Examining the Relationship between Community Participation and Program Outcomes in a Metaevaluation[1]

Apollo M. Nkwake
World Vision United States

Holta Trandafili
World Vision United States

Joel Hughey
World Vision United States

Background: The salience of stakeholder participation in community development is not disputed. However, there is a paucity of evidence that clearly links participation with program outcomes.

Purpose: We examined the link between participation and program outcomes. ***Setting****:* The article discusses data collated from World Vision (WV) program evaluations. WV is a faith based, grass-root community engaging, child focused relief and development organization that works in close to 100 countries to improve and sustain child well-being. Community participation is very central to WV's program.

Intervention: 92 community development programs evaluated between 2005 and 2010.

Research Design: We used a metaevaluation design (Meta-analysis Summaries [DeCoster, 2004]), which involves identifying the prevalence of certain effects (such as child well-being outcomes) and the strengths of relationships among those effects and certain explanatory variables (such as community participation).

Data Collection and Analysis: *A* document review tool comprising 327 variables was used to review program design documents and evaluation reports. Each review item generated a score whenever a positive response was checked. The maximum possible score for a program was 200. These scores were used to measure correlations among major variables of participation and program outcomes. After the program documents were reviewed, the data was then manually entered into PASW statistics for analysis.

Findings: Programs that mostly used empowering approaches engaging a higher level of stakeholder participation were more than fifteen times more likely to exhibit improvements in child health, community health, education, and protection outcomes than those that which used direct service delivery (give a fish) approaches engaging less stakeholder participation. Also, participation of vulnerable groups like children and women had a stronger relationship with program outcomes than other forms of participation that did not involve vulnerable groups.

Keywords: community participation; program outcomes; metaevaluation

---

[1] The opinions presented in this paper are those of the authors and do not necessarily reflect the policies or views of World Vision United States.

Community Participation

'Community participation' is commonly understood as "the collective involvement of local people in assessing their needs and organizing strategies to meet those needs" (Zakus & Lysack, 1998, p.1). While variations exist in how community participation is conceived and realized, there is widespread agreement that it is a vital ingredient of community development. As a development strategy, community participation provides people with the sense that they can address their problems through careful reflection and collective action (Zakus & Lysack, 1998). In recognition of its vitality to community empowerment, community participation has been referred to as "the heart that pumps the community's life blood" (Reid, 2000, p. 3). The benefits and justification for participatory approaches are several:

(a) From a _pragmatism sense_ (Weaver & Cousins, 2004), participation enhances the relevance of programs to ensure that they are well suited for the needs and circumstances of beneficiaries (Kironde & Kihirimbanyi, 2002; Wilson, 2001).

(b) From a _fairness perspective_ (Weaver & Cousins, 2004) or democratic (Cullen, Coryn, & Rugh, 2011), participation ensures that the views of many stakeholder groups are represented in the development process.

(c) In an _epistemological sense_, it is expected that program decisions that feed on the insights of many stakeholders are not just relevant to beneficiaries, they are generally smarter (Weaver & Cousins, 2004; Cullen et al., 2011; Brandon, Linberg, & Wang, 1993).

(d) Studies have linked community participation to greater program outcomes such as greater access to social services (e.g. Bedelu, Ford, Hilderbrand & Reuter, 2007; Sirivong et al., 2003; Adatu et al., 2003); consumption and demand for social services (e.g. Kilpatrick et al., 2009; Preston et al., 2009).

(e) Community participation is linked to program sustainability due to a greater sense of ownership and responsibility for program activities by stakeholders (Schaffer, 1991; Oakley, 1992). This implies that stakeholders are willing and able to mobilize and commit local resources to continue some or all of the program proceeds after external support is withdrawn or reduced.

Evidence of the benefits of community participation does not indicate which approach works best. Taylor, Wilkinson & Cheers (2008, cited in Preston et al., 2009, p. 4) outline four conceptual approaches to community participation: contribution; instrumental; community empowerment; and developmental approaches. These conceptual approaches exhibit a continuum -from the least to the most engaging and/or empowering.

In the _contributions approach_, participation is considered as primarily involving voluntary contributions, to a project, such as time, resources, or community-based knowledge. This process is normally led by external professional developers and the community stakeholders simply follow the lead –they wait to be told how the contributions will be made and used. In the _instrumental approach_, wellbeing is conceived as an end result, rather than as a process, with community participation as an intervention supporting other development interventions. Still this type of participation is usually led by professionals and the important components of the interventions or programs are predetermined according to local and national priorities. The community _empowerment approach_ tries to empower and support communities, individuals, and groups to take greater control over issues that affect their health and well-being. This includes personal development, conscientization, and social action. In the _developmental approach_, development is conceived as an interactive, evolutionary process, embedded in a community of place or interest. Local people, in partnership with professionals, have a role in decision-making and in achieving the outcomes they consider are important.

There are several other ways community participation has been conceived and/or applied. In this article, we adopt a broad definition of participation. We reviewed program documents for all and any form of beneficiary involvement, including partnership with local organizations and we discuss data that links different forms of participation with program outcomes.

Conceptual framework

The major lens with which we analyzed participation in this review is O'Gorman's (1992) development framework. O'Gorman's framework outlines five development approaches-each representing an increasing amount of community

engagement and empowerment (see Table 1): (a) *Service Delivery or "Give a fish"* (mostly involving distribution of hand-outs and relief); (b) *Capacity Building or "Teach how to fish and give a rod"* (propagating and or delivering information and skills); (c) *Empower or "Upgrade local fishing techniques"* (facilitating processes that generate learning from the participants themselves and emphasize on the processes; resulting in individual and groups taking more control over all aspects of life); (d) *Leverage or "Support grassroots movement for fair fishing business"* (fostering shared values, reflection and action); and (e) *Innovation or "Find new basis for labor-life relationships beyond fisheries"* (challenging society through constructive action).

