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EVALUATION FRAMEWORK FOR MUNICIPAL DRUG STRATEGIES

PURPOSE OF THIS DOCUMENT

The purpose of this evaluation framework is to assist your municipality in designing the methods you will use to determine whether your drug strategy is achieving its intended results. In addition, the use of the framework will encourage consistency in the evaluation methods being used by different municipalities and will make it easier to compare the success of drug strategies across municipalities.

On-going evaluation is intended to provide information which will indicate the extent to which you are achieving your intended results and will allow you to make improvements in your drug strategy as you are going along. In addition to leading to improvements in your strategy, evidence of results being achieved can be used to obtain or solidify support for your program among elected officials and the general public and to obtain additional donor funding for elements of your drug strategy.



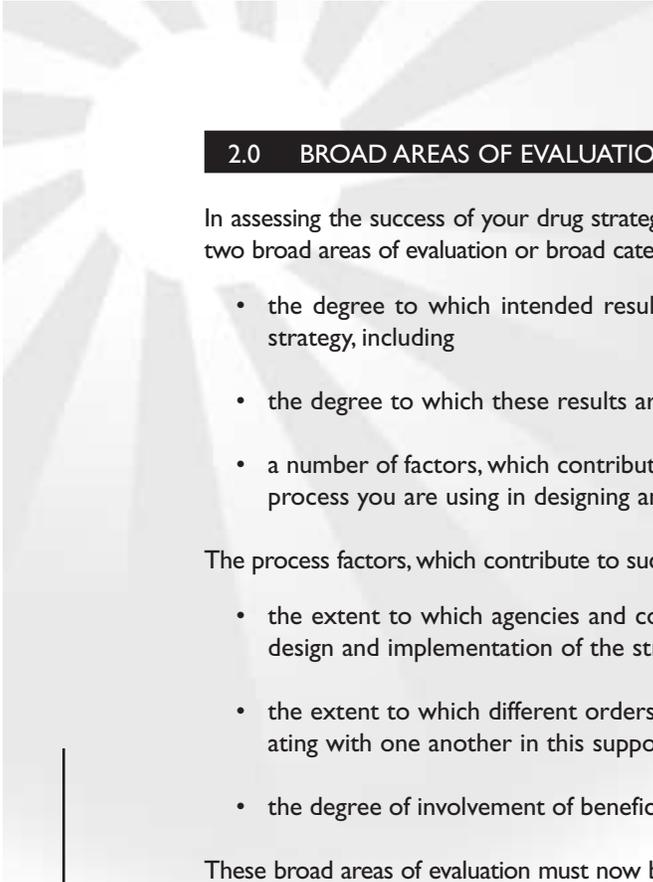
The Evaluation Framework was prepared by E.G.Thiessen
for the Federation of Canadian Municipalities
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1.0 INTRODUCTION

Over the last few years, many Canadian municipal governments have been developing drug strategies to deal with the growing substance abuse problems in their communities and, as part of this work, they have been preparing plans for the on-going evaluation of their strategies' effectiveness. This framework is designed to help municipalities in developing such evaluation plans.

This evaluation framework was prepared as part of the Federation of Canadian Municipalities' (FCM's) Municipal Drug Strategy Project in which nine pilot communities developed local drug strategies. In preparing the framework, discussions were held with representatives of the pilot communities and one thing, which was quickly apparent from these discussions, was the enormous diversity of substance abuse problems faced by the different municipalities. In one community, for example, injection drug use was the major problem and, in another, alcoholism, particularly among at-risk populations, was the key issue. A third municipality was unsure of the extent or type of substance abuse in their community so their first step was going to be to identify and define the problem. The wide range in size and the diversity in the problems faced by the pilot municipalities are likely reflected in other communities across Canada. The challenge in designing the evaluation framework was to produce something, which was general enough to be relevant to your different situations yet specific enough to be useful to you in designing a practical evaluation plan. In attempting to satisfy these requirements, the framework presents a general approach to evaluating the success of your drug strategies and illustrates the approach with concrete examples from different communities. Since it is intended as a practical tool, which will be useful to municipal officials who are not experts in evaluation, the use of technical language has been kept to a minimum.



2.0 BROAD AREAS OF EVALUATION

In assessing the success of your drug strategy, it is helpful to begin by dividing the criteria you will use into two broad areas of evaluation or broad categories of evaluation issues. These include:

- the degree to which intended results have been achieved through the implementation of your strategy, including
- the degree to which these results are sustainable with the resources available, and
- a number of factors, which contribute to the success of your drug strategy and are related to the process you are using in designing and implementing the strategy.

