EVALUATING COMMUNITY COLLABORATIONS: A RESEARCH SYNTHESIS

Prepared for:

Assistant Secretary for Planning and Evaluation
Department of Health and Human Services

Contract Number: 100-99-0008
Task Order 2

Prepared by:
The Lewin Group
Michael Fishman
Mary Farrell
Vincena Allen
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CHAPTER 1: INTRODUCTION AND BACKGROUND

An interagency federal working group is currently planning a series of demonstration projects to address the intersection of domestic violence and child abuse. Approximately half of all child abuse cases have a mother who is herself abused and many children are injured in the course of violence towards the mother. The challenges of addressing these two problems are complex and resist easy answers. Any solutions will involve active collaboration across three distinct but related service systems: the child protection system, the network of domestic violence providers, and the juvenile or other trial court with jurisdiction over child maltreatment cases (Schechter & Edleson, 1999). Each community that participates in the demonstration must include equal and strong participation by the three entities.

A key component of the demonstration will be an evaluation to document the design and implementation of the collaborations and assess their effectiveness on measures still to be determined. The evaluation of complex, community-based collaborations presents significant challenges. This research synthesis draws upon the evaluation literature to identify the major challenges, discuss approaches for addressing them, and suggest implications for the planned evaluation.

I. WHY ARE COMMUNITY-BASED COLLABORATIONS HARD TO EVALUATE?

Kubisch et al. (1995) outline several characteristics of community-based collaboratives that make them difficult to evaluate. These include:

- **Horizontal Complexity.** Projects that involve the delivery of services across multiple service systems present a complex set of activities and outcomes to be measured. In addition to the cost and effort that would be needed to measure a broad array of system-specific activities, there is an implicit expectation that enhanced collaboration will produce synergy across systems and that such synergy is a particularly important product of the collaboration.

- **Vertical Complexity.** Projects are often intended to create change at multiple levels; they may seek specific outcomes for children and families, changing work processes at the organizational level, and improvements in community circumstances. Outcomes at each of these levels may interact and we are unlikely to understand the nature of such interactions.

- **Broad Range of Outcomes.** By necessity, both horizontal and vertical complexity will create the need for multidimensional outcome measures. These outcomes will cross multiple disciplines and, in many cases, be difficult to operationalize and measure.

- **Flexible and Evolving Intervention.** The local stakeholders are likely to have significant flexibility in designing the intervention and it is likely to change over the implementation period. The “final” intervention is likely to look quite different from the original design. The change process will take place uniquely at each site. Documenting this evolution is important.

- **Contextual Issues.** Each project is centered in the community and will be affected by many forces beyond its direct control. The broader political, economic, and cultural environment
will influence the project at every step of its implementation. It will be important to try to understand how these forces influenced both project implementation and outcomes.

• **Absence of a Comparison Community or Control Group.** The essence of any impact evaluation is the attempt to answer the “compared to what” question. One cannot simply measure changes that occur over the life of an intervention and attribute those changes to the intervention. The preferred method of answering this question, random assignment of individuals to treatment and control groups, is not a viable option when one is attempting to implement a systemic community-wide change. Further, the change one is seeking to measure is operating at multiple levels beyond the individual. Comparison communities are an option but present complicated methodological problems.

II. **COLLECTING INFORMATION FOR RESEARCH SYNTHESIS**

Information for the research synthesis was found by using Internet search engines, reviewing numerous bibliographies, and consulting experts in the field. Searches were conducted on the topics of community collaboration and development, performance measures and indicators, and evaluation. Significant attention was given to evaluation literature compiled by the Aspen Institute’s Roundtable on Comprehensive Community Initiatives for Children and Families. This extensive collection of papers was written by members of the Roundtable who are experts in community-based organizations and who are either foundation sponsors, directors, technical assistance providers, evaluators, or public sector officials.

III. **STRUCTURE OF REPORT**

The remainder of this report is organized as follows: Chapter 2 describes approaches used to evaluate community collaborations. It also introduces the concept and rationale behind a “theory-based” evaluation and presents the major characteristics of such an approach. Chapter 3 explores the extent to which the collaboration should be specified at the national or local level, and some of the lessons learned from community collaborations that have been implemented. Chapter 4 presents a framework for assessing the current level of local collaboration and establishing measurable goals for the future. Chapter 5 explores the role of the evaluator in traditional evaluations and how this differs from the role of an evaluator in community collaborations. Chapter 6 concludes by exploring the time dimensions of the project.

Throughout this report, examples of collaborations planned, implemented, and evaluated in communities will be presented. Planners of this demonstration can learn from the experiences of these early efforts. **Appendix A** presents a detailed description of these community collaborations. **Appendix B** presents other frameworks used to assess successful collaborations that complement the framework presented in Chapter 4.
CHAPTER 2: APPROACHES TO EVALUATING COMMUNITY COLLABORATIONS

During the design phase of the community collaboration, funders and evaluators should develop the plan for evaluating the collaboration. This is determined, in part, by the population being targeted, the type of intervention, and the information that funders are seeking. Funders may be interested in conducting a process evaluation, which is designed to explain how the program was implemented; a cost analysis, which estimates the costs of the initiative; or an impact evaluation, which focuses on whether the initiative affected particular outcomes. Comprehensive evaluations generally include all three analyses.

In developing the evaluation plan, funders should answer the “compared to what” question. How does one know that the changes or lack of changes observed over time are the result of the intervention or due to other events or factors? Evaluations call this “establishing the counterfactual.” Establishing a counterfactual allows evaluators to examine the outcomes that would have occurred in the absence of the collaboration to conclude whether the collaboration was successful. The evaluation may also examine how the activities, procedures, and costs of the collaboration differed from that of the counterfactual. As will be discussed further in this chapter, it is far more difficult to establish a counterfactual when evaluating programs that target community or systems-changes rather than individuals.

This chapter is divided into four sections. Section I describes the use of a theory of change approach to define an initiative, by articulating the collaboration’s goals and the pathways to be taken to reach these goals. Section II discusses various evaluation approaches, including the theory of change approach that can be used to measure the impacts of the program (that is, to determine whether the collaboration was successful at reaching its goals). Section III addresses how different evaluation methods can be combined to supplement one another to most effectively evaluate a collaborative intervention.

I. ARTICULATING A THEORY OF CHANGE

Connell and Kubisch (1998) define a theory of change as “a systematic and cumulative study of links between activities, outcomes, and contexts of the initiative.” In a theory of change approach, all stakeholders – community participants, funders, and evaluators – work together to develop the basic “theory” or reasons why the activities may lead to outcomes.

As discussed above, requiring stakeholders to articulate the theory helps define the goals and methods of the collaboration, provides a roadmap to follow, and if done correctly, clarifies the expectations of each stakeholder. Stakeholders involved in the collaboration must clearly articulate the activities or processes that define the collaboration and the short-term, intermediate, and long-term outcomes. A well-configured theory of change will make explicit each “micro step” in the intervention and identify the expected connections between the program design and outcomes. The identification of desired outcomes from the collaboration will be valuable, regardless of the evaluation approach selected for ultimately determining whether the collaboration was effective.

One approach to developing a rigorous and complete theory of change is to develop a logic model.
A. Developing a Logic Model

A logic model is a graphic that illustrates the connections (i.e., the logical relationships) between the activities and outcomes. In reviewing the literature, we identified many logic models. W.K. Kellogg Foundation (1998), for example, outlined three primary types of models: theory, outcome, and activity. The models share common elements; specifically, all tend to be linear and are formulated using an “if, then” construction.

- The **theory logic model** is more abstract than the two others, graphically illustrating the underlying assumptions behind the collaboration, but not supplying the details on which activities will lead to which outcomes. Appendix C, Figure C.1 presents one example of a theory logic model.

- The **outcome logic model** focuses more on the various outcomes that the collaboration hopes to achieve, linking these outcomes with the activities and required resources. Connell and Kubisch (1998) presented an example of this type of model (see Figure 2.1). To develop the theory of change, they suggest identifying the long-term outcomes and working backwards toward initial activities, and then determining the resources required to successfully implement the initiative. The long-term outcomes are generally broader and less controversial, and thus easier to reach agreement on. For example, a long-term goal may be to reduce incidents of domestic violence in a community. A more detailed example of this type of logic model is presented in Appendix C, Figure C.2.

  **Figure 2.1**

  Example of Outcome Logic Model

  ![Diagram](image)

- The **activities model** is similar to the outcome logic model, but with more emphasis on the activities, outlining in great detail how one activity or event may lead to others, and ultimately to the desired result. Appendix Figure C.3 is an example of an activities model.

It is important to emphasize that a logic model can incorporate aspects of two or more model types.

In practice, articulating a theory of change is a very difficult process. For example, evaluators from the **Cleveland Community Building Initiative (CCBI)**, who worked with stakeholders to develop a theory of change, pointed out that the theories they developed were frequently incomplete in several ways. First, while stakeholders could usually agree on the long-term outcomes they wanted and could lay out the initial steps they would take, they often had difficulty articulating intermediate outcomes to show a complete path for change. Second, stakeholders often failed to articulate how outcomes would be observed and evaluated (Milligan et al., 1998). These weaknesses are very problematic for several reasons. When a theory does not clearly articulate how and why activities will lead to outcomes, it is far more likely that there is
not a clear connection and the project is far more likely to fail. Both the failure to select indicators of change and the failure to be explicit about the entire pathway also make a theory of change a less valuable evaluation tool. A theory that is overly vague does not help attribute causation to the demonstration in the event of success or provide useful feedback if expected outcomes do not materialize.

**B. The Evolving Nature of Collaborations**

The models above are somewhat simplistic in that they show the development of a theory of change as a linear process with clearly defined steps. In practice, every step in the process must be revisited repeatedly as stakeholders work to articulate a common theory. An obvious example is the need to reconsider possible outcomes once the “resource mapping” phase has been addressed, if resources are not sufficient to provide for all desired outcomes. The availability of certain organizational factors (for example, pre-existing institutions within the community) may also guide the planning of initial activities and expected outcomes. The process of theory development involves moving back and forth along this spectrum to match activities and outcomes with a well articulated rational.

In addition, modifications will undoubtedly be required after the collaboration begins and stakeholders learn that certain activities cannot be performed, due to resource constraints or other barriers, or learn that particular activities have undesired outcomes. It will be important that all revisions to the initial model be clearly documented for the evaluation efforts.

**II. MEASURING IMPACTS**

The primary purpose of an evaluation is to measure the extent to which a program successfully met its objectives; that is, whether it had its intended effect. Generally, the evaluator will calculate the impacts of a program by measuring the statistically significant changes in certain outcomes relative to the counterfactual. In time, if other communities can replicate the strategy and attain the same outcomes, this will increase confidence that the collaboration led to the outcomes.

This section describes various methods used to measure impacts of collaboration and the benefits and drawbacks of each method.

**A. Using the Theory of Change to Evaluate the Collaboration**

As well as developing the plan for the collaboration, the theory of change approach can be used to evaluate it. Using the theory of change approach, the evaluator can assume that the collaboration was successful if the theory was well specified, the activities were implemented as planned, changes in the early, interim, and long-term outcomes followed the activities and were of the predicted magnitude, and no obvious and pervasive contextual shift occurred that would account for the activities and outcomes (Connell & Kubisch, 1998). Basically, the counterfactual in this example is the community just prior to when an activity was implemented.

This approach addresses some of the complexities of community-based collaboratives that make them especially difficult to evaluate, discussed in Chapter 1. First, it requires that stakeholders make explicit the pathways for change, outlining to the extent possible, the vertical complexity of
the collaboration. For example, the theory should identify the path by which improvements in the community and system change will improve conditions for individuals and families. Second, in articulating the theory, multiple stakeholders will suggest a broad range of outcomes. Third, this approach recognizes the flexible and evolving nature of community collaborations by measuring outcomes at different points in the evaluation and modifying the theory in response to the initial information. Fourth, the theory of change approach allows evaluators to consider contextual issues that may affect the evaluation by explicitly stating them and their potential impact as the theory is articulated. Finally, a theory of change approach helps the evaluator systematically document the implementation of the changes and measure the collaboration’s effect, given the absence of a community or control group.

One difficulty with a theory of change evaluation is the constant tension between the flexibility of a community collaboration and the need for a rigorous evaluation design. Even if the first criterion, a well-specified theory, is met, it is unlikely that the entire collaboration would proceed exactly according to that original theory. It is important that a collaboration be able to adjust in response to ongoing evaluation efforts in order to be successful, and part of that adjustment may include changing the underlying theory as well. However, the more closely a collaboration follows the activities and outcomes prescribed in the original theory, the more convincing the theory is as evidence of causation. Therefore, the evaluator may need to choose between what may be best for the collaboration and what is needed for a meaningful evaluation. One possible way of addressing this problem is to use a pre-determined set of final outcomes against which the collaboration will be evaluated but to allow for some flexibility in the evaluation of intermediate outcomes.

Unfortunately, there are few completed evaluations of community collaborations to date; although, a few evaluations in the field show promise. As these evaluations progress, more information will be available to ascertain whether using the theory of change approach for evaluation purposes is adequate or whether other approaches should be considered.

**B. Pre-Post Analysis**

In a pre-post analysis, the target group is examined before and after the initiative is implemented. Although this form of analysis is widely used, it has substantial limitations, both generally and as applied to community collaborations. In a pre-post analysis, there is the risk of attribution of changes in the community to the demonstration, when in fact, communities are changing in response to other unrelated events. For example, a reduction in domestic violence may be due to changes in the composition of the community or improvements in the economy, but attributed erroneously to the community collaboration.

A more sophisticated version of the pre-post analysis is the interrupted time-series approach. Rather than simply observing “before” and “after” values, this approach observes an outcome over time before the start of the intervention and following it. The outcome is then fitted to a line or curve to estimate the impact of the intervention. If the trend changes after the intervention, the deviation may be attributable to the intervention. However, this does not rule out the possibility that a concurrent and unrelated event caused the change. For example, in an evaluation of a pregnancy reduction intervention, evaluators failed to take into account the activities of a school nurse who was not part of the demonstration and was distributing contraceptives over a time
period that roughly coincided with that of the intervention (Vincent et al., 1987). Just as important, this type of approach may not be appropriate for a collaboration that evolves over time, given there is no abrupt change at a specific point in time.

The theory of change can be thought of as a more elaborate pre-post analysis. The theory of change improves on the simple pre-post analysis by stating in advance which outcomes will be measured immediately following planned activities, and how these short-term outcomes will lead to intermediate and long-term outcomes. Feedback from the pre-post analysis can be used to support or question the assumptions underlying the theory, while the theory can begin to explain why the results observed through the pre-post analysis should be attributed to the intervention, or to suggest alternative explanations that must be considered. In most cases, the development of concrete indicators that can be compared pre- and post-intervention is an important component of a theory of change evaluation.

