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RESULTS

Scope, Scale, and Sustainability: What It Takes to Create Lasting Community Change

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Key Points

- This article examines success factors that relate specifically to the ability of a comprehensive community initiative (CCI) to achieve the scope and scale required to generate *community-level* outcomes and to sustain those positive impacts over time.
- The CCIs selected for study represent a wide range of goals, strategies, and organizational structures.
- Six factors were found to cut across scope, scale, and sustainability. These factors include having a single broker or entity that holds the vision of the change effort; clearly defined roles; alignment among interventions, resources, and geography; meaningful community engagement; competent leadership and staff; and strategic, cross-level relationships.
- Additional factors were found to relate to success in achieving scope, scale, or sustainability individually.
- Lessons include to plan, operate, and evaluate based on a systems- and community-change framework; choose focused and affordable strategies; build the capacity to use data; and plan for change and conflict.

Introduction

Comprehensive community initiatives (CCIs) refer to a diverse range of multifaceted initiatives that are funded by public sector agencies and philanthropies and seek to address complex social problems. Although CCIs target multiple policy

arenas, employ different strategies and organizational structures, and include varying collections of stakeholders, there are a number of features that help to define the contours of this approach to community change (Kubisch et al., 2002).

These features include:

- Comprehensive strategies and programs that seek to address the multiple causes of social problems;
- Participatory and collaborative approaches to the planning and implementation of the initiative that involve diverse groups of stakeholders;
- Governance structures based at the neighborhood or community level designed to support collaboration across sectors;
- Systemic approaches to reform that influence how resources are distributed and used; and
- Technical assistance and other capacity-building supports to sustain the community's long-term ability to improve outcomes.

In a study for the Annie E. Casey Foundation, we examined a group of CCIs to determine how these bold initiatives dealt with the challenges of achieving a comprehensive scope, taking programs and strategies to scale, and sustaining their work after the end of a demonstration period. Eleven CCIs were selected based on how well they fit the general characteristics of a CCI in terms of integrating community development and human service strategies, working across sectors, fostering community engagement, and strength-

TABLE 1 Initiative Profiles

Name of Initiative	Sponsoring funder(s)	Geographic focus	Demonstration period
Cleveland Community Building Initiative	Cleveland Foundation and Rockefeller Foundation	Cleveland, Ohio	1993–2000
Comprehensive Community Revitalization Program	Surdna Foundation	South Bronx, N.Y.	1992–1998
Health Improvement Initiative	The California Wellness Foundation	Nine communities in California	1996–2001
Homeless Families Program	Robert Wood Johnson Foundation and the US Department of Housing and Urban Development	Nine cities throughout the United States	1990–1995
Local Investment Commission	Missouri Department of Social Services	Kansas City, Mo.	1992–present
Neighborhood Improvement Initiative	William and Flora Hewlett Foundation	San Francisco, Calif. (Bay Area)	1996–2005
Neighborhood and Family Initiative	Ford Foundation	Four neighborhoods (one each in Detroit, Mich.; Hartford, Conn.; Memphis, Tenn.; and Milwaukee, Wis.)	1990–1998
Neighborhood Partners Initiative	Edna McConnell Clark Foundation	5 neighborhoods in New York City	1996–2003
Neighborhood Preservation Initiative	The Pew Charitable Trusts	10 neighborhoods in nine cities around the United States	1993–1997
Urban Health Initiative	Robert Wood Johnson Foundation	Baltimore, Md.; Detroit, Mich.; Oakland, Calif.; Philadelphia, Pa.; and Richmond, Va.	1995–2005

ening networks (Ramsey, 2001). In addition, the CCIs included were, for the most part, sponsored by a major foundation, represented a long-term investment (at least six years), and were well-documented in terms of program and evaluation reports. The CCIs included in this discussion are listed in Table 1.

We looked at how well the selected CCIs achieved scope, scale, and sustainability, and examined the implications of this experience for the next generation of CCIs. The research methodology included interviews with key staff who directly participated in the initiatives, analysis of interim and summa-

tive evaluation reports, and review of the secondary literature pertaining to the field in general. The goal of the research was to identify concrete examples of successful practices and strategies from which to extrapolate more general principles about promising practices for the design and implementation of CCIs. A number of factors influenced all three dimensions of scope, scale, and sustainability, whereas others were more directly related to a single dimension (see Table 2).

Cross-Cutting Factors

Certain factors cut across all three dimensions, allowing CCIs to achieve scope, scale, and sus-

TABLE 2 Success Factors

Cross-Cutting Factors	Scope Factors	Scale Factors	Sustainability Factors
A single entity acting as broker and keeper of the vision	Integrated strategies that “connect the dots”	Clear articulation and measurement of desired community change results	Community ownership of the initiative from the start
Clear, well-defined roles and responsibilities	Effective planning and evaluation	Intentional focus on creating the capacity for scale	Building and sustaining the capacity of institutions rather than programs
Alignment between goals, strategies, institutional interests, resources, and geography	Flexible funding to respond to a changing community context	Use of data to drive the initiative and influence policy change	Long-term sustainable funding
Meaningful community engagement			
Competent leadership and the right staff capacity			
Strategic connections between the community and the public sector (city, state, and federal)			

tainability. These factors shape a CCI’s ability to develop and sustain a clear vision, execute well, and adapt and problem-solve effectively.

A Single Broker and Keeper of the Vision

Successful CCIs had a single individual, intermediary organization, or governance body responsible for keeping the initiative on track and making sure the capacity was there to take on the goals of the initiative. Most importantly, the intermediary had a clear vision that was in alignment with that of the sponsoring entity of what success would look like, and that vision was maintained throughout guiding, supporting, and challenging the local sites. The intermediary kept the sites focused on the mission, ensured alignment and fit, and facilitated entrepreneurial responses to both challenges and opportunities. Successful initiatives also had an effective broker that was able to connect sites to the right expertise and resources, bring the right people to the table, and troubleshoot to overcome bar-

riers and resistance. These brokers were instrumental in building trust within and among sites, as well as between sites and sponsoring entities, through fidelity to the mission and vision, delivering results, maintaining high expectations, and insisting on high performance. The “honest broker” was sometimes an individual (e.g., the executive director of the Comprehensive Community Revitalization Program), an intermediary organization (e.g., the national program office for the Urban Health Initiative), or the governance entity (e.g., the Local Investment Commission). Initiatives with a single individual or institution that served as an advocate and broker for the community, as well as tended to the needs and expectations of the funder, were most successful in equalizing power and building true partnerships.

