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Understanding the Mechanisms and Outcomes of Evaluation
Influence Within Population Health Partnerships.

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A thesis submitted in partial fulfilment of the requirements for the degree of Doctor of Philosophy (Health Sciences), The University of Auckland, 2012
Abstract

The importance of evaluation use has led to a large amount of theoretical and empirical study over the past 30 years. Evaluation use, however, is a complex phenomenon that is still not well understood. Indeed, the emergence of the term “evaluation influence” sought to best capture some of these complexities. While the evaluation literature identifies a range of factors that are important for influence, there is a need to develop a stronger evidence base to inform evaluation practice. More specifically, greater attention needs to be given to the impact of a programme’s context on the pathways to evaluation influence. Evaluation occurs across a diversity of contexts and frequently involves partnerships. The health sector in particular has witnessed an increased and continuing trend in partnership approaches. Currently, we know little about evaluation influence within this context. For evaluation to inform partnership decision making and programme improvement, we need to increase our understanding of influence within partnerships. This thesis begins to do this by identifying the mechanisms and outcomes of evaluation influence within population health partnerships. More specifically, this research used a mixed methods approach to identify the type and level of influence experienced by partnerships, as well as the partnership functioning and broader contextual factors that facilitated or hindered influence. The findings highlight the multiple influences of evaluation on partnerships and partnership members. Equally, the research illustrates the complex and reciprocal nature of evaluation influence pathways. More specifically, the mixed methods analysis contributes new knowledge by highlighting the role of partnership functioning and broader contextual factors in evaluation influence. In this respect, the findings identify a number of implications for existing theory and practice.

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were sometimes in the middle of the night when I was trying to analyse data! As for my husband, well it is difficult to know where to begin. He has amazed me with his ongoing support, encouragement and motivation; without him by my side this journey would not have been possible, or half as fun. I dedicate this thesis to you both and I am forever grateful for your support.

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Chapter One: Overview

1.1 Introduction

This thesis presents research undertaken for a Doctor of Philosophy degree with the Faculty of Medical and Health Science at The University of Auckland in New Zealand. The research explores evaluation influence within population health partnerships, with the specific aims and objectives detailed in section 1.2. This chapter provides an overview to introduce the research and the rationale behind it. This is followed by the aims and objectives of the research, and a brief description of the methods used. Following this, the significance of the research is identified. The structure of the remainder of this thesis is then described.

1.2 Research Focus

Evaluators have had a long interest in the use of their evaluation findings. Initially, concern over use was driven by the desire to maximise the positive social impacts of evaluation (Ciarlo, 1981), a theme that remains in the more recent literature (Mark & Henry, 2004). Equally, those commissioning evaluation want to benefit from its potential to inform their practice. The importance of evaluation use to evaluators and evaluands (objects of evaluation) has led to a large amount of theoretical and empirical study over the past 30 years (Caracelli, 2000; Cousins & Leithwood, 1986; Kirkhart, 2000; Mark & Henry, 2004; Patton, 2004; Peck & Gorzalski, 2009; Shulha & Cousins, 1997; C. H. Weiss, 1998).

Evaluation use, however, is a complex phenomenon that is still not well understood. These complexities are reflected in the various definitions and conceptualisations of evaluation use, each of which focus on different categories of use.

Evaluation use typically refers to one of four types of use: instrumental, conceptual, symbolic and process. Instrumental use refers to the use of evaluation findings for decision making, such as programme continuation or change (Rich, 1977). Conceptual use includes enlightenment or general learning through evaluation (Rich, 1977; C. H. Weiss & Bucuvalas, 1980). The use of evaluation to justify existing views with no real intention of benefiting from the process or findings is termed symbolic use (Patton, 2008). Process use refers to learning or change that is stimulated by the learning that occurs during the process of an evaluation rather than its findings (Patton, 2008). To fully capture the multiple ways in which evaluation can affect programmes, policies and stakeholders, discussions have turned to the notion of “evaluation influence” (Henry & Mark, 2003; Kirkhart, 2000; Mark &
A term originally coined by Kirkhart (2000) and developed further by Mark and Henry (2004), evaluation influence encompasses traditional conceptions of use, as well as various changes at the individual, interpersonal and collective levels. Mark and Henry (2004) present a theory of evaluation influence that depicts the numerous factors that can affect the influence of an evaluation, including context. This model is particularly relevant for this thesis, as it seeks to build on the notion that evaluation influence is impacted on by many factors within an evaluation environment.

Initially, the research on evaluation impacts focused on the direct use of evaluation findings (Cousins & Leithwood, 1986; Patton, 1998; Shulha & Cousins, 1997; C. H. Weiss, 1998). While the focus on evaluation use remains in recent literature (Peck & Gorzalski, 2009), increasing attention is also given to the influence of evaluation (Christie, 2007; Henry, 2003). However, much of the research to date is based on descriptive case studies and evaluator perceptions (Fleischer & Christie, 2009; Greenseid, Toal, King, Lawrenz, & Volkov, 2009; Henry & Mark, 2003). Further, much of this evidence has not sought to capture the role of a programme’s context in evaluation influence. If we want to understand more about evaluation influence, we need to capture the full complexity of this phenomenon across a diverse range of contexts. Equally, we need to give more attention to the perceptions of those who are commissioning, participating in and seeking to be influenced by evaluation.

While the evaluation attributes that are important for evaluation influence have been explored in previous research (Cornachione, Trombetta, & Casa Nova, 2010; Cousins & Leithwood, 1986; Peck & Gorzalski, 2009; Shulha & Cousins, 1997; Villaveces, Peck, & Price, 2010), less attention has been given to the role of a programme’s organisational context in evaluation influence. Here, a programme’s context refers to the organisational systems and structures that impact on programme implementation and management. A programme’s organisational structure for example, can take many forms: it may be hierarchical or based on a team or network. These organisational contexts are important for programmes and their evaluations, as they are likely to impact on processes, such as decision making. Attributes of organisational contexts have also been associated with differences in workplace learning (Darrah, 1996; Koike, 2002). Thus, organisational contexts are likely to be important for evaluation influence. Furthermore, evaluators are increasingly faced with complex organisational structures, such as partnerships, networks and other collaborative approaches.
In the health sector for example, partnership and collaborative approaches have risen in prominence, both locally and internationally (Clarke & Glendinning, 2002; Ham, 2005; Sullivan & Skelcher, 2002). This increase in partnerships was underpinned by a focus on whole systems approaches and the notion of integrated care and joined-up working (Department of Health, 1998). Moreover, it was anticipated that partnerships could address the complex social problems facing modern society through enhancing collaboration and coordination across organisations and sectors.

At an international level for example, public–private partnerships between health organisations have worked to expand access to drugs and vaccines in poor countries (Reich, 2002; R. Smith, 2000). Partnerships have also been a key focus in the US, with Lasker, Weiss and Miller (2001) noting the vast investment in “thousands of alliances, coalitions, consortia and other health partnerships” (p. 179). Similar trends have been seen in countries such as Canada, the UK and Australia. In population health specifically, partnerships are often working to tackle issues such as obesity, teenage pregnancy and social exclusion (Department of Health, 2010; Obesity Working Group, 2008a). Thus, partnerships are a prominent and enduring feature of health programmes. This focus means that evaluations frequently involve partnerships (Dickinson, 2006).

Partnership contexts bring an added level of diversity and complexity to programmes, evaluation design and, more than likely, evaluation influence. Therefore, we need to understand more about evaluation influence within these contexts. This is important for identifying the ways in which evaluation can support programme improvements and provide benefits for partnerships, their programmes and their beneficiaries. Furthermore, learning-based activities such as evaluation need to offer partnerships the opportunity for improvement. Partnerships are complex and it is not clear whether they have really achieved their desired benefits (McDonald, 2005; Newman, Barnes, Sullivan, & Knops, 2004; Neil Perkins, Smith, Hunter, Bambra, & Joyce, 2010; Rummery, 2002). Indeed, the challenge of securing harmonious partnership functioning makes it difficult to understand the achievements and shortfalls of a partnership approach. This challenge is further exacerbated by premature and unrealistic approaches to measuring partnership success (Mandell & Keast, 2008; Sydow, 2004). Thus, it is important that evaluation is designed to be responsive to partnerships and their needs. It is important therefore, that we understand more about the evaluation attributes that can trigger evaluation influence within this context.
To date, the existing literature identifies a range of evaluation attributes, partnership characteristics and contextual factors that are likely to be important for evaluation influence within health sector partnerships. However, some empirical work in this area is needed. Specifically, there is a need to understand the diverse range of influences that evaluation can trigger, and the factors that can facilitate or hinder these influences. To develop a comprehensive understanding of influence, it is important to explore influence across a range of contexts and to capture the experiences of those who are commissioning or engaging in evaluation. Such information is important for informing evaluation theory and practice, for evaluators and the sector. Further, it is anticipated that this knowledge would support the sector and evaluation, in achieving the types of influences that are needed to support improvements in health programmes and outcomes. This study is aiming to contribute to this knowledge by identifying the mechanisms and outcomes of evaluation influence within population health partnerships in New Zealand.

1.3 Research Aims and Objectives

This research aimed to identify the mechanisms and outcomes of evaluation influence within population health partnerships. The specific objectives were to:

1. Identify the levels of evaluation influence experienced by the population health partnerships and the individual partnership members.
2. Identify which evaluation attributes trigger evaluation influence.
3. Identify which partnership functioning characteristics can facilitate or hinder evaluation influence.
4. Identify the contextual factors that can facilitate or hinder evaluation influence.

To address these aims and objectives the research involved a mixed methods approach, largely informed by the work of Green (2007), Johnson, Onwuegbuzie and Turner (2007) and Teddlie and Tashakkori (2003). Specifically, the research involved four studies. Study 1 involved a review of the literature to develop a conceptual framework of evaluation influence within population health partnerships. Study 2 involved an online survey of 187 population health partnership members from 19 regions across New Zealand. Study 3 involved case studies with four of the partnerships identified from the survey. Finally, Study 4 integrated the data from all three studies. This data integration and analysis was the crux of the mixed methods approach and was crucial for addressing the research aims and objectives.
1.4 Significance of this Research

The conceptual framework developed for this research draws heavily on the theory of evaluation influence presented by Mark and Henry (2004). Still, this research makes a notable contribution to existing theory by developing this framework for a partnership context. More specifically, the conceptual framework presents a theory of evaluation influence within population health partnerships. The theory uses an analysis of key concepts to develop propositions about the relationships between evaluation attributes, partnership functioning and evaluation behaviour, individual characteristics, contextual factors and evaluation influence. The framework builds on existing theories by considering the role of individual characteristics, stakeholder evaluation behaviour and partnership contexts. The framework also informs our understanding of the complexities of evaluation environments and the ways in which organisational and political contexts impact on influence.

This research makes a significant contribution to the evaluation literature by providing empirical evidence on the complex pathways, mechanisms and outcomes of evaluation influence. In this respect, the research begins to build a stronger evidence base for evaluation influence. More specifically, this research provides further insight into stakeholders’ experiences of evaluation influence and gives attention to the role of a programme’s context in influence. This is designed to provide a more comprehensive understanding of evaluation influence in practice. Exploring the role of influence within population health partnerships is also designed to respond to the current trends in service provision with a view to supporting the value of evaluation for programme beneficiaries and their communities.

Further, the research provides notable evidence on the factors that facilitate or hinder evaluation influence. While previous work has associated a range of factors with evaluation influence, this research uses a mixed methods data integration and analysis to develop a hierarchy of the important factors. The research also identified the factors that can trigger different types and levels of influence, as well as the ways in which the different factors relate and interact with one another to produce influence. Understanding the importance of different factors, how they relate to one another and the different types of influences that they can facilitate is crucial for informing our knowledge of evaluation influence.

The research design makes a notable contribution to the mixed methods literature. Specifically, the data integration and analysis undertaken for Study 4 draws on the previous experiences of mixed methods evaluators and researchers to develop a specific data
integration framework. This offers practical guidance on conducting mixed methods analyses, and given the need for further work in this area, makes a weighty contribution to the literature on mixed methods data analysis.

1.5 Thesis Structure

This thesis is presented in nine chapters. Following this overview (Chapter 1), existing literature is used in Chapter 2 to highlight the background and rationale for this research. This chapter, however, does not include an extensive review of existing literature on the factors likely to trigger influence within partnerships, as this is used in Chapter 4 to develop the conceptual framework underpinning this research. Chapter 3 presents the methodology for this research and briefly outlines the methods for each study. Given the number of studies in this research, the methods and results for each study are presented as individual chapters. This means that a detailed review of the methods is not provided in the methodology chapter. Breaking up the studies in this way was designed to support the reader in reviewing and understanding each study without the need to refer back to the methodology section.

Chapters 4, 5, 6 and 7 present the methods and results for the four studies undertaken in this research. Chapter 4 presents the methods and results for the development of the conceptual framework in Study 1. Chapter 5 presents the methods and results for the survey with 187 population health partnership members and Chapter 6 presents the same information for the case studies with four partnerships. It is important to note that these chapters draw largely on descriptive summaries of the research findings, as this research adopts an integrated design. Specifically, the approach to mixed methods in this research integrates the findings at the level of analysis and the development of conclusions (Greene, 2007). Subsequently, no inferences are made on the findings from Studies 1, 2 or 3 until the evidence is drawn together through the mixed methods data integration and analysis in Study 4 (Chapter 7). Specifically, in Study 4 the findings from Studies 1, 2 and 3 are integrated to identify a hierarchy of factors important for evaluation and to develop a set of mixed methods inferences for this research. Chapter 8 presents a discussion of the findings from this research and the conclusion.
Chapter Two: Background and Rationale

2.1 Introduction

This chapter builds on the overview in Chapter 1 by providing further insight into the background and rationale for this research. Specifically, this chapter identifies the nature of evaluation and its emphasis on informing decision making and ultimately facilitating improvement. The nature of evaluation and the importance of establishing a firmer evidence base for evaluation influence are then used to highlight the rationale for focusing on evaluation influence within population health partnerships in this research. This is followed by a review of some of the key theories and existing research on evaluation influence. This overview highlights current gaps in existing knowledge and the importance of understanding the role of a programme’s organisational and broader context in evaluation influence. To date, this is an area that has received little attention in existing research.

Given the increased organisational and contextual complexity facing evaluators, we need to understand how evaluation influence can be achieved in a range of contexts. Partnerships, for example, are an organisational structure frequently involved in evaluation (Dickinson, 2006; Woodland & Hutton, 2012). The health sector in particular has witnessed an increase in partnerships, as it sought to draw on the increased integration and coordination promised by a partnership approach (Dickinson & Glasby, 2010; N. Perkins, Smith, Hunter, Bambra, & Joyce, 2010). Given the continued investment of the health sector in evaluation and its increased use of partnerships, it is important that we understand more about evaluation influence in this context. Without such knowledge, the influence of evaluation on partnerships’ decision making and programme improvements will be left to chance. This thesis begins to contribute to such knowledge by identifying the mechanisms and outcomes of evaluation influence within population health partnerships.

The focus on understanding the role of partnerships and their broader contextual factors in influence is underpinned by the notion that evaluation influence does not occur in isolation. Indeed, the complexity brought to an evaluation environment by a partnership and its broader context may facilitate or hinder influence. For example, partnerships often struggle to secure harmoniums functioning. It is anticipated that the broader contextual impacts on partnerships and their functioning will offer both opportunities and challenges to evaluation influence. To introduce this concept, this chapter briefly describes the characteristics of population health partnerships, and begins to highlight some of the potential challenges to partnership functioning and how these may impact on evaluation influence.
It is important to note, that a detailed review of these factors is provided in Chapter 4 during the development of the conceptual framework underpinning this research. This chapter is designed to set the scene for the research and identify the rationale for its focus. This chapter also includes the definitions of “evaluation,” “evaluation influence,” “partnership” and “population health” that are used in this thesis.

2.2 Evaluation

An often cited definition of evaluation suggests that “evaluation determines the worth, merit or value of something” (Joint Committee on Standards for Educational Evaluation, 1994; Scriven, 1991, p. 139). Yet, there are many approaches to evaluation, each of which reflect or align to different definitions. Indeed, Rallis and Bolland (2004) note the diversity among evaluators in their perceptions of evaluation, what counts as evaluation data, and the role of evaluation in improvement and in facilitating social betterment. For example, Newcomer, Hatry and Wholey (2004) emphasise the quality of evaluation when stating that evaluation “provides processes and tools that agencies of all kinds can apply to obtain valid, reliable, and credible data to address a variety of questions about the performance of public and non-profit programmes” (p. xxxiii).

Weiss (1998) places greater emphasis on the systematic nature of evaluation, the use of standards to make judgements about programmes and the role of evaluation in improvement. Specifically, Weiss states that “evaluation is the systematic assessment of the operation and/or the outcomes of a programme or policy, compared to a set of explicit or implicit standards, as a means of contributing to the improvement of the programme or policy”. (p. 4) This definition also recognises the use of evaluation to understand more than just social programmes, as evaluation can equally be used to evaluate a broad range of initiatives and policies (Rossi, Lipsey, & Freeman, 2004). Despite the diversity of definitions, Rallis and Bolland (2004) suggest that most involve three concepts: (1) systematic inquiry, (2) judgement of merit, worth, value or significance, and (3) information for decision making. It is the third point that is most relevant here, as this suggests that evaluation should be used or at least useful for decision making.

This thesis builds on this concept by suggesting that if evaluation should inform decision making then we must understand more about the ways in which evaluation can achieve this. More specifically, there is a need to identify the evaluation attributes that trigger influence. While research has begun to do this, it is largely based on descriptive case studies written by evaluators or survey research drawing on evaluators perceptions (K. Johnson et al., 2009;
Leviton, 2003). Research has involved interviews with stakeholders (Bamberger, 2004; Marra, 2003); although the need to broaden our understanding of stakeholder experiences and develop a stronger evidence base for the evaluation attributes that trigger influence remains (Leviton, 2003; Mark & Henry, 2004; Murphy, 2007; Poth, 2008).

2.2.1 Defining Evaluation for this Thesis

Given the diversity in the understanding and practice of evaluation, it is important to define what evaluation means for this thesis. First, this thesis focuses on programme evaluation, which will be referred to as “evaluation” throughout this document. Second, for this thesis evaluation refers to any type of evaluation, thus it may include feasibility, process, outcome, impact or economic evaluation, among others. The specific definition adopted here is from Patton (1997), who states that programme evaluation “is the systematic collection of information about the activities, characteristics, and outcomes of programs to make judgements about the program, improve program effectiveness, and/or inform decisions about future programming” (p. 23).

This definition is useful as it captures the systematic nature of evaluation and its capacity to be applied to a broad range of topics, as well as its ability to make judgements and improve programmes. For this thesis, the role of evaluation in facilitating improvement is particularly important. While other authors have broadened the influence of evaluation by suggesting that it should inform social action and improve social conditions (Mark & Henry, 2004; Rallis & Bolland, 2004; Rossi et al., 2004), the definition adopted here is considered to be appropriate for the scope and boundaries of this research. Specifically, this research is focusing on the influence of evaluation on partnerships and individual partnership members. Thus, the more collective impacts on social action and social betterment are not the focus of this research. Focusing on specific influences within the framework is also supported by Mark (2011).

2.2.2 Rationale for Focusing on Evaluation

The sense that evaluation can inform decision making and facilitate programme improvement underpinned the rationale to focus on evaluation influence (Rallis & Bolland, 2004; Rossman & Rallis, 2000; Torres & Preskill, 2001). In particular, the potential influence of evaluation on stakeholders’ attitudes and actions was important (Mark & Henry, 2004). For example, evaluation has been used to justify higher quality standards for childcare licences in the US (Shulock, 1999). Similarly, evaluation has triggered changes at
a programme level. An example of this is the Drug Abuse Resistance Education (DARE) programme, whereby a meta-analysis that compared DARE to other interactive programmes was the impetus for making changes to the programme’s curriculum and instructional methods (Ennett, Tobler, Ringwalt, & Flewelling, 1994). Still, this influence was largely due to the meta-analysis as previous evaluations of DARE had little or no impact. More recently, research by Oliver (2009) also noted the impact of evaluation on behavioural outcomes.

To date, however, the evidence for the role of evaluation in facilitating influence, supporting decision making and informing improvement is not as strong as it could be (Murphy, 2007; Poth, 2008). For example, the literature on evaluation use and influence is typically characterised by evidence drawn from evaluator perceptions rather than systematic empirical research. Leviton (2003) illustrates this point well by stating that:

> The empirical work that is available suffers from a flawed standard of evidence. People’s self-report about use of information is frequently taken at face value, with no validation of measurement (in the context of a survey or interview format), or triangulation of information (in the context of qualitative study). A standard of evidence that many of us would never dream of applying to the conduct of evaluations, too often predominates in the study of evaluation use. (p. 526)

Weiss (1979) suggests that establishing this evidence is particularly important for informing evaluation practice: “Better knowledge of what kinds of evaluation have an impact on decision-making and under what conditions, should help to encourage more effective development of evaluation practice” (p. 326).

Thus, there is a need to develop a stronger evidence base for evaluation influence (Henry & Mark, 2003; Mark & Henry, 2004; Poth, 2008; Torres & Preskill, 2001). It is only through doing this that we can produce evidence to guide and inform evaluation practice. Moreover, research on influence can begin to identify the types of influence facilitated by evaluation and the specific evaluation attributes that can trigger influence. This is important, not just for increasing influence but for achieving better influence, as suggested by Weiss (1979).

Understanding more about influence is also important as some evaluators, notably Patton (1997), call for evaluations to be judged on their use and for evaluators to be responsible for use. Indeed, utility is one of the four evaluation standards for evaluation practice. Specifically, this standard states that evaluation should be useful to those commissioning evaluation, the stakeholders and the community (Yarbrough, Shulha, Hopson, & Caruthers,
For evaluation to more consistently deliver useful and influential evaluations, we need to understand more about influence in practice.

### 2.2.3 Defining Evaluation Influence for this Thesis

As noted in the overview, evaluation use typically refers to four types of use: instrumental, conceptual, symbolic and process use. While these conceptualisations are important, it has been suggested they do not fully capture the multiple mechanisms and pathways through which evaluation can affect stakeholders, programmes and policies. Thus, Kirkhart (2000) adopted the term evaluation influence to capture the “multidirectional, incremental, unintentional and unidirectional influences of evaluation that are not captured in the term ‘use’” (p.7). Kirkhart suggests that evaluation influence encompasses traditional conceptions of use, while also seeking to ensure that the complex influences of evaluation are fully captured, explored and understood. In recognition of this notion, this thesis adopts Kirkhart’s definition of evaluation influence. Subsequently, the term evaluation influence is used here to capture both the influences and traditional uses of evaluation. This broader focus was designed to identify the multiple ways in which evaluation can inform decision making and programme improvements, thus giving us greater insight into how evaluation can trigger influence.
2.2.4 Understanding Evaluation Influence

When describing evaluation influence, Henry (2003) states that:

A change between a pre-evaluation state and a post-evaluation state, provides an indication that the evaluation was influential, if rival hypotheses for explaining the difference can be rendered implausible. The pre-evaluation states could be individual attitudes, behaviours of organisation members who serve as change agents, or government policies. But it is also possible that evaluations can be influential in stemming momentum for change by preventing ineffective policies or programmes from being funded and implemented. (p. 515)

While this description highlights the multiple ways through which evaluation can influence individuals, programmes and policies, Mark and Henry’s 2004 theory of evaluation influence is more useful for guiding research on influence.

In their theory, Mark and Henry (2004) draw on research traditions outside of evaluation to specify the multiple pathways and mechanisms through which evaluation can influence stakeholders’ attitudes and action. Overall, they suggest that these mechanisms of influence can occur at the individual, interpersonal and collective level (Henry & Mark, 2003). The authors’ 2004 paper then further classifies these mechanisms into four kinds including general mechanisms, cognitive and affective (or attitudinal) processes, motivational outcomes, and behavioural outcomes (Table 1). Their work identifies the many influences of evaluation, and was particularly useful for informing the development and design of the research undertaken for this thesis.
When describing Table 1, Mark and Henry (2004) identify the general influence processes in the top row as the key starting points for change. They suggest that it is these processes that are likely to lead to some change in the cognitive/affective, motivational and behavioural processes that follow. The research conducted for this thesis focused on influences on individual partnership members (individual), as well as influences on the partnership itself (interpersonal) and two collective-level influences. The specific influences explored are highlighted in bold in Table 1. In this research, collective influences tended to occur at a partnership level. Therefore, the interpersonal and collective influences are described as partnership influences throughout this thesis. Distinctions are only made between the two levels when it is important for providing insight into the research aims and objectives.

The focus on these specific influences was designed to enable the research to identify the different types and levels of influence experienced by partnership members and their partnerships. Equally, moving beyond individual influences was important for identifying the influence of evaluation at a partnership and programme level, as well as the ways in which partnership functioning or the programme’s broader contextual factors facilitated or hindered influence. This focus on specific influences is also supported by Mark (2011) who
notes that their theory presents a range of influences to explore rather than a prescribed list of anticipated influences from all evaluations.

At a more pragmatic level, this focus was also driven by the challenges of measuring and exploring some of the evaluation influences identified by Mark and Henry (2004). Preskill, Zuckerman and Matthews (2003) also note some of the theoretical and practical challenges in measuring evaluation use, such as reliance on recall and the participants’ awareness of use or influence taking place. Subsequently, the focus on predominantly individual and interpersonal influences in this research also aimed to support feasibility in terms of study design.

In addition to the specific types and levels of evaluation influence, Mark and Henry (2004) also present a theory of evaluation influence. Their theory encourages us to reconsider the outcomes influenced by evaluations and the change processes that evaluations can ignite. This theory is particularly important for this thesis, as it begins to capture the importance of a programme’s organisational and broader context in evaluation influence. While this area has received less attention in the research on influence, the notion of evaluation influence, or more commonly use, has received much attention in the theoretical evaluation literature over the past 30 years (Appleton-Dyer, Clinton, Carswell, & McNeill, 2012; Cousins, 2003; Kirkhart, 2000; Mark & Henry, 2004; C. H. Weiss, 1979). An overview of some of these theories is now used to highlight our current understanding of influence and the importance of understanding more about a programme’s organisational and broader context in influence.

2.2.4.1 Existing theories of evaluation influence

A diverse range of authors have made important contributions to our understanding of evaluation influence (Alkin, 1991; Cousins & Earl, 1992; Patton, 1997; Provus, 1979; Torres & Preskill, 2001). Nevertheless, this section focuses on Kirkhart’s (2000) and Mark and Henry’s (2004) theories of evaluation influence, as they both adopt the term influence as opposed to use. Importantly for this thesis, Mark and Henry’s theory also begins to recognise the role that the context of an evaluation can have in evaluation influence pathways. This is important, as this thesis aims to expand on this notion by exploring the role of both a partnership and the health sector context in evaluation influence.

Kirkhart’s (2000) integrated theory of evaluation influence includes three key dimensions: source of influence (process and use), intention (unintended and intended) and timeframe (immediate, end of cycle and long term). This model is important, as it begins to recognise
the multiple sources and ways in which evaluation can influence stakeholders and their programmes. Cousins (2003) then developed a model of evaluation influence for participatory approaches to evaluation. Mark and Henry (2004) developed this work further by presenting a schematic theory of evaluation influence (Figure 1). Both of these theories capture the role of evaluation attributes, such as specific inputs, activities and outputs, in triggering influence, although less attention has been given to the role of a programme’s organisational context or its broader context.

Figure 1: Schematic theory of evaluation influence. Reproduced from Mark and Henry (2004, p. 13).

Mark and Henry’s model begins to capture the role of a programme’s context by highlighting the attributes of an organisation(s) decision/policy setting that are likely to be important for evaluation influence (Figure 1). However, these factors warrant further exploration, as a programme’s organisational context is likely to be important for facilitating evaluation influences into programme decision making and improvement. For example, the cultural, political and informational aspects of organisations will impact on the
dissemination of evaluation information, decision-making processes (Lasker et al., 2001; K. E. Smith et al., 2010), and thus, evaluation influence. In particular, multi-organisational contexts such as partnerships add complexity to a programme’s context and their opportunities for learning (Solomon & Chowdhury, 2002). Indeed, organisational structures have been associated with differences in workplace learning (Darrah, 1996; Koike, 2002). More specifically, employee interviews conducted by Ashton, Mays and Delvin (2005) found that hierarchical structures facilitated crucial knowledge sharing between senior staff but restricted its availability to more junior staff members. Therefore, the potentially flatter structures encompassed within some partnerships may offer opportunities for learning and evaluation influence.

Yet, the implications of organisational structures, such as partnerships, on learning-based activities like evaluation have not been well explored in the literature. Given that evaluations increasingly involve partnerships (Dickinson, 2006; Woodland & Hutton, 2012), we need to understand more about influence in such contexts. In the health sector for example, partnerships have risen in prominence, both locally and internationally (Clarke & Glendinning, 2002; Ham, 2005; Sullivan & Skelcher, 2002). These partnerships were designed to address the complex social problems facing modern society by enhancing collaboration and coordination across organisations and sectors (Axelsson & Axelsson, 2006; Mandell & Keast, 2008). This resulted in some complex partnerships (Counties Manukau District Health Board, 2005; Nelson Marlborough District Health Board, 2007), complex evaluations (Clinton, Brown & McNeill, Personal Communication) and equally complex environments for evaluation influence.

Furthermore, partnerships are complex organisational systems that may not have well-established decision-making or organisational processes (Dickinson & Glasby, 2010; K. E. Smith et al., 2010). It is these very processes that can impact on partnership functioning and potentially evaluation influence. Indeed, existing literature often highlights partnerships’ struggles to secure harmonious functioning and their intended benefits (Dickinson & Glasby, 2010; McDonald, 2005; Rummery, 2002). Thus, for evaluation to inform decision making and programme improvements within partnerships, we need to explore evaluation influence within this context. This is important for enhancing the responsiveness of evaluation to current and continuing trends in programme delivery, as well as for delivering value for the health sector’s investment in evaluation.
The immediate context of a programme such as a partnership also sits within a broader organisational and political context. While Mark and Henry’s generic theory begins to identify the broader environmental mediators of evaluation influence, there is a need for greater clarity of the model (C. H. Weiss, Murphy-Graham, & Birkeland, 2005). For example, there is a need to unpack the “environmental contingencies” highlighted in Mark and Henry’s (2004) model by identifying the specific contextual factors that are important for evaluation influence. Mark and Henry also recognise the importance of exploring influence across a broader range of contexts for enhancing our understanding of influence. For example, sectors differ in terms of culture and organisational structure just as individual organisations do (Axelsson & Axelsson, 2006; Bates & Khasawneh, 2005). It is broader contextual factors such as these that are likely to be important for evaluation influence.

This thesis begins to identify the broader environmental mediators of evaluation influence by examining evaluation influence within population health partnerships. Specifically, this thesis identifies the types and levels of influence experienced by the partnerships and their members. To understand the pathways to these influences, this research also identifies the evaluation attributes, partnership functioning and contextual factors that facilitate or hinder influence. This focus is important as the sector continues to invest in evaluation and partnerships with a view to enhancing its programmes and outcomes for programme beneficiaries and their communities. Equally, this research will contribute to the need to develop a stronger evidence base for evaluation influence (Cousins, Goh, Clark, & Lee, 2004; Leviton, 2003; Murphy, 2007; Poth, 2008).

2.2.4.2 Previous research on evaluation influence

While the detailed attributes of evaluation, partnerships and broader contextual factors are critically discussed in the development of the conceptual framework, an overview of existing research on evaluation influence is useful for informing the background and rationale for this research. While previous research has typically focused on evaluation use (Alkin & Taut, 2003; Christie, 2007; Fleischer & Christie, 2009; Peck & Gorzalski, 2009; Preskill et al., 2003), it is still useful for informing our understanding of influence. Previous research in this area has often involved case studies, simulation studies, surveys and literature reviews. Existing literature reviews are particularly useful for providing an overview here due to the range of studies that they encompass.

For example, Leviton and Hughes (1981), Cousins and Leithwood (1986) and Shulha and Cousins (1997) reviewed 120 studies conducted between 1971 to 1996. These reviews
highlight a range of important evaluator attributes and stakeholder characteristics for evaluation influence. Equally, these reviews began to recognise the role of a programme’s contextual factors, such as the decision-making context and political climate. Indeed, the latter review by Shulha and Cousins identified organisational context as crucial for evaluation use. Equally, these reviews highlighted the lack of empirical work in this area and the need to expand our understanding of stakeholders’ evaluation experiences and influences.

More recently, Johnson et al. (2009) conducted a review of the empirical literature on evaluation use from 1986 to 2005. Their review included 41 empirical studies with roughly half focusing on “evaluation implementation” and half focusing on the “decision-making or policy setting” (p. 318). While these studies echoed the findings of previous reviews, they also highlighted the importance of stakeholder engagement. What is important to note here, is that while half of the studies focused on the decision-making or policy setting, the emphasis remained on individual stakeholders. For example, research identifying the role of the political climate explored the political orientation of those who commissioned the evaluation, their dependence from external sponsors, internal rivalry, budget fights and power struggles (Eisendrath, 1988; Johnston, 1986; Santhiveeran, 1995; C. H. Weiss et al., 2005). While these factors are also important, there is a need to identify the role of a programme’s broader organisational systems and processes in evaluation influence.

Still, existing research has identified the role of some organisational characteristics (Preskill et al., 2003; Thompson, 2009; Torres, Preskill, & Piontek, 2005). Research by Preskill et al. (2003) is perhaps the most relevant for this thesis. Specifically, this research identified six organisational characteristics that were important for process use. This included the stability of an organisation and attitudes towards evaluation, as well as the organisational culture and commitment to evaluation capacity building. While this work provides useful insight into an organisation’s evaluation characteristics for process use, there is a need to expand on this work by identifying the specific organisational systems and processes that are important for influence. Furthermore, none of these studies have explored evaluation influence within the complexity of partnerships.

Previous research has also tended to identify a number of key factors with little insight into their importance or the ways in which they interact to support or hinder influence. In response, Johnson et al. (2009) suggests that research on influence pathways requires a different approach. They highlight the importance of beginning to explore the relationships
between these factors. Moreover, when reviewing the existing literature it becomes apparent that greater attention needs to be given to the environment within which an evaluation takes place. It is only by doing this that we will begin to understand more about evaluation influence in practice, including the ways in which evaluation can trigger influence and the organisational, stakeholder and contextual factors that can support or hinder this process. Limiting the attention that we give to the complexities of an evaluation environment is to continue to limit our understanding of influence, and more importantly the potential for research on influence to inform evaluation practice and improve programmes.

In addition to the need to capture the complexities of influence, the literature review conducted for this research identified four key challenges to our current understanding of influence. First, existing research is not always underpinned by a clear definition of evaluation use or influence. In this respect, it is not always clear what researchers mean when they are discussing use or influence (Avery & Van Tassel-Baska, 2002; Matlay, 2000; Robinson & Cousins, 2004; Vakola, 2000). Second, research is not always underpinned by existing theory. For example, a number of papers explore the notion of influence when discussing the impact of evaluation without explicitly drawing on a theory of evaluation influence (Alexander, 2003; Allen, 2010; Cooksy & Caracelli, 2005; Frey, 2010; Poth, 2008; Vanlandingham, 2010). This makes it harder to develop a stronger evidence base for evaluation influence.

The third challenge to interpreting existing research, relates to those “using” or being “influenced” by evaluation. For example, many of the studies focused on those who led the decision to commission the evaluation (Cousins & Leithwood, 1986) or on high-level decision makers (Balthasar & Rieder, 2010; Christie, 2007; Matlay, 2000). Adopting a broader focus is important for capturing the diverse range of stakeholders and organisational contexts involved in evaluation, as well as a broader range of evaluation influences. The fourth challenge relates to those who have conducted existing research. More specifically, a large proportion of the previous research has been conducted by the same people who conducted the evaluation (Leviton, 2003). Clearly, evaluators and some of the stakeholders engaged in existing research may have a vested interest in identifying the influence of evaluation. Thus, there is also a need for more independent research.

Existing research has also tended to focus on evaluation use, rather than capturing the broader range of evaluation influences. While influence has received greater attention more recently (Bamberger, 2004; Chang & Tseng, 2009; McEathron, 2008; Murphy, 2007; Poth,
2008), much of the evidence has focused on the role of the evaluator, internal evaluations or organisational learning characteristics. Yet, these studies did not seek to identify the specific evaluation attributes that can trigger influence, or the contextual factors that can mediate this process. While studies by Allen (2010) and Poth (2008) have begun to explore the role of organisational learning characteristics in evaluation influence, they did not capture the role of a programme’s organisational or broader context. Another characteristic that is particularly relevant here, is that existing research has been predominantly conducted in education settings (Johnson et al. 2009). Thus, there is a need to conduct research across a diverse range of settings (Mark & Henry, 2004). This will highlight the complexities of evaluation influence, and the role of an evaluation’s environment in facilitating or hindering influence. More importantly, such insights can also inform evaluation practice.

2.2.5 Summary

This section has highlighted the nature of evaluation, and the sense that evaluation should inform decision making and programme improvement. Equally, it has identified the need to develop a stronger evidence base for evaluation influence in practice. Furthermore, evaluators are facing increasingly complex contexts, such as partnerships. To inform decision making, programme improvement and support evaluation influence in this context, we need to understand more about evaluation influence within partnerships. This is important for adhering to the standards that underpin evaluation, as well as ensuring that evaluation provides value for those investing in it. More specifically, such knowledge can guide evaluation practice, and ultimately provide benefits for programme beneficiaries and their communities. The next section focuses on population health partnerships. Specifically, the next section highlights the rationale for focusing on partnerships, as well as the potential for partnership functioning characteristics and their broader contextual factors to facilitate or hinder evaluation influence.

2.3 Partnerships in Health

Partnership approaches to health and social services were greatly emphasised as part of the “Third Way” by Tony Blair (Department of Health, 1998). Indeed, the election of New Labour in 1997 resulted in considerable reforms to the welfare state in the UK, including an increased emphasis on initiatives to improve public health (Powell, 2000). Partnerships were identified as one of the key means of achieving this, and were underpinned by a commitment to integrated care and joined-up working across services and sectors (Department of Health, 1998). Specifically, partnerships sought to address complex social
problems by enhancing collaboration and coordination across the organisations and sectors that aligned to the broader social, economic and environmental determinants of health and social care needs (Mandell & Keast, 2008; Mitchell & Shortell, 2000). Indeed, it was envisaged that partnerships would be more effective in supporting health and health system aims than single organisations or sectors (Lasker et al., 2001). Thus, partnerships were also embraced internationally, in countries including Canada, the US, Australia and New Zealand (Lasker et al., 2001; Ministry of Health, 2010; Obesity Working Group, 2008b).

In practice, the potential of partnerships is still being understood and often struggles to be realised (Dowling, Powell, & Glendinning, 2004; Mandell & Keast, 2008; McDonald, 2005; Newman et al., 2004; Rummery, 2002; Sullivan & Skelcher, 2002). Key challenges to success relate to their implementation (Dickinson, 2006), and even to the ways in which we have sought to understand partnerships. For example, partnership success is often measured prematurely and without the time needed to develop the partnership itself (Mandell & Keast, 2008; Sydow, 2004). Thus, it is important that partnerships gain benefits from learning-based activities, such as evaluation.

The sector also has an historical and ongoing engagement in evaluation (Brophy, Snooks, & Griffiths, 2008). Therefore, it is important that evaluators understand more about influence within partnerships to try and ensure that evaluation can support decision making and programme improvement within such contexts. More specifically, this insight is important for informing evaluation practice and the sector, as to the ways in which evaluation can best meet the needs of partnerships, their stakeholders, programme beneficiaries and their communities.

2.3.1 Defining “Partnership” for this Thesis

The promise of a partnership approach resulted in a diverse range of partnerships including local-level partnerships implementing specific initiatives and partnerships working at a macro level to affect the structural determinants of health (Axelsson & Axelsson, 2006; Casey, 2007; Gillies, 1998; Lewis, Baeza, & Alexander, 2008). As a result, the term partnership encompasses a broad range of relationships from straightforward contracts through to voluntary alliances where no funding is involved (Freeman & Peck, 2007; Glasby, 2005; Lewis et al., 2008; Mandell & Keast, 2008). This diversity makes partnerships difficult to define. As a consequence, terms such as coordination, cooperation, collaboration, networks and partnerships are often used interchangeably and sometimes incorrectly (Axelsson & Axelsson, 2006; Mandell & Keast, 2008).
The complexity of partnerships has also resulted in a broad range of definitions. For example, Lasker et al. (2001) capture the essence of partnerships. They describe partnerships as enabling “different people and organisations to support each other by leveraging, combining and capitalizing on their complementary strengths and capabilities” (p. 180). In contrast, the UK Audit Commission focuses on process when they define partnership as:

a joint working relationship where partners are otherwise independent bodies cooperating to achieve a common goal; this may involve the creation of new organisational structures or processes to plan and implement a joint programme, as well as sharing relevant information, risks and rewards. (Audit Commission, 1998, p. 4)

While there is no one accepted definition of partnership (Sulivan & Skelcher, 2002), it is important that a definition is provided to define the boundaries of this research.

In reflection of the diversity of partnership arrangements in the health sector, this thesis adopts a broad definition of partnership. In reflection of the research aims, the definition adopted here also includes a specific focus on population health. Here, population health partnerships are defined as “organisational partnerships (of two or more organisational bodies), which aim to improve public health outcomes (through population health improvement and/or reduction in health inequalities)” (K. E. Smith et al., 2010, p. 2).

This definition encompasses a diverse range of collaborative arrangements and structures that exist within the health sector and that are likely to be involved in evaluation. In this respect, this research aimed to capture the experience of population health partnerships in New Zealand, rather than prescribing a specific approach. Given the many different, and sometimes contradictory, uses of terms such as coordination or collaboration (Brinkerhoff, 2002; Mandell & Keast, 2008), adopting a broader term was also designed to avoid incorrectly excluding and including certain partnership arrangements. Partnership is also a commonly used and accepted term within health policy and programme documentation (Department of Health, 1998; Ministry of Health, 2010). Therefore, focusing on partnerships was also designed to reflect current trends in the provision of health services and programmes.
2.3.2 Rationale for the Focus on Population Health Partnerships

Focusing on partnerships was designed to reflect the increased prominence of this approach to service delivery in the health sector (Dickinson, 2006). Population health in particular, is characterised by a large number of partnerships partly due to the complex causes of population health needs. Indeed, the complexity of a population health approach is captured by Winnard et al. (2008) when they state that it “refers to explicitly taking account of all the influences on health (the determinants of health) and how they can be tackled to reduce inequalities and improve the overall health of the population” (p. 2). They also capture the diversity of population health when stating that it “refers to consideration of the health outcomes or status of defined populations—groups, families and communities—and the distribution of such outcomes within populations. Populations may be defined by locality, or by biological, social or cultural criteria” (p. 2). Subsequently, population health services may include public health, personal health and disability support services.

As a consequence, population health services are often implemented by the public sector, the private sector, non-government organisations, and voluntary organisations among others (Lewis et al., 2008). These organisations also come from a diverse range of sectors including health, education, environmental protection, criminal justice, and employment, among others (Axelsson & Axelsson, 2006; Wise & Signal, 2000). Thus, the potential to bring organisations together through partnerships was particularly appealing. This resulted in partnerships seeking to tackle a diverse range of issues including obesity, teenage pregnancy, social exclusion, oral health needs, mental health needs and criminal justice (Counties Manukau District Health Board, 2005; Department of Health, 2010).

In this respect, population health partnerships provide a good opportunity to explore evaluation influence within a partnership context. The lack of common hierarchy for population health services also results in partnerships that are primarily based on cooperation and collaboration, rather than coordination or contracts (Axelson & Axelsson, 2006). These partnerships are also likely to involve a broad range of organisations and sectors (Freeman & Peck, 2007; Glasby & Dickinson, 2009). Further, it was anticipated that understanding influence within these partnerships would also inform our understanding of influence in health sector partnerships more generally.

The inconsistent evidence base underpinning the success of partnership is also important for informing the focus on partnerships. As Glasby and Dickinson (2009) note “the assumption that partnerships lead to better outcomes is at best unproven and much existing partnership
working remains essentially faith-based” (p. 67). Indeed, there is a sense that partnerships have not achieved their expected benefits (Dowling et al., 2004; N. Perkins et al., 2010), with Rummery (2002) even suggesting that partnerships can make things worse. In the US for example, collaborative health partnerships have not achieved measurable results (Cheadle, Beery, & Wagner, 1997), with difficulties in their governance and management cited as explanations. Indeed, the challenges of securing harmonious partnership functioning are often cited in the literature (Casey, 2007; Mandell & Keast, 2008; Metzger, Alexander, & Weiner, 2005; N. Perkins et al., 2010). Thus, it is important that partnerships gain benefits from evaluation, and its potential influences. Given the complexities of partnerships and their broader contexts, we need to understand more about the ways in which evaluation, partnership functioning and contextual factors interact to develop strategies to enhance influence within partnerships.

2.3.3 Potential Challenges and Opportunities for Influence in Population Health Partnerships

In theory, partnerships should offer opportunities for facilitating influence, particularly beyond an individual level. For example, the existing literature highlights the key values and concepts underpinning partnership theory including trust, reciprocity, equality and cooperation (Dirks & Ferrin, 2001; Glendinning, Powell, & Rummery, 2002; Hudson, 2004; Sharkie, 2005; Thompson, 2009). The essence of a partnership approach is also reflected in whole systems theory or systems thinking. Best et al. (2003) capture this concept well when they state that “a systems-thinking perspective suggests that more comprehensive, participatory, and collaborative approaches . . . are potentially more effective than narrowly targeted and less collaborative approaches” (p. 173).

Indeed, partnerships were highlighted as a new form of governance that presented an alternative to markets and bureaucracies by offering a more collaborative and democratic approach (McDonald, 2005; Rhodes, 1997). In practice, partnerships may be more like hierarchies or market-based relationships than the horizontal trust-based relationships associated with network forms of partnership (Dickinson & Glasby, 2010; Klijn, 2009). As McDonald (2005) notes “there is a veritable chasm between the ideals of efficiency, effectiveness and inclusiveness and the reality of partnership working” (p. 3). Further, Newman (2001) states that partnerships are just as likely to be characterised by “instrumentalism, bargaining and pragmatic compliance” (p. 123). Rather than reducing inequalities and power imbalances, Rummery (2002) suggests that partnerships reinforce
them. It is these challenges to implementing partnerships in practice that are equally likely to challenges evaluation influence.

For example, Hastings (1996) highlights the role of power differences between organisations hindering the potential to secure harmonious functioning. Similarly, case studies conducted by Preskill et al. (2003) found that power differentials between group members sometimes hindered open dialogue when discussing evaluation. Further, Sullivan and Skelcher (2002) highlight the role of organisational motivations and priorities in partnership functioning, whereby some organisations approach partnership as an opportunity to maintain or enhance their power over others. Thus, the practice of partnership working may be far from the idealised visions that underpin the concept. Indeed, Glasby and Dickinson (2010) suggest that many have struggled at the level of implementation.

The literature supports this notion by identifying a range of challenges to partnership functioning (Casey, 2007; Dowling et al., 2004; Mandell & Keast, 2008; Metzger et al., 2005; N. Perkins et al., 2010). The specific challenges are not reviewed here, as they are used to develop the conceptual framework in Chapter 4. However, the existing literature on evaluation influence suggests that some of these challenges to partnership functioning, such as power imbalances, leadership and the motivation of partnership organisations are also likely to impact on evaluation influence (Oliver, 2009; Patton, 2008; Preskill et al., 2003). Thus, for evaluation to trigger influence within population health partnerships, we need to identify the partnership functioning characteristics that facilitate or hinder influence.

2.3.4 Broader Contextual Challenges and Opportunities to Influence Within Population Health Partnerships

Bringing together organisations involved in population health can be particularly challenging, as these organisations and the sectors that they are from differ in terms of function, structure and organisational culture (Axelsson & Axelsson, 2006; Bates & Khasawneh, 2005). Dickinson and Glasby (2010) also suggest that while many central governments have advocated for the role of partnerships, little consideration and support has been given to their implementation. Indeed, the existing systems and structures within the health sector, such as traditional policies and management techniques even contribute to these challenges (Roussos & Fawcett, 2000; K. E. Smith et al., 2010).

In this respect, the broader organisational and policy context within which population health partnerships sit is likely to be important for partnership functioning, and thus evaluation influence. Indeed, divorcing organisations from their broader contextual environment fails
to recognise factors likely to influence their motivation, objectives and behaviour in a partnership context (Rowe & Devanney, 2003). For example, partnership organisations are still likely to be affected by their continued involvement in some form of market, hierarchy or both (Rowe & Devanney, 2003). It is the ways in which these factors impact on behaviour and partnerships that make them important for understanding influence. For example, partnership functioning is affected by shifting policy priorities and organisational restructuring (K. E. Smith et al., 2010), which has been regular and wide ranging in New Zealand (Gauld, 2012; see Appendix 1 for further detail on specific reforms).

Understanding partnerships outside of their context also appears to limit our understanding of their processes and success. For example, the multiple and overlapping policies and priorities initiated by governments make it difficult for evaluations to isolate the impact of partnerships (Halliday & Asthana, 2005; K. E. Smith et al., 2010; Sullivan, Barnes, & Matka, 2002). Furthermore, existing hierarchies and market forces within the sector can all impact on partnership functioning (Powell & Exworthy, 2002; Rowe & Devanney, 2003). Thus, partnerships need to be understood within their broader environmental context. It is anticipated therefore, that evaluations undertaken with partnerships are also likely to be impacted on by these broader contextual factors. Consequently, evaluation influence should also be understood within its broader environmental context.

2.3.5 Summary

This section has highlighted the promise and challenges of a partnership approach for population health, and potentially for evaluation influence. Indeed, it is anticipated that many of the challenges to partnership functioning will also mediate opportunities for evaluation influence. Similarly, broader contextual factors impact on partnership functioning, and thus evaluation influence. It is important therefore, that we identify the partnership functioning and broader contextual factors that facilitate and hinder influence.

2.4 Overview

Evaluation influence is a complex phenomenon that is further complicated by the diverse and dynamic contexts within which it takes place. While existing research has identified important evaluation attributes, stakeholder characteristics and some organisational characteristics, the complexities of an evaluation environment and its role in influence is not well understood. Our current understanding of evaluation influence is also hindered by some of the limitations associated with existing research. Thus, there is a need to develop a
stronger evidence base for the importance of different factors and the ways in which they interact to produce influence. To achieve this, there is a need to explore influence across a diverse range of organisational and broader environmental contexts.

Partnerships for example, are frequently involved in evaluation. Yet, we know little about the challenges and opportunities that such contexts can bring to evaluation influence. Furthermore, programmes, partnerships and their evaluations all exist within a broader contextual environment that is equally likely to mediate influence. Given the diversity between sectors and organisations, we need to capture evaluation influence across a diverse range of contexts if we are to begin to understand more about the importance of different factors and their interactions. This is important for informing evaluation practice and enhancing influence for the benefit of programme beneficiaries and their communities. Therefore, this thesis identifies the mechanisms and outcomes of evaluation influence within population health partnerships. The following chapter identifies how this was achieved.
Chapter Three: Methodology

3.1 Introduction

This research used a mixed methods approach to address the research aims and objectives. Specifically, four studies were undertaken: an analysis of existing literature to develop a conceptual framework (Study 1), a survey of population health partnership members (Study 2), case studies with a sample of population health partnerships (Study 3) and a mixed methods data integration and analysis (Study 4). This chapter presents the mixed methods approach, the epistemological and ontological assumptions that guided this research and the research design. The research design section describes the integrated mixed methods design and also summarises each of the four studies undertaken as part of this research. Following this, the data integration and analysis is described. This is followed by a summary of the ethical considerations addressed. It is important to note, that this chapter presents an overview of the research and largely focuses on methodological issues. A detailed description of the methods used for each study is provided alongside the findings for each study in Chapters 4, 5, 6 & 7.

3.2 Adopting a Mixed Methods Approach

Doing our work better, generating understandings that are broader, deeper, more inclusive and that more centrally honour the complexity and contingency of human phenomenon (Greene, 2007, p. 98).

The quote above from Greene captures the essence of adopting a mixed methods approach for this research. Indeed, it was anticipated that the complexity of evaluation influence would be best illustrated through the use of multiple approaches and multiple ways of knowing (Greene, 2007; Onwuegbuzie, Johnson, & Collins, 2009). This is not to say that using one method alone or the triangulation of multiple methods would not have provided useful insights. However, it was the depth of understanding that can be generated through the specific integration and interplay between methods that was important for generating greater insights and furthering our understanding of evaluation influence. For example, a mixed methods approach has enabled this research to identify areas of complementarity, as well as initiating new ideas through the mixing and integration of the four studies.

Indeed, Greene (2007) suggests that it is the interplay and discussions between methods, and in her view paradigms, that truly captures the value of mixed methods research. This
interplay poses questions, as well as possible answers, and it is the similarities and differences, certainties and possibilities that make this approach so valuable. It is this level of interplay and integration between methods that this thesis sought to use to add greater insight and understanding to the research aims.

This approach to knowledge generation steps outside of traditions whereby research is largely driven by one dominant theory or world view. In contrast, a mixed methods approach is driven by theory, context, and research paradigms (Caracelli & Greene, 1997; Greene, 2007; Tashakkori & Teddlie, 2003). In this respect, mixed methods enables researchers to identify the methods that are best suited to addressing the research questions and the context within which the research is taking place. Still, there are many ways this can be achieved. Indeed, the literature highlights the diversity of approaches, both with respect to epistemology, ontology, data collection methods and analyses (Creswell & Clark, 2007; Greene, 2007; Tashakkori & Teddlie, 2003). It is important therefore, that the epistemology and ontology underpinning this thesis is clarified, along with the research design and purposes for mixing methods.

3.2.1 The Epistemological and Ontological Assumptions Guiding This Research

The mixed methods literature identifies six key approaches to the role of epistemology in mixed methods research (Greene & Caracelli, 1997; Tashakkori & Teddlie, 2003), each of which reflects a researcher’s perspective on mixing research paradigms while mixing methods. These approaches can be broadly viewed on a continuum with purists who perceive paradigms as incommensurable at one end, and those embracing an alternative paradigm at the other. An alternative paradigm stance embraces the notion that the incommensurable differences between traditional paradigms can be reconcilable through new emergent paradigms, such as contemporary pragmatism, realism or transformation-emancipation (Greene, 2007; Greene & Caracelli, 1997; Tashakkori & Teddlie, 2003). It is this approach that best reflects the stance adopted in this research. Specifically, this thesis was guided by the epistemology of pragmatism and informed by the ontological assumptions of scientific realism.

A pragmatic approach supports the notion that while paradigms can remain separate, they can also be mixed into another paradigm (R. B. Johnson et al., 2007). Importantly for this thesis, pragmatism facilitates the mixing of paradigms without the challenges posed by the mixing of different traditional social research paradigms. Pragmatism, however, should not be misunderstood as an “anything goes” approach to social research. Johnson and
Onwuegbuzie (2004) identify key characteristics that distinguish a pragmatic approach, including:

- the recognition of knowledge as constructed and informed by the realities of our world;
- the recognition that current beliefs and research conclusions are rarely, if ever, viewed as certain, perfect or absolute (falsibilism);
- the view that current truth, meaning and knowledge are tentative and change over time;
- the endorsement of eclecticism and pluralism; and
- the endorsement of a strong and practical empiricism as the means to understanding what works.

These views align well with the assumptions underpinning this thesis and those of the research. Importantly, they also provide useful guidance for conducting mixed methods research. However, it is the ontological assumptions of scientific realism that offer more specific guidance.

Scientific realism aligns well with a pragmatic approach. Both avoid the traditional epistemological poles of positivism and relativism, and they also emerged from the tradition of empiricist philosophies of thought. Pragmatism and scientific realism also support the notion of mixed methods, with Maxwell (2004) stating that “realism provides a philosophical stance that is compatible with the essential characteristics of both quantitative and qualitative research, and can facilitate communication and cooperation between the two” (p. 4). For this research, the guidance provided by scientific realism on the practical application and analysis of mixed methods data was also important.

Scientific realist approaches look for regularity in outcomes and mechanisms in social phenomena, but equally they also look to understand the role of context and explore differences (Pawson & Tilley, 1997). This reflects the researcher’s view that while there are commonalities in social phenomenon, the contextual differences are also crucial to providing greater insight into complex social phenomenon, such as evaluation influence. The application of a scientific realist approach is well illustrated by Pawson and Tilley (1997) in their realist evaluation cycle. Their cycle begins with the development of a theory that makes propositions on how mechanisms are triggered in contexts to produce outcomes. This leads to the development of specific hypotheses, observations (multimethod data
collection on outcomes, mechanisms and context) and programme specifications (identifying what works for whom in what circumstances).

