Features
Community Engagement Matters (Now More Than Ever)
By Melody Barnes & Paul Schmitz
Data-driven and evidence-based practices present new opportunities for public and social sector leaders to increase impact while reducing inefficiency. But in adopting such approaches, leaders must avoid the temptation to act in a top-down manner. Instead, they should design and implement programs in ways that engage community members directly in the work of social change.

Community Engagement Matters (Now More Than Ever)

BY MELODY BARNES & PAUL SCHMITZ
Illustration by YANN KEBBI

In October 2010, three men—Chris Christie, governor of New Jersey; Cory Booker, who was then mayor of Newark, N.J.; and Mark Zuckerberg, founder and CEO of Facebook—appeared together on The Oprah Winfrey Show to announce an ambitious reform plan for Newark Public Schools. On the show, Zuckerberg pledged a $100 million matching grant to support the goal of making Newark a model for how to turn around a failing school system. This announcement was the first time that most Newark residents heard about the initiative. And that wasn’t an accident.

Christie and Booker had adopted a top-down approach because they thought that the messy work of forging a consensus among local stakeholders might undermine the reform effort. They created an ambitious timeline, installed a board of philanthropists from outside Newark to oversee the initiative, and hired a leader from outside Newark to serve as the city’s superintendent of schools.

The story of school reform in Newark has become a widely cited object lesson in how not to undertake a social change project. Even in the highly charged realm of education reform, the Newark initiative stands out for the high level of tension that it created. Instead of generating excitement among Newark residents about an opportunity to improve results for their kids, the reform plan that emerged from the 2010 announcement sparked a massive public outcry. At public meetings, community members protested vigorously against the plan. In 2014, 77 local ministers pleaded with the governor to drop the initiative because of the toxic environment it had created. Ras Baraka, who succeeded Booker as mayor of Newark, made opposition to the reform plan a central part of his election campaign. The money that Zuckerberg and others contributed to support the reform plan is now gone, and the initiative faces an uncertain future.

“When Booker and Christie decided to do this without the community, that was their biggest mistake,” says Howard Fuller, former superintendent of the Milwaukee Public Schools and a prominent school reform leader. Instead of unifying Newark residents behind a shared goal, the Booker-Christie initiative polarized the city.

Zuckerberg, for his part, seems to have learned a lesson. In May 2014, he and his wife, Priscilla Chan, announced a $120 million commitment to support schools in the San Francisco Bay Area. In
doing so, they emphasized their intention to “[listen] to the needs of local educators and community leaders so that we understand the needs of students that others miss.”

Another project launched in Newark in 2010—the Strong Healthy Communities Initiative (SHCI)—has had a much less contentious path. Both Booker and Baraka have championed it. Sponsored by Living Cities (a consortium of 22 large foundations and financial institutions that funds urban revitalization projects), SHCI operates with a clear theory of change: To achieve better educational outcomes for children, policymakers and community leaders must address the environmental conditions that help or hinder learning.

If kids are hungry, sick, tired, or under stress, their ability to learn will suffer. According to an impressive array of research, such conditions lie at the forefront of parents’ and kids’ minds, and they strongly affect kids’ chances of success in school. Inspired by this research, SHCI leaders have taken steps to eliminate blighted housing conditions, to build health centers in schools, and to increase access to high-quality food for low-income families.

SHCI began as an effort led by philanthropists and city leaders, but since then it has shifted its orientation to engage a broader cross-section of community stakeholders. Over time, those in charge of the initiative have built partnerships with leaders from communities and organizations throughout Newark. “We avoid a top-down approach as much as possible,” says Monique Baptiste-Good, director of SHCI. “We start with community and then engage established leaders. When we started, a critical decision was to operate like a campaign and not institutionalize as an organization. We fall to the background and push our partners’ capacity forward. Change happens at the pace people can adapt.”

Challenges related to housing and health may seem to be less controversial than school reform, but these issues generate considerable heat as well. (Consider, for example, the controversy that surrounds efforts by the Obama administration to change nutrition standards for children.) In any event, the crucial lesson here is one that spans a wide range of issue areas: How policymakers and other social change leaders pursue initiatives will determine whether those efforts succeed. If they approach such efforts in a top-down manner, they are likely to meet with failure. (We define a top-down approach as one in which elected officials, philanthropists, and leaders of other large institutions launch and implement programs and services without the full engagement of community leaders and intended beneficiaries.)

