completed. However, during the five months I was involved with the program development, there was no commitment from Manitoba Education to fund COACH with special needs program funding. The Steering Committee for COACH has consistently had a difficult time recruiting someone from Manitoba Education to the committee. This potential gap in funding has been a source of insecurity for the program's committee.

In summary, the implications of interorganizational collaboration on planning and evaluation are many. The diversity of program stakeholders is exemplified by the difficulty in obtaining agreement about the cause of the problem the program is trying to address, the roles of staff and language to describe interventions. The political economy perspective provides insight, although speculative, into the possible motivations of Steering Committee members and those of invited representatives who chose not to join the Steering Committee. The political influence on the evaluation planning process is also significant. The influence on the literature review, the program logic model, the evaluation design combined with constant insecurity about the program directs the otherwise rational planning model.

Integrating Evaluation Planning with Program Planning

Evaluation planning at the program planning stage is not an entirely radical move. Shadish, Cook and Levinton (1991) state that since the 1960's in the United States, there has been legislation requiring the evaluation of federally funded programs. From this time, programs were required to at least provide a rough sketch of an evaluation plan in the program proposal submission. Often funders want to know on what criteria the program will be judged and the process for that judgment, prior to providing funding for the program.

The traditional evaluability assessment shares similarities with the theory-driven approach, but is used to assess the evaluability of a program after the program has been implemented. An evaluability assessment seeks to understand the program's structure and logic as it was planned and how this is different from the way the program was implemented (Rutman, 1984). The evaluability assessment assesses the extent to which a

program's processes and outcomes can be evaluated (Wholey, 1977) and to some extent this is based on the articulation of the program's underlying assumptions and implicit logic.

There is less evidence in the literature of the use of detailed evaluation planning at the stage of program planning, in particular the use of the more involved theory-driven approach. This approach, moved to the time of program planning, allows for the opportunity to create an evaluable program. Although many programs may consider evaluation needs in the planning stage, the frequency of this is unknown and the extent to which the evaluator is involved is unknown.

When considering the evaluation at the time of program planning, first thoughts turn to issues of data collection strategies and the practical implications, however there are also more significant opportunities for reciprocal influence between evaluation and planning. The usefulness of the theory-driven approach at this stage of program planning extends beyond simple measurement issues to include implications to the concepts of evaluation use and the evaluator's role.

The traditional concept of evaluation use includes the use of evaluation results (Levinton & Hughes, 1981). The three types of use are instrumental, conceptual and political. A fourth type of use, enlightenment, contributed by Weiss (1998) describes the use of evaluation results by other jurisdictions outside of the program evaluation site.

The theory-driven approach to evaluation aims to promote, directly or indirectly, the enlightenment use of evaluation. Through relying on social theory literature and assessing the program's causal model, the evaluation results will contribute to the ongoing development of social theory. Other programs can then access the published literature to

develop their own program's theory and continue to build a body of knowledge that uses evaluation results as its base. However the integration of the theory-driven approach to evaluation with program planning has implications to other types of evaluation use. If the definition of evaluation use is expanded beyond the use of results, the integration of evaluation planning allows for improved conceptual use and potentially adds two other forms of use: value clarification and commitment. Each of these is briefly discussed in the following section.

Rethinking Evaluation Use

Improved conceptual use

The use of the theory-driven approach at the program planning stage includes a review of the relevant literature, the articulation of the stakeholders' implicit assumptions of the programs normative and causal theory and the development of the program's logic and structure model. By providing stakeholders with literature about the possible interventions for the program, their conception of the program and its place in relation to other programs and theories can be changed. Also, through the extraction of the stakeholders' implicit program logic, the stakeholders' perceptions of the program and how the interventions are connected to the expected outcomes are clarified. In the present practicum this process occurred with most of the members of the Steering Committee. There was feedback from the implementation plan writer and the staff member from Healthy Child Initiative that the literature review and the initial program logic model from the draft evaluation plan, contributed to their conceptualization of the COACH program.

Value clarification

The importance of stakeholder value clarification is particularly important for a diverse group of program planners. In the present practicum, the diversity of program stakeholders' values was clear. Indirectly through the literature review, the development of outcomes and the logic model in the evaluation plan, the Steering Committee had an opportunity to draw on a common resource in which to discuss the program's interventions and expected outcomes. If an evaluator took a more involved role in the planning meetings, the articulation of the program's theory could be made explicit and then reviewed in closer consultation with the committee. Through this articulation the values of the stakeholders could be made explicit for discussion. There was at least one Steering Committee member that suggested that the programs philosophy needed to be developed to include the mission and values of the program. This did not happen, but obviously could occur without facilitation from the evaluator. What appears to be rare in program planning is the explicit articulation of a program logic model (Lipsey et al., 1985) that specifies the connection of the program interventions to the outcomes.

There are two obvious issues with the evaluator taking more of a facilitative role in value clarification through the process of building the program logic model. First, the evaluator requires skills in diplomacy, negotiation and conflict resolution to manage the experience effectively. Second, the move toward more explicit language and away from politically neutral language may potentially result in group division, rather than desired group cohesion. However, the development of a program's theory at the time of program planning has potential benefits that will lead to a more evaluable program in the end.

Improved commitment

Another potential new use of evaluation is improved stakeholder commitment to the program. Although by definition stakeholders should be committed to the program, this is not always the case. Political pressure may force a stakeholder to be involved in the program when they may not think it's the right solution to the most pressing problem (Kingdon, 1995). For example, in the COACH program at least one agency expressed the feeling that their role on the committee and in the development of the program was symbolic rather than substantive. The use of the theory-driven approach to evaluation at the program planning stage can assist in generating commitment. At the level of program planning, the use of the tools in generating the theory can provide the opportunity to engage the stakeholder. For example, through the process of soliciting the stakeholders' views of the implicit logic of the program and including those views in the model, the evaluator could facilitate the involvement of the reluctant stakeholder. This may lead to an increased commitment.

This same principle may apply in the case of engaging program implementers in the evaluation planning. Although the bottom-up approach to policy planning and implementation (Elmore, 1979) would include implementers directly in program planning, when this is not the case, the evaluation offers another opportunity for their input. Unfortunately in the COACH program, and likely with other similar programs, the staff were not yet hired in the program planning stage as funding was not yet secure. However, when program staff are identified, they can contribute to the development of the evaluation plan. This was the case with the province-wide Baby First program at the Healthy Child Initiative. The evaluation planning process and framework was used to

engage the professionals at a variety of implementation sites. The evaluation was intentionally used as a tool to promote community ownership of the program and the evaluation.

In the case of COACH, the committee members are all from different line departments and may think in terms of the services their organization typically provides and the reasonable outcomes associated with those services. Through the use of the theory-driven approach and the development of program theory at the time of program planning, the capacity of the committee to think in terms of wrap-around and holistic services to children and families is improved. An unofficial goal of the Healthy Child Initiative is to affect system change and influence departments to consider children first in all of their planning. The development of program theory can facilitate planners in developing a broader view of the issues that affect children, in this case, children with mental health issues.

Generating value clarification and commitment through the evaluation plan will likely increase and improve the use of the evaluation results. Securing stakeholder commitment to the evaluation through close consultation with the stakeholders will hopefully result in the conceptual and instrumental use of the evaluation results. The integration of evaluation planning with program planning allows evaluation, and the evaluation results, to be viewed as integral part of the program's development and longevity.

The Evaluator's Changing Role

The move of the theory-driven approach to the front-end of program planning draws the evaluator closer to the program and the program stakeholders. Rather than being a person or organization that comes to the program after a lengthy period of

implementation, the evaluator begins with the program nearer to its conception. On the continuum of the evaluator's possible role, the evaluator shifts away from neutral researcher and closer to policy actor. Presenting a review of the literature and building program outcomes and theory are potentially more influential tasks at the program planning stage than they are at the traditional position of evaluation. The influence of the evaluator should not simply be categorized as good or bad, but rather seen as having positive and negative implications to consider.

The positive influence of the evaluator is stated through the improved conceptualization of the program by stakeholders and through the additional possible uses of evaluation- value clarification and stakeholder commitment. The evaluator has the opportunity to assist program stakeholders. The question of concern is: to what extent should the evaluator attempt to influence the direction of the program? For example, when the evaluator reviews the literature related to the program, the intent is to influence the program's theory. However, the evaluator's choice of literature and interpretation of the literature related to the program's interventions, involves more of a value choice. The evaluator, sitting at the planning table, can mention the literature when appropriate to support or contradict a stakeholders' idea, or the evaluator can passionately argue a specific position, as a full-fledged policy actor.

There are obvious practical and ethical implications to this changing role. First, the level of knowledge and skill required by the evaluator with this changing role may exceed the capabilities of most program evaluators (Patton, 1987). The skills include not only an understanding of the content for the theory of the program but also the skills to build the program theory. This is the crux of the debate of the evaluator as a specialist in

program content or a generalist familiar with evaluation design, measurement, data analysis (Bickman, 1989) and program theory.

There are ethical implications to the more influential and political role of the evaluator. There are professional guidelines for program evaluators, including the Program Evaluation Standards (1994, 2nd Edition) and Guiding Principles for Evaluators (1995). Further, professionals from different disciplines have codes of conduct that they can rely on for a general guide to behavior (e.g., Social Work Code of Ethics). However, the role of the evaluator at the program planning stage requires careful consideration in a few key areas. First, the more involved role of the evaluator should not interfere with a valid evaluation. As an evaluator becomes less neutral and more involved in the politics of program planning, the validity of the evaluation could be compromised. Second, the changing role of the evaluator necessitates the assurance that the evaluator does not overstep their own competency and is clear about their abilities in the area of evaluation planning versus program planning. The third ethical concern is the evaluator's explicit articulation of their values. Although this is important for evaluators working at all stages of program development, it is particularly important to the evaluator working at the planning stage. The articulation of the evaluator's values should be done with the program stakeholders or through supervision with a colleague or their supervisor (Newman & Brown, 1996). This can help to ensure an unbiased and valid evaluation.

In summary, there are implications in the move of the evaluation planning to the program planning stage. The role of the evaluator is changed from one of a neutral external person to a potentially more influential policy actor. The role of the evaluator is more involved through the use of a theory-driven approach to evaluation. The benefit of

this changing role includes potentially improved use of the evaluation results, and an improvement in stakeholder value clarification, commitment and conceptualization of the program. The potential problem with the changing role of evaluation includes the increased demand on the evaluator's skill set and the potential ethical issues regarding evaluator neutrality.

The Practicum Experience in the Application of the Theory-driven Approach

A practicum allows a person to move beyond theory and into the real practice of planning and evaluation. In theory, there are many concepts and ideas that seem to be feasible and potentially very beneficial. Of course, through the practical experience, one learns that moving beyond the written word is often frustrating and full of obstacles and issues.

The theory-driven approach, in particular its application during program planning, appears conceptually to be a very good idea. The potential to add to a larger body of social programming research and share knowledge with other jurisdictions, based on evaluations, is exciting. In the present practicum, the potential of the theory-driven approach was partially realized and will hopefully be further realized through the program implementation and evaluation stages.

There are also some potential difficulties with the approach during planning that became clear through the present practicum. The political nature of planning and evaluation, particularly with an interorganizational committee, is wrought with insecurity about what, if anything will happen next. The issues with funding and the complicated funding model was a frequent source of stress for the committee. With any planning, there is some degree of uncertainty about the acceptance of the program proposal, and in

a collaborative program plan, this is magnified by the seemingly different perceptions of the program by diverse committee members. This was a frustrating backdrop on which to develop the program's theory and evaluation model.

During the writing of the implementation plan, it was frustrating trying to draw out and make sense of the committee members' varied perceptions of the program's implicit logic model. I think on a collaborative project there is likely to be more discrepancy in perception about what the program is intending to accomplish. With the COACH program, in addition to the uncertainty about whether the program would be accepted by funders, was the uncertainty that the committee would reach agreement about particular program components and outcomes. The use of the literature review and questions about the implicit logic model for the program, facilitated committee discussion and agreement about the program components and the expected outcomes. In this sense, the use of the theory-driven approach assisted in overcoming the issues associated with planning with a diverse group of stakeholders.

The political will of the government and the agencies represented on the Steering Committee influenced many aspects of the program proposal and the evaluation process. Of course, one would expect the program proposal to reflect the desire of the Steering Committee and what they believed would be funded, but the evaluation plan was also influenced. The development of the evaluation at the program development stage is intended, in part, to demonstrate to the funders that there is an idea of how to evaluate and judge the program. The result though is that the evaluation may be influenced too much by the political flavor of the day. In the present practicum, the direction of the literature review was, in part, based on the views of the Steering Committee and their

perceptions of what programs were similar to the COACH program. Perhaps more significant, the evaluation design was influenced by the political requirement to demonstrate positive outcomes and although the process component of the evaluation is considered, at this stage, it is not as carefully designed as the outcomes are. The design will be modified as necessary as the program is implemented, but the basic design will likely focus more on program outcomes than processes.

The present practicum began with a greater emphasis on evaluation planning, but shifted into more of analysis of planning. The use of the theory-driven approach was limited in its application to program planning. The development of the normative and casual theory at the program planning stage is good practice, regardless of the extent of evaluation planning. The most significant limitation of the approach was the extent to which a detailed evaluation plan can and should be developed at the program planning stage. The evaluation plan can only be drawn up in a rough format. Prior to implementation, a detailed evaluation plan is mostly full of guesswork. It is not efficient to spend a lot of time on the evaluation plan prior to securing program funding. In the present practicum, the literature review and the development of the program outcomes and logic model made sense. The development of a detailed evaluation plan was a useful exercise, but there is a limit to how useful this detailed evaluation framework will be. Understanding what the expected outcomes are and some possible measures of these outcomes make sense, but it is not until the program model has been adapted after implementation that a more detailed framework would be of value.

Another drawback to the theory-driven approach was the lack of involvement of program staff and clients in the development of the evaluation plan. The theory was

developed with input from committee members, but staff had not been hired and potential clients had not been approached and so there was no opportunity for their input. If an adaptive approach to implementation was taken, clients and staff could assist in assessing the need for refinement to the program theory and the development of the implementation theory. In cases where the potential clients of the program are known, they can be included in the planning and development process.

When the implementation plan was being developed, the writer commented that she did not think that it should be too specific, to allow the coordinator who was hired to have some room to influence the program's process. This speaks to the adaptive approach to implementation. The program proposal outlines the basic components, but the program is more fully developed as it is being implemented. The committee has worked out a communication process that would allow the program coordinator to communicate needed changes to the program model as it is being adapted. Because the program theory was developed prior to implementation, this may need to be modified after the program is implemented. It is important that the planners, or evaluator, do not try to force the model onto the program, but rather allow the program to emerge and assess how the model and program fit together after the program has been implemented for a period of time.

In summary, the theory-driven approach applied at the time of planning, is an interesting application of an underused approach to evaluation. The potential benefits to assist stakeholders in clarifying their values and reaching agreement on the program's logic are great, but investing too much time prior to securing program funding, can potentially be a waste of time. The need to use an adaptive approach to implementation is highlighted when developing detailed program theory prior to the operation of the

program. If planners and evaluators are highly committed to the program's logic and structure model, developed without consideration for the implementation environment, the value of the theory-driven approach is diminished. This is an important aspect of the application of the approach that could be examined in further research.

Conclusion

This practicum applied the theory-driven approach to evaluation at the stage of program planning with an interorganizational collaborative program. Working with the Manitoba Healthy Child Initiative, the student had the opportunity to work with a diverse group of senior managers from different organizations across education, children's mental health and family services. The student developed outcomes for the program, based on a literature review and participated in the development of program interventions. The literature review was submitted to Treasury Board with the program proposal. The evaluation plan was written in two versions: a lengthy version appropriate for an audience of evaluators and more concise version submitted to Treasury Board. The integration of program planning and evaluation, in particular the use of a theory-driven approach to evaluation planning, for an interorganizational collaborative program has both benefits and drawbacks.

There are at least three potential benefits to the integration of the theory-driven approach with planning for an interorganizational collaborative program. First, the literature review can provide common language to the organizers. At the very least, a literature review can allow each stakeholder to understand the background of the other partners. The literature review can act as a starting point in the committee's discussion of the design of the program's interventions. This requires that the literature review is

thorough and complete and that the committee has the time to spend discussing desired outcomes and possible intervention options.

Second, the role of the evaluator as a facilitator in the development of the program's normative and causal theory provides the stakeholders with an opportunity to make their values explicit and design a program that articulates the shared values and vision of the collaborative committee. When members' perceptions of the program's theory are diverse, there is greater room for the evaluator to facilitate agreement and build group cohesion. However, there is also a risk that the evaluator will expose underlying disagreements that will not be resolved, resulting in the disintegration of the collaboration.

Third, developing program theory at the program planning stage offers an opportunity for diverse committee members to discuss the anticipated outcomes of the program and the agreed measures for those outcomes. Through the development of the program's theory, the capacity of diverse planners to expand their view of the needs of the child and family are improved. Planners from different service areas begin to see other perspectives of the needs of vulnerable children and their families. The awareness, and hopefully subsequent commitment of the program planners is broadened through the use of the literature review and explicit articulation of the program's normative and causal theory.

There are at least two negative implications to the integration of the theory-driven approach to evaluation with program planning. First, there are limits to the development of a comprehensive program theory prior to implementation. Although a significant amount of theory can be developed for a program, the theory-driven approach cannot be fully applied at the program planning stage without the issues of implementation being

understood. Second, the theory-driven approach, at the time of program planning, is still plagued with the issue of being time and cost intensive. Although its application could potentially save costs in the long term, through its global use, the current political environment of minimizing social spending is not likely to promote the theory-driven approach.

The development of plausible theories for programs may be the key to developing a usable body of literature about how to intervene in social problems through effective social programs. As organizations work together to develop programs across traditional lines of service delivery, the need for documenting what interventions are working under what conditions is more important than ever. There are more vehicles for sharing information than ever before, and the potential to share program theory and evaluation results across the country and across the world as we can now, is unprecedented. Without the theory-driven approach, the use of evaluation results across jurisdictions can be misused. The problem of this misuse is the lack of explicit literature-based theory for the program. The comprehensive development of program theory can offer a framework to another jurisdiction that is considering a similar program. When the time is taken at the planning stages to develop the theory of a program, and then additional theory is developed after program implementation, the evaluation will produce results that are more usable to the program and where appropriate, other jurisdictions. The potential impact of the theory-driven approach on how evaluations are conducted and the information shared is great. However, this significant impact is mitigated by the influence of the political world in which programs are planned, operated and evaluated.

The theory-driven approach is likely the epitome of rational planning. It attempts to outline the program's interventions, casual mechanisms and outcomes in addition to the role of the implementation environment and the conditions under which the results of the evaluation results can be generalized. The theory-driven approach uses the literature and the stakeholders' implicit understanding of a program to develop the theory in an orderly and sequential fashion. The potential benefits of the approach in contributing to social problem and social programming theory that can be practically shared across jurisdictions is great. However, as demonstrated in this practicum, the impact of the political world, influences not only the likelihood that the theory-driven approach will or will not be used, but also the way in which the approach is applied.

Post-Script

The Treasury Board of Manitoba approved the COACH Program on October 3, 2000. The location and the children have been identified and the staff will be hired immediately. It is expected that the program will be in operation by November 2000.

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Appendix A:
The COACH Program Proposal

THE COACH PROGRAM

A 24-Hour Wrap-Around Program for Children (6-11 Years) with Extreme Behavioral Problems

Steering Committee:

Director, Child Guidance Clinic
Healthy Child Initiative
Superintendent of Schools - Inner City, Winnipeg School Division #1
Winnipeg Child and Family Services
Director of Student Support Services, Winnipeg School Division #1
Principal, Mulvey School
Manitoba Education

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*Note: This is included as Appendix B in the Practicum Report.

THE COACH PROGRAM

A 24-Hour Wrap-Around Program for Children (6-11 Years) with Extreme Behavioral Problems

INTRODUCTION AND RATIONALE:

At any time in Metro Winnipeg there are an estimated 20 to 25 students below the age of twelve who cannot be maintained anywhere in the existing educational system. As a result these children are not attending school and not receiving any kind of formal education, which is contrary to Article 28 of the United Nations Convention of the Rights of Children. Typically these children would qualify for Level 2 or 3 funding, if they were attending school. They have a background of profound neurological disorders and/or severe emotional, physical or sexual abuse. Their behavioral disorders are usually long-standing and pervasive. They are violent and would be charged with repeated offences if they were 12 years of age.

