



Evaluating Systemic Advocacy

**A Primer & Tools for Evaluating Systemic
Advocacy in Ontario's Legal Clinics**

Report to the Law Foundation of Ontario

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As anyone who does systemic advocacy knows, high tolerance for uncertainty and deep love are central resilience-building traits. Thank you to Adam Vasey for teaching me both.

As principal author, all errors are mine.



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Part 1: Background & Introduction

"...in the case of community legal clinics, the strategic benefits to the movement of taking seriously the development of strong and committed grassroots accountability suggests that the fusion of ends and means also coincides with the strengthening and consolidation of local and incremental social justice struggles into secure bases for further and wider progress."

Michael Blazer, "The Community Legal Clinic Movement in Ontario: Practice and Theory, Means and Ends" (1991) 7:1 J L & Soc Pol'y 49.

Background

This project was initiated through funding from the Law Foundation of Ontario ("LFO") in honour of the work Mark Leach conducted with the LFO. The funding for this project was intended to produce research focused on access to justice.

The initial project proposal was as follows:

"To develop a set of tools to gather and analyse outcome data from systemic and indirect advocacy in Ontario's legal aid clinics in order to:

- a) Better understand the nature of systemic and indirect advocacy in community legal clinics and Student Legal Aid Services Societies ("SLASS") clinics,
- b) Develop a set of tools to evaluate indirect advocacy,
- c) Analyse outcome data to improve systemic change (chart goals that are meaningful for communities, understand local need, plan for maximum community impact, etc.), and,
- d) Better understand the impact of non-traditional legal advocacy in marginalised communities."

This project was successful in meeting parts a) and b). Further empirical work will be required to understand parts c) and d) in greater depth. As the reader will note, I ultimately focused on community legal clinics because of their institutional history of systemic advocacy. Although this research is focused on community legal clinics, I hope it will be of broader interest as well.

Introduction

This project was inspired by the author's experiences with community legal clinics and efforts to measure both direct client and systemic work. Although measurement - and empiricism generally - does not come as naturally to lawyers as it might to health care workers or social workers, it comes as no surprise that a publicly funded program should want empirical data on the work of clinics.¹ The later parts of this Report explain that how one measures this data fundamentally affects the outcome. Although the measurement of direct client service (the daily work of establishing a solicitor-client relationship, giving advice, resolving client matters, and so on) has encountered its own controversies, this Report focuses on systemic advocacy in community legal clinics, which is often more difficult to capture, especially through quantitative methods.



I use the term **systemic advocacy** throughout this Report to capture the work of both community development and law reform. Systemic advocacy seeks broad social change that, in the case of community legal clinics, seeks to improve conditions for people with low income. As the name suggests, systemic advocacy seeks to influence and change a system or systems. This might focus on formal and informal law and policy, but could also include institutional racism, colonialism, or other social and cultural systems.² Sometimes these

¹ Existing empirical work on the role of lawyers include: Carroll Seron et al, "The Impact of Legal Counsel on Outcomes for Poor Tenants in New York City's Housing Court: Results of a Randomized Experiment" (2001) 35 Law & Soc'y Rev 419, showing that the inclusion of lawyer representatives made a significant difference on the likelihood that a client would win his or her case; see also Rebecca Sandefur, "Elements of Expertise: Lawyers' Impact on Civil Trial and Hearing Outcomes" (2008) [unpublished, on file with author].

² Flekkoy defines systemic advocacy as "a strategy aimed at changing social systems, institutions and structures". Malfrid Grude Flekkoy, *A Voice for Children: Speaking Out as Their Ombudsman* (London: Jessica Kingsley Publishers, 1991) at 10. Samuel defines systemic advocacy as "a set of organized actions aimed at influencing public policies, societal attitudes, and sociopolitical processes that enable and empower the marginalized to speak for themselves" John Samuel, "What is people-centred advocacy?" (2002) 43 Participatory Learning & Action 9 at 9.

systems are easy to identify and can be clearly located in written policy or law. Often, however, systems operate in ways that are difficult to define and may operate only in unwritten practices or attitudes.

In their work examining the value of pro bono work, Cummings and Sandefur ask the seemingly basic question: **how good are the systemic advocacy services and what good do they do?**³ The authors identify this and other questions as part of the growing interest in understanding the impact of legal work – what they call the “New Measurement Movement”. This movement represents the myriad disciplines, programs, institutions, and others calling for increased attention to evaluation and evidence-based decision making. We consider this piece part of that movement; however, rather than measuring the more traditional direct services provided by lawyers, we focus on the **systemic advocacy**. Our aim here is to provide an approach, methodology, and instruments that clinics could use to measure their systemic work.



As the reader will note, there is a deep history of systemic advocacy work in Ontario’s legal clinics. The Report details some of this work and the theoretical backdrop that makes systemic approaches so important. However, the bulk of this Report is composed of an introduction to various methods and approaches to evaluation that will hopefully be of use to community legal clinics. While the Report consistently engages with theories of justice, advocacy and evaluation, the Report also contains practical tools and approaches that can be adapted relatively easily. We hope these materials will be useful for clinicians, funders, law school program instructors, community organisers in law, and others who work in legal areas with systemic impact. This report is written in plain language and is intended to be accessible to a wide range of people. We also hope this report contains tools that are usable to people unfamiliar with evaluation. Should the reader wish, each section of the Report can be read independently.

The reader will also note that the Report advocates for a particular approach to evaluation: one that privileges communities and participation. These approaches draw on current movements in access to justice that focuses on the qualitative experiences of clients,

³ Scott L Cummings & Rebecca Sandefur, “Beyond the Numbers: What we Know- and Should Know- About American Pro Bono” (2013) 7 Harv L & Pol’y Rev 83 at 84.

communities, and the general public with justice systems in Canada and abroad.⁴ As Professor Trevor Farrow noted about the access to justice movement,

...because much of what has occurred to-date has been done without adequate attention to the needs and views of those who use the system - the public, which includes those who are experiencing these legal and related health and social problems, it is time to put the voice of the public at the centre of how we think about and address access to justice reform efforts.⁵

The late Professor Rod Macdonald was one of the earliest champions of the move toward justice as understood by systems users and the general public.⁶ We believe strongly that the inclusion and, in fact, leadership of clients and communities along the evaluation pathway is theoretically, methodologically and practically the most fulsome and accurate way to understand clinic work.

Roadmap

This project has produced several written outcomes, all of which are contained in this Report. The author and research associates were careful not to reinvent the wheel; therefore, this handbook references material already created by clinics, NGOs and other agencies, and situates them in a larger set of possible evaluation models. This Report contains a set of sample tools that clinics can draw upon, use or adapt for their purposes. The Report also contains a list of excellent online and open source materials with information on systemic advocacy more generally.

This Report is divided into several parts.

Part 1 – Background and Introduction

This introductory part of the Report explains the background of this research and sets out a roadmap.

Part 2 – Context & History of Evaluation within Legal Clinics

This part of the Report explains the nature of community legal clinics for those who are new to

⁴ See, for example, Trevor Farrow, "What is Access to Justice?" (2014) 51(3) Osgoode Hall LJ; Amanda Dodge, "Access to Justice Metrics Informed by Voices of Marginalized Community Members" (2013), online: <http://www.cba.org/CBA/cle/PDF/JUST13_Paper_Dodge.pdf>.

⁵ Farrow, *ibid* at 9.

⁶ Roderick Macdonald, "Access to Justice in Canada Today: Scope, Scal and Ambitions" in Julia H Bass, WA Bogart and Frederick H Zemans, eds, *Access to Justice for a New Century - The Way Forward* (Toronto: Law Society of Upper Canada, 2005).

This part of the Report explains the nature of community legal clinics for those who are new to this area. It also considers some of the research already conducted by clinics or clinic-affiliated organizations including Legal Aid Ontario (“LAO”), the Association of Community Legal Clinics of Ontario (“ACLCO”), the Ontario Project for Inter Clinic Community Organizations (“OPICCO”), University-affiliated community legal clinics, and many others who have completed significant and useful work on evaluating systemic advocacy.

Part 3 – Types of Evaluation and the Importance of Effective Evaluation

This part details Formative and Summative forms of evaluation, as well as participatory methods of evaluation. As the reader will note in Part 2, there has been work completed on the use of logic models and indicators in clinics that remains useful.

Part 4 – Participatory Evaluation Framework

This part provides frameworks and tools for participatory evaluation practices.

Part 5 – Additional Resources and Recommended Readings

This part contains a list of useful readings and references on evaluation and systemic advocacy more generally. The list includes brief descriptions of each resource for ease of use.



Part 2: Context and History

What is a Community Legal Clinic?

Community legal clinics exist in various forms around the world. In Ontario, a community legal clinic has a particular meaning that has developed over time. Legal aid services in Ontario were initially provided using a pro bono model for criminal cases. However, over time, legal aid services have expanded to include duty counsel, the certificate program, as well as both student and community legal clinics. Community legal clinics were created in the 1970s in recognition of the systemic nature of law as it operates in the lives of people with low income. They are currently constituted in legislation in the Legal Aid Services Act (“LASA”).⁷ The LASA defines “clinic” as an “independent community organization structured as a corporation without share capital that provides legal aid services to the community it serves on a basis other than fee for service”.⁸

Currently, legal clinics are one method of providing legal services to Ontarians living with low income. Others include legal aid certificates, student legal aid clinics connected to law schools, and duty counsel. The primary funder, Legal Aid Ontario (LAO) also funds “specialty clinics” that work with specific client communities on particular areas of law such as persons with disabilities, older adults, and so on. Legal clinics operate as non-profits with independent boards of directors.⁹ Under the LASA, LAO is responsible for funding clinics and may impose terms and conditions on that funding as well as on the operation of clinics. Clinics work with pre-defined areas of law in a particular geographic region. Those who sit on the Boards of legal clinics are drawn from members of the community where the clinics operate.¹⁰ Community legal clinics provide direct client service through lawyers, social workers, paralegals, community legal workers and support staff. They also provide other “indirect” services that are beyond the individual solicitor-client/social worker-client relationship. This work is broadly characterised as **community development, law reform and/or systemic advocacy**.

⁷ *Legal Aid Services Act*, SO 1998, c 26 [LASA].

⁸ *Ibid* at s 2.

⁹ *Ibid* at s 33(5).

¹⁰ *Ibid*. Section 33(5) of the LASA specifies that “The Corporation may impose any terms and conditions on the funding of a clinic that it considers appropriate, including, (a) that the members of the clinic and of the board of directors of the clinic are members of the community or communities served or to be served by the clinic.”

What do “community development”, “law reform” and “systemic advocacy” mean?