The process factors, which contribute to success, include, for example,

- the extent to which agencies and community partners are cooperating with one another in the design and implementation of the strategy,
- the extent to which different orders of government are supporting the strategy and are cooperating with one another in this support, and
- the degree of involvement of beneficiary groups in the design and implementation of the strategy.

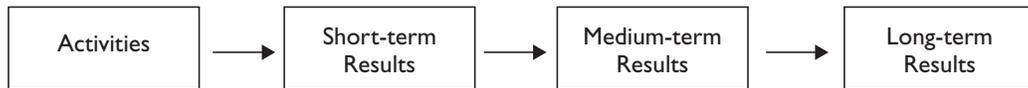
These broad areas of evaluation must now be broken into specific issues or evaluation questions for which data will be gathered while the strategy is being implemented.

Achievement of Results

In designing your drug strategy, you will have defined certain goals and objectives for the strategy and will have developed activities as part of your action plan to achieve your objectives and to lead to the achievement of your goals. In the language of results, each activity making up your action plan will have intended results, which you hope to achieve by carrying out the activity. Usually intended results include short-term results, which will be quickly apparent, medium-term results, which will take a little longer to be seen, and long-term results, which will become evident only after an extended period (often a few years). The intended results reflect the goals and objectives of your drug strategy and the specific objectives of the various activities, which make up your action plan.

Since activities lead to short-term results and short-term results lead to medium- and longer-term results, it is often helpful, in assessing the extent to which activities have been carried out and results achieved, to begin by describing your drug strategy in this logical way. This is sometimes called the program logic or results chain. Figure 1¹ illustrates this logical flow in generic terms and Figures 2 and 3 give specific examples of the logical flow for activities, which are part of actual municipal drug strategies.

FIGURE 1 GENERIC PROGRAM LOGIC OR RESULTS CHAIN



Activities	Short-term Results	Medium-term Results	Long-term Results
Activities which make up the action plan for implementing your drug strategy	Immediate results of the activities undertaken	Results which take place a short while after the activity has taken place or has begun	Results which are evident only after an extended period, often a few years

Intended results reflect the goals and objectives of your drug strategy and the specific objectives of the activities which make up your action plan.

¹ Figure 1 was adapted from a figure in *You Can Do It: A Practical Tool Kit to Evaluating Police and Community Crime Prevention Programs*, published by the National Crime Prevention Centre.

FIGURE 2 EXAMPLE OF PROGRAM LOGIC: DRUG PREVENTION IN CITY SCHOOLS

Goal: To reduce the use of drugs and the rate of drug addiction in city schools.

Objective: To develop more effective methods for preventing and dealing with drug use in schools.

Activities	Short-Term Results	Medium-Term Results	Long-Term Results
<p>Develop & pilot a city-wide age-appropriate drug-related curriculum for elementary & high schools (K-12) to be delivered by classroom teachers with the help of resource people.</p> <ul style="list-style-type: none"> • Develop curriculum in cooperation with stakeholder groups • Pilot curriculum in four schools at each grade level • Train teachers in delivery of curriculum & in dealing with drug problems • Deliver curriculum over one school year • Assess results of project in schools involved and in cooperating agencies • Publicize project in Boards involved, other schools and community. 	<p>Students more knowledgeable about drugs, drug use, the dangers involved and help available to those using or thinking of using drugs.</p> <p>Students feeling more connected, less isolated in grappling with issues around drugs.</p> <p>Teachers more knowledgeable about how to identify drug problems in their schools and about methods of providing assistance to students.</p> <p>Teachers more effective at identifying drug problems and at providing assistance to students.</p> <p>Increased discussion among students, teachers, staff on drugs and the drug situation.</p> <p>Support for pilot project in Boards, schools and community.</p>	<p>Increase in no. of students seeking help with drug problems & students tending to seek help at an earlier stage.</p> <p>Increased cooperation among students, teachers, staff in dealing with drug situation.</p> <p>Decrease in drug use and drug-related incidents at pilot schools.</p> <p>Decrease in drug availability at pilot schools.</p> <p>Improvement of curriculum and methodology and expansion of curriculum into other schools.</p>	<p>Decrease in drop-out rate in high schools involved in pilot project.</p> <p>Decrease in rate of progression to harder drugs & serious addiction among students of pilot schools.</p> <p>Decrease in drug use, drug availability, and drug-related incidents in all schools in municipality.</p>

FIGURE 3 EXAMPLE OF PROGRAM LOGIC: SHELTER AND TREATMENT OF ALCOHOLICS

Goal: To decrease the rate of alcoholism and alcohol-related problems in the municipality.

