

7

EMPOWERMENT EVALUATION AND ACCREDITATION CASE EXAMPLES

California Institute of Integral Studies and
Stanford University

David Fetterman

Empowerment evaluation is the use of evaluation concepts, techniques, and findings to foster improvement and self-determination (Fetterman, 1994, 2005a). It is an approach that:

aims to increase the probability of achieving program success by (1) providing program stakeholders with tools for assessing the planning, implementation, and self-evaluation of their program, and (2) mainstreaming evaluation as part of the planning and management of the program/organization (Wandersman, Snell-Johns, Lentz, Fetterman, Keener, Livet, Imm, & Flaspohler, 2005, p. 28)

Empowerment evaluation is a form of self-evaluation designed to help people accomplish their objectives through cycles of reflection and action. This approach values both processes and outcomes. It is used to enable people to establish their own goals, baselines, and benchmarks. It is well suited to accreditation self-studies, as it is designed to engage people and foster participation and collaboration in the process of conducting an evaluation. It is based on the assumption that the more closely stakeholders are engaged in interpreting and reflecting on evaluation findings in a collaborative and collegial setting, the more likely they are to take ownership of the results. Two accreditation self-study examples from opposite ends of the academic spectrum, the California Institute of Integral Studies and Stanford University's School of Medicine, will be presented to highlight the capacity of this approach to help people create their own learning organizations (Argyris, 1999; Senge, 1990).

Background

Empowerment evaluation has become a world-wide phenomenon. Empowerment evaluations are conducted in Australia, Brazil, Canada, Israel, Finland, Japan, Mexico, Nepal, New Zealand, South Africa, Spain, United Kingdom, and throughout the United States. Projects range from a large-scale \$15 million Hewlett-Packard Digital Village (Fetterman, 2005b) to a series of small-scale local township health programs in South Africa. Settings range from universities and hospitals to Native American reservations. The popularity of the approach is due in part to its simplicity, transparency, and face validity.

Empowerment evaluation is guided by specific theories, principles, concepts, and steps. This approach has been particularly appropriate and effective in the creation, development, and facilitation of learning communities (Rogoff, Matusov, & White, 1998). Learning communities are instrumental in accreditation efforts, since accrediting agencies are looking for community participation, involvement, and action.

This discussion begins with an introduction to empowerment evaluation, including the theories, principles, concepts, and steps that guide it. Building on this introduction, examples of empowerment evaluation in two accreditation efforts are presented: California Institute of Integral Studies and Stanford University. The contrasting settings provide an insight into the adaptability of the approach and the common themes associated with evaluation and accreditation.

Theories

The most important theory driving empowerment evaluation is *process use*. *Process use* states that the more that people conduct their own evaluations the more they will buy into the findings and recommendations, because they are their findings and recommendations. This is important because one of the most significant problems in evaluation is knowledge utilization. Too often evaluation findings sit on the shelf and gather dust. Empowerment evaluation, guided by the theory of *process use*, increases the probability of evaluation data being used to inform decision-making and thus improve use.

Empowerment evaluation is also guided by two additional theories: theory of action and theory of use. The theory of action is the espoused or stated program purpose or organization mission. The theory of use is the actual observed behavior. Often these two theories do not match and may even contradict each other (see Figure 7.1). Empowerment evaluation is a tool to provide continual feedback to faculty and staff members, as well as students to help them align these theories. Ideally, theories of action and use are consistent and help to ensure that people are “walking their talk.”

Principles

Empowerment evaluation is also guided by principles that are designed to ensure quality (Fetterman & Wandersman, 2005). They also ensure an additional measure of consistency. The aim is to adhere to the spirit of empowerment evaluation, rather than the letter of the law. The 10 principles are:

1. *Improvement* – empowerment evaluation is not a neutral experiment; it is designed to use evaluation to help people accomplish their objectives;
2. *Community ownership* – communities have the right to make decisions about actions that affect their lives; a sense of ownership (of the evaluation) is key to knowledge utilization;

