Community-University Research Alliances (CURA)Program: Analysis of Data contained within the Milestone and Year 1 Reports

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Executive Summary

SSHRC's Community-University Research Alliances (CURA) program supports the creation of community-university alliances which, through a process of ongoing collaboration and mutual learning, foster innovative research, training and the creation of new knowledge in areas of importance for the social, cultural or economic development of Canadian communities.

In order to measure and monitor the performance of this innovative funding program, a Results-based Management and Accountability Framework (RMAF) was developed for the CURA program in 2003. This framework guided the development of a series of reporting forms designed to collect data on a number of individual CURA-level and CURA program-level indicators. These reporting forms were provided to the 15 CURA research programs funded in the December 2003 competition.

This report presents the results of an analysis of the data contained within the first two reporting forms that have been submitted to date; i.e., the *Milestone Report* (due after the 1st month of funding), and the *Year 1 Report on Partnership and Governance* (due on the 12th month of funding). Fifteen Milestone Report and 13 Year 1 Reports were the subject of this analysis. This report also presents the results of a critical analysis of the overall quality of the reporting forms that have been developed for the CURA program. Lastly, the report provides suggestions for improvements to the CURA program RMAF, to the data collection strategy, and to the reporting forms themselves.

Key Findings from the Analysis of Data contained within the Milestone and Year 1 Reports

Collaboration between universities and community organizations

The majority of CURA research programs appeared to be successful in adopting a management structure to support the involvement of partner organizations in the research program. However, there were a number of programs with a tighter management structure, little or no input from a steering committee, and a lower level of partner involvement in project management. Two-thirds of the CURAs indicated they had written agreements outlining partnership functioning. However, only four had fully developed protocols at the time of the Milestone Report. One-third of research programs had no agreements or only had terms of reference and indicated no plan for further development in this area. This was an area of concern, as it appeared from the experience of two CURAs that having written agreements could help to prevent conflicts. About half the CURAs indicated that partner involvement included higher-level tasks such as setting priorities or leading/ co-leading research projects. Others indicated that partners were involved in assisting with data collection and dissemination of findings or in providing input to the research program. An area of concern was that most CURAs did not seem to be explicitly aware of whether partner organizations' goals were being met by the research programs.

Students' education and employability

The 15 CURA research programs indicated that they planned to involve about 750 students (both paid and unpaid) in a variety of roles – an average of 50 per research program, as well as about 85 other staff, an average of 6 per research program. CURAs mentioned a variety of ways in which they hoped to foster students' sense of belonging – most frequently through involvement in disseminating research, or through direct/ close supervision by mentors. However, while all research programs indicated that students were targeted for knowledge mobilization, none indicated that they were one of their top three priority audiences.

Knowledge mobilization

CURAs described a wide variety of knowledge mobilization/ dissemination plans for both academic and non-academic audiences, reflecting the variety of research projects. They indicated they would hold a total of approximately 400 events aimed at non-academic audiences and 250 events aimed at academic audiences. All but one CURA research program indicated that *academics and other experts* would be one of the top three priority audiences. Other audiences identified as being high priority by research programs were *community groups*, *professionals/ practitioners* and *policy-makers*.

Performance monitoring and evaluation

CURA research programs also varied in their intended approaches to performance monitoring and evaluation, with the variation partly depending on the nature of the CURAs themselves. However, there was some underlying variation in orientation to performance monitoring and evaluation. While most CURAs indicated that they would monitor and evaluate the creation and dissemination of research findings, relatively few indicated they had plans in place to monitor and evaluate university/ community collaboration and capacity-building, or the impact of training on students' education and employability.

Summary of suggestions for improvements to the CURA program RMAF, to the data collection strategy, and to the reporting forms

The quality assessment of the CURA reporting forms concluded that the Milestone Report did provide useful information and should elicit a moderate degree of confidence in the information provided. However, a number of questions were interpreted variably; were not answered consistently; may not have elicited the information required in the CURA program's RMAF or may not have been linked to the RMAF or its logic model; may have had limited use for SSHRC staff; and may have created a reporting burden for the CURAs. It must be remembered that the Milestone Report was to be completed one month after funding was received (i.e., January 2004), giving the research programs very little time for start-up. In practice, most of the reports were submitted between March and November 2004, and one was submitted in May 2005.

The assessment of the Year 1 Report also concluded that the information provided should elicit a moderate degree of confidence. However, a number of questions were interpreted variably; were not answered consistently; may not have elicited the information required in the logic model; may not meet the information needs of SSHRC staff; and may have created a reporting burden for the CURAs.

Several suggestions were advanced to increase the utility of CURA reporting forms. These included the following:

1. Simplify the logic model in the CURA RMAF by breaking it down into a set of simple, linked logic models;
2. Develop a Data Collection Matrix and a coding system for data analysis that are linked to the logic models; and
3. Review the timing and simplify the focus of the reporting forms.

A more targeted and developmentally appropriate approach to data collection could provide data of better quality and more utility for SSHRC. It is suggested that the Milestone and Year 1 Reports be combined and the focus limited to start-up activities. The lesson learned from this analysis is that too much information was required too soon in the Milestone Report and not enough in the Year 1 Report resulting in information of only adequate quality.

It is also suggested that further work in piloting both the CURA reporting forms and their analysis is required. In terms of additional reporting requirements not examined as part of this analysis, it is suggested that the Mid-term Report (due on the 30th month of funding) should also be re-structured to reflect a simplified focus and it should be implemented as soon as possible to support the upcoming site visits. Some thought should be given to a structured but personalized addendum to the Final Research Report (due six months after the end of the funding period). Finally, some consideration should be given to the bigger picture through a follow-up requirement. Further discussion is needed to determine both its form and the incentives required for its completion but the value of this additional tool in terms of providing feedback on SSHRC's objectives is clear.

1.0 Context of the Analysis Report

As a number of forces continue to reshape our world, communities are presented with an increasingly complex mix of opportunities and challenges that have multiple social, economic and cultural dimensions. Many of these challenges are understood the best by local and regional groups. At the same time, issues that cut across geographic boundaries are also best addressed by universities working closely with groups representing particular "communities" of interest. Thus, alliances between community organizations and universities will foster new knowledge, tools and methods to develop the best strategies for diverse aspects of intervention, action research, program delivery and policy development that will help to address these opportunities and challenges.

SSHRC believes that by working together as equal partners in a research endeavour, universities and community organizations can jointly develop new knowledge and capabilities in key areas, sharpen research priorities, provide new research training opportunities and enhance the ability of social sciences and humanities research to meet the needs of Canadian communities in the midst of change. The Community-University Research Alliances (CURA) program is designed to facilitate such collaborations.

The purpose of the Community-University Research Alliances (CURA) program is to support the creation of community-university alliances which, through a process of ongoing collaboration and mutual learning, will foster innovative research, training and the creation of new knowledge in areas of importance for the social, cultural or economic development of Canadian communities. Specific objectives include:

1. To promote sharing of knowledge, resources and expertise between universities and organizations in the community;
2. To enrich research, teaching methods and curricula in universities;
3. To reinforce community decision-making and problem-solving capacity; and
4. To enhance students' education and employability by means of diverse opportunities to build their knowledge, expertise and work skills through hands-on research and related experience.

Of interest in this evaluation support project are the 15 CURA research programs that were funded in the December 2003 competition.

