Using Qualitative Data in Program Evaluation:  
Telling the Story of a Prevention Program  
May 6, 2009

Presenters: Cassandra Firman, Training and Technical Assistance Coordinator, FRIENDS; Susan Janko Summers, author and consultant to FRIENDS

Rosie Gomez: Thank you. Good morning and good afternoon. My name is Rosie Gomez, and I am from the Office of Child Abuse and Neglect here at the Children's Bureau. We're located within the Administration for Children and Families at the U.S. Department of Health and Human Services here in Washington, DC. I'm very pleased to welcome you all to our prevention webinar today, titled "Using Qualitative Data in Program Evaluation: Telling the Story of a Prevention Program."

We are so pleased that colleagues from FRIENDS, the National Resource Center for Community-Based Child Abuse Prevention Program, CBCAP, are here to share information about the work they are doing around qualitative evaluation. Linda Baker and Cassandra Firman from FRIENDS will be monitoring the rest of the calls.

The team at FRIENDS, including their consultants, have done several webinars with us, and I want to thank them for all their hard work, providing important technical assistance to communities they work with, and sharing the wonderful evaluation tools they have worked to put this together. And Linda will be introducing the other presenters for this call.

So before we get started, I just wanted to share a little of the background on this webinar, which some of you may know … have heard, if you joined our previous webinars. This is actually our 13th information call hosted by the Prevention Subcommittee of the Federal Interagency Workgroup on Child Abuse and Neglect. As some of you know, the Office on Child Abuse and Neglect is a lead on the Federal interagency collaborative effort related to Child Abuse and Neglect. So there's been a Federal Interagency Workgroup on Child Abuse and Neglect since the 1980s, and there are over 40 different Federal agencies represented in our group.

Two years ago we started the Prevention Subcommittee as a way to bring together the Federal staff and the different agencies who share a common interest in child maltreatment prevention. We have staff from CDC; Maternal and Child Health; SAMHSA; NIH; Department of Defense; Head Start; Child Care, Office of Special Education, ACF's Office of Planning, Research, and Evaluation; and the U.S. Department of Agriculture, just to name a few.

As part of the work of the subcommittee, we all agreed that there was a lot of great work happening at each of our agencies that we wanted our various grantees and other partners to know more about. So we agreed to host a series of information conference calls. And our hope is that through these calls we can learn more about each others' work and promote greater connections across our system and programs at the national, State, and local levels.

At that, we've been very excited at the level of interest for today's webinar. We actually have close to 300 people registered for the webinar, and a number of folks from several programs across the country, which include practitioners, policymakers, and researchers. And we're also happy to see that some of our regional staff and other Federal staff are joining as well. We've been excited at the diversity on the various calls we've had to date, and hope that we can get into some great discussion during this webinar.

Just a couple of logistic notes before we begin. This call is being recorded and will be posted along with the slides after this webinar; the call is operator-assisted, so you will need to notify the operator if you have a question.

With that, thank you all for joining us, I look forward to our conversations today, and I'm now going to pass this along to Linda Baker.

Ms. Baker: [03:26] Thanks Rosie, and good afternoon to everyone. On behalf of the FRIENDS National Resource Center I want to welcome you to today's webinar, and as a service at the Children's Bureau and a member of the Training and Technical Assistance Network, FRIENDS provides training, technical assistance, information dissemination, and product development for Federal grantee agencies implementing the CBCAP program.
Many people ask about our name, so I want to tell you that FRIENDS is an acronym, and it stands for Family Resource Information, Education, and Network Development Services, all of which are important to the CBCAP program. Since 1995 FRIENDS has provided services to build the capacity of State CBCAP lead agencies to strengthen and support families, to prevent child abuse and neglect, and to meet the requirements of Title II of the Child Abuse Prevention and Treatment Act.

Actually, since 1998 one of our areas of concentration has been to build capacity in evaluation. We've developed a wealth of information and resources, including an evaluation toolkit, that you'll find on our website at www.friendsnrc.org. One of our most recent publications, [titled] Using Qualitative Data in Program Evaluation, is available on our website for download.

And it's now my pleasure to introduce today's presenters, Cassandra Firman and Susan Janko Summers. Cassandra has been a training and technical assistance coordinator with FRIENDS for almost 10 years, and has developed, or coordinated the development of, many of our resources in evaluation, and Cassandra has spent the past 34 years working in educational and social service programs that strengthen families and increase safety for children.

And Susan Janko Summers is a FRIENDS consultant and was the lead author in our Using Qualitative Data in Program Evaluation publication that I just mentioned. Susan's professional training is in early childhood special education with an emphasis on high-risk children and families; she has conducted ethnographic research for more than 25 years, and her most recent qualitative research was part of an Early Head Start national study on infant mental health, and she's currently editing a book on infant mental health that is a result of that work—so, thank you, Cassandra and Susan, for your presentation today. And I'll turn the webinar over to Cassandra.

**Ms. Firman:** [06:31] OK. This is Cassandra Firman with the FRIENDS National Resource Center, and I just am going to hand it over to Susan right away. I'm playing a minor role on this today; Susan and I have worked together for many years, actually for the past 20 years, and I actually was around when she did some of her first qualitative research. So now I'm handing it to Susan.

**Ms. Summers:** [06:54] So, good morning and good afternoon to everyone, I'm just overwhelmed at the number of people participating; really, I'm grateful, and I'm really happy because it's a wonderful way to learn about your programs and to see the world.

Cassandra, I'm going to ask you to switch to the next slide. Cassandra has been a friend and colleague for 20 ... 5 years, actually college, before she was a FRIEND. And technologically more savvy than I am. So I appreciate her collaboration, both on the presentation, but also sitting here handholding while we get through this.

Before we get to this beautiful photograph on this slide, I want to give you a little bit of history about qualitative inquiry and about how I came to it. So my discovery of qualitative research, actually, was sort of dumb luck. It was at the University of Oregon's College of Education, it was before I was a matriculated student. And I signed up for an evening course, and it was taught by Harry Wolcott, who is one of our country's most renowned educational ethnographers, and I had no idea who he was. But the class completely changed the way I thought about education. And it changed the way I went about thinking and learning in everything that I did.

Professor Wolcott asked us to explore topics of our own choice by going to the source. So we weren't to use the library, we weren't to talk to experts. We were to observe and talk to people firsthand. And I think what was so powerful about that experience, is that he gave us permission to gain knowledge and come to some new understandings about the world on our own, without relying exclusively on experts. And I don't know about your experience, but in higher education this can be somewhat rare. You're sort of waiting to be spoon-fed, and waiting for a structure that people believe in.

