A Social Worker's Guide to Evaluating Practice Outcomes

Bruce A. Thyer and Laura L. Myers



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We respectfully dedicate our efforts in preparing this book to Alisa Rosenbaum, one of the most inspiring teachers we have ever encountered.

any attempt to roughly gauge our effectiveness in social work and to direct changes in our practices, and perhaps even in our goals, does not mean that a rigid science will supercede a warm and soul-satisfying art. We need not fear that we will be less effective in the knowledge of our weaknesses and in the conservation of our strengths. The art and science of social work must blend if we are to serve humanity with love and with ever-increasing understanding.

Eleanor T. Glueck (1936, p. 27)



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Preface

We prepared this book as a helpful resource for social work students, both graduate and undergraduate, and for social work practitioners who seek a relatively simple introduction to the topic of empirically evaluating the outcomes of their own practice or of the programs provided by their agencies. A concern with determining the outcomes of social work services has long preoccupied our discipline, and rightly so. It certainly antedates the startling and disturbing comprehensive reviews prepared by Steven Segal (1972) and Joel Fischer (1973, 1976) that disclosed to public scrutiny the flimsiness of the evidentiary foundations of social work. Although reactions to these reviews were decidedly mixed, one laudable one was to encourage social workers to roll up their sleeves and more vigorously set about designing and completing credible evaluation studies of our services. These efforts paid off. Now, in the early years of the 21st century, more randomized controlled studies on the effectiveness of social work appear in print in a single year than appeared during all the years prior to 1970.

There are a number of other books dealing with the topic of evaluating practice. We are especially fond of Program Evaluation: An Introduction by Royse, Thyer, Padgett, and Logan (2006). The distinguished team of Bloom, Fischer, and Orme (2006) has authored Evaluating Practice: Guidelines for the Accountable Professional, and this is a wonderfully comprehensive volume, but its 700 plus pages focused exclusively on measurement issues and the use of single-case research designs may prove a bit intimidating for some to digest (although we enjoyed every morsel). At a little over 150 pages, Tony Tripodi's (1994) A Primer on Single-Subject Design for Clinical Social Workers, like Bloom et al., focuses on single-case designs and ignores the use of group-research methods to evaluate practice. Yet there are many occasions when social workers can undertake simple outcome studies using group-research designs, and the present volume presents both methods in a fairly even-handed approach, we hope. We have tried to strike a balance between the virtues of simplicity and practicality, on the one hand, and the sins of oversimplification and lack of rigor, on the other. We thus present a variety of real-life examples of evaluating social work practice, ranging from those fairly low on the scale of internal validity to those that are pretty rigorous, recognizing that inadequate resources may prevent practitioners from frequently undertaking the strongest forms of evaluation. We have also stressed that this is OK. It is always better to have data from a simple outcome study than to have no data at all, so long as one's conclusions are appropriately circumspect. Obviously the names and identities of all clients described in this book have been suitably disguised. We hope that you will enjoy this modest volume, and we encourage readers to provide us (via e-mail to bthyer@mailer.fsu.edu) with your comments and suggestions to improve our future writing.

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A Brief Overview of Evaluation Research

SOME BACKGROUND ON EVALUATING PRACTICE OUTCOMES

There are many facets to evaluation research apart from the assessment of client outcomes. For example, consumer satisfaction studies examine the degree to which our clients judge that they have been helped (which is not always congruent with other indicators of change, such as more objective indicators of problem resolution). The conduct of client or community needs assessments is another form of evaluation research, as are process studies examining the presumptive mechanisms of change by which social work interventions exert their beneficent effects. Yet another type of evaluation of social work consists of some sort of administrative review of case records, an audit, if you will, of the degree to which required documents or other information is contained in records. However, in this small book, we will be exclusively focused on presenting various methods of evaluating the *outcomes* of social work intervention. While we recognize that this is not the only type of evaluative research needed by our profession, we believe that such studies are among the most important that we, as a field, can undertake. More on this latter point in succeeding pages.

The evaluation of social work treatment can be initially conceived as trying to obtain credible answers to one or more questions, questions ranging in difficulty from the apparently simple to the exceedingly complex. Here is one such set of questions that are often of keen interest to the social work practitioner:

- 1. Did the clients get better?
- 2. Did the clients improve more, relative to what would have been expected with no treatment?

- 3. Did the clients improve more, relative to what would have been expected with a credible placebo treatment or nonprofessional care?
- 4. Did the clients improve more, relative to what would have been expected if they had received treatment as usual?
- 5. Were any improvements long lasting?
- 6. Were there meaningful improvements in other areas of the clients' lives (e.g., quality of life) besides those that were the specific focus of treatment?
- 7. Were there any negative side effects or consequences to treatment?
- 8. How does the intervention work?

We will suggest in this volume that a program of evaluation research is best undertaken along similar lines. First, try to demonstrate that clients who receive a given intervention do indeed improve. Then, and only then, should you try to address the subsequent questions in the above list, an endeavor that could roughly follow the order in which we have laid them out. After answering question number one, then address number two, and see if the improvements were better than those that are found without having the treatment. Many psychosocial problems wax and wane simply with the passage of time or with the ebb and flow of environmental stressors. It is important to demonstrate that social work clients improve more through receipt of our professional services than if they had simply allowed for the passage of time. Then there are the potentially positive effects of what have variously been called nonspecific treatment effects or the placebo factor, the soothing influence of knowing that you are in good hands and receiving some sort of plausible assistance. We would hope that a professional social worker's clients would be better off than clients receiving care at the hands of a nonprofessionally trained helper. Such hopes are not always fulfilled.