Table 1
O'Gorman's development approaches

Metaphor Used	Approach
Give a fish	Service Delivery
Teach how to fish and give a rod	Capacity Building
Upgrade local fishing techniques	Empowerment
Support grassroots movement for fair fishing business	Leverage
Find new basis for labor-life relationships beyond fisheries	Innovation

Review Questions

Questions on Participation

In addition to O'Gorman's framework, we used a set of general questions to capture a wider range of participation reported in the program documents we reviewed. These include:

- What is the status of the level of participation of children, youth and vulnerable groups in the community life? (participation used as an indicator of the intervention's outcomes rather than a programmatic approach)
  - o Is there involvement of representatives from the project participants (including partners) in conducting the evaluation? If so, during which element of the evaluation?
    - (a) Evaluation Design
    - (b) Data Gathering
    - (c) Data Analysis & Interpretation
    - (d) Recommendations
    - (e) Dissemination
- Is child participation encouraged / supported in the design and evident in the evaluation?
- Is community participation encouraged / supported in the design and evident in the evaluation?
- Are partnerships planned to be created/ strengthened in the design and evidence of more effective partnerships presented in the evaluation?

Questions on Sustainability

- Is sustainability planned in the design/proposal?
- Is sustainability evident in the evaluation outcomes?

Questions on Outcomes

The answers to all but the last question were classified as: improving, not improving, not applicable or program had a different focus.

- What is the status of child health?
- What is the status of community health?
- What is the status of education among children / youth?
- What is the status of relationships among community members and/or groups? (Looking at the transformative nature of relationships, which in the World Vision (WV) jargon is considered as "community transformation")
- What is the economic status of families?
- What is the status of the situation of children, youth and women in the targeted communities in terms of protection?
- What are the most evident positive changes in the community that the program / project planned in the design and measured during evaluation? (This was an open question recorded as text and counted as qualitative information).

Study Context

The data discussed in this article is collated from WV's documents, which are published only internally on the organization's database. WV is a faith based, grass-root community engaging, child focused relief and development organization that works in close to 100 countries to improve and sustain child well-being. Community participation is very central to WV's program. WV applies an approach that equips local level staff to work effectively with partners towards the sustained well-being of children within families and communities, especially the most vulnerable (WVI, 2009). Targeted partners normally include: government, churches and other faith-based organizations (FBOs), non-governmental organizations (NGOs), community-based organizations (CBOs), local businesses and informal community groups –including groups of children and youth, where this is appropriate for age and local culture. Since most of these groups exist in communities before WV arrives and are there long after WV departs, the organization chooses the role of a catalyst that helps groups come together to focus and collaborate on local child well-being priorities, and offers ongoing capacity-building support (WVI, 2009). Thus, participation is core to WV's programs.

Methodology

As already stated, we analyzed data collated in a review of 92 programs (Designs and Evaluations) implemented by WV in different parts of the world. We have referred to this review as a metaevaluation, although we recognize that the term represents different views of what it is and what it is not.

According to Merriam-Webster's dictionary, the prefix "meta" implies that something is occurring later than or in succession to: after; situated behind or beyond something. This notion is often apparent when researchers use the term metaevaluation, alluding to the evaluation of many other evaluations that have previously been conducted. A different but similar research tactic is meta-analysis. In a meta- analysis: "An investigator identifies a research question, acquires the relevant literature, codes findings from that literature, and analyzes the coded data to estimate the average treatment effect and its distribution in a population of interest. The process of estimating the average treatment effect is meta-analysis" (Rhodes, 2012, p. 24).

Our study is not a meta-analysis rather a metaevaluation. We apply the term "metaevaluation" in the same way White et al. (1984) have used it: "an evaluation of evaluations". In their study, White and his colleagues reviewed the methodological quality of 213 evaluations conducted by California's four major energy utilities from 1977 through 1980. They did not conduct a meta-analysis because the quality of reports could not permit; they instead conducted a metaevaluation. They report: "Our original intention was to perform a systematic meta-analysis, employing global quantitative techniques suggested by Smith and Glass (1977), Rosenthal and Rubin (1980), and others. Unfortunately, the vast majority of the utility evaluations failed to report the information needed to conduct a meta-analysis. Hence, we conducted a metaevaluation; an evaluation of evaluations" (pp. 168-169). In White et al's (1984) metaevaluation, the document review tool comprised 14 categorical and 13 open-ended items concerning five major topic areas: program description, sampling, research design and measurement, statistical analysis, and major findings. Evaluation reports were reviewed on this basis and frequencies were generated.

It has been argued e.g. by Rhodes (2012) that this approach , also referred to as literature reviews (Briggs, 2005; Lopez-Lee, 2002) is rigor wise inferior to meta-analysis: that the approach is "unprincipled in that they use no scientific standards for including studies, apply no probability-based rules for assigning weights, and cannot be replicated" (Rhodes, 2012, p. 24). While we are neither able nor attempt to summarize the average effect size in the evaluations; we recognize that much programmatic learning could still be derived from reviewing the evaluations with in a metaevaluation.

A crucial part of a meta-analysis is the evaluative assessment of the quality of evaluations or research reports to include and exclude from estimating effect size. In this review, that sort of assessment is not just an initial step in the process; it's a core part of the core. The review is designed for us to learn about the overall character of program designs and evaluations in reference to organizational standards of quality.

The organization has a design monitoring and evaluation policy that sets standards to which both program design documents and evaluations are expected to adhere. For example, every program is expected to have a logical framework as part of its design; a baseline study and every evaluation should compare evaluation with baseline values. Also, being a child focused organization; there is an expectation that every program should have a

focus on improving the well-being of children. A large part of the review is to ascertain the extent to which programs adhered to these among other standards. We developed review items based on these standards (see Text Boxes 1, 2, & 3). The standards or review items have been categorized to include:

(a) <u>Program quality standards</u>, which deal with the nature of program strategies: e.g. stakeholder participation (see Text Box 1)
(b) <u>Monitoring and evaluation quality</u> (adherence to standard M&E practices, see Text Box 2)
(c) <u>Program outcomes</u> (see Text Box 3).

