



# Building Equity-Centered Evaluations



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# Session Presenters: The AMCHP Equity, Epidemiology, & Evaluation Team!



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# AGENDA

- 1 Equitable Evaluation Framework Overview
- 2 Telehealth Examples
- 3 Questions & Discussion

# OBJECTIVES

## Objective 1

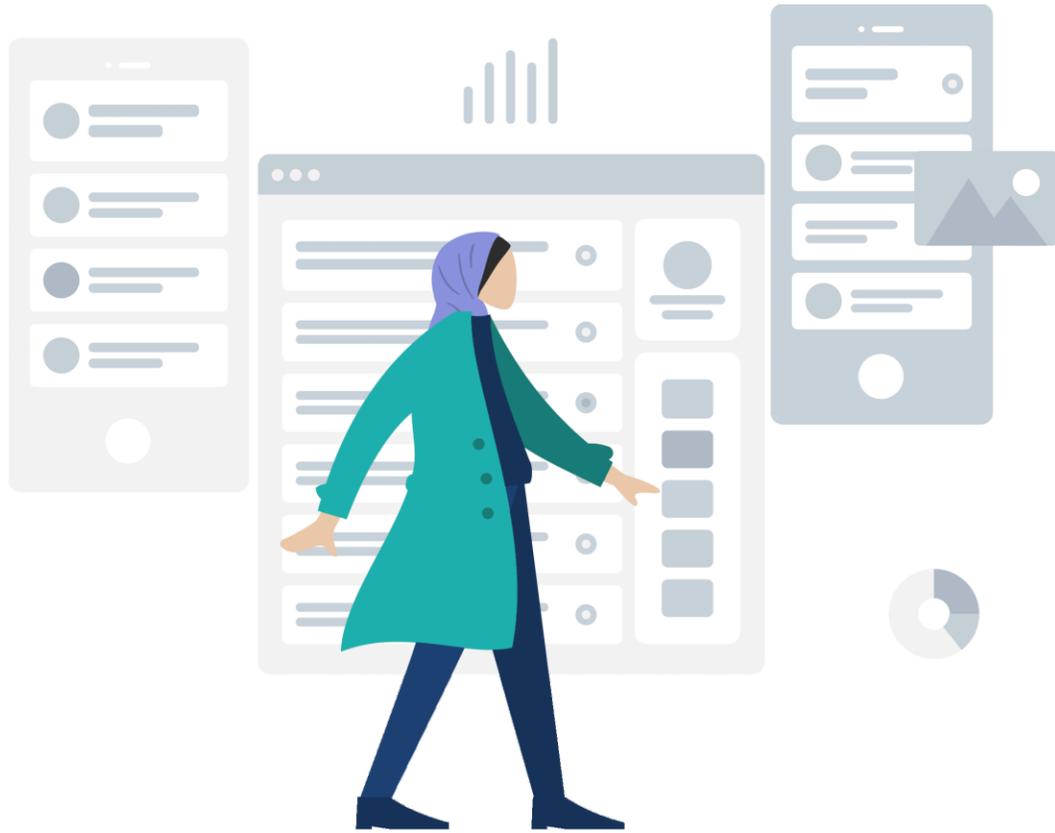
Develop an awareness of the Equitable Evaluation Framework.

## Objective 2

Build knowledge around incorporating equitable practices into evaluation activities.

## Objective 3

Gain understanding of how to apply equitable evaluation activities to Telehealth work.



EXPLORE

# Equitable Evaluation Framework

# Equitable Evaluation Framework

Guided by three key principles, The Equitable Evaluation Framework provides a foundation for shifting the evaluation process from one that has been created and defined by U.S. colonialism and White Supremacy to one that is created and defined by participant ownership and equity.

## **EVALUATION WORK IS IN SERVICE OF AND CONTRIBUTES TO EQUITY**

Production, consumption, and management of evaluation and evaluative work should hold at its core a responsibility to advance progress towards equity.