Clear, Well-Defined Roles and Responsibilities

Foundations or other sponsoring entities must establish a clear framework and set of expecta-

tions to accompany their investment, while also allowing for local autonomy. Initiatives in which the funding entity set a clear strategic direction for grantees, but gave them the flexibility to chart their own course for achieving initiative goals, were more successful than initiatives in which the funder played a more active, micromanaging role. In the latter case, the intermediary was usually “hand-tied” and unable to serve as an effective broker or coach. Without clear and distinct roles and responsibilities, these initiatives floundered in the process, with endless shifts in direction and lack of trust.

Confusion about roles and lines of accountability derailed a number of CCIs. Even when roles and responsibilities are clearly defined upfront, this issue must be revisited periodically throughout the initiative to ensure that definitions remain clear and continue to best serve the needs of the initiative. For example, reflections published by the Community Foundation of Silicon Valley, which served as a managing partner in the Neighborhood Improvement Initiative, noted that “many of the stumbling points in the initiative” stemmed from lack of clarity and unspoken assumptions about roles and responsibilities (Community Foundation of Silicon Valley, 2005). One particular sticking point often relates to how decisions are made. As implementation of an initiative progresses, pressure and tensions can lead parties to either overstep or relinquish their agreed-upon responsibilities. Creating regular opportunities to discuss and negotiate roles and responsibilities, therefore, improves both operational clarity and accountability.

Alignment and Fit

The CCIs that achieved scope, scale, and sustainability did so by pursuing a variety of strategies and different approaches to generating community change. Two features, however, were consistent across the successful CCIs: system-wide alignment of strategies and goals, and the right combination of partners, funding, and supporting capacities. Selection of sites, lead organizations, partners, and strategies are critical decisions that need to be carefully and systematically considered. Initiatives that achieved the

greatest success did not invite everyone to the table; rather, they selected only partners with the capacity, interest, and positioning to take on the work. Designers of successful initiatives realized that collaboration for its own sake is counterproductive and insisted that collaboration have an explicit and strategic purpose. Even more critical, when alignment and fit change, for example with leadership turnover or when a partner ceases to perform, the participation of partners who have fallen out of alignment must be terminated.

Initiatives that achieved greatest success did not invite everyone to the table; rather they selected only partners with the capacity, interest, and positioning to take on the work.

All CCIs must address the tension between the need for multiple agencies and organizations to work together and the reality that each organization will often do so only to the extent that collaboration is in its own direct interest. Successful CCIs identify and articulate very clear alignments of interest or garner enough resources to create alignment of institutional self-interests with CCI goals. In the Homeless Families Program, for instance, the \$30 million in housing vouchers provided by the US Department of Housing and Urban Development created an incentive for human service organizations and housing providers to explore their “natural” connection and collaborate on providing more effective services to homeless families.

The reality is that agencies and organizations will not develop comprehensive, collaborative responses to complex social problems unless the core interests of the stakeholders are aligned with and served by the new program or strategy. This is particularly true when the stakeholder is a politician or policymaker. Promoting evidence-based, well-designed solutions to pressing problems may

raise visibility and interest, but may be insufficient to galvanize the commitment of city hall. Timing is also critical: does the mayor see an advantage to addressing the issue *at this time*? What is the political payoff for the mayor or other city officials to work to address the needs of this particular constituency? How compelling is the case that the work will serve the city's broader interests? Achieving alignment of interests along these lines is part hard work and part serendipity.

Initiatives in which the funding entity set a clear strategic direction for grantees, but gave them the flexibility to chart their own course for achieving initiative goals, were more successful than initiatives in which the funder played a more active, micromanaging role.

Likewise, successful initiatives were careful to align their programs and strategies with desired goals and operational scale. For instance, the overarching objective of the Local Investment Commission (LINC) is to strengthen neighborhood capacity and provide decentralized services in 28 Kansas City, Mo., neighborhoods. LINC selected strategies designed to operate at this scale. For instance, when establishing a before-and after-school program, LINC created both a funding strategy and service delivery strategy that enabled the program to operate in nearly every elementary school in Kansas City. While LINC organized its comprehensive neighborhood services around local schools that were neighborhood anchors, The Atlanta Project created a similar structure, but because of the way school boundaries were drawn, the schools were not natural neighborhood centers. This lack of alignment severely undermined the effectiveness of The Atlanta Project's engagement and service delivery strategy.

In the Comprehensive Community Revitalization Program (CCRP), local community development corporations (CDCs) were positioned to tackle neighborhood issues more holistically by expanding their programmatic range, while maintaining alignment with their core missions. This allowed the CDCs to take on new activities and build additional capacity in a way that made sense in terms of their existing expertise, a strategy that worked well given the CCRP's target geography and desired outcomes. On the other hand, Urban Health Initiative sites could not achieve the goal of improving the health and safety of children citywide by incrementally improving programs; they needed a different set of strategies to operate at a different scale of impact.

Meaningful Community Engagement

Another characteristic of successful initiatives is meaningful community engagement in establishing community change priorities and planning how best to achieve established goals. The key, according to one program director, is to "have residents make decisions that matter." Initiatives that created momentum around a vision for change were more successful in achieving scope, scale, and sustainability than those that tried to mobilize the community around a particular program or set of activities. Keeping the desired results front and center was instrumental in building and maintaining community involvement and commitment. Ongoing, meaningful engagement of citizens and other key institutions was crucial to sustaining momentum. For example, the neighborhood-generated quality-of-life plans in CCRP became the road map that each lead organization followed. The community's agreed-upon results were the collective vision that drove the agenda, components of which continue to be realized today.

