



Strengthening Grantee Capacity Through Evaluation Technical Assistance

The Children's Bureau, within the Administration for Children and Families (U. S. Department of Health and Human Services), is funding a multi-phase grant program referred to as Youth At-Risk of Homelessness (YARH) to build the evidence base on what works to prevent homelessness among youth and young adults who have been involved in the child welfare system. To date, there is very little evidence on how to meet the needs of this population. Eighteen organizations received grant funding for the first phase of YARH, a two year planning grant (2013 – 2015). Six of those organizations received funding for the second phase, a three-year initial implementation grant (2015 – 2018).

During the planning phase, grantees conducted data analyses to help them understand their local population and develop a comprehensive service model to improve outcomes in housing, education and training, social well-being, and permanent connections. During the initial implementation phase, grantees are refining and testing their comprehensive service model. They will conduct usability testing to determine the feasibility of specific elements of the model, and conduct a formative evaluation to understand what supports and structures are needed to implement the model with fidelity. Finally, they will develop a plan to test their comprehensive service model in a summative evaluation. A third YARH grant phase, if funded, will involve conducting summative evaluations designed to add to the evidence base on how to support older youth with child welfare involvement and prevent homelessness.

This issue brief discusses challenges YARH grantees faced, how they were addressed in evaluation technical assistance provided to YARH grantees, and thoughts on how to improve technical assistance. The issue brief is based on work with 18 Phase I and 6 Phase II YARH grantees from 2013 – 2017.

For more information on YARH, please see <https://www.acf.hhs.gov/programs/opre/research/project/building-capacity-to-evaluate-interventions-for-youth-with-child-welfare-involvement-at-risk-of-homelessness>

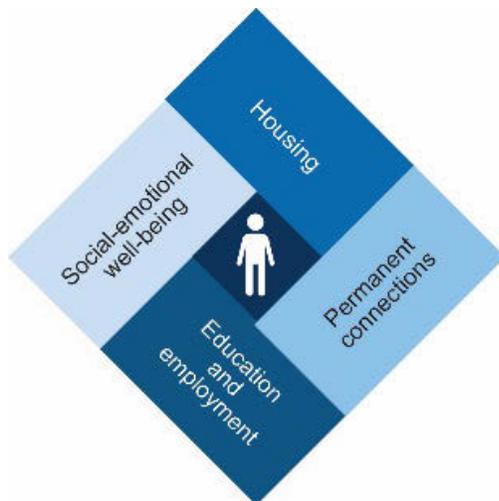
The YARH grantees are tackling a tough issue: homelessness among youth and young adults who have been involved in the child welfare system. Grantees are focused on three target populations (Figure 1) and four outcome areas (Figure 2), with the ultimate aim of reducing homelessness and adding to the evidence base on

what works. The Administration for Children and Families (ACF) awarded contracts to support grantees and build their capacity to use data, develop comprehensive service models, and design rigorous evaluations that will inform the field.

Figure 1. YARH focuses on three populations



Figure 2. The four core outcome areas for YARH grantees



YARH has two main goals: one is to design comprehensive service models intended to prevent homelessness among adolescents, youth and young adults involved in the child welfare system, and the other is to test these models to build the evidence base on promising strategies that support these youth.

YARH Phase I grantees received group evaluation technical assistance (TA), including webinars, conference presentations, and peer-learning conference calls. The goal of the TA was to help grantees:

1. refine a comprehensive service model that is distinct from existing services so that there would be a contrast between their service model and existing services
2. ensure that components would be implemented with fidelity and adapted appropriately to ensure that grantees deliver their interventions as intended, and
3. understand rigorous evaluation designs that could be used to assess the impact of their comprehensive service model.

Topics for TA included understanding the youth homelessness problem in the community, developing a theory of change and a logic model to identify services and outcomes, designing and implementing a rigorous evaluation, and considering practical issues when conducting a rigorous evaluation.

YARH Phase II grantees work with two dedicated TA liaisons who hold monthly calls and support grantees in completing six templates as part of the Phase II work. The templates are designed to engage grantees in the stages of work needed to prepare their comprehensive service models for a summative evaluation. The templates cover (1) theory of change; (2) a logic model; (3) a document defining population, intervention, comparison, and outcomes (PICO);¹ (4) usability testing plans and lessons

learned;² (5) the formative evaluation plan and lessons learned; and (6) a summative evaluation plan. Each template is discussed with the TA liaisons, reviewed by another member of the TA team, and reviewed by ACF. Grantees may need to complete the same template more than once to capture the full range of their work with all three populations. For example, many grantees will complete two PICO templates, one focusing on youth in foster care and one focusing on youth out of foster care.

Below we present six challenges grantees and the evaluation TA teams faced in Phases I and II of YARH. After describing each challenge, we discuss ways in which to meet them.

Challenge 1: Being comfortable with change

Description: In general, grantees are accustomed to following the plans laid out in their applications—they see those plans as set in stone. However, YARH grants were cooperative agreements. In a cooperative agreement, the funder should be seen as having substantial involvement in the grant, able to provide feedback and support once the work is under way. Grantees may need to revise their initial intervention plans, even after beginning to provide services, and their project officer needs to approve these changes.

