

Using Evaluation for Broad-Scale Community Planning

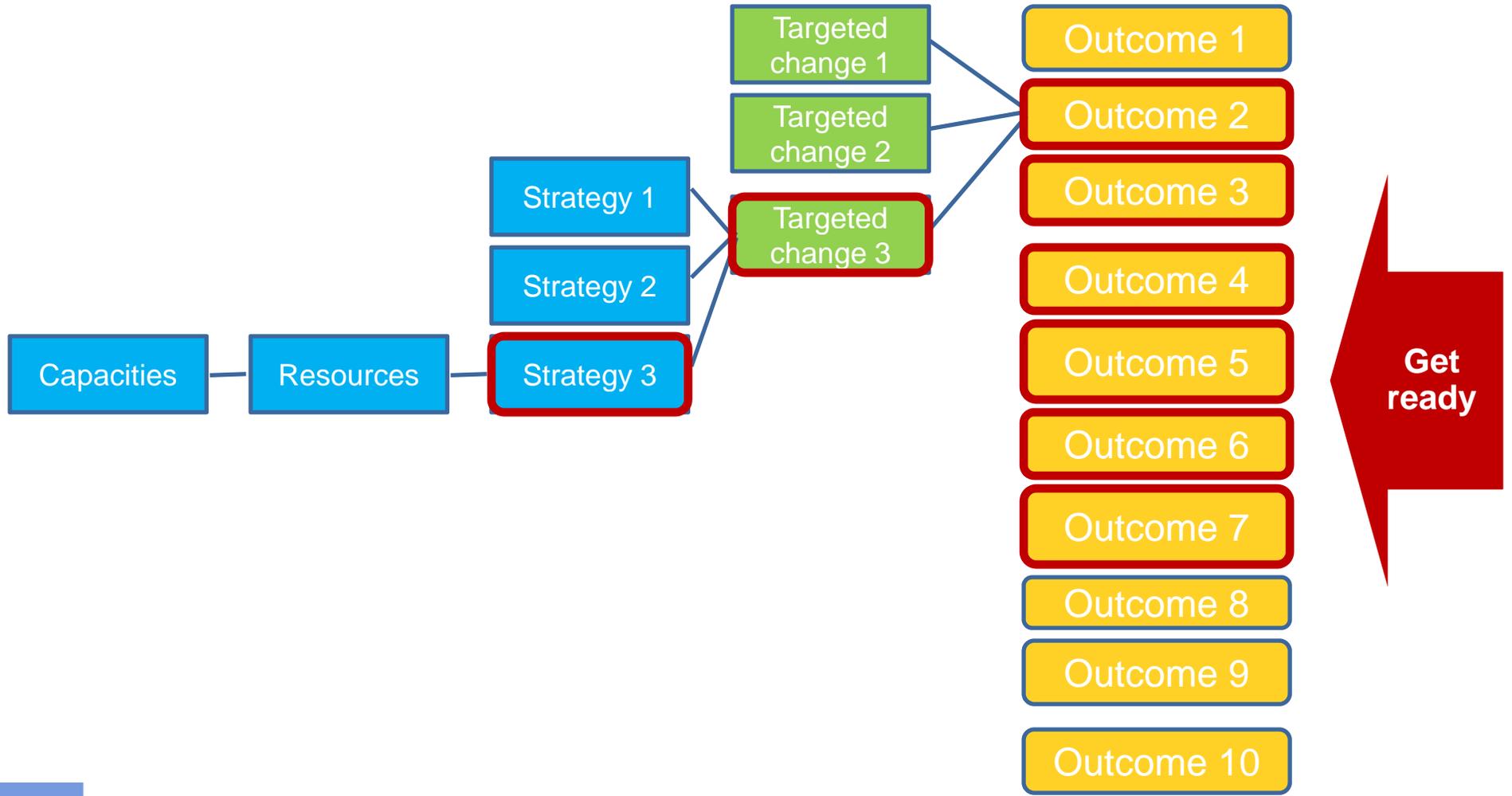
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AEA
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Logic models for planning

- **A tool to help your community figure out how to achieve your goals**
- **Helps manage the complexity**
- **Creates a visual picture of change**
- **Provides a general framework and common language**
- **Improves the evaluation**

