Community-Based Rehabilitation Programme Evaluations: Lessons Learned in the Field

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ABSTRACT

Purpose: There is limited guidance available on the best ways to evaluate community-based rehabilitation (CBR) programmes. In this paper, we share lessons learned on suitable evaluation strategies for CBR through a South African programme evaluation.

Method: An empowerment evaluation of an early childhood development programme was conducted in April 2012. At the end of the field visit, parents, staff members and managers provided feedback anonymously about what they liked and disliked about the evaluation, and offered their suggestions. The principal investigator documented the evaluation process in a journal, recording the barriers and facilitators encountered, the participation of the 3 groups and the effectiveness of the different strategies used. The data analysis followed the principles of grounded theory.

Results: The main lessons learned about CBR programme evaluation are associated with strategies to: 1) foster active participation, 2) collect accurate and credible information, 3) build local capacity, and 4) foster sustainable partnerships. Time spent to promote a positive learning spirit and the use of participatory tools with all groups appeared critical to active engagement in evaluation activities. Sharing tools and experiences in context built more local capacity than was achieved through a formal workshop. The findings also highlight that a flexible model, multiple data collection methods, and involvement of all relevant stakeholders maximise the information gathered. Sensitivity to the impact of culture and to the reactions generated by the evaluation, along with ongoing clarifications with local partners, emerged as core components of sustainable partnerships.

Conclusion: CBR evaluators must use a variety of strategies to facilitate active engagement and build local capacity through the evaluation process. Many of
the strategies identified relate to the way in which evaluators interact with local stakeholders to gain their trust, understand their perspectives, facilitate their contribution, and transfer knowledge. Further research is needed on how to conduct empowering CBR programme evaluations.

**Key words:** empowerment evaluation, community-based rehabilitation, participation, partnerships, capacity building.

**INTRODUCTION**

Community-based rehabilitation (CBR) is a strategy aimed at fostering community development that is inclusive of people with disabilities and is implemented by and for them (WHO, ILO, UNESCO, & IDDC, 2010). It is implemented in more than 90 countries. Yet, the evidence regarding whether and how it works, is insufficient and fragmented as few studies have looked at both implementation and outcomes, different outcome measures are used, and controlled trials are extremely rare (Finkenflugel et al, 2005). A systematic review indicates that CBR evaluations should: use more than one data collection method, combine qualitative and quantitative methodologies, be conducted in close collaboration with the local community in order to be empowering, and be followed by sharing findings and taking action (Grandisson et al, 2014). Others highlight that quantitative indicators to measure progress are vital (Wirz & Thomas, 2002). Thomas (2011) suggests that these should be derived from the CBR Matrix, which is at the heart of the most recent unifying document about this approach: the CBR Guidelines (WHO, ILO, UNESCO, & IDDC, 2010). Similarly, Grandisson and colleagues (2014) stress the importance of having a shared framework and suggest one, which blends the CBR Matrix (ILO, UNESCO, & WHO, 2004) and the Evaluation Hierarchy (Rossi et al, 2004).

Empowerment evaluations provide further direction on the best ways to evaluate programmes while empowering local communities (Fetterman & Wandersman, 2005), which is genuinely in line with the empowerment philosophy in CBR. This approach strives to achieve greater social justice and improve the lives of disadvantaged communities by “(1) providing programme stakeholders with tools for assessing the planning, implementation, and self-evaluation of their programme, and (2) mainstreaming evaluation as part of the planning and management of the programme/organisation” (Fetterman & Wandersman, 2005: p.28). It emphasises the need to enable stakeholder participation, including the most disadvantaged, through a collaborative, transparent and democratic
process. The evaluator acts as an analytical ally who builds trust by engaging in egalitarian relationships and creating a non-threatening learning climate. Empowerment evaluators build evaluation capacity and foster evaluative thinking by encouraging the use of the evaluation process and findings.

Objective
In this paper, we share lessons learned in one field study about evaluation strategies that we believe are relevant and applicable to CBR. First-person possessives and pronouns such as ‘our’ and ‘we’ are used in this manuscript to reflect our perspectives. This is congruent with the narrative style adopted in participatory action research (McNiff & Whitehead, 2009).

With a view to contributing to the discussion on best practices in CBR programme evaluations, our aim is not to present the outcomes of the evaluated programme or to draw comparisons with other evaluations, but to reflect on our process and share what we have learned.