And at the time I remember that I felt both free and really frightened. But once I took that class, I haven't ever been able to go back. And now I question everything. And as I was preparing this presentation, I came across a quote by the Chinese philosopher Confucius that sums up exactly how I think about qualitative inquiry, and this is the quote: "To know that you don't know is the beginning of knowing. To know that you don't know is the beginning of knowing."

And you know, we all know a lot. But a lot of what we know has been structured by systems and by the place we were born, and by the time we live in, and much of that knowledge is provisional. So qualitative inquiry is kind of a way to break out of that.
What I hope to do in this presentation, and given that we have just an hour and 15 minutes, and there are many, many of you, and you know, I taught qualitative methods at the University of Washington, and it was a yearlong course. And we worked intensely for a year, and many students sort of stayed with us after that. So this is a big topic for an hour.

But what I would like to do is kind of give you the whole landscape of qualitative inquiry, and kind of give you a feel for it, so that you can capture the essence of it more than just the know-how. But I've also included in the presentation some actual data that we can go into, so you can really experience thinking about qualitative data; and then the last 15 minutes we're going to open to questions, and we won't be able to answer all questions, I'm sure, in 15 minutes, but we're going to take questions from you in writing, and I'll endeavor to answer those in the weeks after the presentation.

OK. So a little background about qualitative inquiry. It came to the United States at the end of the 20th century with a man from Germany by the name of Franz Boas, and he's known as the father of American anthropology, and qualitative inquiry derives from anthropology and sociology. Franz Boas eventually taught at the University of Chicago, then at Columbia University, when he mentored and influenced a number of people whose names you'll know: anthropologist Margaret Mead and Claude Levi-Strauss, and the anthropologist and author Zora Neale Hurston, who wrote one of my favorite books, *Their Eyes Were Watching God*.

I tell you this because I want you to know that qualitative methods come from a rich and rigorous tradition. They're really popular right now, and they questioned, actually, when I started doing them in education in the early 80s. But I want you to know about that background and where you can go to learn more, so that you have some confidence, actually, that you're not just a new sort of tacked-on strategy, that you can really understand the depth and richness in the profession.

Qualitative methods include a number of data collection strategies suited for particular purposes. And on this slide you'll see them: ethnography, cognitive psychology, case study, action research, oral history, and policy research. So let me give you a short description of what each of those are.

Ethnography is the study of human culture and society, and it's often known as a field study. It tends to be comprehensive in that it includes a number of different types of data, observations, interviews, and an arrangement of sampling in a classic field study, and it's conducted over an extended period of time. My first big study was in ethnography and I worked for 2 years on it; and some experts on ethnography suggest that you spend 3 years of in-the-field training. So that's a big endeavor, and some of you who are students or at universities might take that on; but those of you in programs who want to use this in programs are probably not going to do this.

OK, the second type that we'll talk about is cognitive psychology, and this investigates internal mental processes. So it investigates thinking and consciousness. But there's problem-solving, memory and language; and in qualitative inquiry this can be used in a think-aloud manner to understand, for example, how children do math or spelling problems.

So you would say to a child who is working on a math problem, for example: Talk to me about what you're doing as you do it. Tell me why you did that. Or another idea—and I've never done this, I've always wanted to—is during a home visit or watching a tape of the parent/child interaction with the parent, have them talk to you about what they're doing and why they're doing it with the child. So you can not only see what they're doing, but you can understand how they make sense of it.

The third method we have up there is the case study research, which is an intensive study of a person, a single group, an incident, or a community. And again, it tends to be very comprehensive, like ethnography, but bounded in a certain way that's asking a certain kind of question that you want to learn about.

A fourth type is action research, and this is really well suited to intervention program. And action research is a reflective process of problem-solving by people working in professional practice communities, or professional learning communities to address specific issues and solve problems. So it's an informal decision-making process that includes a paper trail.

And then oral history is a record of a person's history and their opinions about what's happened during their life as told to a researcher; and policy research uses qualitative methods to understand how public policy affects
people in their daily lives. And the kinds of qualitative inquiry I've done most are ethnography, case study, and policy research.

Now I want to go to this iconic photograph by Dorothea Lange—and I apologize I misspelled her name, we have Dorothea, but it's Dorothea—and the photograph's entitled "Migrant Mother." And it's a photograph of a woman named Florence Owens Thompson, and it was taken during the Great Depression. And I included it because it points to an important quality about qualitative inquiry.

Qualitative inquiry gives a voice to people who often go unheard. In quantitative research, we look to see how a single person compares with a dominant group. In qualitative inquiry, every story is important, and every voice is an important version of the truth. So what we're saying is that there isn't one truth. That perspective, in part, defines truth.

I also want to point out in this photograph that the photographer brings something raw to the photograph, and real, and in my opinion a certain generosity of spirit—you can see both the suffering and the strength in this woman.

And another point I want to make about the photograph is that when this photograph appeared, the public saw the photo, and they could no longer deny suffering. This was during the Great Depression, and the Dustbowl, and the migration to California, and the suffering that was going on in the public really wasn't acknowledged by Congress, and in fact was denied. So when this photograph came out, and when John Steinbeck wrote *The Grapes of Wrath*, his books were banned from schools and libraries in the very area that he lived. And then the farmers were denying that these kinds of stories took place.

But John Steinbeck wrote that book, and Eleanor Roosevelt read it and traveled to California to visit the migrant camps and came back and changed public policy. So you won't all be telling powerful stories that reach to people at that level, but some of you will.

For example, I read CBCAP year-end reports, and there are beautiful stories embedded in those. And those go on to the Children's Bureau, and they're passed along to policymakers. So you can make your voice heard, your program's voice heard, and families' voices heard through qualitative inquiry.

OK. Next slide. Again in that vein, defining qualitative inquiry, the way that I see it is that it is an awakening to what is there and seeing anew. In your professional training, in bureaucratic rules and prescribed curricula, we tend to see things in a narrow way. And for good reason, and for functional reasons. But these ways of thinking really are provisional and subject to change.

I've got a couple of examples. My mother was a speech pathologist in the 1950s. In those days, speech pathologists were, first of all, called pathologists, like there was something wrong; now the emphasis is on communication. In those days speech pathologists wore white lab coats like a doctor, and actually set children who had problems with fluency, for example, like stuttering, they set them on their little medical exam table and did their interventions from this totally medical setting, and that's something that we would never consider doing now, we consider it to be really stigmatizing. But at the time it seemed like best practice. So things that we're doing now that seem like best practice, we want to look at them anew.

Qualitative inquiry is really helpful to developing critical understandings of the significance of what you see. So when we're doing things, we just get so busy doing them, and completing things, and turning paper in, that we often forget to ask: So what? Why does this matter? To whom does this matter? And if we don't ask those questions, no matter how much effort we put into our work, we may miss the mark with children and families.