Logic Modeling process - overview



Use findings in discussion to sequence outcomes

| California Endowment Outcomes | What level of effort? <Average score> 1=Low; 2=Medium; 3=High | Where do primary solutions reside? <Average score> 1=Community; 2=Regional; 3=State; 4=National | Level of importance for our community <Total # of check mark> | Where will we focus? 1= in 1-3 years 2= in 4-6 years 3= in 7-10 years |
|--|---|--|--|--|
| 1. All children have health coverage. | | | | |
| 2. Families have improved access to a health home that supports healthy behaviors. | | | | |
| 3. Health and family-focused human services shift resources toward prevention. | | | | |
| [Table shortened for presentation] | | | | |
| 8. Community health improvements are linked to economic development. | | | | |
| 9. Health gaps for young men and boys of color are narrowed. | | | | |
| 10. California has a shared vision of community health. | | | | |

1. Consider outcomes

Use findings in discussion to sequence outcomes <example>

|  Priority Outcomes | What level of effort? <Average score> 1=Low; 2=Medium; 3=High | Where do primary solutions reside? <Average score> 1=Community; 2=Regional; 3=State; 4=National | Level of importance for our community <Total # of check mark> | Where will we focus? 1= in 1-3 years 2= in 4-6 years 3= in 7-10 years |
|--|--|---|---|---|
| 1. All children have health coverage. | 3 | 3 | 18 | 2 |
| 2. Families have improved access to a health home that supports healthy behaviors. | 3 | 2 | 20 | 2 |
| 3. Health and family-focused human services shift resources toward prevention. | 2 | 1 | 21 | 1 |
| 4. Residents live in communities with health-promoting land use, transportation and community development. | 2.1 | 1 | 13 | 1 |
| 5. Children and their families are safe from violence in their homes and neighborhoods. | 2 | 1 | 21 | 1 |
| 6. Communities support healthy youth development. | 1.5 | 1 | 11 | 2 |
| 7. Neighborhood and school environments support improved health and healthy behaviors. | 1.5 | 1 | 20 | 1 |
| 8. Community health improvements are linked to economic development. | 3 | 1 | 14 | 2 |
| 9. Health gaps for young men and boys of color are narrowed. | 3 | 3 | 10 | 3 |
| 10. California has a shared vision of community health. | 2 | 3 | 11 | 3 |

Unpacking outcomes worksheet (1)

| Priority Outcomes | Targeted change by sector | | | |
|--|---------------------------|--------|----------------|------------------------|
| | Education | Health | Human services | Community environments |
| 3. Health and family-focused human services shift resources toward prevention. | | | | |
| 4. Residents live in communities with health-promoting land use, transportation and community development. | | | | |
| 5. Children and their families are safe from violence in their homes and neighborhoods. | | | | |
| 7. Neighborhood and school environments support improved health and healthy behaviors. | | | | |