C. Experimental Approaches

Using an experimental design, individuals in the research sample are assigned randomly to an “experimental group” that is subject to the intervention or to a “control group” that is not. Any differences between the outcomes of the control group and the experimental group can be attributed to the intervention. Because random assignment removes any systematic correlation between the treatment group assigned and the participant characteristics, evaluators generally favor this design over others (Burtless, 1995). In fact, HHS granted waivers to states to modify Aid to Family and Dependent Children and food stamp program rules if they agreed to use this type of research design in evaluating the welfare reform changes (Gordon et al., 1997).1

While this design may be preferable, many of the characteristic features of community collaborations make them incompatible with random assignment evaluations. The most important of these is the inability to establish a secure control group. Because the very intention of a community collaborative is sweeping, community-wide change, a successful collaboration will result in all individuals living in the community being “exposed” to the initiative.

D. Matched Community Comparison Design

Evaluators have employed a matched comparison design approach in several evaluations of community initiatives. Using this evaluation technique, the evaluator finds communities that closely match the demonstration community on a combination of factors – such as demographic characteristics of residents, metropolitan status, geographic proximity, economic conditions, primary industries, and policies – and compares outcomes in the demonstration community with those in the comparison community. How these factors are weighted may depend on the factors that are believed to influence the outcomes being measured.

1 Of the 43 waivers granted between 1993 and 1996, only one (Wisconsin’s Work Not Welfare program) used a non-experimental design.
1. Potential Benefits of Using a Matched Comparison Design

There are several benefits of using this type of approach. First, as discussed above, this approach can be used to evaluate sweeping community interventions. Also, this type of approach requires fewer resources and is less burdensome than experimental designs. Additionally, community stakeholders are often willing to participate in this type of evaluation effort because it does not deny services to program participants.

2. Limitations of this Approach

There are several reasons why the results of a comparison community evaluation are considered to be less reliable than results from an experimental evaluation. The goal of random assignment is to eliminate any systematic differences between the study and control groups by drawing the two groups from one homogenous population. In contrast, with a matched comparison community analysis, the study and control groups are different, by virtue of living in two separate communities. When differences are found between the study group population and the comparison group population, it is possible that these differing outcomes are the result of differences between the two communities. For example, an evaluation that is measuring the impact of a program on increasing employment may capture the effect of the increased availability of jobs due to a recently opened factory in one community, or differences in residents’ job-readiness, rather than the effect of the program.

Another difficulty inherent in the selection of a comparison community is the likelihood that by virtue of its commitment to the demonstration, the program community is different from the comparison community. In other words, a community with leadership committed enough to engage in a program to begin systematic change may be more likely than another community to have improved outcomes over the program period whether or not that particular program or collaboration was implemented.

A third limitation results from comparing communities across a broad range of characteristics and determining how to weight these characteristics. Ideally, demonstration and comparison communities would begin with similar demographic characteristics, economies, institutions, cultures, and indicators that could influence outcomes. However, since finding a perfect match is unlikely, it may not be clear which of these characteristics should be weighted more heavily in selecting a comparison community.

Finally, Hollister and Hill (1995) point out that selecting comparison communities that are geographically close to the demonstration can minimize differences in economic and social structures and changes in area-wide exogenous factors. However, there are problems, such as spillover and out-migration that can contaminate the comparison and demonstration communities.

3. Randomly Assigning Communities

To correct for the bias that may arise in selecting a demonstration community that is more committed to the initiative relative to the comparison community, the evaluator could randomly assign communities to treatment or control status. It is important to note the distinction between the random assignment of individuals discussed in the previous section and the random...
assignment of communities. The latter does not eliminate the selection bias due to differences between the characteristics of the individuals living in the two communities. However, it is a more rigorous design than allowing communities to self-select into the two treatment categories.

All communities must agree in advance to implement the initiative or not, depending on the assignment. Granger (1998) warned that randomly assigning communities into demonstration and control communities does not guarantee that the demonstration communities will implement the initiative and control communities will not. If different levels of implementation exist, the comparison between the two groups of communities will be unsatisfactory.

4. Past Experiences Using This Approach

Comparison communities have not been used in the evaluation of many community collaborations, but have been used to evaluate other types of program and system changes. The evaluation of the State of Washington’s Family Independence Program (FIP), for example, randomly selected between pairs of communities, matched on geographical location, urban/rural classification, local labor market conditions and welfare caseload characteristics. The analysis included an adjustment for pre-program differences in particular indicators and a regression analysis to control for differences in site characteristics. The evaluators randomly selected the treatment communities from the matched pairs to reduce bias in community selection.

In reviewing their efforts, the FIP evaluators pointed out a number of modifications that might have improved their evaluation design. For example, using several comparison communities for each treatment community would have helped the analyst distinguish between site-specific and treatment-specific differences. They also believed that adding more treatment sites would have yielded more reliable results by increasing the ability to control for variations between sites that were independent of the treatment. Finally, they recommended a longer period of data collection prior to program implementation, which would have established a more stable pattern of pre-program differences between the communities (Long et al., 1994).

Comparison communities have also been used in the evaluation of several programs designed to reduce smoking among youth. For example, an evaluation of an initiative in three Massachusetts communities was based on the theory that increasing enforcement of tobacco-sales laws would increase compliance with those laws, thereby reducing teens’ access to tobacco products and by extension, smoking. The strength of this evaluation was that it successfully developed indicators for each step in the theory. Enforcement efforts were monitored, both in treatment and comparison communities. Teenage girls (16 years old) were sent into stores to try to buy tobacco to establish compliance rates, and target populations filled in surveys to establish access to tobacco and smoking rates. Therefore, when there was not an appreciable difference in changes in smoking rates between the treatment and comparison communities, evaluators were able to establish which aspect of the demonstration had failed. Compliance rates were significantly affected by the demonstration, but the higher compliance rates (as measured by controlled attempts to illegally purchase tobacco) did not translate into significantly reduced teen access to tobacco or teen smoking. Because they had this information, evaluators were able to more accurately assess where the connection between enforcement and smoking broke down (Rigotti et al., 1997).
Another program, which measured the impact of a media campaign designed to reduce smoking among teenage girls, selected matched pairs of communities based on demographic and media-market characteristics. Pre-campaign analysis found that the comparison and treatment groups were initially similar on a number of characteristics, including the percentage of females, the presence of an older sibling who smoked, family smoking rates, and seven other psychological risk factors for smoking and other substance abuse behaviors. The evaluators then compared the change in smoking rates between the two groups, post-campaign. Like the previous evaluation, this study also established intermediate outcomes that included teenage girls’ perceptions of the advantages of smoking. Based on statistically significant differences in all of the variables, they were able to establish that the media campaign had an impact both on attitudes and on behavior. (Worden et al., 1996).

An evaluation of a teen pregnancy reduction program in Dayton, South Carolina selected several comparison communities that had similar populations, racial and ethnic distributions, and economic characteristics of the demonstration community. The evaluation found a decrease in teen pregnancy rates during the demonstration that was significantly different from anything observed in the comparison communities (Vincent et al., 1987). However, a later evaluation of the same demonstration pointed out that several of the comparison communities began with significantly lower pregnancy rates than the demonstration community did; using communities with more comparable pregnancy rates found a smaller difference in pregnancy rates. (Koo et al., 1999.) This example points out how ignoring an important aspect of comparability can skew evaluation results.

III. USING MULTIPLE APPROACHES

Given that there is no ideal approach for defining a counterfactual and evaluating a community collaboration, Granger (1998) suggests using multiple approaches. This is sometimes referred to as “triangulating” the estimates. A collaboration could be evaluated using mixed methods, seeking patterns that corroborate each other. With the exception of the random assignment of individuals, which is usually seen as rigorous enough to stand on its own merit, all of the methods described above are often used in conjunction with at least one other method to help balance some of the weaknesses discussed.

A. Difference-in-Difference Analysis

One commonly used approach combines the comparison community and pre-post approaches to control for differences in initial baseline levels. This is sometimes referred to as a “difference-in-difference analysis.” To estimate impacts for the demonstration, the average change in an outcome for the demonstration communities is compared to the average change for the comparison communities.

This approach does not, however, control for the influence of outside events that affect one community and not the other after the baseline period. Therefore, the timeframe of the initiative should be considered before using this approach. If the outcomes from the community collaboration span a long time period (over a decade, for example), then this is probably not a reasonable approach; communities are likely to undergo changes that have little to do with the collaboration.
B. **Theory of Change, Combined with Comparison Community Approach**

Because of the inherent difficulties in using traditional evaluation methods to evaluate a community collaboration, the theory of change approach is generally seen as a necessary component of any community collaboration evaluation. One of the most important strengths of a theory of change analysis is that it can bolster the results of a pre-post analysis and begin to attribute causation to pre-post analysis results.

Combining the theory of change with a “difference-in-difference” comparison community approach may be the strongest method for evaluating community collaborations. Exogenous factors, such as enactment of new legislation, changes in the economy, and changes in attitudes on domestic violence across the state, can affect the rates of domestic violence reports and be mistakenly attributed to the community collaboration. Comparing the changes in outcomes in the demonstration community against changes in outcomes in the comparison community provides a more rigorous and credible evaluation.
CHAPTER 3: TOP-DOWN VS. BOTTOM-UP STRATEGY

The interagency federal working group has an important decision to make regarding the level of direction they will give to the local sites and the extent to which they will specify the collaboration. In particular, the funders must decide whether to prescribe a number of collaboration aspects, including: the specific agencies and organizations involved; the short- and long-term goals of the collaboration; the process for meeting the goals; the evaluation design; and the indicators of success. Funders are also in a position to set parameters on the involvement of stakeholders and evaluators in the overall process.

The interagency federal working group has expressed a commitment to establishing a common framework that communities in the Domestic Violence/Child Maltreatment demonstration will follow. Specifically, communities must agree to implement many of the guidelines outlined in “Effective Intervention in Domestic Violence and Child Maltreatment Cases: Guidelines for Policy and Practice” (Schechter & Edleson, 1999). In the planning phase, the working group identified minimum elements that are required of all communities participating in the demonstration, including: (1) the strong participation of the courts, child welfare agencies, and domestic violence providers; (2) the commitment from each stakeholder to modify some of their existing procedures as discussed in the guidelines; and (3) the commitment to establish a process for regular planning and collaboration. In addition, the group funded another paper that identifies activities that can be adapted from the guidelines and the outcomes from these activities (Edleson et al., 2000).

Many decisions regarding the level of detail to be specified remain unanswered. Ideally, the federal working group would develop a framework that gave demonstration sites the guidance they needed and allowed for a meaningful cross-site evaluation, while allowing enough flexibility for local creativity and project ownership as well as some variation between sites. This chapter discusses the potential benefits of both national (top-down) and local (bottom-up) specification, and the lessons that other community collaborations have learned regarding the level of central guidance that is necessary and/or desirable.

I. THE ROLE AT THE NATIONAL LEVEL

There are benefits to having some national direction. First, HHS and the Department of Justice have funded a multitude of community collaborations in the past few years and can offer guidance to communities based on this past experience. Some collaborations include Safe Kids/Safe Streets, developed to prevent and control juvenile violence and delinquency, Safe Futures, which seeks to prevent and reduce delinquency and victimization, and Healthy Start, developed to reduce rates of infant mortality. Second, offering communities some direction from which to begin work may speed the process of implementation, and may also avoid some of the problems experienced by collaborations that failed to clearly define the goals and outcomes in the planning phase (which is discussed in more detail in Section III). Finally, having a common framework allows the evaluator to conduct more meaningful cross-site analyses and glean important lessons from the multi-site demonstration.
II. THE ROLE AT THE LOCAL LEVEL

While there are benefits of having a strong national agenda, a successful community collaboration requires the participation of the local stakeholders. Developing the models at the local level under a broad national framework recognizes the benefit of allowing local institutions and residents to meet, pool their knowledge and resources, and develop a model that they have all agreed upon.

The literature outlines a number of benefits involving local stakeholders in the planning, implementation, and evaluation process. These include the following:

- A community collaboration that is supported by all stakeholders has a greater chance of being implemented as planned, with stakeholders “buying in” to the collaboration.

- Local stakeholders understand what works best in their communities, given the make-up of the community, the organizational structure of service delivery in the community, political factors, and other contextual issues.

- Local community leaders may leverage additional resources from their agencies and will be more committed to sustaining the collaboration after the demonstration ends.

- Requiring involvement by local stakeholders increases interaction and communication among stakeholders from the start of the demonstration.

III. LESSONS FROM COMMUNITY COLLABORATIONS

The funder has to walk a fine line between guiding the project and allowing sites the flexibility to lead the initiative. A review of early reports of multi-site evaluations suggests several lessons for the federal working group. These lessons are discussed below with examples offered from the earlier community collaborations.

- The funders should give clear guidance regarding what is expected from the participating communities. A common complaint voiced by community stakeholders involved in collaborations was the inability of the national funders to clearly express the goals of the initiative and their expectations of the stakeholders.

  The five Rebuilding Communities Initiative (RCI) community-based organizations were responsible for planning and implementing the initiative based on the local opportunities and the community’s strengths. Annie E. Casey Foundation (AECF) provided RCI sites with detailed descriptions of the principal areas of activity that the foundation expected the five communities to engage in, which included: (1) engaging residents in the planning process; (2) forming a collaborative neighborhood governance structure; (3) positioning the community for reforms; (4) developing a community-building agenda; (5) participating in national Rebuilding Communities activities; and (6) developing a written plan for implementing the community building agenda. The overarching goals, however, were not spelled out in the initial stages, and these activities were considered to be overly abstract. AECF realized later that in its efforts to avoid being overly prescriptive, it gave
There were a number of areas in which the local \textit{Neighborhood and Family Initiative (NFI)} collaborations felt that they would have benefited from more direct and specific guidance from their funder, the Ford Foundation. Collaborative members indicated that they needed more clarity on the assumptions under which the Foundation was working, the degree of autonomy that the collaboration should be allowed, reasonable markers of progress, and the structures that were to be in place after the Initiative was completed. Local collaborations also failed to begin evaluation activities during the planning process because they were both unclear about what was expected and unaware of the potential benefits of devoting resources to an evaluation. Both problems could have been addressed with more central guidance (Chaskin & Joseph, 1995).

In contrast to the \textit{RCI}, AECF’s \textit{New Futures} initiative provided significantly more centralized guidance. The Foundation, aiming to improve the lives of underprivileged children through the integration of local services, laid out specific long-term indicators by which the local initiatives it funded would be evaluated. However, AECF nonetheless came out of the initial years of the project feeling that they had erred on the side of giving communities too little guidance. The Foundation concluded that being specific about long-term goals while leaving intermediate benchmarks unspecified gave participants and observers of the initiative the impression that progress was not being made when it was in fact far too early to expect meaningful change in the long-term indicators. The specificity of the long-term indicators also had a tendency to make participants focus too narrowly on improving the indicators themselves rather than making the underlying improvements necessary for meaningful change. Intermediate benchmarks, including goals for the modification of institutions, may have given everyone involved a more comprehensive view of the change process as well as more realistic and useful expectations of progress (The Annie E. Casey Foundation, 1995).