This cycle offers useful guidance for this thesis, as it supports a mixed methods approach and reflects the notion that empiricism is useful for understanding social phenomenon. Importantly, the key attributes of theories and hypotheses (mechanisms, contexts and outcomes) developed through a scientific realist approach also align well with the theory of evaluation influence presented by Mark and Henry (2004), and the theory of evaluation influence within population health partnerships developed during this research and presented in Chapter 4. Subsequently, this research is guided by an adapted version of Pawson and Tilley’s (1997) realist evaluation cycle (Figure 2).

![Figure 2: The realist research cycle. Adapted from Pawson and Tilley (1997, p. 85).](image)

The cycle was adapted in three key ways. First, the second stage of the cycle focused on propositions in this research rather than specific hypotheses; second, the observations drew on mixed methods data collection and analysis rather than multi-method; and third, the final phase of the cycle focused on the development of mixed methods inferences instead of programme specifications. The cycle was useful because the logic underpinning scientific realism, and its focus on the mechanics of explanation more specifically, offered guidance for conducting mixed methods research in practice. In particular, it offered a framework to guide the mixed methods data integration and analysis, as well as the interpretation of the findings. This enabled the research to look at similarities and differences across the data sets with a view to supporting the mixed methods purposes of complementarity and initiation.
This guidance was particularly useful given the diversity of approaches to mixing data, and the need to further develop our understanding of mixed methods analysis in practice.

3.3 The Mixed Methods Research Design

The research design adopted here is best described as an integrated design. Integrated designs:

characteristically attain greater integration of the different method types. The methods can be mixed in ways that integrate elements of disparate paradigms and have the potential to produce significantly more insightful, even dialectically transformed, understandings of the phenomenon under investigation (Caracelli & Greene, 1997, p. 23).

To draw out such insights, this type of design seeks to ensure that mixing occurs between methods, either during implementation or during analysis. This level of mixing and integration was sought here, as it was important for maximising the value of adopting a mixed methods approach and addressing the research aims.

In this research, the methods remained distinct throughout their implementation, with mixing occurring at the level of interpretation and developing conclusions. This approach to mixing was designed to support the mixed methods purposes of complementarity and initiation. Specifically, complementarity used different methods to enhance and deepen our understanding of evaluation influence, while initiation involved mixing for the purposes of contradiction and divergence with a view to developing fresh insights and new understandings (Greene, 2007). The mixed methods approach adopted here also attributed equal weighting to all data sources. This was designed to reflect the epistemological and ontological assumptions underpinning this research, as well as the notion that each data set was equally important for enhancing our understanding of evaluation influence. While the attribution of equal weighting to all data sets is sometimes challenging to comprehend and implement, Greene (2007) suggests that this approach is about listening well and respectfully to what each method has to offer to our understanding of evaluation influence. Depending on what the data say, it is appropriate to emphasise some data more than others when generating inferences and interpreting findings. This notion is explored in more detail in the mixed methods data integration and analysis section of this chapter (see section 1.4.2).
3.3.1 Mixed Methods Data Collection

This research involved four studies:

- a review of existing literature (Study 1);
- an observational cross-sectional comparison design survey with population health partnership members in New Zealand (Study 2);
- qualitative case studies involving documentary analysis and semi-structured interviews with population health partnerships in New Zealand (Study 3); and
- the mixed methods data integration and analysis (Study 4).

These data collection methods aimed to identify the mechanisms and outcomes of evaluation influence within population health partnerships. The specific objectives were to:

1. Identify which evaluation attributes trigger the mechanisms and outcomes of evaluation influence within population health partnerships.
2. Identify the type (mechanisms and outcomes) and levels (individual and interpersonal) of evaluation influence experienced by the population health partnerships.
3. Identify which partnership characteristics can enhance/inhibit evaluation influence.
4. Identify the contextual factors that can enhance/inhibit evaluation influence.

In an integrated design, each method addresses the same phenomenon, although perhaps different aspects of it (Greene, 2007). In reflection of this notion, each of these studies were designed to address all of the research aims and objectives. In recognition of the different attributes of the different methods, each of these methods contributed in different ways to the research questions and the mixed methods approach. These contributions and the specific research aims, designs and analysis for each of the studies are identified in Table 2.
<table>
<thead>
<tr>
<th>Study</th>
<th>Aims</th>
<th>Design</th>
<th>Methods</th>
<th>Analysis</th>
<th>Mixed methods contribution</th>
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</table>
| Study 1 | ● Review existing literature to identify the current understanding of evaluation influence within population health partnerships.  
● Develop a theory, and a set of propositions, on evaluation influence within population health partnerships.  
● Provide a conceptual framework to guide the subsequent studies and the research process.  
● Provide an overview of existing empirical and theoretical evidence to be used in the mixed methods data integration. | ● Literature review | ● Review existing literature on evaluation influence, partnership functioning and learning. | ● Review existing literature to identify theoretical and empirical evidence. | ● A conceptual framework on evaluation influence within population health partnerships.  
● To guide the development and analysis of subsequent studies.  
● A source of evidence for Study 4. |
| Study 2 | ● To identify the characteristics of the partnerships.  
● To identify the types of evaluation that the partnerships were involved in.  
● To identify the type and levels of influence experienced by the partnerships.  
● To identify the evaluation attributes, partnership functioning, individual characteristics and contextual factors that were important for evaluation influence.  
● To identify partnerships to participate in Study 3. | ● Survey      | ● Online survey of 187 population health partnership members.          | ● Descriptive and inferential statistics (guided by the research questions and conceptual framework).  
Including frequencies, Mann-Whitney U, Kruskal-Wallis, Principal Components Analysis and Linear Regression. | ● An overview of evaluation influence within population health partnerships. |
<table>
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<tr>
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<th>Design</th>
<th>Methods</th>
<th>Analysis</th>
<th>Mixed methods contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Study 3</td>
<td>• To provide greater insight into evaluation influence in practice.</td>
<td>• Case study</td>
<td>• An analysis of existing evaluation and partnership documentation.</td>
<td>• Thematic analysis of documents and interview data (guided by the research questions and conceptual framework).</td>
<td>• To develop an in-depth understanding of evaluation influence.</td>
</tr>
<tr>
<td></td>
<td>• To provide greater insight into the type and levels of influence happening within the partnerships.</td>
<td></td>
<td>• Semi-structured interviews with partnership members.</td>
<td>• Interview analysis also allowed for the development of new themes.</td>
<td>• To provide further insight into the role of context including partnership functioning and other contextual factors.</td>
</tr>
<tr>
<td></td>
<td>• To provide greater insight into the evaluation attributes, partnership functioning, individual characteristics and contextual factors that were important for evaluation influence.</td>
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<tr>
<td></td>
<td>• To provide greater insight into the relationships between these factors.</td>
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<td>Study 4</td>
<td>• To identify similarities and differences between data sets from Studies 1, 2 and 3 with a view to supporting complementarity and initiation.</td>
<td>• Integrated</td>
<td>• Integrating the findings from Studies 1, 2 and 3 using an integrated data display.</td>
<td>• Using pattern matching, the level of evidence underpinning each factor, the capacity for each method to contribute to our understanding and the methodological limitations of this study to guide data integration analysis.</td>
<td>• To generate new insights and understandings that would not have been possible when using one method in isolation.</td>
</tr>
<tr>
<td></td>
<td>• To identify the type and levels of evaluation influence experienced by the partnerships, as well as the evaluation attributes, partnership functioning characteristics, individual characteristics and contextual factors that facilitated or hindered evaluation influence.</td>
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<td></td>
<td>• To provide an overview of the evidence underpinning each of the components of the conceptual framework.</td>
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The integrated design was focused on connecting data at the level of analysis; however, the studies were implemented consecutively to enable each study to inform the next (Figure 3). From April 2009 to October 2009, Study 1 was implemented, and the resulting conceptual framework informed the development of the data collection and analysis for Studies 2, 3 and 4. Between April 2010 and May 2010 the online survey was completed (Study 2). The findings from the survey informed the development of the interview schedule and the selection of partnerships to participate in the case studies (Study 3; August 2010 to April 2011). The findings from all three of these studies were then used to develop new insights and understandings through the mixed methods data integration in Study 4 (October 2011 to January 2012). This approach was also more feasible for the researcher in terms of fieldwork management and time.

Figure 3: Mixed methods research design and integration.

3.3.2 Mixed Methods Data Integration and Analysis

Increasingly, the mixed methods literature highlights the importance of clear purposes for mixing methods and data integration (Greene, 2008; Onwuegbuzie & Teddlie, 2003), as it is this mixing and integration that distinguishes mixed methods research from other study designs. Subsequently, the data integration and analysis in Study 4 is a key contributor to the mixed methods approach. It is through this process of data integration and analysis that the research hopes to support the mixed methods purposes of complementarity and initiation. Given the importance of this process for the mixed methods approach, this section largely focuses on the data integration and analysis for Study 4. Further, this chapter is
designed to provide an overview of the approaches and analyses used in each study, as further details are provided in the specific chapters dedicated to these studies (Chapter 4, 5, 6 and 7).

As presented in Table 2, Studies 1, 2 and 3 were analysed individually using processes traditionally associated with each method. Each of these analyses was also guided by the conceptual framework and the research aims. For example, the analyses were conducted to identify the types and levels of influences experienced by the partnerships, as well as the evaluation attributes, partnership functioning characteristics and contextual factors that were important for facilitating or hindering influence. Adopting this focus across all of the studies aligns with the mixed methods design and enabled the research to build upon the levels of evidence underpinning each component within the conceptual framework. This was designed to support the mixed methods data integration in addressing the aims of this research.

While the literature highlights key steps in mixed methods analysis, such as individual study analysis, data integration and interpretation, there is less specific guidance on what actually needs to happen in the integration and interpretation steps. Indeed, Greene (2008) highlights the need for greater clarification of these processes. As a result, the data integration analysis undertaken for this research does not draw on a specific or well-established method. Subsequently, the researcher developed a framework to facilitate and clarify the data integration process. This framework was informed by data integration frameworks and analyses undertaken by other evaluators and researchers (Lee & Greene, 2007; McConney, Rudd, & Ayres, 2002; Onwuegbuzie & Dickinson, 2008; Onwuegbuzie & Teddlie, 2003; Webb, Campbell, Schwartz, & Sechrest, 1966). This section describes this framework, as well as the ways in which previous work informed its development.

3.3.2.1 Developing and applying a framework for mixed methods data integration

Data integration involves integrating qualitative and quantitative data or findings either into a coherent whole or two separate sets of coherent wholes (McConney et al., 2002; Onwuegbuzie & Teddlie, 2003). Study 4 integrated the findings from the survey with the findings from the case studies and the literature underpinning the conceptual framework. To achieve this, an integrated data display was used to visually present all the findings in the same display. Similar approaches have been used in other mixed methods studies (Lee & Greene, 2007; Onwuegbuzie & Dickinson, 2008).
The data integration was built around the components of the conceptual framework. This approach is most similar to a variable-oriented analysis. This type of analysis is more commonly used with quantitative studies but is also relevant for qualitative data and analysis techniques such as examining themes that cut across cases (McConney et al., 2002; Onwuegbuzie & Teddlie, 2003). It was considered to be appropriate here, as the analysis undertaken within the original studies adopted a similar approach. Equally, this approach enabled the role of each factor to be explored across multiple sources of evidence.

Using an integrated data display was also important for facilitating pattern matching, as well as identifying gaps in the data sets. Pattern matching makes comparisons between empirically observed data (the survey and the case studies) with conceptually expected patterns of data (the conceptual framework; Campbell, 1966). Greene (2008) suggests that pattern matching offers untapped potential for mixed methods analyses that seek to support the development of conclusions and inferences. Given the aims of this study, pattern matching provided a useful means of guiding the comparative analysis of the findings from the survey, the case studies and the literature. This type of approach also facilitated the identification of areas of congruence and differentiation between the findings.

The data integration analysis was also informed by the work of McConney et al. (2002) who developed a results synthesis analysis for developing conclusions and inferences through mixed methods data analysis. This approach uses “quality of evidence assessments in combination with judgement-based estimates of what each line of evidence says about a programme effect, can then be aggregated across diverse data-gathering methods to arrive at reasoned estimates of program effectiveness” (p.124). The approach by McConney et al. provides a useful insight into the ways in which multiple sources of evidence and its quality can be judged to inform the interpretation of programme effects. A similar approach to the data integration analysis has been taken here with a view to establishing the evidence underpinning each factor in the conceptual framework. This evidence was then used to interpret the contribution that each factor makes to evaluation influence within partnerships, and the ways in which it can facilitate or hinder influence.

The data integration framework also involved some additional steps that were important for informing the analysis and preparing the data. Specifically, the data integration framework adopted here involved:

1. Weighting: Specifying the weighting given to each of the data sources from each of the three studies.
2. Data entry: Integrating data into one MS Excel worksheet based on the research questions and key components of the model.

3. Data preparation: Identifying key themes within each data source to rate the level of evidence behind each factor.

4. Analysis and interpretation: Using the evidence underpinning each factor within the conceptual framework, the capacity for each data source to contribute to our understanding of that factor and the methodological limitations of this research to interpret the contribution of each factor to evaluation influence within partnerships.

The practical application of the data integration framework for the purposes of this research is described in Chapter 7. Similarly, the specific methods for the conceptual framework (Study 1), the survey (Study 2) and the case studies (Study 3) are provided in Chapters 4, 5 and 6. This is designed to support the reader in reviewing each of these chapters.

3.4 Ethical Considerations

Ethical approval for the research was obtained from The University of Auckland Human Participants Ethics Committee (UAHPEC). The ethics approval for this research addressed the key ethical issues arising from this research including informed consent, anonymity, privacy and confidentiality, participants’ rights to withdraw, and opportunities to edit transcripts and comment on research findings.

3.5 Overview

A mixed methods approach has provided this research the opportunity to develop greater insights and understandings that would not have been possible when using one method alone. Furthermore, the epistemological and ontological assumptions underpinning this research and the specific data integration framework that was developed here has enabled the findings from multiple studies to be integrated in a manner that avoids the challenges of bringing together some of the more traditional research paradigms in social research. While this approach was sometimes challenging, the value that it brings to the research is evident in the integration of the findings in Chapter 7. The following chapters now focus on the methods and results from this research. Specifically, Chapter 5 presents the methods and findings from the survey. This is followed by the case studies in Chapter 6 and the mixed methods data integration in Chapter 7. It is useful to note that Chapters 5 and 6 are largely descriptive, as the mixed methods approach adopted here brings the data sources together at
the level of interpretation. Thus, Chapter 7 presents the mixed methods inferences for this research.
Chapter Four: Understanding Evaluation Influence Within Population Health Partnerships—A Conceptual Framework (Study 1)

4.1 Introduction

This chapter presents the first study undertaken for this research. Specifically, this chapter presents a theory of evaluation influence within population health partnerships. This chapter begins by identifying the aims of this study and the contribution that it makes to the mixed methods approach. This is followed by a Method section that describes the literature review process used to develop the conceptual framework. In line with the aims of this research, an analysis of key concepts is then used to develop propositions about the relationships between evaluation attributes, partnership functioning, contextual factors and evaluation influence. However, the review process highlighted the role of stakeholders and partnership characteristics; subsequently, partnership characteristics, partnership evaluation behaviour and individual characteristics are also included in the framework. The framework highlights the complexities of evaluation influence and also extends on existing theories of evaluation influence in considering the role of individual characteristics, stakeholder evaluation behaviour, partnership contexts and broader contextual factors.

4.2 Contribution to the Mixed Methods Approach

In line with a scientific realist approach, this study represents the first two steps of the realist approach underpinning this research. Specifically, this study develops the theory of evaluation influence within population health partnerships and the propositions that underpin it. While these propositions highlight potential relationships between the key components of the model, it is important to note that there is less evidence in the literature to inform this element of the conceptual framework. Thus, this research seeks to shed light on some of these relationships.

The conceptual framework contributes to the mixed methods approach by guiding and informing each of the subsequent studies in this research. For example, the framework was particularly important for guiding the data collection and analysis. In accordance with the integrated study design, it also ensured that each of the studies was addressing the same key components of the framework. This was particularly useful when integrating the data in Study 4. During the data integration process, the literature informing the conceptual framework also served as a source of evidence. This was important for addressing the
research aims and further understanding the findings from the survey and the case studies (Studies 2 and 3). Subsequently, the conceptual framework presented here is a key component of the research process and the mixed methods approach.

4.2.1 Study Aims

Study 1 aimed to:

1. Review existing literature to identify the current understanding of evaluation influence within population health partnerships.
2. Develop a theory, and a set of propositions, on evaluation influence within population health partnerships.
3. Provide a conceptual framework to guide the subsequent studies and the research process.
4. Provide an overview of existing empirical and theoretical evidence to be used in the mixed methods data integration.

4.3 Methods

This study reviewed existing literature to establish the current understanding of evaluation influence within population health partnerships. This review was designed to build on an existing body of knowledge and ideas. Subsequently, the literature review and development of the conceptual framework was structured around existing theories of evaluation influence and partnership functioning. Specifically, Mark and Henry’s (2004) theory of evaluation influence and the key values and concepts underpinning partnership theory including trust, reciprocity, equality, cooperation and whole systems theory approaches (Glendinning, Hudson, & Means, 2005; Hudson, 2004; Hudson, Hardy, Henwood, & Wistow, 1999; Powell & Dowling, 2006; Rhodes, 1997; Rowe & Devanney, 2003) were used to guide the literature review. This, along with the research aims, helped to structure the review.

4.3.1 The Literature Searching and Sources

Relevant publications were accessed by conducting electronic searches in ScienceDirect, PubMed, PsycINFO and Google Scholar. Key search terms were “evaluation impact,” “evaluation use” and “evaluation influence,” as well as “partnership functioning,” “population health partnerships,” “evaluating partnerships” and “partnerships and learning.” Relevant sources of literature were also identified by reviewing the reference lists of other relevant literature sources. Key word title searches were also conducted in evaluation-
related journals including the *American Journal of Evaluation; Evaluation; Evaluation and Program Planning; Evaluation Practice; Evaluation Review;* and *New Directions for Evaluation*. Similar searches were conducted in journals related to partnerships and population health including the *Journal of Public Health; International Public Management Journal; Public Administration Review; Social Policy and Society;* and *Social Science & Medicine*.

The research questions were used to assess the relevance of these sources of literature. While many of these literature sources were important for informing the background to this research, a total of 73 references were used to inform the conceptual framework. This included empirical evidence, theoretical propositions and reflective case studies. For the development of the conceptual framework, the type of evidence and the methodological limitations were not used to review the literature. This was designed to enable the framework to fully capture the range of ideas and understandings of evaluation influence within population health partnerships, with a view to further exploring them in this research. However, the evidence underpinning the literature review is rated during the mixed methods data integration in Study 4 (Chapter 7) when the literature is used as a source of evidence. In terms of reviewing the studies, the information in Table 3 was used to synthesise and critique the literature.

**Table 3: Method for Critiquing and Synthesising the Literature**

<table>
<thead>
<tr>
<th>Author and date of study</th>
<th>Aims</th>
<th>Methods</th>
<th>Sample</th>
<th>Measure of use/influence</th>
<th>Connection to evaluation theory</th>
<th>Intended evaluation user/influence</th>
<th>Researcher</th>
<th>Key findings</th>
<th>Critique/limitations</th>
</tr>
</thead>
</table>

### 4.4 Understanding Evaluation Influence Within Population Health Partnerships

This section presents the conceptual framework. Specifically, the framework is built up over four sections that relate to the core components of the framework: evaluation attributes; partnership functioning, characteristics and behaviour; mechanisms and outcomes of
evaluation influence and individual characteristics; and contextual factors. The development of the framework is also supported by relevant figures designed to represent the key factors and the propositions that underpin the framework. Following this, an overview summarises the chapter and its contribution to this thesis.

4.4.1 Evaluation Attributes

The first component of the framework includes the evaluation attributes that are identified as important for evaluation influence in the literature (Figure 4). These attributes relate to an evaluation approach, the evaluator and the outputs of an evaluation. First, an evaluation approach is considered to be important for triggering influence. Here, an evaluation approach refers to the type of evaluation undertaken, such as formative or summative, as well as the specific theories that may inform the evaluation. There are a wide range of evaluation approaches (Stufflebeam & Shinkfield, 2007). The specific approach adopted is likely to be informed by the focus and rationale for the evaluation, as well as the personal preferences of the evaluator (Ryan & Schwandt, 2002). More importantly for this thesis, these approaches impact on evaluation attributes that are likely to be important for influence.

For example, influence is promoted and valued differently across evaluation approaches. A utilisation-focused approach will have a greater focus on usage than many other approaches (Patton, 2008). Equally, an evaluation’s approach affects evaluation activities, such as the degree of stakeholder participation. For instance, a review of 26 existing empirical studies (Cousins & Earl, 1992) and surveys with distinguished evaluation theorists and practising evaluators highlights the importance of stakeholder participation for enhanced influence (Christie, 2003; Fleischer & Christie, 2009). More recent empirical research also provides support for the importance of participation (Oliver, 2009; Preskill et al., 2003; Robinson & Cousins, 2004). While these findings highlight the importance of an evaluation’s approach, our understanding of the importance of participation still lacks clarity. It is unclear what level of participation is important, which stakeholders need to be participating and when to support different influences. Still, the potential for the focus, rationale and evaluation approach to trigger influence justifies the inclusion of these factors in the framework (Figure 4).
The next set of evaluation attributes in Figure 4 relate to the evaluator. In particular, the role of the evaluator has received much attention in the literature, with Ryan and Schwandt (2002) presenting a detailed review in their book on the topic. In terms of defining the role of an evaluator, the literature offers a diverse range of definitions. Some focus on the actions of the evaluator during the evaluation (Greene, 2000; Patton, 2008), while some focus on the internal or external status of the evaluator (C. H. Weiss, 1998). Other definitions also draw on the influence that the evaluator role can have on the programmes and communities within which they work, such as social betterment (Mark, Henry, & Julnes, 2000) or empowerment (Fetterman & Wandersman, 2005). Evaluator roles suggested as important for influence include the broadening of the evaluator role to support stakeholder participation (Cousins, 2003), and the evaluator as a mutual partner of stakeholders and a co-producer of knowledge (Rossman & Rallis, 2000). Regardless of the role adopted, Ryan and Schwandt (2002) posit that all evaluators make decisions on their role and other aspects of the evaluation. It is these decisions that will affect the entire evaluation process and its influence. Thus, it is important that the evaluator and the evaluator role are captured in the framework (Figure 4).

When reviewing the literature on evaluator roles, however, Skolits, Morrow and Burr (2009) suggest that single and broadly constructed role orientations do not reflect the demands of evaluation that require evaluators to adopt a variety of roles. This notion suggests that it is not only the evaluator role that is important. In their review of 41 empirical studies for example, Johnson et al. (2009) suggest that evaluator competence, both professional and cultural, are important for evaluation influence. This notion is also reflected in Mark and Henry’s (2004) theory of evaluation influence in their inclusion of “expertise” and “role
flexibility.” As a consequence, evaluator skills, expertise and cultural competence are also captured in Figure 4.

The remaining attributes relate to the quality of the evaluation approach and the evaluation outputs. For example, Mark and Henry (2004) highlight the importance of the sophistication of outputs for evaluation use. Furthermore, Henry’s (2003) in-depth analysis of three evaluations highlighted the importance of technical quality for influence. In contrast, Cousins and Leithwood’s (1986) review of empirical research found that it was the sophistication of the evaluation approach that was important for use. Further, Cronbach et al. (1980) suggests that scientific quality is not as important as other evaluation attributes. Thus, this area warrants further exploration. While this area requires further exploration, the potential role of quality and sophistication in triggering influence warrants their inclusion in the framework (Figure 4).

In terms of evaluation feedback and findings, Mark and Henry (2004) highlight the importance of credibility, timeliness, responsiveness and communication. More specifically, the inclusion of these attributes builds on the work of Cousins (2003) whose review of empirical research highlighted the importance of these attributes for use. As one would expect, evaluations that provide credible feedback that responds to the needs of stakeholders in terms of information needs and sophistication are anticipated to be more influential. Equally, it is anticipated that feedback must be timely to enhance some influences.

While it appears to be generally accepted that these attributes of evaluation are important for triggering influence, they have received less attention in the empirical research. Still, in their work on communication and persuasion, Petty and Cacioppo (1986) suggest that if responsiveness has any effects, it will be because a more responsive report increases stakeholders’ motivation to engage in elaboration. They also note the role of communication in facilitating influence, as did a more recent survey of non-profit organisations by Peck and Gorzalski (2009). In practice, evaluation attributes do not exist in isolation. Evaluation design, implementation and outputs are affected by the evaluation environment and context. In this respect, pathways to evaluation influence will be mediated by these contextual factors. The next stage of the framework begins to recognise this by identifying the potential for a partnership context to facilitate or hinder influence.

4.4.2 Partnership Functioning, Characteristics and Evaluation Behaviour

For partnerships to achieve their potential they need to reach a level of harmonious functioning. Yet, the dynamic and complex nature of partnerships poses challenges to
achieving this. While we are still learning about the factors that enhance functioning, the literature does highlight some important contributors. For example, partnerships experiencing mutual trust, shared power and decision making, open communication and appropriate leadership are more likely to function effectively (Casey, 2007; Dowling et al., 2004; Mandell & Keast, 2008; Metzger et al., 2005; K. E. Smith et al., 2010). Achieving mutuality within the public sector, however, can be challenging. Traditionally, the sector is managed through hierarchies that do not lend themselves well to the notion of shared power or decision making (Lewis, 2005). Population health partnerships for instance, are often working within a context that typically includes longstanding hierarchical relationships between organisations, existing contractual relationships and strong demands for accountability (Keast, Mandell, Brown, & Woolcock, 2004; Lewis, 2005). This framework suggests that it is these challenges to partnership functioning that will also mediate evaluation influence.

Moreover, the review highlighted a number of important factors for partnership functioning. Typically, these related to partnership purpose and commitment, partnership arrangements and systems to support adaptation or learning. For example, Figure 5 suggests that the clarity of a partnership’s purpose and partners’ commitment will mediate evaluation influence. Clarity of the partnership’s purpose is perceived to be important for influence, as it will impact on the functioning of the partnership, and more specifically the partners’ ownership of both the partnership and its evaluation. For example, Austin’s (2000) study of five non-profit business alliances found that incongruence in perceptions and expectations of partnerships was a potential source of conflict between partnership members. More specifically, a sense of shared purpose was central to more effective functioning. While this factor has not received attention in the evaluation literature, it is envisaged that clarity of purpose will be important for responding to evaluation. For example, an unclear sense of purpose will hinder the partnership in moving forwards and using the evaluation to support this process.
Similarly, a sense of shared purpose is strongly associated with a sense of ownership among partners. For example, an unclear sense of purpose may limit partners’ ownership of the partnership. This is important as research suggests that ownership can affect an individual’s involvement in the partnership (E. S. Weiss, Anderson, & Lasker, 2002). Thus, the framework proposes that a lack of ownership among partnership members will result in limited involvement in the partnership and its evaluation. Given the potential importance of participation in triggering influence (Cornachione et al., 2010; Oliver, 2009; Patton, 1998), ownership is likely to facilitate or hinder influence. Furthermore, a lack of participation may hinder the implementation of the evaluation, and potentially its quality, credibility, timeliness and responsiveness. Therefore, a sense of shared purpose and ownership warrant inclusion in the framework (Figure 5).

Partnership culture is also a crucial aspect of partnership functioning and reflects the type of relationships that exist between partners. Key elements of partnership culture include trust, power differentials and communication. These aspects of a partnership’s functioning are considered to be important for influence as existing empirical evidence suggests that trust, open communication, power and information sharing are all important for securing a culture of learning and reflection (Antonacopoulou, 2006; Koppenjan & Klijn, 2004; Preskill & Torres, 2000; Preskill et al., 2003). These factors are also likely to be important for developing a learning culture. For example, case studies conducted by Preskill et al. (2003)
found that power differentials between group members sometimes hindered open dialogue. Further, Lasker et al. (2001) note that “it is only possible for the group to think in new ways if partners are able to talk to each other and are influenced by what they hear” (p. 192).

Collectively, this literature highlights the importance of trust, power and communication in facilitating a learning culture and enhancing the opportunity for evaluation influence to occur. Thus, these factors are captured in Figure 5.

The literature review also highlighted the importance of partnership arrangements, such as leadership, decision making, knowledge management and information sharing, for partnership functioning. Within organisations leadership typically refers to a formal hierarchical position with the authority to impose actions and decisions (Metzger et al., 2005). For partnerships, leadership can be more complicated. Leaders do not have authority over their partnership members, and so partnership leaders need to strike a balance between power sharing and control, and between interpersonal trust and formal procedures (Metzger et al., 2005). This requires a different set of skills to those needed for traditional leadership roles and can pose challenges to partnership functioning, as leaders are sometimes ill prepared for this role.

In terms of evaluation influence, it is anticipated that different leadership styles and support for evaluation will be important for influence. For example, a survey of buyers and purchasers exploring organisational learning found that openness and transformational leadership can facilitate learning within organisations (Hult, Hurley, Giunipero, & Nichols, 2000). Similarly, research by Ramus and Steger (2000) across 12 countries found that managerial support was important for facilitating employees’ engagement in learning-based activities. With respects to evaluation specifically, Patton (2008) and Plottu and Plottu (2009) have highlighted the importance of engaging key decision makers and major stakeholders to facilitate use. These findings suggest that the support for evaluation from leadership and other influential members within the partnership can mediate influence. Therefore, these attributes are included in Figure 5.

The degree of participatory decision making within a partnership is important for partnership functioning. For example, research by Casey (2007) exploring partnerships within nursing found that although it was impossible to create equity between partners, participatory decision making was important for facilitating the notion of partnership. While there is no evidence on the direct role of participatory decision making in evaluation influence, Mark and Henry (2004) note the importance of the decision making context in
their framework. However, they also recognise that their theory has not focused adequately on these components and that they warrant further attention. For the framework presented here, it is envisaged that a partnership’s decision-making processes will be important for influence, as they will facilitate responses to evaluation. More specifically, it is anticipated that a participatory approach will be important for facilitating influences beyond the level of individual partnership members, as open discussions between partnership members could trigger influences within and across the partnership.

The literature relating to learning within organisations and partnerships also highlighted the role of knowledge management. Knowledge management refers to the ways in which the knowledge held by individuals is used to support decision making and action (Bennet & Bennet, 2003). The aim of knowledge management is for organisations or partnerships “to become aware of its knowledge, individually and collectively, and to shape itself so that it makes the most effective and efficient use of the knowledge it has or can obtain” (Bennet & Bennet, 2003, p. 440). Existing reviews of theoretical literature (Muro & Jeffrey, 2008) and exemplar case studies (Keen & Mahanty, 2006) suggest that policies and strategies to facilitate knowledge management are important for facilitating learning and change. More specifically, a review of existing research suggests that successful knowledge-management strategies can result in increased communication, participation and improved problem-solving capabilities (Alavi & Leidner, 2001). Given the association between knowledge management and learning, this factor is likely to be important for influence and is included in the conceptual framework.

With respect to facilitating evaluation influence, it was anticipated that adaptation or change processes to respond to evaluation information would also be important. While there is less evidence on these processes in the literature, they potentially represent the systems whereby the partnership process evaluation mechanisms into outcomes, particularly for partnership-level influences. The potential role of these attributes is also highlighted in their inclusion in tools designed to assess partnership functioning (Hardy, Hudson, & Waddington, 2003), and readiness for evaluation and organizational learning (Preskill & Torres, 2000). Such processes are also likely to be dependent on the management of knowledge or information sharing within the partnership. Thus, knowledge-management policy, information sharing and adaptation/change processes are included in Figure 5.

Overall, it is anticipated that partnership functioning has the potential to facilitate or hinder influence, and thus evaluation influence is impacted on by the specific characteristics of the
partnership’s functioning. Furthermore, it is anticipated that the functioning of the partnership will also impact on the evaluation attributes. For example, it may impact on the level of participation, the implementation of the evaluation and perceptions of its outputs. It is important therefore, that we understand more about the relationships between these different factors.

4.4.3 Partnership Characteristics

Partnership characteristics are included in the framework due to their potential to impact on partnership functioning and subsequently evaluation influence (Figure 5). The literature suggests that important characteristics are purpose, size, complexity and level of collaboration. For example, the purpose of the partnership is important due to its impact on other partnership characteristics, such as the level of collaboration and the complexity of the partnership. A partnership can encompass many different levels of collaboration including networking, coordination, cooperation or collaboration (Himmelman, 2001). These various levels of collaboration will impact on the type of relationships within the partnership and its functioning. Indeed, collaborative partnerships require significant investment in establishing relationships and are often more difficult to achieve (Mandell & Keast, 2008).

Partnership size can also impact on partnership functioning. For example, partnerships that are very large may become too complex, difficult to lead and challenging to secure harmonious functioning. This notion is supported by Garcia-Canal, Valdez-Llaneza and Arinio (2003) who noted that there are fewer interests to harmonise in two-way alliances than multiple cross-sector partnerships. Case study research by Austin (2000) also found that larger partnerships can impact on the clarity of a partnership’s purpose and its functioning, as multiple perceptions and expectations are brought to the table and need to be managed. Thus, size may be important for partnership functioning, and in this respect have an indirect impact on evaluation influence.

Complexity of partnerships can relate to their function and also to their development and resourcing. For example, population health partnerships with multiple funding sources may experience greater levels of complexity due to the multiple accountability requirements that these funding sources can bring. Equally, partnerships may be funded at least partially on competitive contracts. This can challenge functioning, as research exploring partnership network structures over 3 years found that partnerships still rely upon and display hierarchical and market mechanisms and characteristics (Lewis et al., 2008). Qualitative case studies with multi cross-sector partnerships have also suggested that the resulting
tensions between competition and collaboration can lead to strained partner relationships and difficulties in formalising a partnership approach (Babiak & Thibault, 2007). Thus, the complexity of population health partnerships is likely to impact on partnership functioning and be an indirect mediator of evaluation influence. Indeed, it is the impact of partnership characteristics on partnership functioning that justifies their inclusion in Figure 5.

### 4.4.4 Partnership Evaluation Behaviour

Given the importance of stakeholder participation for evaluation influence (Christie, 2003; Cousins & Earl, 1992; Fleischer & Christie, 2009), the framework suggests that evaluation influence will be mediated by the partnership’s evaluation behaviour (Figure 5). Similarly, it is anticipated that partnership functioning, such as ownership, will impact on partnership evaluation behaviour. This concept refers to the partnership’s participation in the evaluation, their support for the evaluation and their readiness to engage in the evaluation. The framework proposes that these factors can mediate the impact of evaluation influence. This notion is supported by an early review of 65 empirical studies by Cousins and Leithwood (1986) and research by Cornachione et al. (2010), which suggested that stakeholder involvement and commitment to evaluation were important characteristics for use. For example, if partnership support for the evaluation is low, it is less likely be influential, as it will not have buy-in and engagement from the partnership.

The framework proposes that partnerships exhibiting higher levels of evaluation readiness will facilitate influence, as partnership members will have higher levels of engagement in the evaluation and be more open to its feedback. Evaluation readiness refers to the preparedness of the partnership to engage in evaluation. Specifically, it relates to their willingness and capacity to evaluate (Clinton, 2001; Stockdill, Baizerman, & Compton, 2002). Willingness refers to stakeholders’ attitudes towards the evaluation and their cooperation in its processes. Whereas, capacity refers to the resources, such as time, that are available to support stakeholders engaging in the evaluation; and. Still, the role of this factor in evaluation influence has not been well explored.

Based on existing empirical and theoretical work, it is anticipated that evaluation readiness, partnership participation and support for evaluation can facilitate or hinder influence. Equally, it is anticipated that partnership evaluation behaviour will be impacted and have impacts on the evaluation attributes and the functioning of the partnership. For example, partnership evaluation behaviour may hinder the implementation of the evaluation or...
engagement in processes to respond to evaluation findings. Further, partnerships with lower levels of functioning may result in lower levels or less supportive evaluation behaviours.

4.4.5 Mechanisms and Outcomes of Evaluation Influence, and Individual Characteristics

The mechanisms and outcomes of evaluation influence represent change or action as a consequence of evaluation (Mark & Henry, 2004; Figure 6). The mechanisms of evaluation influence include elaboration, heuristics, priming and skill acquisition at the individual level. Justification, persuasion and minority opinion influence are interpersonal-level mechanisms and policy consideration, standard setting, policy discussion and deliberation, and coalition formation reflect collective-level mechanisms. These evaluation influences are taken from Mark and Henry’s theory, and are also supported by previous research. For example, Petty and Cacioppo (1986) found that stakeholders engaged in elaboration when reading evaluation reports. Similarly, research on influence has highlighted the influence of evaluation on skill acquisition, such as survey techniques (Arnold, 2006; Brandon & Higa, 2004; King, 2002; Lennie, 2005). Empirical research on use in policy analysis has also provided support for general influences, such as justification and persuasion (Greenberg, Mandell, & Onstott, 2000; Shulock, 1999).

![Figure 6](image)

**Figure 6**: Evaluation influence pathways within a partnership context.

Mark and Henry (2004) suggest that these general influence processes are the key starting points for change. They propose that it is these processes that are likely to lead to some
change in the cognitive/affective, motivational and behavioural processes that follow. They also note that while these processes are an important first step, it is any resulting changes in the person’s attitudes, motivations or actions that are of interest to those seeking to understand evaluation influence (Mark & Henry, 2004). Indeed, they identify the Drug Abuse Resistance Education (DARE) evaluation as an example of the influence of evaluation on behavioural outcomes, changes to programme content in this instance (Ennett et al., 1994). More recently, research by Oliver (2009) also highlighted the influence of evaluation on stakeholder behaviour.

Figure 6, however, suggests that the transformation of the general influence mechanisms into outcomes is mediated by an individual’s characteristics. More specifically, the framework proposes that an individual’s evaluation readiness, existing knowledge and attitudes will mediate the outcomes of influence. This notion is also supported by existing research. For example, a simulation study conducted by Christie (2007) found that the influence of evaluation data is mediated by decision makers’ previous beliefs about programme efficacy. Specifically, Christie (2007) noted that once decision makers believe in a programme they are less likely to be influenced by anecdotal or case study data. Earlier work has also suggested that evaluation use and behaviour change is affected by individual values and beliefs (Alkin & Taut, 2003; Taut, 2003; Taut & Brauns, 2003).

Previous research has also highlighted the role of an individual’s evaluation readiness in facilitating process use. For example, case study research exploring process use suggests that learning through participation in evaluation can be affected by an individual’s previous experiences of evaluation and previous training (Preskill et al., 2003). It is anticipated therefore, that an individual’s evaluation characteristics and their commitment and involvement in the partnership will mediate the transfer of evaluation influence mechanisms into outcomes. Thus, an individual’s characteristics are captured in Figure 6. Equally, it is anticipated that an individual’s characteristics will be impacted on by the functioning of the partnership and the partnership’s evaluation behaviour. For example, partnerships with an unclear purpose may be less likely to have support or involvement from all partnership members.

4.4.6 Contextual Factors

Population health partnerships are operating within a broader contextual environment that impacts on their functioning (Powell & Exworthy, 2002; Rowe & Devanney, 2003; K. E. Smith et al., 2010). Equally, theoretical and empirical work on evaluation influence has
begun to highlight the importance of exploring the role of context (Kirkhart, 2000; Mark & Henry, 2004; Santhiveeran, 1995; C. H. Weiss et al., 2005). Still, much of this previous research has focused on the role of these factors for individual stakeholders. For example, previous research has focused on an individual’s political orientation, as opposed to the broader role of a programme’s policy context. It is important therefore, that we begin to explore the role of broader contextual factors for evaluation influence.

**Figure 7:** A conceptual framework of evaluation influence within population health partnerships.

The framework proposes that certain aspects of the health sector will facilitate or hinder evaluation influence, either directly or due to their impact on partnership functioning. For example, traditional policies and management techniques within the health sector do not lend themselves well to the notion of shared power and decision making required for partnership working (Keast et al., 2004). Thus, they can challenge the functioning of partnerships, and in this respect potentially evaluation influence. This notion is supported by qualitative case study research by Babiak and Thibault (2007) who highlight the potential challenge of competitive markets to trust and openness. The importance of these factors in facilitating process use (Preskill et al., 2003) also suggests that competitiveness may also mediate influence.

This review also highlights the potential role of accountability requirements in the following ways. First, the multiple accountability requirements often associated with partnerships can
impact on their functioning (Lewis et al., 2008). Second, the literature suggests that accountability requirements can affect the type of evaluation conducted, as well as perceptions of credibility. Within the health sector for example, it has been suggested that evaluation can focus on outcomes at the cost of understanding process (Keast, Brown, & Mandell, 2007). Similarly, it has been suggested that the sector also perceives outcome data to be more credible than other sources of evidence (Vos & Mathers, 1998). Furthermore, evaluation is just one of many activities facing population health partnerships. Thus, the framework anticipates that competing priorities can result in limited resources and time to engage in evaluation. In addition, it is anticipated that each of these broader contextual factors will impact on each of the components and many of the individual factors within the framework. As a consequence, these factors are also reflected in the conceptual framework (Figure 7).

4.5 Overview

This chapter provides an analysis of key concepts that are important for evaluation influence within population health partnerships. This critical analysis builds on the work of Mark and Henry (2004) to develop propositions about the relationships between evaluation attributes, partnership functioning, stakeholder evaluation behaviour and characteristics, contextual factors and evaluation influence. The resulting conceptual framework presented here contributes to existing theories of evaluation influence by highlighting the importance of stakeholder evaluation behaviour, individual characteristics and broader contextual factors. The framework also contributes to our understanding of evaluation influence within partnerships, and population health partnerships specifically. Overall, the framework identifies the complexities of evaluation influence pathways, and the ways in which stakeholders and their organisational and political context can mediate influence.

With respect to the research aims, the framework highlights the importance of a range of evaluation attributes including the evaluation approach and design, the evaluator and the evaluation outputs. Specifically, the framework identifies a participatory approach, the evaluator and the credibility, timeliness, responsiveness and technical quality of evaluation outputs as important for influence. Partnership functioning is also highlighted as a key mediator of evaluation influence, with partnership arrangements, such as leadership, decision-making and adaptation or change processes, and partnership culture being important. The framework also suggests that partnership characteristics, such as size and complexity are important due to their impact on partnership functioning. Equally, the
framework highlights the importance of stakeholder behaviour and individual characteristics, with evaluation readiness, existing knowledge and attitudes, and participation in evaluation identified as mediators of influence. Contextual factors that are noted as important included the time and resources dedicated to evaluation, as well as the organisational and political context of a partnership.

While the framework presented here contributes to existing theories by further exploring the role of context, and a partnership context specifically, the framework is by no means complete or conclusive. The framework draws on literature from different disciplines and further research is needed to understand the importance of the framework’s components for evaluation influence in partnerships specifically. In many respects, the framework highlights the gaps that this research sought to contribute to. For example, the framework suggests that research on the role of partnership functioning in evaluation influence is warranted, as much of the evidence is based on other learning-based activities. Further, research to identify the crucial components of the framework is also important for informing practice. Indeed, there is still much to understand about evaluation influence in practice.

Overall, this study has identified the current understanding of evaluation influence within population health partnerships. In doing so, it has developed a theory of evaluation influence underpinned by a set of propositions that reflect the aims and objectives of this research. Reviewing the evidence underpinning the framework also highlights the importance of conducting further research to strengthen the evidence base for evaluation influence. This research aims to do this by using this framework to explore evaluation influence within population health partnerships. The following chapter represents the first step in doing this. Specifically, the framework is explored using the survey responses of population health partnership members from across New Zealand.
Chapter Five: An Overview of Evaluation Influence Within Population Health Partnerships (Study 2)

5.1 Introduction

This chapter presents the findings from the second study: an online survey with population health partnership members in New Zealand. The survey provides an overview of evaluation influence within population health partnerships. The chapter begins by identifying the aims of this study and the contribution that it makes to the mixed methods approach. This is followed by a Method section that identifies the research design and data collection procedures. The Results section then identifies the types of population health partnerships working in the sector, the evaluations that these partnerships were engaging in and the types of influence experienced. By gathering data relating to the key components of the conceptual framework, the data analysis also identifies the key factors that were important for influence.

5.2 Contribution to the Mixed Methods Approach

This study contributes to the third phase of the realist research cycle, observations. In terms of the mixed methods approach, the survey provides an overview of evaluation influence within population health partnerships. In this respect, it draws on a broad range of partnership members’ perspectives. This study is important as it presents a first insight into the conceptual framework and the factors likely to mediate evaluation influence from the perceptions of partnership members. This broad overview provides an important layer of evidence that builds on the evidence underpinning the conceptual framework and informs the development of the case studies in Study 3. The findings also make an important contribution to the data integration.

5.2.1 Study Aims

This study aimed to:

1. Identify the characteristics of the partnerships.
2. Identify the types of evaluation that the partnerships were involved in.
3. Identify the type and levels of influence experienced by the partnerships.
4. Identify the evaluation attributes, partnership functioning and evaluation behaviour, individual characteristics and contextual factors that were important for evaluation influence.

5. Identify partnerships to participate in Study 3.

5.3 Methods

5.3.1 Research Design

The research involved a cross-sectional comparison survey design. This type of design is frequently used in social research and was considered to be appropriate here for capturing partnership members’ experiences of population health partnerships, evaluation and evaluation influence. To support the research in capturing a broad range of perspectives, the survey was developed and disseminated online. This approach was also chosen to facilitate completion for participants by reducing the burden of needing to post or return a paper-based survey.

5.3.2 Participants, Sampling, Recruitment and Sample Size

Survey participants were members of population health partnerships in New Zealand. To be eligible to complete the survey, the participants could be a member of the partnership steering or governance group, implementing the partnership’s programme or contributing to the funding or the work of the partnership. This approach aimed to capture the perspectives of a broad range of partnership members, such as those involved at the strategic and operational levels.

Participants self-selected for the survey on the basis of their membership of a population health partnership. As a consequence, it was important that the definitions of partnership and population health enabled participants to identify the relevance of the survey for them. A generic definition of population health was used to help participants easily assess the relevance of the survey for their partnership. Specifically, population health referred to “consideration of the health outcomes or status of defined populations—groups, families and communities—and the distribution of such outcomes within populations” (Winnard et al., 2008, p. 2).

In line with the definition presented in Chapter 2, population health partnerships were defined as “organisational partnerships (of two or more organisational bodies), which aim to improve public health outcomes (through population health improvement and/or reduction
in health inequalities)” (K. E. Smith et al., 2010, p. 2). To summarise, participants were members of partnerships that:

- involved at least two organisations from either the public, private or non-governmental sector; and

- were implementing a strategy or initiative designed to improve population health outcomes in New Zealand.

5.3.2.1 Sampling and recruitment

Partnership members were purposively sampled to ensure that they were current or recent (within the past 6 months) members of a population health partnership in New Zealand. Participants were identified through contact with the organisation that they worked for, or through their membership to an email network. An internet search, a review of published and unpublished literature and the researcher’s existing knowledge were used to identify organisations involved in population health partnerships. These organisations were then invited to participate in the survey via an email to the Chief Executive Office for the organisation or their Personal Assistant (Appendix 2). This email was followed by a telephone call and a reminder email 2 weeks later for those who did not respond to the original invite. If no response was provided to these points of contact, the organisation was not pursued further.

In total, 152 organisations and two national email networks were invited to participate in the survey. The organisations included district health boards, primary healthcare organisations, Maori health providers, Pacific health providers, sports trusts, general practices, councils, and non-governmental organisations. Approximately, two thirds of the organisations did not respond to the email invitation and five declined to participate. Typical reasons for declining included a lack of time or relevant partnerships, the state of flux on the health sector and even the closing of two organisations.

From the 152 invited, 41 organisations consented to take part (26.9%). Unfortunately, accessing participants via email networks makes the total number of organisations involved in the survey impossible to determine. Participants were asked to identify the type of organisation that they were employed by but to protect anonymity the specific identification of organisations or partnerships was not requested. Table 4 identifies the type and number of organisations invited to participate, as well as the number who consented to take part, were possible.
Table 4: Type of Organisations: Number Invited and Consented

<table>
<thead>
<tr>
<th>Type of organisation</th>
<th>Number invited</th>
<th>Number consented</th>
</tr>
</thead>
<tbody>
<tr>
<td>District health boards</td>
<td>21</td>
<td>9</td>
</tr>
<tr>
<td>Primary health organisations</td>
<td>72</td>
<td>21</td>
</tr>
<tr>
<td>Maori health providers</td>
<td>43</td>
<td>6</td>
</tr>
<tr>
<td>Sports trusts</td>
<td>16</td>
<td>5</td>
</tr>
<tr>
<td>Non-government organisations network (email)</td>
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<td>Unknown</td>
</tr>
<tr>
<td>Public health network (email)</td>
<td>Unknown</td>
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</tr>
</tbody>
</table>

5.3.2.2 Sample size

The sample size was calculated for the linear regression analysis, as it was anticipated that this analysis would involve the smallest sample size. A sample size of 58 would achieve 80% power to detect an $R^2$ of 0.20, attributed to five independent variables using an $F$ test with a significance level (alpha) of .05.

5.3.3 Survey Design

The conceptual framework and the research aims informed the design of the survey (Appendix 3). The specific questions were also informed by existing tools and resources, with the final design also resulting from a pilot of the survey.

5.3.3.1 Survey development

The literature review undertaken to develop the framework identified a range of existing tools that were used to develop the survey, including:

- The Partnership Assessment Tool (PAT) (Hardy et al., 2003)
- The Readiness for Organisational Learning and Evaluation (ROLE) instrument (Preskill & Torres, 2009)

Surveys presented in other research papers also informed the survey design, including papers on organisational capacity to undertake and use evaluation (Cousins, Goh, Quon, & Lee, 2008) and the impact of performance budgeting on decision makers (Melkers & Willoughby, 2001).

Existing tools were selected due to their validation through previous research, and/or due to their relevance to the research aims and objectives. For example, reviewing the research that had resulted from the use of these tools also helped to ensure that data gathered through the
survey were relevant to the aims of this research. Existing tools were particularly useful for informing the sections on evaluation attributes, design, partnership functioning, evaluation participation and the individual characteristics sections. When no existing tools were available, the literature was used to inform the development of new items. The tools and the sections of the survey that they contributed to are outlined in Table 5.

**Table 5: Survey Components Informed by Existing Tools and Surveys**

<table>
<thead>
<tr>
<th>Evaluation findings and evaluation influence</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Use of evaluation findings: Cousins et al. (2007), Melkers and Willoughby (2001)</td>
</tr>
<tr>
<td>• Use of evaluation process: Cousins et al. (2008)</td>
</tr>
<tr>
<td>• Individual and partnership influences: Adapted Cousins et al. (2007); plus newly developed items</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Evaluation participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Evaluation activities, e.g., stakeholder participation: Cousins et al. (2007)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Partnership functioning</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Sense of shared vision and purpose: PAT and The Working Partnership</td>
</tr>
<tr>
<td>• Leadership: Adapted ROLE Preskill &amp; Torres (2009)</td>
</tr>
<tr>
<td>• Culture: PAT and adapted ROLE</td>
</tr>
<tr>
<td>• Decision making: PAT</td>
</tr>
<tr>
<td>• Communication: The Working Partnership</td>
</tr>
<tr>
<td>• Systems and structures: The Working Partnership</td>
</tr>
<tr>
<td>• Learning and change: PAT and The Working Partnership</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Individual characteristics and evaluation participation.</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Evaluation readiness: ROLE</td>
</tr>
</tbody>
</table>

**5.3.3.2 Pilot ing**

To test the survey data collection procedures and questions, the survey was piloted with members of population health partnerships working in New Zealand, health services and evaluation experts from the School of Population Health at The University of Auckland. The inclusion of academics aimed to provide feedback on the design of the survey, as well as its practical application. In total, 12 people participated in the pilot study.

The pilot survey data were reviewed to check the functioning of the survey online, as well as the areas that did not appear to be well understood or answered. To capture the participants’ views of the survey, they were also invited to provide feedback on comprehension of the survey items, either verbally or in writing. In total, eight people provided such feedback. The results and feedback were used to ease completion of the survey. The main changes to the survey design included:

- instructing participants to focus on one partnership in the introduction to the survey, as participants were often involved in multiple partnerships;
• the removal of some questions on the attributes of the evaluation, as they were considered to be too complicated for those without detailed knowledge of the evaluation;

• reducing the number of questions addressing the same aspects of partnership functioning to ease the burden on participants;

• placing the questions on evaluation influence nearer to the start of the survey to try and ensure that these questions were answered; and

• re-wording and re-structuring the questions on barriers and enablers to allow participants to tick as many answers as applicable rather than ranking barriers and enablers, as these questions caused confusion.

These changes reduced the survey completion time from approximately 25–30 minutes to 15–20 minutes.

5.3.3.3 Final survey design

In line with the research aims, the survey captured the characteristics and functioning of the partnerships, the partnerships’ involvement in evaluation, the attributes of any evaluation taking place (or that had taken place within the last 6 months), and the participants’ perceptions of the influence of the evaluation on themselves and the partnership. To guide participants through the survey, it was divided into 11 key sections. The first section introduced the purpose of the survey and its structure. This was followed by a section on the characteristics of the partnership and a brief section on the partnerships involvement in evaluation.

The survey then focused on evaluation and its influence. Four key sections explored the evaluation findings, evaluation influence, barriers and enablers influence, and the role of contextual factors. Following this, participants then completed sections on the evaluation approach and design. The last two sections focused on partnership functioning and individual characteristics. Appendix 4 identifies the key survey sections and the conceptual framework factors that they sought to identify. The survey primarily used closed questions to ease completion. Comments boxes were also available for participants to provide responses that were not reflected in the options provided.

It is important to note that only participants who had received some form of feedback from their partnerships’ evaluation were invited to complete the sections on evaluation findings,
influence and contextual factors. Participants who had not received some form of feedback skipped these questions and moved to the section on partnership functioning. While feedback is not the only element of an evaluation that can trigger influence, this focus was considered to be the least confusing means of ensuring that participants could answer the questions on influence. Equally, the survey wanted to explore a wide range of influences that were more likely to be possible following evaluation feedback or findings. The strengths and limitations of this approach are noted in the discussion in Chapter 8.

### 5.3.4 Data Collection Procedures

Following consent from the host organisations, potential survey participants were invited to complete the online survey between the April 16 and May 28, 2010 (a 6-week period) via email. This email outlined the background and purpose to the survey, included a participant information sheet and contained a hyperlink that took participants directly to the online survey. This email was either disseminated through a key contact within the host organisation or by the researcher. When the email invitation was disseminated by the researcher, potential participants’ email addresses were either accessed through publically available online sources or provided by the host organisations. The initial email invite to participate in the survey was also supported by 2-, 4- and 5-week reminders.

The survey was made available online through Survey Monkey (SurveyMonkey.com, 2008, LLC, Palo Alto, California, USA), an online survey software provider. Survey Monkey was considered to be appropriate, as it was quick and easy to use and available at a reasonable cost. To facilitate participation, survey participants were invited to enter a prize draw to win an iPod touch on completion of the survey.

### 5.3.5 Data Analysis

Prior to any analysis, the data were cleaned and prepared for importation into PASW Statistical Package from the MS Excel file provided by Survey Monkey. The key analyses undertaken and their purposes are presented in Table 6. Following this, the specific methods for each of these analyses are described.

**Table 6: Survey Analyses and Purpose**

<table>
<thead>
<tr>
<th>Analysis</th>
<th>Purpose</th>
</tr>
</thead>
</table>
| Descriptive statistics | • To describe the participants, their partnerships, their evaluations and the type and level of influence that they experienced.  
• To identify participants’ perceptions of the barriers and enablers to evaluation influence in their partnership. |
Bivariate analysis
- To identify the role of individual factors.
- To identify any association between the evaluation attributes, partnership functioning and evaluation behaviour, individual characteristics and the mechanisms and outcomes of evaluation influence.

Principal components analysis
- To validate the conceptual framework.
- To reduce the data set for further analyses.

Linear regression
- To examine the predictive ability of the factors that resulted from the PCA for evaluation influence.

5.3.5.1 Data preparation

In preparation for analysis the data was re-coded (when necessary) so that positive or affirmative responses to the survey questions related to higher scores. For example, partnerships that were functioning well should have high scores on the partnership functioning items following the re-coding.

5.3.5.2 Descriptive statistics

Descriptive statistics were used to describe the answers to each of the survey items. Specifically, frequencies were used to describe the participants’ individual characteristics, the partnerships’ functioning, characteristics and evaluation behaviour, any evaluation that the partnerships were involved in, and the types and levels of evaluation influence that they experienced, as well as the barriers and enablers experienced.

5.3.5.3 Bivariate analysis

Statistical analyses were conducted to determine if there was any association between the evaluation attributes, partnership functioning and evaluation behaviour, individual characteristics and evaluation influence. These analyses sought to explore the contribution of specific variables to the different types and levels of evaluation influence. For example, these analyses identified whether there was a significant relationship between leadership involvement and partnership evaluation influences. These analyses were informed by the propositions presented in the conceptual framework.