We recognize that comparing programs on the basis of what was documented could have been undermined by the fact that reports may have different levels of completeness and focus. However, there is a fair expectation that since the organization is child focused and community based programs would furnish findings on if or not there is positive change in the well-being of communities, families, children and institutions irrespective of the sectors the program(s) focused on. Hence the review tool was designed to capture these elements of change in a general sense. Changes may be reported with different forms of data and varying intensity. Our review did not capture all the variations in outcomes reported. The document review tool examined if or not the documents furnished evidence of those changes at any magnitude or in any form or if the information was simply inconclusive.

The document review tool comprised of 327 variables altogether. Each of the items would generate a score whenever a positive response was checked. The maximum possible score for a program was 200. 21% of this total score emerges from M&E practices; 31% from program quality items and 49% from program outcomes. We use these scores in measuring correlations among major variables of participation and outcomes.

Text Box 1
Indicators for Program Quality

Evidence that:
- Assessments provide deep analysis of the problems and root causes affecting communities
- Designs make clear definition of problems they are attempting to address.
- Designs make adequate description of the change strategies they support
- There is quantification of the scope of the needs or assets that make the case for selection of the problems being addressed.
- Designs explicates assumptions related to: (a) linkages between problems, interventions and goals; (b) measurability of program performance-linkage between indicators and outcomes they should measure as well as methods for measuring performance/success); (c) Assumptions acknowledging factors that may influence the program's ability to create change/reached desired outcomes
- Design exhibit application of best practice research that supports plausible solution strategies for identified problem areas
- Targets are specified on for outcomes and outputs
- There is evidence of use of evaluation findings in designing/redesigning (Designs refer to baselines/redesigns make reference to evaluations)
- Designs show strong alignment with NO strategies
- Evidence of child participation
- Evidence of community participation
- Evidence of effectiveness of partnerships
- Evidence of harmonization of developmental efforts to avoid duplication and competition
- Evidence of integration-ministry integration-relief, advocacy and transformational development
- Evidence of sectoral integration
- Integration of cross cutting themes: gender, Environment, Protection, Peace building, Disability, Christian Commitments
- Evidence that sustainability was effectively address

There were eight initial reviewers involved in this study. All the eight reviewers were involved in developing the review tool and reviewers' manual and training of reviewers. Ultimately, the documents were reviewed by three of the individuals who received training. While not in the strictest form of achieving inter-reviewer reliability, an initial set of program documents was reviewed by all reviewers using the document review tool. We expected that differences in coding would mostly originate from question ambiguity. Therefore whenever differences in coding existed, review questions were further refined to reduce ambiguity. After the program documents were reviewed, the data was then manually entered into PASW statistics computer software for further analysis.

Some of the findings from this review pertaining to indicators presented in Text Boxes 1, 2 and 3 above and the general relationships between program quality and outcomes have been discussed in a different article. The current article places a special focus on the community participation variables and uses a conceptual frame work and review questions described earlier in this article (see "Conceptual Framework").

Text box 2
Indicators for Design, Monitoring and Evaluation Quality

- Evidence of appropriate evaluation designs
- Evidence of change measurement
- Extent to which data collection methods described adequately with rationale for choice
- Extent to which sampling strategies are adequately described
- Adequate description of data analysis strategy
- Adequate description of rationale for methods used
- Appropriate combination of qualitative and quantitative methods
- Participation in evaluation
- Evaluations show a significant alignment and consistency to the original articulation of the problem included in the Program design and log frame
- Evaluations provide detailed and evidence based account of the impact contributed by programs across different levels
- Evaluations provide clear analysis on the preparation of the community for taking over the key aspects of the program
- Evaluations assess the degree of involvement of the community in the program
- Evaluations analyze WV's partnering approach and execution on the ground
- Availability of accurate complete and timely monitoring data
- Adequate description of ethical considerations

Text Box 3
Indicators for Program Outcomes

- Evidence of intentionality in programming for CWBOs (measured at various levels-explicit or implicit; assumed or actual)
- Evidence of positive change
  - Evidence for outcomes around child wellbeing (including HEA outcomes)
  - Improvements in: (a) awareness towards particular issues amongst communities, stakeholders, partners; and/or (b) capacity –knowledge, skills, network and infrastructure in the community, partner and stakeholders *(output focused)*
  - Evidence of attitude, behavior and practice change *(outcome / goal focused)*
- Changes in social, environmental, physical and economic conditions in a community
- The extent to which output project targets are met
- Evidence that projects are achieving the set goals(program reports demonstrate progress and WV contribution to goal, outcome and output level over the reporting period

Sampling, Exclusion, and Inclusion

To determine the sufficient number of programs to review, we used a model developed by Bennett, Woods Liyanage, and Smith (1991, see Text Box 4).

As shown in Text Box 4, *n* is 29, multiplied by three (clusters or regions in this case) for a total of 87 programs. Having determined that we need at least 87 programs for a robust sample, we applied two inclusion/exclusion criteria:

(a) Only those programs evaluated in the last five years were eligible for inclusion in the sample for review. We expected that more recent evaluations would reflect greater adherence to the organization's programing standards whose dissemination has intensified since 2005. This doesn't imply that these programs were only implemented in the last five years, since most of the organization's programs run longer than 5 years.

(b) Of those evaluated in the last five years, only programs whose evaluation reports were available in the organization's database were included. Thus, the document searches proceeded with evaluation reports. Once a report was retrieved, the program design document was also retrieved. Those programs with design documents but whose evaluation reports were not readily available were excluded from the review.

After applying these two criteria, we retrieved 92 qualifying programs whose documents were ultimately reviewed. This sample is not used to generalize findings to all WV programs. Rather, we use the data to identify common practices. More specifically in this article, we use the data to identify whether or not programs that exhibited certain forms of community participation would also exhibit high outcome scores than those that did not.