LINC incorporates what is perhaps the most formal example of equalizing power for residents. LINC's citizen's commission, which includes a spectrum of citizens, business and community leaders, and individuals receiving public services, is responsible for developing strategies to improve outcomes for children and families. Citizen volunteers have the authority to create the commission's agenda and the decision-making power

over how funds are distributed to achieve results. LINC also engages hundreds of community residents to assist with local implementation by serving on committees as well as providing services such as tutoring, monitoring playgrounds, and mentoring. As part of its mission, LINC intentionally builds resident capacity to participate in a meaningful way through an ongoing education process that helps residents understand how government operates, how to access public agencies, and how to secure resources for the community.

Leadership and Staff Capacity

Commitment to the cause is not enough to achieve results. CCIs must be cognizant of the specific knowledge, skills, and relationships that the initiative's leadership and staff need to be successful. CCIs require the leadership capacity to promote the initiative and bring the right people and resources to the table, the management capacity to keep the operation on track, and the staff capacity to implement effectively. Not having the right people in leadership positions is particularly problematic, as the sponsors of the Urban Health Initiative quickly discovered. Although staff at the Robert Wood Johnson Foundation (RWJF) knew that Urban Health Initiative leaders would require a skill set different from that needed in more traditional community initiatives (they even budgeted salaries to attract highly experienced, policy-oriented local program directors), they initially deferred to the sites in their leadership selection. A number of sites chose program directors with experience in service delivery, but relatively little background in public policy, politics, or systems change issues. Lack of systems knowledge and skills made it difficult for these program directors to conceptualize and strategize for scale (Jellinek, 2004b). RWJF eventually made adherence to established leadership criteria a prerequisite for the five sites selected to move forward with implementation, which ensured Urban Health Initiative had program directors capable of building relationships with high-level city officials and galvanizing institutional support for the initiative.

For the CCIs examined, no particular governance structure was associated with improved

outcomes. Good management and capable staff leadership, however, played a clear role in enabling the level of coordination and collaboration required to nurture comprehensive programs and strategies. Successful CCIs typically had a strong executive widely accepted by participating stakeholders and one to two dedicated staff positions per site. Capable executives generally had extensive place-based experience, in the case of geographically focused initiatives (e.g., deep pre-existing networks of relationships and an intimate knowledge of local social and political issues), or extensive policy experience and political contacts (e.g., RWJF hired a former mayor to lead the Urban Health Initiative's national program office). These leaders focused on building relationships with new allies and negotiating to leverage additional resources, thereby facilitating the achievement of results while serving as the glue to hold the initiative together.

Linkages Between the Community and Higher Levels of Civic Organization, Including City, State, and Federal Government

Even neighborhood-level change requires relationships and partnerships with entities beyond the neighborhood to strategically leverage initiative dollars, redirect public funding, and access needed expertise and skills. CCRP was particularly successful in leveraging its resources to access additional funding. Its funding strategy emphasized the use of "first-in" money to reduce the risk to investors as well as to strategically acquire the technical assistance needed to apply for funding through state and federal programs. This strategy allowed CCRP to leverage the \$9.4 million invested by the funding collaborative to generate an additional \$44 million to support its activities (Spilka and Burns, 1998). In its parks and green space efforts, CCRP leveraged nearly \$100 for every dollar invested.

Other initiatives, such as Pew's Neighborhood Preservation Initiative and the Hewlett Foundation's Neighborhood Improvement Initiative, were also intentional about building relationships, particularly between individual neighborhoods and city hall, as well as between neighborhoods and businesses and other community organi-

zations. CCRP, LINC, Health Improvement Initiative, and Urban Health Initiative all used creative strategies to tap into significant sources of state and federal funding. In most cases, the creativity paid off as a result of the individual and institutional relationships intentionally built and strengthened through the work of the initiatives.

Forging strong connections to the public sector is critical, particularly for CCIs designed to fill gaps in community governance and services. The Cleveland Community Building Initiative, The Atlanta Project, and Ford Foundation's Neighborhood and Family Initiative struggled with sustainability in part because, as new creations, their governance structures lacked natural connections to their communities' civic infrastructures, which, in turn, hindered their ability to garner long-term financial and institutional support. Lack of focus on building civic connections was a strategic design flaw, as acknowledged by participants in each of these initiatives. Though many CCIs continue to struggle with how to manage relationships in the political arena, forging relationships with elected officials and formal governance bodies in the public sector can improve both the effectiveness and durability of community change initiatives.

CCI strategies are more likely to effectively address social problems when community residents are tapped for knowledge about root causes and barriers to change.

Scope

By definition, CCIs attempt to address social problems in a comprehensive (i.e., multifaceted) manner. They strive to generate solutions that create synergies among programs and across policy arenas in order to respond more holistically to the problems facing children and families. For each CCI, what "comprehensive" means or what scope is appropriate depends on the condi-

tions in the targeted communities; the priorities of the sponsoring funders; the desired results; and the existing capacities of the individuals, organizations, and communities involved. Achieving the appropriate scope to generate significant results, particularly at the community level, has been a challenge for comprehensive community initiatives. Those CCIs that have successfully addressed the needs of low-income children and families tend to build incrementally toward broad goals — or tackle comprehensively more narrow goals — using the approaches described below.

Integrated Strategies That "Connect the Dots"

Achieving the scope that makes a difference is usually a case of strategically integrating potentially synergistic programs and activities. Intentionally connecting the dots between various efforts capable of addressing the root causes of a problem is more likely to create a lasting solution than simply doing a lot of different things and hoping they add up. The ability of a CCI to create measurable change often hinges on this distinction. Successful initiatives engage in a careful analysis of the problem by exploring root causes and identifying all the pieces of the solution required to overcome the problem; initiatives that fall short tend to latch on to one aspect of the solution, or an eclectic mix of aspects, improving some symptoms but rarely addressing root causes.

For instance, when LINC set out to design a welfare-to-work initiative (before federal welfare reform legislation was enacted), it sought to both "create better choices and opportunities for those on welfare and better supports and assistance for those who hire them" (Center for the Study of Social Policy, 1998). The problem LINC intended to address involved not only a lack of employment opportunities for welfare recipients, but also economic disincentives in the welfare system that discouraged recipients from obtaining work.

