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Violence Prevention Evaluation Toolkit

December 2020



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Contributors

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Toolkit updates

This toolkit will be reviewed and updated intermittently by the VPU to ensure it meets the needs of partners across Wales. The most recent version of the toolkit is available on the Wales VPU website (www.violencepreventionwales.co.uk). We welcome feedback on the toolkit, and are keen to hear how it is used in communities and across interventions. Please provide feedback directly to the VPU via phw.violencepreventionunit@wales.nhs.uk.

¹ This toolkit is based upon the Standard Evaluation Framework approach developed by Roberts et al (1) to evaluate obesity interventions, which has subsequently been adapted for a number of public health programmes (e.g. sexual health [2]; Fire Service Safe and Well programme [3]), and other evaluation guidance (referenced throughout).

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1. Introduction

Violence is too often seen as an inevitable part of human life; as events that are responded to rather than prevented. A public health approach challenges this notion and shows that violence can be predicted and prevented like any other health problem. Through a multi-sectoral, whole-system approach that is evidence-based and data-led, the Wales Violence Prevention Unit (VPU) and its partners seek to prevent violence before it occurs, and respond compassionately and effectively when it does, to stop the cycle of violence repeating itself. The Wales VPU is a partnership of passionate people who work together to prevent violence across Wales through a public health approach.

To do this, we must study the drivers of violence, to understand why some communities and individuals are more affected by violence than others, and what makes some more resilient to violence. Through this knowledge, programmes can be developed and implemented, based on scientific evidence, that work both universally and among targeted communities to prevent violence. Existing evidence on what works to prevent violence can help to inform the development and implementation of prevention programmes. Where new interventions are developed and tested, or existing interventions are adapted to new settings or population groups, it is critical to evaluate these programmes before scaling up. Monitoring the impacts of programmes over time will ensure that resources are invested in programmes that work for Wales, that unintended and potentially harmful outcomes are prevented, and that programmes are implemented with consideration of the local context.

1.1 About the toolkit

This toolkit aims to support partners to consider and embed evaluation in to the design and delivery of programmes, interventions or services that aim to prevent and respond to violence, including those addressing underlying risk factors or promoting factors that protect against violence. It provides guidance on:

- What evaluation is, why it's important and the different types of evaluations;
- Key steps to consider when developing an evaluation plan, collecting and analysing data, and reporting evaluation findings (including an accompanying checklist); and,
- Examples of outcome indicators, measurements that can tell us whether an intervention is achieving its aimed outcomes⁴.

1.2 Who is the toolkit for

The toolkit is designed to support **intervention deliverers and commissioners** to consider and embed evaluation throughout the design and implementation of an intervention, and is focused on **interventions targeted towards individual or group level change** (rather than whole system population level impacts). Specifically, this toolkit provides support for:

⁴ Presented in the Wales VPU Outcomes Framework available on the VPU website https://www.violencepreventionwales.co.uk/research-evidence/wales-violence-prevention-unit-report-archive

- People required to design, develop and implement evaluation for the service or programme they provide: this toolkit will provide step-by-step guidance about how to develop your evaluation;
- Funders and commissioners: this toolkit will provide you with information about the key principles of evaluation, to help you to appraise the evidence provided to you by the organisations that you fund; and,
- People commissioning an external organisation to carry out an independent evaluation on their service: this toolkit will enable you to identify the scale, scope and focus for the evaluation that you wish to commission.

Ultimately, the toolkit aims to support partner organisations to deliver evidence-based interventions and to build the evidence for violence prevention across Wales and beyond. Whilst various violence prevention programmes have been, or are in the process of being, evaluated independently (via an external evaluator), many factors mean that an external, independent evaluation is not always feasible or necessary for every intervention. Intervention deliverers and commissioners however are in a unique position to develop an internal evaluation plan in collaboration with relevant partners, and where feasible, implement monitoring and evaluation processes to develop understanding of what works, for whom and why. Consideration of intervention evaluation can also help partners to explore their evaluation needs and if they require additional support from an external evaluator.

1.3 What this toolkit does not do

- Whilst the toolkit aims to support partners to consider and embed evaluation and monitoring in to their interventions, it does not provide a framework for evaluating each intervention delivered across Wales. Rather, partners can use the toolkit to design their own intervention evaluation plan. For some interventions, support from an external independent evaluation partner (e.g. a university or research company) may be required. The Wales VPU are also available to support partners to consider and design bespoke evaluation plans for violence prevention interventions delivered across Wales. Links to other resources providing information on designing and implementing intervention evaluations are also provided in Appendix 1.
- The toolkit does not provide guidance on evaluating interventions that focus on whole population or system change (although information presented may have relevance to measuring such change)⁵.
- The outcomes framework⁴ does not intend to cover every possible aimed outcome and, or indicators for all interventions, but rather is presented as a guide for partners, based on the VPU logic model and stakeholder consultation.

⁵ A whole-system evaluation of the Wales VPU, described briefly in Appendix 4 is being conducted by LIMU, and the VPU have, and continue to implement routine data collection mechanisms to monitor the short and long-term impacts of the VPU across Wales. Independent and external evaluation of interventions delivered and commissioned by the VPU and partner organisations will inform the wider VPU evaluation, and help develop greater understanding of which interventions work, for whom, when, how and why.

2. Introduction to evaluation

2.1 What is evaluation and why is it important

Evaluation is a process that assesses the value, quality and impact of a service, programme, intervention or project (4). This allows partners to gather evidence about whether a programme is progressing according to plan and identifies opportunities to improve performance. Without evaluation, we do not know whether the objectives of a programme are being met. Evaluating service delivery and interventions is an important step in the development and implementation of evidence-based practice, which is fundamental for public sector organisations, including health, social care and criminal justice services.

Evaluation can enable services to develop an understanding of service user experience and identify changes to programme delivery to improve value and impact. It can improve monitoring, and provide information on the merits and failings of programmes to support decision-making. Evidence on effectiveness can support the case for funding, and programme sustainability. It is recommended that evaluation is embedded into the culture of an organisation, in order to develop an environment where questions about the purpose of activities, anticipated outcomes and the quality of the programme is routinely explored (5).

2.2 Types of evaluation

There are many types of evaluations that can be implemented depending on the purpose of the evaluation and what you want to assess (see Appendix 2 for an overview of evaluation types). The two most commonly used are outcomes/impact evaluation, to assess the effect the object of the evaluation (e.g. intervention) has had on the target group (i.e. the impact of an intervention on outcomes for intervention participants) and process evaluation, to strengthen the object that is being evaluated (i.e. identify improvements to an intervention).