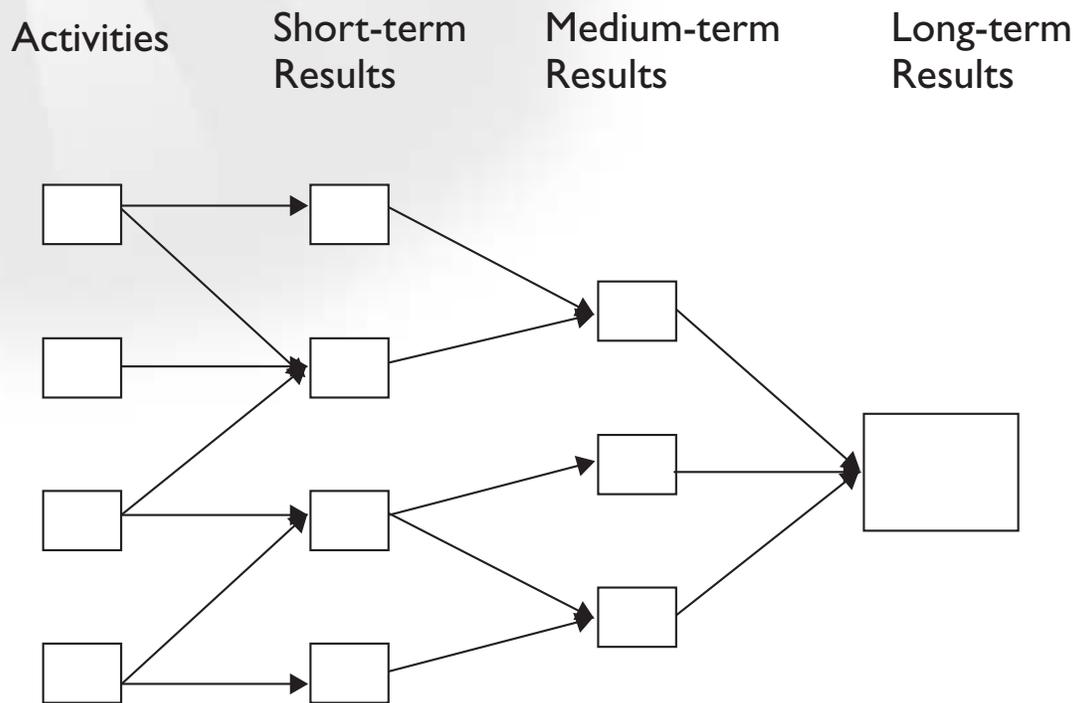
Objective: To provide temporary shelter for alcoholics and increase the number of alcoholics in treatment in the municipality.

Activities	Short-Term Results	Medium-Term Results	Long-Term Results
<p>Establish a short-term shelter for alcoholics picked up in downtown area</p> <ul style="list-style-type: none"> • Shelter will include counselling facilities directed towards getting alcoholics into longer-term treatment • Will bring together a number of different agencies currently working with alcoholics in the municipality & surrounding region. 	<p>Decrease in number of intoxicated people on downtown streets.</p> <p>Increase in number of alcoholics in contact with social services.</p> <p>Decrease in deaths due to exposure among alcoholics.</p> <p>Increase in communication among agencies working with alcohol addiction in region.</p>	<p>Increase in number of alcoholics in treatment for their addiction.</p> <p>Increase in involvement of alcohol addiction-related agencies in communities & with families.</p> <p>Greater feeling of safety among population when in downtown area.</p> <p>Increase in number of people walking in and using downtown area, particularly in evening.</p> <p>Increase in revenue for businesses in downtown area.</p> <p>Increase in cooperation among agencies working with alcohol addiction in region.</p>	<p>Decrease in rate of alcoholism & alcohol-related problems in municipality & surrounding region.</p> <p>Increase in number of businesses locating in downtown area.</p>

Since in practice, there might be more than one activity leading to a particular result and a particular activity might lead to more than one result, the actual program logic for your drug strategy would probably look, in generic terms, more like Figure 4². In assessing the success of your strategy, though, you are trying to identify specific activities and intended results. Whether activities contribute to more than one result and results follow from more than one activity or from more than one shorter-term result is less important.

In laying out the logical flow of elements of your drug strategy, considerable time can be spent deciding whether a particular result you are trying to attain is short-term, medium-term or long-term. Keep in mind that it is more important to identify the results you are trying to achieve than to be sure you've put them in the right category.

FIGURE 4 GENERIC PROGRAM LOGIC WITH MULTIPLE LINKS



Once your activities and results are clearly laid out, you can begin to look at what indicators you will use to decide the extent to which elements of your strategy have been implemented and results achieved. Figures 5 and 6 are tables showing the earlier two examples of the program logic for parts of a drug strategy, with possible evaluation indicators identified for activities and for different levels of results.