2. Determine targeted changes to achieve outcomes

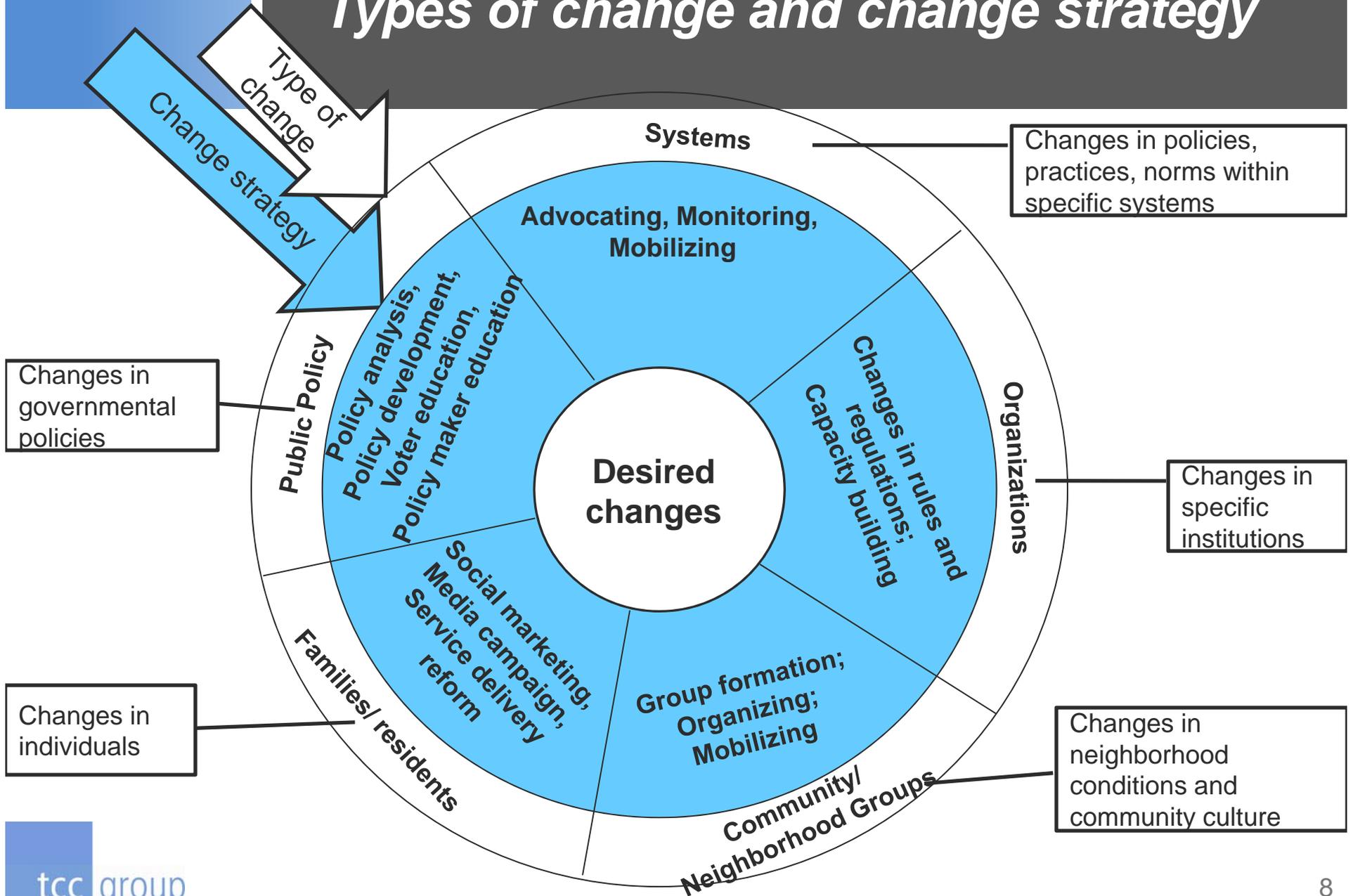
Assess targeted change worksheet

<Example>

Priority Outcome: Children and their families are safe from violence in their homes and neighborhoods

| Targeted changes | short-term Outcomes | How ready? | How critical? | How achievable? | Total score |
|------------------------|--|------------|---------------|-----------------|-------------|
| Education | •Schools and communities promote social norms for nonviolent approaches to problem-solving | 3 | 3 | 3 | 9 |
| | •Parents are more engaged in school safety taskforces | 3 | 3 | 3 | 9 |
| | •All teachers are required to receive violence prevention training | 3 | 2 | 3 | 8 |
| | •Relationship violence education is integrated into the middle school health curriculum | 2 | 2 | 3 | 7 |
| Health | •Children and families have access to local health systems that provide integrated medical, behavioral, social/emotional, and mental health services for children and families | 3 | 3 | 3 | 9 |
| Human Services | •Increased government funding in early violence prevention programs | 3 | 3 | 3 | 9 |
| Community Environments | •Local parks and playgrounds are safe and clean | 3 | 3 | 3 | 9 |
| | •Neighborhoods are absence of gang violence | 1 | 2 | 2 | 5 |
| | •Domestic violence is considered a community issue | 1 | 3 | 1 | 5 |

Types of change and change strategy



Capacities Needed

What capacities does the collaborative needs in order to effectively carry out the collaborative's work as a whole?