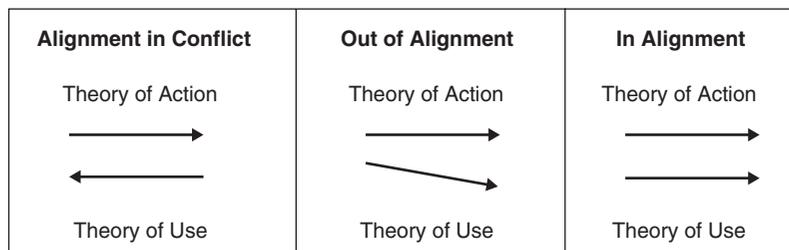


Figure 7.1 Alignment of theories of action and use

3. *Inclusion* – broad representation of participants should be recruited and asked to participate; diversity is additive not subtractive;
4. *Democratic participation* – empowerment evaluation has faith in the capacity of human beings for intelligent judgment and action if proper conditions are furnished; decisions should invite participation and be transparent;
5. *Social justice* – recognition of the fact that there are basic social inequities in society and that there is a need to strive to ameliorate these conditions by helping people use evaluation to help improve programs that impact their social conditions; there also needs to be a commitment to a fair, equitable allocation of resources, opportunities, obligations, and bargaining power;
6. *Community knowledge* – empowerment evaluation respects and values community knowledge – the tacit “know-how” knowledge of stakeholders;
7. *Evidence-based strategies* – empowerment evaluation respects and uses the knowledge base of scholars; communities are encouraged to adapt evidence-based knowledge, rather than adopt it; use of the literature helps to avoid reinventing the wheel;
8. *Capacity building* – enhance stakeholders’ ability to conduct evaluation and to improve program planning and implementation;
9. *Organizational learning* – use data to inform decision making, implement practices based on the data, and evaluate new practices; inquire into the systemic consequences of actions rather than settle for short-term solutions that do not address the underlying problem; and
10. *Accountability* – did the program accomplish its objectives; stakeholders work together, holding each other accountable and building on each other’s strengths to achieve results; empowerment evaluations exist within the context of the existing policies and standards that the program is already being held accountable to for the project/program.

The principles guide every step in the process of conducting an empowerment evaluation. For example, the principle of improvement emphasizes that this is not a neutral scientific experiment. The purpose behind empowerment evaluation is to use evaluation to help programs improve. It is not a test to see if the program works or not. The assumption is that there has been an initial screening by the funder that the program merits the “seed money” or initial investment and that evaluation can be used in the same manner as a financial counselor or advisor, to enhance the probability that the investment is paying off and serving the intended audience or population. The principle of community knowledge highlights the importance of respecting and relying on community knowledge to understand the local situation or context. Capacity building is fundamental, because if program participants are not learning how to conduct some part of their own evaluation then they are probably not building self-determination skills and experience. Finally, accountability is a critical principal because the bottom line is: did the program produce the desired results or not? The process is important but not an end in itself. The approach is designed to help programs accomplish their objectives. These principles serve as an important lens in which to view and conduct an empowerment evaluation, guiding the evaluator, participant, staff member, community member, and funder throughout the entire effort. Empowerment evaluation principles help keep the evaluation on track, authentic, and meaningful.

Concepts

Empowerment evaluation is also guided by key concepts including: critical friends, culture of evidence, cycles of reflection and action, community of learners, and reflective practitioner (see Figure 7.2). A critical friend is an evaluator who believes in the purpose of the program, but is critical and analytical. They are a trusted colleague, rather than an external expert or outsider. They can help set the tone for dialogue, helping to establish a positive and constructive learning climate. They pose questions diplomatically to ensure rigor and honesty because they want the program to be more

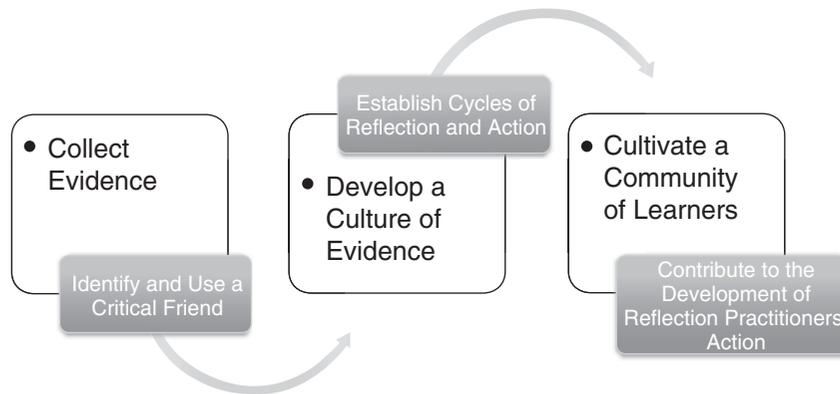


Figure 7.2 Critical concepts in empowerment evaluation

effective and accomplish its objectives. Empowerment evaluations are conducted by program participants and staff members. An empowerment evaluator is a critical friend helping to facilitate the process, rather than an external expert controlling it.

