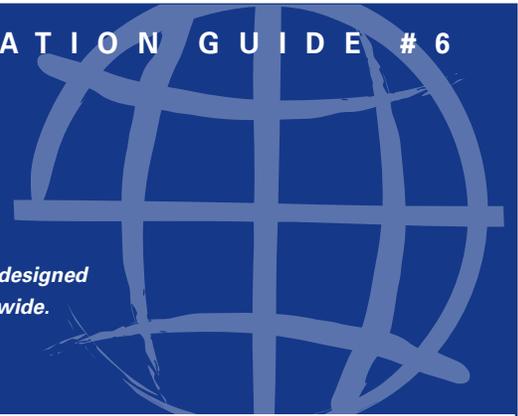


Rapid Evaluation

I-TECH's Technical Implementation Guides are a series of practical and instructional papers designed to support staff and partners in their efforts to create and maintain quality programs worldwide.



For many evaluators, working quickly under extremely tight time constraints is considered a normal part of their jobs. Often, evaluations are allotted as little as a few weeks to be carried out, from start to finish. Despite the limited time frame, however, evaluations are expected to be accurate, detailed, and insightful so that important program-related decisions—like whether to continue, scale-up, or discontinue—can be made with confidence. Rapid evaluation is a tested, reliable way to conduct a rigorous evaluation within a short time frame without sacrificing quality. Rapid evaluation is an approach that uses intensive, team-based fieldwork, multi-method data collection, simultaneous data analysis, and community participation. This method is fast, cost-effective, and yields accurate information; it can be used in circumstances where time or resources are short, or the issues in question are yet to be clearly articulated.

The purpose of this guide is to introduce the basic concepts and methods used in rapid evaluations, and to demonstrate how this approach can be applied to the various stages of program development and implementation.

What Is a Rapid Evaluation?

A **rapid evaluation** (RE) is an intensive, team-based, program-focused investigation that uses multiple methods of data collection; has an iterative process for collection and analysis; and relies on **community** participation in order to quickly develop a holistic understanding of a program from both an insider's and an outsider's perspective. An **"iterative process"** refers to a flexible information discovery process in which local knowledge is reconstructed through a cycle of data collection, analysis, and planning of what to examine next. In RE, the primary

data collection methods are qualitative—interviews, direct observations, focus group discussions, and so on—though quantitative techniques like surveys are often used. Data is typically collected and analyzed by field-based teams that are led by experienced professionals who have considerable knowledge of qualitative methods as well as RE principles and techniques. Finally, an RE can take from 4 days to 6 weeks to accomplish, though the average time frame ranges between 4 and 6 weeks.

It is important to note that "rapid evaluation" does not mean "rushed evaluation." Even though REs take much less time to conduct than traditional evaluations, the amount of "frontloading," or preparation work done beforehand, can be roughly the same. Because the RE timeframe is short, the workplan and timetable must be well thought out ahead of time. Methods must be strategically considered, and the process of data collection and analysis must be synchronized to prevent idle downtime for the field-based data collection team.

Development of the RE Method

"Rapid evaluation" is one of many terms to describe a family of similar evaluation methods and models. Others in this family include "rapid assessment," "participatory action research (PAR)," "rapid assessment process (RAP)," and "rapid assessment, research, and evaluation (RARE)." They all share the same basic principles, methods, and emphasis on speed. The approach is rooted in the tradition of cultural anthropology, specifically ethnography, which involves the in-depth study of a cultural system such as a community, an organization, or an ethnic group.

To understand the elements of a cultural system, ethnographers rely mostly on qualitative research

Important Terms and Definitions

Rapid evaluation: a team-based approach to evaluation that uses multiple methods and local participation to quickly assess programs.

Iterative process: a flexible discovery process in which local knowledge is reconstructed through a cycle of data collection, analysis, and planning what to examine next.

Community: a group of people who share a common interest or self identify around particular issues or concerns.

Formative evaluation: an evaluation type where the processes of a program are being evaluated while the program is beginning or in progress.

Stakeholders: key people in the community who have a sense of ownership or concern about a problem or condition.

Validity: the degree of accuracy to which a study measures the specific issues in question.