Outcomes/impact evaluation (also termed summative evaluation) tells us how effective a programme is. This type of evaluation measures the results of an activity to determine the extent to which the objectives are met. Outcomes can be both primary (the main change the intervention aimed to achieve) and secondary (other changes that happen as a result of the primary outcome) (6). Key issues that may be explored include (5):

- Does the programme achieve the anticipated outcomes?
- To what extent are these outcomes achieved?
- To what extent can the outcomes be attributed to the programme? What other factors are involved and, or influence this?
- How do the outcomes and costs compare to other outcomes?
- What are the unanticipated outcomes and what are the implications of this?

Evaluation findings can be separated to distinguish the experiences and outcomes of different subgroups. This helps us to understand whether there are some groups for whom the

programme appears to be more effective. We can then work further to understand why this is and revise programme delivery as required.

Process evaluation (sometimes termed formative evaluation) tells us what is working well about the programme delivery and what is not. It is important to gather evidence about the strengths and weaknesses of a programme, in order to determine whether it is being delivered as expected, to understand barriers and challenges and put processes in place to ensure that quality can be enhanced in a timely way. The process evaluation should engage all stakeholders to understand the quality and efficiency of programme delivery from both a service provider and user perspective. Key issues that may be explored include:

- Stakeholder experiences of processes (e.g. referral process).
- Accessibility of the programme (e.g. location, time, frequency).
- Service provider experiences of delivering the programme.
- Service user experiences of attending the programme.
- Barriers to use.
- Awareness of the service amongst service providers and wider stakeholders.
- Is the programme delivered efficiently and effectively? Is the programme ethical?
- Can the intervention be scaled up for delivery in other places?

Process evaluations are often implemented alongside outcome evaluations, and can help develop an understanding of how the intervention leads to outcomes (often displayed in a logic model, see 3.2.1), how and who the intervention works best for, and areas where changes may be needed to enable positive outcomes for other groups.

Case study 1 (Appendix 7.3) provides an example of a process and outcome evaluation applied to a fictional violence prevention intervention.

2.3 When to evaluate

It is important to note that not all programmes can be, or should be, evaluated. Careful planning and engagement with relevant partners is needed to assess if and how a programme may be evaluated. Evaluations are important to implement if (8):

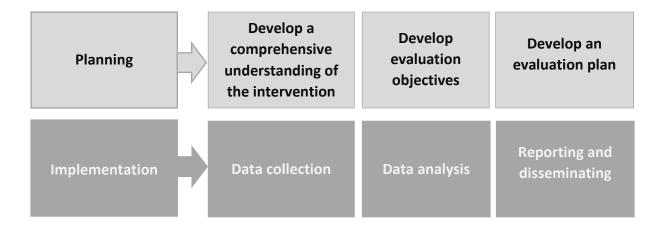
- There has been a significant investment of time, money and/or resources;
- There is a possibility of risk or harm;
- The programme represents a novel or innovative approach;
- The programme is the subject of high political scrutiny or priority;
- There is a gap in services or knowledge about how to address a problem or provide effective services for a particular population; or,
- There is intention to scale up the intervention and/or roll out to other areas.

Evaluations should be considered, designed and implemented at the earliest point (either before or at the start of a programme commencing, and if feasible as you design and seek funding for the programme). This ensures that the right information is collected from the start and that evidence is gathered in a timely manner. Waiting until a programme is ending to

start evaluation is risky because there is no guarantee that the right data has been collected and there is no time to act upon any recommendations that may have improved delivery and outcomes. In addition, when assessing the impact of a programme, collecting data before commencing your activity will allow you to make comparisons post-intervention to meaningfully assess changes (see 3.4).

3. Planning and implementing an evaluation

When developing and delivering an evaluation, there are many things to consider. It is really important that partners fully plan their evaluation before implementing it. This will ensure partners appropriately measure the programme, to fully capture the change that is being assessed. You need to take the following steps when planning and implementing an evaluation:



3.1. Develop a comprehensive understanding of the programme

It is important to develop a comprehensive understanding of the object of evaluation before deciding what evaluation you need and how to measure or assess this. You need to understand:

- What is being delivered whether it is an intervention (primary/secondary/tertiary),
 programme, service, or project, and what content is being delivered? Having a
 description of what you are evaluating and any materials will help you understand
 what elements need assessing and how to assess them.
- **Who** it is being delivered to what is the target population and how big is the cohort?
- Where it is being delivered what is the location and setting of delivery (considering for example the environment, ambience and accessibility for service users)?
- When is it being delivered what are the timescales, including quantity and duration of sessions for service users?
- **How** it is being delivered mechanism (e.g. online, face-to-face) and by whom?
- Why is it being delivered what was the rational and what does it want to achieve?

Understanding the 'why' is integral in developing the objectives of the evaluation. The evaluation objectives need to be decided first, and these need to align with the objectives of the object of evaluation.

3.2. Develop evaluation objectives

The evaluation objectives should be clearly defined at the start of the planning process and agreed by all stakeholders, and the scale and scope of an evaluation should be established in collaboration with the commissioners of the programme under evaluation. A number of factors will determine this, including evaluation purpose, timeframe, budget and capacity (see 3.3.1).

3.2.1. Logic models

Developing a logic model helps all stakeholders to clearly define the objectives that the programme is aiming to achieve. This in turn then helps to inform and define the objectives for evaluation. A logic model provides а graphic representation of a programme, detailing the inputs, activities, outputs and intended goals in sequence. A logic model can help stakeholders to understand the overall structure and function of a programme and build a

Box 1: Why use logic models?

- To communicate agreed vision and plans.
- Provide clarity regarding activities and outcomes.
- Engage and sustain stakeholders (provide inspiration to work together to achieve goals).
- Aid planning and management.
- To focus and improve implementation.
- To help planners to know what resources are needed, and when.
- Highlight assumptions and risks.
- Show similarities and differences to other programme activities.

strong consensus about what they are working towards; this is particularly useful when evaluating the impact of different activities that are funded under a single programme and/or when evaluating place-based approaches, where partners often have differing objectives and competing evaluation interests (9) (see box 1). Logic models can also help to identify where evaluation and monitoring efforts are best directed, thus informing the scope and focus of these activities.

The main elements of a logic model include:



Definitions:

- Inputs refer to the resources required to deliver the programme (e.g. funding, staff, facilities etc.).
- Activities refer to the key things that are delivered.
- Outputs refer to the products (e.g. the numbers of people referred, numbers of people completing interventions etc.).
- The short-term outcomes refer to the primary and secondary outcomes that happen in the short-term.

• The longer-term impacts refer to the changes that happen as a result of the short-term outcomes.

The example provided above is known as a 'pipeline' logic model, where the elements are presented in a linear fashion. A logic model can also be presented as an 'outcomes chain' that represent the intervention and the outcomes as a series of consequences that show assumed relationships between the different outcomes. Here, the relationships between activity and outcomes (the causal chain) is clear, and it is easier to identify the monitoring and evaluation activities that are required (10).