The children and/or families are known to Child and Family Services and have often been in many foster placements; some have been placed in residential treatment facilities. Due to the pervasive behavioral disorders, they have tended not to remain in any of these settings for very long. As a result they have changed schools and school divisions often. These children typically have concomitant attachment disorders and have achieved limited or no positive learning in their school or home environments. This becomes a cumulative deficit as they become older and their behavioral problems become more ingrained and more difficult to manage.

In the past, isolated approaches to providing support to these children have not been overly successful. It is proposed that a program that focuses not only on support to the child but changes to the child's environment (including support to both foster and biological families) should have a greater potential to effect a positive change in the child's behavior and ability to succeed in school.

The proposed program is intended to provide a service aimed at returning the students to an educational setting where they can function with adequate supports, i.e. Level 3 funding, specialty programs etc. This program is primarily therapeutic in nature, with both educational and family-based components as well as a community socialization base. A trans-disciplinary approach will provide support to the student, the families (foster and/or biological), and the receiving school division. Key to this is the coordination of all helping systems and provision for the great geographic mobility of these children. Major partners in the project are The Winnipeg School Division #1, including the Child Guidance Clinic, Winnipeg Child and Family Services, Manitoba Education and Training and the Manitoba Healthy Child Initiative.

A framework of values for school-based interventions is outlined in Appendix C as well as a review of some of the research literature related to the COACH project.

PROGRAM PRINCIPLES:

1. The dollars follow the student. That is, regardless of the location in Metro Winnipeg of the student, or living situation, or school circumstances, funding for the student flows where services are delivered at a given time.
2. Regardless of the residence of the student in Metro Winnipeg or any changes therein, the student will be transported to where the COACH program is located or the COACH program will be delivered in the student's residence.
3. COACH is unique to the Winnipeg School Division #1 in terms of the 12-month, 24-hour treatment component involving support to families during the evenings, weekends and vacation periods as well as addressing the mobility aspect of these children.
4. COACH seeks to provide a highly individualized service to students and their families, while utilizing a minimum number of service professionals.
5. The COACH program is flexible in accommodating the needs of the student, family and the receiving school. All students will be transitioned into a receiving school. The transition program provides supports and consultation for a period of time after the student has returned to the receiving school. An option exists to return the student to the COACH program if behavior difficulties again exceed the capacity of the student's school during this time.

PROGRAM GOAL AND OBJECTIVES:

The overall goal is to provide a comprehensive wrap-around service for each student in order for that student to return as soon as possible to an educational setting within the public school system where the student is able to function with adequate supports. This may or may not be a specialized class with up to Level 3 funding.

A. Process Objectives

There are number of objectives that will need to be met in order to achieve the program goal. Process objectives, describing the COACH program components, are listed below under three primary program values.

1. Comprehensive, cost-effective and culturally appropriate service delivery

- COACH will deliver the school-based program based on the most appropriate and sound educational practices. The educational component will focus on general outcomes of the English Language Arts program, including the celebration and building of community, communication skills, literacy and problem solving. Other core subject areas such as Math will focus on numeracy and basic life skills.
- COACH will provide a safe environment for students and staff.
- COACH will provide a culturally sensitive service.
- COACH will link relevant agencies in order to obtain the most appropriate and effective treatment for the child and the family. COACH will provide accountable case management and coordination of resources.
- COACH will increase cost-effectiveness and better practice through reducing the number of individuals involved with each child through the deployment of a trans-disciplinary model of service delivery.
- COACH will provide a consistent service regardless of the geographic mobility of the child or changes in the child's educational and help providers.

2. Unique and flexible program development

- COACH will provide an individualized treatment program focused on behavioral management, clinical assessment, and treatment of underlying traumas and behavioral and communication disorders.
- A significant adult, the Coach, will provide a mentor/ tutor role for each child.
- COACH will provide the student's non-school setting with respite and recreational services and 24-hour support.
- COACH will provide continued support and appropriate intervention with the child's foster and/or biological family.

3. A well-defined transition process

- COACH will maintain contact with the receiving school from the time the student is placed in the program to ensure that this setting is involved in the planning process and has resources available to the student.

- The student will return as soon as possible to the receiving school with a gradual phase-in period before the student returns full-time.
- Support will be provided to the student's school, both during the transition from COACH and after the student is integrated full-time, for as long as necessary. The student will return to the COACH program only if necessary.
- COACH will reserve space, full-time or part-time, to readmit a student to the school program should this become necessary.

B. Outcome Objectives

By achieving the above process objectives, the COACH program will achieve a number of child, parent and program outcomes. The child and parent outcomes here are listed as global outcomes. In the development of individualized services, specific outcomes will be developed to meet the unique needs of each child and their family.

1. Child Outcomes

- Children will exhibit improved social skills, including the appropriate expression of wants, needs and positive peer interaction.
- Children are able to follow direction from authority figures with some external support.
- Children are able to complete academic tasks as requested with external support.
- Children exhibit minimal negative behaviors, including hitting others, throwing objects, property destruction, verbal aggression and sexually inappropriate behavior.
- The children will be eligible for L3 funding in the receiving school.

2. Parent/ Caregiver Outcomes

Some of the following outcomes are related to the biological parents of the child and others are related to both the parents and the adults currently caring for the child. When a child is living in alternative care, the COACH program will engage the biological parent(s) when the plan is for the child to return to parental care. The only exception is when the parents reside outside of Metro Winnipeg.

- The child's parents and/ or caregivers will become actively involved in the child's education.

- Parents and/ or caregivers will have increased positive interactions with their child.
- Parents will have knowledge of parenting skills and techniques appropriate to meet the unique needs of their child.
- Parents will have a social support network comprised of positive informal and formal supports that provide emotional, instrumental and cognitive support.
- Parents will engage appropriate social support in order to meet the needs of their children.

3. Program Outcomes

- There will be a coordinated 24-hour plan for each child consisting of unique, individualized service delivery.
- There will be a reduced number of professionals directly involved with the child and the family through the deployment of the trans-disciplinary model of service delivery.
- There will be a reduced number of crisis interventions with the child and family.

TARGET GROUP

At any given time, the number of students in the COACH program will not exceed twelve.

The students will be between the age of six and eleven years old inclusive. That is, Grades 1 to 6 is the typical range of attendance.

The students will be children who:

- ◆ Have shown profound emotional/behavioral disorders in the home, school, and community environments. If they were attending school, they would qualify for L2/L3 funding on the basis of their emotional/behavioral disorders.
- ◆ Have behavioral/emotional needs that are beyond the supports currently available in the Winnipeg #1 School Division as evidenced by:
 - having been suspended for violent behavior
 - having been withdrawn from one or more schools or programs
 - displaying highly inappropriate behavior when in a school setting
 - proving unmanageable even with supports such as a specialty program placement with up to Level 3 funding and the use of the Provincial E.B.D. Protocol.

- ◆ Have multiple problem areas requiring the involvement of several disciplines and/or admission to agency care.
- ◆ Require 24 hour programming.

STUDENT SELECTION

The process for student selection will involve the Steering Committee, which includes representatives from Winnipeg School Division #1, Winnipeg Child and Family Services, Healthy Child Initiative, the Mandated First Nations Executive Directors' Group and Manitoba Education. Manitoba Education will assist in determining the level of funding for each student in the program (Level 2/Level 3) and/or program funding. In the case of aboriginal students who are receiving services from a mandated aboriginal agency, the mandated agency will be an integral part of the selection, planning and service process.

The initial selection of students will be from students in the Winnipeg School Division who are known to (or their families are active with) the Winnipeg Child and Family Services and who meet the criteria outlined under "Target Group". If and when any of these students move out of the Winnipeg School Division while attending the COACH program but still remain within the city boundaries, they will be able to continue in the program, with financial support being provided by the home school division.

It is understood that the majority of spaces will be allotted to children residing in the Winnipeg School Division #1 catchment area. However, space permitting, the COACH program will be available to students from other Metro Winnipeg School Divisions after the initial selection and phase-in time period of the program.

PROGRAM DESCRIPTION

The COACH program is a three-year demonstration project. Components of the project are based on effective local programs such as CHOICES, KEYS, FAST and Tri-Agency plus research documentation on educational and family-based interventions. It will be a 24-hour wrap-around program, consisting of a Day Program and an After School/evening component. The Day Program has educational and community-based components. The "outside of school" component consists of family support, recreation, respite and emergency services. Case management and clinical services are to be provided as required. See Appendix A for specific job descriptions.

A. The Day Program

There will be up to four groups of no more than three students each. Each group will receive the same basic programming with a morning and afternoon program during the regular school year (200 teaching days). The groups will alternate morning and afternoon programs so that the one teacher will work with two groups in the morning and two in the afternoon. Each group will be supported by two Coaches during the day. (See Appendix B, Table 1.)

The Day Program will consist of a half day of educationally focused activity, alternating with a half day of recreational and community orientated activity. It will be supervised on a day-to-day basis by the principal assigned to the program. The principal will be responsible for: ensuring the Winnipeg School Division policies and practices are followed; supervising and evaluating the Winnipeg School Division teaching staff assigned to the program; as well as be a member of the COACH Project Steering Committee.

The educational component of the program will focus on classroom behavior and basic academic skills. Structured learning-by-doing activities and computer-assisted learning will be emphasized on the premise that research indicates these methods have been shown to be most effective in remediating deficits in cognitive stimulation and motivation to learn. Approaches will include the use of “multiple intelligences” and will be highly individualized. As with the rest of the program, this component will allow for therapeutic approaches and direct instruction in school survival and social skills. The Coaches, along with the teacher, will assist the students with academic deficits by providing academic help, encouragement and a relationship with nurturing adults.

The recreational/community component will focus on physical activity and meaningful community involvement. This component will dovetail with the educational one in that the focus will be on behavior intervention, social skill development as well as cultural enrichment. Addressing the emotional needs of the child will be essential and there should be an obvious continuity throughout the program. This component is decentralized and community resources (e.g. community centres) will be used. (This aspect of the program will need to be negotiated on a case-by-case basis, depending on the family’s home community). The Coaches will be responsible for implementing the recreational/community component of the program. (Supervision of the Coaches to be negotiated).

B. The After School Program (including evening, weekend and non-teaching days)

An After School program will be available in conjunction with Winnipeg Child and Family Services and will involve family-focused interventions and individual in-home support. Local community input and collaboration in the development of the After

School component will be essential for success to occur. Issues such as promoting concrete problem solving skills and social networking as well as social skills training and basic instrumental support such as transportation will be addressed. Realizing that changes in family dynamics take time, the role of the Coach and Home Support Social Worker may basically be to “plant the ideas for change”.

The Home Support Social Worker and two Coaches will provide support to the child’s family (foster and/or biological) and a family conservation/respite service is to be negotiated. Care will need to be taken to offer support and yet not be viewed as intrusive to the family. Given that some families often have difficulty attending appointments, commitments etc. the Coach will have a critical role in supporting parents/caregivers to meet these commitments.

The Home Support Social Worker will: coordinate the After School component; provide direct support and parenting training to the families (foster and/or biological) and other caregivers (for those children living in hotels or other temporary non-family settings); and oversee the recreational/community activities provided by the Coaches with both the children and the families.

The focus for the Coaches will be to work with both the children and adults together in order to facilitate families taking part and learning from the joint recreation and community activities. Maximum flexibility will be required around the assignment of Coaches to the Day, After School and weekend component of the program. It is assumed that the majority of children involved in the program will be living in settings where CFS supports are currently ongoing. In these cases, the Coach’s role may be more recreationally based. In the cases where the children and the families are not currently receiving in-home interventions, the Coach’s role may be broader in scope. In these cases the overall focus of the Coach will be to encourage appropriate behavior interactions, social skill development as well as cultural/community enrichment. Activities involving the family, as a unit will be encouraged. Family-focused interventions will also occur during these periods where family empowerment and the development of a social support network will be targeted.

C. Vacation Period

The COACH Project is a twelve-month program. While there will be no formal educational component during the vacation period, the Coaches and Home Support Social Worker will continue to have an active role. Literacy/numeracy skills and school readiness interventions will continue to be reinforced. Depending on the level of social readiness of the child, opportunities to attend activities such as Day Camps and community summer programs (with support from the Coaches) will be encouraged.

D. Transition Period

The transition to the receiving school will be critical for both the child and the family and continued supports will need to be in place. The transition will need to occur through the Provincial E.B.D. protocol planning for Level 3. The receiving school will have been involved in the planning of the child's individual program and assurance will need to be given that resources will be available to receive the student i.e., the required funding will be granted to the school. It is assumed that funding will transfer to the receiving school at the time the child is successfully transitioned. Positions will be kept open in the COACH program for as short a time as possible. However it is felt that a specific time limit cannot be set until data from the program has been collected.

It should be noted that the research indicates that family-based interventions require a minimum of 12 to 18 months for changes to be observed. This reinforces the position that the family interventions will need to be continued after the child leaves the COACH Program.

E. Crisis Support

A crucial link with respect to crisis support will need to be developed. The Youth Emergency Crisis Stabilization System (YECSS) operated by MacDonald Youth Services would be ideally suited to provide crisis support after hours to children in the program. YECSS has mobile teams available for anywhere in Winnipeg and has access to secure emergency residential shelters or refer to existing alternate systems.

Links with the Mental Health system are a crucial part of the implementation process. PsychHealth, St. Boniface Hospital and the Manitoba Adolescent Treatment Centre may well need to provide in-patient or other long-term services to children in the program.

F. Program Coordination/Case Management

The COACH Program is coordinated by an individual who has the case management responsibility for each student. This includes the coordination of services provided within the COACH Program and those provided by external service providers. Establishing liaisons with specific community partners e.g. the aboriginal communities, would also be an important component of the coordinator's overall responsibility.

The coordinator's main task is to ensure the provision of those services that are necessary to accomplish the goal of the COACH Project - the return of the student as soon as possible to an educational setting within the public school system where the student is able to function with adequate supports. The coordinator's secondary task is to provide

the receiving school with ongoing supports so that the student does not have to return to the program.

As case management, coordination and conferencing are critical in the treatment of children with profound behavioral disturbances and multiple disorders, it is expected that considerable time will be spent on these activities.

G. Clinical Services

There are several clinical program components available within the program (in addition to those mentioned previously):

❖ Behavior Intervention Program

Throughout the COACH Program, a strong behavior intervention orientation for both the child and the family is evident, with consistent practices across situations and sites. In-home behavioral training will include techniques of modeling, coaching and positive reinforcement to resolve specific skill deficits and environmental deficiencies. Each student's program will be personalized based on an individual assessment.

In view of the fact that the coordinator will be responsible for the implementing of each individual program (with an assessment component if required), it is recommended that the coordinator be a psychologist. The coordinator is also available to assist in the transition and help the receiving school implement a behavioral program.

❖ Communications Program

It is estimated that at least half of the students in the COACH Project will have communication difficulties. In fact, many behavioral problems in young children result from, or are aggravated by, the inability to communicate properly. Therefore a Speech/Language Pathologist will develop and implement an individualized Speech/Language intervention program as required.

❖ Referral and Contracted Services

Clinical Reading and Occupational Therapy will be available on a purchased basis. Psychiatry will be available on a priority basis through the Educational Psychiatric Services of the Manitoba Adolescent Treatment Centre (to be negotiated).

H. The Trans-disciplinary Team

The COACH Project aspires to be trans-disciplinary rather than multi-disciplinary in nature. That is, while all disciplines and services will be made available, the intent is to limit the number of people involved with each client, by working across disciplines as much as possible. Thus a number of services designed by various specialists will be

delivered by the designated individuals working directly with the children and their families. For example, the behavioral component will be delivered by the Coaches, teacher and child's care provider, under the guidance of the coordinator. The Coaches will deliver most of the communications program under the direction of the Speech/Language Pathologist. Families will relate to both the Coaches and the Home Support Social Worker.

EVALUATION

The COACH project will be evaluated using an outcome-based case study framework. The emphasis will be on the outcomes that each child and family have achieved while in the program. A variety of standardized measures will be used to assess the child's progress from the program staff and caregiver/parents' perspective. The child, caregiver/parent and program outcomes listed in the "Program Goal and Objectives" section of this proposal will be used as the guideline for individual case plans that will be developed with each child's family. Each child's situation and hence, the services they receive through the COACH program, will be unique. The case study model will allow these differences to be acknowledged while examining the impact of the program on each child and family.

When a child is admitted to the program, baseline data of the child's behavior at school and in the home will be documented. Prior assessments of the child and previous clinical data will also be examined. As the child progresses through the program, staff will be responsible for providing periodic progress reports. The child will be transitioned to the receiving school when the individual goals outlined in the case plan have been reached.

There will be a detailed evaluation plan developed for the program prior to September 2000. The measures that will be used to determine the child's readiness to re-enter the receiving school will be administered to the teacher, coach, social worker, psychologist and parents. There are a few measures that are being explored. The Early Development Inventory will be used to measure the child's readiness to learn. Parental Investment in Children will determine changes in parental attitudes and the Social Support Inventory will assess changes in the parent's social network. Measures will be selected based on findings in the literature that support their validity for this type of evaluation.

Further to the measures that are used to assess the program staff and parents' perception of the child's progress, there will be a number of objective indicators that can be used to assess if there has been improvement in the child's and parent's progress. A case study framework allows other indicators to be used for individual children as are appropriate. Some of the indicators that can be examined are listed below. These would be assessed before the child enters the program, at the time the child leaves the program and again at 6-months after leaving the program.

Outcome Indicators:

- Attendance
- Academic performance

- Suspensions
- Behavioral problems in the school and community
- Problems reported by parents/ caregivers
- Number of residential/ home moves
- Number of time the child is admitted to the program
- New referrals/case closures to Child and Family Services
- Significant child protection events

As well as quantitative measurements, qualitative data, through individual interviews or written questionnaires, will be collected to determine the change to the child's behavior, their caregiver's and parent's attitudes and behavior and the child's family circumstance. Although the true test of the program will be in the long term success of the students, understanding the short-term impact through the child's return and continued success in school will determine the benefits of COACH as an alternative intensive transition program for multi-problem children.

STEERING COMMITTEE

A Steering Committee will provide direction to the COACH Project. The committee will consist of representatives from the major partners and their branches:

Winnipeg School Division #1:
 Superintendent of Schools-Inner City
 Director of Student Support Services
 Principal (Mulvey School)
 Director of the Child Guidance Clinic
 Director of Winnipeg Child and Family Services
 Manitoba Education and Training
 Manitoba Healthy Child Initiative
 Mandated First Nations Executive Directors' Group

Others may be added as required. Local community input will be welcomed with respect to the development and implementation of the individual plans.

PROGRAM LOCATION

The off-campus site has been determined for the program and an agreement in principle has been reached between the Winnipeg School Division and the building owners for the location of the COACH Project. However until such time as the funding has been formally approved, no written agreements can be made between the two parties.

FUNDING MECHANISM

The funding mechanism is a rather complex mixture of a grant, fee for service and in-kind resources. This is inevitable, given the number of organizations, the geographic mobility of the clients, and the principle that the dollars follow the child. Precedence for this model is the Provincial Autism Program that involves several school divisions and funding sources. Flexibility in the funding was also approved when programs such as Tri-Agency, Marymound and John G. Stewart School (Knowles Home) were being established.

A. Phase-In

During the pilot stage of the COACH Project, the program will be phased in gradually, starting with a small complement of Winnipeg School Division #1 students, until full capacity is reached.