In assessing results achieved, you are usually looking for a change in a variable or indicator from before to after the strategy has been implemented. This means you need to develop your evaluation framework early in the planning process (before you begin to implement your strategy) so you can look at your indicators before you begin to take action. In evaluation language, this is called obtaining baseline data from which you will measure or look for change as a result of the program or strategy.

² Figure 4 is an adapted version of a figure in the Canadian International Development Agency's *Results-Based Management Handbook on Developing Results Chains*, prepared by Mosaic.net International and E.T. Jackson and Associates.

Once you've identified your indicators, you need to determine the data sources and data collection methods you will use to obtain the information required to measure changes in the indicators. The third and fourth columns in Figures 5 and 6 show possible data sources and data collection methods for the examples given earlier. These tables could also include two additional columns specifying how often the data will be collected and who will be responsible for collecting it. More will be said later on the organization of how you will gather the data and the frequency of data gathering.

In some cases, you will be gathering quantitative data, like the number of used syringes picked up in a particular neighbourhood or the number of intoxicated people loitering in a particular area of the city. In other cases, you will be gathering qualitative data such as changes in attitude or perceptions of groups of people. In some cases, quantitative data can be found in records kept by particular organizations or agencies; in other cases you will have to develop ways of gathering the data yourself. Qualitative data is usually gathered through such techniques as interviewing or focus groups. Written or oral surveys can be used to gather both quantitative and qualitative data. More information on data collection methods is given in Chapter 3 of *You Can Do It: A Practical Tool Kit to Evaluating Police and Community Crime Prevention Programs*, published by the National Crime Prevention Centre and available on-line at <http://www.crime-prevention.org/english/publications/index.html#Evaluation>.

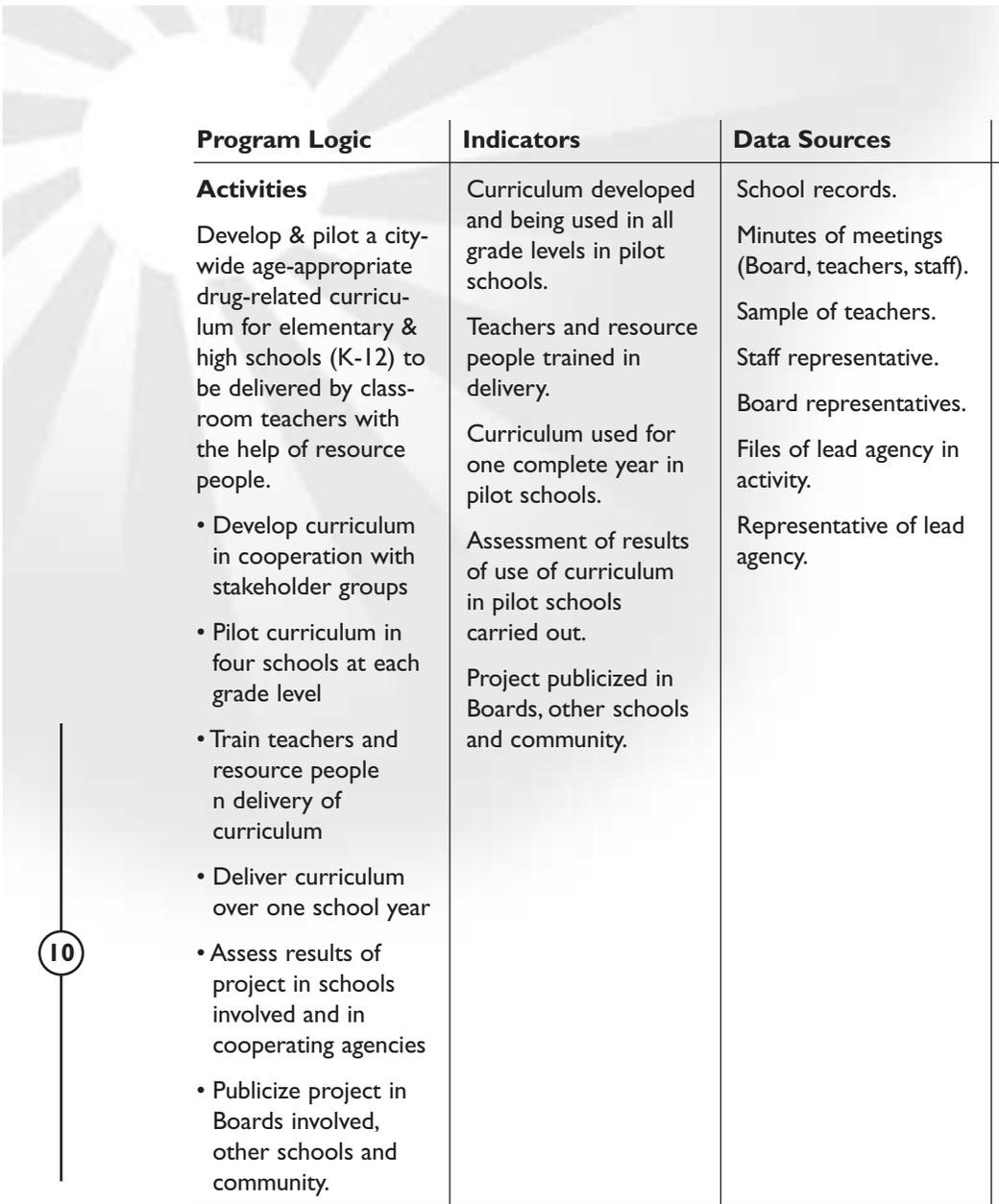
As you go further along the results chain from short-term to longer-term results, there is more chance that other factors or social programs will influence the outcomes you are trying to achieve with your drug strategy. The potential influence of other factors needs to be taken into account in deciding how much of a change you have measured in an indicator that can be attributed to your particular program.

