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ORIGINAL RESEARCH

An Online Survey on Identification of Evaluation Capacity, Needs and Current Practice of Programme Evaluation in Community-based Rehabilitation

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ABSTRACT

Purpose: Evaluation of Community-based Rehabilitation (CBR) is important for developing good practice and providing a foundation for evidence of efficacy of practice. Since not much is known about the extent to which monitoring and evaluation (M&E) are carried out within CBR programmes, this study aimed to enhance knowledge by focussing on current M&E activities, the need and capacity of programmes to conduct evaluations and the challenges experienced.

Method: An online survey of 15 questions was developed, field-tested and sent out to 236 CBR managers in Africa, Asia and Latin America.

Results: The majority (86%) of the respondents indicated that their programmes had been evaluated in the past. While this was mainly done by international donors (87%), around half of the respondents reported programme participants as the main audience. Just over half of the programmes (54%) included people with disabilities, their families and community members in evaluation processes. Insufficient financial resources were considered the most important challenge to conducting evaluations, particularly in the African region and among smaller programmes. The complexity of CBR was also indicated as an important barrier to evaluation.

Conclusions and Recommendations: Although evaluations have been widely implemented in CBR programmes, many of them are not locally owned, and people with disabilities and their families are often not included in the evaluation

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process. The issues of limited financial resources and CBR complexity reflect current discussions in other areas of mainstream development. It is therefore recommended that models for evaluation in CBR should learn from, and be embedded in, ongoing developments in mainstream evaluation in international development.

Key words: Evaluation stakeholders, evaluation audience, outcome evaluation, process evaluation, monitoring, barriers to evaluation

INTRODUCTION

Disability is widely understood as an evolving concept and experience (UN, 2007; WHO/World Bank, 2011). There is increased recognition of the broader needs and rights of people with disabilities as important factors in their overall wellbeing, such as inclusion in education, civil society and livelihood.

Community Based Rehabilitation (CBR) is promoted by the World Health Organisation (WHO), the International Labour Organisation (ILO) and the United Nations Educational, Scientific and Cultural Organisation (UNESCO), as the most effective way to improve the lives and wellbeing of people with disabilities in underserved regions. Although CBR was initially medically orientated, it has undergone major re-conceptualisations during the last decade and is now a comprehensive multisectoral approach. This comprehensive framework, reflected in the most recent CBR guidelines (WHO/ILO/UNESCO, 2010), is in harmony with the re-conceptualisation of disability.

CBR programmes are considered fundamental for improving the wellbeing of people with disabilities and for fostering their participation in the communities (Cornielje et al, 2008). However, after more than 30 years of CBR implementation, the evidence base for CBR remains fragmented and incoherent (Finkenflügel et al, 2005; Cornielje et al, 2008; Hartley et al, 2009; Ienni et al, 2015). Information is lacking on knowledge-based outcomes of CBR that are based on evaluation findings (Finkenflügel et al, 2005; Kuiper et al, 2006; Mannan and Turnbull, 2007; Iemmi et al, 2015). A systematic review by Iemmi et al (2015) on the impact of CBR for people with disabilities in Asia, Latin America and Africa found only 15 evaluation studies which met the inclusion criteria. The review suggested that CBR may be beneficial but the authors highlighted the lack of quality evidence from which to draw conclusions (Iemmi et al, 2015).

One of the challenges highlighted by these reviews is that a commonly accepted framework for evaluation of CBR is lacking which is, in part, attributed to the complexity and heterogeneity of CBR as an intervention. The lack of commonly accepted evaluation instruments for CBR hinders a meta-analysis of CBR programmes, and therefore leaves the claims of the efficacy and effectiveness of CBR unproven (Wirz and Thomas, 2002; Lukersmith et al, 2013).

The lack of evidence about the effectiveness of CBR constitutes a significant barrier for the implementation and delivery of the CBR guidelines. Furthermore, it is well established that evaluations are key at the programme level to measure impact and to help identify the most valuable and efficient use of resources (Bamberger et al, 2012; Stern et al, 2012).

Objective

In order to inform the development of appropriate evaluation approaches for CBR, it is necessary to understand the current evaluation capacity, needs and current practice at the community level. To address this gap, this study aimed to assess existing evaluation activities within CBR programmes and the challenges faced, specifically the:

- Roles and engagement of stakeholders in evaluation (Who is evaluating?)
- Evaluation practice (**How** is evaluation undertaken?)
- The purpose of evaluation (**Why** is the programme being evaluated?)
- Barriers to and challenges in evaluation.