Community Development

In community development, members of the community and clinic staff work together to bring about social, economic, and political change through a wide variety of formal and informal methods. Community development includes working to change law and legislation, but also encompasses a range of advocacy methods. The key element of community development is that communities themselves lead change rather than change being instituted by professionals. Clinics often act as sources of information and advice. They might also have access to useful networks, or are able to offer other in-kind supports such as space and time. Community legal workers and social workers are often heavily involved in community development work, although lawyers, paralegals and law students are also instrumental to this work. Many lawyers and social workers make a distinction between community development and law reform. While community development can involve organising to change law, policy, and legislation, law reform is a distinct type of community development work.

Law Reform

As the name suggests, law reform involves clinic staff focusing on the legislation, policies (both formal and informal), practices and other related rules that impact people living with low-income. The Ontario Project for Inter Clinic Community Organising (“OPICCO”) includes a range of law reform strategies including working on test cases that emphasize legislative reform, building community support, lobbying governments, and meeting with decision makers to explain the impact of rules and policies on people with low income.¹¹

There is some controversy in the community lawyering literature about the roles and effectiveness of lawyers in this work. Do lawyers tend to “take over” law reform? In test case litigation, what is the role of the client throughout the life of the case? What is the relationship between the litigant and the wider communities impacted by the case?¹² These questions and many others have been examined in the community lawyering literature.

¹¹ For more information about OPICCO, see their website at <https://opicco.org/about/>.

¹² See, for example, Gerald P López, *Rebellious Lawyering: One Chicano’s Vision of Progressive Law Practice (New Perspectives on Law, Culture, and Society)* (Boulder: Westview Press, 1992); Sameer M Ashar, “Deep Critique and Democratic Lawyering in Clinical Practice” (2016) 104:1 Cal L Rev 193; Sameer M Ashar, “Fieldwork and the Political” in Susan Bryant, Elliott S Milstein, & Ann C Shalleck, eds, *Transforming the Education of Lawyers: The Theory and Practice of Clinical Pedagogy* (Durham: Carolina Academic Press, 2014); Janet E Mosher, “Legal Education: Nemesis or Ally of Social Movements?” (1997) 35:3/4 Osgoode Hall LJ 613.

Systemic Advocacy

Systemic advocacy encompasses both law reform and community development. Any work that operates to challenge existing systems can be characterised as systemic advocacy.

Types of systemic advocacy from the Harvard Family Research Project

Electronic Outreach/Social Media - Using technologies such as email, websites, blogs, podcasts, cell phones, Facebook, or Twitter to reach a large audience and enable fast communications

Earned Media – Gain media coverage for an issue to get visibility for particular groups or individuals through pitching to media outlets...

Coalition and Network Building – Bringing individuals, groups, or organizations together on a particular issue or goal everyone agrees upon

Grassroots Organizing and Mobilization – Creating or building on a community-based movement supporting an initiative, issue or idea, generally by empowering people to advocate against or for policies that affect them

Rallies and Marches – Gathering groups of people for symbolic events that gain enthusiasm and attention (especially with the media)

Voter Education – Informing specific groups of voters of a particular issue or position prior to an election

Briefings/Presentations – Individual or group meetings (in person) to make an advocacy case...

Issue/Policy Analysis and Research – Doing research on an issue or problem to better define it and/or identify solutions

Policy Proposal Development - Developing a policy solution for the issue or problem being addressed

Policymaker and Candidate Education – Talking to decision makers and/or candidates about an issue or positions, and about its support

Relationship Building with Decision Makers – Networking with people who have the authority to act on an issue

Litigation or Legal Advocacy - Using the judicial system to move policy by filing lawsuits, civil actions, and other advocacy tactics¹³

¹³ Harvard Family Research Project, *A User's Guide to Advocacy Evaluation Planning* (Cambridge: Presidents and Fellows of Harvard College, 2009), online: <<http://www.hfrp.org/evaluation/publications-resources/a-user-s-guide-to-advocacy-evaluation-planning>>.

In addition to this list, community legal education or public legal education, depositions to committees and others are useful additions.

Some clinics choose to allocate much systemic advocacy work to community legal workers, while some use a team approach and still others rely solely on lawyers.

Systemic advocacy and community responsiveness is built into clinic work in several ways. First, systemic advocacy is recognised in the governing legislation.¹⁴ Section 14(1)(h) of the LASA sets out public legal education as part of the funded programs. LAO and the community legal clinics also recognise systemic advocacy in the Memoranda of



Understanding (“MOU”) between LAO and each community legal clinic. In s. 3(f) of the MOU, clinic law is defined as “legal and other services provided under the Act, in clinic law areas, and includes legal representation and advice, community development and organising, law reform, and public legal education”.¹⁵

Systemic advocacy has been an integral part of the work of community clinics since their inception. Mr. Justice Samuel Grange acknowledged law reform as a central component of clinic work in the 1978 *Grange Report*.¹⁶ Justice Grange wrote that “[m]any clinics, to a greater or lesser degree, engage in some form of law reform activity including lobbying of legislatures

¹⁴ LASA, *supra* note 7.

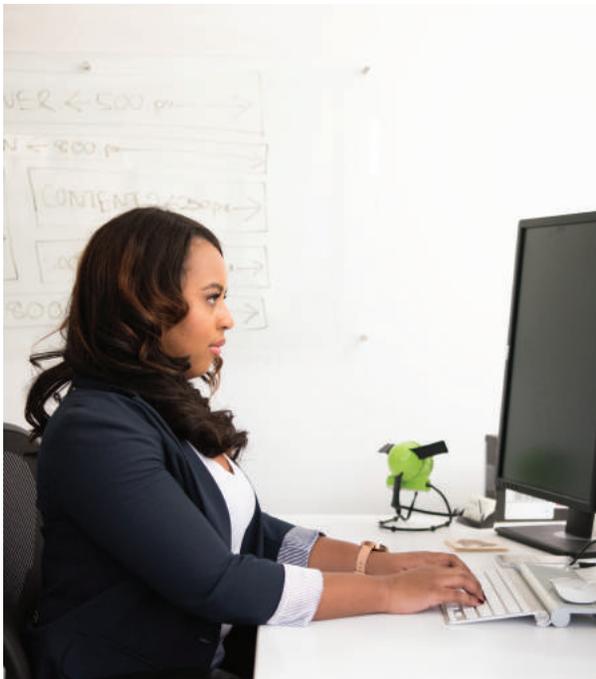
¹⁵ LAO-Clinic Memorandum Of Understanding, online:

<[http://www.aclo.org/public_docs/LAO-ClinicMemorandumofUnderstanding\(EnglishFinal-March1,2002\).pdf](http://www.aclo.org/public_docs/LAO-ClinicMemorandumofUnderstanding(EnglishFinal-March1,2002).pdf)>.

¹⁶ SGM Grange, “Report of the Commission on Clinical Funding” (Toronto: Commission on Clinical Funding, 1978) at 15-16, as cited in Michael Blazer, “The Community Legal Clinic Movement in Ontario: Practice and Theory, Means and Ends” (1991) 7 J L & Soc Pol’y 49 [Blazer].

and organizing of their clients for the purpose".¹⁷ The 1997 *McCamus Report* noted that "[c]linics... developed a much broader conception of legal services, including community legal education, law reform, and community development."¹⁸ The OPICCO has produced papers on legal clinics and community development and was itself created to solidify the central work of community organising in legal clinics.¹⁹ Professor Mary Jane Mossman documents the long-standing acknowledgement of systemic advocacy, using the term "community development", in the Legal Aid governing legislation and the difficulties in achieving a mix of direct client service and systemic activities.²⁰ Both Professor Mossman and Abramowicz write about the distinct approach taken by community legal clinics. In this model, systemic and individual advocacy are connected to ensure that systemic work reflects the on-the-ground realities of client groups.²¹

Community Legal Clinics & Evaluation



Individual clinics, the Association of Community Legal Clinics of Ontario ("ACLCO") and the funder have all acknowledged that systemic advocacy is an integral part of the work of Ontario's community legal clinics. For many reasons, understanding the work of systemic advocacy in Ontario's legal clinics - and clinics more generally - is a worthwhile goal. This Report argues that evaluating this work can only strengthen the relationship between clinics and communities, and refine the already impressive advocacy occurring at clinics.

We also understand that people experiencing lower incomes often have more interactions with legal systems than people with middle or high incomes. These legal systems often

¹⁷ Blazer, *ibid* at 61.

¹⁸ John D McCamus, *Report of the Ontario Legal Aid Review: A Blueprint for Publicly Funded Legal Services* (1997), online: <<http://www.attorneygeneral.jus.gov.on.ca/english/about/pubs/olar/toc.php>>.

¹⁹ OPICCO has a wide range of materials that can be found online at <http://opicco.org/?q=Legal_clinic_materials>. Their mandate is "[t]o promote, strengthen and maintain the capacity of the clinic system to work with communities to empower, educate and organize for social and economic justice." *Supra* note 11.

²⁰ Mary Jane Mossman, "Legal Services and Community Development: Competing or Compatible Activities" (1994) [unpublished, archived at <<https://opicco.files.wordpress.com/2015/02/mossman-paper-legal-services-and-cd.pdf>>].

²¹ Lenny Abramowicz, "The Critical Characteristics of Community Legal Clinics in Ontario" (2004) 19 J L & Soc Pol'y 70.

compound to produce potentially devastating consequences including lifelong and generational poverty. This also means that systems work – work that challenges the conditions under which people live – is all the more pressing. However, it is important that evaluation not be an onerous burden on communities, clients or clinics.²² Its practical benefit must outweigh the effort.

As noted earlier, clinics are governed by community Boards. Duties of a clinic board are set out in the LASA, and include compliance with the legislation and policies set out by LAO. Per the Memoranda of Understanding between the clinics and Legal Aid Ontario, each clinic's board must be representative of the communities it serves and remain responsive to the legal needs of the community. Many responsibilities, however, can be classified as administrative or bureaucratic in nature (developing business plans, remaining accountable to LAO, and so on).²³

Despite mention of community governance, it is also clear that increasing accountability mechanisms and bureaucratisation have occupied Boards. Some community Boards have been "maneuvered into a role of unpaid middle management"²⁴ rather than as more meaningful decision makers in the interests of their communities. In his article on community clinics, Michael Blazer quotes Ian Scott, who reflects the unease and confusion surrounding the role of community in community legal clinics:

I think the one issue that remains on the decks is the community role. I think the community has some concerns about what its role is. I think the Law Society and the lawyers also have some concerns about what that role is and I'm not sure that we have really reached the end of that exercise.²⁵

Since Blazer's article was written in 1991, LAO has also taken a more active role in accountability in community legal clinics.²⁶ Hence, we now turn to the growing interest in the evaluation of the work of community legal clinics.

