

Healthy Start Virtual Grantees' Meeting
Transformative Evaluation Breakout Session
June 24, 2020

Susan Wolfe: Hi Donna!

Donna Mertens: Hi Susan

Phyllis Panzano: Testing

mthomas: Care Manager Coordinator

Susan Leib: Medical director

jane taylor: I AM AN IMPROVEMENT PROFESSIONAL

Tricia Amonette: I'm our HRSA Lead Evaluator

Linda Littlefield: Project Director

Dr. Tiffany James: I am a data coordinator

moraya : program director with QI, CBPR experience.

LaToya Atkins: I am a Healthy Pregnancy Coach

Elizabeth.Petty: Community Health Worker

Jill Miller: CQI program manager

Colleen Ayres-Griffin: I have about 20 years of experience with HS but

Art Howell: Project Director

Misha Taherbhai: Data Management Analyst, ACHSI & ACPHD MOCAH

Phillip Nunn: Phillip Nunn, Shields for Families (Los Angeles), Evaluator

Mary Cronin: Mary Cronin, Dallas Healthy Start, Data Analyst

jane taylor: A transformation is profound change; I would add to the structural, system change to be structural and systemic change that overcomes white supremacy and racism.

Stella Zimmerman: Stella, External Evaluator for Great Plains Healthy Start.

Tim Holbert (he/his/him): I understand transformation to address the root causes of the disparities. HS approach is an individual level approach and as such is only a piece of transformative changes...absolutely necessary but not sufficient for change. We need policy and systems change to address institutional racism.

DYuanna Allen-Robb: Transformation would mean the end of racism. Transformation within our project would be the end of perinatal inequities so communities of color are not overburdened with negative outcomes.

ronwhite: Ronald White MomsFirst Cleveland Co Parenting

Carol Gagliano: Data and identified patterns of change from evaluation helps reveal information that may not have been known and can create new opportunities for programmatic change that ultimately helps participants and ideally changes lives

Maria Huynh: (1) transformation is doing something different than how things have always or typically been done.

Staci Kaczmarek: As evaluators we are responsible to not only evaluate data but translate that to a story about our work. What are we doing? What's the lived experience of our clients? By telling a story we can better plan for the changes that need to take place in the communities that we serve.

Jewel Wright: Change to more relevant structures, systems and processes that lead to optimal outcomes.

Stella Zimmerman: Q1. How to use information and knowledge gained from the evaluation and shared by program staff to make meaningful change that is sustainable.

Kristal Dail: transformation to me means changing/transforming the outcomes, evaluation can help identify the root cause so that we can change/transform to more positive outcomes

Linda Littlefield:Transformation for my project means a greater focus on the family unit and economic disparity as well as health disparity. WE have disparity in all social determinants of health

Misha Taherbhai: Evaluation can substantiate the transformative change that could be happening

Emily McCave: Transformation would mean looking at the upstream causes of infant mortality including classism and racism and sexism

jane taylor: I'm hoping that the evaluation is more than use of a logic model. I'd love to see improvement thinking and science integrated into the evaluation so that we can look at data monthly trended over time, we can create some funnel charts to understand our performance

Porsha E: having an innovative approach to improving black maternal health outcomes

Tim Holbert (he/his/him): Evaluation has a key role to play in helping us know that a change is an effective change. We need better measures of transformation at the institutional level.

Susan Wolfe: Evaluation can be helpful in using some of the tools we have. We can use things like theory of change maps to frame the vision for change and connect it to what is being done. Then we can set up outcome measures that create an accountability to transform.

LaToya Atkins: Looking at where we started to where we are now to where we are headed.

Natasha Ray: To ask different and not standardized/cookie cutter questions

Maxine Reed Vance: transformational change would eliminate the need for Healthy Start

Linda Littlefield:Yes to Jane

Colleen Ayres-Griffin: 1. Improved birth outcomes with no disparities among races.

Rob Fischer: Foundational change in in the circumstances facing women as they become pregnant and seek a healthy birth

Phyllis Panzano: Expand the warrants/beliefs of service recipients and service providers -- to acknowledge both have information of value to share - from collective growth

Phillip Nunn: Transformation in my project would be that families would no longer need a program to intervene on behalf of families to insure healthy outcomes.

jane taylor: get away from bimodal thinking

Susan Wolfe: We can also develop our evaluations with community members and participants to capture outcomes that matter to them.

LaToya Atkins: Evaluations are needed as a check and balance system

jane taylor: good one, Phillip

Jennifer Torres: transformation means change that goes deeper than individuals, that really addresses the systems that are creating and perpetuating inequity, and that shifts the ways of thinking that hold inequities in place.

Cody Mullen: Removing the status quo

Jill Miller: Transformation in our program would mean transformation/change throughout our county. Healthy babies, healthy families and healthy communities.

Jewel Wright: Evaluation brings a structure to monitoring implementation to be relevant and transformative.

