

capital building in Harrisburg. During these events, **staff and constituents meet with state representatives to educate them about the purpose of the DD Act** and the role that the Institute plays in promoting the independence, productivity, integration, inclusion, and self determination of people with developmental disabilities. Third, our bi-annual newsletter is sent to each member of the executive and legislative branches to inform them about topics important to the disability community as well as activities conducted by the Institute. Fourth, senior staff has developed relationships with legislators and in those roles have been able to provide information when issues affecting the disability community arise (e.g., death penalty and people with mental retardation). Fifth and most important, many of the Institute's leadership development programs prepare people with developmental disabilities and family members to communicate effectively with state legislators and members of Congress. As a result, hundreds of people with developmental disabilities have the information, the competence, and the confidence to educate and provide needed information to the legislature of Pennsylvania and to members of Congress representing people from Pennsylvania.

SECTION 3. EVALUATION

3a. Methodology and Use of the Logic Model

All evaluation efforts are directed at documenting the level of success of the various objectives and at providing valuable information in moving forward. Evaluation is a feedback mechanism for self-correction during the grant cycle and, then as a tool for exploring of ways to enhance existing objectives and developing new ones for future planning.

The evaluation strategy uses the NIDRR logic model. The five-year work plan includes a series of goals grouped under the special emphasis areas identified in the DD Act of 2000. Each broad goal subsumes at least two objectives, which have been operationalized by specifying activities for the first and more generally for subsequent years. Each objective has one or more measurable **outcomes**. The activities are listed in terms of numbers that represent desired **outputs**, e.g. numbers of persons trained, workshops presented, etc.

Refer to Table 5 for a summary of the expected outcomes associated with each objective, and when and how each will be measured and *APPENDIX 6* for a more detailed description of outcomes and how they are measured.

Each year, the annual report will present data on the outputs and where available outcomes that have been measured, and the management team's recommendations for going forward with the objectives based on the collected output or outcome data using the Goal Attainment Method (Kiresuk & Sherman; 1968). Because each objective has a measurable outcome and all activities are written in measurable terms, it will be possible to determine if we have met, exceeded or fallen short of our objectives for that year.

Table 5. Summary of Outcomes and Methods Used of Measuring for the 34 Outcomes Associated with the 8 Goals

Goal Outcomes for Objectives	Outcome	*When (Year)	Method	Comments
Goal 1 – Inclusive Ed. Obj. 1.1	K-12 parents/school personnel demonstrate improved knowledge & skills for implementation of best practices.	1-5	1	Also, re-review after 2 years
Obj. 1.2	Curricula of K-12 teacher prep courses are enhanced with rigorous instruction on best practices.	1-5	5	
Goal 2 – Higher Education Obj. 2.1a	TU administrative supports staff increase ability to ID issues related to disabilities.	1-5	1	
Obj. 2.1b	TU administrative support staff increase capacity to respond to needs of members with disabilities.	5	4	focus groups
Obj. 2.2a	Students in academic depts. report increased knowledge of disability.	2-5	2	
Obj. 2.2ab	Content related to disability issues in course syllabi of target academic departments is increased.	1 & 5	5	
Obj. 2.2c	80% of TU post-baccalaureate students with a certificate in Disability Studies report use in their current activities.	2-5	2	1 yr post-grad
Goal 3 – Health Obj. 3.1a	Information is disseminated on attitudes, beliefs, values regarding sexuality.	2	6	
Obj. 3.1b	250 key stakeholders report increased knowledge of sexuality and disability.	2-5	1	
Obj. 3.1c	50 service agency staff who receive train-the-trainer instruction report they have successfully	2-5	3	6 & 12 months post

	implemented a training program and identified facilitation and barriers.			
Obj. 3.2	Information is disseminated on nutritional and physical activity status of persons with disabilities and the efficacy of various model programs.	5	6	at least 2 papers
Obj. 3.3a	Planners and policy makers include people with disabilities in developing emergency preparedness plans/procedures.	3 & 5	5	
Obj. 3.3b	Planners and policy makers describe the facilitation of and barriers to implementation of inclusion of people with disabilities in emergency preparedness planning.	5	4	focus groups
Obj. 3.4a	400 people with disabilities and families increase understanding of specifics of emergency preparedness.	2-5	1	
Obj. 3.4b	300 people with disabilities and families report that they have applied principles to improve their preparedness.	2-5	3	Phone, 3 mo. Post-train
Goal 4 – Leadership Obj. 4.1a	125 people w/disabilities and family members report increased contacts with public officials.	1-5	3	6 months post-training
Obj. 4.1b	65 family member & self-advocate trainers attain training capabilities in Understanding the MR System in Pennsylvania, & 10 trainers who reach Associate/Master status enhance competencies.	1-5	1	
Obj. 4.2a	At least 2 boards of state-wide agencies report that members with intellectual disabilities participate in meaningful ways.	1-5	2	of Board members
Obj. 4b	10 families with disabilities are involved in leadership activities.	1-5	2	
Goall 5 - Criminal Justice Obj. 5.1	200 criminal justice, victim service professionals & grad students increase understanding re disability.	1-5	1	
Obj. 5.1	200 people with disabilities improve their understanding of the criminal justice and victim service systems.	1-5	1	
Obj. 5.2	OMR uses collected data in decision-making regarding Special Offenders' programs, and staff describes facilitation/barriers to implementing.	3 & 5	4	in-depth interviews
Obj. 5.3	Users access the library and find its resources helpful.	2-5	2	of library users
Goal 6 – Outcome Eval. Obj. 6.1	People with disabilities, families & policymakers rate the quality reports as useful and helpful.	1-5	2	of IM4Q network

