

**Achieving and Measuring
Community Outcomes:
Challenges, Issues, Some Approaches**

April 1999



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Acknowledgements

The following individuals, who are guiding efforts at their respective organizations to achieve and measure community outcomes, shared their lessons learned in a day-long dialogue on the subject in January 1999. The “Key Issues” enumerated in this report surfaced from their discussions. They also contributed the information on “Current Approaches” presented in the report. Even prior to the meeting, their deepening understanding of this subject had shaped the identification of the major challenges involved in demonstrating community impact. We look forward to continued sharing and progress as they and others in the field consider, try, and learn.

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Achieving and Measuring Community Outcomes

Introduction

More than 280 United Ways are working with agencies they fund on program outcome measurement. A far smaller but growing number of United Ways are seeking to expand and measure their impact on the community beyond the independent efforts of individual funded programs. While many United Ways, often working with other community organizations, issue periodic reports on the status of key community indicators, fewer have initiated strategic interventions designed to bring about specific change in targeted community conditions.¹ Those that have undertaken this important mission have quickly recognized the complexity of the effort.

Pursuing a targeted community initiative to effect specific outcomes beyond the program level presents (at least) five major challenges. United Ways that have implemented *program* outcome measurement may confront a sixth challenge as they seek to achieve community outcomes. These challenges are the following.

✓ **Selecting appropriate outcomes to achieve**

As is true for program-level outcomes, community outcomes are not visions or goals, but specific changes or benefits that involved organizations hold themselves accountable for influencing. A key consideration in the selection of intended outcomes is whether it is reasonable to believe the involved organizations actually can achieve or influence them. Selection of intended community outcomes often involves narrowing the focus from a vision or goal to a more specific change or benefit, perhaps focused on particular geographic areas or population groups within the community.

✓ **Developing a strategy for achieving the intended outcomes**

Selecting an intended community change or benefit is only a beginning. Those involved need a sound strategy that details the intermediate outcomes or milestones required to achieve the targeted change. The strategy, which may be expressed as a logic model or theory of change, must take into account the primary factors that create the current condition, as well as influences required to change it.

✓ **Creating and implementing an action plan**

Once a strategy is developed, it must be implemented. The action plan identifies what resources will be mobilized, what actions will be taken, by whom, with whom, and when. Depending on the strategies selected, a wide range of partners may be involved, including government agencies; businesses, civic and voluntary organizations; and health and human service agencies.

¹ For a fuller discussion, see *Community Status Reports and Targeted Community Interventions: Drawing a Distinction*, United Way of America, 1999.

✓ **Identifying indicators of success**

As challenging as the selection of indicators for program outcome may be, identification of indicators for community outcomes and progress toward them usually is even more complex. A frequent problem is that available community indicators often are too broad to track change in the specific outcomes the initiative seeks to influence. Another is the difficulty of identifying indicators related closely enough to the condition of interest that change in the indicators can be taken as a reliable reflection of change in the same direction in the outcome. Further, if the data collected are to be helpful in adjusting the strategy to improve its effectiveness, they must reflect progress not only on the intended outcome, but on key intermediate outcomes and action plan milestones as well.

✓ **Measuring the selected indicators**

The cost and logistics of measuring the indicators depend greatly on which indicators are selected and the availability of already-collected data from other sources. Indeed, data availability may strongly influence the choice of indicators. Even the cost and difficulty of primary data collection vary widely depending on whether technical expertise, technology, and other resources must be purchased or are available through in-kind donations of skills, labor, and equipment. Additionally, the “location” of the outcome or milestone in the logic model or theory of change affects how early and how frequently the related indicators should be measured.

✓ **Linking program outcomes to community outcomes**

For United Ways that have implemented program outcome measurement, it makes sense that outcomes of funded programs should contribute to achievement of community outcomes. But where in the comprehensive action strategy—the community logic model or theory of change—do the efforts of individual programs fit? As United Ways explore this issue, they identify additional questions. For example, where do prevention and human development programs fit, particularly in strategies that are focused on problem remediation? What do we do about programs—perhaps very effective programs—that may relate to United Way’s broader priority areas but not to the focused community outcomes for which United Way is holding itself accountable? How might program-level outcome data be used in the measurement of community-level change?

Struggling with the relationship between program outcomes and community outcomes also makes it clear that achieving community change requires more than funding programs. All areas of United Way activity, including community building, public policy, special initiatives, resource development, and collaborative relationships, as well as a host of traditional and new partners, need to be part of the comprehensive strategy to effect the targeted outcomes to which United Way is committed.²

² For a fuller discussion, see *Community Impact: A New Paradigm Emerging*, United Way of America, 1998.

About This Report

As growing numbers of United Ways accept the challenge of creating community change, seizing the opportunity for real-time learning is crucial. The purpose of this brief report is to use the early learnings of several United Ways to spark a conversation about how communities can achieve and measure change.

In January 1999, representatives of the seven United Ways participating in United Way of America's National Learning Project on Using Program Outcome Data to Create Measurable Change, funded in part by a grant from The Lilly Foundation, were joined by representatives of five other organizations for a day of dialogue about achieving and measuring community outcomes. All of these organizations are working with other community partners to effect and measure the outcomes of interventions that are larger than a program in scope.