This lesson has become more acutely relevant in recent years. Disparities in education, health, economic opportunity, and access to justice continue to increase, and the resources available to confront those challenges have not kept pace with expanding needs. As a consequence, leaders in the public and nonprofit sectors are looking for better ways to invest those resources. At the same time, the increasing use of data-driven practices raises the hope that leaders can make progress on this front. These practices include, most notably, evidence-based programs in which there is a proven correlation between a given intervention and a specific impact. But they also include collective impact initiatives and other efforts that employ data to design and evaluate solutions. (In this article, we will use the term “data-driven” to refer to the full range of such practices.)

MELODY BARNES is a senior fellow at Results for America and chair of the Aspen Forum for Community Solutions. Previously, she was the director of the White House Domestic Policy Council under President Barack Obama.

PAUL SCHMITZ is CEO of Leading Inside Out, a consulting firm that enables inclusive and collaborative leadership. He is also an advisor to Results for America and a senior advisor to the Collective Impact Forum.

Disclosure: Results for America, where Melody Barnes is a senior fellow and where Paul Schmitz serves as an advisor, sponsored the research for this paper. Paul Schmitz is a faculty member of the Asset-Based Community Development Institute. He also serves on the United Way of Greater Milwaukee and Waukesha County board of directors and on the LifeCourse Initiative for Healthy Families steering committee.

In rolling out programs that draw on such research, however, leaders must not neglect other vitally important aspects of social change. As the recent efforts in Newark demonstrate, data-driven solutions will be feasible and sustainable only if leaders create and implement those solutions with the active participation of people in the communities that they target.

THE PROMISE OF DATA

Under the sponsorship of an organization called Results for America, we recently undertook a research project that focused on how leaders can and should pursue data-driven social change efforts. For the project, we interviewed roughly 30 city administrators, philanthropists, nonprofit leaders, researchers, and community builders from across the United States. We began this research with a simple premise: Social change leaders now have an unprecedented ability to draw on data-driven insight about which programs actually lead to better results.

Leaders today know that babies born to mothers enrolled in certain home visiting programs have healthier birth outcomes. (The Nurse-Family Partnership, which matches first-time mothers with registered nurses, is a prime example of this type of intervention. They know that students in certain reading programs reach higher literacy levels. (Reading Partners, for instance, has shown impressive results with a program that provides one-on-one reading instruction to struggling elementary school students.) They know that criminal offenders who enter job-training and support programs when they leave prison are less likely to re-offend and more likely to succeed in gaining employment. (The Center for Employment Opportunities has achieved such outcomes by offering life-skills education, short-term paid transitional employment, full-time job placement, and post-placement services.)

Results for America, which launched in 2012, seeks to enable governments at all levels to apply data-driven approaches to issues related to education, health, and economic opportunity. In 2014, the organization published a book called Moneyball for Government. (The title is a nod to Moneyball, a book by Michael Lewis that details how the Oakland A’s baseball club used data analytics to build championship teams despite having a limited budget for player salaries.) The book features contributions by a wide range of policymakers and thought leaders (including Melody Barnes, a co-author of this article). The editors of Moneyball for Government, Jim Nussle and Peter Orszag, outline three principles that public officials should follow as they pursue social change:

■ “Build evidence about the practices, policies, and programs that will achieve the most effective and efficient results so that policymakers can make better decisions.
“Invest limited taxpayer dollars in practices, policies, and programs that use data, evidence, and evaluation to demonstrate they work.

“Direct funds away from practices, policies, and programs that consistently fail to achieve measurable outcomes.”

These concepts sound simple. Indeed, they have the ring of common sense. Yet they do not correspond to the current norms of practice in the public and nonprofit sectors. According to one estimate, less than 1 percent of federal nondefense discretionary spending goes toward programs that are backed by evidence.7 In a 2014 report, Lisbeth Schorr and Frank Farrow note that the influence of evidence on decision-making—“especially when compared to the influence of ideology, politics, history, and even anecdotes”—has been weak among policymakers and social service providers.8 (Schorr is a senior fellow at the Center for the Study of Social Policy, and Farrow is director of the center.)

That needs to change. There is both an economic and a moral imperative for adopting data-driven approaches. Given persistently limited budgets, public and nonprofit leaders must direct funds to programs and initiatives that use data to show that they are achieving impact. Even if unlimited funds were available, moreover, leaders would have a responsibility to design programs that will deliver the best results for beneficiaries.