Obj. 6.2	Public policy decisions are made using methods developed.	5	4	in-depth interviews of experts
Obj. 6.3	Directors of Temple research, policy centers include disability in measuring quality of life, and describe facilitation & barriers.	5	4	in-depth interviews
Obj. 6.4	National research agendas and data collection methodologies are enhanced to reflect disability.	5	4	in-depth interviews of experts
Goal 7 – Self-determination Obj. 7.1.	750 people with disabilities and family members report increased knowledge and confidence to pursue self-directed supports.	1-5	1	
Obj. 7.2	Implementation of self-directed supports are increased at the board levels of at least 3 statewide policy organizations	1-5	5	survey of meeting minutes
Obj. 7.3	People choose their services and supports, and people who provide them.	1-5	2	
Goal 8 – AT Obj. 8.1	4,500 people w/disability, families and service providers report enhanced decision-making re AT devices.	1-5	2	people who received service
Obj. 8.2	Universal design principles and hands-on experiences with accessible and assistive technologies are integrated into courses at Temple and other institutions of higher education.	1-5	5	
Obj. 8.3	At least 1,500 educators, students, and families report increased AT knowledge.	1-5	1	
Obj. 8.4	Pennsylvanians have information to evaluate and/or improve website and other IT accessibility.		2 & 6	online survey of users

1=pre-post training surveys; 2= annual surveys; 3= follow-up surveys ; 4= focus groups or in-depth interviews; 5= review of syllabi, plans or minutes; 6= peer-reviewed publications and other dissemination products

3b. CAC and its Role in Reviewing the Data and Identifying Emerging Trends and Needs

As the Institute has done in the past, an annual report of progress on our broad goals will be presented to the CAC for review of the Institute’s effectiveness in implementing the five-year plan in a manner consistent with the original work plan. **The annual review with the CAC will also form the basis for identifying emerging trends and needs and will be reflected in the work plan amendments, if needed.**

In conducting evaluation activities, we will protect that the confidentiality of respondents whether they produce written or oral data. Respondents will be told in writing that responses are voluntary, that confidential

information about individuals will not be shared with others, and that answers will be used for evaluating the project and/or conducting research.

3c. Typology of Outcome Methodologies

A variety of outcomes methods will be used to assess progress in achieving the eight broad goals and the related objectives. These include:

Pre-post onsite training surveys – (nine outcomes. seven measured beginning in Year 1; two starting in Year 2) Outcomes for which measurement begins in later years assess objectives that will be new initiatives for the Institute, e.g. sexuality and emergency preparedness. Pre-post training surveys will be carefully constructed to show whether participants in training demonstrate increased knowledge, changed attitudes, or improved motivation in the areas in which the training was conducted.

Annual surveys – (Nine outcomes. Five beginning in Year 1; the other four beginning in Year 2) The four outcomes measured in Year 2 are associated with new activities under criminal justice, web-based accessibility, and higher education. Ongoing surveys beginning the first year of the grant cycle are associated with existing programs, e.g., leadership, self-determination, assistive technology, and outcome measurement.

Follow-up surveys –(three outcomes) These follow-up surveys measure program results at the level of behavior, rather than knowledge acquisition or attitude change that are measured in the pre-post-training surveys. The follow-up surveys are in the areas of sexuality (the extent to which train-the-trainer instruction results in attendees conducting their own training programs); emergency preparedness (whether people with disabilities have implemented training principles three months after the training); and leadership (whether people with disabilities have made increased contacts with public officials 6 months after training).

Focus groups and in-depth interviews – (six outcomes) The focus groups and in-depth interviews are generally conducted at the end of the 5-year grant cycle. They will be in areas in which we seek to advise and influence policy change, and want to explore both facilitation of the policy change and barriers to its implementation. Results of these mini-research projects can be particularly valuable in understanding how to

develop future goals and objectives in these areas. Focus groups and/or in-depth interviews will be conducted to explore issues related to policy adoption at the University to increase capacity to respond to persons with disabilities; inclusion of persons with disabilities in emergency preparedness planning by agencies and non-governmental organizations; use by the Office of Mental Retardation of data guidelines and information supplied by the Institute regarding criminal justice, in both Years 3 and 5; and board-level implementation of self-directed supports at statewide policy organizations. A series of in-depth interviews of key stakeholders in public policy outcomes, university research and policy centers, and national research organizations will explore reasons the Institute's efforts to increase inclusion of issues related to disability were or were not successful.