The study was conducted through a partnership between the University of Ottawa and Goedgedacht, a non-governmental organisation (NGO) which offers inclusive community development services targeted at disadvantaged rural children and youth in the Western Cape, South Africa. Children of farm workers and their families are the main beneficiaries. They represent a marginalised population in which foetal alcohol spectrum disorder (FASD) is extremely common. Viljoen and colleagues (2005) estimated that 6.5% -7.4% of children in a Western Cape school had foetal alcohol syndrome (FAS), the most severe form of FASD. Among them, children from rural areas were seven times more likely to have FAS, with children of farm workers being particularly at risk.

Although FASD is not the most visible disability and is rarely targeted in CBR programmes, its most severe forms come with stunting, dysmorphology, developmental delays, learning disabilities and behavioural challenges, which in turn increase the risk of mental health problems, poor school performance and trouble with the law (Streisguth & Kanter, 1997). To alleviate social stigma, Goedgedacht’s management chooses to avoid labels associated with disability and thus talks about inclusive community development rather than CBR. Their goal is to maximise the opportunities of rural children and youth for education, health and social life, working from a holistic approach to break the cycle of poverty and
marginalisation. Local graduates are encouraged to become community workers or volunteers for Goedgedacht. Although this may not be regarded as a pure CBR programme, it is guided by the CBR Matrix and endorses the CBR principles of participation, empowerment and inclusion of the most marginalised.

In congruence with participatory action research (PAR), empowerment evaluations and CBR, the NGO wished not only to evaluate its programmes but also to develop capacity to conduct its own evaluations independently (Hagey, 1997; Fetterman & Wandersman, 2005). To make this possible, evaluators from the University of Ottawa have agreed to support the organisation through cycles of evaluation and action over a period of approximately 10 years.

**METHOD**

Our evaluations of Goedgedacht’s programmes were guided by the principles of empowerment evaluations and the characteristics of good CBR evaluations identified in a systematic review on this topic (Grandisson et al, 2014). The first field visit in 2011 engaged Canadian and South African partners in joint decisions on how to focus the evaluation. The second visit in April 2012 focussed on the evaluation of the early childhood development (ECD) programme offered to children up to 6 years of age, and forms the core of this paper. It is situated within the framework proposed by Grandisson and colleagues (2014) (Table 1). Ethical approval was obtained for this study. In this section, we describe the empowerment evaluation conducted and the methods used to learn about suitable evaluation strategies for CBR.

**Empowerment Evaluation Conducted**

**Participants**

We invited 3 groups to participate in the evaluation: 1) all the NGO’s managers, 2) all the staff members involved in the ECD programme, and 3) parents of children attending the ECD programme. A convenient sampling strategy was used to identify the parents and they were recruited through joint home visits by the Canadian evaluators and a community member. After the purpose of the process was explained, free and informed consent was obtained from all participants verbally.
Table 1: CBR Programme Evaluation Framework including the South African evaluation (Adapted from Grandisson, Hébert & Thibeault, 2014)

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<th>Relevance</th>
<th>Process</th>
<th>Outcomes</th>
<th>Costs</th>
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<td></td>
<td>Fit between programme and community</td>
<td>How the programme operates</td>
<td>Desirable and unintended</td>
<td>Benefit and effectiveness</td>
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<td>Needs: Developmental delays are very present because of poor nutrition, poor stimulation and foetal alcohol spectrum disorders. No low-cost and accessible option was available in the area.</td>
<td>Major facilitators: Dedicated staff; material resources are adequate (games, building).</td>
<td>Readiness for school: Parents, staff &amp; managers believe children are a little more ready for school after attending the early childhood development centre. School readiness assessment shows small but significant positive differences.</td>
<td>Not done at this point.</td>
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<tr>
<td>Activities:</td>
<td>The programme includes a low-cost early childhood centre for vulnerable children where they are fed and stimulated.</td>
<td>Major obstacles: Sufficient training is not available for staff on children’s development and FASD. Transportation of the children to the centre drains a large proportion of the financial resources.</td>
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Data Collection Methods

To tap essential local knowledge, the Canadian partners asked the NGO managers for advice on suitable data collection methods that would maximise participation. Three data collection methods were used: 1) discussion groups with managers, staff members and parents, 2) key informant interviews with parents, with one staff member involved indirectly in the ECD programme and another in a position of authority over ECD staff, and 3) observations of programme activities at two different times using an observation grid. Parents were first interviewed individually in their homes, and then invited to a discussion group with other parents. The first meeting with all participants focussed on identifying the most desirable outcomes of the ECD programme, understanding its daily routine, as well as barriers and facilitators encountered. The second meeting was used to rate the programme performance in terms of the desirable outcomes common across all groups. Managers and evaluators also used the framework presented above to discuss the programme’s logic model, and brainstormed to identify individual
assessments that could be used to measure change following participation in the ECD programme. To contribute to this discussion, evaluators used their clinical knowledge as occupational therapists, and explored assessments used with children with FASD and in early childhood CBR evaluations (for example, O’Toole, 1988; Adnams et al, 2007).