PROJECTED BUDGET (Estimate)

B. Projected Expenses:

	F.T.E.	Cost	Employed by:
* Coaches	10.00	\$250,000	CFS
* Teacher	1.00	\$60,000	WSD #1
* Psychologist (coordinator)	1.00	\$60,000	WSD (CGC)
* Home Support Social Worker	1.00	\$60,000	WSD (CGC)
* Reading Clinician	0.25	\$15,000	(1) WSD (CGC)
* Speech/Language Pathologist	0.25	\$15,000	WSD (CGC)
* Occupational Therapist	0.10	\$6,000	(1) WSD #1
* Substitute (teacher, coaches)		\$6,000	WSD #1
Transportation		\$25,000	
Building Cost		\$15,000	WSD #1
Recreation/Community Activities		\$8,640	(2)
Staff Training		\$5,000	
Materials/Equipment		\$3,000	
Evaluation		In-kind	HCI
After Hours Crisis Intervention		In-kind	MYS
Respite (for CFS clients)		In-kind	CFS
Psychiatry		In-kind	EPS
TOTAL		\$528,640	

Note:

- (1) Purchased as required
- (2) Based on \$60 per student per month (12 students)

CFS	Winnipeg Child and Family
WSD #1	Winnipeg School Division #1
CGC	Child Guidance Clinic
HCI	Manitoba Healthy Child Initiative
MYS	MacDonald Youth Services
EPS	Educational Psychiatric Services

The Winnipeg School Division #1 will provide administrative support to the COACH Project through a school administrator (Principal, Mulvey School) who will be responsible on a day-to-day basis for the program. Clinical supervision of the clinicians will be accessed through the Child Guidance Clinic.

C. Projected Revenue:

Revenue will be obtained through the redirection of grants provided for Level 2 and Level 3 students by Manitoba Education and Training; funding from the Healthy Child Initiative; in-kind services from the Winnipeg School Division #1 (including the Child Guidance Clinic) and Winnipeg Child and Family Services.

During the initial start-up period for the program, some flexibility in the funding requirements will need to occur. It is assumed that the majority of students to be selected (as described under "Target Group") would be Level 3 children if they were currently attending school. As the program unfolds and specific children are identified, the appropriate grants can be assigned.

The principle of having the grant money follow the child will also require some flexibility. It is suggested that the grant money could be pro-rated for the time the child is in the COACH Project, the time he/she is in transition, and ultimately back into the receiving school permanently.

D. Estimated Annual Revenue:

Amount

Manitoba Education and Training Level 2/3 Funding:

(12 x \$8,565 or 12 x \$19, 055 or a combination) \$102,780 to \$228,660

Manitoba Healthy Child Initiative \$200,000 to \$300,000

In-kind Winnipeg School Division including Child Guidance

Clinic (administration/materials/EPS etc.) \$80,000

In-kind Winnipeg Child and Family \$236,520

- For children in care, the per diem rate is \$54
- Respite services may be provided on the basis of individual needs for clients of WCFS

Appendix A: JOB DESCRIPTIONS

TITLE: **Program Coordinator**

JOB SUMMARY: This is a School Psychology position within the COACH team with responsibilities to coordinate the COACH Program, to perform individual assessments and therapy, to coordinate services to individual students and families, and to provide consultation to the Day and After School/Weekend/Vacation COACH teams.

EMPLOYMENT

LOCATION: Child Guidance Clinic

DUTIES AND RESPONSIBILITIES:

1. Coordinates the operations and team functions of the COACH Program.
2. Calls and chairs intake, exit and periodic team meetings.
3. Chairs the committee that receives, evaluates and prioritizes referrals from Metro Winnipeg school divisions.
4. Provides direction to COACH team members (but not supervision, which is provided by the employing agencies).
5. Provides assessments and therapy within the area of School Psychology as required.
6. Assures all students have a comprehensive, multi-disciplinary, 24-hour treatment plan and creates environments conducive to those plans as feasible.
7. Assures all required services within the treatment plan are brokered to team members and/or other agencies/programs.
8. Provides consultation upon request.
9. Advocates for ongoing supports to the receiving school so that the student is successful in the receiving school.
10. Negotiates and consults with the receiving school for transition discharge, follow-up and relapse prevention planning.
11. Assists parents, teacher and Coaches in crisis management when available.
12. Assures documentation, both internal and for funding, is in place.

13. Negotiates and consults with the local community groups, including aboriginal communities.
14. Participates in the program's evaluation.
15. Attends meetings and participates in professional development opportunities as required.
16. Assures program information is communicated to the professional and larger community through articles, papers, and presentations as required.
17. Other duties as assigned.

TITLE: Home Support Social Worker

JOB SUMMARY: This is a Social Work position within the COACH team with responsibilities to work with the caregivers and the children who are involved in the COACH Program. This worker will develop and implement a family plan for caregivers and children. The worker will provide direction to coaches in the implementation of the plan.

EMPLOYMENT

LOCATION: Child Guidance Clinic

DUTIES AND RESPONSIBILITIES:

1. Participates in service planning with members of the COACH team for implementation of time-limited, goal orientated treatment plans for the family.
2. Participates in intake, exit and periodic team meetings for the COACH Program.
3. Coordinates and develops with the families and COACH team, the After School, Weekend and Vacation segments of the 24 hour plan.
4. Supports families in the implementation of the 24-hour plan with emphasis on family focused interventions.
5. Provides consultation to coaches re: parenting skills, behavior management, self-care techniques and age appropriate life skills to the parents where required.
6. Provides support and counseling to the families, which may involve in-home support.

7. Provides crisis intervention to the family in conjunction with YECSS.
8. Assists school personnel, when available, with the COACH child in crisis.
9. Advocates for and assists families in accessing community resources, including respite, Mental Health links etc.
10. Encourages and supports parents to attend COACH related meetings e.g. school, team meetings etc.
11. Maintains regular and consistent contact with the families; monitors progress; and recommends any required changes to the 24-hour plan.
12. Supports the family and child during the transition period.
13. Provides written monthly report on work activities to the COACH coordinator.
14. Collects statistical data as required.
15. Attends agency meetings and participates in professional development opportunities.
16. Other duties as required.

TITLE: COACH

JOB SUMMARY: This is a Youth/Treatment Worker position within the COACH team with responsibilities to provide daily implementation of the behavioral and recreational/community components of the 24-hour treatment plan. Training in Nonviolent Crisis Intervention is a requirement.

Coaches may work in each aspect of the program.

EMPLOYMENT

LOCATION: Winnipeg Child & Family Services

DUTIES AND RESPONSIBILITIES:

1. Participates in the service planning with members of the COACH team.

2. Implements the behavioral and family support component of the 24-hour plan, under the direction of the Program Coordinator, Teacher and/or Home Support Social Worker.
3. Encourages appropriate behavior interactions, social skill development as well as cultural/community enrichment.
4. Teaches parenting skills, behavior management, self-care techniques and age appropriate life skills to the parents where required.
5. Meets with the student regularly to establish a supportive relationship as the primary and consistent adult in the program to whom the student relates on a daily basis.
6. Communicates regularly with the other COACH team members, families, and other agency representatives.
7. Provides supervision for school and out of school activities.
8. Provides daily transportation for the children and families as required (e.g. to/from the classroom, community activities, appointments, crisis interventions etc.)
9. Monitors behavior and collects data as required.
10. Attends and participates in COACH team meetings and professional development opportunities.
11. Provides crisis intervention in conjunction with the other team members and service providers.
12. Restrains children requiring physical intervention to prevent danger to self, others, or property.
13. Provides support to the child and family during the transition period.
14. Supports teacher in classroom (small group) setting, focusing on educational and behavioral goals.
15. Assists with the planning and providing of appropriate activities in individual/small group and/or family based recreation and community settings, based on the 24-hour plans.
16. Provides support to, and consultation with, the families and Home Support Social Worker.

TITLE: **COACH Teacher**

JOB SUMMARY: This is a classroom teaching position within the COACH team with responsibilities to coordinate and deliver the educationally focused activities component of the COACH Program. This segment of the program will focus on classroom behavior with direct instruction in school survival and social skill development. Training in Non Violent Crisis Intervention is a requirement.

EMPLOYMENT

LOCATION: Winnipeg School Division #1

DUTIES AND RESPONSIBILITIES:

1. Coordinates and delivers the individualized educational plan for each student. The curriculum will be modified to accommodate the student's academic and emotional needs.
2. Participates in the overall service planning with members of the COACH team.
3. Participates in intake, exit and periodic team meetings for the COACH Program.
4. Incorporates structured learning-by-doing activities and computer-assisted learning techniques into the educational activity program.
5. Provides direct instruction to the students in school survival, appropriate behavior interactions and social skill development.
6. Assists the students with academic deficits by providing academic support, encouragement and a nurturing relationship.
7. Communicates positively with the students and seeks "win-win" solutions to classroom problems through the use of effective behavior management strategies.
8. Provides crisis intervention in conjunction with the other team members and service providers.
9. Participates actively in the transition planning when a student is scheduled to enter the receiving school.
10. Communicates regularly with the parents/caregivers and encourages their support and involvement in the Day program.
11. Provides ongoing documentation of each child's progress and collects statistical data as required.

12. Participates in the program's evaluation.
13. Attends meetings and professional development opportunities as required.
14. Other duties as required.

TITLE: COACH School Principal

JOB SUMMARY: This is an administrative position within the COACH team with responsibilities to oversee the educational component of the COACH Program.

EMPLOYMENT

LOCATION: Winnipeg School Division #1

DUTIES AND RESPONSIBILITIES:

1. Ensures Winnipeg School Division #1 policies and practices are followed.
2. Is responsible for the overall administration and operation of the school program component of the COACH Program.
3. Supervises and evaluates the Winnipeg School Division teaching staff assigned to the COACH Program.
3. Participates in the overall service planning with members of the COACH team.
4. Participates in intake, exit and periodic team meetings for the COACH Program.
5. Develops a liaison with the contact for the off-campus location.
6. Other duties as required.

ADVISORY COMMITTEE

Once the COACH Program has been approved, the role of the Steering Committee will be adapted to that of an Advisory Committee for the program. The committee membership will remain the same, i.e. consisting of representatives of the major partners and their branches:

Winnipeg School Division #1:
 Superintendent of Schools - Inner City
 Director of Student Support Services
 Principal (Mulvey School)
 Director of the Child Guidance Clinic
 Director of Program Services Winnipeg Child and Family Services
 Aboriginal Liaison Services Program Manager (WCFS)
 Manitoba Education and Training
 Manitoba Healthy Child Initiative
 Mandated First Nations Executive Directors' Group
 Any other participating organizations

Others may be added as required. Local community input will be welcomed with respect to the development and implementation of the individual plans.

DUTIES AND RESPONSIBILITIES:

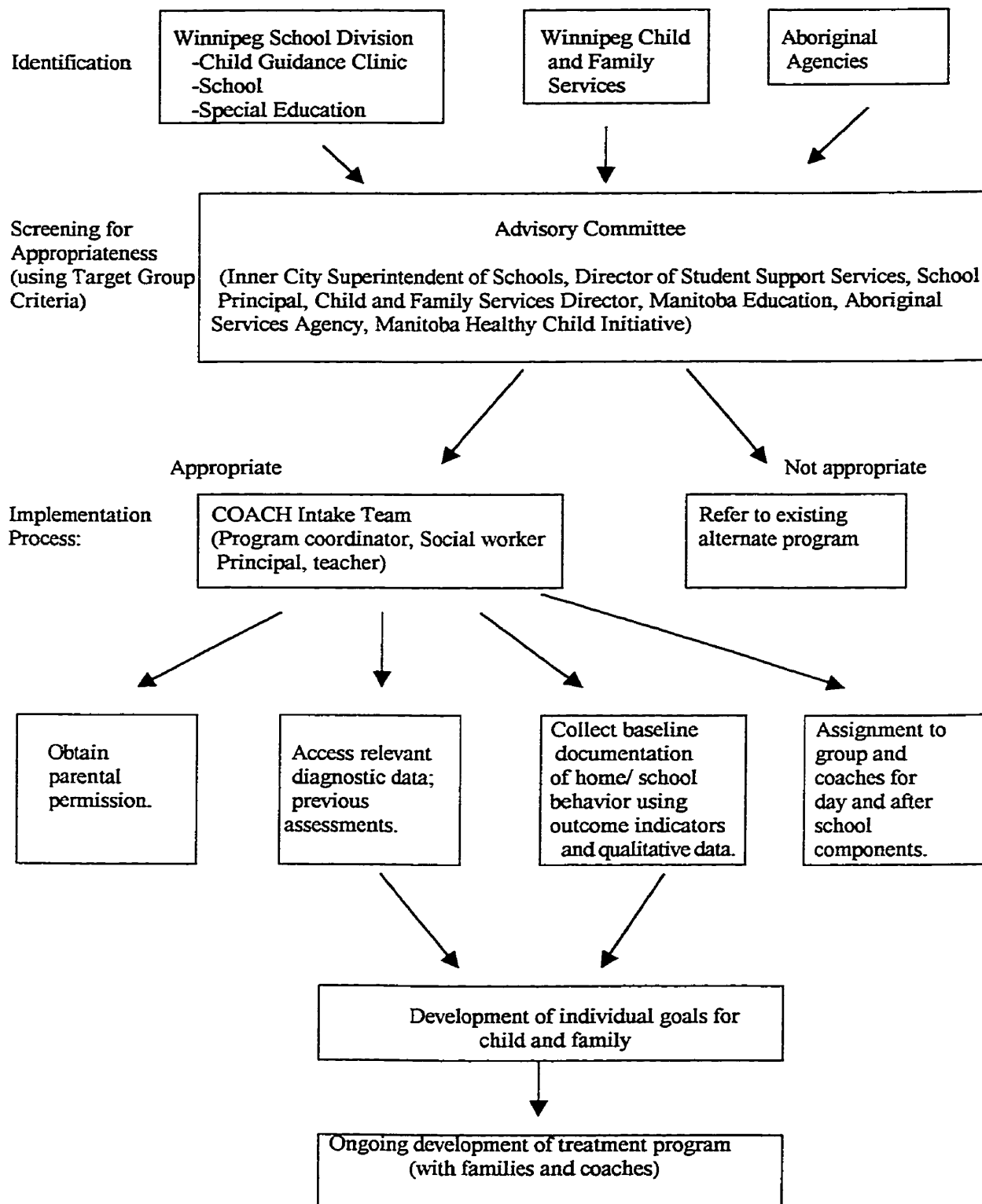
1. To provide direction and assist with administrative decisions pertaining to the COACH Program.
2. To participate in regular meetings
3. To negotiate arrangements with outside agencies e.g. Youth Emergency Crisis Stabilization System, Manitoba Adolescent Treatment Centre, MacDonald Youth Services, PsysHealth and St. Boniface Hospital.
4. To negotiate and advocate for appropriate funding for the program.

Appendix B.1: Program Structure Model for COACH

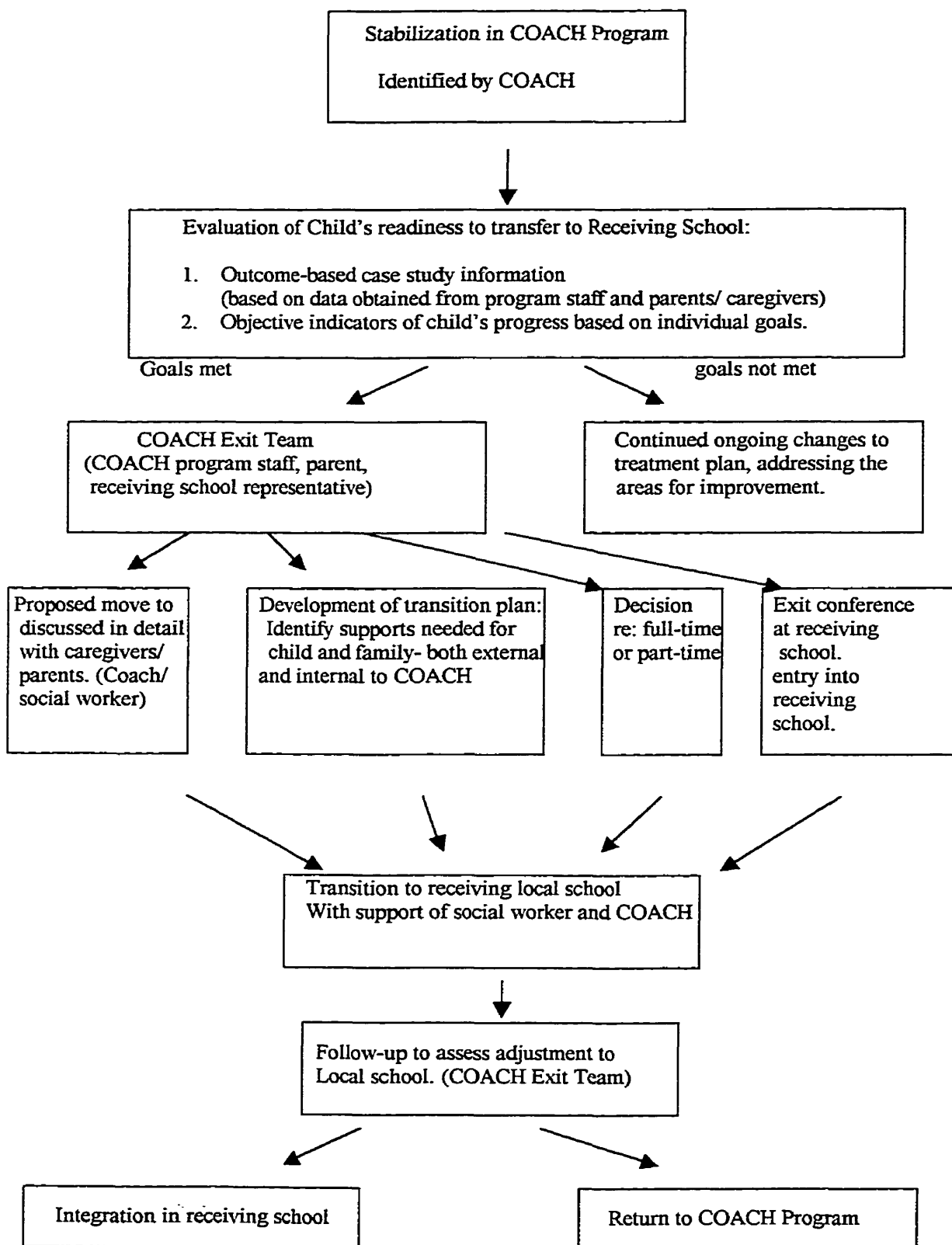
Program Coordinator (Case management, coordination of services, individual behavior interventions, networking, school advocacy)		
Day Program		After school program 1 home support social worker 2 coaches Up to 12 students Family-focused interventions Individual in-home support Outreach to parents/ families Recreation/ community activities Additional supports Respite Crisis support
Educationally Focused activities	<div><div><div>3 Students 2 Coaches</div><div>A</div></div><div><div>3 Students 2 Coaches</div><div>B</div></div><div>1 Teacher</div></div>	
Recreation/ Community Activities	<div><div><div>3 Students 2 Coaches</div><div>C</div></div><div><div>3 Students 2 Coaches</div><div>D</div></div></div>	
Behavior Intervention, social skills development, ongoing assessment		

Student Groups A & B take the academic program in the morning and recreation in the afternoon.
 Student Groups C & D take recreation in the morning and academics in the afternoon.

Appendix B.2: Referral Process for Non-attending EBD Children (6-11 years of age)



Appendix B.3: Transition Process from COACH Program to Receiving School



Appendix B:
A Literature Review
Related to COACH

A Review of the Literature Related to COACH

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Introduction

This document is intended to summarize some of the literature related to the two primary program components of COACH- educational and family-based interventions- as well as programs that are similar to COACH. The first section is related to educational interventions for children with extreme emotional and behavior disorders. The children in the COACH project will likely be diagnosed with a variety of behavior and emotional disorders ranging from conduct disorder to dissociate disorders and others. The individualized portion of each child's case plan will differ depending on his or her specific needs. The literature reviewed in the first section will offer some information regarding general educational interventions for children with such disorders beginning with a value framework for service delivery. Also included in this section is a framework for understanding prevention programs.

The second section of this document relates to the parent component or family-based interventions. This section is aimed at articulating some of the interventions that have been successful in working with families who may be thought of as neglectful. Although it would be unfair to generalize all of the families who will have children in the COACH project, there are some characteristics that may be shared among families. There is an assumption that some families may be led by parents who are unable to recognize and/or meet the exceptional needs of their child. The interventions are aimed at supporting parents so that they may be able to support their children. There is an emphasis on social skills training, social support and connecting parents to the community in which they live. Other interventions are aimed at supporting parents in their in-home interactions with their children. The interventions discussed are aimed at parents and do not recognize different child characteristics that may inhibit ideal parenting.