At the meeting, working in small groups and as a whole, these individuals identified what they have experienced to be key issues related to five of the six challenges described above. In subsequent weeks, they provided brief descriptions of their organization's current efforts that respond to one or more of the issues attending each challenge.

The next two pages of this report list the six challenges involved in achieving and measuring community outcomes and the key issues the group identified related to those challenges. The following section briefly describes some of the approaches these United Ways are using as they relate to the challenges and issues.

Note that this brief report is not a set of "effective practices," as most of the initiatives described here are in their early stages, their effectiveness as yet untested. This also is not a "state of the field" report, focusing as it does on only 12 organizations. The report does, however, begin to define the challenges United Ways and their partners are encountering in achieving and measuring community outcomes and the ways United Ways are addressing those challenges. Its purpose is to encourage conversations so that communities can ask better questions and exchange ideas about possible answers.

Achieving and Measuring Community Outcomes

Challenges and Issues

Challenge:

Selecting Appropriate Neighborhood-, System-, and/or Community-level Outcomes to Achieve

Key Issues

- Being clear on the ultimate goal—why?
- Picking a manageable number of well-defined outcomes that we can demonstrably impact within a reasonable time frame.
- Choosing outcomes that reflect our values and priorities about what is important.
- Gaining broad community involvement, including key interest groups, to insure buy-in on outcomes that are relevant to the local community.
- Achieving a critical mass of leaders/funders who will work together on achieving improved outcomes.
- Identifying whose outcomes we are measuring, who is responsible for achieving them.

Challenge:

Developing a Logic Model, Theory of Change, or Strategy that Details the Intermediate Outcomes or Milestones Required to Achieve the Longer-term Outcomes

Key Issues

- Transferring the logic model approach from the program level to the community level.
- Assembling the relevant knowledge, including research and practice, to structure the relationships in the logic model.
- Finding key leverage points beyond individual programs.
- Having criteria for establishing the linkages: identifying key relationships, sequencing outcomes.
- Focusing and identifying a manageable scope.
- Keeping the logic model comprehensive but simple and actionable.
- Mapping existing capacity, actions/efforts, resources/assets, and context.

Challenge:

Creating an Action Plan:

Who Will Do What with Whom by When to Implement the Strategy?

(insufficient time during meeting to identify key issues)

Challenge:

Identifying Indicators of Success: What Will Tell Us How We're Doing?

Key Issues

- Selecting valid indicators (just the right number) that are correlated to outcomes, intervention and longer-term outcomes.
- Choosing indicators most relevant to what we want to achieve.
- Selecting indicators that are understandable and convincing to the public/donors.
- Selecting indicators that have data available or are measurable at a reasonable cost.
- Gaining agreement on whose success we are measuring.
- Being able to compromise when an ideal indicator is not available and move ahead anyway.

Challenge:

Measuring Outcome Indicators: How Do We Get the Data?

Key Issues

- Finding measures of intermediate steps toward longer-term outcomes (e.g., community-wide data on skills and knowledge, positive aspirations of youth).
- Obtaining data: expensive, major effort, not routinely collected. We won't measure every year. What do we say in non-data collection years?
- Developing a convincing story as the results emerge until we have real/anticipated results.
- Sustaining interest. We can't wait until we get it perfect.
- Leveraging the fact that people are willing to pay for data.
- Communicating United Way's role in community outcomes: Can United Way reasonably be held accountable? What does United Way do to impact these community indicators?

Challenge:

Linking Program Outcomes to Neighborhood-, System-, or Community-level Outcomes

Key Issues

- Recognizing that the factors that will improve most community-level outcomes are complex and multiple; we cannot rely just on programs.
- Valuing equally all outcomes (short-term and long-term) that contribute to the community outcome.
- Finding/prompting quality, accessible research that validates linkages.
- Improving program/agency coordination.
- Using outcome information in funding: If we are using program information to improve programs (vs. to achieve "good" outcomes), how can we make the leap to claiming community impact?
- Deciding whether to shift resources among programs (political will).

Achieving and Measuring Community Outcomes

Some Current Approaches to the Challenges

Challenge:

Selecting Appropriate Neighborhood-, System-, and/or Community-level Outcomes to Achieve

Key Issues

- Being clear on the ultimate goal—why?
- Picking a manageable number of well-defined outcomes that we can demonstrably impact within a reasonable time frame.
- Choosing outcomes that reflect our values and priorities about what is important.
- Gaining broad community involvement, including key interest groups, to insure buy-in on outcomes that are relevant to the local community.
- Achieving a critical mass of leaders/funders who will work together on achieving improved outcomes.
- Identifying whose outcomes we are measuring, who is responsible for achieving them.

→ United Way of Asheville and Buncombe County; Asheville, North Carolina

For the United Way of Asheville and Buncombe County, selecting outcomes beyond those of the programs we fund involves decisions about United Way's values and priorities, and about the ultimate goal of such a selection. Why is this United Way directing resources or attention to this set of outcomes? What do we hope to accomplish as an organization by participating in such a targeted approach? A strong strategic planning process and a functional plan focus the attention of our organization.