## **EVALUATIVE WORK SHOULD BE DESIGNED AND IMPLEMENTED IN A WAY THAT IS COMMENSURATE WITH THE VALUES UNDERLYING EQUITY WORK**

It should be multi-culturally valid and oriented toward participant ownership.

## **EVALUATIVE WORK CAN AND SHOULD ANSWER CRITICAL QUESTIONS ABOUT THE:**

Effect of a strategy on different populations and on the underlying systemic drivers of inequity, and the ways in which history and cultural context are tangled up in the structural conditions and the change initiative itself.

## Evaluation Orthodoxies

### Common Themes:

- Centering foundations and evaluators
- Promoting traditional ideas of expertise
- Extracting and exploiting resources and relationships

The foundation defines what success looks like

Grantees and strategies are the evaluand, but not the foundation

The foundation is the primary user of evaluation

Evaluations should provide generalizable lessons

Evaluators should be selected based on credentials that reflect traditional notions of expertise

Evaluators are the experts and final arbiters

# Evaluation Orthodoxies

Credible evidence  
comes from  
quantitative data and  
experimental research

Evaluators are  
objective

Evaluation funding  
primarily goes to data  
collection, analysis,  
and reporting

Time frames and short-  
term outcomes serve  
as indicators of good  
stewardship

Evaluation is in service  
of the  
foundation's brand

Trust and relationships  
come from doing the  
work, but are not the  
starting point

## PRINCIPLE

**EVALUATION WORK IS  
IN SERVICE OF AND  
CONTRIBUTES TO  
EQUITY**

Production, consumption, and management of evaluation and evaluative work should hold at its core a responsibility to advance progress towards equity.



## RELATED ORTHODOXIES

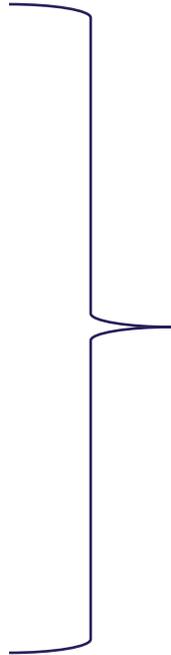
- **THE FOUNDATION DEFINES WHAT SUCCESS LOOKS LIKE**
- **EVALUATORS SHOULD BE SELECTED BASED ON CREDENTIALS THAT REFLECT TRADITIONAL NOTIONS OF EXPERTISE**
- **TRUST AND RELATIONSHIPS COME FROM DOING THE WORK, BUT ARE NOT THE STARTING POINT**
- **EVALUATION IS IN SERVICE OF THE FOUNDATION'S BRAND**

## PRINCIPLE

**EVALUATIVE WORK SHOULD BE DESIGNED AND IMPLEMENTED IN A WAY THAT IS COMMENSURATE WITH THE VALUES UNDERLYING EQUITY WORK**

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## RELATED ORTHODOXIES

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- **THE FOUNDATION DEFINES WHAT SUCCESS LOOKS LIKE**
  - **EVALUATIONS SHOULD PROVIDE GENERALIZABLE LESSONS**
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## PRINCIPLE