The final section of this document outlines programs that share similarities with the COACH program. Three programs are reviewed followed by a discussion of their similarity to COACH. The first program is often referred to as the Montreal Tremblay study. This study evaluated a bimodel secondary prevention program aimed at kindergarten boys at risk of future violence and poor school success. The program evaluation demonstrated excellent short-term results for young boys as well as some long-term effects.

The second program is First Steps to Success, developed in Oregon. This program includes universal screening of kindergarten children and uses a multi-service intervention to promote a positive experience for children beginning elementary school.

First Steps is similar to COACH in that it is a school-based program with a significant family partnering component. This program targets the youngest of the children who would be eligible for the COACH, intervening prior to a child experiencing serious educational setbacks.

The third program reviewed is the Earls court Program for children under 12 who commit offenses in Toronto. This program is similar to the COACH program in that it is a multi-faceted tertiary prevention program utilizing a variety of strategies to promote success in troubled children under the age of 12. The program is justice-based, but also has a minor school component. There is an excellent literature review in Chapter 3 of Goldberg, Augimeri, Koegl and Webster (1999), the evaluators of the Earls court program, which develops a conceptual framework of the range of treatment interventions for children under 12 who commit offenses. This chapter is available in the COACH Resource Binder currently being compiled.

Interventions for Children with Extreme Emotional and Behavior Disorders

A Framework of Values

Article 28 of the Convention of the Rights of Children of the United Nations articulates the right of a child to primary education. The Public Schools Act of Manitoba (SM, 1987) further states that a child "six years of age or older...has the right to attend school (XIV, 259(1))." Children with extreme emotional and behavior disorders (EBD) present a challenge to administrators, teachers and the community to ensure their educational rights. Evans (1997) outlines four principles that serve as a framework for providers' service response to children and youth with EBD. The first of these principles is "The children and youth whom we serve have a right to a safe and appropriate education" (p. 359). Children with EBD experience the highest rates of rejection from the classroom of any category of disability (Muscott, 1995). Although this is sometimes necessary to ensure the safety and security of the other children, it should not preclude children with EBD from receiving a safe and appropriate education.

The second principle outlined by Evans (1997) is: "An array of services is not only desirable, but is necessary" (p. 359). There is literature that addresses the need for primary prevention of emotional and behavior disorders with children at risk (e.g. Boyle & Offord, 1989; Johnson & Walker, 1987), however, this cannot replace the need for services to children already experiencing such disorders. Although primary prevention is valuable, it cannot be at the cost of providing tertiary services to those already affected.

Inclusion of all children in a regular school setting is a desirable goal, but service providers cannot omit the need for specialized services along the way (Evans, 1997). It is important that inclusion is not forgotten, but as an alternative to significant classroom disturbance or suspension and expulsion, specialized programs that meet the unique needs of EBD children are necessary. Although the best success for children with EBD is met when the intervention is prior to eight years of age (Eron, 1990), research suggests that untreated emotional and behavior problems of childhood will worsen, if left unattended completely (Hunt & Johnson, 1990; Smeets, 1971; Schroder, Mulick & Rojahn, 1980).

The third value stated by Evans (1997) is the need for service providers "to realize that our lack of knowledge exceeds our understanding of emotional and behavior conditions" (p. 360). The field of child and adolescent emotional and behavior disorders is in its infancy and there is still a considerable amount to learn. Interventions that are imposed must be formulated in a cautious manner with sound evaluations to ensure their benefit to children and families (Evans, 1997). The present review of the literature is intended to promote this value by trying to highlight some of the relevant research for the COACH program proposal.

The final principle is: "what we do is as important as how we do it" (Evans, 1997, p. 361). This speaks to the need for service providers to recognize their position as role models and "moral beacons" (p. 361). The way service providers cooperate and interact to provide service as well as live their own lives should demonstrate that "gentleness is better than violence, that forgiveness is better than revenge and that honesty is better than deceit" (p. 361). These four principles assist in guiding program planners in their development of services for children and youth with emotional and behavior disorders.

Conceptualizing Prevention

It is impossible to discuss treatment interventions for EBD or antisocial children without using the language of prevention. Programs for children, with any problem or disorder, can always be considered prevention of more severe future emotional or behavioral problems. It is worthwhile to outline the three levels in which prevention strategies can be conceptualized. These offer a useful framework for understanding different programs targeting EBD and antisocial children.

Primary prevention interventions aim to prevent a problem from emerging. Teaching anger management and enhancing school readiness for all children are examples of universal interventions to prevent antisocial behavior.

Secondary prevention strategies require individually tailored interventions applied to those students who already show at-risk behavior for a given problem, such as antisocial behavior. Individual counseling or one-to-one behavior management are examples of these types of interventions. The Montreal Tremblay study and First Steps for Success are examples of secondary prevention programs.

Tertiary prevention strategies involve intensive intervention approaches that are characterized as ‘wrap-around’ and are applied to the most severely at-risk children. “Wrap-around interventions commonly require a case manager who coordinates services and supports across families, schools, and social service agencies” (Walker, 1998, p. 18). The Earls court programs and COACH are examples of tertiary prevention program.

Educational Interventions for Violent and Aggressive Children

Nelson (1997) offers some important points to planning effective services for children with violent and aggressive behavior. After reviewing the seminal literature in the development of the field, Nelson (1997) outlines practices that have failed to deliver and practices that hold promise. Some of the practices that have failed to deliver expected outcomes are the methods of school suspension and expulsion. This is not only contrary to the right of a child to a safe and appropriate education, but also it is not helpful to the student as it removes them from the social “environment where they can learn useful skills, model the behavior of pro-social peers and be exposed to caring adults” (Nelson, 1997, p. 255). Although suspension and expulsion assures the safety of the other children in the school, it does nothing to assure society’s safety in the future. “Unless antisocial and aggressive behavior patterns are modified early, the likelihood is great that children who display them will require long-term (perhaps life-long) supportive interventions” (Nelson, 1997, p. 255).

Practices that are advocated by Nelson (1997) include screening and early identification of children with violent behavior, wrap-around services and recognition of the environmental context of behavior. First, the early identification of children with violent behavior is necessary to deliver a range of graduated treatment interventions. There needs to be universal interventions that are proactive and apply to all students (also referred to as primary intervention) as well as targeted interventions to children who are

diagnosed with an emotional or behavior disorder (targeted interventions are also referred to as tertiary prevention strategies).

Targeted interventions are individual behavioral strategies applied in settings where problems occur and developed around a student's unique strengths. These strategies include direct instruction in school survival and social skills, effective behavior support plans and individual behavior management contingencies (Nelson, 1997, p. 257).

The idea of wrap-around planning is contextually based coordinated services between the child, his or her family and the providers who serve them. For children with violent and aggressive behavior, this approach promises to deliver the intensity of treatment across multiple settings that is the child's total social milieu (Nelson, 1997). A program that develops interventions for school, home and the community will have this level of intense treatment for the child.

The significance of the context of a child's behavior as a response to their environment may seem common sense to those experienced with EBD children. Nelson (1997) offers the recognition of the environment as an understanding that has moved behavior therapy for violent children away from aversive behavior control techniques, to one that targets both the child's behavior through positive rewards and the environment in which the behavior occurs. A program that seeks to modify a child's home environment and school environment and examine the context in which extreme behaviors occur will have a better understanding of how to best modify the behavior. Nelson's (1997) conclusion is a valuable one: as practitioners we need to keep trying to make progress toward more effective interventions instead of reinventing interventions again and again as we have done in the past.

Interventions with Neglectful Families

The families with children in COACH are not necessarily, but likely to be neglectful families. That is, they may be families that are unable to meet the basic physical and emotional needs of their children. The children in COACH will have exceptional needs and thus, the demand on the parent to meet those exceptional needs is higher than on parents of other children. This piece of the literature review offers intervention strategies for families who have difficulty meeting the needs of their children.

Understanding Neglect and its Correlates

The definition of neglect and the types of neglect are a point of contention among researchers and service providers: where is the line between neglect and minimal parenting? There is, however, general consensus that neglect “a) refers to acts of omission, rather than commission; b) is committed by parents or caregivers and c) results in harm or a threat to children” (Garbarino & Gilliam, 1980, p. 9). There are many forms of neglect stemming from different parental problems. For example, neglect can be chronic or non-chronic resulting from multiple family problems or an immediate family crisis that is preventing parents from completing parenting tasks. This review emphasizes “chronically neglectful families, which are typically multi-problem families with pervasive deficits in knowledge, skills and tangible resources,” (Gaudin, 1993, p. 67).

There are important differences between families who are physically versus psychologically neglectful and there are indications that psychologically neglectful families function less well than those whose neglect is only physical (Gaudin, Polansky & Kilpatrick, 1989). To formulate appropriate interventions, it is important to distinguish between families where inadequate supervision is related to a parent’s impulsive behavior, depression, alcoholism or other dysfunctional behavior and that which is related to the parent’s lack of knowledge about appropriate expectations for their children (e.g., the level of supervision required for a toddler) (Gaudin, 1993). Another distinction of parent characteristics may be the personality of the parent related to their own lack of nurturing as a child. For example, many neglectful parents are characterized as “infantile personality, impulse ridden or apathy-futile” (Gaudin, 1993, p. 63).

Often neglectful parents do not have appropriate social skills to interact with other families and professionals to receive social support. The social support networks of neglectful families are often small and lack positive support. Parents’ support may include people who are mostly critical and not supportive of them or others who reinforce negative parenting behavior and norms (DePanfilis, 1996).

Gaudin, Polansky, Kilpatrick & Shilton (1993) have established associations between neglect, social isolation and loneliness. This study found that neglectful families expressed feeling more lonely, had more stressful life events and were judged by their caseworkers to be more socially isolated than a non-neglectful control group. When neglectful families were asked to list people ‘important in their life’, on average they listed significantly fewer people whom they interacted with less frequently, than the control group. Neglectful families also reported being exposed to negative feedback and

with more critical members in their social network than the non-neglectful control group. Neglectful parents were also likely to report higher rates of depression and symptoms characteristic of clinical depression.

Interventions with Neglectful Families

Interventions with neglectful families then should vary depending on the type of neglect and the basis of neglect. The differences between families are important and necessary when developing interventions on an individual level. However, there are some broad statements that can be made about neglectful families, when the distinctions about forms of neglect and their basis are not considered. Gaudin (1993) outlines some assumptions that provide a foundation to interventions with neglectful families.

1. Neglectful families are typically poor and lack access to resources. Therefore interventions should include connecting parents to community resources and advocating for their basic needs.
2. Neglectful parents typically lack psychological maturity. In the beginning, interventions must nurture the parent and meet their needs so that they can move beyond themselves in order to care for their child properly.
3. Most neglectful parents want to be good parents. Parents need to be approached with respect and non-judgmental support.
4. All parents have strengths that can be mobilized. Parents have survived through some difficult life circumstances and their strengths should not be overlooked. Interventions should promote parent decision-making and direction.
5. Treatment goals must be relevant, realistic, clearly stated and achievable.
6. The exercise of legal authority by a professional helper is sometimes necessary to overcome the initial denial of the neglectful parent. As a last resort, intrusive interventions may be necessary to shake the parent's pattern and draw their attention to the need for change.
7. Treatment of chronic neglect is not a short-term project and should last 12 to 18 months.

There are a number of intervention types that are suggested by Gaudin (1993), DePanfilis (1996) and others. These categories of interventions will be discussed under seven separate headings. Each has their own strengths and potential issues for working effectively with chronically neglectful families.

1. Behavioral approaches and social skills training.

Behavioral techniques appear to be very effective with neglectful families because they break problems down into manageable components, emphasize immediate positive reinforcement for limited improvements, include real-life application and practice to acquire skills, and provide for follow-up to maintain gains (Gaudin, 1993).

Contracting with neglectful families to achieve specific goals and activities has been found to be helpful (Rozansky & Chambers, 1982). In-home behavioral training including techniques of modeling, coaching, and positive reinforcement to resolve specific skill deficits and environmental deficiencies have been found to be effective. Behavior intervention strategies assume working with parents to improve overall household management and parent-child interaction. In COACH, the emphasis will be on parent-child interaction demonstrating concrete behavioral interventions for appropriate discipline and warm positive interaction between parents and children. Behavioral-skills training has been used successfully to enhance typically impoverished parent-child interactions and promote emotionally richer parent-child interactions (Lutzker, 1990).

A significant barrier for neglectful families in accessing positive social support networks is their lack of social skills (DePanfilis, 1996). "Neglectful parents often lack basic verbal/social interaction skills... The use of modeling, coaching, rehearsing and feedback—individual, then in support groups—can significantly enhance neglectful parents' social skills and result in strengthened informal support networks" (Gaudin, 1993). An evaluation of a program that used the behaviorally-based social skills training intervention demonstrated that of parents who received the intervention for nine months, 80% improved their parenting and 60% could have their child protection file closed. There are generally more problems in implementing a behaviorally based social skills training program for parents with severe psychopathology, active drug and alcohol use or extreme interpersonal anxiety (DePanfilis, 1996).

2. Family-focused interventions

Family-focused interventions include therapeutic techniques that target the whole family systems versus the parents or child only (Gaudin, 1993). These interventions seek to "reallocate family role tasks, establish clear intergenerational boundaries, clarify communication between family members, reframe parents' dysfunctional perceptions of

themselves and their children, and enable parents to assume a leadership role in the family” (Gaudin, 1993, p. 74). Family empowerment is a concept that includes mobilizing family strengths with the active involvement of all family members in the services offered. The parents’ role as leaders and family decision-makers are emphasized.

Intensive Family Preservation Services (IFPS) also fall into this category. These home-based short-term intensive services are based on the Homebuilders Model (Nelson, Landsman, Deutelbaum, 1990) and offer promise to neglectful families. IFPS offer a mix of services to families, matching the interventions to the needs of each family. IFPS for neglectful families should include “intensive family contact focusing on parent education and problem solving, specific skill development with concrete demonstrations, and personal counseling” (Bath & Haapala, 1993, p. 223; also see Daro, 1988). Although there has been more documented success of IFPS with abusive families rather than neglectful families, differences in the frequency of services have been cited as the reason (Gaudin, 1993). The difficulty with any intervention for neglectful families is the family’s often inherent problem in attending appointments in their home or in the community. The need for intensive, persistent and long-term intervention with neglectful families is required. Daro (1988) suggests 12- 18 months at a minimum.

3. Individual in-home support: Caseworkers, paraprofessionals and volunteers

Loosely defined casework and counseling interventions are not as effective as concrete problem solving (Daro, 1988). “Intensive, weekly, in-home casework counseling focusing on concrete problem solving is effective with neglectful families” (Gaudin, 1993, p. 75). The use of paraprofessionals or volunteers to supplement the work of professional caseworkers and clinicians has proven to be effective (Upsal, 1990). It is essential that paraprofessionals and volunteers be effectively trained and well-supervised, with clear roles and tasks and ongoing professional consultation and supervision (DePanfilis, 1996; Gaudin, 1993). Paraprofessionals should be selected based on their skills in “child rearing, sensitivity to the struggle of being a parent, and knowledge of community resources as well as ethnicity...” (DePanfilis, 1996, p. 46). It is difficult to isolate the effects of paraprofessional/ volunteer interventions as most programs offer these services in conjunction with professional services. This combination appears to be very effective in helping parents achieve treatment goals, with the most success in the area of acquiring social resources (Miller, Fein, Howe, Gaudio & Bishop, 1984).

Upsal (1990) proposes a program for working with neglectful families that use volunteer support in the home in combination with professional counseling. The steps in

paraprofessional support include three stages. The first stage, dependency, is characterized by developing a trusting stable relationship between the parent and the volunteer. The peer support volunteer plays the role of a nurturing parent and the relationship concentrates on meeting the needs of the parent.

In the second stage, the peer support volunteer changes the nature of the relationship to emphasize parenting skills. The peer support volunteer introduces alternative disciplinary techniques and discusses appropriate child behavior expectations and parent-child interaction.

The third stage, independence, and is characterized by stability in the client's family. The client's contact with the peer support volunteer decreases as the parent is able to take control of the family.

4. Social Network Interventions

Closely tied to the use of an in-home paraprofessional or volunteer is the intervention of assisting parents to expand and improve their social support network. In the beginning the paraprofessional or volunteer can act as the support the parent needs and over time, move away from the parent as connections are established to other supportive people. Some useful tools for assessing social network support include the Eco-Map (Hartman, 1978) and the Social Network Map (Tracey & Abell, 1994, p.57). The Eco-Map is a one-page diagram of circles that connect the family to their social environment. The lines between the circles are used to describe globally the relationship of the family or family member to a piece of their environment. The revised Social Network Map specifies people in the social network and the type of support they provide (concrete, emotional and information) and the frequency and length of the relationship between the parent and the support person.

Research demonstrates that efforts to expand and strengthen the social support networks of neglecting parents are promising in minimizing neglectful behavior (Gaudin et al., 1991). Most neglectful parents have support networks that are dominated by critical non-supportive relatives. The need to expand social support to include more helpful support people can impact the negative impact of relatives. There are six types of social support interventions that can be used to enhance a family's social network (Gaudin et al., 1991).

1. Direct intervention by the professional into network linkages to mediate, facilitate communication, problem-solve, modify, and reframe network members' negative, dysfunctional perceptions of the neglectful parent and/or the parent's negative perceptions of network members.
2. Use of volunteers and paid parent aides to expand and enrich limited networks, provide new information, positive norms, and helpful suggestions about childcare.
3. Social skills training to teach basic communication and social skills individually and in parent support groups through modeling, practice, rehearsal, and reinforcement. Teaching neglectful parents to make and maintain friendships, and to reciprocate aid received from social network members in order to maintain mutually supportive linkages.
4. Parent support groups that provide safe opportunities for development of social skills and for making new friends to expand support networks.
5. Identification, linking, consultation with indigenous "neighborhood natural helpers" (people in the area with recognized natural helping skills) to enhance the parent's informal helping network.
6. Linking neglectful parents with existing supportive groups in the community, for example, church, school, or neighborhood groups.

5. Parent education and support groups

Parent-education groups are listed above as an intervention in supporting parents to expand their social network. Opportunities to interact with other parents in groups such as Parents Anonymous provide a variety of emotional and information support to neglectful families (Gaudin, 1993; DePanfilis, 1996). There are potential issues with a group setting for interventions. First, neglectful parents often require individual social skill training before they can feel comfortable in a group setting. Second, concrete support such as transportation and childcare must be provided in order to ensure that the parent can attend the group. Research demonstrates more success with neglectful parents with an individualized in-home intervention, but the need to move neglectful parents into a positive social network is an important step that should be attempted when the parent feels comfortable.

6. Interventions with older children who have been neglected.

Gaudin (1996) states that school-aged children who have been or are “victims of neglect have serious deficits in cognitive, academic skills that require intervention to prevent school failure and drop-out, and a continuing downward cycle of functioning” (p. 76 also see Wodarski et al., 1990). Gaudin (1996) explains the components of a program for children who have been neglected and require preventative or remedial programs. These are cited below.

1. Special education programs with low teacher-to-child ratios, structured learning-by-doing activities, positive reinforcement, and the best computer-assisted learning technology available are needed to remedy deficits in cognitive stimulation and motivation to learn.
2. School or community-based tutorial programs using professional teachers or volunteers can provide neglected children and adolescents with the necessary academic help, encouragement and a relationship with a nurturing adult to help overcome academic deficits.
3. Group counseling and personal skills development classes for older children and adolescents provide opportunities for developing life skills appropriate to their age and developmental level. Such programs have been found to result in improved functioning and reduced likelihood of further maltreatment for adolescents
4. Volunteer or paid paraprofessional parent aides can provide one-to-one assistance to parents with learning child care skills and also provide supplemental parenting to children while parents are learning to improve their own child caring abilities.
5. Volunteer big brothers and big sisters can provide neglected children with emotional nurturing, tutoring, cultural enrichment and recreation activities, positive role modeling, and vocational and career counseling.

7. Multi-service interventions and Wrap-around services

Because most neglectful families are multi-problem families with many deficits, no one-intervention technique will be successful (Daro, 1988). Interventions for neglectful

families should include an array of services including “concrete, supportive community services from multiple sources and a combination of individual, family and group methods that include individual counseling, behavioral methods, individual and group parenting education and family therapy” (Gaudin, 1993, p. 72). The range of available services allows services to be individualized to meet the needs of the family (DePanfilis, 1996). Programs that offer a range of services to neglectful families have been successful, although evaluations have been unable to isolate which program components are most effective (DePanfilis, 1996).