5.3.5.3.1 Data preparation and testing assumptions

To identify the factors that were associated with different types and levels of influence, scores were developed. To explore individual influences, scores were developed for individual general influence mechanisms, individual cognitive/affective outcomes, individual motivational outcomes and individual behavioural outcomes. With respects to partnership-level influences, scores were developed for interpersonal general influence
mechanisms, interpersonal cognitive/affective outcomes, interpersonal motivational outcomes and collective behavioural outcomes.

Preliminary exploration of the data indicated that some of the survey variables were not normally distributed. Subsequently, non-parametric tests were most appropriate. In line with the assumptions underpinning the Mann-Whitney U and Kruskal-Wallis analyses, the data were ordinal and from independent samples.

5.3.5.3.2 Method

Mann-Whitney U and Kruskal-Wallis analyses were conducted to compare mean individual and partnership evaluation influence scores for the conceptual framework factors. Specifically, means were compared for 42 variables with statistical significance set at \( p \leq 0.05 \). Figure 8 identifies the specific variables that were included in the analyses. Again contextual factors were not included, as these were only rated as barriers or enablers in the survey and the resulting data did not meet the assumptions underpinning these analyses.
Figure 8: Variables tested through bivariate analyses.

5.3.5.4 The principal components analysis (PCA)

This stage of analysis was designed to validate the conceptual framework. Specifically, the
analysis sought to determine how well the underlying scale dimensions matched with the
key components of the conceptual framework. This stage was also designed to produce a
more manageable set of variables that could be used to further explore the conceptual
framework.

5.3.5.4.1 Data preparation and testing assumptions

To validate the conceptual framework, all of the variables that had the appropriate level of
variations (i.e., no questions with dichotomous responses) were entered for analysis. In total,
45 items were intended to be entered into the PCA (Appendix 5).

Correlations between the conceptual framework variables were then reviewed to ensure that
the variables had some relationship to one another. Correlations were also reviewed to avoid
multicollinearity, a situation in which the variables correlate too highly to one another. None
of the variables needed to be excluded based on their correlation coefficients.

Adequacy of sample size and strength of the relationship between items was tested by
performing Kaiser-Meyer-Olkin (KMO) test and Bartlett’s test of sphericity. These tests
suggested that the PCA was appropriate for the data set. Specifically, the Kaiser-Meyer-
Olkin measure verified the sampling adequacy for the analysis (KMO = .73, values between
0.7 and 0.8 are considered to be good; Kaiser, 1974; Field, 2009). The KMO values for the
individual variables were all above 0.5, with 31 of the 36 items having KMO values above
0.7, which is well above the acceptable limit. Therefore, the Measure of Sampling
Adequacy indicated that the analysis was appropriate and that the factors were distinct.

Bartlett’s test of sphericity was not significant, although KMO values for the individual
variables were above 0.5 and conducting the analysis again with the removal of those
variables near 0.5 or less (Views Changed and Managers Evaluation Readiness) made no
difference to the factors or relating statistics. Furthermore, the anti-image matrices were
above 0.5. The correlation coefficients also highlighted the relationships between variables.
The power of the Bartlett’s test of sphericity is also sensitive to the sample size (Knapp &
Swoyer, 1967), with larger sample sizes being more likely to produce a significant result. This
notion is also supported by Comrey and Lee (1992), who suggest that a sample size of 200
is “fair” for this type of analysis. Thus, a larger sample size may have been beneficial in this
research. Given the relationships identified between the variables through the other analyses, the PCA was still considered to be appropriate.

5.3.5.4.2 PCA: Method

To conduct the PCA, 45 variables identified as appropriate for the analysis were entered into the PCA. Orthogonal varimax rotated solutions with Kaiser normalisation were performed to extract components. Initial analyses indicated that the PCA was being conducted with a reduced data set. Subsequently, the data were explored to identify missing data. The missing data were largely due to the questions on influence only being completed by participants who had received feedback on their evaluation. For example, missing data in the section on evaluation influence ranged from approximately 22% for the sections on partnership functioning to approximately 50% for the questions on evaluation influence (Appendix 6). As a consequence, average scores were requested for missing data sets when running the PCA. In line with the conceptual framework that was being explored through the PCA, seven factors were specified for extraction from the PCA.\(^1\)

Variables that failed to adequately load on any factors (less than 0.3) were removed from the analysis. These variables included:

- Evaluator Skills and Competence, Evaluator Cultural Competence, Feedback Score (evaluation attributes);
- Level of Collaboration, Partnership Purpose (partnership characteristics); and
- Existing Evaluation Knowledge and Skills (individual characteristics).

Following this the analysis was re-run. However, the resulting anti-imaging matrices and the measures of sampling adequacy (MSA) for the variables that made up component 7 were well below 0.5. Subsequently, these variables were removed (leaders involvement in evaluation and funders involvement in evaluation) and the number of components extracted was reduced to 6 and the PCA was re-run.

The changes to the variables entered changed the factor loadings. Specifically, Type of Partnership and Partnership Purpose did not load on any factors and Factor 6 was made up of only one variable (Number of Organisations). To avoid having a factor made up of one variable, all three of these variables were removed from the PCA and five factors were

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\(^1\) Contextual factors were not included as the survey items were not suited to a PCA.
extracted. Thus, the final PCA was run on 35 variables with five factors specified for extraction. The findings from this final analysis are presented in the Results section.

5.3.5.5 **Linear regression**

Linear regression was used to explore the predictive effects of the factors identified in the PCA. Specifically, the factors relating to evaluation attributes, evaluation capacity building, partnership functioning, partnership evaluation behaviour and evaluation readiness were used to see if they predicted evaluation influence.

5.3.5.5.1 **Linear regression: Data preparation and testing assumptions**

The PCA produced five factors. New variables were computed for each of these using the average scores for the variables that loaded onto each factor. Developing new scores as opposed to using the scores generated through the PCA was considered to enhance the validity of the analysis. Only participants that provided an answer for at least 75% of the variables in each factor were included when developing the new scores.

Computing the new variables in this way also enabled the Evaluation Attributes and Evaluation Capacity variables that were loading on one of the PCA factors to be split into two separate factors. The correlation between these variables is to be anticipated as evaluation capacity building outcomes are so closely related to the attributes of an evaluation (for example, the evaluation approach would be likely to include specific activities designed to enhance capacity). The decision to split these factors was designed to reflect the conceptual framework and explore the predictive ability of each of these factors individually.

Understanding the distribution of these scales was important for informing the subsequent analyses to explore the framework. The tests of normality indicated that while there was some skewness in the scales, they were normally distributed (Table 7). Thus, linear regression was considered to be appropriate for further exploring the framework. The internal reliability of the factors was also tested. Specifically, Cronbach’s alpha coefficients were used to measure the internal consistency among items. The factors were indicated as being reliable, with scores ranging from .91 to .66 (Table 7).

### Table 7: Descriptive Statistics for the PCA Factors

<p>| | | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>M</td>
<td>SD</td>
<td>Min</td>
<td>Max</td>
<td>Skewness (95% CI)</td>
<td>Kurtosis (95% CI)</td>
<td>α</td>
</tr>
</tbody>
</table>

69
5.3.5.5.2 Linear regression: Method

Linear regression was used to test the predictive ability of the Partnership Functioning, Evaluation Attributes, Evaluation Capacity Building, Partnership Evaluation Behaviour and Evaluation Readiness factors on the Evaluation Influence factor that resulted from the PCA. To identify the factors that best predicted Evaluation Influence, a range of models were tested. This involved removing each factors from the analysis to see if this changed the predictive ability of the model. In practice, it made little difference to the ability of the model to predict influence. Thus, all five variables were kept in the final model.

5.3.6 Summary

This section presented the methods used to implement and analyse the survey for Study 2. Specifically, this study used an online survey to invite population health partnership members from across New Zealand to participate in a survey on evaluation influence in partnerships. In line with the mixed methods approach, the survey addressed each of the components of the conceptual framework with a view to validating the framework and building on the evidence that underpins it. To understand the findings from the survey a range of data analysis procedures were used including a principal components analysis, linear regression, and Mann-Whitney U and Kruskal-Wallis tests. Basic descriptive statistics were also used to describe the participants, the partnerships, the evaluations, their influences and the barriers and enablers to these influences. The following section presents the results from the survey.

5.4 Results: Participants and Their Partnerships

The survey findings are presented through three key sections. The first section describes the survey participants and their partnerships, including their characteristics and functioning.
The second section focuses on the partnerships who were involved in evaluation. Specifically, this section identifies the type of evaluations that partnerships were engaged in as well as its influences. The third section uses participants’ perceptions and statistical analyses to identify the factors associated with evaluation influence. Following this, an overview of the chapter is provided.

5.4.1 Survey Participants: Individual Characteristics

Of the survey participants who provided information \( (n = 108^2) \), the majority of survey participants were female (71%). Further, of those who answered the question on age \( (n = 109) \), most were aged between 45–49 (19.3%), 35–39 (13.8%) or 55–59 (12.8%). Most of the participants who identified their ethnicity in the survey \( (n = 105) \), the majority identified themselves as being of New Zealand European (65.7%) or Maori (18.1%) ethnicity.

5.4.1.1 Employer

From the 100 people that responded to the question on their current employer, over half were employed by a district health board (54%). A further 21% were employed by a primary health organisation, 11% by a regional sports trust and 5% were from non-government organisations. The remainder were employed by the council (5%), private companies (5%) or not-for-profit organisations (3%).

5.4.1.2 Participants’ involvement and role in the partnership

Table 8 identifies the involvement and the role of the participants’ in their partnerships. The majority were “very” to “moderately” involved in their partnerships. The participants could identify themselves as having more than one role in the partnership, although over half had just one role. The majority were programme providers or partnership leaders. If the participant had more than one role, it was usually the leadership role plus one other within the partnership.

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\(^2\) This number reflects the number of people who answered this question, rather than the 187 participants who contributed to the survey.
Table 8: Involvement and Role in Partnership

<table>
<thead>
<tr>
<th>Involvement in partnership (n = 109)</th>
<th>Percentage of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not very involved</td>
<td>10.0</td>
</tr>
<tr>
<td>Moderately involved</td>
<td>32.1</td>
</tr>
<tr>
<td>Very involved</td>
<td>58.7</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of roles in partnership (n = 104)</th>
<th>Percentage of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>One role</td>
<td>61.0</td>
</tr>
<tr>
<td>Two roles</td>
<td>24.0</td>
</tr>
<tr>
<td>Three roles</td>
<td>15.0</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Roles in partnership (n = 197)</th>
<th>Percentage of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme provider</td>
<td>19.7</td>
</tr>
<tr>
<td>Leadership</td>
<td>14.2</td>
</tr>
<tr>
<td>Manager of partnership organisation</td>
<td>14.2</td>
</tr>
<tr>
<td>Programme developer</td>
<td>13.7</td>
</tr>
<tr>
<td>Funder</td>
<td>12.6</td>
</tr>
<tr>
<td>Consultant</td>
<td>8.6</td>
</tr>
</tbody>
</table>

5.4.1.3 Existing evaluation knowledge and attitudes

Of the 109 participants who provided information, over two thirds of the participants had undergone some form of evaluation and/or research methods training (67.9%). Just over half of those were trained to a postgraduate level (51.4%) and nearly a third were trained through short courses (29.7%). The remainder were trained to a graduate (14.9%) or doctoral level (4.1%).

All of the survey participants had positive attitudes towards evaluation with 68.9% strongly agreeing and 31.1% agreeing that “Evaluation would help the partnership to provide better programmes, processes, products and services” (n = 106).

5.4.2 The Partnerships: Key Characteristics

The partnerships were supporting a diverse range of population health initiatives including physical activity and nutrition, smokefree, employee wellbeing, oral health, Whanau Ora, alcohol- and drug-related harm, cancer services and diabetes. When defining their work, most partnerships identified one or two key activities (42.3% and 12.7% respectively). These activities typically involved service implementation (46.5%; Figure 9), information sharing (38.5%) and service coordination (32.6%).
5.4.2.1 Partnership size and formality

Of the 133 participants who provided information, over half of the partnerships involved between two to five or six to ten organisations (51.5% and 26.2% respectively). There were also some very large partnerships involving more than 20 organisations (11.5%). The remaining partnerships involved between 11 and 20 organisations (10.8%). The majority of the partnerships were also underpinned by a formal written agreement (66.2%). The remaining third had no written agreement (28.6%), or did not know whether they had an agreement or not (5.3%).

5.4.2.2 Partnership relationships: Collaboration, across sector and across region

Data on the type of partnerships involved in the survey are provided in Table 9. The majority of partnerships were working at a collaborative level that involved sharing information, reducing/altering activities, sharing resources and shared decision making. In terms of the breadth of the relationship, just under two thirds of the partnerships involved organisations from outside the health sector.
Table 9: Partnership Relationships: Level of Collaboration, Across Sector and Across Region

<table>
<thead>
<tr>
<th>Type of relationship (n = 134)</th>
<th>Percentage of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contractual only</td>
<td>14.9</td>
</tr>
<tr>
<td>Cooperation</td>
<td>11.9</td>
</tr>
<tr>
<td>Coordination</td>
<td>10.4</td>
</tr>
<tr>
<td>Networking</td>
<td>7.5</td>
</tr>
<tr>
<td>Collaboration</td>
<td>55.2</td>
</tr>
<tr>
<td>Partnership sectors (n = 129)</td>
<td></td>
</tr>
<tr>
<td>Across-sector partnerships</td>
<td>63.8</td>
</tr>
<tr>
<td>Health sector partners only</td>
<td>36.2</td>
</tr>
<tr>
<td>Partnership geographical regions (n = 134)</td>
<td></td>
</tr>
<tr>
<td>One region</td>
<td>80.7</td>
</tr>
<tr>
<td>Two or more regions</td>
<td>17.0</td>
</tr>
<tr>
<td>National partnership</td>
<td>2.2</td>
</tr>
</tbody>
</table>

The partnerships were from 19 different regions across New Zealand. In reflection of the distribution of the population, the majority were working in Auckland (24.6%). Waikato (14.2%), Bay of Plenty (11.9%), Wellington (11.9%) and Manawatu-Whanganui (11.9%) were also well represented (n = 134). The majority of partnerships were working within one region (Table 9).

5.4.3 The Partnerships: Functioning

This section identifies the functioning of the partnerships. Specifically, it identifies the clarity of the partnership’s purpose, ownership of the partnership and its culture, the partnership’s arrangements and information-sharing processes.

5.4.3.1 Partnership purpose: Clarity and ownership

Table 10 provides data on the clarity and ownership of the partnerships. The partnerships were described as having a clear sense of purpose and a strong sense of ownership, with over 80% of the participants agreeing with the statements “Our partnership has a clear vision, shared values and agreed service principles” and “There is widespread ownership of the partnership across and within all partners.”

Table 10: Clarity of Partnership Purpose and Ownership

<table>
<thead>
<tr>
<th>Sense of purpose and ownership</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clarity of partnership purpose (n = 109)</td>
<td>34.9%</td>
<td>47.7%</td>
<td>17.4%</td>
<td>0%</td>
</tr>
<tr>
<td>Sense of ownership within the partnership (n = 105)</td>
<td>20.0%</td>
<td>62.9%</td>
<td>17.1%</td>
<td>0%</td>
</tr>
</tbody>
</table>
5.4.3.2 Partnership culture: Trust, power, cooperation and blame

Table 11 provides data on the levels of trust, power, cooperation and blame within the partnerships. While the partnerships appeared to operate from a spirit of cooperation and learning, levels of trust and power imbalances hindered risk-taking and open discussion within approximately a third of the partnerships.

Table 11: Partnership Culture: Trust, Cooperation and Power

<table>
<thead>
<tr>
<th>Aspects of partnership culture</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Levels of trust are high enough to encourage risk-taking (n = 108)</td>
<td>16.7%</td>
<td>52.8%</td>
<td>29.6%</td>
<td>0.9%</td>
</tr>
<tr>
<td>Differences in the power and status of members can sometimes hinder open discussion (n = 107)</td>
<td>6.5%</td>
<td>43%</td>
<td>43.9%</td>
<td>6.5%</td>
</tr>
<tr>
<td>Partnership members operate from a spirit of cooperation (n = 107)</td>
<td>39.3%</td>
<td>50.5%</td>
<td>10.3%</td>
<td>0%</td>
</tr>
<tr>
<td>When things have not gone to plan the partnership uses this to learn (n = 108)</td>
<td>15.7%</td>
<td>74.1%</td>
<td>8.3%</td>
<td>1.9%</td>
</tr>
</tbody>
</table>

5.4.3.3 Partnership arrangements: Leadership, responsibilities, accountability and decision making

Details on the partnerships’ leadership, responsibilities, accountability and decision making arrangements are provided in Table 12. The majority of the partnerships’ suggested that their leader(s) encouraged the partnership to reflect on its work. Similarly, the partnerships were adopting participatory approaches and drawing on data to inform decision making. In contrast, areas of responsibility within the partnerships were reported as being less clear.

Table 12: Partnership Arrangements: Leadership, Responsibilities, Accountability and Decision Making

<table>
<thead>
<tr>
<th>Aspects of partnership arrangements</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leader(s) encourage reflection (n = 106)</td>
<td>15.1%</td>
<td>69.8%</td>
<td>15.1%</td>
<td>0%</td>
</tr>
<tr>
<td>Partners’ areas of responsibility are clear and understood (n = 109)</td>
<td>16.5%</td>
<td>59.6%</td>
<td>23.9%</td>
<td>0%</td>
</tr>
<tr>
<td>Lines of accountability for the partnership are clear (n = 107)</td>
<td>14%</td>
<td>58.9%</td>
<td>26.2%</td>
<td>0.9%</td>
</tr>
<tr>
<td>Data or other information is used to inform decision making (n = 108)</td>
<td>15.7%</td>
<td>76.9%</td>
<td>4.6%</td>
<td>0%</td>
</tr>
<tr>
<td>Decision making encourages participation from all members (n = 106)</td>
<td>17%</td>
<td>67%</td>
<td>16%</td>
<td>0%</td>
</tr>
</tbody>
</table>
5.4.3.4 Information sharing: Knowledge management, type, timeliness and responding to information

Just under 60% of the partnerships reported having a clearly defined information and knowledge sharing policy. Despite this, critical information was still shared across the partnerships. In comparison, critical information were less likely to be shared in a timely manner within some partnerships. Equally, partnerships were less likely to report having systems to respond to evaluation information. The data on the information sharing processes within the partnerships are provided in Table 13.

Table 13: Information Flow and Learning: Knowledge Management, Information Sharing and Change

<table>
<thead>
<tr>
<th>Aspects of information flow</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partnership has a clearly defined knowledge management policy</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>((n = 107))</td>
<td>12.1%</td>
<td>46.7%</td>
<td>36.4%</td>
<td>4.7%</td>
</tr>
<tr>
<td>Partnership shared critical information across all members ((n = 107))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>19.6%</td>
<td>62.6%</td>
<td>16.8%</td>
<td>0.9%</td>
</tr>
<tr>
<td>Partnership shares information in a timely manner ((n = 107))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>15.9%</td>
<td>60.7%</td>
<td>22.4%</td>
<td>0.9%</td>
</tr>
<tr>
<td>Arrangements are in place to respond to evaluation findings ((n = 106))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>15.1%</td>
<td>62.3%</td>
<td>21.7%</td>
<td>0.9%</td>
</tr>
</tbody>
</table>

5.4.4 Summary

The key demographic details of the survey participants reflect the general demographics of those currently working in the health sector, with a higher level of females and New Zealand Europeans participating in the survey. The participants were also from a diverse range of organisations. This, coupled with the demographic details suggests that the sample is appropriate for pursuing an overview of evaluation influence within population health partnerships.

The participants tended to have a high level of involvement with their partnerships, and this is reflected in their role as programme providers and partnership leaders. In terms of evaluation readiness, the participants held very positive attitudes towards evaluation and its potential to improve their work. The majority had also undergone some form of evaluation or research methods training to graduate level.

The partnerships were supporting a diverse range of population health initiatives. This highlighted the diversity of contexts within which partnerships and evaluations were happening. In terms of structure, the partnerships were typically moderate in size, involving
between two to ten organisations. Most partnerships were also underpinned by a formal written agreement. The majority of the partnerships were also perceived to be working at a highly collaborative level with organisations from outside traditional health sector boundaries and within one geographical region. Equally, partnership relationships were based on networking, coordination, cooperation or purely contractual agreements. Thus, the partnerships provide a useful range of partnership contexts in which to understand more about evaluation influence.

Overall, the partnerships were described as having a high level of functioning. Trust levels and power differences, however, were identified as potential barriers to risk taking and open discussion within approximately half of the partnerships. Similarly, levels of functioning were lower for the clarity of partnership member responsibilities and lines of accountability. Information-sharing and knowledge-management practices appeared to be functioning well within the partnerships, with most feeling that critical information was shared across the partnership. Still, there was slightly less agreement with the statements relating to the timeliness of information sharing and the partnerships having systems to respond to evaluation. It is these characteristics of the partnerships’ functioning that may present some challenges to evaluation influence. This notion is explored through the statistical analyses in section 5.6.

5.5 Results: Partnerships’ Evaluation Attributes and Behaviour

This section focuses on the partnerships’ evaluations. Specifically, this section identifies the number of partnerships engaged in evaluation, as well as the specific attributes of the evaluations. In line with the conceptual framework, this section also identifies the evaluation behaviour of the partnerships.

5.5.1 Partnerships Engaging in Evaluation

Over half of the 187 partnerships were currently undertaking an evaluation (55.6%). Of the remaining 59 partnerships, 23 had undertaken an evaluation within the past 6 months, 20 were intending to engage in an evaluation within the next 12 months, and 16 were not involved in evaluation. In total, over three quarters of the partnerships were involved in evaluation (78.6%).

To be directed to the questions on evaluation, the participants were asked to identify if they had received any feedback on the partnership’s evaluation. This feedback could either be formal written feedback or less formal feedback, such as verbal presentation or discussions
with the evaluator. While the literature acknowledges that the process of an evaluation also facilitates influence, dividing participants up on the basis of their stage of evaluation was considered to be too complex for the survey design and its completion.

Thus, only those participants who had received feedback on their evaluation were directed to the questions on evaluation attributes and influence. All other participants were directed to the questions on partnership functioning, individual characteristics and evaluation readiness. In total, 56 participants had received feedback on their evaluation. Subsequently, the remainder of the Results section focuses specifically on these participants and their partnerships.

### 5.5.2 Evaluation Attributes

This section focuses on the attributes of the partnerships’ evaluations. Specifically, this section identifies the evaluation focus and rationale, the evaluation approach, the skills and competence of the evaluator and the key outputs of the evaluations.

#### 5.5.2.1 Evaluation focus and rationale

The majority of the evaluations were focusing on the work of the partnership (60.8%). Over a quarter of the evaluations were focusing on both the work of the partnership and the partnership itself (29.4%). The remaining 9.8% of evaluations were focusing on the partnership only (n = 51).

In terms of rationale, the participants could select more than one reason for the partnerships’ engagement in evaluation. In total, 51 people answered this question, with most identifying four reasons for undertaking the evaluation (29.4%). The most commonly cited reasons were “To identify the impact of our work” (88%; Figure 10), “To improve our work” (76.4%), and “To gather evidence to support future funding applications” (66.6%). Partnerships were less likely to be engaging in evaluation to support capacity building.
5.5.2.2 Evaluation approach: Theory and sophistication

Over half of the 52 participants who answered this question suggested that the evaluation approach was underpinned by an evaluation theory (61.5%). Of the remaining responses to this question, 15.4% stated that the evaluation did not use a theoretical approach and 23.1% did not know. In terms of sophistication, roughly equal proportions rated their evaluation design as simple (46.2%) and sophisticated design (44.2%).

5.5.2.3 The evaluator: Status, skills and cultural competence

Table 14 identifies the internal and external status of the evaluators, as well as their skills and cultural competence. Just under two thirds of the evaluations were being undertaken by an external contractor. Nearly all of the participants felt that the evaluations were being undertaken by someone with the right expertise and skills. Similarly, most of the participants suggested that the evaluation was being carried out by someone with cultural competence. In comparison to the responses to the question on the evaluator’s skills and expertise, participants were less likely to strongly agree with this item and were more likely to indicate that they did not know how culturally competent the evaluator was.
### Table 14: The Evaluator: Location, Expertise and Cultural Competence

<table>
<thead>
<tr>
<th>Evaluation role</th>
<th>Percentage of participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>External contractor</td>
<td>62.7</td>
</tr>
<tr>
<td>Partnership member</td>
<td>17.6</td>
</tr>
<tr>
<td>Internal evaluation unit</td>
<td>13.7</td>
</tr>
<tr>
<td>Funder</td>
<td>5.9</td>
</tr>
</tbody>
</table>

The evaluation was carried out by someone with appropriate skills and expertise (n = 52)

<table>
<thead>
<tr>
<th>Response</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>40.4</td>
</tr>
<tr>
<td>Agree</td>
<td>48.1</td>
</tr>
<tr>
<td>Disagree</td>
<td>3.8</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>0.0</td>
</tr>
<tr>
<td>I don’t know</td>
<td>7.7</td>
</tr>
</tbody>
</table>

The evaluation was being carried out by someone with cultural competence (n = 49)

<table>
<thead>
<tr>
<th>Response</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>16.3</td>
</tr>
<tr>
<td>Agree</td>
<td>61.2</td>
</tr>
<tr>
<td>Disagree</td>
<td>4.1</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>0</td>
</tr>
<tr>
<td>I don’t know</td>
<td>18.4</td>
</tr>
</tbody>
</table>

#### 5.5.2.4 Evaluation feedback: Review, dissemination, credibility, timeliness and responsiveness

The survey asked participants to identify whether they had been involved in reviewing the findings from the evaluation and how the findings had been disseminated within and outside the partnership. They were also asked to identify whether the feedback was credible, timely and responsive. Participants were able to select from the options of “yes,” “no” and “I do not know” for each question. Responses related to the evaluation feedback are shown in Table 15.

Over three quarters of the participants had reviewed their evaluation findings and suggested that they had been shared with all partnership members, although partnerships were less likely to have shared findings with people outside of the partnership.

The majority of the participants felt that the feedback was credible, timely and responsive, although slightly more participants suggested that the evaluation findings were not timely in comparison to the other items on feedback.
Table 15: Evaluation Feedback: Review, Dissemination, Credibility, Timeliness and Responsiveness

<table>
<thead>
<tr>
<th>Aspects of feedback</th>
<th>Yes</th>
<th>No</th>
<th>I do not know</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have reviewed the evaluation findings (n = 54)</td>
<td>79.6%</td>
<td>18.5%</td>
<td>1.9%</td>
</tr>
<tr>
<td>The evaluation findings have been shared with all partnership members (n = 56)</td>
<td>83.9%</td>
<td>9.0%</td>
<td>7.1%</td>
</tr>
<tr>
<td>The evaluation findings had been shared with people outside of the partnership (n = 55)</td>
<td>56.4%</td>
<td>25.5%</td>
<td>18.2%</td>
</tr>
<tr>
<td>The evaluation feedback was credible (n = 55)</td>
<td>87.3%</td>
<td>2.0%</td>
<td>10.9%</td>
</tr>
<tr>
<td>The evaluation feedback was timely (n = 55)</td>
<td>78.2%</td>
<td>12.7%</td>
<td>9.1%</td>
</tr>
<tr>
<td>The evaluation feedback was responsive (n = 55)</td>
<td>83.6%</td>
<td>3.6%</td>
<td>12.7%</td>
</tr>
</tbody>
</table>

5.5.3 Partnership Evaluation Behaviour

This section describes the partnerships’ evaluation behaviour including the participation of partnership members in the evaluation, their support for the evaluation and their evaluation readiness.

5.5.3.1 Degree of participation: Individuals and partnership members

The participants were asked to rate the involvement of themselves and their partnership in their evaluations. Specifically, they were asked to rate themselves as being “very involved,” “moderately involved,” “not very involved” or as having “no involvement.” Similarly, they were asked to rate the involvement of their partnership members as “very high,” “high,” “low” or “very low.” They could also indicate that they did not know or that this specific type of partnership member was not directly involved in their partnership.

The majority of survey participants were moderately (44.9\%) or highly involved (22.4\%) in the evaluation processes such as planning, data collection and/or reviewing findings. The programme providers had the highest level of involvement in the evaluation (Table 16). Programme funders had the lowest levels of involvement.
Table 16: Degree of Participation: Partnership Members

<table>
<thead>
<tr>
<th>Percentage of participants</th>
<th>Very high</th>
<th>High</th>
<th>Low</th>
<th>Very low</th>
<th>I do not know</th>
<th>Not applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leadership ($n = 49$)</td>
<td>36.7%</td>
<td>36.7%</td>
<td>12.2%</td>
<td>4.1%</td>
<td>6.1%</td>
<td>4.1%</td>
</tr>
<tr>
<td>Programme developers ($n = 49$)</td>
<td>37.4%</td>
<td>24.5%</td>
<td>16.3%</td>
<td>4.1%</td>
<td>18.4%</td>
<td>2.0%</td>
</tr>
<tr>
<td>Programme managers ($n = 49$)</td>
<td>46.9%</td>
<td>14.3%</td>
<td>24.1%</td>
<td>4.1%</td>
<td>10.2%</td>
<td>4.1%</td>
</tr>
<tr>
<td>Programme funders ($n = 49$)</td>
<td>14.3%</td>
<td>28.6%</td>
<td>34.7%</td>
<td>8.2%</td>
<td>10.2%</td>
<td>4.1%</td>
</tr>
<tr>
<td>Programme providers ($n = 49$)</td>
<td>46.9%</td>
<td>34.7%</td>
<td>10.2%</td>
<td>2%</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Programme beneficiaries ($n = 49$)</td>
<td>6.1%</td>
<td>49%</td>
<td>18.4%</td>
<td>14.3%</td>
<td>10.2%</td>
<td>2%</td>
</tr>
</tbody>
</table>

5.5.3.2 Support for evaluation.

Nearly all of the participants suggested that the partnership members were moderately (44.9%) or very supportive of the evaluation (22.4%). However, roughly a quarter stated that the partnership was not very supportive (24.5%), and nearly 10% of the partnerships were described as offering the evaluation no support (8.2%) ($n = 49$).

5.5.3.3 Evaluation readiness

In terms of evaluation readiness, this section of the survey focused on partnership members’ attitudes towards evaluation, as the evaluation capacity is explored as a contextual factor in the survey (section 5.7). Over three quarters of the participants described their partnerships, managers, decision makers or funders as having a high level of evaluation readiness (Table 17).
Table 17: Evaluation Readiness: Partnership Members and Decision Makers

<table>
<thead>
<tr>
<th>Aspects of evaluation readiness</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partnership members would support more evaluation work (n = 105)</td>
<td>30.5%</td>
<td>54.3%</td>
<td>15.2%</td>
<td>0%</td>
</tr>
<tr>
<td>Evaluation would convince decision makers of needed changes (n = 106)</td>
<td>49.1%</td>
<td>41.5%</td>
<td>9.5%</td>
<td>1%</td>
</tr>
</tbody>
</table>

5.5.4 Summary

Typically, the evaluations focused on the work of the partnership and were often undertaken to identify the impact of and improve the partnerships’ work. These purposes highlight the ways in which the partnerships sought to be influenced by their evaluations. In terms of design, roughly equal proportions were described as sophisticated and simple. Most of the evaluations were undertaken by an external contractor perceived to have the appropriate skills and expertise. In terms of outputs, the evaluation feedback appeared to be well reviewed and disseminated within the partnership. However, only half had shared the evaluation findings outside the partnership. Overall, the evaluation feedback was perceived to be highly credible and timely, although only half of the participants felt that it met the needs of the partnership.

The survey participants were highly involved in their partnership’s evaluations. Other members of the partnership were also highly involved, although the programme providers had the highest level of involvement. In contrast, programme funders had the lowest levels of involvement, with less than half being highly involved. Overall, the partnerships were described as offering the evaluation a good level of support. In terms of readiness, the findings suggested that the partnership members, managers, decision makers and funders all had high levels of evaluation readiness. These findings suggest that partnership evaluation behaviour was at a level that should facilitate influence within most partnerships, as there were high levels of participation, support and readiness. The role of these factors in facilitating influence is explored in section 5.6.

5.6 Results: Evaluation Influence

This section explores the evaluation influences experienced by the survey participants and their partnerships. Subsequently, the evaluation influences are reported in two key sections. The first of these focuses on the individual influences experienced, and the second focuses on the influences experienced at a partnership level.
5.6.1 Individual Level Influences

In line with the conceptual framework, the participants were asked about the general influence mechanisms, cognitive/affective processes, motivational outcomes and behavioural outcomes experienced by themselves and the partnership.

5.6.1.1 Individual general influence mechanisms: Elaboration, heuristics, skill acquisition and new skill performance

The general influence mechanisms that the participants were asked about were elaboration, heuristics, skill acquisition and new skill performance. The results for this section of the survey are presented in Table 18.

Table 18: Individual General Influence Mechanisms: Elaboration, Heuristics, Skill Acquisition and New Skill Performance

<table>
<thead>
<tr>
<th>Percentage of participants</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagreed</th>
<th>Already have/are</th>
</tr>
</thead>
<tbody>
<tr>
<td>I thought more about partnership/programme (elaboration; n = 55)</td>
<td>34.5%</td>
<td>52.7%</td>
<td>12.7%</td>
<td>0%</td>
<td>-</td>
</tr>
<tr>
<td>I now know more about evaluation (heuristics; n = 56)</td>
<td>19.6%</td>
<td>42.9%</td>
<td>19.6%</td>
<td>1.8%</td>
<td>-</td>
</tr>
<tr>
<td>I learnt more about the programme/partnership (heuristics; n = 50)</td>
<td>18%</td>
<td>72%</td>
<td>10%</td>
<td>0%</td>
<td>-</td>
</tr>
<tr>
<td>I have developed technical evaluation skills (skill acquisition; n = 56)</td>
<td>16.1%</td>
<td>33.9%</td>
<td>37.5%</td>
<td>0%</td>
<td>12.5%</td>
</tr>
<tr>
<td>I will carry out evaluation as part of my day-to-day work (new skill performance; n = 55)</td>
<td>18.3%</td>
<td>45.5%</td>
<td>20%</td>
<td>-</td>
<td>16.4%</td>
</tr>
</tbody>
</table>

Nearly all of the participants reported learning more about their programme/service/partnership, as a result of the evaluation. Similarly, nearly 90% of the participants suggested that the evaluation had made them think more about the partnership and/or its programme(s).

In terms of heuristics, over half agreed with the statement “As a result of the evaluation, I now know more about evaluation”, although participants were less likely to strongly agree with this item. While the evaluations were less likely to develop participants’ technical evaluation skills, two thirds suggested that they would now carry out evaluation as part of their day to day work.

5.6.1.2 Individual outcomes: Cognitive/affective, motivational and behavioural

The cognitive/affective processes focused on changes in participants’ views of the programme or partnership (opinion/attitude valence and salience). Questions on
motivational outcomes focused on changes in personal goals and aspirations relating to the partnership and its work. Following this, the survey also included a question on behavioural outcomes, namely individual changes in practice. These findings are presented in Table 19.

Table 19: Individual Outcomes of Evaluation Influence: Cognitive/Affective, Motivational and Behavioural

<table>
<thead>
<tr>
<th>Percentage of participants</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
<th>Already had/are</th>
</tr>
</thead>
<tbody>
<tr>
<td>My views of the programme/partnership have changed (cognitive/affective: opinion/attitude change; n = 55)</td>
<td>10.7%</td>
<td>46.4%</td>
<td>41.1%</td>
<td>1.8%</td>
<td>-</td>
</tr>
<tr>
<td>I now perceive certain aspects of the programme/partnership to be more important (cognitive/affective: salience; n = 56)</td>
<td>19.6%</td>
<td>66.1%</td>
<td>14.3%</td>
<td>0%</td>
<td>-</td>
</tr>
<tr>
<td>I have developed a mindset of evaluative thinking (cognitive/affective: opinion/attitude change; n = 55)</td>
<td>18.2%</td>
<td>56.4%</td>
<td>14.5%</td>
<td>0%</td>
<td>14.5%</td>
</tr>
<tr>
<td>I am more motivated to support the work of the partnership (motivational: personal goals and aspirations; n = 50)</td>
<td>14.0%</td>
<td>60.0%</td>
<td>26.0%</td>
<td>0%</td>
<td>-</td>
</tr>
<tr>
<td>I have an increased sense of ownership of the partnership (motivational: personal goals and aspirations; n = 50)</td>
<td>20.0%</td>
<td>50.0%</td>
<td>30.0%</td>
<td>0%</td>
<td>-</td>
</tr>
<tr>
<td>I have changed the way that I work (behavioural: change in practice; n = 55)</td>
<td>2%</td>
<td>54.9%</td>
<td>39.2%</td>
<td>3.9%</td>
<td>-</td>
</tr>
</tbody>
</table>

The participants suggested that evaluation had triggered influences. Most participants perceived certain aspects of the partnership and/or programme to be more important than others (salience) and had developed a mindset of evaluative thinking (attitude change). This type of mindset would engage in reflective practices even if it was not possible to engage in more formal evaluation for various reasons.

Nearly three quarters of the participants described an increase in their motivation to engage with and their ownership of the partnership. Changes in existing views of the programme/partnership and individual practice were less commonly reported. Just over half of the participants indicated a change in their views and practice as a consequence of the evaluation.

5.6.2 Partnership-Level Influences

The survey explored partnership-level influences by asking participants to identify the partnership general influence mechanisms, cognitive/affective processes and behavioural outcomes experienced by the partnerships.
5.6.2.1 Partnership general influence mechanisms, cognitive/affective processes and behavioural outcomes

The partnership-level influences are identified in Table 20. In terms of justification the majority of partnerships used the evaluation to justify programme existence or continuation, although they were less likely to report using the evaluation findings to influence decisions about staffing or fiscal allocations.

Most of the partnerships suggested that they used the evaluation to influence the opinions of others, although they were less likely to have used the partnerships to generate new funding than other types of persuasion. Interpersonal cognitive/affective outcomes were more commonly noted, with just over half of the partnerships using the evaluation to revise partnership aims, and nearly two thirds having used the findings for strategic planning. With respect to behavioural outcomes, two thirds of the partnerships reported using the evaluation to make changes to existing programmes.
Table 20: Partnership Mechanisms and Outcomes of Evaluation Influence: General Mechanisms, Cognitive/Affective and Behavioural Outcomes

<table>
<thead>
<tr>
<th>Type of mechanism/outcome</th>
<th>Survey Item</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Justification: Mechanism</td>
<td>The partnership used the evaluation to justify existence or continuation of partnership’s programme/services (n = 56)</td>
<td>67.8%</td>
<td>32.3%</td>
</tr>
<tr>
<td>Justification: Mechanism</td>
<td>The partnership used the evaluation to make decisions about staffing (n = 56)</td>
<td>26.7%</td>
<td>73.3%</td>
</tr>
<tr>
<td>Justification: Mechanism</td>
<td>The partnership used the evaluation to make fiscal allocations (n = 56)</td>
<td>39.2%</td>
<td>60.8%</td>
</tr>
<tr>
<td>Persuasion/minority opinion influence: Mechanism</td>
<td>The partnership used the evaluation to report to a board or equivalent (n = 56)</td>
<td>57.1%</td>
<td>42.9%</td>
</tr>
<tr>
<td>Persuasion/minority opinion influence: Mechanism</td>
<td>The partnership used the evaluation to meet accountability requirements (n = 56)</td>
<td>42.8%</td>
<td>57.2%</td>
</tr>
<tr>
<td>Persuasion/minority opinion influence: Mechanism</td>
<td>The partnership used the evaluation to generate new funding (n = 50)</td>
<td>30.3%</td>
<td>69.7%</td>
</tr>
<tr>
<td>Agenda setting: Cognitive/affective process</td>
<td>The partnership used the evaluation to revise partnership aims and objectives (n = 55)</td>
<td>51.7%</td>
<td>48.3%</td>
</tr>
<tr>
<td>Agenda setting: Cognitive/affective processes</td>
<td>The partnership used the evaluation for strategic planning (n = 50)</td>
<td>60.7%</td>
<td>39.3%</td>
</tr>
<tr>
<td>Change in practice: Behavioural outcome</td>
<td>The partnership used the evaluation to make changes to existing programmes (n = 56)</td>
<td>66.0%</td>
<td>33.0%</td>
</tr>
<tr>
<td>Change in practice: Behavioural outcome</td>
<td>The partnership used the evaluation to justify programme continuation (n = 56)</td>
<td>68.0%</td>
<td>32%</td>
</tr>
</tbody>
</table>

5.6.2.2 Perceptions of programme and partnership improvement

Table 21 identifies the participants’ general perceptions of the influence of the evaluation on their partnership and/or programme. Over three quarters of the participants felt that the evaluation had improved the programme and the partnership.

Table 21: Improvements in the Programme and Partnership.

<table>
<thead>
<tr>
<th></th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation improved the programme/service (n = 50)</td>
<td>22.0%</td>
<td>62.0%</td>
<td>16%</td>
<td>0%</td>
</tr>
<tr>
<td>Evaluation improved the partnership (n = 50)</td>
<td>20.0%</td>
<td>62.0%</td>
<td>18.0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

5.6.3 Summary

The participants suggested that they experienced high levels of change in the mechanisms of evaluation influence. As a consequence of the evaluation, the participants reported that they had thought more about their programmes or partnerships and they had also learnt more about them. Equally, participants indicated that they had learnt more about evaluation. Overall, the evaluations were less likely to develop participants’ evaluation capacity. This
reflects the purposes for which the evaluations were undertaken, as the partnerships were less likely to be undertaking evaluation to support capacity building. Still, the participants suggested that they would engage in evaluation as part of their day-to-day work in the future.

The participants suggested that the evaluation had triggered cognitive/affective and motivational outcomes of influence. Specifically, salience was often noted, whereby participants now perceived certain aspects of the programme or partnership to be more important. With regards to attitude or opinion change, changes in opinions of the programme were less commonly reported than changes in attitudes towards evaluation. In terms of motivational outcomes, the majority of participants suggested that they experienced an increased sense of motivation to support the work of the partnership and an increased sense of ownership. In contrast, behavioural outcomes were less common, with just over half suggesting that the evaluation had resulted in changes in individual practice.

The findings highlighted the influence of evaluation on the partnerships. The evaluations were reported to trigger a number of general influence mechanisms including the justification of programme existence or continuation, influencing opinion by reporting to boards and addressing accountability requirements. Partnerships were less likely to use evaluations to make decisions about staffing or fiscal allocations. Similarly, the partnerships were less likely to state that they used the evaluation to generate new funding. Roughly half of the partnerships did report using the evaluations to support strategic planning and the revision of partnership aims. This highlights the triggering of cognitive/affective processes at a partnership level.

In comparison to individual evaluation influences, behavioural outcomes were more likely to be reported at a partnership level, with the majority of partnerships using evaluation to support changes in practice. In terms of improvement, over three quarters of the participants felt that the evaluation had improved the partnership and/or its programmes.

5.7 Results: Factors Associated With Evaluation Influence

This section identifies the conceptual framework factors that were associated with evaluation influence. First, the participants’ perceptions of the barriers and enablers to influence are used to highlight important factors. This is followed by statistical analyses.
5.7.1 Barriers and Enablers to Evaluation Influence

To reduce the burden on participants, the questions in this section of the survey focused on evaluation attributes, partnership functioning and contextual factors. The focus on these aspects of the framework also reflects the research aims and objectives.

In total, 55 people answered the questions in this section. The participants could identify more than one barrier or enabler. The percentages are based on the number of people who identified that barrier/enabler from the 55 people who completed these questions.

5.7.1.1 Evaluation attributes as barriers and enablers

In order of frequency the following evaluation attributes were cited as enablers:

- Credibility (61.5%)
- Partnership participation (52.7%)
- Evaluator skills and competence (52.7%)
- Evaluation quality (50%)
- Timeliness (32.6%)

Similarly, the following were identified as barriers to influence:

- Lack of participation from the partnership (21.8%)
- Timeliness (19.2%)
- Evaluation quality (15.3%)
- Credibility of the evaluation (13.4%)
- Evaluator skills and competence (7%)
- Communication (5%)

Additional barriers also included unforeseen difficulties in implementing the evaluation, such as access to data (3%), and the high cost of the evaluation, which was perceived to detract from the programme (3%).

5.7.1.2 Partnership functioning as barriers and enablers

In order of frequency, the following partnership functioning characteristics were identified as enablers to influence:
The participants were less likely to identify the partnership’s functioning as a barrier to evaluation influence. Again, in order of frequency, the following were identified as barriers to influence:

- Decision-making processes (21.8%)
- Systems to make changes in the light of evaluation findings (21.8%)
- Unclear partnership purpose (18.1%)
- A lack of trust between partners (16.3%)
- Information-sharing processes (16.3%)
- Partnership culture (14.5%)
- Leadership (14.5%)
- Lack of partner commitment (10.9%)

5.7.1.3 Contextual factors as barriers and enablers

When asked about the contextual factors that acted as enablers to evaluation influence, the participants highlighted the following:

- Resources dedicated to evaluation (58.1%)
- Support from partnership members for evaluation (52.7%)
- Time to engage in evaluation (45.4%)
- Support from senior members of partnership organisations (43.6%)
- Accountability requirements that focus on outcomes (41.8%)
• Policies and management techniques (23.6%)
• Competitive markets (5%)

The participants were less likely to identify the contextual factors as barriers, although the following were also identified as barriers to influence:

• Lack of time to engage in evaluation (27.2%)
• Lack of resources dedicated to evaluation (16.3%)
• Lack of support from partnership members for evaluation (16.3%)
• Policies and management techniques (14.5%)
• Accountability requirements that focus on outcomes (12.7%)
• Lack of support from senior members of partnership organisations (12.7%)
• Competitive markets (9%)

An additional barrier highlighted by three participants was the shifting health policy context that was facing the sector at the time of the survey. For example, one of these participants stated that “Changes in government focus made the evaluation redundant.”

5.7.1.4 Individual characteristics as barriers and enablers

While this component of the framework was not specifically explored in the questions on barriers and enablers, the participants highlighted the role of attitudes towards evaluation as a barrier in the free text sections. Specifically, the comments suggested that individual attitudes towards evaluation could hinder its influence. These negative attitudes were also associated with a sense of “over evaluation” in the sector and the sense that evaluation “detracted from programme implementation and funding.” These comments are provided here, as they align with the conceptual framework by highlighting the role of the evaluation readiness and attitudes in evaluation influence.

5.7.2 Factors Associated With Evaluation Influence

This section uses Mann-Whitney U and Kruskal-Wallis tests to compare mean evaluation influence scores for the factors suggested as important in the conceptual framework. The factors that had a statistically significant relationship with evaluation influence are highlighted below.
5.7.2.1 Significant evaluation attributes

For individual evaluation influences, there was a significant effect for evaluation theory and the rationale for the partnership’s evaluation (Table 22). Specifically, participants exposed to an evaluation underpinned by theory were more likely to report thinking and learning more about their programme or partnership, develop evaluation skills, or experience increases in their sense of ownership or motivation towards the work of the partnership.

Evaluations undertaken to support learning, also resulted in significantly higher individual levels of evaluation influence. Thus, when partnerships engaged in evaluation to facilitate learning, participants were more likely to report thinking and learning more about their programme or partnership, develop evaluation skills, change their attitudes or consider aspects of their programmes or partnerships to be more important.

Table 22: Significant Evaluation Attributes

<table>
<thead>
<tr>
<th>Evaluation attribute</th>
<th>Significant effect for</th>
<th>Specific mechanisms or outcomes</th>
<th>Statistics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation theory</td>
<td>Individual general mechanisms</td>
<td>Elaboration, heuristics, skill acquisition</td>
<td>$U = 36.5, p = .02$</td>
</tr>
<tr>
<td></td>
<td>Individual motivational mechanisms</td>
<td>Changes to personal goals and aspirations</td>
<td>$U = 30.5, p = 0.009$</td>
</tr>
<tr>
<td>Evaluation rationale</td>
<td>Individual general mechanisms</td>
<td>Elaboration, heuristics, skill acquisition</td>
<td>$U = 172, p = .04$</td>
</tr>
<tr>
<td></td>
<td>Individual cognitive/affective outcomes</td>
<td>Attitude/opinion valence, salience</td>
<td>$U = 125, p = .02$</td>
</tr>
<tr>
<td>External evaluator</td>
<td>Partnership general mechanisms</td>
<td>Justification, accountability, staff or fiscal decision and to generate new funding</td>
<td>$U = 120, p = .05$</td>
</tr>
</tbody>
</table>

At a partnership level, external evaluators generated significantly higher levels of evaluation influence than internal evaluators (Table 22). Specifically, the findings suggested that external evaluations were more likely to be used for justification, accountability, staff or fiscal decisions or to generate new funding than internal evaluations. It is useful to note that external evaluators were also more likely to be using designs that were considered to be sophisticated.

5.7.2.2 Significant partnership functioning factors

When examining the association between the partnership functioning variables and the individual, partnership and total evaluation influence scores, there were no significant effects. This was surprising, and although the analysis suggested that leadership support for
evaluation and decision-making practices were important for individual influences, these differences were not significant.

Still, it is useful to note that the partnership functioning scores on average were very high. This meant that there was less variance within the partnership functioning scores to support the analyses. The identification of partnership functioning characteristics as barriers and enablers by the participants, suggest that the role of partnership functioning in evaluation influence still warrants further exploration through the case studies in Study 3.

5.7.2.3 Significant partnership characteristics

At an individual level, there was a significant effect for partnership size, with participants working with larger partnerships being more likely to identify behavioural outcomes, such as changes to individual practice (H = 10.5, p = .03). Similarly, partnerships involving highly collaborative relationships reported experiencing significantly higher individual behaviour outcome scores, such as changes to individual practice (H = 10.4, p = .03).

Partnerships working across sectors were also more likely to report higher levels of evaluation influence. For example, there was a significant effect for individual cognitive/affective processes, such as attitude or opinion change or salience (U = 118, p = .03). Across-sector partnerships also reported significantly higher partnership general influence mechanisms, such as the use of evaluation for justification, accountability, staff or fiscal decisions and to source new funding (U = 76, p = .007).

It is useful to note, however, that the correlations between larger partnerships and other evaluation attributes suggest that this finding may have more to do with the attributes of the evaluations associated with larger, collaborative and across-sector partnerships rather than with the size of partnership per se. For example, these partnerships were more likely to have evaluations that were underpinned by evaluation theory, focused on learning and conducted by an external evaluator.

5.7.2.4 Significant partnership evaluation behaviours

Individuals who were highly involved in the evaluation were more likely to describe evaluation influences (Table 23). For example, participants involved in the evaluation were more likely to report thinking and learning more about their programme or partnership, develop evaluation skills, experience increases in their sense of ownership or motivation towards the work of the partnership or make changes to their existing practice.
Table 23: Significant Partnership Evaluation Behaviours

<table>
<thead>
<tr>
<th>Partnership evaluation behaviour</th>
<th>Significant effect for specific characteristics</th>
<th>Specific mechanisms or outcomes</th>
<th>Statistics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual involvement</td>
<td>Individual general mechanisms</td>
<td>Elaboration, heuristics, skill acquisition</td>
<td>H = 14.6, p = .002</td>
</tr>
<tr>
<td>Individual motivational</td>
<td>Individual motivational mechanisms</td>
<td>Changes to personal goals and aspirations</td>
<td>H = 8.87, p = .03</td>
</tr>
<tr>
<td>outcomes</td>
<td>Individual behaviour outcomes</td>
<td>Changes to individual practice</td>
<td>H = 10.3, p = .01</td>
</tr>
<tr>
<td>Partnership support</td>
<td>Individual motivational mechanisms</td>
<td>Changes to personal goals and aspirations</td>
<td>H = 7.20, p = .02</td>
</tr>
<tr>
<td>Leadership involvement</td>
<td>Collective cognitive/affective mechanisms</td>
<td>Agenda setting</td>
<td>H = 7.84, p = .04</td>
</tr>
</tbody>
</table>

Partnerships that offered more support for the evaluation were also more likely to facilitate individual evaluation influences. Specifically, participants were more likely to report experiencing increased motivation to engage in the work of the partnership or feel an increased sense of ownership of the partnership.

At a partnership level, the involvement of partnership members was important. More specifically, the involvement of leadership in the evaluation had a significant effect for collective cognitive/affective levels of evaluation influence, such as changes to partnership aims or strategic planning (Table 23).

5.7.2.5 Significant individual characteristics

With respect to individual characteristics, participants with higher levels of evaluation readiness had significantly higher individual general mechanisms of evaluation influence. Specifically, participants who had positive attitudes to evaluation were more likely to suggest that they thought or learnt more about the partnership or programme (H = 6.99, p = .008) or experience changes in their ownership of or motivation to support the work of the partnership (H = 7.20, p = .006). No other individual characteristics were identified as significant.

5.7.3 Key Predictors of Evaluation Influence

The PCA was used to validate the conceptual framework. In total, the PCA was conducted on 36 items and five factors were specified for extraction. The eigenvalues for each of the five components were over Kaiser’s criterion of 1 and in combination explained 52.36% of the variance. The scree plot showed inflexions that would justify including all five components. Given the convergence between the scree plot and Kaiser’s criterion on the
five components, this is the number that was retained in the final analysis. The determinant for the resulting components was 3.03E-0.10, which is greater than 0.00001. Therefore, multicollinearity was not a problem for the data. Appendix 7 shows the factor loadings after rotation.

5.7.3.1.1 Naming the factors

The resulting five factors and their definitions are provided in Table 24. When reviewing these factors, it is important to note that component three in the PCA included Evaluation Attributes and Evaluation Capacity Building variables (Appendix 8). This is not concerning, as triggering evaluation capacity building is closely linked to an evaluations approach. However, for the purpose of subsequent analyses the Evaluation Attributes and Evaluation Capacity Building variables that loaded on this component are treated as two separate factors. This is to enable the role of each of these factors to be explored in more detail. Subsequently, six factors were drawn from the PCA (Table 24).
Table 24: Principal Component Analysis: Resulting Factors

<table>
<thead>
<tr>
<th>PCA Factor</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partnership Functioning</td>
<td>The systems, culture and attributes of a partnership that contribute to the way it works in practice.</td>
</tr>
<tr>
<td>Evaluation Influence</td>
<td>The influence of an evaluation on knowledge, attitudes and actions.</td>
</tr>
<tr>
<td>Evaluation Attributes</td>
<td>The evaluation inputs and design (evaluation outputs were dichotomous variables and were not well suited to the PCA).</td>
</tr>
<tr>
<td>Evaluation Capacity Building</td>
<td>The influence of an evaluation on evaluation knowledge, attitudes and actions.</td>
</tr>
<tr>
<td>Partnership Evaluation Behaviour</td>
<td>The involvement of the partnership in evaluation.</td>
</tr>
<tr>
<td>Evaluation Readiness</td>
<td>The willingness and capacity for the partnership to engage in evaluation.</td>
</tr>
</tbody>
</table>

5.7.3.2 Linear regression: Predicting Evaluation Influence

Linear regression was used to test the conceptual framework. Specifically, regression analysis was used to understand the contribution that each of the PCA factors in Table 24 made to the PCA factor of Evaluation Influence. The model predicted 42% of the variation in evaluation influence ($R^2 = .423$, $F(5, 29) = 4.255, p \leq .05$). Overall, this suggests that the regression model predicts evaluation influence significantly well.

Evaluation Capacity Building ($\beta = 0.637, p \leq .05$) and Evaluation Readiness ($\beta = 0.295, p \leq .05$) were the only two significant predictors in the model. These findings suggest that evaluation influence is facilitated by evaluations that trigger evaluation capacity building outcomes (increased evaluation knowledge and skills, an evaluative mindset and intentions to engage in future evaluation) and are supported by individual and partnership evaluation readiness and support.

5.7.4 Summary

When identifying barriers and enablers to evaluation influence, the participants highlighted the impact of evaluation attributes, partnership functioning and contextual factors on evaluation influence. Specifically, the evaluator, participation from the partnership, evaluation design and output attributes all triggered influence. With respect to partnership functioning, the findings highlighted the importance of systems to manage information and respond to evaluation, partnership culture and a clear sense of purpose. At a broader contextual level, having adequate support, both in terms of resources and the evaluation readiness of the partnership, were also key barriers or enablers. The participants also suggested that individual characteristics, such as attitudes towards evaluation, facilitated pathways to influence.
The statistical analysis highlighted a number of important factors for evaluation influence. Specifically, the analyses highlighted the role of evaluation theory and a specific focus on learning for triggering influence. For influences at a partnership level, having an external evaluator was also key. While the findings were not significant for the partnership functioning variables, the closeness to significance suggest that partnership culture and arrangements to facilitate decision making and learning warrant further exploration. The aspects of partnership functioning highlighted as barriers and enablers by the participants also support this notion.

Partnership evaluation behaviour facilitated influence. Specifically, individual involvement in the evaluations and partnership support facilitated individual influences. Partnership-level influences were more dependent on the involvement of the leader.