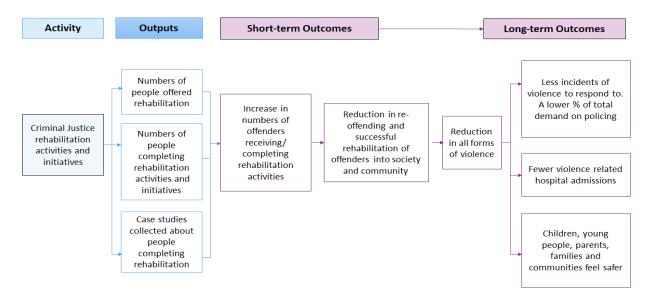


Figure 1: Example of an 'Outcomes Chain' logic model

3.2.2. Theory of change

Whilst a logic model provides a chain of events associated with a particular programme, it does not tell us how the change occurs. It is useful to develop a theory of change to describe how the programme is intended to work and bring about change for the individuals, groups and communities that it is targeted towards (10). Developing a theory of change is particularly recommended for evaluating place-based approaches, in order to define what success will look like and define the assumptions associated with the delivery of the programme. Here, allowing all partners to contribute to the theory of change and related evaluation strategy is recommended in order to capture long-term outcomes and changes in capacity building, relationships and behaviour change (9).

To be effective, the theory of change must explain how and why an activity will result in a change, with reference to the wider situation (including factors that may influence change at various socio-economic levels). This level of detail can then be used to inform the focus of the monitoring and evaluation plans to ensure that the right type of data are gathered (10).

A logic model and theory of change are not fixed, they can be adapted throughout an evaluation as evidence of what works or not, and for whom and why is and identified.

3.3. Develop an evaluation plan

3.3.1 Assessing the feasibility of an evaluation and defining the focus

A clear monitoring and evaluation plan should be developed at the start of a programme, with input from all stakeholders (see box 2). The logic model and theory of change should be used to guide the evaluation plan, objectives and the data that is collected. Evaluation of violence prevention programmes can vary in size and scope, and each will require a bespoke approach and evaluation assessment⁶. The use of a framework such as Re-Aim can help to focus the key elements that should be included within an evaluation (see box 3⁷). Typically, public health programme evaluations include process, outcome and/or economic evaluation. This toolkit focuses on process and outcome evaluations; partners are advised to consult with a health economist for further information on economic evaluation. A number of factors will determine the scale and scope of evaluation including:

- The extent of existing evaluation and/or evidence base and theories for the programme, and what additional data is required from an evaluation.
 - The World Health Organization has developed a range of resources providing evidence on violence prevention and responses, and the VPU website provides information on the latest research and evidence:

https://apps.who.int/violence-info/

https://www.who.int/violence_injury_prevention/violence/en/

https://www.violencepreventionwales.co.uk/research-evidence

- The evaluation purpose, considering the key questions that the evaluation seeks to answer such as whether the programme is being delivered as planned, if it can be improved, if it is making a difference and if it is worth the resources required for implementation. Evaluations can be implemented at difference stages of programme implementation and for different reasons, and may be repeated or embedded throughout programme duration to allow continuous reflection and improvement and to assess the shorter and longer-term impact of the intervention. For example, in the early development of a programme, an evaluation may focus on processes to inform programme development, with future monitoring or evaluation focused on measuring outcomes and impacts (with continued process monitoring).
- The available budget, capacity, timeframe and expertise for evaluation. An assessment should be made of whether an appropriate evaluation can be

implemented at a reasonable cost within the available timeframe. Who will collect, analyse and report on the data? Do other partners need to be involved in the evaluation to provide wider insight

Box 2: Evaluations need to have...

- Specific aims and objectives
- A clear purpose and focus
- A clear time-frame
- Use stakeholder involvement
- Ideally use mixed methods
- Clear reporting deadlines and dissemination plans

⁶ Appendix 7.1 provides links to further information on evaluability assessment.

⁷ See https://www.re-aim.org/about/

(programme stakeholders and recipients) and/or expertise in research and evaluation (e.g. researchers/evaluators within a university/research company; the Wales VPU can also offer help and support).

- The scale and scope of the intervention, considering for example the number of participants and length of engagement in the intervention, and programme duration.
- The broad range of risk factors for violence, often-interrelated, which present at a societal, community, relationship and individual level (11). Evidence shows that early life exposure to violence, adverse childhood experiences (ACEs) and trauma can increase risks of health harming behaviours (including violence), poor health and wellbeing, and other factors (e.g. poor education attainment) across the life course (12-13). Critically however, violence, ACEs and trauma can be prevented, and programmes can be put in place to help people, communities and society to build resiliency and mitigate the impacts of exposure to harm (13). Across Wales, the development of Trauma and ACE informed organisations is being promoted by Welsh Government,⁸ and such approaches are emerging across a range of services, programmes and interventions. Considering how Trauma and ACE informed an intervention is, and if, how, when and where it addresses underlying risk factors, and promotes protective factors (linking to the logic model) should be a guiding principle of evaluation of violence prevention programmes.

Box 3: Re-Aim Evaluation Framework

Reach: The absolute number, proportion, and representativeness of individuals who are willing to participate in a given initiative, intervention, or programme.

Efficacy: The impact of an intervention on important outcomes, including potential negative effects, quality of life, and economic outcomes.

Adoption: The absolute number, proportion, and representativeness of settings and intervention agents (people who deliver the programme) who are willing to initiate a programme.

Implementation: At the setting level, implementation refers to the programme's fidelity to the various elements of an intervention's protocol, including consistency of delivery as intended and the time and cost of the intervention. At the individual level, implementation refers to service user's use of the intervention strategies.

Maintenance: The extent to which the outcomes associated with a programme are maintained. This can be from an organisational (e.g. policy, culture) perspective, and an individual-level perspective. Maintenance is defined as long-term effects of a programme on outcomes six or more months after the most recent intervention contact.

Programme evaluations vary and the methodology adopted needs to be appropriate for the purposes of the study. Here we provide brief information on qualitative and quantitative

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⁸ For further information see: https://www.aceawarewales.com/about

methods (links to further information on evaluation methodologies is available in Appendix 7.1). Evaluations can include a single methodology, but ideally include a mix of methods to answer the evaluation questions. The following approaches to data collection can be used:

- Qualitative data (i.e. non-numerical data), involves stakeholder consultation collected
 via interviews or focus groups for example, and can provide evidence to inform
 process and outcome evaluation. Qualitative data typically describes a programme,
 observed outcomes, gaps in implementation (using the logic model as a guide to
 intended programme delivery) and explain how and why things occur. Compared to
 quantitative methods, it usually includes fewer participants, as the focus is on
 collecting in-depth information, which can take more time to gain.
- Quantitative research methods (i.e. numerical data) often aim to measure processes
 such as the scale and reach of an intervention, and impacts and outcomes (identified
 in the logic model), and can include surveys and analyses of secondary data such as
 administrative data or record review. There are a range of measures available, such as
 questionnaires and scales, which have been developed by researchers to assess
 behaviours, feelings and perceptions. Many of these have already been tested to
 validate them. Suggestions for outcome measures are provided in the outcomes
 framework.
- Additional data sources that may add context to an evaluation include observational data collection methods (e.g. observation and documentation of programme implementation, and outcomes such as parent-child interactions) and review of programme documentation.