The best example for our United Way is found in the work of Children First. It began with a community-wide conference on children, which produced some specific recommendations. At the same time, a committee of United Way board members was grappling with the question of whether there was a *single* issue on which we could focus our efforts. The committee began with an examination of previously stated United Way positions: the most recent needs assessment report; the resulting priorities for United Way funding; the current strategic plan; and the key strategies, values, and mission statement described in the plan. After examining these elements, the volunteers proposed to the Board of Directors that United Way make a 20-year commitment to children. They were able to align their recommendation with our funding priorities, our values, our current strategic and annual plans, and most importantly, with our mission. Therefore, the Board was willing to take such a position.

→ United Way of Metropolitan Atlanta; Atlanta, Georgia

Our mission is to measurably improve the human condition in our community. Our board has made a commitment to make measurable progress in our outcome areas. The promise to identify indicators of progress toward these outcome areas, develop numeric measures to monitor them and set targets for future achievement is a key component of our strategic direction and has been communicated to corporate and community leaders.

United Way conducted a survey to determine the most pressing community issues that people thought we should address. The one-page survey listed 50 issues. Respondents rated each on its importance for United Way to address. Company employees, CEO's, agency directors, agency board members, agency clients, UW volunteers, and other community leaders received the survey. Over 32,000 surveys were returned. The top-rated issue across all respondent groups was "reducing neighborhood crime and violence." Similar types of constituents then were asked about the specific types of work United Way could do to reduce neighborhood crime and violence. This resulted in four outcome areas that were approved by the board.

Next, a small Task Force of three corporate volunteers worked with United Way staff on a dedicated basis for four months to identify a manageable number of attainable results within each outcome area. They reviewed outcomes of currently funded programs, benchmarks of other community planners and funders, and national research on effective approaches, and held forums with parents, young people, agency staff, United Way staff and volunteers. A total of 250 possible results³ were identified. The criteria used to select the thirteen final outcomes were:

- UW can credibly make a difference on the outcome
- UW has energy and vision toward the outcome
- Achievement represents outcomes beyond single agency programs
- A considerable number of people are affected by the outcome
- The outcome would have a significant effect upon the related outcome area
- The outcome is compelling and relevant to donors
- The outcome represents cumulative, longer-term results of the outcomes of individual investments
- The outcome has a research-based relationship to reducing crime and violence
- UW has a unique opportunity to affect the outcome.

We have stated that United Way will be accountable for measurable progress on the thirteen outcomes we have selected. This does not mean that they will be achieved or measured solely through funding agency programs. We will measure progress at the community level. We believe that via partnerships with other community groups we can leverage public policy, corporate support, other funders, public opinion, and other opportunities in addition to funding agencies to create measurable change on the outcomes. Our position is that we are accountable for leveraging resources to affect the outcomes; we do not proclaim to be able to do it all by ourselves.

³ Atlanta calls these attainable results "indicators." In this report, they are called "outcomes," and the term "indicators" is used to refer to the community characteristics that are measured to determine progress toward selected outcomes.

→ United Way of Santa Cruz County; Capitola, California

We use multiple techniques with different stakeholder groups to get broad community involvement. Our Community Assessment Project (CAP) leadership structure is broad based but is very respectful of the leaders' time. It holds just a few 90-minute meetings a year to guide the project. The action initiatives involve people who can give more time. The Steering Committee is composed of leaders from every major sector: education, health, business, etc. There is strong Latino leadership. The technical advisory committees included 650 volunteers in the first year; currently about 250 volunteers participate actively. For youth involvement the first year, we conducted a youth survey and children's photo contest of what was "good" and "bad" about the child photographer's life in Santa Cruz County. We interviewed people on the street and in a random-digit dial phone survey.

To assure that selected outcomes reflected community values and priorities, we spent a great deal of time early in the process defining what "quality of life" meant to all our participants. After gathering data and selecting indicators, the Steering Committee and all 650 people involved in the Technical Advisory Committees selected two community goals for each of five areas of study. Specific objectives identify the amount of change sought, the timeframe, and the indicator to be used in measuring the outcome. For example, a community goal related to health is "To reduce youth alcohol and other drug use to the national average by the Year 2003 as measured by the biannual American Drug and Alcohol Survey of middle school and high school students." The Steering Committee and Technical Advisory Committees made sure that the indicators we had selected would tell us if we were reaching the community goals.

→ United Way of Franklin County; Columbus, Ohio

Our United Way initiated a multi-year process that included six distinct steps (or events) for identifying appropriate neighborhood-, system-, and/or community-level outcomes. Our goal was to define a small number of time-limited and measurable results for the local United Way system. The process started in 1992 with a survey of more than 200 community leaders. The purpose of the survey was to define community needs and United Way's role in addressing those needs. The second major step occurred in 1993. The United Way Board completed a "Strategic Vision" to guide the organization. The Strategic Vision defined critical need areas (broad interest areas that included education, employment, health, housing, race relations and safety) and committed United Way to measurably improving conditions in Franklin County.

The third major step occurred in 1994. More than 100 community members met in a day-long session to define United Way's role in addressing issues related to critical need areas more precisely. The meeting produced 12 goal statements. For example, "reducing the leading causes of death and disability in Franklin County" is a goal statement in the health critical need area. The fourth major step occurred in 1996. Staff convened a series of focus groups to develop detailed definitions of goal statements. This included defining terms (e.g., "leading causes of death and disability in Franklin County") and target populations for each goal statement. However, most allocation volunteers still felt that goals were vague and difficult to measure.