Text Box 4
Review Sample Size

$n = \dfrac{P\,(1\text{-}P)\,D}{S2b}$

P = the estimated prevalence of program evaluations that document significant change in communities (According to WV Australia's 2009 Evaluation, this is estimated at 26 percent)

D = design effect (2 is conventionally the maximum (Pearson, 2010))

S =Standard error given by confidence interval/Z alpha (=0.05/1.96=0.0255)

b =Number of clusters (3, representing Africa, Eurasia and LAC regions where programs are implemented)

Findings

This section presents the results of the review. First, we outline the preponderance of different forms of community participation in both program designs and evaluations; after which we analyze relationships between selected community participation variables and program outcomes and quality.

Prevalence of participation in program design and implementation

As shown in Table 2, the most prevalent form of participation was strengthening partnerships (94.6%) and general community involvement (96.7%). The issue of partnerships was examined in the majority of program evaluations. Child participation was evident in just about a third of

the designs and about a half of the evaluations. Also, fewer programs (55.5%) indicated that the level of participation of children, youth and vulnerable groups in the community life is improving? But participation was a lot more in designing and implementing programs than in evaluation activities.

Development Approaches and Participation

As earlier noted in "conceptual framework", O'Gorman's framework was used to assess participation-with "give a fish" approaches (direct service delivery) representing the lowest form of community participation or empowerment; and "finding a new basis for labor-life relationships beyond fishing" (innovation) representing the highest level of community participation. Table 3 shows that "Capacity Building" and

"Empowerment" were the commonest development approaches in WV programs.

Prevalence of Participation in Program Evaluation

As shown in Table 4, community/beneficiary participation in the process of evaluation is very low. Only 17.4% of the reports mentioned that community members participated as data collectors; but less than 10% of the reports mention participation beyond this: in designing evaluations, analyzing data, generating recommendations and disseminating findings. This does not mean that there is no participation as part of the approaches to implement programs rather than it happens much less frequently in the process of conducting an evaluation. It may be that the programs see evaluations as something that should be done externally rather than be equally participatory in nature as the rest of their development efforts.

Table 2

Percent of designs and evaluations with evidence of participation

Questions	Yes	No	N/A or Inconclusive Evidence
Does the evaluation explore (assess) the issue of partnerships (any partnership - among WV, CBOs, FBOs, NGOs, Govt.)?	85.9%	12%	2.2%
Is child participation encouraged / supported in the design?	35.9%	33.7%	30.4%
Is child participation evident in the evaluation?	46.7%	47.8%	5.4%
Does the evaluation show that the level of participation of children, youth and vulnerable groups in the community life is improving?	55.5%	44.3%	
Is community participation encouraged / supported in the design?	69.6%	2.2%	28.3%
Is community participation evident in the evaluation?	96.7%	3.3%	
Are partnerships planned to be created/ strengthened in the design?	68.5%	3.3%	28.3%
Is there evidence in the evaluation that partnerships were strengthened?	94.6%	3.3%	2.2%

Table 3

Metaphors for Development Approaches (O'Gorman, 1992)

Metaphor Used	Approach	Design	Evaluation
Give a fish	Service Delivery	6.5% (6)	7.6% (7)
Teach how to fish and give a rod	Capacity Building	42.4% (39)	47.8% (44)
Upgrade local fishing techniques	Empowerment	40.2% (37)	39.1% (36)
Support grassroots movement for fair fishing business	Leverage	2.2% (2)	5.4% (5)
Find new basis for labor-life relationships beyond fisheries	Innovation	0%	0%

Table 4

Participation in Evaluation

There is Evidence Of Community/Beneficiary Participation in:	Yes	No
Designing Evaluations	6.5%	93.5%
Data Gathering	17.4%	82.6%
Data Analysis & Interpretation	6.5%	93.5%
Generating Recommendations from evaluations	4.3%	95.7%
Dissemination of findings	8.7%	91.3%

Participation and Selected Program Outcomes

In Tables 5 through 9 three forms of participation are compared with select program outcomes: The three forms of participation are:

1. Participation of children, youth, women and vulnerable groups
2. Community participation that does not necessarily include vulnerable groups like children and women
3. Partnerships with local organizations
4.

These three forms of participation are compared with the following outcomes:

- Child health (Improved in 79.3% of programs, *n*=73)
- Community Health (Improved in 75% of programs ; *n*=65)

- Education (Improved in 67.4% of the programs; *n*=62)
- economic status of families (Improved in 69.6% of the programs; n=64)
- Protection of children, youth, women, vulnerable groups (Improved in 66.3% of programs; *n*=61)

In all instances (except for economic status of families), the first form of participation (Participation of children, youth, women and vulnerable groups) had a stronger relationship with outcomes than general community involvement or partnerships. When it came to economic status of families, the third form of participation (Partnerships with local organizations) had a stronger relationship with outcomes than community participation or participation of vulnerable groups (see Table 8).

Table 5
Cross Tabulations: Participation and Child Health

	Program Evaluation reported improvements in participation of children, youth, women and vulnerable groups	Evaluation showed evidence of general community involvement	Evaluation showed evidence of strengthening partnerships
Evaluation showed that Child health improved	63.9%	98.6%	94.5%
Evaluation did not show that child health improved	8.3%	85.7%	92.9%
Pearson Chi Square Value	12.9	5.8	1
Significance (*p*)	.000	.066	.592

Note. Percentages in this table are selected from several contingency tables and they do not have to add up to 100% in each variable within Table 5.

Table 6
Cross Tabulations: Participation and Community Heath

	Program Evaluation reported improvements in participation of children, youth, women and vulnerable groups	Evaluation showed evidence of general community involvement	Evaluation showed evidence of strengthening partnerships
Evaluation showed that Community health improved	63.2%	97.1%	95.7%
Evaluation did not show that community health improved	25%	94.4%	88.9%
Pearson Chi Square Value	7.7	.3	4.5
Significance (*p*)	.01	.5	.1

Note. Percentages in this table are selected from several contingency tables and they do not have to add up to 100% in each variable within Table 6.