It is important to explore if and how members of the public, particularly the programme target group, can contribute to the design, delivery and production of the evaluation. This can ensure that the evaluation and the outcomes measured are meaningful to those who should benefit most from the programme, and that the data collection tools are appropriate (e.g. are they understandable and easy to complete) for the target group. Engaging the public in the interpretation and dissemination of findings also helps ensure that findings are interpreted appropriately and shared in meaningful ways.

The NIHR INVOLVE provides guidance on co-producing research and how to involve members of the public in research and evaluation:

- Coproduction: https://www.invo.org.uk/posttypepublication/guidance-on-co-producing-a-research-project/
- Involving the public: https://www.invo.org.uk/resource-centre/resource-for-researchers/

3.3.2 Identifying outcome measurements

It is imperative that a programme has clear goals, and using the SMART acronym can help to ensure that programme goals are Specific, Measurable, Achievable, Relevant and Time bound. However, it is important to acknowledge that many programmes have outcomes that are difficult to measure. Funnell and Rogers (10) caution that measurability should not be a

major factor in determining what outcomes to include within a logic model and theory of change, and suggest that outcomes should be defined in measurable terms as clearly as possible, whilst recognising this may not always be straightforward.

Consideration of the desired features of an intended outcome can help to identify indicators that are useful and meaningful measures of outcomes (5). For example, the features of the outcome "Children and young people empowered to make informed decisions and feel positive about the future" can be broken down to indicators to measure 'informed decision making' and 'feeling positive about the future'. We can also consider this with reference to particular groups of children and young people (e.g. are there specific groups, living in certain geographical areas and/or with certain characteristics for whom this outcome is particularly applicable?). Working to develop appropriate measurement indicators ensures that monitoring and evaluation does not focus on only the easy to measure outcomes. It is important to select outcomes that are anticipated to be achieved in the evaluation timeframe – the logic model can aide understanding of when outcomes and impacts are expected to be achieved.

The Wales VPU Outcomes Framework provides examples of violence prevention outcomes, indicators and measurements. These are based on the Wales VPU logic model and are anticipated to be relevant to a broad range of violence prevention activity implemented across Wales, and beyond. Whilst the list is not exhaustive, and additional or alternative outcome indicators may be required, or the suggested indicators altered for some programme evaluations, provision of the list of indicators will help development consistency in measuring outcomes across Wales, and build the evidence for violence prevention.

For each outcome indicator, the framework provides details of:

- What outcome the indicator is measuring (e.g. reduction in violence);
- The measure (e.g. percentage of adolescents who were physically attacked in the past X months);
- Suggested disaggregation of the measure (e.g. by demographics);
- Potential data sources (including existing data sources or purposefully implemented surveys);
- Example measurement tools and/or questions; and,
- Additional information such as limitations of the indicator, suggested measurement frequency and level.

3.3.3 Governance and ethical considerations

An evaluation plan must consider the ethical implications of implementing the evaluation, covering its design, delivery and dissemination of findings. Evaluation of violence prevention interventions requires the collection of information on violence, and associated risk and protective factors, across the life course, and, information may be collected directly or indirectly from children and adults. This poses particular ethical considerations, which need to be considered and addressed in an evaluation plan (15-17). It is important to:

- Ensure the evaluation is just and equitable, considering the burdens and benefits of participation, ensuring that the benefits of the evaluation outweigh any anticipated risks.
- Consider the motives, consequences and context in which violence/abuse and intervention takes place.
- Minimise the risk of harm (distress, retaliation and other physical and emotional harms) for evaluation participants, researchers and service providers, particularly when exploring sensitive issues and/or engaging with vulnerable groups (e.g. children or domestic violence survivors who often experience violence by those close to them), and ensure relevant safeguarding measures are implemented (e.g. access to support before, during and after evaluation participation) to protect people and services from harm. A risk assessment should be conducted and safety plan developed.
 - Safeguarding leads and programme implementers can provide a key role in informing the design of evaluations to minimise risk, and where appropriate offer a safeguarding role if and when harms arise. At a minimum, evaluation participants should be provided with details on how to access support if required, providing contact details for relevant support services.
- Ensure voluntary and informed consent for evaluation participation, considering comprehension, and the role of gatekeepers (e.g. the role of guardians/caregivers in children's participation in research). Participants need to be given sufficient time to consider their participation in the research before providing consent.
- Maintain anonymity and confidentiality (within the limits of confidentiality) of
 participants and organisations taking part in the evaluation, unless they have
 consented for their details to be shared, and sharing these details will not cause harm.
- Ensure participants are aware of the limits of confidentiality and any exceptional circumstances when confidentiality may be breached. For example, if a researcher identified that the participant or others may be at significant risk of harm, the researcher may need to report this to an appropriate authority (for example in suspected cases of child abuse). This would usually be discussed with the participant first.
- Comply with organisational and legislative governance requirements and data protection policies (e.g. GDPR), ensuring that where feasible confidentiality and anonymity is upheld, measures are in place to keep the data secure, and that you only collect data you're going to use in the evaluation.

Ethics review committee's assess the ethics of an evaluation plan, including research tools and implementation processes. Where available, evaluation involving persons should **obtain approval by an ethics review committee, prior to implementation** (often via a university or health board). **Consideration should also be given to other approvals that may be required.**

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⁹ A tool for considering the safety and wellbeing of participants, researchers and services is available here: https://www.welshwomensaid.org.uk/wp-content/uploads/2020/11/Research-Integrity-Framework-RIF-on-Domestic-Violence-and-Abuse-DVA-November-2020.pdf

For example, some organisations have internal research and evaluation steering committees, who review and approve research and evaluation projects prior to implementation within their setting or with their service users.

Where such processes are not available, it is important to remember that we all have a responsibility ensure that evaluations are ethical and sound. An expert panel/advisory group could be established to inform the evaluation, providing transparency, peer/independent review and integrity, and should seek to include members of the public, such as service users and survivors of violence.

 Women's Aid have developed a research integrity framework on domestic violence and abuse to promote best practice, covering: safety and wellbeing; transparency/accountability; equality, human rights and social justice; engagement; and research ethics¹⁰.