The fifth major step was initiated later in 1996. A board-level committee developed more specific objectives based on goal statements. Ideally, volunteers were to define objectives in terms of six elements:

- intent
- target population
- geographic target
- success measure
- magnitude of change to be produced
- time frame necessary to produce desired change

Volunteers defined eight objectives (intended outcomes) for the United Way system. For example, “reducing the use of tobacco among 6th to 12th graders in Franklin County from 22 percent to 17 percent over the next five years as measured by a regular school-based survey” is an objective related to the goal of reducing leading causes of death and disability. Finally, in 1997, volunteers created Vision Councils for each critical need area to manage community efforts to achieve goals and objectives.

→ United Way of the Greater Dayton Area; Dayton, Ohio

In 1997, UWGDA participated with Family and Children First Councils in the three counties we serve to achieve broad community consensus on “preferred community outcomes.” With these community outcomes in place, UWGDA’s Outcome Teams began to narrow our focus in 1998. It was a start to narrowing focus—not a complete solution. The teams were charged with identifying three “Impact Areas” within each of seven broad Outcome Areas. For example, for the broad Outcome Area of “Stable Families,” the Impact Areas are “Life Skills” and “Crisis Intervention.”

There is a specific outcome statement for each impact area. Each Outcome Team individually heard panels of selected community people present their major issues/concerns over the course of several months. Then, in one or two sessions, each team boiled the material down into key priority areas. United Way’s board determined that UWGDA should remain a force in all seven areas, but focus on specific impacts within those broad areas.

→ United Way of Greater Milwaukee; Milwaukee, Wisconsin

We went through a community vision process. Beginning with United Way volunteers, each impact area identified a vision statement describing how the community would look if outcomes in a particular area were achieved. These long lists were reviewed for overlap and reduced to a smaller, more manageable number (20). From here, donors, agency staff and participants, volunteers, and other funders attended six community vision sessions. We asked participants to identify those visions that were most important and appropriate for United Way to focus on. Five key visions with overlap in the impact areas were identified. Funders from foundations, the city, and the county are members of our Outcomes Advisory Committee, which was involved in identifying common outcomes and areas of focus.

After our five key visions were identified, each funded program was asked to identify the impact area and vision(s) their program outcomes are intended to address. To begin the process with a manageable effort, we picked a priority impact area with a head start to pilot and model our approach. Within the priority area of Strong Families, we focused on a priority vision (“people are healthy”) and identified a subset of programs that had already done a good job of articulating the relationship between their program outcomes and what they contribute to the vision and impact area. This smaller subset of important programs, with a strong alignment of identified outcomes, will help us focus our efforts and provide a model as we proceed with other areas.

→ United Way of Minneapolis Area; Minneapolis, Minnesota

In developing our community visions and results, we held hundreds of focus groups (which we called Community Concerns Meetings) to get input from a hugely diverse range of people in terms of age, race, educational background, and living circumstances. Input was obtained from PTA groups, youth, seniors, immigrants, homeless people, people with disabilities, nursing home residents, and prison inmates, to name just a few of the groups. Information gathered in these focus groups was used to shape the community visions and results we are striving to achieve.

Every three years, our Vision Councils review and revise their strategic plans. As part of this process, they consider current community demographics and trends, recent research, and current United Way activities. They then identify a reasonable number of priority areas that United Way should address within that vision area. Criteria used in determining priority areas include:

- it is a broad need or a newly emerging need that no one currently is addressing, and
- it is a need United Way can address effectively.

→ United Way for the Greater New Orleans Area; New Orleans, Louisiana

United Way for the Greater New Orleans Area established six goal areas and agreed upon a vision of success for each. The vision provides strategic direction for the allocation of resources in that area. For five of the goal areas, we have developed logic models or theories of change made up of sequences of outcomes focused on the goal area's vision. We are working on the sixth goal area.

Committees comprised of volunteers and program representatives from each goal area met to identify outcomes (“benchmarks”) for the United Way system that are in line with the vision and logic model for their respective area. These system-level outcomes represent what will be true for clients of United Way-funded programs if the United Way system is being successful in contributing to achievement of the vision. For example, in the Successful Children goal area, a system-level outcome is “children will be ready to learn when they start school.”

After the committees drafted system-level outcomes, they were validated against public opinion through a telephone survey of the general public. Respondents were asked whether each item was an important indicator of success in achieving the community vision. The committees used survey findings as a key factor in the final selection of system-level outcomes. Targets then were set for the system's level of achievement on each outcome for three and five years.

Selecting Outcomes

In developing strategic plans for goal area priorities, we involved hundreds of volunteers, agency and community representatives, and other stakeholders. Meta-Planning is the technique that enabled us to gather and process a high volume of information in a short amount of time and promoted ownership of the resulting categories and priorities by all participants. Through Meta-Planning, participants provide brief written answers to focused questions related to the topic. Responses are posted and sorted into categories, which the group then prioritizes.

United Way also has played a key role in mobilizing a critical mass of funders to work together on achieving improved community-level outcomes. It is a member of an alliance of the major funders of social services in the city. United Way has been a leader in encouraging members to pool resources to fund umbrella organizations in the areas of homelessness and children's issues. These new organizations have been successful at coordinating efforts in their respective arenas.