As you gather information on the activities, which make up your drug strategy, you will at times discover results, which you didn't think of when you were planning the strategy. These unexpected results, either positive or negative, can be important factors in assessing the overall success of your strategy and in deciding on any changes you might make in it.

FIGURE 5 EVALUATION FRAMEWORK EXAMPLE: DRUG PREVENTION IN CITY SCHOOLS

Program Logic	Indicators	Data Sources	Collection Method
<p>Long-term Results</p> <p>Decrease in drop-out rate in high schools involved in pilot project.</p> <p>Decrease in rate of progression to harder drugs & serious addiction among students of pilot schools.</p> <p>Decrease in drug use, drug availability, and drug-related incidents in all schools in municipality.</p>	<p>Changes in general drop-out rate & drop out rate of those involved in drugs in pilot schools.</p> <p>Data on progression of students known to be involved in drugs.</p> <p>Data on drug availability and rates of drug use & drug-related incidents in municipal schools.</p>	<p>School records, including counselling records.</p> <p>Police records.</p> <p>Records of social service agencies.</p> <p>Sample of students.</p> <p>Sample of teachers, staff & Board officials.</p>	<p>Document review.</p> <p>Interviews with students, teachers, staff & Board officials.</p> <p>Interviews with police & agencies involved in schools.</p> <p>Interviews with staff of agencies.</p>
<p>Medium-term Results</p> <p>Increase in no. of students seeking help with drug problems & students tending to seek help at an earlier stage.</p> <p>Increased cooperation among students, teachers, staff in dealing with drug situation.</p> <p>Decrease in drug use and drug-related incidents at pilot schools.</p> <p>Decrease in drug availability at pilot schools.</p> <p>Improvement of curriculum & methodology and expansion into other schools.</p>	<p>Data on # of students seeking help & situations they are in re drugs.</p> <p>Examples of cooperation among students, teachers, staff & actions taken as a result of cooperation.</p> <p>Frequency of reports of drug use & drug incidents by students/teachers.</p> <p>Reported decrease in drug availability at pilot schools.</p> <p>Increase in school performance of those known to have been involved in drugs.</p> <p>Examples of improvements to curriculum & adoption of curriculum & methodology by other schools.</p>	<p>School records, including counselling records.</p> <p>Police records.</p> <p>Minutes of meetings (teachers, student council, joint student/teacher, Boards).</p> <p>Sample of students, teachers, staff & Board officials.</p> <p>Staff of agencies involved in pilot project.</p>	<p>Document review</p> <p>Interviews with students, teachers, staff & Board officials.</p> <p>Interviews with police & agencies involved in schools.</p> <p>Survey of teachers & students.</p> <p>Interviews with staff of agencies.</p>