3.4 Data collection and analyses

Consideration of when to collect data, from whom and the analyses this will inform is an important part of an evaluation plan. Depending on the scale and scope of the intervention and evaluation, data may not need to be collected from all participants, however you will need to be clear about what your sample selection strategy is and why this was implemented.

- For a process evaluation for example, qualitative data may be collected from a few participants representing different stakeholders (programme implementers, recipients and wider beneficiaries), with data collection ending when no new information is identified, and common themes are occurring in the data.
- For outcome evaluation data may be collected from all participants, or a random¹¹ selection of participants. The sample size for outcomes data collection is important with larger sample sizes you can be more confident that findings represent the target population, whilst with smaller sample sizes it is more difficult to identify effects that may be occurring. An evaluation partner can assist with identifying the number of participants needed in an outcome evaluation to detect meaningful changes. When exploring outcomes, it is important that comparison data are collected so that you understand more clearly if changes made are related to the programme. This can involve collecting data from participants prior to, and following their involvement in a programme, and if feasible, from others not involved in the programme:
 - Pre and post outcome data collection: Ideally quantitative data would be collected prior to and after completion of a programme, allowing changes in outcome indicators to be measured. Data may also be collected after weeks/months/years following completion of an intervention to explore if changes are maintained.
 - Control group: If feasible, data would also be collected from a comparable group (control group) to assess more thoroughly if changes observed are associated with the programme or are due to other (potentially unknown) changes in the population.

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 $^{^{10}\} https://www.welshwomensaid.org.uk/wp-content/uploads/2020/11/Research-Integrity-Framework-RIF-on-Domestic-Violence-and-Abuse-DVA-November-2020.pdf$

¹¹ To reduce risk of selection bias.

• For process and outcome evaluation data may be collected from statutory services (e.g. local authority, police, health and support services). The outcomes framework provides examples of measures based on data from statutory services, such as police-recorded crime. Sharing data held by public bodies is key to helping to improve people's lives and reduce inequalities, and it is important to ensure that where data is available, they are used to inform prevention activity and enhance population well-being. You may need to work with partner agencies to develop processes to ensure that available data is accessible (e.g. data sharing agreements). Freedom of information requests can enable access to key information that may inform a process (e.g. number of people accessing a service) and outcome (e.g. number of police recorded crime, pre-during- and post-intervention) evaluation.

Analyses of qualitative and quantitative data can vary, and are dependent on the purposes of the evaluation, available resources and skills. At a basic level:

- **Qualitative data** can be analysed and summarised into key themes. Themes can be predefined or derived from the information gathered from the data collection.
- **Quantitative data** can present changes in outcomes as numbers, percent change or rates. Examples of measures and suggested disaggregated (e.g. age, sex) are provided for each indicator included within the outcomes framework.

It is important to consider service user differences (e.g. demographic) and the impact of social inequalities on experiences of violence and interventions (including interventions impacts), and to incorporate this in to data collection and analyses. For example collecting data on service user socio-demographics and disaggregating data analyses by groups (e.g. age, sex, area of deprivation).

A partner with specialist skills in research and evaluation (e.g. university or research company) can provide further advice on, and support with data analyses.

3.5 Reporting and dissemination

Reporting and disseminating evaluation findings is critical to developing evidenced based practices, and informing the development and implementation of violence prevention programme across Wales and beyond. Evaluation findings, both positive and negative, should be reported, and it is good practice to disseminate findings to study participants and other interested partners. Producing an evaluation report is a useful way to summarise and disseminate evaluation findings. An evaluation report typically includes a number of key sections:

- **Introduction** providing an overview of the programme being evaluated, the need for and purpose of the evaluation, and evaluation aims and objectives.
- Methods describing the evaluation processes and activities including:
 - The programme (what has been evaluated);
 - Evaluation design, setting (where the programme/evaluation took place) and participants (inclusion/exclusion criteria; demographic profile), and timeframe;

- Evaluation methods implemented, including what, how and when methods were implemented, who with and how often (e.g. X interviews with young people engaged in the intervention);
- Evaluation measurements/materials (e.g. details of surveys used or areas explored in the interview schedule);
- Data analyses conducted;
- Evaluation approvals received (e.g. ethical review), and/or procedures implemented to ensure the evaluation was ethical and just.
- Public engagement (e.g. describing the role of the public in designing, implementing and reporting on the evaluation).
- **Findings** describing the evaluation findings:
 - o Process evaluation findings may include: 1) the context and background prior to implementation of the programme, 2) details of what was planned for the programme, and 3) what was actually implemented during the intervention period.
 - Outcome evaluation findings may include: 1) sample characteristics and 2) analyses of changes in outcomes (where relevant, disaggregated by groups).
- **Discussion/summary** describing the evaluation findings:
 - Where relevant, reflection on the process and outcome evaluation. For example, were there issues in the process of implementing the programme that may have influenced outcomes?
 - Reflect on the findings section in light of what your aims and objectives were. In
 other words do the findings from the process and outcome evaluation support the
 achievement of your initial aims and objectives? If those haven't been met, what is
 equally important learning is reflecting on why this may not have been the case.
 - Cover any limitations of the evaluation.
 - Discuss what the findings mean for policy, practice and/or future evaluation and research. Often, evaluations will include recommendations to define future directions of the work.
 - Provide links to key information, including references that informed the report, intervention and/or evaluation, and contacts details for the intervention and/or evaluation team.

For further guidance on publishing research and evaluation findings, visit: https://www.equator-network.org/

3.6 The role of evaluation evidence in violence prevention across Wales

To effectively prevent violence, it is important that the interventions delivered are evidence-based. In simple terms, this means that we know they are effective in preventing violence, and don't cause further harm. Assessing the delivery and impact of interventions will inform further developments to enhance their effectiveness in preventing violence in Wales, and highlight the importance of the intervention to inform future funding decisions. Evaluation data can provide us with the following learning and insight:

• The targeted audience and their needs;

- The content and method of delivery chosen, and rationale for that;
- How well is it being delivered, e.g. what works well, for whom and why, and the challenges experienced;
- The outcomes that have been achieved for the targeted cohort, community, your services and the VPU;
- Any gaps in service delivery that need meeting; and,
- The potential for scaling the intervention up and rolling it out wider, and the considerations needed for this to happen.

Evaluation can have long-term benefits, not just for those engaged in the intervention, but also wider populations. Globally, programme evaluation has developed insights into key programmes that can prevent violence, particularly child maltreatment, including parenting and home visitation programmes (15).

In addition to the learning from the evaluation of the interventions, evidence will be needed to inform the wider evaluation of the VPU. Independent evaluations of the VPU are being conducted to assess the whole systems approach to violence prevention. The interventions delivered are integral to the whole systems response to violence prevention in Wales.