THE NEED FOR “PATIENT URGENCY”
The inclination to move fast in creating and implementing data-driven programs and practices is understandable. After all, the problems that communities face today are serious and immediate. People’s lives are at stake. If there is evidence that a particular intervention can (for example) help more children get a healthy start in life—or help them read at grade level, or help them develop marketable skills—then setting that intervention in motion is pressingly urgent.

But acting too quickly in this arena entails a significant risk. All too easily, the urge to initiate programs expeditiously translates into a preference for top-down forms of management. Leaders, not unreasonably, are apt to assume that bottom-up methods will only slow the implementation of programs that have a record of delivering positive results.

A former director of data and analytics for a US city offers a cautionary tale that illustrates this idea. “We thought if we got better results for people, they would demand more of it,” she explains. “Our mayor communicated in a paternal way: ‘I know better than you what you need. I will make things better for you. Trust me.’

“The problem is that they didn’t trust us. Relationships matter. Not enough was done to ask people what they wanted, to honor what they see and experience. Many of our initiatives died—not because they didn’t work but because they didn’t have community support.”

To win such support, policymakers and other leaders must treat community members as active partners. “Doing to us, not with us, is a recipe for failure,” says Fuller, who has deep experience in building community-led coalitions. “If we engage communities, then we have a solution and we have the leadership necessary to demand that solution and hold people accountable for it.” Engaging a community is not an activity that leaders can check off on a list. It’s a continuous process that aims to generate the support necessary for long-term change. The goal is to encourage intended beneficiaries not just to participate in a social change initiative but also to champion it.

“This work takes patient urgency,” Fuller argues. “If you aren’t patient, you only get illusory change. Lasting change is not possible without community. You may be gone in 5 or 10 years, but the community will still be there. You need a sense of urgency to push the process forward and maintain momentum.” The tension between urgency and patience is a productive tension. Navigating that tension allows leaders and community members to achieve the right level of engagement.

The core finding of our research is that impatient, top-down efforts—including efforts that involve implementing data-driven initiatives—will not produce lasting results. To achieve positive and enduring change, public and nonprofit leaders must create community engagement strategies that are as robust as the data-driven solutions they hope to pursue.

Rich Harwood, president of the Harwood Institute for Public Innovation, makes this point in a post on his website: “Understanding and strengthening a community’s civic culture is as important to collective efforts as using data, metrics and measuring outcomes. ... A weak civic culture undermines the best intentions and the most rigorous of analyses and plans. For change to happen, trust and community ownership must form, people need to engage with one another, and we need to create the right underlying conditions and capabilities for change to take root and spread.”

FACTORS OF ENGAGEMENT
We have identified six factors that are essential to building community support for data-driven solutions. These factors are complementary. Social change initiatives that incorporate each factor will tend to have a greater chance of success.

Organizing for ownership In many cases, efforts to engage affected communities take place after leaders have designed and launched data-driven initiatives. But engagement should begin earlier so that community members will have an incentive to support the initiative.

One of the biggest mistakes that social change leaders make is failing to differentiate between mobilizing and organizing. Mobilizing is about recruiting people to support a vision, cause, or program. In this model, a leader or an organization is the subject that makes decisions, and community members are the passive object of those decisions. Organizing, on the other hand, is about cultivating leaders, identifying their interests, and enabling them to lead change. Here, community members are the subject of the work: They collaborate on making decisions. At its best, community engagement involves working with a variety of leaders—those at the grass tops and those at the grass roots—to ensure that an effort has the support necessary for long-term success.

The International Association for Public Participation has developed a spectrum that encompasses various forms of engagement.10 (See “The Spectrum of Community Engagement” on page 36.) At one end of the spectrum is informing, which might take the form of a mailing or a town-hall meeting in which professional leaders describe a new change effort (and perhaps ask for feedback about it). At the other end of the spectrum is empowerment, which supports true self-determination for participants. One organization that practices empowerment is the Family Independence Initiative (FII) in Oakland, Calif. Instead of focusing on delivery of social services, FII invests in supporting the capacity and ingenuity of poor
families. (Through an extensive data-collection process at six pilot sites, FII has demonstrated that participating families can achieve significant economic and social mobility.)