The discussion groups took place in a range of contexts. The sessions with managers and staff members were conducted in English during working hours, while the parents’ meeting was held in the evening and conducted in Afrikaans with a translator present. Most of the activities with managers were conducted using a wall behind a table. With staff, the activities in the first session were done on a door. In the subsequent session with this group and with parents, large pieces of paper were placed on the floor, in the middle of a circle composed of participants and evaluators; everyone stood up occasionally to contribute.

In all the discussion groups with staff and parents, and in most of those with managers, we used participatory tools inspired by the Social Analysis Systems 2 (Chevalier & Buckles, 2008) to promote active engagement in evaluation activities. Staff members were invited to write the barriers and facilitators to their work on a dead tree (barriers) and a living tree (facilitators). Each staff member and parent placed a dot on a large visual scale to represent the extent to which the ECD programme helps children reach the desirable outcomes chosen, and shared a story to support their perception. With managers, flip charts and post-it notes were used to list ideas, organise thoughts, and facilitate discussions on the programme’s logic model, the most important outcomes, and its main barriers and facilitators. Since members of this group all had tertiary education, on one occasion the evaluators asked each one to rate the ECD programme performance on a 4-point Likert scale.

**Strategies to build Trust**

Different strategies were used to build trust and facilitate democratic participation. One of these required that managers, staff members and parents be met in separate sessions and told that the information would be associated with a group rather than with an individual. The goal was to improve the programme, not to make judgments about individual performances. When staff members were reluctant to answer, they were invited to write on the sticky side of post-it notes so that no one could see who had written what. To help alleviate potential power differentials between the evaluators and participants, in some of the sessions the
evaluators sat on the floor next to the scale, while participants remained seated on chairs. Furthermore, they shared positive observations and understanding of challenges faced daily by staff.

**Strategies to build Local Evaluation Capacity**

A variety of strategies were used to build local evaluation capacity and promote a reflective culture. The South African and Canadian partners collaborated closely in preparing for the data collection and to ensure cultural relevance. Together we identified local personnel who would be trained in programme evaluation, including through a half-day workshop. The session included information about programme evaluation, case study examples, metaphors and interactive discussions. Local personnel experienced and learnt the participatory techniques used at the discussion groups. On one occasion, a local manager moderated an activity. When questioned about the techniques used, the evaluators introduced the team to an accessible guide to collaborative inquiry (Chevalier & Buckles, 2008). Similarly, while discussing the programme’s logic model, the evaluators presented the CBR Guidelines (WHO, ILO, UNESCO, & IDDC, 2010).

**Methods used to learn about Evaluation Strategies**

The principal investigator (MG) kept a journal of the evaluation process and recorded the barriers and facilitators encountered, the participation of the 3 groups, as well as her impressions about the effectiveness of the different strategies. At the end of the field visit, parents, staff members and managers gave written feedback anonymously on what they liked and disliked, along with their suggestions, and put their comments in small boxes. One staff member helped parents to write their comments. The managers also rated their general satisfaction on a 4-point Likert scale. Grounded theory was used to analyse the data, including open, axial and selective coding to develop propositions (Glaser & Strauss, 1967; Creswell, 2013). The Canadian partners led the analysis while one of Goedgedacht’s managers confirmed that the themes generated represented her perceptions.

**RESULTS**

The 3 groups were well-satisfied with the evaluation process. All the 7 managers were very satisfied, and one said that he or she “absolutely loved the process”; staff members commented “You are welcome to come back”, and parents said that they would welcome similar meetings. The main themes that emerged are
represented in Figure 1 and further described and supported in the text below with insights from the investigator’s journal and the feedback received. They consist of lessons learned about strategies to facilitate participation in evaluation activities, to collect accurate and credible information, to build local capacity, and to foster sustainable partnerships. The elements highlighted in bold in the Figure represent strategies that were particularly critical in our experience.