And third, qualitative inquiry allows you to explain things that are inherently complicated in order to make them visible and understandable to others. So what you do at work is bigger and more complex than the things that you can count. And even though it's very important to count, qualitative inquiry is a way to capture those big, important complex things and make them understandable to ourselves and to others.

So let's jump in and look at some qualitative data from a child abuse prevention program. I came across this paragraph in a year-end report, and I loved it because it says so much about the character of the program. So let's read the quote together. I apologize, some of the slides are really wordy; but if you want to do qualitative inquiry, get used to reading a lot of words. And after we read this together, we'll kind of unpack it.

> During the past year, one of the program participants received support and encouragement from the group while going through a domestic violence situation. It took over one year for the participant to trust...
the group enough to disclose this very personal and overwhelming situation. The group offered support, encouragement, and resources; but most of all, the group let that parent know the parent was not alone. As a result of the Circle of Parents program, the facilitator, along with the group, was able to refer the participant to a community agency for professional services.

And what I do when I read those kinds of quotes is—and this is part of interpreting data—I try and derive some propositions from it. And we look for meaning in this by making propositions. And proposition is just a provisional understanding. It's not the final word on anything. It's a sort of placeholder. And once we make those propositions, then we can explore to see if they are true and accurate, and for whom they are true and accurate.

So when reading and considering this quote, these are the propositions that I made. The first one is about the program philosophy and organization. So in the text we see, "the group offered support," rather than the staff exclusively in a top-down approach. And when a group offers support it tells me that the program is fostering parent-to-parent relationships.

The next thing I noticed about it, is that this program operates in human versus institutional time. The group and the program staff stayed with the parent for as long as it took. And just a brief aside: Cassandra and I used to work together in a family intervention program that's similar to Strengthening Families, but it was about 20 years ago, and the parents were court-ordered to attend a program. And so there was this provision in the program that parents needed to be successful in 14 weeks. And we used to despair as a group and feel like failures, because these parents who were in permanent planning and who had been struggling their entire life, didn't look completely better in 14 weeks.

Now there is a great example of a program that needed to ask questions. Does this make sense? To whom does it make sense? And look at human time versus institutional time.

Back to the quote, the third thing that I noticed had to do with continuum of services. The parent, when she felt ready, accessed other needed services that she may not otherwise have utilized. And what I see in that paragraph is that this program was connected, knew what the parent needed, and was able to act.

So you look at this quote and see that—it just makes you feel good when you first read it—but when you start to think about what it says, it's quite dense, and it tells you a lot. Now again, you want to follow up on those propositions and those hunches. But it's just a beautiful example of what I think is going on in a really good program.

Now, I want to tie this—because we're doing this with FRIENDS, and they strongly encourage CBCAP to use logic models—I want to tie this to the work of CBCAP programs around the nation. So I wanted to link qualitative inquiry with what you're already doing in terms of program evaluation.

So when we evaluate, sometimes we just notice important things in the course of our daily work. But with qualitative inquiry, we want to maximize discovery. We want to look for opportunities for discovery. And when we look, we want to go about it in a logical way. So in qualitative research design, this logical method is called logic of inquiry. And it's got this fancy word—explicating—a process of explicating, we want to just explain the connections between the theoretical perspective and the consequent research methods employed. And the theoretical perspectives have to do with your mission and your philosophy, the purpose of your program.

So it means your program logic model, the purpose, intentions, goals, objectives, and program activities should directly correspond to the measurement methods you use to evaluate your program. In qualitative inquiries, it's going to be one of those measurement methods.

So if your program's overriding goal is to promote child development, you would measure child development with a reliable, valid assessment instrument. Did the child make progress according to a pre- and post-intervention assessment?

But if you wish to know how parents feel about their child's development, or how they think the program is helping them become a better parent, or the extent to which they feel competent and confident in parenting—and all these have to do with promoting child development, but they're qualitative—then use these qualitative methods.

OK. Just another word about logic of inquiry. This research method, qualitative, doesn't preclude using quantitative research, in fact they're complementary, and then in a field study they combine them. So, for
example, we're going to look later at some infant mental health data, and in this study of Early Head Start programs, we measured parent/child interactions, child development, child behavior, and maternal depression—we measured all of those quantitatively.

But we also interviewed parents, home visitors, and program administrators about their understandings of infant mental health, and their experience incorporating it into education settings. So we learned about the influence of context; we learned second-order effects—by that I mean like what also happens—besides what you think you're doing to children and families, we discovered unintended consequences.

Now let's look at some data collection methods. And there are actually four different kinds used in qualitative inquiry, and we wanted to make this readable so we put two kinds on each page, so the next two pages are the four types.

On the first one are documents, and you review documents in qualitative inquiry when you want to know things like program mission; intention; the projections in history of a person, agency, organization, or community. And the examples of data for each of these four types come from that Early Head Start study of infant mental health.

So here's a real-life example from an Early Head Start document:

    Early Head Start, as a child development and family focus program, is in a unique position to help families recognize how trauma affects their lives and supports the development of strategies to cope with feelings and behaviors related to traumatic events.

This is a statement of what Early Head Start is about.

Now then the second data type, enumeration and sample, so we want to know numbers, percentages, proportions, distribution, of something important to infant mental health. And here are some examples.

    More than half (52%) of mothers reported enough depressive symptoms to be considered clinically depressed.

So these are mothers in Early Head Start programs.

    About one-third (39%) of children were exposed to violence in the home or in the community (30%).

Thirty-nine percent in the home, 30% in the community—and

    Forty-four percent (44%) of children were reported to be experiencing trauma symptoms.

Let's go to the next page and look at the third and fourth types of data. The interviews, which can be individual or focus groups, and they let you know what people experience, what they believe, how they think or feel. And here's a beautiful quote from a Latina mother, and it was translated from Spanish. "My feelings rob me of my words. I never talk to her. I have nothing but words of sadness to say to her. It's better not to talk at all to her. I'm a bad mother."

And as I read it, I have chills in my body, and these are experiences that you all have if you work with families. And you see now, the mission of Early Head Start (EHS), you see the numbers of people who are experiencing this in Head Start, and then you see how it feels from a parent's perspective.

And the fourth data type, observations, are what people do at a given time or over a period of time, and here's an example from a given time. So this expert on infant mental health has been working with a group of depressed Latina mothers for several months, and she's been tailoring the intervention content to their needs.

    Toward the end of a very difficult group, most of the women were crying hard. There was a loud knock at the door, and the EHS translator answered it. I turned to see who it was, then turned back to look at the group of mothers. Every mother was smiling broadly without a visible tear. The EHS translator talked briefly with the person and shut the door. The mothers resumed crying immediately. When we completed the group I asked them about my observation. They told me, "Linda, it is not safe to be depressed here."

