EVALUATIVE RESEARCH IN COMMUNITY MENTAL HEALTH

by

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ABSTRACT

This paper compares evaluative research to program evaluation by defining and describing each. A case example using the scientific design and methodology of evaluative research to evaluate a specific community mental health program is also presented. Project design is discussed in light of the awareness that the mental health needs of communities do not always bend to fit the requisite of precise scientific procedure. Some ideas on methodological considerations reflect that normal research tools can be useful to achieve a valid study. Implications for the application of evaluative research to community mental health needs are also identified.

SOME PARAMETERS AND DEFINITIONS

Although evaluative research and program evaluation are not synonymous terms, to have a good grasp of evaluative research methodology makes the task of evaluating programs more precise, concise, and scientific. In community mental health the emphasis is certainly not on scientific precision but rather on the task of getting workable services to as many people as need them with a minimal amount of red tape. To achieve this, it is helpful to know which community interventions work and which work most efficiently. This study of evaluative research was woven around an evaluative study of one center's effort to change and improve its service delivery mission.

To frame the concept of evaluation the American Public Health Association (1960) presents both a conceptual and operational definition. Evaluation is the process of determining the value or the amount of success in achieving a predetermined objective. It includes at least the following steps: a) formulation of the objective; b) identification of the proper criteria to be used in measuring success; c) determination and explanation of the degree of success; and d) recommendations for further program activity.

While scientific methodology, then, is clearly an aspect of evaluation, the formulation of hypotheses and theory for the sake of new knowledge irrespective of judgment of the value of the knowledge (basic research) is not the objective (HEW, 1955). To avoid abstraction, the researcher must decide "evaluation of what" before proceeding with his study. Hence, evaluation appears to be more precisely a purpose and objective of research than a methodology in itself.

In one suburban community mental health center studied (Walsh, et al, 1975), a large clinic with a multi-service program divided its services into geographically focused teams. The experimental center moved on site in its new locale while the control teams remained housed in one central office. It was anticipated that the presence of a mental health unit on site within the geographical area it served would greatly enhance the requests for service, the numbers of open cases and, in anticipation of moving on site, the hours of mental health consultation.

DESIGN CONSIDERATIONS

The study in question covered an 18 month period. The first six months were spent developing the concept of geographical teams; the next six were spent serving a specific area without being on site; and the final phase consisted of the first six months of residence in the target area by the experimental team. Requests for service from the experimental center tripled from the first period to the third resulting in a x^2 significance of p < .001. Since staff size and population density remained constant and no cataclysmic environmental events occurred, it is fair to conjecture that moving the center on site enhanced requests for service. Publicity about service availability increased over these time frames, but publicity alone has not been found to be a significant factor in producing service requests in mental health (Cummings and Cummings, 1957).

While evaluation itself implies a judgment of worth, evaluative research demands scientific research methods and techniques for making an evaluation. The hope in the latter is to prove rather than assert the worth of some social activity (Suchman, 1967). Scientific methodology attempts to avoid human bias yet it cannot be discounted that there is a relationship of evaluation to values, of values to objectives and of objectives to assumptions. No one wanted this project to fail, so the human factors of enthusiasm and motivation are certainly intervening variables to be weighed in assessing the enormous increase in service requests.

Other findings from the study were that the total center caseload increased 40% in the third and final time period as compared with the first two. The experimental center also consistently invested more hours in community consultation than the control teams (from 300% more in the first time period to 100% more in the final period). In Herzog's thought these data can only qualify as pre-evaluative research findings. Suchman, however, focuses on the need for
matched experimental and control groups, isolation and control of the stimulus (the independent variable of being on site) and definition and measurement of the criteria of effect (dependent variable — requests for service; open cases; hours of consultation) as the prime criteria of the experimental method as applied to evaluative research. All these criteria were met in this short, focused, and inexpensive study!

METHODOLOGY

Since evaluative research is not a methodology in its own right, it borrows from a variety of research approaches to achieve its data collection and analysis goals. Beyond the use of matched experimental and control groups, Moursand (1973) encourages the use of multi-based data, i.e., data from more than one matched experimental and control groups, isolation of particular study needs.

The study referred to in this paper, a combination of these designs was used. The same groups were studied over time as well as in comparison to each other in each time period. Though nonprobability samples were used for this study (only clients from a specific geographical area were followed by each team), probability or random samples would have been unlikely to produce different results since the county population as a whole is randomly distributed among the geographical units. Probability samples generally present the purest methodological form. They tend to randomly distribute extraneous variables among the population studied.

IMPLICATIONS FOR PRACTICE

To discuss the implications of evaluative research tools for studying community mental health activities, the spectrum of values which underpin agency operations must be understood. Without attempting to be all inclusive, Glidewell (1969) suggests the following are value stances in much community mental health practice: 1) professional practice ought to be an artful extrapolation from growing scientific knowledge, but the community demands some possible valid protective or preventive services without regard to scientific base. 2) Professional practice ought to be under constant objective evaluation, but one cannot flately discredit professionally well established and apparently valid procedures without jeopardizing the professional safeguards needed to protect the client and the community. 3) The good of the client ought not to be superceded by the good of the community, but, because of needs for training and learning with limited resources, services to the individual client must sometimes be postponed in the interest of the community.

There is an interesting frame for these value ideas in the metaphor of tough-minded vs. tender minded evaluative research espoused by Kogan and Shyne (1965). Tough-minded research is identified as using hard, practical, tangible data to prove the validity of an intervention. This is compared with approaches in which such amorphous data is insight or resolution of intra-psychic conflicts are used to evaluate results. The study by Walsh et al used the hard data of number of requests for service, open cases and hours of consultation to demonstrate that more service is likely to be offered to a community if the service agency is physically present in that geographical area. It assumed that mental health services are of some value and did not attempt to affirm that idea as part of the hypothesis. Thus, the idea of the values to which Glidewell refers is demonstrated by designing projects to meet community needs which at the same time can be constructed with scientific validity and produce pertinent, simple and reliable data. As seen in that study, this can be done without violating client confidentiality or intentionally depriving a control population of needed services.

For the edification and reassurance of groping community mental health practitioners who wish to do some evaluative research on programs, Herzog (1969) offers a tidy list of "do's and don'ts" to help escape from the thicket of possibilities into the meadow of practicalities. The don'ts include:

a) Don't undertake evaluative research if the purpose can be served by some other kind. It is too expensive and time consuming.

b) Don't undertake evaluative research unless adequate resources (money, staff, time opportunity for continuity) are available. (I must add parenthetically here that I don't entirely agree with these prohibitions but recognize that Herzog is referring to "ultimate evaluation" which is seldom undertaken except for projects like attempting to prove whether heaven really exists! Projects which take years to conduct certainly take money as well."

c) Don't count on using existing agency records as the sole source of data for an evaluative study; use multi-based data.

d) Don't indulge in lopsided research, i.e., don't be precise on one feature if it is out of proportion to precision of the rest.

e) Don't be afraid of unpretentious data. It is better to be simple, clear and forthright than to dress up crude or fuzzy data.

Lest one be led to believe that scientific evaluation is primarily the art of avoiding chuck-holes, Herzog also advises some proactive steps;

a) Do bring the researcher in early enough and fully enough on the project.