Figure 1: Lessons Learned about Evaluation Strategies

<table>
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<tr>
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<td>• Create a learning spirit</td>
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<td>• Ensure that the physical environment enables active engagement</td>
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<tr>
<td>• Use a flexible model</td>
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<td>• Share tools and experiences in context</td>
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<td>• Offer the just-right amount of input</td>
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<td>• Gradually shift evaluation roles</td>
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<td>• Be sensitive</td>
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<td>• Clarify expectations</td>
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<td>• Respect local pace and priorities</td>
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Lessons Learned about Strategies to Facilitate Participation in Evaluation Activities

Use participatory tools with all groups

Indications from the feedback received and the evaluator’s journal were that participatory tools effectively fostered the active engagement of parents, staff and managers. Staff members said “We liked everything that you did with us”. Parents readily participated in the proposed activity and shared their personal stories. They suggested that meetings with programme representatives should always follow such a format. Managers were also active and engaged in reflecting on the programme when participatory exercises were used. In contrast, when a traditional format was chosen, one participant was unable to answer the questions with a Likert scale and the whole group appeared tense.
Create a learning spirit
There were indications that it is necessary to create a learning spirit where everyone reflects on the programme to shape its future, rather than making judgements on individual performances. Managers appreciated the “learning spirit that you brought in the process”. Strategies to ensure anonymity appeared to be effective with staff members. As soon as they realised that by writing on the sticky side of post-it notes they could never be identified, they enthusiastically wrote down ideas about the barriers and facilitators to their work, and asked for more post-it notes. They commented: “They did not judge us” and “We could talk freely”.

Ensure that the physical environment enables active engagement
Participation varied significantly according to the physical environment. There was more engagement by staff and parents when the activities took place on the floor; they all stood up excitedly to add their dots or post-it notes, and shared stories generously. The setting used with managers (i.e. activities on the wall behind the table) proved less than optimal, as it curtailed participation; the tendency was to ask the evaluator to put up their post-it notes.

Use translators and visual aids
Among the strategies to facilitate participation, another theme relates to the importance of using translators and visual aids to reduce language barriers. Reflections in the investigator’s journal highlighted this. The presence of a translator during the parents’ meeting allowed them to share their ideas comfortably, and many even forgot to wait for English translations. In addition, the use of participatory visual activities reduced the linguistic demands for all, which we feel enhanced participation.

Lessons Learned about Strategies to Collect Accurate and Credible Information
Give a voice to all relevant stakeholders
This turned out to be extremely important as it helped gather complementary material. Parents, staff and managers alike could express their opinions within a safe space conducive to sharing in greater detail. Naturally, this multi-stakeholder consultation yielded some divergent data and the diversity of views collected contributed important nuances to the final interpretation of the findings. For
example, the perceptions on service accessibility conflicted at times: the managers considered their programme inclusive whereas one parent indicated that her child with Down syndrome remained at home. Ultimately, this collaborative process helped produce evaluation findings considered credible and valuable by all. Parents’ self-esteem and sense of belonging was bolstered by being consulted; they stated repeatedly how privileged they felt to be participating in the discussions. The local translator felt that our initial visit to their houses had contributed to the way they shared very openly in the discussion group.

**Use a flexible model**

Using a model provided our entire team with a shared language and understanding of the organisation’s goals and target populations. For example, some members were reluctant to use the phrase ‘children with disabilities’ and preferred using ‘disadvantaged children’. The collective designing of the ECD programme logic model helped managers to reflect on their priorities, objectives and means, and generated much information. One manager stated that this was a good “opportunity for us as a team to think together, clarify concepts, identify focus areas indicators”, while another said it helped in “making implicit explicit”.

Flexibility is also essential. In our case, all 3 groups identified children’s confidence as a priority indicator of change despite its absence from the desirable outcomes of ECD in the CBR Guidelines. Furthermore, although the South African partners agreed to start the evaluation with analyses of relevance, move on to process and outcomes, and conduct cost analyses later on as suggested in the framework, they also wanted age ranges to appear in the model to facilitate programme replication.

**Use multiple data collection methods**

We also realised the importance of triangulating the information using multiple methods. Here, on-site observations significantly added to individual and group discussions, since they enabled us to capture the challenges associated with FASD more accurately. Another point is that we should not rely only on quantitative ratings, as all parents placed their post-it notes on the highest possible point of the scale when evaluating the programme. Nonetheless, stories shared to support their ratings were congruent with their evaluation. Individual assessments of children would have offered complementary data to meet donors’ requirements, but the investigator’s journal reflects that the locally available school readiness
scales and developmental assessment tools were too complex or dependent on too many external resources to be of sustainable use for an organisation that wishes to develop capacity to conduct evaluations independently.

