An Impact Statement Approach for Nonprofits

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What is an impact statement and why use it?

Often, nonprofit evaluators feel stuck between unwieldy, costly methods and those that feel shoddy when leaned up against field gold standard or graduate school expectations.

Health Impact Statements can be used as a bridge in scenarios where there is established evidence for the underlying methods used in the intervention, but limited ability to measure long-term outcomes in the target population.

According to the Center for Disease Control, a Health Impact Statement is "a brief summary in lay terms of the result of an intervention, program, or policy that contributed to a measurable change in health, behavioral, or environmental outcome in a defined population."(NCCDPHP) It includes a description of the problem, the intervention and the change in outcomes, behavior or environment in the defined population. Most relevant, HISs can integrate existing evidence to explain how specific interventions fit with long-term outcomes.

While the HIS process is typically used for state programs and grants, the case study detailed here considers how it can benefit a nonprofit with limited budget and staff capacity for research and evaluation and other challenges including variation in program implementation.

More than a method for satisfying funders, a HIS approach can direct how an organization thinks about its work and ultimately increase impact while building a foundation for more rigorous future research.

Description of organization and other context

Colorado CASA (Court Appointed Special Advocates) is an independent 501(c)3 membership organization with a vision that every child in Colorado has a voice and a hopeful future. CASA programs train and supervise CASA volunteers (CVs) appointed by judges to provide best interest advocacy to children who have experienced abuse or neglect. CVs work closely with families and case professionals to ensure the child's needs, strengths and best interests are represented in court and that beyond court the child is receiving appropriate medical care and education, has opportunities to stay connected with siblings and other relatives, and to participate in activities that are evidence-based to build resiliency and improve long-term wellbeing. CASA programs exist in 18 of 22 of the judicial districts in Colorado and 49 states nationally.

In Fall, 2019, Colorado CASA received a grant to hire a Program and Data Evaluator for the first time, bringing the total CO CASA staff to 3 FTE. While the programs were eager to jump into proving their impact, the evaluator advised a slower approach, starting with boring and necessary, theory or change, logic models, and a look at program's routine data collection. She considered how the programs could work toward outcomes and impact data with the limited capacity and funding for research and evaluation.

Map of CASA Programs in Colorado Advocates for Children Arkansas Valley CASA-CASA of So.. CASA of Adams and Broomfield Co... CASA of Jefferson and Gilpin Coun... CASA of Larimer County CASA of Mesa County CASA of Pueblo-CASA of Southern... CASA of the 7th Judicial District CASA of the Continental Divide CASA of the Ninth CASA of the Pikes Peak Region Child Advocates - Denver CASA Heart of Colorado CASA -CASA of .. La Plata-CASA of the Southwest Life Stories Child & Family Advocacy Montezuma/Dolores-CASA of the S... Northwest Rocky Mountain CASA Voices for Children of Boulder County © 2020 Microsoft Corporation Terms

Steps

Define problem
your program
exists to address &
how your program
addresses.

Review existing research that relates to the problem and your intervention —what is already evidence-based?

Put it together: what evidence exists to support your program?

Align: consider theory of change, logic models, implementation, etc.

Build data collection
system/strategy that aligns
with how intervention fits
the evidence.

Consider organizational learning: do the new metrics/impact require training, organizational learning, new talking points, etc?

Tips:

- Engage stakeholders from start of process, especially challenging ones.
- Find evidence using peer reviewed journals and evidence-based clearinghouses.
- Use the typical evaluation tools including theory of change and logic models.
- Consider the many purposes of the data and how what you collect can serve dual purposes, especially This will mean more stakeholders invested and engaged.
- ❖ Don't let ideal block progress—data is for all and us. Start with the resources and capacity available and keep the long-term goals in mind.

Our CASA example

Problem: Children in the child welfare system face high levels of instability, trauma and toxic stress that have short and long-term consequences. Compared to the average child, they are more likely to experience physical and mental health problems, less likely to graduate high school, less likely to attend or graduate college, more likely to have a delinquency case, less likely to have stable future employment, and more likely to be homeless or lack stable housing.

Existing evidence: Consistent, caring adults and concrete supports during times of need are proven to improve outcomes for children who experience abuse and neglect.

How our intervention fits w/ evidence: CVs are caring adults and their task is to increase resources and support for children.

Thinking about alignment: While in the past, CASA programs have emphasized case outcomes including case length and # of moves, evidence suggests that CVs may have more impact around increasing protective factors that contribute to resilience.

Get intentional with data collection: We built a data collection strategy to track protective factors at start, during and end of case, and CASA advocacy actions. While we still care about child moves and length of case, they are variables that CVs provide support around but are generally less able to impact.

Learning now and through process: Collecting regular data on key intervention components has led to learning, collaboration increased standardization networkwide. It has reinforced the components of the CV role evidenced to be most critical for impact. CVs now regularly reflect on children's needs and strengths in the key domains and account for their own advocacy actions, which we believe supports higher-quality advocacy.

Benefits

- By measuring what evidence suggests matters most, we are heightening network attention to these areas, which may improve implementation and lead to better results for those served.
- By building a foundation of data aligned with an evidence-based framework (in the case of CASA Risk and Protective Factors) we set-up the organization for success when opportunities arise for more rigorous external research.

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