- \textbf{Providing technical assistance to the local communities is vital to the success of the collaboration; the provision of technical assistance should be responsive to local needs and requests.} Many community stakeholders undertaking this type of initiative have little experience in this area and can learn from experts in the field. One role for the national funder or national evaluator is to ensure the local sites are getting the technical assistance they need. This may mean centralized technical assistance as well as local assistance. Allowing community stakeholders to guide the provision of technical assistance helps keep local actors from losing ownership of the project when relying heavily on outside help.

- On \textit{Jobs-Plus}, a program developed to help people living in public housing obtain and maintain employment, the national designers provided technical assistance to help the local partners develop their strategies. Specifically, national experts on employment and training, social services, and community-building provided assistance to collaboration members. Local consultants were also hired to provide technical assistance at the local level (Riccio, 1999).
In funding RCI, AECF had a “hands-on” role that guided the planning phase, using foundation staff as site coordinators, sponsoring several cross-site conferences, and giving sites access to technical support consultants (Burns & Spilka, 1997).

Abt, the national evaluator of the Jobs Initiative, hired faculty of local universities to work at the local level. The local evaluators had little or no previous experience in applying the theory of change approach, which Abt was using. To increase the knowledge base, Abt held a two-day training conference for all local evaluators and communicated via the internet list services, conference calls, and periodic cross-site meetings (Herbert & Anderson, 1998).

The funder and evaluators should engage stakeholders in the planning process, the implementation, and the evaluation. The chances of implementing a successful collaboration increase when there is an open dialogue between the funder, evaluator, and collaboration members. The interaction ensures that the local needs are taken into consideration (i.e., agreement is reached on outcomes and processes that are useful to the stakeholders). This may help to improve program implementation.

If cross-site analysis is important, more centralized direction is required. A trade-off exists between allowing the communities to develop local strategies based on local factors and having a more national approach that allows the evaluator to make cross-site comparisons.

The Ford Foundation had difficulty conducting a national evaluation of the NFI because the local initiatives varied so widely in their implementation. Because of this variation, it was hard to construct a national evaluation that had value for both the local stakeholders and the broader neighborhood-development community.

In the Jobs-Plus initiative, the local partners (which included, at a minimum, the public housing authority, resident representatives, the welfare department, and the workforce development system) operated within a common framework developed by the national designers. The national designers formulated the theory and basic principles of Jobs-Plus, while the local partners determined how to put the program’s elements into action. This initiative is being evaluated by Manpower Demonstration Research Corporation (MDRC), with an emphasis on cross-site analysis.
CHAPTER 4: FRAMEWORK FOR MEASURING COLLABORATION

Collaboration is key to the success of any comprehensive community-based initiative. From the perspective of the evaluator, collaboration is both a means to an end and an end in itself. Without effective collaboration, the initiative is unlikely to meet its objectives. Understanding how collaboration evolved during the course of the initiative and how it ultimately supported or detracted from its overall success is extremely important for those who hope to learn from the experience.

A review of the evaluation literature revealed that community collaboration is often a focus of evaluations and, in particular, is considered an important “unit of analysis” for theory of change evaluation. However, consistent with the theory of change model, indicators of collaboration have been defined on a case-by-case basis. Culling through the array of specific indicators that had been developed for earlier evaluations produced a laundry list of possible indicators of effective collaboration; however, there was no underlying theory to support their identification or subsequent analysis.

Further review of the literature revealed a body of work that focuses on the nature of the collaborative process itself. This literature views collaboration as a developmental process, where stakeholders or partners move through stages of collaboration as they come to know and understand one another, build trust, and establish working relationships. We have attempted to draw from this literature to create a framework for measuring collaboration.

The chapter begins by describing the Stages of Collaboration. We then outline a set of Collaborative Functions, steps organizations take in order to be more specific about potential areas for collaboration. Finally, we bring these two pieces together to create a Collaborative Framework that can be used by both evaluators and community collaborations to assess their current level of collaboration and establish specific measurable goals for the future. We provide examples of specific goals or indicators of collaboration to guide the reader. However, it is our intent that the framework be applied to the unique experience of each community.

I. STAGES OF COLLABORATION

Community initiatives rely on the development of supportive partnerships. Inherent in the structure of these partnerships is a process known as collaboration (Gray, 1985). Collaborations emerge based on the relationships established among partnerships. The process of relationship or collaborative development can be viewed as going through five stages of interaction. These five stages are: co-existence, communication, cooperation, coordination, and collaboration (Exhibit 4.1).

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2 For the purposes of this paper, partnerships refer to the joint efforts of individuals and organizations in a community collaborative.
Exhibit 4.1

Stages of Collaboration

<table>
<thead>
<tr>
<th>STAGES</th>
<th>STRUCTURE</th>
<th>INTERACTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-existence</td>
<td>Individual organizations, agencies</td>
<td>Become aware that it exists.</td>
</tr>
<tr>
<td>Communication</td>
<td>Network, Roundtable</td>
<td>Have dialogue and common understanding.</td>
</tr>
<tr>
<td>Cooperation</td>
<td>Consortium, Coalition</td>
<td>Discover shared interests and work together.</td>
</tr>
<tr>
<td>Coordination</td>
<td>Task force, Council</td>
<td>Limit duplication of services and match and coordinate needs</td>
</tr>
<tr>
<td>Collaboration</td>
<td>Long-term coalitions or collaboratives</td>
<td>Develop shared vision and build interdependent system.</td>
</tr>
</tbody>
</table>

Source: Adapted from Gray, 1985

The stages are representative of how relationships between partners can grow or remain stagnant based on levels of interaction desired by individual organizations.

- **Co-existence**: Entities may be aware of each other, but have no prior history of interaction and know little about each other’s composition or way of conducting business.

- **Communication**: Entities know of each other, have some history of interaction and know the basics of each other’s composition or way of conducting business. Partnerships that are interested in communication are usually informal, without commonly defined mission, form, or planning. This usually occurs within networks and roundtables.

- **Cooperation**: Entities have established policies and practices that involve ongoing exchange of information integrated into routine practice/business. They negotiate mutual roles and share resources to achieve joint goals. Their common characteristics are shared interests, joint decision making, and integration of efforts. This usually occurs within partnerships, coalitions, and cooperatives.

- **Coordination**: Entities have committed to sharing resources in order to accomplish shared goals, and have implemented activities that depend upon these shared resources. However, the entities are not changing their core businesses or sharing decision making outside the area of coordination. This occurs most often in councils, alliances, task forces, and short-term coalitions.

- **Collaboration**: Entities have engaged in shared planning and decision making that is taken seriously in the business decisions of each entity – such that each entity is willing to change its practices to achieve a shared goal. Authority is vested in the collaborative – rather than in individuals or an individual agency. Typically this is seen in long-term coalitions or collaboratives.
The names given to the above stages vary within the collaboration literature. One can argue as to whether cooperation precedes or follows coordination or whether there is some additional intervening stage. The value of the framework lies in its ability to help stakeholders acknowledge that collaboration is a developmental process and to identify meaningful indicators to guide their own collaborative process. Some initiatives may hope to achieve collaboration, but may begin by simply sharing information about each other’s goals and programs (Gray, 1985). In fact, some initiatives may never reach a level of collaboration. Productive partnerships may remain established and productive at one stage without needing to move to a subsequent stage.

It is also important to remember that collaborative development is a dynamic process. Relationships among partnerships evolve as the readiness of participants and the demands of the initiative change. Funders of community initiatives and other stakeholders sometimes assume that productive relationships occur rapidly.

II. COLLABORATIVE FUNCTIONS

There is a tendency in the literature to view the collaborative process using somewhat of an organic metaphor. The collaborative is an organism that develops through various stages and resides fully in one stage or another. However, organizations, like organisms are complex entities that perform many functions; they may collaborate more fully in one area, such as strategic planning and choose to maintain more separation in another area, such as resource allocation. For this reason, we have identified a set of *Collaborative Functions* that communities can use to identify and evaluators can use to measure discrete levels of collaboration. These 10 functions are described below along with a brief discussion of how they may be viewed within the context of collaboration.

- **Strategic Planning**: The assessment of community needs and current policies and programs, establishment of goals, and identification of future actions are common functions of organizations. Community collaboratives are likely to form with each organization having its own individual strategic plan. In the course of working together, they will share plans and begin to move toward higher levels of collaboration. Ultimately, they may seek to coordinate their planning processes and develop mutual goals and initiatives or even develop a common strategic plan that captures their areas of mutual interest.

- **Resource Acquisition**: When collaboratives form, member organizations will typically have their own procedures for gathering resources. There are a number of reasons why some degree of collaboration in resource acquisition may be beneficial, particularly if they have begun to coordinate their strategic plans significantly. For example, if the different member organizations tend to draw on the same organizations for resources, it may be more efficient to combine efforts. However, the member organizations may also feel that pursuing resource acquisition separately increases the total level of resources to which they have access. In this case, the collaborative may elect to remain in the “communication” or “cooperation” stage.

- **Resource Allocation**: As a collaboration effort begins to develop common goals and strategies, it may be beneficial to jointly allocate resources to address those common goals. Eventually, stakeholders may choose to jointly allocate some or all of individual agency budgets to carry out the work of the collaborative, or to combine budgets completely. This
resource allocation continuum of collaboration may become linked with the continuum for resource acquisition, where greater degrees of collaboration in acquisition naturally lead to greater collaboration in allocation, but the two functions need not be in the same stage of collaboration.

- **Policy and Program Direction:** Each organization has its own set of principles that guide the development of its policies and programs. As organizations begin to communicate, they may find that some of their program and policy directions are similar, and that others may vary greatly between organizations. Organizations wishing to work together more effectively may find that conflicting policy direction impedes their ability to do so, or they may wish to jointly implement efforts that will require a common program direction. Possible levels of collaboration range from simply comparing policy goals for consideration, to developing a common framework of policy and program direction that reaches many aspects of operations for all organizations. Where on this spectrum a collaboration falls will depend both on the level of cooperation in some of these other functions and on the extent to which the policy directions of its member organizations are compatible.

- **Staff Training:** Historically, distinct organizations have trained their staff separately. As these organizations begin to communicate and move on a path toward cooperation, there are several levels at which they may decide to combine training efforts. They may simply share information on training practices, or they may decide to completely combine some staff training for functions that overlap between the organizations. If strategic planning, policy direction, and/or program operations have advanced to the level where the organizations are developing common goals and methods, they may decide that new training efforts that educate staff on their collective mission or new methods are beneficial. This new training may be done together, separately, or with some intermediate level of overlap and/or communication based on organizations’ perception of mutual best interest.

- **Program Operations:** There are a number of ways in which a collaboration can begin to combine program operations. The collaboration spectrum in this functional area involves two different components. First, which program operations are conducive to collaboration? Does the collaborative plan to continue to run completely separate programs, to combine efforts on some new initiative agreed upon collaboratively (e.g., jointly developing a framework for exchanging information about family circumstances), or to extend collaboration to some or all previously-existing operations? Second, for those programs that can benefit from collaborating, the degree of collaboration necessary must be considered. Will operations be co-housed? Will organizations create inter-agency teams to try to align practices and decision-making? Or will the operation of some programs eventually be totally merged, to create a joint entity that implements specific programs for the collaborative? Collaboration in program and policy direction is an important prerequisite for significant collaboration in or merging of program operations.

- **Information Dissemination:** Organizations frequently need to disseminate information on their operations and services to a number of different groups, including their target populations, other organizations, and funders. As organizations begin to collaborate, it may make sense to begin to combine these functions if many of their efforts overlap. Integrated policies and programs will likely need more integrated information dissemination because a
large number of joint ventures are obviously more conducive to joint reporting. Even with substantial collaboration, however, there may be instances in which organizations prefer not to collaborate on this front. For example, if one agency has a funder whose interests lie in functions specific to that agency, it may make sense for the agency to report on its operations (including, in some cases, on its collaborative efforts) from the framework of its more traditional practices.

- **Community Representation:** Many organizations have practices in place for gathering input and information from parties outside of their organization, including soliciting input from community representatives and from other organizations. As organizations begin to collaborate, they may choose to combine some of these practices. It is important to note that combining information-gathering efforts can come at any point in the collaborative-building process. For example, organizations that have just begun to collaborate might solicit input from the community or other organizations regarding how to go about building a collaboration or how they might benefit from working together, while a well-established collaborative might jointly solicit input as to the effectiveness of its combined efforts. A developing collaboration might find it beneficial to develop a process to jointly solicit input from the community if its member organizations' target populations overlap substantially.

- **Community Leadership:** In addition to soliciting input from the surrounding community, organizations may also have practices in place to exercise community leadership, reaching out into the community to build support for agency efforts and raise awareness of available services. Levels of collaboration on this front can range from sharing observations from separate outreach efforts to sending representatives from multiple organizations on specific outreach efforts or creating permanent community leadership cooperatives whose mission is to build support for collaborative goals and increase awareness of the collaboration.

- **Program Evaluation:** Presumably, organizations have some set of guidelines or procedures in place for evaluating, either formally or informally, their own programs' effectiveness and/or operations. Organizations that are coordinating or collaborating in many of the areas described above may decide to continue to evaluate their efforts separately, perhaps extending these self-evaluations to include new agreed upon practices and investigating how those practices affected individual organization performance. However, they may also decide that in light of goals, strategies, and procedures that are part of the collaborative effort, there is benefit to be gained from combining evaluations in one way or another. This can involve anything from sharing evaluation results to reviewing evaluation procedures and developing shared evaluation guidelines to conducting formal joint evaluations.

### III. COLLABORATIVE FRAMEWORK

#### A. Developing the Framework

By bringing together the *Stages of Collaboration* and the *Collaborative Functions* one can develop a Collaborative Framework to guide the work of local initiatives and evaluators. The framework provides a vehicle for local stakeholders to assess the current status of their collaborative across each functional area and to set specific goals and measures for future collaboration. As members develop their theory of change, it provides a device to focus on the
development of the collaborative itself. The framework also will support the goals of a national initiative by providing a common framework for defining and assessing collaboration across sites while allowing individual sites to set their own specific benchmarks and indicators.

The framework presented in Exhibit 4.2 could be used to facilitate the planning and evaluation process.

**Exhibit 4.2**

**Collaborative Framework**

<table>
<thead>
<tr>
<th>Functional Areas of Organizations:</th>
<th>Co-existence</th>
<th>Communication</th>
<th>Cooperation</th>
<th>Coordination</th>
<th>Collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategic Plan</td>
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<td></td>
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<tr>
<td>Resource Acquisition</td>
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<tr>
<td>Resource Allocation</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Policy and Program Direction</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Staff Training</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Operations</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disseminate information</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community representation</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Community leadership</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program evaluation</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Collaborators, together with evaluators, should assess where they currently stand with regard to each function. They may consider the following questions:

- For each functional area, are they just beginning in the collaborative process or are they further along?
- Where do they want to be one year from now?
- How will they get there? and
- How will they know when they are there?

By assessing and setting goals for each function, the collaborators can fully specify the current status of their working relationships and set clear goals for the future. Of course, differences of
opinion will undoubtedly emerge among the stakeholders regarding expectations and willingness to collaborate in particular areas. The evaluator may need to facilitate this process and help the group make decisions and resolve these conflicts.