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## RELATED ORTHODOXIES

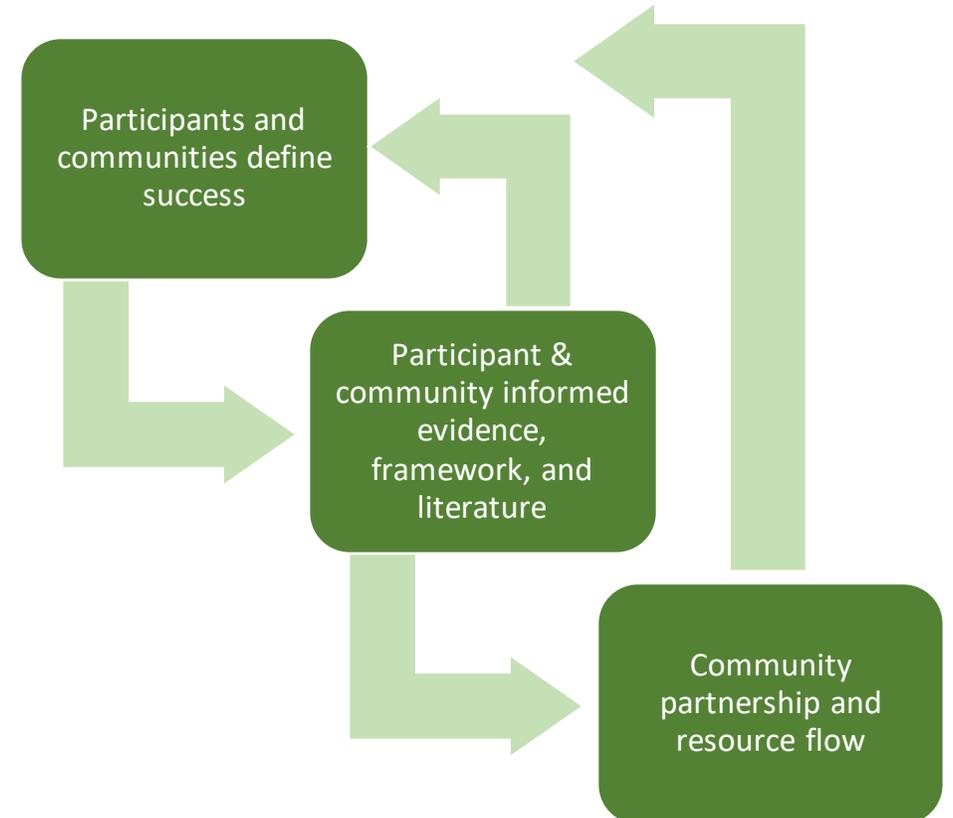
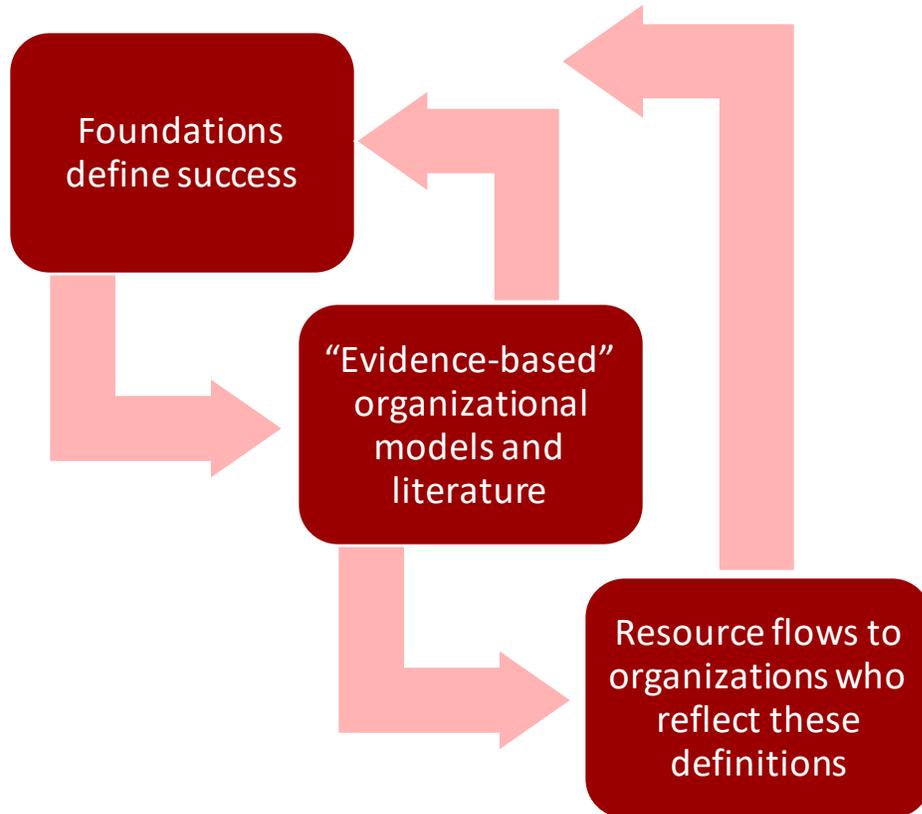
- > **CREDIBLE EVIDENCE COMES FROM QUANTITATIVE DATA AND EXPERIMENTAL RESEARCH**
- > **EVALUATIONS SHOULD PROVIDE GENERALIZABLE LESSONS**
- > **TRUST AND RELATIONSHIPS COME FROM DOING THE WORK, BUT ARE NOT THE STARTING POINT**