The PCA validated the conceptual framework and suggested that the survey measured the constructs that it intended to. The linear regression analysis also suggests that the key factors developed from the PCA sufficiently predicted evaluation influence. Further, the analysis indicated that Evaluation Capacity Building and Evaluation Readiness were significant predictors of Evaluation Influence. These findings are drawn on again and interpreted further during the mixed methods data integration and analysis in Chapter 7.

5.8 Overview

This chapter has provided an overview of evaluation influence within population health partnerships. More specifically, it has provided an important insight into the type and levels of evaluation influenced experienced by population health partnerships and their members. In terms of the research aims and objectives, the findings have provided support for the role of evaluation attributes in triggering evaluation influence. Furthermore, the survey has highlighted the impact of partnership functioning, partnership evaluation behaviour, individual characteristics and broader contextual factors on evaluation influence. The specific aspects of the conceptual framework that the survey lends support to are highlighted in green in Figure 11. The evaluation influences in blue reflect those influences that were moderately supported by the survey findings.
Figure 11: Conceptual framework factors supported by the survey findings.

Overall, the survey provided support for the conceptual framework and highlighted the complexity of evaluation influence pathways. In exploring the framework, the survey has also provided a useful insight into the research aims and objectives. These insights are further explored and interpreted alongside the existing literature, the case studies findings and the limitations of each of the data collection methods during the data integration in Chapter 7. In terms of the mixed methods approach, the survey has provided an important layer of evidence that builds on the evidence underpinning the conceptual framework and further informs the development of the case studies in Study 3. This process and the methods and findings from the case studies are presented in the next chapter.
Chapter Six: An In-Depth Analysis of Evaluation Influence Within Population Health Partnerships (Study 3)

6.1 Introduction

This chapter presents the methods and findings for Study 3, mini case studies with four population health partnerships. The case studies are described as mini as they involved an analysis of contextual factors from the perspectives of the partnership members rather than in-depth analyses undertaken by the researchers while on site with the partnership. Specifically, the mini case studies draw on partnership and evaluation documentation and interviews with partnership members to describe the partnerships and their evaluations, and to explore the key components of the evaluation framework. In line with the research aims and the mixed methods approach, this study also sought to identify the evaluation attributes, partnership functioning characteristics and contextual factors that were important for evaluation influence.

This chapter begins by identifying the contribution of this study to the mixed methods approach and its specific aims. This is followed by a Method section that describes the selection of the partnerships and identifies the data collection procedures and analysis. The Results section is split into two key sections: the first uses the document analysis to describe the partnerships and their evaluations, while the second presents the findings from the case study interviews. As with the survey, the conceptual framework is used to structure this analysis.

6.2 Contribution to the Mixed Methods Approach

This study contributes to the third phase of the realist research cycle, observations. In terms of the mixed methods approach, the case studies provided an in-depth understanding of evaluation influence within population health partnerships. This was important for building on the evidence that underpinned the conceptual framework (Study 1) and the survey (Study 2). This study was also particularly important for providing further insight into the role of partnership functioning and contextual factors in evaluation influence. Similarly, it was anticipated that the case studies would afford greater insight and understanding of the survey findings and the relationships within the conceptual framework.
6.2.1 Study Aims

Study 3 aimed to provide greater insight into:

2. The type and levels of influence happening within the partnerships.
3. The evaluation attributes, partnership functioning characteristics and contextual factors that facilitated or hindered evaluation influence.
4. The relationships between these components of the conceptual framework.

6.3 Methods

6.3.1 Research Design

The methodology underpinning this research recognises the value of exploring the role of context when seeking to understanding social phenomenon. More specifically, this research recognised that the contextual factors and conditions surrounding the partnerships and their evaluations were important for understanding the complexities of evaluation influence. Therefore, this research needed to include a method that would provide an insight into the contexts within which evaluation influence is occurring. The contribution that case studies can make to this type of understanding is well illustrated by Yin (2009). As a consequence, this study adopted a qualitative case study design.

A case study design was also appropriate as it facilitated the collection of multiple data sources; these being documentation and interview data in this study. This was important for understanding the contextual characteristics of the partnership and their evaluations, as well as the evaluation influence experiences of partnership members. In terms of the specific design, this study used multiple cases (four population health partnerships). The analysis of these cases was then used to develop a set of “cross-case” conclusions. In line with the scientific realist approach and the importance of context in explaining difference the data analysis also uses “within-case” analyses and examples to address the research aims. The document analysis, however, was within-case only. Further information on the specific analyses is provided in section 6.3.5.

6.3.2 Selecting and Defining Cases

When completing the survey, participants were asked if they would consider participating in a case study. The cases were selected from the participants who answered “yes.” In total, 98
of the 187 partnerships were willing to consider participation. From this sample, the survey findings were used to target partnerships with certain characteristics. Specifically, they needed to have current or recent experiences of evaluation (within the past 6 months) that had provided formal written feedback. The level of evaluation influence and partnership functioning attributed to the partnerships in the survey was also used to select partnerships. Figure 12 identifies the evaluation and partnership functioning levels that were used to select a total of four partnerships. This mix of high- and low-level influences and functioning aimed to provide greater insight into the factors that contributed to high- or lower levels of evaluation influence, as well as the role of partnership functioning. Unfortunately, two of the partnerships dropped out prior to completion of their interviews. Thus, the actual partnerships sampled are provided in brackets in Figure 12.
<table>
<thead>
<tr>
<th>Evaluation influence</th>
<th>Partnership Functioning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>Low</td>
</tr>
<tr>
<td></td>
<td>1 (1)</td>
</tr>
<tr>
<td></td>
<td>1 (0)</td>
</tr>
<tr>
<td>High</td>
<td>High</td>
</tr>
<tr>
<td></td>
<td>1 (1)</td>
</tr>
<tr>
<td></td>
<td>1 (2)</td>
</tr>
</tbody>
</table>

**Figure 12:** Criteria used to select partnerships and actual partnerships sampled.

### 6.3.3 Recruiting Partnerships and Accessing Data

Initial contact was made with the partnership via email using the contact details provided in the survey. This email was followed up by a phone call to discuss the case studies with a view to securing initial interest in participation. The researcher then met with the partnerships who were interested in participating to discuss the research and their involvement in more detail. This often involved a series of meetings with the key contact and the partnership as a whole.

Once a partnership was willing to participate, they provided consent for the researcher to have access to the documentation (Appendix 8). The documents typically included programme manuals, evaluation proposals and reports that gave an insight into the characteristics of the partnerships and attributes of their evaluations. Once the partnership members had provided consent for the document analysis, interviews were arranged. Potential interviewees were identified from a list provided by the key contact and from any partnership documentation provided. They were then invited via email and telephone contact to take part in an interview. Consent for the interviews was also needed prior to participation (Appendix 9). Specific information on the partnerships and the number of interviewees is provided in section 6.4.

### 6.3.4 The Analysis of the Partnership and Evaluation Documentation

The case studies involved an analysis of relevant partnership and evaluation documentation. Documentary evidence is often used in case studies (Yin, 2009), and it was used here to identify the attributes of the evaluations and the partnerships’ characteristics. Initially, it was anticipated that the documents would also provide evidence on the conceptual framework; however, the data within the documents did not support such an analysis.
6.3.4.1 Data collection procedures

The partnership members and the researcher identified the documents likely to be relevant for the research. The documents were provided electronically or in hard copy to the researcher. In total, 18 documents were provided. This typically included evaluation plans and reports, as well as programme plans (Table 25).

Table 25: Documents Provided for Analysis

<table>
<thead>
<tr>
<th>Documentation</th>
<th>Partnership 1</th>
<th>Partnership 2</th>
<th>Partnership 3</th>
<th>Partnership 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation plan</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Evaluation report(s)</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Other written feedback</td>
<td>X</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Partnership MOU</td>
<td>X</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Partnership meeting minutes</td>
<td>X</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Programme plan</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

Note: “X” denotes no documents in this category

6.3.4.2 Data analysis

The documentary analysis was conducted prior to the interviews to inform the researcher’s understanding of each partnership and their evaluation. The documents were analysed to identify key statistics, dates or other quantitative and qualitative information that would support the study aims. Specifically, the analysis identified the key evaluation attributes and partnership characteristics, such as the design and theory underpinning the evaluation, the number of organisations involved in the partnership and the type of work that they were involved in. This information is used to provide insight into the evaluation attributes and partnership characteristics likely to facilitate or hinder influence.

6.3.5 Semi-Structured Interviews With Partnership Members

The semi-structured interviews engaged the partnership members in exploring their evaluation influences, and more specifically how the key components of the framework did or did not facilitate influence. The survey informed the design of the interview schedule, which included a range of open-ended questions that explored each component of the model (Appendix 10). The propositions underpinning the framework are complex. Subsequently, a diagram was used to simplify the framework and to facilitate the interview process.

The schedule itself included 10 questions relating to the evaluation influences experienced and the role of the evaluation attributes, partnership functioning and contextual factors in
facilitating or hindering influence. While exploring partnership evaluation, behaviour was not specified in the research aims and objectives, it was highlighted as an important factor in the survey. As a consequence, it was specifically explored in the interviews. Importantly, the participants were also able to identify additional factors that they perceived to be important for influence.

6.3.5.1 Data collection procedures

Interviewees were identified with the partnership either during a face-to-face meeting, via email or telephone. Using the same process, potential interviewees were invited to take part in a face-to-face interview at a time and location of their convenience. The interviews were voice recorded with permission and the interviews lasted approximately 45 minutes. A total of 22 interviews were conducted across the four partnerships: four for Partnership A, and six each for Partnerships B, C and D. Only one potential interviewee did not respond to the invitation to participate.

6.3.5.2 Data analysis

All interviews were fully transcribed and then read and reviewed in preparation for analysis. The interview data was then imported into NVivo Version 9.0, a software package that supports the coding and management of qualitative data. Theoretical thematic analysis was used to analyse the data (Braun & Clarke, 2006), with the analysis largely being driven by the components of the conceptual framework. While this approach was not designed to restrict the identification of new themes that were more data driven, the analysis was largely designed to address the research aims and validate the conceptual framework. The analysis undertaken here is also best described as a semantic approach, whereby the analysis is used to explore the significance of data patterns and their broader meanings and implications (Patton, 1990). This approach enabled the analysis to support the exploration of the conceptual framework and address the research aims. A further benefit of adopting a thematic approach, as opposed to other forms of qualitative analysis, was its theoretical freedom and the potential to provide a rich, detailed and complex account of data (Braun & Clarke, 2006).

In terms of interpreting the analysis, NVivo was used to identify the frequency of themes across the total number of interviews and across the total number of partnerships. The frequency of a theme’s occurrence across at least three to four cases was used to identify the key factors that facilitated or hindered evaluation influence. There was, however, an element
of flexibility to this approach. For example, when themes appeared to be crucial (high frequency) within one case, they were also identified as being important. This approach reflects the methodology underpinning this research, and the importance of recognising the unique contribution of the partnership’s functioning and other contextual factors when understanding evaluation influence.

6.3.6 Summary

The case studies involved an analysis of key partnership and evaluation documentation, and interviews with partnership members. The document analysis described the partnerships and their evaluations, and the interviews explored the partnership members’ experiences of evaluation influence. Specifically, the interviews drew out individuals’ perceptions of the influence that the evaluation had on them and the partnership, as well as the factors that they considered to support or hinder this process. The conceptual framework guided the interview analysis, with a view to identifying the importance of different factors and their relationships to one another.

6.4 The Case Studies: Four Population Health Partnerships in New Zealand

This section uses the document analysis to describe the four partnerships that took part in the case studies and their evaluations. First, the aims and characteristics are described. Following this, the attributes of the partnerships’ evaluations are presented.

6.4.1 The Partnerships’ Characteristics

The document analysis indicated that three of the four partnerships were aiming to increase the healthy food and physical activity choices of their communities (Table 26). The other partnership was focused on the integration of primary and secondary care services for mental health patients, with a view to supporting their physical and mental health.

Table 26: Partnership Aims

<table>
<thead>
<tr>
<th>Partnership</th>
<th>Aims</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partnership A</td>
<td>To improve nutrition and the availability of healthy food choices in town centres.</td>
</tr>
<tr>
<td>Partnership B</td>
<td>To deliver a church and community-based project for Pacific peoples in one DHB region. Programme activities aim to achieve increases in physical activity levels, improvements in nutrition, reductions in obesity and improvements in the church or group’s health promotion environments or culture.</td>
</tr>
<tr>
<td>Partnership C</td>
<td>To increase the physical activity levels of the community, with a focus on those who are aware they should be active but currently are not.</td>
</tr>
<tr>
<td>Partnership D</td>
<td>To develop and implement a model of integrated care for Community Mental Health Service users with enduring moderate to severe mental illness, to improve their health outcomes.</td>
</tr>
</tbody>
</table>
6.4.1.1 The partnerships’ size, formality and level of collaboration

Table 27 describes the partnerships’ key characteristics. The majority of partnerships involved four to ten organisations. The majority of partnerships involved collaborative arrangements that were seeking to share information, reduce duplication, and share resources and decision making. Most of the partnerships were also working across sectors, although all were working within one region (three in Auckland and one in Nelson; Table 27).

Table 27: Partnership Characteristics

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Partnership A</th>
<th>Partnership B</th>
<th>Partnership C</th>
<th>Partnership D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of organisations</td>
<td>8</td>
<td>6–10</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>Formal agreement</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Type of relationship</td>
<td>Collaboration</td>
<td>Coordination</td>
<td>Collaboration</td>
<td>Collaboration</td>
</tr>
<tr>
<td>Across sector</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Across region</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>

6.4.1.2 The partnerships’ functioning

Partnership functioning is explored through the interviews, as it was difficult to gain an insight into the partnerships’ functioning from their documentation. While the survey provides some insight into the partnerships’ functioning and evaluation influences (Table 28), these data only represent the view of one of the partnership members. Thus, these components of the framework were also explored in the interviews.

Table 28: Partnership Functioning and Evaluation Influence Characteristics Identified From the Survey

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Partnership A</th>
<th>Partnership B</th>
<th>Partnership C</th>
<th>Partnership D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low influence</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High influence</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Low functioning</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High functioning</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

6.4.2 The Partnerships’ Evaluation Attributes

The evaluations were all designed to evaluate the programmes implemented by the partnerships, although two also specifically focused on the functioning of the partnership (Partnerships B and C; Appendix 11). The evaluations undertaken by Partnership B also aimed to develop evaluation capacity within their partnership or programme. Overall, the
aims and objectives of the evaluations highlight their intentions to use their evaluations to support learning and improvements within their work.

6.4.2.1 Evaluation approach

All of the partnerships’ evaluations were undertaken by The University of Auckland. This meant that the evaluations all shared some similarities in terms of their approach. For example, they were all underpinned by the Centres for Disease Control evaluation framework for health programmes (Centres For Disease Control, 1999; Appendix 12). This framework specifies five key stages to guide the development, implementation and dissemination of an evaluation. The evaluation team at The University of Auckland had adapted this framework to better represent the New Zealand context, and more specifically the principals of the Treaty of Waitangi. Further, the framework was adapted to encompass evaluation guidelines for conducting evaluation with Maori and Pacific peoples (Appendix 13). Stakeholder participation was also a key component of the evaluations’ approaches, with a view to supporting relevance, learning and improvement. The conceptual framework and survey findings from this research suggest that these characteristics should support evaluation influence.

6.4.2.2 Evaluation design and sophistication

In line with the evaluation approach, all of the evaluations were formative. In terms of the specific type of evaluation, all of the partnerships were engaged in process evaluations and two were also focusing on outcomes (Partnerships B and D). In terms of the scope and sophistication of the evaluations, Partnerships B and D were also involved in more sophisticated and larger scale evaluations. These differences tended to reflect the size and scope of the programmes, as Partnerships B and D were also involved in larger scale partnerships and initiatives. The partnerships all involved a mixed methods approach, most commonly including an analysis of partnership documentation and interviews with key stakeholders (Appendix 14).

6.4.2.3 The evaluators

The evaluators were all employed by the Centre for Health Services Research and Policy, a contractual division of The University of Auckland. The team consisted of one lead evaluator who led the evaluations in terms of theory and design. This evaluator had significant experience in conducting evaluations both internationally and within New Zealand, across a range of sectors. The evaluations were undertaken by a team of six
evaluators, of which one was working at a more senior level and led the evaluation for one partnership. The remaining five evaluators had all completed Masters Degrees and all had at least 2 years’ experience working in evaluation with health services. This suggests that the evaluators had the appropriate skills and expertise. It is not possible to comment on the evaluators’ cultural competence.

6.4.2.4 Evaluation feedback

All of the evaluations drew on a continuous feedback cycle, whereby evaluation findings and progress were regularly fed back to the partnerships. This typically involved verbal feedback or written monthly and annual interim reports depending on the scale of the evaluation. All of the evaluations provided the partnerships with a final written report at the end of the contract. Prior to the finalisation of these reports, the partnerships were also engaged in workshops designed to facilitate discussion and engagement in the evaluation findings. In addition to written reports, newsletters were also used to disseminate findings within and beyond the partnerships. This approach suggests that the evaluations sought to provide frequent and multiple forms of feedback, while also seeking to facilitate partnership members’ engagement in the findings through workshops.

6.4.3 Summary

The partnerships were typically working on programmes that aimed to support reductions in obesity and its related chronic conditions. This reflects the focus of the previous Labour government who placed significant investment in health promotion initiatives seeking to tackle obesity. In terms of their characteristics, the partnerships reflected those partnerships that participated in the survey. In this respect, they also offered the researcher the opportunity to explore evaluation influence within population health partnerships. While it is difficult to make judgements about the functioning of the partnerships from the document analysis, the partnership functioning characteristics identified in the survey may facilitate or hinder influence. This notion is explored more specifically in the interviews.

When reflecting on the evidence underpinning the conceptual framework and the survey findings, the attributes of the partnerships’ evaluations have the potential to trigger influence within the partnerships. For example, the evaluations had a specific focus on learning and improvement, with some also engaging in evaluation capacity building. The theory underpinning the evaluations, their emphasis on a participatory approach and the credentials of the evaluation team also provides the evaluations with the potential to trigger influence.
6.5 Findings: Understanding Evaluation Influence

This section describes the evaluation influences experienced by the partnerships. Specifically, the interview data is used to identify the individual and partnership-level influences. Following this, the data are used to identify the evaluation attributes, partnership functioning and contextual factors that facilitated or hindered influence. The analysis is predominantly across case, although crucial factors experienced by individual partnerships are also identified.

6.5.1 Levels of Evaluation Influence

The evaluations had triggered a range of evaluation influences at both an individual and partnership level. Partnership-level influences also occurred at two levels: on the programme and on the functioning of the partnership. This distinction is explored in more detail below. Table 29 identifies the key subthemes that relate to evaluation influence. Each of the subthemes was frequently noted across all of the partnerships, thus illustrating the multiple evaluation influences experienced by the partnerships.

Table 29: Levels of Evaluation Influence

<table>
<thead>
<tr>
<th>Subtheme</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>General influence mechanisms</td>
<td>General triggers of change, such as elaboration or skill acquisition. They lay the ground for influence.</td>
</tr>
<tr>
<td>Cognitive/affective processes</td>
<td>Shifts in thoughts and feelings, such as attitude change.</td>
</tr>
<tr>
<td>Motivational outcomes</td>
<td>Changes in goals and aspirations, such as increases in motivation.</td>
</tr>
<tr>
<td>Behavioural outcomes</td>
<td>Changes in actions, such as changes in practice.</td>
</tr>
</tbody>
</table>

6.5.1.1 Individual evaluation influences

The evaluations triggered a broad range of mechanisms that Mark and Henry (2004) term general influence mechanisms. For example, the partnership members often described the development of new skills as a consequence of the evaluation, as well as thinking more about their programme and partnerships. The partnership members also experienced cognitive/affective influences, such as learning more about their programmes, identifying aspects of their programmes as more important and using the evaluation for justification. For example, the partnerships learnt about their programmes but also about the views and experiences of other stakeholders:
It gave the working groups a better understanding of the perspectives of the three different groups that were involved in the evaluation. So a perspective from the key stakeholders, a perspective from the community and a perspective from the retailers involved in the project. So it was useful to get an understanding of what the needs, um and the um, you know the desired outcomes might be for those three groups.

Partnership A, Member 3

In terms of motivational outcomes, the evaluations could enhance the partnership members’ motivation to engage in their partnership. Indeed, members from two of the partnerships suggested that the evaluation enhanced the functioning of the partnership due to increases in partnership members’ commitment. Equally, engaging in evaluation was highlighted as having a motivating effect on the programme participants when outcome measures were used. Individual changes in practice, such as amendments to programme processes and resources were also often described. In reflection of the diversity of partnership members involved in the evaluations, individual behavioural outcomes were more common for programme providers than those working at other levels within the partnership.

6.5.1.2 Partnership-level influences

Similarly, partnership-level influences were mainly general and cognitive/affective influences, including the use of evaluation to justify programme existence, to persuade others of programme importance and to influence the opinions of others, typically funders. Cognitive/affective influences included using evaluation to revise partnership aims and objectives (agenda setting), as well as more collective influences relating to programme continuation or change. While the partnership members often described collaborative changes in programme practice, facilitating changes to the functioning of the partnership appeared to be more challenging:

There were some comments, about the lack of clarity around roles for the stakeholders. Um, none of that stuff was picked up on, um and then, 18 months or so later some of the key partners fell away.

Partnership A, Member 1

6.5.1.3 Summary

The evaluations had triggered a range of evaluation influence mechanisms and outcomes, at both an individual and partnership level. Yet, there were differences in the types of
influences experienced. Individuals were more likely to experience cognitive/affective processes or motivational outcomes, whereas, partnership-level influences were typically cognitive/affective and behavioural. This difference reflects the strategic role of many of the partnership members, as behavioural changes at a partnership level did not necessarily require changes in their individual practice. It is also interesting to note the challenges that partnerships faced when trying to respond to recommendations relating to the functioning of the partnership itself. While the partnership members recognised the importance of such recommendations, they were difficult to respond to.

6.5.2 Evaluation Attributes that Triggered Influence

The four most commonly cited evaluation attributes related to three key themes noted within the conceptual framework: the evaluation approach and design; feedback; and the evaluator (Table 30). An additional theme not reflected in the framework, was the sense of shared evaluation purpose between the partnership members and the evaluator.

Table 30: Evaluation Attributes Subthemes

<table>
<thead>
<tr>
<th>Subtheme</th>
<th>Definition</th>
<th>Factors noted across 3 to 4 cases</th>
<th>Crucial factor for at least one case</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation approach and design</td>
<td>Type of evaluation and design.</td>
<td>• Sophistication</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Alignment to programme</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Quality</td>
<td></td>
</tr>
<tr>
<td>Evaluator</td>
<td>The person responsible for designing and undertaking the evaluation.</td>
<td>• Skills and expertise</td>
<td>• Cultural competence</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Flexibility</td>
<td></td>
</tr>
<tr>
<td>Feedback</td>
<td>Verbal and written evaluation information and findings.</td>
<td>• Credibility</td>
<td>• Responsiveness</td>
</tr>
<tr>
<td>Shared understanding of evaluation purpose</td>
<td>Mutual understanding of what the evaluation is aiming to achieve.</td>
<td>• Partnership</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Partnership and evaluator</td>
<td></td>
</tr>
</tbody>
</table>

6.5.2.1 Evaluation approach and design

Factors relating to the evaluation approach were frequently associated with triggering evaluation influence. In particular, having an evaluation approach that was sophisticated and in alignment with the size and scope of the programme facilitated influence. Evaluation quality was also a key trigger, as perceptions of quality also impacted on perceptions of credibility, and thus influence.
A subtheme that also appears to be particularly relevant for the health sector and its accountability requirements, were the distinctions drawn between the influence of quantitative and more qualitative approaches, or process verses outcome evaluations. Specifically, there was the perception that quantitative or outcome data were more influential for those working at the accountability and funding levels of the sector. Indeed, the focus on quantitative data at this level even caused some concern among partnership members about the ways in which the evaluation would be used by the sector:

I rather worry even though I was very much in agreement to collecting quantitative data, because stories on their own for funders are not influential. But it is almost like we are overly focusing on the quantitative results at the cost of the whole process. Um, so, yeah, my issue is that the programme is going to become judged as a weight management programme when in fact it wasn’t set up to be so.

Partnership B, Member 1

6.5.2.2 The evaluator

The evaluator was the third most commonly cited evaluation attribute that was important for influence. Specifically, evaluator skills and expertise were crucial for influence, as they impacted on the evaluation approach and perceptions of credibility. Evaluator flexibility was also noted by the partnerships. While this factor was designed to be encompassed in the notion of evaluator role and skills and expertise, the interview data suggest that flexibility in terms of the evaluation plan is also important. For example, the partnership members spoke of evaluators’ flexibility in terms of being able to respond to the needs of the programme overtime, such as analysing data in different ways or exploring other aspects of the programme as it developed over time.

A crucial evaluator attribute for one of the partnerships was the cultural competence of the evaluator. Cultural competence was perceived to be crucial for developing an evaluation approach that was appropriate and responsive to the needs of the partnership and the community with which it was working.

6.5.2.3 Feedback

Feedback was often discussed, with the credibility of evaluation findings being crucial for facilitating influence within and beyond the partnership. Further, the skills and expertise of the evaluator were considered to be a key contributor to perceptions of credibility. Indeed, evaluator expertise was particularly important for triggering justification, persuasion or
influencing the opinion of others outside the partnership. For example, having an evaluation conducted by The University of Auckland was described as enhancing the credibility of the evaluation, and its potential influence.

The importance of communication was also a common theme. Generally, this did not relate to communication between the partnership and the evaluator, although this was perceived to be important. What was talked about more often was the ways in which the evaluation findings were communicated to the partnership and their responsiveness to the partnership’s needs. Specifically, large reports were useful for those involved in the detailed operation of the programme, although they were not useful for sharing findings within or outside the partnership. Those working in the sector did not have the time to read large reports and smaller documents delivering key messages or recommendations were perceived to be more responsive to the needs of the partnership.

6.5.2.4 Shared understanding of evaluation purpose

Developing a shared understanding of the purpose of the evaluation was also important. This theme worked at two levels: one within the partnership itself and the second between the evaluator and the partnership. First, a sense of shared understanding of evaluation purpose within the partnership was important, as it could impact on the partnership’s engagement in the evaluation and its findings. For example, when the evaluation was commissioned by the funders, the evaluation purpose was not shared by all members of the partnerships. This made it harder to facilitate influence:

I don’t believe there was enough focus on follow-up after the evaluation, and there are lots of reasons for that. Um, I think probably one of the reasons was that the evaluation was commissioned by the funders, you know not necessarily the stakeholders involved in the partnership or in the groups. Um, so it was something that was sort of commissioned outside of the group itself. Even though they were involved in helping to define the evaluation objectives which was useful I think perhaps there wasn’t the buy-in.

Partnership A, Member 2

A shared understanding of the evaluation purpose between the evaluator and the partnership was also important for influence. The partnership members suggested that a shared understanding enhanced the responsiveness of the evaluation and enhanced partnership evaluation behaviour.
6.5.2.5 Summary

The evaluation approach and design were crucial for triggering evaluation influence. More specifically, evaluations of higher sophistication and quality design were more influential. Evaluators with appropriate skills and expertise were more likely to facilitate influence. Further, they enhanced perceptions of credibility, which in turn enhanced influence, particularly outside the partnership. The flexibility of the evaluator and more specifically the implementation of the evaluation plan were also important, as it enabled the evaluation to respond to the changing needs of the partnerships. For feedback to enhance influence it needed to be credible and communicated in a manner that responded to the needs of the intended audience. A sense of shared understanding of the evaluation purpose within the partnership was also important, as it impacted on partnerships’ engagement in the evaluation, as well as their responses to the findings.

6.5.3 Partnership Functioning Characteristics that Facilitated or Hindered Influence

The four most commonly cited partnership functioning characteristics related to the clarity of the partnerships’ purpose; commitment of partnership members; the partnerships’ arrangements; and adaptation or change processes. Each of these subthemes and the specific factors that underpin them are defined in Table 31 and described in more detail below.

Table 31: Partnership Functioning Subthemes

<table>
<thead>
<tr>
<th>Subtheme</th>
<th>Definition</th>
<th>Factors noted across 3 to 4 cases</th>
<th>Crucial factor for at least one case</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partnership commitment</td>
<td>Commitment of members to the work of the partnership.</td>
<td>• Commitment</td>
<td></td>
</tr>
<tr>
<td>Clarity of partnership purpose</td>
<td>Understanding of the partnership’s aims.</td>
<td>• Clarity of purpose</td>
<td>• Clarity of purpose</td>
</tr>
<tr>
<td>Partnership arrangements</td>
<td>Arrangements to support functioning, such as decision making and leadership</td>
<td>• Leadership</td>
<td>• Decision making</td>
</tr>
<tr>
<td>Adaptation or change processes</td>
<td>Systems or structures designed to respond to evaluation.</td>
<td>• Clarity of roles</td>
<td>• Systems to respond to evaluation</td>
</tr>
</tbody>
</table>

6.5.3.1 Partnership commitment

The commitment of partners was crucial for facilitating evaluation influence. When partners were committed to the partnerships’ work, evaluation influence and partnership functioning was enhanced. With regards to influence specifically, committed partnerships were more likely to be engaged and supportive of their evaluations.
Partnership commitment was challenged when there was a lack of alignment between the aims of the partnership and their members’ host organisations, and an unclear partnership purpose. One partnership for example, described how variations in partner commitment affected attendance at steering group meetings and thus the capacity for the partnership to make decisions:

We possibly don’t have the engagement at the highest level of that organisation. Last meeting we had someone [new] come along. Well you fill in the seat but how is this informing [the partnership]. They can’t make decisions or you get agreement and then someone else comes along [to the next meeting]. Um, and I guess, yeah, um, it has been a pretty frustrating.

Partnership C, Member 3

6.5.3.2 Clarity of partnership purpose

Partnerships who were clear about their purpose noted the importance of “being on the same page” and the ways in which this helped the partnership to develop a shared understanding of the evaluation, and the ways in which it should be responded to. When the partnership was unclear, this posed challenges to influence. Specifically, the lack of clarity made it difficult for the partnership to respond to the evaluation or to identify the relevance of the findings. A further consequence of an unclear partnership purpose was confusion over the roles and responsibilities of partnership members. This further challenged partnership functioning and evaluation influence, as members were unclear on how they should be engaging with the partnership or its evaluation.

For two of the partnerships, the recent shifts in the policy context also contributed to the lack of clarity, as the partnerships sought to align to current trends. Shifts in health policy also resulted in partner organisations reverting back to their core health care business, which also affected the commitment of some partner organisations to their population health partnerships and their evaluations. The impact of the policy context is explored in more detail in the section on contextual factors.

6.5.3.3 Partnership arrangements

Decision-making processes were important for evaluation influence. When processes were participatory, evaluation influence was facilitated, particularly at a partnership level. Evaluation influence was further enhanced by involvement from leadership, or those facilitating decision making, in the evaluation.
Decision-making processes were fractured when partnership commitment was low and steering group representation lacked consistency or the level of autonomy needed to make decisions on behalf of their host organisations. The findings from one of the partnerships suggested that commitment to the partnership and its decision-making processes were particularly important for facilitating the influence of evaluation recommendations relating to partnership functioning.

Partnership members described leadership as a key factor for influence. Specifically, leadership had a critical role in facilitating the implementation of the evaluation and in sharing findings with the partnership. For one of the partnerships who experienced a wide range of evaluation influences, the role of leadership was crucial. The leadership was highly engaged in the evaluation. Specifically, the leadership would read through the detailed evaluation reports, work with the evaluator to interpret the findings and then work with the partnership to identify the best means of responding to the evaluation.

The clarity of leadership was also important; when the leadership was unclear evaluation influence was challenged. For example, one partnership’s members suggested that there was no clear leadership or lines of accountability within this partnership. As a consequence, the partnership did not have an established means of responding to the evaluation:

There wasn’t, and there still isn’t a lead organisation and that’s part of the weakness of the project, um, I think that perhaps meant there was a lack of, um, you know focus on taking the next steps and improving the project because there wasn’t one project lead who had accountability for results.

Partnership A, Member 1

6.5.3.4 Adaptation or change processes

Processes to facilitate adaptation or change challenged influences for three of the four partnerships. These processes were challenging for a variety of reasons, some of which related to the partnership and some that related to the evaluation. Challenges that related to the partnership included the lack of time or planning given to engage in the evaluation or review its findings. There was a sense that once the evaluation was completed, the partnership did not necessarily have systems in place to respond to it. Different types of recommendations also appeared to rely on these systems more than others. For example, recommendations relating to programme inputs or implementation tended to have greater uptake than those focusing on aspects of partnership functioning.
A finding that requires consideration in the conceptual framework, is the gap identified by partnership members between delivery of the evaluation findings and knowing what to do next. Participants from all but one of the partnerships suggested that they needed an additional step to help them to respond to evaluation findings, and facilitate influence. While some participants were not clear as to what this step might involve, others wanted very specific information that would help them to implement the evaluation recommendations. They wanted each recommendation to be underpinned by a number of steps that detailed exactly what they would need to do. While some partnership members suggested that such an approach was probably beyond the role of the evaluator, others had expected that this is what the evaluation would deliver. Indeed, during the interviews I was often asked what was “normal” in terms of facilitating influence. These findings suggest that the partnerships were not clear on the role of the evaluator or partnership members in responding to the evaluation.

6.5.3.5 Summary

Partnership functioning was crucial for evaluation influence. When partnerships demonstrated harmonious levels of functioning, influence was facilitated. Aspects of partnership functioning that appeared to be crucial barriers or enablers included partnership commitment and clarity of purpose. The factors were crucial for influence due to their impact on partnership involvement in the evaluations and decision-making processes. Partnerships arrangements, such as decision-making practices and leadership, were also crucial for facilitating influence. For example, partnerships engaging in participatory decision-making practices were more likely to experience evaluation influence. Partnership leaders were particularly important for partnership-level influences due to their potential to facilitate the partnerships’ adaptation or change processes. Similarly, the involvement of other key decision makers in evaluation also facilitated partnership-level influences. Evaluation influence was hindered when leadership and partnership accountabilities were unclear.

A factor that was not captured in the conceptual framework was the difficulties that the partnerships experienced in translating evaluation findings or recommendations into practice. Indeed, there appeared to be a missing link between the evaluation recommendations and what to do next. Partnerships often wanted more support in responding to the evaluation and appeared to struggle with implementing recommendations, particularly those relating to partnership functioning.
6.5.4 Partnership Evaluation Behaviour and Individual Characteristics that Facilitated or Hindered Influence

When discussing partnership evaluation behaviour, support and readiness were the most commonly cited themes (Table 32). Each of these subthemes are now discussed below. Following this, the role of individual characteristics is explored.

Table 32: Partnership Evaluation Behaviour Subthemes

<table>
<thead>
<tr>
<th>Subtheme</th>
<th>Definition</th>
<th>Factors noted across 3 to 4 cases</th>
<th>Crucial factor for at least one case</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support for evaluation</td>
<td>Partnerships’ attitudes towards evaluation</td>
<td>• Support</td>
<td></td>
</tr>
<tr>
<td>Evaluation readiness</td>
<td>Partnerships’ willingness to engage in evaluation</td>
<td>• Evaluation readiness</td>
<td>• Evaluation readiness</td>
</tr>
</tbody>
</table>

6.5.4.1 Partnership support for evaluation

Generally, the level of support for the partnerships’ evaluations was high and facilitated both the implementation of the evaluations and their influence. The level of support for the evaluation, however, could be hindered by the functioning of the partnership, partnership members’ perceptions of the rationale for the evaluation and a sense of evaluation fatigue. For example, when an evaluation was commissioned by the funders and not the partnership itself, there was a lack of buy-in into the evaluation. This meant that while the partnership supported the implementation of the evaluation as part of their work commitments, there was less engagement in responding to its findings. In this respect, there was a sense that evaluation was more of an accountability exercise for the funders than an opportunity for improvement within the partnership.

In keeping with this sense of evaluation for accountability, the analysis also highlighted the sense of evaluation fatigue. For example, two of the partnerships were working as part of a larger group of partnerships that were supporting a whole systems approach to addressing population health needs. These partnerships described the notion of evaluation fatigue, where they felt that so much evaluation was happening within the broader partnership, that the evaluation was just about “ticking a box.” This sense of evaluation for accountability, limited support for evaluation and its findings.

6.5.4.2 Partnerships’ evaluation readiness

Evaluation readiness varied across the partnerships. This impacted on the degree to which partnership members were willing to engage in the evaluation and its findings. For one
partnership, these variations in evaluation readiness were a crucial barrier to influence. For example, the variation in partnership members’ engagement in the evaluation meant that members did not have the same knowledge or understanding of the evaluation, and this hindered decision-making processes.

Changes in the staffing of host organisations also contributed to variations in evaluation readiness and influence. When partnership members were not involved in the evaluation from the start, they were less engaged or perhaps less convinced of its findings. This challenge to influence appeared to be less significant when leadership was highly engaged in the evaluation and the facilitation of adaptation or change process.

6.5.4.3 Individual characteristics that facilitated or hindered influence

Individual characteristics were mentioned less often than other components of the model, and when they were mentioned the partnership members tended to highlight the evaluation readiness and existing knowledge and attitudes of other partnership members or funders rather than themselves. Table 33 defines the two key subthemes identified, each of which is discussed below. Neither of these factors was crucial for just one partnership so this column has been removed from the table.

Table 33: Individual Characteristics Subthemes

<table>
<thead>
<tr>
<th>Subtheme</th>
<th>Definition</th>
<th>Factors noted across 3 to 4 cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation readiness</td>
<td>An individual’s willingness to engage in evaluation</td>
<td>• Evaluation Readiness</td>
</tr>
<tr>
<td>Existing knowledge and attitudes</td>
<td>An individual’s knowledge and attitudes towards evaluation</td>
<td>• Existing attitudes</td>
</tr>
</tbody>
</table>

6.5.4.4 Individual evaluation readiness

The role of individuals’ evaluation readiness was identified in three of the four partnerships. When the evaluation readiness of individual partnership members was high, influence was facilitated, as partnership members were willing to engage in the evaluation and its findings. In contrast, when evaluation readiness was low, evaluation influence was hindered. More specifically, lower levels of readiness impacted on the influence of the evaluation on the individual, and on the partnership if their involvement was important for supporting the partnership’s decision making. Evaluation readiness also appeared to be important for facilitating influence beyond the partnership; however, this notion is explored further in the
following section on contextual barriers and enablers. Individuals’ evaluation readiness was also connected to existing attitudes towards evaluation.

6.5.4.5 Individuals’ existing attitudes

Existing attitudes towards evaluation were discussed by all of the partnerships. There was a sense that evaluation was not always valued in the health sector. Indeed, some partnership members described a “just wanting to get on with it” attitude towards evaluation, both at a management and programme implementation level. These comments suggested that evaluation was not seen as an opportunity for improvement, rather it was seen as costly, time consuming and an unnecessary detractor from programme funding. Further, the current policy context and changes to the funding environment appeared to have exacerbated this attitude:

My boss can’t see why we would spend money on evaluation. And, I don’t think that, that’s uncommon. Times are tough and the resources are thin then it’s quite hard to actually get everyone’s buy-in.

Partnership 1, Member 2

Equally, many of the partnership members had positive attitudes towards evaluation, which facilitated its influence. Indeed, the challenges posed by existing attitudes tended to be reflected at the funding and accountability levels of the sector. Unfortunately, this posed challenges for facilitating influences at a partnership level and beyond.

6.5.4.6 Summary

Partnership support was a factor noted by all of the partnerships, and often facilitated influence. Variations in support, however, hindered influence for some partnerships. Typically, low levels of support reflected the partnership’s functioning or the partnership members’ perceptions of the rationale or purpose for engaging in the evaluation. This could result in the evaluation being perceived as an accountability exercise rather than an opportunity for improvement.

Variations in evaluation readiness also affected engagement in the evaluation and its findings. This tended to be more of an issue for those partnerships experiencing changes in steering group members or when the partnerships did not have clear adaptation or changes processes. In contrast, when leadership was highly engaged in the evaluation, variations in evaluation readiness were less of an issue.
The evaluation readiness and attitudes of individual partnership members was also important. When individual partnership members were willing to be engaged in the evaluation, influence was facilitated at both an individual and partnership level. Variations in readiness also hindered influence, particularly when decision making or adaptation and change processes relating to the evaluation findings required support from all partners. The existing attitudes of partnership members towards evaluation could also facilitate or hinder influence. Negative attitudes were more commonly described, although the current shifts in policy and funding did little to alleviate this tension.

6.5.5 Contextual Factors that Facilitated or Hindered Influence

In terms of contextual factors, the interview analysis resulted in two key subthemes that related to the evaluation readiness of the partnerships’ context and the political and organisational environment of the partnerships (Table 34). None of the factors were crucial for any one partnership so this column has been removed from the table.

<table>
<thead>
<tr>
<th>Subtheme</th>
<th>Definition</th>
<th>Factors noted across 3 to 4 cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation readiness of context</td>
<td>Contextual capacity and willingness to engage in evaluation</td>
<td>• Resources dedicated to evaluation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Broader sector support for evaluation</td>
</tr>
<tr>
<td>Political and organisational environment</td>
<td>Political and organisational systems and structures</td>
<td>• Policy context</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Accountability requirements</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Traditional policies and management</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Competitive markets</td>
</tr>
</tbody>
</table>

6.5.5.1 Evaluation readiness of context

While there was often support for evaluation within the partnership, there was a sense that this was not always reflected within the broader context of the health sector. Lack of willingness to engage in evaluation is well illustrated by the partnership members’ comments that they often had to justify their evaluation, and particularly the costs of employing an external contractor. Further, funders’ attitudes towards evaluation appeared to be particularly challenging for facilitating influence within two partnerships. Interestingly, strategies to facilitate the dissemination of the evaluation findings to funders did not always alleviate this tension. One of the partnerships suggested that the evaluation was on such a large scale that it was difficult to feedback to their funders. Specifically, they found it difficult to balance the complexities of their evaluations with the demands for concise information on the programme’s outcomes.
In terms of evaluation capacity and resources, it was disappointing to hear that evaluation was not really factored in to programme budgets. Rather, it was described as an “add-on” often requested by funders once the final programme budget had been decided. This led to some concerning approaches to evaluation within the sector, with some partnership members noting that some evaluations were completed in-house and would describe a positive outcome for the programme regardless. While these comments were made a bit tongue in cheek, it is still clear that there was no resource dedicated to evaluation. In response to this gap, some partnership members suggested that the funders should take greater responsibility in allocating funding for evaluation, particularly when there is no evaluation capacity within the organisation.

6.5.5.2 Political and organisational environment

The election of the National government and the resulting changes in the policy context had implications for all of the partnerships, and subsequently the influence of their evaluations. The shifts in policy resulted in some partnership organisations pulling back into their core business, such as sport and recreation as opposed to some of the physical activity initiatives that were more closely connection to health promotion. This impacted on the functioning of the partnership, and more specifically, its sense of shared purpose and level of commitment.

In terms of accountability requirements, programme funders often required evaluations from the partnerships, which facilitated evaluation implementation within the sector. However, funders placed greater value on outcome evaluations than process, limiting the potential value and influence from other types of evaluation. This approach to accountability caused frustration. Some of the partnerships suggested that the emphasis on outcome data was premature.

There has to be some acceptance on that part of funders that you’re not going to get good information on outcomes in the first 2 years or 3 years, or even 5 years.

Partnership A, Member 1

Planning and funding cycles were the most commonly cited traditional policy and management technique that challenged influence. Specifically, the sector’s planning and funding cycles moved so quickly that they hindered evaluation influence. In addition, the funding environment was described as doing little to facilitate collaborative arrangements between organisations. Indeed, it was suggested that the current environment actually facilitated competition. One partnership in particular appeared to be experiencing high
levels of competition, as host organisations were applying for the same pools of funding as the partnership as a whole. This sense of competition also impacted on partnerships’ functioning, their sense of trust and clarity of purpose:

I guess it feels like a bit of an arm wrestle really at the moment. That there isn’t an alignment, that um, of where are moving forward, there isn’t a clarity of purpose around this whole area and there is a duplication of effort.

Partnership C, Member 3

The partnership members also suggested that competition was enhanced by the recent shifts in policy and the reduced funding pool for population health.

6.5.5.3 Summary

The health sector context tended to be discussed in a more negative light that the other aspects of the conceptual framework. This is likely to reflect the recent shifts in policy and its implications for the partnerships. The partnership members also highlighted some positive experiences, such as support with implementation. Overall, the analysis highlighted the crucial role of contextual factors in evaluation influence pathways. In particular, these factors appeared to be important for influences beyond the partnership, at a more collective level. More specifically, the findings highlighted the importance of adequate support and readiness for facilitating influence within the sector. Some aspects of the sector appeared to be particularly challenging for influence. For example, accountability requirements, traditional policies and management techniques appeared to hinder the potential for evaluation to facilitate influence, and particularly for the potential to learn from aspects of evaluation that did not relate to programme outcomes.

The policy context was also important for evaluation influence and partnership functioning. For example, shifts in policy impacted on the clarity of one partnership’s purpose, and this impacted on the sense of competition within the partnership and thus the potential for evaluation influence. This sense of competition between partners was also exacerbated by the current funding environment. The resulting competitiveness is important for influence, as it impacts on partnership culture and the capacity for partners to engage in the type of open discussions needed to support influence. Overall, the contextual factors appeared to offer more challenges than opportunities for influence.
6.6 Overview

The case studies have provided a more in-depth understanding of evaluation influence within population health partnerships. Specifically, the case studies have provided greater insight into the type and levels of influence experienced by the partnerships, and the ways in which the key components of the conceptual framework facilitated or hindered these influences. Figure 13 highlights the specific factors that were supported by the case studies. The highly supported factors are highlighted in green; blue factors are moderately supported; blue and italicised factors are new additions to the framework; and finally, those in standard text were not supported or discussed in the interview data.

![Conceptual framework factors supported by the case studies.](image)

Overall, the case studies offer support for the conceptual framework and provide an important insight into the research aims and objectives. The case studies were also useful for providing some insight into the relationships between the components and factors within the conceptual framework. For example, the findings highlighted the importance of evaluation attributes in triggering influence. Equally, they suggested that partnership functioning characteristics are particularly relevant for facilitating influence within the partnership itself.
Furthermore, contextual factors appear to be particularly important for facilitating influence beyond the partnership and within the sector. Another component of the framework reflected in the interview analysis, was the role of stakeholder behaviour and characteristics. For example, evaluation readiness, support and attitudes towards evaluation could all facilitate or equally hinder influence at all levels.

When reviewing the factors supported within the conceptual framework, it is also useful to recall the key characteristics of the partnerships’ evaluations. For example, evaluation rationale, timeliness, communication and partnership participant in the evaluation were not overly explored in the interviews. This may have been due to the attributes of the partnerships’ evaluations, as they all involved participatory approaches that were underpinned by continuous feedback cycles. The case studies also highlighted additional factors that warrant consideration, such as the sense of shared understanding of evaluation purpose and the role of the evaluator and partnership members in facilitating influence. These findings are explored further in the mixed methods data integration. Specifically, in Chapter 7 the case studies findings are integrated with the evidence underpinning the conceptual framework and the survey findings to address the aims of this research and the mixed methods approach adopted.
Chapter Seven: Mixed Methods Data Integration and Analysis (Study 4)

7.1 Introduction

Each study undertaken as part of this research has largely remained distinct throughout their implementation. This chapter focuses on the mixing and integration of the data from these studies to support the mixed methods approach undertaken for this research. Specifically, this chapter focuses on the data integration and analysis of the data from the conceptual framework (Study 1), the survey (Study 2) and the case studies (Study 3). This chapter begins by identifying the aims of Study 4 and the contribution that it makes to the mixed methods approach. This is followed by a Method section that describes the data integration process. A Results section then uses the data integration analysis to identify the levels of evaluation influence experienced by the partnerships, as well as the factors that facilitated and hindered influence. As with the Results sections for the survey and the case studies, this chapter will use the key components of the conceptual framework to structure the findings. An overview then summarises the findings from this chapter. This stage of the research is particularly important as it facilitates the development of inferences, which are fully discussed in the Discussion chapter.

7.2 Contribution to the Mixed Methods Approach

This study is a key contributor to the mixed methods approach, as the mixing and integration for this research happens through this study. It is through this study that the research identifies the ways in which the evidence from the three studies complements and converges with one another. Equally, this study seeks to use any differentiation in the findings to generate new insights or identify areas that warrant further exploration through future research.

7.2.1 Study Aims

Study 4 aimed to:

1. Provide an overview of the evidence underpinning each of the components of the conceptual framework.
2. Identify similarities and differences between data sets with a view to supporting convergence, complementarity and initiation.
3. Address the research aims by identifying the levels of evaluation influence experienced by the partnerships, as well as the evaluation attributes, partnership
functioning characteristics and contextual factors that facilitated or hindered evaluation influence.

7.3 Methods

The methodology chapter described the development of the framework, and recognised that while it does not draw on a specific method from the mixed methods literature, it was informed by the existing work of mixed methods evaluators and researchers. Subsequently, this chapter presents the implementation of the data integration framework. More specifically, the practical application of the data integration framework for the purposes of this study is described under each of the following key steps:

1. Weighting: Specifying the weighting given to each of the data sources from each of the three studies.
2. Data entry: Integrating data into one MS Excel worksheet based on the research aims and key components of the conceptual framework.
3. Data preparation: Identifying key themes within each data source to rate the level of evidence behind each factor.
4. Analysis and interpretation: Using the evidence underpinning each factor, the capacity for each data source to contribute to our understanding of that factor and the methodological limitations of this research to interpret the contribution of each factor to evaluation influence within partnerships.

7.3.1 Weighting

The mixed methods design adopted in this study called for equal weighting to be given to all data sets. Adopting such an approach, however, can be challenging with Greene (2007) suggesting that it is appropriate to emphasise some data more than others when generating inferences and interpreting findings.

For this study, challenges to interpretation were posed when there was insufficient evidence to adequately assess the contribution of different factors in the conceptual framework. To address this challenge, the literature underpinning the framework was given slightly greater weighting, as this evidence was drawn from a larger body of research. It is anticipated that this approach reduced the risk of losing or including factors that were not well understood using the survey or the case studies. Equally, there are limitations inherent in each of these methods and the literature offers a useful source through which to review the evidence
obtained through this research. This is not to say that evidence from this research is
discounted on the basis of previous research, but rather that existing evidence is leaned on
more when there is limited insight from the survey and case studies.

7.3.2 Data Entry

Prior to data entry, a MS Excel file was prepared to receive the data from three key sources
of evidence including the survey, the case studies and the literature underpinning the
conceptual framework. Specifically, each component of the conceptual framework and the
factors within it were entered into a worksheet. Separate worksheets were used for each
component of the framework (e.g., there was a worksheet for the evaluation attributes,
partnership functioning characteristics, partnership evaluation behaviour, etc.) (Appendix
15).

The key findings for each factor from the survey, the case studies and the literature were
then entered into separate columns in the worksheet. A column was also added for
relationships between factors, as the case study evidence often highlighted relationships
between the factors. Understanding these relationships was useful for identifying the
importance of each factor in evaluation influence. For example, some factors had indirect
relationships with evaluation influence, or were perceived to be more important than other
factors due to their contribution to other key facilitators or barriers to influence.

The data sets were not integrated in their raw form; rather, the key findings from each data
source were entered into MS Excel to develop an integrated display of the data. An example
is provided in Table 35 to highlight the information used for the integration process. This
example is built on throughout this section to help communicate the data entry, preparation,
weighting, and analysis and interpretation process.

**Table 35: Integrated Data Display: Data Entry Example**

<table>
<thead>
<tr>
<th>Evaluation attribute</th>
<th>Survey evidence</th>
<th>Case study evidence</th>
<th>Relationships</th>
<th>Literature evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sophistication</td>
<td>Evaluations underpinned by theory had significantly higher levels of individual evaluation influence.</td>
<td>Appropriate sophistication more influence at both levels. Evaluation needs to respond to the size and scope of the programme.</td>
<td>Affects perceptions of credibility. This is affected by the evaluation approach and design</td>
<td>Sophistication is highlighted in terms of evaluation outputs and design in the literature and is based on theoretical and some empirical evidence.</td>
</tr>
</tbody>
</table>
7.3.3 Data Preparation

Previous mixed methods research has tended to use data reduction or transformation techniques to prepare data for mixed methods analysis (Greene, 2007, 2008; Tashakkori & Teddlie, 2003). The integration for this research, however, needed to provide an overview of the key findings without losing data important for interpretation by reducing or transforming data. Therefore, a content analysis of the summary information under each data source was used to identify a means of rating the evidence behind each factor. During this process, the themes that emerged tended to relate to the amount or level of evidence for each factor in the conceptual framework. Subsequently, these themes were collectively defined as “levels of evidence.”

7.3.3.1 Levels of evidence

The levels of evidence were hierarchical and represented the strength or amount of evidence behind each factor in the framework. The levels of evidence were determined by the assumptions underpinning the original analysis that was used for each of the three studies. For the survey, for example, statistical significance was the highest level of evidence and the perceptions of the survey participants were a moderate evidence. Levels of evidence were developed for all three of the studies and are identified in Table 36.

Table 36: Levels of Evidence for Each of the Data Sources

<table>
<thead>
<tr>
<th>Data source</th>
<th>High level</th>
<th>Moderate level</th>
<th>Low level</th>
<th>No evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Literature (Study 1)</td>
<td>Empirical evidence</td>
<td>Theoretical evidence</td>
<td>-</td>
<td>Not in the literature</td>
</tr>
<tr>
<td>Survey (Study 2)</td>
<td>Statistically significant factor</td>
<td>Participants’ perceptions</td>
<td>-</td>
<td>Not highlighted as important</td>
</tr>
<tr>
<td>Case studies (Study 3)</td>
<td>Frequent factor across all cases</td>
<td>Frequent factor across two or three cases; crucial factor in one case</td>
<td>Noted in interviews</td>
<td>Not noted in the interviews</td>
</tr>
</tbody>
</table>

Relationships

It is important to note that the levels of evidence for the evaluation influence experienced by the partnerships were slightly different. This is due to the difference in the type of data. For example, the evidence from the survey on evaluation influence describes the percentage of participants who experienced that particular influence, rather than a statistical relationship. This is because the statistical relationships for the other factors in the framework are based on its relationship with evaluation influence. The levels of evidence were based on the frequency with which participants experienced each type of influence. For example, if over
66% of participants who responded to that question experienced that type of influence, the level of evidence was high; 33% to 65% was moderate; and anything beneath that was low. The levels of evidence for evaluation influences from the other data sources are the same as those identified in Table 36.

To support the integrity of the analysis, it was important that each of the levels in Table 36 were defined. Equally, these definitions were important for guiding the analysis. Definitions were based on the analysis that was undertaken for the survey, the case studies and the literature underpinning the conceptual framework. Table 37 provides the definitions for each of the levels of evidence.

**Table 37: Definitions for the Levels of Evidence**

<table>
<thead>
<tr>
<th>Data source</th>
<th>Evidence level</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Literature (Study 1)</td>
<td>Empirical</td>
<td>Published literature that presents evidence that has resulted from research undertaken by the authors of the literature. No discriminations are made based on the research methods used.</td>
</tr>
<tr>
<td></td>
<td>Theoretical</td>
<td>Published literature that present theoretical propositions relevant to evaluation influence.</td>
</tr>
<tr>
<td>Survey (Study 2)</td>
<td>Statistically significant</td>
<td>Factor had a statistically significant relationship with evaluation influence in the survey analysis.</td>
</tr>
<tr>
<td></td>
<td>Participants’ perception</td>
<td>Factor was identified as a barrier or enabler by participants who completed the survey.</td>
</tr>
<tr>
<td>Case studies (Study 3)</td>
<td>Frequent factor across all cases</td>
<td>Factor was noted across all four partnerships, and was also noted on a frequent basis, e.g., 15 or more references.</td>
</tr>
<tr>
<td></td>
<td>Frequent factor across two or three cases</td>
<td>Factor was noted across two or three partnerships, and was also noted on a frequent basis, e.g., 15 or more references.</td>
</tr>
<tr>
<td></td>
<td>Critical factor in one case</td>
<td>Factor was noted in one case but was crucial to the evaluation influence pathways, i.e., influence would have or would not have occurred with or without the presence of this factor.</td>
</tr>
<tr>
<td></td>
<td>Noted in interviews</td>
<td>A theme that occurred during the interviews in one or more partnerships, but was not a frequent reference, e.g., 14 or fewer references.</td>
</tr>
<tr>
<td>Relationships</td>
<td>Impacts on</td>
<td>Factor has a direct impact on another factor in the conceptual framework.</td>
</tr>
<tr>
<td></td>
<td>Impacted on by</td>
<td>Factor is impacted on by another factor in the conceptual framework.</td>
</tr>
<tr>
<td>All sources</td>
<td>No evidence</td>
<td>No evidence from this data source that indicated the factor as contributing to evaluation influence</td>
</tr>
<tr>
<td></td>
<td>Insufficient evidence</td>
<td>Not enough evidence from that data source to provide insight into the contribution of that factor to evaluation influence.</td>
</tr>
</tbody>
</table>
7.3.3.2 Maintaining meaning: The use of summary information

The identification of levels of evidence suggests that the integration and analysis is very hierarchical and perhaps more quantitative in its nature. Yet, the analysis is not based on the levels of evidence alone. To maintain the meaning identified through the original analysis, the levels of evidence were also underpinned by a summary of the information entered into MS Excel during the data integration process. It is this summary information that is crucial to informing our interpretation of the levels of evidence for each of the data sources.