A culture of evidence is created by asking people why they believe what they believe. They are asked for evidence or documentation at every stage so that it becomes normal and expected to have data to support one's opinions and views. Cycles of reflection and action consist of the process of using evaluation data to think about program practices and then using the data to inform decision making, for example implementing new strategies, eliminating ineffective ones, and so on. The concept emphasizes the cyclical nature of the process, rather than a unilinear approach. Data are continually fed into the decision-making system with the understanding that the program is dynamic, not static, and will require continual feedback as the program changes and evolves (and periodically stabilizes). Once program changes are made, those too are monitored and evaluated. Empowerment evaluation is successful when it is institutionalized and becomes a normal part of the planning and management of the program, rather than a separate and parasitic entity operating in a "parallel universe." Once institutionalized the cycle of reflection and action is complete because it creates a continual routinized organizational feedback loop.

Empowerment evaluations facilitate an existing community of learners and cultivate new ones. This is critical to an accreditation effort because accrediting agencies are looking for wide-spread faculty, student, and staff member involvement in curricular development, review, and refinement. Empowerment evaluation is driven by the group by design. The group learns from each other, serving as their own peer review group, critical friend, resource, and norming mechanism. A community of learners is reinforcing, not dissimilar from successful weight reduction programs, which rely on peer group pressure. The groups have values held in common and hold each other accountable concerning progress toward stated goals. A community of learners also helps focus the group and keep it on track. Finally, empowerment evaluations produce and then rely on reflective practitioners. Program participants and staff members learn to use data to inform their decisions and actions concerning their own daily activities. This produces a self-aware and self-actualized individual who has the capacity to apply this worldview to all aspects of their life.

Steps

There are many ways in which to conduct an empowerment evaluation. Wandersman uses a 10-step model (Fisher, Chinman, Imm, Wandersman, & Hong, 2006). Fetterman (2001) typically uses a

3-step model. The three-step approach was adopted in both of the case examples presented in this discussion. The faculty, staff members, and students were asked to come up with their: (1) mission, (2) take stock of where they were, and (3) plan for the future. The mission consisted of value statements about their dream or ultimate goals. Taking stock had two parts: (1) prioritizing the list of activities they were engaged in; and (2) rating how well they were doing in each area. After engaging in a dialogue about the ratings and providing evidence for the ratings, the group developed their own plans for the future. That consisted of: (1) goals (associated with the activities evaluated), (2) strategies to accomplish the goals, and (3) credible evidence to document that the strategies were implemented and were successful. A second “taking stock” session was conducted six months later to compare the initial baseline taking stock ratings with a second taking stock exercise. The implemented strategies were monitored to determine if they were effective or if they needed to be replaced, allowing for mid-course corrections as needed. The second taking stock exercise was conducted after enough time had elapsed for group members to implement the new intervention (or plans for the future) and receive feedback on the implementation effort.

Two concrete and purposely different types of schools have been selected to demonstrate the value of empowerment evaluation in accreditation. The first is a progressive, rigorous, and spiritually-oriented school and the second is an innovative medical school in a tier-one academic research university.

Case Example: California Institute of Integral Studies

The California Institute of Integral Studies (CIIS) is an independent accredited graduate school located in San Francisco. CIIS combines mainstream academic standards with a spiritual orientation. It has three schools: the School of Professional Psychology, the School of Consciousness and Transformation, and the School of Undergraduate Studies. It adopted an empowerment evaluation approach to prepare for an accreditation site visit. All units, including academic and administrative departments, conducted self-evaluations of their programs. Workshops were conducted to train chairs, deans, and the president on how to facilitate the process in their own areas. They developed their own mission (or sub-mission statements), prioritized the list of activities they were engaged in so that they could then select 10 to rate or evaluate. Then each member of the group evaluated each activity, rating the activities on a 1 (low) to 10 (high) scale. Individual ratings were combined to produce a group rating for each activity and one for the entire group’s effort for their program. They engaged in a discussion about the ratings and assessments and then established a plan for the future (or intervention) based on their assessments. The plans for the future included specific goals, strategies, and evidence and the group monitored their strategies to determine if they were effective and helping them accomplish their objectives.