²² See Ab Currie's work analysing results of an empirical study of Canadians: Ab Currie, *The Legal Problems of Everyday Life: The Nature, Extent and Consequences of Justiciable Problems Experienced by Canadians* (Ottawa: Department of Justice Canada, 2009); See also Plascoe Pleasence et al, "Multiple Justiciable Problems: Common Clusters and their Social and Demographic Indicators" (2004) 1 J Empirical Leg Stud 301; Action Committee on Access to Justice in Civil and Family Matters, *Access to Civil and Family Justice: A Roadmap for Change* (Ottawa: Canadian Forum on Civil Justice, 2013); Alexy Buck, Nigel Balmer & Plascoe Pleasence, "Social Exclusion and Civil Law: Experience of Civil Justice Problems among Vulnerable Groups" (2005) 39:3 Soc Pol'y Administration 302.

²³ *Supra* note 15.

²⁴ Blazer, *supra* note 16 at 66.

²⁵ *Ibid* at 66.

²⁶ It is also important to note that communities have also taken an active role in challenging clinic policies. See, for example, Yamri Taddese, "New groups form to oppose Toronto legal clinic mergers", *Law Times* (27 October 2014), online:

<<http://www.lawtimesnews.com/201410274279/headline-news/new-group-forms-to-oppose-toronto-legal-clinic-mergers>>.

Evaluation in Community Legal Clinics: Two Examples

Community legal clinics have engaged in various forms of data collection and evaluation since their inception in 1971. More recent data has been captured through the online client data collection program. Other data is collected at individual community legal clinics for their own use. The following section gives two examples of evaluation in Ontario's clinics, starting with OPICCO's Outcome Measurement Committee. More recently, community legal clinics and Legal Aid Ontario have debated implementation of a new data collection program born out of LAO's "transformation" projects.

OPICCO – Outcome Measurement Committee (2009)

One of OPICCO's projects was expressly aimed at planning and evaluating systemic advocacy in the clinic system through the Outcome Measurement Committee. They later shifted to working through the Learning and Lobbying Committee and a group of OPICCO members developed a set of logic models (Appendices A and B).²⁷ Logic models can be used during the life of a program, or in planning stages. They are used to evaluate how effective a program is through setting out the inputs and outputs as well as the resources and various activities involved in any program. Logic models are generally set out in chart or graph form. OPICCO piloted the logic model within four clinics in May 2009. The logic models were rated highly for navigation, project and evaluation; however, issues appeared to remain with the community development portions. Ultimately, it is unclear whether clinics adopted the logic models on an ongoing basis.

²⁷ The committee developed logic models for Community Building and Special Projects, Law Reform and Public Legal Education.

Strategic Directions 2013-present

In 2013, LAO began a series of transformation efforts across the clinic system, aimed at increasing high-quality services to greater numbers of clients, encouraging “flexibility and innovation in the provision of legal aid services... within a framework of accountability to the Government of Ontario for the expenditure of public funds”.²⁸ At the same time, in its 2013 Strategic Directions report, LAO reaffirmed the importance of systemic advocacy:

Law reform and systemic advocacy are important features in the provision of legal services to low-income clients and their communities. Clinics have been at the forefront of vital social justice advocacy.²⁹

Part of LAO’s Strategic Directions includes establishing performance measures for clinics. LAO consulted with ACLCO, clinics, boards, and executive directors with the goal of implementing a new Clinic Information Measurement System (CIMS). The system tracks cases in particular areas of law and tracks their outcome, including the “cost per case”. The software tracks the number of test cases completed by clinics including how many that result in changes to legislation, regulations or common law and the cost for these cases. CIMS also tracks the cost of public legal education, community development, policy advocacy, law reform and other “initiatives”. Along with the cost per case, the software also measures “effectiveness” and “efficiency”. Efficiency is measured through tracking resource allocation (hours docketed/ staff time used). Cost is also measured by case outcome (cases that were successful/ partially successful, unsuccessful or otherwise withdrawn).³⁰ This approach is best described as **outcome evaluation**.

In response to LAO’s strategic plan, ACLCO launched its own plan in consultation with community clinics. ACLCO recognises the importance of systemic advocacy in the work of community legal clinics. Pillar 2 of their strategic plan states their goal: “Enhance

²⁸ Legal Aid Ontario, “About Legal Aid Ontario”, online: <<http://www.legalaid.on.ca/en/about/>>.

²⁹ Legal Aid Ontario, “Clinic law services strategic direction” (2013), online: <<http://www.legalaid.on.ca/en/publications/downloads/clinicconsultation/Clinic%20Law%20Services%20Strategic%20Direction.pdf>> at 10.

³⁰ Legal Aid Ontario, “Quality indicators for non-case activity” (2014), online: <<http://www.legalaid.on.ca/en/publications/downloads/clinicconsultation/performance/clinicconsultations%20Quality%20indicators%20for%20non-case%20activity.pdf?t=1433243779483>>.



Capacity for Systemic Work: Strengthening our capacity to do preventive and systemic poverty law work – including community development, law reform, test cases, and public legal education – to achieve the greatest positive impact for our client communities.”³¹ ACLCO’s proposal employed indicators that were mostly measured by participation in and number of hours devoted to community development activities, defined as legal clinics “promot[ing] access to justice in their communities by providing high quality community development and outreach services” and “engag[ing] proactivity to confront legislative and policy decisions that regulate the lives of low-income people and seek to create community empowerment.” ACLCO’s proposed form also required yes/no responses and the number of hours spent in each activity. ACLCO’s approach might best be described as a mix of **outcome evaluation** and **impact evaluation**.

A third proposal was levied by the speciality clinics (clinics that focus on a particular community of interest such as the Advocacy Centre for the Elderly, the HIV and AIDS Legal Clinic Ontario, and the South Asian Legal Clinic of Ontario). The specialty clinics analysed clinic work using **complexity** and **impact measures**.³² Questions on these forms remained quantitative in nature, such as the number of clients or communities affected. Respondents chose from drop down or checklists including listing how complex the issue or legal forum was, and the nature of the result (such as liberty, monetary award, whether legislation was changed, and so on).

While all three approaches proposed have merit, this Report proposes alternative evaluation models that privilege community and client engagement as a central part of the evaluation process. In the next section, we turn to some of the primary arguments in support of, and in opposition to, evaluation.

³¹ Association of Community Legal Clinics of Ontario, “Ontario Community Legal Clinics Provincial Strategic Plan 2013-2017” (2012), online: <http://aclco.org/public_docs/strategic_planning_docs/2012-12-12Update_to_clinics-Strategic-Planning-Strategic-Plan-Final.pdf> at 4.

³² Legal Aid Ontario, “Case and Initiative Indicators for Complexity, Scope of Impact and Results Achieved” (2014), online: <<http://www.legalaid.on.ca/en/publications/downloads/clinicconsultation/performanceasures/Complexity%20Scope%20Results%20Indicators.pdf?t=1433243779483>>.

Part 3: Types of Evaluation and the Importance of Effective Evaluation

“We believe that our work has a positive impact on the lives of our clients and that it is guided by a social justice mission. It is this belief... that motivates and sustains us in our work. Belief and hope are critical elements to sustaining our work but evidence is likely to be even more powerful. Designing ways to quantify the work we do, to measure justice, so to speak, is an important mission. However, in this essay, we urge that the efforts to measure justice capture the complexity of that project and the possible pitfalls.”³³

There are many forms of evaluation. Shared among these forms is the act of “compar[ing]... an object of interest against a standard of acceptability”.³⁴ Evaluation as a general practice is part of many sectors’ increasing interest in evidence-based practice. Intuitively, evaluation makes sense. Program users, funders, employees, governments and communities want effective and responsive services and programs. Evaluation can help programs to self-assess and remain accountable to their own missions. Increasingly, funders require evaluations as part of a funding agreement. Good evaluation will show weaknesses and areas to improve, and can create a foundation for strategic planning. Evaluation can increase a program’s credibility and visibility in the community, and act as an outreach or educative tool for program users and communities. Evaluation can also challenge or reaffirm assumptions regarding what is working in a program.

We have canvassed some of the benefits of evaluation, especially in systemic advocacy work, above; however, there are clear challenges and problems with evaluation as well. Some of the most common challenges for evaluators, especially with participatory methods, is lack of or mismatched time and resources. Some funders are unwilling to pay the amount necessary for a thorough evaluation processes, especially if data is not quantitative and reduced to a number related to cost-per-service. Evaluation can also take staff time. Most evaluators understand this and can respond to these concerns; however, if a participatory approach is

³³ Jane H Aiken & Stephen Wizner, “Measuring Justice” (2013) 2013:1 Wis L Rev 79.

³⁴ LW Green & MW Krueger, *Health Promotion and Planning: an Educational and Ecological Approach*, 3rd ed (California: Mayfield Publishing Company, 1999).



preferred this can be more time consuming, particularly for groups for whom participation in decision making is new. Another potential problem is the time frame in which evaluation must take place. Timing is often centred around a grant cycle or reporting period rather than the needs and experiences of community or potential lag-time that occurs in many long-term projects.³⁵ For long-term social change projects, there might be no clear beginning and end. Furthermore, if there is little institutional knowledge about evaluation, resource problems can be exacerbated. A lack of evaluation culture can also produce resentment among staff and community when it is required for self evaluation or for funding purposes.

Institutional culture in which staff, administrators, funders, and others resist evaluation because they think they already know what is needed is an additional challenge. People who have been doing work in any field, and sometimes those affected by a problem, can begin to think that “they know what’s best”. Of course, expertise is a valuable resource in any organisation and undoubtedly clinics and other grassroots organisations that are intimately linked to their communities; however, “we know what’s best” should also be tested. Have things changed over time? Are there forgotten communities? Whose interests are being served? Are there different ways to approach problems?

³⁵ Innovation Network Inc, *Pathfinder: A Practical Guide to Advocacy Evaluation* (2009), online: <http://www.innonet.org/client_docs/File/advocacy/pathfinder_funder_web.pdf> [Practical Guide].

As noted above, evaluation is often required as a pre-condition to funding a program. If the agency itself is not part of the development of evaluation tools, there can be a mismatch between what the funder wants to know and what is useful to the agency. Forced evaluation can also create resentment, particularly if staff is not invested in the process or don't have required resources.

Attribution is a potential problem for agencies or groups working on complicated, multi-faceted social change projects. Assessing who can claim responsibility for reducing poverty, family violence, or other complex issues is difficult, although, as we discuss below, not impossible.³⁶ An associated difficulty is the long-term, dynamic nature of systemic advocacy, which can make it difficult to establish goals set out in documents such as logic models. In addition, agencies often have to have a complex understanding of what constitutes success. What might be a short term "loss" can be a long-term win. A loss for one community can be a gain for another.

The strengths and drawbacks of evaluation in any setting can be addressed by the type of evaluation used and the approach. We do not wish to duplicate existing resources; therefore, we will discuss the types that are relevant to our discussion in a clinic and social change context.



³⁶ *Ibid* at 1.

