

Where Do We Stand On Standards?

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From the earliest days of the "movement" to learn more about visitors and apply that learning to improve the effectiveness of exhibits, there was an awareness of the need to have guidelines of some kind for the proper conduct of visitor studies. The first meetings in the mid 70s of the group that eventually became the Visitor Research and Evaluation Committee of the American Association of Museums (and later the AAM Committee on Audience Research and Evaluation or CARE), recognized this need and established a committee to make recommendations for such guidelines. It soon became apparent, however, that the field was still too "young" to try to standardize what it was we were doing. There were too many different points of view on just what constituted an effective evaluation study. We could not even agree on the definition of the basic terms that were used to describe such studies. New ideas and methodologies were constantly being proposed, tested, modified and/or discarded. "Standards" seemed to be an incompatible notion with the ferment that characterized these early days.

It was not until 15 years later, in 1989, that the issue was seriously raised again by the CARE committee, and a group was formed (headed by Lois Silverman) to try to codify what it was that constituted quality work and to identify the competencies needed to do such work. Even then, it was recognized that such an effort must not inhibit the growth and development of the field. To this end, three general goal statements were prepared to guide the work of the group:

- 1. The Standards should help to unify the field, but without discouraging innovation and diversity.*
- 2. The Standards should provide a stimulus for discussion and debate, but also provide a current source of documentation of generally accepted practices.*
- 3. The Standards should provide guidance on competencies, roles and responsibilities, not only for those who design and implement visitor studies, but for those who support such work, including the museum community as a whole.*

The resulting document ("Professional Standards for the Practice of Visitor Research and Evaluation in Museums"), was approved by the CARE

membership in 1991 and subsequently published in the September/October 1993 issue of *Museum News*.

Since this document is at present the only one that specifically addresses the issue of standards, it is appropriate to use it as the basis for considering just where we are in this evolving story. I will not take the time to speak to all the areas covered in the CARE document, but will confine my comments to Section II that deals with the competencies we believed to be required by anyone who professes to be qualified to carry out visitor studies. What it says and what it does not say gives us a clear picture of what was considered possible to propose in 1991, and, more importantly, raises the question as to whether or not we should consider saying something else (more, less, different?) in 1995. Five competencies were identified in this document:

1. Know the Relevant Literature. This may seem obvious to anyone coming out of a professional, academic background, but in a field that had (and still has) no formal credentialing, it needed to be explicitly identified as a requirement. The fact is that there are still those who profess to be qualified to conduct visitor studies who are unaware of the rich and valuable literature that has developed over the past 60 years (and one that is relatively accessible thanks to such publications as *Visitor Behavior*, the *ILVS Bibliography*, *Current Trends*, *Proceedings of the Visitor Studies Conference*, etc.).

2. Understand Museum Policies and Practices. There is a school of thought that believes that a "good" evaluator can evaluate anything. The experience of those who have carried out visitor studies suggests otherwise. Those who lack an understanding of the unique culture that constitutes the museum environment will almost certainly find themselves confronted with unexpected obstacles to the successful conduct of an evaluation study. Noted for special attention in the CARE Standards document is the need to understand the complex process by which museum exhibitions are conceived, planned, and executed. While there are some publications and presentations that could be of help in this area (the panel on the *Politics of Evaluation* that was presented at the 1995 AAM convention in Philadelphia comes to mind), this competency is acquired largely through trial and error. Those new to the field would also benefit from a mentoring relationship with an experienced practitioner.

3. Communication Skills. While this is largely a spin-off from the previous item, it was deemed worthy of special mention. We are "the new kid on the block" in the museum setting and our role is often poorly understood (or misunderstood). The ability to articulate and convey clearly to all those involved in any way in the conduct of a study (which can include directors, curators, exhibit designers, and educators) what is being done, why it is being done, how it is being done, as well as how the findings will be of use to the institution, is essential to successful study execution and acceptance.

4. Field Advancement. Since the visitor studies field was (and still is) a relatively new and emerging one, it was felt that those who conduct studies have a special obligation to disseminate to others within and without the field what it is they do through conference presentations and publications of various kinds. This was seen as a kind of advocacy role that would help to promote the increased use of visitor studies and exhibit evaluations throughout the museum world. The VSA conference is, of course, an obvious venue for this kind of dissemination within the field. However, the AAM annual conference is seen as a better way to “get the word out” to those who would not otherwise be aware of the value of this kind of work. Articles in *Curator* and *Museum News* are two other excellent avenues by means of which a wider audience can be reached.