METHOD

Study Participants

An online survey, with a defined sampling frame of CBR coordinators/managers globally, was used in order to reach a geographically and culturally broad selection of participants.

Study participants were 236 CBR programme managers and coordinators (73 from the Africa region, 53 from Pacific Asia, 73 from South Asia and 37 from the Americas) who were included in the WHO-CBR global database (WHO webpage). This global database collects data on CBR programmes through a voluntarily completed web-based data collection form. In addition, this database

was crosschecked by the first author against the database of CBR programmes from CBM, an International Non- Governmental organisation that works in the field of Inclusive Development, and updated accordingly.

Questionnaire Development

Content: A structured questionnaire was developed, which included 15 closed questions with predefined response options as well as optional space to give narrative input for some of the questions. The first section of the survey asked about background information on the CBR programme managed by the respondent, including the length of time the programme had been running, number of staff, location of the project and field of work.

In the next section the survey participants were asked whether they had ever undergone any evaluation and if so, the groups of people involved in evaluation. Questions on regular data- collection activities and the monitoring system were also included. In the last section of the questionnaire, the survey participants were asked to indicate which barriers to evaluation they perceived as significant.

The questionnaire was developed in consultation with CBR experts. Draft survey questions were sent out to 10 CBR experts who were asked to give feedback (written and through telephone discussions) on the content, comprehensiveness and appropriateness of the survey questions and on any additional questions that should be included. The questionnaires were revised accordingly.

Translation: The survey questions, the participant information sheet and the contact email were translated into Spanish and French. This involved two independent forward translations, with one consensus version which was back translated, with revisions made accordingly.

Pilot Testing: The survey was pilot tested with programme managers of 12 CBR programmes in Latin America, South Asia, South- East Asia and Sub-Saharan Africa. In follow-up telephone interviews the respondents were asked to reflect on the content and wording of the questionnaire, which was updated to produce a final version. This version of the survey is available from the first author upon request.

An e-mail was sent to 236 study participants inviting them to participate in the online survey. After 14 days one reminder was sent, and the questionnaire remained open for a further 4 weeks.

Ethical Considerations

Responses to the online survey were anonymous and the website remained password protected, only accessible to the researchers to ensure confidentiality and anonymity.

Data Analysis

A descriptive quantitative data analysis using STATA 12 was undertaken with a bivariate analysis using chi-square analysis (or Fisher's exact test where appropriate) to compare responses by programme size, duration and region.

The analytical process of the qualitative data generated through the open questions involved thematic analysis (Braun and Clarke, 2006). This was done manually by the first author and implemented with the objective of finding common emerging themes in the data, using a process of coding.

RESULTS

The online survey was sent out to 236 CBR programmes and 99 responses were received (total response rate of 41%). Just under a fifth (18%) of the respondents (n=18) used additional space provided in the survey for one or more of their responses on qualitative input.

Response rates were similar across the different regions (Africa 45%, Pacific Asia 43%, South Asia 33% and Americas 43%) (see Table 1). South Asia is presented as a separate region due to the high number of CBR programmes in this region, and to enable comparison of these programmes with programmes in other regions.

Table1: Response rate by Region

Rate/Region	Africa	Pacific Asia	South Asia	Americas
Sent out (N)	73	53	73	37
Feedback (N)	33	23	24	16
Response rate (%)	45%	43%	33%	43%

Background to the Programmes

Just under half or 42% of the programmes had been running for less than 10 years, 38% for 10-19 years and 20% for more than 20 years. The number of full-

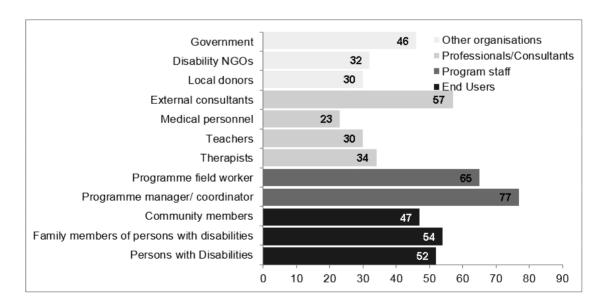
time staff working on the programmes was fairly equally distributed, with 56% of the programmes employing 10 staff members or less and 44% employing more than 10 staff members.

Evaluation of the Programmes

The majority (86%) of the respondents indicated that their programmes had previously been evaluated. Of the programmes which had undergone evaluation, the majority (60%) had undertaken mixed evaluations (internal and external evaluators leading the process together) while 18% had undertaken internal and 22% external evaluation only.