**B. Charting the Progress**

After developing the framework, and beginning the process, the group should meet frequently to track the progress being made. Are they proceeding as planned? As the process evolves over time, the collaboration will learn what works and what can be improved. Undoubtedly, mid-course corrections will be suggested.

Over time, the group will face unanticipated problems. For example, the collaboration may experience changes in membership, with new members bringing in new priorities and issues. This may not necessarily be a negative outcome – they may bring a fresh, outside perspective and continue to energize the collaborative process. Additional problems may be encountered as the initiative moves closer to the collaboration stage. The group may face conflicts as different bureaucracies or agency turf battles prevent them from reaching the next stage, requiring constant reassessment and negotiation. In some cases, they may not be able to reach the final stage of collaboration if that is their goal, but may have moved the process to cooperation or coordination.
CHAPTER 5: THE ROLE OF THE EVALUATOR

Traditionally, evaluators of social service programs have been seen as objective outsiders who will independently evaluate the programs designed by public agencies, funders, or other entities. In this setting, the evaluators may develop the research design, collect information and data, analyze the data, and assess the impact of the program on various outcomes for individuals, families, communities, or institutions.

Because the evaluator may have, at most, a distant relationship with the program administrators and their staff, programs may be less than candid with information. For example, the program administrators may view the evaluators as “auditors” who are reporting findings that could affect continued funding. They may feel the evaluator has limited knowledge of the program’s operations and practices and is too removed from the process to accurately characterize the program. In turn, evaluators require the cooperation of the program staff, but are ultimately accountable to the funders to assess the worth of the program.

Research indicates that funders of several community collaborations currently in the field view the relationship between evaluator and stakeholders differently than described above. They see it as more of a partnership, whereby the evaluator has a more active role in the design and implementation of the collaborative and the other community stakeholders are given a role in the evaluation process. As noted in Kellogg (1998), “The best evaluations value multiple perspectives and involve a representation of people who care about the project. Effective evaluations also prepare organizations to use evaluation as an ongoing function of management and leadership.”

This chapter is divided into three sections. Section I discusses some of the benefits and drawbacks of involving evaluators in the design phase of the collaboration. Section II describes the possible role of the evaluator during the implementation of the collaboration. Finally, Section III discusses how collaborations might use national and local evaluators.

I. INVOLVEMENT IN DESIGN PHASE OF DEMONSTRATION

Community collaborations often involve evaluators in the design phase. The level and type of involvement may take several forms. Evaluators may be expected to help the stakeholders develop their theory of change (which could include facilitating the process), educate stakeholders, and build capacity and support for the initiative. The benefits and drawbacks identified for the evaluator’s increased involvement are listed below.

A. Benefits of Involving Evaluators

1. To Help Planners Articulate Their Theories of Change

The evaluator can serve as the facilitator for developing the basic collaboration, the theories, and the outcomes and goals. Brown (1995) refers to the evaluator as a “coach,” providing feedback about the initiative’s activities and expected outcomes. During this period, the evaluator leaves behind his or her role of outside appraiser, and becomes one of the collaborators.
Evaluating Community Collaborations: A Research Synthesis

Several collaborations have involved the evaluators in this role. The evaluators of the CCBI were essential in guiding and helping the community stakeholders develop their theory of change. They facilitated most conversations by eliciting opinions, documenting the evolving theory, and reconciling differences between stakeholders.

Abt Associates took another approach in evaluating the Jobs Initiative and Empowerment Zones/Enterprise Communities (EZ/EC) programs. Because of limited resources and a desire to minimize the demands on stakeholders, Abt prepared a general description of what the local theory might look like based on the evaluator’s prior experience with similar efforts. The stakeholders could review this initial description and provide detailed feedback.

2. To Educate Planners About Issues Facing the Community, Based on Previous Experience and Research

An evaluator may bring to the collaboration knowledge of the community, experience working with the target population, experience developing successful collaborations in other communities, and/or knowledge about what types of initiatives have been successful in meeting the goals of the collaboration in other communities. Their experience and knowledge base can help collaborations plan their strategies, develop their outcomes, and develop the evaluation plan.

3. To Build Support for the Evaluation Among the Stakeholders

Evaluators who are involved in the design phase and are communicating with stakeholders on a regular basis are less likely to be perceived as “outsiders.” As a result, they may use this interaction as an opportunity to provide regular feedback to the collaboration.

Alternatively, when evaluators have not been assigned to the collaboration during the design phase, there has been little support among collaborative members. For example, evaluators were not involved in the design phase of the NFI collaboration and, perhaps as a result, the Ford Foundation was not successful in building support for the evaluation component. Collaboratives mostly overlooked the need for evaluation during the planning process in part because they did not understand how conducting an evaluation could benefit them, both in clarifying their initial goals and in providing feedback later on. They saw the evaluation as coming “at the expense” of the rest of the program and were reluctant to devote resources to it. The Foundation gave the sites very little guidance on the evaluation aspects of the project.

4. Learn Firsthand About Stakeholders’ Philosophies, Biases, and Intentions

Through involvement in the design phase, the evaluator will learn firsthand about the different goals of the stakeholders and their diverging philosophies, the issues that concern them, the intent of the initiative, and the contextual issues surrounding the community. The information learned can help evaluators with program implementation analysis.
B. Potential Drawbacks

While there are many benefits to involving evaluators in the design phase, there is a downside in allowing evaluators to be closely aligned with the stakeholders implementing the community collaboration. Funders and evaluators must guard against the following:

1. **Questions of Bias and Lack of Objectivity**

Evaluators immersed in the design and implementation of the collaboration become a part of the intervention and their objectivity may be questioned. To protect against this outcome, evaluators should have in place a strong research design for evaluating the initiative, based on quantifiable measures, as well as qualitative measures, that have been agreed upon during the design phase. This keeps the evaluator “honest,” requiring that all impacts of the initiative, good or bad, be reported. Of course, the interpretation of the findings may still be questioned.

For example, MDRC’s role in designing and evaluating the *New Chance Program* – a program for young mothers without high school credentials – led some to question their ability to remain objective during the evaluation phase. Clearly, they had a stake in designing a program that effectively increased high school completion and reduced subsequent pregnancies. However, the rigorous research design, utilizing random assignment, ensured the validity of the findings. The final analysis found that *New Chance* did not have a positive impact on the lives of program group members (Quint et al., 1997).

In the absence of a random assignment design, evaluators can put in place multiple evaluation approaches for evaluating the community collaboration, as discussed in Chapter 2. Evaluators who analyze data based on the pre-determined methodology may limit the charges of bias. Combining this with ethnographic research can strengthen the findings.

2. **Evaluator as Advocate for the Stakeholders’ Positions**

An evaluator may find himself or herself sympathizing with the mission of the community collaboration and supporting the stakeholders’ decisions. In addition, the evaluator risks becoming aligned with particular stakeholders.

To reduce this problem, the evaluators should share all memos and reports with all stakeholders, as well as outside experts. In this way, getting others to question the evaluator’s interpretation persuades the evaluator to consider other perspectives.

3. **Evaluators Lacking Skills Required to Help Design and Build Support for Collaboration**

Some evaluators are ill equipped to understand the complex interactions of community collaborations. As Brown (1995) noted, evaluators of community collaborations find themselves in a variety of roles such as scientist, judge, technical assistant, facilitator, educator, and more. The design phase may require evaluators to engage and guide stakeholders as they articulate their plans. Evaluators unfamiliar with collaboration development and/or the process of providing technical assistance may find the process daunting.
This may call for having a team of evaluators who offer different skills. For example, a team may include a statistician or econometrician to do the more sophisticated analytical work, ethnographers, and researchers who have skills in team building, group processes, and negotiation to facilitate the process.

II. INVOLVEMENT OF EVALUATORS IN IMPLEMENTING THE DESIGN

The evaluators are in a position to provide the stakeholders with feedback during the various phases of the collaboration. As they assess the progress made by the initiative during the early period, modifications to the strategies can be made, based on the new information. Problems may be identified and corrected. There are benefits and drawbacks of continuing to involve evaluators in the research design.

A. Benefits of Involvement During Implementation

1. Provide Ongoing Feedback

The evaluator can provide useful feedback to the collaborative members throughout the evaluation period. This may take the form of regular briefings via meetings or conference calls, memos, and preliminary reports. The form of the feedback should be discussed early in the process so that the evaluator has a sense of the type of information that will be most informative to the stakeholders.

In doing this, the evaluator may gain the trust from the stakeholders and a greater willingness by the stakeholders to speak openly about the process and provide important and sensitive data.

2. Provide Information to Modify the Program or Collaboration

During the course of the evaluation, the evaluator may identify methods of improving the program design or helping the collaboration achieve some of its goals. The theory of change or logic model approach presumes that refinements will be made to the model as different theories are tested and outcomes are measured.

3. Involve Stakeholders in the Evaluation Process

By engaging stakeholders in the process of assessing and evaluating the initiative, evaluators can enhance community understanding, stakeholder commitment, and utilization of the results. Some evaluators have involved the community participants in various aspects of the evaluation, such as collecting data and fielding surveys. For example, one evaluation involved residents in community mapping (creating geographic maps that identify the characteristics of the community), using data from the U.S. Census, and schools, and collecting data through surveys (Douglas, 1998).

In evaluating the NPI, researchers at the University of Chicago’s Chapin Hall defined an agenda and included a set of documentation tasks as part of the technical assistance effort. Community participants helped build the capacity of NPI staff to collect and analyze data, articulate the outcomes of their proposed strategies, and document the lessons learned throughout the start-up period. This approach was not consistent with traditional approaches to documentation but it was
parallel to the funder’s aim of generating learning experiences that were “owned” by NPI participants (Brown et al., 1998).

B. Drawbacks

1. Integrity of Research

As discussed in Section I, the close involvement of the evaluator in the collaboration process may reduce the integrity of the research.

2. Time Commitment and Cost

Evaluations are expensive even without taking into consideration the constant interaction between the evaluator and stakeholders throughout the life of the evaluation. Typically, an evaluation may call for evaluators to conduct site visits during the initial phase of an evaluation to understand the process as it was intended to be and how it was implemented during the first year or two. Rarely do evaluators continue to conduct regular site visits with the stakeholders after this initial period. This adds to the cost of the evaluation, which may be beyond the funder’s budget.

One way around this is to use local consultants who can more inexpensively travel to and from the sites. Another method is for the collaboration to take on some of the evaluator’s responsibilities. While this is still an evaluation cost, they may be able to use another source of funding for this additional expense.

III. USING NATIONAL AND LOCAL EVALUATORS

For a multi-site demonstration, the funders may choose to select one national evaluator, a local evaluator for each site, or both. The decision may rely in part on the budget, the type of collaboration, the amount of variation across the sites, and the type of evaluation methodology being employed.

There are several benefits to having a national evaluator. National evaluators may have more expertise in conducting evaluations, possess a good understanding of methodological issues that arise, and more expertise in collecting data efficiently. In addition, there is a growing number of researchers with direct experience in evaluating community collaborations. Finally, efficiencies are gained by having one evaluation firm collect data and conduct some of the cross-site analysis, reducing the duplication of effort.

Using local evaluators, on the other hand, takes advantage of their existing relationships with other community members and their knowledge of the community, including an understanding of what might work best in the community. In addition, local evaluators have the advantage of being able to meet with other stakeholders on a regular basis, acting as the facilitator as stakeholders develop their theories. Also, as discussed above, they may be able to provide this information at a lower cost to the funder.

Combining a national evaluator with local evaluators has added advantages. The local evaluator may have more day-to-day contact with the sites, conducting most of the field research and
documenting the implementation of the collaboration. They may also be given the task of collecting data and doing some analysis, depending on the skill set of the local evaluators. Assuming a common framework has been adopted across the sites, the national evaluator can conduct the multi-site analysis, synthesizing the results from the local evaluations.

Many of the community collaborations currently being funded employ both national and local evaluators. The relationship between national and local evaluators has been structured differently across these collaborations. For some collaborations, the funder hires the national evaluator who in turn hires the local evaluators and oversees their work. In other scenarios, the funder hires the national and local evaluators and both report directly back to the funder. In the third type of arrangement, the community sites have hired the local evaluators and they work primarily for the collaboration; the national evaluator reports to the funder.
CHAPTER 6: OBSERVING CHANGE OVER TIME

Given the scope of what community collaborations hope to achieve, these initiatives should be allowed time to develop before they are judged a success or failure. Yet, early reports are important in helping point out problems in the implementation, design, or theory so that modifications may be made. Whether long-term changes can be expected to occur within five years or ten years is dependent on the nature of the collaboration.

I. TIME REQUIRED TO PLAN COLLABORATION

There is very little evidence from community-based initiatives to help us understand the time frame required to formulate the policies, strategies, and workplans.

Several demonstrations underestimated the time required for planning the collaboration. For example, in developing RCI, AECF initially allowed for a one-year planning period, but found that by the end of that time only one of their five sites had produced a plan including a manageable number of priorities linked with specific project ideas. They extended the planning period by nine months, and felt that during this period the sites made significant progress toward having well-defined and focused plans, but that even then, further development was necessary.

In describing the difficulties inherent in bringing groups with very diverse perspectives together in the New Futures initiative, AECF noted that the barriers presented by the historical isolation of participants from one another were formidable. Their experience with many of these local collaborations led them to conclude that “broadly representative collaborative decision-making bodies will always need significant time to work together” (The Annie E. Casey Foundation, 1995), and that the inclusion of all stakeholders must occur early in the initiative and consistently throughout it. They found that the time that they allowed for planning of local New Futures initiatives did not allow for the inclusion of all of the relevant stakeholders, and that as a consequence, important perspectives were missed and some key players did not feel that they owed any allegiance to the decisions that emerged.

Certainly, when funders and evaluators are very involved during the initial period, providing guidance and technical assistance, they increase the likelihood that the collaboration will have a workable plan by the end of the planning phase. AECF concluded that the RCI sites could have benefited from more assistance early in managing the planning process. The foundation determined that the site’s plans were not well-specified enough and asked that more clarity be included in the plans developed during the extended planning period. Perhaps if this determination were made earlier, the site could have developed the plan during the initial one-year period.

II. TIME TO CHANGE SYSTEMS AND AFFECT OUTCOMES

The time required to affect outcomes is dependent on the goals of the collaboration. The Jobs-Plus goal to increase employment among public housing residents, using a work-first strategy can be observed within the scope of the evaluation (five years). On the other hand, Healthy Start is a long-term strategy designed to reduce infant mortality over time. GAO concluded that it is likely that the effect of the community intervention will not be observed in the period of the
national evaluation – five years – in part because this reflects only two or three years when the program was fully operationalized (GAO, 1998).