The further an initiative moves toward the empowerment end of the spectrum, the more community members will feel a sense of ownership over it, and the more inclined they will be to advocate for it. Of course, it’s not always possible to operate at the level of full empowerment. But initiative leaders need to be clear about where they are in the spectrum, and they need to deliver the level of engagement they promise.

John McKnight and Jody Kretzmann, co-directors of the Asset-Based Community Development Institute at Northwestern University and authors of the classic community-building guide Building Communities From the Inside Out, argue that too often “experts” undermine the natural leadership and the sense of connectedness that exist in communities as assets for solving problems. At a recent international conference of community builders, McKnight and Kretzmann suggested that when providers work with communities they should ask these questions: “What can community members do best for themselves and each other? What can community members do best if they receive some support from organizations? What can organizations do best for communities that people can’t do for themselves?”

It’s important, in other words, to view community members as producers of outcomes, not just as recipients of outcomes. Professional leaders must recognize and respect the assets that community members can bring to an initiative. If the goal is to help children to read at grade level or to help mothers to have healthy birth outcomes, then leaders should consider the roles that family members, friends, and neighbors can play in that effort. A mother who watches kids from her neighborhood after school is a kind of community health worker. Supporting these community members—not just for their voice but also for their ability to produce results—is crucial to the pursuit of lasting change.

Engaging grassroots leaders requires intention and attention. “If we commit to engaging community members, we have to set them up for success. We have to orient them to our world and engage in theirs,” says Angela Frusciante, knowledge development officer at the William Caspar Graustein Memorial Fund. “We need to work with leaders to make meaning out of the data about their communities: Where do they see their own stories in the data? How do they interpret what they see? Remember, data is information about people’s lives.”

Allowing for complexity

Leaders must adapt to the complex system of influences that bear on the success of any data-driven solution. Patrick McCarthy, president of the Annie E. Casey Foundation, made this point forcefully at a 2014 forum: “An inhospitable system will trump a good program—every time, all the time.” Instead of trying to “plug and play” a solution, leaders should consider the cultural context in which people will implement that solution. They should develop a deep connection to the communities they serve and a deep understanding of the many constituencies that can affect the success of their efforts.

One pitfall of data-driven social change work is that it sometimes provides little scope for complexity—for the way that multiple factors are intertwined in peoples’ lives. Evidence-based approaches can “[privilege] single-level programmatic interventions,” Schorr and Farrow note. “These [programs] are most likely to pass the ‘what works?’ test within the controlled conditions of the experimental evaluation. Reliance on this hierarchy also risks neglecting or discouraging interventions that cannot be understood through this methodology and sideling complex, multi-level systemic solutions that may be very effective but require evidence-gathering methods that rank lower in the evidence hierarchy.”

Those who implement data-driven practices, therefore, need to treat them not as miracle cures but as important elements within a larger ecosystem.

The need to reckon with complexity is one reason that the collective impact model has gained popularity in many communities. In a collective impact initiative, organizations and community members work together at a systemic level to achieve a complex community-wide goal. They work to connect each intervention to other programs, organizations, and systems (including family and neighborhood systems) that influence the lives of beneficiaries. It’s not likely that a single intervention, pursued in isolation, will create lasting change. Delivering an evidence-based reading program for children in elementary school may have a positive impact on literacy outcomes, for example, but the long-term sustainability of that intervention will depend on the health, safety, home environment, and economic well-being of those children.

Working with local institutions

Often the pursuit of a data-driven strategy involves shifting funds away from work that isn’t demonstrating success. Taking that step is sometimes necessary, but when leaders shift funds, they must be careful not to harm the community they aim to help. Such harm can occur, for example, when they underfund programs with deep community connections, when they eliminate vital services for which there is no good alternative, or when they import programs from outside the community that destabilize existing providers.

The Spectrum of Community Engagement

<table>
<thead>
<tr>
<th>INFORMING</th>
<th>CONSULTING</th>
<th>INVOLVING</th>
<th>COLLABORATING</th>
<th>EMPOWERING</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providing balanced and objective information about new programs or services, and about the reasons for choosing them. Providing updates during implementation.</td>
<td>Inviting feedback on alternatives, analyses, and decisions related to new programs or services. Letting people know how their feedback has influenced program decisions.</td>
<td>Working with community members to ensure that their aspirations and concerns are considered at every stage of planning and decision-making. Letting people know how their involvement has influenced program decisions.</td>
<td>Enabling community members to participate in every aspect of planning and decision-making for new programs or services.</td>
<td>Giving community members sole decision-making authority over new programs or services, and allowing professionals to serve only in consultative and supportive roles.</td>
</tr>
</tbody>
</table>

Adapted from the IAP2 Public Participation Spectrum, developed by the International Association for Public Participation.