Figure 1 shows the different groups of people reported to have been involved in their last evaluation. The majority of evaluations involved CBR staff (programme managers and programme field workers) and 57% involved an external consultant. A little over half of them reported including end-users (persons with disabilities, families, community members), while more than one-third (38%) included other organisations (local donors, disability NGOs and government) and therapists (41%).

Figure 1: Survey results of question 9 - Groups of Stakeholders engaged in Evaluation (of the 84 programmes which underwent evaluation)



Current Evaluation Practice (How programme is being evaluated)

For programme evaluation, quantitative methods were reported to be used most frequently (61%), followed by feedback forms (39%) and internal tracking forms (35%). Two-thirds of the respondents reported the use of qualitative methods such as interviews (67%) and case studies (61%) in evaluations. Use of focus groups was mentioned in nearly half of the responses (48%).

The vast majority (95%) of programmes indicated that their programme activities were being monitored regularly. Nearly two-thirds of those (61%) used a combination of manual and computerised monitoring systems, while 37% reported a manual system only.

Purpose of Evaluation (Why programme is being evaluated)

The majority of the respondents (87%) reported that international donors were their main evaluation audience, followed by CBR managers (71%), government (56%), programme participants (56%), programme staff (49%), and local donors (39%).

The respondents reported that the most important purposes (multiple answers were possible) to address in an evaluation of their programme were:

• What difference did it make/ had the programme made? (73%).

This question focussed on outcomes, i.e., on changes that have occurred as a result of the programme.

- How much was achieved? (59%)
- How well did it work? (52%)

These questions focussed on processes, i.e., quantifiable targets and the actual development and implementation of the programme.

Barriers to and Challenges in Evaluation

Almost two- thirds of the respondents reported that they considered insufficient financial resources to be an important challenge in evaluation (59%), followed by lack of training/capacity (39%), limited staff time (35%) and lack of interest (11%).

Additional narrative responses about challenges in evaluation were provided by 18 respondents, through the open text section of the questionnaire. The following

- 4 main themes (complexity, communication, transportation and attitudinal) emerged from these data:
- 1. The complexity of CBR fell into several sub-categories, namely:

Conceptual challenges - Understanding the complexity of CBR as a strategy and the complexity of evaluation categories such as "changes in life" and "inequality" were mentioned by a majority of respondents.

Breadth of CBR - Survey respondents described the "many fields that CBR is working in at the same time" (CBR manager, South Asia) or pointed out that "there are so many organisations and individual stakeholders in one CBR programme" (CBR coordinator, Central Africa).

Environment - Other challenges that were raised related to the complex environment that CBR is working in, referring to uncertainty in planning, such as working plans that "change very often and do not leave time for flexible evaluation planning" (CBR manager, Americas).

- 2. Communication barriers: Respondents frequently described communication barriers such as "difficulties to stay in contact with each other, we do not have good cell connection" (CBR manager, South Africa) or "our field workers do not have internet access" (CBR manager, South Asia).
- 3. Transportation and accessibility related challenges: Reported accessibility challenges referred to programme stakeholders living in distant villages as well as inaccessible environments. One CBR manager explained that, "Many people live high up on steep hills. Some of our volunteers have physical disability and cannot reach them" (CBR manager, South Asia).
- 4. Attitudinal challenges: A few participants highlighted attitudinal challenges, including a rejectionist stance from CBR staff towards evaluation, such as "Programme staff are afraid of evaluation because they need their jobs" (CBR manager, Asia Pacific).

Bivariate Analysis

Responses to questions were compared by programme region (Africa, Americas, Pacific Asia, South Asia), programme duration (< 10 years vs >10years) and programme size (<10 staff vs. 10+ staff). There was little variation in the proportion of programmes undertaking monitoring, ever having carried out an evaluation

and the types of monitoring and evaluation by region, programme duration or size.

Fewer programmes in Africa reported including people with disabilities in their evaluations (48% vs. 70% in Pacific and South Asia, and 64% in Americas), but this difference was not significant. Programmes in Africa were also less likely (77%) to report using qualitative methods in evaluations as compared to the other regions (100% in Pacific and South Asia, 93% in Americas, p=0.01). A higher proportion of programmes in Africa (76%) and the Americas (79%) reported insufficient resources as a significant challenge to evaluation, as compared to Pacific Asia (55%) and South Asia (26%), (p=0.003).

There were some variations in evaluation methods and reported challenges to evaluation. Programmes that had been established for less than 10 years (82% vs. 98% for 10+years, p=0.03) and small programmes (84% vs. 97% for larger programmes, p=0.05) were less likely to report using any quantitative methods for evaluation. Smaller programmes (70%) were more likely to report insufficient resources as a significant challenge to evaluation, compared to larger programmes (44%, p=0.02).