UNITY for the Homeless is an especially good model for comprehensive and cooperative action. Through a community strategic planning process, the publicity generated during the planning, and having a vested, up-front financial interest in the outcome of the process, a collaborative of funders gave UNITY for the Homeless a three-year chance to generate substantial new dollars to fund services that move homeless persons toward self-sufficiency. The effort was successful, bringing millions of new dollars into the area targeted at the homeless.

Challenge:**Developing a Logic Model, Theory of Change, or Strategy that Details the Intermediate Outcomes or Milestones Required to Achieve the Longer-term Outcomes**

Key Issues

- Transferring the logic model approach from the program level to the community level.
- Assembling the relevant knowledge, including research and practice, to structure the relationships in the logic model.
- Finding key leverage points beyond individual programs.
- Having criteria for establishing the linkages: identifying key relationships, sequencing outcomes.
- Focusing and identifying a manageable scope.
- Keeping the logic model comprehensive but simple and actionable.
- Mapping existing capacity, actions/efforts, resources/assets, and context.

→ United Way of Metropolitan Atlanta

Because we cover a thirteen-county area, it is important that we maintain a regional perspective. We will recruit regional Strategy Councils to bring together partners interested in affecting selected outcomes. The Strategy Councils will identify resources and opportunities for United Way at a macro level. They also will help us develop input tools and information to be used by each of our county committees to share and gather information about the local nature of the issue and to develop local approaches. Currently, we are forming a Childcare Coalition to begin this process for our first outcome. We anticipate staging these in over time, with Strategy Councils perhaps covering multiple outcomes where there is opportunity for synergy.

We have a neighborhood initiative called the Individual Development Account program (IDA). In this program, we match individuals' savings toward a down-payment on a home at a 4:1 ratio. Participants must complete economic literacy and home ownership courses to be eligible. They also must agree to purchase their homes in one of five targeted neighborhoods. We have a logic model for this program that extends the theory from changes in individual behaviors and conditions (e.g., if they learn financial management techniques, then they buy a home, then they participate in neighborhood activities, then they maintain or improve their home) to neighborhood conditions (e.g., if home ownership rates increase beyond the number of IDA participants, then new businesses are established, then neighborhood appearance improves, then crime is reduced). Program partners from the neighborhoods participated in designing the logic model. We are implementing an evaluation to assess these outcomes over a three-year period.

→ United Way of Santa Cruz County

United Way of Santa Cruz County and the County Alcohol and Drug Program convened community leaders to create the Together for Youth/Unidos Para Nuestros Jovenes community collabo

rative. The group developed a comprehensive prevention plan to reduce youth alcohol and other drug use. The plan is based in part on research regarding prevention programming that identifies seven components of effective community campaigns to change adolescent substance abuse (e.g., increase knowledge, build skills and competencies, change social policies and norms, enforce regulations). The design of each component was guided by research regarding risk and protective factors. The collaborative identified risk factors of greatest concern for the youth in Santa Cruz County, then gained input from concerned parents and others regarding promising approaches to reducing those risk factors in ways that promote resilience.

The result is a 3-phase program that defines strategies and/or activities within each of the seven components. For example, strategies for changing social policies and norms include discouraging retail sales and promotion of wine and liquor and discouraging alcohol and tobacco industry sponsorship of community events. For each component, the plan describes the target population, the risk and protective factors addressed, specific strategies/activities, the agencies and organizations involved in implementing each strategy, and how the strategies will be linked to those in other components.

→ United Way of Franklin County

In Franklin County we use a concept called a “hierarchy of results” to define logic models related to community goals. Our hierarchy of results is composed of three levels of interventions and results. *Community goals* are broad statements reflecting local human services priorities. *System objectives* are highly specific and measurable and are intended to reflect the accountability of the United Way system. *Program outcomes* reflect accountabilities of individual programs. In theory, achievement of multiple program outcomes leads to a system objective and achievement of multiple system objectives leads to a community goal. A community logic model of sorts is created when these elements are displayed graphically.

Community structures referred to as “Vision Councils” manage United Way's investment in efforts to achieve community goals and objectives. Vision Councils consist of 25 to 30 representatives of the community who were purposively selected because of their expertise. Vision Council members are charged with actively participating in United Way's effort to identify and achieve key results necessary to address the community's most critical human services needs. Over the last two years, Vision Councils met once a month (sub-committees met additional times) to discuss critical community issues, allocate United Way resources, define community needs, and identify opportunities to intervene effectively in critical community problems. Most recently, Vision Councils have defined strategies for each objective. For example, strategies for the objectives of reducing tobacco use among youth include a media campaign and policy initiatives.

→ United Way of the Greater Dayton Area

The Montgomery County Family & Children First Council has produced a resource map for county services in six outcome areas. Programs are divided into three categories: prevention, early intervention/prevention, and intervention. The “map” includes all funding sources from federal, state and local government and the United Way. An asset map is the next task.

→ United Way of Central Indiana; Indianapolis, Indiana

The switch from traditional allocation panels to Impact Councils combines planning and allocation into the work of a single team within a broadly defined focus area. Each Impact Council is charged with generating a comprehensive strategy including funding, public policy, and brokering or partnership relationships with other decision-making bodies in the region. We also will form county-based councils to give other counties in the region more decision-making authority over resources from campaign efforts in their own county.