This evaluation support project has three main objectives:

1. To summarize and analyze the contents of 15 Milestone Reports submitted by CURA grant-holders and to prepare a summary report;
2. To summarize and analyze the contents of 13 Year 1 Reports submitted by CURA grant-holders and to prepare a summary report; and
3. To conduct a critical analysis of the CURA program’s data collection instruments (including the Milestone and Year 1 Reports), based on preliminary data and on survey development theory and practice, and to prepare a report on their quality, validity and reliability with recommendations for change as needed.

This report presents an analysis of the data contained within the CURA Milestone and Year 1 Reports. In addition, this analysis allowed the evaluators to conduct a critical analysis of these tools through a quality assessment process. The results of this quality assessment are also included in this report.

2.0 Purpose of the Reports

In 2003, a Results-based Management and Accountability Framework (RMAF) was developed for the program and a Performance Report on the pilot phase of the CURA program served as a test of the Framework. As a result of the Performance Report's findings, the RMAF was refined and finalized in November 2003.

The RMAF's project-level indicators (i.e., measures of individual CURA activities, outputs and outcomes) were integrated into a series of data collection tools which were provided to all 15 CURA research programs funded in the December 2003 competition. As a condition of their grants, these CURA research programs are expected to provide:

- An initial Milestone Report (expected after the first month of the CURA funding period);
- A Year 1 Report on the state of partnerships and governance structure (expected on the 12th month of the CURA funding period);
- A Mid-term Report (expected on the first day of the 30th month of CURA funding period); and
- A Final Research Report (expected six months after the end of the funding period).

In addition to providing information on the overall performance of the CURA program, these reports are expected to provide an opportunity for CURA research programs to report on the progress and outcomes of their activities, according to the performance indicators they have themselves identified at the formal application stage.

This report summarizes and analyzes the first set of Milestone and Year 1 reports.

2.1 Milestone Report

The Milestone Report provided an overall view of what the CURA planned to accomplish, how, and in what timeframe, as well as how the CURA planned to measure and evaluate its progress and performance. It was meant to complete the performance information presented at the time of application, and was to incorporate Adjudication Committee comments in the areas of performance and evaluation. Specifically, the purpose of the Milestone Report was to:

- Assist the CURA research team from the outset in planning and managing a realistic calendar of research activities and outcomes and in assigning responsibilities to team members for the first 30 months of the CURA grant;
- Serve as a blueprint for the CURA's Mid-term Report so as to be able to determine which activities are on, ahead or behind schedule and establishing the status of planned deliverables; and
- Provide a yardstick for the Mid-term Review Committee members to measure accurately the progress achieved during the first half of the CURA grant.

The Milestone Report was comprised of two sections:

1. A standardized report which captured basic figures and baseline measures of performance indicators of interest to the overall program; and
2. A personalized report that discussed issues particular to the CURA, including performance targets and commitments. This component was to be a maximum length of 10 pages and the use of charts and tables was strongly encouraged.

Given the importance of the Milestone Report, the Council expected that the Principal Investigator would ensure that core members of the CURA reviewed the document *at the draft stage* and that all members of the CURA team endorsed its content and commitments. The Milestone Report was to be submitted one month after the grant began.

2.1.1 Data elements

The standardized section of the Milestone Report included the following data elements:

1. CURA Infrastructure (governance structure, guiding documents and agreements);

2. Student Training and Employment (number of students and postdoctoral researchers, both paid and unpaid, number of non-student staff and their role, number of knowledge mobilization staff); and
3. Knowledge Mobilization (formal plan, anticipated events, main audiences).

The personalized section of the Milestone Report included a list of topics that related to the following indicators:

1. CURA Objectives and Infrastructure (changes to formal application, issues raised by the Adjudication Committee and how they were addressed, management structure and advisory boards, partnership management plans, means of and mechanisms for integrating team members, collaborators and partners along with their roles and responsibilities);
2. Student Training/ Employment (plans to train students and monitor their research activities, means of fostering their sense of belonging to the project);
3. Knowledge Mobilization (dissemination/ communication plans, how knowledge will be disseminated)
4. CURA Research Program (sub-program breakdown; description of main research activities; completion dates of research activities; team members and specific activities; targeted deliverables and delivery dates; projected expenditures—by sub-program if appropriate);
5. CURA Performance and Evaluation (overview of CURA monitoring and evaluation plan; performance and evaluation issues; roles and responsibilities of team members in terms of the CURA evaluation).

2.2 Year 1 Report

There were two major components to the annual monitoring of CURA grants; the Year 1 Report on Partnerships and Governance, and the annual financial report or Statement of Account - Form 300. Of interest here is the Report on Partnerships and Governance, providing the CURA research programs with an opportunity to report on the status of their partnerships and governance structure at the end of the first year of their grants. One copy of these reports was to be submitted by January 31, 2005.

2.2.1 Data elements

The Year 1 Report on Partnerships and Governance was expected to provide information on the following data elements:

- The total number of university faculty and postdoctoral researchers (both paid and unpaid) that had participated in the CURA to date along with their discipline/ area of expertise and their affiliation;
- The total number of community partners and participants in the CURA to date along with their discipline/ area of expertise and affiliation;
- The nature and the functioning of the CURA governance structure, including the frequency and number of meetings, decision-making hierarchy, etc.;
- Information on how the funds were shared and administered; and
- Ways in which the partner organizations were involved in the research activities during the first year of the grant and how their goals will be met by the research program.

4.0 Analysis of Milestone and Year 1 Report Data

4.1 CURA research programs' objectives, infrastructure and management

The first set of questions in the Milestone Report pertained to the CURA research programs' objectives, infrastructure and management. For most of these questions, it was possible to analyze their responses to discern themes; the results of this analysis are presented in this section.

4.1.1 Responses to concerns of the Adjudication Committee

CURA research programs were asked to provide a brief discussion in the Milestone Report of any issues raised by the Adjudication Committee at the time of the grant decision, and how they were addressed. Fourteen research programs responded to this question; however, one did not provide details about the issues that had been raised by the adjudicators. The following table summarizes the types of concerns that were raised by the Adjudication Committee for the 13 research programs that provided detailed responses to this question.

Table 1. Types of concerns raised by adjudication committee (n = 13)

Type of concern raised by adjudication committee	# of Research programs
Need for increased partnering (e.g., with Aboriginal organizations)	6
Concerns about performance measurement	3
Concerns about knowledge mobilization plans	3
Need to expand the scope of the research	2
Concern about whether there was sufficient curriculum development	1
Needed justification of funds for consultants	1
Concerns about use of plain language	1
Needed clarification about what was unique or new about the research	1
Doubts about ability to spend funds allocated	1
Query regarding the impact of research on policy	1

Note that most CURA research programs either provided clarifications in response to the adjudicators' concerns, or described ways in which they were currently addressing these concerns. In two of the cases in which the adjudicators identified a need for increased partnering, research programs indicated that they hoped to involve additional partners in the future, but at the time of the Milestone Report this had not yet been done. In one of these cases it appeared that a number of organizations had been contacted but that one with appropriate energy, resources and commitment to research had not yet been identified.