And this was an epiphany for Linda. This is an expert who is very close to the parents and had a great relationship; but had this event not happened, she would not have had the opportunity for discovery. So she
wrote it down in field notes, and it made a difference in her understanding, not only of these particular parents, but about how to do infant mental health in the Early Head Start setting, but in particular with Latina mothers.

OK. Now I want to go to informal interviewing and interpretation, as I think a lot of you can use this easily in programs. Now this is a powerful example that was taken from … This is actual data from a prevention program. And it demonstrates how relatively easy qualitative inquiry can be and how important it is. This kind of happened spontaneously. So this program shared this actually with Cassandra, who shared it with me, and we asked their permission, and I give you the actual data from the program.

In our parenting program we were issuing the Behavior Assessment System for Children at the beginning of treatment, and then again during the last week of treatment, which occurs about 4 to 6 months later. When we compared the results we were dismayed to see that instead of patting ourselves on the back for a job well done, we were feeling quite deflated. The post scores actually indicated that the children's behavior was worse instead of better. They actually felt more negatively affected by the child's behavior presently, then they did when the first entered the 2-day-per-week treatment. What gives?

When you hear that you think: what does give? How should the program go about finding out what gives? OK…

A very bright staff member [here's the answer] (who also was once a participant in the program) told us the answer. She said that when a parent first enters treatment she doesn't know who we are and what we can really do for her. There is a trust factor involved that is not firmly established. She told us that she was not completely honest with us until she could trust us. She lied about how difficult he was, and how much she struggled as a parent to keep things together. (Isn't that like most of society?) She said that if she was given that assessment, she would not have told the truth. But by the time she got the post-test version, she would have felt more comfortable being utterly honest. Bam! There was an answer!

Now I highlighted two things: "told us the answer," and "there was an answer." Because the issue here is that when you get an answer in qualitative research it is "an" answer and probably not "the" answer. So what we do in qualitative research is we seek out people who may know or share an important perspective. This is different than quantitative research that looks for random sampling.

In qualitative research we look at key informants, and those are people kind of who we think are in the know. So we want to look at multiple perspectives, and it doesn't matter if they converge or agree. In qualitative inquiry we're looking for generalized ability to issues, rather than generalized ability to population. So in this case the program would honor the staff member as one important perspective, but then they would ask other parents about the issue. So they might ask other parents: How comfortable did you feel to honestly share your feelings with program staff? What did program staff do to help you feel more open and trusting?

OK, so. Let's look at the next one. This is from the program, still:

We also began to realize that oftentimes parents come to us with very young children who are still in the process of "blooming" their problems. Parents are so in the midst of the noise and aggression and defiance, they can't see the underlying issues. As they progress through the program, they begin to get a clearer picture of how things really are, to see the ideology of their potential diagnosis … and so reality sets in. So this new awareness is manifested in the post-data, and it casts a dark shadow on the progress that was actually made. For the last several years, our interest in offering assessments like this has waned due to this negative trend. We began to seek inventories that had retrospective components. We're still searching for the right one.

Since beginning a new program of parenting invention, we've added the Protective Factor Survey to our repertoire of assessments [and we will also talk to families retrospectively] … Our goal is to see if they are feeling helped. Are they feeling like they made progress? Are they feeling like their child's behavior has improved? Are they feeling like they have an increase in competence as well as confidence?

So when we look at this, we see that … Well, first, I want to tell you the program administrator who wrote this, he's a born qualitative research evaluator. He's very questioning, he's serious, he's analytic; he's open and nondefensive. And this is really important, because in qualitative inquiry you're going to hear things that you don't necessarily want to hear. And you have to hear them with a kind and open heart. And this person also writes clearly and beautifully, which is important.
But we also want to look at this last piece of data. Because in this data, we're not sure how the program staff came to know these things. We really can't tell from this excerpt. We do know when discoveries like this are intentionally sought—by talking to parents, or staff debriefing, or meetings or focus groups—and when they're documented over time, they become qualitative data, and they're really useful like in action research. To track a program's history; to allow programs to make informed decisions and chart outcomes; and to help to grow staff members' critical thinking skills.

OK. So this is how informal interviewing and interpretation might be used to address the limitations of standardized measurement. Remember to "think aloud" interviewing. You could use those in conjunction with real-time assessments, and this is done in the literature with the Ages and Stages Questionnaire; many of you are familiar with this. If you administer it in conjunction with parents and have them think aloud … That's a good way to help you understand qualitatively what's going on with your standardized measurement.

Another thing you could do in a situation like that is regular and periodic in-context observations that link to items on measurement tools. For example, during home visits or during programs, you can observe parents working on developmental goals with their children that correspond to items on a test, if it's a curriculum lessons test.

And then a third way is that you can give anticipatory guidance—which I think you tend to do I think during home visits, for example—that help parents' awareness; and then as part of that, just sort of have ongoing informal interviewing or questioning to see how things are going. For example, you could prepare parents for new developmental stages, and check in to see if parents are successfully navigating new skills and behaviors.

As part of that sort of action research, you know the things that I just described, I think many of you do in your programs already, as part of best practice; but in qualitative inquiry, you just need to record them. You have to do some writing. So find somebody in your program who doesn't mind that, who actually likes that, and likes to document. And when you do that, that moves the process along, and it makes your decisions informed.

And when I was learning to be a qualitative researcher I came across this quote that I love, "The horror of that moment, the king went on, I shall never, never forget." "You will though," the queen said, "if you don't make a memorandum of it." And so try and have fun with records keeping, and don't let it be an onerous task. But when you do, when you come together, when you have ideas, when you have an observation like Linda made at the Early Head Start program, it's very powerful. You might not understand the meaning of that observation at the time, but you can almost feel it. So write it down, and keep track of those things in your program, it's one of the most important things you can do.

OK. Here's an example of informal interviewing that I used for years in Early Childhood Special Education. It came from internal medicine. And the idea of it was that when doctors were seeing patients from other cultures they realized that the families had a totally different understanding of medicine than Western cultures did. So they came up with this open interview method to gather data on families' cultural and education perspectives. And it's a beautiful way to get to know parents, to see what they think before you impose your ideas upon them. Pretty easy when you do it at the beginning, or when you do it during intake or when you first know families, it actually serves to build relationships and openness, and it's very, very useful.

So note that these questions are open-ended: Tell me why you're interested in this program. Tell me why you think your child is having difficulty. How does your child's behavior affect her life? What have you done so far to help your child? And how did you know to do that? How would you like the program to help? And do you have concerns about being in the program?

So you would just jot down responses to these, keep them in the child's file, and refer to them to help you understand how parents make sense of what you are doing.

OK. I want to go quickly to a criteria for selecting quantitative instruments, and I'm just going to do that as a point of referral. OK, so you already know all this. Instruments should be valid; they should be reliable; they should have face validity; and they should be congruent with your philosophy, goals, curriculum, and activities.