Program Logic	Indicators	Data Sources	Collection Method
<p>Short-term Results</p> <p>Students more knowledgeable about drugs, drug use, the dangers involved and help available to those using or thinking of using drugs.</p> <p>Students feeling more connected, less isolated in grappling with issues around drugs.</p> <p>Teachers more knowledgeable about how to identify drug problems in their schools and about methods of providing assistance to students.</p> <p>Teachers more effective at identifying drug problems and at providing assistance to students.</p> <p>Increased discussion among students, teachers, staff on drugs and the drug situation.</p> <p>Support for pilot project in Boards, schools and community.</p>	<p>Level of knowledge among students about drugs, drug use, dangers and help available.</p> <p>Increase in discussion of drugs & drug issues among students.</p> <p>Establishment of new fora to discuss drugs.</p> <p>Level of knowledge among teachers about identification of drug problems and methods of providing assistance. Increased involvement of teachers in identifying drug problems & providing assistance to students.</p> <p>Student perception of assistance provided by teachers.</p> <p>Frequency of meetings and other discussions among students, teachers and staff on drug issues.</p> <p>Favourable disc'n of project by Boards; measures enacted/ decisions taken by Boards to support project.</p> <p>Examples of other schools & communities requesting information on project & considering using curriculum.</p>	<p>Sample of students, teachers, staff.</p> <p>Minutes of meetings (teachers, student council, staff, new fora).</p> <p>School records.</p> <p>Minutes of Board mtgs.</p>	<p>Document review.</p> <p>Interviews with students, teachers, staff & Board officials.</p> <p>Survey of teachers & students</p>



Program Logic	Indicators	Data Sources	Collection Method
<p>Activities</p> <p>Develop & pilot a city-wide age-appropriate drug-related curriculum for elementary & high schools (K-12) to be delivered by classroom teachers with the help of resource people.</p> <ul style="list-style-type: none"> • Develop curriculum in cooperation with stakeholder groups • Pilot curriculum in four schools at each grade level • Train teachers and resource people in delivery of curriculum • Deliver curriculum over one school year • Assess results of project in schools involved and in cooperating agencies • Publicize project in Boards involved, other schools and community. 	<p>Curriculum developed and being used in all grade levels in pilot schools.</p> <p>Teachers and resource people trained in delivery.</p> <p>Curriculum used for one complete year in pilot schools.</p> <p>Assessment of results of use of curriculum in pilot schools carried out.</p> <p>Project publicized in Boards, other schools and community.</p>	<p>School records.</p> <p>Minutes of meetings (Board, teachers, staff).</p> <p>Sample of teachers.</p> <p>Staff representative.</p> <p>Board representatives.</p> <p>Files of lead agency in activity.</p> <p>Representative of lead agency.</p>	<p>Document review.</p> <p>Interviews with teachers, staff, lead agency rep., board representatives.</p>

FIGURE 6 EVALUATION FRAMEWORK EXAMPLE: SHELTER AND TREATMENT OF ALCOHOLICS

Program Logic	Indicators	Data Sources	Collection Method
<p>Long-term Results</p> <p>Decrease in rate of alcoholism & alcohol-related problems in municipality & surrounding region.</p> <p>Increase in number of businesses locating in downtown area.</p>	<p>Data on rates of alcoholism & alcohol-related incidents.</p> <p>Data on new business start-ups & businesses leaving downtown area.</p>	<p>Records of alcohol-related agencies.</p> <p>Police records.</p> <p>Chamber of Commerce records.</p> <p>Downtown tax rolls.</p> <p>Elected officials, police, Ch. of Commerce rep in municipality and region.</p>	<p>Document review.</p> <p>Interviews with elected officials, police, Ch. of Commerce rep.</p>
<p>Medium-term Results</p> <p>Increase in number of alcoholics in treatment for their addiction.</p> <p>Increase in involvement of alcohol addiction-related agencies in communities & with families.</p> <p>Greater feeling of safety among population when in downtown area.</p> <p>Increase in number of people walking in and using downtown area, particularly in evening.</p> <p>Increase in revenue for businesses in downtown area.</p> <p>Increase in cooperation among agencies working with alcohol addiction in region.</p>	<p>Data on number of alcoholics in treatment.</p> <p>Data on involvement of agencies in communities and with families.</p> <p>Perception of citizens & business owners in downtown area.</p> <p>Perceptions of police on patrol.</p> <p>Perceptions of alcoholics.</p> <p>Data on business revenue.</p> <p>Examples of agencies cooperating in working with alcoholics & their families; concrete actions which have resulted.</p>	<p>Records of alcohol-related agencies.</p> <p>Sample of citizens & business owners in downtown area.</p> <p>Police officers.</p> <p>Tax records.</p> <p>Representatives of alcohol-related agencies.</p> <p>Reps. of community of alcoholics.</p>	<p>Document review.</p> <p>Interviews with citizens, business owners, police, representatives of agencies, alcoholics' reps.</p>