4.1.2 CURA research programs' management structure

CURA research programs were asked in one of the personalized questions on the Milestone Report to describe their planned or actual management structure and the mandate of their advisory boards, if in place. CURA research programs appeared to describe three main types of management structure, as follows:

- A tight management structure, with relatively concentrated decision-making. These research programs had a project manager/ director, and either had no steering committee or a small steering committee, and appeared to have a lower level of partner involvement in project management.
- Other research programs had a flatter management structure, and appeared to have less concentrated decision-making, with greater partner involvement. Some of these research programs had a single project manager while others had two or three co-managers, representing both university and community. All of these projects had a steering committee with adequate representation from both university and community, and appeared to have greater partner involvement in project management through project co-direction, through the composition of their steering committee, or through an advisory committee. Note, however, that in some cases it was not clear how active the steering committee was, as the nature and frequency of steering committee meetings was not always provided.
- The third type of management structure tended to be used by research programs with multiple streams of research or dispersed geographical locations. It appears that these research programs did not have a single project manager, but rather tended to use a more active steering or executive committee to manage the project. The level of partner involvement in project management was related to the composition of this committee, and this appeared to vary somewhat for these research programs, although this was not clear in some cases.

The following table summarizes the breakdown of research programs that answered this question on management structure, according to the above categories. In addition, the table shows how active the steering committee appeared to be, whether there were advisory committees and, based on this information, a judgment about the overall level of partner involvement in project management. The final column in the table shows whether research programs indicated they had written agreements or protocols outlining partnership functioning. Note that one project did not provide sufficient information about its management structure in order to be included in this table.

Table 2. CURA research programs' management structure (n = 14)

Type of management structure	# of research programs	Role of steering committee	Advisory committees?	Level of partner involvement in project management	Written agreement regarding partnership functioning?
Tight management structure, relatively concentrated decision making, lower partner involvement	3	None - 2 Small - 1	Yes - 2 No - 1	Appears low	No - 2 Yes - 1
Flatter management structure, more active steering committee, higher partner involvement	8	Appears to be active	Yes - 4 In development - 2 No - 1 Not mentioned - 1	Appears high (through Steering Committee/ Board)	Yes - 6 No - 2
Cluster/ stream model. Flatter management structure, with research streams separated by geography, variable partner involvement	3	Variable	No - 3	Variable	Yes - 2 No - 1

It appears that those research programs with a flatter management structure and an active steering committee tended to have greater partner involvement in project management and decision-making, which would be consistent with program expectations. Research programs that had several research streams occurring that were widely separated geographically tended, of necessity, to have a flatter management structure, but this did not necessarily mean that they had a high level of partner involvement in management and decision-making.

It is worth noting that for many of these research programs the person(s) indicated as being responsible for management also had heavy research (or supervision of research) responsibilities. It was relatively rare for research programs to have a designated fulltime "Project Manager."

4.1.3 Number of faculty and postdoctoral researchers participating in the project

The Year 1 Report asked for the total number of university faculty and postdoctoral researchers (both paid and unpaid) that had been participating in the CURA to date. There were 13 CURA research programs for which Year 1 Reports were available; however, one CURA did not provide this information. The 12 research programs that did provide reports indicated that a total of 132 university faculty members had participated to date. This was an average of 11 per CURA, with the number per CURA ranging from 5 to 27. The 12 research programs also reported that a total of 7 postdoctoral researchers had participated to date.

4.1.4 Sharing and administration of funds

One of the questions on the Year 1 Report asked research programs to provide information on how the funds had been shared and administered.

Research programs responded in varying ways to the question about how CURA funds had been shared. Some research programs described the way in which funds had been shared between community and university partners; others described the way in which they had been shared among different research units; and others described the way in which they were allocated to salaries vs. operations. In addition, two research programs did not respond to the question at all and two research programs did not submit reports.

In response to the question about fund administration, research programs appeared to describe some variation in the extent to which responsibility for fund administration had been devolved by the institution holding the CURA grant (generally a university) to other organizations. With three CURAs (two of which involved several research clusters at different universities), it appeared that responsibility for the funds had been delegated to the other organizations, while in five other cases the contract holder appeared to retain day-to-day control over expenditure of funds. In addition, two research programs did not respond to the question, three programs did not provide sufficient information in this regard, and two programs did not submit reports.

4.2 Collaboration with partners

Several questions on the Milestone and Year 1 Reports dealt specifically with partnerships—e.g., how they were managed and how partners were involved in the research.

4.2.1 Written agreements outlining partnership functioning

CURA research programs were asked in a standardized question on the Milestone Report if they had established written agreements or protocols outlining partnership functioning. (If they had, they were asked to specify the type of agreement, and to include the documents with their report, and if they did not, they were to provide an explanation of how partnerships would be regulated/ managed.) The following table summarizes how research programs responded to this question.

Table 3. Types of written agreements outlining partnership functioning (Milestone Report) (n = 15)

	# of CURA research programs with type of agreement
Had written agreement(s) outlining partnership functioning	10
Type of agreement:	
Guiding principles	7
Terms of reference	6

Conflict resolution mechanisms	4
Resource allocation principles	3
Other type of agreement	5

The above table shows that 10 of the 15 research programs indicated that they had written protocols on partnership management, while five indicated they did not. The most frequently mentioned types of written agreements were *Guiding Principles*, mentioned by seven CURA research programs, and *Terms of Reference*, mentioned by six. The table also shows that five research programs indicated they had another type of written partnership agreement that did not fall into one of the categories provided. The other types of agreements mentioned were as follows:

- Guidelines for proposals, research practices and knowledge mobilization
- Intellectual property and publication.
- Hiring practice policy, research protocol.
- Data management and ethics procedure manual.
- Memoranda of understanding.

It is also apparent from the previous table that some of the research programs that indicated they had written agreements on partnership management had developed only limited protocols covering some areas of partnership functioning. While some of these research programs had plans to develop further agreements, others did not. Also, of the five research programs that indicated they did not have written protocols, some indicated they would take a "wait and see" approach and decide at the end of Year 1 whether this was necessary, while others did not indicate any intention to develop agreements. In fact, in their Year 1 Reports, research programs were also asked to describe the nature and functioning of the CURA governance structure, including the frequency of meetings, the decision-making hierarchy, etc.

The following table summarizes research programs' status at the Milestone Report in terms of developing agreements on partnership management, as well as any changes noted in their Year 1 Reports.

Table 4. Research programs' status regarding partnership agreements: Milestone and Year 1 Reports

Status of partnership agreements	# of research programs – Milestone Report (n = 14)	Changes at the Year 1 Report (n = 12)
Well-developed protocols on partnership	4	4 research programs: No changes noted
Partially developed, with plans to further develop	3	1 research program put significant time into developing protocols 2 research programs: No changes noted
Terms of reference only, no mention of further development	3	2 research programs: No changes noted
No written protocols, but have plans to develop or to assess the need	3	1 research program appeared to have developed additional protocols 2 research programs: No changes noted
No written protocols, nor plans to develop any	2	1 research program: No changes noted

The table shows that there were relatively few changes in the status of partnership agreements between the Milestone and Year 1 Reports. In fact, of the six research programs that indicated in their Milestone Reports that they would assess the need for, develop, or further develop partnership agreements, four did not report any changes in their Year 1 Reports. One research program did report having further developed its agreements with partners, while another research program that did not previously have any agreements appeared to have developed some.