LINC tackled the problem using a three-pronged approach: 1) mobilizing the business community, 2) improving the employability of welfare recipients, and 3) changing welfare rules to support program innovation. Specific activities

included creating a centralized process to create new jobs for welfare recipients in the corporate sector; “cashing out” welfare benefits to generate funds for employers to supplement hourly wages in newly created jobs, thereby creating a livable wage; allowing former welfare recipients to continue to receive health insurance through Medicaid, as well as child care assistance, while employed; creating neighborhood job centers to provide job training and placement services; shifting the focus of the Department of Social Services to providing supportive case management services to help individuals attain and sustain employment; and, finally, developing new performance-based contracts with local providers of employment training, which created incentives for increasing job-retention rates. LINC’s integration of employment programs and services, business incentives, and welfare system changes successfully moved individuals from welfare to work in a way that improved the quality of life for former welfare recipients and their families.

An underlying factor in this success was the role that welfare recipients themselves played in identifying system barriers and service gaps. CCI strategies are more likely to effectively address social problems when community residents are tapped for knowledge about root causes and barriers to change. Successful CCIs allow for meaningful resident input on priorities and strategies, as opposed to selling residents on a preconceived strategy.

Effective Planning and Evaluation

An effective “theory of change” or collaborative planning process at the start of an initiative convenes stakeholders to collectively identify the concrete assumptions that inform both the overarching strategic approach and the specific programs or other efforts to be pursued. In the Cleveland Community Building Initiative, for example, the theory-of-change process forced participants to surface hypotheses about the connections among different social problems targeted by the effort. After examining how issues were interconnected, stakeholders could then design responses with sufficient scope to address the full range of factors contributing to poor outcomes.

In The California Wellness Foundation’s (TCWF’s) Health Improvement Initiative, an iterative evaluation process provided regular opportunities to make mid-course corrections as strategies and programs were implemented. Every six months directors from the nine health partnerships came together, without TCWF staff, to engage in an open and honest discussion of what was going on in each site. These regular, facilitated retreats created a safe space for honest reflection and constructive criticism, as well as a learning community environment in which to share promising practices and develop responses to challenges and opportunities.

For those CCIs using an incremental process to build scope (e.g., by adding program elements over time), an iterative evaluation process allows for regular assessment of whether the program or strategy has successfully achieved scope by 1) targeting the full range of factors contributing to poor outcomes and 2) engaging a wide enough range of stakeholders.

Flexible Funding to Respond to Changing Community Context

Comprehensive community initiatives arose largely out of the limitations of attempting to solve social problems through narrowly defined, categorically funded services. Given the nature of foundation grantmaking, however, a project-based, categorical approach is sometimes replicated within CCIs. By contrast, flexible funding allows a CCI to allocate resources to add critical staff capacity, acquire technical expertise, or take advantage of emerging opportunities. CCRP credits flexible funding and authority to make spending decisions as key to its ability to be entrepreneurial and to quickly apply resources when and where needed; CCRP received funding from a collaborative group of 21 entities, with most of the money remaining flexible, although some foundations only supported specific programmatic activities.

Scale

Scale is perhaps the most difficult dimension for a CCI to realize. Scale requires a CCI to achieve impacts beyond positive results for small groups

of individuals and families and “move the needle” on a social problem or condition for the community as a whole. Much of the disappointment in the limited success of comprehensive community initiatives emanates from their inability to go to scale; a CCI may achieve important positive outcomes for a number of individuals and families, but the number of community residents reached is often insufficient to achieve *community-level change*.

Very few CCIs consider the issue of scale explicitly, and even fewer think about scale upfront.

The experience of CCIs shows that most energy and effort is focused on the issues of scope (how best to deliver a set of integrated or comprehensive services or strategies that will achieve positive results for children and families) and sustainability (how to keep those programs going). Very few CCIs consider the issue of scale explicitly, and even fewer think about scale upfront. This results in the creation of “community change” strategies that prove difficult to scale up or are, in fact, insufficient to generate change at the community level. Initiatives most successful in achieving broad community-level change are designed for scale, with an explicit focus on community change results and a framework for implementation that is feasible for achieving those results, as described in the approaches discussed below.

Clear Articulation and Measurement of Desired Community Change Results

Both the Urban Health Initiative and the Health Improvement Initiative identified explicitly the “needle” they wished to move at the community level. Urban Health Initiative set out to “improve the health and safety of enough children to make a measurable difference in the child health statistics for the city as a whole” (Metz, 2005). Each Urban Health Initiative site collected statistics relevant to its unique conditions and needs (the

number of youth homicides in Philadelphia, Pa., for example), and these specific statistics became the benchmarks by which success was measured. Similarly, the focus on improving “population health” in the Health Improvement Initiative included social, economic, and cultural determinants of health, with each health partnership identifying specific indicators of health in its planning process.

A byproduct of the relative lack of emphasis on scale is that CCIs often do not track community-level outcomes or assess the threshold needed to make a measurable, community-wide difference in a problem. All too often, CCI programmatic activities are “scaled up” in very modest terms, rather than scaling up to make a true difference community-wide. The evaluation of the Ford Foundation’s Neighborhood and Family Initiative, for example, found that despite ambitious aspirations, most sites engaged in a “broad range of small, discrete, time-limited projects, the impact of which was limited (though important) to those individuals directly involved” (Chaskin, 2000).

Creating the Capacity for Scale

The concept of community-level change is daunting. Understanding what it takes to make change at the community level often requires a fundamental paradigm shift among those charged with designing and implementing community change initiatives. The first step is to understand what scale means and what it takes to get there. The experience of the Urban Health Initiative is illuminating. Urban Health Initiative is one of the few CCIs that have made working at scale a central tenet of their initiative. Although RWJF specified that the goal for each Urban Health Initiative site was to make a measurable difference in health and safety statistics *citywide*, the shift in thinking this required was not automatic; sites underwent a fairly extensive and frustrating process before grasping the concept of scale and what it would take to go to scale. The breakthrough moment came with the introduction of the “denominator exercise,” which forced sites to calculate the number of children or families they would need to reach to make a measurable difference in citywide statistics. The process was painful but revealing,

creating a crucial turning point for the initiative when several sites realized they did not have the right staff capacities, relationships, or strategies to go to scale (Metz, 2005).