*New Futures* began as a five-year project, but extensions have lengthened it to at least seven years in most sites, and newer AECF initiatives have incorporated longer time horizons. Nine years into the project (four years after *New Futures* hoped to see success), one site, Savannah was able to report positive outcomes. The Foundation determined that the benefits from more careful consideration have outweighed costs of delaying implementation.
BIBLIOGRAPHY


APPENDIX A

PROGRAM DESCRIPTIONS
### Agenda for Children Tomorrow (ACT)

**Demonstration Sites:** 10 New York City (NYC) neighborhoods

**Funder:** New York Community Trust and the United Way

**Funding allocated:** $1.5 million

**Evaluator:** Local evaluator (name unavailable)

**Time Frame:** 4 years

**Program Description:**

In 1990, representatives of the philanthropic, government, health care, human services, legal, and business communities initiated ACT to help low-income people in NYC gain access to improved family-focused and neighborhood-based services. The Oversight Group, comprised of city commissioners, state liaisons from the Governor’s office, foundation and non-profit sector executives, union officials, and consumer and private sector representatives, approved neighborhood selection, set policy, and connected ACT’s staff to experts on particular citywide issues. The ACT Project Coordinator and staff were housed in the Mayor’s office. ACT took existing neighborhood-based resources and coordinated the creation of new ones to aid in comprehensive service planning and the implementation of new delivery systems. It also aimed to make government health and human services more accessible and community driven. ACT does not view itself as a demonstration—it intends to eventually be present in all 59 NYC community districts. Some of ACT’s achievements include: (1) developing a 24 hour NYC Youth line; (2) obtaining a Certificate of Occupancy Waiver from the Department of Health which allowed the Salvation Army to begin construction on an infant daycare center; (3) guiding the deployment of community schools and family preservation sites; and (4) receiving funding from the Community Development Agency for three sites in the amount of $120,000 each. Since its inception, local planners have been tracking the progress on 10 selected goals and documenting any barriers during the planning and implementation phase.

### The Atlanta Project (TAP)

**Demonstration Sites:** 4 neighborhood clusters in Atlanta

**Funder:** The Carter Center along with several corporations and foundations

**Funding allocated:** Not available

**Evaluator:** Emory University

**Time Frame:** On-going

**Program Description:**

In 1991, former President Jimmy Carter initiated TAP to empower urban communities to develop solutions to problems they identify in their neighborhoods and to gain better access to resources. Collaborators in this project include government agencies, service providers, and individuals who are interested in helping. Currently TAP consists of four neighborhood clusters, each serving a population of about 25,000 residents, coordinated around high schools and the elementary and middle schools that funnel into them. TAP policies are emerging as a result of input from government and community leaders. The clusters are managed by a coordinator, who must reside in the area, and an assistant who works with the resident steering committee to develop a strategic plan that includes initiatives that residents want to implement. During the first 5 years of TAP, the project focused on children, youth, and families, economic development, education, health, housing, and public safety issues. When phase 2 of the project began in 1997, TAP focused on four narrowly defined issues that had the potential for broad impact. These issues include: private sector-state relationships in welfare-to-work; the development of afterschool programs for at-risk middle school students; the development of pre-kindergarten programs in underserved neighborhoods; and the creation of health services in or near schools to further child immunizations. TAP was reviewed by a team of evaluators based out of Emory University. Concrete findings were difficult to discern due to its complex design and scope.
### Program Title: Cleveland Community Building Initiative (CCBI)

<table>
<thead>
<tr>
<th>Demonstration Sites:</th>
<th>4 inner-city urban neighborhoods in Cleveland</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Funder:</strong></td>
<td>The Cleveland Foundation; U.S. Department of Housing and Urban Development; Cuyahoga County</td>
</tr>
<tr>
<td>Funding allocated:</td>
<td>Not available</td>
</tr>
<tr>
<td><strong>Evaluator:</strong></td>
<td>Center for Urban Poverty and Social Change</td>
</tr>
<tr>
<td>Time frame:</td>
<td>Established in 1993</td>
</tr>
</tbody>
</table>

**Program Description:** The CCBI was designed to address the issue of urban poverty in four neighborhoods referred to as “urban villages.” Issues to be addressed include: health, education, physical revitalization, multi-cultural strengths, integrated services, labor force development, economic development/entrepreneurial training, and neighborhood image enhancement. Each Village has a Council, composed of residents and stakeholders, which consist of chapters, which operate as committees and working groups. Members of these councils work with evaluators to articulate their theories of change. The evaluation will analyze data collected from informant interviews, resident surveys, self-assessment questionnaires, and agency records to assess whether the initiative achieved the outcomes outlined in CCBI’s preliminary theory of change.

### Program Title: Community Building in Partnership (CBP)

<table>
<thead>
<tr>
<th>Demonstration Sites:</th>
<th>Sandtown-Winchester neighborhood in Baltimore, Maryland</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Funder:</strong></td>
<td>National and local foundations and corporations, the City of Baltimore, and The Enterprise Foundation</td>
</tr>
<tr>
<td>Funding allocated:</td>
<td>$5 million</td>
</tr>
<tr>
<td><strong>Evaluator:</strong></td>
<td>Conservation Company</td>
</tr>
<tr>
<td>Time Frame:</td>
<td>4 years</td>
</tr>
</tbody>
</table>

**Program Description:** In 1990, the residents of the Sandtown-Winchester neighborhood in Baltimore, along with the Baltimore City government, and The Enterprise Foundation, developed the Community Building in Partnership Initiative (CBP). Since then, the project has been formally incorporated as CBP, Inc. The mission of the project is to aid in the total transformation of the failing systems and conditions that have made Sandtown-Winchester one of Baltimore’s most deteriorated neighborhoods. Representatives from the Sandtown-Winchester neighborhood, the City of Baltimore, and the Enterprise Foundation serve as the governance board. CBP focuses on three main areas which include: (1) community building; (2) immediate projects; and (3) program design and planning. The Enterprise Foundation funded the Conservation Company to document the neighborhood transformation process, evaluate all programs, provide feedback, and report findings to all relevant stakeholders.
### Community Partnerships for Healthy Children

<table>
<thead>
<tr>
<th>Program Title</th>
<th>Demonstration Sites: 31 communities in Northern California</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funder: Sierra Health Foundation</td>
<td>Funding allocated: $20 million</td>
</tr>
<tr>
<td>Evaluator: SRI International</td>
<td>Time frame: 10 years</td>
</tr>
</tbody>
</table>

**Program Description:** The Community Partnerships for Healthy Children (CPHC) was designed to aid in improving the health and well-being of children and families in several communities within Northern California. The funders allowed each community to design its intervention plan—keeping the basic focus of the initiative as its framework. After three years, many of the communities had not developed indicators for improved child health—leaving it unclear as to how they would track the progress of their collaborative. Nonetheless, the evaluators determined that the initiative was both successful and unsuccessful. When examining CPHC overall, evaluators found that the viability, extent to which the individual collaboratives were community-based, the commitment of membership, the ability to comply with the basic requirements of the initiative, and the accomplishments made were indicators of success. SRI International, contract evaluators, also noted that if the prescribed Strategic Action Plan—which was to be developed by each collaborative—was the key indicator of success for the initiative, CPHC at its 3-year point would be considered unsuccessful. Still, evaluators and funders could not dismiss accomplishments, such as increasing child care, building swimming pools, and opening dental clinics as a sign that the initiative continues to hold promise.

### Comprehensive Community Revitalization Program (CCRP)

<table>
<thead>
<tr>
<th>Program Title</th>
<th>Demonstration Sites: Four South Bronx Community Development Corporations (CDCs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funder: The Surdna Foundation</td>
<td>Funding allocated: $9.4 million</td>
</tr>
<tr>
<td>Evaluator: Organization and Management Group (OMG)</td>
<td>Time Frame: 5 years</td>
</tr>
</tbody>
</table>

**Program Description:** CCRP is designed to support and strengthen experienced CDCs as they test strategies focused on comprehensive community revitalization. In 1997, CCRP incorporated into an independent non-profit organization that serves as a strategic alliance among the four participating CDCs—Mid-Bronx Desperados Community Housing Corporation, Mid Bronx Senior Citizens Council, Mount Hope Housing Corporation, Inc., and Phipps Community Development Corporation (West Farms). These groups are responsible for more than $500 million dollars of housing in the South Bronx. CCRP, Inc., is governed by a board of directors with representatives from the four CDCs along with three representatives who add additional resources and knowledge. Within CCRP, Inc., each CDC coordinates existing services to bring critically needed facilities, services and programs to the neighborhood. The CDCs seek to bring the following to the neighborhoods: primary health care centers, center-based and home-based Head Start and day care services, school/community programs for students and parents; parenting and self-esteem programs; neighborhood housing rehabilitation, work preparation and placement programs; new business ventures and retail facilities; and the collaboration of community and police to create safer neighborhoods and open spaces. CCRP, Inc. contracted with OMG to document the demonstration phase of the initiative and determine the potential of the premise that supporting mature CDCs as neighborhood intermediaries is an effective approach for achieving neighborhood change. OMG was also asked to assess the significance of this effort and its potential for duplicating it in other communities.
### Program Title: Empowerment Zones/Enterprise Communities (EZ/EC) Initiative

**Demonstration Sites:** Initially, 72 urban communities and 33 rural communities. In January, 1999, HUD named an additional 20 communities as Empowerment Zones.

**Funder:** Federal government

**Funding allocated:** Combined, more than $1.5 billion in performance grants and more than $2.5 billion in tax incentives, with another $3.8 billion available over the next 10 years. All 105 EZ/EC communities are eligible for the tax incentives; each urban zone received $100 million in performance grants and each rural zone received $40 million.

**Evaluator:** Startup evaluation of the urban program conducted by the Nelson A. Rockefeller Institute of Government at the State University of New York. Startup evaluation of the rural program conducted by the University of Tennessee Community Partnership Center. Interim and final evaluations being conducted by Abt Associates.

**Time frame:** Began in December, 1994; planned to continue over at least the next 10 years.

**Program Description:** The key principles of the EZ/EC effort are creating economic opportunity, sustainable community development, community-based partnerships, and a strategic vision for change. The effort provides tax incentives and performance grants and loans to create jobs and expand business opportunities. It also focuses on activities to support people looking for work, such as job training, child care, and transportation. Employers in Empowerment Zones are eligible for wage tax credits, worth $3,000 for every employee hired who lives with in the EZ boundaries. EZ businesses are also eligible for increased tax expensing for equipment purchases. EZ/EC communities are eligible to receive tax-exempt bond financing that offers lower rates than conventional financing to finance business property and land, renovations, and expansions. Communities that apply to become EZ/ECs are required to have residents participate in the application process, and are required to determine quantifiable goals that determine how the money will be spent and what the results of the activity will be.
## Program Title: Healthy Start

**Demonstration Sites:** 13 urban, 2 rural areas

**Funder:** Maternal and Child Health Bureau, HRSA

**Evaluator:** Mathematica Policy Research, Inc. (MPR)

**Time Frame:** 5 years

**Program Description:** In 1991, HRSA launched the Healthy Start initiative. It was established as a demonstration program in communities with high rates of infant mortality. Healthy Start was founded on the premise that communities can best develop the strategies necessary to decrease incidents of infant mortality and low birth weight—especially among high-risk populations. It is designed to integrate community-based, family-centered services—focused on women, infants, and their families—into existing systems of perinatal care. HRSA did not define a specific approach for the individual projects to follow, but the results of the planning phase led to substantial similarities which include: (1) community involvement through a consortium; (2) outreach and case management to identify women, bring them into care, refer them to appropriate services, and track them as they obtain services; (3) a variety of other nontraditional support services, including transportation and nutrition education; (4) enhanced clinical services, building on an existing delivery system; and (5) community-wide public information campaigns. From 1991 to 1997, Healthy Start supported demonstration projects in 22 communities. By 1998, 75 Healthy Start projects had been established. MPR recently completed a comprehensive national evaluation of the demonstration phase of Healthy Start. Since Healthy Start was designed as a long-term initiative to reduce infant mortality overtime, evaluators recognized early on that the effect of the community-based intervention would most likely not be observed in the short period of the evaluation.

## Program Title: Jobs Initiative

**Demonstration Sites:** Six cities—Denver, Milwaukee, New Orleans, Philadelphia, St. Louis, and Seattle

**Funder:** Annie E. Casey Foundation

**Evaluator:** Team from Abt Associates and the New School for Social Research

**Time Frame:** 8 years

**Program Description:** The major goals of the Jobs Initiative are to develop practical ways of increasing the employment of disadvantaged workers (thereby providing national models for welfare-to-work programs, job training for workers, and workforce development for employers) and to improve the prospects for poor families and communities. In addition, the Initiative hoped to increase public interest and confidence in investing in these deeply distressed neighborhoods. If the Initiative is effective, the first signs of success would be increased employment and earnings of participants in the targeted neighborhoods. The Foundation is providing the sites with technical assistance and conferences that allow participants to gather and share information about their reform efforts, organizing jobs programs, and advocating labor-market reforms. At this point, the sites have conducted assessments of the local labor market, formed governing bodies of local employers and other community stakeholders, and developed strategic investment plans to connect job seekers with family-supporting jobs. The evaluation, based on a theory of change approach, will assess the Jobs Initiative’s effects at each site and across sites in the areas of: institutional change and systems reform in terms of how the regional labor market and workforce development system function for disadvantaged job seekers; earnings, employment, and family outcomes for participants in the Jobs Initiative projects; and community outcomes.
<table>
<thead>
<tr>
<th>Program Title: Jobs-Plus</th>
<th>Demonstration Sites: Public housing developments in seven cities: Baltimore, Chattanooga, Cleveland, Dayton, Los Angeles (two developments), St. Paul, and Seattle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluator: Manpower Demonstration Research Corporation (MDRC)</td>
<td>Time frame: Not available</td>
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</table>

Program Description: Jobs-Plus is a demonstration project that was developed to help people living in public housing obtain and maintain employment. The project is attempting to increase work by providing all working-age residents with state-of-the-art employment and training services, financial incentives, and social supports for work. It will strive to help unemployed individuals enter work, those who are underemployed work more consistently, and those with low-paying jobs move on to better-paying jobs and progress in careers. Jobs-Plus focuses on three areas: community revitalization, public housing reform, and welfare reform. The demonstration project places the responsibility of program design and implementation in the hands of public agencies (e.g. Public Housing Authorities, welfare departments, employment and training agencies), and residents. The project includes a comprehensive evaluation that will assess the program’s feasibility, effectiveness, economic costs and benefits, and implications for best practices. This study involves the evaluation of multiple sites with randomly selected comparison groups in each of them. The implementation study will examine what it takes to build and operate effective collaborations and the kind of complex program treatment envisioned for the demonstration. The impact study will determine the effectiveness of Jobs-Plus in increasing residents’ employment and earnings, reducing their use of welfare, and improving their personal and family well-being and quality of life. Finally, the benefit-cost study will estimate the cost of operating Jobs-Plus and analyze the net economic gain or loss created by the program from several different perspectives.
<table>
<thead>
<tr>
<th>Program Title: Neighborhood and Family Initiative (NFI)</th>
<th>Demonstration Sites Detroit, Memphis, Hartford, and Milwaukee</th>
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<tbody>
<tr>
<td>Funder: Ford Foundation</td>
<td>Funding allocated: $125,000 planning grant to each site in the first year. Additional funding provided to each site for 18-22 months beyond the first three-year implementation phase.</td>
</tr>
<tr>
<td>Evaluator: Chapin Hall Center (National evaluation) Local evaluations conducted by individual initiatives</td>
<td>Time frame: First launched in 1990; funding from Ford Foundation to sites for 5 ½ to 6 years</td>
</tr>
</tbody>
</table>

**Program Description:** The goal of the NFI is to “revitalize and empower whole communities and the individuals and families who live in them.” NFI has two principles: (1) neighborhood development projects should attempt to build on the needs of the community, and (2) relationships among social, physical, and economic needs and circumstances should be integrated, and residents and other individuals with a vested interest in the targeted neighborhood should actively participate in the planning and implementation of such a project.