It is worth noting that the research program that reported further developing its partnership agreements also reported that it had faced significant governance challenges with regard to developing good collaboration between the university and its partners, and that it had put significant time and energy into developing its partnership agreement, presumably in response to these challenges. On the other hand, another research program, which still did not have any written partnership agreements at Year 1, reported that it had experienced several conflicts which "resulted mainly from a change in personnel in partner organizations and resulting lack of history of the research program in the communities" and it had therefore "spent a lot of time reviewing, repeating history, objectives, etc." The experiences of these two research programs would seem to underline the importance of written partnership agreements in clarifying objectives, roles and relationships, which in turn could help prevent conflicts from developing.

4.2.2 Number of partners

The Year 1 Report also asked research programs to "indicate the community partners and their participants in the CURA to date". A total of 12 of the 13 reports that were available provided this information, and indicated an average of 13 partners per research program. There were relatively few changes in partners from the Milestone Report, with occasional names being added or dropped.

4.2.3 Involvement of partners in research activities

A question on the Year 1 Report asked CURA research programs to explain how the partner organizations were involved in the research activities.

Of the 13 research programs that submitted Year 1 Reports, one did not discuss the question at all, and four other research programs responded only in general terms that did not describe the partners' roles specifically. The remaining eight research programs provided varying degrees of detail concerning the nature of the partner organizations' roles in the research. Based on the information that was provided, the following table was prepared showing the number of research programs which identified that partners were carrying out particular roles (see Appendix 1, Table 3 for a detailed breakdown of this analysis). Note that it is possible that other research programs may have had partners involved in these ways but may not have indicated this in their reports.

Table 5. Nature of partners' involvement in research activities (n = 8)

Type of involvement	# of research programs
Leading or co-leading research projects	4
General input or advice	4
Setting priorities for research, planning research	3
Increasing partners' capacity through education, training	3
Assisting in dissemination, awareness raising	2
Helping to carry out data collection	2
Helping in data interpretation	1
Instrumental support (e.g., office space)	1

The table shows that partners were involved in various stages of the research process—some in "higher level" tasks such as setting priorities for research and leading research projects,

through to tasks such as assisting in data collection and dissemination of research. Note that the roles that partners were involved in would have depended on the nature of the research, the capacity of the partner organization, as well as on the nature of their involvement in the project.

Research programs were also asked in the same question to comment on how partner organizations' goals would be met by the research program. Few research programs addressed this question in their responses. It is possible that some partners that had "higher-level" involvement in the research programs, such as having input into research priorities or leading research projects, may have had their goals met through the research activities. However, the fact that CURA research programs did not seem to be explicitly aware of whether partner organizations' goals were being met through the research programs should be an area of concern for the CURA program.

4.2.4 Integration of research team and activities

Research programs were asked in the Milestone Report to describe the means undertaken to ensure the full integration of all team members, collaborators and partners, as well as the full integration of research activities. They were also to include some discussion of mechanisms for cross-fertilization and exchanges between different units.

Research programs responded to this question in a variety of ways. Some research programs did not specifically address how they would achieve integration among all the team members (e.g., researchers, graduate students, students, as well as collaborators and partners), but rather tended to focus on how the different research activities would be integrated. Those research programs that did discuss the integration of the team itself identified a number of methods, outlined below, by which they hoped to achieve this – note that the methods used depended partly on research programs' structures, which varied considerably. Mechanisms included:

- Team meetings, both face-to-face and teleconference;
- Steering committee meetings, which in some cases were open to all members of the research team;
- Working groups with participation from both university and partner organizations;
- Web-based communication methods such as list-serves and websites; and
- Regular reporting of results to all team members.

Some research programs did not address how they would integrate different research streams and promote cross-fertilization between different units (note that for some research programs, this issue was not relevant as they did not have multiple streams or units). Other research programs described various methods to achieve this, including:

- Regular or occasional meetings or workshops involving researchers in different streams or projects;
- The same individuals working in more than one stream/ project;
- Overview projects that cut across individual streams/ projects; and
- The project manager.

4.3 Student training and employment

The Milestone Report included both standardized and personalized questions regarding student training and employment, which is one of the overall objectives of the CURA program.

4.3.1 Number of students, postdoctoral researchers, and non-students expected to participate in CURA research programs

Research programs were asked in one of the standardized questions on the Milestone Report to indicate how many students and postdoctoral researchers (both paid and unpaid) would be participating in the CURA. Details about student involvement were limited. The following table summarizes the responses of the 15 CURA research programs.

Table 6. Total number of students and postdoctoral researchers that CURA research programs expected to involve (n = 15)

	Paid			Unpaid			Paid + Unpaid		
	Cdn	Foreign	Total	Cdn	Foreign	Total	Cdn	Foreign	Total
Undergrad	179	18	197	190	15	205	369	33	402
Masters	181	2	183	96	8	104	277	10	287
Doctoral	28	5	33	17	0	17	45	5	50
Postdoctoral	3	0	3	4	0	4	7	0	7
Total	391	25	416	307	23	330	698	48	746

The 15 research programs indicated that they expected to involve a total of 746 students (an average of 50 per CURA research program) and 7 postdoctoral researchers (an average of 0.5 per research program). It should be noted that one of the CURA research programs expected to involve 234 students and postdoctoral researchers, 216 of this group were undergraduates. Excluding this research program, the number of individuals expected to be involved ranged from 9 to 97, and averaged 37 per research program.

Of the 746 students and postdoctoral researchers, 416 (56%) would be paid while 330 (44%) would be unpaid; 698 (94%) would be Canadian and 48 (6%) foreign. In terms of education level, 402 (54%) would be undergraduate, 287 (38%) Masters students, 50 (7%) doctoral students and only 7 (1%) post-doctoral researchers. (Note that if the research program that expected to involve over 200 undergraduates were excluded, then the majority (53%) would be Masters students, while 36% would be undergraduates).

Most research programs described the roles that students would be taking on, in response to a subsequent question in the personalized section of the report. Their roles varied considerably according to the nature of the research project and the education level of the student. Note that students' level of involvement would also have varied considerably; some may have been involved fairly briefly with data collection activities, while others may have been involved much more intensively. It is also possible that there may ultimately be some duplication as some students may be re-hired or stay for more than one work term.

CURA research programs were also asked to provide the number of non-student staff (excluding postdoctoral researchers) that they anticipated they would hire, broken down by several roles that were provided. Responses to this question are summarized in the following table. Note that it has been assumed that the same staff members were not included in more than one role, although it is possible that some research programs may have done so; the total number of non-student staff may therefore be over-estimated. Also, in cases where research programs indicated "2 to 3" staff, this was included as 2.5 for purposes of totalling, resulting in some fractional totals.

Table 7. Number of non-student staff by role (n = 15 CURA research programs)

Staff role	# of research programs	# of staff
Technician	10	19.5
Professional research associate	9	18.5
Consultant	7	15
Administrative support staff	11	14
Other:		
Project manager	3	3
Community organizers	3	4.5

Staff role	# of research programs	# of staff
Resource coordinator	1	1
Education administration input	1	10
Totals	15	85.5

In addition to the 416 paid students/ postdoctoral researchers, CURA research programs reported that they anticipated hiring approximately 85 other staff, an average of 6 per research program. The most frequently reported roles were *technician* and *professional research associate*.

In a subsequent question, research programs were also asked to provide the number of staff (student or non-student) that would be hired for knowledge mobilization purposes. A total of 10 CURA research programs reported that they anticipated that they would hire 33.5 staff (or 7% of the approximately 500 total student and non-student staff) for this purpose.