Types of Evaluation

In this section, we briefly describe a range of different types of evaluation with which the reader might be familiar. Our recommendations regarding participatory evaluation can be read in contrast to, or as supplement, to these forms of evaluation. As the reader will note, most types of evaluation can become participatory by including community members at various stages of the evaluation.

Formative Evaluation

Formative evaluation takes place before or during project implementation. **Formative evaluations** typically focus on details about how a program model takes shape. The goal is to refine, improve or standardize the program being evaluated by examining the “delivery of the program or technology, the quality of its implementation, and the assessment of the organizational context, personnel, procedures, inputs, and so on”.³⁷ The evaluation looks at whether the activities of the program are being implemented well and if the activities need to be revised to achieve the desired outcomes.³⁸

Formative evaluation typically assumes that a program is or will soon become a model with a set of key activities that, if implemented correctly and with high quality, will produce a predictable chain of outcomes.

Illustrated simply, consider a common practice at the start of an initiative: staff, grantees, and/or evaluators are commonly asked to provide a logic model or theory of change that illustrates the set of activities and inputs that will plausibly lead to short-, intermediate-, and long-term outcomes. Formative evaluation would examine whether the planned activities in that model are well implemented, how they affect target populations, and how they should be revised to better achieve the short- and intermediate-term outcomes. When program implementers are satisfied that the core set of activities is clearly defined and could be repeated faithfully, the program is ready for summative evaluation.

³⁷ Syracuse University, “Evaluation Defined”, online:

<<https://www.syr.edu/gradschool/pdf/assessmentpdfs/Evaluation%20Defined.pdf>>.

³⁸ Hallie Preskill & Tanya Beer, “Evaluating Social Innovation” (2012), online:

<<http://www.fsg.org/publications/evaluating-social-innovation?srpsh=true#download-area>> [Preskill & Beer].



What is “theory of change”?

A theory of change identifies the gaps between what a program does and its goals. Would the change a program wants to effect occur with the existing planned outcomes? As its best, theory of change can expose logical errors, bias, and incorrect assumptions.

Process Evaluation

One type of formative evaluation is **process evaluation**. Process evaluation investigates and documents the process of delivering a program. They focus on the “types and quantities of services delivered, the beneficiaries of those services, the resources used to deliver the services, the practical problems encountered, and the ways such problems were resolved”. Process evaluations ask questions such as:

“Are all activities being implemented as intended?”

“Are the materials suitable for the target audience?”⁴⁰

“What kind of problems were encountered during implementation?”⁴¹

³⁹ Deborah Linnel, “Process Evaluation vs. Outcome Evaluation” (2014), online: <<http://tsne.org/process-evaluation-vs-outcome-evaluation>>.

⁴⁰ Western Australian Centre for Health Promotion Research, “Types of Evaluation” (2010), online: <<http://mypeer.org.au/monitoring-evaluation/types-of-evaluation/>>.

⁴¹ *Supra* note 39.

Summative Evaluation

A **summative evaluation** would then test whether that well-defined set of program activities produced the desired outcomes, make judgments about the program's effectiveness or efficiency, compare it to other programs or activities that might produce the same outcomes, and/or make conclusions about whether the model can be repeated elsewhere with the same effectiveness.⁴² **Summative evaluations** generally occur at the end of a project. They examine the effects or outcomes on the target population and whether the project has met its objectives.⁴³ Underlying summative evaluation are questions such as:

"Does the program work?"

"Does the program meet participants' needs and achieve desired outcomes?"

"Should it be continued?"⁴⁴

The most common types of summative evaluation are **outcome evaluation** and **impact evaluation**.

Outcome Evaluation

Outcome evaluation focuses on the immediate effects of a program or intervention. They aim to measure changes that have occurred as a result of completed work. Outcomes are usually predefined, measurable and linked to program objectives.⁴⁵ For example, outcomes of a public legal education program for tenants could include participants having increased knowledge of their rights or the number of new tenant associations formed by participants in the community.

⁴² Preskill & Beer, *supra* note 38 at 4-5.

⁴³ Community Sustainability Engagement Evaluation Toolbox, "Summative Evaluation" (2010), online: <http://evaluationtoolbox.net.au/index.php?option=com_content&view=article&id=40&Itemid=126>.

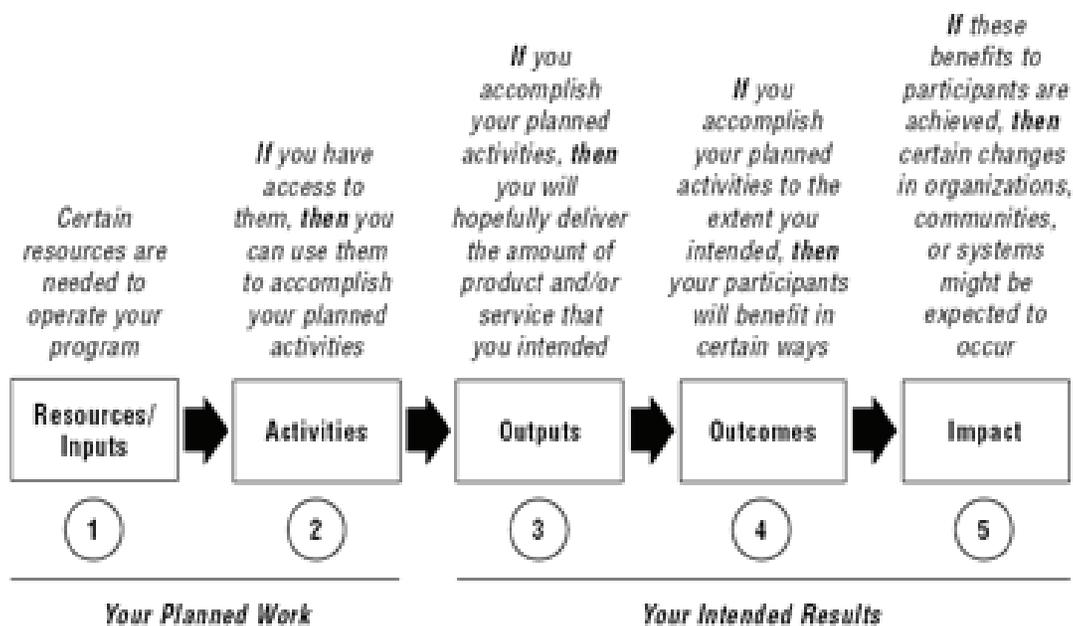
⁴⁴ Michael Quinn Patton, *How to Use Qualitative Methods in Evaluation* (Newbury Park: Sage, 1987) at 44 [Patton].

⁴⁵ Andrew Harding, "What is the difference between an impact and an outcome? Impact is the longer term effect of an outcome" (27 October 2014), *London School of Economics and Political Science: The Impact Blog* (blog), online: <<http://blogs.lse.ac.uk/impactofsocialsciences/2014/10/27/impact-vs-outcome-harding/>>.

Impact Evaluation

Impact evaluation looks at the broader effects of a program or intervention. They aim to capture information about the longer-term effects of the outcomes on participants' lives, as well as indirect and unintended consequences of a project.⁴⁶ For example, impact evaluation of a public legal education program for tenants could look at participants' ability to politically organise, empower community members, transfer knowledge to others or change to government policy.

The following logic model flow chart replicated from the W. K. Kellogg Foundation is useful for conceptualizing outcome and impact evaluation.⁴⁷



These concepts are important for clinics, which often work on short-term as well as very long-term projects including law reform and policy advocacy. During a longer-term project, formative evaluations might be important and more practical than waiting years for a program or intervention to "end". Developmental evaluation is also useful for this purpose.

⁴⁶ *Ibid.*

⁴⁷ WK Kellogg Foundation, "WK Kellogg Foundation Logic Model Development Guide" (2006), online: <<https://www.wkkf.org/resource-directory/resource/2006/02/wk-kellogg-foundation-logic-model-development-guide>>.

Developmental Evaluation

Developmental evaluation recognizes that traditional forms of evaluation that work for fixed program models are insufficient for evaluation of complex or constantly changing interventions such as social innovations and those aimed at systems change.⁴⁸ Developmental evaluation is an emerging field led by Michael Quinn Patton, which uses evaluative processes to “support the development of innovation and adaptation in dynamic environments”. Information about how an innovation or change effort is being developed is gathered and reported in real time to inform ongoing decision-making.

“Developmental evaluation applies to an ongoing process of innovation in which both the path and the destination are evolving. It differs from making improvements along the way to a clearly defined goal. ... Innovation is distinct from improvement in that it causes reorganization at a systems level and can occur at the level of an organization, a network or society at large.”⁴⁹



⁴⁸ Patton, *supra* note 44 at 4.

⁴⁹ Jamie AA Gamble, *A Developmental Evaluation Primer* (Montréal, JW McConnell Family Foundation, 2008).

Case Example – Vibrant Communities

“Vibrant Communities has used developmental evaluation with communities, pursuing multiyear, collaborative, comprehensive poverty reduction initiatives. The primary fit of developmental evaluation and Vibrant Communities arises from the complexity of the initiative: multiple stakeholders trying to address interconnected root causes of poverty in a constantly changing environment. New players are frequently coming on board and strategies for change are constantly in flux as new learning emerges and operating environments (e.g., political) change. At a broader level, the initiative’s leadership has found Developmental Evaluation useful in supporting continuous innovation and in generating knowledge about this approach to community building”⁵⁰

Case Example – Ontario Science Centre’s Agents of Change Initiative

The Science Centre asked how they could foster innovation in Canada and decided to reconceptualise what it means to be a visitor to their organization so individuals would be directly engaged in scientific research. Planning the initiative, implementing it and adapting it occurred at the same time. New models were being used each day with observation and feedback, as well as changes being made daily. The evaluation helped identify creative solutions to the idea of fostering innovation for visitors on an ongoing basis.⁵¹

Development evaluation is appropriate when innovation is identified as a core value and where board and staff agree about the innovation and are willing to take risks. Other preconditions for this type of evaluation are: a high degree of uncertainty about the path forward, available resources, and suitable organizational culture for exploration and inquiry.⁵² Developmental evaluation is an intensive process that requires significant investment.

⁵⁰ *Ibid* at 39.

⁵¹ *Ibid*.

⁵² *Ibid*.

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Advocacy Evaluation

Many organizations are engaged in advocacy efforts that are difficult to evaluate with traditional social science methods due to a number of unique challenges. Advocacy efforts take a significant amount of time to produce change, are subject to external forces and attribution, and involve constantly shifting strategies.⁵³ It is also difficult to identify meaningful outcomes associated with advocacy efforts when it is virtually impossible to know all the factors that are important for social change.⁵⁴

An increased emphasis on advocacy and policy change in the non-profit sector has led to the development of specific tools to address the challenges in evaluating this type of work. Several guides that have been developed emphasize linking theory to outcomes and offer examples of outcomes that are suited to the field of advocacy.