4. Checklist for planning an evaluation

The checklist below provides a list of key questions for service/intervention implementers to answer to develop an evaluation plan for their violence prevention service or intervention ¹². Refer to Section 3 for further information. The VPU team are also available to support VPU partners to evaluate their service or intervention using the evaluation toolkit as a guide.

4.1 Develop a comprehensive understanding of the intervention

The state of a semple and a state and a st
1. What is being delivered? Whether it is an intervention, programme, service, or project, and what content is being delivered. Having a description of what you're evaluating and any materials will help you understand what elements need assessing and how to assess them.
2. Who it is being delivered to? What is the target population and how big is that population.
3. Where it is being delivered? Location and setting of delivery.
4. When is it being delivered? The timescales, including quantity and duration of sessions.
5. How it is being delivered? <i>Mechanism of delivery (e.g. online, face to face) and by whom,</i>
and with what resources. Consider who the key internal/external partners. List all resources required to implement the intervention (e.g. staff time, materials).
required to implement the intervention (e.g. staj) time, materials).
6. Why is it being delivered? What are the anticipated outcomes? What was the rational for delivering this and what does it want to achieve? What is the overall aim and objectives of the intervention? What short and/or long-term outcomes are you anticipating, and why?
7. What are the outputs of the intervention? The products (e.g. the numbers of people referred, numbers of people completing interventions etc.)
8. Do you anticipate any adverse outcomes?

 $^{^{12}}$ The checklist is based upon existing evaluation framework checklists available for other public health issues (e.g. 2).

Completion of these question can assist in developing a logic model for the service/intervention. The development of a logic model is a key part of developing an evaluation plan and will guide the evaluation objective and the data that is collected. A template logic model is provided in section 4.4.

4.2 Assess the feasibility of an evaluation and define the focus

9. Is there existing evidence for the service/intervention? How does this relate to your				
service/intervention? Evidence on violence prevention and responses is available at:				
www.violencepreventionwales.co.uk/research-evidence, https://apps.who.int/violencepreventionwales.co.uk/research-evidence	olence-			
info/ and www.who.int/violence injury prevention/violence/en/				
10. Does the service/intervention meet one of the following criteria to just	tify an			
evaluation?				
There has been a significant investment of time, money and/or resources				
There is a possibility of risk or harm				
The service/intervention represents a novel or innovative approach				
The service/intervention is the subject of high political scrutiny or priority				
There is a gap in services or knowledge about how to address a problem or provide				
effective services for a particular population				
If not, describe the justification for an evaluation below:				
11. What budget, resource and skills do you have available for an evaluation?				
12. What are the key questions that you would want an evaluation to answer? Co	onsider			
the Re-AIM evaluation framework – do you want to explore a service/interventions reach,				
efficacy, adoption, implementation and/or maintenance (see toolkit for further details)				
13. What data is already existing and what additional data are needed for the evaluation	ation?			
14. Which methodology would suit the evaluation? E.g. qualitative and quan	titative			
research methods. Evaluations can include a single methodology, but most often include a				
mix of methods to answer the evaluation questions.				
15. Can you include patients and the public in co-design, delivery and production	of the			
evaluation? If so, how?				
16. What outcome measures could be explored in an evaluation? Refer to the logic	model			
and the outcomes framework				

- **17.** What governance or ethical considerations do you need to explore? Where available, evaluation involving persons should obtain approval by an ethics review committee, prior to implementation. Consideration should also be given to other approvals that may be required.
- **18.** How will you minimise risk of harm to evaluation participants, researchers and services? Have you considered: the needs of vulnerable participants (e.g. literacy, whether they may need breaks); whether participants have experienced trauma or potentially have current safeguarding needs that may come to fruition during participation; the experience of researchers implementing the evaluation (do they require safeguarding training and other supervision or support); and, whether researchers have had a Disclosure and Barring Service check.

4.3 Data collection, analyses, reporting and dissemination

- 19. What methods and measures will you use to conduct a process evaluation (if relevant)? How will you measure fidelity, dose and reach? Baseline data on the intervention population can help identify the reach of an intervention and may also be used as baseline data in an outcome evaluation
- **20.** What methods and measures will you use to conduct an outcome evaluation (if relevant)? Consider the logic model, data already available and the feasibility of collecting additional data. What are the outcomes measures? Are there other measures that need collecting (e.g. demographics). Are there any pre-existing tools which measure the outcomes you want to achieve?
- **21.** Will you be comparing outcomes in your intervention group to another group? If so, who?
- **22.** Who will you share evaluation findings with and how? It is good practice to share evaluation findings with study participants and other interested partners. Consider who will share findings and how (e.g. verbally, in a report).

4.4 Template logic model

Inputs	Activities	Outputs	Short-term outcomes	Longer-term impacts
Resources required to deliver the service/intervention (Question 5)	Key things that are delivered (Question 1)	The products (e.g. number of people referred/completing interventions) (Question 7)	The primary and secondary outcomes that happen in the short-term (Question 6/8)	The changes that happen as a result of the short-term outcomes (Question 6/8)

5. Glossary

Process evaluation: (sometimes also termed formative evaluation) tells us what is working well about the delivery of a programme or service and what is not.

Outcome/impact evaluation: (also termed summative evaluation) tells us how effective a programme or service is. This type of evaluation measures the results of an activity to determine the extent to which the objectives are met.

Systems evaluation: used to assess the wider impact of a programme or service on the system (such as other organisations, policies and the environment).

Formative evaluation: see process evaluation.

Summative evaluation: see outcome/impact evaluation.

Logic model: a graphic representation of a programme or service, detailing the inputs, activities, outputs and intended goals in sequence.

Theory of change: describes how the intervention is intended to work and bring about change for the individuals, groups and communities that it is targeted towards.

Primary violence prevention intervention: an intervention that focuses on preventing violence before it occurs.

Secondary violence prevention intervention: an intervention that focuses on treating immediate harm resulting from violence, and prevents violence from happening again.

Tertiary violence prevention intervention: an intervention that aims to address the medium and longer-term impacts of violence, including rehabilitation.

Place-based interventions: interventions that address an issue or complex issues within a specific geographical or other setting.

6. References

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- 4. Springett J. Issues in Participatory Evaluation. In: Minkler M, Wallerstein N, editors (2003). Community Based Participatory Research for Health. New York: Jossey-Bass. p.263–86
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 https://www.unicef.org/media/66896/file/INSPIRE-IndicatorGuidance-
 ResultsFramework.pdf
- 16. Women's Aid (2020). Research Integrity Framework on Domestic Violence and Abuse (online). Available at: https://www.welshwomensaid.org.uk/wp-content/uploads/2020/11/Research-Integrity-Framework-RIF-on-Domestic-Violence-and-Abuse-DVA-November-2020.pdf
- 17. Egan M et al. (2019). NIHR SPHR Guidance on Systems Approaches to Local Public Health Evaluation. Part 1: Introducing systems thinking. London: National Institute for Health Research School for Public Health Research.