Wrap-around service is a concept tied to collaborative projects. Programs that involve multiple partnering organizations allow for flexibility in service delivery and resource distribution for families. When multiple service providers work together in the best interest of the child, all will benefit. Malloy, Cheney and Comier (1998) suggest that there are five characteristics that must be met in order for wrap-around services to be successful. Although these were developed in relation to a program for youth, they are applicable to children and families as well. Wrap-around services include the following principles.

- Wrap-around services focus on the strength of the child, family, school and community.
- Wrap-around services are driven by the needs of the child as opposed to the needs of the agencies.
- Wrap-around services deal with all aspects of the child’s life.
- Wrap-around services provide for the child and family in natural settings and the use of social networks such as family and friends.
- Wrap-around services concentrate on the needs that are basic to all individuals, including fundamental physical, emotional and cognitive needs.

Multi-Service Program Models for Aggressive, Non-compliant Children Under 12

The Montreal Tremblay Study

Many people working with children with emotional and behavioral disorders may be aware of the Montreal Tremblay study, but a brief summary is worthwhile to ensure that the results of the study are clear. The model shares some similarities with COACH in the program components, but is a secondary prevention program. Tremblay et al. (1995) report their findings of a longitudinal study evaluating an intervention targeting

disruptive kindergarten boys. The selected boys and their families received two years of treatment which consisted of “(a) parents’ training in effective child rearing and (b) social skills for the children” (p. 562). A multidisciplinary team, consisting of two childcare workers, one psychologist and one social worker, delivered the program components. There were individualized home-based training sessions for the parents and school-based group social skills sessions for the boys. The logic of the parenting component was that educating parents to positively reinforce pro-social behavior and to discipline effectively without using abusive punishment would assist parents to respond consistently to their child’s behavior. It was reasoned that the boys learning social skills would change their behavior toward peers and that this would lead to greater social acceptance, and thus, a decrease in antisocial behavior. The effects of the program were assessed with five measures: 1) school adjustment of the boys indicated by being placed out of a regular classroom; 2) teacher ratings of disruptive behavior using the Social Behavior Questionnaire; 3) self-reported juvenile delinquency; 4) juvenile court records; and, 5) boys’ perceptions of parenting behaviors. The last measure included questions about the amount of supervision and type of punishment the boys had from their parents. Each of these measures were taken either every year or every two years from ages 10 to 15. Statistical tests were used to analyze the data to understand differences between the boys who received the treatment, a control group of disruptive kindergarten boys who were not given the treatment and a non-disruptive control group.

The results are best understood by each measure. The first measure, the school adjustment of the boys, indicated that the treatment group, who received the intervention had no more out of regular class placements than their non-disruptive peers up until age thirteen. At that point there was a decline in the number of boys from the treatment group maintained in a regular school setting. The similarities between the treatment group and their non-disruptive peers are interpreted by the authors as a positive effect of the intervention.

The teacher rating of disruptive behavior showed a general decrease over time as the boys reached high school. This downward trend of disruptive behavior was the same for the intervention and the treatment groups. However, there was a statistical difference where teachers tended to rate the behavior of the boys from the treatment group as less disruptive.

The self-reported delinquency measure asked the boys about delinquent behavior between the ages of 10 and 15. Items asked about different kinds of theft, vandalism,

drug and alcohol use. The difference between the disruptive boys who received treatment and the disruptive control group was significant. There were fewer reports of delinquent behavior by the boys who were in the program.

Juvenile court records helped to verify self reported acts of extreme delinquency. Although there were fewer boys in the intervention group who had been charged as a juvenile delinquent between the ages of 12 and 15, the difference was not considered statistically significant.

The final measure was the boys' perception of their parents' parenting. Because the program included the parent education component, it was believed that successful treatment would have changed parental behavior to the extent that the boys noticed it. Although the results showed that the boys were being punished less as they got older, there were no statistically significant results between the groups. The treatment group did perceive more supervision from their parents between the ages of 13 and 15, but this was not considered statistically significant.

The Montreal Tremblay Study has had mixed results in their bimodal preventative treatment of disruptive kindergarten boys. Although there were some results that were considered a significant effect of the treatment, there were other differences that were not significant. Nevertheless, a study's mixed results are not a deterrent to using a similar program model, but rather a step in the learning process for program planners in modifying the program to result in better outcomes for the children then serve. The COACH program can use the findings of the Montreal Tremblay Study to further refine and test interventions with this group of children.

First Step to Success

First Step to success is also a secondary prevention program, targeting at-risk children. There are three program components. The first is a universal screening procedure to detect five and six-year-old children showing early signs of antisocial behavior (Walker, 1998). The second component is a school intervention to teach the at-risk child an adaptive behavior pattern for achieving success and making friends. The final piece is the "home component in which parents are enlisted as partners with the teacher and school in teaching the child key skills that contribute to school success" (Walker, 1998, p. 19).

The program takes two to three months to implement after a child is identified as appropriate for the program. It begins with a behavior consultant working with the child in the classroom. This person can be a social worker, psychologist, early childhood educator or other professional. The consultant invests a total of 50-60 hours with each child and their family. In the first five program days, the consultant uses a red-green card to signal to the child when their behavior is inappropriate or appropriate by simply showing the child the red or green side of the card. Points and praise are awarded to the child based on their behavior. After the initial five days, the teacher takes control of this part of the program using the red-green card to signal to the child. The program consultant supports the teacher during this phase.

The family-based component of the program begins about two weeks after the behavior intervention begins at school. The consultant spends one hour a week, for six weeks teaching the parents how to teach their child needed social skills. These include 1) communication and sharing, 2) cooperation, 3) limit setting, 4) problem-solving, 5) friendship making and 6) developing confidence (Walker, Stiller & Golly, 1998). This component is structured and includes a parent handbook and games and activities for the parent to use to teach their child.

This program has demonstrated positive effects on children for up to two years after the intervention. Children's scores were higher after the intervention on adaptive behavior and lower on maladaptive behavior and aggression as assessed through teacher ratings and direct observation (Walker, 1998). Long-term evaluation results are not yet available.

Earls court Under 12 Outreach Project

This Toronto-based program offers a multifaceted intervention for boys between the ages of 6 and 11 years who commit mild to serious offences. The central objective of the program is to reduce police contact among a population at risk of engaging in criminal activity. The program has two primary goals: to decrease the boys' offending behavior and to increase their social competence. This intervention is aimed at the child, the parents, the school and the community (Goldberg et al., 1999). Similar to COACH, this is a tertiary prevention program.

The Earls court Under 12 Outreach Project (ORP) consists of eight major components available to the boys and families based on a differential assessment of their treatment needs and interests. The first is the Transformers Club, a 12-week after school structured

group focusing on learning a self-control and problem solving cognitive-behavioral technique called SNAP (Stop Now and Plan). The second component is a 12-week parent-training group focusing on effective child management. The third component is family counseling, also based on the SNAP concept. The fourth component consists of in-home academic tutoring for the children to promote school success. The fifth component is the program staff's consultation with the child's teacher at least once during the program and ongoing school advocacy with parents as necessary. The sixth component is victim restitution, which encourages the child to apologize to their victim and redress the consequences of their mischief. The seventh program component is individual befriending of the boys with the goal of linking them with structured community-based activities. The last program component is the Friday Night and Saturday Day Clubs for high-risk boys who have completed the program.

Evaluations of ORP have demonstrated that there is a decrease in delinquency, aggression and hyperactivity of the children who attended the program. These treatment gains were maintained over the 6 and 12-month follow-up (Hrynkiw-Augimeri et al., 1993). An evaluation of ORP examining the long-term impact of the program found that fifty percent of the 203 children admitted to the program between 1985 and 1992 had not had youth court contact (Day, 1998).

Earls court Girls Connection

This gender-specific program was established through Earls court Child and Family in 1996. The goal of the program is to help change the aggressive antisocial behavior of girls so that they may stay in school. This program also relies on the SNAP to teach the girls' self-control and effective problem solving. There are similar program components to ORP including parent education, skill building groups for the girls, mother-daughter groups, school advocacy and consultation, collaboration with other agencies, tutoring, volunteer special friends and continuing support as necessary. Whereas the boys are identified for the program through their illegal behaviors (theft, vandalism, break & enters, arson), the girls are identified through antisocial, although perhaps not criminal behavior (not listening to authority figures, trouble keeping friends, non-compliance and aggression, lack of self-control and problem-solving skills as well as police contact).

An evaluation on Girls Connection has not yet been completed.

ORP and Girls Connection share similar program components with COACH. They target a similar group of children and use a variety of treatment interventions to prevent

antisocial and sometimes criminal behavior from escalating. The positive evaluation of ORP is encouraging and suggests that the social skills component of COACH should be emphasized. ORP offers their SNAP (Stop Now and Plan) curriculum for jurisdictions wanting to replicate the program.

Conclusion

This review aimed to provide information from the literature that is relevant to COACH. The two primary areas of intervention- school and family- have been addressed underscoring the importance of mobilizing social support networks and connecting families to their community to ensure the best outcomes for children with extreme emotional and behavior disorders. The last section described three programs that are similar to COACH.

The Tremblay program in Montreal and the First Step program in Oregon are both examples of secondary prevention programs. The Earls court program is an example of a tertiary program for children who have already demonstrated antisocial behaviors. COACH is also a tertiary prevention program. It is important to have programs for disruptive at-risk children at all three levels (Evans, 1997; Walker, 1998, Nelson, 1997). Although COACH is not universal in its prevention, it is aimed at young children characterized as antisocial or diagnosed with an emotional or behavioral disorder before they become adolescents. COACH offers multiple intensive interventions for exceptional children with the goal of stabilizing them and integrating them into a school setting where they can be successful. Although primary and secondary prevention strategies are helpful in preventing behavior either before it occurs or as it begins, tertiary prevention programs aim to ensure that antisocial children do not become any more disrespectful, any more socially isolated or any more violent than they already are and instead learn how to interact positively with others enjoying relationships with their family, school and community (Walker, 1998).

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Appendix C:

The Evaluation Proposal for COACH: Draft I

Evaluation Proposal for

COACH

(Draft I)

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July 2000

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*see page A-27

**see page A-28

Executive Summary

The COACH program is in the proposal stage of development. This evaluation proposal is offered in conjunction with the program proposal dated June 2000, including a review of the literature related to COACH, also dated June 2000. This evaluation proposal offers a discussion of some of the issues related to evaluating COACH. It is intended to be a document for reference for those that will evaluate the program.

The COACH program developed as a response to non-attending school children under the age of twelve with severe emotional and behavioral disorders. These are children that cannot function in a classroom with level two or level three support. The COACH program proposes a multifaceted set of interventions for antisocial, non-compliant children in the classroom, their homes and the community. This set of interventions is necessary to ensure the child's environment is stable and the child is able to focus on learning in school. COACH interventions are designed to fit the unique needs of the children and their families.

The evaluation of the COACH program will be outcome-based. The nature of the program as a full-coverage, non-uniform program presents a challenge to the development of an evaluation design. The design proposed is a series of single case studies using a complex repeated measures reflexive design for each child and family. The program proposal outlines child and family outcomes, but each child's presenting problems and thus, expected outcomes will be unique. A case study approach will allow for an impact assessment of the program on each child and family.

Three standardized measures are presented to assess the child progress at intake, program exit and six months after they leave the program. Further, individual behavior

rating scales completed weekly for each child and used to assess how the child is meeting their individual behavior goals. Data will be analyzed and presented as individual trajectories for each child. Trends emerging among children will be analyzed to assess the program's impact.

Standardized measures will also be used to assess the impact of the family intervention component on the parents. These standardized measures will be used in conjunction with individually developed tracking systems developed with the parents choosing to participate in this part of the program. The nature of individualized service delivery necessitates the individual development of evaluation plans.

Program outcomes will also be evaluated to assess the impact of anticipated effects of the program on the service delivery structure.

Problem Description

Article 28 of the Convention of the Rights of Children of the United Nations articulates the right of a child to primary education. The Public Schools Act of Manitoba (SM, 1987) further states that a child "six years of age and older...has the right to attend school" (XIV, 259 (1)). Children with extreme emotional and behavioral problems present a challenge to school administrators and teachers to ensure that this right is upheld for every child. It is estimated by education officials that, at any particular time in Metro Winnipeg, there are between twenty and twenty-five children under the age of twelve years not attending school. These non-attending children are often unable to function in a classroom with the highest level of supports provided by the current education system. The children often have profound neurological disorders and a background of severe emotional, physical and/or sexual abuse. Their behavior disorders are usually long-

standing and pervasive. They are violent and would be charged with criminal offenses if they were twelve years of age.

The fact that these children are not in school presents a more significant problem to society. Children are largely socialized through the education system. The more recent media attention to fatal school violence in North America and the rash of arsons in Winnipeg demonstrates the need to ensure that children demonstrating antisocial behavior are redirected as early as possible. The children unable to manage with a high level of support are the most likely to grow into adolescent delinquents and later to become dysfunctional and deviant adults. It is a well-established fact that children demonstrating antisocial behavior in their early school years are at the greatest risk for later antisocial behavior (e.g. Tremblay, Pagani-Kurtz, Masse, Vitaro, & Pihl, 1995; Ensminger, Kellam, & Rubin, 1983; McCord, 1991). Children who are not socialized through regular attendance in school are not only a problem to the educators who wish to fulfill their legal obligations, but also a potential threat to society as a whole.

Program Description

COACH is three-year demonstration program that provides individualized interventions for antisocial, emotionally and behaviorally disordered children unable to function in the existing educational system. The goal of the program is to return the child to their local school with level two or three funding. The program will be educationally based, but also involve the student's family in a 24-hour plan. There will be a maximum of twelve children between the ages of six and eleven in the program at any one time.

In the education component, the twelve children will be divided into four groups of three. There will be two coaches assigned to each group. Two groups will receive

classroom instruction in the morning and the other two in the afternoon. For the half-day that the children are not in the classroom, they will be engaged in community activities with the coaches. The purpose of the community activities will be to provide the children with both recreation and meaningful community involvement as well as to teach social skills. Although there will be no formal school component during vacation periods, the coaches and home support social worker will still work with the students and their families. There will be an effort to promote the academic material learned in the school year and provide recreational activities in the community. The program structure model is outlined in Figure One. The referral process to COACH is outlined in a flow chart in Appendix A.

The second program component is the after-school and evening program involving the family. This part of the program will offer in home and community interventions with the child's biological parents and/ or caregivers. This part of the program will emphasize concrete problem solving skills and social networking skills for the parents through the support of the home support social worker and coaches. This part of the program will be highly individualized. There will be an array of services available to families depending on their need. Instrumental services, such as respite and transportation to and from school will be addressed. Informational support to ensure parents are aware of their child's needs and services available in the community will also be offered. The home support social worker will be responsible for identifying and addressing the needs of an individual family and then working with the COACH staff team to ensure service is provided with the least number of professionals needed. Coaches will provide respite to parents and/or family recreational opportunities to

biological families as required. It is believed that many families will have involvement with Child and Family Services and services provided by the COACH program will need to be coordinated with existing services. There will be a 24-hour plan in place for all of the COACH families and crisis support through existing agencies will be available as it is required. Through the transition of the child to their local school, families will continue to receive support from coaches and the home support social worker. A flow chart outlining the transition process of a child from COACH to a receiving school is outlined in Appendix B.

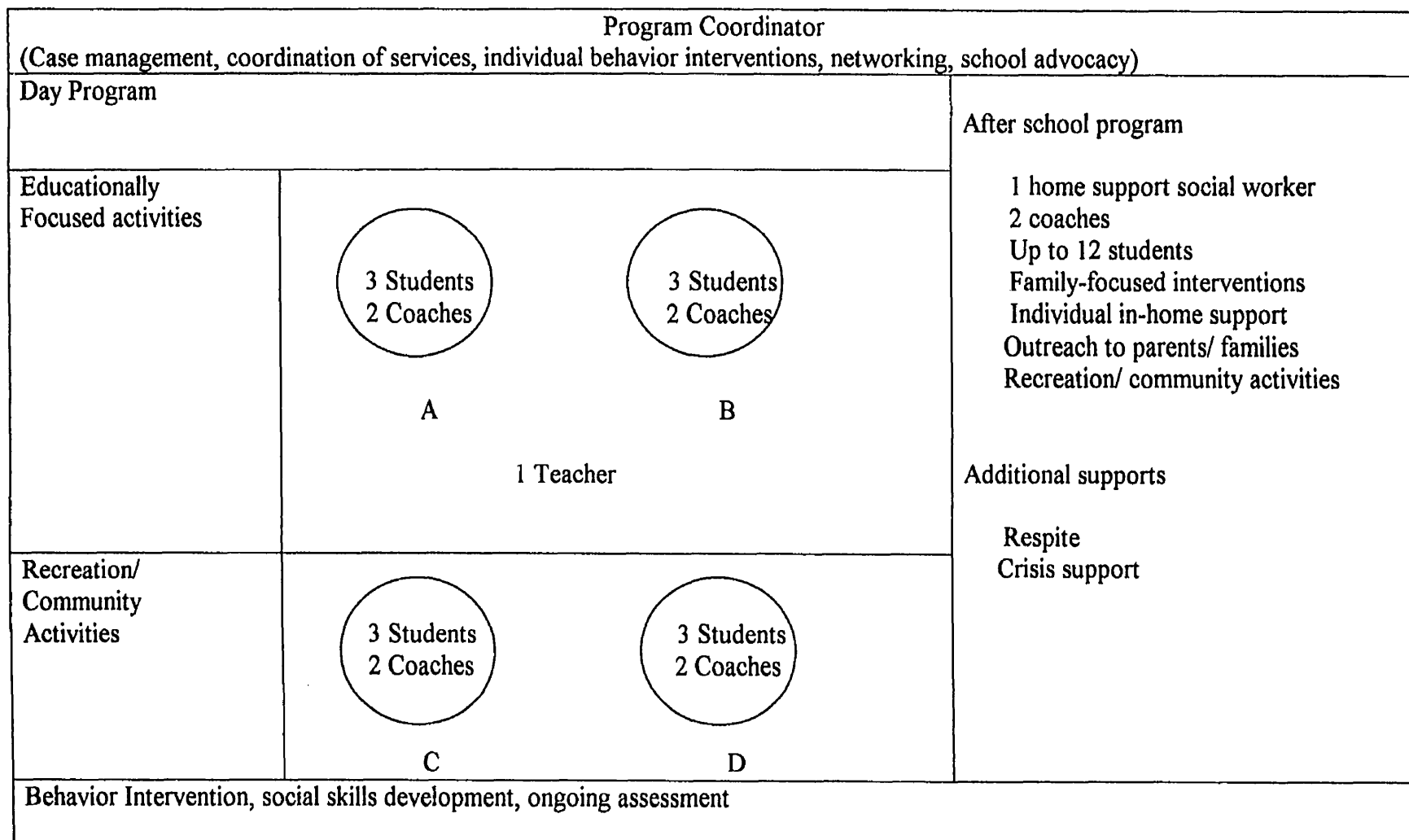
An important program variable will be the individualized planning and case coordination of the program. The program coordinator will be a psychologist who will offer clinical support as well as ensure that the services needed to enable the child to return to their local school are provided. The coordinator will manage the services provided through the COACH program and external agencies, attempting to minimize the number of professional helpers involved with each family while ensuring the child's and family's needs are met.

Other clinical services will also be provided to the child and their family as needed. For example, behavioral training will be provided to children and parents, in the form of modeling, coaching and positive reinforcement to help resolve specific skill deficits and environmental deficiencies (Gaudin et al., 1991). This form of behavioral training is beneficial in teaching children appropriate social skills and teaching parents how to enrich their interaction with their children (Lutzker, 1990). Parents will be encouraged to provide a positive consistent environment for their children. A speech and language pathologist will also develop and implement an individualized intervention for children

with communication difficulties. Clinical reading and occupational therapy services will be purchased by the program as needed. Psychiatry services will be accessed through existing services, also as needed.

COACH aspires to be trans-disciplinary rather than multi-disciplinary in nature. That is, while all disciplines and services will be made available, the intent is to limit the number of people involved with each child and family, by working across disciplines as much as possible. Thus a number of services designed by various specialists will be delivered by the designated individuals working directly with the children and their families. For example, the behavioral component will be delivered by the coaches, teacher and child's parent or caregiver, under the guidance of the coordinator. The coaches may deliver the communications program under the direction of the speech and language pathologist. Families will relate to both the coaches and the home support social worker.