**Lessons Learned about Strategies to build Local Capacity**

The managers valued the capacity building efforts; they appreciated “how you used the process for our own education – informing us of research, methods”.

**Do not rely too much on formal workshops**

Building evaluation capacity through formal methods such as a workshop sessions was challenging. Even though we had confirmed our partners’ interest in the session, we realised that the personnel could devote little time to it and that participants were more interested in sharing their thoughts about the programme than learning about evaluation. The evaluators felt that the participants did not gain much applicable knowledge during the session.

**Share tools and experiences in context**

Building capacity by sharing useful tools and experiences as needs or difficulties arose appeared much more effective. On that point, the South African managers said that they greatly appreciated the “sharing”, “the way you bring support from previous research and experience”, “the information on the rest of the world” and the “tools shared”. The evaluators noted that they appeared particularly enthusiastic when tools such as the CBR Guidelines (WHO, ILO, UNESCO, & IDDC, 2010), early development checklists, participatory tools (Chevalier & Buckles, 2008), educational videos and drop box were presented, and their relevance to the programme discussed.

**Offer the just-right amount of input**

Another theme that emerged is the need for evaluators to be analytical allies to programme stakeholders by offering the just-right amount of input. Managers mentioned that it was “so good to be challenged” and that they liked “how you managed the discussions”, “reframed concepts” and “focussed on designing the general process”. The Canadian partners influenced the process at some stages by drawing attention to discrepancies pertaining to intended or unintended outcomes, and about differences between what the programme aims to be doing and is actually doing. Reflections in the investigator’s journal highlight the fact that input must...
be offered in moderation, without reframing concepts too often, which could decrease people’s confidence and inhibit them from sharing relevant information.

**Gradually shift evaluation roles**
The last strategy used to strengthen local capacity, which appeared to be effective, is to gradually shift evaluation roles to identified local personnel who are expected to take responsibility in the future. The way we collaborated in preparation for data collection allowed people to become familiar with evaluation planning and data collection methods. The translator for the discussion group and the manager who led part of one session gained experience and confidence to moderate such sessions, and fulfilled their roles with professionalism.

**Lessons Learned about Strategies to foster Sustainable Partnerships**

**Be sensitive**
The investigator’s journal contained many reflections about the importance of being sensitive to the impact of cultural beliefs and to the reactions generated by the evaluation. In one instance, the Canadians would have more readily labelled the children living with FASD as children with disability. They were also inclined to deplore the local reticence to obtain a diagnosis, feeling it could jeopardise the eventual development of necessary services. The South African partners however, saw in an official diagnosis a detrimental label that would only lead to more stigmatisation. We were sensitive to the fact that we held different beliefs, and decided to put this issue into perspective so that each scenario’s advantages and disadvantages could in time be discussed with consideration.

Similarly, when a formal activity was conducted to rate the centre’s performance, the group appeared tense. We realised that this part of the evaluation could be threatening and that the format chosen was not appropriate. The tension disappeared when the Canadian partners adjusted their methods to include more participatory activities and offered options to their South African partners as to how they wanted to proceed. Managers commented that they liked the evaluators’ “sensitivity”.

**Clarify expectations**

This experience draws attention to the importance of clarifying each other’s expectations, especially when evaluators come from abroad. The Canadian
partners did not realise the extent to which findings were used quickly until one manager asked to “get the evaluation report earlier to do better preparation before the next round of evaluation”. Another example comes from the suggestion that “April is a very busy time: can we please make it around February (next time)?” The South African partners showed that they wanted to be more actively engaged and suggested reflecting on ways to maintain “more clarity and communication between us and you during the year about the thinking process”. This certainly highlights the importance of getting to know our partners and letting each one determine their preferred level of involvement.

Respect local pace and priorities
The last theme that emerged to foster sustainable partnerships is to respect local pace and priorities. On that subject, one manager mentioned that he liked the “way you gave participants time to formulate and express ideas in order not just to stay on (a) predetermined path but to draw in complex issues in a non-threatening manner”. Another appreciated “the pace at which the evaluation is taking place”. On some occasions the evaluators were worried that not all evaluation objectives would be met, since discussions sometimes appeared to be straying far from the evaluation focus. The partners decided to adjust the objectives to take into account immediate local priorities: we kept the focus on evaluating the ECD activities, but priority elements associated with the entire programme were discussed, such as expansion in other communities, as someone suggested that it was “the elephant in the room”. The feedback received indicates that this was appreciated.