Use of Data to Drive the Initiative and Influence Policy Change

Initiatives that go to scale, particularly beyond a single neighborhood, incorporate the development and use of data as a driving force to build grassroots community support, inform the general public, influence policymakers, design and modify strategies, and track and communicate results. Data capacity not only supports public relations and communications, but is also central to the ability of an initiative to achieve desired results. The Health Improvement Initiative, for example, framed data integration as a core systems change activity. Building the capacity of communities to organize and share data across agencies and with the public was also a focus for LINC and the Urban Health Initiative. Examples of capacities built include integrated data systems for tracking clients (along with common intake and referral forms); community resource repositories that provide information about the availability of child care and after-school programs, job opportunities, and social service programs; and data warehouses that collect and organize data from multiple agencies to identify service gaps and trends and assist with cross-agency planning.

One key theme that emerges regarding the collection and use of data is the importance of building an audience. Raw numbers alone rarely speak for themselves. The initiatives that most successfully used data to impact policy did so by positioning an organization to provide data to decision-makers and participate in data-driven policy discussion as a core function of its operations. For example, TCWE, as part of its Health Improvement Initiative, funded the creation of the California Center for Health Improvement. Located in the state capitol of Sacramento, this organization works to directly influence the state legislature by providing non-partisan data on population health. The initiative effectively cultivated an audience for the data that was collected.

In California, routine local and state opinion polls provide policymakers with evidence of broad public support for specific health programs and broader reform efforts. The California Center for Health Improvement disseminates poll results, along with its independent policy analysis, to policymakers and the public, establishing itself as a credible voice on population health and health policy.

Similarly, as part of the Urban Health Initiative, all five sites developed campaign strategies to build networks of support across the political spectrum that could help translate data into policies and strategies. For instance, using geographic information systems developed as part of Philadelphia's Safe and Sound program, city officials decided where to locate 11 new Beacon programs based on a mapping of social indicators and resource data (VanderWood, 2003). Safe and Sound also produces a children's budget and report card that feed data directly to key decision makers in local government. Urban Health Initiative sites have been successful in using data to inform policy making because they provide a "neutral table at which holders of data are comfortable sharing information" and because they work to standardize data collection and provide tools and products that meet the information needs of policymakers.

Sustainability

Foundation-sponsored CCIs inevitably face the reality of the loss of core funding at the end of a demonstration period. Lessons from the early history of CCIs encourage foundations to set clear expectations for the duration of funding and to be more open about their intended involvement postdemonstration. Despite the frequent admonishment to CCIs to think about sustainability early, two barriers undermine good intentions. The first is a lack of clarity or agreement on *what* to sustain; thus, the expectations for what should be sustained (e.g., a particular set of programs, a specific partnership or collaborative process, the community's problem-solving capacity) need to be clear and mutually agreed upon. The second barrier to sustainability is a misalignment between how programs and supporting capaci-

ties are structured and funded initially and their long-term funding needs. Attention often focuses on how to find funding to sustain programmatic activities, with less attention paid to the processes and structures that support community organizing and planning (Foster-Fishman et al., 2003). Pursuing categorical approaches to funding discrete programs at the expense of the supporting infrastructure exacerbates pressure on thinly staffed organizations, often resulting in a reluctant scaling back of activities that the community has worked so hard to put in place.

A key factor in facilitating community ownership and sustaining an initiative over time is a community's sense of self-efficacy.

For positive community-level changes to endure, CCIs need to approach sustainability with a focus beyond the quest for alternative sources of funding; sustainability also is a function of the degree to which an initiative has been integrated into the way the community does business, as well as the degree to which the community has expanded its capacity to engage in ongoing change. There are three elements that underlie a CCI's ability to achieve sustainability:

1. *Institutionalization*: the extent to which the structures, relationships, and activities of the initiative were embedded in the community;
2. *Financing*: how the initiative continued to fund itself after the end of a demonstration period; and
3. *Capacity*: the degree to which the initiative was able to bring to the community the skills and knowledge needed to continue to support innovative approaches to addressing complex social problems.

While a few CCIs successfully implemented programs, practices, and strategies to support lasting community change, most CCIs realize a far

more limited degree of sustainability. While it is perhaps too early to make definitive conclusions about sustainability, some practices and strategies are promising, as discussed below.

Community Ownership of the Initiative From the Start

It seems obvious that an initiative should be “owned” by those who are expected to sustain it (Foster-Fishman et al., 2003). Often, however, communities view foundation-sponsored CCIs as foundation-owned and therefore see the funder as responsible for sustainability. Making it clear that the community owns and is responsible for sustaining an initiative is partly a matter of establishing and communicating clear expectations from the beginning. Setting up a decision-making process and providing leadership and capacity-building supports are also critical for allowing community ownership to take hold.

A key factor in facilitating community ownership and sustaining an initiative over time is a community's sense of self-efficacy. Initiatives that maintain momentum for positive change, build trust, and increase the level of civic engagement among residents are more likely to sustain not only existing programs, structures, and relationships, but also *community-level outcomes*; such initiatives leave communities with increased capacity to identify and solve problems, attract private and public investment, and organize and advocate for change. In fact, it is this sense of community self-efficacy that *residents* most want sustained and that initiative *sponsors* tend to consider least when thinking about sustainability.

Building and Sustaining the Capacity of Institutions Rather Than Programs

Most CCIs, either by design or by necessity, engage in institution building. When initiatives focus on building and sustaining the capacity of institutions to engage in the ongoing work of community change, rather than sustaining particular programs, it is more likely that the community will be left with the ongoing capacity for change. Creating new institutions that “fill the gaps” in terms of governance capacity or service delivery, especially in disenfranchised

communities, is hard work and risky. Such work can pay off, though, leaving a community with much-needed programs and a permanent vehicle for collective problem solving. Edna McConnell Clark Foundation's Neighborhood Partnership Initiative left several community organizations with expanded capacity to serve residents and provide programs because of its emphasis on organizational capacity building.

