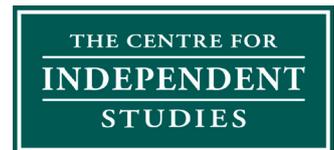




RESEARCH REPORT SNAPSHOT



Evaluating Indigenous programs: a toolkit for change

Sara Hudson

The first CIS report in this series ‘Mapping the Indigenous Program and Funding Maze,’ indicated the lack of evaluation of Indigenous programs is a significant problem. Of the 1082 Indigenous programs identified in our research, only 88 (8%) had been evaluated.

However, not only is there an absence of evaluations, but only a minority of those that have been evaluated are conducted properly. Just three of the 49 evaluations analysed used robust methodology — and none used what is considered the ‘gold standard’ of evidence: random controlled trials (RCTs).

In the 2017–18 Budget, the federal government announced it will allocate \$40 million over four years to strengthen the evaluation of Indigenous programs and \$50 million for research into Indigenous policy and implementation.

Yet, given the average cost of an evaluation is \$382,000, the extra \$10 million a year for Indigenous evaluations will not go far. In fact, only a small proportion of the 1000 or so Indigenous programs funded by the federal government will be able to be formally evaluated. Rather than simply providing a revenue stream for evaluators, the government must change the way it evaluates and monitors programs.

It is not enough to just conduct evaluations. The government must actually use the findings of evaluations to improve

program practice and contribute to better outcomes for Indigenous Australians.

A recent audit of the New South Wales Evaluation strategy found the state’s Treasury and Department of Premier and Cabinet were not using evaluation outcomes to make funding decisions. Olga Havnen, the former Northern Territory Coordinator-General for Remote Services, found a number of organisations in the Northern Territory continued to be funded even after evaluations identified ‘serious deficiencies’ in their program delivery.

To improve the evidence base for Indigenous programs, the government must adopt a learning and developmental approach that embeds evaluation into a program’s design as part of a continuous quality improvement process.

Adopting a **co-accountability approach** to evaluation will ensure that both the government agency funding the program, and the program provider delivering the program, are held accountable for results. An overarching evaluation framework could assist with the different levels of outcomes expected over the life of the program and the various indicators needed to measure whether the program is meeting its objectives. Feedback loops and a process to escalate any concerns will help to ensure government and program providers monitor one another and program learnings are shared.

Analysis of Indigenous program evaluations

Mapping of total federal, state and territory and non-government/not-for-profit Indigenous programs identified 1082 Indigenous specific programs. Of these:

- 49 were federal government programs;
- 236 were state and territory programs; and
- 797 were programs delivered by non-government organisations.

The largest category of programs were health related programs (n=568) followed by cultural programs (n=145) then early childhood and education programs (n=130) — see Figure 1.

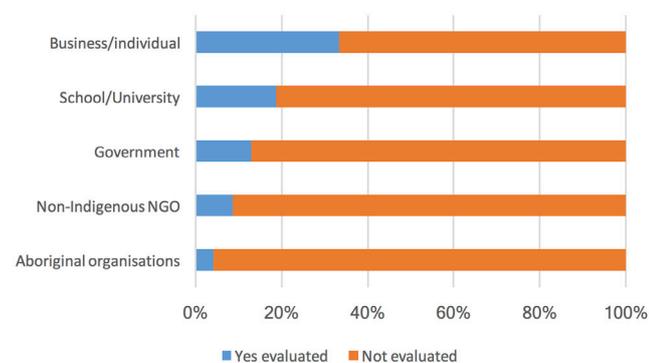
The program category with the highest number of evaluations was health (n=44), followed by early childhood and education (n=16). However, percentage wise, more programs were evaluated under the jobs and economy category (15%) than the other program categories.

Of the 490 programs delivered by Aboriginal organisations, only 20 were evaluated (4%). The small number of businesses delivering a program (n=6) meant that while there were only two evaluations of Indigenous programs provided by a business, this category had the highest percentage of programs evaluated (33%). Similarly, while only six of the 33 programs delivered by schools and universities were evaluated, this category had the second highest percentage of programs evaluated (23%). Conversely, government and non-Indigenous NGO delivered programs had the highest number of evaluations, n=36 and n=24, but much lower percentages of evaluations as the number of overall programs was higher, n=278 and n=276.

A total of 49 evaluation reports were analysed and assessed against a scale rating the rigour of the methodology. Only three evaluation reports utilised strong methodology (see Figure 4).

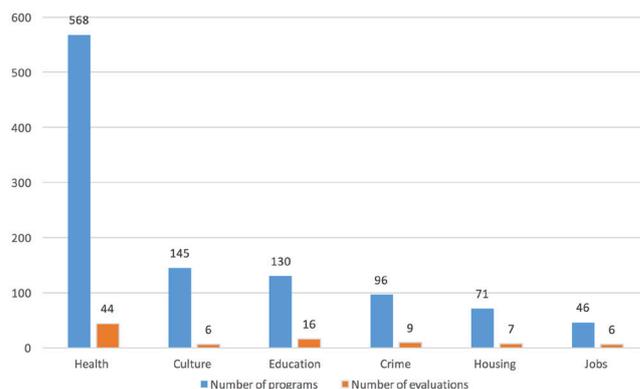
In general, Indigenous evaluations are characterised by a lack of data and the absence of a control group, as well as an over-reliance on anecdotal evidence.