Program Logic	Indicators	Data Sources	Collection Method
<p>Short-term Results</p> <p>Decrease in number of intoxicated people on downtown streets.</p> <p>Increase in number of alcoholics in contact with social services.</p> <p>Decrease in deaths due to exposure among alcoholics. Increase in communication among agencies working with alcohol addiction in region.</p>	<p>Data on number of intoxicated people on streets & number picked up by police.</p> <p>Perceptions of citizens, business owners, police and alcoholics.</p> <p>Data on use of services by alcoholics who have used shelter. Data on deaths of alcoholics due to exposure.</p> <p>Examples of agencies meeting & working together on problem of alcoholics.</p>	<p>Police records.</p> <p>Police officers.</p> <p>Sample of citizens & business owners.</p> <p>Records of alcohol-related agencies.</p> <p>Representatives of alcohol-related agencies</p> <p>Reps. of community of alcoholics.</p> <p>Minutes of agency meetings.</p>	<p>Document review.</p> <p>Interviews with citizens, business owners, police, representatives of agencies, alcoholics' reps.</p>
<p>Activities</p> <p>Establish a short-term shelter for alcoholics picked up in downtown area</p> <ul style="list-style-type: none"> • Shelter will include counselling facilities directed towards getting alcoholics into longer-term treatment • Will bring together a number of different agencies currently working with alcoholics in the municipality & surrounding region. 	<p>Shelter operational.</p> <p>Counselling services being provided.</p> <p>Different agencies working together to implement and manage shelter project.</p>	<p>Shelter staff.</p> <p>Reps. of agencies involved.</p> <p>Minutes of agency meetings on shelter & services provided.</p>	<p>Document review</p> <p>Interviews with shelter staff and reps. of agencies.</p>

Sustainability of Results

Linked to the achievement of results is the extent to which the changes, which have taken place, are temporary or long lasting, that is, the extent to which the results are sustainable. In addition to evaluating sustainability by following indicators over a period of time, the likelihood of sustainability can be assessed by examining factors, which tend to contribute to results lasting over time. The following are examples of factors, which might contribute to sustainability:

- If an activity has led to a change in the lifestyle of community members, are adequate supports in place to ensure that the new behaviour will be sustained?
- In the case of drug addicts who leave a new detox centre and return to their community, for example, is there follow-up contact and is there a means of assisting them with any relapse they might have?
- If continuing services or resources are required to ensure results are sustainable, are these services available and will they continue to be available? Is there sufficient funding to ensure these services will continue to be available?
- If an activity, which led to particular results, required the cooperation of a number of agencies, do these agencies have the capacity to continue cooperating in providing the service?
- If an activity involved a particular agency, which can no longer be involved, has the capacity to play its role been developed in the beneficiary community or in another group?
- If an activity required the cooperation of different orders of government, will this cooperation continue?

Information on these factors, which contribute to sustainability, could be obtained, for example, by checking periodically with involved agencies and different levels of government on their policies and their funding intentions. This could be done at meetings of agencies cooperating on individual actions and at meetings of the stakeholder groups and organizations involved in providing overall direction to the drug strategy.

In the case of the shelter for alcoholics, with services available in-house, the following are examples of sustainability-related issues, which could be addressed:

- For alcoholics who make use of counselling services connected with the shelter, what follow-up contact is there with them after counselling is completed and what attempts are made to involve family in their rehabilitation?
- Is stable funding in place for the shelter and for connected counselling services?
- Are alcohol-related agencies in the community willing and able to take on those who enter the social service network through the shelter?
- What mechanisms are in place to ensure federal, provincial and municipal officials continue cooperating to support the shelter and follow-up services?

Process Factors Contributing to Success

As mentioned earlier in this framework, in addition to assessing the degree to which concrete results are achieved and the sustainability of these results, there are less tangible factors, which tend to contribute to the success of your strategy and the programs, which are part of it. These factors are related to the process used to plan and implement the strategy and some have already been mentioned under sustainability.

One example of a process factor is the degree to which different stakeholders or agencies are cooperating in the planning and implementation of the strategy and its elements. All municipalities contacted in the preparation of this framework said that the process of planning their drug strategy was bringing together organizations and agencies, which had rarely talked to one another in the past. They felt there was a good chance that this cooperation would lead to joint action among different groups on substance abuse-related issues. As part of the on-going evaluation of your drug strategy, you need to gather information on the meetings, which take place as part of the strategy, additional meetings, which result from these, and changes in policy or concrete actions, which result from this contact.