For sophistication for example, the summary information helps us to identify what aspects of a sophisticated design appear to be more important for evaluation influence, with the survey highlighting the importance of evaluations underpinned by theory and the case studies highlighting the importance of appropriate match between programme complexity and evaluation sophistication. If the integration was based on levels of evidence alone, these important insights would be lost. Table 38 provides an example of the information that was entered into MS Excel for the evaluation attribute of sophistication. This example illustrates how the levels of evidence and the summary information were integrated into one display that provided an overview of evidence without losing meaning to inform the interpretation.

Table 38: Levels of Evidence for the Role of a Sophisticated Evaluation Design in Evaluation Influence

<table>
<thead>
<tr>
<th>Evaluation attributes</th>
<th>Survey evidence</th>
<th>Interview evidence</th>
<th>Relationships</th>
<th>Literature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sophistication</td>
<td>Statistically significant</td>
<td>Frequent theme across cases</td>
<td>Impacts on</td>
<td>Empirical &amp; theoretical evidence</td>
</tr>
<tr>
<td></td>
<td>• Evaluations grounded in theory resulted in more individual mechanisms and outcomes of evaluation influence.</td>
<td>• Appropriate sophistication resulted in more influence at individual and partnership levels.</td>
<td>• Credibility Impacted on by</td>
<td>• Sophistication of evaluation outputs and design are highlighted as important for facilitating influence.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Evaluation needs to respond to the size and scope of the programme.</td>
<td>• Approach</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>• Design</td>
<td></td>
</tr>
</tbody>
</table>

7.3.4 Mixed Methods Analysis and Interpretation

Once the data was prepared for analysis, the process for analysing and interpreting the mixed methods analysis needed to be clarified. The methodology underpinning this research offered some guidance. For example, it guided the data integration process in identifying common patterns within the data, while also recognising the contribution of contextual factors to the findings. Still, methodology only offers a broad framework for integration and
does not specify any specific analytical strategy. While data sets can be weighted and rated, the integration process is largely interpretative, and draws on the researcher’s skills and knowledge of the data sets. This naturally poses some limitations, which are recognised in the Discussion chapter. With a view to addressing these limitations and supporting the development of mixed methods inferences, the following steps were undertaken:

- reviewing the levels of evidence;
- reviewing the capacity for each method to contribute to our understanding of that factor;
- reviewing the methodological limitations of the survey and case study data; and
- interpreting this information to identify the levels of influence experienced by the partnerships, and the contribution of the evaluation attributes, partnership functioning characteristics and contextual factors to evaluation influence.

Each of these steps is now illustrated using different examples to help identify the mixed methods analysis undertaken for this study.

### 7.3.4.1 Reviewing the levels of evidence

The levels of evidence were used to assign the level of importance of each factor in the conceptual framework. Factors were defined as crucial, of high importance, moderate importance, low importance, not important or insufficient evidence. For example, factors that had high levels of evidence from two of the three key data sources (the survey, case studies and the literature) were considered to be crucial factors in the framework. Factors that were underpinned by low levels of evidence from two or more key data sources were coded as low importance. When there was insufficient evidence to assess the contribution of a factor, this was also noted in the analysis. Table 39 defines the generic criteria behind each of the levels of importance.

#### Table 39: Levels of Importance for Data Integration and Generic Criteria

<table>
<thead>
<tr>
<th>Importance of factor</th>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crucial</td>
<td>Highest level of evidence from two or more data sources.</td>
</tr>
<tr>
<td>High importance</td>
<td>High level of evidence from one data source, plus moderate levels of evidence from two other data sources.</td>
</tr>
<tr>
<td>Moderate importance</td>
<td>Moderate level of evidence from two or more data sources, without any high levels of evidence.</td>
</tr>
<tr>
<td>Low importance</td>
<td>Low level of evidence from two or more data sources.</td>
</tr>
<tr>
<td>Not important</td>
<td>Low level of evidence from one source, plus no evidence from two other sources.</td>
</tr>
<tr>
<td>--------------</td>
<td>--------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Insufficient evidence</td>
<td>Insufficient evidence to assess the contribution of this factor.</td>
</tr>
</tbody>
</table>

**7.3.4.2 Reviewing the capacity for each method to contribute to each concept or theory**

The data integration and analysis was informed by the capacity for each method to contribute to our understanding of each factor. For example, the case studies offered greater insight into the role of contextual factors in comparison to the survey, as they enabled participants to expand and explore their views on the importance of context. Equally, the items on context in the survey did not allow for statistically significant relationships to be identified between evaluation influence and context. While this is a potential limitation of the survey, it was always recognised that the case studies would provide a better opportunity for understanding the importance of context. Therefore, greater consideration was given to the case study evidence than the survey evidence for these factors.

**7.3.4.3 Reviewing evidence based on methodological limitations**

When conducting the data integration analysis, it is important to recognise the limitations that underpin each method and its application in this research. These limitations can help to inform the interpretation of the mixed methods analysis, as they may highlight some data sources as being more useful than others. Understanding the role of partnership functioning in evaluation influence is a useful example here.

The survey used the Partnership Assessment Tool (Hardy et al., 2003) to measure partnership functioning. The findings suggested that the majority of partnerships were highly functioning, and partnership arrangements and culture did not have a statistically significant relationship with evaluation influence. The evidence from other sources, however, contradicts these findings. The survey participants’ perceptions, the case studies and the literature all suggest that partnership arrangements and culture are important for influence. So how do we interpret this difference? The strength of evidence from the other data sources and the critique of assessment tools to assess the complexity of partnership functioning in the literature (Halliday & Asthana, 2005), suggest that this difference is more likely to be due to methodological limitations rather than insights offered through differentiation between the sources of evidence. Indeed, the evidence that survey participants identified partnership arrangements and culture as a barrier and enabler to evaluation influence supports this notion.
7.3.4.4 Interpretation

Each of the steps described above is used to interpret the findings from the data integration analysis. This analysis results in the definition of the factor as crucial, of high importance, low importance, not important or insufficient evidence. The summary information is then used to describe the role of this factor in the conceptual framework. The interpretation is also designed to address the research aims by identifying the levels of evidence experienced by the partnerships, as well as the role of evaluation attributes, partnership functioning characteristics and contextual factors in evaluation influence.

Table 40 provides an example of the data integration and analysis. A written summary of the integration is also provided after the table. The Results section presents higher level summaries of this information. The detailed analyses for each of the components in the framework are provided in the appendices. This is important for providing an insight into the interpretation process, as while some factors have the same levels of evidence from different sources they may not be rated with the same importance during the data integration. The analyses provided in the appendices and the written summary following the tables are provided to help to highlight why. For example, differences may be due to methodological limitations or the amount of evidence in the existing literature.
**Table 40: Data Integration and Analysis Example: Sophistication**

<table>
<thead>
<tr>
<th>Evaluation inputs</th>
<th>Survey evidence</th>
<th>Interview evidence</th>
<th>Relationships</th>
<th>Literature</th>
<th>Integration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sophistication</td>
<td>High</td>
<td>High</td>
<td>High</td>
<td>High</td>
<td>Crucial factor</td>
</tr>
</tbody>
</table>

- Statistically significant
  - Evaluations grounded in theory results in more individual influences.

- Frequent theme across cases
  - Appropriate sophistication more influence at individual and partnership levels.
  - Evaluation needs to respond to the size and scope of the programme.

- Impacts on
  - Credibility
  - Impacted on by
    - Approach
    - Design

- Empirical & theoretical evidence
  - Sophistication of evaluation design and outputs is highlighted as important for facilitating influence.

**Summary**

- Evaluations of appropriate levels of sophistication were more likely to facilitate influence.
- Evaluations grounded in theory were also more likely to facilitate influence.
- Impacts on credibility.
- Impacted on by evaluation approach and design.
Sophistication was identified as a crucial factor, as it had high levels of evidence from two or more data sources, the survey and the case studies in this instance. The survey and the case studies also suggested that sophistication of evaluation inputs was more important than sophistication of evaluation outputs for this research. While this contradicts some of the theoretical literature, the congruence between the survey, case study data and early empirical evidence support this notion. The sophistication of evaluation inputs was also important for influence, as it impacted on perceptions of evaluation credibility. The survey and the case studies were both useful for providing insight into the role of sophistication, and the level of evidence was not reduced by any methodological limitations. Subsequently, sophistication of evaluation inputs was identified as a crucial factor for evaluation influence within partnerships.

7.3.5 Summary

The data integration and analysis sought to strike a balance between building up levels of evidence behind each factor in the conceptual framework, and using summary information to facilitate interpretation and understanding. The use of the existing literature was particularly important here, as it offered an additional source of evidence from which to review the findings. Equally, the levels of evidence were important for providing an overview of the amount of evidence behind each factor and from each data source. These were important building blocks to start from. The summaries, the context of the research, the potential for each data sources to contribute to our understanding of that factor and the methodological limitations of this research were then used to interpret and understand these levels of evidence and the contribution that each factor made to evaluation influence within health sector partnerships.

7.4 Results

This section presents the data integration analysis for each component of the conceptual framework: the evaluation attributes, partnership functioning, partnership evaluation behaviour, individual characteristics and contextual factors. First, a summary of the data analysis is presented for each component of the framework and the factors within it. This is followed by mixed methods inferences based on the integrated mixed methods data analysis. These inferences are further explored in the discussion in Chapter 8.
7.4.1 Levels of Evaluation Influence

The integration presented for the levels of evaluation influence focuses on the general influence mechanisms, cognitive/affective mechanisms, motivational outcomes and behavioural outcomes identified in the framework. The data integration is presented for both the individual and partnership levels of influence. First, the mechanisms of evaluation influence are explored, followed by the outcomes.

7.4.1.1 Mechanisms of evaluation influence

Table 41 identifies the data integration analysis for the levels of evaluation influence. The level of evidence underpinning each factor is then described. The evidence for the data integration is presented in Appendix 16.
Table 41: Evaluation Influence: General and Cognitive/Affective Mechanisms

<table>
<thead>
<tr>
<th>Evaluation influences</th>
<th>Evidence sources</th>
<th>Case studies (Study 3)</th>
<th>Framework (Study 3)</th>
<th>Data integration (Study 4)</th>
<th>Data integration summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual general influence mechanisms</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elaboration</td>
<td>High</td>
<td>Low</td>
<td>High</td>
<td>High</td>
<td>High evidence</td>
</tr>
<tr>
<td>Heuristics</td>
<td>High</td>
<td>High</td>
<td>Moderate</td>
<td>High</td>
<td>All sources provided evidence for individual and partnership general influence mechanisms.</td>
</tr>
<tr>
<td>Skill acquisition</td>
<td>High</td>
<td>Moderate</td>
<td>High</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Partnership general influence mechanisms</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Justification</td>
<td>High</td>
<td>Low</td>
<td>Moderate</td>
<td>Moderate</td>
<td>Moderate</td>
</tr>
<tr>
<td>Persuasion</td>
<td>Moderate</td>
<td>Low</td>
<td>Moderate</td>
<td>Moderate</td>
<td></td>
</tr>
<tr>
<td>Individual cognitive/affective outcomes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Opinion/attitude change</td>
<td>Moderate</td>
<td>Low</td>
<td>High</td>
<td>Moderate</td>
<td></td>
</tr>
<tr>
<td>Salience</td>
<td>High</td>
<td>Low</td>
<td>High</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Partnership cognitive/affective outcomes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agenda setting</td>
<td>Moderate</td>
<td>Low</td>
<td>High</td>
<td>Moderate</td>
<td></td>
</tr>
</tbody>
</table>

Individuals and partnership experienced a range of cognitive/affective influences. Attitude/opinion change, however, was less common.
7.4.1.1 High evidence

General influence mechanisms were frequently experienced by the partnership members and the partnerships (Table 41). The survey indicated that participants often thought more about their programmes as a consequence of evaluation, as well as learning more about the programme or partnership. This finding was also supported by the case studies. The survey also suggested that participants learnt more about evaluation and developed evaluation skills. Similar findings emerged through the case study interviews. The capacity for evaluation to trigger these mechanisms is also highlighted in the literature underpinning the framework.

7.4.1.1.2 Moderate support

The evidence for the general influence mechanisms experienced by the partnership was more moderate. In saying this, the evidence still suggests that partnerships often used the evaluation to meet accountability requirements and justify programme existence. This, coupled with the existing literature provides support for the general influence mechanisms in the framework, and originally suggested by Mark and Henry (2004).

Similarly, the cognitive/affective mechanisms experienced by the partnerships and their members were underpinned by a moderate level of evidence. This was partly due to the differentiation in the amount of people who experienced salience, to those who experienced changes in attitudes. Nearly 80% identified aspects of their programmes and partnerships as more important, as opposed to 57% who experienced a change in opinions or attitudes. Salience was also noted more often in the case studies. With respect to attitude change, the case studies identified changes in the evaluative thinking rather than specific changes in existing opinions. At a partnership level, the evaluation influenced agenda setting within the partnerships. Both the survey and the case studies suggested that this typically related to changes in partnership aims and the strategic direction. Staffing and fiscal decisions were less informed by the evaluation.

7.4.1.2 Outcomes of evaluation influence

The outcomes of evaluation influence refer to the motivational and behavioural outcomes. Table 42 identifies the evaluation influence outcomes experienced by the partnerships and the data integration is presented in Appendix 17.
<table>
<thead>
<tr>
<th>Evaluation influences</th>
<th>Evidence sources</th>
<th>Case studies (Study 3)</th>
<th>Framework (Study 3)</th>
<th>Data integration (Study 4)</th>
<th>Data integration summary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motivational outcomes: Personal goals and aspirations</td>
<td>Individual</td>
<td>High</td>
<td>High</td>
<td>Moderate</td>
<td>Moderate</td>
</tr>
<tr>
<td></td>
<td>Partnership</td>
<td>Not explored in survey</td>
<td>Low</td>
<td>Low</td>
<td>Moderate</td>
</tr>
<tr>
<td>Behavioural outcomes</td>
<td>Individual changes in practice</td>
<td>Moderate</td>
<td>Low</td>
<td>Moderate</td>
<td>Moderate</td>
</tr>
<tr>
<td></td>
<td>Partnership changes to programme</td>
<td>High</td>
<td>High</td>
<td>High (not in a partnership context)</td>
<td>High</td>
</tr>
</tbody>
</table>
7.4.1.2.1 High evidence

There was a high level of evidence on the motivational outcomes experienced by the partnership members and the partnership (Appendix 17, Table 42). The survey provided moderate evidence for the motivational outcomes experienced by the partnership members, although many did suggest that they were more motivated to be engaged with the partnership as a consequence of the evaluation. A large proportion (70%) also experienced an increased sense of ownership following the evaluation. The case studies were also congruent with these findings. For example, individuals often described increases in their motivation and the subsequent engagement with the partnership as a result of the evaluation.

In terms of the impact of these outcomes at a partnership level, the case studies did suggest that evaluations have the potential to have a positive impact on partnership functioning, although the level of evidence was lower. The impact of motivational outcomes on partnership functioning was not explored in the survey, and further evidence is needed to understand more about the impact of evaluation on partnership functioning.

7.4.1.2.2 Moderate evidence

The evidence for the behavioural outcomes was more moderate (Table 42). The survey indicated that over half of the participants had experienced changes in their practice. Changes in individual practice were also noted less often in the interviews, although such changes often related to evaluation behaviour, as well as programme practice. Changes in practice were more commonly cited at a partnership level. These changes often related to programme implementation, or again, in evaluation practices. These findings and the existing literature provide moderate evidence for the ways in which evaluation can result in behavioural outcomes at both individual and partnership levels.

7.4.1.3 Levels of evaluation influence: Mixed methods inferences

Evaluation can facilitate general influence and cognitive/affective mechanisms within individuals and partnerships. As a consequence of evaluation, individuals think more and learn more about their programmes and partnerships, when desired evaluation can also facilitate the development of evaluation skills and build evaluation capacity. For partnerships, evaluation was often used for justification and persuasion, with boards and funders often the recipients of these types of evaluation influences. Evaluation can also highlight aspects of programmes as being more important than others. At a partnership
level, this type of influence was used to facilitate agenda setting including changes in partnership aims and strategic direction.

Evaluation can facilitate motivational outcomes within individuals, and potentially within partnerships. Evaluation can enhance motivation to engage in partnership work and increase the sense of ownership within partners. In this respect, it has the potential to influence partnership functioning, although further evidence is needed to support this notion.

Behavioural outcomes that result from evaluation include changes in practice at individual and collective levels. This includes both changes to programme and evaluation practice. Individual influences at this level also move beyond the current partnership or programme to the individual’s future work.

7.4.2 Evaluation Attributes that Facilitated or Hindered Influence

7.4.2.1 Evaluation inputs

The evaluation inputs refer to the focus of the evaluation, the rationale for the evaluation, the evaluation approach, and the quality and sophistication of evaluation design. Table 43 identifies the data integration for the evaluation inputs. The data integration is presented in Appendix 18.
### Table 43: Evaluation Attributes: The Importance of the Evaluation Inputs

<table>
<thead>
<tr>
<th>Evaluation inputs</th>
<th>Level of evidence</th>
<th>Importance of factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focus</td>
<td>None</td>
<td>Moderate</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Low importance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Suggested importance through the survey. Insufficient evidence here.</td>
</tr>
<tr>
<td>Rationale</td>
<td>High</td>
<td>Moderate</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>Moderate</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Moderate importance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Undertaking evaluation to facilitate learning can enhance influence but context needs to support this process too, e.g., if partnership functioning is challenged influence is still likely to be hindered.</td>
</tr>
<tr>
<td>Approach</td>
<td>High</td>
<td>High</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>Crucial factor</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Participation increases influence.</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Participation of leadership and key decision makers is important for partnership-level influences.</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Approach impacts on perceptions of sophistication and credibility.</td>
</tr>
<tr>
<td>Quality design</td>
<td>Moderate</td>
<td>High</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>High importance</td>
</tr>
<tr>
<td></td>
<td>Moderate</td>
<td>• Higher quality evaluations have more influence at all levels.</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Perceptions of quality are impacted on by perceptions of evaluator’s skills and expertise.</td>
</tr>
<tr>
<td>Sophisticated design</td>
<td>High</td>
<td>Crucial factor</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Evaluations of appropriate levels of sophistication facilitate influence.</td>
</tr>
<tr>
<td></td>
<td>Moderate</td>
<td>• Evaluations grounded in theory also facilitate influence.</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Relates to evaluation approach and design.</td>
</tr>
</tbody>
</table>
7.4.2.1.1 Crucial factors

Evaluation approach and sophistication were crucial for evaluation influence (Table 43). The survey indicated that participatory approaches to evaluation resulted in significantly higher levels of individual influence, and partnership-level influences were significantly higher when leadership participated in the evaluation. The case study evidence was congruent with these findings, and also highlighted the importance of participation from key decision makers in facilitating influence at a partnership level. These findings were consistent with the existing literature. Further, the case studies suggested that the evaluation approach was important due to its impact on the sophistication of the evaluation design and perceptions of evaluation credibility. Further, the case studies suggested that outcome evaluations facilitated more influence, particularly beyond the partnership, than process evaluations.

7.4.2.1.2 Factors of high importance

Quality design was highly important for influence (Table 43). This notion was supported by the perceptions of the survey participants, although the insight into the importance of this factor largely came from the case studies. They suggested that higher quality evaluations triggered influence, at individual, partnership and collective levels. This finding is also congruent with existing empirical evidence on the role of quality in evaluation influence. The case studies also suggested that perceptions of quality were strongly impacted on by perceptions of the evaluator’s skills and expertise, as well as the evaluation approach.

7.4.2.1.3 Factors of moderate importance

Evaluation rationale was identified as being moderately important (Table 43). The survey indicated that evaluations undertaken to support learning and building evaluation capacity resulted in significantly higher individual levels of evaluation influence. For this potential benefit to be realised, however, the case studies suggested that evaluation must also be supported by the partnership and a context that facilitates influence. For example, a partnership that has low levels of functioning will struggle to facilitate evaluation influence regardless of the rationale for evaluation.

The evidence from the case studies did not provide high levels of evidence for the role of evaluation rationale in influence. Each of the evaluations in the case studies were undertaken to facilitate learning and two were also specifically designed to build evaluation capacity. Therefore, including evaluations with greater diversity in their rationale may have
provided greater insight into the role of this factor. Nevertheless, the literature offers theoretical support for the role of evaluation capacity building, and the survey also provides moderate support for this factor. Still, further research is needed to provide greater insight into these factors.

7.4.2.1.4 Factors of low importance

The focus of the evaluation was identified as a factor that was of low importance for evaluation influence (Table 43). The survey did not identify this factor as being significantly associated with evaluation influence. This factor was also not noted in the interviews. The literature, however, suggests that it is important to place some focus on partnerships and their functioning when evaluating partnership programmes. The differentiation between the sources of evidence suggests that this area warrants further exploration.

7.4.2.2 The evaluator

The factors that were explored during the data integration for the evaluator were the evaluator role, skills and expertise, cultural competence, and their internal or external status to the partnership. Appendix 19.

Table 44 presents the data integration for these factors and the data analysis is presented in Appendix 19.
Table 44: Evaluation Attributes: The Importance of the Evaluator

<table>
<thead>
<tr>
<th>Evaluator attributes</th>
<th>Levels of evidence</th>
<th>Importance of factor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Survey (Study 2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Case studies</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Relationships</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Framework</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Data integration</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(Study 4)</td>
<td></td>
</tr>
<tr>
<td>Skills &amp; expertise</td>
<td>Moderate</td>
<td>Crucial factor</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Facilitates influence at all levels, including collective.</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Perceptions of evaluator skills and expertise enhance perceptions of credibility, sophistication and quality.</td>
</tr>
<tr>
<td>Cultural competence</td>
<td>Moderate</td>
<td>Crucial factor</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Impacts on responsiveness and participation.</td>
</tr>
<tr>
<td>External or</td>
<td>High</td>
<td>High importance</td>
</tr>
<tr>
<td>external status</td>
<td>Moderate</td>
<td>• External evaluations facilitate evaluation influence at a partnership and collective level.</td>
</tr>
<tr>
<td>(new theme)</td>
<td>High</td>
<td>• External evaluations were perceived to more credible than internal evaluations.</td>
</tr>
<tr>
<td></td>
<td>No evidence</td>
<td>• External evaluators were more likely to use approaches of greater sophistication and quality.</td>
</tr>
</tbody>
</table>
7.4.2.2.1 Crucial factors

Evaluator skills and expertise were crucial for influence by the survey (moderately) and the case studies (Table 44). The case studies provided further insight into the importance of this factor. Specifically, they highlighted the role of skills and expertise in enhancing perceptions of credibility, sophistication and quality. The case studies also suggested that skills and expertise can facilitate evaluation influence beyond the partnership, to a more collective level. The existing literature supports these findings. This level of congruence provides support for identifying evaluator skills and expertise as a crucial factor for evaluation influence.

The evaluator’s cultural competence was also crucial (Table 44). The survey participants perceived cultural competence to be both a potential barrier and enabler to evaluation influence. The finding from the case studies also support this notion, and suggested that cultural competence was particularly important, due to its impact on responsiveness and partnership members’ participation in evaluation. While these comments came from just one partnership, cultural competence is still identified as a crucial factor as it was critical to facilitating evaluation influence within this partnership. The existing literature also supports this notion with empirical evidence.

7.4.2.2 Factors of high importance

The external or internal status of the evaluator to the partnership was a highly important factor for evaluation influence (Table 44). Evaluations conducted by external evaluators resulted in significantly higher levels of partnership influences. The survey also indicated that these evaluations were more likely to be perceived as credible and sophisticated. The case study evidence corroborated these findings, and also highlighted the influence of external evaluations beyond the partnership. External evaluators were also perceived to be gathering more credible and objective evidence. This influence of external evaluations was highlighted through the survey and case study analysis, although it is not noted in the existing literature. Still, for this research external evaluators were highly important for triggering influence.

7.4.2.3 Evaluation outputs

The evaluation outputs refer to the credibility, timeliness and responsiveness of the evaluation feedback and findings, as well as communication between the partnership and evaluation. An additional output identified through the case studies, a shared understanding
of evaluation purpose, is also included in this section. This sense of shared understanding is considered to be an output, as it results from the exchanges between the evaluator and the partnership. Table 45 presents the data integration for the evaluation outputs (see Appendix 20 for the data integration analysis).
<table>
<thead>
<tr>
<th>Table 45: Evaluation Attributes: The Importance of Evaluation Outputs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Levels of evidence</strong></td>
</tr>
<tr>
<td>Evaluation outputs</td>
</tr>
<tr>
<td>Credibility</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Timeliness</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Responsiveness</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Communication</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Shared understanding (new theme)</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
7.4.2.3.1 Factors of high importance

Credibility and timeliness were highly important for triggering influence (Table 44). Credibility was perceived to be important by the survey participants. The case studies suggested that credibility is particularly important for facilitating influence with individuals, the partnership and at more collective levels. The case studies also suggested that credibility is strongly impacted on by perceptions of evaluators’ skills and expertise. These findings provide support for existing theories of evaluation influence that highlight the importance of credible feedback. Importantly, they also shed light on the factors that stakeholders consider when determining credibility.

Timeliness is well documented in the literature as being an important trigger of evaluation use. This research also provided moderate evidence for the importance of timeliness, although this factor was not a frequent or crucial theme within the case studies analysis. When interpreting these findings it is important to note that the case studies evaluations were all underpinned by continuous feedback cycles. In this respect, they may not offer the best opportunity for exploring the role of timeliness. Equally, evaluation influence can occur in various ways and not just as a consequence of the timeliness of evaluation feedback and findings. Nonetheless, the congruence between the evidence from the survey and the literature suggest that timeliness is highly important for triggering influence.

7.4.2.3.2 Factors of moderate importance

Responsiveness and communication were moderately important for influence (Table 45). The evidence for the role of responsiveness was largely drawn from the case studies. This evidence suggests that feedback that met the needs of its intended users facilitated influence, with partnerships preferring brief and concise reporting, presentations and workshops. While responsiveness was not a frequent theme, it was noted in all cases and thus is considered to be moderately important. Responsiveness was also particularly important for influencing individuals not directly involved in the evaluation, such as programme funders. Current theoretical literature complements the case study findings and also suggests that responsive feedback can facilitate use.

Communication was also moderately important for evaluation influence. Both the survey and the case studies provided moderate support for this factor. The case studies however, provided greater insight into the importance of communication. More specifically, regular and multiple forms of communication were more likely to facilitate influence. This approach to communication also triggered influence by enhancing participation in and
support for the evaluation. The theoretical literature also suggests that communication is important. Still, this factor tended to have a more indirect relationship with evaluation influence and thus it is identified as being moderately important.

7.4.2.3.3 Potentially important factors

The sense of shared understanding of evaluation purpose is noted as a potentially highly important factor (Table 44). This theme emerged through the case study analysis and was not explored in the survey. This factor was noted in three of the four partnerships and was also a crucial factor for one. The partnership members noted that the evaluator and the partnership members needed to be “on the same page” if the evaluation was going to be influential. Equally, the sense of shared evaluation purpose between partnership members was important for influence at a partnership level. While there is no existing evidence that corroborates these findings, it was a crucial factor for one partnership, and therefore a potentially important factor for evaluation influence within partnerships.

7.4.2.4 Evaluation attributes: Mixed methods inferences

Participatory approaches to evaluation triggered influence due to the increased exposure of partnership members to the evaluation process and feedback. Participation from leadership and key decision makers also facilitated evaluation influence at a partnership level. An evaluation approach is also important due to its impact on perceptions of sophistication and credibility. Perceptions of credibility, however, are also impacted on by existing knowledge and attitudes, as demonstrated by the sectors preference for outcome evaluations.

Evaluations grounded in sound theory and underpinned by a sound match between programme complexity and evaluation sophistication facilitated evaluation influence. To match programme complexity, evaluations need to respond to the size and the scope of the programme. Evaluations perceived to be of higher technical quality also facilitated influence, although these perceptions were largely influenced by perceptions of the evaluator’s skills and expertise.

Evaluations undertaken to facilitate learning or build capacity facilitate higher levels of individual evaluation influence. Further evidence, however, is needed to understand what it is about these evaluations and their partnerships that enable these approaches to facilitate influence. Focusing evaluations on programmes without exploring the role of partnership functioning does not appear to facilitate or hinder evaluation influence. Further research may offer better opportunities for exploring the importance of this factor.
7.4.2.4.1 The evaluator

Evaluators play a crucial role in facilitating influence. When evaluators are perceived to have the appropriate levels of skills and expertise, evaluation influence is facilitated at the individual, partnership and more collective levels. Further, evaluators’ skills and expertise impacted on perceptions of credibility, quality and sophistication, which in turn facilitate influence. The cultural competence of evaluators can also facilitate influence, as cultural competence can enhance the responsiveness of evaluations and the participation of partnership members in evaluation. External evaluations facilitate higher levels of influence, due to the ways in which external evaluators enhanced perceptions of quality and sophistication. Further, external evaluators are more likely than internal evaluators to facilitate influence at a partnership level and beyond.

7.4.2.4.2 Evaluation outputs

Credibility facilitates influence at all levels, and is particularly important for facilitating influence beyond the partnership. Timeliness also facilitates evaluation influence, although it is not a crucial factor as influence can also occur through the process of evaluation. Continuous feedback cycles can also overcome the potential barrier to influence posed by timeliness.

Evaluations that respond to the needs of intended users are more likely to facilitate influence. Further responsiveness is particularly important for facilitating influence with stakeholders not directly involved in the evaluation and its processes. While brief and concise forms of feedback facilitated influence, further research would provide greater insight into the ways in which the responsiveness for those not directly involved in the evaluation can be enhanced.

Communication between the evaluator and the partnership contributes to evaluation influence due to its impact on partnership members’ support for and participation in the evaluation. Regular and multiple forms of communication facilitate influence, with responsive and face-to-face communication being particularly important. A shared understanding of evaluation purpose between the evaluator and the partnership enhances the responsiveness of evaluation, and thus triggers influence. A sense of shared understanding within the partnership itself is also particularly important for facilitating influence at a partnership level. Still, the evidence for this factor is based solely on the case studies and warrants exploration through further research.
7.4.3 Partnership Functioning Characteristics that Facilitated or Hindered Influence

This section presents the data integration analysis for the partnership functioning factors in the conceptual framework. Specifically, this component of the model included the clarity of the partnership’s purpose and ownership of the partnership, partnership culture, partnership arrangements and information-sharing processes.

7.4.3.1 Clarity of purpose, ownership and partnership culture

Table 46 identifies the importance of the clarity of the partnership’s purpose, ownership of the partnership and the partnership’s culture for evaluation influence. Here, partnership culture includes trust, power, communication and a culture of learning. Appendix 21 identifies the data integration analysis for each of these factors.
<table>
<thead>
<tr>
<th>Partnership clarity, ownership and culture</th>
<th>Levels of evidence</th>
<th>Importance of factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Survey (Study 2)</td>
<td>Case studies (Study 3)</td>
<td>Framework (Study 1)</td>
</tr>
<tr>
<td>Clarity of purpose</td>
<td>Moderate</td>
<td>High</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ownership</td>
<td>Moderate</td>
<td>High</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trust, power, communication, learning culture</td>
<td>Moderate</td>
<td>Low</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
7.4.3.1.1 Crucial factors

The clarity of a partnership’s purpose and ownership were crucial factors for influence within partnerships (Table 46). While these factors were not significant in the survey, participants did perceive them to be important. Partnerships completing the survey, however, were highly functioning according to their survey responses. This meant that it was more challenging to explore the role of partnership functioning through the survey evidence. The evidence for the role of partnership functioning in evaluation influence therefore comes largely from the case studies.

The case studies indicated that a clear partnership purpose was important for partnership-level influences. Specifically, an unclear purpose can impact on the relevance and responsiveness of the evaluation findings. Furthermore, it is difficult for an evaluation to be influential if the partnership is not clear on its direction. An unclear partnership purpose can also impact on partnership commitment and evaluation behaviour. For example, partnerships unclear on their purpose were more likely to struggle with lower levels of commitment, which in turn impacted on evaluation participation and support. While existing literature only provides evidence for the role of a clear purpose in enhancing partnership functioning, this research suggests that it is also important for evaluation influence.

Ownership of the partnership was also a crucial factor (Table 46). The case studies were most useful for providing insight into the importance of ownership, including its impact on evaluation participation. Variations in commitment also impacted on partnership arrangements and culture. For example, uncommitted partners often sent different people along to steering group meetings. This hindered consistency and the opportunities for decision making, as those in attendance did not always have the knowledge or autonomy to authorise decisions on behalf of their organisations. Lower levels of commitment were also associated with a lack of trust and competition between partners. The role of commitment is also highlighted in the literature, which suggests that broader organisational support is important for enhancing partnership functioning and thus influence.

7.4.3.1.2 Factors of moderate importance

Partnership culture was identified as being of moderate importance (Table 46). Again, the high functioning scores for the partnerships made it difficult to explore the role of these factors in the survey. Equally, the contributions of the individual variables relating to partnership culture were difficult to identify in the case studies. In spite of this, the case studies indicated that trust was particularly important, as partnerships experiencing lower
levels of trust were more likely to experience a culture of blame and competition between partners. The literature also highlights the importance of trust for partnership working.

Overall, the evidence suggests that partnership culture appears to have a more indirect relationship with evaluation influence, whereby it can offer an environment that can support or hinder evaluation influence. Partnership culture was also largely impacted on by the context of the partnership. This notion is explored further in section 7.4.6. However, the complexities and nuances of partnership culture really warrant exploration through further research.

7.4.3.2 Partnership arrangements and information sharing

The importance of partnerships’ arrangements and information sharing for evaluation influence are identified in Table 47. Here, partnership arrangements refer to the leadership and decision-making processes within the partnership, while information sharing refers to the partnership’s knowledge-management policy, information sharing, and adaptation or change processes. The data integration is presented in Appendix 24.
Table 47: Partnership Functioning: The Importance of Partnership Arrangements and Information Sharing

<table>
<thead>
<tr>
<th>Partnership arrangements and information sharing</th>
<th>Levels of evidence</th>
<th>Importance of factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Survey (Study 2)</td>
<td>Case studies (Study 3)</td>
<td>Relationships (Study 3)</td>
</tr>
<tr>
<td>Leadership</td>
<td>High</td>
<td>Moderate</td>
</tr>
<tr>
<td>Decision making</td>
<td>No Evidence</td>
<td>High</td>
</tr>
<tr>
<td>KM policy</td>
<td>No evidence</td>
<td>No evidence</td>
</tr>
<tr>
<td>Info sharing</td>
<td>Moderate</td>
<td>Low</td>
</tr>
<tr>
<td>Adaptation/change processes</td>
<td>Moderate</td>
<td>High</td>
</tr>
</tbody>
</table>

**Levels of Evidence:**
- High: Survey (Study 2), Case studies (Study 3), Relationships (Study 3), Framework (Study 1), Data integration (Study 4)
- Moderate: No Evidence, High, Moderate, High, High (literature on organisations)
- Low: No evidence, No evidence, No evidence, High (literature on organisations)

**Importance of Factors:***
- **Leadership:**
  - Crucial factor
  - Leadership participation enhances influence, especially at a partnership level.
  - Leadership support enhances partnership evaluation behaviour and responses to evaluation.
- **Decision making:**
  - Crucial factor
  - Participatory decision making facilitates influence, especially at a partnership level.
  - Clarity of processes is important for influence.
  - Involvement of key decision makers in evaluation is important.
- **KM policy:**
  - Low importance
  - A specific policy does not appear to be important.
- **Info sharing:**
  - Low importance
  - Information sharing was perceived to be important.
  - Less evidence into the role of this factor.
- **Adaptation/change processes:**
  - High importance
  - Adaptation and change processes facilitate influence.
  - Clarity of the role of evaluator and stakeholders appears to be important.
  - Lower functioning partnerships often found it harder to collaboratively respond to evaluation.
7.4.3.2.1 Crucial factors

Leadership was crucial for influence within partnerships (Table 47). There was clear congruence in the evidence from the survey, case studies and the literature. Participation from leadership resulted in significantly higher levels of influence, with the survey and case studies also suggesting that participation from leadership enhanced partnership evaluation behaviour by encouraging support and participation. The case studies also indicated that leadership facilitated influence by supporting adaptation or change processes to respond to evaluation. The literature also highlights the importance of leadership in learning-based activities.

Decision making was also identified as a crucial factor, with participatory decision-making processes being more likely to facilitate partnership-level influences. While this finding was moderately supported by the survey evidence, the level of evidence from the case studies and the existing literature provide greater support. Specifically, the case studies suggested that when decision-making processes were unclear, influence was hindered as there was no clear process for responding to the evaluation. Regardless of the processes in place, low levels of commitment from partnership members could hinder decision-making processes due to lack of engagement, or even the lack of presence of partnership members.

7.4.3.2.2 Factors of high importance

Adaptation or change processes to respond to evaluation were highly important for evaluation influence (Table 47). The congruence between the survey and case study findings suggests that partnerships with clear adaptation or change processes were more likely to facilitate influence at a partnership level. The literature suggests that such processes are also an important component of partnership functioning, and demonstrate the capacity or readiness of the partnership to engage in evaluation.

The case studies also highlighted the importance of clarifying roles in respect to the adaptation or change processes. For example, the case studies indicated that there was a lack of clarity within the partnerships on the roles and responsibilities of the evaluator and the partnerships in facilitating change following evaluation. More specifically, there was an expectation that the evaluator would have a greater role in facilitating change within two of the four partnerships. In many ways, for some of the partnerships there was a sense of not knowing what to do with the evaluation findings once they had them. This also appeared to be particularly salient for partnerships that were experiencing lower levels of functioning.
Regardless of these additional challenges, adaptation or change processes were needed to facilitate influence within the partnerships.

7.4.3.2.3 Factors of low importance

Having a specific knowledge-management policy and information-sharing processes were of low importance for evaluation influence (Table 47). However, very few partnerships in the survey had a written knowledge-management policy, so it was difficult to ascertain their impact. Equally, it was not a theme that was noted in the interviews. Despite this, the other comments relating to information sharing and knowledge-management practices, such as decision making and adaptation or change processes, suggest that it is the procedures for responding to evaluation that are more important for evaluation influence, rather than strategies for sharing existing knowledge between partnership members.

With regards to information sharing, the survey and the case studies noted the potential role of information sharing in evaluation influence. For example, partnerships openly sharing information were more likely to experience influence. Based on the evidence from this research, having a knowledge-management policy and information sharing were identified as being of lower importance in comparison to other factors in the framework. There was, however, less evidence on the role of these factors and future research may provide more insight.

7.4.3.3 Partnership functioning: Mixed methods inferences

Evaluation influence within partnerships is facilitated when partnership functioning is bolstered by a clear purpose and strong commitment from partners. Specifically, a clear partnership purpose and commitment from partners can facilitate influence by enhancing participation and support for evaluation, thus enhancing the opportunity for evaluation influence to occur. Variations in commitment can also hinder decision-making processes and result in a partnership culture that is less likely to support influence.

Partnership arrangements, and more specifically leadership and decision-making processes, are key facilitators of influence. Evaluation influence is facilitated when leaderships participate in evaluation, both through their capacity to drive influence at a partnership level and by enhancing partnership evaluation behaviour. Partnerships’ capacity to respond to evaluation is also crucial. Clear adaptation and change processes are needed to facilitate evaluation influence within partnerships. These processes are impacted on by functioning of the partnership, with lower levels of functioning typically hindering adaptation and change.
The responsibilities of evaluators and partnership members in these processes also warrant clarification, as a lack of clarity can hinder influence. Establishing these processes may also be particularly important for evaluation influence in partnerships, as partnerships may not have well-established organisational processes.

The role of partnership culture is harder to ascertain from this research, and the existing literature focuses on the relationship between partnership culture and functioning. This evidence combined with the case studies, however, highlight the potential importance of partnership culture. Specifically, trust was moderately important for facilitating influence due to its impact on competition and a culture of learning between partners. Still, this factor warrants further exploration.

Similarly, there was limited evidence for the role of a written knowledge-management policy and of information-sharing processes in evaluation influence within partnerships. The differentiation between the evidence from this research and evidence from existing organisational literature, suggests that communication and processes to respond to evaluation are more important facilitators of influence than processes to facilitate the sharing of existing knowledge and information between partners. Future research may also provide more insight here.

**7.4.4 Partnership Evaluation Behaviour that Facilitated or Hindered Influence**

The role of partnership evaluation behaviour in evaluation influence is now explored through the data integration (Table 48; Appendix 23).
<table>
<thead>
<tr>
<th>Evaluation behaviour</th>
<th>Levels of evidence</th>
<th>Importance of factor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Survey (Study 2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Case studies (Study 3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Relationships (Study 3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Framework (Study 1)</td>
<td>Data integration (Study 4)</td>
</tr>
<tr>
<td>Participation</td>
<td>High</td>
<td>Crucial factor</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>• Participation in evaluation triggers influence.</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Participation from leadership is also important for influence at a partnership level.</td>
</tr>
<tr>
<td>Support</td>
<td>High</td>
<td>Crucial factor</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Support for evaluation impacts on participation, and thus evaluation influence.</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Support is also important for facilitating participation in processes designed to respond to evaluation.</td>
</tr>
<tr>
<td>Partnership evaluation readiness</td>
<td>High</td>
<td>High importance</td>
</tr>
<tr>
<td></td>
<td>Moderate</td>
<td>• Evaluation readiness is important for support for evaluation and participation.</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>• Difficult to distinguish readiness from support in interview data. However, willingness to be involved in evaluation was important for influence.</td>
</tr>
</tbody>
</table>
7.4.4.1.1 Crucial factors

Partnership members’ participation and support for the evaluation were crucial factors for influence (Table 48). Higher levels of participation from partnership members resulted in significantly higher individual levels of influence. Further, high participation from leadership resulted in significantly higher levels of influence within the partnership. These findings were congruent with the case studies and existing evidence. The case studies also provided an insight into why participation is important. Specifically, the findings suggested that participation is important for facilitating support for and ownership of the evaluation.

In terms of support, higher levels of partnership support resulted in significantly higher levels of individual influence. Further, the case studies suggested that support impacted on participation in the evaluation, and particularly participation in adaptation or change processes. For example, the findings suggested that partnership members could participate in the evaluation due to their work commitments. This did not necessarily translate to the level of support needed to facilitate influence. Existing literature has also noted the importance of stakeholder commitment for evaluation use. This, coupled with the findings from this research, identify partnership support as crucial for facilitating evaluation influence.

7.4.4.1.2 Factors of high importance

Partnership evaluation readiness was a highly important factor for influence (Table 48). The survey indicated that this factor made a statistically significant contribution to evaluation influence levels. While this factor was not a frequent theme in the interviews, it was sometimes difficult to distinguish in the interview data between the willingness of partners to be involved and the notion of support for evaluation. Future research that directly focuses on the role of evaluation readiness may provide greater insight into the contribution of this factor, and also make a better distinction between the role of an individual’s willingness and capacity. Despite this, the mixed methods analysis highlights the importance of evaluation readiness in triggering influence. The case studies also suggested that evaluation readiness was important due to its impact on participation in the evaluation. While the evaluation literature highlights the importance of stakeholders’ evaluation behaviour in facilitating evaluation implementation, this research suggests that it is also highly important for influence.
7.4.4.2 Partnership evaluation behaviour: Mixed methods inferences

Partnership members who participate in evaluation, lend the evaluation support and have the willingness to engage in evaluation, facilitate influence. Participation in particular is an important facilitator, with participation from leadership and key decision makers being crucial for partnership-level influences. Participation in evaluation from partnership members also enhances support and ownership of the evaluation, thus facilitating evaluation influence.

Partnership support can also facilitate influence at both an individual and partnership level. More specifically, partnership support for evaluation is important for facilitating participation and engagement in processes that support adaptation or change. When partnership support is low, partnership members may be involved in the evaluation process but not fully committed to support the learning and influence that can result from evaluation.

Partnership evaluation readiness is highly important for evaluation influence. The role of this factor in evaluation influence pathways is more indirect, as it is the impact of evaluation readiness on participation or engagement in evaluation that can facilitate or hinder influence. Evaluation readiness itself is impacted on by partnership members’ support for evaluation and their existing evaluation knowledge and attitudes.

7.4.5 Individual Characteristics that Facilitated or Hindered Influence

In addition to partnership evaluation behaviour, the role of individual characteristics was also noted in the conceptual framework. Table 49 presents an overview of the data integration analysis for these factors (Appendix 24).
<table>
<thead>
<tr>
<th>Individual characteristics</th>
<th>Levels of evidence</th>
<th>Importance of factor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Survey (Study 2)</td>
<td></td>
</tr>
<tr>
<td>Involvement in partnership</td>
<td>Case studies (Study 3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Relationships (Study 3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Framework (Study 1)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Data integration (Study 4)</td>
<td></td>
</tr>
</tbody>
</table>

- **Low importance**
  - Partnership members may be “involved” in the partnership without really being committed to its work or evaluation.

<table>
<thead>
<tr>
<th>Individual evaluation readiness</th>
<th>High</th>
<th>Moderate</th>
<th>High</th>
<th>Moderate</th>
<th>High importance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>High</td>
<td>Moderate</td>
<td>High</td>
<td>Moderate</td>
<td>Evaluation readiness is an important contributor to evaluation influence.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>It affects participation in evaluation.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Individual evaluation readiness is impacted on by existing attitudes and the broader policy context of the partnership.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Existing attitudes &amp; knowledge</th>
<th>Moderate</th>
<th>High</th>
<th>High</th>
<th>High (knowledge use &amp; evaluation influence)</th>
<th>High importance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Attitudes towards evaluation can affect participation, evaluation readiness and perceptions of credibility.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Existing attitudes are affected by the policy context.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
7.4.5.1.1 Factors of high importance

An individual’s evaluation readiness was a highly important factor for facilitating influence (Table 49). Individuals with higher levels of readiness experienced significantly higher levels of influence. Evaluation readiness was also a significant contributor to evaluation influence in the linear regression analysis. The identification of resistance to evaluation as a barrier to influence by survey participants also supported the importance of this factor. Further, the case studies highlighted the impact of evaluation readiness on evaluation participation. This finding complements existing theoretical literature that notes the impact of readiness on stakeholder engagement and evaluation implementation. The case studies also provided further insight, by highlighting the impact of individual’s existing knowledge and attitudes on evaluation readiness.

Existing knowledge and attitudes towards evaluation were also highly important for influence. Indeed, the case studies indicated that negative attitudes towards evaluation impacted on perceptions of credibility, evaluation readiness and participation. Generally, these references to existing knowledge and attitudes tended to be negative and referred to other people. Partnership members often noted a sense of frustration with evaluation in the sector and a sense that evaluation detracted funding from programmes. This view was also exacerbated by changes in the policy context that resulted in reduced resources for population health programmes. Existing evaluation literature complements these findings, as existing knowledge and attitudes have hindered process use and evaluation influence.

7.4.5.1.2 Factors of low importance

The conceptual framework proposed that an individual’s involvement in the partnership could impact on evaluation influence, as the literature highlights the relationship between partnership members’ commitment to partnerships and their involvement in it. It was proposed that individuals who were more involved in the partnership would also be more involved in the evaluation, and therefore, more likely to experience evaluation influence. In contrast, the findings suggest that an individual’s involvement in the partnership is of low importance for evaluation influence (Table 49). There were no relationships suggested through the survey findings, and the references to this theme in the cases studies were infrequent.

For the partnerships in the case studies, there was the sense that commitment was more salient for evaluation influence than involvement in the partnership. The case studies indicated that while partnership members could be “involved” in partnership meetings and
other arrangements via their attendance, it was their commitment to the partnership that was more important for facilitating or hindering evaluation influence. The role of individual characteristics in influence was not the primary focus of this research. Therefore, further research that focuses more specifically on this component of the framework may provide further insight into the role of this factor.

7.4.5.2 Individual characteristics: Mixed methods inferences

Individuals demonstrating higher levels of evaluation readiness and positive attitudes towards evaluation can facilitate evaluation influence, particularly at an individual level. These factors are also important due to their impact on participation in evaluation, and perceptions of its credibility. Existing attitudes and evaluation readiness can also be impacted on by contextual factors, such as existing policy.

An individual’s involvement in the partnership was less important for evaluation influence here. Involvement in partnerships can be symbolic, and it is the commitment and support afforded to evaluation that is important for influence. Further research that focuses on the role of individual characteristics more specifically would provide greater insight into the importance of these factors.

7.4.6 Contextual Factors that Facilitated or Hindered Influence

This section explores the role of contextual factors in evaluation influence. The mixed methods analysis is first used to explore the importance of the evaluation readiness of the partnerships’ context. This is followed by an exploration of the partnerships’ political and organisational environment.

7.4.6.1 Contextual evaluation readiness: Resources dedicated to evaluation and support for evaluation

Table 50 identifies the importance of the factors relating to the evaluation readiness of the partnerships’ context (Appendix 25 provides the data integration table). When reviewing the data integration for this section, it is important to note that the survey was not designed to fully explore the role of context, as the case studies were designed to achieve this.

Subsequently, greater weighting is given to the case studies in the analysis for this section.
Table 50: Contextual Factors: The Importance of Resources Dedicated to Evaluation and Support for Evaluation

<table>
<thead>
<tr>
<th>Levels of evidence</th>
<th>Importance of factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation readiness of context</td>
<td></td>
</tr>
<tr>
<td>Survey (Study 2)</td>
<td>Case studies (Study 3)</td>
</tr>
<tr>
<td>Resources dedicated to evaluation</td>
<td>Moderate</td>
</tr>
<tr>
<td>Support for evaluation</td>
<td>Moderate</td>
</tr>
</tbody>
</table>

- An adequate resource for evaluation ensures that evaluations are conducted by someone with the appropriate skills and expertise.
- Inadequate resources impacts on the quality of evaluation design and outputs.
- Lack of support hinders influence by reducing engagement in evaluation, both in terms of commissioning and in responding to findings, particularly at a more collective level.
- Lack of support in this study was related to individual’s existing knowledge and attitudes.
7.4.6.1 Factors of high importance

The evaluation readiness of the partnerships’ broader context was highly important for facilitating influence (Table 50). Survey participants felt that resources, and in particular time to engage in evaluation, were key barriers and enablers to influence. Resources for evaluation were also a frequent theme in the case studies. In particular, the lack of funding dedicated to evaluation was seen as a major barrier to influence, as it could hinder the commissioning of evaluation in the sector. The lack of resources for evaluation also resulted in some worrying internal efforts to meet funders’ demands for evaluation.

Broader contextual support for evaluation was also highly important (Table 50). The survey and case studies highlighted this factor as a key barrier or enabler, and the support of senior members of partnership organisations and funders was also specifically noted. Broader support for evaluation was impacted on by existing knowledge and attitudes. Existing attitudes also impacted on credibility, with partnership members often describing the greater value attributed to outcome evaluations in the sector. Low levels of support for evaluation at this level also minimised the potential for influence across the sector. There is no existing literature on the role of contextual support for evaluation influence. Still, the corroboration between the survey and the case studies highlights the ways in which contextual support for evaluation can facilitate or hinder influence.

7.4.6.2 Contextual factors: Political and organisational environment

Table 51 presents the data integration for the political and organisational environment of the partnership (see Appendix 26 for the data integration analysis).
<table>
<thead>
<tr>
<th>Contextual Factors: The Importance of the Political and Organisational Environment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Levels of evidence</strong></td>
</tr>
<tr>
<td>Political and organisational environment</td>
</tr>
<tr>
<td>Policy context</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Accountability requirements</td>
</tr>
<tr>
<td>Traditional policies and management techniques</td>
</tr>
<tr>
<td>Competitive markets</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
7.4.6.2.1 Crucial factors

Accountability requirements were crucial for evaluation influence. Specifically, the survey and the case studies identified the sector’s focus on outcomes over process as a barrier to influence. This emphasis on outcomes within the section is also echoed in the literature. The literature suggests that this focus is a consequence of the training typically undertaken within the sector, which tends to promote outcome data and randomised controlled trials as the gold standard. In the case studies, the overemphasis on outcomes was often described with a sense of frustration, as funders and decision makers were perceived as demanding simple answers to complex problems. Thus, some of the potential value of other types of evaluation was lost at a sector level. A further challenge posed by accountability, was the demand for evaluation without adequate resources to support this process.

7.4.6.2.2 Factors of high importance

The partnerships’ policy context and traditional policies and management techniques were highly important for influence. The case studies indicated that shifts in policy had the capacity to hinder evaluation influence by affecting the clarity of the partnerships’ purpose and subsequently, the commitment of partnership members. Indeed, this theme was frequently noted in three of the four partnerships. The literature supports this notion by highlighting the challenges that changes in policy can pose to health sector programmes. The case study evidence also suggests that such shifts can impact on the relevance of evaluations, and thus their influence. Equally, shifts in policy can enhance negative attitudes towards evaluation, which can in turn hinder participation and support.

The survey and the case studies highlighted traditional policies and management techniques as highly important for influence. Specifically, the case studies suggested that the funding environment and its resulting competitive markets hindered influence. Current funding environments could also create competition between partners and their sense of trust. Similarly, the literature has highlighted the challenges that traditional policies and management techniques can pose for partnership working. This research supports this notion, as well as highlighting the impact of traditional policies and management techniques on influence.

7.4.6.3 Contextual factors: Mixed methods inferences

Accountability requirements hindered evaluation influence due to their focus on outcomes at the cost of understanding process. This focus on outcomes is likely to be a consequence of
the broader accountability requirements for the sector as a whole. Accountability requirements can also facilitate evaluation influence by increasing the commissioning of evaluation within the sector. This potential, however, is dependent on appropriate resources. Accountability requirements that are not appropriately supported can hinder influence, and misinform the sector by resulting in evaluations that are not underpinned by a sound approach or conducted by someone with the appropriate skills or expertise.

Support for evaluation from the sector is important for facilitating collective levels of influence. A lack of evaluation knowledge and negative attitudes towards evaluation at a sector level minimises support for evaluation and challenges influence, at both a partnership and collective level.

Health sector policy has the potential to facilitate influence by promoting an environment that supports and values evaluation. Such an environment can enhance existing knowledge and attitudes towards evaluation, while also increasing evaluation readiness and participation. Shifts in policy also indirectly impact on evaluation influence due to their effect on the focus of health sector partnerships and programmes, which can enhance or reduce the relevance of some evaluations.

Traditional policies and management techniques typically hindered partnership functioning and evaluation influence. Still, further evidence is needed to provide greater insight into the ways in which different policies and management techniques impact on evaluation influence.

7.5 Overview

The data integration and mixed methods analysis has been a valuable step in addressing the aim and objectives of this research. Specifically, the mixed methods analysis has identified the levels of evaluation influence experienced by the partnership members and the partnerships, as well as the specific factors that facilitated or hindered these influences. The mixed methods analysis has also provided useful insights that have not only identified important factors, but shed light onto why these factors are important.

Collectively, the levels of evidence in Figure 14 highlight the importance of each of the broader components of the conceptual framework in supporting influence. Indeed, it is the characteristics of each of these factors and their interactions that facilitate or hinder the pathways to evaluation influence. With respect to the evaluation attributes, the findings highlight the importance of the evaluation approach, design and evaluator in triggering
evaluation influence. The specific characteristics of these factors also impacted on other aspects of the framework, such as partnership evaluation behaviour and credibility. Evaluation quality, credibility and timeliness and having an external evaluator were also highly important.

Partnership functioning was also important for influence, particularly beyond an individual level. Crucial factors related to the clarity of purpose and the ownership of the partnership, as these factors impacted on partnership behaviour and particularly engagement in processes to respond to evaluation. Leadership and decision-making processes were also crucial due to their impact on partnership engagement and their capacity to facilitate adaptation or change processes in response to evaluation. Equally, the specific adaptation or change processes within each partnership were highly important for influence.

![Importance of the conceptual framework factors](image)

**Figure 14:** Importance of the conceptual framework factors.

In terms of contextual factors, accountability was crucial. While it facilitated influence by encouraging the commissioning and implementation of evaluation within the sector, evaluation quality was limited when evaluations were not appropriately resourced and supported. Thus, the contextual evaluation readiness of the partnership was highly important. The broader policy context and traditional policies and management techniques also impacted on influence. While this impact was often indirect, the impact of these
contextual factors on partnership functioning, evaluation readiness and behaviour indicated that they were also important for evaluation influence.