As shown in Figure 7.3, they rated themselves highly on a 10-point scale in the following categories: teaching (7.4), curriculum development (7.4), and experimental pedagogy (8). This appeared reasonable because it was a school devoted to teaching, innovation, and experimentation. Conversely, they rated themselves low in the following areas: scholarship (5.5), research (5.8), and diversity (5.4). The documentation was straightforward in both cases (e.g., student evaluations of courses, external site visit reports, record of research and publications, and numbers of students, faculty, and staff of color).

Collecting the data (with a more focused purpose in mind) helped to contribute to a culture of evidence. Discussing the data provided members with an opportunity to establish norms concerning the meaning of terms and ratings. These ratings and discussions represented one of the first baselines established in the Institute, allowing for additional data point comparisons over time.

They used this self-evaluation data to help create a strategic plan or plan for the future, which included building on strengths, such as teaching, and making a concerted effort to improve their

Empowerment Evaluation and Accreditation Case Examples

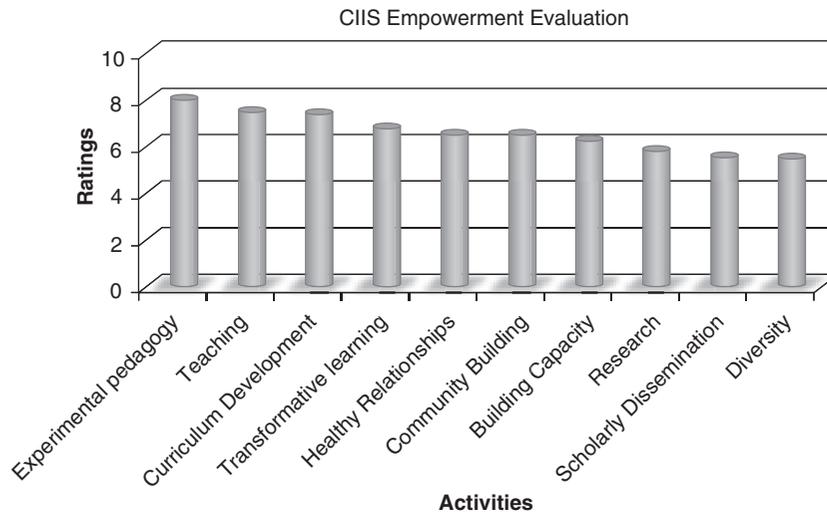


Figure 7.3 CIIS example of 'taking stock' ratings

efforts in the areas of research and scholarship. They established specific goals and timelines. The dialogue was synergistic. They decided to pursue the scholarship of teaching, specifically combining their experimental pedagogy with their collaborative research. This is in alignment with the Carnegie Foundation for the Advancement of Teaching recommendation. This fusion of teaching and research prepared the groundwork for publications about their practice, including professional association presentations, articles, and books in a new area of inquiry, for example synergistic inquiry (Tang & Joiner, 2006). The process of evaluation, self-reflection, and action or cycles of reflection and action also produced significant curricular changes ranging from expanding the online component of the school to discontinuing one of its Ph.D. programs.

Concerning the Ph.D. program, the viability of the program had been a significant concern for many years. Students stated they were not getting sufficient faculty member attention. Faculty members were dedicated to the students and the program, however, they complained of burn-out. The empowerment evaluation process gave them a tool to analyze the faculty-to-student ratios and dissertation loads in a nonthreatening and unemotional manner. The answer to the conundrum was simple: there weren't enough faculty members to serve the number of graduate students in the program. It was a disservice to faculty and students to continue the program in its format and size at that time. An executive decision by the faculty and student body was made to close the program. This was a significant measure of internal accountability displayed by the institution.

The Provost institutionalized this process by requiring self-evaluations and unit plans on an annual basis to facilitate program improvement and contribute to institutional accountability. The seeds of this empowerment evaluation effort were sown in this school and adopted again many years later in the school's development, providing guidance on the future growth of its Somatic Program.