The *User Guide to Advocacy Evaluation Planning* by the Harvard Family Research Program suggests a four-step approach: focusing, mapping, prioritizing and designing. **Focusing** involves considering whom the evaluation is for and how it will be used as well as what evaluation questions users want answered. **Mapping** is the visual representation through logic models of the links between strategies and outcomes. **Prioritization** recognizes that there are not enough resources to collect data and all aspects of the advocacy strategy. **Designing** involves selecting measures that will capture whether advocacy efforts have been successful. While this type of evaluation is process-oriented, clients and communities can easily be involved in this form of evaluation as well.⁵⁵

⁵³ Organizational Research Services, *A Guide to Measuring Advocacy and Policy* (Baltimore: Annie E Casey Foundation, 2007) at 7.

⁵⁴ *Ibid* at 8.

⁵⁵ *Supra* note 13.

Participatory Evaluation

Definition

Participatory evaluation means involving or collaborating with individuals, communities, institutions, or others affected by a program or project that is the subject of evaluation.⁵⁶ Usually, both the people affected by the decision or project work with evaluators in one or more stages of the evaluation process.⁵⁷ This is at odds with the more typical program evaluation that relies only on outside experts who are usually not involved with or affected by the program or project.

Heron writes about the democratic nature of participatory evaluation and participatory action research, describing it as the “least extractive of approaches to evaluation”.⁵⁸ Heron notes that participatory evaluation values diverse ways of knowing, including the theoretical, practical and experiential.⁵⁹ Ledwith and Springett note the following:

Participatory evaluation draws heavily on Paulo Freire’s epistemology that action and reflection are indissolubly united and through praxis critical consciousness develops leading to further action through which people start to see that their situation is a historical reality susceptible to transformation.⁶⁰

This transformative approach focused on social change with historically marginalised communities aligns well with the mission of clinics.

Participatory evaluation can take on many forms. Participants can be the primary decision makers through the life of an evaluation, or they can be involved in one portion of the evaluation.

⁵⁶ J Bradley Cousins & Elizabeth Whitmore, “Framing Participatory Evaluation” (1998) 80 *New Directions for Evaluation* 5.

⁵⁷ Stephen B Fawcett et al, “Empowering Community Health Initiatives Through Evaluation” in D Fetterman, S Kaftarian & A Wandersman, eds, *Empowerment Evaluation* (Thousand Oaks: Sage, 1996) 161.

⁵⁸ John Heron, *Co-operative inquiry: Research into the human condition* (London: Sage, 1996).

⁵⁹ *Ibid.*

⁶⁰ Jane Springett, “Integrating Values: Research and Knowledge Development through the use of Participatory Evaluation in Community Based Health Promotion” (2010) 16:31 *Estudios sobre las Culturas Contemporaneas* 277 at 288.

Community members can be involved in participatory evaluation in many different ways. Here are some examples:

- Acting as a research ethics board to set acceptable community engagement terms
- Designing the terms of engagement of a research project
- Establishing research questions
- Designing methods of data collection
- Recruiting participants
- Conducting interviews
- Writing reports
- Convening report-back/ feedback sessions
- Testing recommendations
- Evaluating the research process
- Teaching others how to evaluate

Participatory evaluation is well suited for community clinics that would like to measure whether their services and/or advocacy initiatives are meeting and responding to community needs. Participatory evaluation includes all the stakeholders allowing community members to be involved in the creation of the evaluation. In fact, community members are considered leaders and partners. It is community member stakeholders that are in the best possible position to identify the key outcomes and processes that are relevant to evaluation.

Case Example – Girls Study Girls Inc.

A national organization empowering young girls in the US sought to evaluate the impact its programming had on participants. The lead researcher on the project employed participatory evaluation by having several of the participants (12 year old girls) conduct the research themselves. The girls were trained in research methods, ethics and data analysis. With guidance from the project lead, the girls developed research questions, conducted interviews, and analyzed the data for themes and percentages. They created reports and presented their findings to head office staff.

⁶¹ Randy Koch, June M Cairns & Molly Brunk, "How to Involve Staff in Developing an Outcomes-Oriented Organization" (2000) 23:1 Education & Treatment Children 41; Joy S Kaufman et al, "Utilizing Program Evaluation as a Strategy to Promote Community Change: Evaluation of a Comprehensive, Community-Based, Family Violence Initiative (2006) 28 Am J Community Psychology 191 at 192 [Kaufman et al].



Benefits

Benefits of participatory are well suited to the particular goals of clinics.

- 1) Communities are experts in their own experiences and are able to understand and access individuals and communities that are often difficult or impossible for evaluation experts to engage with
- 2) Community experts may speak the same language(s) and have access to specialized community knowledge (such as where people congregate, what approaches will be well received, etc.)
- 3) Community members might experience social or psychological benefits from being involved in evaluating programs or projects that affect them directly (“empowerment evaluation”)
- 4) Since the community is involved in the evaluation process, the results are more likely to benefit communities rather than funders or researchers. It is also more likely that community members will “buy in” when they have been involved in a change process

5) Participatory evaluation can foster the development of a collaborative relationship between community members and outside experts

6) If people are involved in the initial evaluation then the goals and indicators will be more accurate⁶²



Fawcett *et al* described benefits of collaborative relationships between community members and outside experts as follows:

In collaboration, the involvement of outside experts facilitates access to established and innovative methods to enable broader support and accountability to outside audiences such as grant makers. Working together, local people and outside researchers share in setting the research agenda, gathering information, making sense of it, and using information to celebrate and make adjustments.⁶³

Involving the community in evaluation can also increase buy in from clinic staff who might also view findings as more reliable. Often, participatory evaluation also includes formative program implementation. This could be especially useful for long-term advocacy efforts in order for the clinic and community to constantly adjust its strategies and tactics. Participatory evaluation methods often result in qualitative data collection which is often important to evaluate meaningful systemic impact.

⁶² Michael Quinn Patton, *Utilization-Focused Evaluation: The New Century Text*, 3rd ed (London: Sage, 1997).

⁶³ Stephen B Fawcett et al, "Building Capacity for Participatory Evaluation within Community Initiatives" (2003) 26:2 *J Prevention & Intervention in Community* 21 at 23.

Part 4: Framework for Participatory Evaluation

The tools and examples presented above are first steps in assessing the indirect work of community legal clinics. A truly community based organization needs to go beyond evaluation of current efforts to fully incorporate the community in setting the agenda for future systemic work. This means letting the community direct the clinics efforts, not merely evaluating them.

This Part provides an overview of **stages** to guide a participatory evaluation of various advocacy programs/efforts. Focussing on a general framework for evaluation provides guidance to community clinics while remaining flexible enough to take into consideration the variations in systemic work and access to available resources. We have adapted the framework provided in Papineau & Kiely⁶³ for use in the specific context of community clinics. Note that this framework assumes that the choice of evaluation topic (if not mandated) is chosen through community consultation.

Framework for Participatory Evaluation

Step 1 Choose your clinic's role

Role of the Facilitator

It is critical that a trained facilitator guides all evaluations.⁶⁴ Facilitators are not decision makers but rather guides that keep the evaluation process moving and supporting the evaluators navigate challenges as they arise. Clinics can choose to have an internal staff member or an external professional and/or community member facilitate the process. All options are dependent providing funding to ensure evaluation occurs. Clinics can request funding for an external facilitator or request funding for staff members to be trained in evaluation. While it is possible for community members to engage in this work on a voluntary basis, it is clearly preferable for major roles to be compensated in some way. Again, it is important to keep in mind that the role of the facilitator is to guide the process, not to take ownership or control of the evaluation.

⁶⁴ Danielle Papineau & Margaret C Kiely, "Participatory evaluation in a community organization: Fostering stakeholder empowerment and utilization" (1996) 19:1 Evaluation & Program Planning 79 [Papineau & Kiely].

⁶⁵ J Bradley Cousins & Lorna M Earl, "The case for participatory evaluation" (1992) 14:4 Educ Eval & Pol'y Analysis 397.

What Makes a Good Research Facilitator

1. The facilitator must have necessary expertise and technical research skills.
2. The facilitator must be accessible for participatory activities. Does s/he have the time to nurture a participatory environment?
3. The facilitator should be a good teacher particularly about evaluation.
4. The facilitator must be able to transcend the expert-novice relationship and acknowledge the goal of honouring primary users.
5. Facilitator must be comfortable with flexible goals and outputs.
6. Facilitator should have great conflict resolution skills.

The clinic itself might also have to consider the following recommendations from Cousins and Earl, particularly if evaluation is not part of the institutional culture.⁶⁶



⁶⁶ *Ibid.*

Organizational (Clinic) Requirements:

1. Evaluation must be valued by the clinic.
2. Clinic must provide the time and resources required.
 - a. For example, staff time should be freed up to participate in the project.
3. Clinic must be committed to organizational learning as a way of improvement.
 - a. The clinic strives for “organizational memory” whereby staff have capacity to carry out the process themselves through strategies such as assigning key personnel to evaluations and documenting procedures.
4. Clinic staff participating in the evaluation must be motivated to do so.
 - a. Are they aware of the scope of the project?
 - b. Can they afford to be away from their clinic duties?
 - c. What contributions can they make?
 - d. What impact will their participation have on other relationships (for example with outside organizations or service users)
5. Clinic must hold the assumption that if staff does not have research knowledge/experience to carry out required tasks, they can acquire that knowledge and experience given appropriate training.
 - a. It is critical that some clinic members have the opportunity to develop research skills so they can carry out subsequent facilitator roles.

Initiation of Evaluation

The evaluation is initiated by the facilitator who must seek approval from the clinic board to begin the evaluation. Again, the community will generally identify the focus of the evaluation – whether this be of a specific program or the clinic operations as a whole. After securing approval from the clinic board (which itself should be representative of the community), the facilitator identifies interested stakeholders and recruits potential members of the evaluation team.

Participant selection will depend on the activity or program that the clinic is evaluating and the relevant community. Composition of the team will be different each time an evaluation is undertaken. For example, for an evaluation of a public legal education program the facilitator may wish to include attendees of the program and invested clinic staff or students. For a broader community development initiative, the facilitator may want to

include representatives from outside organizations, members of the community, clinic staff and students.

A foundational principle of any participatory evaluation is that the community must be included in all evaluations. The facilitator cannot decide only to include clinic staff and/or academic personnel. A critical reflection from an effectiveness evaluation by Wallace illustrates this point.⁶⁷ She notes that the decision to exclude service users in an effectiveness evaluation of a health care management system may have biased the evaluation to the viewpoints of those in positions of power. To maintain the integrity of the community aspect of legal clinics, it is imperative that the community is always included in evaluation.

For many marginalised communities, evaluation can be a colonising act. In some cases, **communities have their own research ethics protocols** that are formal or informal. Many Indigenous communities have research protocols for anyone conducting research on their territories and/or with community members. In other cases, the research team might choose to develop their own research ethics protocols to guide their work.