**EXPLORE**  
**Telehealth Examples**



## THE FOUNDATION DEFINES WHAT SUCCESS LOOKS LIKE



# Equitable Evaluation in Telehealth

Population of interest: Children and youth with special healthcare needs in a well-connected urban area.

Outcome	Performance Measure	Target	Evaluation Type
Participants have access to hardware and software needed for telehealth services	% of participants who received a laptop	100%	Process



# Equitable Evaluation in Telehealth

After hosting a town hall, you realize that parents and older youth with special healthcare needs have valuable perspectives on the program. You decide to create a steering committee, including parents and older youth representatives.

Outcome	Performance Measure	Target	Evaluation Type
Participants have access to hardware and software needed for telehealth services	% of participants who received a laptop	100%	Process
	% of participants that need accessibility tools who received the tools	100%	Process





## EVALUATIONS SHOULD PROVIDE GENERALIZABLE LESSONS

### Evaluations are often designed to:

- Provide synthesized generalized findings
- Hide unique context, differential outcomes, and historical and structural drivers.



### Evaluations are designed to:

- Reflect community/participant input and guidance
- Provide population and context-specific findings
- Illuminate differential outcomes
- Demonstrate impacts of historical and structural drivers

# Equitable Evaluation in Telehealth

Midway through the telehealth program, you find that some of your process measures are not meeting their targets. You decide to disaggregate measures by race to get a better picture of the results.

Outcome	Performance Measure	Target	Evaluation Type
Participants have access to hardware and software needed for telehealth services	% of participants who received a laptop	<del>100%</del> 80%	Process
	% of participants who need accessibility tools who received the tools	<del>100%</del> 80%	Process



# Equitable Evaluation in Telehealth

Performance Measure	Target
% of participants who received a laptop	<del>100%</del> 80%
% of participants who need accessibility tools who received the tools	<del>100%</del> 80%

What is the cause behind these disparities?

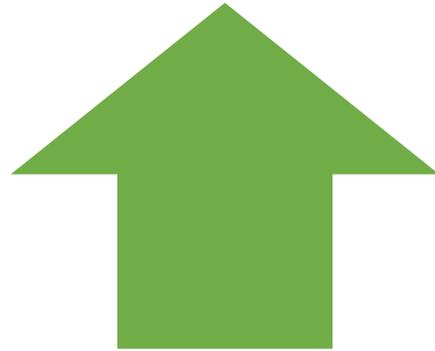
- Differential rates of home ownership
- Difference in work flexibility
- Transportation usage

Race & Ethnicity	# of Participants Requesting Tools	# Received Tools	% Received Tools
Black	30	20	67%
AAPI	5	3	60%
AIAN	5	2	40%
White	40	40	100%
Hispanic /Latine	20	15	75%
Total	100	80	80%

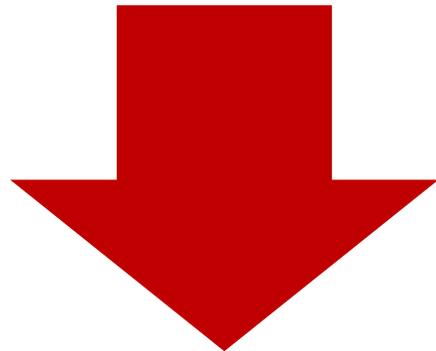




## TRUST AND RELATIONSHIPS COME FROM DOING THE WORK, BUT ARE NOT THE STARTING POINT



Build trust and relationships before project implementation



Build trust and relationships throughout the program

# Equitable Evaluation in Telehealth

You're interested in applying for another grant to conduct a 3-year telehealth program for pregnant people with gestational diabetes in a primarily rural county.