Our community assessment identifies both assets and gaps in the system's ability to achieve desired community outcomes. This "macro" look can be supplemented by more "micro" follow-along analyses to describe the existing structure of service delivery—both strengths and weaknesses. We will keep updating the analyses of specific issues as strategy formulation takes place and attach these additional analyses to the original research in the form of a hyper-text document. This ongoing analysis will serve as a rich bed of analyses to support strategy formulation.

By constructing a well-defined set of strategies based on the needs and assets identified in the community assessment, each Impact Council will be able to focus attention on leverage points with a higher likelihood of achieving community impact.

→ United Way of Greater Milwaukee

We secured the assistance of graduate student interns from the University of Wisconsin—Milwaukee to do a review of the literature that links promising program activities and the desired community outcomes. These “discussion pieces” focus on a key impact area (Strong Families) and vision (“people are healthy”) and are used to inform volunteers, agencies, and United Way staff in this area.

Funded programs that had articulated the relationship between their program outcomes and our “people are healthy” community vision and Strong Families impact area formed a pilot group for our effort. Each of these programs had an individual-level program outcome model. They met together to see what components of their models fit together and which had a long-term impact on the community.

→ United Way for the Greater New Orleans Area

To date, we have developed a logic model describing the sequence of outcomes required to achieve the community vision for five of six goal areas. System-level outcomes describe what will be true for clients of United Way-funded programs if the United Way system is contributing to achievement of the vision. Programs participated in development of the logic models and identification of system-level outcomes. Achievement of the system outcomes depends on program outcome achievement.

Early in the process, programs were classified in one of the goal areas based on how their services and program goals matched the goal area vision. Programs then chose outcomes from their goal area's logic model that were pertinent to their own program goals, fundamental to their

success, and manageable to measure and report on. In this way program and initiative efforts are tied directly to the community visions. To do this, program representatives and volunteers met jointly to discuss the goal area logic models and programs' relationship to them. In the process, they developed an understanding of how individual programs could work together as a system focusing on a series of outcomes in the logic model. The measurement of their success will be evident as progress is tracked toward the three- and five-year targets.

→ United Way of Greater Rochester; Rochester, New York

United Way of Greater Rochester orchestrated a process by which the community identified, and all key stakeholders adopted, a common set of community-wide outcomes, indicators and measures for each of five impact areas. To move this community agenda forward, United Way convenes and staffs a team of high-level representatives from county government, city government, the city school district, and three local foundations. The team is chaired by the chair of United Way's Planning and Priorities Committee, a bank executive. The team's first task was to commission a local research consultant to produce a community profile providing baseline data on all of the community-wide outcomes, indicators and measures, in addition to some analysis.

The group plans as a critical next step to select a small number of measures and develop a model for jointly setting and achieving community targets. All players are committed to addressing the selected areas together, using resources from the various funding sources represented. At this point (4/99), the profile has just been completed and the team is establishing criteria for selecting measures with which we will pilot the joint community target-setting model, incorporating specific impact strategies. The hope is that if we can show that the model works well, this pilot approach will be expanded to other community measures.

In a separate initiative involving a strategy to achieve community outcomes, in 1992 United Way of Greater Rochester shifted \$1 million annually to a collaborative approach to improving early childhood outcomes among inner-city children. Through a competitive selection process, the Rochester Early Enhancement Program (REEP), a new 16-member collaborative, was born. Key to the initiative's success were:

- focusing on two particularly needy sections of the city
- inclusion in the collaborative of the most key players (early childhood providers, parenting programs, the city school district, the county health department's Community Health Worker program, etc.)
- establishment of a lead agency connected with the University of Rochester that had both community experience and a strong research base
- involvement of parents through a parent advisory board
- development of a continuum of comprehensive services

Cooperatively developed strategies for improving early childhood outcomes included:

- increased rate of healthy births
- improved parental self-esteem
- more age-appropriate parental expectations of their children

Developing a Strategy

- improved cognitive, language, and fine- and gross-motor skills for children, over and above developmental norms, leading to greater school readiness
- improved social and emotional adjustment for children

The collaborative began to offer and measure the impact of its newly coordinated services, based on best practices and community-wide strategies in 1994. As one example of the results: In REEP's 1995/96 program year, 95% of babies born to participants in REEP's prenatal programs were born healthy (over 2500 grams). This compares with a 90% average for all Rochester babies. The economic benefit of a healthy birth was calculated at \$5,135 per mother.

→ Other Organization

Independent of United Way efforts, the Family Service Association in Dayton, Ohio, has adopted a model developed by the Consensus Organizing Institute in Boston to empower residents of low-income communities to develop and accomplish a community-driven agenda. Instead of taking power from those who have it, consensus organizing builds new relationships in which power is shared for mutual benefit. It requires sustained commitment and a multi-faceted approach and relies heavily on the skills of a trained Consensus Community Organizer who listens, generates honesty and sincerity, is analytical and strategic, persistent and disciplined, and able to broker relationships among diverse people and groups. The organizer also identifies and recruits resources as needed and available. The COI model has been so successful that the key implementer of the Dayton program has been recruited to mentor community development with Family Service Associations nationally.

Challenge:

Creating an Action Plan:

Who Will Do What with Whom by When to Implement the Strategy?