Table 3: Results and Bivariate Analysis

	TOTAL	REGION					PROGRAMME DURATION			PROGRAMME SIZE		
	n(N)	Africa n (%)	Pacific Asia n (%)	South Asia n (%)	Americas n (%)	P- value* FET	<10 years n (%)	10+ years n (%)	P- value FET	<10 staff n (%)	10+ staff n (%)	P- value FET
					Monitori	ing						
Does programme conduct monitoring?												
NO	5(96)	0 (0%)	2 (9%)	3 (13%)	0 (0%)	0.083	1 (2%)	3 (6%)	0.618	3 (6%)	1 (2%)	0.631
YES	89(96)	33 (100%)	21 (91%)	21 (88%)	16 (100%)		45 (98%)	47 (94%)		51 (94%)	40 (98%)	
Type of monitor	ing											
Manual	33(89)	13 (43%)	9 (41%)	5 (24%)	6 (38%)	0.527	15 (34%)	17 (38%)	0.826	18 (38%)	14 (35%)	0.828
Computerised or ombination	56(89)	17 (57%)	13 (59%)	16 (76%)	10 (63%)		29 (66%)	28 (62%)		30 (62%)	26 (65%)	
Evaluation												
Was programme ever evaluated?												
NO	14(96)	4 (12%)	3 (13%)	5 (21%)	2 (13%)	0.862	7 (15%)	6 (12%)	0.768	10 (19%)	2 (5%)	0.062
YES	82(96)	29 (86%)	20 (87%)	19 (79%)	14 (88%)		39 (85%)	44 (88%)		44 (81%)	39 (95%)	0.063

Type of evaluat	ion											
Internal only	14(82)	4 (14%)	3 (15%)	2 (11%)	5 (36%)	0.300	7 (18%)	8 (18%)	1.000	10 (23%)	5 (13%)	0.269
External/ Mixed	68(82)	25 (86%)	17 (85%)	17 (89%)	9 (64%)		32 (82%)	36 (82%)		34 (77%)	34 (87%)	
Were people wi	th disabilit	ies involve	d in evalı	iation?								
NO	31(81)	14 (52%)	6 (30%)	6 (30%)	5 (36%)	0.363	18 (45%)	14 (32%)	0.366	20 (45%)	12 (32%)	0.258
YES	50(81)	13 (48%)	14 (70%)	14 (70%)	9 (64%)		22 (55%)	28 (67%)		24 (55%)	26 (68%)	
Were qualitativ	e methods	used?										
NO	8(83)	7(23%)	0 (0%)	0 (0%)	1 (7%)	0.013	4 (10%)	4 (9%)	1.000	5 (11%)	3 (8%)	0.719
YES	75(83)	23(77%)	20 (100%)	19 (100%)	13 (93%)		36 (90%)	40 (91%)		40 (89%)	36 (92%)	
Were quantitat	ive method	s used?										
NO	8(83)	4 (13%)	1 (5%)	0 (0%)	3 (21%)	0.140	7 (18%)	1 (2%)	0.025	7 (16%)	1 (3%)	0.063
YES	75(83)	26 (87%)	19 (95%)	19 (100%)	11 (79%)		33 (82%)	43 (98%)		38 (84%)	38 (97%)	
				Cha	allenges to E	valuatio	ı					
Insufficient fina	ıncial resou	irces										
Significant	48(82)	22(76%)	11 (55%)	5 (26%)	11 (79%)	0.003	26 (67%)	23 (52%)	0.263	31 (70%)	17 (44%)	0.016
Min/No	34(82)	7 (24%)	9 (45%)	14 (74%)	3 (21%)	0.003	13 (23%)	21 48%)		13 (30%)	22 (56%)	
Lack of training	g/capacity											
Significant	31(82)	15 (52%)	5 (25%)	4 (21%)	7 (50%)	0.075	17 (44%)	15 (34%)	0.498	14 (32%)	19 (49%)	0.177
Min/No	51(82)	14 (48%)	15 (75%)	15 (79%)	7 (50%)		22 (56%)	29 (66%)		30 (68%)	20 (51%)	
Limited staff ti	те											
Significant	29(82)	12 (31%)	8 (40%)	4 (21%)	5 (36%)	0.500	17 (44%)	13 (30%)	0.253	18 (41%)	12 (31%)	0.368
Min/No	53(82)	17 (69%)	12 (60%)	15 (79%)	9 (64%)	0.508	22 (56%)	31 (70%)		26 (59%)	27 (69%)	

^{*}P-value from Chi Square or Fisher's exact tests

DISCUSSION

To date, this is the most comprehensive survey that explores evaluation capacity, needs and current practice in CBR globally. It was reported that the majority of the programmes were monitored regularly and had been evaluated in the past. This suggests that monitoring and evaluation are familiar and widely practised by the CBR programmes included in the survey.