You realize that there needs to be some time spent building trust and relationship with the community. Time is taken to partner with a person who already has trust and rapport with folks in this county.

Time is spent cultivating community buy-in, conducting needs assessments, and forming a community advisory board that will inform and guide the evaluation plan for this grant.



## EVALUATORS SHOULD BE SELECTED BASED ON CREDENTIALS THAT REFLECT TRADITIONAL NOTIONS OF EXPERTISE

### Evaluator selection often based on:

- Academic credentials
- Subject matter expertise
- Methodological approach & skill
- History with evaluations of similar types



### Evaluator selection should be based on:

- Lived experience
- Demonstrated cultural competence and humility
- History of working with diverse populations
- Commitment to diversity, equity, and inclusion

# Equitable Evaluation in Telehealth

When choosing an evaluator, think about your population of interest:

- Children with special health care needs in a well-connected urban area
- Parents and older youth

Consider...

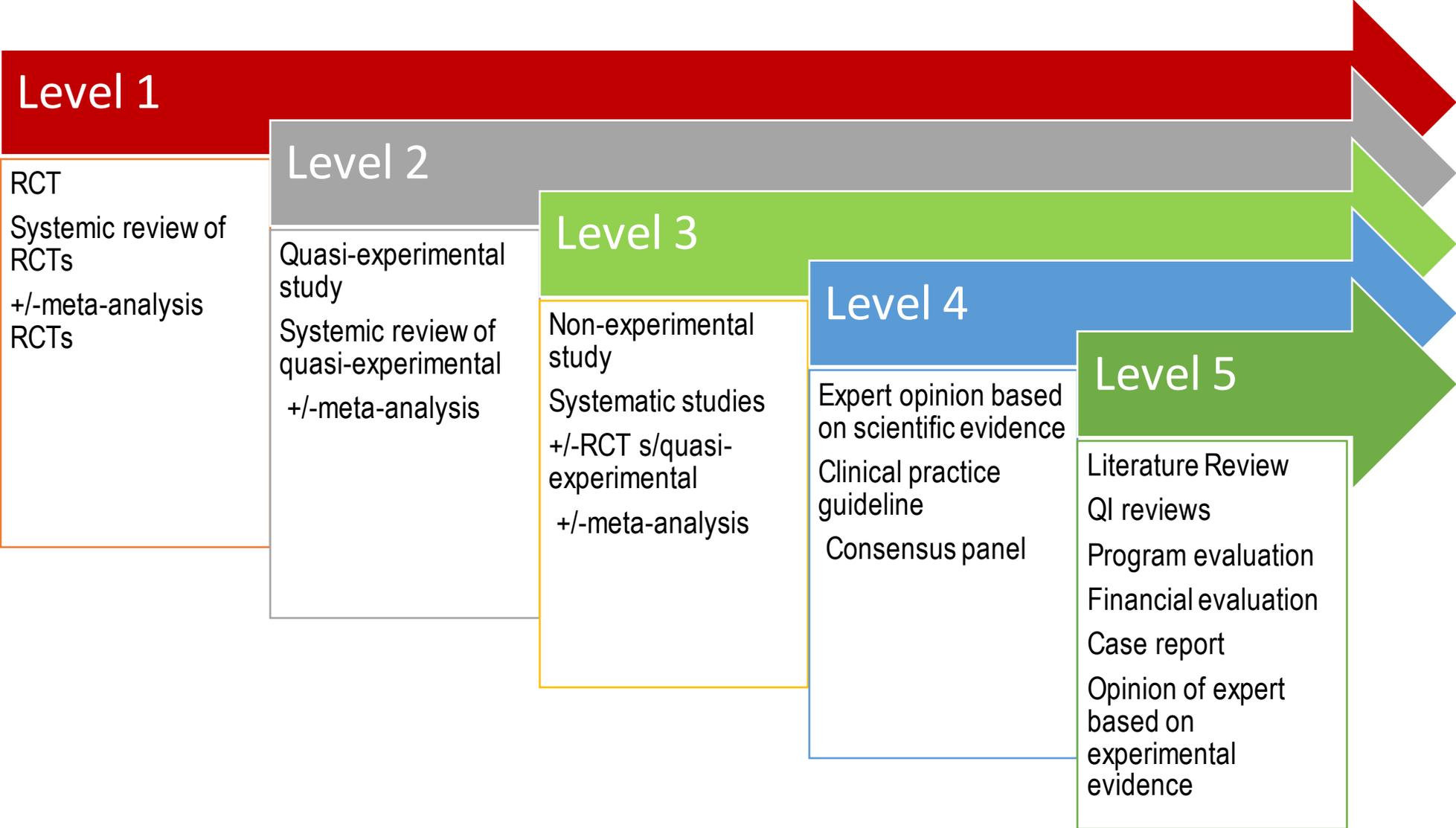
Not using your “usual” evaluator perhaps contract or working with a community-rooted organization instead