Solution: ACF took a number of steps to address this challenge at the outset. These activities included ensuring the funding announcement and early communications with grantees clearly explained that ACF would be involved, including reviewing and approving planning stages before implementation began, and on an ongoing basis, as needed. Additionally, ACF provided clear messages around the nature of their involvement that grantees could expect in relation to key programmatic activities and decisions so that grantees understand that changes may be made at any time during their planning and

implementation. Funders for similar efforts could consider similar steps.

TA providers can also communicate they are there to help the grantee, to work with them to see where plans can be strengthened and to troubleshoot when things do not go according to plan. Grantees can make sure they understand cooperative agreements and are receptive to the TA process and to changing plans. Grantees can use the TA provider and funder as a sounding board, understanding that having more heads to think about how to address issues may yield stronger interventions, and therefore better outcomes.

Challenge 2: Not everyone will worry about the same things or articulate their worries in the same way

Description: Participants—grantees, their evaluators, funders, and TA providers—come with their own perspectives, concerns, and languages (Figure 3). Thus, one person’s nuances may not be grasped by another in conversations, which can result in frustration and additional problems later in the process.

Figure 3. Same concern, different definitions—a common issue with teams



Solution: It is important to create space for conversation and take the time to speak clearly, to describe your concern and the reason for it, and to be open to broad discussion about how to address the concern. It may be important to stop and make sure all participants are on the same page, which could include defining terms. For example, an evaluator might say, “By stratified random assignment, we mean grouping like people together and then randomly assigning to control or treatment within that group (or stratum).” Watch out for jargon—not all participants will use the same jargon. Remember that you are a team and everyone can contribute to the conversation to address concerns.

Challenge 3: Getting as much out of the data as possible

Description: Often grantees plan to rely on administrative data to provide information for planning or to support evaluation, but may not fully consider whether the data is standardized or complete enough to suit their purposes. Administrative data may also differ between agencies: agencies may think they are collecting the same data element, but they actually define it differently and the two data sets may not be compatible. Grantees also value qualitative data, but they may need help thinking about the resources involved in reducing those data to something an evaluator can use easily, like a binary variable indicating whether case records document referrals to a particular kind of service. Finally, evaluators and grantees may have a different understanding about which item or items to use to represent a service or outcome.

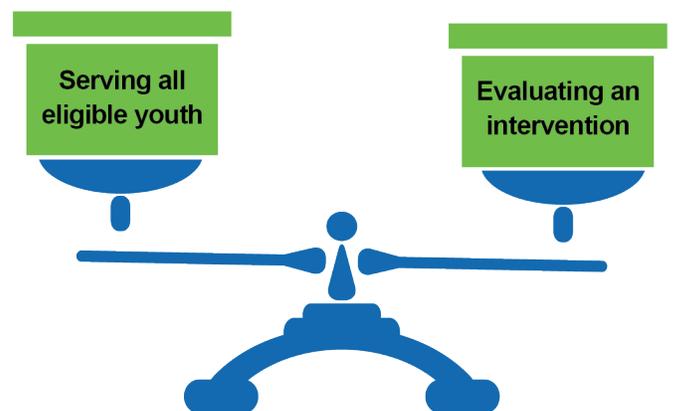
Solution: Working with administrative data to address programmatic and evaluation needs requires resources—money, time, and staff with expertise. Funders and grantees can work collaboratively to ensure that necessary resources and support for the work are available. TA providers can help grantees understand the myriad of issues involved in collecting and using administrative and other data. They can help

grantees think through the available data sources and data collection methods, working with grantees and partners to create common definitions for elements in the data systems or creating rules about which systems to use if there are conflicts. Finally, TA providers can help grantees hone in on which data will be most useful for the purposes of their evaluation by mapping them to the logic model of the intervention.

Challenge 4: Balancing serving everyone immediately and preparing for evaluation

Description: Often ACF grantees are experienced service providers who are eager to serve their population. Similarly, evaluators may be eager to start evaluating a program before defining outcomes, identifying data sources, and ensuring that services are being provided as intended (Figure 4). This enthusiasm may inadvertently result in evaluating a still-evolving program or not having consistent, reliable data with which to estimate impacts. Moreover, serving all eligible youth with an intervention that has not yet been shown to work as intended does not help build the evidence base of what works.

Figure 4. Balancing serving everyone and evaluating an intervention



Solution: Clearly articulating that a rigorous evaluation is the only way we learn whether an

intervention achieves the intended outcomes, and that it takes a lot of preparation to be ready to conduct a rigorous evaluation, may help stakeholders support evaluation-related activities, including only serving a portion of the eligible population until the intervention has been shown effective. TA providers can help ensure that the grantees and evaluators are talking through all key activities—recruitment, participant identification, participant assignment, program services, and data collection—from both the program and evaluation perspectives. Additionally, developing theories of change and logic models can help everyone articulate and understand the intent of the program. Designing an evaluation may mean that a program cannot serve everyone as quickly as some would like, and it may require setting aspects of the program and evaluation in stone, at least for a defined period of time. For example, in an evaluation, random assignment may be used to determine who receives the services (intervention group) and who does not (control or comparison group). Grantees may need to have tough conversations with staff, partners, and stakeholders to ensure that everyone understands why the intervention will not be provided immediately to all eligible youth.