A factor not captured in Figure 14 is the “shared understanding of evaluation purpose.” This was highlighted as important in the case studies, although the contribution of this factor warrants further exploration. Other factors that also warrant further exploration are the focus of an evaluation (partnership and/or programme) and partnership culture. Avenues for future research are also discussed in detail in the discussion.

Overall, the mixed methods analysis has highlighted the variety of evaluation influences experienced by the partnerships and their members. The exploration of the specific components within the conceptual framework has also highlighted the role of partnership functioning and contextual factors in facilitating and hindering influence. In this respect, the mixed methods analysis provides support for the conceptual framework, while also highlighting areas that require further exploration. The resulting inferences from this analysis are now discussed in Chapter 8, where an updated version of the conceptual framework is also presented.
Chapter Eight: Discussion

8.1 Overview of the Research

Evaluation influence is important for both evaluators and stakeholders, as it has the potential to improve programmes and ultimately maximise the positive social impacts of evaluation (Ciarlo, 1981; Mark & Henry, 2004). While evaluation influence has triggered a large amount of theoretical and empirical study over the past 30 years, much of the research focuses on use and is based on descriptive case studies and evaluator perceptions (Fleischer & Christie, 2009; Henry & Mark, 2003; K. Johnson et al., 2009). Thus, there is a need to develop a stronger evidence base for evaluation influence (Leviton, 2003; Preskill et al., 2003). Furthermore, existing evidence does not adequately capture the role of programme contexts. If evaluation is to realise the potential benefits cited in the literature, there is a need to understand more about the complexities of evaluation influence. There is also a need to explore the complexity of this phenomenon across a diverse range of contexts, and from the perceptions of stakeholders.

Furthermore, there is a need to understand more about the impact of programme contexts, such as partnerships on evaluation influence. This research sought to address this need by exploring evaluation influence within population health partnerships. Specifically, the research aimed to identify the mechanisms and outcomes of evaluation influence experienced by such partnerships. The objectives of the research were to:

1. Identify the levels of evaluation influence experienced by the population health partnership (individual and partnership).
2. Identify which evaluation attributes trigger evaluation influence.
3. Identify which partnership functioning characteristics can facilitate or hinder evaluation influence.
4. Identify the contextual factors that can facilitate or hinder evaluation influence.

This research adopted a mixed methods approach. Specifically, four key studies were implemented consecutively: a conceptual framework (Study 1), a cross-sectional comparison survey of population health partnership members (Study 2), qualitative case studies with population health partnerships (Study 3) and a mixed methods data integration and analysis (Study 4). The conceptual framework used existing literature to develop a theory of evaluation influence within population health partnerships, and informed the
design and implementation of each of the subsequent studies. The survey provided an overview of evaluation influence within population health partnerships, and the case studies provided a more in-depth analysis. The case studies were also particularly useful for capturing the role of context in evaluation influence.

Study 4 represents the crux of the mixed methods approach. This study involved the development and implementation of an innovative approach to data integration and mixed methods analysis. More specifically, the mixed methods analysis used the similarities and differences between the evidence underpinning the conceptual framework, the survey and the case studies to support the purposes of complementarity and initiation. This analysis was also used to develop a set of mixed methods inferences that were used to inform the discussion and conclusions presented in this chapter.

Overall, this research makes a number of important contributions to existing theoretical and empirical literature, and potentially to evaluation practice and commissioning in the New Zealand health sector. The development of a conceptual framework for evaluation influence within population health partnerships illustrates the contribution of the thesis to existing theory. The acceptance of a paper on the conceptual framework by the *American Journal of Evaluation* also provides support for this notion (Appendix 27). The research also provides important empirical evidence on evaluation influence. Specifically, the research has contributed to our understanding of the importance of context in evaluation influence, as well as the reciprocal nature of evaluation influence pathways. While previous research has highlighted a range of important factors, this research has identified a hierarchy of important factors. Furthermore, the mixed methods approach has provided an insight into why these factors are important and their relationships to one another. An equally significant contribution of this research is the development and implementation of the mixed methods data integration framework and analysis.

This chapter discusses the findings from this research, and the mixed methods inferences more specifically. First, an overview of the research findings is presented. Following this, the findings are discussed in relation to the research aims and objectives, and integrated with existing literature. This integration with existing literature is also used to highlight the contribution of this research by identifying areas of similarity and difference with existing knowledge. The implications of this research for theory and practice are then discussed. Following this, the limitations and avenues for future research are explored. Based on this information, the conclusions are presented.
8.2 Overview of the Research Findings

Overall, partnership members and their partnerships experienced a broad range of evaluation influences. More specifically, the research provides support for the mechanisms and outcomes of evaluation influence identified in the conceptual framework, and originally highlighted by Mark and Henry (2004). The findings also suggest that evaluation attributes, partnership functioning characteristics and contextual factors all have the potential to facilitate or hinder evaluation influence. Some factors, however, were identified as being more important than others during the mixed methods analysis in Chapter 7. The results of this analysis are now used to revisit the theory of evaluation influence within population health partnerships that underpinned this research, and more specifically to highlight the key factors that are important for influence.

Figure 15: Adapted conceptual framework: Evaluation influence within population health partnerships.

Figure 15 presents an adapted version of the conceptual framework. Specifically, the factors presented in dark blue are crucial for influence, those in blue are highly important and those in purple are of moderate importance. Factors of low importance (focus, knowledge-management policy, information sharing and individual involvement in the partnership, and partnership characteristics) are presented in black font. They have not been removed from
the framework, as future research may provide a better insight into their importance or role in influence.

Evaluation attributes are crucial for facilitating influence. Indeed, the focus of the evaluation was the only attribute that was not well supported by the mixed methods analysis (Figure 15). The evaluator, the evaluation approach and sophistication of the design were crucial factors within the framework. These factors were particularly important due to their impact on other factors within the model, including credibility, quality and partnership evaluation behaviour. The evaluation attributes also had the capacity to trigger influences at an individual, partnership and more collective level. Nonetheless, this potential for influence was mediated by other factors within the model. For example, accountability requirements and the evaluation readiness of the sector could impact on the evaluation approach and design, perceptions of credibility and the engagement of people working at more senior or collective level.

Partnership functioning characteristics are also important for individual- and partnership-level influences. Indeed, the sense of shared purpose and ownership are crucial for influence as they impact on partnership evaluation behaviour and partnerships’ capacity to respond to evaluation. Partnership arrangements, such as leadership and decision making, were also crucial and particularly relevant for triggering influence within the partnership. The functioning of the partnerships was also a consequence of the policy context and existing management techniques.

Partnership evaluation behaviour was also an important component of the framework, with both participation and support being crucial factors (Figure 15). Further, the findings suggest that while evaluators can adopt participatory approaches, these can only trigger influence if they underpinned by partnership members’ support. Partnership evaluation behaviour is also strongly associated with the partnership functioning. More specifically, lower functioning partnerships exhibit less supportive evaluation behaviour. Equally, evaluation behaviour is affected by broader contextual factors, such as existing policy and the evaluation readiness of a partnership’s broader context.

With respect to the role of individual characteristics, evaluation readiness and existing attitudes were important due to their role in triggering evaluation mechanisms into outcomes, as well as their impact on participation and perceptions of credibility. These characteristics were also affected by partnerships’ broader contextual factors including the evaluation readiness of the partnership’s context and policy.
In line with the original framework, the broader contextual factors surrounding the partnerships impacted on each of the framework’s components (Figure 15). Accountability is crucial for influence. This factor impacts on the evaluation approach and perceptions of credibility. In this respect, it also has the potential to affect all levels of influence. For this research, accountability requirements were particularly important for facilitating influence within the partnerships and at more collective levels in the sector.

Overall, the mixed methods analysis provides support for the conceptual framework. Exploring the relationships between the components within the model also highlights the complexities of evaluation influence pathways. More specifically, it highlights the reciprocal nature of influence, and the importance of these factors coming together to provide the opportunity for influence to occur. Some aspects of the framework are also more important for different types of influences than others. The importance of these factors and their role in triggering different levels of influence is now further explored and discussed alongside existing research to address the research aims and objectives.

8.3 Addressing the Research Aims and Objectives

8.3.1 Objective 1: Levels of Evaluation Influence Experienced by the Partnerships

Overall, the partnership members and the partnerships involved in this research experienced a range of evaluation influences. The commonly experienced influences are summarised below:

- As a consequence of evaluation, partnership members often thought more and learnt more about their programmes or partnerships. Equally, they frequently developed evaluation skills (general influence mechanisms). Evaluations had also highlighted aspects of programmes or partnerships as being more important than others (salience, cognitive/affective process).

- In terms of individual outcomes, changes in personal goals and aspirations were often experienced, although changes in individual practice tended to be more common for those involved in implementation rather than management or more strategic levels of the partnerships.

- For partnerships, justification and persuasion of board members or funders were frequent influences. Revising partnership aims and objectives as a consequence of evaluation was also common (agenda setting, cognitive/affective process). Motivational outcomes were not explored at a partnership level, although changes in
collaborative practice were common. Typically this involved collaborative changes in practice and programme cessation, change or continuation.

8.3.1.1 Support for existing literature

The role of evaluation in triggering stakeholders to think more about their programme is supported by Petty and Cacioppo (1986), who found that stakeholders engaged in elaboration when reading evaluation reports. Evaluations in this thesis also facilitated the development of evaluation skills and built capacity when desired. Similarly, King (2002) found that new skills, such as survey techniques, were learnt through evaluation. The evaluation literature also notes the impact of evaluation capacity building initiatives on evaluation skills, including developing logic models, designing data collection instruments and analysing data (Arnold, 2006; Brandon & Higa, 2004; Valéry & Shakir, 2005). The behavioural outcomes experienced in this research reflected those captured by Mark and Henry (2004). More specifically, these outcomes reflect those that identified in previous research and reviews (Henry, 2003; Oliver, 2009). In this research, however, changes in practice also related to evaluation. Partnership members often described improvements in reporting and evaluation processes, as a consequence of the evaluations and the skills that they had developed.

8.3.1.2 Instances where results differ

Greenberg et al. (2000) provide evidence for the influence of evaluation on policy-makers’ opinions. Changes in individual opinions or attitudes were less commonly cited in this research. This may be due to the evaluation findings matching existing stakeholder opinions or due to the challenges in changing opinions or attitudes through evaluation. This notion has some support from the work of Christie (2007) who found that the influence of evaluation data is mediated by decision makers’ previous beliefs about programme efficacy. The evaluation of the Drug Abuse Resistance Education (DARE) programme is also a useful example of the challenges in changing existing opinions and attitudes. This programme was continued despite evaluations indicating that the programme had no effect (Wysong, Aniskiewicz, & Wright, 1994). A later review of these influence pathways by Henry (2003) highlighted the role of “technical quality” in triggering the resulting changes to this programme over time. Future research is warranted to further unpack the evaluation attributes and conditions that are important for triggering changes in opinion.
8.3.1.3 New evidence

Areas of new evidence for evaluation influence relate to the evidence highlighting the influence of evaluation within a partnership context and at a programme level. For example, the evaluations in this research were frequently used to support justification of programme existence or to persuade board members or funders to support programme continuation or change. While these influences have been noted by Greenberg et al. (2000) and Shulock (1999), they have not been specifically explored within a partnership context. Heuristics or learning more about programmes or partnerships was also an important trigger for influence, although this mechanism has received less attention in existing research (Mark & Henry, 2004).

Salience was important for triggering influences at a partnership level. The role of salience as a change process for evaluation was also noted by Henry and Gordon (2001), although their example focused on a social problem. This research suggests that evaluation can also trigger salience at a programme and partnership level. Indeed, salience appeared to be particularly important for triggering partnership cognitive/affective and behavioural outcomes, such as agenda setting or changes in practice.

Evaluation also triggered motivational processes. While this outcome has received less attention in existing literature, it occurred frequently within the partnership members. For example, the partnership members frequently experienced increases in their motivation to work with their partnership and in their ownership of their partnership. This finding is important, as ownership can affect an individual’s involvement in a partnership (E. S. Weiss et al., 2002). Given the importance of participation in facilitating influence, not only in evaluation but also in the partnership’s processes to respond to evaluation, the potential for evaluation to enhance motivation, ownership and ultimately involvement in a partnership is an important finding. This suggests that evaluation cannot only triggering influences within partnerships and its members, but that it can actually enhance the functioning of partnerships. Given the challenges of securing harmonious functioning identified in the literature, this finding identifies an important influence of evaluation for partnerships.

8.3.2 Objective 2: Evaluation Attributes that Facilitated or Hindered Influence

The research evidence identified the importance of the evaluation inputs, the evaluator and the evaluation outputs in facilitating influence. A summary of these findings are provided below:
• Participatory evaluation approaches and evaluations underpinned by appropriately sophisticated and quality designs triggered evaluation influence.

• The evaluator was crucial for triggering influence. Specifically, evaluator skills and expertise, cultural competence and their internal or external status to the partnership were all important contributors to influence.

• In terms of the evaluation outputs, credibility and timeliness were very important contributors. Responsiveness and communication were moderately important factors.

8.3.2.1 Support for existing literature

The research suggested that participatory approaches to evaluation facilitated greater levels of influence. This finding supports previous work that indicated participatory approaches as important for facilitating use and enhancing influence (Christie, 2003; Greene, 1988; Preskill et al., 2003; Robinson & Cousins, 2004; Turnbull, 1999). In terms of participation, this research also found that engaging leadership and key decision makers was crucial for partnership-level influences. This finding corroborates the work of Patton (2008) and Plottu and Plottu (2009) who highlight the importance of key decision makers and major stakeholders in facilitating evaluation use.

In this research, responsiveness was moderately important for evaluation influence. Previous research also identifies the mediatory role of responsiveness in triggering evaluation influence processes. For example, Petty and Cacioppo (1986) suggest that if responsiveness has any effects, it will be because a more responsive report increases stakeholders’ motivation to engage in elaboration. This factor was potentially more important for securing influences at a collective level. For example, responsiveness was particularly important for influencing funders and higher level decision makers, with the evaluation information needing to meet their needs in terms of content, scope and dissemination format to trigger influence.

Communication between the evaluator and the partnership was also moderately important for influence in this research. Specifically, this research suggests that communication is important due to its impact on support for and participation in evaluation. The role of communication in facilitating other mechanisms of influence is also noted by Petty and Cacioppo (1986). Further, Peck and Gorzalski (2009) highlighted the impact of communication on the responsiveness of evaluations in their research. Thus, responsiveness
and communication are important due to their role in facilitating the opportunity for influence to occur. For example, in this research good communication facilitated engagement and participation in the evaluation and its findings, and thus, the opportunity for evaluation influence.

8.3.2.2 Areas of difference

Evaluation design was crucial for evaluation influence in this research. While existing theories note the importance of sophistication in terms of evaluation outputs (Mark & Henry, 2004), this research along with an earlier review of empirical evidence (Cousins & Leithwood, 1986) suggests that the sophistication of the evaluation design is also important for influence. More specifically, evaluations grounded in sound theory and underpinned by a sound match between programme complexity and evaluation sophistication facilitated influence. The difference in these findings may be a consequence of the complexity of some of the programmes and partnerships involved in this research. Moreover, these differences and the findings from this research highlight the importance of technical quality in evaluation, a finding supported by Henry (2003).

Timeliness was also recognised as highly important for influence, although it was not as crucial as the literature might suggest (Cousins, 2003). This could be for a number of reasons. First, the case studies were all underpinned by a continuous feedback cycle, thereby potentially reducing the impact of timeliness. Second, evaluation influence is facilitated through both the evaluation process and its findings. This suggests that timeliness may not be crucial for all mechanisms and outcomes of influence, as they may occur long after or even before evaluation feedback has been received.

8.3.2.3 New evidence

This research suggests that the rationale for engaging in evaluation is moderately important for evaluation influence, with a focus on learning and evaluation capacity building facilitating higher individual levels of influence. Others have also noted the influences of evaluations adopting evaluation capacity building approaches, typically describing changes in evaluation knowledge and skills (Arnold, 2006; Brandon & Higa, 2004; King, 2002; Valéry & Shakir, 2005). The impact of adopting a learning focus on influence, however, has not been well explored. Still, the notion is supported by Patton (2008) and Rossman and Rallis (2000) who advocate for building use into the process of evaluation. Similarly, a
survey of evaluators highlighted the importance of planning for use (Fleischer & Christie, 2009).

Evaluators played a crucial role in facilitating influence. More specifically, it was the competence of the evaluator that was crucial here. While this finding has some support from a review of empirical evidence on use by Johnson et al. (2009) and an across case study analysis by Kirkhart (2011), this research provides further evidence by suggesting that professional competence is important due to its impact on perceptions of credibility, quality and sophistication. Furthermore, cultural competence is important for enhancing responsiveness and participation.

Perceptions of credibility were highly important for influence. While credibility is noted as a possible precursor of use in existing theory (Cousins, 2003; Mark & Henry, 2004), there is little research on this factor. For this thesis, credibility was important for facilitating influence at all levels, and was largely a consequence of the partnerships’ perceptions of the evaluators’ skills and expertise. This finding corroborates the importance of evaluators, as well as providing an insight into the ways in which stakeholders make judgements about evaluations and their findings.

The importance of professional competence was also associated with the enhanced influence of external evaluations over internal. External evaluations were more likely to trigger influences due to their enhanced credibility. This area has received less attention in the literature. This may be due to the differences between internal and external evaluations being less significant at an international level. For example, internal evaluations within the New Zealand health sector are typically conducted by health sector staff with some research methods or evaluation training. Thus, this finding may be context dependent.

A sense of shared understanding of the evaluation purpose between evaluators and the partnership, and between the partnership members was identified as a potentially important factor in this research. This factor has received little attention in previous literature. This research suggests that this factor warrants consideration by existing theory, evaluators and in future research.

8.3.3 Objective 3: Partnership Functioning that Facilitated or Hindered Influence

The following points summarise the key findings relating to the importance of partnership functioning characteristics:

- Clarity of the partnerships’ purpose and ownership were crucial for influence.
In terms of partnership arrangements, leadership, decision making and adaptation or change processes to respond to evaluation were crucial.

8.3.3.1 Support for existing literature

Partnership arrangements, and more specifically leadership and decision-making processes, were key facilitators of evaluation influence. Moreover, support from leadership and decision makers was crucial for facilitating partnership-level influences. Leadership was also crucial due to its impact on partnership evaluation behaviour and the partnership’s adaptation or change processes. Research on other learning-based activities and evaluation has also noted the importance of leadership and managerial support (Hult et al., 2000; Ramus & Steger, 2000; Van Slyke & Alexander, 2006).

This research also highlighted the impact of partnerships’ capacity to respond to evaluation on influence. When partnerships had clear adaptation or change processes, evaluation influence was enhanced. The importance of such processes in facilitating learning from evaluation has also been noted (Hardy et al., 2003; Preskill & Torres, 2000). Equally, the roles of the partnership and the evaluator in these processes must be clarified. This was important for managing expectations and supporting opportunities for influence. Role clarification may also be particularly important for partnerships, as they may not have well-established systems and processes (Dickinson, 2006).

8.3.3.2 Areas of difference

Areas of difference tended to highlight aspects of partnership functioning that need to be better explored through future research. For example, partnership culture is a crucial component of partnership functioning in the literature (Antonacopoulou, 2006), although it was only moderately important for influence. More specifically, this research really only provided insight into the role of trust in hindering influence due to its impact on competition between partners and a culture of learning. While this finding supports the work of Preskill et al. (2003), this research has only touched on the complexities of partnership culture and its role in influence. Thus, this factor warrants exploration through further research.

Similarly, there was little evidence for the role of a written knowledge-management policy and information-sharing processes. This finding contradicts existing literature that suggests that policies and strategies to facilitate knowledge management are important for learning and change (Keen & Mahanty, 2006; Muro & Jeffrey, 2008). This differentiation suggests that it is the adaptation and change processes for responding to evaluation that are more
important for influence than strategies to share existing partner knowledge. Equally, these knowledge-management processes may have been happening at an unwritten and more informal level, as most of the partnerships in the research did not have formal knowledge-management policies or processes. Similarly, Hanberger (2011) suggests that the need for formal response systems also diminishes when dialogue around evaluation are authentic and built on trust and mutual responsibility.

8.3.3.3 New evidence

The clarity of a partnership’s purpose was crucial for evaluation influence. While previous research has identified incongruence in perceptions and expectations of partnership members as a potential source of conflict between partners (Austin, 2000), the role of this factor in evaluation influence has not been explored. This research suggests that a clear sense of purpose is important for enhancing participation in and support for the evaluation, thus enhancing the opportunity for influence. Equally, a sense of shared purpose facilitates partnerships in identifying ways to respond to evaluation, as there is a clear and shared sense of direction.

A sense of shared purpose also enhanced partnership members’ commitment or ownership of their partnership. This factor is also important for partnership functioning, as a lack of ownership resulted in lower levels of involvement, both in this research and in that conducted by Weiss et al. (2002). The importance of this factor for evaluation influence was the impact that it had on partnership members’ evaluation behaviour, partnership arrangements and culture. Specifically, low levels of commitment resulted in lower levels of support for and participation in the evaluation. A lack of commitment from partnership members was also detrimental to partnership culture, and specifically the sense of trust and competition between partners. This in turn hindered influence.

Equally, partnership members demonstrating lower levels of commitment were less likely to participate in decision-making processes. This was particularly detrimental to partnerships seeking to adopt participatory decision-making processes, as influence was hindered at a partnership level. Previous research has noted the importance of decision-making processes for partnership functioning (Casey, 2007; Mandell & Keast, 2008), although they are not well explored in the evaluation literature. While Mark and Henry (2004) begin to recognise their importance, this research highlights their importance for triggering influences at a partnership or programme level.
8.3.4 Partnership Evaluation Behaviour that Facilitated or Hindered Influence

Partnership evaluation behaviour was not directly targeted in the evaluation objectives. The conceptual framework highlighted its potential importance for evaluation influence. Subsequently, it was explored in this research and summarised below:

- Partnership participation in the evaluation, partnership support for the evaluation and partnership evaluation readiness were all extremely important for facilitating influence.

8.3.4.1 Support for existing literature

Partnership evaluation behaviour was crucial for facilitating influence. Partnership member participation increased individual influences, and participation from leadership and decision makers enhanced partnership-level influences. Further, this research also suggests that participation is important due to its impact on support for and ownership of the evaluation. Previous research on use and influence supports these findings (Christie, 2003; Greene, 1988; Patton, 1997, 2008; Plottu & Plottu, 2009; Turnbull, 1999). Collectively, these findings also provide support for the notion that participatory approaches to evaluation are more likely to facilitate influence.

8.3.4.2 New evidence

This research highlighted partnership members’ support for evaluation as crucial for influence, both at an individual and partnership level. This notion is supported by a review by Cousins and Leithwood (1986) and research by Cornachione et al. (2010), which highlighted the importance of stakeholder involvement and commitment for use. However, this research has helped to identify why these factors are important. Specifically, partnership support for evaluation was important for enhancing participation and commitment to processes that supported adaptation or change. When support was low, partnership evaluation behaviour could be symbolic, resulting in support for the basic evaluation implementation but not in any processes to support learning and change.

Evaluation readiness was also important for influence. Specifically, readiness was important due to its impact on participation. Lower levels of readiness resulted in lower levels of participation, and subsequently lower influence. Readiness was strongly related to partnership members’ support for evaluation, and was also impacted on by partnership members’ existing knowledge and attitudes towards evaluation. Preskill et al. (2003) identified a similar notion when suggesting that learning through participation in evaluation
is affected by an individual’s previous evaluation experiences and training. Equally, in their theoretical model of evaluation capacity building Preskill and Boyle (2008) recognise the role of an individual’s attitudes in their support for evaluation. This research provides empirical evidence for the impact of stakeholders’ attitudes on evaluation readiness, and for the impact of evaluation readiness on influence.

8.3.5 Individual Characteristics that Facilitated or Hindered Influence

Individual characteristics were also highlighted as important during the development of the conceptual framework. Subsequently, their role in evaluation influence was also explored. Key findings are summarised below:

- An individual’s evaluation readiness and existing attitudes towards evaluation facilitated and hindered evaluation influence.

8.3.5.1 Support for existing literature

Evaluation readiness and positive attitudes towards evaluation were highly important for influence. Individuals demonstrating higher levels of evaluation readiness and positive attitudes towards evaluation facilitate influence, especially at an individual level. This finding is supported by previous work that has also suggested that evaluation use and behaviour change is affected by individual values and beliefs (Alkin & Taut, 2003; Christie, 2007; Taut, 2003; Taut & Brauns, 2003).

8.3.5.2 New evidence

The findings from this research provide new insight into why these factors are important. Specifically, the findings suggest that evaluation readiness and existing attitudes towards evaluation are important due to their impact on participation and perceptions of credibility. This suggests that influence is mediated by an individual’s beliefs about evaluation itself. Christie (2007) identified a similar notion when finding that the influence of evaluation data was mediated by beliefs about programme efficacy. Thus, an individual’s existing evaluation beliefs and attitudes are important, as they impact on evaluation readiness and the potential for influence to occur.

8.3.6 Objective 4: Contextual Factors that Facilitated or Hindered Influence

The research highlighted the importance of a range of contextual factors. These findings are summarised in the two points below:
The evaluation readiness of the partnerships’ context was crucial for influence.

The political and organisational environment was also important. Accountability requirements, the policy context and traditional policies and management techniques were all highly important.

8.3.6.1 New evidence

The evaluation readiness of the partnerships’ context was crucial for influence. While research has highlighted the importance of evaluation readiness or capacity at a programme level (Plottu & Plottu, 2009), the evaluation readiness of a programme’s context has received little attention. For this research, the lack of resources dedicated to evaluation within the sector hindered influence. Evaluation was often described as an “add-on” that was not adequately planned or resourced. This resulted in some concerning approaches to evaluation, which were typically symbolic and conducted by someone without appropriate training. This challenges influence, as an evaluation’s approach and evaluator competence are crucial for triggering influence.

The sector’s willingness and support for evaluation was also important. At a collective level, existing attitudes towards evaluation often hindered influence. Evaluations, particularly those focusing on process, were often perceived to be of low credibility and subsequently resulted in lower levels of influence within the sector. These perceptions of credibility were closely connected, and even reflected the accountability requirements of the sector. Keast et al. (2007) also note the sector’s focus on outcomes as a potential barrier to understanding partnerships and their programmes. This research provides empirical support for this notion and for its impact on influence.

In addition, the focus on outcomes for accountability often required complex evaluations to be minimised into simple snapshots. A similar trend has been noted by Vos and Mathers (1998). Specifically, they describe the sector’s focus on randomised controlled trials, as well as its attempts to judge complex public health programmes with the same yardsticks used for medical interventions. This research suggests that this approach to accountability minimises the potential value and influence of evaluation for the sector. This finding also highlights the challenges of balancing the need to meet accountability requirements within the sector with the potential for facilitating improvement or influence at a more collective level.
Shifts in policy also hindered influence. Specifically, shifts in policy impacted on the commitment of partnership organisations and the clarity of the partnerships’ purpose. This hindered partnership functioning and influence. For example, the reduced funding that resulted from policy shifts also reduced some stakeholders’ support and willingness to engage in evaluation, as funding was prioritised for programmes. While Smith et al. (2010) note the impact of shifting policies and priorities on health programmes, the impact of policy shift on evaluation influence has received less attention.

Traditional policies and management techniques within the sector hindered partnership functioning, and thus the potential for influence. For example, existing funding environments did not facilitate partnership working but promoted competition between partners. This impacted on trust and subsequently evaluation influence. Previous research supports this notion by highlighting the impact of the longstanding hierarchical relationships between organisations, existing contractual relationships and strong demands for accountability on partnership functioning (Keast et al., 2007; Lewis, 2005). This research suggests that traditional policies and management techniques are also important for influence.

8.3.7 Summary

Reviewing the findings alongside existing literature has highlighted the contribution of this research to our current understanding of evaluation influence. This research has informed our understanding of the role of programme contexts, and more specifically partnerships, in evaluation influence. In addition, the importance of broader contextual factors has been highlighted. Overall, these findings make an important contribution to our understanding of evaluation influence. The findings also highlight a number of implications to be considered by existing theory and practice. These are discussed in the next section on research implications.

8.4 Research Implications

8.4.1 Implications for Existing Theory

This research provides support for the conceptual framework and for the evaluation theories that underpin it (Cousins, 2003; Mark & Henry, 2004). In terms of existing theory, the research offers support for the role of evaluation attributes in influence. Still, this research has also identified the role of a programme’s organisational context in evaluation influence. More specifically, this research has captured the complexities of a partnership context, as
well as the ways in which this can facilitate or hinder evaluation influence. This highlights the importance of acknowledging a programme’s organisational context in theories of influence.

Furthermore, this research has highlighted the importance of organisational processes. While Mark and Henry (2004) capture the importance of the decision- or policy-making setting in their model at a broader level, this research has begun to unpack these processes. In doing so, it has highlighted the importance of specific organisational processes such as leadership, decision-making and adaptation or change processes in facilitating influence. In addition, the clarity of evaluator and stakeholder roles in the processes relating to evaluation, and particularly in responding to its findings, are important for influence. While this finding may be particularly salient for partnerships, it is important that more generic theories of influence recognise these processes.

A further implication for theories of evaluation influence is the importance of a sense of shared understanding. This factor was important for both partnership functioning and evaluation influence. Existing theory therefore, would benefit from beginning to recognise the importance of programme and evaluation clarity in facilitating influence. While this implication is particularly salient for partnership contexts were multiple priorities must be balanced, it is equally applicable to evaluations working with a wide range of stakeholders.

The research provides support for the individual and interpersonal evaluation mechanisms and outcomes identified by Mark and Henry (2004), especially those at an individual and interpersonal level. While the research suggests that some mechanisms and outcomes may be harder to achieve than others, further research is needed to identify any specific implications. Nevertheless, this research has identified the role of stakeholder characteristics and behaviour in triggering influence. While existing theories highlight the role of participation, the importance of support and readiness is not well captured. The crucial nature of these factors highlights the importance of giving greater attention to the role of stakeholder characteristics and behaviour in existing theories of influence.

This research has also highlighted the importance of context in evaluation influence. While existing theories note the role of environmental contingencies (Mark & Henry, 2004), little attention has been given to the specific factors within an evaluation environment. This research highlighted the importance of the evaluation readiness of a programme’s context, such as resources dedicated to evaluation and the sector’s support for evaluation. A programme’s political and organisational contexts were also important. In particular, the
policy context and accountability requirements had implications for evaluation influence and partnership functioning. Furthermore, these factors appeared to be particularly important for facilitating partnership and more collective-level influences. It is important therefore, that attention is given to specific environmental contingencies.

Specific factors within the conceptual framework were also important for different levels of influence. For example, credibility and responsiveness were particularly important for collective-level influences. Equally, leadership was crucial for partnership-level influences. This suggests that developing theories for different levels of influence is also warranted. It is important therefore, that we continue to explore influence at different levels and across a diverse range of contexts to inform our current understanding of influence and to develop strategies to enhance different types of influence.

8.4.2 Implications for Evaluation Practice

In terms of an evaluation approach, opportunities for influence are maximised by adopting a participatory approach that is responsive to stakeholder needs. Equally, evaluation needs to be technically sound and appropriately sophisticated. Striking this balance between stakeholder needs and technical quality has been discussed by Greene (1990) and Henry (2003). While Patton (1997, 2008) promotes the role of stakeholder needs in driving evaluation design to facilitate influence, Greene (1990) and Henry (2003) suggest that the technical quality of evaluation is also important. This research supports this notion and evaluators therefore, need to maintain technical quality while also addressing stakeholder needs. This can enhance credibility and facilitate influence, particularly beyond the level of individual stakeholders. Adopting evaluation activities that promote the development of skill acquisition and build evaluation capacity will also provide greater opportunities for influence by enhancing existing attitudes towards evaluation and evaluation readiness.

The benefits of these approaches to evaluation are built on the assumption that those for whom evaluation intends to or needs to influence are actively engaged in the evaluation process. While this was true for the majority of stakeholders, adopting such approaches did not facilitate influences beyond the partnership and at more collective levels within the sector. For these stakeholders, credibility and responsiveness were more important. Thus, evaluators must give attention to dissemination strategies and the different needs of stakeholders. A further challenge to influencing stakeholders at this level was their need for concise information. Evaluators therefore, need to develop approaches to dissemination that meet the needs of these stakeholders without losing the value and potential influence of
evaluation. This challenge is particularly salient for evaluators working with complex programmes, such as whole systems approaches that often involve complex evaluations that may be more challenging to summarise and disseminate.

Evaluators can enhance influence by engaging leadership and other key decision makers in the evaluation. Exploring a programme or partnerships processes for decision making and adaptation or change may also enhance opportunities for influence. While an evaluator may not be able to control these processes, they can highlight their importance for influence or even facilitate these processes for the evaluation. This has implications for the role of an evaluator, and their capacity or willingness to be involved in processes to respond to evaluation. To trigger influence, however, influence must be planned for and built into the evaluation process.

**8.4.3 Implications for Existing Literature**

The conceptual framework makes a unique contribution to the evaluation literature by highlighting the importance of a programme’s organisational and broader context in evaluation influence. The value in recognising the broader contextual impacts on evaluation influence is also supported by Mark and Henry (2004) who note the importance of exploring influence across a range of different contexts. Indeed, the conceptual framework has begun to unpack some of the “environmental contingencies” that are presented in their model. The conceptual framework developed for this thesis also drew on existing evidence to highlight the role of stakeholder characteristics and evaluation behaviour in facilitating evaluation influence. Importantly, this research also provides empirical evidence that begins to explore the conceptual framework and the relationships within it. This evidence makes an important contribution to the existing literature.

The development of an innovative approach to mixed methods data integration and analysis makes a significant contribution to the mixed methods literature. While there is still little guidance on the integration of data sets from different methods (Greene, 2007), the framework draws on the experience of other mixed methods evaluators, researchers and theorists (Lee & Greene, 2007; McConney et al., 2002; Onwuegbuzie & Dickinson, 2008; Onwuegbuzie & Teddlie, 2003; Webb et al., 1966). In doing so, the framework provides a means of integrating research evidence in a manner that identifies similarities and differences between data sets with a view to developing a body of evidence to generate new insights and understandings, and support mixed methods inferences. This makes an important contribution to the current discussions on mixed methods analysis.
8.4.4 Implications for the Health Sector

Given the reciprocal nature of evaluation influence, it is useful to consider the potential implications of this research for the health sector. One of the key implications or considerations is the capacity for evaluation to trigger influence beyond an individual and partnership level. While evaluators can adopt strategies to enhance influence at a more collective level, the sector should also give attention to the ways in which it is commissioning, engaging in and responding to evaluation. First, better planning and resourcing for evaluation would enhance influence within the sector. Second, accountability requirements would benefit from capturing more about process and the potential for programmes to improve, as well as outcomes. Still, it is acknowledged that such requirements are difficult to change. Indeed, it is not suggested that outcomes are no longer prioritised but that the bigger picture of these complex approaches to population health are better recognised, at least within some of the more collective levels within the sector.

This research also suggests that New Zealand health policy could better support the notion of partnership working. The competitive funding environment in particular was associated with difficulties in securing harmonious partnership functioning. Since the beginning of this thesis, the New Zealand health sector has taken steps to try and alleviate some of the challenges to partnership working, such as alliance partnerships. This research suggests that such action is warranted, although future research is needed to understand the challenges and opportunities afforded by such an approach.

8.4.5 Summary

This research has a number of potential implications. Overall, implications for existing theory relate to the importance of capturing a programme’s organisational and broader context, as well as the role of stakeholder characteristics and behaviour. In terms of evaluation practice, the findings highlighted the importance of planning for influence and building influence into the evaluation process. Implications for existing literature related to the development of the conceptual framework, the empirical evidence for evaluation influence and the development of the mixed methods data integration framework. Finally, potential implications for the New Zealand health sector related to their current approaches to commissioning, engaging in and responding to evaluation.
8.5 Strengths and Limitations

This section identifies the key strengths and limitations of this research. Specifically, the limitations relating to the design of each of the studies, the mixed methods approach and theoretical and conceptual challenges are explored.

8.5.1 The Survey

The survey in Study 1 was appropriate for addressing the research questions, and was particularly useful for developing an overview of evaluation influence within population health partnerships. This was particularly useful for exploring the conceptual framework at a broader level, given the lack of research evidence on evaluation influence. The survey design, however, was not without its limitations. Key limitations related to the instrument design, the sample size and measurement issues.

8.5.1.1 Survey design

As with many survey designs it was challenging to balance the need to reduce the burden on the participants with the need to gain the level of information needed to explore the model. A useful example is the questions on evaluation quality, credibility, timeliness and responsiveness. These questions were dichotomous and while they were well answered, a greater degree of variance in the responses would have been more useful for exploring the role of these factors in the model. This would have enabled the survey to provide greater insight into the role of these evaluation outputs in influence. On reflection, I would have maintained the variance that was in the earlier drafts of the survey. I feel that the benefits of doing this for the statistical analysis would be warranted, although it is not known whether this would be achieved at a cost to the number of participants who respond to these questions.

8.5.1.2 Sample size

The reduced sample size for the questions on evaluation influence brings some limitations to the statistical analysis, as having a larger sample is preferable. The Kaiser-Meyer-Olkin measure verified the sampling adequacy for the principal components analysis, although the Bartlett’s test of sphericity was not significant. Existing literature suggests that this may be a consequence of the sample size (Comrey & Lee, 1992; Knapp & Swoyer, 1967). While the sample size was also adequate for the statistical analyses undertaken, a larger sample size would have further strengthened the statistical analyses. This could have been better.
achieved if the survey did not have the dual purposes of addressing the research questions and identifying participants for the case studies. Focusing on the research questions alone would have enabled the survey to ask participants to think about a recently completed evaluation that they had been involved in. While this may pose some challenges to recall, it would have enabled more participants to fully complete the survey and would have strengthened the findings from Study 1.

8.5.1.3 Measurement issues

The survey was extremely useful for exploring each of the components in the conceptual framework. However, exploring partnership functioning and context were more challenging. Partnership culture for example, is a complex and dynamic phenomenon that is difficult to capture through items on a survey. While the survey used a range of items to explore partnership functioning, the high level of functioning identified by the partnerships was unexpected. This also made it difficult to explore any differences between high and low functioning partnerships in the survey. Research focusing on the role of partnership functioning may benefit from including a broader range of items to provide a better insight into partnership functioning. Furthermore, it was always anticipated that such challenges would also be mediated by the use of the case studies for further exploring these aspects of the framework. The mixed methods data integration and analysis also offered opportunities for recognising and responding to the limitations of each of the individual studies by allowing each study to be given greater attention or weighting for certain components of the framework. This also highlights the value in adopting a mixed methods approach for understanding complex social phenomenon.

8.5.2 The Case Studies

The mini case studies were important for addressing the research questions. They provided understanding and insight into the survey findings and the conceptual framework. They were particularly important for teasing out the relationships between different factors, as well as identifying the role of partnership functioning and contextual factors. Still there were a number of strengths and limitations inherent in the case studies that related to recall accuracy, researcher bias and the generalisability of the findings.

8.5.2.1 Recall accuracy

A potential limitation of the case studies was the challenge of recall accuracy for some of the partnership members. For two of the partnerships, the case studies were undertaken
about six to twelve months after the evaluations had been completed. This made it harder for some of the partnership members to recall their evaluation experiences. This could have limited the research in fully understanding the evaluation experiences of these partnerships. Schwarz and Oyserman (2001) support this notion in noting the difficulties in recalling behaviours from memory. They suggest that frequent behaviour and individual instances can be particularly problematic. In contrast, some of the partnership members suggested that the gap between the completion of the evaluations and the interviews gave them time to reflect on their experiences. While this may also lead to some bias, the majority of interviews certainly made an important contribution to addressing the research questions regardless of their timing.

8.5.2.2 Researcher influence and bias

During the interviews, partnership members were specifically asked about the evaluation influences that they had experienced. This focus on influence may have transferred onto the participants in a manner that impacted on the recall of their evaluation experiences, and possibly have prompted them to identify a broader range of influences. Exploring evaluation influence, however, is challenging. While a more open approach to the interviews was possible, it would have been harder to engage the interviewees in discussing the different types of influence. Further, this research was designed to explore a specific conceptual framework. It is hoped that this was achieved without overly influencing the responses to the interviews. Indeed, the variance in the evaluation influence experiences of the interviewees and in the emergence of new themes supports this notion.

8.5.2.3 Generalisability

A common critique of case study research is the generalisability of their findings, as it is assumed that the findings from these studies are only valid for the context of the particular case studies. However, authors such as Kvale (1996) have expanded the definition of generalisability to include analytical generalisability rather than just statistical generalisability. This “involves a reasoned judgement about the extent to which the findings from one study can be used as a guide to what might occur in another situation,” and puts a particular onus on the reader “to judge the soundness of the generalisation claim” (Kvale, 1996, p. 233). The use of multiple partnerships within the case studies and the across-study analysis also provides support for the potential for these findings to be relevant for evaluation influence within partnerships, and more generally. Further support for the
findings is also provided from the complementarity between the case studies, the survey and the existing literature.

8.5.3 The Mixed Methods Approach

The use of mixed methods in this research was extremely valuable for exploring the conceptual framework. The survey offered an initial overview of evaluation influence within population health partnerships. The case studies then provided a more in-depth insight into evaluation influence and the ways in which the different components and factors within the framework relate to one another. These case studies were particularly important for providing further insight into the experiences of stakeholders, as they could draw out and focus on the aspects of evaluation influence that were most relevant to them. In this respect, they provided the participants with greater input and flexibility than the survey. This was important for further exploring the conceptual framework and enabling new ideas or themes to emerge.

The research’s main inferences were reached primarily because of the mixed methods approach. While levels of influence and their contributing barriers or enablers were identified by each method alone, it was the combination of methods that brought together the identified levels of evaluation influence and the factors that facilitated and hindered influences in the survey, with the contextual meaningfulness and experiences of the partnership members from the case studies. The use of mixed methods also substantiated the pathways of influence that evaluations can ignite, as well as the complex ways in which a partnership context and other factors can facilitate or hinder influence.

The mixed methods approach was not without its challenges. Initially, attempts were made to draw two different methodologies together through the two studies. This caused too much conflict, as while each study may have lent itself to one methodology they were far more influenced by my previous experience as an evaluator and researcher. In previous work, a scientific realist approach was generally used to allow the flexibility to move from one method to another. At the early stages of this research, it was clear that this work had largely been guided by this approach. This approach provided the flexibility needed to shift between methods while also providing a clearer sense of direction for the research as a whole, and specifically for the data integration and mixed methods analysis.
8.5.4 Theoretical and Conceptual Challenges

Exploring the influence of evaluation on partnerships and their members presented some theoretical and conceptual challenges. The framework encompassed a number of different components and evaluation influences. While the literature was extremely useful for guiding the research and the specific types of survey and interview questions, it was the ability for participants to unpack and identify the ways in which an evaluation has influenced them that was more challenging. More specifically, the research relied on the ability of the participants to identify the ways in which they were influenced by evaluation, as opposed to other processes. This required the development of innovative questions and careful prompting during the interviews to support the participants. The capacity to tease out each of the different influences and the role of each factor therefore, is a potential limitation of this research. Preskill et al. (2003) also suggest that it can be difficult for people to recall specific uses of evaluation. The participants in this research did not appear to face such challenges and typically provided highly valuable insights into their experiences. Thus, the strength of this approach also reflects the participants’ ability to identify and share their evaluation experiences.

8.5.5 Summary

Overall, the research findings offer a valuable insight into evaluation influence within population health partnerships. While the research, like any other, has experienced some limitations, they have not hindered the interpretation of the research findings in a significant way. Underpinning the analysis of the survey, the case studies and the mixed methods data integration with the conceptual framework has also allowed the research to steadily build up an understanding of evaluation influence within population health partnerships. Importantly, the mixed methods data integration and analysis also enabled the limitations and the gaps in evidence to be recognised before the mixed methods inferences were developed. In this respect, the limitations of the individual studies were important for informing the outcomes of this research. This process has also sought to ensure that the findings did not go beyond the data and the evidence provided through each of the studies.

Overall, the value of the mixed methods approach is evident in the research findings. Still, adopting a mixed methods approach should not be taken on lightly. Truly mixing and integrating data requires significant time, although I would argue that it has also provided significant value and insight that would not have been possible when using one method alone.
8.6 Ethical Issues

The key ethical issues for this research were recognised and addressed through the ethical approval process for The University of Auckland Human Participants Ethics Committee. While all ethical guidelines were strictly adhered to, securing the anonymity of the interview participants for the case studies was sometimes challenging. This challenge was particularly relevant for one partnership, as members expressed negative attitudes towards one partnership member and their organisation. While these references were relevant to the functioning of the partnership, it was difficult to provide feedback that protected anonymity.

To address this challenge, the feedback identified the key factors that acted as barriers and enablers to evaluation influence within each partnership. For example, the quotations that focused on one partnership member really highlighted issues with the clarity of the partnership’s purpose and the roles and responsibilities of partnership members. Therefore, the feedback highlighted these factors as barriers, rather than overly focusing on the specific differences between partnership members. It was anticipated that this approach would still provide useful feedback to the partnership without causing unnecessary conflict or blame.

8.7 Future Research

The findings from this research have raised additional questions and ideas that warrant exploration through further research. For example, different levels of evaluation influence were triggered by different factors within the framework. This suggests that there are different pathways of influence for different levels of influence. While this research has identified the factors likely to be important for individual- and partnership-level influences, future research would benefit from exploring pathways to specific types and levels of influence. For example, exploring the pathways to collective levels of influence would be useful. In particular, this information is important for informing the practice of evaluators working at policy or other more collective levels.

Programme evaluation appeared to have less influence at collective levels within the sector. Key decision makers were typically described as focusing on outcome data, potentially leaving less opportunity for evaluation to influence programmes with a view to improvement. Future research exploring current decision-making processes and the role of evaluation or other evidence in these decisions is important for understanding evaluation influence within the health sector. Understanding more about these processes would inform evaluation practice and provide an insight into the ways in which evaluators could provide
feedback or better engage with decision makers to facilitate influences at this level, as appropriate.

Evaluations that built capacity and increased evaluation readiness enhanced evaluation influence. Further, individuals and partnerships demonstrating high levels of evaluation readiness experienced more influences. Future research, however, could provide greater insight into the specific evaluation capacity building initiatives and the stakeholders that need to be involved in them to facilitate different types and levels of influence. This would help evaluators to better build influence into the process of evaluations. In terms of readiness, future research should also seek to unpack the role of stakeholder willingness and capacity in facilitating influence. This knowledge would also be useful for guiding the ways in which evaluators can seek to facilitate influence, particularly at an individual level.

This research explored a broad range of factors likely to be important for evaluation influence. While this first step was appropriate given the lack of empirical evidence on influence, focusing on specific components within the framework would further our understanding of influence or the contribution of specific factors to influence. For example, research might seek to focus on specific types of influence, such as opinion or attitude change, or different types of participatory evaluation. Exploring this type of influence or other factors in more detail would highlight the specific level or characteristics of the factors that are most likely to offer opportunities for evaluation influence. A similar approach could be used to further explore the relationships between the factors or components within the model.

Future research should also seek to build on the data integration framework implemented in this research. This framework could be used by other researchers to inform and refine its development. The use of the framework by other researchers would also highlight the ways in which the framework does and does not support other mixed methods approaches in addressing their research or evaluation questions. This would help to inform the potential value of this framework for other mixed methods approaches.

**8.8 Conclusions**

The mixed methods approach has supported this research in beginning to understand the mechanisms and outcomes of evaluation influence within population health partnerships. The findings have provided valuable insight into the evaluation attributes, partnership functioning characteristics, stakeholder characteristics and behaviour, and contextual factors
that can facilitate and hinder influence. More specifically, the research suggests that evaluation can facilitate a diverse range of mechanisms and outcomes of evaluation influence, across a range of levels within partnerships. Subsequently, evaluation has the potential to facilitate programme improvement with a view to benefiting programme beneficiaries and their wider communities. The pathways to these influences, however, are reciprocal and complex. While individual influences are likely to be triggered by evaluation attributes and stakeholder characteristics, a programme’s organisational and broader contextual characteristics are crucial for triggering influences beyond this level. Nevertheless, evaluators are crucial for laying the pathways to influence at any level. Still, it is only when these pathways are underpinned and supported by a programme’s immediate and broader organisational context that the full potential, value and benefits of evaluation influence can be realised.
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Appendix 1: Summary of New Zealand Health Reforms

The broader organisational and policy context within which population health partnerships sit is likely to be important for partnership functioning, and thus evaluation influence. Indeed, divorcing organisations from their broader contextual environment fails to recognise factors likely to influence their motivation, objectives and behaviour in a partnership context (Rowe & Devanney, 2003). For example, partnership organisations are still likely to be affected by their continued involvement in some form of market, hierarchy or both (Rowe & Devanney, 2003). Equally, partnership functioning is affected by shifting policy priorities and organisational restructuring (Smith, et al. 2010). Thus, partnerships need to be understood within their broader environmental context (Rowe & Devanney, 2003; Powell and Exworthy, 2002).

In New Zealand for example, there has been regular and wide ranging reform of the health care system (Gauld, 2012). Perhaps one of the most noteworthy changes for this thesis followed the election of Labour, a centre left Government, in 1999. Specifically, the Government introduced a series of national health goals focused on public health improvement (King, 2000). The resulting restructuring replaced a single national purchasing agency with 21 District Health Boards (DHBs). DHBs were designed to decentralise planning and decision-making, and were also given the responsibility of running public hospitals and other public health services for their local populations (Gauld, 2012). These local populations ranged in size from just over 30 000 to over 450 000 (Tenbensel, Cumming, Ashton & Barnett, 2008).

The Ministry of Health also took on an expanded role including monitoring DHBs and implementing Labour’s health policy (Tenbensel, et al. 2008). The Government also established 80 primary health organisations (PHOS) in 2002 based on the Alma-Ata principles (Gauld, 2012). PHOs were designed to facilitate multi-disciplinary teams that focused on health promotion, managing patients with complex conditions and improving primary care access for their enrolled populations (King, 2001). At the same time, this approach to service planning and delivery was underpinned by an emphasis on integration across sectors and with local communities, resulting in increased numbers of partnerships (Ministry of Health, 2000).

Despite the emphasis on integration and decentralisation that underpinned Labour’s structural reforms, the resulting system was highly bureaucratic with high transaction costs, duplication of planning, purchasing and administrative activities (Gauld, 2012; Tenbensel,
et al. 2008). Therefore, when the new centre-right National Government were elected in 2008 they commissioned a review of the health system (Ministry of Health, 2009). This also highlighted bureaucracy as a problem, as well as inadequate access to front-line health services and a general lack of national coordination, particularly for issues such as quality and service integration (Gauld, 2012; Ministry of Health, 2009).

In response to these issues, the National Government sought to reduce duplication, improve regional and national coordination, and reduce waste and inefficiencies within the health system (Gauld, 2012). This resulted in a series of new organisational arrangements, including the establishment of the National Health Board. This board is responsible for the monitoring, funding and organisation of DHBs, and is also tasked with reducing duplication and bureaucracy (Gauld, 2012). The notion of ‘better, sooner, more convenient’ is also emphasised in the Government’s approach to healthcare (Ryall, 2008). The approach is well illustrated in their piloting of Integrated Family Health Centres based in primary care (Letford & Ashton, 2010). These services aim to reduce hospital admissions and integrate care (Ryall, 2008). Alongside these changes, the new Government also placed increased emphasis on clinical engagement, productivity, quality improvement and services access, especially to electives and cancer treatment (Ryall, 2008). Therefore, the sector remains committed to service integration and coordination, with organisations being encouraged to work together.

The research undertaken for this thesis was planned in 2006, with the Doctoral study formally starting in February 2007. Thus, the population health partnerships that this thesis focuses on commonly involved DHBs and PHOs, as well as other non-government providers, community-based health services and non-health sector organisations such as schools and local Government (Ministry of Health, 2000). However, the shifting policy priorities and structures that occurred during the development and implementation of this research are likely to present both challenges and opportunities for partnership functioning and evaluation influence. While previous research on evaluation influence has recognised the role of the political climate at an individual stakeholder or program level (Eisendrath, 1988; Haddock, 1998; Johnston, 1986; Malen, et al., 1988; Santhiveeran, 1995; Weiss, et al., 2005), little attention has been given to the role of broader contextual factors such as a program’s policy context, in evaluation influence. Thus, the thesis also aims to identify the contextual factors that facilitate or hinder evaluation influence within population health partnerships.
Appendix 2: Email invitation to Chief Executive Officers of health sector and other partnership organisations

Population Health Partnerships and Evaluation Influence

Phase 1: Survey

Researcher: Sarah Appleton

I would like to invite members of your organisation to take part in a survey for the above study. This survey represents the first phase of a larger study that is part of my PhD thesis, at the School of Population Health at the University of Auckland.

What are the aims of study? Overall the study aims to identify the influence of evaluation within population health partnerships. Specifically, this first phase is being carried out:

- To identify the type of population health partnerships currently working in New Zealand.
- To identify the type of evaluation that partnerships are involved in.
- Identify the role of partnership characteristics in evaluation influence.
- To identify any influence of the evaluation on the partnerships.

What are the benefits? Benefits include an understanding of the kinds of evaluation that can enhance/hinder the influence of evaluation within population health partnerships. This information should:

- Raise the issue of evaluation influence in the minds of those commissioning and conducting evaluation.
- Assist partnerships to identify the types of evaluation that will best meet their information needs.
- Assist partnerships to identify aspects of their functioning that may enhance/hinder evaluation influence.
- Inform the practice of evaluation within population health partnerships, particularly those evaluations that are seeking to have specific kinds of influence or learning outcomes.

What do I mean by partnership? Here, ‘population health partnership’ includes partnerships of two or more organisational bodies, which aim to improve public health outcomes through population health improvement and/or reduction in health inequalities. This means that the study is relevant for a wide range of partnerships including those working at a strategic level to address the social determinants of health, as well as those partnerships implementing specific initiatives, such as school nutrition programmes or oral health promotion at a local level.

What do I mean by evaluation? Evaluation is the use of data collection methods e.g. questionnaires or interviews to understand more about the work of the partnership or how a programme is working. This includes both internal and externally contracted evaluations.

What do I mean by evaluation influence? Evaluation influence is the affect of the evaluation on the partnership. This may be changes in the skills and knowledge of partnership members, changes to the program or services being implemented or changes to the collaborative practice of the partnership.

What does the organisation need to do? You do not need to do anything to enable members of your organisation to be invited to take part in the study, as a range of potential participants have been identified through publically available websites. To exclude your organisation from the study however, simply reply to the e-mail asking for any members of your organisation to be removed by the DATE
2010. It is important to note that the survey does not ask about organisations specifically, it only asks about the partnerships, how they work and if they are involved in evaluation.

**Who would take part and what are they invited to do?** Anyone involved in a population health partnership (as defined above). This includes those funding partnerships, program providers, partnership coordinators, leaders and evaluators. It is important to note, that participants **DO NOT HAVE TO BE INVOLVED IN AN EVALUATION TO TAKE PART.** Participation is voluntary and you can stop taking part at any time.

Potential participants are being invited to complete an online survey by the DATE 2010. The survey will take approximately 20 minutes. On completion of the survey participants will also be invited to enter their name into a draw **to win an iPod Touch.** These names will be stored separately from the survey data and will be deleted after the prize draw. The draw will be held on the DATE 2010, the region that the winner works in will be shared to let participants know that the draw has taken place.

**What happens to the information?** All information is anonymous. Nothing that could identify participants will be given to anyone or used in any reports on this research. The survey data will be analysed purely for the purposes of the research. Findings will be used to provide feedback to participants, write reports, the PhD thesis, publications and conference presentations.

**I would like to take this opportunity to thank you for the time taken to read this invite. A participant information sheet is also attached to this email.**

If you have any queries or require further information please do not hesitate to contact me on (09) 3737599 ext: 84977 or [SK.Appleton@auckland.ac.nz](mailto:SK.Appleton@auckland.ac.nz).

For any queries regarding ethical concerns you may contact the Chair, The University of Auckland Human Participants Ethics Committee, The University of Auckland, Office of the Vice Chancellor, Private Bag 92019, Auckland 1142. Telephone 09 373-7599 extn. 83711.

Yours Sincerely

Sarah Appleton

Researcher (PhD Candidate)

Health Systems
The School of Population Health
The University of Auckland
Private Bag 92019, Auckland
Tel: (09) 373 7599 ext. 84977
Appendix 3: Online survey of population health partnership members in New Zealand
1. Introduction

This survey asks about a partnership that you are currently involved with or have been involved with in the last 6 months.

When completing the survey please think of just ONE PARTNERSHIP that you are currently working with, maybe one that you know most about or are very involved in. Ideally, the partnership will be doing some evaluation but even if your partnership is not you can still complete the survey.

Before taking part, please read the consent form attached to your email invitation. This tells you all about the survey.

DON'T FORGET TO ENTER INTO THE IPOD TOUCH PRIZE DRAW AT THE END.