Reliability: the degree to which a study yields the same or similar results when repeated.

Nominative sampling technique: a way to select people to interview by having informants suggest other informants to interview.

“High impact” quotes: particularly significant sentences and phrases documented by the scribe during a key informant interview.

methods that render detailed, in-depth data about human behavior within a social context. Traditional ethnography, however, has several major drawbacks that limit its usefulness to programs, including the time required to conduct ethnography (at least a year), and the emphasis on theory-building rather than generating information useful to program study and improvement. Moreover, early program assessments and evaluations had the reputation of being unscientific and lacking the substance and rigor of traditional research. In the 1980s, however, a number of rapid assessment and evaluation models were developed that adapted traditional ethnographic methods to fit the immediate and specific needs of programs. These initial models have been refined and improved

over the last 25 years due to advancements in qualitative methodology and data analysis, which have greatly improved the validity and reliability of results. Now, the field of rapid assessment and evaluation is widely accepted and used in many areas, including epidemiology, as well as the studies of addiction, agriculture, the environment, and HIV and AIDS.

When to Use REs

REs, like evaluations in general, can be carried out at any stage of a program. Starting from a **formative evaluation** that takes place prior to program initiation, an RE could be used to determine what issues need to be addressed by a program. At a program’s midterm, an RE could be used to identify and fix problems as they occur. Finally, at a program’s end, an RE could be used to assess successes, weaknesses, and potential for replication and/or scale-up. Additionally, results garnered from a formative evaluation can serve as a baseline for measuring program performance as well as provide valuable contextual information about local beliefs, norms, risk behaviors and “hotspots” that can be integrated into the program design. REs work equally well for midterm and final evaluations. Ideally, RE should be incorporated into a program’s overall design during the planning stage, in order to ensure continuity.

Advantages and Disadvantages of RE

There are many advantages of doing RE. A major one is that it is a cost effective way to quickly obtain a comprehensive, accurate assessment of a program. In the “real world” of programming, time and money are in limited supply. Program staff are under increasing pressure from funders and other stakeholders to demonstrate program performance beyond what is usually presented in quarterly and annual reports. For example, stakeholders want to know, in concrete terms, whether programs are operating successfully and meeting expected targets, and if not, why not. They also want to know which aspects of programs are most effective and which need improvement, and whether the program should be scaled-up or discontinued. A good RE should be able to answer these questions in a short amount of time.

Advantages	Disadvantages
Fast and cost effective	Inappropriate for evaluations requiring formal surveys and statistical analysis
Participatory	Requires a team of trained evaluators
Provide insider's perspective	Evaluation team leader must be highly trained in qualitative research methods
Can provide insight into complicated problems	Less precise than more structured evaluations
Excellent for investigating specific issues and emerging problems	Limited scope and depth
Flexible	

Beyond speed and cost effectiveness, REs are especially useful in the following situations:

- Little background information exists about the issue or problem in question.
- Program performance is unexpected (either better or worse than anticipated) and staff want to understand why.
- Emerging or unexpected problems arise during program implementation and staff want to determine the best way to address them.
- An insider's perspective would be helpful to achieving program success, such as understanding how program beneficiaries view services.
- Staff need to decide whether to scale-up a program, which is done by identifying specific aspects that should be expanded and ones that should be changed or fixed.

Because it uses ethnographic methods, RE can produce rich, detailed information that large surveys that cover wide areas and involve many people cannot. However, RE is not appropriate for all evaluations. For example, RE should not be used if the objective is to gather generalized information about trends and percentages, and if large datasets are required, such as behavioral surveillance data. Further, unlike surveys, which can produce data on many different topics among large populations, the scope of REs is much smaller. REs are not designed to investigate

complex, multifaceted situations requiring statistical analysis, but rather obtain information on more narrow, program-related topics. REs are also inappropriate for assessing program cost effectiveness or other types of economic analysis.

A major disadvantage to RE is that it cannot be conducted by a single evaluator, as one of the basic methodological principles is that it uses teams of evaluators—preferably three to five and even more if the program is large or geographically dispersed. As mentioned, RE teams must have at least one experienced, trained evaluator with expertise in qualitative methods who can guide the data collection and analysis processes. Another problem with RE is that while it generally produces accurate results, the levels of **validity** and **reliability** are not as high as those produced by quantitative methods. In most cases, however, the levels are high enough for program staff to make confident, informed decisions.