Case Example: Stanford University School of Medicine

The School of Medicine at Stanford University is one of the most highly rated medical schools in the United States, combining biomedical research with clinical education and information technology. It provides pre-clinical academic training, clerkship rotations in hospital settings, and an opportunity to explore scholarly concentrations (a mini-scholastic program designed to help students inquire

about a specific medical area of research in more depth during medical school training). The School of Medicine also adopted an empowerment evaluation approach to prepare for its accreditation site visit. It involved stakeholders in an egalitarian process of review, critique, and improvement. The approach was used throughout the curriculum ranging from preclinical course work to clerkship rotations and scholarly concentrations. The purpose of the curriculum is to prepare medical students for residency training and practice. Concerning coursework, empowerment evaluation was particularly effective in creating a community of learners, a culture of evidence, and course improvement.

An empowerment evaluation approach was adopted changing five critical features of that process: (a) the information was collected and fed back to faculty (using mid-course focus groups and accompanying memorandum, as well as end of the course online student evaluations with a minimum of an 80% response rate); (b) faculty were asked to respond to student feedback (collected and summarized by the evaluation team) and provide their own insights about the course separate from the students' views; (c) the evaluation team, course directors, and students entered into a dialogue about the findings facilitated by a critical friend (the Director of Evaluation); (d) the student assessments and faculty insights were shared with the school curriculum committees, to help build a larger community of learners and positive peer pressure to monitor and improve performance; and (e) the new strategies were implemented, monitored, and evaluated to maintain an ongoing cycle of reflection and action. This process had a dramatic impact on the quality of instruction, curricular coordination, and student ratings. In addition, the empowerment evaluation process provided faculty and students with an opportunity to collaborate between courses, improving the logical sequencing of courses and removing unintended redundancies. Empowerment evaluation helped faculty and students identify and address broader cross-cutting curricular issues.

For example, the Cells to Tissues course, a required course in the curriculum, had very low ratings which were steadily declining year after year (see Figure 7.4). The reason for the decline was that, to the extent that evaluative data were collected, the communication about the findings and recommendations was unilinear or one-way. The information was collected but rarely compiled. When it was compiled it was simply sent to the faculty and focused exclusively on student assessments of their courses. Course directors and students applied the empowerment evaluation approach to this course and engaged as a community of learners. They reviewed evaluation findings and produced viable

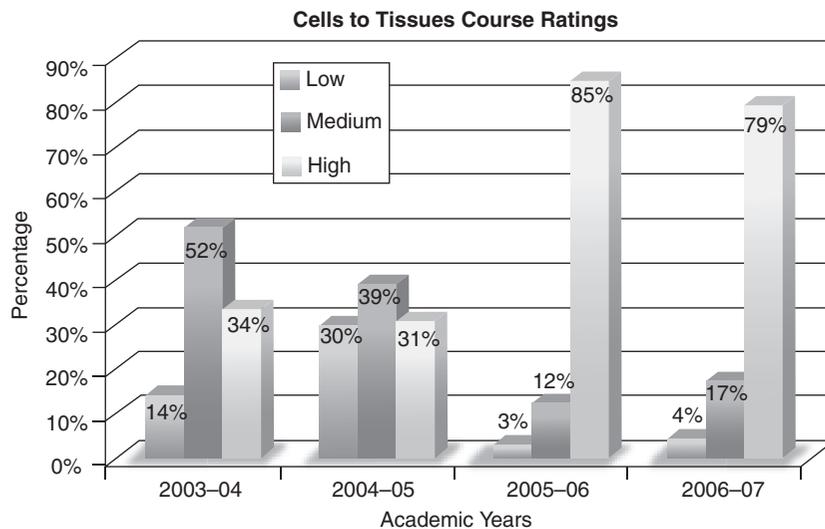


Figure 7.4 Cells to Tissues course ratings

options to respond to problems and build upon their successes. The same course ratings changed 180 degrees in one year, based on the feedback, exchange, dialogue, and action.