Having Trouble Recruiting? Strategies to Increase Community Participation in Evaluation

Show-up to community meetings, and other important community events

Give feedback data to all community members through newsletters, presentations, community forums, reports

Are there groups of community members unwilling to participate? Is lack of trust an issue and/or other barriers to participation? Ask!

Work with trusted intermediaries. Respond to their concerns and feedback.

Demonstrate long-term commitment to the community

Provide training and technical assistance to collaborators. Depending on resources and the evaluation, it may be useful to offer training to the broader community or smaller community-based organizations

⁶⁷ Tanner LeBaron Wallace, "Integrating participatory elements into an effectiveness evaluation" (2008) 34:4 Studies in Educational Evaluation 201.

Step 2

Orienting and Training Team Members in the Evaluation Process

Once team members are selected, they should be included in all stages of the evaluation. A critical first step in ensuring meaningful participation is involving all team members in the initial decisions about **ethics** and **methods**. For novice members, the facilitator should ensure participants understand the nature of participatory evaluation and set out timelines, expectations and guidelines for participation with the research team. Cousins and Weaver suggest asking key questions about the research process. Who will have control of technical decision-making? All team members? The facilitator? Some groups will have more comfort leaving technical issues up to the facilitator, while others want all decisions discussed by the team.

What about Ethics?

Many ethical issues come up in research and evaluation. Whether or not there is a formal research ethics process in place, the ethics of evaluation is an important consideration. Ethics for lawyers are different from ethics for researchers, although there are similar concerns. For example,

- a) How do we ensure that we understand the risks to all participants? How will those risks be mitigated?
- b) How do we know who we will share the data with? Who will have the original data (interviews, recordings) and who will see the report? Will it be public? Will others know what the research participants said or not?
- c) Will research participants be “anonymous”? Will people be able to identify their names? In some cases, this might be useful and in others it is not desirable, especially if they are talking about things they might wish to remain private.
- d) Are you a member of and/or researching with an Indigenous community? What are existing protocols about research in that community? If no formal protocols have been adopted, it is worth asking what protocols would be appropriate. Community approval might be necessary to proceed. There are sample research protocol agreements available online including from the University of Victoria’s Faculty of Human and Social Development: online: <http://web.uvic.ca/igov/uploads/pdf/protocol.pdf>. The Panel on Research Ethics of the Government of Canada has a new Chapter in their mandatory ethics

training for researchers entitled “Research Involving the First Nations, Inuit and Metis Peoples of Canada” online at <http://www.pre.ethics.gc.ca/eng/policy-politique/initiatives/tcps2-eptc2/chapter9-chapitre9/>. This piece emphasizes the colonial history of research with (and ‘on’) Indigenous communities, and a reorientation toward respect and collaboration.

- e) What will be done with the results? Who will benefit from the results?
- f) What will happen if results are controversial?

What are participation considerations?

Participation involves some planning to ensure maximum accessibility. There are attitudinal barriers, systemic barriers, physical barriers and information or communication barriers for people with disabilities. Is your location accessible to people with mobility challenges? Is an interpreter required for multiple languages including sign language? Can people sit and, if so, for how long? There are several guides to how to plan accessible meetings including here: Ontario Municipal Social Services Association (2013) online:

<http://omssa.com/accessible-community-engagement/omssa-guides/view-the-guides/guide-to-conducting-accessible-meetings>. The Accessibility for Ontarians with Disabilities Act also has a guide to holding accessible meetings (2009) at <http://www.aoda.ca/plan-an-accessible-meeting/>.

Participation challenges can also involve different levels of education. Speaking in technical jargon or legalese isn’t helpful to anyone.

Other participation considerations have more to do with who has institutional sources of power. Who is seen as the “expert”? The facilitator and the group have to work hard to make sure that person or people doesn’t dominate.

What are “Research Methods”?

Research methods are the things you do in order to gather research. For example, the research team might want to interview individuals using open questions. They might want to hold a focus group in which a group of people gets together to gather feedback. They might want an online survey or questionnaire. They might want to use open questions or use forced choice or “Likert” type questions (where respondents choose between 1 and 5, or example). Interviews can be very structured, or not very structured at all.

There are other ways of researching that might be less common in a clinic environment. Observations are one way to understand a phenomenon. Or, the research team might to choose a case study to understand one example of the thing they are trying to understand.

The team will consider: what kind of data do we want? Who do we need to ask? What resources and time do we have to gather the type of data we want?

Important first steps include selecting the questions to be addressed and establishing data collection methods.

Suggested Stage 2 Steps

- 1) Train the team (if novice)
- 2) Collectively determine the questions they want the evaluation to address. Questions should be phrased clearly and prioritized according to their potential utility.
- 3) Select methods of data collection should be selected for each question. Note that some data collection methods are more resource intensive than others (semi structured interviews will require training to conduct and more time than questionnaires). Questions may need to be reprioritized based on the feasibility of data collection.
- 4) Who is the sample group? Who will we interview? Who will carry out data collection and what supports will they need?

Step 3

Data and Analysis Reporting

Once the data is collected according to the method selected, either the entire research team or members of that team should be given training on how to analyze data. Along with the facilitator, the team should perform data analysis with assistance of facilitator.

After data analysis is complete, the team drafts a report. This may be delegated to a smaller subset of the team but must be agreed on by all members. Reporting can be made in writing, in short forms, orally, or in another form meaningful to the research team and the research subjects. Often, reports are useful for redirecting programming, drafting funding proposals, in discussions regarding strategic objectives, and in writing the annual report and summary of activities.

Step 4

Strategic Planning and Implementation

In order to plan how to disseminate results, a strategic planning meeting (or meetings) is useful to study the evaluation reports and decide on follow-up steps. If the clinic program activity is of a format that may be replicated in the future the evaluation questions can be revised for further use on an ongoing bases. Dissemination should attend to who contributed to the evaluation and the communities it will affect. Dissemination must also consider issues of accessibility.



Step 5

Feedback on Participatory Evaluation Process

To gain insight on the process of evaluation, participants should be interviewed about their experience or given a questionnaire for feedback. This will help identify benefits and challenges of the process in community legal clinics and will help shape future evaluations. A sample evaluation process questionnaire is included here.

From Papineau and Kiely⁶⁸

1. What do you think of the evaluation process to date?
 - a. What are the strengths of the process?
 - b. Do you have any suggestions about changes that should be made regarding the remainder of the evaluation process?
 - c. In retrospect are there any aspects of the process up to now that could have been handled differently? How?
2. How has your participation in the evaluation influenced you personally?
 - a. Have you learned something new, or developed new skills? Please elaborate.
 - b. Have you learned something new, or developed new skills? Please elaborate.
3. What were your expectations and your personal goals concerning the evaluation?
 - a. To what extent have they been realized up to now?
 - b. Have your expectations changed since the beginning of this process? If yes, how?
4. What are your impressions of the evaluation's group process?
5. Would you feel able to facilitate a program evaluation?
 - a. What are the steps you would feel confident in undertaking?
 - b. What are the steps you would feel confident in undertaking?
6. Please describe your evaluation experience?
 - a. Have you ever participated in a program evaluation? If so, what was your role?
 - b. Have you ever worked in an organization in which an evaluation was taking place or had taken place in the past? Please describe the evaluation?
 - c. Have you ever worked in an organization in which an evaluation was taking place or had taken place in the past? Please describe the evaluation?

⁶⁸ Papineau & Kiely, *supra* note 63.

Example of Participatory Action Research: Perceptions, Impact and Outcomes Associated with Housing Services in Australia

This study sought to evaluate the impact of a consumer charter on outcomes for public housing tenants. The evaluation took a community-based approach and focused on community members taking ownership of the research process. Eight public housing tenants were trained as community researchers through a six-week training program. The community researchers (CRs) worked collaboratively with residents through open interviews and continuous reflection to develop a semi-structured interview guide. The CRs then conducted 151 personal interviews with residents. They were trained in transcribing and recording data, as well as thematic analysis. Findings were summarized into data tables and quotes that illustrated themes were incorporated into a report.⁶⁹

Considerations for Honouring Community in Participatory Evaluation

Many authors express concern about how to balance diverse groups, particularly when traditionally powerful groups include or are perhaps led by traditionally marginalised groups. Here are three lists of considerations for participatory evaluation with diverse groups.

Karnilowicz et al. Three Key Conditions

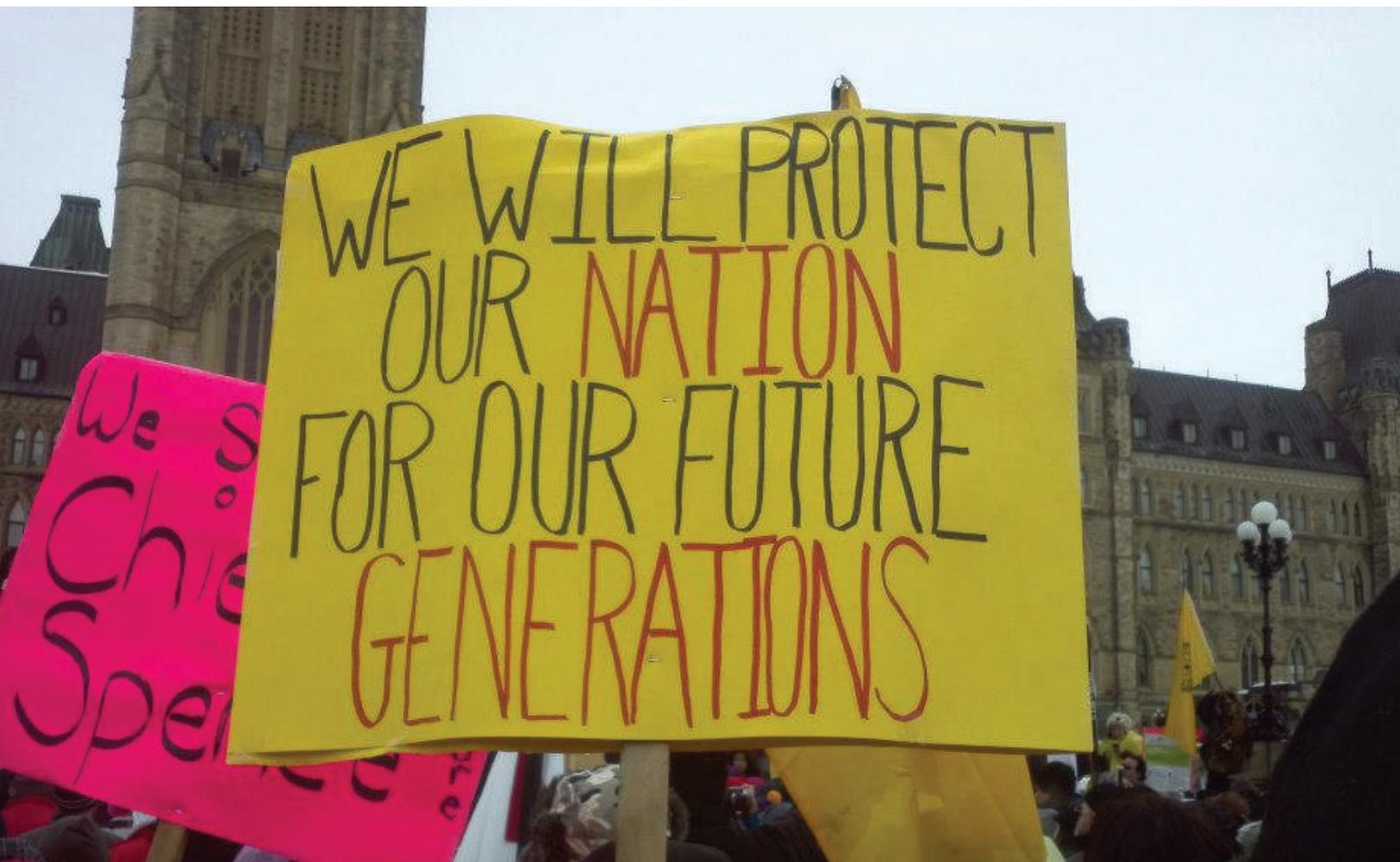
1. **Informing, motivating and training** participants (particularly weaker interest groups) to take part in evaluation
 - a. It is challenging for facilitators to ensure traditionally powerful voices don't overwhelm groups generally excluded from evaluation.
 - b. Simply bringing weaker groups to the table is not enough to ensure their participation
 - c. Clear information concerning the terms of the evaluation and the opportunity to make a point of view heard is necessary to mobilize different groups.
 - d. Training sessions are necessary to introduce limits and expectations, time frames, and participant expectations.

