

## Evaluation of Practice Assignment

Evaluation of practice exercises described here are educational assignments and are not research projects in the sense that data is being gathered for publication or other public dissemination purposes.

This is a very important point.

Any project that gathers data about human subjects with the intent of publicizing the results of data analysis (through publication or other forms of public presentation) constitutes a research project. No such research can be conducted without obtaining prior approval from the UIC human subjects review process.

To repeat: the evaluations of practice exercises required in field are not research projects; they are learning exercises to teach students the elements of doing research. No data gathered through these exercises can be used for any purposes other than student learning.

### **MSW FIELD EVALUATION OF PRACTICE:**

#### **One evaluation assignment is required in foundation placement and one in concentration placement.**

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1. All students in placement should have experience doing evaluation of social work practice. Practice evaluations may focus on agency clients or consumers (individuals, families, or groups), on agency programs, or on other units of attention such as staff, communities, or population sub-groups. The target of practice evaluation may be a client problem (e.g. increase the number of days a student attends school), a client strength (e.g. maintain high level of school attendance), a program goal (e.g. 80% of agency clients will follow through with referrals), or some other measurable aspect of practice deemed important by the student and the Field Instructor. Most students will elect to evaluate their practice with an individual client or client system (e.g. family) using single system design, but students are encouraged to consider evaluating other units, such as programs.
2. Students should conduct at least one practice evaluation sometime during their placement, and submit one written evaluation using the attached cover sheet and appropriate outline. Students may duplicate or replicate the forms as needed. Field Instructors are responsible for explaining and helping students meet this requirement.
3. Research procedures to support practice evaluations will be introduced in the fall research course (SOCW 460). Data collection may include one or more: standardized questionnaires (e.g. the Parent-Child Relationship Index); self-report tools such as self-anchored scales and logs; field notes or other ways of recording activity and impression in action research; behavioral observations using in-session, parent, or teacher rating scales, audiotape, or videotape; and,

Field forms/assignments and Field Manual are available on our website:

[www.socialwork.uic.edu](http://www.socialwork.uic.edu)

archival data such as probation reports, employment records, school reports, or medical records. The choice of which goals or problems to measure in a given evaluation and how to measure them are the responsibility of the Field Instructor and student. JACSW faculty is available to consult with students on their designs and measures.

4. For each practice evaluation other than action research, the student must arrange for repeated measures (particularly when using a single system design). The minimum number of measures is two. These may be pre-post (for either group designs or single system designs) or between groups (for group designs). Retrospective data are acceptable for "pre" measures. For group designs, at least one measure is recommended prior to the intervention and at least one measure after the interventions. For program outcome evaluation, the timing of measures will vary. For action research, detailed narrative may replace measures. Variations on these designs will be provided in the research class.

## REPORT ON EVALUATION OF PRACTICE EXPERIENCE

Each student is to submit to the JACSW Faculty Field a form, completed in collaboration with the Field Instructor, which describes the nature of the evaluation of practice learning experience. Typically, the practice evaluation will include a face sheet and a four-item report as described below. The face sheet includes the following items:

**Agency**

**Field Instructor**

**Student**

**Date Completed**

**Client/consumer initials (or code name) or program name**

**Faculty Field Liaison**

Attached to the face sheet is a 1-2 page report which is typed, single spaced, and spell-checked. Use one of the following outlines for your report:

For practice evaluation with single systems or clients

1. Describe the subject.
2. What was the client/consumer problem or goal you measured in this case?
3. How did you measure the goal (procedures used, operational definition, frequency)?
4. Intervention(s) you used and when used (be specific).
5. Findings (chart is appropriate) and implications.

For practice evaluation with clients or consumers considered using a group design

1. Describe the sample.
2. What was the outcome indicator you measured in this case?
3. How did you measure it (procedures used, operational definition, frequency)?
4. Intervention(s) you used and when used (provide details of the intervention)
5. Findings (chart or table is appropriate) and implications.

For practice evaluation with programs (outcome evaluation):

1. Describe the program.
2. What was the program goal or objective measured?
3. How did you measure it (procedures used, operational definition, frequency)?
4. Program description (how the program is supposed to impact the goal)?
5. Findings (chart or table are appropriate) and implications.

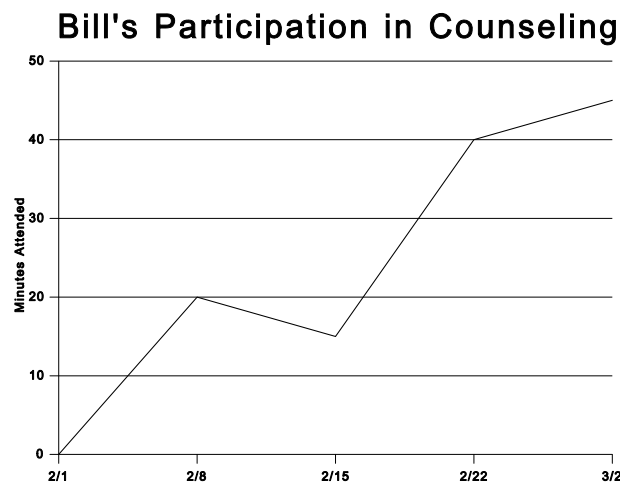
For practice evaluation with participatory groups (action-oriented evaluation):

1. Describe the group.
2. What problem or situation became the focus of intervention?
3. What indicators of problem resolution emerged from the interaction with consumers, participants, or community members?
4. What actions were taken?
5. What happened (narrative, chart, or table are appropriate) and what are the implications?