Next slide. OK, now qualitative inquiry is also conducted with a great deal of rigor. But what we want to do in qualitative inquiry is to establish credibility, trustworthiness, and confidence. And so you can do this by calculating inter-observer agreement to establish congruence between two or more observers when this is appropriate—and that might be appropriate, for example, when you are looking at parents, how they interact on videotape.
You also want to sample from multiple data sources. So by multiple I mean types of data—more than one person, more than one situation—to triangulate important findings. And triangulation, that's that thing that you never want to do with your friends and family—like talking behind people's backs—it's really important to do carefully, thoughtfully, and qualitatively because it helps you … In that previous example about the program that was doing measures that looked worse in post-test versus pre-test and they asked one person, and that was wonderful to do, they learned something. But the program would want to go on and talk to other people and triangulate those findings.

And again, the findings don't have to agree, they don't have to be the same, because we're generalizing to issues, rather than to population.

The third thing you can do, when you determine the general meaning of data and identify important issues. So you're doing your interpretations, you're making those propositions, those placeholders of meaning—take these back to the people you interviewed, the people you observed, and talk to them about it, and see if they see it in the same way. This is social validation. And they can agree or disagree, but you know then what they think, and they'll help clarify for you and deepen your understanding.

And then, when you report results, be very thorough. Anticipate questions from your audience and address these in your report. Remember, they don't know everything you know, so you need to be succinct, but you also need to be comprehensive.

And then document your data collection methods in writing. Write those analytic memoranda, so you can retrace the steps you took to arrive at your interpretation. This is really important, because people think qualitative inquiry is just sort of pulled out of air, which isn't true.

Let's look at telling a story. So this is when you're reporting data. What you want to do when you tell stories about your program is get a look and feel for what has gone before in the program to make the program and community what they are? Some of you are going to want to describe, for example, neighborhoods that are influencing families and programs—the social context, that kind of thing.

And then you want to look at things that are important … identify things important to look at in this program, and think again about your audience. To whom are they important? So say you're in a CBCAP program. You might want to tell a story for policymakers. So part of that is how the money is spent and why; the extent that child maltreatment was prevented; whether the program logic model matches funding priorities. Now all these things may be influenced by community, by economic factors, so that's all part of the story.

And then another important audience is program administrators. And they're interested in things like whether the level of funding matches the logic model and the work needed to achieve them; whether the program objectives are being met, and whether they lead to achievement of goals; whether the measurement tools adequately and accurately gauge progress toward goals and objectives, like we saw before … and so you would look at numerical data, to see pre-post, for example; but then you want to understand why. And that's where the qualitative research comes in.

So you see that they're both part of the story—the qualitative and the quantitative data that you gather.

Another important audience is staff. You want to know if they feel or are confident and competent in their work, so you can support them in becoming competent and confident. You want to know whether they feel pleasure in their work. So you want to know about the social climate of programs. You want to know whether they suffer from compassion fatigue, which was a huge issue in programs endeavoring to deliver infant mental health. You want to know whether the program is structured in ways that help staff members remain healthy and happy in their work. And these are just examples; you can think of lots of others.

And then another important audience is families. You want to know whether they feel the program goals and activities match their personal goals and activities. You want to know whether they feel competent and confident in parenting their children. Whether the program's social climate feels warm and welcoming; whether they feel valued by program staff and other families; whether they feel part of a community … and as I talk about this, you can probably see that the way the staff feels—whether they are suffering compassion fatigue, whether they feel competent and confident, whether they feel happy in their work—has an influence on how families experience the program.

Let's go to the next slide.
Now let's get to the practicality of including families in qualitative inquiry. This is an example of a letter of invitation. And what I want you to notice about it as you read it is that the conversational tone is friendly, but the content is comprehensive. Because we really want parents and caregivers to be informed about what they're getting into, and know what they can expect, and also know that they're free to choose to participate.

We want the parents to know the purpose of the research and how we’re using the information, and that we want them to value the research. So we want that to be evident.

We want to assure parents that the decision to participate is entirely up to them, and they're not going to lose services or the goodwill of staff if they don't participate; and we want parents to know how to contact a responsible staff member to ask questions at any time.

So, some of you will do this just as part of intake, you have these kinds of forms; but if you do the more formal study or program evaluation that has the kind of activities listed on this form, make sure that you take the trouble to inform parents.

OK, so. I'm going to involve Cassandra right now, and we're going to do a quick role-play of me informing Cassandra, she's a parent, and she has two children, Janna and Davy. OK, here we go.

[Begin role-play]

"Interviewer": [49:47] Hi, Cassandra, thanks for taking time to hear about this study that we're doing.

"Mother": [49:58] OK.

"Interviewer": [50:00] I'm going to give you a consent form (OK, I'm handing the consent form to Cassandra), and it tells you about the study. And I want to talk with you about what we'd like to do. But I want to remind you that this is for you to consider and you to decide upon. It's completely up to you whether you want to participate in this study.

"Mother": [50:16] Do I have to decide today?

"Interviewer": [50:19] No, you have… not as much time as you need, but we're not going to get started for 2 weeks. And, so, yeah, I'd love for you to look this over and take your time to decide, and consider whether or not you can do all the study or any parts of it.

OK, first let me tell you about why we're doing the study. We're doing this study to help us learn more about ourselves as a program. This isn't an evaluation of you or of Janna and Davy. So we're not evaluating you at all. What we want to do ... we hope to discover ways that the program is helping all the children and all the families in the program, and we want to find out how we can do a better job. So, as I tell you about the study, feel free to jump in any time and ask me questions.

"Mother": [51:04] You said you're not testing my kids?

"Interviewer": [51:10] No.

"Mother": [51:12] So anything you learn about my kids, you're not going to tell anybody about?

"Interviewer": [51:20] No. Everything in this study is completely private and confidential. So we'll learn about a number of children's families in the program, and we'll keep that information private to help us make decisions, but we won't use your name. No private information that would help anybody identify you.

If you choose to participate, we're going to ask your help in four ways. First, we are going to ask you to complete a written questionnaire about you and your family at the beginning and end of the program. And the questionnaire asks things about your child's behavior, for example, and your concern as a parent, since this is about parenting.

"Mother": [51:56] I don't ... I have a lot of trouble with writing. I didn't do very well ... I'd rather ... I don't like to write very much.

"Interviewer": [52:06] And I'm glad you brought that up because we can do the questionnaire either by people writing it, if they choose; or we could just sit down with you and ask you the questions and fill it out, and we're very happy to do that, again, if you choose to participate. Does that sound OK?
"Mother": [52:20] Yeah. I … just as long someone does the writing. Because I don't even do that.