DISCUSSION
This study provides insights into strategies applicable to CBR evaluations. The golden thread connecting our findings relates to how evaluators interact with local stakeholders to gain their trust, understand their perspectives, facilitate their contribution, and build local capacity. For example, the non-threatening learning spirit that was created proved absolutely essential to gain trust and enable people to participate actively in evaluation activities. This reinforces the need for evaluators to engage in non-judgmental relationships and position themselves as analytical allies for programme stakeholders (Fetterman & Wandersman, 2005; Chevalier & Buckles, 2013).

Sensitivity towards each other’s perspectives and reactions emerged as critical in the evaluation of the South African programme. This highlights how important it
is for evaluators to pay attention to verbal and non-verbal cues in order to gain a good understanding of their partners’ beliefs, realities and communication styles, and to adjust their terminology, methodology and interpretations accordingly (Chevalier & Buckles, 2013). This is especially challenging when engaged in participatory research with people from different cultures. The issue of what is perceived as a disability may often come up in CBR evaluations, as was the case in this study. To overcome potential pitfalls, the authors suggest that partners must commit to ongoing self-critique of their own biases, and recognise the legitimacy of other perspectives (Gray & McPherson, 2005; Ross, 2010). Hence, CBR evaluators must be conscious of their own perceptions of disability and reactions, and engage in balanced discussions to understand their partners’ vision.

All the groups in this study appreciated the efforts to give a voice to all and to facilitate the contribution of people with different literacy levels through the use of participatory tools. This also brought important nuances to final interpretations. This is in harmony with CBR values of inclusion and participation, while being congruent with empowerment evaluations and PAR (Fetterman & Wandersman, 2005; WHO, ILO, UNESCO, & IDDC, 2010; Chevalier & Buckles, 2013). As expected, the strong visual component of the participatory tools helped to reduce language and literacy barriers. Nonetheless, the fact that they were also very effective with tertiary-educated individuals supports a more generalised use of these highly interactive tools in CBR evaluations.

On another note, it was difficult for us to identify a suitable tool to gather longitudinal information on children’s progress that would not require external resources. On that subject, Lukersmith and colleagues (2013) highlighted the need for a CBR monitoring and evaluation tool, but stressed that it must be adaptable and that the resource implications must be considered. Similarly, although the framework used facilitated reflections on the programme, our experience suggests that a one-size-fits-all framework would not be appropriate for CBR. That might partly explain why there is still no consensus on which one should be used (Grandisson et al, 2014).

Capacity building efforts which are at the heart of empowerment evaluations (Fetterman & Wandersman, 2005) were greatly appreciated by local stakeholders, and provide support for the use of this approach in CBR evaluations. However, our findings emphasise that a variety of capacity building strategies should be used. Informal strategies appeared to work best in this study and required the
evaluator to seize opportunities to transfer knowledge in context and delegate roles gradually. Fetterman and Wandersman (2005) propose that fostering evaluative thinking with cycles of reflection and action can empower local stakeholders to make optimal use of evaluations. This was clearly demonstrated as the South African managers liked to be guided in their reflections about the programme and were eager to use the results of the evaluation to prepare for the next round.

The lessons learned are specific to the partnership between the University of Ottawa and Goedgedacht, and are focussed on one of the field visits conducted to empower the NGO to evaluate its programmes. We are aware that stakeholders’ participation can vary greatly from one culture and one programme to another. Although we attempted to create conditions conducive to feedback, some people may have been intimidated. More research and best practice guidelines representing consensus of experts would provide further guidance on how to conduct empowering CBR evaluations.

CONCLUSION

We hope that the lessons learned about CBR evaluation strategies can be useful to others. Our experience revealed the importance of creating a non-threatening learning spirit and providing support for the use of participatory tools with all groups during CBR evaluations. Being sensitive to our partners’ beliefs about disability and inclusion as well as their reactions to the evaluation, emerged as a crucial issue. This study also emphasised the need for a variety of formal and informal strategies to develop local evaluation capacity. More research is needed to clearly define the key ingredients for good CBR evaluations, to look into strategies to build local evaluation capacity, develop a flexible monitoring and evaluation tool for CBR, and attempt to reach consensus on a flexible framework in which to position CBR evaluation findings.

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