The Ford Foundation selected a community foundation in each of the four cities to oversee the Initiative. Each community foundation selected a target neighborhood within the city, hired a project director, and recruited stakeholders in the neighborhood to serve on a collaborative which was to plan and monitor the implementation of the Initiative. These collaboratives consisted of “grassroots” participants who lived in the neighborhood, “bridge” people (or professionals or business people who may live and/or work in the neighborhood and whose professional affiliation and experience connect them to neighborhood resources and provide a link to the broader community), and “resource” people (or nonresidents, whose purpose on the collaborative is to bring their knowledge, perspectives, connections, and access to resources beyond the target neighborhood).

Technical assistance was provided by the Center for Community Change, based in Washington, D.C., as well as by individual technical assistance providers hired directly by the collaboratives to provide support for specific projects. Projects implemented have included: in Hartford, adding outdoor lighting to neighborhood houses, distributing produce grown in gardens around the area, and developing a summer program for children; in Memphis, forming an organization to help improve the availability of affordable housing; and in Milwaukee, purchasing 33 vacant acres to develop as a national park, and developing a revolving loan fund for individuals and businesses.
**Program Title:** Neighborhood Partners Initiative (NPI)  
**Demonstration Sites:** Central Harlem and South Bronx  
**Funder:** Edna McConnell Clark Foundation  
**Funding allocated:** $200,000 for each neighborhood  
**Evaluator:** Chapin Hall (start-up period), Urban Institute (formal evaluation)  
**Time Frame:** 7 years  

**Program Description:** NPI is a seven-year project which supports five community-based organizations that work with residents and local institutions to improve conditions in neighborhoods in Central Harlem and the South Bronx. Lead organizations set up local offices, hire staff, and select neighborhoods. The organizations involved were two community development corporations, two multi-service organizations, and one grassroots-organizing group. The NPI site established an advisory group whose goals are to guide the planning for the development of a neighborhood vision statement; inform the implementation of projects and programmatic activities in the neighborhood; and engage other community residents and institutions around the goals and activities of the initiative. NPI has several distinguishing characteristics which include: (1) focusing on one to five block areas; (2) placing a strong emphasis on the engagement and ownership of the neighborhood change process by residents and other neighborhood stakeholders; and (3) equipping lead organizations with strengthened organizational capacities. During the 21-month start-up, Chapin Hall reviewed the implementation process. Chapin Hall noted that the five neighborhoods and NPI staff needed more time to develop stronger relationships and better defined outcomes. At the end of this phase, funders felt that without defined goals and measurable outcomes the project was not yet ready to be evaluated.

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**Program Title:** Neighborhood Preservation Initiative  
**Demonstration Sites:** 10 neighborhoods in 9 cities (Boston, Cleveland, Indianapolis, Kansas City, Memphis, Milwaukee, Philadelphia, Saint Paul, San Francisco)  
**Funder:** The Pew Charitable Trusts and community foundations  
**Funding allocated:** $8.5 million  
**Evaluator:** The Nelson Rockefeller Institute of Government  
**Time Frame:** 2 years  

**Program Description:** Neighborhood Preservation Initiative seeks to learn how best to assist residents of diverse working-class neighborhoods strengthen the social, physical and economic assets and capacities that make neighborhoods healthy and viable. In October 1994, the Initiative selected ten neighborhoods in nine cities that represent some of the nation’s largest metropolitan areas (each with a population over one million) and are home to the largest community foundations. The project seeks to build on the strengths of a community as opposed to focusing on overcoming their liabilities. Working-class neighborhoods have three socio-economic characteristics: ownership, employment, and median household income at or near citywide averages. The Nelson A Rockefeller Institute of Government conducted the evaluation of the Neighborhood Preservation Initiative program in conjunction with its on-going study of working and middle class neighborhoods in 15 cities. The evaluation began in 1995 and is a comprehensive assessment of what each Initiative site has accomplished.
**Program Title:** Neighborhood Strategies Project (NSP)  
**Demonstration Sites:** 3 NYC neighborhoods (Mott Haven, Washington Heights, Williamsburg)  
**Funder:** New York Community Trust  
**Evaluator:** The Chapin Hall Center for Children  
**Time Frame:** 6 years

Program Description: NSP is a six-year initiative that works on the basis of three core strategies: increasing resident employment, stimulating local economic activity, and strengthening neighborhood institutions and affiliations. Working on these strategies simultaneously distinguishes NSP from an employment and training initiative that focuses primarily on increasing individual skills, an economic development initiative that focuses primarily on enhancing local opportunity, and a community building initiative that focuses primarily on strengthening social networks and community supports for work. It assumes that the lack of productive work is a function of individual, economic, and community factors—not just one of these alone. Evaluation reports, produced by Chapin Hall, cover the planning phase and the first 20 months of the implementation phase. The first report explores the benefits and challenges of implementing a CCI through a collaborative structure and the second explores NSP’s experimentation with a “coaching” model of technical assistance. A final report will measure the impacts of NSP over the initiative’s six-year life cycle.

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**Program Title:** Neighborhood Transformation/Family Development  
**Demonstration Sites:** 22 cities  
**Funder:** Annie E. Casey Foundation  
**Evaluator:** not selected  
**Time Frame:** not available

Program Description: In 1999, the Annie E. Casey Foundation launched the Neighborhood Transformation/Family Development project. The initiative is based on the fundamental assumption that with the right mix of incentives, investments, and opportunities, neighborhood conditions can be changed to support families and bolster children’s chances of overcoming seemingly insurmountable odds. The project will work with 22 cities – Atlanta, Baltimore, Boston, Camden, Denver, Des Moines, Detroit, Hartford, Indianapolis, Louisville, Miami, Milwaukee, New Orleans, Oakland, Philadelphia, Providence, San Antonio, San Diego, Savannah, Seattle, St. Louis, and Washington – to help stimulate a local movement to put family strengthening at the center of efforts to improve child outcomes. The initiative will work with families, neighborhood leaders, non-profit institutions, public and private sector leaders, grassroots organizations, and faith-based groups. The major components of the initiative include: (1) a public system reform agenda, (2) field-strengthening activities, (3) a public-will building effort, and (4) a set of policy initiatives.
### Program Title: New Futures Initiative

**Demonstration Sites:** Dayton, Bridgeport, Little Rock, Pittsburgh, and Savannah

**Funder:** Annie E. Casey Foundation (AECF)

**Evaluator:** Center for the Study of Social Policy

**Time frame:** Initially 5 years, extended to 7 years, 1987-1994

**Program Description:** This Initiative was based on AECF's belief that services to help the poor would be more effective if they were: better aimed at the prevention or interruption of problems, rather than costly responses; tailored to individual family circumstances and perceptions; flexible in the provision of coordinated, comprehensive responses to interrelated needs; available in neighborhoods and in settings that allow easy access and simplified intake; and respectful, culturally competent, and empowering. The Foundation felt that the systems that determined current practices needed to be changed. Specifically, this would require pooling of funding and program boundaries, decentralization of resources and policy decisions, development of collaborative governing bodies empowered to make decisions across youth-serving systems, enhancement of flexibility, and an agreement on genuine accountability measures for children and families. The emphasis of the program was on locally designed approaches and interventions that were to cut across education, employment, health, and human services, which were to be designed by local collaboratives and which were to help more youth become effective adults. The evaluation of this initiative included an analysis of the degree to which the Initiative brought about long-term institutional change and of student outcomes in the areas of schooling, pregnancy, and employment.

### Program Title: Plain Talk

**Demonstration Sites:** Atlanta, San Diego, Seattle, New Orleans, and Hartford

**Funder:** Annie E. Casey Foundation

**Evaluator:** Population Services International

**Time frame:** 4 years

**Program Description:** Plain Talk is a neighborhood-based initiative aimed at helping adults, parents, and community leaders develop the skills and tools they need to communicate effectively with young people about reducing adolescent sexual risk-taking. The basic principles behind the initiative are that community residents should be central to the decision-making process, residents should come to a consensus about what changes are necessary, communities should have access to reliable information about the problems they are trying to address, and adults should not deny the reality that some youth are sexually active. The project used a survey of youth and adult residents to gather data on community beliefs, norms, and practices, a process that was supplemented with follow-up interviews and focus groups. In each site, Plain Talk staff worked with interested residents to develop their skills as peer educators. These residents then engaged in outreach activities, including scheduled community-wide celebrations around cultural events and formal and informal educational activities. The three-year implementation period has ended, but AECF continues to provide technical assistance resources and small grants to support special projects such as local policy conferences and training conferences for new partners.
<table>
<thead>
<tr>
<th><strong>Program Title:</strong> Rebuilding Communities Initiative (RCI)</th>
<th><strong>Demonstration Sites:</strong> 5 urban communities, in: Roxbury, MA, Philadelphia, Washington, D.C. Denver, and Detroit</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Funder:</strong> Annie E. Casey Foundation</td>
<td><strong>Funding allocated:</strong> Each site received $150,000 for the first year for planning purposes and up to $1.5 million for the three-year capacity-building phase. Sites which successfully fulfill expectations for the capacity-building phase will be invited to apply for funding for the final three-year demonstration phase</td>
</tr>
<tr>
<td><strong>Evaluator:</strong> OMG Center for Collaborative Learning</td>
<td><strong>Time frame:</strong> 7 years</td>
</tr>
</tbody>
</table>

**Program Description:**
RCI’s objectives include: maximizing the capacity and impact of neighborhood resources and institutions; establishing effective neighborhood-based service delivery systems for children, youth, and families; developing capable and effective neighborhood collaboratives to which governance authority could gradually be devolved; improving availability of affordable housing, and improving the social and physical infrastructure of the neighborhoods; and increasing public and private capital investments in the neighborhoods. RCI rests on the belief that a blend of capacity development and systemic reform at the government and neighborhood level is needed to provide for community rebuilding, that establishing a neighborhood governance structure is essential as a place of emergence of community leadership around the rebuilding, and that neighborhood ownership is needed for the process to be sustainable. Foundation funds are channeled through a lead community-based organization (CBO) in each site. The five sites are currently in the three-year capacity-building phase. In all five sites, local collaboratives have been established and have engaged a broad cross-section of community stakeholders in capacity-building activities. The lead CBOs are planning for neighborhood-based human services delivery systems, increasing physical and social infrastructure, and strengthening links with state and local governments to position the community for a role in system reforms. The evaluation of RCI will consist of evaluations of each of the three phases of the Initiative. The planning phase evaluation focuses on: the ability of the sites to establish collaborative structures and processes for Initiative governance; the grantees’ success in “mapping” community needs and assets; the level of local participation in strategic planning for the initiative; the contribution of the AECF in the evolution of the local initiatives; and the sites' ability to plan for, collect, and produce data useful to program management as well as evaluation.
### Program Title: Safe Futures

- **Demonstration Sites:** 4 urban sites (Boston, Contra Costa County, CA, Seattle, St. Louis), 1 rural site (Imperial County, CA), and 1 tribal community (Fort Belknap, MT)
- **Funder:** Office of Juvenile Justice and Delinquency Prevention (OJJDP)
- **Funding allocated:** $8 million
- **Evaluator:** Urban Institute
- **Time frame:** 5 years

**Program Description:** Safe Futures programs are locally based initiatives that seek to prevent and reduce delinquency and victimization by intervening quickly when children and teens encounter problems and by holding them responsible when they commit violent or other crimes. The project is designed to help communities coordinate their programs so that the human service and juvenile justice systems, including health, mental health, child welfare, education, police, probation, courts, and corrections, all work together—creating a continuum of care to respond to needs of youth and families. Although the initiative is relatively new, grantees have taken positive steps in their communities to improve services and create new programs. Several activities have been developed such as quick-response teams of police and community workers to prevent gang violence; peer courts; recreational programs that offer positive alternatives to the streets; “one-stop shopping” for health, counseling, and educational services for youth and families; and special mental health services for families whose daughters are involved in gangs. OJJDP is interested in the development and outcome of each site. The Office awarded a cooperative agreement to the Urban Institute to track the lessons learned at each site.

### Program Title: Safe Kids/Safe Streets

- **Demonstration Sites:** 5 communities (Huntsville, AL; the Sault Sainte Marie Tribe of Chippewa Indians in Michigan; Kansas City, MO; Toledo, OH; and Chittenden County, VT)
- **Funder:** Office of Juvenile Justice and Delinquency Prevention (OJJDP)
- **Funding allocated:** $2.7 million
- **Evaluator:** Westat, Inc.
- **Time Frame:** 18-month budget period, extended based on performance

**Program Description:** In 1996, OJJDP began a new community-based initiative known as the Safe Kids/Safe Streets Program. The project is designed to improve responses to abused and neglected children and their families. Five communities were awarded grants to work to coordinate the management of abuse and neglect cases by improving policies and practices of the criminal and juvenile justice, child welfare, family services, and related systems. In addition, each community has been developing comprehensive community-wide, cross-agency strategies and programs to reduce abuse and neglect and child fatalities that can result. The evaluation of this program is to be conducted in two phases. The first phase will involve the design and implementation of a process and formative evaluation and the design of an outcome evaluation. The second phase—which may be funded through supplemental awards—will involve an impact evaluation. The process and the implementation evaluation designs will be developed in collaboration with the local evaluation teams and local project staff. The national evaluator, Westat, Inc., is expected to provide leadership regarding the evaluation efforts taking place at the funded sites and bring together data and evaluation results into a national evaluation of the basic concepts of the Safe Kids/Safe Streets program.
APPENDIX B

OTHER FRAMEWORKS FOR MEASURING COLLABORATIONS
1. Seven Keys to Successful Collaborations

The National Assembly of the National Voluntary Health and Social Welfare Organizations developed a framework for establishing a successful collaboration. Within the framework are seven key concepts centered on various aspects of participant involvement. The following information highlights the basic premise behind each concept.

**Shared Vision.** Community collaborations typically form to address mutually identified need(s). Interested individuals or groups join a collaboration with differing agendas, but eventually work to develop a common mission or shared vision to address the needs of the collaborative. This unity of purpose enables the group to begin the decision-making process and development of collaborative activities. After the mission and direction of the initiative has been established, it is important for the original participants to help new participants understand and support the shared vision of the collaboration.

**Skilled Leadership.** Leadership is important to the direction and sustain of a collaboration. To achieve this, leaders need to be sensitive to the needs of participants and the outcomes of the collaboration. Maintaining balance between membership needs and expected outcomes requires that leaders have certain characteristics and skills. Some of these include: (1) the ability to guide the group toward the collaboration’s goals while seeking to include and explore all points of view; (2) comfort with consensus building, and small group process; (3) respect in the community and knowledge about the issues the collaboration will address; (4) skill in negotiating turf issues; (5) belief in the process of collaboration; (6) knowledge about the community and organizations in the community; (7) skill and persuasiveness in oral and written communication; and (8) time to commit to leadership.