* 1. I have read the participant information sheet ‘Population health partnerships and evaluation influence: Phase 1: Partnership Survey’ and I consent to taking part in this survey.
   ○ Yes
   ○ No

2. Your Partnership

This section asks about the work and nature of your partnership. Please select the appropriate answer or type your answers in the spaces provided.

* 1. Which region(s) is your partnership working within? (choose all that apply)
   - Auckland
   - Bay of Plenty
   - Canterbury
   - Chatham Islands
   - Gisborne
   - Hawkes Bay
   - Manawatu-Whanganui
   - Marlborough
   - Nelson
   - Northland
   - Otago
   - Southland
   - Taranaki
   - Tasman
   - Waikato
   - Wellington
   - West Coast

   Other (please specify)
   

2. From the following, which best describes the kind of work that your partnership does? (choose all that apply)
   - Service commissioning
   - Service programme provision
   - Service integration
   - Service coordination
   - Resource exchange
   - Consultation between partners
   - Information sharing between partners

   Other (please specify)
**3. Which of the following relationships best describes your partnership? (choose one only)**

- [ ] Funding only (contractual)
- [ ] Information sharing (networking)
- [ ] Sharing information and reducing/alleviating activities (cooperation)
- [ ] Sharing information, reducing/alleviating activities and linking resources for mutual benefit (cooperation)
- [ ] Sharing information, reducing/alleviating activities, sharing resources and sharing decision making for a common purpose (collaboration)

Other (please specify)

**4. Roughly, how many organisations are involved in your partnership? (choose one only)**

- [ ] 2 to 5
- [ ] 6 to 10
- [ ] 11 to 15
- [ ] 16 to 20
- [ ] More than 20
- [ ] I am not sure

**5. Does the partnership involve organisations from outside the health sector?**

- [ ] Yes
- [ ] No
- [ ] I do not know

If yes, please specify the different sectors involved in your partnership

**6. Does the partnership have a formal agreement?**

- [ ] Yes
- [ ] No
- [ ] I do not know

**7. What is the main aim/goal of the partnership?**

**3. Evaluation**

The rest of the survey asks about any evaluation of your partnership or its work. Evaluation refers to the use of data collection methods, such as questionnaires or monitoring data, to understand more about your programme or partnership.
**1. Is your partnership, or any of its activities, CURRENTLY being evaluated? (choose one only)**

- Yes
- No

**4. Recent Evaluation**

**1. Has your partnership, or any of its activities, been evaluated WITHIN THE LAST 6 MONTHS? (choose one only)**

- Yes
- No

**5. Future Evaluation**

**1. Is your partnership, or any of its activities, likely to be evaluated WITHIN IN THE NEXT 12 MONTHS?**

- Yes
- No

**6. Understanding more about evaluation within population health partnerships**

1. This survey is the first part of a large study. The second phase will look at evaluation within population health partnerships in more detail. This will tell us more about the kinds of evaluation that are most useful for different types of partnerships.

For more information about this study and the chance to be involved, please provide your details below. Please note that these details will not be stored with the survey data. Providing your details here also does not mean that you are agreeing to participate in Phase 2. You may however, be contacted by a researcher to talk about the study and the possibility of your partnership being involved.

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone number</td>
</tr>
<tr>
<td>Email address</td>
</tr>
<tr>
<td>Partnership</td>
</tr>
</tbody>
</table>

**2. Earlier you indicated that your partnership is currently involved in evaluation, will this evaluation be completed by December 2010? (choose one only)**

- Yes
- No
- I do not know
3. Have you been given any feedback or findings on the evaluation yet? E.g. by talking with the evaluator, a workshop, a presentation, a written report, etc.

- Yes
- No

7. Understanding more about evaluation within population health partnerships

1. This survey is the first part of a large study. The second phase will look at evaluation within population health partnerships in more detail. This will tell us more about the kinds of evaluation that are most useful for different types of partnerships.

For more information about this study and the chance to be involved please provide your details below. Please note that these details will not be stored with the survey data. Providing your details here also does not mean that you are agreeing to participate in Phase 2. You may however, be contacted by a researcher to talk about the study and the possibility of your partnership being involved.

Name

Telephone number

Email address

Partnership

8. Evaluation Findings

This section asks about the evaluation findings.

1. Please respond to the following statements by selecting 'yes', 'no' or 'I do not know'. (choose only one answer for each)

The evaluation findings were:

- Given to me to review and comment on
- Shared with all partnership members
- Shared with people outside of the partnership
- Provided on time
- Credible e.g. believable trustworthy
- Useful for the partnership
2. Please indicate whether you agree or disagree with the following statements. (choose only one answer for each)

As a result of the evaluation:

I have thought about the program/service/partnership more
My views of the program/service/partnership have changed
I think that certain aspects of the program/service/partnership are more important than others

3. Please indicate whether you agree or disagree with the following statements. (choose only one answer for each)

As a result of the evaluation:

I now know more about evaluation
I have developed technical skills for doing evaluation (e.g. data collection or analysis)
I do/will carry out evaluation as part of my day to day work
I have a mindset of evaluative thinking

9. Evaluation Influence

This section asks about the influences of the evaluation with your partnership.

1. Please indicate whether you agree or disagree with the following statements. (choose only one answer for each)

As a result of the evaluation:

I have changed the way that I work
I have learnt more about the program/service/partnership being evaluated
I am more motivated to support the work of the partnership
I now feel an increased sense of ownership of the partnership
2. Has the partnership used the evaluation to do any of the following? (choose all that apply)

- Revise partnership aims and objectives
- Make decisions about staffing
- Make decisions about fiscal allocations
- Conduct strategic planning
- Make changes to existing programs
- Meet external accountability requirements
- Report to a board (or equivalent)
- Get new funding
- Justify program existence or continuation
- Other (please specify)

3. Please indicate whether you agree or disagree with the following statements. (choose only one)

Overall, the evaluation has:

- Improved the program/service
- Improved the networking/cooperation/coordination/collaboration between partners

10. Barriers and Enablers to Evaluation Influence

This section asks you to identify whether any evaluation or partnership characteristics supported (enablers) or hindered (barriers) the influence of the evaluation with your partnership.

1. Which of the following evaluation characteristics SUPPORTED the influence of the evaluation within your partnership?

- Evaluator skills and competence
- Evaluation quality
- Credibility of the evaluation e.g. trustworthiness
- Timeliness e.g. results given on time
- Communication from the evaluation
- Partnership participation in the evaluation
- Other (please specify)
2. Which of the following evaluation characteristics HINDERED the influence of the evaluation within your partnership?

-Evaluator skills and competence
-Evaluation quality
-Credibility of the evaluation e.g. trustworthiness
-Timeliness e.g. results not given on time
-Poor communication from the evaluation
-Lack of partnership participation in the evaluation
-Other

Other (please specify)

3. Which of the following partnership characteristics SUPPORTED the influence of the evaluation within your partnership? (choose all that apply)

-Clear partnership purpose
-Partner commitment to partnership
-Trust between partners
-Partnership culture
-Leadership
-Decision making processes
-Information sharing
-Systems to make changes in the light of evaluation findings
-Other

Other (please specify)

4. Which of the following partnership characteristics HINDERED the influence of evaluation within your partnership?

-Unclear partnership purpose
-Lack of commitment to partnership from partners
-Lack of trust between partners
-Partnership culture
-Leadership
-Decision making processes
-Information sharing
-Systems to make changes in the light of evaluation findings
-Other

Other (please specify)

11. Contextual Factors

This section asks you to identify whether any contextual factors acted as barriers or enablers to evaluation influence with your partnership.
1. Which the following contextual factors SUPPORTED the influence of the evaluation within your partnership?

- Resources dedicated to evaluation
- Time to engage in evaluation
- Accountability requirements that focus on outcomes
- Support from partnership members for evaluation
- Support from senior members of partner organisations
- Policies and management techniques
- Competitive markets
- Other

Other (please specify)

2. Which of the following contextual factors HINDERED the influence of evaluation within your partnership?

- Lack of resources dedicated to evaluation
- Lack of time to engage in evaluation
- Accountability requirements that focus on outcomes
- Lack of support from partnership members for evaluation
- Lack of support from senior members of partner organisations
- Policies and management techniques
- Competitive markets
- Other

Other (please specify)

12. Taking Part in the Evaluation

This section asks about the involvement that you and the partnership had or are having in the evaluation.

1. How involved were/are you in the evaluation? E.g. How involved were you in planning the evaluation, data collection, reviewing reports, etc. (choose only one)

- No involvement
- Not very involved
- Moderately involved
- Highly involved

2. Please rate the involvement that the following individuals/groups had in the evaluation from very low to very high.

<table>
<thead>
<tr>
<th>Partnership leader</th>
<th>Very Low</th>
<th>Low</th>
<th>High</th>
<th>Very High</th>
<th>I Do Not Know</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program/service developers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program/service managers or directors</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program/service sponsors or funders</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff responsible for implementing the program/service</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intended beneficiaries of the program/service</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
3. Overall, how supportive were partnership members of the evaluation? (choose only one)

- No support
- Not very supportive
- Moderately supportive
- Very supportive

13. The Evaluation of Your Partnership or Programme

This section asks you about the evaluation that has or is currently being undertaken within your partnership.

1. What is/was being evaluated? (choose only one)

- The partnership itself
- The work of the partnership
- Both, the work of the partnership and the partnership itself
- Other
- I do not know

If 'other' (please specify)

2. What are the main reasons for doing the evaluation? (choose all that apply)

- To identify local needs
- To identify the impact of our work
- To understand more about the implementation of our work
- To identify the cost-effectiveness of a program/service
- To improve our work
- To increase the evaluation skills and knowledge of the partnership
- To develop systems and structures to support ongoing evaluation
- To meet accountability requirements
- To gather evidence to support future funding applications
- To support learning within the partnership
- Other
- I do not know

If 'other' (please specify)

3. Does/did the evaluation use a theoretical approach? E.g. mixed methods, participatory, empowerment, etc.

- Yes
- No
- I do not know

4. Evaluations can be a simple look or a detailed analysis of programmes and policies. How would you describe the partnership's evaluation?

- Very simple
- Simple
- Sophisticated
- Very sophisticated
5. Who is/was carrying out the evaluation? (choose one only)

- An external contractor
- An internal evaluation unit/department
- A member of the partnership
- Other

**Other (please specify)**: 

6. Please indicate whether you agree or disagree with the following statements

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>I Do Not Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>The evaluation is/was being carried out by someone with the right expertise and skills</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>The evaluation is/was being carried out by someone with cultural competence</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

14. Partnership Functioning

This section asks about the functioning of your partnership, such as partnership culture and leadership.

1. Please indicate whether you agree or disagree with the following statements. (choose only one answer for each statement)

**Partnership purpose**

- Our partnership has a clear vision, shared values and agreed service principles.
- There is widespread ownership of the partnership across and within all partners.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>I Do Not Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Our partnership has a clear vision, shared values and agreed service principles</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>There is widespread ownership of the partnership across and within all partners</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

**2. Partnership culture**

- Levels of trust within the partnership are high enough to encourage significant risk-taking.
- Differences in the power and status of partnership members can sometimes hinder open discussion.
- When things have not gone to plan the partnership uses this as an opportunity to learn.
- Partnership members operate from a spirit of cooperation rather than competition.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>I Do Not Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Levels of trust within the partnership are high enough to encourage significant risk-taking</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Differences in the power and status of partnership members can sometimes hinder open discussion</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>When things have not gone to plan the partnership uses this as an opportunity to learn</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Partnership members operate from a spirit of cooperation rather than competition</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

**3. Partnership arrangements and leadership**

- Each partner's areas of responsibility are clear and understood.
- There are clear lines of accountability for the performance of the partnership as a whole.
- The leader(s) encourages the partnership to reflect on its work.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>I Do Not Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Each partner's areas of responsibility are clear and understood</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>There are clear lines of accountability for the performance of the partnership as a whole</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>The leader(s) encourages the partnership to reflect on its work</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>
4. Decision making, information flow and learning

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data or other information is used to inform partnership decision making.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Decision making practices encourage the participation of all partnership members.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>The partnership has a clearly defined information and knowledge sharing policy.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>The partnership shares critical information across all members.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>The partnership shares information in a timely manner.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>There are arrangements to ensure that changes are made in the light of monitoring and evaluation findings, if appropriate.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

15. About You

This final section of the survey asks about you

* 1. How involved are you in the partnership? (choose only one)
   - ☐ Not very involved
   - ☐ Moderately involved
   - ☐ Very Involved

2. From the following, which best describes your role within the partnership. (choose all that apply)
   - ☐ Consultant/Advisor
   - ☐ Partnership leader
   - ☐ Manager/leader of a partnership organisation
   - ☐ Program/service developer
   - ☐ Program/service manager or director
   - ☐ Program/service sponsor or funder
   - ☐ Staff responsible for implementing the program/service
   - ☐ Intended beneficiary of program/service
   - ☐ Evaluator
   - ☐ Other

   If 'other' (please specify) [ ]

3. I am:
   - ☐ Male
   - ☐ Female
   - ☐ I would rather not answer

4. My age (years) is:
   - ☐ 16 to 19
   - ☐ 20 to 24
   - ☐ 25 to 29
   - ☐ 30 to 34
   - ☐ 35 to 39
   - ☐ 40 to 44
   - ☐ 45 to 49
   - ☐ 50 to 54
   - ☐ 55 to 59
   - ☐ 60 to 64
   - ☐ 65+
   - ☐ I would rather not answer
5. My ethnic group is:
   - NZ European
   - Maori
   - Pacific Island
   - Asian
   - European Other
   - Other
   - I would rather not answer

If 'other' (please specify)

6. Which type of organization best describes your employer? E.g. DHB, School, Private company

7. Have you undergone any evaluation or research methods training?
   - Yes
   - No

16. Evaluation Training

1. Which option best describes your level of evaluation and/or research methods training?
   - Short course e.g. HEFA evaluation course
   - Undergraduate
   - Post graduate
   - Doctorate Degree
   - Other

If 'other' (please specify)

17. Understanding Evaluation

1. Please indicate whether you agree or disagree with the following statements. (choose only one answer for each statement)

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation would help us to provide better services, programs, products and services if we tried to do more evaluation work.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There would be support among partnership members</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doing more evaluation would make it easier to convince managers/decision-makers/funders of needed changes.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

18. You have completed the survey!

Thank you kindly for your time and contribution to this research. Please use the box below to provide any further comments and then provide your details to be in to win an iPod touch.
1. Insert comments here

2. iPod Touch Prize Draw

As a token of appreciation for your time, I would like to invite you to take part in a prize draw to win an iPod Touch. To do this simply fill out your details below, remembering that these details will be stored separately from the survey data and will be deleted following the prize draw in March 2010.

Name
Email Address
Telephone number
Appendix 4: Research objectives by survey variables, sub-variables and specific survey questions

**Objective 1:** To identify which approaches to and aspects of evaluation that trigger the mechanisms and outcomes of evaluation influence within population health partnerships

**Objective 2:** To identify the level of evaluation influence experienced by the population health partnership. For example, does influence occur at the level of the individual, interpersonal or collective?

<table>
<thead>
<tr>
<th>Variable(s)</th>
<th>Sub-Variable</th>
<th>Survey Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>EVALUATION ATTRIBUTES</td>
<td>Focus</td>
<td>What is/was being evaluated? (choose only one)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ The partnership itself</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ The work of the partnership</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Both, the work of the partnership and the partnership itself</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ I do not know</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Other – please specify</td>
</tr>
<tr>
<td>Quality</td>
<td></td>
<td>Is the evaluation guided by a specific evaluation methodological approach? E.g. mixed methods, qualitative or quantitative</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Yes ☐ No ☐ I do not know</td>
</tr>
<tr>
<td>Sophistication</td>
<td></td>
<td>Evaluations can involve a brief overview or an in-depth analysis of programmes and policies. How would you describe the depth of the partnership’s evaluation? (rate from simple to sophisticated)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Very Simple ☐ Simple ☐ Sophisticated ☐ Very Sophisticated</td>
</tr>
<tr>
<td>Rationale</td>
<td></td>
<td>1. Which of the following best describes the key reason(s) for undertaking the evaluation: (choose all that apply)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ To identify local needs</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ To identify the impact of our work</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ To understand more about the implementation our work</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ To identify the cost-effectiveness of a program/service</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ To improve our work</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ To increase the evaluation skills and knowledge of the partnership</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ To develop systems and structures to support ongoing evaluation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ To meet accountability requirements</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ To gather evidence to support future funding applications</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ To support learning within the partnership</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ I do not know</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Other- please specify</td>
</tr>
<tr>
<td>Evaluator (input)</td>
<td>Internal/External</td>
<td>Who is carrying out the evaluation? (choose one only)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ An external contractor</td>
</tr>
<tr>
<td>Skills and expertise</td>
<td>Strongly Agree, Agree, Disagree, Strongly Disagree statements: The person responsible for the evaluation has the appropriate evaluation expertise and skills to conduct the evaluation</td>
<td></td>
</tr>
<tr>
<td>----------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Culturally appropriate</td>
<td>The person responsible for the evaluation has the skills needed to conduct the evaluation in a manner that is culturally appropriate</td>
<td></td>
</tr>
<tr>
<td>Credibility</td>
<td>The person responsible for the evaluation is perceived to be credible by the partnership</td>
<td></td>
</tr>
</tbody>
</table>

**Participatory Approach (input & partnership evaluation behaviour)**

<table>
<thead>
<tr>
<th>Individual participation</th>
<th>How involved were you in the evaluation? (choose only one)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ Not very involved ☐ Moderately involved ☐ Highly involved</td>
</tr>
</tbody>
</table>

**Partnership participation**

Please rate the participation that the following individuals/groups had in the evaluation from very low to very high, or highlight ‘I do not know’ or ‘not applicable’ as appropriate. (choose only one answer for each)

<table>
<thead>
<tr>
<th>Partnership leader</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program/service developers</td>
</tr>
<tr>
<td>Program/service managers or directors</td>
</tr>
<tr>
<td>Program/service sponsors or funders</td>
</tr>
<tr>
<td>Staff responsible for implementing the program/service</td>
</tr>
<tr>
<td>Intended beneficiaries of the program/service</td>
</tr>
</tbody>
</table>

Were partnership members given the opportunity to provide feedback on the evaluation findings before they became final?

<p>| ☐ Yes | ☐ No | ☐ I do not know |</p>
<table>
<thead>
<tr>
<th><strong>Feedback (outputs)</strong></th>
<th><strong>Continual feedback</strong></th>
<th><strong>Were evaluation findings provided regularly throughout the evaluation?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Timeliness</strong></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Credibility</strong></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Responsiveness</strong></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Partnership dissemination of feedback</strong></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Individual – general influence mechanisms</strong></th>
<th><strong>Elaboration</strong></th>
<th>Strongly Agree, Agree, Disagree, Strongly Disagree statements to ‘as a consequence of the evaluation....’: I have thought in-depth about the program/service/partnership</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Heuristics</strong></td>
<td>Developed knowledge of evaluation methods</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Learnt more about the program/service being evaluated</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Learnt more about the partnership</td>
<td></td>
</tr>
<tr>
<td><strong>Priming</strong></td>
<td>My perceptions of the program/service/partnership have changed</td>
<td></td>
</tr>
<tr>
<td><strong>Salience</strong></td>
<td>I know consider certain aspects of the program/service/partnership to be more important</td>
<td></td>
</tr>
<tr>
<td><strong>Skill acquisition</strong></td>
<td>Developed technical skills for doing evaluation (e.g. instrument development, data collection, analysis)</td>
<td></td>
</tr>
<tr>
<td><strong>Opinion/attitude valence</strong></td>
<td>My perceptions of the program/service/partnership have changed</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Individual – motivational outcomes</strong></th>
<th><strong>Personal goals and aspirations</strong></th>
<th>An increased ownership of what we do</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>An increased ownership of the partnership</td>
</tr>
<tr>
<td><strong>Individual – behavioural outcomes</strong></td>
<td><strong>New skill performance</strong></td>
<td>Integrated evaluation into my working practices</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Developed a mindset of evaluative thinking</td>
</tr>
<tr>
<td></td>
<td><strong>Individual change in practice</strong></td>
<td>Changed the way that I work</td>
</tr>
</tbody>
</table>

| **Interpersonal – Justification**          | Make decisions about staffing (SA to SD) |

<table>
<thead>
<tr>
<th><strong>Individual – cognitive/affective outcomes</strong></th>
<th><strong>Personal goals and aspirations</strong></th>
<th>An increased ownership of what we do</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>An increased ownership of the partnership</td>
</tr>
<tr>
<td><strong>Opinion/attitude valence</strong></td>
<td>My perceptions of the program/service/partnership have changed</td>
<td></td>
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<table>
<thead>
<tr>
<th><strong>Individual – motivational outcomes</strong></th>
<th><strong>Personal goals and aspirations</strong></th>
<th>An increased ownership of what we do</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>An increased ownership of the partnership</td>
</tr>
<tr>
<td><strong>Individual – behavioural outcomes</strong></td>
<td><strong>New skill performance</strong></td>
<td>Integrated evaluation into my working practices</td>
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<tr>
<td></td>
<td></td>
<td>Developed a mindset of evaluative thinking</td>
</tr>
<tr>
<td></td>
<td><strong>Individual change in practice</strong></td>
<td>Changed the way that I work</td>
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<p>| <strong>Interpersonal – Justification</strong>          | Make decisions about staffing (SA to SD) |</p>
<table>
<thead>
<tr>
<th>General influence mechanisms</th>
<th>Make decisions about fiscal allocations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Persuasion/ Minority-opinion influence</strong></td>
<td>Report to a board (or equivalent) (SA to SD)</td>
</tr>
<tr>
<td><strong>Interpersonal – Behavioural outcomes</strong></td>
<td>Collaborative changes in practice</td>
</tr>
<tr>
<td><strong>Collective – Cognitive/affective outcomes</strong></td>
<td>Agenda setting</td>
</tr>
<tr>
<td><strong>Collective – Behavioural outcomes</strong></td>
<td>Program continuation, cessation or change</td>
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<td><strong>Objective 3:</strong> To identify which aspects of partnership functioning can enhance/inhibit evaluation influence. (SA to SD)</td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Clarity of purpose, commitment and ownership</strong></td>
<td><strong>Clarity of purpose</strong></td>
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<tr>
<td><strong>Commitment</strong></td>
<td>There is a clear commitment to partnership working from the most senior levels of each partnership organization.</td>
</tr>
<tr>
<td><strong>Ownership</strong></td>
<td>There is widespread ownership of the partnership across and within all partners.</td>
</tr>
<tr>
<td><strong>Trust</strong></td>
<td><strong>Trust &amp; risk-taking</strong></td>
</tr>
<tr>
<td><strong>Culture</strong></td>
<td><strong>Power differences</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Learning</strong></td>
</tr>
<tr>
<td><strong>Collaboration</strong></td>
<td><strong>Partnership members operate from a spirit of cooperation rather than competition.</strong></td>
</tr>
<tr>
<td><strong>Partnership arrangements</strong></td>
<td><strong>Role clarity</strong></td>
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<td><strong>Accountability</strong></td>
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<td><strong>Leadership</strong></td>
<td><strong>Learning orientation</strong></td>
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<td><strong>Decision making</strong></td>
<td><strong>Data driven</strong></td>
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<td><strong>Participatory approach</strong></td>
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<tr>
<td><strong>Information flow</strong></td>
<td><strong>Knowledge management</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Critical information flow</strong></td>
</tr>
<tr>
<td><strong>Timeliness</strong></td>
<td>The partnership share information in a timely manner.</td>
</tr>
<tr>
<td><strong>Learning</strong></td>
<td><strong>Adaptation</strong></td>
</tr>
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</table>
| **Perceptions of the relationship between partnership functioning and evaluation influence** | **Enablers** | ☐ Clarity (or lack of clarity) of partnership purpose  
☐ Commitment and ownership of partnership members  
☐ Trust among partnership members  
☐ Partnership arrangements e.g. clarity over resources and accountability requirements  
☐ Culture e.g. spirit of cooperation  
☐ Leadership  
☐ Decision making  
☐ Information flow  
☐ Arrangements to facilitate change in the light of evaluation or other information  |
| | **Barriers** | ☐ Clarity (or lack of clarity) of partnership purpose  
☐ Commitment and ownership of partnership members  
☐ Trust among partnership members |
<table>
<thead>
<tr>
<th>Objective 4: To identify the contextual factors that can enhance/inhibit evaluation influence.</th>
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</thead>
<tbody>
<tr>
<td><strong>Perceptions of the relationship between contextual factors and evaluation influence</strong></td>
</tr>
</tbody>
</table>
| **Enablers** | ☐ Resources dedicated to evaluation  
☐ Time constraints  
☐ Accountability requirements that focus on outcomes  
☐ Lack of support from partnership  
☐ Traditional policies and management  
☐ Competitive markets |
| **Barriers** | ☐ Lack of resources dedicated to evaluation  
☐ Lack of time to engage in evaluation  
☐ Accountability requirements that focus on outcomes  
☐ The lack of support from some partnership members for evaluation  
☐ Traditional policies and management techniques  
☐ Competitive markets that promote competition for resources |
| **Broader evaluation readiness** | Management/decision maker readiness | Doing more evaluation would make it easier to convince managers/decision makers/funders of needed changes. |

**Partnership evaluation behaviour and individual characteristics suggested as important in the existing literature.**

<table>
<thead>
<tr>
<th>Partnership Evaluation Behaviour</th>
<th>Support</th>
<th>Overall, how supportive were partnership members of the evaluation? (choose only one)</th>
<th>Not very supportive</th>
<th>Moderately supportive</th>
<th>Very supportive</th>
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<tbody>
<tr>
<td>Partnership evaluation readiness</td>
<td>Partnership readiness</td>
<td>There would be support among partnership members if we tried to do more evaluation work.</td>
<td>See questions in evaluation attributes section.</td>
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<td></td>
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<tr>
<td>Partnership participation</td>
<td>Partnership participation</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Individual Characteristics</td>
<td>Involvement in partnership</td>
<td><strong>1. How involved have you been in the partnership? (choose only one)</strong></td>
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<td>Moderately involved</td>
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<td>Existing evaluation</td>
<td><strong>2. Have you undergone any formal evaluation or research methods training?</strong></td>
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<tr>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>-----------</td>
<td>-----</td>
<td>-----------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. <strong>What level best describes the qualifications?</strong></td>
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<tr>
<td>□ Short course e.g. HEHA</td>
<td>□ Post graduate evaluation course</td>
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<td>□ Undergraduate</td>
<td>□ Other, please specify</td>
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<table>
<thead>
<tr>
<th>Evaluation readiness</th>
<th>Individual readiness</th>
<th>Evaluation would/does help us to provide better programs, processes, products and services.</th>
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<td>Individual involvement in the evaluation</td>
<td>See questions on evaluation attributes.</td>
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## Descriptive Statistics

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**Note:** a. For each variable, missing values are replaced with the variable mean.
## Appendix 6: Missing data

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### Appendix 7: Key predictors of evaluation influence: Rotated factors loadings (PCA)

<table>
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<tr>
<th></th>
<th>Partnership Functioning</th>
<th>Evaluation Influence</th>
<th>Evaluation attributes and capacity building</th>
<th>Partnership evaluation behaviour</th>
<th>Evaluation readiness</th>
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<td>Individual involvement in the evaluation</td>
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<td>.070</td>
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<td>I have thought about the program/service/partnership more</td>
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<td>.692</td>
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<td>.087</td>
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<td>-.031</td>
<td>.049</td>
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<tr>
<td>I think that certain aspects of the program/service/partnership are more important than others</td>
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<tr>
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<td>-.092</td>
<td>.393</td>
<td>.563</td>
<td>.278</td>
<td>-.019</td>
</tr>
<tr>
<td>I have developed technical skills for doing evaluation</td>
<td>.001</td>
<td>.461</td>
<td>.688</td>
<td>.079</td>
<td>.012</td>
</tr>
<tr>
<td>I do/will carry evaluation as part of my day to day work</td>
<td>.094</td>
<td>-.061</td>
<td>.810</td>
<td>-.101</td>
<td>.102</td>
</tr>
<tr>
<td>I have a mindset of evaluative thinking</td>
<td>.043</td>
<td>.287</td>
<td>.638</td>
<td>-.123</td>
<td>-.079</td>
</tr>
<tr>
<td>I have changed the way that I work</td>
<td>-.116</td>
<td>.714</td>
<td>-.227</td>
<td>-.141</td>
<td>-.072</td>
</tr>
<tr>
<td>I have learnt more about the program/service/partnership being evaluated</td>
<td>-.105</td>
<td>.794</td>
<td>.111</td>
<td>.091</td>
<td>.011</td>
</tr>
<tr>
<td>I am more motivated to support the work of the partnership</td>
<td>.073</td>
<td>.599</td>
<td>.332</td>
<td>.204</td>
<td>-.002</td>
</tr>
<tr>
<td>I now feel an increased sense of ownership of the partnership</td>
<td>.029</td>
<td>.769</td>
<td>.294</td>
<td>.169</td>
<td>.166</td>
</tr>
<tr>
<td>Program/Service developers involvement</td>
<td>.061</td>
<td>.036</td>
<td>-.107</td>
<td>.808</td>
<td>.082</td>
</tr>
<tr>
<td>Program/Service managers involvement</td>
<td>-.080</td>
<td>-.142</td>
<td>-.009</td>
<td>.743</td>
<td>-.062</td>
</tr>
<tr>
<td>Program/Service providers involvement</td>
<td>.088</td>
<td>-.024</td>
<td>.279</td>
<td>.537</td>
<td>-.168</td>
</tr>
<tr>
<td>Intended beneficiaries of program/service involvement</td>
<td>Level of partnership support for the evaluation</td>
<td>Our partnership has a clear vision, shared values and agreed service principles</td>
<td>There is widespread ownership of the partnership across and within all partners</td>
<td>Differences in the power and status of partners can sometimes hinder open discussion.</td>
<td>Levels of trust within the partnership are high enough to encourage significant risk taking.</td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
<td>-----------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>-.006</td>
<td>.042</td>
<td>.294</td>
<td>.635</td>
<td>.010</td>
<td>.275</td>
</tr>
<tr>
<td></td>
<td>.781</td>
<td>-.103</td>
<td>.015</td>
<td>-.107</td>
<td>-.065</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>------</td>
<td>-------</td>
<td>------</td>
<td>-------</td>
<td>-------</td>
</tr>
<tr>
<td>The partnership shares critical information across all members.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The partnership shares information in a timely manner.</td>
<td>.764</td>
<td>-.110</td>
<td>-.081</td>
<td>.021</td>
<td>.002</td>
</tr>
<tr>
<td>There are arrangements to ensure that changes are made in light of evaluation findings, if appropriate.</td>
<td>.551</td>
<td>.070</td>
<td>.043</td>
<td>-.047</td>
<td>.028</td>
</tr>
<tr>
<td>Evaluation would/does help us to provide better programs, processes, products and services.</td>
<td>.126</td>
<td>.179</td>
<td>.106</td>
<td>.130</td>
<td>.670</td>
</tr>
<tr>
<td>There would be support among partnership members if we tried to do more evaluation work.</td>
<td>.111</td>
<td>.077</td>
<td>-.085</td>
<td>-.176</td>
<td>.798</td>
</tr>
</tbody>
</table>
Appendix 8: Study 3 (Case Studies): Participant information sheet and consent form for site visit access and document analysis

Population Health Partnerships and Evaluation Influence

Phase 2: Site Visits and Document Analysis

PARTICIPANT INFORMATION SHEET: PARTNERSHIP MEMBERS

Researcher: Sarah Appleton

I would like to invite you to take part in a partnership site visit for the above study. The site visits represent the second phase of a study that will form my PhD thesis, at the School of Population Health at the University of Auckland.

What are the aims of study? Overall the study aims to identify the influence of evaluation within population health partnerships. The site visits represent the second phase of the study and are designed to provide an in-depth analysis of the attributes of evaluation and partnership characteristics that can trigger the mechanisms and outcomes of evaluation influence. For example, the site visits will be used to identify the attributes of evaluation, aspects of partnership functioning and other contextual factors that can enhance/inhibit evaluation influence.

What are the benefits? Benefits include an understanding of the evaluation attributes and partnership characteristics that can enhance and hinder the influence of evaluation within population health partnerships. The findings should assist partnerships to identify the types of evaluation that will be best suited to their information needs. Equally, the findings should support partnerships with identifying aspects of their functioning that may enhance/hinder evaluation influence. In terms of evaluation, the findings can be used to inform practice, particularly of those evaluations that are seeking to have specific kinds of influence.

What do I mean by evaluation influence? Evaluation influence is the affect of the evaluation on the partnership. This may be changes in the skills and knowledge of partnership members, changes to the program or services being implemented or changes to the collaborative practice of the partnership.

Why have I been invited to participate in the study? Partnerships have been purposively selected to include partnerships currently engaging in evaluation that will be providing feedback within 2010. Some partnerships may also have been chosen for their partnership characteristics, such as across-sector collaboration or working at a strategic level.

What am I being invited to do? Partnership members are being invited to provide consent for their partnership to participate in a site visit. The site visit will involve interviews and an online survey with partnership members and the evaluator(s). It is important to note, that providing consent for your partnership to take part in the site visits does not mean that you have consented to take part in all aspects of the data collection. Additional consent will be required for the interviews and online survey. You are...
however, providing consent for your partnership members to be invited to participate in the interviews and online survey.

If the partnership is willing to participate in the site visit, then I would also like to ask partnership members to provide consent for the research to have access to partnership and evaluation documentation that are relevant to the purpose of this research. Relevant documents include evaluation plans, minutes of partnership meetings and terms of reference [a specific list of the documents will be provided here]. It is anticipated that these documents will be provided by a member of the partnership and it may involve up to 30 minutes of their time. With respect to the interviews, these will last between 45 minutes to an hour and the online survey will take approximately 20 minutes to complete. To take part in both, you will be giving up approximately 90 minutes of your time.

Participation in all aspects of the research is entirely voluntary and you may also choose to withdraw from any aspect of the research at any time. You and the partnership will be able to withdraw your data from the study until the 28th of February 2011.

What happens to the information? All information is confidential and anonymous. Nothing that could identify you will be given to anyone or used in any reports on this research. Any data gathered from the partnership will be analysed purely for the purposes of the research. Findings will be used to provide feedback to participants, write reports, the PhD thesis, publications and conference proceedings.

Following permission the interviews will be digitally recorded and fully transcribed to enable an in-depth analysis. Interview participants will be able to request a digital copy of their recording and a copy of their transcripts. Participants will also be able to review their responses and provide feedback up until the 28th of February 2011. To ensure anonymity all data collected through the site visits will be coded so any data collected from the partnership cannot be linked back to participants. The codes will be stored separately from the research data and any consent forms.

During the period of the study, all information will be kept in a locked cabinet on University premises and all computer records password protected. When the study is completed, all records and data will be stored for six years in a secure place at the University due to the use of the data for peer reviewed publication. Only I and my supervisor Dr Janet Clinton will have access to the data. All future use of the information collected will be strictly controlled under the Privacy Act. After six years the electronic data will be deleted and any paper records will be shredded.

Contact Details: If you would like more information about the study, please contact one of the following:

**Researcher:**
Sarah Appleton (PhD Candidate)  
Health Systems  
The School of Population Health  
The University of Auckland  
Private Bag 92019, Auckland  
Tel: (09) 373 7599 ext. 84977  
email: sk.appleton@auckland.ac.nz

**Supervisor:**
Dr Janet Clinton  
Health Systems  
School of Population Health  
University of Auckland  
Private Bag 92019, Auckland  
Tel: (09) 373 7599 ext. 89143  
email:j.clinton@auckland.ac.nz

**Head of Department:**
Professor Toni Ashton  
Health Systems  
School of Population Health  
University of Auckland  
Private Bag 92019, Auckland  
Tel: (09) 373 7599 ext. 86136  
email:t.ashton@auckland.ac.nz

For any queries regarding ethical concerns you may contact the Chair, The University of Auckland Human Participants Ethics Committee, The University of Auckland, Office of the Vice Chancellor, Private Bag 92019, Auckland 1142. Telephone 09 373-7599 extn. 83711.”

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE ON …………. for (3) years, Reference Number ……/……

I would like to take this opportunity to thank you for the time taken to read this participant information sheet.

Yours Sincerely

Sarah Appleton, Researcher (PhD Candidate)
1st February 2010

Population Health Partnerships and Evaluation Influence

Phase 2: Site Visits and Document Analysis

CONSENT FORM: PARTNERSHIP MEMBERS

This form will be held for a period of six years

Researcher: Sarah Appleton

- I have read the Participant Information Sheet.
- I have understood the nature of the research and why I have been selected.
- I have had the opportunity to ask questions and have them answered to my satisfaction.
- I have had time to consider whether to participate in this study.
- I know who to contact if I have any questions about the study.
- I agree to take part in this research.
- I agree to key partnership and evaluation documents to be provided to the researcher to be used for the purposes of this study only
- I am aware that participation in the interviews will take up to an hour and that completion of the online survey will take approximately 20 minutes if I chose to participate.
- I understand that I am free to withdraw participation at any time, and to withdraw any data traceable to me up until 28th February 2011.
- I wish to receive the summary of findings YES / NO delete as appropriate
- I understand that any data collected from the partnership will be kept for 6 years, after which they will be destroyed.

There may be a significant delay between data collection and publication of the results.

I (Full name) ______________________________ hereby consent to take part in this study.

(Signature) ______________________________ (Date) ______________________________

Name of person taking consent____________________________

(Signature) ______________________________ (Date) ______________________________
Appendix 9: Study 3 (Case Studies): Participant information sheet and consent form for interviews

[Content]

Population Health Partnerships and Evaluation Influence

Phase 2: In-Depth Interviews

PARTICIPANT INFORMATION SHEET: PARTNERSHIP MEMBERS

Researcher: Sarah Appleton

I would like to invite you to take part in an in-depth interview for the above study.

**What are the aims of study?** Overall the study aims to identify the influence of evaluation within population health partnerships. The interviews are designed to provide an in-depth analysis of the attributes of evaluation and partnership characteristics that can trigger the mechanisms and outcomes of evaluation influence. For example, the interviews will be used to identify the attributes of evaluation, aspects of partnership functioning and other contextual factors that can enhance/inhibit evaluation influence.

**What are the benefits?** Benefits include an understanding of the evaluation attributes and partnership characteristics that can enhance and hinder the influence of evaluation within population health partnerships. The findings should also assist partnerships to identify the types of evaluation that will be best suited to their information needs. Equally, the findings should support partnerships with identifying aspects of their functioning that may enhance/hinder evaluation influence. In terms of evaluation, the findings can be used to inform practice, particularly of those evaluations that are seeking to have specific kinds of influence.

**What do I mean by evaluation influence?** Evaluation influence is the affect of the evaluation on the partnership. This may be changes in the skills and knowledge of partnership members, changes to the program or services being implemented or changes to the collaborative practice of the partnership.

**Why have I been invited to participate in the study?** You are involved in a partnership that has consented to take part in a site visit, which includes interviews, an online survey and an analysis of key partnership and evaluation documents. It is important to remember that participation in the interview is entirely your choice regardless of the partnerships agreement to participate in the site visit.
What am I being invited to do? Take part in an in-depth interview that will involve a series of questions on the functioning of the partnership, its involvement in evaluation and the resulting influence of the evaluation on the partnership and/or its activities. The interview will take approximately 45 to 60 minutes to complete depending on the amount of information that you wish to share.

Participation is voluntary, you can decline to take part at anytime and you do not have to answer all of the questions. You will also be able to withdraw your data from the study until the 28th of February 2011.

What happens to the information? All information is confidential and anonymous. Nothing that could identify you will be given to anyone or used in any reports on this research. Any data gathered from the interview will be analysed purely for the purposes of the research. Findings will be used to provide feedback to participants, write reports, the PhD thesis, publications and conference proceedings.

Following permission the interviews will be digitally recorded and fully transcribed to enable an in-depth analysis. You will be able to request a digital copy of your recording and a copy of your transcripts. You will also be able to review your responses and provide feedback up until the 28th of February 2011.

To ensure anonymity all data collected will be coded so that names or contact details cannot be linked back to the interview data. The codes and consent forms will be stored separately from the interview data.

During the period of the study, all information will be kept in a locked cabinet on University premises and all computer records password protected. When the study is completed, all records and data will be stored for six years in a secure place at the University due to the use of the data for peer reviewed publication. Only I and my supervisor Dr Janet Clinton will have access to the data. All future use of the information collected will be strictly controlled under the Privacy Act. After six years the electronic data will be deleted and any written records will be shredded.

Contact Details: If you would like more information about the study, please contact one of the following:

**Researcher:**
Sarah Appleton (PhD Candidate)  
Health Systems  
The School of Population Health  
The University of Auckland  
Private Bag 92019, Auckland  
Tel: (09) 373 7599 ext. 84977  
email: sk.appleton@auckland.ac.nz

**Supervisor:**
Dr Janet Clinton  
Health Systems  
School of Population Health  
University of Auckland  
Private Bag 92019, Auckland  
Tel: (09) 373 7599 ext. 89143  
email: j.clinton@auckland.ac.nz

**Head of Department:**
Associate Professor Toni Ashton  
Health Systems  
School of Population Health  
University of Auckland  
Private Bag 92019, Auckland  
Tel: (09) 373 7599 ext. 86136  
email: t.ashton@auckland.ac.nz

For any queries regarding ethical concerns you may contact the Chair, The University of Auckland Human Participants Ethics Committee, The University of Auckland, Office of the Vice Chancellor, Private Bag 92019, Auckland 1142. Telephone 09 373-7599 extn. 83711.”

APPROVED BY THE UNIVERSITY OF AUCKLAND HUMAN PARTICIPANTS ETHICS COMMITTEE ON …………. for (3) years, Reference Number ……/……

I would like to take this opportunity to thank you for the time taken to read this participant information sheet.

Yours Sincerely

Sarah Appleton, Researcher (PhD Candidate)
Population Health Partnerships and Evaluation Influence

Phase 2: In-depth Interviews

CONSENT FORM: PARTNERSHIP MEMBERS

This form will be held for a period of six years

Researcher: Sarah Appleton

- I have read the Participant Information Sheet.
- I have understood the nature of the research and why I have been selected.
- I have had the opportunity to ask questions and have them answered to my satisfaction.
- I have had time to consider whether to participate in this study.
- I know who to contact if I have any questions about the study.
- I agree to take part in this research.
- I am aware that the interview will last approximately 45 to 60 minutes.
- I understand that I am free to withdraw participation at any time, and to withdraw any data traceable to me up until 29th February 2011.
- I agree to the interview being digitally recorded YES/NO delete as appropriate
- I am aware that the interview will be fully transcribed to enable in-depth analysis
- I wish to receive a copy of my transcript YES/NO delete as appropriate
- I wish to receive a copy of my digital voice file YES/NO delete as appropriate
- I wish to receive the summary of findings YES / NO delete as appropriate
- I understand that any data collected from the partnership will be kept for 6 years, after which they will be destroyed.

There may be a significant delay between data collection and publication of the results.

I (Full name) ______________________________ hereby consent to take part in this study.

(Signature) ____________________________ (Date) _______________________

Name of person taking consent____________________________

(Signature) ____________________________ (Date) _______________________

Sarah Appleton
Health Systems
School of Population Health
Faculty of Medical and Health Sciences
University of Auckland
Private Bag 92019
Auckland
New Zealand
Telephone: 64 9 373 7599 ext. 84977
Facsimile: 64 9 373 7503
Appendix 10: Study 2 (Case Studies): Interview schedule

1. Can you tell me a bit about the evaluation that your partnership is involved in?
   a. Why are you doing it?
   b. How are you doing it?

2. What parts of the evaluation have been the most useful? Why?

3. What parts of the evaluation have been the least useful? Why?

4. What has the evaluation been used for?
   a. (If not used, discuss later in question 10).

**Barriers and enablers to evaluation influence**

5. The following picture identifies the evaluation, partnership and context characteristics that are important for evaluation impacts. Thinking about your evaluation and partnership:
   (Point to evaluation characteristics in model)
   a. Did any of these evaluation characteristics support or hinder the impact of your evaluation?
   b. Did any other evaluation characteristics support or hinder the impact of your evaluation?

   (Point to partnership characteristics in model)
   c. Did any of these partnership characteristics support or hinder the impact of your evaluation?
   d. Did any other partnership characteristics support or hinder the impact of your evaluation?

   (Point to context characteristics in model)
   e. Did any of these context characteristics support or hinder the impact of your evaluation?

**Evaluation influence**

6. Did the evaluation provide new information on the program/partnership?

7. Can you think of any ways in which the evaluation has affected you?
   a. E.g. skill acquisition, opinion/attitude change, changes in practice. (individual level)

8. Has the information from the evaluation been used in any way?
   a. E.g. to get new funding or for accountability (interpersonal level)

9. Has the evaluation affected the partnership or program?
   a. E.g. collaborative change in practice; program continuation, cessation or change (collective level)

10. Has the evaluation had any other impacts?
    a. Planned or unexpected? Positive or negative?
Evaluation impact on:
- Partnership members
- The program
- The partnership

Partnership Characteristics
- Clear aims
- Partner commitment
- Learning culture
- Shared decision making
- Systems to make changes in light of evaluation findings
- Support for evaluation

Evaluation Characteristics
- Good design
- Focus on learning
- Quality evaluator
- Quality feedback
- Good communication
- Partnership participation
- Leadership participation

Context Characteristics
- Resources dedicated to evaluation
- Support for evaluation
- Time for evaluation
- Accountability requirements
- Traditional policies & management
- Competitive markets
Appendix 11: Study 3: Partnerships’ evaluation focus, aims and objectives, and feedback and dissemination processes

**Evaluation type and focus**

<table>
<thead>
<tr>
<th></th>
<th>Partnership A</th>
<th>Partnership B</th>
<th>Partnership C</th>
<th>Partnership D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scope</td>
<td>Small</td>
<td>Large</td>
<td>Small</td>
<td>Large</td>
</tr>
<tr>
<td>Focus</td>
<td>Program and partnership</td>
<td>Program</td>
<td>Program</td>
<td>Program and partnership</td>
</tr>
<tr>
<td>Type of evaluation</td>
<td>Formative; Process</td>
<td>Formative; Process &amp; Outcome</td>
<td>Formative; Process</td>
<td>Formative; Process &amp; Outcome</td>
</tr>
</tbody>
</table>

**Evaluation aims**

**Evaluation aims and objectives**

**Partnership A**
To conduct a process evaluation, which will:

- Identify the key stakeholders and their perceptions of their role;
- Identify the current status of Healthy Kai and any differences between the Otara and Mangere programmes;
- Evaluate the implementation of Healthy Kai through:
  - Evaluating the retailers experiences with- and perceived impacts of Healthy Kai;
  - Evaluating the local communities awareness of Healthy Kai and their recommendations for increasing community engagement;
- Identify the barriers or gaps that hinder the retailers and/or the local community from engaging with Healthy Kai;
- Identify recommendations for programme development and specifically recommendations to increase community engagement.

**Partnership B**
The aim of this evaluation is to conduct a formatively based process and immediate outcomes evaluation of the Enua Ola project in 14 newly registered Pacific churches in WDHB.

- Identify whether the project has effects on physical activity, improving nutrition or reducing obesity amongst participants.
- Establish whether the church promotes are healthier environment and culture.
- Determine the project strengths and weaknesses, including barriers and facilitators.
- Assess the worth of the community action approach adopted by the project.
Partnership C
- Describe the current implementation and stakeholder perceptions of a continuum of support from Primary Care to physical activity in the Nelson/Tasman region, and identify the role of Way2Go within it.
- Identify any need for development of the existing continuum of support with physical activity in the region, with reference to multiple stakeholder needs, gaps, strengths and weaknesses, and ways in which the Way2Go programme can contribute to this.
- Make recommendations for the region generally, and Way2Go specifically, in relation to the provision of a coordinated, integrated continuum care for those identified as needing support to be physically active.

Partnership D
- To assess the model and the process by which the new care pathway model has been developed and implemented. This will focus on assessing whether the model was implemented as planned and whether expected outputs were actually produced.
- To establish valid and reliable outcome measures to assess the effectiveness of the new care pathway model in the ongoing evaluation of the project. This will include measures to assess clinical collaboration and also service user outcomes.

**Evaluation feedback: dissemination and review**

<table>
<thead>
<tr>
<th></th>
<th>Partnership A</th>
<th>Partnership B</th>
<th>Partnership C</th>
<th>Partnership D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Verbal feedback</td>
<td>Monthly meetings</td>
<td>Monthly meetings</td>
<td>Monthly meetings</td>
<td>Monthly meetings</td>
</tr>
<tr>
<td>Written reports</td>
<td>Monthly and final</td>
<td>Monthly, interim, annual and final</td>
<td>Monthly, interim and final</td>
<td>Monthly, interim, annual and final</td>
</tr>
<tr>
<td>Workshops</td>
<td>For final report</td>
<td>For interim, annual and final report</td>
<td>For interim and final report</td>
<td>For annual and final report</td>
</tr>
<tr>
<td>Other</td>
<td>Newsletter</td>
<td>Newsletter</td>
<td>Newsletter</td>
<td>Newsletter</td>
</tr>
</tbody>
</table>
Appendix 12: An evaluation framework for the Centers for Disease Control and Prevention

Steps
- Engage Stakeholders
- Gather credible evidence
- Justify conclusions
- Describe the program
- Focus the evaluation design
- Ensure use and share lessons learned

Standards
- Utility
- Feasibility
- Propriety
- Accuracy
Appendix 13: Adapted CDC framework used to guide and structure the case study evaluations

Appendix 14: Evaluation methods used in the case study evaluations

<table>
<thead>
<tr>
<th>Evaluation Method</th>
<th>Partnership A</th>
<th>Partnership B</th>
<th>Partnership C</th>
<th>Partnership D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document analysis</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Stakeholder survey</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stakeholder interviews</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Participant survey</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Participants focus groups</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Outcome data</td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Capacity building</td>
<td>X</td>
<td></td>
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<td></td>
</tr>
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</table>
### Appendix 15: Example of the Microsoft Office Excel data file for the mixed methods data integration

<table>
<thead>
<tr>
<th>Eval Attributes</th>
<th>Survey evidence</th>
<th>Interview evidence</th>
<th>Relationships</th>
<th>Literature</th>
<th>Integration</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Evaluator role</strong></td>
<td>Not really explored</td>
<td>Flexibility important for influence at both levels. E.g., when evaluator responds to the changing needs of the program, influence is enhanced.</td>
<td>Important as it can impact on the evaluation approach and the responsiveness of the eval to program needs, e.g., flexibility important. More evidence is needed.</td>
<td>Evaluators make in their role will affect entire evaluation. Likely to be important for influence. Broadened evaluator role and co-producers of knowledge identified as more likely to facilitate influence.</td>
<td>Moderately important here - case studies all adopted same role and no evidence from survey. Role difficult to explore, as participants unlikely to know all the different roles that an evaluator can adopt. Flexibility is important for influence - evaluators that respond to dynamic needs of programs and partnerships were more influential.</td>
</tr>
<tr>
<td><strong>Evaluator skills &amp; expertise</strong></td>
<td>Identified barriers/enabler</td>
<td>Important for influence due to connection to credibility and perceptions of evaluation approach, and the sophistication and quality of the design. Important for influences beyond the partnership.</td>
<td>Impacts on perceptions of credibility, sophistication and quality.</td>
<td>Evaluator competence - professional and cultural are important for influence. Evaluator control, dialogue and reflection during meetings also linked to process use.</td>
<td>Crucial component of the model. Facilitates influence within and beyond the partnership. Enhances perceptions of credibility, sophistication and quality of the evaluation approach and outputs.</td>
</tr>
<tr>
<td><strong>Evaluator cultural competence</strong></td>
<td>Important for responsive evaluation and subsequently influence.</td>
<td>Impacts on responsiveness</td>
<td>See above</td>
<td>Important component here. Enhances responsiveness, which is important for influence.</td>
<td></td>
</tr>
<tr>
<td><strong>External/Internal (new theme)</strong></td>
<td>External sig higher partnership influence. External also more likely to use higher quality and sophisticated eval designs.</td>
<td>Higher influence at partnership level and beyond due to perceived credibility.</td>
<td>Impacts on credibility</td>
<td>Theory suggests that differences between internal and external evaluators are the objectivity of the external evaluator versus the internal and contextualised knowledge of the internal evaluator. This has not been linked to use but to evaluation practice at a more general level.</td>
<td>External evaluators also appear to be a crucial factor in NZ, as they are perceived to enhance the credibility of evaluations. External evaluators were also more likely to use approaches of greater sophistication and quality.</td>
</tr>
</tbody>
</table>
Appendix 16: Mechanisms of evaluation influence: Mixed methods data analysis and integration

Evaluation influence: General and cognitive-affective mechanisms.

<table>
<thead>
<tr>
<th>Evidence Sources</th>
<th>Survey Evidence (Study 2)</th>
<th>Case Studies Evidence (Study 3)</th>
<th>Framework Evidence (Study 1)</th>
<th>Data Integration (Study 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation influences</td>
<td>Individual</td>
<td>Partnership</td>
<td>Individual</td>
<td>Partnership</td>
</tr>
<tr>
<td>General influence mechanisms</td>
<td>High evidence</td>
<td>Moderate evidence</td>
<td>Elaboration; noted in the interviews in two cases.</td>
<td>Justification; Noted in the interviews in all four cases.</td>
</tr>
<tr>
<td>Elaboration: 87% thought more about their program or partnership.</td>
<td>Justification: 68% used evaluation to justify program existence.</td>
<td>Evaluations made partnership members reflect more on their work.</td>
<td>Evaluation was often used to justify program existence, to persuade others of program importance and to influence the opinions of others, typically funders.</td>
<td>Evaluation can develop evaluation skills and facilitate elaboration.</td>
</tr>
<tr>
<td>Heuristics: 63% learnt more about evaluation.</td>
<td>Heuristics: 57% used evaluation to meet accountability requirements.</td>
<td>Partnership members learnt more about their program or partnerships, as a consequence of the evaluation.</td>
<td>Theoretical evidence</td>
<td></td>
</tr>
<tr>
<td>Heuristics: 90% learnt more about program or partnership.</td>
<td>Persuasion: 57% used evaluation to report to a board.</td>
<td>Skill acquisition and capacity building; Noted in the interviews within three cases.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skill acquisition: 50% developed evaluation skills.</td>
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</tr>
</tbody>
</table>

246
<table>
<thead>
<tr>
<th>Evidence Sources</th>
<th>Survey Evidence (Study 2)</th>
<th>Case Studies Evidence (Study 3)</th>
<th>Framework Evidence (Study 1)</th>
<th>Data Integration (Study 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation Influences</td>
<td>Individual</td>
<td>Partnership</td>
<td>Individual</td>
<td>Partnership</td>
</tr>
<tr>
<td>Cognitive-affective outcome</td>
<td>Moderate evidence</td>
<td>Moderate evidence</td>
<td>Salience; Noted in the interviews in two cases</td>
<td>Agenda setting; Noted in the interviews in all four cases.</td>
</tr>
<tr>
<td></td>
<td>Opinion or attitude change: 57% changed their opinions or attitudes towards program.</td>
<td>Agenda setting:</td>
<td>Two of the partnerships noted how the evaluation had identified aspects of their programs as more important.</td>
<td>Partnership members in all cases describe the influence of the evaluation on the strategic direction of the partnership and its processes.</td>
</tr>
<tr>
<td></td>
<td>Salience: 79% perceived aspects of program to be more important than others.</td>
<td>61% used evaluation to revise partnership aims.</td>
<td>Two of the interviews in all four cases.</td>
<td>Partnership members in all cases describe the influence of the evaluation on the strategic direction of the partnership and its processes.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>66% used evaluation for strategic planning.</td>
<td></td>
<td>For one partnership the evaluation highlighted the need to increase the hours of program staff.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>28% used evaluation for staffing decisions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>39% used evaluation for fiscal decisions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>30% used evaluation to generate new funding.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Appendix 17: Outcomes of evaluation influence: Mixed methods data analysis and integration.**

**Evaluation influence: Motivational and behavioural outcomes.**

<table>
<thead>
<tr>
<th>Evidence Sources</th>
<th>Survey Evidence (Study 2)</th>
<th>Case Studies Evidence (Study 3)</th>
<th>Framework Evidence (Study 1)</th>
<th>Data Integration (Study 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation influences</td>
<td>Individual</td>
<td>Partnership</td>
<td>Individual</td>
<td>Partnership</td>
</tr>
<tr>
<td>Motivational outcomes</td>
<td>High evidence</td>
<td>Not explored in survey</td>
<td>Personal goals and aspirations; Frequent theme within 3 cases.</td>
<td>Enhanced partnership functioning; Noted in the interviews in one case</td>
</tr>
<tr>
<td>Personal goals and aspirations:</td>
<td>- 64% were more motivated to engage in the partnership.</td>
<td>Partnership members often experienced motivational outcomes, such as increases in their motivation and engagement with the partnership due to the evaluation.</td>
<td>Some partnerships felt that the evaluation enhanced the functioning of the partnership.</td>
<td>Theoretical evidence in Mark &amp; Henry's (2004) framework. The authors note that these outcomes have received less attention in the literature.</td>
</tr>
<tr>
<td>70% experienced an increase in their ownership of the partnership.</td>
<td>- Equally, they suggested that the evaluation can have a motivating effect on the program participants when outcome measures were used.</td>
<td>More often, the partnership members suggested that facilitating changes to the partnership itself were more challenging.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Evidence Sources</th>
<th>Survey Evidence (Study 2)</th>
<th>Case Studies Evidence (Study 3)</th>
<th>Framework Evidence (Study 1)</th>
<th>Data Integration (Study 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation influences</td>
<td>Individual</td>
<td>Partnership</td>
<td>Individual</td>
<td>Partnership</td>
</tr>
<tr>
<td>Behavioral outcomes</td>
<td>High evidence</td>
<td>Changes in practice:</td>
<td>High evidence</td>
<td>Changes to programs:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• 63% intended to perform new skills.</td>
<td></td>
<td>• 66% made changes to programs.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• 57% changed their practice.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Appendix 18: Evaluation attributes: Mixed methods data analysis and integration.