Leadership
Capacity



Adaptive
Capacity



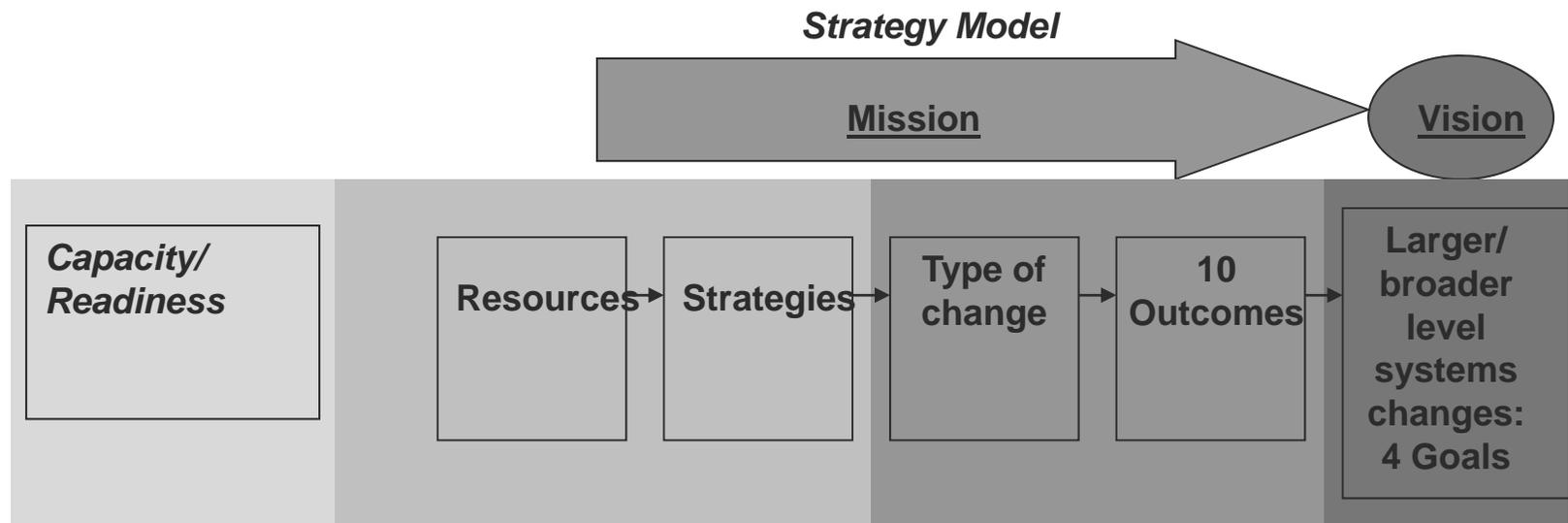
Management
Capacity



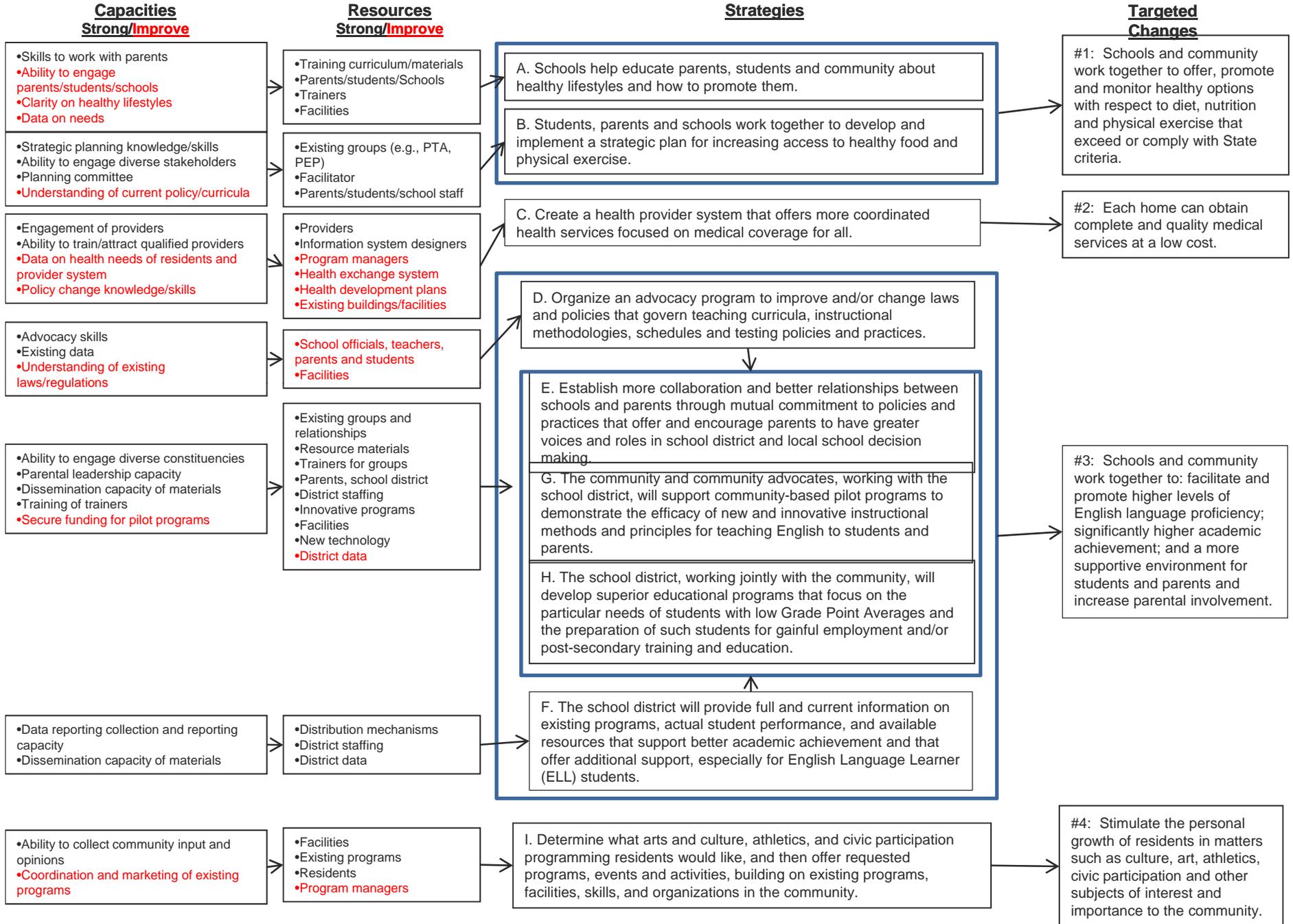
Technical
Capacity



The final product would look something like...



Outcome 7: Neighborhood and school environments support improved health and healthy behaviors



Rolling up the Logic Models...

| Community Outcome | 1 | 2 | 3 | | 12 | 13 | 14 | Total # |
|-------------------|----------|----------|----------|------|----------|----------|----------|---------|
| Outcome 1 | √ | | | | | √ | | 4 |
| Outcome 2 | | | √ | | √ | √ | √ | 6 |
| Outcome 3 | | √ | | | | | | 3 |
| Outcome 4 | √ | √ | | | √ | √ | √ | 9 |
| Outcome 5 | √ | √ | √ | | | √ | | 10 |
| Outcome 6 | | √ | | | √ | | √ | 8 |
| Outcome 7 | √ | | √ | | √ | | | 6 |
| Outcome 8 | √ | √ | | | √ | √ | √ | 9 |
| Outcome 9 | | | | | | | | 0 |
| Outcome 10 | | | √ | | | | √ | 2 |
| Total # | 5 | 5 | 4 | | 5 | 5 | 5 | |

Dissecting the Rolled up Logic Models

| BHC outcome | Total # of distinctive targeted changes | Total # of communities | Average # of distinctive targeted changes (# targeted changes/ # of community) |
|-------------|---|------------------------|---|
| 1 | 4 | 4 | 1 |
| 2 | 8 | 6 | 1.3 |
| 3 | 7 | 3 | 2.3 |
| 4 | 9 | 9 | 1 |
| 5 | 14 | 10 | 1.4 |
| 6 | 15 | 8 | 1.9 |
| 7 | 18 | 6 | 3 |
| 8 | 10 | 9 | 1.1 |
| 10 | 7 | 2 | 3.5 |

Did it work?

- Semi-Standardized community planning across sites
- Aligned foundation Theory of change and evaluation framework
- Allowed dialogue across sites—similar terminology, experience, etc.
- Allowed deeper analysis more quickly given diverse stakeholder groups
- Forced concrete discussions and trade-offs
- Clarified capacity needs in the community and nuanced discussions about community roles
- Coaches played a critical role at every phase

Pitfalls to watch for...

- Logic modeling was not the right process to determine questions of inclusion and leadership
- Variations in program officer buy-in led to mixed messages in the community
- Pushback from intermediaries that felt it usurped their role
- Perceived by some in the community to be too cumbersome or confusing, especially in initial presentations
- Timing issues affected some quality, but also pushed communities to make decisions
- Political tensions between foundation, logic model coaches, facilitators, and various contingencies within the community

Questions for funders:

- Do you have clarity and buy-in to the process in-house?
- How proscriptive/open will you be to adapting process or outcomes?
- How are you planning to use the information?
- Do you have a common starting point for outcomes?
- How will you manage questions about scope and funding decisions?

Questions?

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