(insufficient time during meeting to identify key issues)

→ United Way of Santa Cruz County

Our action plan identifies who will take public responsibility for what piece of plan achievement. We asked for “champions” to lead various community initiatives to achieve the community goals. We did plans that identified what needed to happen and who (person or organization) would take what piece of the work.

→ United Way of Central Indiana

Agencies will be at the table in community strategy formulation. We will not only get their expertise but they will be able to anticipate shifts in their programming to fit into the collaborative strategies developed by the Impact Councils.

→ United Way of the Greater Milwaukee Area

United Way staff and volunteers helped to create a broad community vision. From a list of 20 vision statements, the community vision process identified five visions considered to be “most appropriate” for United Way to pursue. Each funded agency then declared the impact area and vision statement to which their outcomes contribute in order to further define niches, overlap, and unmet needs.

Challenge:

Identifying Indicators of Success: What Will Tell Us How We're Doing?

Key Issues

- Selecting valid indicators (just the right number) that are correlated to outcomes, intervention and longer-term outcomes.
- Choosing indicators most relevant to what we want to achieve.
- Selecting indicators that are understandable and convincing to the public/donors.
- Selecting indicators that have data available or are measurable at a reasonable cost.
- Gaining agreement on whose success we are measuring.
- Being able to compromise when an ideal indicator is not available and move ahead anyway.

→ United Way of Santa Cruz County

Three strategies related to the selection of indicators that we have used are:

- Identify criteria to review common indicators used elsewhere. We assess such indicators on five selection criteria—
 - understandability
 - responsiveness
 - policy relevance
 - representativeness
 - comparabilityand three research criteria—
 - validity
 - availability and timeliness
 - stability and reliability.
- Select a proxy indicator. For example, we used measures of anemia and children's height and weight as an indicator on nutrition and hunger.
- Cluster 3 or more indicators. We often cluster hard data (secondary source data) with qualitative (primary) data from a community survey to get our measures. An example is clustering crime rates from the FBI Index with community-survey data on the public's perception of safety in the home, neighborhood, school, and community.

→ United Way of Central Indiana

We have adopted the Health Forum's Outcomes Toolkit as means to facilitate cooperation with other decision-making bodies in the region. The software in the Toolkit permits representation of stand-alone projects as well as community-wide initiatives with text and indicator data in a

"Windows Explorer"-like multi-level tree structure. Other owners of the Toolkit can track progress of our strategies and we theirs through a replication process via a central server. The Toolkit contains a considerable array of technical assistance data on the development of indicators, and web sites containing technical assistance. Beyond the resources in the Toolkit itself is the discussion fostered as multiple decision-making organizations meet to describe the relationship of their own work to community-wide initiatives.

→ United Way of Greater Milwaukee

A review of other efforts yielded a master list of approximately 150 indicators for our Strong Families impact area. We instituted a process of reducing the list to a manageable number of meaningful indicators (20). These indicators were then brought to a variety of stakeholders (donors, service providers, consumers, other funders, United Way volunteers, etc.) via focus groups, surveys, and other means. Participants were asked to identify which indicators would provide the most convincing evidence that United Way is making a difference with our investments in Strong Families. This produced a key "wish list" of understandable and convincing indicators.

→ United Way of Minneapolis Area

The Planning and Research Volunteer Committee identified community indicators. The committee includes researchers who are familiar with the data that are available in a variety of areas. Criteria used for selecting indicators included availability, frequency, validity, reliability, and a clear link between the outcome and the indicator.

In our publication (*Community Currents*) that provides benchmark data for all our visions and results), we include a "wish list" of indicators. These are the indicators that we feel would best indicate whether we are achieving our desired community outcomes, but data for them are not currently available, or the data available are problematic.

→ United Way for the Greater New Orleans Area

United Way volunteers and representatives of similar programs met jointly to link program-level outcomes to outcomes in the goal area's logic model. From their respective goal area's logic model or theory of change, programs chose the outcomes with which their own outcomes align. During the process, programs selected outcomes first, independent of measurement issues, so that limitations in measurement technology would not constrain choices of outcomes.

The next steps were to develop indicators for those outcomes and identify measurement tools. The presence of representatives from similar programs resulted in cross-fertilization of ideas concerning what is measurable and the technology for how to measure it. Even though an ideal indicator was not always available, programs chose indicators that were most appropriate to their particular goals and activities. During the discussions, it sometimes was found that one program had an instrument that could measure an outcome another program had found unmeasurable.

→ **United Way of Greater Rochester**

United Way's Planning and Priorities committee, working with two different consultants, convened providers, United Way volunteers and other funders for both input and feedback on the identification of community-wide indicators and measures across five areas of impact. The selection criteria for indicators and measures to be adopted and tracked over time were:

- practical value of measure
- feasible to obtain and manipulate
- low or no additional cost
- available regularly
- available on a timely basis
- able to be benchmarked with other communities
- gives a city/suburban breakdown
- not sensitive to fluctuations

A long list of possible measures were tested against these criteria, and only those that met them were selected.