**Evaluation influence: Motivational and behavioural outcomes.**

<table>
<thead>
<tr>
<th>Evidence Sources</th>
<th>Survey Evidence (Study 2)</th>
<th>Case Studies Evidence (Study 3)</th>
<th>Framework Evidence (Study 1)</th>
<th>Data Integration (Study 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation influences</td>
<td>Individual</td>
<td>Partnership</td>
<td>Individual</td>
<td>Partnership</td>
</tr>
<tr>
<td>Motivational outcomes</td>
<td>High evidence</td>
<td>Personal goals and aspirations; Frequent theme within 3 cases.</td>
<td>Not explored in survey</td>
<td>Enhanced partnership functioning; Noted in the interviews in one case</td>
</tr>
<tr>
<td></td>
<td>Personal goals and aspirations:</td>
<td>Partnership members often experienced motivational outcomes, such as increases in their motivation and engagement with the partnership due to the evaluation.</td>
<td>Partnership members often experienced motivational outcomes, such as increases in their motivation and engagement with the partnership due to the evaluation.</td>
<td>Some partnerships felt that the evaluation enhanced the functioning of the partnership.</td>
</tr>
<tr>
<td></td>
<td>64% were more motivated to engage in the partnership.</td>
<td>Equally, they suggested that the evaluation can have a motivating effect on the program participants when outcome measures were used.</td>
<td>More often, the partnership members suggested that facilitating changes to the partnership itself were more challenging.</td>
<td></td>
</tr>
<tr>
<td>Evidence Sources</td>
<td>Survey Evidence (Study 2)</td>
<td>Case Studies Evidence (Study 3)</td>
<td>Framework Evidence (Study 1)</td>
<td>Data Integration (Study 4)</td>
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<tr>
<td>------------------</td>
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<td>----------------------------</td>
</tr>
<tr>
<td>Evaluation influences</td>
<td>Individual</td>
<td>Partnership</td>
<td>Individual</td>
<td>Partnership</td>
</tr>
<tr>
<td>Behavioral outcomes</td>
<td><strong>High evidence</strong></td>
<td><strong>High evidence</strong></td>
<td><strong>Noted in the interviews in two cases</strong></td>
<td><strong>Frequent theme within three cases.</strong></td>
</tr>
<tr>
<td>Changes in practice:</td>
<td><em>63% intended to perform new skills.</em></td>
<td><em>66% made changes to programs.</em></td>
<td><em>Changes in practice related to program and evaluation e.g. better reporting practices in program.</em></td>
<td><em>The partnership often described the ways in which evaluation had supported program continuation or change.</em></td>
</tr>
<tr>
<td>57% changed their practice.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Evaluation attributes: The importance of the evaluator.

<table>
<thead>
<tr>
<th>Levels of Evidence</th>
<th>Importance of Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluator Attributes</td>
<td>Survey (Study 2)</td>
</tr>
<tr>
<td><strong>Skills &amp; expertise</strong></td>
<td>Perceived importance</td>
</tr>
<tr>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
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<td></td>
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<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Cultural competence</strong></td>
<td>Perceived importance</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>External or external status (new theme)</strong></td>
<td>Statistically significant</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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Appendix 20: Evaluation outputs: Mixed methods data analysis and integration.

Evaluation attributes: The importance of evaluation outputs.

<table>
<thead>
<tr>
<th>Levels of Evidence</th>
<th>Importance of Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation Outputs</td>
<td>Survey (Study 2)</td>
</tr>
<tr>
<td></td>
<td>Case Studies (Study 3)</td>
</tr>
<tr>
<td></td>
<td>Relationships (Study 3)</td>
</tr>
<tr>
<td></td>
<td>Framework (Study 1)</td>
</tr>
<tr>
<td></td>
<td>Data Integration (Study 4)</td>
</tr>
<tr>
<td>Credibility</td>
<td>Perceived importance</td>
</tr>
<tr>
<td></td>
<td>Identified as a key barrier or enabler.</td>
</tr>
<tr>
<td></td>
<td>Crucial theme factor in one case; Noted in the interviews in two cases</td>
</tr>
<tr>
<td></td>
<td>Important for influence at all levels, particularly beyond the partnership.</td>
</tr>
<tr>
<td></td>
<td>Impacted on by Perceptions of evaluator’s skills and expertise.</td>
</tr>
<tr>
<td></td>
<td>Empirical evidence Credibility of feedback is important for influence.</td>
</tr>
<tr>
<td></td>
<td>High importance Perceptions of credibility affect influences at all levels, especially beyond the partnership.</td>
</tr>
<tr>
<td></td>
<td>Credibility is also strongly influenced by perceptions of the evaluator's skills and expertise.</td>
</tr>
<tr>
<td>Timeliness</td>
<td>Perceived importance</td>
</tr>
<tr>
<td></td>
<td>Identified as a key barrier or enabler.</td>
</tr>
<tr>
<td></td>
<td>Noted within the interviews in two cases</td>
</tr>
<tr>
<td></td>
<td>But all evaluations involved continuous feedback cycles.</td>
</tr>
<tr>
<td></td>
<td>No evidence</td>
</tr>
<tr>
<td></td>
<td>Empirical evidence Timeliness highlighted as important for facilitating evaluation use.</td>
</tr>
<tr>
<td></td>
<td>High importance Timeliness perceived as important for facilitating influence by partnership members.</td>
</tr>
<tr>
<td></td>
<td>Case studies suggest that adopting continuous feedback cycles within evaluation can reduce the role of timeliness as a barrier to influence.</td>
</tr>
<tr>
<td>Responsiveness</td>
<td>Not highlighted as important factor</td>
</tr>
<tr>
<td></td>
<td>Majority of participants’ felt that their evaluations were responsive.</td>
</tr>
<tr>
<td></td>
<td>Noted in all cases Feedback that responds to the needs of its audience was more influential.</td>
</tr>
<tr>
<td></td>
<td>Particularly important when reporting back to funders or to others not participating in the evaluation.</td>
</tr>
<tr>
<td></td>
<td>Impacted on by Shared understanding of evaluation purpose.</td>
</tr>
<tr>
<td></td>
<td>Theoretical evidence Highlighted as important in facilitating influence. Feedback must meet the needs of those who are intended to use it.</td>
</tr>
<tr>
<td></td>
<td>Moderate importance Feedback must meet the needs of intended users.</td>
</tr>
<tr>
<td></td>
<td>Particularly, important for influence among those who are not directly participating in the evaluation.</td>
</tr>
<tr>
<td>Levels of Evidence</td>
<td>Importance of Factor</td>
</tr>
<tr>
<td>--------------------</td>
<td>---------------------</td>
</tr>
<tr>
<td><strong>Evaluation Outputs</strong></td>
<td><strong>Survey (Study 2)</strong></td>
</tr>
<tr>
<td><strong>Communication</strong></td>
<td><strong>Perceived importance</strong>&lt;br&gt;• Identified as a key barrier or enabler.</td>
</tr>
<tr>
<td><strong>Shared understanding (new theme)</strong></td>
<td><strong>Not explored in the survey</strong></td>
</tr>
</tbody>
</table>
Appendix 21: Partnership clarity, ownership and culture: Mixed methods data analysis and integration.

*Partnership functioning: The importance of clarity of purpose, ownership and culture.*

<table>
<thead>
<tr>
<th>Partnership Clarity, Ownership and Culture</th>
<th>Levels of Evidence</th>
<th>Importance of Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Clarity of purpose</strong></td>
<td>Survey (Study 2)</td>
<td>Case Studies (Study 3)</td>
</tr>
<tr>
<td>Perceived importance</td>
<td>Frequent theme within two cases; Crucial theme in one case</td>
<td>Impacts on</td>
</tr>
<tr>
<td>- Identified as a key barrier or enabler.</td>
<td>- When partnership purpose is unclear, the evaluation is unusable.</td>
<td>- Partnership commitment.</td>
</tr>
<tr>
<td>- Clarity of purpose is particularly important for partnership level influences.</td>
<td>- Partnership evaluation behaviour.</td>
<td>- Highlight the mutual benefits of the partnership for its members.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ownership</th>
<th>Perceived importance</th>
<th>Frequent theme across three cases; Crucial theme in one case</th>
<th>Impacts on</th>
<th>Empirical evidence (partnership functioning)</th>
<th>Crucial factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identified as a key barrier or enabler.</td>
<td>Low commitment to the partnership impacts on engagement in both the partnership and the evaluation.</td>
<td>Partnership arrangements and culture e.g. attendance at steering group meetings and decision-making.</td>
<td>Impacts on partnership involvement.</td>
<td>- A lack of commitment to the partnership results in low engagement in the partnership itself and its evaluation; reducing opportunities for influence, especially at a partnership level.</td>
<td></td>
</tr>
<tr>
<td>Level of Evidence</td>
<td>Importance of Factor</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>-------------------</td>
<td>---------------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Partnership Clarity, Ownership and Culture</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Trust</strong></td>
<td>Perceived importance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Identified as a key barrier or enabler.</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>- Referred to collectively as partnership culture in the survey.</td>
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</tr>
<tr>
<td></td>
<td>Noted in the interviews</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>- Partnership culture was noted more generally, although trust and a culture of blame were specifically noted.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>- Trust in particular was connected to competition between partnership members, and was impacted on the partnerships’ funding environments.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Impacted on by</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Competition between partners.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- A sense of shared purpose.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Empirical evidence</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>- Successful collaboration is underpinned by trust.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>- Trust is important for risk-taking needed to support learning.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Moderately important</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Difficult to distinguish between the individual factors that made up partnership functioning, as in the literature.</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>- It is an important output of the partnerships functioning and is impacted on by contextual factors, such as competitive markets.</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>- Role of these individual factors in evaluation influence warrants further investigation.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>Power</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>Communication</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>Learning culture</strong></td>
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</tr>
</tbody>
</table>

**Partnership functioning:** The importance of partnership arrangements and information sharing.

<table>
<thead>
<tr>
<th>Partnership Arrangements and Information Sharing</th>
<th>Levels of Evidence</th>
<th>Importance of Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Leadership</strong></td>
<td>Survey (Study 2)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Case Studies (Study 3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Relationships (Study 3)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Framework (Study 1)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Data Integration (Study 4)</td>
<td></td>
</tr>
<tr>
<td><strong>Statistically Significant:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Participation from leadership results in significantly higher partnership level influences.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Frequent theme in three cases:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Leadership involvement enhances influence, as it enhances partnership evaluation behaviour.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Leadership played a role in supporting adaptation and change processes to respond to evaluation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Impacts on:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Adaptation or change processes to respond to the evaluation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Partnership evaluation behaviour.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Empirical evidence (partnership functioning):</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Participation of leadership is important for learning based activities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Openness and transformational leadership can facilitate learning in organisations.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Crucial factor:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Leadership participation can enhance evaluation influence, especially at a partnership level.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Leadership can also facilitate enhance partnership evaluation behaviour and support adaptation and changes process to respond to evaluation.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<p>| <strong>Decision-making</strong>                              |                       |                      |
| <strong>No Evidence</strong>                                  |                       |                      |
| <strong>Frequent theme across three cases:</strong>           |                       |                      |
| • Participatory and transparent decision-making facilitated evaluation influence, particularly at a partnership level. |                       |                      |
| • When decision-making processes were unclear influence was hindered, as no-one was driving decisions to respond to the evaluation. |                       |                      |
| • The involvement of leadership and key decision-makers in the evaluation was also important. |                       |                      |
| <strong>Impacted on by:</strong>                              |                       |                      |
| • Commitment to partnership e.g. steering group representation and autonomy to make decisions. |                       |                      |
| <strong>Empirical evidence</strong>                           |                       |                      |
| • Shared power and participatory decision-making are important for partnership functioning. |                       |                      |
| • Involving decision-makers in evaluation is important for influence. |                       |                      |
| <strong>Crucial factor:</strong>                              |                       |                      |
| • Participatory decision-making can facilitate influence, especially at a partnership. |                       |                      |
| • Clarity of decision-making processes is important for responding to evaluation. |                       |                      |
| • Involvement of key decision-makers in evaluation is important. |                       |                      |</p>
<table>
<thead>
<tr>
<th>Partnership Arrangements and Information Sharing</th>
<th>Survey (Study 2)</th>
<th>Case Studies (Study 3)</th>
<th>Relationships (Study 3)</th>
<th>Framework (Study 1)</th>
<th>Data Integration (Study 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Levels of Evidence</strong></td>
<td>No evidence</td>
<td>No evidence</td>
<td>No evidence</td>
<td>Empirical evidence (within organisations)</td>
<td>Low importance</td>
</tr>
<tr>
<td>KM Policy</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>A specific policy does not appear to be important. Processes relating to the sharing of evaluation information appear to be more important.</td>
</tr>
<tr>
<td>Info sharing</td>
<td>Perceived importance</td>
<td>Noted in the interviews in one case</td>
<td>Information sharing was perceived to be important for enhancing a positive partnership culture and evaluation influence.</td>
<td>Empirical evidence (within organisations)</td>
<td>Low importance Information sharing was perceived to be important for evaluation influence and partnership functioning.</td>
</tr>
<tr>
<td>Adaptation/change processes</td>
<td>Suggested relationship; Perceived importance</td>
<td>Frequent theme across all cases</td>
<td>Limited by partnership functioning, those with lower levels of functioning found it more difficult to support adaptation and change processes and were then more likely to look to the evaluator.</td>
<td>Theoretical evidence (check this)</td>
<td>High importance Adaptation and change processes are important for facilitating influence. Clarity of the role of evaluator and stakeholders appears to be important. Partnerships often found it difficult to respond to the evaluation, particularly when they were experiencing lower levels of functioning.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Levels of Evidence**
  - Survey (Study 2): No evidence
  - Case Studies (Study 3): Not noted in the interviews
  - Relationships (Study 3): Needs further research
  - Framework (Study 1): Empirical evidence (within organisations)
  - Data Integration (Study 4): Low importance

- **Importance of Factors**
  - KM Policy: No evidence
  - Information Sharing: Noted in the interviews in one case
  - Adaptation/Change Processes: Frequent theme across all cases

- **Levels of Evidence**
  - Survey (Study 2): No evidence
  - Case Studies (Study 3): Not noted in the interviews
  - Relationships (Study 3): Needs further research
  - Framework (Study 1): Empirical evidence (within organisations)
  - Data Integration (Study 4): Low importance

- **Importance of Factors**
  - KM Policy: No evidence
  - Information Sharing: Noted in the interviews in one case
  - Adaptation/Change Processes: Frequent theme across all cases
Appendix 23: Partnership evaluation behaviour: Mixed methods data analysis and integration

Partnership Evaluation Behaviour: The importance of partnership participation, support and evaluation readiness.

<table>
<thead>
<tr>
<th>Evaluation Behaviour</th>
<th>Levels of Evidence</th>
<th>Importance of Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Participation</strong></td>
<td>Survey (Study 2)</td>
<td>Empirical evidence</td>
</tr>
<tr>
<td></td>
<td>Case Studies (Study 3)</td>
<td>Empirical evidence</td>
</tr>
<tr>
<td></td>
<td>Relationships (Study 3)</td>
<td>Crucial factor</td>
</tr>
<tr>
<td></td>
<td>Framework (Study 1)</td>
<td>Crucial factor</td>
</tr>
<tr>
<td></td>
<td>Data Integration (Study 4)</td>
<td>Crucial factor</td>
</tr>
<tr>
<td><strong>Statistically significant; Perceived importance</strong></td>
<td>Higher levels of participation in evaluation result in significantly higher levels of evaluation influence, at an individual level.</td>
<td>Participation in evaluation processes can enhance evaluation influence. Participation from leadership is also important for influence at a partnership level.</td>
</tr>
<tr>
<td><strong>Noted in the interviews in two cases</strong></td>
<td>Participation perceived to be important for enhancing support and ownership of the evaluation.</td>
<td>Participation from decision-makers and leadership was also important for evaluation use.</td>
</tr>
<tr>
<td><strong>Impacts on</strong></td>
<td>Support for evaluation.</td>
<td>Participatory approach linked to use and influence.</td>
</tr>
<tr>
<td><strong>Empirical evidence (evaluation use)</strong></td>
<td>Ownership of evaluation.</td>
<td>Participation from decision-makers and leadership was also important for evaluation use.</td>
</tr>
<tr>
<td><strong>Crucial factor</strong></td>
<td>Participation in evaluation processes can enhance evaluation influence. Participation from leadership is also important for influence at a partnership level.</td>
<td>Participation in evaluation processes can enhance evaluation influence. Participation from leadership is also important for influence at a partnership level.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Support</strong></th>
<th>Frequent theme across all four cases</th>
<th>Theoretical evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Statistically significant</strong></td>
<td>Higher levels of support for evaluation from partnership members resulted in significantly higher levels of evaluation influence, at an individual level.</td>
<td>Earlier literature suggests that commitment to evaluation is important for evaluation use.</td>
</tr>
<tr>
<td><strong>Impact on</strong></td>
<td>Participation in the evaluation, particularly processes likely to facilitate influence.</td>
<td>Support for evaluation impacts on participation, and thus evaluation influence.</td>
</tr>
<tr>
<td><strong>Impacted on by</strong></td>
<td>Existing knowledge and attitudes.</td>
<td>Participation also appears to be particularly important for facilitating participation in processes designed to respond to evaluation.</td>
</tr>
<tr>
<td>Partnership Evaluation Readiness</td>
<td>Levels of Evidence</td>
<td>Importance of Factor</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>--------------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>Survey (Study 2)</td>
<td>Case Studies (Study 3)</td>
<td>Framework (Study 1)</td>
</tr>
<tr>
<td>Partnership Evaluation Readiness</td>
<td>Statistical Significant</td>
<td>Noted in the interviews in three cases</td>
</tr>
<tr>
<td></td>
<td>Partnership evaluation readiness was identified as part of the ‘evaluation readiness’ factor in the Principal Components Analysis.</td>
<td>This theme was closely linked to support for the evaluation, as support for the evaluation affected willingness to be involved.</td>
</tr>
<tr>
<td></td>
<td>Linear regression also indicated that evaluation readiness made a statistically significant contribution to evaluation influence (individual and partnership level).</td>
<td></td>
</tr>
</tbody>
</table>

- **Partnership evaluation readiness** was identified as part of the ‘evaluation readiness’ factor in the Principal Components Analysis.
- Linear regression also indicated that evaluation readiness made a statistically significant contribution to evaluation influence (individual and partnership level).
Appendix 24: Individual characteristics: Mixed methods data analysis and integration

*Individual characteristics: The importance of partnership involvement, evaluation readiness and existing knowledge and attitudes*

<table>
<thead>
<tr>
<th>Individual Characteristics</th>
<th>Survey (Study 2)</th>
<th>Case Studies (Study 3)</th>
<th>Relationships (Study 3)</th>
<th>Framework (Study 1)</th>
<th>Data Integration (Study 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Involvement in partnership</td>
<td>No suggested relationships</td>
<td>Noted in the interviews in two cases</td>
<td>Mediated by Partnership members’ commitment</td>
<td>Empirical evidence (partnership functioning)</td>
<td>Low importance</td>
</tr>
<tr>
<td></td>
<td>Majority of participants were 'moderately' to 'very involved' in their partnerships.</td>
<td>Members' may be involved in the partnership, such as attendance at meetings etc; however, it was there relating commitment to the partnership that appeared to be more important for evaluation influence.</td>
<td>- Involvement in the partnership can be impacted on by commitment to the partnership. - No direct connection to evaluation influence in the literature.</td>
<td></td>
<td>While involvement in the partnership is likely to be important for influence to have the opportunity to occur, it is the partnership member’s commitment to the partnership that appears to be more important for influence. - Partnership members may be 'involved' in the partnership without really being committed to its work or evaluation.</td>
</tr>
<tr>
<td>Individual evaluation readiness</td>
<td>Statistically significant; Perceived importance</td>
<td>Noted in the interviews in four cases</td>
<td>Impacted on Participation in the evaluation.</td>
<td>Theoretical evidence Willingness and capacity for evaluation is important for stakeholder engagement. Stakeholder behaviour is also important for the implementation of evaluation.</td>
<td>High importance</td>
</tr>
<tr>
<td></td>
<td>Individuals with higher evaluation readiness scores had significantly higher individual influence scores.</td>
<td>Evaluation readiness was associated with people's existing attitudes and beliefs. Changes in current policy context were also noted as reducing evaluation readiness, as the interviewees suggested that some people felt money could be better used for services. Evaluation readiness was a common theme.</td>
<td>- Participation in the evaluation. <strong>Impacted on by</strong> - Existing attitudes towards evaluation. - Recent shifts in health policy.</td>
<td></td>
<td>Evaluation readiness is an important contributor to evaluation influence. - It can affect participation in evaluation. - Individual evaluation readiness is impacted on by existing attitudes and the broader policy context of the partnership. E.g. shifts in policy that reduced funding for pop. Health exacerbated negative attitudes towards the commissioning of evaluation.</td>
</tr>
<tr>
<td>Individual Characteristics</td>
<td>Survey (Study 2)</td>
<td>Case Studies (Study 3)</td>
<td>Relationships (Study 3)</td>
<td>Framework (Study 1)</td>
<td>Data Integration (Study 4)</td>
</tr>
<tr>
<td>----------------------------</td>
<td>------------------</td>
<td>------------------------</td>
<td>------------------------</td>
<td>--------------------</td>
<td>--------------------------</td>
</tr>
<tr>
<td><strong>Levels of Evidence</strong></td>
<td><strong>Importance of Factor</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Indicated that evaluation readiness made a statistically significant contribution to influence (individual and partnership level).</strong></td>
<td><strong>was important due to its impact on participation in evaluation, which in turn impacted in influence.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Resistance to evaluation was identified as a barrier.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Existing attitudes &amp; knowledge</strong></td>
<td><strong>Perceived importance</strong></td>
<td><strong>Frequent theme in four cases</strong></td>
<td><strong>Impacts on</strong></td>
<td><strong>Empirical evidence (knowledge use)</strong></td>
<td><strong>High importance</strong></td>
</tr>
<tr>
<td>• Attitudes to evaluation was identified as a barrier to influence</td>
<td>• Negative attitudes towards evaluation could impact on its influence and perceptions of credibility and value.</td>
<td>• Perceptions of credibility.</td>
<td>• Knowledge use is affected by participants' receptivity to evidence and the confirmation or challenges that the evidence presents to their existing beliefs and assumptions.</td>
<td>• Attitudes towards evaluation can affect participation, evaluation readiness and perceptions of its credibility.</td>
<td>• The role of this factor can also be impacted on by shifts in the policy context.</td>
</tr>
</tbody>
</table>
Appendix 25: Contextual evaluation readiness: Mixed methods data analysis and integration

Contextual factors: The importance of resources dedicated to evaluation and support for evaluation.

<table>
<thead>
<tr>
<th>Evaluation Readiness of Context</th>
<th>Levels of Evidence</th>
<th>Importance of Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resources dedicated to evaluation</td>
<td>Perceived importance</td>
<td>Frequent theme across three cases</td>
</tr>
<tr>
<td></td>
<td>• Identified as a key barrier or enabler, including time to engage in evaluation.</td>
<td>• Lack of specific funding dedicated to evaluation in program planning was seen as a key barrier to undertaking evaluation in the first place.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Support for evaluation</th>
<th>Perceived importance</th>
<th>Frequent theme across all four cases</th>
<th>Impacts on</th>
<th>No evidence on support at a broader sector level</th>
<th>High importance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Identified as a key barrier or enabler. • Support from senior members of organisations or funders was also specifically noted by some participants.</td>
<td>• Lack of broader contextual support hindered influence, as evaluation was considered to be time consuming and costly. • Some suggested that lack of support was due to lack of evaluation knowledge and their perceptions of evidence.</td>
<td>• Potential for collective learning across the sector.</td>
<td></td>
<td>• Lack of support hinders influence by reducing engagement in evaluation, both in terms of commissioning and in responding to findings, particularly at a more collective level. • Lack of support in this study was relate to individual's existing knowledge and attitudes.</td>
</tr>
</tbody>
</table>
Appendix 26: Broader political and organisational environmental factors: Mixed methods data analysis and integration.

*Contextual factors: The importance of the political and organisational environment.*

<table>
<thead>
<tr>
<th>Levels of Evidence</th>
<th>Importance of Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Political and organisational environment</strong></td>
<td><strong>Policy context</strong></td>
</tr>
<tr>
<td>Survey (Study 2)</td>
<td>Perceived importance</td>
</tr>
<tr>
<td>Case Studies (Study 3)</td>
<td>Frequent theme across three cases</td>
</tr>
<tr>
<td>Relationships (Study 3)</td>
<td>Impacted on</td>
</tr>
<tr>
<td>Framework (Study 1)</td>
<td>Theoretical evidence (health sector programs)</td>
</tr>
<tr>
<td>Data Integration (Study 4)</td>
<td>High importance</td>
</tr>
</tbody>
</table>

**Policy context**
- **Perceived importance**
  - Shifts in policy highlighted as barrier.
- **Frequent theme across three cases**
  - Changes in policy shifted focus within the sector, and subsequently the partnerships experienced a change in direction.
  - This impacted on clarity of the partnership’s purpose, as well as the relevance of the evaluation.
- **Impacted on**
  - Clarity of purpose and partnership commitment.
  - Resources and support for evaluation (context).
  - Attitudes towards evaluation (individual).
- **Theoretical evidence (health sector programs)**
  - Shifts in policy can pose challenges to health sector initiatives.
- **High importance**
  - Policy context has such an impact on the functioning of the sector and its engagement in evaluation, that is deemed to be a factor of high importance for evaluation influence.

**Accountability requirements**
- **Perceived importance**
  - Requirements that focus on outcomes were identified as a key barrier and enabler.
- **Frequent factor across all cases**
  - Focus on outcomes hindered influence at a collective level, as funders wanted simple answers to complex problems.
  - Accountability requirements were also described as demanding evaluation without providing appropriate funding or expertise to support it.
- **Impacts on**
  - Perceptions of credibility.
  - Evaluation approach.
  - Influence at a collective level.
- **Empirical evidence**
  - Health sector can focus on process at the cost of outcomes.
  - RCT seen as strong evidence even when their design characteristics are not that of a quality RCT. Public health evidence judged the same as RCT when this is not appropriate.
- **Crucial components**
  - Impacts on the type of evaluation and perceptions of credibility.
  - Particularly important for impact at a collective level.
  - Complex interventions are being judged too simplistically.
  - Demands for accountability do not
<table>
<thead>
<tr>
<th>Levels of Evidence</th>
<th>Importance of Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Political and organisational environment</td>
<td>Survey (Study 2)</td>
</tr>
<tr>
<td><strong>Traditional policies and management techniques</strong></td>
<td>Perceived importance</td>
</tr>
<tr>
<td></td>
<td>Identified as a key barrier to evaluation influence.</td>
</tr>
<tr>
<td></td>
<td>Funding cycles did not support influence, as the sector moved on too quickly.</td>
</tr>
</tbody>
</table>
Understanding Evaluation
Influence Within Public
Sector Partnerships:
A Conceptual Model

Sarah Appleton-Dyer, Janet Clinton, Peter Carswell, and Rob McNeill

Abstract
The importance of evaluation use has led to a large amount of theoretical and empirical study. Evaluation use, however, is still not well understood. There is a need to capture the complexity of this phenomenon across a diverse range of contexts. In response to such complexities, the notion of "evaluation influence" emerged. This article presents a theory of evaluation influence within public sector partnerships. An analysis of key concepts is used to develop propositions about the relationships between evaluation attributes, partnership functioning and characteristics, partnership evaluation behavior, individual characteristics, contextual factors, and evaluation influence. The model highlights the complexities of evaluation influence and identifies a range of factors that evaluators can consider in practice. The model also extends on existing theories of evaluation influence in considering the role of individual characteristics, stakeholder evaluation behavior, and partnership contexts.

Keywords
evaluation use, evaluation influence, partnership functioning, evaluation context

Evaluation as a discipline has had a long interest in its use. Initially, concern over use was driven by the desire to maximize the positive social impacts of evaluation (Claro, 1981), a theme that remains in the more recent literature (Mark & Henry, 2004). Equally, those commissioning evaluation want to benefit from its potential to inform practice. The importance of evaluation use has led to a large amount of theoretical and empirical study over the past 30 years (Caracelli & Preskill, 2000; Cousins & Leithwood, 1986; Kirkhart, 2000; Patton, 2008; Peck & Gorzalski, 2009; Shula & Cousins, 1997; Weiss, 1979). Evaluation use, however, is a complex phenomenon that is still not well understood. These complexities are reflected in the various definitions and conceptualizations of evaluation use, each of which focus on different categories of use.

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Evaluation use typically refers to one of four types of use: instrumental, conceptual, symbolic, and process use. Instrumental use refers to the use of evaluation findings for decision making, such as program continuation or change (Rich, 1977). Conceptual use includes enlightenment or general learning through evaluation (Rich, 1977; Weiss & Buchvalas, 1980). The use of evaluation to justify existing views with no real intention of benefiting from the process or findings is termed symbolic use (Patton, 2008). Process use refers to learning or change that is stimulated by the learning that occurs during the process of an evaluation rather than its findings (Patton, 2008). To fully capture the multiple ways in which evaluation can affect programs, policies, and stakeholders, however, discussions have turned to the notion of “evaluation influence” (Henry & Mark, 2003; Kirkhart, 2000; Mark & Henry, 2004). A term originally coined by Kirkhart (2000) and developed further by Mark and Henry (2004), this term encompasses traditional conceptions of use, as well as various changes at the individual, interpersonal, and collective levels. Mark and Henry (2004) present a theory of evaluation influence that depicts the numerous factors that can affect the influence of an evaluation, including context. This model is particularly relevant for this article, which seeks to build on the notion that evaluation influence is impacted by many factors within an evaluation environment. To support this notion, this article builds on the work of Mark and Henry (2004) by presenting a conceptual model of evaluation influence within public sector partnerships. Specifically, this article uses public health partnerships as an example to explore the complexities of evaluation influence in a partnership context.

The public sector involves services that are built on the notion of public good or services based on universal access for the citizenry rather than private provision through market mechanisms (Broadbent & Guthrie, 2008). While the public sector varies in different countries, it generally includes health care, education, the police, and local Government services. An increased focus on whole systems approaches has seen an increase in public sector partnerships. These partnerships typically seek to address the complex social problems facing modern society through enhancing collaboration and coordination across organizations and sectors. At an international level for example, public–private partnerships between health organizations have worked to expand access to drugs and vaccines in poor countries (Reich, 2000; Smith, 2000). Partnerships have also been a key focus in the United States, with Lasker, Weiss, and Miller (2001, p. 179) noting the vast investment in “thousands of alliances, coalitions, consortia and other health partnerships.” Similar trends have also been seen in countries such as Canada, the United Kingdom, and Australia. In public health specifically, partnerships are often working to tackle issues such as obesity, teenage pregnancy, and social exclusion (Institute of Medicine, 2005; Department of Health, 2010).

The term partnership encompasses a broad range of relationships between organizations and sectors. Public sector partnerships maybe working within- or across-sectors, with private or not-for-profit organizations for various purposes. This diversity makes partnerships difficult to define. As a consequence, terms such as coordination, cooperation, collaboration, networks, and partnerships are often used interchangeably and sometimes incorrectly. Lasker et al. (2001, p. 180) describe partnerships as enabling “different people and organizations to support each other by leveraging, combining and capitalizing on their complementary strengths and capabilities.” This description captures the notion underpinning partnerships. In practice, however, securing the level of functioning needed to produce the intended benefits can be challenging. This article adopts a broad definition of partnerships in reflection of the diversity of partnership arrangements in the public sector. The definition also includes a specific focus on public health. Specifically, public health partnerships are defined here as “organizational partnerships (of two or more organizational bodies), which aim to improve public health outcomes (through population health improvement and/or reduction in health inequalities)” (Smith et al., 2009, p. 2).
The diversity and complexity of public sector partnerships in terms of their characteristics and functioning sees evaluators working with programs with increasingly complex political and organizational structures that pose additional challenges to evaluation design and influence. Further, the literature suggests many of the characteristics that are important for partnership functioning, such as mutual trust, joint decision making, and open communication (Mandell & Keast, 2008; Smith et al., 2009), are also important for evaluation use within organizations (Johnson et al., 2009; Preskill, Zuckerman, & Matthews, 2003). Furthering our understanding of evaluation influence within partnerships, therefore, is also likely to contribute to our general understanding of evaluation influence.

There is little literature on evaluation influence within partnerships specifically. Existing evaluation literature, however, does identify a range of factors that are likely to be important for evaluation influence within partnerships. This article uses this literature to provide an in-depth analysis of existing concepts that appear to be important for evaluation influence within partnerships. Specifically, current literature will be critically analyzed to present propositions that explore the relationships that are important for evaluation influence within public sector partnerships, with public health partnerships used as an example. This analysis will build on the work of Mark and Henry (2004) to develop a conceptual model to enhance our understanding of evaluation influence across different contexts.

The article will begin with a brief review of key literature on evaluation use and influence to identify some of the key concepts informing the model. The model is then described through four key stages using literature relating to (1) evaluation attributes, (2) partnership functioning, characteristics and evaluation behavior, (3) evaluation influence and individual characteristics, and (4) contextual factors. The model is by no means complete or conclusive. In actual fact, it highlights a number of gaps within the field. In this respect, the model will be able to guide future research, while also contributing to current evaluation theories and practice.

Understanding Evaluation Use and Influence

Evaluation use typically refers to one of four types of use including instrumental, conceptual, symbolic, and process use. While these conceptualizations of use are important, it has been suggested they do not fully capture the multiple mechanisms and pathways through which evaluation can affect stakeholders, programs, and policies. Kirkhart (2000) adopted the term “evaluation influence” to capture the multidirectional, incremental, unintentional, and unidirectional influences of evaluation that are not captured in the term “use.” The term seeks to ensure that the complexities of use are fully captured, explored, and understood. Kirkhart’s (2000) integrated theory of evaluation influence includes three key dimensions, source of influence (process and use), intention (unintended and intended), and time frame (immediate, end of cycle, and long term).

Mark and Henry (2004) developed this work further by presenting a schematic theory of evaluation influence. Their work builds on an earlier model of evaluation influence that focused on participatory approaches to evaluation by Cousins (2003). Importantly for this article, their generic model captures the importance of contextual factors without focusing on one specific evaluation approach. For example, the model reflects the evaluation context (human and other evaluation resources), the decision making/policy setting, and the potential role of contextual factors in evaluation influence. These aspects of influence are likely to be particularly relevant to a partnership context due to the added complexities that partnership can bring to an evaluation context, particularly when a partnership is struggling to secure harmonious functioning.

Mark and Henry’s (2004) theory also draws on research traditions outside of evaluation, as they identify the multiple pathways and mechanisms through which evaluation can influence attitudes and action. Overall, this theory suggests that evaluation influence can occur at the individual, interpersonal, and collective levels. Mechanisms of evaluation influence include changes in attitudes or
beliefs at the individual level; persuasion or justification at the interpersonal level and changes in policy or agenda setting at the collective level (Henry & Mark, 2003). The authors’ article in 2004 further classifies the mechanisms into four kinds including general mechanisms, cognitive and affective (or attitudinal) processes, motivational outcomes, and behavioral outcomes (Mark & Henry, 2004). While recognizing these processes, the model presented in this article also highlights the role of partnership functioning, stakeholder behavior, and individual characteristics in facilitating evaluation influence mechanisms into outcomes.

Mark and Henry’s (2004) theory of evaluation influence also encourages us to reconsider the impact of evaluation and the changes processes that evaluations can ignite. While their work begins to drill down to the specific mechanisms of evaluation influence, this model has not been populated with data and some also argue for greater clarity of the model (Weiss, Murphy-Graham, & Birkeland, 2005). Mark and Henry (2004) also advocate for exploring the model within specific contexts. This article begins to do this by examining evaluation influence within public health partnerships.

**Understanding Evaluation Influence: The Role of Evaluation Attributes**

The first component of the model includes the evaluation attributes that are identified as important for evaluation influence in the literature (Figure 1). An evaluation’s focus and rationale are considered important, as they impact on the evaluation approach. Here, an evaluation approach refers to the type of evaluation undertaken, such as formative or summative, as well as the specific theories that may underpin the evaluation. There are a wide range of evaluation approaches (Stufflebeam & Shinkfield, 2007), and these approaches impact evaluation attributes and subsequently evaluation influence. Equally, influence is promoted and valued differently across evaluation approaches. For example, a utilization-focused approach will have a greater focus on usage than many other approaches. A survey of evaluators has also highlighted the importance of an evaluation’s approach in facilitating use (Fleischer & Christie, 2009). An evaluation’s approach also affects evaluation activities, such as the degree of stakeholder participation. A participatory approach has been associated with evaluation use (Weiss, 1979), and stakeholder participation has also been associated with enhanced influence (Christie, 2003; Greene, 1988; Turnbull, 1999). These findings highlight the potential impact of an evaluation’s approach on evaluation influence. In saying this, our understanding of the importance of factors such as stakeholder participation still lacks clarity. It is unclear what level of participation is important, which stakeholders need to be

![Figure 1. Evaluation attributes that mediate evaluation influence.](image-url)
participating and when to support different influences. The potential importance of the evaluation approach, its focus, and rationale, however, warrant the inclusion of these factors in the “evaluation attributes” component of the model (Figure 1).

The literature describes a diverse range of evaluator roles, which are reviewed in detail by Ryan and Schwandt (2002). Some definitions focus on the actions of the evaluator during the evaluation (Greene, 2000; Patton, 2008); while some focus on the internal or external status of the evaluator (Weiss, 1998). Other definitions also draw on the influence that the evaluator role can have on the programs and communities within which they work, such as social betterment (Mark, Henry, & Jules, 2000) or empowerment (Fetterman, 2001). Regardless of these various definitions, Ryan and Schwandt (2002) posit that all evaluators make decisions on their role and other aspects of the evaluation. It is these decisions that will affect the entire evaluation process and its influence. Evaluator roles suggested as important for influence include the broadening of the evaluator role to support stakeholder participation (Cousins, 2003), and the evaluator as a mutual partner of stakeholders and a coproducer of knowledge (Rossman & Rallis, 2000). Therefore, it is important that the evaluator and their role are captured in the model (Figure 1).

Skolits, Morrow, and Burr (2009), however, suggest that the demands of evaluation require evaluators to adopt a variety of roles during an evaluation. This notion suggests that it is not only the evaluator role that is important; evaluator skills and expertise are also likely to be important. For example, Preskill, Zuckerman, and Matthews (2003) found that evaluator control and the level of dialogue and reflection during meetings were important facilitators of process use. In their review of 41 studies, Johnson et al. (2009) also suggest that evaluator competence, both professional and cultural, are important for evaluation influence. Mark and Henry’s (2004) theory also highlights the importance of evaluator attributes including expertise and role flexibility. Evaluator skills, expertise, flexibility, and cultural competence, therefore, are also captured in Figure 1.

In terms of evaluation feedback and findings, Mark and Henry (2004) highlight the importance of sophistication, credibility, timeliness, responsiveness, and communication. More specifically, the inclusion of these attributes builds on the work of Cousins (2003) who highlighted the importance of these attributes of evaluation feedback for participatory evaluation. As one would anticipate evaluations that are perceived to provide credible feedback that responds to the needs of stakeholders in terms of information needs and sophistication will be more influential. Equally, feedback must be timely to enhance some influences, and good communication is likely to support this process. Quality has also been added to Figure 1, as Henry (2003) found that evaluations of high technical quality were more likely to be influential. Figure 1 captures each of these attributes of evaluation feedback. In practice, however, evaluation attributes do not exist in isolation. Evaluation design, implementation, and outputs are affected by the evaluation environment and context. The next stage of the model begins to recognize the contribution of the partnership context to evaluation influence.

**Understanding Evaluation Influence: Partnership Functioning, Characteristics and Evaluation Behavior**

For partnerships to achieve their potential, they need to reach a level of harmonious functioning. The dynamic and complex nature of partnerships, however, poses challenges to achieving this. While we are still learning about the factors that enhance functioning, the literature does highlight some important contributors. For example, partnerships experiencing mutual trust, shared power and decision making, open communication, and appropriate leadership are more likely to function effectively (Alexander, Comforth, Weiner, & Bogue, 2001; Casey, 2008; Dowling, Powell, & Glendinning,
Figure 2. Evaluation attributes, partnership functioning, characteristics, and evaluation behavior that mediate evaluation influence.

2004; Mandell & Keast, 2008; Smith et al., 2009). Achieving mutuality within the public sector, however, can be challenging. Traditionally, the sector is managed through hierarchies that do not lend themselves well to the notion of shared power or decision making. Public health partnerships, for example, are often working within a context that typically includes long-standing hierarchical relationships between organizations, existing contractual relationships, and strong demands for accountability (Keast, Mandell, Brown, & Woolcock, 2004; Lewis, 2005). It is these challenges to partnership functioning that will also mediate evaluation influence.

In terms of partnership functioning, Figure 2 suggests that the clarity of a partnership’s purpose will mediate evaluation influence. Austin (2000) notes the incongruence in perceptions and expectations of partnerships as a potential source of conflict between partnership members. While there is little evidence that directly associates this factor with influence, it is likely to be important due to its potential to affect the functioning of the partnership and the responsiveness of the evaluation. For example, if the partnership’s purpose is not clear, then it will be difficult for the partnership to respond to the evaluation, as the unclear sense of purpose will hinder the partnership in moving forward and using the evaluation to support this process.

A sense of ownership is also captured in Figure 2. This factor is important for partnership functioning, as ownership can affect an individual’s involvement in the partnership (Weiss, Anderson, & Lasker, 2002). The model proposes that a lack of ownership among partnership members will result in limited involvement in the partnership and its evaluation. Therefore, ownership has the potential
to mediate evaluation influence, as participation is a key facilitator of evaluation influence (Fleischer & Christie, 2009).

Partnership culture is a crucial aspect of partnership functioning and reflects the type of relationships that exist between partners. Key elements of partnership culture include trust, power differentials, and communication. Trust, open communication, and information sharing are all important for securing a culture of learning and reflection (Antonacopoulou, 2006; Preskill & Torres, 2000a). Preskill et al. (2003) also highlights the importance of trust among members for securing a climate of risk taking to support learning and change. The authors also found that power differentials between group members sometimes hindered open dialogue. Lasker et al. (2001, p. 192) note that "it is only possible for the group to think in new ways if partners are able to talk to each other and are influenced by what they hear." Collectively, this literature highlights the importance of trust, power, and communication in facilitating a learning culture and enhancing the opportunity for evaluation influence to occur. Thus, these factors are captured in Figure 2.

Within organizations, leadership typically refers to a formal hierarchical position with the authority to impose actions and decisions (Alexander et al., 2001). For partnerships, however, leadership can be more complicated. Leaders do not have authority over their partnership members, and so partnership leaders need to strike a balance between power sharing and control and between interpersonal trust and formal procedures (Alexander et al., 2001). This requires a different set of skills to those needed for traditional leadership roles and can pose challenges to partnership functioning, as leaders are sometimes ill prepared for this role. The literature suggests leadership is also important for evaluation influence. Openness and transformational leadership can facilitate learning within organizations (Hult, Hurley, Guinipero, & Nichols, 2000), as can managerial support for engaging in learning-based activities (Ramus & Steger, 2000). Patton (2008) also highlights the value in engaging key decision makers to facilitate use. These findings suggest that the support for evaluation from leadership and other influential members within the partnership is important for evaluation influence.

The degree of participatory decision making within a partnership is important for partnership functioning (Casey, 2008; Mandell & Keast, 2008). While there is no evidence on the direct role of participatory decision making in evaluation influence, its connection to power differentials, open communication, and trust suggests that partnerships adopting a participatory approach to decision making will be better placed to facilitate influence. In particular, influences beyond the level of individual partnership members will be more likely as open discussions between members could trigger influences between members and across the partnership.

Knowledge management refers to the ways in which the knowledge held by individuals is used to support decision making and action. The aim of knowledge management is for organizations or partnerships "to become aware of its knowledge, individually and collectively, and to shape itself so that it makes the most effective and efficient use of the knowledge it has or can obtain" (Bennet & Bennet, 2003, p. 440). Policies and strategies to facilitate knowledge management are important for facilitating learning and change (Keen & Mahanty, 2005; Muro & Jeffrey, 2008), and hence evaluation influence. For example, successful knowledge management strategies can result in increased communication, participation, and improved problem-solving capabilities (Alavi & Leidner, 1999).

Systems to manage and respond to evaluation information are also important for evaluation influence. While there is less evidence on the importance of these systems in the literature, they potentially represent the systems whereby the partnership process evaluation mechanisms into outcomes, particularly for partnership level influences. The importance of these attributes is also highlighted in their inclusion in tools designed to assess partnership functioning (Strategic Partnering Taskforce, 2003), and readiness for evaluation and organizational learning (Preskill & Torres, 2009). Thus, knowledge management policies, information sharing, and adaptation/change processes are included in Figure 2.

Partnership characteristics are included in the model due to their potential to impact on partnership functioning and subsequently evaluation influence (Figure 2). The important characteristics are purpose,
size, complexity, and level of collaboration. The purpose of the partnership is important due to its impact on the other partnership characteristics. For example, the purpose of the partnership will influence the level of collaboration and the complexity of the partnership. A partnership can encompass many different levels of collaboration including networking, coordination, cooperation, or collaboration (Himmelman, 2001). These various levels of collaboration will impact on the type of relationships between partnership members and partnership functioning. For example, collaborative partnerships require significant investment in establishing relationships and are often more difficult to achieve (Mandell & Keast, 2008).

Partnership size is also important due to its potential to impact on partnership functioning. For example, partnerships that are very large may become too complex, difficult to lead, and challenging to secure harmonious functioning. This notion is supported by Garcia-Canal, Valdez-Llaneza, and Arinzo (2003) who noted that there are fewer interests to harmonize in two-way alliances than multiple cross-sector partnerships. Therefore, larger partnerships can impact on the clarity of a partnerships purpose and its functioning, as multiple perceptions and expectations are brought to the table (Austin, 2000), and need to be managed.

Complexity can also be a consequence of the way that the partnership is resourced. For example, public health partnerships with multiple funding sources may experience greater levels of complexity due to the multiple accountability requirements that these funding sources can bring. Equally, partnerships may be funded at least partially on competitive contracts. This can challenge functioning, as they rely upon and display hierarchical and market mechanisms and characteristics (Lewis, Baeza, & Alexander, 2008). The resulting tensions between competition and collaboration have been associated with strained partner relationships and difficulties in formalizing a partnership approach (Babiak & Thibault, 2009). Public health partnerships may also be externally mandated or voluntary. These types of partnerships function quite differently from networks which emerge on the basis of mutual benefit, trust, and reciprocity (Lowndes & Skelcher, 1998).

Given the potential importance of stakeholder participation, the model suggests that evaluation influence will be mediated by the partnership’s evaluation behavior (Figure 2). This concept refers to the partnership’s participation in the evaluation, their support for the evaluation, and their readiness to engage in the evaluation. The model proposes that these factors can mediate the impact of evaluation influence. This notion is supported by an early review of 65 empirical studies by Cousins and Leithwood (1986), which suggested that stakeholder involvement and commitment to evaluation were important characteristics for use. For example, if partnership support for the evaluation is low, it is less likely to be influential, as it will not have buy-in and engagement from the partnership.

Evaluation readiness refers to the preparedness of the partnership to engage in evaluation. Specifically, it relates to their willingness and capacity to evaluate (Clinton, 2001; Stockdill, Baizerman, & Compton, 2002). Capacity refers to the resources that they have available to support the evaluation, such as time; and willingness refers to their attitude toward the evaluation and their cooperation in the process. The model proposes that partnerships exhibiting higher levels of readiness will facilitate influence, as partnership members will have higher levels of engagement in the evaluation and be more open to its feedback.

Understanding Evaluation Influence: Mechanisms and Outcomes of Evaluation Influence, and Individual Characteristics

The mechanisms and outcomes of evaluation influence represent change or action as a consequence of evaluation (Mark & Henry, 2004; Figure 3). The mechanisms of evaluation influence include elaboration, heuristics, priming, and skill acquisition at the individual level. Justification, persuasion, and minority opinion influence are interpersonal level mechanisms and policy consideration, standard setting, policy discussion and deliberation, and coalition formation reflect collective level mechanisms. Mark and Henry (2004) describe these as general influence processes and suggest that these are the
Figure 3. Pathways of evaluation influence within a partnership context.

key starting points for change. They suggest that it is these processes that are likely to lead to some change in the cognitive/affective, motivational, and behavioral processes that follow. For example, an individual may engage in elaboration when reading an evaluation report. The findings in this report may cause the reader to think more or differently about certain aspects of their program. While this is an important first step, it is any resulting changes in the person’s attitudes, motivations, or actions that are of interest to those seeking to understand evaluation influence (Mark & Henry, 2004).

Figure 3, however, suggests that the transformation of these mechanisms into outcomes is mediated by an individual’s characteristics. More specifically, the model suggests that an individual’s evaluation readiness, and existing knowledge and attitudes will mediate the outcomes of evaluation influence. For example, a simulation study conducted by Christie (2007) suggests that the influence of evaluation data is mediated by decision makers’ previous beliefs about program efficacy. Christie (2007) notes that once decision makers believe in a program they are less likely to be influenced by anecdotal or case study data. Earlier work has also suggested that evaluation use and behavior change is affected by individual values and beliefs (Rogers, 1995; Weiss, 1983). In terms of an individual’s willingness and capacity for evaluation, Preskill et al. (2003) suggests that learning through participation in evaluation can be affected by individual’s previous experiences of evaluation and previous training. With regard to partnerships specifically, an individual’s involvement in the partnership is also likely to be an important mediator, as it will affect engagement in the evaluation, and potential for influence.

Contextual Factors

Public sector partnerships are operating within a specific policy context and the role of context needs to be understood if we are to learn more about the pathways of evaluation influence. The role of contextual factors is highlighted in Figure 4, as some of the features of the public sector may be important mediators of partnership functioning and evaluation influence. For example, traditional
policies and management techniques within the public sector do not lend themselves well to the
notion of shared power and decision making required for partnership working (Keast et al.,
2004). Competitive markets within the sector can also see partner organizations competing for
the same funding pools, a potential challenge to trust and openness, and subsequently evaluation
influence within the partnership. The impact of competitiveness on trust building is also highlighted
by Babiak and Thibault (2009). Accountability requirements also mediate evaluation influence, as
they can affect the type of evaluation conducted. Within the health sector for example, it has been
suggested that evaluation can focus on outcomes at the cost of understanding process (Keast, Mandell,
& Brown, 2007). These perceptions of "evidence" can also affect perceptions of evaluation
credibility, quality, responsiveness, and ultimately influence. Evaluation is also just one of many
activities facing public sector partnerships, competing priorities can result in limited resources and
time to engage in evaluation. Each of these factors can impact on partnership evaluation behavior
and influence (Figure 4).

Discussion
This article provides an analysis of key concepts that are important for evaluation influence within
public sector partnerships. This critical analysis builds on the work of Mark and Henry (2004) to
develop propositions about the relationships between evaluation attributes, partnership functioning,
stakeholder evaluation behavior and characteristics, contextual factors, and evaluation influence.
The model contributes to existing theories of evaluation influence by highlighting the importance
of stakeholder evaluation behavior, individual characteristics, and contextual factors. The model

Figure 4. A conceptual model of evaluation influence within public health partnerships.
also contributes to our understanding of evaluation influence within partnerships, and public sector partnerships specifically. Overall, the model identifies the complexities of evaluation influence pathways, and the ways in which stakeholders and their organizational and political context can mediate influence.

With respect to the evaluation attributes, the model highlights the importance of the evaluation approach and design, the evaluator, and the evaluation outputs. Specifically, the model identifies a participatory approach, the evaluator and the credibility, timeliness, responsiveness, and technical quality of evaluation outputs as important for influence. Partnership functioning is highlighted as a key mediator of evaluation influence, with partnership arrangements, such as leadership, decision making and adaptation or change processes, and partnership culture being important. The model also suggests that partnership characteristics, such as size and complexity are important due to their impact on partnership functioning. The model presented here also notes the importance of stakeholder behavior and individual characteristics; with evaluation readiness, existing knowledge and attitudes, and participation in evaluation identified as mediators of influence. Contextual factors that are noted as important included the time and resources dedicated to evaluation, as well as the organizational and political context of a partnership.

In terms of current practice, the model highlights a number of factors that warrant consideration by evaluators. In fact, the model suggests that the evaluator is important for triggering evaluation influence due to their impact on the evaluation attributes. For example, the literature underpinning the model suggests that influence is facilitated by participatory evaluations that are undertaken by appropriately skilled evaluators (Christie, 2003; Greene, 1988; Johnson et al., 2009; Turnbull, 1999). Feedback that is of sound technical quality, timely, sophisticated, credible, and responsive to stakeholder needs will also be more influential (Cousins, 2003; Mark & Henry, 2004). This suggests that evaluators can seek to enhance influence by adopting a participatory approach that is responsive to stakeholder needs, while also providing an evaluation that produces technically sound and appropriately sophisticated feedback.

The model highlights the reciprocal nature of the pathways to evaluation influence. Indeed, evaluation attributes alone are not enough to achieve influence. Achieving evaluation influence is likely to involve commitment from both evaluators and stakeholders. In terms of partnerships specifically, the model suggests that partnership functioning is a key mediator of evaluation influence. An analysis of the existing literature suggests that partnerships struggling to secure harmonious functioning will present more challenges to evaluation influence than those with higher functioning levels. While partnership functioning can present some challenges to influence, the model does highlight a number of factors for evaluators to consider when working with partnerships.

The literature underpinning the model highlights the important role of leadership and decision makers in evaluation influence and other learning-based activities (Ihli et al., 2006; Patton, 2008; Rannus & Steger, 2000). This suggests that evaluators could maximize their opportunity for influence by engaging leadership and other key decision makers in the evaluation and its processes. The importance of adaptation or change processes to respond to evaluation was also highlighted (Preskill & Torres, 2009; Strategic Partnering Taskforce, 2003). Evaluators, therefore, can also seek to enhance influence by identifying and facilitating these processes. This may be particularly important when working with partnerships, as their processes and procedures may not be well established.

In terms of the broader context, the model highlights the importance of current policy, traditional policies and management techniques, and public sector support for evaluation. These factors were important for both partnership functioning and evaluation influence. This component of the model highlights a number of challenges to influence that are beyond the control of the evaluator. Addressing such challenges would require support from the public sector. For example, the model suggests that the sector can facilitate influence when appropriate resources and time are dedicated to evaluation. This component of the model also reinforces the reciprocal nature of evaluation influence.
While an evaluator can adopt strategies to facilitate evaluation influence, it is the combination of evaluation attributes and other factors within the model that provide the opportunity for influence to occur.

The model presented here contributes to our understanding of evaluation influence; however, it is by no means complete or conclusive. The model draws on literature from different disciplines and further research is needed to understand the importance of the models components for evaluation influence specifically. For example, research on the role of partnership functioning in evaluation influence is warranted, as much of the evidence is based on other learning-based activities. To further inform practice, research could also seek to populate the model with data to identify the crucial components of the model. Research focusing on specific factors within the model is also warranted. For example, research could explore the level and type of participation needed to facilitate influence, as well as which members of the partnership need to participate to facilitate influence at individual, interpersonal, and collective levels. Indeed, this type of information would be useful for identifying the ways in which evaluation could seek to enhance its influence across the public sector.

The model has proposed some relationships between the components of the model. Currently, however, the evidence behind these connections is limited. The model would benefit from a greater understanding of the connections between the factors within the model. For example, it would be useful to explore whether any evaluation approaches and activities, such as participatory approaches, and evaluation capacity building could enhance partnership functioning and evaluation behavior with a view to facilitating influence. This type of evidence would help inform existing theories and evaluation practice, as well as informing our expectations of an evaluators’ capacity to achieve evaluation influence.

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References

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References


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