Table 7
Cross Tabulations: Participation and Education

	Program Evaluation reported improvements in participation of children, youth, women and vulnerable groups	Evaluation showed evidence of general community involvement	Evaluation showed evidence of strengthening partnerships
Evaluation showed that education improved	67.7%	96.8%	93.5%
Evaluation did not show that education improved	16.7%	85.7%	85.7%
Pearson Chi Square Value	6.1	1.9	2
Significance (*p*)	.013	.174	.361

Note. Percentages in this table are selected from several contingency tables and they do not have to add up to 100% in each variable within Table 7.

Table 8
Cross Tabulations: Participation and Economic Status of Families

	Program Evaluation reported improvements in participation of children, youth, women and vulnerable groups	Evaluation showed evidence of general community involvement	Evaluation showed evidence of strengthening partnerships
Evaluation showed that economic status of families improved	64.1%	98.4%	96.9%
Evaluation did not show that economic status of families improved	46.2%	86.7%	80%
Pearson Chi Square Value	1.5	4.6	13.6
Significance (*p*)	.185	.091	.001

Note. Percentages in this table are selected from several contingency tables and they do not have to add up to 100% in each variable within Table 8.

Table 9
Cross Tabulations: Participation and Protection of Children, Youth, Women, and Vulnerable Groups

	Program Evaluation reported improvements in participation of children, youth, women and vulnerable groups	Evaluation showed evidence of general community involvement	Evaluation showed evidence of strengthening partnerships
Evaluation showed that protection of children, youth, women, vulnerable groups improved	70.5%	100%	98.4%
Evaluation did not show that protection of children, youth, women, vulnerable groups improved	25%	96%	88%
Pearson Chi Square Value	14.6	2.5	5.5
Significance (*p*)	.000	.291	.064

Note. Percentages in this table are selected from several contingency tables and they do not have to add up to 100% in each variable within Table 9.

In all instances, general community involvement does not exhibit statistically significant relationship with outcomes. This is in sharp contrast with participation of vulnerable groups, which seems to be a more empowering and beneficial form of participation.

Relationships between Development Approach and Program Outcomes and Sustainability

Results in Figure 1 indicate that in all instances, use of "give a fish" approaches had a negative relationship with program outcomes. Whenever programs used approaches other than "give a fish", i.e. Capacity Building, Empowerment and Leverage; which engage greater stakeholder participation, they were about 18 times more likely to report improvements in program outcomes than

when they used "give a fish" approaches. This pattern is about the same when it comes to relating the use of "give a fish" approaches with sustainability.

As shown in Table 10, "give a fish" approaches have a negative relationship with sustainability. All of the programs that furnished evidence of sustainability such as strengthened local structures to manage service facilities after program closure did not use "give a fish" approaches.
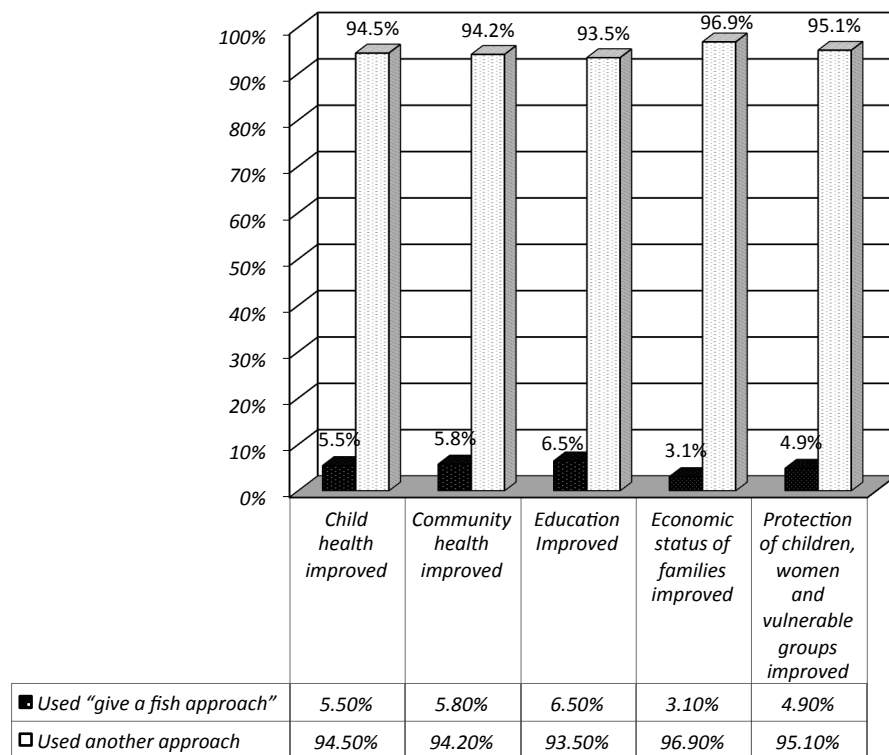

	Child health improved	Community health improved	Education Improved	Economic status of families improved	Protection of children, women and vulnerable groups improved
■ Used "give a fish approach"	5.50%	5.80%	6.50%	3.10%	4.90%
□ Used another approach	94.50%	94.20%	93.50%	96.90%	95.10%

Figure 1. Use of "give a fish" approaches and program outcomes.

Comparing the relative importance of different forms of participation

The correlations between different forms of community participation and selected program outcomes discussed above (in Tables 5-9) show a strong relationship between community participation and program outcomes. However, since this analysis depicts bivariate relationships, it does not show the relative importance of different forms of community participation in predicting outcomes. In order to compare the different forms of community participation in their

associations with program outcomes, we construct standard regression models (see Figure 2).