Kara: Transformation is creating a new generation raised by supportive and nurturing parents who have the tools available to create lasting generational change

Erica Little: Transformation would be changes to systems and health disparities to improve overall health for our participants.

Erica Maloney: 1. When I think of transformative change I think much more broadly than one program/block grant. Until we have a major redistribution of wealth in this country and begin to genuinely address the sins of racism and white supremacy transformative change will remain out of reach.

Colleen Ayres-Griffin: 2. Evaluation is the method to determine success and progress

elizabeth: One example of transformation in the experiences of support that they find meaningful and helpful during pregnancy

ronwhite: Better systems more real time

Maria Huynh: (2) Data lets us see how things have been working and areas that need to be addressed in order to have real change

Marjie Mogul: Evaluation needs to move beyond data compliance for funder requirements to doing the hard work of providing informatino for progrma improvement

Jennifer Torres: evaluation can contribute to transformative change by using a critical perspective on what success means, and to whom.

Phillip Nunn: Evaluation can contribute to transformative change by helping communities regulate success.

Maxine Reed Vance: evaluation is understanding how far we have to go

elizabeth: Evaluation can contribute by leveraging the truth or what is really happening in people's lives and what program services are or are not doing for people

Kara: 2. Evaluation can help gauge if interventions are working

Ah Vang: include input from the target of evaluation

Erica Little: Evaluation can show trends and help guide action

Mary Cronin: Evaluation/measurement is necessary to (1) identify elements that require change (2) determine approaches to test, (3) finalize an approach/remedy to pursue.

Jill Miller: Acknowledging first the ways that racism has impacted what we collect, and the distrust that some communities feel about participating in data collection efforts.

Emily McCave: Evaluating the systemic barriers to maternal health and how HS may be contributing to those barriers

Phyllis Panzano: increase the drive of service providers and recipients to seek evaluation info -- and to help shape formative evaluation questions

LaToya Atkins: It also helps us to understand if our program are meeting target needs to the target population and if there are adjustments that need to be made in order to ensure accountability related to overall goal, mission and outcome of our program.

Misha Taherbhai: evaluation can prioritize with transformation are more important

Misha Taherbhai: *which

Erica Maloney: Courageous evaluation brings about change in our programs. It shines a light on what works and what doesn't. Then change efforts can be engaged in a more meaningful way

Mary Cronin: CBPR - Community-based participatory research -- is a fundamental tenet.

Tracy Enright: social capital building

Ibberly: Effectively telling the HS story qualitatively and quantitatively resulting in sustainable funding to improve optimal health trajectory

moraya: transformation Asks questions with more unabashed intention; framed by CRT; prioritizing qualitative; gathering stories that display realities, feelings, voices of families. It also provides context so that data results don't end up stereotyping and continue marginalization:

Lindsay Zeman: At our site we rely primarily on quantitative data - ideally we'd have a more mixed methods approach however capacity is a crippling factor for us. Additionally HS, relies primarily on quantitative data.

Linda Littlefield: Right Lindsay - the funders and congress think quantitative

jane taylor: You are singing to my heart; at my core, I am a qualitative research practitioner and I love mixed methods

moraya : they do, but I think if we can quantify the qualitative, it's super powerful.

moraya : me too Jane

jane taylor: such an informative book for me, the paradigm wars, I think it was.

Cody Mullen: We have found that partnering with local colleges and their intern program has been very beneficial in the qualitative work that we want to do but our usual team doesn't have time to complete

Tim Holbert (he/his/him): Dr. Mertens, you are a superstar. You are speaking my language.

Fbutler: Didn't get to answer poll 2 can you put it back up

jane taylor: I didn't know there were so many kindred spirits out there; I am emboldened by the us of us and excited about what we might create together re evaluation and the work it reflects

jane taylor: Here here!

Susan Wolfe: Thanks for the shout out, Donna!

Paul Frankel: So theoretical and conceptual. We operate at a much more concrete level

moraya : can't wait for the learning group resultant from this

jane taylor: That's right, Moraya, I'm so hungry for it

moraya : 

Natasha Ray: So essentially, structural racism. That is what's present in all of those examples

jane taylor: It seems the first assumption is nearly always lack of information and then when we do info campaigns we don't see change.

jane taylor: and if we do developmental eval we can start the use of findings for justice sooner rather than later

jane taylor: head nodding

Moraya: Too often power structures assume it is knowledge and impose what they think is needed, rather than asking, conversing with those we are partnering with for change to see what they want to change, how they want to change it, readiness for change, priorities and values.

Dr. Jerry Roberson: My experience with the HS community, in terms of evaluation, has been that sites want to do a good job reporting to HRSA and they need their data to help them with securing

additional dollars based upon good programmatic performance. Working from the assumption of sites that are demonstrating high performance, the power of the “practice” aspect of evaluation is critical. The translation of the data into useful tools is essential so that the Sustainability portion of their grant apps is not a creative writing exercise. Will this aspect be addressed later in this session?