"Interviewer": [52:25] OK, great. And again, you don't have to decide right now. So let's …

"Mother": [52:29] OK.

"Interviewer": [52:31] Let me tell you about the rest, and then you can make a decision. OK, the second thing we would ask you to do is to complete a "day in the life" schedule, and we'd ask you to do this three different times during the year, and it would require you to write down what is going on throughout the day. Like, when you're having breakfast, what mealtimes are like, when you're putting the kids to bed, when you're reading them books, that kind of thing. When you're getting ready to go off to work or to the store. And they take about an hour to complete.

"Mother": [52:59] Every day for an hour?

"Interviewer": [53:02] Three days during the year. It would …

"Mother": [53:05] So it's just 3 days.

"Interviewer": [53:07] So it would be a total of 3 hours. Which is quite a bit of time, we realize that.

"Mother": [53:10] Well, it's going to be a lot time, because I don't like to write …

"Interviewer": [53:14] So that's something you may decide to opt out of.

"Mother": [53:18] I could just opt out of that piece of it?


"Mother": [53:22] OK.

"Interviewer": [53:23] And then the third thing is, we would want to videotape you and Janna during a home visit. And we'd be interested in looking at playtimes and mealtimes, for example, and the ways your home visitor is helping you with those. And we always give a copy of those videotapes to you so you have a record of your darling daughter.

And finally, we would ask you to be interviewed one time. And the interview would take about 1 hour, and we'd like to audiotape it, and what we would do is let you know the questions ahead of time. And after we did the interview, we might want to use some quotes from the interview in reports and publications, but we would ask your permission to do that. And again, if we used quotes, we wouldn't identify that you said them, or we wouldn't identify anything about you.

OK. So that's it in a nutshell. Is there anything else you want to know about this study?

"Mother": [54:19] I want to talk to my boyfriend about it before I sign anything.

"Interviewer": [54:23] I think that's great. It's good to take some time and think it over before you decide to participate.

"Mother": [54:28] Will you phone me tomorrow, and then we can talk again?

"Interviewer": [54:30] I'm happy to do that. And you know, one thing I forgot to tell you is that, you know, this doesn't affect the program at all. You can be in the program and not do this.

"Mother": [54:42] So I don't have to do this, and I can still get the program?


"Mother": [54:47] OK.


"Mother": [55:00] Thank you.
Susan: OK, now after I informed Cassandra, I would actually offer a gift certificate to her. But I would do it after consent is given, because I'd want her to know it's compensation for her time, rather than a kind of bribe. So you don't want to coerce people.

So points to remember when you're doing formal and informal interviews: State the purpose of the interview. Describe the logistics: how long it lasts, how it will be recorded. Make a statement about confidentiality; and check their level of comfort, and sometimes you can just sense this. People are sometimes cowed by professionals, or worried that they'll lose services, so you know, put your feelers out there when you do this.

Review the interview protocol—and I usually hand people a written copy. They rarely look at it, and it seems to help make them feel a little bit more secure. Use active listening skills. You know, your posture, facial expressions, nodding, eye contact; ask for clarification on points that you don't understand. When the participant's saying something that you're not clear about make sure you get clarification. And if you're audiotaping it, you can always go back and follow up, remember.

And then refrain from interpreting and judging at the time. It's really important to do this, just be an open listener. And then solicit questions and concerns after any kind of interview to see if you forgot to ask them anything important, and make sure they know how to get a hold of you after.

OK. I think ... This last example actually is from that infant mental health study, and this is an example of writing up your qualitative research, which some of you will do, some of you won't. More often probably people will just be incorporating things in the report.

But the reason that I included this, is that I just ... This was such a powerful interview for me, and this quote that ... You'll see that it's kind of simple, but when you do this, you come to such important realizations about your program and your work and about children's families, and that program improvement's almost automatic when you go through this process.

So in the article I wrote:

Another home visitor captures the profound impact the infant mental health mentor and the process of reflective consultation came to have on her awareness with this simple statement, "You don't know what you don't know."

Interestingly, this is exactly what Confucius said is the beginning of knowing.

This is a critical point. Not knowing can lead to not doing. But knowing that you don't know something is evidence of the emergence of reflection and critical thinking skills. This same home visitor had a different sort of realization about working with families. As this vignette illustrates, the process of reflective consultation brought clarity to her work that, though seemingly simple, was profound.

So this is what this home visitor was telling me when I interviewed her.

A perfect example is a child I had been working with for more than a year. The mom was constantly telling me how stubborn her child was, and he wouldn't lie down for a nap, and he wouldn't do this, and he wouldn't do that. And no matter what level of support I offered, from least directive, like "What would happen if?" or, "What if you tried?" that kind of thing, to being absolutely, totally directive, "When he's crying, go back in." Nothing was working.

At the same time, I was hearing her say, "He's just like me." But that was going right over my head, until I got the whole thing on videotape. I watched the videotape with the mentor, and her first response, just like this, was, "I would like to know what her definition of stubborn is."

The mom was a single mom who had a challenging childhood and brought herself up by the seat of her pants because she's willful. She's stubborn. She values it. So even though she was saying, "He's stubborn," and I was interpreting that as her needing help in this area, she didn't want any help with that. She valued it. And she wanted him stubborn. She was teaching him to fight for what he wanted, and to be strong, and defiant.
As the home visitor spoke during the interview, her epiphany was almost palpable. "Oh my gosh. You're absolutely right," she recalls telling the mentor. The home visitor went on to describe how her relationship with the parent changed.

I went back on my next visit and we sat on the porch—I'll never forget it—and I asked, "What's your definition of stubborn? I've heard you use that in describing your child and then in describing yourself," and immediately the communication was open, and she knew that I was hearing.

I just loved this little story because this home visitor was so qualified, and so experienced, and she missed something. And by being open and by questioning, she discovered something that would forever change the way that she did interviews. So that's the power of some qualitative research.

Last slide. So on our last slide, here are just some key points for getting started. Protect privacy and confidentiality. Remember to honor staff like you do family, be very careful.

Remember to link your program logic model with your methods.

Find a critical friend or friends who are knowledgeable, wise, virtuous, and kind. By critical, I mean somebody who's really good at making sense of the complicated, not judgmental. But having a critical friend is really important. And when you do action research and have professional practice or professional learning communities, your critical friends are automatically there.

And make it an ongoing part of your day-to-day program, rather than a separate superimposed evaluation activity.

So some general words of wisdom before we go to questions. Methods: interviewing, observing, reviewing documents, enumerating and sampling, are what you do in qualitative inquiry, but they're not your end goal. The end goal is to arrive at insight and new understandings about your work, about your relationship to your work, and your relationship with children and families in your program.

So ask yourself: Do you think your work has merit? And be prepared to say how and why as well, not just to prove and justify yourself or your program but to educate and really inform others about your work, and about the value of your work.