7. Appendices

7.1 Links to additional resources.

Information on evaluability assessments is available at: http://whatworksscotland.ac.uk/wp-content/uploads/2015/07/WWS-Evaluability-Assessment-Working-paper-final-June-2015.pdf

Information on co-producing research is available at: www.invo.org.uk/posttypepublication/guidance-on-co-producing-a-research-project/

Information on evaluation methods is available at:

https://www.gov.uk/government/publications/evaluation-in-health-and-well-being-overview/evaluation-methods

Guidance on developing and evaluating complex interventions is available via the Medical Research Council and National Institute for Health Research, e.g.:

- Process evaluation of complex interventions: www.bmj.com/content/350/bmj.h1258
- What to consider when planning a systems evaluation: https://sphr.nihr.ac.uk/wp-content/uploads/2018/08/NIHR-SPHR-SYSTEM-GUIDANCE-PART-2-v2-FINALSBnavy.pdf

The TIDieR (template for intervention description and replication) checklist and guide provides information on reporting what an intervention entailed, to support others to understand the intervention and where applicable replicate it, or develop it further: https://www.bmj.com/content/348/bmj.g1687

A handbook for supporting the evaluation of child maltreatment programmes is available at: http://www.unh.edu/ccrc/evaluation-videos/Handbook-to-Support-Evaluation-of-Child-Maltreatmen-Prevention-Programmes..pdf

A research integrity framework on domestic violence and abuse is available via Women's Aid at:

https://www.welshwomensaid.org.uk/wp-content/uploads/2020/11/Research-Integrity-Framework-RIF-on-Domestic-Violence-and-Abuse-DVA-November-2020.pdf

7.2 Overview of different types of evaluation

Type of evaluation	Purpose of the evaluation	Example questions the evaluation seeks to answer	Example methodology	Evaluation participants/ target cohort/s
Needs assessment	A needs assessment is carried out to help inform the development of an intervention. A needs assessment collects information about the activities that need to be delivered and how best to deliver it.	 What are the gaps in current service provisions? Who needs the programme? How great is that need? What is the best way to deliver that need? 	 Observations Surveys Interviews/focus groups Document review 	Commissioners, health professionals, people who access current services, communities affected by the issue.
Implementation/ feasibility	This is a smaller version of a full-scale evaluation to check in advance if the evaluation will work. This will allow you to test the study design, including the materials used (e.g. surveys), recruitment and data collection processes. This can also assess the fidelity of the intervention and potential for success, particularly newly established interventions (e.g. test delivery of a new training programme to a small cohort before wider delivery and full evaluation).	 Can the study design, procedures, and intervention be carried out? Are the study design, procedures, and intervention appropriate from the perspective of the participant? Are there any changes to the delivery of an intervention before roll-out? 	SurveysInterviews	 People receiving the intervention. People delivering the intervention.

Type of evaluation	Purpose of the evaluation	Example questions the evaluation seeks to answer	Example methodology	Evaluation participants/ target cohort/s
Outcome	To determine if the intervention was successful and has had the desired effect on the targeted outcome. This measures whether the intervention worked in making the expected changes, as outlined by the logic model, e.g. reductions in recorded knife offences.	 What outcomes were/ were not achieved? To what extent were those outcomes achieved? Can we attribute those outcomes to the programme/intervention? 	 Pre- and post-intervention/ programme surveys Service/organisation data (no. referrals, police demand) 	People receiving the intervention.
Impact	To assess whether the intervention has brought about change, and what the overall effects of the intervention are, both intended and unintended. An impact evaluation measures the impact of the intervention on the intended population, e.g. improved sense of safety within the community following a reduction in knife offences.	 What effect did the programme/ intervention have on an individual's thoughts, behaviour and emotional state? What are the longer-term impacts of the programme/ intervention? What were the intended/ unintended and direct/indirect impacts of the programme/ intervention 	 Pre- and post- survey/ psychometric tests (e.g. mental health and well- being measure) with longer-term (e.g. 6 + months) follow-up Interviews/focus groups with longer-term (e.g. 6 + months) follow-up. 	 People receiving the intervention. Wider population (e.g. family members, friends, wider community).

Type of evaluation	Purpose of the evaluation	Example questions the evaluation seeks to answer	Example methodology	Evaluation participants/ target cohort/s
Process	This form of evaluation seeks to guide improvements to the intervention. It assesses how effectively an intervention has been implemented and whether it was delivered as planned. This will help identify the strengths and weaknesses of the intervention, and what improvements are needed.	 How well was the programme/ intervention delivered? How well did the targeted cohort engage? What was delivered well and what needs improving? How effectively/efficiently was the programme/intervention delivered? What considerations are needed to scale up/roll out the programme? 	 Interviews with stakeholders, programme/intervention facilitators Interviews/ survey with the targeted cohort 	 People receiving the intervention. People delivering the intervention. People commissioning the intervention Any other key partners involved in design/delivery
Cost benefit analysis/economic	Assesses the value for money of the programme/ intervention. This measures the value gained from the programme and the cost of the resources to implement it, against the costs if the programme/ intervention was not delivered.	 What is the value of the effect of the programme/intervention? What resources were used in the programme/intervention and how much did the cost? How effectively are resources being used? Are there better ways to use the allocated resources? 	 Analysis of budget sheets, expenditure, staff hours, materials. Analysis of data of potential outcomes if programme/ intervention was not delivered e.g. cost of health, police and social care expenditure per knife crime assault. 	Secondary data

Type of evaluation	Purpose of the evaluation	Example questions the evaluation seeks to answer	Example methodology	Evaluation participants/ target cohort/s
Social Return on Investment (SROI)	Estimates the social value that is created by a programme/ intervention, including the social, economic and environmental factors.	 What changes were experienced by stakeholders (positive and negative)? Who else has been affected by the changes? Can we attribute the change to the programme/intervention? How long will the changes last for? 	 Analysis of budget sheets, expenditure, staff hours, materials. Analysis of data of potential outcomes if programme/ intervention was not delivered e.g. cost of health, police and social care expenditure per knife crime assault. Interviews/focus groups Surveys 	 People receiving the intervention. People affected by the changes brought about by the intervention (e.g. family members, friends, wider community). Wider organisations affected by the changes (e.g. statutory and non-statutory organisations).