## SAMPLES OF PRACTICE EVALUATIONS<sup>1</sup>

### Sample 1: Single System Designs

1. Client. Bill is a 15-year-old called in because of missing classes. He is an average student, single parent family, no previous disciplinary problems.
2. Problem. He denied this was a problem, but grudgingly consented to see me. It became apparent that my first goal had to be that he should come in to see me more regularly and stay the whole time (since he was doing neither). So I decided to measure how he was doing on this goal.
3. Measurement. I counted the number of kept appointments, how many minutes he was late and how long he stayed for each weekly appointment. I put all of these on charts. A "kept" appointment was operationally defined as his either coming as scheduled, or asking beforehand to reschedule and keeping the new appointment.
4. Intervention. For a while I just tried being supportive. Finally, on 2-15-97, I intervened by confronting him that he hadn't been spending much time here. I asked empathically whether he had anything that he wished was different about his life. I also said it was hard to have people pushing you to come in when you're not sure you want to.
5. Results. The chart of time Bill spent in sessions (below) dramatically showed his response to my intervention of 2-15. The implications were, first, that Bill is responsive to appropriate confrontation, and second, we could now focus on his problems.

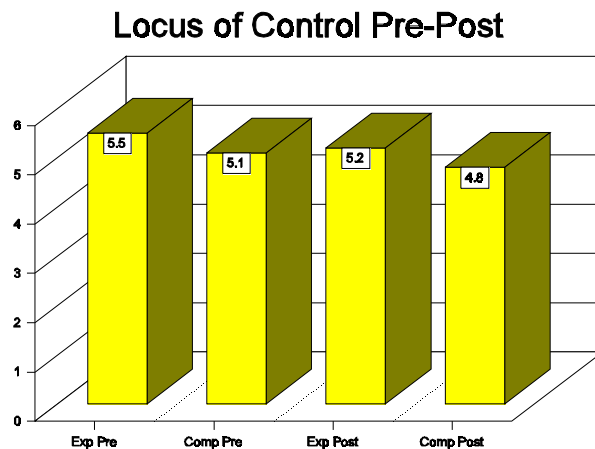


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<sup>1</sup> In order to fit on a single page, these samples are abbreviated

Sample 2: Group Design

1. Description. 31 men and women in a substance abuse treatment program (average age 32; 18 African American, 10 white, 3 Latino; 24 men, 7 women).
2. Outcome indicator. Participants received a novel outdoor adventure program. Participants in the experimental (outdoor adventure) program are compared to participants in the agency's usual program before and after the experimental program. The outcome measured was drinking-related locus of control.
3. Measurement. Locus of control refers to the extent an individual believes external factors (e.g. chance, situations, or other people) control whether they drink or use drugs. An internal locus of control has been found to be associated with better outcomes over a number of studies. Locus of control is measured with the Drinking Related Locus of Control scale (Donovan & O'Leary, 1983). Participants in both the experimental and comparison groups completed the DRLOC scale prior to the outdoor adventure program, and then again 3 weeks after the program.
4. Intervention. The intervention is a 3-day outdoor therapeutic recreation and adventure therapy program integrated with a traditional relapse prevention program and "twelve-step" addiction recovery activities. Participants in the comparison group receive the traditional relapse prevention program and "twelve step" addiction recovery activities. In the experimental group, principles of addiction recovery and relapse prevention are integrated with wellness, relaxation, and a stress-challenge team course. Specific elements of the intervention included community meetings, journaling, a dream catcher project, wellness/relaxation workshop, and a team course.
5. Findings. As can be seen in the chart below, external locus of control was reduced in both experimental and comparison groups during the course of the program. This suggests the intervention is not particularly effective at changing locus of control. The intervention may have an effect on other variables which were not measured.