Note: Engagement activities can include community surveys, neighborhood outreach projects, partnerships with grassroots organizations, public meetings, and efforts to select community representatives.
A decision to shift funds can also generate otherwise avoidable resistance from natural allies. An official from a local foundation recounts an episode that happened in her city: “Our mayor got excited about a college access program that he visited in another city and raised money to bring it here. The existing college access programs had trouble raising money once the mayor was competing with them to raise funds, and they started going out of business. The new initiative never gained community support.” According to this official, the mayor’s actions were ultimately counterproductive. “There is now less happening for the people served,” she says.

In some cases, moreover, local organizations have built up social capital that creates an enabling environment for data-driven interventions to succeed. A community center that has fostered active participation among parents, for example, might be an important asset for a data-driven effort to improve third-grade reading scores.

For these reasons, it’s often better to encourage existing grantees to adopt data-driven practices than to defund those groups. Carol Emig, president of Child Trends, a nonprofit research organization that focuses on issues related to children and families, argues for this approach: “Instead of telling a city or foundation official that they have to defund their current grantees because they are not evidence-based, funders can tell long-standing grantees that future funding will be tied at least in part to retooling existing programs and services so that they have more of the elements of successful programs.”13 The mayor who brought an outside college access program to his city, for example, might have had more success if he had worked with local providers to implement a variation of the program.

Collaborating with local groups takes effort. Funders must start by assessing whether a grantee has a solid grounding in the community, experience in the relevant issue area, and a willingness to alter its practice. Nicole Angresano, vice president of community impact at the United Way of Greater Milwaukee and Waukesha County, explains how her organization works with grantees to improve performance: “We assess the state of the organization’s relationships.” Her group looks in particular at the level of trust that grantees have earned within their community. “If that [trust] is high, we’ll build capacity and partner with them to improve results,” she says.

Applying an equity lens | Jim Collins, in his management strategy book Good to Great, argues that effective leaders “first [get] the right people on the bus ... and the right people in the right seats—and then they [figure] out where to drive it.”15 Too often, social change efforts don’t engage the right mix of people. When leaders seek to bring data-driven solutions to low-income communities and communities of color, they must take care to apply an equity lens to this work. Members of those communities not only should be “at the table”; they should hold leadership positions as well.

Many groups apply an equity lens to their initiatives downstream: They analyze disaggregated data to identify disparities, and then they adopt strategies to reduce those disparities. That’s important, but it’s even more important to apply an equity lens upstream—in the places where people make critical decisions about an initiative. The ranks of board members, staff members, advisors, and partners must include members of the beneficiary community. “Some leaders just want black and brown people to carry signs,” says Fuller. “They don’t want them to actually lead, to have a voice, to have self-determination.”

It’s not enough to bring a diverse set of leaders together. Creating a culture in which those leaders can collaborate effectively is also necessary. Applying an equity lens involves working to build trust among participants and working to ensure that all of them can engage fully in an initiative. Achieving equitable participation, moreover, requires a commitment to hearing all voices, valuing all perspectives, and taking swift action to correct disparities of representation. And although this process cannot eliminate power dynamics, leaders should strive to mitigate the effects of power differences.

Leaders should also apply an equity lens to the selection of organizations that will receive funding to implement data-driven work. One way to do so is to establish a continuum of eligibility that allows groups—those that are ready to implement data-driven practices as well as those that will require capacity-building support to reach that level—to apply for funding at different stages of an initiative. That approach can enable the inclusion of small organizations that are led by people of color or by other under-represented members of a community.

Building momentum | The work of engaging communities, as we noted earlier, requires a sense of patient urgency. According to people we interviewed for our project, it often takes one to two years to complete the core planning and relationship building that are necessary to launch an initiative that features substantial community engagement. That is all the more true when the initiative incorporates data-driven approaches.

For this reason, achieving significant results within a typical two-to-three-year foundation grant cycle can be challenging. Similarly, it can be difficult to pursue lasting change within a time frame that suits the needs of public sector leaders. Government agencies usually operate in one-year budget cycles, and elected officials want to see results within a four-year election cycle. So when public agencies take the lead on an initiative, it’s incumbent on philanthropic funders and other partners to create external pressure that will lend staying power to the initiative.