4.3.2 Training students and fostering their sense of belonging

Research programs were asked in the Milestone Report to outline their plans to train students and monitor their research activities. In response, most research programs described a wide variety of skills that students (ranging from undergrad to doctoral/ postdoctoral) would learn in the course of their research—the nature of these skills varied, partly with the nature of the research program. It was also noted in this question that it was SSHRC's hope that researchers would encourage and train students "in a way that fostered a true sense of belonging to the team and the project." Most research programs therefore described ways in which they thought that this would be accomplished, and their responses are summarized in the following table.

Table 8. Methods of fostering student sense of belonging (n = 15)

Method of fostering student sense of belonging	# of research programs
Dissemination: Publication and presentations	8
Direct/ close supervision by academic/ community researcher (mentors)	8
Regular forums, meetings, seminars or list-serve	7
Workshops and conferences	3
Contact with community researchers using research	2
Opportunities to learn about larger research issues	3
Orientation session	1
Participation on committees	1

The most common methods suggested for fostering students' sense of belonging were involving them in dissemination of their research through presentations or publication (8), through direct or close supervision (mentoring) by academic and/ or community researchers (8), and through involvement of students in regular forums, meetings, seminars or project list-serves (7).

Four research programs suggested that students would be involved in workshops and conferences, and three mentioned that students would learn about larger research issues, such as community-academic collaboration. For example, one research program indicated that

students were “being trained as a ‘new breed’ of researchers…able to conduct research in partnership with the community.”

Finally, it should be noted that one research program noted as an aside that it was “important to train people in communities, whether or not they were enrolled in the university, and not just students on campus.”

4.4 Knowledge mobilization

4.4.1 Formal and informal knowledge mobilization plans

Research programs were asked in one of the standardized questions on the Milestone Report if they had developed a formal knowledge mobilization/ dissemination/ communication plan; a total of 6 of the 14 CURA research programs indicated that they had. If they had created such a plan, they were asked to include it; if not, they were asked to provide an explanation of how the research program planned to disseminate research results to scholars, the public and other relevant stakeholders. They indicated they would use a variety of different methods to disseminate research knowledge to both academic and non-academic audiences, which are summarized below:

Methods used for dissemination primarily to academic audiences:

- Events (forums, workshops, conferences) or presentations at such an event;
- Reports;
- Papers (for publication or other means of dissemination);
- Journal articles;
- Contributions to a book;
- Course materials;
- Study days; and
- Databases on CD ROMs.

Methods used for dissemination primarily to non-academic audiences: (incl. Policy makers, service providers, public):

- Newspaper articles and other community publications;
- Radio program(s) and television;
- Pamphlets;
- Public education campaigns;
- Community meetings;
- Press releases;
- Expo/ mobile workshop;
- Policy/ community roundtables;
- Through membership in an association;
- Celebration days, naming parks, streets in relevant language; and
- Multi-media – bilingual web-based lessons, CD/ DVDs, FirstVoices archiving.

Methods used for dissemination to both types of audiences:

- Electronic methods: Web-site, electronic reports, on-line library, list-serve;
- Face-to-face sharing;
- Newsletters; and
- Power point presentations.

4.4.2 Number of anticipated knowledge mobilization events

In addition, one of the standardized questions on the Milestone Report asked CURA research programs to indicate the anticipated number of knowledge mobilization events they would hold, classified by whether they were intended for academic or non-academic audiences. Research programs’ responses are summarized in the following table. Note that some events have been

included in both columns because they were to be aimed at both academic and non-academic audiences. It was not possible to make the distinction based on the information provided.

Table 9. Anticipated number of knowledge mobilization events (n = 15 CURA research programs)

Type of event	# aimed at academic audiences	# aimed at non-academic audiences
Meeting	97	174+*
Conference	59+	95+
Workshop	59+	96+
Symposium	5	10
Congress	8	--
Other: (academic audiences)		
"small events"**	15	
Campus lecture series	4	
Study days	3	
Open classroom course	1	
Other (non-academic audiences)		
Policy roundtables		10+
"small events"		7
Community and travelling expositions		6
Radio/ TV		5+
Language awareness days***		2
Exhibition programs		2
Community roundtables		2
Open classroom course		1
Total number of events	251+	410+

* The figures provided suggested that they were the minimum; the maximum was unspecified.
** These were events described in one Milestone Report as "small events hosted by cluster researchers and partners."
*** These are celebration days intended to promote the use of an indigenous language.

Overall, the 15 CURA research programs indicated that they would hold more than 400 knowledge mobilization events aimed at non-academic audiences, and about 250 events aimed at academic audiences. For both academic and non-academic audiences, the most frequently mentioned knowledge mobilization event was a *meeting*, with approximately 40% of events for both audiences falling into this category.

4.4.3 Knowledge mobilization audiences

Research programs were asked in another standardized question on the Milestone Report to indicate which of 24 audience types would be the main audiences for the CURA research program's knowledge mobilization efforts, and to rank the top three audience types by priority. The responses of the 15 CURA research programs are summarized in the following table. The types of audience are ranked by the frequency with which they were mentioned by CURA research programs. Note that one research program misinterpreted the ranking part of this question, instead giving a rating of 1, 2 or 3 to all 15 of their indicated audience types; this research program has been excluded from the ranking results in the table below.

Table 10. Types of audience for knowledge mobilization efforts (n = 15)

Type of audience	Research programs indicating type of audience (n=15)	# of times ranked #1 (n=14)	# of times ranked #2 (n=14)	# of times ranked #3 (n=14)	# of times ranked in top 3 (n=14)
Academic and other experts	15	1	2	10	13
Students: undergrad – graduate	15				
Community groups	14	4	3		7
Professionals/ practitioners	14	4	2		6
General public	14		1		1
Media	14				
Informed public	13	1	1	2	4
Community leaders	13	2	1		3
Provincial government	13				
Policy-makers	12	2	2	2	6
Non-profit organizations	12				
Decision makers	12				
Learned societies (discipline based)	11				
International research communities	10		1		1
Universities	10				
Federal gov't	10				
Administrators	7		1		1
International organization	6				
Libraries, museums, archives	6				
Municipal government	6				
Private sector	5				
Unions	3				
International intergovernmental body	2				
Foreign government	2				

The most frequently identified audiences were *academics and other experts* and *students*, each mentioned by all 15 research programs. However, it is interesting to note that some types of audience that were mentioned frequently by research programs were only rarely identified as being priorities. For example, students were identified as being audiences by all 15 research programs, the media was identified by 14 research programs and provincial governments by 13; however, none of these audiences were identified as being a 'top three' priority by any research programs. The types of audience that were most frequently identified as being a 'top three' priority (last column in the above table) were *academics and other experts* (13 of 14 research programs which provided rankings), *community groups* (7 research programs), *professionals/ practitioners* (6 research programs) and *policy-makers* (6 research programs).

4.5 CURA research program

A set of questions in the personalized section of the Milestone Report asked research programs to provide details on a number of points related to the operation of the CURA, such as an overview of research activities; team members, their affiliations and their specific research activities; and targeted deliverables with projected delivery dates and expenditures. As this information was very specific to the CURA research programs, it was not practical to analyze this data or determine themes.