Type of evaluation	Purpose of the evaluation	Example questions the evaluation seeks to answer	Example methodology	Evaluation participants/ target cohort/s
Systems	To assess the wider impact of a programme or service delivery, and provide an understanding of how different agents (such as other organisations, the environment, policies) act upon and influence the effectiveness and efficiency of a programme.	 What effect has the programme had on the delivery and outcomes of other organisations (and how)? What effect has the programme had on the wider environment? (e.g. has the programme indirectly affected the community/physical environment where an intervention is being delivered?) Has the programme affected relationships between other organisations (and how)? Has the programme had an impact on wider regulatory/legal frameworks/policies (and how)? 	 Interviews with stakeholders from different parts of the systems Surveys to understand pre and post-changes, analysed within a systems perspective Concept mapping-stakeholder engagement to understand problems/challenges and present opportunities for change. Network analysismapping of how different organisations connect. 	 People delivering the intervention. People commissioning the intervention Any other key partners involved in design/delivery Wider organisations affected by the changes (e.g. statutory and non-statutory organisations).

7.3 A case study of a process and outcome evaluation (fictional intervention)

In Cardiff bay, local intelligence highlighted a sharp increase in anti-social behaviour (ASB) involving young boys and girls aged 13-20 years. There had been numerous complaints from the community regarding noise disturbance, underage drinking, fighting, vandalism, littering and the potential distribution of drugs. The police responded numerous times to disperse group gatherings and carry out stop and search. However, police officers had concerns that there were young people who were potentially being exploited, but who wouldn't engage with responding officers. Policing teams were concerned that increasing police patrols in the area may move the young people on to others areas, or lead to them being exploited in more private spaces.

In response, South Wales Police and Cardiff local authority co-funded a 'Youth Engagement Team' (YET), in which a youth worker and PCSO patrolled the area together to engage with the young people at risk of exploitation, whilst also seeking to identify any safeguarding needs and reduce ASB. The team were visibly present from the afternoons into evenings, and took time to interact with the young people, understand more about them, provide information and advice, and signpost them to local community groups/youth clubs. Furthermore, where needed the YET put safeguarding referrals in and shared information with local services already involved with the young people, and worked with the schools/colleges and School Police Liaison Officers to raise concerns about the activity of these pupils within the community. The YET also attended local meetings and engaged with community members to listen to the problems they're having, raise awareness of their concerns, share how the police and local authority are addressing the problems and provide advice on what they should do when the young people are in the area.

The YET team was initially piloted for two months, with the intention for continued funding and scale up of the YET to others areas within the force. However, in order for the police to continue to fund it, and obtain long-term buy in from other local authorities in South Wales, an intervention evaluation was commissioned.

An outcome evaluation: would assess whether the YET achieved the desired outcomes. For example:

- Reductions in recorded incidents of ASB.
- Reductions in reported concerns from the community.
- Children at risk of exploitation and involvement in violence identified.
- Increased safeguarding referrals.
- Increased access to support from services, and access to intervention or diversionary programmes for young people identified as at risk.

An outcomes evaluation will seek to assess to what extent these outcomes were achieved, how efficiently and effectively they were achieved, and the extent to which these outcomes can be attributed to the YET.

A process evaluation: would assess how the YET has been implemented and how effectively it operates to achieve the desired outcomes. This would consider:

- The experience of those involved in the YET, including what has worked well, the challenges experienced and further improvements needed.
- Experience of those receiving support from the YET, including policing, young people, the community, schools and social care services. This would explore their perceptions of the YET and their role within the community, accessibility of the support, how well they have engaged with the targeted audience, barriers to engaging with the YET and further opportunities to enhance their role.
- Considerations needed for future delivery and rolling the YET out to other areas.

7.4 A case study of a systems evaluation

Developing a monitoring and evaluation plan for the Wales VPU

The evaluation of the Wales VPU will adopt a systems approach to evaluation, as recommended for carrying out evaluations of place-based approaches (9). The evaluation will draw on systems evaluation guidance produced by Egan et al (17). Existing evidence will be used to inform the development and implementation of violence prevention programmes. Where new interventions are developed and tested, or existing interventions are adapted in to new settings or population groups, partners will be supported to implement robust evaluation before scaling up. Monitoring the impacts of programmes over time will ensure that resources are invested in programmes that work for Wales, that unintended and potentially harmful outcomes are reduced, and that programmes are implemented with consideration of the local community and context. The evaluation will sample participants from different parts of the system to explore the impacts of the VPU on relationships and change, and understand how different parts of the system affect one another.

For example, the Wales monitoring and evaluation plan includes:

- Developing a logic model and theory of change: In March 2020, stakeholder engagement events were held to gather data to inform the development of the Wales VPU logic model and theory of change. Representatives from a range of organisations (include programme funders, developers and service providers) provided information about the activities and intended outcomes associated with the Wales VPU. This information was analysed thematically and used [by the LJMU research team] to develop an outcomes chain logic model. The logic model was then refined in collaboration with the VPU and published in the Wales VPU strategy document]. The theory of change is presented in a figure below. Working in partnership with the Wales VPU, the logic model has been used to identify indicators to measure the outcomes, and these are explored in more details in Annex 1.
- Developing a baseline: The Wales VPU has undertaken a strategic needs assessment to assess the level of need relating to serious youth violence in South Wales. This assessment provides baseline data for the evaluation.
- Collecting routine programme monitoring and evaluation data: The Wales VPU has a
 comprehensive Violence Surveillance System (WVSAS) that combines data from the
 Police, Ambulance and Accident and Emergency Departments to gain a holistic picture
 of serious youth violence in South Wales. Trends and patterns in this data will be
 available and collected over time to understand where changes have taken place.
- Defining the evaluation methods: The evaluation methods will include:
 - Network analysis: to measure improvements in collaborative whole systems approaches to violence prevention in Wales and the organisations who prioritise violence as a public health issue. This method will map how different people or organisations connect to one another to identify key influencers within the system (the people or organisations who have more influence than others) and identify whether some parts of the network are isolated or

- working in silo. The data can be mapped and repeated over time to identify change.
- Concept mapping: to gather information about the evidence-based primary, secondary and tertiary preventative programmes that are delivered in Wales and understand whether pathways for referrals are comprehensive and understood by partners. This method will also be used to identify problems, challenges and solutions through stakeholder engagement.
- Qualitative research with a systems lens: to explore the impact of the Wales VPU on relationships and change, and understand how different parts of the system affect one another. This method will gather qualitative data to understand feelings of safety amongst children, young people, parents, families and communities, by gathering insight at various time-points of strategy implementation. It will also gather qualitative data to understand psycho-social, health, education and socioeconomic outcomes at various time-points of strategy implementation.
- Adaptation of traditional evaluation approaches with a systems perspective: to understand pre and post-changes of individual VPU interventions, analysed within a systems perspective. This method will use intelligence to measure a reduction violence and associated risk factors (and increases in protective factors.





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