Another solution to this problem is to build momentum up front by achieving quick wins—early examples of demonstrated progress. Quick wins will encourage grantmakers to invest in an initiative and will help meet the political needs of public officials. In addition, quick wins will keep resistance from building. If an initiative hasn’t shown any results for two to three years, the forces of the status quo will reassert themselves, and opponents will eagerly claim that the initiative is failing.

Early wins will also help a community build a narrative of success that can replace existing narratives that dwell on the apparent intractability of social problems. Likewise, quick wins will enable community members to see that their engagement matters. As a result, they will be more likely to embrace ambitious goals for social change. “You have to give folks who are ready to run work that will keep them energized, and [you have to] give others time to absorb change and build trust in the process,” Baptiste-Good says. “It takes patience and relationships to make it work.”

Managing constituencies through change | Leaders who shift to a new data-driven framework need to manage how various constituencies react to that change. A good way to start is by distinguishing between technical challenges and adaptive challenges. In The Practice of Adaptive Leadership, Ronald A. Heifetz, Alexander Grashow, and
Marty Linsky explain that distinction: "Technical problems ... can be resolved through the application of authoritative expertise and through the organization’s current structures, procedures, and ways of doing things. Adaptive challenges can only be addressed through changes in people’s priorities, beliefs, habits, and loyalties." For leaders, it’s tempting to focus on straightforward technical challenges (such as developing criteria for funding a data-driven intervention) and to neglect pressing adaptive challenges (such as dealing with changes in relationships and behaviors that staff members, partners, and service recipients will experience with the rollout of that intervention).

Multiple constituencies will feel the effects of a shift in strategy. There are existing partners, who will need to change their ways of operating and who may lose funding. There are potential new providers, who must gear up to help implement the new strategy. There are intended beneficiaries, who may need to alter or discontinue their relationships with trusted service providers. There are grant officers, who may need to jettison grantee relationships that they have cultivated over many years. And so on. To build community engagement around adoption of a new framework, leaders must prepare all of these constituencies for the adaptive changes they will have to make.

Communication is paramount, and it should begin early in the change process. In particular, leaders should take these steps:

- Signal changes early so that stakeholders can prepare for them.
- Focus less on expressing excitement about new practices than on showing empathy for the concerns of each constituency. (“Seek first to understand—and then to be understood” is a good rule to follow.)
- Disclose how and why decisions were made, and who made them.
- Acknowledge that there will be trade-offs and losses, and explain that they are a necessary consequence of adopting a strategy that promises to improve results.
- Clearly describe the transition process for people and groups that are willing and able to move toward the new framework.

Above all, leaders must focus on managing expectations for each constituency each step of the way.

MODELS OF ENGAGEMENT
Community engagement is not easy work, but it is important work. Here are two initiatives in which social change leaders are pursuing a community engagement strategy as part of their effort to implement data-driven solutions.

**A youth program in Providence** | In 2012, the Annie E. Casey Foundation launched an initiative in partnership with the Providence Children and Youth Cabinet (CYC), an organization that was then part of the mayor’s office in Providence, R.I. Working within the foundation’s Evidence2Success framework, the CYC surveyed more than 5,000 young people in the 6th, 8th, 10th, and 12th grades about the root causes of personal and academic success—factors such as social and emotional skills, relationships, and family support. The CYC then convened community leaders and residents from two neighborhoods to discuss the survey data and to create a set of shared priorities. A diverse group of city, state, and neighborhood leaders helped oversee that process.

These shared priorities—which cover outcomes related to truancy and absenteeism, delinquent behavior, and emotional well-being—became the central point of focus for the initiative. Implementation teams, which included both residents and social service providers, established improvement goals for each priority. The teams then used Blueprints for Healthy Development, an online resource maintained by the Annie E. Casey Foundation, to select six evidence-based programs that are designed to advance those goals. In addition, CYC leaders conferred with residents about resources and forms of assistance that the community will need to ensure the success of these programs. Implementation of three of the six identified programs...
is now under way, and the CYC will measure progress toward the improvement goals in future surveys.