Most CCIs avoid starting from scratch when it comes to institution building, usually opting to select well-established lead organizations, facilitate their expansion into new programmatic areas, and strengthen their capacity as community "change agents" and capacity builders. Indeed, those CCIs that succeeded in leaving behind stronger institutional capacity did so by paying as much attention to building "change agent" capacity as to building "service provider" capacity, if not more.

Building change agent capacity means helping the lead organization 1) develop stronger ties with the community, 2) build relationships across sectors and within the political arena, and 3) learn to effectively use data in strategy design and problem solving. CCRP, LINC, and other successful initiatives have an explicit community-organizing component that often requires an initiative-funded staff member to serve with the lead organization or neighborhood collaborative to expressly forge meaningful connections with residents. It is important for funders to remember that an institution *in the community* is not necessarily a *community institution*.

Building on existing capacity has significant merit if there is alignment and fit with the initiative's goals. In testing the feasibility of expanding the role of established community development corporations as agents for community change, CCRP was successful largely because they selected strong organizations and adopted an incremental approach to change that allowed the CDCs to take on more breadth gradually. The CDCs also were careful to expand organically, taking on projects and programs that were natural extensions of their core missions. CCRP offered technical

assistance to help the CDCs manage the organizational challenges that arose from this growth. The combination of organizational development assistance and pragmatic growth allowed the formerly housing-focused organizations to take on a range of community change activities in a sustainable fashion.

Perhaps the most important benefit of institution building is the *adaptive* capacity that community-based organizations can build, allowing them to be entrepreneurial and nimble in the face of changes in the political, economic, demographic, and fiscal landscape. One initiative director summed it up by saying, "our success was due to being able to deal with — and take advantage of — surprises, accidents, and crises."

Long-Term Sustainable Funding

Developing and maintaining access to funding streams and other sources of financial support are, of course, central to sustainability. CCIs have successfully secured long-term funding in various ways, most effectively by tapping into long-term sources of funding from the beginning. For instance, CCRP leveraged its private foundation funding to secure public dollars from the city as well as from federal agencies, setting new programs and activities on a stable funding base from the beginning. LINC identified an untapped source of matching federal funds, which they capitalized on for the benefit of local provider organizations as well as their own operations; this "free money" generates the core of LINC's ongoing institutional operating budget. The ability to secure such long-term funding requires knowledge of the intricacies of public funding streams and how to access them.

The Urban Health Initiative also focused on building deep knowledge of funding streams to capitalize on opportunities to pool, restructure, or otherwise capture significant public funding. Urban Health Initiative sites experienced significant success in securing new sources of financial support to sustain their work. Urban Health Initiative sites were able to tap into funding streams in these creative ways due to a dedicated staff position at each site with the responsibility of researching and

developing new financing options. In addition, a national-level funding consultant was engaged to provide ongoing support to all sites.

The ability to secure long-term funding requires knowledge of the intricacies of public funding streams and how to access them.

Pew's Neighborhood Preservation Initiative and Hewlett's Neighborhood Improvement Initiative both partnered with local community foundations, in part to access local sources of private funding. In the case of the Neighborhood Preservation Initiative, community foundations in each of the nine cities were required to match 50% of the yearly grant. This co-investment strategy encouraged local buy-in and created a stake in the sustainability of local efforts. At the end of the demonstration period, the sites had an existing base of local financial support; even though they were unable to fully replace the funding that Pew had provided, all of the local agencies and their initiative-initiated programs were still in operation several years after the end of the initiative.

Lessons Learned

Underlying the ability of CCIs to achieve and sustain community-level change is the need to pursue initiatives that fit the community's history, capacity, and readiness for change. Although the work of a CCI is complex, it is far less difficult when the initiative is structured with careful alignment among desired outcomes, strategies, and resources (money and people). The findings reported here have several key implications for foundations and other sponsors of comprehensive community change initiatives. While the complexity and shifting dynamics of these efforts often generate challenges that are difficult to anticipate and control, there are specific steps foundations can take to set the stage for success (see Table 3).

Lesson 1: Plan, Operate, and Evaluate Based on a Systems- and Community-Change Framework

CCIs today have a better understanding of the need to focus on policy change and systems reform to achieve community-level outcomes. For the most part, though, CCIs remain woefully ill-equipped to engage in systems change; comprehensive community initiatives need operational models and strategies to achieve systems change and capable staff and institutions to operate in the political sphere. Changing the way business is done requires knowing how the system works: What are the subsystems and how do they interact? Who are the key decision makers? What are the embedded incentives and reinforcements that keep the system operating as it does? What are the regulations and operating procedures that govern existing practices? The ability to manipulate rules, redirect funding, facilitate process reengineering, create new policy, and encourage cross-agency collaboration requires an intricate knowledge of agency politics, legislation, regulations, and bureaucratic procedures. Comprehensive community initiatives that seek to engage in systems change need knowledgeable, dedicated staff with systems expertise. They also need leaders and intermediaries who have or can build relationships at the right level to be taken seriously by those in power. *Systems knowledge* uncovers opportunities to streamline, integrate, restructure, and redirect; *relationships* give life to those opportunities.

Unless CCI sponsors pay close attention to what systems change really involves, this goal is likely to remain amorphous and impossible to attain.

In addition to systems knowledge and connections, CCIs need another capacity to engage in systems change: the ability to create, analyze, package, and disseminate information to influence policymakers and the public. Initiatives that made a serious effort to engage in systems change all relied on data aggregation and communications strategies to change the context of public debate, inform policymakers of the effects on their constituents of current problems