→ **Other Organization**

The Montgomery County (Dayton, Ohio) Family and Children First Council conducted a process over the course of two years that selected six broad outcome areas and possible indicators. They then formed an Accountability Task Force of knowledgeable people who understand something about service fields, evaluation techniques, and data, and staffed it with an experienced researcher. The task force was charged with reviewing and testing the feasibility of the identified indicators. Key criteria were:

- relevance to the outcome
- availability of reliable data
- timeliness of the reporting methods

Many proposed indicators were ambiguous: it was not clear whether they measured positive outcomes or merely changes in reporting systems, management philosophies, or whims of individuals. As a result, many indicators were dropped, some were modified, and others were added. A list of accepted indicators and targets was published earlier this year, along with a list of additional "wished for" indicators for which data collection currently does not exist. In addition, there is a list of indicators that are being monitored but for which the results will not be published. (Child abuse reports is an example. Does an increase mean there is more child abuse, or more people reporting? Perhaps an increase is a "good" outcome indicating greater awareness.)

Challenge:**Measuring Outcome Indicators: How Do We Get the Data?**

Key Issues

- Finding measures of intermediate steps toward longer-term outcomes (e.g., community-wide data on skills and knowledge, positive aspirations of youth).
- Obtaining data: expensive, major effort, not routinely collected. We won't measure every year. What do we say in non-data collection years?
- Developing a convincing story as the results emerge until we have real/anticipated results.
- Sustaining interest. We can't wait until we get it perfect.
- Leveraging the fact that people are willing to pay for data.
- Communicating United Way's role in community outcomes: Can United Way reasonably be held accountable? What does United Way do to impact these community indicators?

→ United Way of Santa Cruz County

For indicators that are not measured and reported elsewhere, our annual community survey provides data on public perception regarding the indicators.

→ United Way for the Greater New Orleans Area

Programs chose program-level outcomes from each goal area's logic model and identified their own indicators for the outcomes. These outcomes contribute to United Way's system-level outcomes. For example, for the Successful Children goal area, one system-level outcome is "children are ready to learn when they start school." A contributing, or intermediate, program-level outcome is "children have enhanced emotional, social, language, cognitive, and physical development." Eleven programs within the goal area have identified this as an outcome of their services. Among them, they use 14 different indicators to measure their performance on the outcome, based on differences in the ages and characteristics of their participants and the missions of their programs.

Because the program-level indicators are aligned with the goal area's logic model and system-level outcome, we can aggregate program-level performance to measure progress toward the system-level outcome. That is, we aggregate outcome performance across all programs in the goal area having the same outcome to report the combined number and percentage of program clients who achieved the outcome. We recognize that we are aggregating data collected by different measures, but so long as we have confidence in the validity of the indicator and measurement tools, we believe that this approach gives a useful picture of system-wide movement toward our desired outcomes. It also recognizes and supports the fact that different programs—even those having the same outcome—legitimately need to use different indicators of success.

Challenge:**Linking Program Outcomes to Neighborhood-, System-, or Community-level Outcomes**

Key Issues

- Recognizing that the factors that will improve most community-level outcomes are complex and multiple; we cannot rely just on programs.
- Valuing equally all outcomes (short-term and long-term) that contribute to the community outcome.
- Finding/prompting quality, accessible research that validates linkages.
- Improving program/agency coordination.
- Using outcome information in funding: If we are using program information to improve programs (vs. to achieve “good” outcomes), how can we make the leap to claiming community impact?
- Deciding whether to shift resources among programs (political will).

→ United Way of Metropolitan Atlanta

This is our first year of making investments since having our thirteen outcomes approved by the board. For FY 1999-2000, any 501(c)(3) organization in the community can apply for funding or for "nonfinancial" investments such as in-kind gifts, technical assistance, public policy advocacy or volunteers. The Request for Proposal package asks all applicants to align their program with one of our outcomes. Those that do not align can be considered under a category of "community basics," although there will be fewer new dollars available in that category. Applicants receive the highest number of points in the review process for the strength of their alignment with an outcome and for the quality of their program outcome measurement. This is our first step in consolidating effort toward achievement of the outcomes.

→ United Way of the Greater Dayton Area

UWGDA's focus on specific impacts has made the proposal process for 2000 program funding much more specific. In addition to requiring programs to identify the community impact to which they contribute, a page of "parameter" statements addresses other key criteria for funded programs, such as:

- Demonstrated knowledge of community need, other providers, related services
- Articulation of agency's "market niche"
- Evidence of cooperation and collaboration
- Evidence services to individuals are coordinated with services for other family members (as appropriate)
- Explanation of role of UW dollars in total funding mix; how UW dollars "make a difference"
- Adoption of an outcome measurement system

Funding for a limited number of programs will be extended for five years to allow outcome achievement. UWGDA not only is trying to achieve outcomes within specific impact areas, but also through the “parameters” is attempting to achieve its own outcome of positively impacting the entire service delivery system and enhancing the quality of services community wide.

→ United Way of Greater Milwaukee

After United Way identified key visions, programs were sent a brief questionnaire asking them to choose a vision(s) and explain how their outcomes contribute. This “alignment” is discussed in the feedback on agency’s year-end reports. It has helped United Way and program staff to distinguish between program-level and community-level outcomes.

→ United Way for the Greater New Orleans Area

Currently, we are developing a goal area logic model, program outcome linkages to the model, and system-level outcomes for our final goal area: Empowered Communities & Organizations. Participants in the process include United Way volunteers, program representatives, and stakeholders from other non-profits, the public sector, and community groups. A primary challenge is the development of outcome sequences when "program participants" are other non-profit organizations or entire communities—a change in focus from the work of the other goal areas with outcomes for people served by direct service programs.