Figure 1: Program Structure Model for COACH



Student Groups A & B take the academic program in the morning and recreation in the afternoon.
 Student Groups C & D take recreation in the morning and academics in the afternoon.

Program Goal and Objectives

The goal of COACH is to return children to a public school setting with level two or level three funding. The program aims to provide comprehensive, cost-effective individualized services for each child and their family in order to: 1) stabilize the child's behavior; 2) support parents in their role; and, 3) connect the child and his or her family to their school and community. The specific interventions for each child and family will vary. Through these three primary areas of intervention, it is believed that the child, and those caring for the child, will be connected to needed resources, allowing the child to focus on school. The program proposal articulates a number of objectives. The first set of objectives are process objectives. They are listed below, under three broad value statements. These objectives are important as they describe the focus of the program's interventions.

Process Objectives

1. Comprehensive, cost-effective and culturally appropriate service delivery

- COACH will deliver the school-based program based on the most appropriate and sound educational practices. The educational component will focus on general outcomes of the English Language Arts program, including the celebration and building of community, communication skills, literacy and problem solving. Other core subject areas such as Math will focus on numeracy and basic life skills.
- COACH will provide a safe environment for students and staff.
- COACH will provide a culturally sensitive service.
- COACH will link relevant agencies in order to obtain the most appropriate and effective treatment for the child and the family. COACH will provide accountable case management and coordination of resources.
- COACH will increase cost-effectiveness and better practice through reducing the number of individuals involved with each child through the deployment of a trans-disciplinary model of service delivery.
- COACH will provide a consistent service regardless of the geographic mobility of the child or changes in the child's educational and help providers.

2. Unique and flexible program development

- COACH will provide an individualized treatment program focused on behavioral management, clinical assessment, and treatment of underlying traumas and behavioral and communication disorders.
- A significant adult, the Coach, will provide a mentor/ tutor role for each child.
- COACH will provide the student's non-school setting with respite and recreational services and 24-hour support.
- COACH will provide continued support and appropriate intervention with the child's foster and/or biological family.

3. A well-defined transition process

- COACH will maintain contact with the receiving school from the time the student is placed in the program to ensure that this setting is involved in the planning process and has resources available to the student.
- The student will return as soon as possible to the receiving school with a gradual phase-in period before the student returns full-time.
- Support will be provided to the student's school, both during the transition from COACH and after the student is integrated full-time, for as long as necessary. The student will return to the COACH program only if necessary.
- COACH will reserve space, full-time or part-time, to readmit a student to the school program should this become necessary.

Outcome Objectives

In addition to the process objectives, there are a number of outcome objectives. These will be measured through the evaluation. These objectives are also listed in the program proposal and were approved by the program's steering committee. The outcome objectives are listed as child outcomes, parent's outcomes and program outcomes.

Child Outcomes:

- Children will exhibit improved social skills, including the appropriate expression of wants, needs and positive peer interaction.
- Children are able to follow direction from authority figures with some external support.
- Children are able to complete academic tasks as requested with some external support.
- Children exhibit minimal negative behaviors, including hitting others, throwing objects, property destruction, verbal aggression and sexually inappropriate behavior.

In addition to the child outcomes, there are also a number of parent outcomes. Some of these outcomes are applicable to alternative caregivers, such as a foster parent or group home, but some are specific to the biological parents of the child. In a situation where a child is temporarily living with an alternative caregiver, the coach and home support social worker will engage the biological parents. The emphasis of the parent intervention is intended for the permanent caregivers of the child.

Parent/Caregiver Outcomes:

- The child's parents and/ or caregivers will become actively involved in the child's education.
- Parents and/ or caregivers will have increased positive interactions with their child.

- Parents will have knowledge of parenting skills and techniques appropriate to meet the unique needs of their child.
- Parents will have a social support network comprised of positive informal and formal supports that provide emotional, instrumental and cognitive support.
- Parents will engage appropriate social support in order to meet the needs of their child.

The third and last category of outcomes is program outcomes. In providing a comprehensive service to children and their families, it is anticipated that there will be less crisis involvement with the family due to a coordinated 24-hour plan. Further, through the use of the transdisciplinary model, there should be a reduction in the number of professional service providers. This model involves, a range of experts designing a specific program for a child and family, but a minimal number of staff interacting with the family. The aim would be to reduce the number of professionals in a child and family's life, while providing needed services.

Program Outcomes

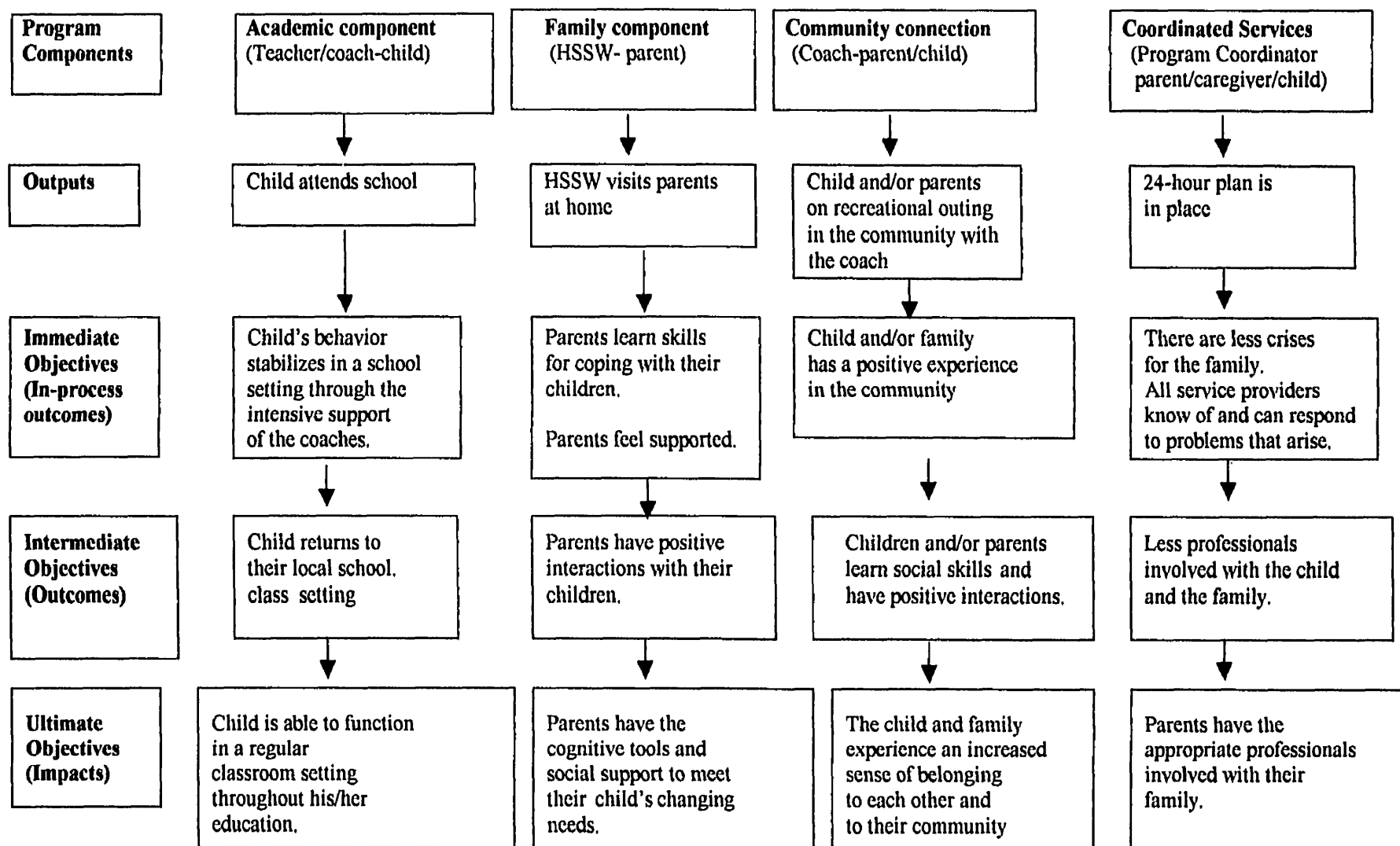
- There will be a coordinated 24-hour plan for each child consisting of unique, individualized service delivery.
- There will be a reduced number of professionals directly involved with the child and the family through the deployment of the trans-disciplinary model of service delivery.
- There will be a reduced number of crisis interventions with the child and family.

Program Logic

The logic of the program is understood in four components: 1) the in-class component, 2) the at-home component, 3) the community connection and 4) coordinated services. The community program is not a discreet program as children and their families

will be involved in community activities through the day program and the after-school evening component. However, for the purposes of understanding the logic of the program, the community involvement has been separated away from the day program and after-school evening program. The program logic model is outlined in Figure 2 and explained in the following sections.

Figure 2: COACH Program Logic



Academic component

The catalyst for the development of COACH was the need to find an appropriate school setting for antisocial children with emotional and behavior disorders. For children with unstable lives and significant behavior and emotional problems, it is difficult to keep the child in one school long enough to complete the needed assessment. Without the necessary support in the classroom, the uncontrolled child poses a threat to other children trying to learn. The COACH program will: one, get the child back into a school setting so that the child does not continue to miss school and two, provide appropriate resources for the child in the classroom. The setting will be controlled and the child will have the intensive support necessary for them to function. The child will stay in the COACH program as long as is necessary and when the child is ready to move into their local school, the COACH program will provide intensive transition supports. Through this transition process, the child will experience success in the transition to their local school and will ultimately begin to enjoy school and function in the educational system throughout his or her educational career.

Although the COACH program was initiated as an alternative school program, the originators realized that in order for a child to be successful in school, their basic physical and emotional needs must be met outside of school. This is the readiness to learn concept that states that a child must have physical and emotional health, social skills, communication skills and basic coping skills before they can begin to learn (Boyle & Offord, 1989). In order to ensure that the COACH project was more than alternative school program, the at-home and community components were developed. These pieces

of the program aim to provide the child with a stable family environment and connect them to their community.

Family component

Parents of difficult to manage children have an overwhelming task in coping with their children's difficult behavior everyday. Often these parents are those with minimal access to physical and emotional resources. The causal relationship between children with behavior disorders and neglectful parents likely occurs in both directions (Gaudin, 1993). The parent may not have the internal and external resources to meet the child's needs, and thus, the child grows into an unmanageable child. As the child's needs heighten, the parent, who inadequately met the child's needs earlier, experiences a greater deficit between their parenting ability and the child's needs. Similarly a child, who for a variety of reasons, including neglect, has an emotional and behavioral disorder, is more difficult to parent. This child may not have the consistent discipline or positive parental interaction they require. The purpose of the parenting component of COACH is to: first, assess the parents' needs and second, provide the parent with the necessary resources to parent their child. Although there may be some work with foster parents, the intent of the family component is to work with the biological parents.

The immediate objective of the family component will be that the parents learn skills for coping with their child. This may be learning discipline techniques or it might be needed respite. This piece emphasizes supporting the parent in their role with the child. The logic follows that once a parent is supported and has the needed resources, there will be an increase in positive parent-child interactions. The ultimate objective is that the

parent has the cognitive tools and social support to meet their child's needs throughout their development.

Community connection

Children in the COACH program will spend half of the school day in the community with coaches. This part of the community program will consist of recreation as well as meaningful community participation. This participation may take the form of volunteer work or field trips. Coaches will also take children out from their homes, with their family or individually, to participate in community activities. These activities will likely include recreation or community events, but may also include other outings. The immediate effect of taking the child and/ or their family into the community is to provide a positive experience for them in the community. The benefit of community activities, with the whole family, is to provide a positive and fun experience for parents and their children. Families in poverty or under an immense amount of pressure may not be able to enjoy each other as most families do. In spending time together in the community, it is hoped that families will have a positive experience together. This is one of the intermediate objectives. Further, the coaches will be able to use natural teaching moments to work with parents in managing their children's behavior. The second intermediate objective is that the children and parents will learn social skills, that is, appropriate ways of acting in the community. The child will learn how to behave and the parent will learn tools for controlling their child in public. The coach will use modeling, coaching and praise to help the parents. The ultimate objective would be that the family experiences an increased sense of belonging, both to each other and to the community.

Coordinated Services

A significant component of COACH is the transdisciplinary model and the coordinated comprehensive services. The coordinator of COACH will have the responsibility of working closely with the home support social worker, the teacher, the coach and other external professionals involved with the child. The development of a 24-hour plan will allow explicit plans to be made that are understood by the family and by the service professionals involved. By taking responsibility for knowing what services the family has received and is currently receiving, the coordinator should be able to reduce the number of unnecessary service professionals in the child's and family's life. The nature of the transdisciplinary model is that the program for the child and family may be designed by an expert (e.g. a psychologist or speech and language pathologist), but delivered by the coach or the teacher or someone involved with the child everyday. The intermediate objective would be to reduce the number of professionals directly involved with the child and family and ultimately, ensure that the parents have the appropriate professionals involved with the family.

Evaluation Questions

There are three categories of research questions. These correspond to the program outcomes categories described in the "Program Goal and Objectives" section of this paper. The first category is the impact of the program on the children. The second is the impact of the program on the parents. The third category is related to the program outcomes. There are a number of sub-questions listed under each heading. It will be difficult to distinguish which parts of the program are impacting which behaviors in the child or parents, but there can be some understanding of the program's impact through

observing the difference in the child or parents at the beginning of the program, during the program and after the program.

Impact of the program on the child

1. Do the child's social skills improve throughout the program?
 - 1a. Does the child initiate positive peer interaction?
 - 1b. Is the child better able to appropriately express their wants and needs?
2. Is the child able to follow direction from authority figures (i.e.: teacher, coach) with some external support?
3. Can the child complete academic tasks with some external support?
4. Does the child exhibit less negative behavior? (i.e.: throwing objects, hitting, sexualized behavior)

Impact of the program on the parents

1. Are the parents more actively involved in their child's education?
 - a. Do parents ask questions about what the child did in school?
 - b. Does the parent ask to see the child's work?
2. Do parents and caregivers have positive interactions with the child?
 - a. Do parents praise the child when the child does something right?
 - b. Do parents laugh and play with their child?
3. Do parents have an increased knowledge of parenting techniques?
 - a. Do parents express feeling more able to cope with the child's behavior?
 - b. Are parents able to identify a range of responses to the child's behavior?
 - c. Are parent's able to choose an appropriate (i.e.: non-escalating) response to the child's behavior?
4. Do parents have a social support network?
 - a. Are there positive informal supports in their network, including friends, family and neighbors?
 - b. Are parents engaged in community activities?
 - c. Are parents aware of formal resources available in the community?
5. Do parents engage appropriate social supports in order to meet their children's needs?
 - a. Are parent's able to express what they want for their child to service providers?
 - b. Are parent's able to attend meetings, with support, to discuss the needs of their child?

- c. Do parents engage informal supports when they require assistance with their children?

Program outcomes

1. Does each child in the program have a coordinated 24-hour plan in place within two weeks of admission?
2. At the time of transition to the accepting school, are there a reduced number of professionals involved with the child?
3. Are there a reduced number of crisis interventions with the child and family?

Evaluation Design

Program Issues to Consider

COACH is intended to be a fluid and flexible program that works closely with the educational, social service and mental health systems. Children and families in COACH will be provided services that complement the services they may receive at the time of intake. The nature of wrap-around and individualized services is to custom design the interventions for each child and family. Some children will live with their biological parents and others may live in foster care or in a structured group care setting. A child receiving intensive services through their residential placement may have less involvement with the family intervention component of the program. However, where the Child and Family Services goal is to reunify the same child with their biological parents, there may be intensive family intervention work, with both the in-home and community connection components. This variation of treatment plans is what makes COACH unique. By customizing services to meet the unique needs of the students and their parents or caregivers, through a 24-hour plan, COACH will strive to reduce the number of professionals involved in each child's life and the number of critical, unplanned incidents. However, the innovative structure of COACH also presents an issue to the

evaluation design: the non-uniform delivery of treatment interventions makes it more difficult to collect and analyze data to assess the program's impact. It is more difficult to examine changes to children and their families, and credit or fault COACH, when the families may be receiving differing amounts and types of intervention from more than one source.

A second program issue to be considered is that COACH is a full-coverage program. That is, all eligible students will be in the program. This limits the opportunity for an experimental evaluation, as there is no control group from which to draw comparisons and determine the net impact of the program on children and families. This may change, if COACH was to develop a waiting list. Although, an outcome assessment of COACH is the desired evaluation, a non-uniform, full-coverage program presents the greatest challenge in developing a valid outcome evaluation (Rossi & Freeman, 1993).

Design Rationale

One design possibility would be a simple before and after study, where measures of students and their parents/ caregivers are taken prior to the program and after their involvement in the program. However, this design does not control for endogenous changes: time-related changes to the participant or possible interfering events that may affect the child or family members. These are changes that may have occurred regardless of the person's participation in the program, but are misinterpreted as an effect of the program (Rossi & Freeman, 1993).

A complex repeated-measures reflexive design could overcome these threats to validity. Rather than relying on only two measures, one before and one after the program, periodic measurements of program participants are taken before, during and after the

program. This allows the evaluator to understand the net effects of the program's intervention with more clarity. Through using multiple points of observation the confounding effects of time-related changes and possibly interfering events could be discerned.

A repeated measures design will also allow for the separation of statistical regression from the program effects. The children and families selected for the COACH program are the most extreme cases of children. They are the most anti-social non-compliant children in their school district under the age of twelve years. The principle of statistical regression suggests that these children would drift toward the mean (i.e.: closer to the normal behavior of their peers) whether they received the program or not. By using repeated measures, the changes in the child's behavior over time, both through periods of improvement and decline, will be demonstrated and the threat of statistical regression will be controlled.

Each child's presenting problem, intervention strategies and anticipated goals will be different. For the parents receiving the in-home and community interventions, their goals and strategies to achieve those goals will also differ. Therefore a case study approach is recommended. Standard measures for data collection will be used and the impact of the program will be assessed through the individual changes to each child and family.

Data Collection Strategies

Child Outcomes

The repeated measures design will lead to data that can be analyzed over time to understand changes to the child's behavior. This is a design commonly used by clinicians in single case or case study designs (Barlow & Hersen, 1984; Yin, 1984). Understanding

and comparing the child's behavior before their admission to the program, through the program and then for period of time following the program will provide and understanding of the change to the child's behavior and the impact of the program. Ideally, a repeated measures design would include multiple data points gathered at different times prior to the intervention and then during and after the intervention. However, the likelihood is data about the children and their families prior to the program will need to be gathered retrospectively. Data regarding the child's behavior prior to their admission to COACH will come from past school and psychological assessments, file information when available, and informal interviews with prior service providers. Recent service providers should be invited to the intake interview, along with the child's parents and/or caregivers. At the time of intake a developmental assessment of the child will be completed. The Behavioral and Emotional Rating Scale (BERS), the Social Behavior Questionnaire are suggested as measures for all the children. They may be supplemented with educational achievement tests or tests of communication ability or other appropriate tests suggested by the COACH staff. The emphasis for the evaluation is on the emotional and behavioral development of the child as that is the aspect that is preventing their success in the classroom. Further, a semi-structured interview with the child's primary caregiver will also provide information about the child's history and current behavior. Possible interview questions are outlined in Appendix F. These three measures of the child's development (BERS, Social Behavior Questionnaire and parent/ caregiver interviews) should be completed at the time of intake, the time of exit and six months after they leave the program. This use of standardized instruments will complement the more frequent documentation based on staff observation.

The Goal Attainment Scale (G.A.S.) is proposed to track changes to the child's behavior through the program and after the program. This measure is fairly labor intensive to devise as it involves describing behavioral criteria on a five-point scale for each of the behaviors that are to be changed (Compton & Galaway, 1994). Although the G.A.S. requires a lot of work up front, it does allow for a quantifiable score to measure the rate or degree of change for each child allowing for cross-case comparisons.