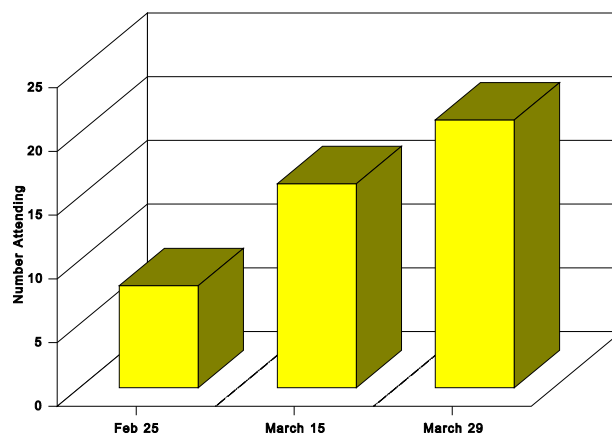
Sample 3: Program Outcome Evaluation

1. Program Goal. As a student at Cook County Court Services, I evaluated the effectiveness of a victim information program (VIP) designed to increase domestic violence victims' access to information and the courts. While this program has a number of goals, I collected information to evaluate whether victims who attended the VIP were more likely to return in 3 weeks to extend their order of protection.
2. Measurement. Attendance at the VIP is measured by official records from my unit at Cook County Department of Social Services. The outcome variable, extension of the 21-day protective order, is measured using official court records.
3. Program and Projected Impact. The VIP is a voluntary, one hour informational program offered to domestic violence victims receiving Orders of Protection in District 3 Unified Family Court. The VIP is designed to provide the victim with information about the court process and the use of an OP, the cycle of violence, the predictability of violence recurrence, and the impact of violence on household members, especially children.
4. Findings. From October 1, 1997 to Dec 1, 1997, judges signed 63 ex-parte orders of protection. Of those 63 OP's, 60 were for women and 3 were for men. Of the 60 women receiving orders, 41 (68%) attended a court-based VIP and 19 did not attend a VIP. Of the VIP-attendees, 29 (71%) extended their orders. Of the VIP non-attendees 8 (42%) extended their orders. The differences (71% v. 42%) are large enough to be statistically significant. This suggests the victim information program successfully increases the proportion of petitioners extending their orders of protection.

Sample 4: Action-Oriented Research

1. Group. Homeowners in the XYZ neighborhood. Census data report 81% minority residents in XYZ, 22% of whom (including 30% of the children) live below the poverty level.
2. Problem. Gentrification in the XYZ neighborhood is forcing many homeowners out of their community, and those remaining are experiencing tremendous rent increases. In particular, community residents felt they had no input or control of these conditions, but were, in the words of one activist, the "victims of city hall politics and big business". A community group, the XYZ Residents Coalition was formed. The XYZRC decided that residents needed to empower themselves and have some say in the development of their community.
3. Indicators. XYZRC decided that if residents were empowered, there would be increasing attendance at XYZRC meetings, and residents would vocalize a belief that they could have some impact on development in XYZ
4. Action. A series of monthly meetings were organized. Our agency had the task of publicizing the meetings. The XYZRC decided to form a subgroup to (in the words of one of the participants) "Mau-Mauing the Flak Catchers" (which is the title of a Tom Wolfe novel). In this case, the "flak catchers" are Chicago political appointees and elected officials, construction firms with government contracts, and newspapers. A total of 8 "flak catcher" meetings were held, and three publicized meetings were held prior to my leaving the field placement.
5. Results. Meeting attendance is documented in the chart below. Over the course of a month, attendance doubled, and there is every reason to believe this trend will continue. The most visible outcome is the vocalization of residents like Michael M. who says, "I don't know if this is going to work, but it feels better to be trying to deal with the contractors than to just let them have their way. Lots of people, even people who don't come to the meetings think so."

**Attendance at XYZRC Meetings**



### **Select Practice Evaluation Terms**

<i>Action Evaluation</i>	Typically used in community practice, action evaluation employs participants in all phases of the evaluation, including development of the problem to be researched, indicators of success, intervention, outcome, and interpretation. The emphasis in AE is on detailed description and community participation
<i>Data Collection</i>	Applying observation, interview, discussion, testing, or existing records to evaluation
<i>Goal</i>	A target for an intervention. A goal may be long term, intermediate, or short term; process-oriented (formative) or outcome-oriented
<i>Group Design</i>	A research design focusing on a group or community of individuals. The groups may be actual conjoint groups (e.g. a counseling group), or they may be people linked only by agency membership or linked by a common characteristic, but they are represented by a common descriptor (e.g. TANF recipients who have been enrolled for more than 12 months)
<i>Practice Evaluation</i>	Application of quantitative or qualitative research methods to answering questions about social work practice
<i>Program Evaluation</i>	Application of quantitative or qualitative research methods to answering questions about program effectiveness or program process
<i>Target</i>	The focus of social work intervention, usually stated as a goal, problem, or outcome.
<i>Repeated Measures</i>	Taking measures of a target two or more times (preferably more).
<i>Retrospective Measure</i>	A measure derived from existing records or from asking clients to think retrospectively.
<i>Self-anchored Scale</i>	A scale with 5 to 11 ordered categories co-constructed with a social worker and clients/consumers and linked to a goal, problem, or outcome. The SAS often uses the client/consumer's own words as "anchors" for the 5 to 11 categories. When SAS are standardized and used in program evaluation, it is often called <i>goal attainment scaling</i> (GAS).
<i>Single System Design</i>	A research design focusing on an individual or on a larger number of people being viewed as a single unit (e.g. a couple, family, group, or community). SSD uses repeated measures and graphic representation to monitor change.