**Process Orientation.** The gathering of participants with mutual interests and goals is not the end of the collaborative process. Attention must always be placed on the process of including people in the shared decision-making of the collaboration while also focusing on the agreed upon mission. It is inevitable that during the collaborative process conflict will emerge. Yet, conflict can be used productively if it is channeled into useful solutions. Effective communication skills are necessary throughout the entire process of forming collaborations.

**Diversity.** Inclusion and understanding of difference is necessary to the formation of community collaborations. Many community-based initiatives represent the needs of marginalized groups and rely on diversity to develop activities and expected outcomes. The collaborative itself often provides the “common ground” where members from diverse groups can begin tackling issues from their various perspectives—but with a common goal in mind.

**Membership-Driven Agenda.** Collaborations must continually assess whether or not the needs of its members are being met. Members who feel they are vested in the initiative are more likely to help the collaboration grow. In some instances, members will contribute resources (e.g., time,

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space, contacts, in-kind services, or financial resources) which increases feelings of ownership. Again, it is important to maintain balance in regards to contributions from members in order to prevent any distortions in power.

**Multiple Sectors.** A strong community-based collaboration will involve different segments of the community in the proposed initiative. Collaboratives should seek to engage businesses, grassroots groups, minority and ethnic groups, government officials, youth, and service clubs in the process. The diverse partnership may result in creativity, increased understanding, and enhanced political clout.

**Accountability.** Collaborations typically hope to achieve certain specified outcomes. Accountability involves monitoring the initiative’s progress towards reaching those outcomes. By tracking the progress of the project, collaborators can make modifications to efforts when necessary. It is important for members of the collaboration at the outset to develop indicators or benchmarks to measure the initiative’s progress. Attention to accountability early on helps to establish realistic expectations and feasible outcomes.

2. **Together We Can Checklist**

“Together We Can” is a national organization that is involved in leadership development and capacity building initiatives to strengthen children, youth, families, and communities. With assistance from the U.S. Department of Education and the U.S. Department of Health and Human Services, the organization developed a manual that provides guidance on how to create interagency systems—particularly in regards to education and human services. The manual, also entitled *Together We Can*, draws largely on the experience of urban communities; however, the lessons apply to rural communities as well. The guide discusses five stages of development that will enable a community to reach the goal of establishing school-linked services. The manual offers milestones or indicators that can be used to measure the progress of collaborative development. The stages and milestones of the Together We Can collaborative model are highlighted in Table B-1 followed by a brief discussion.

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Table B-1
Together We Can: Stages of Collaborative Development

<table>
<thead>
<tr>
<th>STAGE ONE</th>
<th>STAGE TWO</th>
<th>STAGE THREE</th>
<th>STAGE FOUR</th>
<th>STAGE FIVE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Getting Together</td>
<td>Building Trust &amp; Ownership</td>
<td>Developing a Strategic Plan</td>
<td>Taking Action</td>
<td>Going to Scale</td>
</tr>
</tbody>
</table>

- **STAGE ONE**
  - Decide to Act
  - Involve the Right People
  - Make a Commitment to Collaborate
  - Reflect and Celebrate

- **STAGE TWO**
  - Develop a Base of Common Knowledge
  - Conduct a Community Assessment
  - Define a Shared Vision and Goals
  - Develop a Mission Statement
  - Reflect and Celebrate

- **STAGE THREE**
  - Focus on a Neighborhood
  - Conduct a Neighborhood Analysis
  - Define Target Outcomes
  - Design an Interagency Service Delivery Prototype/Model
  - Develop the Technical Tools of Collaboration
  - Formalize Interagency Relationships
  - Reflect and Celebrate

- **STAGE FOUR**
  - Agree on a Strategy for Selecting, Training, and Supervising Staff
  - Implement an Inclusive Outreach Strategy
  - Incorporate Sensitivity to Race, Culture, Gender, and Individuals with Disabilities
  - Evaluate Progress
  - Reflect and Celebrate

- **STAGE FIVE**
  - Adapt & Expand the Prototype/Model to Additional Sites
  - Develop a Pool of Collaborative Leaders, Managers, and Service Delivery Personnel
  - Change Undergraduate and Graduate-Level Training in Colleges and Universities
  - Deepen the Collaborative Culture
  - Devise a Long-Range Financing Strategy
  - Build a Formal Governance Structure
  - Build and Maintain a Community Constituency
  - Build and Maintain a Community Constituency
  - Promote Changes in the Federal Role
  - Reflect and Celebrate
Stage One: Getting Together

- **Decide to Act:** The process begins when a small group *decides to act*. Some community collaborations form when state officials encourage or require agencies they oversee to organize interagency task forces, councils, or committees to help them plan together. Others emerge as the result of available state or foundation funds to design and demonstrate new methods of service delivery—requiring close local collaboration.

- **Involve the Right People:** After deciding to act, organizers must identify and bring together all the potential players who have a stake or role in the initiative. Potential players could include groups and organizations that represent people who live in the community, use its resources, provide services, set policy, or rely on the community for its employees and revenue. When working to *involve the right people*, organizers should look for people who bring clout, commitment, and diversity to the table.

- **Make a Commitment to Collaborate:** The next major task for the collaborative’s partners is to realistically decide whether or not they are ready for change. Can the group *make a commitment to collaborate* by agreeing on a unifying theme, establishing shared leadership, setting ground rules, and securing financial resources for the planning efforts? If a true partnership is to develop, all the key players involved must clearly understand what is expected of them. Collaboration requires that partners put aside individual agendas, organizational and personal differences, and make a long-term commitment to common goals.

- **Reflect and Celebrate:** Through Stage one, partners should reflect on their work and celebrate their achievements. At this point, partners can ask themselves questions such as:
  
  1. What factors motivated people to participate in the collaborative?
  2. Who chose not to participate? How can the collaborative engage them in the future, and what does their absence mean?
  3. What did partners learn about collaboration from their efforts to secure staff and other resources for the collaborative’s planning?

Stage Two: Building Trust and Ownership

- **Develop a Base of Common Knowledge:** In the most effective collaboratives, partners take time to understand each other’s systems and explore their differences. Partners *develop a base of common knowledge* by learning as much as possible about each other’s beliefs, goals, objectives, cultures, and working constraints.

- **Conduct a Community Assessment:** In addition to partners within collaboratives learning about one another, the collaborators need to know how the targeted populations fare under the current system and how effectively community services meet their needs. To gather this information a collaborative should *conduct a community assessment* to fully capture all
factors—environmental, social, political, and economic—which may influence the overall
initiative.

- **Define a Shared Vision and Goals:** By this point, the collaborative should have collected
information about the community. Nevertheless, each partner may have a different idea about
the findings from the assessment. Important to developing a sense of ownership is having
collaborators define a shared vision and goals. As partners work to define a common vision,
the collaborative may want to engage a third-party facilitator in the process.

- **Develop a Mission Statement:** Upon defining its shared vision, a collaborative is ready to
define its mission and its relation to other decision-making entities in the community. When
a collaborative develops a mission statement it specifies its goals and its responsibility for
planning and setting priorities, allocating resources, and maintaining accountability for
outcomes. Partners now can begin to act on their vision and mission in the community.

- **Reflect and Celebrate:** At this point, partners should pause and reflect on what they have
learned by asking such questions as:

  1. What broader lessons can be drawn from building a base of common knowledge?
  2. What did the collaborative learn from the process of building a shared vision? What was
     hard?
  3. How can partners use the data that has been collected about the target population to better
     enhance the goals of the initiative?

**Stage Three: Developing a Strategic Plan**

- **Focus on a Neighborhood:** Partners must understand how complex delivery systems work.
By examining the entire system as it affects a targeted neighborhood and by creating a
prototype of improved service delivery in that single area, a collaborative can learn the
lessons necessary to achieve large-scale system change.

- **Conduct a Neighborhood Analysis:** Upon selecting a geographic area, partners should
conduct a neighborhood analysis. The analysis should profile the history, racial and ethnic
composition, cultural and language diversity, and primary risk factors of its target population.
It should also catalog the assets of the neighborhood such as private and nonprofit
organizations (e.g., higher education institutions, hospitals, and human service agencies),
public institutions and services, and physical resources. While conducting the analysis, key
community leaders and those who have the potential to become strong advocates of
community needs should be identified.

- **Define Target Outcomes:** In order for community initiatives to be a force of change, the
collaborative must define target outcomes. It needs a clear idea of the specific outcomes it
intends to produce and a method for holding itself accountable for achieving them. At the
beginning of this stage, partners need to revisit the indicators developed in Stage two and
choose the ones they intend to address in their service delivery design. Target outcomes need only to be clear enough to focus decisions about service delivery design.

- **Design an Interagency Service Delivery Prototype:** Partners can use several sets of criteria when designing an interagency service delivery model. Collaborators should consider what services and service delivery designs are most likely to lead to a system that is comprehensive, preventive, integrated, developmental, flexible, sensitive to race, culture, gender, etc.

- **Develop the Technical Tools of Collaboration:** Partners should ask what tools can be developed to reduce barriers to efficient and effective service delivery. Some of these tools may include case management systems, intake and assessment systems, and management information systems. Partners should also develop the techniques for capturing data from these tools.

- **Formalize Interagency Relationships:** Upon designing the service delivery model, partners should create a complete plan for designing and implementing it. As part of the plan, partners must negotiate and formalize agreements among themselves to address a range of issues. These agreements are written pacts signed by key parties within the collaborative and specific outside agencies that detail what will be done, by whom, and when.

- **Reflect and Celebrate:** At this point, partners should pause and reflect on what they have learned by asking such questions as:

  1. What did the collaborative learn from doing the neighborhood analysis that could be applied at future sites?

  2. What did partners learn about effectively involving the consumers of services in the planning of new service delivery strategies? How will the collaborative build on those lessons in the future?

**Stage Four: Taking Action**

- **Agree on a Strategy for Selecting, Training, and Supervising Staff:** Partners must now think about what new patterns of service delivery really mean. Thoughtful consideration must be given to selecting, training, and supervising staff. Potential staff members must clearly understand the comprehensive nature of their positions and how the new position may differ from current or past job descriptions. Staff must also be committed to the vision.

- **Implement an Inclusive Outreach Strategy:** Community initiatives can employ community residents as outreach specialists to introduce members of the community about the availability of new or improved services. People in the community may assume that nothing has changed. Collaborative staff must use creative forms of communication to let members of the community know how to access and receive services from the collaboration.

- **Incorporate Sensitivity to Race, Culture, Gender, and Individuals with Disabilities:** Partners must reaffirm the importance of sensitivity by examining their own racial and
cultural attitudes, identifying the strengths and special needs that arise within groups from specific cultural backgrounds, and design service delivery strategies that build on these differences.

- **Evaluate Progress:** Continual evaluation allows partners to see how well the collaboration is doing. After the initiative has been in place for a period of time, staff should conduct an **outcome evaluation** to determine how the intervention is working. A comprehensive evaluation plan will track the process of the implementation and the outcomes that result.

- **Reflect and Celebrate:** At this point, partners should reflect to ensure that the initiative’s service delivery and the ongoing work of the collaborative is fine-tuned and focused on its vision. Questions to ask could include:
  1. What are the lessons of implementation that should be captured for the future?
  2. What does the evaluation reveal about the collaborative? How can partners respond to the lessons that are emerging?

**Stage Five: Going to Scale**

- **Adapt and Expand the Prototype to Additional Sites:** In this stage, the challenge is to **adapt and expand the initiative** for other communities to adopt. Advocating to change systems is a difficult process. It is likely that the initiative will face resistance from those who feel threatened by systems change. Persistence at this point will yield deeper and wider changes in service delivery.

- **Develop a Pool of Collaborative Leaders, Managers, and Service Delivery Personnel:** Systems change demands leaders who can hold fast to a collaborative’s vision, battle bureaucracies, share power, and provide consistent direction. Thus, partners must continue to **expand the pool** of agency executives, managers, and line staff able to implement the mission of the initiative.

- **Change Undergraduate and Graduate-Level Training in Colleges and Universities:** Service integration must be taught at the postsecondary level. If interagency collaborative strategies are to work and be expanded, students at the undergraduate and graduate level must be better exposed to course work and seminars addressing broader themes of collaboration.

- **Deepen the Collaborative Culture:** The cultures of all institutions and agencies in the collaborative must change or adapt to the shared vision. Partners can use the collaborative’s vision as a framework for explaining the objectives and activities of the initiative.

- **Devise a Long-Range Financing Strategy:** Partners need to develop permanent, **long-range funding strategies** to sustain an initiative. This may require technical assistance, political expertise, and close cooperation from state and local agencies.
• **Build a Formal Governance Structure**: To ensure the collaborative can take a leadership role, a _governance structure must be established_. A collaborative arriving at a stage five represents the interests of many different sectors in the community—but does so without any legal authority. Partners must determine whether or not the collaborative has a sufficiently formal and stable structure so that its activities may continue.

• **Build and Maintain a Community Constituency**: Partners need to think about promoting the purpose and goals of the initiative beyond the boundaries of stakeholders involved in the initiative. Social marketing, like marketing in the private sector, involves designing a needed and wanted product and promoting the product to those who will support and use it.

• **Promote Changes in the Federal Role**: Depending upon the nature of the community initiative, federal requirements can hinder the ability of states to organize funding and service delivery for certain populations. Nonetheless, the collaborative can _encourage the federal government_ to do several things such as: waive specific regulations that impede service delivery, and implement policy that promotes more integrated and comprehensive services.

• **Reflect and Celebrate**: By this point, partners should be familiar with the reflection process. Celebrating will allow collaborators to use their successes to make a case to the community, reflect on the process, and ponder future challenges in creating a the initiative.
3. **Communities Working Collaboratively for a Change**

The purpose of this collaborative framework is to provide a theoretical and practical base for implementing social change. It was developed to help transform power relations within and among large public, private, and non-profit institutions and between such institutions and community and neighborhood-based organizations. The vision of and processes for societal change described in this framework are embodied in a concept called “collaborative empowerment.” Collaborative empowerment advocates that those affected by a collaborative change effort should be full partners in decisions made about it. Discussion of the framework is divided into three parts: (1) collaboration as a developmental continuum of change strategies, (2) multisector collaboration as a comprehensive continuum from social service to social justice, and (3) designing and implementing multisector collaboration. The principles behind each of these process models are summarized below:

**Collaboration as Developmental Continuum of Change Strategies**

Collaborating is defined here in relationship to three other strategies for working together: networking, coordinating, and cooperating. The definitions build upon each other along a developmental continuum of complexity and commitment which eventually leads to collaboration.

**Networking**: Networking is the exchanging of information for mutual benefit and is considered to be the most informal of the inter-organizational linkages. This is reflective of an initial level of trust, limited time availability, and reluctance to share space. Example: A hospital and community clinic exchange information about prenatal services.