TABLE 3 Lessons for Funders

<p>Know thyself</p> <p>Take the time to clearly articulate the foundation's own motivations and expectations regarding the initiative:</p> <ul style="list-style-type: none"> • How much control does the foundation want to retain? What freedom exists in the initiative? What are the “givens?” • How comfortable is the foundation with conflict? • How patient is the organization? What kind of success does the foundation want to have and by when? • How ready is the foundation to take on the initiative? What internal capacity is missing? What partners will be needed to complement the foundation's strengths?
<p>Do your homework</p> <p>Build a solid understanding of the problem and what is needed to solve it:</p> <ul style="list-style-type: none"> • What does the system look like? How does it operate? • What are the levers of change? • What strategy or combination of strategies is likely to solve the problem? • What are the strengths and weaknesses of the various solutions? • In what contexts would these solutions work best?
<p>Stack the odds in favor of success</p> <p>Make sure the initiative has the necessary ingredients for success.</p> <ul style="list-style-type: none"> • Map out all the resources, competencies, and relationships that it will take for the initiative to be successful and make sure they are put in place. • Don't provide dollars and then sit back and hope the community organizations can put the rest of the puzzle together. Identify partners, engage an intermediary, create a local collaborative, or strategically deploy consultants or foundation staff to address capacity gaps.
<p>Be accountable</p> <p>Performance matters, and foundations should be prepared to hold grantees — and foundation staff — accountable for performance. Poor performers drag down the success of everyone involved.</p> <ul style="list-style-type: none"> • Realistic and specific performance goals should be established from the very beginning. There should be clear — and clearly communicated — benchmarks that determine whether funding continues. • Review progress periodically and engage in collaborative problem solving to proactively address capacity gaps that may affect performance. • Ask for — and listen to — feedback on the foundation's performance. Promptly address those concerns.
<p>Keep it manageable</p> <p>Limit the number of sites to those that are ready and prepared to engage at the expected level of performance:</p> <ul style="list-style-type: none"> • Inclusion of sites based on arbitrary political or geographical considerations is almost always counterproductive — because they're not fully ready, these sites require a disproportionate amount of resources and attention and this diversion of critical resources undermines the success of the other sites. • Phase the initiative if necessary to allow for needed capacity building and readiness. Establish performance goals that are appropriate to the phase of the initiative. • Stay disciplined to the initiative's core strategic objectives. Look for “easy wins” to generate momentum and community buy-in, but avoid the mission creep that dissipates the initiative's energy and focus.

and proposed strategies, and provide data tools of value to both the community and the public sector.

Lesson 2: Choose Focused and Affordable Strategies

Across the CCIs studied here, a key factor in achieving community-level change was employing the right strategies to produce the desired outcomes. Developing the right strategies requires a thoughtful process for considering issues of timing and sequencing. CCIs that pursue too many goals simultaneously are likely to spread their capacity and resources too thin to accomplish meaningful change.

An important factor in sustaining positive changes is how affordable the strategies are to the community during and after foundation funding is available. Creating locally sustainable strategies means thinking about long-term funding upfront and being realistic about the capacity of a community to generate the ongoing resources needed to maintain the work. CCIs that achieved greater success in sustaining their work tended to 1) leverage their CCI-related funding to acquire additional private or public funding or 2) create long-term financing strategies from the beginning. On the other hand, CCIs that used most of their funding to create operational programs, intending to address sustainable funding for these programs at the end of the demonstration period, tended to find themselves scaling back programs significantly for lack of sufficient resources. One promising approach to generating locally sustainable strategies is to channel community-generated resources into the programmatic implementation of CCI activities while using national funding for capacity building.

Lesson 3: Develop Capacity for the Strategic Use of Data

A theory of change that clearly delineates desired outcomes and the operating framework to achieve these outcomes is important; however, CCIs also need to bridge the gap that often arises between desired outcomes and planned programs and strategies. The logic model arrows that link planned activities to outcomes and

impact often represent a leap of faith; to confirm the true significance of these arrows requires a rigorous analysis of hard data, as in the “denominator exercise” described above. One can imagine, for example, the change in strategic thinking among program staff when the goal shifted from “reducing youth homicide by increasing youth participation in after-school activities” to “reducing youth homicides by 50% by, among other things, increasing the number of kids in after-school activities by 96,000” (VanderWood, 2003). Parameters such as these provide specific benchmarks against which staff can evaluate alternative strategies. Employing demographic data, program participation and service data, and estimates of effectiveness through best practice information, the feasibility of bringing certain strategies to scale can be realistically assessed. The denominator exercise was a turning point for the Urban Health Initiative because it generated specific performance targets and exposed the limitations of planned strategies.

In addition to providing resources for data acquisition, foundations must also invest in building the capacity of sites to *use* data and develop an education process that creates a genuine understanding of how a data-driven approach can help sites realize their goals.

Lesson 4: Plan for Change, Conflicts, and Risks

Foundations need to make sure they are ready to embark on a community change process before they engage communities. This means that foundations should make sure that they are able to assess community readiness, have a system in place for developing readiness and the other long-term community capacity, and have strategies for addressing the well-documented conflicts and risks so that they can lead to opportunities for community and foundation transformation. Funders generally fail to plan for these challenges. They find themselves having to react and “reinvent the wheel,” which leads to frustration, disillusionment, and significant delays in progress. Foundations are often accused of needless meddling in the implementation of a CCI. This behavior tends to occur when roles and responsibilities are not clearly demarcated.

Foundations that cause frequent shifts in direction or change expectations and requirements can seriously undermine the potential of a CCI to be successful. Most foundations navigate a fine line between being prescriptive enough to ensure grantees stay true to the objectives of the initiative and respecting local autonomy to make decisions based on knowing what is best in each community.

At times, however, a foundation should be more directive in order to avoid major problems down the road. Generally speaking, more direction is required when there is a need to avert or correct a disconnect or misalignment in the theory of change. For instance, in conceptualizing the Urban Health Initiative, RWJF staff knew that local site leaders needed to be high-caliber professionals with extensive experience in the policy arena. They even budgeted for program director positions at significantly higher levels than typical. But when it came time to hire local program directors, RWJF staff members deferred to the sites; several sites hired less experienced, service-oriented directors. Though apprehensive, the foundation went along with these hiring decisions. Despite commitment and good intentions, the lack of policy expertise and leadership skills among the inexperienced directors limited their ability to design and execute effective strategies, nearly derailing the initiative. In retrospect, RWJF staff realized that they should have been more directive in the critical area of staffing (Jellinek, 2004a).

The Hewlett Foundation faced a similar dilemma in its Neighborhood Improvement Initiative. Hewlett's theory of change involved a resident-driven planning process for creating a "comprehensive, coordinated, multi-year strategy to address the problems that impair the quality of life" in its targeted neighborhoods (Brown & Fiester, 2007). Hewlett was frustrated, however, by the plans that sites developed: essentially laundry lists of projects, not strategic plans to "connect fragmented efforts" to reduce poverty. Hewlett was reluctant to push back, concerned that this would be viewed as not honoring residents' priorities. Ultimately, Hewlett did impose

an explicit outcomes-based framework to sharpen the initiative's focus, but the timing, well into the implementation phase, did not sit well with most of NII's participants.