The standard regression model (see Figure 2) examines the association between different forms of community participation with program quality and program outcomes. The forms of community participation analyzed include: participation of vulnerable groups such as women and children; evidence of partnerships built; child participation; evidence of sustainability of program outcomes; and use of "give a fish" approaches. For all programs, evaluations are reviewed on basis of the indicators in Text Boxes 1 and 2 (presented earlier in "methodology") to provide a total program

quality score of 68.5 (denominator). The individual program quality score is provided as the numerator. Based on this, a percentage score is computed. The percentage score is what was used as the dependent variable for program quality. Similarly, a program total program outcomes score

based on the indicators in Text Box 3 (also presented earlier in "methodology") was used to develop percentage scores for each program; from a total of 35.7 points. This score was used as the dependent variable.

Table 10
Cross Tabulation: Use of "Give A Fish" Approaches and Sustainability

|			Approach Used		
			Did Not Use "Give A Fish" Approach	Used "Give A Fish" Approach	Total
Evaluation furnished evidence of sustainability	YES	Count	64	0	64
		% within Evaluation furnished evidence of sustainability	100.0%	.0%	100.0%
	NO	Count	15	5	20
		% within Evaluation furnished evidence of sustainability	75.0%	25.0%	100.0%
	Evidence not conclusive	Count	0	2	2
		% within Evaluation furnished evidence of sustainability	.0%	100.0%	100.0%

Chi Square =35.8; *p*=.000
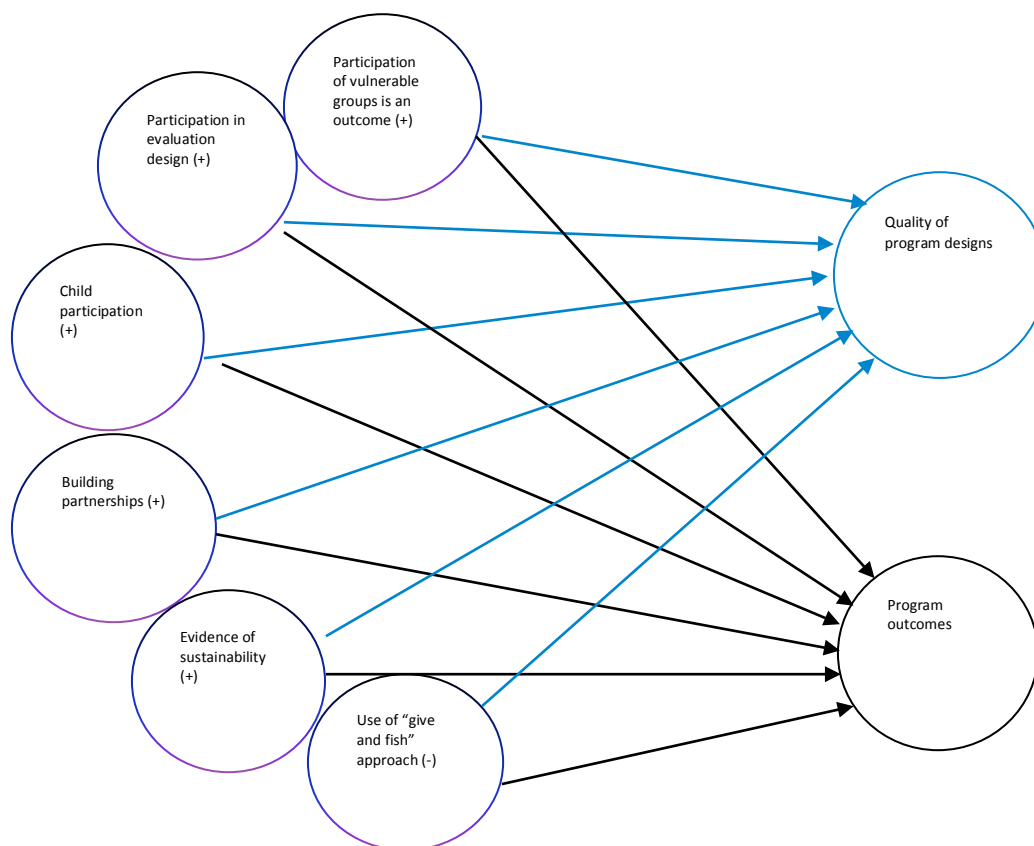
Figure 2. Postulated model to relate community participation and program outcomes and quality.

Community Participation and Program Outcomes

As shown in Table 11, there is a statistically significant relationship between community participation and the program outcomes score (F=7.1; p=.000). The five community participation variables together account for 30 percent of the variation in the program quality score (p=.000).

Of all fives forms of community participation, only two variables- Participation of vulnerable groups (26%; p=.018) and evidence of partnerships built (28%; p=.003) had statistically significant correlations with program outcomes; and the use (or nonuse) of "give a fish" approaches had a close to significant and negative correlation with outcomes (-19%; p=.073).

Table 11
Community Participation and Program Outcomes

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.289	.076		3.790	.000
	Participation of vulnerable groups	.097	.040	.263	2.406	.018
	participation in evaluation design	.051	.070	.072	.733	.466
	Child participation	.029	.042	.079	.695	.489
	Building partnerships	.222	.074	.284	3.014	.003
	evidence of sustainability	.050	.048	.120	1.048	.298
	Use of "give a fish" approaches	-.130	.072	-.194	-1.814	.073

Dependent Variable: Program outcomes score b. Predictors: (Constant), Use of "give a fish" approaches, Participation of vulnerable groups, participation in evaluation design, Building partnerships, Child participation, evidence of sustainability: Adjusted R Square= .302; Std. Error of the Estimate = .15357; ANOVA (F)= 7.140; Sig.= .000

Community Participation and Program Quality

As shown in Table 12, there is a statistically significant relationship between community participation and the program quality score (F=8.1; p=.000). The five community participation variables together account for 33 percent of the variation in the program quality score (p=.000). Of all fives forms of community participation, only three- Stakeholder participation in evaluation design (29%; p=.002); evidence of partnerships built (19%; p=.036); and the use (or nonuse) of "give a fish" approaches (-39%; p=.000); had statistically significant correlations with program quality. The use of "give a fish" approaches had the highest and also a negative correlation with the program quality score.