Figure 3: percentage of Indigenous programs evaluated by provider



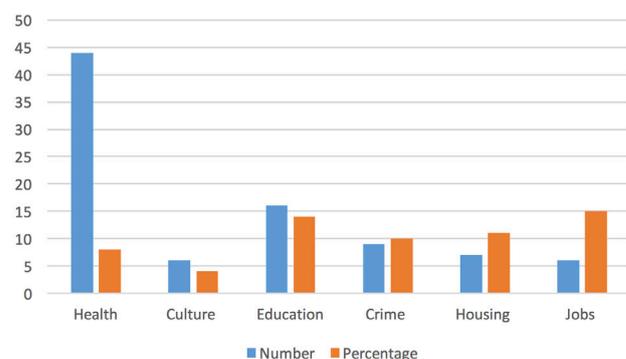
Source: Government websites, major philanthropic and NGO websites, and programs listed on the Australian Indigenous HealthInfoNet.

Figure 1: Number of programs by category and number of evaluations by category



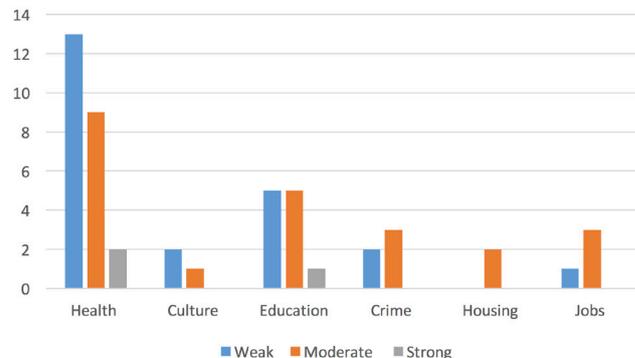
Source: Government websites, major philanthropic and NGO websites, and analysis of IAS funding recipients and programs listed on the Australian Indigenous HealthInfoNet.

Figure 2: Number and percentage of evaluations by category



Source: Authors' calculation based on a review of government, major philanthropic and NGO websites, and programs listed on the Australian Indigenous HealthInfoNet.

Figure 4: Rating of evaluation methodology of Indigenous programs



Source: Government websites, major philanthropic and NGO websites, and programs listed on the Australian Indigenous HealthInfoNet.

Examples of poor evaluation reports included:

- A health program in which 432 people participated but full screening data was available for only 34 individuals;
- Only staff were interviewed, so data gathered was very subjective and none of the statements were backed up by any quantitative statistics or feedback from participants;
- A program to reduce high rates of conductive hearing loss attributable to middle ear disease was not able to be assessed due to the lack of population level data; and
- The lack of routinely collected data (such as lack of identification of Aboriginality in RTA road crashes) made it impossible to link improvements to the program.

Particular features of robust evaluations included:

- A mixed-method design, which involved triangulation of qualitative and quantitative data and some economic components of the program such as the cost effectiveness;
- Local input into design and implementation of the program to ensure program objectives matched community needs;
- Clear and measurable objectives; and
- Pre- and post-program data to measure impact.

Recommendations

There is evidence to suggest that organisations are more likely to engage with the evaluation process when it is presented as a learning tool to improve program delivery than when it is presented as a review or audit of their performance.

This approach is different from traditional ideas of accountability, and involves moving away from simply monitoring and overseeing programs to supporting a learning and developmental approach to evaluation.

Use of a reflective practice approach to evaluation relies on a two-way exchange, with the experiences of those delivering the program being used to inform its ongoing implementation.

Table 1 Table of recommendations

Policy makers/program funders	Program providers
Embedding evaluation into program design and practice	
Evaluation should not be viewed as an 'add on' but should be built into a program's design and presented as part of a continuous quality improvement process. Where funding constraints do not allow for an external evaluation, funding should be provided for organisations for self-evaluation.	Evaluation should not be viewed as a negative process but rather as an opportunity to learn. If organisations do not have the capacity to hire external evaluators, it may be worthwhile hiring a professional evaluator to help with the development of an evaluation framework and for some advice/training in undertaking self-evaluations.
Developing an evidence base	
Regular feedback loops with a process for escalating concerns should be part of the data and monitoring process to ensure data being collected is used to inform practice and improve program outcomes. Government should develop a co-accountability framework and funding for an online data management system to make it easier for program providers to enter and share data.	Organisations should document how they have achieved the program's objectives through regular collection and analysis of data, not only to provide a stronger evidence base for recurrent funding but also to improve service delivery and ensure client satisfaction with the program. Organisations should use an online data management system for data collection to make it easier for staff to enter and share data.

Author

Sara Hudson is a Research Fellow and Manager of the Indigenous Program at the Centre for Independent Studies. She has published widely on Indigenous policy for the CIS, with a particular focus on Indigenous programs, economic development, health and criminal justice