The Five Elements of RE

Although there are many rapid evaluation and assessment models currently in use, almost all of them incorporate the five elements described below:

1. Speed: As mentioned earlier, RE can dramatically shorten the research time frame from months to weeks without sacrificing data accuracy and reliability. The “need for speed,” however, requires evaluators to adopt new ways of planning, managing, and applying traditional data collection and analysis methods. For example, the traditional way of managing in-depth interview data is to record, translate, transcribe, and code them in a text-based database—a process that could take months—before the information can be analyzed, which is also a lengthy process. RE can condense this process down to a few days by using interview summaries rather than interview transcripts. Time devoted to data analysis can be greatly reduced by discussing the findings with team members during daily field meetings and incorporating this information into the ongoing evaluation.

2. Teamwork: REs are always done in teams consisting of both “insiders”—people with extensive

Five Elements of Rapid Evaluation

Speed: A well targeted and planned rapid assessment, including data collection, analysis, and recommendations can be completed in 4–6 weeks.

Teamwork: Working in teams not only speeds up data collection but also facilitates the necessary discussion and analysis of findings as they emerge.

Triangulation: Using a mix of complementary qualitative and quantitative methods and multiple data sources increases the validity and reliability of data.

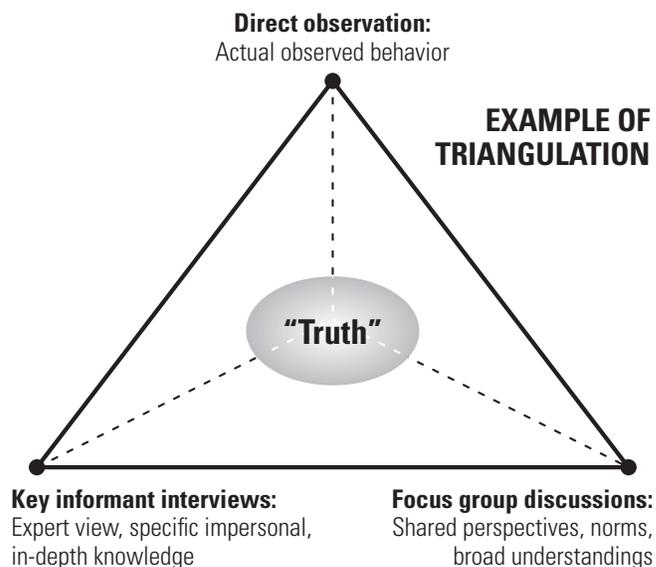
Practicality: Rapid assessments are specific and narrowly targeted to produce useful recommendations for local interventions.

Local participation: Rapid assessments rely on local participants' involvement and guidance to access knowledge and beliefs and assure community ownership.

knowledge of the local language, customs, and community members—and “outsiders”—those with prior technical knowledge and experience in RE. Teamwork is crucial for the iterative processes of data collection and analysis, where team members work in pairs and present and discuss daily findings and their meanings. During these discussion sessions, team members also develop checklists of new and continuing topics to explore the following day, along with the methods they will use to gather the information. This intensive cycle of data gathering and analysis goes on throughout the RE, so that at the end of the evaluation, most of the data analysis is already completed.

3. Triangulation: The strength and speed of the RE model comes from the strategic use of a technique called triangulation—a nautical term that, in social science, means the use of data from various sources to capture different perspectives of the same phenomenon. Methods are juxtaposed so as to reveal more than one facet of a topic or problem. For example, focus group discussions are good for identifying and explaining social norms—the rules or expectations of what people should do, think, and believe. But what people think they are supposed to

do and what they actually do are often quite different. The triangulation process here involves comparing the results of focus group discussions (what people say they do) with data gathered from direct observation techniques (what people actually do). If the two sets of findings contradict each other, the evaluators investigate more deeply to understand the causes of the discrepancies.