Syllabi, plan and meeting minutes review – (five outcomes) Inspection of documents related to course syllabi, public planning, and organizational effectiveness can provide an objective evaluation of goals related to education and policy. We will use this method for goal areas including inclusive education, higher education, emergency preparedness, self-determination, and assistive/accessible technologies and universal design.

Peer-reviewed publications – (three outcomes) Publication in peer-reviewed research journals is an important vehicle for influencing thinking and behavior of academics; dissemination of research results in the community and "lay" press is also important. Although dissemination of information regarding all activities will be ongoing and is addressed elsewhere in this application, we have expressly designated feasible research agendas that will produce new knowledge in three areas: sexuality, wellness, and information technology adoption. Furthermore, research papers may result from many of the other objectives. For example, there may be general interest at the national level on our outcomes related to emergency preparedness; on use of data related to criminal justice by offices of mental retardation; on the usefulness of outcomes reports on quality of life for persons with disabilities; and on how to incorporate disability issues in the more general measurement of quality of life. In addition, with rigorously-designed and executed surveys of effectiveness of our training programs, we may be able to disseminate their structure and outcomes more generally in the peer-reviewed literature. Therefore, we expect benefits at multiple levels to result from our increased emphasis on

thoughtful development, implementation, and dissemination of outcome evaluation of our grant-related activities.

Each outcome measurement strategy was developed with the staff responsible for implementation of the goals, objectives, and activities, and carefully tailored to the kind of outcome that was envisioned. Because of the variety of objectives, each goal uses more than one method to evaluate outcomes. Except for the goals for inclusive education and outcome measurement, each goal area uses at least three methods, and one (health) uses five of the six methods. The use of a variety of evaluation methods, at the project level as well as at the goal level, will provide important evidence that can be used in developing theories of evaluation methodology as well as serving to document our project's results.

3d. Summary of Methodologies Used to Evaluate the Output and Outcomes of the Institute's Five-year Work Plan and Principles Underlying Evaluation

In summary, the Institute on Disabilities will:

- Track outputs on a semi-annual basis through NIRS. Target outputs are specified in the activities associated with each objective, and we can easily compare our achieved outputs with the targets, revising our strategy and outreach as necessary.
- Promote the active involvement of individuals with developmental disabilities and families in developing the instruments and design, and canvas them for feedback regarding results of the analyses and dissemination.
- Collect data and disseminate results in accessible formats that are easily available to all persons, including those with disabilities.
- Evaluate quantitative outcomes (e.g. on-site, follow-up and annual surveys) by entering the data into a statistical package for analysis at the appropriate level. For example, descriptive statistics will be calculated on the knowledge items pre and post training, and shared with each goal team on a semi-annual basis. When a sufficient number of surveys are collected, items and scores will be analyzed

using statistical tests, e.g. paired t-tests if parametric assumptions are met, to determine if change exceeded the level to be expected by chance. For annual surveys, we will be able to conduct subgroup analyses to determine if our interventions are more effective for some people and address problems by changing the training strategy or targeting the training audiences more effectively. In addition, we will be able to track these outcomes longitudinally, over the life of the grant, to see if our strategic revisions based on feedback regarding outcomes have been successful.

- Evaluate qualitative outcomes (e.g., focus groups, in-depth interviews, syllabi and plan reviews) by analyzing information using state of the art techniques. The Institute has a license for Atlas qualitative analysis software, and the design, implementation and analysis of qualitative data can be accomplished most effectively with the assistance of the graduate students who are research interns at the Institute. Again, results will be disseminated to the goal team and to the larger lay and academic communities, as appropriate, in a variety of accessible formats.

SECTION 4. ORGANIZATIONAL PROFILE

In this section, the organizational structure of the Institute is described with special attention given to (a) the organizational structure, (b) employment of individuals with developmental disabilities, families and individuals from culturally and linguistically diverse backgrounds; and (c) the Institute as an independent center.

4a. Organizational Structure

The Institute is an interdisciplinary Center that reports directly to the Dean of the College of Education. Dr. Diane Nelson Bryen, the Executive Director since 1991, is a tenured full professor in the College of Education. In addition to the Community Advisory Council, the Institute receives input from an Interdisciplinary Faculty Council especially in regards to our Disability Studies Graduate Certificate program and our support of the academic mission of Temple University. Currently there are 27 full-time, 7 part-time faculty and staff, and 12 graduate externs and research assistants. Three staff also have academic appointments in the College of