

Program evaluation for counseling clinics

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Program Evaluation of Introduction Rigorous and effective program evaluation is used by stakeholders such as governments, financiers, policymakers, and service providers to ensure that the intended services are provided to the target consumers and to ensure programs meet their objectives. It is therefore imperative that those mandated to evaluate service projects related to health and well being such as hospitals, nursing homes, and homes for the homeless, counseling clinics, substance abuse clinics, emergency services, crisis centers, social support, and special school programs establish the most effective program evaluation designs (Burt et al., 1996). This paper outlines a basic program evaluation design for counseling clinic, incorporating the possible steps to be followed, the pitfalls, challenges, and the constraints to be avoided while implementing a project evaluation programs for counseling clinics.

Evaluation Design and Steps for Counseling Clinics

In many instances, people are often worried about how to evaluate counseling programs. The strategies outlined in this paper are quite useful in getting one started on counseling program evaluation, which requires a thorough evaluation. Though some might consider counseling evaluation a waste of resources, questions related to evaluation such as “ Are we making a difference, are the participants benefiting, how are things going,” often linger in counselors’ minds (Burt et al., 1996). Whatever design opted for, counseling clinic evaluations should not only identify but also document a program’s expected and realized outcomes, indicators, and activities. Second, counseling clinic evaluations should assess the quantity and the quality of the achievements attained at the time of evaluation.

Determination of the Outcomes, Activities, and Indicators

In counseling clinic evaluations, the desired outcomes, activities, and indicators should be done

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at the planning stages. For instance, the expected outcomes must be included in the grant writing phase of the project. Nonetheless, if this was never done at the grant writing stages, strategic planning and evaluation of program outcomes can be done at any stage of program implementation. The fact is that it pays to identify and document a program's outcomes, activities, and indicators by which the success of the said project would be evaluated. The outcomes and the activities by which they are to be achieved should however be reasonable and not excessively unrealistic. This is not to say that one should not strive to achieve these goals. In essence, they should be clearly defined and measurable. While activities refer to the interventions that would lead a counseling clinic to its intended outcomes such as providing clients with information for making informed choices, changed health behavior and increased quality and years of healthy life, indicators are the gauges, which show the extent to which a counseling program has progressed. The indicators to be evaluated include timelines, accuracy, appropriateness, and frequency of counseling. While doing a counseling clinic evaluation, it is important that its progress is evaluated in several suggested ways. These include examining the quantity and the quality of program activities delivered and the quantity and quality of the outcomes achieved. Good indicators to measure these types of progresses should hence be established as they offer an insight into the progress made towards the realization of program objectives (Bailey & Koney, 2000). The importance of time for discussion in counseling evaluation cannot be overemphasized. Notably, the amount of time needed for discussions and consensus during counseling clinic evaluations varies with the size of the evaluation team, group and facilitator skills, program scope, number of

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participants, and their degree of collaboration. The benefits of such discussions and consensus are that evaluations are quicker and easier besides empowering participants to conclude discussions on vital aspects of evaluation such as outcomes, activities, and indicators. The Four Approaches to Evaluation There are four main approaches or stages of evaluation suggested for counseling clinics. These stages include formative, process, outcome, and impact evaluation. In fact, all these approaches are important since they allow for changes in case a program does not meet its objectives. At the formative stage, which is recommended for new counseling programs, it should be established whether program plans, elements, activities, and resources work as anticipated. Through such an evaluation, counseling participants are best placed to refine and redefine program components and activities. Formative evaluation ascertains that proposed program aims are understood, defines the target group, and checks whether plans and resources are likely to succeed (Bailey & Koney, 2000). On the other hand, process evaluation, which commences immediately a program starts, should be done to help determine if a counseling clinic effectively reaches its targets. At this phase, problems related to procedures, plans and materials are identified, participants are encouraged, and successes of resources evaluated (Patton, 1997). An outcome phase evaluation, to be started once contact has been made with the target population, should be carried out to measure a program's progress toward achieving its objectives. Finally, impact evaluation is equally vital since it identifies the long-term and other unintended effects of a program on target and non-target population.

Conclusion Due to the enormous resources allocated to human service projects, it is essential that the progress of these programs are evaluated

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regularly. The formative, process, outcome, and impact evaluations are the main approaches used to evaluate human service programs related to health, well being, homelessness, emergency services, and substance abuse. In fact, as many processes, activities, and outcomes as possible must be measured during evaluations to give the clearest picture of a program's progress. References Bailey, D., and Koney, K. (2000). Strategic alliances among health and human services organizations: from affiliations to consolidations. Thousand Oaks: Sage Publications. Burt, M. R., Adele, V. H., Hatry, H. P., Rossman, S. B., and Roth, J. A. (1996). " Evaluation Strategies for Human Services Programs: A Guide for Policymakers and Providers". Retrieved on September 2, 2012 from <http://www.urban.org/url.cfm?ID=306619> Patton, M. (1997). Utilization-focused evaluation: the new century text. Thousand Oaks: Sage Publications.