4. Practicality: RE is designed to be practical in that its scope is narrowed to a specific set of topics that directly inform the intervention. REs do not focus on big, general questions such as, “What attitudes and beliefs do people have about HIV and AIDS?” Instead, the questions are modified to address specific programmatic issues like “What attitudes and beliefs about HIV and AIDS in this community may prevent people from seeking prevention and testing services?” Along with being practical, the specificity of an RE’s focus reduces the time needed to fully explore and understand the salient issues.

5. Local participation: A major aspect of rapid assessment and evaluation is active and meaningful community participation. One major criticism of development programs conducted in resource-limited settings is the lack of community involvement and input in the planning, implementation, and evaluation of local interventions, even though community participation and local “ownership” are associated with

greater and longer lasting programmatic success. RE relies heavily on community participation for several reasons. From a practical standpoint, local “gatekeepers” can greatly accelerate the process of data collection and analysis. These individuals are people with special knowledge about community values, norms, and behaviors, who can speak the language, and can identify and access local experts or resources. Additionally, community advisory committees (CACs) can be very useful during program development and implementation. CACs consist of local **stakeholders**—key people in the community who have a sense of ownership or concern about a problem or condition. For example, a CAC for an evaluation of an HIV and AIDS prevention intervention may include representatives from public health agencies, local AIDS-focused community-based organizations, formal and informal community leaders, and beneficiaries—the target population for the intervention. CACs can help the RE team in a number of ways: 1) by identifying and accessing key informants; 2) by contributing valuable information about risk factors and groups as well as local HIV “hotspots;” 3) by verifying results and suggesting alternative interpretations of collected data; 4) by becoming strong program advocates who can increase local acceptance of the research teams and local participation in data collection activities.

RE Methods: The Basic Four

The Basic Four RE Methods
Key informant interviews: interviews with community experts.
Focus group discussions: discussion between several people on a particular topic guided by a facilitator.
Social mapping: exercise where interviewees are asked to draw a map of a particular place, and to indicate the location of certain features.
Direct observation: observation of a component of the program being evaluated.

Although there are numerous methods that are suitable for RE, four basic methods are the “work-horses” of this methodology. They are key informant

interviews, focus group discussions, social mapping, and direct observation.

1. Key informant interviews represent the heart of RE. Key informant interviews are conducted with community experts—people with extensive knowledge about local beliefs, attitudes, language and behaviors. Key informants often not only express their own opinions, but also present a range of differing viewpoints from within the community. Good key informants are thoughtful and articulate and show interest in the evaluation. It is important to stress that key informants do not have to be well educated, professional, or community leaders. Sometimes the best key informants, especially in the field of HIV and AIDS, are from the most vulnerable groups, such as sex workers, injection drug users, and long-distance truck drivers. They often have critical, first-hand information that program professionals do not have.

Because the objective of RE is to gather a wide range of perspectives, it is important that a wide range of key informants be selected. One technique to ensure full coverage of local opinion is to use a **nominative sampling technique**, which is where key informants nominate people who have differing views to be interviewed.

Key informant interviews are often conducted without tape recorders, although some RE experts recommend recording to refresh interviewers’ memories when writing field notes, as well as to provide a means of data verification. Typically, key informant interviews are conducted in pairs, with one team member taking the role of interviewer and the other team member serving as scribe. The interviewer leads the discussion while the scribe takes detailed notes on the conversation, making sure to write down, verbatim, particularly significant sentences and phrases, or “**high impact**” quotes. As soon as possible after the interview, the two team members together should enter the notes electronically into a text document and share it with the rest of the RE team at the next field meeting. At that time, summaries can be reviewed and data can be cross-checked with those gleaned from other interviews. Questions

and issues raised can be added to the list of topics to investigate further.

2. Focus group discussions usually have 6 to 12 participants and a moderator, and are used to gather data on a particular topic. The discussions work best with a group of people who do not know each other, but who are comfortable enough in each other's presence to openly share their thoughts. It is useful to have more than one scribe taking notes during a focus group discussion, in order to keep track of all the speakers. Further, one note taker might be assigned to only record "high impact" quotes. The process for summarizing and analyzing findings is the same as for key informant interviews.

Focus group discussions are excellent for documenting social norms; however, they should not be used to determine what individual group members do or think if topics covered in the discussion are sensitive, personal, or could cause someone harm.