⁶⁹ Wally Karnilowicz, Lütfiye Ali, & Jenny Phillmore, "Community research within a social constructionist epistemology: Implications for "Scientific Rigor"" (2014) 45:4 *Community Development* 353.

2. Allowing interest groups to **construct a shared vision**
 - a. Getting people to discuss and define a common viewpoint is essential, with emphasis on the needs of vulnerable groups.
 - b. Empowerment evaluation approaches can make people aware of common interests and brings them together around a collective view.
 - c. The facilitator favours participatory democratic style by giving a voice to a range of perspectives.

3. **Balancing points of view**
 - a. Establishing awareness of common interests and disagreements is necessary but not sufficient.
 - b. Different participants need to be able to express and defend their point of view.
 - c. Avoid having whoever shouts the loudest impose their point of view.
 - d. Evaluator has to provide for an equal expression of the participants points of view.⁷⁰

⁷⁰ Béatrice Plottu & Eric Plottu, "Approaches to Participation in Evaluation: Some Conditions for Implementation" (2009) 15:3 *Evaluation* 343.



Papineau & Kiely (1996) used the following guiding principles for a participatory evaluation of a community economic development organization:

- **Choice of Stakeholder Groups:** should be broadly inclusive, centering on staff, volunteers and clients actively involved in the evaluation process
- **All stakeholders collectively responsible** for evaluation design and implementation.
- **Evaluator role** should be to facilitate discussion, teach, advise & coordinate the process.
- **Evaluation to be formative** – directed at improving services and broadening understanding of program.
 - There should be no restriction on the number of evaluation topics.
- **Evaluation setup should sustain participant empowerment** by:
 - Fostering collective control, consensual decision-making and full participation in implementation throughout the process
 - Promoting acquisition of skills and knowledge transferable to other contexts.
 - Fostering instrumental, conceptual (educational) and symbolic (political) use of evaluation results to be applied in action.

House (2005) suggests 3 key factors for bringing together diverse views:

- **Inclusion:** working with under-represented and powerless groups as key stakeholders, not just sponsors and well organized-groups.
 - **Note:** it is not necessary to give equal weight to every interest or concern but all relevant ones should be considered.
- **Dialogue:** evaluation should encourage dialogue between and within interest groups
 - **Note:** the aim is to enhance an understanding of all participant interests, values, and views.
- **Deliberation:** aim is to achieve, through rational discussion, a set of outcomes, values and conclusions involving all those concerned.
 - **Note:** it may only be through participation that stakeholders are able to construct their interests in interaction with others.

Part 5: Additional Materials on Systemic Advocacy And Evaluation

Title	Author	Source	About
The Advocacy Strategy Framework: A Tool for Articulating an Advocacy Theory of Change	Centre for Evaluation Innovation	http://www.evaluationinnovation.org/sites/default/files/Advocacy%20Strategy%20Framework.pdf	A simple one-page tool for thinking about the theories of change that underlie public policy advocacy strategies.
Organizing Kit	The People's Movement Assembly	http://pma.unsif.com/wp-content/uploads/2014/11/PEOPLES_MOVEMENT_ASSEMBLY_ORGANIZING_KIT_FINAL2.pdf	A kit for organizers and facilitators, explaining how the People's Movement Assembly is an important process for growing strong social movements and outlines how an assembly works, provides an overview of facilitation, and includes sample tools used at assemblies.
Collection of Resources	Tools for Change	http://www.toolsforchange.net/resources/	Guest blogs from activists on the following topics: Allies; Facilitation and Governance; Fundraising; Media; Organizing and Campaigning; Personal Development; Social Media; Tactics.
Beautiful Trouble	Network of activists, artists, trainers	http://beautifultrouble.org/	Beautiful Trouble is a book, web toolbox and international network of artist-activist trainers whose mission is to make grassroots movements more creative and more effective.
Advocacy Toolkit	Plan International	https://plan-international.org/advocacy-toolkit	A guide book for advocacy, with worksheets, activities, etc.
Organizing for Power, Organizing for Change	Lisa Fithian	https://organizingforpower.wordpress.com/	A collection of resources for organizing and social action.
ACT! 2015 Advocacy Strategy Toolkit	UNAIDS	http://www.unaids.org/sites/default/files/media_asset/advocacy_toolkit_en_0.pdf	A guide book for advocacy, with worksheets, activities, etc.

Courses and Webinars	Inner Activist	http://www.inneractivist.com/	
Uncommon Ground: Race and America's Future	Blackwell, Kwoh, and Pastor	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	Summarizes key issues and strategies related to achieving racial equity in America. Chapter 6 discusses the roles of creating change both in policy and community leadership to get equity results.
Racial Equity Impact Assessment Toolkit	The Applied Research Centre	https://www.raceforward.org/sites/default/files/RacialJusticeImpactAssessment_v5.pdf	Helps identify how different racial and ethnic groups will be impacted by proposed actions or decisions, such as those included in policy proposals.
Advocating for Change (2004)	PolicyLink	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	Online manual, with case studies, providing an in-depth understanding of the advocacy process for equity.
Advocating for Equitable Development (2004)	PolicyLink	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	Describes advocacy strategies to build an effective campaign for equitable development.
Chapati Diagrams	Reflect-Action	http://www.reflect-action.org/node/57	For powermapping; to allow advocates and others to analyze power relations, which are important to guide equity campaign strategy.
Telling Your Story: A Guide to Preparing Advocacy Case Studies	The Advocacy Institute	http://www.racialequitytools.org/resources/files/advocacy.pdf	
The Challenge of Assessing Policy Advocacy: Strategies for a Prospective Evaluation Approach	Blueprint Research and Design	http://www.theoryofchange.org/wp-content/uploads/toco_library/pdf/2005_-_Guthrie_-_The_challenge_of_assessing_policy_advocacy.pdf	Outlines and approach to prospective advocacy evaluation design and includes a discussion of how to use benchmarks.
Unique Methods in Advocacy Evaluation	Coffman and Reed	http://www.innonet.org/resources/files/Unique_Methods_Brief.pdf	Four methods for self-assessment that advocates can use to get results.
Evaluating Social Justice Advocacy: A Values Based Approach	Klugman	http://www.evaluationinnovation.org/sites/default/files/Klugman%20Brief.pdf	Discusses the importance of viewing evaluation and advocacy through the lens of social justice.

A Guide to Measuring Advocacy and Policy	Organizational Research Services	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	To help advocates use benchmarks and indicators to measure advocacy and policy change.
A Handbook of Data Collection Tools: Companion to "A Guide to Measuring Advocacy and Policy"	Organizational Research Services	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	To help advocates use benchmarks and indicators to measure advocacy and policy change.
Collection of Resources	Point K Learning Centre	http://www.innonet.org/resources/	Clearinghouse of research and information on the evaluation of advocacy and capacity building.
Speaking for Themselves: Advocates' Perspectives on Evaluation	Innovation Network, Inc.	http://www.innonet.org/client_docs/File/advocacy/speaking_for_themselves_well_basic.pdf	A study capturing advocates' perspectives in evaluation.
Community Organizing and Community Building for Health and Welfare	Meredith Minkler	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	Important and established ways to approach community building and organizing.
Participatory Decision-Making Among Community Coalitions	Speer & Zippay	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	Insights into the analysis of meeting minutes as a strategy for tracking the progress of a campaign or initiative.
Capacity Building: Linking Community Experience to Public Policy	Public Health Agency of Canada	http://carleton.ca/cure/wp-content/uploads/capacity_2000_e.pdf	Helps people in both the public sector and the community understand how to include community experience in the policymaking process.
PARTNER Tool	Program to Analyze, Record, and Track Networks to Enhance Relationships	http://partnertool.net/	Online tool to assess partnerships and collaboration.
Are We There Yet? A Communications Evaluation Guide	Communications Network	http://www.ccmc.org/node/16106	Helps advocates improve their communications efforts at the start of a campaign or as a campaign progresses.

News for a Change: An Advocate's Guide to Working with the Media	Wallack, Woodruff, Dorfman, and Diaz	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	A Guidebook for strategically using media, advertising, and community organizing to advance a public policy initiative.
Street Science: Community Knowledge and Environmental Health Justice	Corburn	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	Discusses the power of community knowledge to transform systems and environments; including case studies that illustrate how local community experts might partners with traditional researchers to improve policy outcomes.
Community Based Participatory Research for Health: From Processes to Outcomes	Minkler & Wallerstein	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	Collection of guidance and case studies for carrying out community-led research to address community priorities.
Community-Based Participatory Research: A Strategy for Building Healthy Communities and Promoting Health through Policy Change: A Report to The California Endowment	Minkler, Garcia, Rubin & Wallerstein	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	How community-based participatory research can influence policy.
Stakeholder Involvement in Evaluation: Three Decades of the American Journal of Evaluation	Rodriguez-Campos	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	Discusses the value and trends in stakeholder engagement in evaluations.
People Making Public Policy in California: The PICO California Project	Speer	http://www.policylink.org/equity-tools/gear/measurement-strategies/tools-and-resources	An evaluation report that highlights community leadership in policy change; providing an important example of how to use research to track advocacy.
Community Toolbox		http://ctb.ku.edu/en	An extensive online resource of tools for community change, and includes guidance on conducting participatory & empowerment evaluations and research.