If the G.A.S. were considered too complex, a modified version would be the second choice. At the time of intake, or soon after, the goals for the child should be established. An individual one-page form for each child could include the goals for the child, a five-point rating scale and a place for raters' comments. Appendix G offers an example of a form. This form would be established for each child and the raters would be chosen based on the goal. For example, a child may have a goal for the classroom- sit and work at their desk for fifteen minutes at a time- and a goal that transcends the environment- express anger without physical aggression toward others. The rater for the first goal may be a coach or the teacher and the raters for the second goal may be the coach and the parent. Coaches will be spending the most time with the children, in both the school and the community and so they would likely most often be the raters.

The frequency of staff documentation will depend on the child's goal. The goals listed above are behaviors that could be observed or not observed daily. The raters would need to document the child's behavior daily, but could provide a summary sheet for the evaluation weekly. As much as possible, there should be consistency in the frequency of documentation between the children with similar goals so that cross-case comparisons can be made.

In addition to these forms of measurement, the evaluators should consider completing post-program interviews with older children who have attended the program.

Understanding how children see the difference in their behavior and lives could offer some valuable information about the program's potential. Appendix C outlines the framework for the child outcome objectives, indicators and data sources.

Parent Outcomes

The parent component presents the greatest challenge to the evaluation of the program. Each family will receive a different combination of services. Some families will receive no services and other families may receive intensive services. In some cases only the foster families will receive services and in other cases only the biological families will receive services. It is very difficult to outline a definite structure for collecting data for each family situation. The emphasis for the evaluation will be on the interventions completed with biological families. The difficulty with the parent component will be attempting to collect multiple points of baseline measures. This will be near to impossible. Although the evaluation of the parent component data collection strategies should be considered for each case, it will likely only be three points for standardized measurement: at the time of intake, exit and 6 month follow-up. This is only slightly better than a simple pre-post test design and additional points of individual behavior tracking are also recommended.

The home support social worker will assess parents and determine their willingness and need for services. There are some standardized data collection instruments that should be used with parents participating in the family intervention component of the program. These instruments may assist the social worker in their assessment of the

parents. There are three measures suggested for standardized use for families at intake, exit and six months after leaving the program. These are: 1) the National Longitudinal Survey of Children and Youth (NLSCY) Parenting Survey, 2) the Family Crisis Oriented Personal Evaluation Scales (F-COPES) and the 3) Social Network Inventory. Other measures that be considered in lieu of these are the family stress scale and the Problem-solving Inventory.

In addition to these measures, individual tracking of parent interaction with program staff and parent's progress toward self-set goals is recommended. The program staff will need to consider methods of record keeping for the program, but it is suggested that data specifically related to the parent outcomes be gathered systematically for all parents involved in the family intervention component. For example, one significant parent outcomes for the program is to engage parents in their child's education and the education system. Therefore, parent involvement in a program should be noted formally. Although there may be some controversy about the level of record keeping, some form of individual tracking system is suggested. A modified G.A.S., similar to that used with the children may be an appropriate means to develop goals with the parents and then track their progress in meeting those goals. The central issue may be a discrepancy between what a parent wishes to change and what the COACH program staff thinks needs to change. The purpose of the parent component of the program is to support parents to better support their children. Parent interventions and assessment should be based on the parent's perception. As interventions are developed specifically for each family, the method of data collection should be established. Appendix D outlines the parent outcome objectives, the indicators and the data sources. These are global outcomes the family

intervention component hopes to achieve. They may not be applicable to all families and there may be additional ones to add for some families.

Program Outcomes

The program outcomes will be the most straightforward to evaluate. Each child should have a 24-hour plan on their COACH file within the first two weeks at the program. The 24-hour plan should be developed at the initial intake meeting. At the intake meeting the number of professionals, and their role, will be listed on the intake form. At the end of the program there will be another count of the number of professionals involved in the program. The last outcome is the number of crisis interventions that occur. For many children and families this should be none. However, a crisis intervention, such as a sudden move of the child will be recorded in the child's individual binder. The more difficult piece of evaluating this last outcome will be ensuring that the crises in the child's life prior to their admission to the COACH program are counted. As with the child's individual behavior, information about the child and family prior to their involvement in COACH will have to be gleaned through records, past assessments and interviews with past service providers.

Further to this, a post-program interview should be conducted with the parents. The interviewer should be impartial and not a member of the COACH program. The parent's perspective of what worked and did not work in the program would be helpful to program planners in understanding needed changes to the program. Appendix H offers a brief outline of an interview format to complete with parents. Appendix E outlines the program outcome objectives, indicators and data sources.

Data Analysis

Data collected for the parent and child outcomes will be assessed individually to examine changes in behavior over time. By measuring the child and parent's progress at multiple points in time, the data can be presented as trajectories for each child and/ or family. The quantitative data from weekly Child Behavior Rating Forms can be presented as a line graph that demonstrates the change to the child's behavior over time. Qualitative data can be analyzed to interpret the scores. A sudden increase in aggressive behavior from the child may be explained by a recent placement change. The qualitative data from parents about the child's behavior also helps to enrich quantitative data and offers data that may be used to develop case vignettes.

The data collected from parents at the time of the child's intake, exit and follow-up from the program can be compared to see if there was a change to the families coping ability, parenting attitudes and behaviors and social support network. The tracking of individual parent's accomplishments to reach their goals will be collected and analyzed individually.

The parents' exit interviews about the benefits and weaknesses of the program will provide information about what works and doesn't work in the program. These will be analyzed through a method of open coding to examine emerging themes. Cross case comparisons will be made where possible across the children's goals and the parents. If a trend of improvement is observed for many children, strong causal inferences about the program's effectiveness can be made.

Evaluation Feasibility and Utilization

This evaluation plan has been developed with consideration of the unique program components. The lack of control group and the non-uniform nature of the program have been considered in offering a complex repeated measures design for a series of single-cases. There will be important variation among children's goals, and particularly between families. For some families, social connections will be important, for others learning ways to cope with their child's behavior will be important. The multiple points of data collection before, during and after the program will be able to assess the changes to the child's behavior and draw some conclusions about the impact of the program. If trends develop across children, inferences about the program can be drawn.

Although the family intervention component presents more of a challenge to the evaluation, some standardized measures are suggested. Individual goals, interventions and record keeping methods will be developed by program staff for families. As this occurs, an evaluator should be consulted in order to establish consistent methods of goal tracking. This appears to be the most efficient way to develop a congruent evaluation that will provide some useful feedback to the program developers and funders.

COACH is a pilot program. The results of the evaluation could be used to fund, cease funding or improve the program. It is essential that the final evaluation report be presented in a way that data is aggregated to the program level whenever possible and it is supplemented with case vignettes to allow program planners to develop a clear picture of what COACH can and can not achieve. The results of this evaluation could prove to be invaluable to modifying the program components in order to improve the COACH program's success with children and families.

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Appendices
for
COACH Evaluation Proposal
Draft I

Appendix C: Child Outcome Objectives, Indicators and Data Sources

OBJECTIVES	INDICATORS	DATA SOURCES
1. Children exhibit improved social skills	1a. A child begins to appropriately express their wants and needs. 1b. A child has some positive peer interaction.	1) Caregiver and teacher: Behavioral and Emotional Rating Scale Baseline (parent only), exit, 6-month follow-up.
2. Children are able to follow direction from authority figures with some external support.	2a. A child can repeat back what they have been asked to do. 2b. A child can complete the task with verbal redirection	2) Coach or teacher Social Behavior Questionnaire (Tremblay, 1991) Baseline, exit, 6-month follow-up Measures four factors: 1. disruptive behavior (13 items) 2. anxiety (5 items) 3. inattentiveness (4items) 4. prosocial behavior (10 items)
3. Children are able to complete academic tasks as requested with some external support.	3a. A child begins to demonstrate the ability to sit still and complete schoolwork for short periods.	3) Caregiver/ parent. <u>Semi-structured interviews</u> Baseline, 6 months, 12 months and 18 months
4. Children exhibit minimal negative behavior.	4a. There are few incidents of hitting others, throwing objects, property destruction, verbal aggression or sexually inappropriate behavior. 4b. Child initiates prosocial behavior with others.	4) All program staff/ parents <u>Child Behavior Rating Form</u> Individualized development and collection.

Appendix D: Parent Outcome Objectives, Indicators and Data Sources

Goal: To teach and support parents or caregivers to meet the needs of their child in their home and in the community		
OBJECTIVES	INDICATORS	DATA SOURCES
1. The child's parents and/or caregivers will become actively involved in the child's education	<p>1a. Parents attend meetings with school and COACH staff.</p> <p>1b. Parents phone the school as necessary.</p> <p>1c. Child arrives on time for school fed and clean.</p> <p>1d. Parents begin to express interest in their child's education through questions about their activities at school</p>	<p>1) COACH school staff:</p> <p>Observation- reported through periodic program recording. Used as is appropriate to the goals established with the parents.</p> <p>2) Parents:</p> <p><u>NLSCY- Parenting Survey</u></p> <p>Baseline, exit, 6-month follow-up</p>
2. Parent's and/ or caregiver's will have increased positive interactions with their child	<p>2a. Parents demonstrate a willingness to participate in activities with their child in their home and in the community.</p> <p>2b. The parent and the child laugh and play together.</p>	<p>3) Parent:</p> <p>F-COPES- Family Crisis Oriented Personal Evaluation Scales</p> <p>Five subscales:</p> <ol style="list-style-type: none"> 1. Acquiring social support 2. Reframing 3. Seeking spiritual support 4. Mobilizing family to acquire and accept help 5. Passive Appraisal

<p>3. Parents will have knowledge of parenting skills and techniques appropriate to meet the unique needs of their child.</p> <p>4. Parents engage appropriate social support in order to meet their children's needs.</p> <p>5. Parents will have a social support network comprised of positive informal and formal supports that provide emotional, instrumental and cognitive support</p>	<p>3a. Parents begin to talk with the coach and social worker about different methods of managing their children's behavior.</p> <p>3b. Parents are able to choose a method of managing their child at the appropriate time without escalating the child's behavior.</p> <p>4a. Parents can talk to the social worker about their perspective of meetings with professionals to discuss their child.</p> <p>4b. Parents are able to attend meetings, with support from a formal or informal support, to discuss the needs of their child.</p> <p>5a. Parents can talk about positive support they have received from friends, neighbors, and family.</p> <p>5b. Parents are engaged in community activities.</p>	<p>4) Parents:</p> <p>Social Network Inventory (Fuchs & Lugtig, 1992)</p> <p>Baseline, 6 months, 12 months, 18 months</p>
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Appendix E: Child Outcome Objectives, Indicators and Data Sources

Goal: The COACH program will provide a comprehensive and cost-effective service.		
OBJECTIVES	INDICATORS	DATA SOURCE
1. There will be a coordinated 24-hour plan for each child consisting of individualized service goals and interventions.	-A 24-hour plan is in place within 14 days of the child being admitted to the COACH program.	COACH file information
2. There will be a reduced number of professionals directly involved with the child and the family.	-Primary delivery of services will be provided by a select few staff- the teacher, social worker and coach.	COACH file information
3. There will be a reduced number of crisis interventions with the child and the family.	-The child's placement and moves are planned. The child and caregiver receive necessary support from the coach.	COACH file information Parent satisfaction exit interviews.

Appendix F: Child Behavior Rating Form

Child: Johnny Smith

Period of Observation: September 15-20, 2000Rater: Emily Brown, coachPlace: Classroom and community

Goal: To appropriately express anger.

1. Identify the number of incidents when the child met this goal.

1 2 3 (4) 5 _____

2. Identify the number of incidents when the child failed to meet this goal

1 2 (3) 4 5 _____

3. Comment on the child's behavior related to this goal for this reporting period.

Johnny appropriately expressed being angry 4 times this week. Johnny remained calm and verbalized what he was angry about. Each time of the three times Johnny expressed himself appropriately it was after an aggressive outburst and a period of calming down. Johnny is improving in being able to express himself. He had one incident of telling the coach why he was angry first, and avoiding an outburst.

Johnny's outbursts usually include swearing and name-calling and then removing himself from the room. He has not become physically aggressive.

Appendix G: Questions for semi-structured interviews with parents

Date: _____

Location: _____

1. How long has CHILD lived with you?
2. How would you describe CHILD's behavior in the last week?
 - a. In the last month?
 - b. How about 6 months ago? (Help to establish time period- age, grade level, season)
 - c. How about a year ago?
3. What are your three biggest concerns about CHILD?
 - a. Have these become worse or better in the last six months?
 - b. The last month?
4. What are CHILD's three best qualities?
5. What can CHILD do well?

(Intake only)

1. What services has CHILD received in the last three months? (Probe for specialists, school related, community-based or in-home supports)
2. What services were the most helpful?
 - a. What was the least helpful?
3. How would you like to see CHILD in six-months? (What goal would you set for him?)

(6 month and follow-up only)

1. What changes have you noticed in CHILD in the last six months?
2. Has CHILD's behavior improved or deteriorated overall?
3. How has this impacted you and the rest of the family?

Appendix D:
The Final Evaluation Plan

Evaluation of COACH

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August 2000

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Executive Summary

This evaluation proposal accompanies the COACH program proposal and the review of the literature related to COACH. The COACH program developed as a response to non-attending school children under the age of twelve with severe emotional and behavioral disorders. These are children that cannot function in a classroom with level two or level three support. The COACH program proposes a multifaceted set of interventions for antisocial, non-compliant children in the classroom, their homes and the community. This set of interventions is necessary to ensure the child's environment is stable and the child is able to focus on learning in school. COACH interventions are designed to fit the unique needs of the children and their families.

The evaluation of the COACH program will be outcome-based. The nature of the program as a full-coverage, non-uniform program presents a challenge to the development of an evaluation design. The design proposed is a series of case studies using a complex repeated measures reflexive design for each child and family. The program proposal outlines child and family outcomes, but each child's presenting problems and thus, expected outcomes will be unique. A case study approach will allow for an impact assessment of the program on each child and family. Reflexive controls, comparing the behavior of the child and parents before and after the program, and cross case comparisons will be used to assess the impact of the COACH program on children and their parents.

Three standardized measures are presented to assess the child's progress at intake, program exit and six months after they leave the program. Further, individual behavior rating scales will be completed weekly for each child and used to assess how the child is meeting their individual behavior goals. Data will be analyzed and presented as individual trajectories for each child. Trends emerging among children will be analyzed to assess the program's impact.

Standardized measures will also be used to assess the impact of the family intervention component on the parents. These standardized measures will be used in conjunction with individually developed tracking systems developed with the parents who choose to participate in this part of the program. The nature of individualized service delivery necessitates the individual development of evaluation plans.

Program outcomes will also be evaluated to assess the impact of anticipated effects of the program on the service delivery structure.

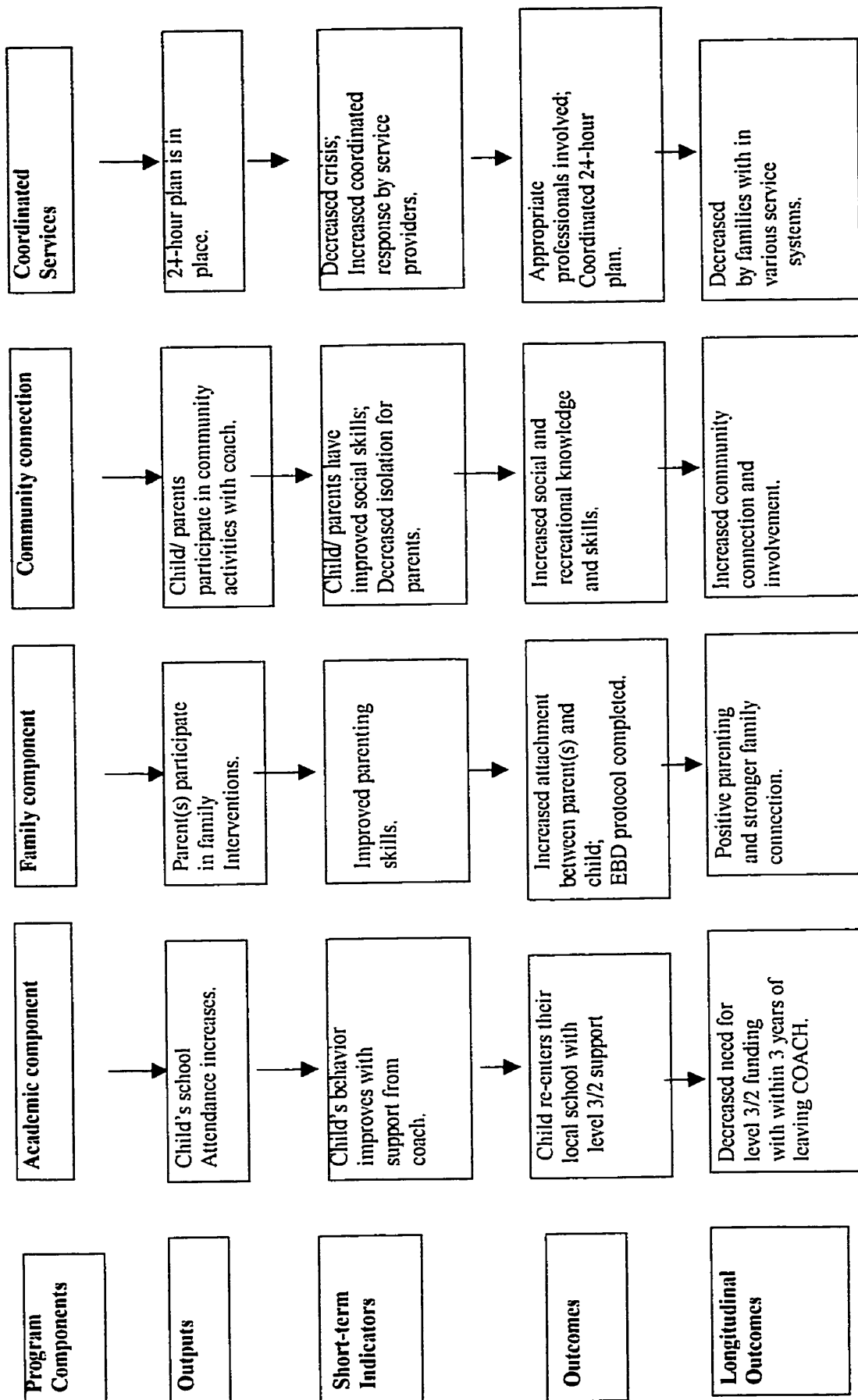
Program Goal and Objectives

The goal of COACH is to return children to their local school with level two or level three funding. The program aims to provide comprehensive, cost-effective individualized services for each child and their family in order to: 1) stabilize the child's behavior; 2) support parents in their role; and, 3) connect the child and his or her family to their school and community. The specific interventions for each child and family will vary. Through these three primary areas of intervention, it is believed that the child, and those caring for the child, will be connected to needed resources that will assist parents to meet the child's needs and allow the child to focus on school. The program proposal articulates a number of objectives, both process and outcome objectives. The basis for the evaluation will be the outcome objectives for the child, parent and program.

Program Logic and Expected Outcomes

The logic of the program is understood in four components: 1) the academic component, 2) the family component, 3) community connection and 4) coordinated services. The community program is not a distinct component as children and their families will be involved in community activities through the day program and the after-school evening component. However, for the purposes of understanding the logic of the program, the community involvement piece has been separated from the day program and after-school evening program. The program logic model is outlined in terms of expected outcomes Figure 1 and is explained in the following sections.

Figure 1: COACH Program Logic and Outcomes



Academic Component

The catalyst for the development of COACH was the need to find an appropriate school setting for antisocial children with severe emotional and behavior disorders. For children with unstable lives and significant behavior and emotional problems, it is difficult to keep the child in one school long enough to complete the needed assessment and interventions. Without the necessary support in the classroom, the uncontrolled child poses a threat to other children trying to learn. The COACH program will: one, get the child back into a school setting so that the child does not continue to miss school, and two, provide appropriate resources for the child in the classroom. The setting will be controlled and the child will have the intensive support necessary for them to function. The child will stay in the COACH program as long as is necessary and when the child is ready to move into a local school, the COACH program will provide intensive transition supports. Through this transition process, the child will experience success and will ultimately begin to enjoy school and function in the educational system throughout his or her educational career.

Although the COACH program was initiated as an alternative school program, the originators realized that in order for a child to be successful in school, their basic physical and emotional needs must be met outside of school. This is the readiness to learn concept that states that a child must have physical and emotional health, social skills, communication skills and basic coping skills before they can begin to learn (Boyle & Offord, 1989). In order to ensure that the COACH project was more than alternative school program, the family intervention and community connection components were developed. These components of the program aim to provide the child with a stable family environment and a sense of belonging in their community.