The same approach was used in the clerkships with similar success. For example, the obstetrics/gynecology clerkship received low student ratings and requested empowerment evaluation assistance (see Figure 7.5). The critical friend or coach facilitated the process and the faculty and students identified specific weaknesses in the curriculum and instruction. They also revised their curriculum, clarifying goals and expectations. They also improved their orientation and tutorial training modules. Student ratings of “very good/excellent” increased by 26%. (See Fetterman, 2009, for details about empowerment evaluation applied to clerkships.)

Empowerment evaluation was also used to reinvigorate the Scholarly Concentrations program. In the middle of the “taking stock” discussion and dialogue, a debate arose focusing on governance and authority. One half of the group thought they needed to take charge and begin to make policy, establish standards, and enforce existing policies. The other half did not think they had the authority to make any changes or enforce any pre-existing program requirements. This led to a stalemate in which little could be done with the scholarly concentration program. The dialogue component of the process positioned an intellectual spotlight on this “conceptual elephant in the middle of the room.” It led to a review of the bylaws of the school, clearly designating the directors with the authority to create and modify program policy. The scholarly concentration directors realized they were all in charge of the program and could move forward with specific policy recommendations. The rating scales were used as a launching point in order to engage the group in an extended dialogue, as well as the baseline in which to measure future changes. The empowerment evaluation approach created an environment conducive to empowerment (no one can empower anyone but themselves). The scholarly concentration directors came to the conclusion that they were in charge of the program (a fundamental governance finding), which enabled them to make critical programmatic decisions. Previous to this epiphany, the directors were unable to make decisions concerning critical facets of the program. The insight was liberating and empowering. It also enabled the program to grow and approximate its goals.

Finally, a comparison of student ratings across the medical school curriculum before and after conducting an empowerment evaluation (see Figure 7.6) revealed a statistically significant improvement ($p = .04$; Student’s 1-sample t-test). The results of this study are discussed in detail in Fetterman, Deitz, and Gesundheit (2010).

External metrics were also used to measure the effectiveness of empowerment evaluation on the curriculum, including United States Medical Licensing Examinations (focusing on clinical knowl-

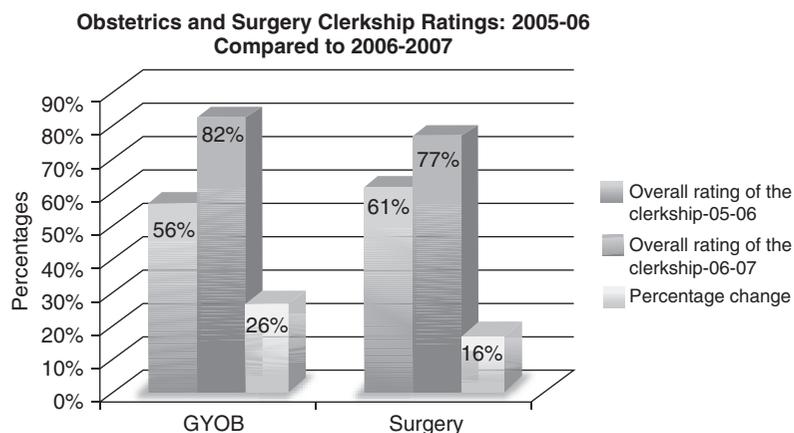


Figure 7.5 Obstetrics and Surgery course ratings

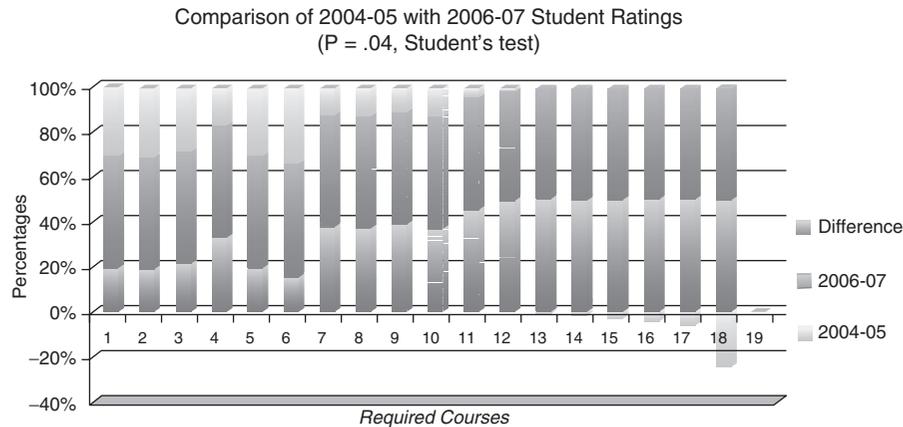


Figure 7.6 School of Medicine course ratings across the required curriculum

edge and clinical skills) as well as student/alumni performance in their first postgraduate year of residency training (Residency Director's Assessment of Clinical Performance). The aggregate measures indicate that student education was maintained at a high level or enhanced by the new curriculum and corresponding empowerment evaluation process used to refine it.