<p>Social Movements and Philanthropy: How Foundations Can Support Movement Building</p>	<p>Masters & Osborn</p>	<p>http://evaluationinnovation.org/sites/default/files/Masters%20Movement%20Building%20.pdf</p>	<p>How foundations can support movement-building; including a table of important elements at various stages of a movement.</p>
<p>Transactions, Transformations, Translations: Metrics that Matter for Building, Scaling, and Funding Social Movements</p>	<p>Pastor, Ito, and Rosner</p>	<p>http://www.policylink.org/equity-tools/gear/measure-ment-strategies/tools-and-resources</p>	<p>Guidance on metrics includes discussions of organizing, civic engagement, alliance building, leadership development, and others.</p>
<p>The Change Toolkit</p>		<p>http://www.thechangetoolkit.org.au</p>	<p>Comprehensive resource created by the Federation of Community Legal Centres in Australia.</p>

Appendices

Appendix A

Logic Model Template for Clinic's Community Development PROGRAM

Goal: To promote access to justice throughout Ontario for low-income individuals by providing consistently high quality legal aid services, specifically community development, that is cost-effective, efficient and meaningful.

Clinic Mission Statement:

LOGIC MODEL: Community Development Program							
What do you contribute? <i>Inputs</i>	What are you going to do? <i>Activities</i>	What you want at the end of the day?			What will show you're getting there?		
		<i>Short-term Outcomes</i>	<i>Medium-term Outcomes</i>	<i>Long term Outcomes</i>	<i>Outputs</i>	<i>Indicators</i>	<i>Measurement Tool</i>
<input type="checkbox"/> Board members <input type="checkbox"/> Staff from Clinic <input type="checkbox"/> Volunteers <input type="checkbox"/> Community representatives <input type="checkbox"/> Equipment and Supplies <input type="checkbox"/> Facilities <input type="checkbox"/> Other	1. Assess <input type="checkbox"/> community needs <input type="checkbox"/> clinic resources 2. Plan <input type="checkbox"/> program : # of programs <input type="checkbox"/> projects : # of programs 3. Implement Projects: <input type="checkbox"/> Public Legal Education <input type="checkbox"/> Law Reform <input type="checkbox"/> Community Building/Special Projects 4. Evaluate <input type="checkbox"/> projects <input type="checkbox"/> program	Community development plan aligned with: <input type="checkbox"/> community needs <input type="checkbox"/> clinic system mandate and priorities <input type="checkbox"/> LAO mandate Service delivery plan that is: <input type="checkbox"/> accessible <input type="checkbox"/> cost-effective <input type="checkbox"/> addresses target population	Clinic has increased ability to: <input type="checkbox"/> evaluate and respond to community needs <input type="checkbox"/> increased capacity to engage the community <input type="checkbox"/> deliver their community development program <input type="checkbox"/> access target population <input type="checkbox"/> deliver cost-effective projects/programs	<input type="checkbox"/> increased access to justice <input type="checkbox"/> intended benefit of law <input type="checkbox"/> increased justice/fairness in the legal system <input type="checkbox"/> community has increased awareness of justice issues <input type="checkbox"/> legal system is more aware of legal needs of low-income people <input type="checkbox"/> increased legal literacy <input type="checkbox"/> increased personal empowerment <input type="checkbox"/> increased community capacity <input type="checkbox"/> increased civic participation <input type="checkbox"/> increased social inclusion <input type="checkbox"/> increased social capital <input type="checkbox"/> poverty reduction <input type="checkbox"/> prevention of homelessness <input type="checkbox"/> economic development <input type="checkbox"/> increased project/program efficiency <input type="checkbox"/> Other:	<input type="checkbox"/> community development plan <input type="checkbox"/> service delivery plan	<input type="checkbox"/> community development plan completed and disseminated <input type="checkbox"/> projects identified <input type="checkbox"/> projects implemented <input type="checkbox"/> increased access to target population <input type="checkbox"/> sustainability	<input type="checkbox"/> annual review of community needs <input type="checkbox"/> feedback from stakeholders <input type="checkbox"/> internal clinic monitoring/reporting system <input type="checkbox"/> cost-effectiveness analysis

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Evaluation Questions

Did our CD activities reach our target population?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Explain:
Were key stakeholder and recipients satisfied with our CD activities?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Explain:
Did our CD activities meet their intended objectives?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Explain:
Were there any unintended outcomes our CD activities?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Explain:
What has changed as a result of our CD activities?			
What would our clinic do differently next time to improve the CD program?			

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Appendix B

Template for Community Building and Special Projects

Goal: To promote access to justice throughout Ontario for low-income individuals by providing consistently high quality legal aid services in a cost-effective and efficient manner.

Clinic Mission Statement:

LOGIC MODEL: Project Name: Project Description:					Target Population:		
What do you contribute? Inputs	What are you going to do? Activities	What you want at the end of the day?			What will show you're getting there?		
		Immediate	Within one year of project completion	After one year of project completion			
		Short-term Outcomes	Medium-term Outcomes	Long term Outcomes	Outputs	Indicators	Measurement Tool
: # Staff from clinic : # of Volunteers : # of Agency Reps : # of Community members : # of Students Space donated by Equipment (in-kind) from <input type="checkbox"/> food <input type="checkbox"/> childcare <input type="checkbox"/> translation <input type="checkbox"/> accessible space <input type="checkbox"/> transportation <input type="checkbox"/> office supplies <input type="checkbox"/> office equipment Financial resources from: <input type="checkbox"/> grants <input type="checkbox"/> contracts <input type="checkbox"/> donations Other:	Planning to develop outreach and community building projects Respond to: <input type="checkbox"/> the need identified by the community Respond by: <input type="checkbox"/> consult with citizens and community agencies <input type="checkbox"/> environmental scan <input type="checkbox"/> assessment of the needs and capacities of the identified target populations <input type="checkbox"/> research/literature review <input type="checkbox"/> identify key stakeholders <input type="checkbox"/> secure/assist to secure resources <input type="checkbox"/> develop community building strategies and special projects to respond to community needs Implementation <input type="checkbox"/> lead or participate in community building and special projects <input type="checkbox"/> clinic submits or supports grants	The clinic will have increased knowledge of: <input type="checkbox"/> community needs The clinic will have increased ability to act (skills): <input type="checkbox"/> respond to community needs <input type="checkbox"/> identify key stakeholders <input type="checkbox"/> develop coalitions/networks <input type="checkbox"/> engage key stakeholders <input type="checkbox"/> be responsive to community needs <input type="checkbox"/> develop community building and special projects <input type="checkbox"/> Other:	The clinic will have increased knowledge of: <input type="checkbox"/> their role in community building and developing special projects to respond to community needs <input type="checkbox"/> community needs and capacity The clinic will have increased ability to act (skills): <input type="checkbox"/> monitor community needs <input type="checkbox"/> respond to community needs <input type="checkbox"/> develop community building strategies <input type="checkbox"/> sustain involvement of key stakeholders <input type="checkbox"/> be responsive to community needs <input type="checkbox"/> mobilize for change <input type="checkbox"/> Other:	<input type="checkbox"/> increased justice/fairness in the legal system <input type="checkbox"/> community has increased awareness of justice issues <input type="checkbox"/> legal system is more aware of legal needs of low-income people <input type="checkbox"/> increased social inclusion <input type="checkbox"/> increased social capital <input type="checkbox"/> increased access to justice <input type="checkbox"/> increased legal literacy <input type="checkbox"/> increased personal empowerment <input type="checkbox"/> increased community capacity <input type="checkbox"/> increased civic participation <input type="checkbox"/> poverty reduction <input type="checkbox"/> prevention of homelessness <input type="checkbox"/> economic development <input type="checkbox"/> Other:	Activities <input type="checkbox"/> environmental scan report <input type="checkbox"/> needs assessment report <input type="checkbox"/> research/literature review/report <input type="checkbox"/> key stakeholder list <input type="checkbox"/> resources secured Project Development & Implementation <input type="checkbox"/> grants submitted <input type="checkbox"/> coalitions built <input type="checkbox"/> outreach strategies developed <input type="checkbox"/> consultations with community <input type="checkbox"/> evaluation report complete <input type="checkbox"/> evaluation report submitted or disseminated <input type="checkbox"/> Other:	<input type="checkbox"/> environmental scan report completed and/or disseminated <input type="checkbox"/> implementation of community building activity <input type="checkbox"/> implementation of special projects <input type="checkbox"/> final evaluation reports completed and/or disseminated : # of grants : # of partners : # of participants : # of requests for consultations : # of requests for letters of support for community initiatives <input type="checkbox"/> Other:	<input type="checkbox"/> pre-post evaluation of effectiveness of the community building strategies and special projects to the community <input type="checkbox"/> pre-post evaluation of effectiveness of the community building strategies and special projects to the clinic <input type="checkbox"/> internal clinic monitoring system for tracking community building and special projects <input type="checkbox"/> administrative chronology <input type="checkbox"/> meeting minutes <input type="checkbox"/> correspondence <input type="checkbox"/> feedback from target population <input type="checkbox"/> requests from community for community building and special projects <input type="checkbox"/> Other:

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LOGIC MODEL: Project Name: Project Description:					Target Population:		
What do you contribute? Inputs	What are you going to do? Activities	What you want at the end of the day?			What will show you're getting there?		
		Immediate	Within one year of project completion	After one year of project completion			
		Short-term Outcomes	Medium-term Outcomes	Long term Outcomes	Outputs	Indicators	Measurement Tool
	Develop / Participate <input type="checkbox"/> / <input type="checkbox"/> ad hoc steering <input type="checkbox"/> / <input type="checkbox"/> planning <input type="checkbox"/> / <input type="checkbox"/> networking <input type="checkbox"/> / <input type="checkbox"/> standing <input type="checkbox"/> / <input type="checkbox"/> other <input type="checkbox"/> Evaluate project <input type="checkbox"/> Other:						

Evaluation Questions	
Did we reach our target population?	<input type="checkbox"/> No <input type="checkbox"/> Yes Explain:
Were participants satisfied with our project?	<input type="checkbox"/> No <input type="checkbox"/> Yes Explain:
Did the project meet its intended objectives?	<input type="checkbox"/> No <input type="checkbox"/> Yes Explain:
Is the project worth the cost (cash and in-kind)?	<input type="checkbox"/> No <input type="checkbox"/> Yes Explain:
Were there any unintended outcomes of the project?	<input type="checkbox"/> No <input type="checkbox"/> Yes Explain:
What would we do differently next time to improve the project?	

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