4.6 Performance monitoring and evaluation plans and activities

CURA research programs were asked in the final personalized questions on the Milestone Report about their performance monitoring and evaluation plans. Most research programs identified specific performance indicators that would be measured, and these indicators have been classified according to their stage in the overall CURA Logic Model (Kischuk, 2003). The results of this analysis are summarized in the following table. Note that information on performance indicators and evaluation plans was not available for three CURA research programs (in two cases, the Milestone Report referred only to descriptions that had been provided in the original CURA proposal, and in one case, details were not provided in the Milestone Report).

Table 11. Research programs' intentions to measure performance indicators, analyzed by stage of overall CURA logic model (n = 12)

Stage of overall CURA logic model	# of research programs
Outputs	
Training and development occurs	10
Research activities are conducted	9
Community/ university alliances are activated	4
Knowledge mobilization is initiated (audience defined, etc.)	1
Short-term outcomes	
Research outcomes: early reports, etc., increased capacity to attract other funds	9
Training/ development outcomes: e.g., enhanced education & employability	4
University: Enhanced response to community research needs	3
Community: Increased decision-making, problem-solving capacity, increased valuing of research	4
Knowledge mobilization is enabled (audiences ready, etc.)	0
Intermediate-term outcomes	
Dissemination of research findings	10
Knowledge transfer occurs, for development or policy change	6
Enriched research, teaching methods and curricula in universities	4
Improved career outlook for participants	2
Increased community and university capacity to collaborate	1
Long term outcomes	
Improved intervention, action, program delivery and policies regarding social, cultural or economic development	4
Increased Canadian capacity for innovative, responsive research	0

Note that it is possible that some CURA research programs may have had plans to measure performance indicators other than those which were mentioned in their Milestone Reports. For example, some research programs appeared to focus more on their plans to measure short-term or intermediate-term outcomes, but may also have had plans to measure outputs. Also, two stages related to knowledge mobilization (referred to above as *Knowledge mobilization is initiated* and *Knowledge mobilization is enabled*) received relatively little attention in research programs' plans, which focussed more on measuring the actual transfer of knowledge, an intermediate-term outcome.

Notwithstanding the limitations noted above, the table does appear to show some distinct differences among CURA research programs in their relative focus on various aspects of performance monitoring and evaluation plans and activities. Most research programs indicated having plans to monitor the training of students, the conducting of research activities, the early outcomes of research (e.g., number of reports prepared) and the dissemination of research findings (e.g., publication of articles and presentations of findings). Fewer research programs indicated having plans to monitor outcomes related to community/ university capacity building, knowledge transfer, or the impact of training on students.

It should be noted that some of the variation in research programs' orientation to performance monitoring and evaluation activities was related to the variation in the nature of the research programs themselves. For example, for some research programs the measurement of intermediate to long term outcomes such as knowledge transfer (for social, cultural or economic development of communities, or to influence policy) and improved intervention, action, program delivery and policies may be a difficult task, whereas for research programs which worked directly with the end users/ consumers of the research this would have been easier (e.g., one CURA which works directly with teachers to influence their approach to teaching).

However, other variation in research programs' responses does appear to reflect varying orientation to performance monitoring and evaluation activities. For example, most CURA research programs should have had similar capacity to monitor and evaluate university/ community collaboration, or the impact of training on students' education and employability. Some CURA research programs described such plans, while others tended to focus more on assessing the accomplishment of research activities.

Following are examples of the approach of two CURA research programs to performance monitoring and evaluation, taken from their Milestone Reports. Research program 1 shows an emphasis on outputs and provides no indication of measurement or analysis; Research program 2 does indicate some orientation towards the use of indicators and outcome measurement.

Research program 1:
We will measure performance related to both process and impacts across 3 areas:

- *Research activities (e.g., # of publications based on CURA activities);*
- *Partner engagements (e.g., # of formal agreements between partners); and*
- *Training activities (e.g., # of students trained).*

Performance measures will be collected via annual stakeholder survey; focus groups with university faculty, students, consumers; document review; monthly progress reports and database.

Research program 2:
Four types of activities planned:

1) "On the spot" evaluations at activities (e.g. awareness days, workshops);
2) Internal assessments, 2 to 3 times per year, to compare activities underway/ completed with work plans and deliverables. Some indicators: # of projects underway; # of projects successfully completed; whether are fulfilling objectives;
3) Surveys in each community, to be completed Year 1, Year 3 and at end of CURA. To measure [change in community due to work of CURA]; and
4) External assessment at end of Year 2.

Some overall performance indicators (not associated with individual projects); Level of satisfaction expressed by Advisory Committee; Acceptance of papers/ presentations at conferences etc; Completion rate of projects; Usefulness of materials produced for community needs; # students associated with project; Extent to which projects met CURA objectives

While these two research programs used different approaches, both had plans to assess achievement of outputs and outcomes across a variety of stages and streams of the CURA logic model.

4.7 Analysis summary

The foregoing has presented an analysis of results from Milestone and Year 1 reports for this cycle of CURA research programs. The Milestone Reports were broader in scope than the Year 1 reports, asking about research programs' plans in a variety of areas, while the Year 1 reports focussed on partnerships and governance. Some of the questions on the Year 1 report allowed for comparison or updating of information on the Milestone Reports.

The following paragraphs summarize findings from this analysis, grouped according to four themes from the Milestone Report. The first three of these themes are closely related to streams of the CURA logic model/ RMAF, so the following comments also assess progress toward the achievement of CURA's program objectives.

4.7.1 Collaboration between universities and community organizations

The majority of CURA research programs appeared to be successful in adopting a management structure that would facilitate active and substantive involvement of partner organizations in the research program. However, there were a number of research programs that seemed to have a tighter management structure, with little or no input from a steering committee, and appeared to have a lower level of partner involvement in project management as a result.

Two-thirds of the CURA research programs indicated they had written agreements outlining partnership functioning. However, only four of these research programs appeared to have fully developed protocols at the time of the Milestone Report. While some research programs had plans to further develop their agreements, one-third of research programs either had no agreements or terms of reference only, and had no plans to further develop these protocols. This is an area of concern, as it appears from the experience of two research programs that having written agreements can help to prevent conflicts from developing.

About half the research programs that described the nature of their partners' involvement in research indicated that they were taking on higher-level tasks such as setting priorities or leading/ co-leading research projects. Other research programs indicated that partners were involved in tasks such as assisting with data collection, assisting in dissemination of findings, and providing input or advice to the research program.

An area of concern was the fact that most CURA research programs did not seem to be explicitly aware of whether partner organizations' goals were being met by the research programs.

4.7.2 Students' education and employability

The 15 CURA research programs indicated that they planned to involve about 750 students (both paid and unpaid) in a variety of roles – an average of 50 per research program, as well as about 85 other staff, an average of 6 per research program. Research programs mentioned a variety of ways in which they hoped to foster students' sense of belonging – most frequently through involvement in disseminating research, or through direct/ close supervision by mentors. However, while all research programs indicated that students were a target for knowledge mobilization efforts, none indicated that they were one of their top three priority audiences.

4.7.3 Knowledge mobilization

Research programs described a wide variety of knowledge mobilization/ dissemination plans for both academic and non-academic audiences, reflecting the variety of research projects. They indicated they would hold a total of approximately 400 events aimed at non-academic audiences and 250 events aimed at academic audiences.

All but one CURA research program indicated that *academics and other experts* would be one of the top three priority audiences. Other audiences identified as being high priority by research programs were *community groups* (identified by seven research programs), *professionals/ practitioners* (identified by six research programs) and *policy-makers* (identified by six research programs).