Most respondents reported international donors as the main evaluation audience and only around half of them reported programme participants. These findings suggest a dominance of donor request and top-down accountability mechanisms rather than locally-owned drivers of CBR evaluations. Furthermore, only about half of the respondents reported the inclusion of persons with disabilities, their families and community members in evaluation processes. This is disappointing, as all recent international frameworks on disability such as the UN Convention on the Rights of Persons with Disabilities (UN, 2006), the World Report on Disability (WHO/ World Bank, 2011) and the recommendations of the CBR guidelines promote the importance of community control, ownership, leadership, and implementation of CBR programmes as a prerequisite for sustainability, including monitoring and evaluation processes which should be fully inclusive of end users (WHO, 2010). As highlighted by Grandisson et al (2014), local ownership and participation alongside practical issues such as affordability and user-friendly tools are imperative if M&E practice is to reflect the recommendations of the CRPD and CBR guidelines, and this should be a key consideration in the development of a common evaluation tool. Further research is needed to identify the barriers to local ownership and full inclusion of end users in evaluation processes, in order to develop guidelines about how this inclusion is best achieved.

The survey indicates a fairly equal distribution between qualitative and quantitative methodology used in CBR evaluations, which differs from Grandisson's observation that "qualitative methods have dominated the scene so far" (Grandisson, 2014).

Insufficient financial resources were reported as an important challenge to conducting evaluation, particularly in the African region and among smaller programmes. Human resources issues such as training/capacity needs and limited staff time were also reported. This highlights the need for an affordable approach to CBR evaluation that reflects programme capacity and resources.

The complexity and unpredictability of CBR were highlighted as significant barriers to evaluation. This is also reflected in current mainstream international development evaluation literature (Bamberger et al, 2016) where issues of complexity are well recognised as priority challenges in evaluation (Stern et al, 2012; Ramalingam, 2013; Bamberger et al, 2016). It is increasingly recognised that complex development programmes (such as CBR) require fluid and iterative evaluation approaches and tools that can capture changes in complex and uncertain environments (Bamberger et al, 2016). Furthermore, CBR as a community development approach needs to be part of, and to learn from, ongoing discussions in international development around sustainable and cost-effective

models of evaluation that can be applied in complex and changing environments, as well as capacity building of a wide range of programme stakeholders to conduct evaluation. Since CBR is one strategy within the community development arena, a model for evaluation in CBR should not be developed in isolation but should be embedded in ongoing developments in mainstream evaluation.

Strengths and Limitations

To the best of the authors' knowledge, this is the first global survey on capacity, needs and current practice in evaluation in CBR. Data was collected on a broad range of topics around evaluation, including facts, behaviour and attitudes.

The response rate of this survey is comparable with other online surveys (Nulty, 2008). However, with just over 50% of non-responders, selection bias cannot be ruled out. It is possible, for example, that programmes which had previously undergone evaluations were more likely to respond to the questionnaire. Moreover, the sample was taken from the WHO global database, which is based on voluntary inscriptions, and the CBM lists of CBR programmes, so many small local CBR programmes may have been missed. Therefore, the generalisability of the study findings is not certain. In addition, the qualitative data was provided by a relatively small number of respondents (n=18) and consequently some care in interpretation is warranted. Nevertheless, the findings from these data on challenges to CBR evaluation are in line with the discourse on wider international development.

CONCLUSION

This study suggests that although evaluations have been widely implemented in CBR programmes, many evaluations are not locally owned and people with disabilities and their families are not included in the evaluation processes. There is a need to encourage increased local ownership and the inclusion of people with disabilities and their families in the evaluation processes in accordance with international legal frameworks and guidelines. Furthermore, it appears to be important that any evaluation framework for CBR needs to reflect the complexity of CBR as well as the financial and resource constraints within which many programmes are operating, particularly in the African region and among smaller programmes.

Many of the issues raised in the context of M&E in CBR reflect current discussions in other areas of mainstream development. Therefore, it is recommended

that models for evaluation in CBR should not be developed in isolation, but should learn from and be embedded in ongoing developments of evaluation in international development.

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