**Coordinating**: Coordinating is the exchanging of information and the altering of activities for mutual benefit to achieve a common purpose. This requires more organizational involvement than networking, which involves more time, higher levels of trust, and some need to share space. Example: A hospital and community clinic exchange information about prenatal services and decide to alter service schedules so that they can better meet the needs of common clients.

**Cooperating**: Cooperating is the exchanging of information, altering of activities, and sharing of resources for mutual benefit to achieve a common purpose. It requires greater organizational commitments than networking or coordinating and, in some cases, may involve written agreements. Shared resources may include human, financial, and technical contributions such as knowledge, staffing, physical property, access to people, money, etc. A great deal of time, high levels of trust, and significant access to each other’s space is needed. Example: A hospital and community clinic exchange information about prenatal services decide to alter service schedules, and agree to share physical space and funding for pre-natal services so that the hospital and community clinic can better meet the needs of clients.

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Collaborating: Collaborating is defined as exchanging information, altering activities, sharing resources, and enhancing the capacity of another for mutual benefit and to achieve a common purpose. The largest difference between collaborating and cooperating is the willingness of organizations (or individuals) to enhance each other’s capacity for mutual benefit and a common purpose. In this instance, each organization wants to help its partners become better at what they do. Organizations will share risks, responsibilities, and rewards. This takes a great deal of time, very high levels of trust, and extensive use of common space. Example: A hospital and community clinic exchange information about prenatal services, decide to alter service schedules, share physical space and funding for prenatal services, and provide professional development training for each other’s staff in areas of their special expertise so that they can better meet the needs of clients.

Multisector Collaboration as a Comprehensive Continuum from Social Service to Social Justice

Multisector collaboration is defined here as a voluntary, strategic alliance of public, private, and non-profit organizations to enhance each other’s capacity to achieve a common purpose by sharing risks, responsibilities, resources, and rewards. Seven elements of multisector collaboration require attention if it is to reach its social change potential. These elements include:

1. Acknowledging the role of adult development, and disparities in maturity levels among individual participants;
2. Understanding and responding to cultural differences in values, and methods of communication, and the tension between exclusivity and inclusivity;
3. Providing opportunities for effective small group interaction, conflict resolution, and group problem solving;
4. Understanding, designing, and facilitating processes in which multiple organizations can communicate and effectively work together;
5. Encouraging perspectives and contributions from public, private, and non-profit organizations, and fostering the most appropriate roles and responsibilities for each organization and sector on particular issues;
6. Discussing, assessing, and acting upon common viewpoints about the larger political, economic, social, and cultural context in which multisector collaboration takes place; and
7. Emphasizing the contributions multisector collaboration can make in encouraging democratic practices within and among organizations and in changing values in the larger society.
Designing and Implementing Multisector Collaboration

The success of many community-based initiatives suggests that the ownership of the social change process is among the most important of its characteristics. Ownership can be enhanced or limited depending upon how collaboration is designed and implemented. Two basic ways of designing and implementing multisector collaboration are Collaborative Betterment and Collaborative Empowerment. Each has particular effects on community ownership, self-determination, and long-term sustainability of the collaborative’s efforts. Each are briefly discussed below.

Collaborative Betterment: Collaborative betterment begins outside the community within public, private, or non-profit institutions and is brought into the community. Community involvement is invited into a process designed and controlled by larger institutions. This model is best illustrated by describing seven of its basic activities. These include:

- Initiating institutional discussions;
- Conducting mutual assessment of the problems and agreeing on a shared mission;
- Developing a planning process to gather necessary data and to design administrative structure;
- Including community representation;
- Seeking agreements on action plans;
- Implementing action plans in community settings; and
- Concluding the collaborative’s work.

Collaborative Empowerment: Collaborative empowerment requires a formally organized collaborative process, from less formalized community-based collaborative approaches. This model is best viewed as a planning framework open to modifications and improvements appropriate to particular community circumstances and settings. Some of the key activities include:

- Discussing assumptions, beliefs, and values;
- Assessing trends;
- Linking priority issues or problems with opportunities;
- Clarifying the community’s purpose and vision for collaboration;
- Examining what others have done;
- Organizing a community power-base;
Strategically identifying partners;

Convening and formalizing the collaborative;

Establishing governance and administration;

Ensuring shared power;

Offering contributions and overcoming barriers;

Formulating goals;

Linking goals to objectives or action plans;

Implementing plans and securing staffing;

Evaluating the collaborative; and

Concluding the collaborative with ongoing capacity.
4. **Collaborations As a Means Not an End**

The purpose of this framework is to offer a way to think about collaboration as a strategy for successful service delivery—particularly for needy children and families. The basic concepts for the framework are based on the author’s research on welfare agencies and children’s services. The following information offers a brief synopsis of elements that enable a collaboration to be successful.

**Elements Of Successful Collaboration**

- **Redefined and Overlapping Missions.** Agreeing to a shared mission is an important indicator that partners are committed to the initiative. Collaborating organizations manage to enlarge their missions beyond the limits of their individual agencies by identifying significant and common political problems or opportunities.

- **Conflict Resolution.** Developing a way for collaborators to voice their concerns is key to the success of collaborations. Effective collaborations are realistic about the joining of organizations or individuals who have a history of tense interactions. To address power struggles, turf issues, or even uncooperative personalities, partners within a collaboration must collectively develop ongoing mechanisms for conflict resolution.

- **Commitment of Managerial Time.** Strong leadership is significant to the development and promotion of community collaborations. Managers from partner organizations must devote considerable time and attention to the development of the collaboration. This not only involves spending time within their individual organizations working on the initiative, but also working from outside as a representative of the collaboration.

- **Role of Personal Relationships.** Managers and service deliverers or front line staff must cultivate relationships in order for a collaboration to develop and evolve.

- **Exchange Relationships.** Collaborating agencies will typically have something they can share or exchange with one another that is reflective of their commitment to the collaborative process.

- **Involvement of Families and a Broad Spectrum of the Community.** It is important to involve the target population for intervention in all stages of collaboration – from planning to service delivery.

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5. **Collaboration: What Makes It Work**

This collaborative framework is based on research conducted by the Wilder Foundation. The purpose of the research was to review and summarize the existing collaboration research literature that focused on factors that influence collaboration success. After carefully reviewing over 133 studies, researchers identified 19 factors that influence the success of collaboration. The factors are grouped into six categories: environment, membership, process/structure, communications, purpose, resources. The following information offers a brief synopsis of the collaborative framework.

### Factors Influencing The Success Of Collaborations

1. **Environment:**
   - History of collaboration or cooperation in the community
   - Collaborative group seen as a leader in the community
   - Political/social climate favorable

2. **Membership:**
   - Mutual respect, understanding, and trust
   - Appropriate cross-section of members
   - Members see collaboration as in their self-interest
   - Ability to compromise

3. **Process/Structure:**
   - Members share a stake in both process and outcome
   - Multiple layers of decision-making
   - Flexibility
   - Development of clear roles and policy guidelines
   - Adaptability

4. **Communication:**
   - Open and frequent communication
   - Established informal and formal communication links

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5. Purpose:
   • Concrete, attainable goals and objectives
   • Shared vision
   • Unique purpose

6. Resources:
   • Sufficient funds
   • Skilled convener
APPENDIX C

EXAMPLES OF LOGIC MODELS
Figure C-1
Theory Model
Conceptual Model of Family Support

Family Characteristics
- Family Support Approach/Principles
  - Program Activities
    - Child-Focused Activities
    - Family-Focused Activities
    - Parent-Focused Activities
    - Community-Focused Activities
  - Processes
    - Program/Family Interactions
    - Interactions Among Families’ Members
    - Interactions Among Families
    - Family Interactions with Community Institutions
  - Community Well-Being
    - Safe and Nurturing Community Environment
    - Adequate Community Resources
    - Strong Community Social Support Networks

Community Characteristics
- Family Well-Being
  - Adult Strengths
  - Safe and Nurturing Home Environment and Relations
  - Adequate Family Resources
  - Strong Family Social Support Networks

- Child Well-Being
  - Healthy Physical, Social, Emotional, Cognitive/Language Development
  - School Success
  - Development of Social Responsibility
  - Adoption of a Healthy Lifestyle


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## Figure C-2

### Outcomes Model

**Community Health Partnership Program Logic Model**

<table>
<thead>
<tr>
<th>For Whom</th>
<th>Assumptions</th>
<th>Process</th>
<th>Outcomes</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medically uninsured individuals and families</td>
<td>Client-centered community-based, and needs-driven</td>
<td>Case management procedures are developed</td>
<td>10% increase in client use of clinics</td>
<td>Improved health outcomes for unserved and underserved individuals and families throughout the county</td>
</tr>
<tr>
<td>Underinsured individuals and families</td>
<td>Integrated health and psychosocial services</td>
<td>Expertise and skills are shared</td>
<td>20% increase in referrals between partner agencies</td>
<td></td>
</tr>
<tr>
<td>Unserved individuals and families</td>
<td>Accessible to all low-income people who need care</td>
<td>Referrals are documented and tracked</td>
<td>10% decrease in client no-shows in clinics</td>
<td></td>
</tr>
<tr>
<td>Underserved individuals and families</td>
<td>Collaboration among partners to eliminate barriers to services</td>
<td>Grant is leveraged to increase sustainability</td>
<td>20% increase in referral completion rate</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Advocating for the health needs of people and communities</td>
<td>Ongoing evaluation is conducted</td>
<td>30% increase in number of clients who successfully receive appropriate services</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Insurance benefits are increased</td>
<td>All clients have case management objectives</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Members of partnership are cooperating</td>
<td>Unmet needs and gaps in services are identified</td>
<td></td>
</tr>
</tbody>
</table>
## Figure C-3
### Calhoun County Health Improvement Program Logic Model

<table>
<thead>
<tr>
<th><strong>A. Required Input/Resources</strong></th>
<th><strong>B. Planning Phase Activities</strong></th>
<th><strong>C. Planning Phase Outcomes</strong></th>
<th><strong>D1. Short-Term Implementation Phase Activities</strong></th>
</tr>
</thead>
</table>

### A. Required Input/Resources
1. Community leaders committed to the development of a shared vision for improved health status county-wide (A-1-4).
3. Philosophy of continuous program improvement through shared, data driven decision-making and capacity building (A-1-5).
4. Neutral group to catalyze and integrate the reform dialogue into required action.
5. Neutral fiscal agent/convener and community financial support sufficient to sustain activities post-grant (A-2).
6. Technical expertise on insurance, health care, community advocacy, and telecommunication issues (A-1,5).
7. Strategic planning, management, marketing evaluation, and public relations expertise (A-3-6).

### B. Planning Phase Activities (1994-96)
1. Establishing community decision-making process (B-2).
2. Establishing administrative structure for program (B-3).
3. Establishing workgroups to gather community input and recommend improvement plan (B-4).
4. Conduct community meetings to gain feedback/sanction for vision and planning (B-1).
5. Develop strategic plan to achieve community derived vision for improved health status (B-5).
6. Design and implement preliminary needs assessments, communication and outreach activities (B-5).
7. Linkages formed among existing community leaders/stake-holders (C-1).
8. Structure and staff for implementation established (C-2).
9. Implementation teams formed (C-3).
10. Community vision for systemic health care reform drafted and approved (C-6).

### C. Planning Phase Outcomes (1994-96)
1. Policy changes—health plans, data exchange, service integration, Medicaid-identified to drive planning and aid implementation phase (C-5).
2. Community funding provided to support telecommunications network and other activities (C-3,5,6).
3. Public support evident for community derived vision (C-4,6).
4. Development, pilot testing, and promotion of shared decision-making model (D-5).
5. Build stakeholder capacity to influence local policy through recruitment and education (D-6).
6. Consumers, payers, and providers sought and encouraged to serve together on CCHIP convened boards/working committees to achieve common goals (D-1,2,6).
7. Model development—community access/converge issues identified by research (D-3).
8. Public relations, marketing, and consumer advocacy programs developed to support enrollment strategy (D-4,6).
9. Development of exchange protocols that support expansion of shared network (D-3,4,6).
10. Development of training and support services to facilitate service delivery and growth (D-3,4).
11. Contract with CCHIP to implement ongoing community health assessment (D-3,4,6).
12. Support provided for community leadership of health service improvement projects (D-1,2).
13. Development of training and evaluation activities to build capacity of health promotion organizations (D-2,6).
### Figure C-3 (continued)

#### Activities Model

**Calhoun County Health Improvement Program Logic Model**

<table>
<thead>
<tr>
<th>D2</th>
<th>Short-Term Implementation Phase Outcomes</th>
<th>E</th>
<th>Intermediate-Term Implementation Phase Outcomes</th>
<th>F</th>
<th>Long-Range Outcomes</th>
<th>G</th>
<th>Desired Social Change</th>
</tr>
</thead>
</table>
| **(1996-97)** | 1. Shared decision-making model disseminated to local health care organizations (E-1,2).  
2. Improved capacity of Membership Organization to influence public policy (E-1,3).  
3. Improved communication and inter-organizational relations attributed to project activity (E-2).  
4. Strategic planning assists stakeholders to achieve their shared vision—improved health status in Calhoun County (E-3,4).  
5. Third party administrator contract solicitation/award guided by Health Plan Purchasing Alliance board criteria (E-4).  
6. Healthplan contracts solicited by the Health Plan Purchasing Alliance Board (E-4).  
7. Information exchange protocols and technological/administrative infrastructure have the capacity to support service delivery (E-4).  
8. Training and support contribute to Health information Network system expansion (E-4).  
9. Community health assessment data used to inform ongoing community health care decision making (E-4).  
10. “811” primary care management and referral operational (E-4).  
11. Increased local capacity to integrate health services (E-4).  
12. Neighborhood health status improvement projects operational and supported by the community (E-4). | **(1997-98)** | 1. Local health care organizations increase use of shared decision making.  
2. Research based community advocacy and influence molds public policy to impact community health status.  
3. Payers and providers progressing toward coordination of resources and improved dispute resolution.  
4. Improved access/coverage for the under and uninsured in the community.  
5. Increased number of health plan contracts secured.  
7. Health Information Network provides leverage for health care improvement.  
8. Infrastructure and resources for sustaining periodic community health assessment in place.  
9. Increased integration of health care delivery systems.  
10. Primary care providers active in research-based disease management program.  
11. Increased access/participation – health promotion and primary care.  
12. Community organizations make substantive contributions and provide ongoing support for health and primary care promotion.  
2. Community administrative process which supports local points for health data, policy, advocacy, dispute resolution, and resource coordination.  
3. Community-wide coverage with access to affordable care within a community-defined basic health service plan with a strategy to include the under- and uninsured.  
4. Community-based health information systems which include performance monitoring, quality and cost effectiveness measurement, accessible records, and consumer satisfaction.  
5. Community health assessment – utilizes community health profiles and indicators of access, health status, system resource performance and risk.  
6. Comprehensive integrated health delivery system that elevates the roles of health promotion, disease prevention, and primary care, integrates medical, health, and human service systems. | **Desired Social Change** | 1. Inclusive decision making.  
2. Increased efficiency of health care system.  
3. Improved health status. |