We can't expect others to understand the entirety and complexity of what we do. It's too deep. Too complicated. Too nuanced. But we must find a way to describe it, and explain it in ways that bring ourselves and others to a deeper understanding.

So I'm hoping a good portion of you will dive in. Because qualitative inquiry will really help you do this. And thank you so much, and we're going to open to questions.

Operator: [1:02:12] At this time our lines are on "listen only." To ask your question depress *1 and record your first and last name. Once again, to ask your question, depress *1 and record your first and last name.

Angie Brown: [1:02:25] Linda, while we're waiting, this is Angie—I'm taking questions through the webinar—I have one that came in across if you'd like to hear it.

Ms. Janko Summers: [01:02:32] I'd love to hear it.

Ms. Brown: [1:02:33] Sure. The question came from Ivan Delarosa, and it is: I imagine that you will tape record and then transcribe the interview. How do you deal with the time and effort it takes to transcribe and even record interviews within an agency with strict privacy and confidentiality issues?

Ms. Janko Summers: [1:02:52] I would only transcribe and record if I'm doing a particular study, and it is very time consuming. And so I actually at home have the old-fashioned kind of transcriber that you used in medical records, and you almost have to find some funding to do a study indepth.

It's better in ongoing programs without those kinds of resources to take clinical or program notes, but do them really carefully, methodically... you know, and as you practice doing that you'll find a format that works for you, and you'll... And they might be quite expensive at the beginning, but you'll zero in on things that are important to your program. The things that... you look for things that stand out and things that stick out... and then as
you take notes you concentrate on those, so it become a less kind of onerous and overwhelming task. That was a great question, thank you.

Any other questions?

**Operator:** [1:03:58] There are no questions on the phones.

**Ms. Brown:** [1:04:03] I don't have any webinar questions either.

**Ms. Janko Summers:** [1:04:08] My goodness, this is a shy group. [laughs] Shall we wait for questions? Or Cassandra … oh, I'm going to open it to Cassandra. What sort things cropped up for you as I was talking?

**Ms. Firman:** [1:04:25] Well, one of the things that always crops up for me is that in evaluation, it's something that is not—as Susan mentioned—one event that occurs once every 6 months in a program, it's ongoing. Part of continuous quality improvement is observing what's happening in a given moment with a parent, with a staff person, in the community, is noticing it … writing it down, thinking about it, and talking about it with others.

So qualitative inquiry is part of that continuous quality improvement cycle. You're noticing what's going on, so it's not just something that happens at the end of the year. "We're going to do a qualitative study where we're going to write interview questions and interview all of these people"—you need to do that. But there are other things that we are already, already doing in our program. That is collecting quantitative … qualitative data. And so that's one of the things that strikes me.

**Ms. Janko Summers:** [1:05:32] And a good example of that, like going back about 25 years when Cassandra and I were working together in a family intervention program, we, at the end of our sessions with families—which were intense, and it happened once a week—the group of us got together and sort of gave a little … shared a case profile with the group about the families we were working with, and we reiterated what goals we were working on, and what progress we were making, and what challenges we were experiencing, so we kind of talked through a kind of clinical profile.

And during those meetings, also, the instances of staff stress, compassion fatigue, those came up too. And we would take notes and we would make decisions about structuring the program in a different way; we would share ideas from program staff person to program staff person about things that would be helpful. When you write those down, you'll see the evolution of your program. And if you just format in the right way, and document those decisions that you make, that's evaluation data. That is qualitative evaluation data.

Just remember the conversations are linking to specific goals you have for children and families; those in turn link to your logic model. I mean, what you're working on day to day has to do with the goals and objectives and philosophy of your program overall.

So there is a direct link there. And if you have the money to do a particular study, that's a wonderful thing to do. But remember if you do that, find the expertise to give you the guidance and support you need to do it. Because it's really … qualitative inquiry, honestly, in a big study is an intimidating task at the beginning, and can so overwhelm you.

So you want somebody who can make it manageable for your program. And also can deal with issues around confidentiality, ethics, sensitive feelings—which almost always arise, because we all work really hard and we all try our best, and we're all a little weary of evaluation … I mean about, you know, like staff evaluation—so you have to be really sensitive about that.

And someone's who's trained in qualitative methods knows how to navigate those things and help your program not fall into any dastardly traps.

**Ms. Brown:** [1:08:30] This is Angie. I have four questions that just came in.

**Ms. Janko Summers:** Great.

**Ms. Brown:** [1:08:34] OK, the first is: How do you avoid leading questions during the interviews? That was submitted by Janine Roach [sp?].
 Ms. Janko Summers: [1:08:43] Leading questions. Let's see. I'm going to look at some examples of what I did, because I'm really good at not asking leading questions. What you want to do is make them truly open-ended, and because I'm an ethnographer, I start really broadly.

In the first ethnography I did, it was about parents in a crisis nursery and family intervention program, and every … I followed mothers for 2 years, and every one I started with this question: Paint a portrait of your family.

Now these are parents court-ordered to attend this program. They have all kinds of things going on with their children. Every single parent told me about their birth family, and never mentioned their children or immediate family. By being that, sort of, vague about the question, they could construct the meaning that was important to them. And of course I made an important discovery at that time, and those of you working child abuse prevention programs know, that parents bring a personal history with them to a program that's really important to address when you're doing any sort of intervention with them.

So you start broadly and let them define, and then you derive questions from those answers, from the responses that you get. And that's ethnography.

So this is where an evaluator, a professional evaluator, comes in, because it actually takes a talent for doing this, and for asking them. And when I trained people, I would have them go out with me and observe interviews. Because you also have to not lead during the interview. So you have your question that's not leading, but then you kind of … you can tend to get ahead of yourself.

But remember what I cautioned about: When you're doing an interview, you're really listening, and you're not afraid of silences. Don't feel like you have to jump in and come to any conclusion. And you'll find little ways to help yourself. Like: "Tell me more about that." Or: "When you say 'x,' tell me what you mean by that." So you let them define the terms. You let the participants define the terms.

OK, let's hear a second question.

Ms. Brown: [1:11:28] OK, this one is submitted by Jeff Flaherty. He said: Because this should be an integrated process, not a separate activity conducted periodically, can you offer any tips for changing organizational structure in order to better integrate the practice?

Ms. Janko Summers: [1:11:43] Wow, that's a great question, and a huge question, a really important one.

I think some of the structures that we know work for other things, like having learning communities, like having … It kind of comes from the administration being really open and listening to staff needs, and realizing that training and technical assistance and professional development doesn't just happen at conferences, that it's important to incorporate during the day. So it's really thinking about integration.

