Good Better Best
Developing evidence for your program

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In the world of evaluation of COPMI programs - the best evaluation method is not always possible. However we should always be trying to move from Good

Good
To design your evaluation to do at least some...

Better
And to try to include...

Best

Whenever possible.

Examine the following to see how you can best evaluate your program...
Good program evaluation

- Your program goals are clearly defined
- You measure more than just *participant satisfaction* with program
- Your measures are aligned with your goals
- You measure over at least 2 time frames (pre and post your program)
Better program evaluation

• Have a second group that do not get intervention (or get something else)
• Participants are matched for groups on key characteristics (e.g. gender, age)
• Evaluation measures have strong psychometric properties
  – Clear structure (definitions, statistically)
  – Valid
  – Reliable
• Has follow up time frame (3-12 months post program)
• Matches participants over time
Best program evaluation

- Participants
  - Randomly allocated to groups
  - Large numbers – lots of groups
  - Different types of participants (gender, age, race)

- Study strictly controls other variables
  - Parental illness, family supports

- At least 3 groups
  - Intervention, alternative intervention, controls, placebo
Best program evaluation

• Program
  – Strong fidelity (same thing delivered by each person trained to deliver it)

• Externally evaluated

• Run by different independent practitioners who get same findings

• Evaluated by different independent researchers who get same findings