For example, at one mental health center, 160 troubled children were randomly assigned to receive psychotherapy from professionally trained psychotherapists such as psychologists, social workers, or nurses or to receive academic

tutoring by graduate students or elementary school teachers. Treatment lasted about two years and involved an average of 60 sessions of psychotherapy or 53 sessions of tutoring. A number of reliable and valid measures of psychosocial functioning were administered to the children before the study began and at the end of the study. Fortunately, it was found that the children receiving legitimate psychotherapy experienced significant improvements in their psychosocial functioning. This, of course, was a desirable outcome. Curiously, though, the children who received academic tutoring experienced similar improvements in psychosocial functioning, demonstrating the apparent equivalence of low-cost, nonprofessional tutoring to high-cost professional psychotherapy (see Weiss, Catron, Harris, & Phung, 1999).

The above study demonstrates that the apparent equivalence of professional and nonprofessional or placebolike intervention (we would not have predicted that simple academic tutoring would produce improvements in mental health, at least not to the extent obtained by trained psychotherapists) is not an isolated finding. Strupp and Hadley (1979) randomly assigned 30 college undergraduates troubled with anxiety or depression to two sets of "therapists." One set of therapists was highly experienced and professionally trained doctoral-level psychotherapists (average length of practice experience was 23 years) and the other therapists were equivalently educated college professors (e.g., doctoral level) with no professional training or experience in the conduct of psychotherapy. The students who received psychotherapy from trained professionals demonstrated significant improvements. This is good. However, the students who received "psychotherapy" from the nonprofessionally trained college professors improved just as much. One would hope that social services provided by professionally trained social workers would somehow be more effective than similar services provided by individuals lacking such professional training, and, to some extent, our entire system of professional training is justified by this assumption. But assumption it is and will likely remain as such until suitably controlled studies can be designed and undertaken to test these assumptions. Such demonstrations are important since at least one initial quasi experiment has looked at the effectiveness of child welfare services provided by social workers versus individuals with non-social work degrees hired into similar child welfare positions

and found that individuals with bachelor of social work (BSW) and master's of social work (MSW) degrees were not evaluated by their supervisors as superior workers (Perry, 2006).

We can be pretty sure that in each of the above examples, the professionally trained social workers and psychotherapists were themselves confident that the services they were providing were not only helping their clients, but were in some significant manner of greater assistance than services provided by supposedly less-capably trained individuals. Yet, the actual results evaluating these services did not reveal this to be the case. Our field is replete with examples wherein the services provided by social workers turned out to be very effective indeed, but the converse is also true. Many studies have shown that sometime what we do turns out to be ineffective and, indeed, sometimes harmful (Fischer, 1976). In one classic study on the effectiveness of casework services provided by MSWs over a one-year period to senior citizens, it was found that clients receiving professional social work care had a higher mortality rate than the clients who got services from non-social workers (Blenkner, Bloom, & Nielsen, 1971). This was a most unexpected and indeed shocking finding, and the lesson for all of us is that we cannot blithely assume the benignant effects of social work care.

Professional social work has a long tradition of conducting systematic evaluations of the outcomes of our services, with one of the earlier such studies being a long-term outcome study of children who had been placed in foster homes (van Senden Theis, 1924). This important work involved the follow-up of over 900 children and has rarely, if ever, been replicated. Additional pioneering evaluation work was carried out by Heckman and Stone (1947), Powers and Witmer (1951), and Meyer and Borgatta (1959), with some of these early outcome studies being reviewed in 1962 by Anne Shyne. While we may debate whether our field has devoted sufficient attention to the evaluation of social work practice (most writers suggest that we have not), there is no doubt that from, the very beginnings of our profession, such efforts have been seen as of crucial importance. Bloom et al. (2006) cite one such statement from Dr. Richard Cabot in 1931 in his address at a national social work convention:

I appeal to you. . . measure, evaluate, estimate, appraise your results, in some form, in any terms that rest on something beyond

faith, assertion, and "illustrative case." State your objectives and how far you have reached them. . . Let enough time elapse so that there may be some reasonable hope of permanence in the results which you state. The greatest value [of evaluation of practice] will be... an evaluation of one method against another. . . . Out of such evaluations will come, I hope, better service to the client. (p. xiii)

The views of Cabot and other historical figures in our field have been taken to heart to such an extent that evaluation studies on the effectiveness of our professional services are now widely seen as the single most significant type of research that social workers can engage in. Table 1 presents a summary of such views.

Table 1: Some Views on the Vital Importance of Evaluation Research in Social Work

- The third type of research, evaluative studies of welfare programs and the activities of practitioners are the most important of all. (Angell, 1954, p. 169)
- Social work, as other professions, must take responsibility for evaluating its training, its practice, and its results. (Preston & Mudd, 1956, p. 39)
- Social work is not a science whose aim is to derive knowledge; it is a technology whose aim is to apply knowledge for the purpose of control. Therefore, on the research continuum, social work research falls nearer to the applied end because of its purpose of practice knowledge. (Greenwood, 1957, p. 315)
- Evaluation and client feedback are not only necessary for effective service delivery, but are an ethical requirement for the profession. Systematic methods must be developed to assess whether social workers are helping, harming, or doing nothing for the people they serve. (Rosenberg & Brody, 1974, p. 349)
- Social work has no more important use of research methods than the assessment of the consequences of practice and policy choices. . . . Small-scale,