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Introduction to Health Program Evaluation

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Goals of Session

- To provide a framework for understanding health program evaluation
- To provide insights and perspectives useful in the undertaking of applied evaluative studies
- To provide methodologic guidance useful in undertaking health program evaluation
Section A

Introduction to Health Services Evaluation
Health Services Research—Evaluation Paradigm

New Knowledge for Society
Research

Provider/Program Focus
Evaluation

Science base

Methods and basic scientific knowledge

Improve quality and efficiency

Program management

Policy research

Assess program effectiveness

Policy makers (public and private)

Non-policy Policy
Goals and Objectives

Outside Funding Source or Policy-Making Body

Program Management

Health Program Evaluation Paradigm: Goals and Objectives
Evaluation: Source of Data

Goals and Objectives → Program Management → Treatment Units → Patients in Original State

Outside Funding Source or Policy-Making Body → Evaluation

Evaluation → Structure → Process → Comparison → Outcome → Change → Patients in Final State
Evaluation: Source of Data

Goals and Objectives → Program Management → Treatment Units → Patients in Original State

Program Management → Treatment Units

Program Control: Delivery of Service

Process: Structure

Comparison: Outcome

Outcome: Change

Structure: Process

Outside Funding Source or Policy-Making Body

Patients in Final State
Health Services Evaluation (HSE) and Health Services Research (HSR) Differences

- HSE is always used for decision making
- The research questions of HSE are derived (at least in part) from the program goals
- There is a judgement as to ideal criteria against which the program is judged
- HSE always takes place in a “real world” setting
Both apply the same scientific techniques, though they are more difficult to apply in HSE
Formative and Summative Evaluation

There are Two Main Types of Evaluation:

- **Formative** (during formation of program)
  - Emphasizes internal operational objectives
  - Can be viewed as a type of ongoing quality improvement
  - Focuses on efficiency improvement

- **Summative** (helps sum a program once fully implemented)
  - Allows policymakers to assess whether goals have been met
  - Focuses on effectiveness (including cost vs. benefits)
Formative Evaluation

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Research

Policy

Summative evaluation
1. **From the organization’s perspective**
   - Demonstrate program effectiveness
     - Justify past expenditures
     - Required by the funders
     - Gain support for new programs
     - Provides mechanism for improving program by identifying weaknesses
2. From the funding agency and/or public’s perspective:
   - How much “bang for the buck?”
   - Should the funding be continued?
   - Can the program be improved?
   - To document the success of the funder’s program
3. **From the evaluator’s perspective**

- The desire to contribute to the field
- The desire to enhance professional advancement and/or earn a living
- A sympathy with the program’s goals
Section B

Health Program Evaluation Continued
Factors that Have Increased Importance of HSE over the Last Several Decades

- Budget constraints
- New attitudes about government programs
- New technologies
- Increased desire for public and private organization accountability
Factors that Have Increased Importance of HSE over the Last Several Decades

- Increasing complexity and interdependence of programs in the system
- Increases in the role of “evidence-based” public health and health care management
- Increased concern over quality of care
- Increased concerns with equity and disparities
1. Find out the program’s goals
2. Translate the goals into measurable indicators
3. Collect data on indicators for those receiving care from the program and those not receiving care
4. Compare indicators between patients in the program and outside the program
A Special Note about The Role of “Economic Evaluations”

- This lecture (and the course overall) focuses on an empirical “impact evaluation” approach
- Later in the course we will introduce you to the “economic evaluation” frameworks of cost-benefit and cost-effectiveness
- Both perspectives have their place
- At times these two approaches can be combined into one evaluation
Dimensions of Health Program Goals or Objectives

1. The nature of the changes to be effected
2. Relative importance of objectives
3. Target client/patient population
Dimensions of Health Program Goals or Objectives

4. Short-term vs. long-term effects
5. Magnitude of effect
6. Stability and duration of change
7. Complementary nature or conflicting nature of multiple goals
When Goals Are Not Already Defined, Evaluator Must . . .

- Wait for personnel to reach consensus
- Develop goals independently after consulting with program staff
- Develop goals with staff collaboratively
- Do evaluations without specific goals, focusing on exploratory analyses
Reasons Why Goal-Oriented HSE Rarely Works Smoothly

- Goals are usually unclear, non-existent or not realistic
- Programs often accomplish positive effects besides “documented goals”
- Health services programs are usually very complex
  - How do you disaggregate the effects of each component of total program to provide useful feedback?
Reasons Why Goal-Oriented HSE Rarely Works Smoothly

- Health outcomes (usually ultimate program goals) are extremely difficult to show a cause-effect relationship because of multi-factorial nature of human health
- The four-step approach will answer whether or not the goals have been reached (but the question of why the goals have or have not been reached is also a key issue)
The “Do’s” of a Good Evaluator

- Be trusted by all key players
- Remain objective
- Be knowledgeable about program
- Remain autonomous
- Become involved in implementation of results
A Few Words about other Course Learning Opportunities

- The lab exercise
- The individual learning exercise
- Required and extra readings