So the example I gave you, about Cassandra and me earlier on debriefing as part of everyday program structure, it was a value in that organization that we pay people for their time to do that. And that we honored that time, and we would serve drinks, and it was … yeah. Not drinks. [laughs] Coffee and tea kind of drinks—thanks, Cassandra. We gave the message that: this is as important as the time you spend with families because this is preparation for doing a good job.

So I think one of the big barriers to doing this is that people feel so rushed and overwhelmed, and they think: oh, this is another thing I have to do. So you kind of have to find ways to make this immediately useful, as well as useful in the long run, and make it as nurturing as you can in the process. That's why you want nice, critical friends, too. Because it's like a conversational support, in part, as well as yielding valuable information.

OK, I hope that answered your question. And remember, if I'm not doing a good job at getting at exactly what you want because we can't really dialog in person, send questions in and we'll address them in writing and they'll be posted, I think, on the FRIENDS website.

OK, next question?

Ms. Brown: [1:14:05] The next one is: I noted that your examples provided information on the insights and learning of the helping person. I did not hear how the program helped the consumer of service. Please clarify.

Ms. Janko Summers: [1:14:19] I'm not sure if I understand that. Is that … Maybe I posed that example, but let me tell you what I think about that.
I really subscribe to an ecological model, first of all. So I think if you're helping staff, for example, and if your organization is healthy, that you are helping children and families indirectly—that you can't really help children and families unless you have a healthy organization and staff.

So the stronger, the more competent, the more confident, the happier, the better informed your staff is, the better services you can provide to children and families.

But you would look ... You know, an example of how you would help directly, is if you were doing a videotape, for example, of parent-child interaction, and looking at how the home visitor is helping the parent. There is an example of qualitative inquiry that directly influences the kinds of services and quality of services that parents and children need.

I hope I got the intent of that question.

Ms. Brown: [1:15:44] OK, and that was submitted, I apologize, by Kinias Aquoia [phonetic].

Ms. Janko Summers: Oh, thank you.

Ms. Brown: [1:15:48] And the last question—I do see we're getting right up against time, too—is: Are anonymous comments on a one-time post-test considered qualitative?

Ms. Janko Summers: [1:16:02] Yes. Now, because this is just data. I mean, it's just, it's something that's informing you about one person's experience, ideas, opinions about what you're doing. So it goes into the data. But remember, in qualitative research you're looking for other important informants. You're looking for the opinion—unless you're doing an oral history of one person, you're looking to triangulate data—you're looking for data from multiple sources.

So you definitely would honor the anonymous comments that you get, but you're going to look for other comments that point to the same issues, help you understand the issues more.

OK, I hope that does the trick on that question.

Ms. Brown: [1:17:01] I have—and I'm not sure if you want to cut this out—I do have a follow up question from Mr. Flaherty, and then one other question, it looks like.

Ms. Baker: [1:17:12] Why don't we just take those two, and then we'll be out of time.

Ms. Brown: [1:17:14] OK. And this was the follow up from the question about the integrated process. And it's so that it doesn't seem like more work but simply becomes part of the work?

And then the last one is from Ramesh—and I'm going to butcher the last name so I'm not even going to try—Kathanadhi, maybe? It seems like so much relies on the written word, when so many of our communities are rooted in oral tradition. Oral tradition relies heavily on shared meaning and relationship between the teller and the listener. Would some of our time be better spent in building relationship, rather than telling legitimate, critical, etc., stories through these resource-intensive approaches?

Ms. Janko Summers: [1:18:13] OK, let me go first to the more work versus integrating this into organization so that it's part of ongoing work.

In evaluation, absolutely you don't want to create more work. What I'm suggesting is that you already do many of these things; if you do a good job at providing intervention/prevention programs, if you're doing a good job, you are debriefing with staff; you are making clinical or program notes. So you want to do those in a way that really provides useful data for decision-making. And that's what it comes down to.

Now, some programs may need help figuring out the best way to do that, and may need examples from other programs who are doing a good job of it, but you don't want to create more work for yourself. Although it may seem like more work at the beginning, as you get used to doing this and documenting it, it should actually ... What it does partly is just make your staff clue in—help your staff clue in to what's important, and including administrators. Because if they're open and listening to staff, they're hearing what's important to them.

And so the effort, it's not just producing more paper. You don't produce any paper that's not useful to you, that doesn't help you make informed decisions, that doesn't help you document child, family, program progress.
it's a matter of doing it, and learning how to do it in a way that makes sense to you, and that really yields useful information.

Now the question about oral tradition. I'm not sure if I understood that entire question. But if you remember the slide that I did about the explanatory method about … it had to do with interviewing families … western positions interview families from different cultures in order to understand their perspective—that's one example of a way to try and tap into that oral tradition. Try to enhance cultural sensitivity and cultural competence among your staff.

And so it's just this one example. And those of you with expertise in that area, this is another great example of how qualitative inquiry works. You know, you need to work with an evaluator and inform them what's making sense and what's working and what's not working. You need to pay attention.

Now another example I had was—and from the Early Head Start data, Linda, the mental health expert was working with the Latina mothers—because she took notes, she discovered something she had missed in this population. So that was something that she may not have clued into had she not taken program notes. And Cassandra has something to add here.

Ms. Firman: [1:21:51] Well, I just wanted to … The reason I put this slide on is because words are important, I believe; they can be … they don't always have to be written, if your program doesn't operate that way. Photographs … and I put this on the screen again … the photo documentation of things that are happening in a program, in a community, in a region—these tell a story also. So I think you can even use photography as a type of qualitative data.


I'm afraid we've gone over our time. But I think I may have stunned you into silence because I gave you so much information, and I hope I haven't been too daunting; and that those of you who are interested and feel an affinity with this, that you'll jump in, and that you'll ask for help. Look at the documents online at the FRIENDS site. Cassandra, do you want to remind them about that?

Ms. Firman: [1:23:05] I'm just going to say the document that gives you a lot of information about qualitative evaluation is on the FRIENDS website. So if you go into www.friendsnrc.org, on the left-hand sidebar you will see a link to that document. I hope you visit it, and if you have any questions, let us know.

Ms. Brown: [1:23:25] And I do have a few other questions. For those of you who are listening on the phone, I will forward those to the presenters so that they can respond.

Ms. Gomez: [1:23:38] Thank you. This is Rosie Gomez, and in closing I'd really like to thank everybody for participating today, especially Susan for providing such a great webinar, and Cassandra for your help with that. It's really interesting.

And I'd also like to thank Angie Brown for running the webinar and to Jean Nussbaum from OCAN for recording these webinars. And the Child Welfare Information Gateway and FRIENDS for posting the information.

Just a reminder that we are currently planning our next webinar for hopefully June or July, so if you're interested in receiving information about upcoming webinars, please email Jean Nussbaum. Thank you all.

[End webinar audio.]