5. Methodological and Analytical Skills. This is the competency that generated the most discussion and debate as the group tried to nail down just what kinds of methodological and analytical skills were necessary to conduct high quality visitor studies. The list was getting longer and longer, and yet no one felt that it was really adequate to reflect the complexity and diversity of the actual work that was being done by practitioners in the field. In what may be regarded as a “cop out,” we decided to defer to the large body of analytic evaluation techniques that had been developed over the years in the social sciences. To quote from the Standards Document:

Those who design and/or conduct visitor studies must possess a working knowledge of social science research design and the related methodological and analytical skills necessary for responsible decision-making and study execution.

Recognizing that this was a very tall order indeed, especially since those working in the social sciences themselves have sharp differences as to what constitutes “responsible decision-making and study execution,” we added the following:

While some may specialize in a particular methodological or theoretical approach, they must also possess sufficient familiarity with alternative methods and approaches so that they can properly assess and represent the “best fit” for any given study issue or problem.

This latter comment was designed to address a tendency on the part of some practitioners to approach all study problems with the same “solution” — e.g., focus groups, factual multiple-choice questionnaire items, “naturalistic” open-ended exit interviews, etc. There was even evolving a false quantitative vs. qualitative dichotomy that was generating more heat than light. We also knew that studies were being carried out without even the most basic attention being given to such critical issues as sample size,

sample selection criteria, or the reliability and validity of the measuring instruments being used. Unsupported generalizations made from the results of small ad hoc studies were (and still are) pervasive. This competency was designed to deal with all of these kinds of issues without getting bogged down in a long and debatable list of particulars.

So much for where we thought we were in 1991 vis-a-vis "standards" (and their supporting competencies). Are we still there today? Has the field changed (matured?) since then so that we need to take a new look at them? Perhaps the very idea of standards has been shown to be premature, of little use, or both. What good are standards without some means to monitor or enforce them? Or some place to learn what they mean and how to apply them? (Which brings up the two very important and very large co-issues of credentialing and professional development.) And finally, the most important question of all for this audience – what role, if any, should Visitor Studies Association play in addressing these issues? I will briefly comment on this last item.

VSA has committed itself to take a look at both professional development and standards by forming two committees on these topics. These are really two sides of the same coin – one has to do with what a qualified visitor studies professional needs to know and know how to do, while the other has to do with where and how one goes about obtaining these skills.

To date, VSA has only scratched the surface in terms of taking action to inform or advance either one of these mandates. This year for the first time, Certificates of Completion were given to those who took workshops at this conference. This is a minor but important first step in giving recognition to our workshops as being a source of professional development. Obviously, much more needs to be done on this front.

On the standards front, that committee has agreed to take a careful look at the CARE Standards document to see if it should be recommended for adoption by VSA (with or without revisions), or whether we should start all over with a new document. They promise to have something for the VSA Board to look at by the time we meet again in 1996 in Denver.

Being a member of the VSA Standards Committee, I do want to mention what I believe is an important point to consider in thinking about the current status and value of the CARE Standards. While VSA has not formally tried to codify what is considered to be the characteristics of quality work and the competencies necessary to carry out such work, it would be hard to ignore the message that is implicitly but unambiguously delivered by what we actually do and what we talk and write about at our meetings and in our workshops. I am speaking primarily about the *methodologies* that we have adopted and developed for the effective application of visitor inputs to the development of exhibitions and programs. For starters, there are the Big Four – Front-end, Formative, Remedial and Summative evaluations. Similarly, by their ubiquitous use we have also decided that

tracking studies are a useful and valid way to collect important information about visitor behavior in completed exhibitions. We also talk repeatedly about effective exhibitions being ones that attract, hold, and communicate their intended messages to their intended audiences, and have developed special ways to collect data relating to these three important characteristics. This list of accepted practices could, of course, be extended.

In short, we have developed through trial and error our own unique collection of approaches and methodologies (and their supporting competencies) quite apart from those typically found in the social sciences (although borrowed heavily from them). Granted that we do not always agree on precisely how each of these elements should be dealt with in a particular situation, but should they not be reflected in a document that purports to represent what it is we do and how we should do it? It is time, I believe, to move away from the generalities of the CARE document and move toward articulating those things that we have found to be useful over the years — that have stood the test of time.