3. Social mapping is a favorite method among many rapid evaluators, and is highly useful for identifying HIV "hotspots" and hidden populations. The technique is relatively simple and straightforward—evaluators, working in pairs with one interviewer and one scribe, ask a participant to draw a map of a particular place, and to indicate the location of certain features. This can be done on a large piece of flip chart paper or on actual maps. Participants pinpoint the relevant features and talk about them, including their locations and their relationship to the program. The maps and the discussion are both added to the accumulating body of knowledge. Information from the mapping narratives can be processed in the same manner as interview summaries, and maps can be displayed and discussed during team meetings. Digital photographs of the maps can be used in place of the actual maps in evaluation reports and presentations.

4. Direct observation is often triangulated with focus group discussion and key informant interview data to compare observed behavior with stated behavior—in other words, what people actually do is compared with what they say they do. Direct observation is often recorded on checklists that show the number of

times a specific behavior is performed and the number of people who performed the activity. For example, in a formative evaluation of sexually transmitted infections (STI) treatment clinics in Kenya, which was done in preparation for a clinician performance improvement intervention, evaluators conducted a direct observation exercise in which they counted the number of patients visiting the clinic, the length of time patients waited for service, and the amount of time providers spent counseling patients on HIV prevention. Observers also recorded when the clinics opened and closed, as well as how long providers spent on breaks. Findings showed that, contrary to providers' consensus in focus groups—that they did not have enough time to counsel all patients in HIV prevention—they were condensing their actual work time to under 4 hours rather than the required 8 hours by starting clinic late, leaving early, taking long breaks, and scheduling patients to come in at the busiest times of the day. Relying only on provider interviews to tell the story would have resulted in a major misrepresentation of actual clinic activities, and would not have given program staff the necessary information to improve HIV counseling at these sites.

There are many other qualitative and quantitative methods appropriate for use in RE. One such method is a "mystery client," a procedure in which a team member pretends to be a client seeking services, but instead records the interactions between him or herself and the service provider. Another technique is for evaluators to administer short surveys of between five and ten questions to a random selection of participants. While these surveys are not intended to be statistically significant or calculated with statistical software, they may include questions designed to test the reliability and accuracy of key informant interview data.

Conclusion

The five basic characteristics of RE are speed, teamwork, triangulation, practicality, and local participation. RE is an iterative process that greatly reduces the time it takes to collect and analyze data and report findings. Teamwork is essential to its success because the iterative process relies on continuous,

intensive rounds of data collection and analysis in which findings are integrated into ongoing investigative procedures. Owing to the technique of triangulation, where methods are juxtaposed to shed light on various perspectives on the same topic or problem, RE is a rigorous process that produces high-quality, accurate, and reliable information. RE is a practical and increasingly popular approach to evaluation that applies rigorous and systematic research methods to the “real world” of programs where time and money may be limited. Finally, because RE requires participation by the local community through key informant interviews, focus group discussions, and social mapping, the depth of information garnered through insiders’ perspectives helps researchers piece together a more accurate picture of a program’s context.

The exploratory emphasis of this technique is especially useful for formative evaluations that take place prior to program initiation; however, rapid evaluations can be carried out at any phase of program implementation.

The advantages of REs are many. Along with speed and cost effectiveness, an RE can explain the “whys” and “hows” of program implementation and can give an insider’s view of issues that are difficult to capture using quantitative measures alone. RE also provides rich, detailed, contextual information about community beliefs, attitudes, and values that can affect program performance. RE is not appropriate for all evaluations, such as those requiring statistical methods, or those with a focus on economic issues, such as program cost effectiveness. As with all evaluations, REs should be led by experienced RE professionals; otherwise, the results can be inaccurate and untrustworthy.

For more information on RE, a list of additional resources is included below.

Resource List

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The International Training and Education Center for Health (I-TECH) is a collaboration between the University of Washington and the University of California, San Francisco. Its mission is to support the development of a skilled health care work force and well-organized national health delivery systems to provide effective prevention, care, and treatment of infectious diseases in resource-limited settings. Staff work in Africa, Asia, and the Caribbean in partnership with local ministries of health, universities, non-governmental organizations, and medical facilities.

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