4.7.4 Performance monitoring and evaluation

CURA research programs also varied in their intended approaches to performance monitoring and evaluation, with the variation partly depending on the nature of the research programs themselves. However, there also appeared to be some underlying variation in orientation to performance monitoring and evaluation. While most research programs indicated that they would monitor and evaluate the creation and dissemination of research findings, relatively few research programs indicated they had plans in place to monitor and evaluate university/

community collaboration and capacity-building, or the impact of training on students' education and employability.

This analysis of Milestone and Year 1 Reports of this cycle of CURA research programs has resulted in information that will be useful to SSHRC about the CURAs as a whole. However, given the varying ways in which the reports have been completed, it is difficult to compare across research programs. In order to produce a report with this degree of utility, the data collection tools will need to be refined and the amount of information requested weighed against the amount that SSHRC can process in a timely and efficient fashion.

5.0 Quality Assessment

Quality can be defined as the degree to which a product satisfies stated or implied needs (Williams in Mathison, 2004). Further, *Quality Assessment* is a systematic process that can provide confidence that a product is fulfilling the requirements for quality (i.e., meeting stated or implied needs). In the case of the CURA, therefore, a Quality Assessment of program reporting should provide feedback to SSHRC staff about the extent to which they can have confidence in the information reported by the CURA research programs about effectiveness or goal achievement (for both research program and overall CURA goals) and efficiency or the success with which the research grant is being managed.

Two approaches were taken to assess instrument quality. The first was inductive, based on an analysis of the existing tools and the data they elicited, to answer the question, "*How confident can we be in the information we have collected?"* The second approach was deductive, moving from the CURA RMAF and logic model topics to the tools employed to collect specific data. At issue in this case was the concern, "*Are we asking the right questions?"*

5.1 Assessment of CURA tools and data obtained

A CURA Data Collection Quality Assessment Framework was developed which consisted of a number of indicators by which the quality of the data collection instruments could be rated. The indicators were refined in consultation with SSHRC staff and include:

- **Validity:** the extent to which each instrument reflects the concepts it is intended to measure (adapted from Rossi et al, 1999);
- **Reliability:** the extent to which each instrument obtains similar responses on repeated administrations (provided conditions are the same) (adapted from Rossi et al, 1999). Because there have not been repeated administrations of the same tools over time, reliability was broadly interpreted as relating to the consistency of responses across research programs;
- **Relevance**: the extent to which each instrument links to the program logic model and helps to answer overall program objectives and evaluation framework questions;
- **Utility:** the extent to which each instrument produces information that informs relevant audiences at SSHRC and that can have a beneficial impact on program management (adapted from Joint Standards, 1994); and
- **Value/ Worth:** the value or worth of instrument completion in relationship to its purpose (i.e., response burden vs. utility).

The Quality Assessment that was conducted used a simple three-point rating system, consisting of the following indicators:

- **Good:** No major problems;
- **Fair:** Some problems – e.g., some research programs did not provide the information that was being sought; and
- **Poor:** Major problems – e.g., most research programs did not provide the information that being sought, question does not clearly address topic, question does not relate to logic model, question already asked in previous instrument that did not provide additional/ amended information.

The Mid-term Report is as yet untested and therefore is not included in this analysis; however, it is referred to in the following discussion as appropriate, based on its projected use.

5.1.1 Quality assessment of Milestone Report

An assessment of the quality of the Milestone Report, based on the analysis outlined above, was conducted to determine the level of confidence SSHRC staff can have in the information provided by the tool. A straightforward qualitative rating scheme was used (Good, Fair, and Poor) to determine a relative value of each indicator and topic. This analysis yielded the following average ratings (highest possible score=1):

Table 12. Milestone report quality assessment rating

Report topic	Validity	Reliability	Relevance	Utility	Value/ Worth	Overall topic quality
Infrastructure/ project management	.8	.7	.9	.9	.7	.8
Student training/ employment	.9	.8	.9	.9	.6	.8
Knowledge mobilization	.8	.7	.8	.7	.4	.7
Research program	NA	1.0	.7	1.0	1.0	.9
Performance measurement & evaluation	.3	.8	.3	.7	.3	.5
Overall indicator quality	.7	.8	.7	.8	.6	.7

Generally speaking, the Milestone Report does provide useful information and should elicit a moderate degree of confidence in the information provided. However, a number of questions were interpreted variably (e.g., management structure); were not answered consistently (e.g., plans to integrate partners); may not have elicited the information required in the logic model (e.g., integration of team members) or may not have been in the logic model at all (e.g., performance measurement and evaluation plans); may have had limited use for SSHRC staff (e.g., plans to train students); and may have created a reporting burden for the CURAs (e.g., repetition of lists of names and qualifications to illustrate a minor degree of change).

It must be remembered that the Milestone Report is to be completed one month after funding is received, giving the research programs very little time for start-up. In practice, most of the reports were submitted between March and November 2004, one was submitted in May 2005. While the Milestone Report can be an important management tool for SSHRC staff, it could be improved in a number of ways and, as will be outlined below, links to the logic model could be enhanced.

5.1.2 Quality assessment of Year 1 Report

In a similar fashion, the quality of the Year 1 Report was assessed to determine the level of confidence SSHRC staff can have in the information provided by the tool. A straightforward qualitative rating scheme was used (Good, Fair, and Poor) to determine a relative value of each indicator and topic. This analysis yielded the following average ratings (highest possible score=1):

Table 13. Year 1 Report quality assessment rating

Report topic	Validity	Reliability	Relevance	Utility	Value/ worth	Overall topic quality
Governance & partnerships	.7	.7	.9	.9	.4	.7
Overall indicator quality	.7	.7	.9	.9	.4	.7

The Year 1 Report attempts to address an identified risk area in the CURAs, namely governance and partnership management, and again should elicit a moderate degree of confidence in the information provided. However, a number of questions were interpreted variably (e.g., how funds were shared/ administered); were not answered consistently (e.g., involvement of partner organizations in research activities); may not have elicited the

information required in the logic model (e.g., number of partners is not a measure of collaboration); may not meet the information needs of SSHRC staff (e.g., how partner goals will be met by the research program); and may have created a reporting burden for the CURAs (e.g., a number of questions were repetitive of the Milestone Report).

The fact that this report deals only with one particular topic suggests that its continued administration may not be worth the effort, considering the limited amount of new information it provides.

5.2 RMAF topics and related tools

An analysis was also conducted to link RMAF topics with the current tools. Because the data analyzed in this report was at the individual CURA level, only information related to the university and the community partners is included. A time frame has been added to clarify expectation for data availability. While of course every CURA is unique, within the overall funding timeframe, there is an expected flow of program development, as follows:

- Inputs—when funding was received (Year 0);
- Activities—throughout the funded period (Years 0-5);
- Outputs—throughout the funded period but stress on earlier years (Years 1-3, 4&5);
- Short-term Outcomes—later in the funded period (Years 3-5);
- Intermediate-term Outcomes—post CURA (Years 6-10);and
- Long-term Outcomes—not included in this analysis.

The CURA RMAF and Reporting Guidelines and Procedures were reviewed to identify key topics in relation to topics identified in the logic model. Reporting tools were analyzed in relation to this structure and individual tools were keyed to the topics they address. In addition, areas of risk identified in the RMAF were indicated. Finally, based on the Quality Assessment conducted above, areas were highlighted where current data collection has been deemed inadequate.