Including community members and individuals with lived experience on the evaluation team

Using culturally relevant evaluation practices



# Evidence Hierarchy





## CREDIBLE EVIDENCE COMES FROM QUANTITATIVE DATA AND EXPERIMENTAL RESEARCH

### Use of traditional levels of evidence as validation of credibility:

- Based on experimental design concepts (e.g., randomized clinical trials as the gold standard)
- Dependence on published literature as evidence source
- Dependence of quantitative data/methods to assess evidence



### Consider expanding/ retooling definitions of credible evidence:

- Public health is mix of “science, practice, & intuitive application” greatly influenced by social & cultural context
- Credible evidence determination should incorporate these contexts
  - Less reliance on traditional evidence models & biased publications/literature as evidence sources
  - Use of qualitative & smaller data/applicable data methods

# What Current “Credible Evidence” Misses

“Averages mask  
inequities”

- Most quantitative methods produce results based on population averages and high counts/occurrences improve reliability

Smaller minoritized  
subpopulations  
most likely carry  
the excess burden  
of adverse  
outcomes

- Quantitative analysis of data may not adequately pick up factors not dispersed throughout majority populations
- Inequities in data life cycles further murk waters

Issues and  
solutions are often  
nuanced and  
bathed in  
situational  
community context

- Findings of evaluation may not be generalizable

# How to Determine Evidence with an Equity Lens

## Small Area Analysis “Small Can Be Good”

- Can better show efforts that are effective in a particular place or with a particular population
- Can help to identify causes or contributing factors to a condition

## Use Methods that Combine Quantitative with Qualitative

- Quantitative data to “Map” population disparities
- Qualitative data to discover nuances of causal factors and assessment of interventions

# Summary

- Evaluation has historically been an extractive process
- External expertise has been valued over community expertise
- "Orthodoxies" are tightly held beliefs about evaluative practices that we must push back on/critically consider
- Affected communities should be included in defining the focus or approach to the evaluation, and/or in the interpretation of data and sense-making

To build equity-centered evaluations, it is important to:

- Develop diverse teams
- Use culturally relevant evaluation practices
- Evaluate the systemic drivers using systemic indicators
- Include affected communities in development and sense-making



# Key Takeaway: Ultimate Aims

Evaluation can contribute to addressing inequities by making them evident and by questioning interventions and initiatives from the perspective of who benefits and who does not.

*“Why did something happen for this group but not another?”*

*“In what contexts did it happen?”*

Those who want to evaluate for equity and want to understand how to promote a more equitable society:

- Need to be concerned about the fine-grained differences that interventions have for different groups in society.
- Folks need equal need capacities to look at interventions from the perspective of the system in which they are acting.

(Carden, 2017)





**Thank you.**

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