

RESEARCH FILE

**Program Optimization Through Evaluation:  
Tadiso of Pittsburgh Experience**

Literature on drug and alcohol intervention rarely discusses how to use program evaluation findings to continually optimize the intervention system. Recent emphasis by Federal, State, and local funders and program evaluators is on outcome evaluation as part of program accountability for substance abuse treatment facilities. Based primarily on reports by clients, medical records, and urine test results, drug and alcohol treatment facilities are encouraged to conduct evaluation, discuss findings (with major stakeholders), and report back to funding sources. However, relatively few emphasize how to use evaluation findings to continually improve program effectiveness. Certainly, literature is sparse on empirically verified factors identified as critical for improving client satisfaction and treatment outcomes. The drug and alcohol intervention specialists, however, need guidance as to which factors affect quality of services beyond theoretical reviews and discussions—and on how or why such factors affect client satisfaction and intervention outcomes. This article highlights a set of findings that help explain these factors based on suggested measurements in the Government Performance and Results Act (GPRA). The research data were gathered from clients being served by Tadiso, Inc., of Pittsburgh (formerly PBA, Inc.—The Second Step) through research consultation services provided by Excellence Research, Inc., of Pittsburgh.

Tadiso’s annual client satisfaction and program outcome assessments were conducted during February and March of 2000 and 2001, based on a random selection of slightly more than 200 clients each year. The selection method consisted of utilizing a random number table and matching the last two digits of the client’s identification number. Nearly all of the selected clients (more than 97 percent) participated in this study. A majority of this study’s sample group is female (52.2 percent) and white (54 percent). The survey instrument was designed to gather data on clients’ assessments and opinions regarding: (1) service utilization rate and their helpfulness; (2) various staff and management groups; (3) client empowerment; (4) adequacy of services; (5) client respect and sensitivity to race and gender bias; (6) overall service satisfaction; (7) demographic profile; and (8) GPRA-based measurement of service outcome. The overall average reliability rating of the major assessment areas (i.e., client empowerment, service adequacy, client respect/bias, and overall service satisfaction) is at an acceptable level (coefficient alpha = 0.81). This presentation is, however, limited to a review of findings related to critical predictors of client satisfaction and the extent of their relationship to service outcome.

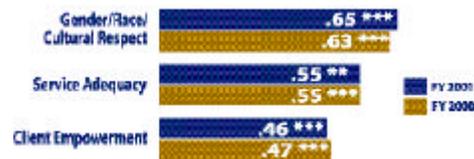
**MAJOR FINDINGS**

**Statistical Association Between Client Satisfaction and Treatment Perspective**

A major finding based on an exploratory analysis is that service satisfaction among Tadiso clients is directly related to the clients’

perceived levels of empowerment, service adequacy, and gender/race/cultural respect. As Chart 1 indicates, overall client satisfaction is significantly related to three major factors (consistently over two-year assessment results). In ascending order of magnitude they are: (1) gender/race and cultural respect, (2) service adequacy, and (3) client empowerment. Thus, Tadiso’s service paradigm, which emphasizes those three major factors, should be continued to maintain client satisfaction.

**Chart 1: Strength of Association Between Overall Client Satisfaction and Treatment Perspective**



(Note: \*\*\* = P<0.001; \*\* = P<0.01; \* = P<0.05)

**Statistical Association Between Client Satisfaction and Specific Services**

Client satisfaction may also relate in varying degree to different Tadiso services. Such an analysis should be conducted for two reasons: (1) services which contribute most to client satisfaction should be maintained by Tadiso at an optimal level; and (2) services with low association with client satisfaction should be analyzed further in reference to their utility and/or ways to strengthen their relevance to client satisfaction. As Chart 2 indicates, the major services contributing to client satisfaction include: methadone treatment (A10), family counseling for relationship building (A7), individual counseling for drug abuse/dependence (A4), and physical health services (A8).

**Strength of Association Between Client Satisfaction and Tadiso Staff Members**

Client satisfaction is also known to relate in varying degree to various staff groups. This information can be helpful for staff development/training efforts within the organization. As Chart 3 indicates, all staff categories were significantly related to overall client satisfaction except administrative personnel (which may be viewed as a distant organizational group by clients). However, staff members’ overall attitude and behavior towards clients may significantly influence client satisfaction.

**Gender, Race and Age Group Comparison**

Although there were some differences in average ratings among gender, racial and age groups on various factors, none of them were statistically significant. Although white clients generally issued somewhat lower ratings on the selected five major factors (i.e., client empowerment, service adequacy, gender/race/cultural respect, staff helpfulness, and overall satisfaction), the actual differences were less than 0.4 units between the highest and