This analysis revealed some gaps and overlaps in the current reporting system, and also identified some timing issues.

5.2.1 Gaps in logic model and reporting

In tracking linkages through the CURA logic model from input through to outcomes, it appears that there are some gaps. These include:

Inputs:

- Capacity building for both university and community partners—what are SSHRC's expectations in terms of how the partners will support these activities?
- Training and development for both university and community partners—there is an expectation that the CURA research program will provide links to curriculum and instruction but these are not well articulated; there is no indication for community organizations how they will support training and development.

Activities:

- The funded research activity in each CURA is the heart of the evaluation, yet the personalized section of the Milestone Report is so open-ended that any analysis is difficult.
- Expected capacity building activities for both partners, apart from a partnership agreement, are not identified.
- Expected training and development activities for both partners, apart from recruitment, are not identified.
- Performance measurement and evaluation, while expected, is not clearly evident in the logic model except at the SSHRC level.

Outputs:

- The success of the CURA research project is identified as a risk area, yet the personalized Mid-term Report will likely produce results that are similar to those in the Milestone Report, which in their current form are very difficult to analyze.
- The presence/ absence of a written partnership agreement is captured but partnership management involves a great deal more in terms of on-going communication and team building. The information gleaned falls short of many potential partnership issues.
- The ability to identify and respond to community research needs is an important goal yet the question on the Year 1 Report was poorly answered or not answered at all.
- Student training information in relation to the CURA research program could be more clearly described; the actual level of student involvement is not addressed.
- Staff training, skill acquisition and experience through involvement in research activities is not addressed in any tool.
- The types of knowledge mobilization events may have been interpreted in different ways and focused on "events" only, excluding other knowledge mobilization activities.
- The community's ability to enhance their capacity to shape research is poorly elaborated in the Year 1 Report and the information obtained was limited.
- Expectations for performance measurement and evaluation outputs are not clearly delineated and the information provided in the Milestone Report is either poor or non-existent.

Short-term outcomes:

- Conceptual frameworks, methodologies and/ or early research findings reports are not addressed.
- Capacity to attract other funds is not addressed.
- Capacity to respond to community-centered research questions is addressed but may elicit similar information to that in the Milestone Report, already judged to be poor.
- Enhanced education and employability of graduates is not addressed directly.
- Projection of partners' continued involvement in research after the funded project is not addressed.
- Impact of research on curriculum and instruction is addressed in the Mid-term Report but is not clearly explained.
- Reinforced community decision-making capacity is addressed in a cursory fashion in the Mid-term Report.

5.2.2 Overlapping information in logic model and reporting

There are a number of topics that are addressed several times in the CURA tools. While the intent was to track changes over time, the actual amount of new information provided was limited. These include:

Outputs:

- Governance structure—membership, mandate and responsibilities of team members.
- Training and development—student and postdoctoral researcher names and responsibilities.
- Student training activities.
- Staff recruitment—roles and responsibilities.
- Anticipated audiences.

Several of these topics are addressed again in the Annual Financial Report and the Final Research Report.

5.3 Possible solutions

While the analysis of the Milestone and Year 1 Report data has provided some useful information about the CURAs, there are many areas where the evaluation research design

could be improved. The difficulties encountered in analyzing the results also suggest that some changes to the evaluation data collection procedures may be warranted. These comments reflect the particular perspective of the evaluators involved in this report summary project and are advanced for further consideration and input from SSHRC staff.

1. Simplify the logic model

In particular, the CURA logic model, while intrinsically accurate, is too complex in its current configuration. It reflects the expected inputs, activities, outputs and outcomes of three players simultaneously—the overall CURA program at SSHRC; the university researchers, staff and students; and the community partners, staff and participants. It also reflects two levels of functioning simultaneously—the overall CURA program at SSHRC; and the individual funded CURA research program.

Without changing the concepts represented in the CURA logic model in any significant way, it could be broken down into a set of simple, linked logic models, as follows:

- CURA Logic Model 1: Overall CURA logic model reflecting SSHRC's responsibilities;
- CURA Logic Model 2: Generic CURA research program logic model reflecting expected university and community responsibilities; and
- CURA Logic Model 3.1-3.15: Individual CURA research program logic models prepared by each program using a simple standard template.

A standardized template with similar inputs, similar expectations for activities and outputs, and common intermediate and long-term outcomes would help to provide the level of focus required for eventual data collection and roll-up into a report such as this.

2. Develop a Data Collection Matrix and coding system

Currently there is no coding scheme provided to link logic model topics with either the evaluation framework provided in the RMAF or with actual survey questions in the evaluation tools. As a result of this design flaw, the gaps and overlaps identified above emerged. In some cases, either no data is being collected, or survey questions do not address key topics, often in areas where risk has already been identified. In other cases, similar questions are asked several times across instruments but provide a limited return in terms of new information. A Data Collection Matrix with a coding system linked to the simplified logic models would resolve this issue.

3. Simplify the timing and focus of tools

It is not possible to collect information on all the topics of interest to CURA; however, it is essential to focus on the most critical topics. It is suggested that the topics in each data collection tool reflect more closely the developmental level of the individual CURA research programs. For example, if the timeframe outlined above were employed, the following data collection system could be applied:

Table 14. Suggested CURA data collection system and timing

Project development level	RMAF Topics	Timeframe	Tool	Purpose
Planning stage	Proposed research including RMAF inputs	Pre-program	Letter of intent (LOI) full proposal	Defines scope of research program
Start-up stage	Early activities with focus on planning	End of Month 6	Milestone Report including individual CURA logic model & evaluation plan	Confirms that CURA research program has adequate management capacity
Implementation stage	Full project activities and early outputs	End of Month 30	Mid-term Report	Confirms that CURA activities will lead to goal achievement Provides basis for mid-term site visit
Completion stage	Focus on later outputs and short-term outcomes	End of Month 66	Final Research Report with structured account of goal achievement	Confirms completion of research program
Follow-up stage	Focus on intermediate-term outcomes	End of Month 96	Reflection Report with structured feedback on lessons learned & accomplishments	Confirms value of research program in terms of CURA. Program's overall goals

A more targeted and developmentally appropriate approach to data collection should provide data of better quality and more utility for SSHRC. This suggested approach would combine the Milestone and Year 1 Reports and sharpen the focus to start-up activities. The lesson learned from this analysis is that too much information was required too soon in the Milestone Report and not enough in the Year 1 Report producing information of only adequate quality.

The variable nature of reporting, in terms of validity and reliability, suggests that further work in piloting both the CURA tools and their analysis is required. The time lag of a year between the receipt of the Milestone Reports and their subsequent analysis also suggests that their current utility is limited. Further, the Month 1 requirement seems to be too soon in the research program's development to provide much information and it would be more useful to both the individual CURA and to SSHRC to report on project start-up activities rather than start-up plans.

The Mid-term Report should be re-structured to reflect the simplified focus suggested in the above table and should be implemented as soon as possible to support the site visits. Some thought should be given to a structured but personalized addendum to the Final Research Report. Finally, some consideration should be given to the bigger picture through a follow-up requirement. Further discussion is needed to determine both its form and incentives for completion but its value in terms of providing feedback on SSHRC's objectives is clear.