Cooperation among different orders of government could be considered as being part of cooperation among stakeholders and agencies but because of the broader role-played by government; it is sometimes helpful to separate it out. All communities contacted had invited representatives of the different orders of government to their planning meetings and some municipal governments had articulated increased cooperation among different orders of government as an objective of their drug strategy. As with other stakeholders and agencies, information needs to be gathered on meetings, which take place among different orders of government or between governments and agencies, topics that are discussed at these meetings, and changes, which result from this cooperation. These might include changes in support for particular programs, changes in policy or attitude, and concrete actions or joint programs which result from the cooperation.

Involvement of the beneficiary/recipient community³ in the planning and implementation of your drug strategy usually leads to commitment of the community to actions taken and is likely to provide valuable feedback on the effects of the strategy and how it is perceived by the recipient community. The on-going evaluation should look at the degree to which the beneficiary community is involved and the extent to which they feel involved in and committed to the programs. It should also look at concrete examples of ways in which the beneficiary community has influenced the direction of elements of the strategy; ways in which it has helped resolve difficulties encountered, and actions, which have resulted from the involvement of beneficiaries.

The data gathered in examining these process factors will be qualitative and often anecdotal in nature. In the case of cooperation among agencies and orders of government, data could be gathered through structured interviews with representatives of agencies involved in particular elements of your strategy and with those stakeholders involved in guiding the overall strategy. It might also be useful to conduct some group interviews with the agencies involved in particular parts of the strategy. Data on the involvement and perceptions of the beneficiary community could be obtained from participating agencies and from whatever bodies are formed to represent the beneficiary community in the planning and implementation of your strategy.

³ The term “beneficiary” or “recipient” community is used in several places in the evaluation framework and refers to the group(s) being targeted by your drug strategy.

4.0 RESPONSIBILITY FOR DATA GATHERING AND ANALYSIS

An important aspect of the on-going evaluation of your drug strategy is the assignment of responsibility for the gathering and analysis of the data you decide you want to obtain and the frequency with which this will be done.

In most cases, your drug strategy will consist of a number of different parts or elements, perhaps organized according to the four pillars, prevention, treatment, enforcement and harm reduction, or in some other way appropriate to your municipality. In each category you will have specific action plans made up of particular activities, with agencies responsible for each activity and probably a lead agency for each. One way of gathering evaluation data would be to have one agency responsible for gathering data on each activity or set of activities. You would then end up with a number of different agencies gathering data on different parts of your strategy.

The next step will be to bring together the information from the various organizations and elements of the drug strategy and combine it into an overall assessment of your strategy. One way of doing this would be to assign this task to a committee made up of the agencies responsible for gathering data on the different parts of the program. The committee could be led by a representative of one of the stakeholders responsible for guiding the overall drug strategy.

Once your baseline data is collected, the frequency with which you gather data on your strategy will depend on the nature of the programs making it up, the level of result you are looking at and where you are in the implementation process. Early on you will be looking only at activities and short-term results while later on in the process you will also be looking at the strategy's longer-term effects.

5.0 DISSEMINATION OF EVALUATION RESULTS

As stated earlier, the purpose of evaluating your drug strategy on an on-going basis is to make improvements in it as you go along and to be able to demonstrate success to funding agencies, politicians and the general public.

In order to use the information to improve your drug strategy, you will need to set up a system to document the results of the evaluation and feed them back into the program, both at the level of the overall strategy and at the level of the individual elements of the strategy. Agencies responsible for gathering and analysing data on the particular elements of the action plan could document the evaluation results in reports and present them at meetings of agencies involved in these activities. In the case of the overall strategy, the evaluation committee could pull together the evaluations of the different activities into one report. Part of some of the periodic stakeholders' meetings could be set aside to present and discuss the results of the on-going evaluation and to discuss possible modifications to the overall strategy. If the evaluation reports produced are kept in one location, agencies can refer to them to incorporate learnings into their on-going planning.

The use of evaluation results to strengthen political and donor support will also take place at the level of the overall strategy and the level of particular parts of the action plan. While the methods used will depend on the situation in your community, evaluation results could be presented in press releases to the media and in oral or written reports to donors and to the political levels of your municipality.

6.0 A FINAL NOTE

This framework has presented guidelines to assist your municipality in developing a plan for evaluating the success of your drug strategy, including:

- identification of the results you expect to achieve and process factors which are likely to contribute to success,
- identification of indicators you will use to measure success,
- development of methods you will use to collect data on your indicators,
- assignment of responsibility for data collection and analysis, and
- the use of evaluation results to improve your strategy and encourage support for it in your community and among donors.

One final thought on the evaluation process is the importance of participation. Just as you consulted with a wide range of stakeholders, including the beneficiary community, in developing your drug strategy, the development of your evaluation plan will benefit from a similar consultation process. Those involved intimately in the parts of the strategy can often provide the most valuable insights into how it should be evaluated.