Susan Wolfe: The book that she featured has a lot of practical and hands on information. It was developed to be used in practice. Here is the reference. Wolfe, S.M., Price, A.W., & Brown, K.K. (Eds.) (2020). Evaluating Community Coalitions and Collaborations. New Directions for Evaluation, #165. Hoboken, NJ: John Wiley & Sons.

Misha Taherbhai: How do we remove bias form our evaluations, when doing them internally?

jane taylor: stakeholders would be those we depend on to accomplish our aim? is that what we mean by stakeholders?

Staci Kaczmarek: We serve a large Burmese population and could use the input of leaders in those communities. Issues like safe sleep are a challenge because of cultural differences.

Moraya: Beyond community organizations that usually join, finding new ways (securing money as well and other nontangibles) to engage consumers to ppt in the CAN so that these questions can be asked.

Cecelia Smith: I cannot say what the stakeholders are thinking.

Michelle Marcus Rushing: I would never assume anything about the norms and beliefs of a population without hearing from them directly or indirectly (social media)

Maxine Reed Vance: cultural humilty with our stakeholders. in our CAN community rules.

Tressa Tucker: stakeholders and target population representatives should be involved in evaluation design from the beginning. we need to value their input.

Moraya: We need more money for this activity, and to think outside the box when we engage families. I have leveraged mother and family items to support this engagement. It will begin soon.

Kim Broomfield-Massey, PhD: A big part of understanding is listening...most people come in with a set of tools instead of listening. I feel that staff members and clients are the MOST important to hear from.

Cecelia Smith: I speak with the participant to ask what they would like to see happen and why.

Jennifer Torres: The major stakeholders are the families served by the program. We are doing an evaluation for Tribal MIECHV on parent stress and resilience and we are starting the project by talking to elders about traditional teachings and words for these concepts, then we will use photovoice to have home visiting clients define these concepts in their lives. We want to understand the meaning of stress and resilience in the program context before measure how well the program is addressing it.

Moraya: However, the reality is that other needs need to be met so that they can not only engage but provide the space for learning and development to become a stronger voice for change in their own lives and community wide

Susan Wolfe: Community members need to have control over the decisions that are made for programming and evaluation. We need to come in as tools that they can use to do their work.

Cecelia Smith: Staff that rae presenting.

Moraya: :) a true evaluator Dr. Mertens.... :))))

Stella Zimmerman: Another aspect is also sharing back so data is not just being collected without knowledge being shared with those that provided the feedback.

Moraya: agree stella

Moraya: and with context so that it is not doom and gloom

Moraya: or stereotyping

Moraya: yesssssssss

Susan Wolfe: I also recommend this article regarding principles that can guide evaluation work. Wolff, T., Minkler, M., Wolfe, S.M., Berkowitz, B., Bowen, L., Butterfoss, F., Christens, B., Francisco, V., Himmelman, A., Holt, C., & Lee, K. (2017). Collaborating for equity and justice: Moving beyond collective impact. *Nonprofit Quarterly*, Winter 2016, 42-53.

Moraya: Who is evaluating our CAN work on the global level at MCHB? I am a new grantee.

Moraya: I appreciate Minkler's and Wallerstein's work

Moraya: Can you please email these salient articles to us, by chance, as follow up?

Moraya: Got it, thank you!

jane taylor: we can get Q&Q data about context, need to develop approaches

Moraya: Community Partnered Participatory Research - was a coauthor on this concept with K Wells, L Jones, et al. Takes CBPR and moves from eval being "based" to "partnered"

Moraya: Thank you Dr. Wolfe. I will share your information.

Moraya: So beautifully put

Moraya: Caring takes courage

Maxine Reed Vance: is L Jones Loretta Jones?

Moraya: Yes,

Moraya: I worked with her for 20 years

Maxine Reed Vance: we worked together on a NICHD grant for CBPR

Moraya: Excellent! With Keith Norris, yes?

Tressa Tucker: Great presentation! Thank you!

Moraya: Stay in touch with me, Ms. Maxine: mmoini@dhs.lacounty.gov

Moraya: or maybe this was with Dr. Hobel and Dunkel Schetter actually

Tressa Tucker: oh wow.

Carol Gagliano: Will these slides be available?

jane taylor: Yes, on EPIC

Maxine Reed Vance: will do

Susan Wolfe: I agree Tim! I think we would have very different outcome and performance measures if she did!

Kim Broomfield-Massey, PhD: How can we begin to share information among evaluators?

Kim Broomfield-Massey, PhD: contact information

Mary Cronin: Thank you for an exceptional presentation!

Moraya: Metrics are so important. Can we offer them a different proposal?

Moraya: Yes.....Dr. Taylor

Mary Cronin: And we are very fortunate to have Dr. Wolfe as our evaluator here at Dallas Healthy Start.

Moraya: Thank you kindly

Misha Taherbhai: Is there any way to see how other grantees are doing with their outcome measures or the benchmarks as they are known?