

# Creative & Credible

## DATA COLLECTION AND SAMPLING

Written by Norma Daykin with Meg Attwood and the Creative and Credible Project Team.

Every arts and health project will require some basic monitoring, which may include recording the numbers of sessions delivered in different settings and the numbers of participants taking part; capturing ad hoc feedback from participants, staff and stakeholders; and end of project review meetings. Evaluation requires the use of feedback gathered from questionnaires, interviews and focus groups. More complex evaluations will be focused on impact assessment and outcomes measurement. Evaluation will be more effective if well designed tools are used to collect data. This section guides you through the issues in evaluation design, showing how quality in data collection can be ensured.

### *When to evaluate?*

Some data collection, including monitoring and capturing ad hoc feedback, will take place throughout the project, whereas other forms of data collection will take place at specific time points, for example, after each workshop or at the end of the project. More complex evaluations often involve the collection of baseline data (data gathered before the start of a project) and then compare this with data gathered at an interim time point and/or at the end of the project.

Data collection is one of the most important stages in the evaluation cycle, as the quality of the data will shape or limit valuation findings and reporting. The quality of the data you collect is therefore of the utmost importance. Data collection refers to any information that is gathered as part of the evaluation. The information that is gathered can be either quantitative or qualitative. Quantitative and qualitative data are equally valid, but are chosen based on their appropriateness to the context and participants and the questions posed by the evaluation. Most evaluation projects will rely on a combination of these two approaches.

### *The Arts Observational Scale (ArtsObs): A Mixed Methods Evaluation Tool.*

A bespoke tool that is suited to a wide range of arts and health evaluation contexts has been developed by evaluators at the Chelsea and Westminster Hospital, in partnership with the Centre for Performance Science, Royal College of Music following extensive consultations with patients, staff, health

organisations and arts organisations (Fancourt & Poon, 2015). The main objectives behind the development of the Arts Observational Scale (ArtsObs) were to create a tool that is:

- Non-intrusive monitoring and evaluation that does not interfere with or diminish the effects of the creative arts process taking place
- Capable of capturing quantitative and qualitative data from participants who are not able to complete questionnaires
- Able to capture data that can be benchmarked against organisational cycles for quality improvement
- Simple and quick to complete so that it can easily be carried out with minimal training by staff in busy work environments

ArtsObs assesses mood, relaxation, distraction and, all of which have been found to be important in arts and health. It uses accessible methods including a series of faces to represent different moods. It is designed for internal project evaluation rather than research. It offers a useful resource for projects seeking to measure progress against objectives and organisational standards. The scale is available at [www.cwplus.org.uk/ArtsObs](http://www.cwplus.org.uk/ArtsObs). As well as the tool, downloads include a user guide, a form for completion and an excel spreadsheet for automatic data analysis. You can download the tools here: <http://www.cwplus.org.uk/art-and-design/arts-research/artsobservational.htm>

### *More complex evaluation research*

For those designing evaluation research projects, The Research Design Service (RDS) funded by The National Institute for Health Research (NIHR) provides design and methodological support to health and social care researchers across England to develop grant applications to the NIHR and other national peer-reviewed funding programmes. RDS advisers in bases across England offer a unique breadth of experience and a proven track record in improving research applications. See more at: <http://www.rds.nihr.ac.uk/#sthash.w1F90iFq.dpuf>

## Sampling

Sampling and recruitment of participants are important considerations whether the evaluation being undertaken is quantitative or qualitative. In small scale studies, it is not always possible to generate a random or representative sample. However, every evaluation should be able to report the extent to which those who have contributed to evaluation reflect the variety of characteristics, roles and views present in those taking part in projects.

In large scale studies there are various methods for random sampling that are best advised by experienced researchers. One technique is quota sampling, where evaluators identify specified numbers of people according to pre defined characteristics, such as age and sex, in order to make up a total sample that reflects the population. This can work well in larger projects where evaluators have a good level of knowledge about project participants.

One difficulty for arts and health evaluation is that it may be difficult to establish a parent population from which to draw a sample. This is often the case in open access projects or in community arts and public art projects where there is no way of knowing exactly how many people have experienced the intervention. Here, techniques such as snowball sampling are often used. This involves identifying a small number of individuals with the appropriate characteristics who are then asked for the contact details of others who might be suitable.

In practice, evaluators often simply do their best to obtain a wide spread of participants. Whatever the approach, it is important to be transparent about its strength and its limits. Importantly, it would be very misleading to generalise from small or unrepresentative samples to make claims about the impact of arts on health and wellbeing beyond specific contexts and identified participants.

In qualitative evaluation, it is less important to obtain a representative sample of participants. Techniques such as purposive sampling are often used to draw up a sample that broadly reflects the characteristics of those taking part in the project. A more focused approach of theoretical sampling might identify participants whose particular experiences are sought. Even in qualitative evaluation, sampling should not be ad hoc, and there should be an effort to eliminate bias. For example, evaluators should seek to reflect the full range of experiences and views and should avoid limiting feedback to the opinions of people who have successfully completed and benefited from projects.

## Conclusion

Whatever the approach, it is important to decide on the basic evaluation strategy before the project starts, and to choose an appropriate sample of participants to provide information. It is also important to choose the right method to collect the data you need.

The following checklist should help you consider the key issues when reviewing the quality of the information that you have gathered for evaluation purposes.

- Sampling and recruitment of participants: do your participants represent the variety of characteristics, roles and views present in your population?
- Response rates and missing data: have you taken appropriate action to ensure a healthy response rate and that missing data are kept to a minimum?
- Appropriate method: have you chosen a method that is appropriate to the context and participants and that is feasible for you to deliver within the project's timeline and budget?
- Bias: have you considered where bias could be introduced and taken action to minimise this?
- Ethical considerations: have you gained the appropriate consent from your participants?

## References

Fancourt, D. & Poon, M. (2015) Validation of the Arts Observational Scale (ArtsObs) for the evaluation of performing arts activities in healthcare settings. In *Arts and Health, an International Journal of Research, Policy & Practice*. Accepted for publication 1st April 2015.