It is worth noting that community participation is but one among several program quality standards; a program that exhibits community participation might be more likely to exhibit other program quality standards than one that does not.

Table 12
Community Participation and Program Quality

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.360	.044		8.134	.000
	Participation of vulnerable groups	.033	.023	.151	1.416	.161
	participation in evaluation design	.127	.041	.299	3.129	.002
	Child participation	-.001	.024	-.004	-.040	.968
	Building partnerships	.091	.043	.197	2.136	.036
	evidence of sustainability	.014	.028	.057	.505	.615
	Use of "give a fish" approaches	-.155	.042	-.390	-3.721	.000

Dependent Variable: Program quality score: . Predictors: (Constant), Participation of vulnerable groups, participation in evaluation design, Building partnerships, Child participation, evidence of sustainability. Adjusted *R* Square= .333; Std. Error of the Estimate = .08916; ANOVA (*F*)= 8.058; Sig.= .000

Discussion of Findings and Major Conclusions

From the review results presented in the preceding section we draw a number of reflections and conclusions outlined below.

The Most Frequent Forms of Community Participation

Partnerships and general community involvement are the commonest forms of participation. Child participation and participation of vulnerable groups are not as frequent. Community participation in evaluation activities is even more infrequent. The data is not decisive in showing which of Taylor et al's (2008) forms of participation (contributions; instrumental; community empowerment; and developmental approaches) is applied in programs. Nonetheless, the limited stakeholder involvement in evaluation designs alludes more to the instrumental approach where the professional development worker is playing a leading role even if the aim is to build the capacity of communities or empower them. With regard to O'Gorman's framework, very few programs used a "give a fish approach. Most programs took either a capacity building or an empowerment approach. It is also worth noting that 8.7% of the programs reviewed involved emergency responses with limited time for stakeholder engagement during program design.

Relationship between Involvement and Program Outcomes

Bivariate analysis shows that the participation of vulnerable groups such as women and children had a stronger relationship with outcomes (health and education) than general community involvement or partnerships. This relationship is supported by narratives in some evaluation reports, e.g. with qualitative data that linked child participation with program outcomes. An example is presented in Text Box 4 below.

It is interesting to note that when it comes to economic development, partnerships have a greater correlation with outcomes than involvement of vulnerable groups. This might be because the common economic development activities such as micro enterprise emphasize beneficiary contributions more than is done in education and health service provision.

In the multiple regression analysis-which tests the effect community participation variables as a block on program quality and outcomes; as well as the effect of each community participation variable when controlling for the other community participation variables (Pearson, 2010); the importance of participation of vulnerable groups as well as strengthening of partnerships in predicting program outcomes is re-emphasized. In fact, some evaluation reports, used qualitative data to link e.g. partnerships and harmonization of program activities with other local development actors with positive program outcomes. An example is provided in the Text Box 5 below.

Text Box 4
Land of Paradise Area Development
Program: *Child Participation, Outcomes and Sustainability*
Location: Philippians
Duration: 1990 – 2010

Our analysis not only demonstrated that participation is an essential component of development activities, but more specifically, child participation has a very strong correlation with program outcomes. This can be seen in the Land of Paradise ADP. Their June 2010 End of Programme Evaluation highlights several areas that have been positively impacted by children's participation in their activities. Their list includes:

Child Participation in Development
Participation of sponsored children in development activities has become venues to discover and hone children's talents. Children build confidence and influence other children for good.

Child Leaders and Protection
Active child leaders of BCAs (Barangay Children's Associations) campaign for child's rights and advocate for other children's protection like ushering their parents to defend victims of domestic violence in neighborhood or they themselves report incidence of domestic violence to police authorities.

Gift Giving
BCAs initiated gift-giving every December to other less fortunate children within and outside the ADP areas. They collect used clothing, cash and other items that respond to the basic needs of other children.

Models of Good Behavior
Impact of Christian Nurture activities to sponsored children – they become God-fearing, active church goers, pray and memorize verses, stop vices like smoking and alcoholism and testify. CN also provided opportunities for children to become models of good behavior among their peers. Sponsored children do well in studies and become models to other students.

Inspiration
Sponsored children inspire other community children in their performances like theatre, radio broadcasting, and congress. Sponsored children's shows made the locality vibrant as talents and leadership potentials of children are harnessed (pp.2-3).

These shared examples demonstrate some of the ways to include children in development activities and the positive outcomes that can result. It also provides real-life evidence to support the need for more child participation and inclusion in all aspects of design and evaluations.

There is a strong and negative relationship between the use of "give a fish" approaches and program outcomes, sustainability and program quality. Since community participation is one of the program quality measures, its relationship with the overall program quality score shows programs that exhibit greater stakeholder participation are more likely to exhibit other standards of program quality than those that do not. Thus may evidence of stakeholder participation may also be an indication of a strong or more capable local program staff, since this always influences adherence to program quality standards.

In summary, this review adds to several other studies that identify the benefits of community participation. From the perspective of an NGO working in development, we should close the gap between the development work where participation seems to be doing better with the DME processes where participation has a long way to go. Participation of vulnerable groups like children and women needs strengthening in both the program implementation and DME. Partnership building and strengthening is most prevalent and should be maintained due to its strong correlation with program outcomes.

Text Box 5
El Alfarero Area Development Program (ADP): *Coordination and Protection*
Location: El Salvador
Duration: 2003-2012

Our analysis unearthed a strong correlation between the harmonization of development efforts and improvements in protection outcomes. In practice, this finding can be viewed throughout the work of El Alfarero ADP. From the start, the ADP recognized that "…it must link and co-ordinate with the rest of the actors in the region, in order to join forces and meet the population's most urgent needs" (Evaluation, 2008, p.14). In the first phase, the evaluation shows that this ADP demonstrated both cooperation and protection, by developing a joint work plan for a Child Protection Committee with representatives from various organizations, including WV, the Health Clinic, and the National Civil Police.