Challenge 5: Engaging grantees experienced in evaluation

Description: Many grantees are not new to evaluation. They may have conducted their own evaluations in the past or worked with external evaluators to have their interventions evaluated. For experienced grantees, the requirements of evaluation TA—monthly conference calls and providing documentation that they are thinking through their intervention and evaluation in ways that will support a summative evaluation—can feel like a burden.

Solution: Funders and TA providers should keep in mind the many demands on grantees' time and resources when discussing the work proposed or required from grantees. Messaging is critical to

having grantees understand that preparation for evaluation is not just busywork. The funder and TA provider should state the purpose of the work early, clearly, repeatedly, and consistently. Funders and TA providers must demonstrate why the grant-required plans are critical to a successful evaluation.

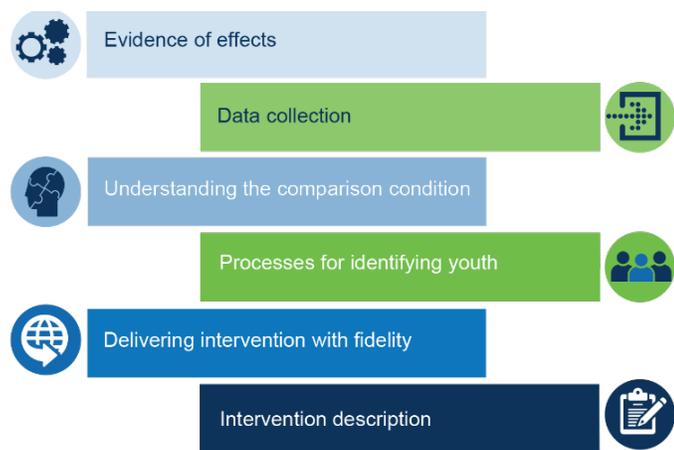
A clearly articulated theory of change is critical to demonstrating how the intervention can affect the desired changes. Well-designed logic models show how those changes will occur. Usability testing enables grantees to test whether specific components will work the way they expect before they enter a full formative evaluation. Conducting a formative evaluation shows that all pieces of the intervention can work together and demonstrate the desired early outcomes. With those pieces in place, grantees can clearly define the populations to be served, how eligibility criteria will be applied, and what existing services the comparison group might access in a summative evaluation. Without strict adherence to population definition, eligibility criteria, and the assignment mechanism, it may be difficult to document that youth in the treatment and comparison groups are comparable. Moreover, if the comparison group can somehow receive the intervention components, or if they receive services similar to the intervention through different channels, then the outcomes for the comparison group may be similar to those for the intervention group.

Challenge 6: Building evidence can be a long and iterative process

Description: Evaluating if an intervention works takes a lot of time and effort (Figure 5). Depending on where grantees start, they may still be working out the kinks of the intervention. Once the intervention's kinks have been worked out and it is clear that the intervention can be implemented and achieve some of the outcomes of interest, it may be time to design an evaluation. Communities differ in their

experience with and tolerance for rigorous evaluation, particularly the concept of random assignment. Changes in the intervention may be required to secure the community’s willingness to participate.

Figure 5. Building evidence



Solution: Funders can develop expectations, requirements, and supports that help grantees work from their own starting point. For example, ACF required YARH grantees to

- Develop well-defined theories of change and logic models for grantees who are developing new service models
- Conduct usability tests demonstrating that critical and/or new processes and services can be implemented
- Implement a relatively short formative evaluation to see if the full model can be implemented and achieve the outputs and short-term outcomes in the logic model

Grantees can prepare their stakeholders for this slow and potentially iterative work. A team may think the logic model is settled, but in the course

of usability tests or a formative evaluation, they may realize they need to make a shift. For example, a usability test may show youth are not willing or able to attend group sessions twice a week. TA providers can encourage funders and grantees to take the time needed to reflect on progress and on what the data suggest may be the logical next step. They can help everyone focus both on the “big prize”—the rigorous summative evaluation—and the small steps needed to get there. TA providers can help plan for this process by breaking it into manageable chunks and building up the knowledge base, thus making it easier to pull it all together at the end.

ENDNOTES

¹ The PICO framework helps guide grantees’ evaluation designs by having them: define the population they intend to serve; define every component of their intervention; think about what their comparison group would look like in a summative evaluation, and state their short, medium-, and long-term outcomes and data sources for those outcomes for both the intervention and comparison groups.

² The usability testing focuses on new or challenging components of recruitment, assessment, intervention, implementation, or data collection processes. The goal of usability testing is to conduct a short test of a well-defined aspect of the comprehensive service model, setting a benchmark a priori that is used to determine whether the aspect needs to be modified. Examples include conducting psychometric testing of new or adapted instruments, assessing the rate at which youth consent for the program, or examining whether meetings happen on a set schedule.

To learn more about the YARH grantees, including the work they completed in Phase I, please visit: <https://www.acf.hhs.gov/opre>.

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