From the start, CYC leaders worked to improve the power dynamics among stakeholders by communicating transparently about their decision-making process. “We tailored information to different groups to empower them,” says Rebecca Boxx, director of the CYC. “We engaged everyone in a shared framework that was new to all. For community residents, we said, ‘This data is you, your lives. You own that.’ There was tremendous power in helping residents own their role.” In effect, Boxx adds, the initiative has involved “flipping expertise”—in other words, placing community members “on equal footing” with public officials, social service providers, and the like. (To ensure that the CYC would remain an independent voice for local communities—one whose future would not depend on election results—CYC leaders eventually moved the group outside the mayor’s office.)

CYC leaders spent about 18 months engaging with community members and another 18 months implementing the initial set of three evidence-based programs. “It will take three to four years to start seeing community-level results,” says Jessie Wattrous, a senior associate at the Annie E. Casey Foundation. “There is a win for [city officials] in saying, ‘We are listening to our community and spending our dollars on programs that have been proven to work.’ You also have community leaders and residents speaking out about it.” The foundation recently launched Evidenced2Success partnerships in Alabama and Utah that build on the lessons of the Providence initiative to pursue evidence-based programs in those states.

A health program in Milwaukee | At one time, Milwaukee had the highest African-American infant mortality rate in the United States. To confront that problem, several partners—including the United Way of Greater Milwaukee, the mayor of that city, and the Wisconsin Partnership Program at the University of Wisconsin School of Medicine and Public Health—launched the Lifecourse Initiative for Healthy Families (LIHF) in 2012.

As part of the initiative, LIHF leaders invited researchers from universities, nonprofit advocacy groups, and the City of Milwaukee Health Department to share evidence about the causes of infant mortality and ways to reduce it. Many LIHF participants initially believed that unsafe sleeping conditions were the leading cause of infant mortality. But data gathered by the city’s Fetal Infant Mortality Review team showed that this factor accounted for only 15 percent of deaths. (Milwaukee also once had the highest teen pregnancy rate in the nation.) Lessons from that initiative left these partners believing that unsafe sleeping conditions were the leading cause of infant mortality and ways to reduce it. Many LIHF participants initially believed that unsafe sleeping conditions were the leading cause of infant mortality. But data gathered by the city’s Fetal Infant Mortality Review team showed that this factor accounted for only 15 percent of deaths. (Milwaukee also once had the highest teen pregnancy rate in the nation.)

Previously, the City of Milwaukee and the United Way had partnered on an initiative that reduced teen pregnancy by 57 percent in seven years. (Milwaukee also once had the highest teen pregnancy rate in the nation.) Lessons from that initiative left these partners with a commitment to deep and inclusive community engagement. In the case of LIHF, those who oversaw the initiative began with a two-year planning process that involved convening more than 100 community leaders from all parts of the city.

In developing LIHF, leaders put special emphasis on achieving racial equity in the design and leadership composition of the initiative. At a launch meeting for LIHF, a group of more than 70 community leaders and residents spent an hour discussing racism and its impact on health among African-American women. Subsequent meetings have dealt explicitly with the role that racial equity must play in reaching LIHF goals. An African-American woman business leader cochairs the LIHF Steering Committee (the mayor of Milwaukee is the other cochair), and an African-American community activist serves as director of the initiative. To gain residents’ input and support, LIHF leaders also hired six community organizers who live in targeted neighborhoods and placed two people from those neighborhoods on the steering committee.

ENGAGING WITH DATA

Data-driven practices and programs hold great promise as a means for making progress against seemingly intractable social problems. But ultimately they will work only when community members are able to engage in them as leaders and partners. Community engagement has two significant benefits: It can achieve real change in people’s lives—especially in the lives of the most vulnerable members of a community—and it can instill a can-do spirit that extends across an entire community.

As policymakers, elected officials, philanthropists, and nonprofit leaders shift resources to data-driven programs, they must ensure that community engagement becomes a critical element in that shift. (See “Resources for Community Engagement” on page 38.) Without such engagement, even the best programs—even programs backed by the most robust data—will not yield positive results, let alone lasting change.

NOTES

3 For examples of research on the Nurse-Family Partnership, see “Trial Outcomes,” Nurse-Family Partnership website, http://www.nursefamilypartnership.org/Proven-Results/Published-research.
5 For examples of research on the Center for Employment Opportunities, see “Publications,” Center for Employment Opportunities website, http://ceoworks.org/resources/publications.
11 Cited in Schorr and Farrow, “An Evidence Framework to Improve Results,” p. 11.
14 Quoted in Schorr and Farrow, “An Evidence Framework to Improve Results,” p. 10.