These concepts are further developed in the July 2009 redesign. In relation to harmonization, the ADP highlights a program strategy to increase local participation by establishing networks and cooperation agreements. In terms of protection, all 4 major projects included both the ADP's Childhood Protection Policy and the Peace Court, which exists to "assure that the childhood rights are not violated and to apply justice in the necessary cases" (Redesign, 2009).

The redesign continues to integrate these two concepts with its goal of organizing the local participants into a Committee of Integral Protection for the Childhood and Adolescence and by including a variety of local actors: City Halls, Peace Courts, Schools, House of Culture, Cooperatives, Fiscal organism, BCOs, Churches, ADIGUELFA. Although this is a relatively new ADP, it provides insight on how to emphasize both inter-agency coordination and protection.

Góchez, M. (2008). *Evaluation Report- El Alfarero Area Development Programme: Implementation Phase, 2004–2015.* El Salvador: World Vision.
World Vision El Salvador. (2009). *Programme Re-Design Document, El Alfarero: Phase 1 (2010-2014).* El Salvador: World Vision.

Acknowledgements

References

Adatu, F., Odeke, R., Mugenyi, M., Gargioni, G., McCray, E., & Schneider, E. (2003). Implementation of the DOTS strategy for tuberculosis control in rural Kiboga District, Uganda, offering patients the option of treatment supervision in the community, 1998-1999. *International Journal of Tuberculosis and Lung Diseases, (9)*1, 63-71.

Bedelu, M., Ford, N., Hilderbrand, K., & Reuter, H. (2007). Implementing antiretroviral therapy in rural communities: the lusikisiki model of decentralized HIV/AIDS care. *Journal of Infectious Diseases, 196*(3), 464-468.

Briggs, D. C. (2005). Meta-Analysis: A case study. *Evaluation Review, 29*(2), 87-127.

Brandon, P. R., Lineberg, M. A., & Wang, Z. (1993). Involving program beneficiaries in the early stages of evaluation: Issues of consequential validity and influence. *Educational Evaluation and Policy Analysis, 15*, 420-428.

Cullen, A. E., Coryn, C. L. S., & Rugh, J. (2011). The Politics and Consequences of Including Stakeholders in International Development Evaluation. *American Journal of Evaluation, 32*(3), 345-361.

Kilpatrick, S., Cheers, B., Gilles, M., Taylor, J. (2009). Boundary crossers, communities, and health: Exploring the role of rural health professionals. *Health and Place, 15*, 284-290.

Kironde, S., & Kahirimbanyi, M. (2002). Community participation in primary health care (PHC) programmes: Lessons from tuberculosis treatment delivery in South Africa. *African Health Science, 2*(1), 16-23.

Lopez-Lee, D. (2002). Indiscriminate data aggregations in meta-analysis: A Cause for concern among policy makers and social scientists. *Evaluation Review, 26*(5), 520-544.

Oakley, P. (1992). *Community involvement for health development: An examination of critical issues.* Geneva: WHO

O'Gorman, F. (1992). *Charity and change: From bandaid to beacon*. Melbourne: World Vision Australia.

Preston, R., Waugh, H., Taylor, J and Larkins, S (2009). *The benefits of community participation in rural health service development: where is the evidence?* The Tenth Rural Health Conference. Cairns, Australia, National Rural Health Association.

Reid J. N. (2000). Community Participation How People Power Brings Sustainable Benefits to Communities, USDA Rural Development Office of Community Development. Retrieved from http://www.rurdev.usda.gov/rbs/ezec/Pubs/commparticrept.pdf.

Rhodes, W. (2012). Meta-analysis: An introduction using regression models. *Evaluation Review, 36*(1), 24-71.

Schaffer, R. (1991). Balanced participation in development. *Tropical Doctor, 21*(1991), 73-75.

Sirivong, A., Silphong, B., Simphaly, N., Phayasane, T., Bonouvong, V., & Schelp, F. P. (2003). Advantages of trained TBA and the perception of females and their experiences with reproductive health in two districts of the Luangprabang Province, Lao. *Southeast Asian Journal of Tropical Medicine and Public Health, 34(*4), 919-28.

Taylor J, Wilkinson D, & Cheers, B. (2008). Working with communities in health and human services. South Melbourne: Oxford University Press.

Weaver, L., & Cousins, J. B. (2004). Unpacking the participatory process. *Journal of MultiDisciplinary Evaluation, (1)*1, 19-40.

White, L. T., Archer, D., Aronson, E., Condelli, L., Curbow, B., McLeod, B., Pettigrew, F. T., & Yates, S. (1984). Energy conservation research of California's utilities: A metaevaluation. *Evaluation Review, 8*(2), 167-186.

Wilson, M. (2001). *Local health planning to meet the needs of communities*. 6th Australian National Rural Health Conference. Canberra 2001.

World Vision International (WVI). (2009). Important updates: LEAP and child well–being. Retrieved from http://www.transformational-development.org/Ministry/TransDev2.nsf/34874E1F560858F088256F1000603B96/$file/LEAP%20Updates%20-%20LEAP%20and%20Child%20Well-Being.pdf

World Vision International (WVI). (2007). LEAP: Learning through evaluation with accountability & planning: World Vision's framework to design, monitoring, and evaluation (2nd ed.). Washington, DC: WVI.

World Vision International. (2011). World Vision's Development Programme Approach. Retrieved from http://www.transformational-development.org/ministry/transdev2.nsf/Brief_Overview_Development_Programmes.pdf

Zakus, J. & Lysack, C. (1998). Revisiting community participation. *Health Policy and Planning, 13*(1), 1-12.