Conclusion

Empowerment evaluation was successful in helping both schools become re-accredited. In the process of applying this approach, the faculty, staff members, students, and administration became engaged in cycles of reflection and action about their own institutions. Faculty engagement made it more meaningful and fostered a sense of ownership concerning the data and the approach. There was more buy-in because the findings and recommendations were their own. They conducted the self-evaluation within the context of what the accrediting agency was holding them accountable for (the self-assessment was not conducted in a vacuum). On the surface, the approach helped people group together to tackle common curricular and administrative problems. On a deeper level, empowerment evaluation helped them coalesce as a collective agent of curricular and administrative change. The result was empowering.

External teams were also invited to review both schools. However, they were invited as additional critical friends (within the context of conducting an empowerment evaluation), providing a strategic consultation, rather than a compliance or traditional accountability review. This demonstrated how internal and external evaluations are not mutually exclusive; rather they are reinforcing and enhance each other, as long as they are rooted in internal institutional concerns. Empowerment evaluation provides educational institutions with an approach that balances accountability with a commitment to improvement. Empowerment evaluation is in alignment with the evolving culture of education and educational assessment throughout the United States and the world.

References

- Argyris, C. (1999). *On organizational learning*. Malden, MA: Blackwell Business.
- Fetterman, D. M. (1994). Empowerment evaluation. *Evaluation Practice*, 15 (1), 1-15.
- Fetterman, D. M. (2001). *Foundations of empowerment evaluation*. Thousand Oaks, CA: Sage.
- Fetterman, D. M. (2005a). A window into the heart and soul of empowerment evaluation: looking through the

Empowerment Evaluation and Accreditation Case Examples

- lens of empowerment evaluation principles. In D. M. Fetterman, & A. Wandersman (Eds.), *Empowerment evaluation principles in practice* (pp. 1–26). New York, NY: Guilford Press.
- Fetterman, D. M. (2005b). Empowerment evaluation: From the digital divide to academic distress. In D. M. Fetterman, & A. Wandersman (Eds.), *Empowerment evaluation principles in practice* (pp. 92–122). New York, NY: Guilford Press.
- Fetterman, D. M. (2009). Empowerment evaluation at the Stanford University School of Medicine: Using a critical friend to improve the clerkship experience. *Ensaio: Aval. Pol. Publ. Educ., Rio de Janeiro* 17(63), 197–204.
- Fetterman, D. M., Deitz, J., & Gesundheit, N. (2010). Empowerment evaluation: A collaborative approach to evaluating and transforming a medical school curriculum. *Academic Medicine*, 85 (5).
- Fetterman, D.M. and Wandersman, A. (Eds.). (2005). *Empowerment evaluation principles in practice*. New York, NY: Guilford Press.
- Fisher, D., Chinman, M., Imm, P., Wandersman, A., & Hong, K. (2006). *Getting to outcomes with developmental assets: Ten steps to measuring youth programs and communities*. Minneapolis, MN: Search Institute.
- Rogoff, B., Matusov, E., & White, C. (1998). *Models of teaching and learning: Participation in a community of learners*. London, UK: Blackwell.
- Senge, P. (1990). *The fifth discipline: The art and practice of organizational learning*. New York, NY: Doubleday.
- Tang, Y. & Joiner, C. (Eds.). (2006). *Synergic inquiry: A collaborative action methodology*. Thousand Oaks, CA: Sage.
- Wandersman, A., Snell-Johns, J., Lentz, B., Fetterman, D.M., Keener, D., Livet, M., Imm, P., & Flaspohler, P. (2005). The principles of empowerment evaluation. In D. M. Fetterman, & A. Wandersman (Eds.). *Empowerment evaluation principles in practice* (pp. 27–41). New York, NY: Guilford Press.