Family Component

Parents of difficult to manage children have an overwhelming task in coping with their children's difficult behavior everyday. Often these parents are those with minimal access to physical and emotional resources. The causal relationship between children with behavior disorders and neglectful parents likely occurs in both directions (Gaudin, 1993). The parent may not have the internal and external resources to meet the child's needs, and thus, the child grows into an unmanageable child. As the child's needs heighten, the parent, who inadequately met the child's needs earlier, experiences a greater deficit between their parenting ability and the child's needs. Similarly, a child, who for a variety of reasons including neglect, has an emotional and behavioral disorder, is more

difficult to parent. This child may not have the consistent discipline or positive parental interaction they require. The purpose of the family component of COACH is to: first, assess the parents' needs and second, provide the parent with the necessary resources to parent their child. Although there may be some work with foster parents, the intent of the family component is to work with the biological parents.

The immediate objective of the family component will be that the parents learn skills for coping with their child. This may be learning discipline techniques or it might be needed respite. This component emphasizes supporting the parent in their role with the child. The logic follows that once a parent is supported and has the needed resources and skills, there will be an increase in positive parent-child interactions and attachment. Further, the parent will participate in the Emotional/ Behavioral Disorder Protocol to develop a 24-hour plan. The ultimate objective is that the parent has stronger skills and the family is more cohesive.

Community Connection

Children in the COACH program will spend half of the school day in the community with coaches. This part of the community program will consist of recreation as well as meaningful community participation. This participation may take the form of volunteer work or field trips. Coaches will also take children out from their homes, with their family or individually, to participate in community activities. These activities will likely include recreation or community events, but may also include other outings. The immediate effect of taking the child and/ or their family into the community is to provide a positive experience for them in the community. The benefit of community activities, with the whole family, is to provide a positive and fun experience for parents and their children. Families in poverty or under an immense amount of pressure may not be able to enjoy each other as most families do. In spending time together in the community, it is hoped that families will have a positive experience together. Further, the coaches will be able to use natural teaching moments to work with parents in managing their children's behavior. Children and parents will learn appropriate ways of acting in the community. The child will learn how to behave and the parent will learn tools for controlling their child in public. The coach will use modeling, coaching and praise to help the parents. Through the community component parents will increase their knowledge of community resources that they can later access on their own. The ultimate objective is that the family experiences an increased sense of connection to and involvement with the community.

Coordinated Services

A significant component of COACH is the transdisciplinary model and the coordinated comprehensive services. The coordinator of COACH will have the responsibility of working closely with the home support social worker, the teacher, the coach and other external professionals involved with the child. The development of a 24-hour plan will allow explicit plans to be made that are understood by the family and by the service professionals involved. By taking responsibility for knowing what services the family has received and is currently receiving, the coordinator will be able to reduce the number of unnecessary service professionals in the child's and family's life. The nature of the transdisciplinary model is that the program for the child and family may be designed by an expert (e.g. a psychologist or speech and language pathologist), but delivered by the coach or the teacher or someone involved with the child everyday. The 24-hour plan will allow for a decrease in crises and an coordinated delivery of services from service providers. The expected outcome is that appropriate professionals are involved with the family and ultimately that families need less professional service.

Evaluation Questions

There are three categories of research questions. These correspond to the program outcomes categories described in the "Program Goal and Objectives" section of the program proposal. The first category is the impact of the program on the children. The second is the impact of the program on the parents and the third category is related to the program outcomes. There are a number of sub-questions listed under each heading. It will be difficult to distinguish which parts of the program are impacting which behaviors in the child or parents, but there can be some understanding of the program's impact through observing the difference in the child or parents at the beginning of the program, during the program and after the program.

Impact of the program on the child

1. Do the child's social skills improve throughout the program?
 - 1a. Does the child initiate positive peer interaction?
 - 1b. Is the child better able to appropriately express their wants and needs?

2. Is the child able to follow direction from authority figures (ie: teacher, coach) with some external support?
3. Can the child complete academic tasks with some external support?
4. Does the child exhibit less negative behavior? (ie: throwing objects, hitting, sexualized behavior)

Impact of the program on the parents

1. Are the parents more actively involved in their child's education?
 - a. Do parents ask questions about what the child did in school?
 - b. Does the parent ask to see the child's work?
2. Do parents and caregivers have positive interactions with the child?
 - a. Do parents praise the child when the child does something right?
 - b. Do parents laugh and play with their child?
3. Do parents have an increased knowledge of parenting techniques?
 - a. Do parents express feeling more able to cope with the child's behavior?
 - b. Are parents able to identify a range of responses to the child's behavior?
 - c. Are parent's able to choose an appropriate (ie: non-escalating) response to the child's behavior?
4. Do parents have a social support network?
 - a. Are there positive informal supports in their network, including friends, family and neighbors?
 - b. Are parents engaged in community activities?
 - c. Are parents aware of formal resources available in the community?
5. Do parents engage appropriate social supports in order to meet their children's needs?
 - a. Are parent's able to express what they want for their child to service providers?
 - b. Are parent's able to attend meetings, with support, to discuss the

needs of their child?

- c. Do parents engage informal supports when they require assistance with their children?

Program outcomes

1. Does each child in the program have a coordinated 24-hour plan in place within two weeks of admission?
2. At the time of transition to the accepting school, are there a reduced number of professionals involved with the child?
3. Are there a reduced number of crisis interventions with the child and family?

Evaluation Design

COACH is intended to be a fluid and flexible program that works closely with the educational, social service and mental health systems. Children and families in COACH will be provided services that complement the services they may receive at the time of intake. The nature of wrap-around and individualized services is to custom design the interventions for each child and family. Therefore, the evaluation for each child and family must also be custom designed to some extent.

A complex repeated measure design is proposed for a series of case studies of each child and family.

Child Outcomes

The repeated measures design will lead to data that can be analyzed over time to understand changes in the child's behavior. The expected objectives for each child will be established at the time of their referral or at intake. Baseline data about the child's behavior prior to beginning the program will be established retrospectively with file information, past assessments and caregiver interviews. Understanding and comparing the child's behavior before their admission to the program, through the program and then for a period of time following the program will provide an understanding of the change to the child's behavior and thus, the impact of the program.

At the time of intake a developmental assessment of the child will be completed. The Behavioral and Emotional Rating Scale (BERS), the Social Behavior Questionnaire are suggested as measures for all the children. They may be supplemented with educational achievement tests or tests of communication ability or other appropriate tests suggested by the COACH staff. The emphasis for the evaluation is on the emotional and behavioral development of the child as that is the condition preventing the child from being successful in the classroom. Further, a semi-structured interview with the child's primary caregiver will also provide information about the child's history and current behavior. These three measures of the child's development (BERS, Social Behavior Questionnaire and parent/ caregiver interviews) should be completed at the time of intake, the time of exit and six months after the child leaves the program. This use of standardized instruments will complement the more frequent documentation based on staff observations of the child's behavior.

A modified Goal Attainment Scale (G.A.S.) is proposed to track changes to the child's behavior through the program and after the program. The GAS can be a fairly labor intensive measure to devise as it involves describing behavioral criteria on a five-point scale for each of the behaviors that are to be changed. Although the G.A.S. requires a lot of work up front, it does allow for a quantifiable score to measure the rate or degree of change for each child allowing for cross-case comparisons. A modified version of G.A.S. will be established for each child at after an initial assessment period. An individual one-page form for each child will include the goals for the child, a five-point rating scale and a place for the raters' comments. This form will be established for each child and the raters will be chosen based on the goal. Raters will vary, but as the coaches will be the staff spending the most time with the children they would most often be the raters. When appropriate, parents or caregivers will also be recruited to rate their child's behavior.

The frequency of staff rating will depend on the child's goal. The case study method to evaluation works best when the data collection methods are determined for each participant. As much as possible, there should be consistency in the frequency of documentation between the children with similar goals so that cross-case comparisons can be made. Figure 2 outlines the evaluation model for the child outcomes.

Figure 2: Evaluation Plan for Child Outcomes

OBJECTIVES	INDICATORS	DATA SOURCES
1. Children exhibit improved social skills	1a. A child begins to appropriately express their wants and needs. 1b. A child has some positive peer interaction.	1) Caregiver and teacher: Behavioral and Emotional Rating Scale Baseline, exit, 6-month follow-up.
2. Children are able to follow direction from authority figures with some external support.	2a. A child can repeat back what they have been asked to do. 2b. A child can complete the task with verbal redirection	2) Coach or teacher Social Behavior Questionnaire (Tremblay, 1991) Baseline, exit, 6-month follow-up Measures four factors: 1. disruptive behavior (13 items) 2. anxiety (5 items) 3. inattentiveness (4items) 4. prosocial behavior (10 items)
3. Children are able to complete academic tasks as requested with some external support.	3a. A child begins to demonstrate the ability to sit still and complete schoolwork for short periods.	
4. Children exhibit minimal negative behavior.	4a. There are few incidents of hitting others, throwing objects, property destruction, verbal aggression or sexually inappropriate behavior. 4b. Child initiates prosocial behavior with others.	3) Caregiver/ parent. Semi-structured interviews Baseline, 6 months, 12 months and 18 months 4) All program staff/ parents Child Behavior Rating Form Individualized development and collection.

Parent Outcomes

The parent component presents the greatest challenge to the evaluation of the program. Each family will receive a different combination of services. Some families may receive no services and other families may receive intensive services. In some cases only the foster families will receive services and in other cases only the biological families will receive services. It is very difficult to outline a definite structure for collecting data for each family situation. Evaluation plans for each family will be developed at the time of service planning. Goals, strategies for interventions and methods of data collection will be developed. The multiple points of measures will be used whenever possible to ensure a consistent observation of changes overtime.

There will be three points for standardized measurement: at the time of intake, exit and 6 month follow-up. There are some standardized data collection instruments that will be used with parents participating in the family intervention component of the program. These instruments may assist the social worker in their assessment of the parents. There are three measures suggested for standardized use for families at intake, exit and six months after leaving the program. These are: 1) the National Longitudinal Survey of Children and Youth (NLSCY) Parenting Survey, 2) the Family Crisis Oriented Personal Evaluation Scales (F-COPES) and the 3) Social Network Inventory.

In addition to these measures, individual tracking of parent interaction with program staff and parent's progress toward self-set goals is recommended. The program staff will need to consider methods of record keeping for the program, but it is suggested that data specifically related to the parent outcomes be gathered systematically for all parents involved in the family intervention component. The purpose of the parent component of the program is to support parents to better support their children. Parent interventions and assessment will be based on the parent's perception. As interventions are developed specifically for each family, the method of data collection will be established. Figure 3 outlines the evaluation plan for the parent outcomes. These are global outcomes the family intervention component hopes to achieve. They may not be applicable to all families and there may be other outcomes added for some families.

Figure 3: Evaluation Plan for Parent Outcomes

Goal: To teach and support parents or caregivers to meet the needs of their child in their home and in the community.		
OBJECTIVES	INDICATORS	DATA SOURCES
<p>1. The child's parents and/or caregivers will become actively involved in the child's education</p> <p>2. Parent's and/ or caregiver's will have increased positive interactions with their child</p>	<p>1a. Parents attend meetings with school and COACH staff.</p> <p>1b. Parents phone the school as necessary.</p> <p>1c. Child arrives on time for school fed and clean.</p> <p>1d. Parents begin to express interest in their child's education through questions about their activities at school.</p> <p>2a. Parents demonstrate a willingness to participate in activities with their child in their home and in the community.</p> <p>2b. The parent and the child laugh and play together.</p>	<p>1) COACH/ school staff:</p> <p>Observation- reported through periodic program recording. Used as is appropriate to the goals established with the parents.</p> <p>2) Parents:</p> <p>NLSCY- Parenting Survey Baseline, exit, 6-month follow-up</p> <p>3) Parent:</p> <p>F-COPES- Family Crisis Oriented Personal Evaluation Scales</p> <p>Five subscales:</p> <ol style="list-style-type: none"> 1. Acquiring social support 2. Reframing 3. Seeking spiritual support 4. Mobilizing family to acquire and accept help 5. Passive Appraisal

<p>3. Parents will have knowledge of parenting skills and techniques appropriate to meet the unique needs of their child.</p> <p>4. Parents engage appropriate social support in order to meet their children's needs.</p> <p>5. Parents will have a social support network comprised of positive informal and formal supports that provide emotional, instrumental and cognitive support</p>	<p>3a. Parents begin to talk with the coach and social worker about different methods of managing their children's behavior.</p> <p>3b. Parents are able to choose a method of managing their child at the appropriate time without escalating the child's behavior.</p> <p>4a. Parents can talk to the social worker about their perspective of meetings with professionals to discuss their child.</p> <p>4b. Parents are able to attend meetings, with support from a formal or informal support, to discuss the needs of their child.</p> <p>5a. Parents can talk about positive support they have received from friends, neighbors, and family.</p> <p>5b. Parents are engaged in community activities.</p>	<p>4) Parents:</p> <p>Social Network Inventory (Fuchs & Lugtig, 1992)</p> <p>Baseline, 6 months, 12 months, 18 months</p>
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Program Outcomes

The program outcomes are the most straightforward to evaluate. Each child should have a 24-hour plan on their COACH file within the first two weeks at the program. The 24-hour plan should be developed at the initial intake meeting. At the intake meeting the number of professionals, and their roles, will be listed on the intake form. At the end of the program there will be another count of the number of professionals involved in the program. The last outcome is the number of crisis interventions that occur. For many children and families this should be none. However, a crisis intervention, such as a sudden move of the child will be recorded in the child's individual data collection file. The more difficult piece of evaluating this last outcome will be ensuring that the crises in the child's life prior to their admission to the COACH program are counted. As with the child's individual behavior, information about the child and family prior to their involvement in COACH will have to be gleaned through records, past assessments and interviews with past service providers.

Further to this, a post-program interview will be conducted with the parents. The interviewer should be impartial and not a member of the COACH program. The parent's perspective of what worked and did not work in the program would be helpful to program planners in understanding needed changes to the program. The evaluation plan for the program outcomes is outlined in Figure 4 on the next page.

Figure 4: Evaluation Plan for Program Outcomes

Goal: The COACH program will provide a comprehensive and cost-effective service.		
OBJECTIVES	INDICATORS	DATA SOURCE
1. There will be a coordinated 24-hour plan for each child consisting of individualized service goals and interventions.	1. A 24-hour plan is in place within 14 days of the child being admitted to the COACH program.	COACH file information
2. There will be a reduced number of professionals directly involved with the child and the family.	2. Primary delivery of services will be provided by a select few staff- the teacher, social worker and coach.	COACH file information
3. There will be a reduced number of crisis interventions with the child and the family.	3. The child's placement and moves are planned. The child and caregiver receive necessary support from the coach.	COACH file information Parent satisfaction exit interviews.

Data Analysis

Data collected for the parent and child outcomes will be assessed individually to examine changes in behavior over time. By measuring the child and parent's progress at multiple points in time, the data can be presented as trajectories for each child and/ or family. The quantitative data from weekly Child Behavior Rating Forms can be presented as a line graph that demonstrates the change to the child's behavior over time. Qualitative data can be analyzed to interpret the scores. For example, a sudden increase in aggressive behavior from the child may be explained by a recent placement change. The qualitative data from parents about the child's behavior also helps to enrich quantitative data and offers data that may be used to develop case vignettes.

The data collected from parents at the time of the child's intake, exit and follow-up from the program can be compared to see if there was a change to the family's coping ability, parenting attitudes and behaviors and social support network. The tracking of individual parent accomplishments will be collected and analyzed individually.

The parents' exit interviews about the benefits and weaknesses of the program will provide information about what works and doesn't work in the program. The interviews will be analyzed through a method of open coding to examine emerging themes. Cross case comparisons will be made where possible across the children's goals and the parents. If a trend of improvement is observed for many children and their parents, strong causal inferences about the program's effectiveness can be made.

Conclusion

This evaluation plan outlines a structure of data collection methods based on the general expected outcomes for the children and families participating in COACH. The individualized service planning necessitates individual development of goals and standards for their evaluation. Children and parents' progress will be compared to the level of functioning at the time of intake and across cases. Further detail to the evaluation plan will be developed once the program is implemented and the individual evaluation frameworks are established.

References

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Tremblay, R.E.; McCord, J.; Boileau, H. Charlebois, P; Gagon, C., LeBlanc, M. & Larivee. S. (1991). Can disruptive boys be helped to become competent? Psychiatry, 54, 148-161.

Appendix E:
Feedback Forms for Student Evaluation

Feedback Form for Student Evaluation: Implementation Planning Phase

This practicum has a number of learning objectives that the student wishes to accomplish. In order for the student and the advisory committee to assess the work that is done in the field, people with whom the student works are asked to provide constructive feedback. This form will be used by the student and the practicum advisory committee to assess the student's work. Your time in completing this form is greatly appreciated. Thank-you.

Part I. Development of the Program Implementation Proposal

For this section, please think about the contribution the student made to the program implementation proposal, excluding the literature review.

1. What did the student contribute to the program implementation proposal?
2. Using a scale of 1-5, how would you rate the contribution of the student to the program implementation proposal? (1=unsatisfactory contribution; 5=excellent contribution)

1 _____ 2 _____ 3 _____ 4 _____ 5 _____

Please explain

Part II. Literature Review

For this section, please think about the literature review that the student wrote for the COACH Project.

1. How would rate the presentation of the literature review, including writing style?

1 _____ 2 _____ 3 _____ 4 _____ 5 _____

2. Was the coverage of the topics adequate to meet your needs as the writer?

1 _____ 2 _____ 3 _____ 4 _____ 5 _____

3. Please comment on quality and usefulness of the literature review.

Part III. Student Presentation and Conduct in Meetings

Throughout the time you worked with the student, there were a number of meetings attended.

- 1a) Thinking about the meetings attended with the steering committee members, both individually and as a group, how would rate the contribution of the student?

1 _____ 2 _____ 3 _____ 4 _____ 5 _____

1b) Were the student's comments and questions appropriate and helpful?

Yes _____ No _____

1c) Please explain.

2a). Thinking about the meetings you attended together with people from other agencies (CFS, Tri-agency, Knowles), please rate the student's contribution, questions and comments.

1 _____ 2 _____ 3 _____ 4 _____ 5 _____

2b). Please comment on the student's contribution.

3. Please make any suggestions you have for the student for improvement.

Part IV. Individual Working Relationship

In this section, please think about the working relationship between yourself and the student.

1. Do you think that the working relationship with the student helped produce a better product (i.e.: program implementation plan)?

Yes _____ No _____

Why or why not?

2. Would you say that working together helped save you time or took more time? Please explain.

3a. Was the student responsive to your requests?

Yes _____ No _____

3b. Was the student responsive to your feedback on work completed?

Yes _____ No _____

3c. Please comment.

4. Please make any suggestions you have for the student for improvement.

Part V. Overall Comments

If you have any other comments about the student's work that has not been covered in the questions above, please note them below. Thank-you again for taking the time to complete this form and contributing to the student's learning.

Feedback Form for Student Evaluation Evaluation Planning Phase

This practicum has a number of learning objectives that the student wishes to accomplish. In order for the student and the practicum advisory committee to assess the work that is done in the field, people with whom the student works are asked to provide constructive feedback. This form will be used by the student and the advisory committee to assess the student's work. Your time in completing this form is greatly appreciated. Thank-you.

Part I: Evaluation Plan Draft

For the following questions, think about the first copy of the evaluation plan that you received from the student (ie: the draft copy).

1. Was the evaluation plan adequate in its coverage of the program components for evaluation, evaluation design and data collection methods and analysis?
2. Did the evaluation capture the main aspects of the program that would be evaluable?
3. Was the evaluation design that was proposed reasonable?

Part II: Final Evaluation Plan

For these questions, please consider the final evaluation plan that you received from the student.

1. Did the final evaluation plan reflect the discussion you had with the student?
2. Was the evaluation plan clear and understandable?
3. Was the presentation of the evaluation plan adequate for the audience of treasury board and potential evaluators?

Part III: Overall Comments

If you have any other comments about the student's work that has not been covered in the questions above, please note them below. Thank-you again for taking the time to complete this form and contributing to the student's learning.