Change often involves conflict. With any concerted effort to create change in a community, friction, disagreement, and community conflicts are likely to emerge, especially if the initiative supports the empowerment of residents. Foundations must anticipate, acknowledge, and prepare for conflict, both among community stakeholders and between the community and the initiative sponsors; in particular, foundations must prepare for risks and conflicts that they traditionally avoid, but that are critical to encouraging community change. For example, foundations need to think through how they will respond when their executives and boards want to know about outcomes. Anticipating issues and putting in place systems and processes to address them will help prevent and mitigate potential conflicts. Principles for handling conflict should be carefully developed, including clearly defined limits around how grantees may utilize a foundation's financial and other support.

To effectively manage change, foundations should be as clear, consistent, and *insistent* as possible, early in the process, regarding their expectations, the theory of change, and the underlying assumptions. Ensuring clarity and agreement upfront, before becoming too vested in a particular community or set of partners, reduces the need for disruptive shifts and increases the likelihood of success. Foundations should make sure all the right pieces are on the board and that everyone knows the rules of the game; then they should let the communities play.

References

- ALLIANCE FOR REGIONAL STEWARDSHIP, & COLLABORATIVE ECONOMICS AND FIELD RESEARCH CORPORATION. (2005). *Results, resilience, and renewal: The Mayfair index of progress*. Denver, CO: Mayfair Improvement Initiative.
- ASPEN INSTITUTE. (1999). *Neighborhood and family initiative*. Retrieved January 4, 2007, from http://www.commbuild.org/html_pages/ccilist.htm.

- BARBASH, S. (1994, June/September). The Atlanta project. *Boston Review*, Retrieved December 6, 2006, from <http://www.bostonreview.net/BR19.3/Barbash.html>.
- BERGER, R. A. (2006). *¡Sí se puede! Lessons for community transformation*. San Jose, CA: Mayfair Improvement Initiative.
- BRECHER, C., SILVER, D., SEARCY, C., & WEITZMAN, B. C. (2005). Following the money: Using expenditure analysis as an evaluation tool. *American Journal of Evaluation*, 26, 166–188.
- BRIDGESPAN GROUP. (2004). *Harlem Children's Zone: Transforming the organization while scaling up in a tightly defined local service area*. New York: Harlem Children's Zone.
- BRIGGS, X. (2002). *The will and the way: Local partnerships, political strategy, and the well-being of America's children and youth*. Cambridge, MA: John F. Kennedy School of Government.
- BROWN, P. (1996). Comprehensive neighborhood-based initiatives. *Cityscape: A Journal of Policy Development and Research*, 2(2), 161–176.
- BROWN, P. (2005). *The experience of an intermediary in a complex initiative: The Urban Health Initiative's national program office*. Seattle, WA: Urban Health Initiative. Retrieved April 3, 2007, from http://www.urbanhealth.org/docs/ExperienceREV_for%20web.pdf.
- BROWN, P., BRANCH, A., LEE, J. (1998). *The Neighborhood Partners Initiative: A report on the start-up period*. Retrieved December 28, 2006, from http://www.emcf.org/pdf/npi_startupreport.pdf.
- BROWN, P., & FIESTER, L. (2007). *Hard lessons about philanthropy & community change from the Neighborhood Improvement Initiative*. Menlo Park, CA: The William and Flora Hewlett Foundation.
- BROWN, P., RICHMAN, H., & WEBER, J. (2005). *The Urban Health Initiative: Lessons for philanthropy*. Chicago: Chapin Hall Center for Children.
- CALIFORNIA WELLNESS FOUNDATION. (2003). *Health Improvement Initiative final evaluation report*. Woodland Hills, CA: Group Health Cooperative of Puget Sound. Retrieved April 3, 2007, from http://www.tcfw.org/pdf_docs/health_improvement.pdf.
- CENTER FOR THE STUDY OF SOCIAL POLICY. (1998). *Setting a community agenda: A case study of the Local Investment Commission, Kansas City, Missouri*. Retrieved January 2, 2007, from <http://www.kclinc.org/uploadedFiles/Data/reports/casestudy2.pdf>.
- CHASKIN, R. (2000). *Lessons learned from the implementation of the Neighborhood and Family Initiative: A summary of findings*. Chicago: Chapin Hall Center for Children.
- CHASKIN, R., CHIPENDA-DANSOKHO, S., JOSEPH, M., & RICHARDS, C. (2001). *An evaluation of the Ford Foundation's Neighborhood and Family Initiative*. Retrieved January 3, 2007, from http://www.chapinhall.org/article_abstract.aspx?ar=1295.
- CHEADLE, A., BEERY, W. L., GREENWALD, H. P., NELSON, G. D., PEARSON, D., & SENTER, S. (2003). Evaluating the California Wellness Foundation's Health Improvement Initiative: A logic model approach. *Health Promotion Practice*, 4(2), 146–156.
- CIVIC PRACTICES NETWORK. (1996). *Case study: Investing in community: Lessons and implications of the Comprehensive Community Revitalization Program*. Retrieved January 5, 2007, from <http://www.cpn.org/topics/community/bronx2.html>.
- COMMUNITY FOUNDATION OF SILICON VALLEY. (2005). *Lessons from the middle: Managing a Neighborhood Improvement Initiative*. Retrieved March 14, 2007, from <http://www.siliconvalleycf.org/docs/LessonsfromtheMiddle.pdf>.
- CORNERSTONE CONSULTING GROUP. (2002). *End games: The challenge of sustainability*. Baltimore: The Annie E. Casey Foundation.
- FOSTER-FISHMAN, P. G., DEACON, Z., NOWELL, B., & SIEBOLD, W. (2003). *Lessons for the journey: Part ii: Strategies and suggestions for guiding planning, governance, and sustainability in comprehensive community initiatives*. East Lansing, MI: Michigan State University Evaluation Team.
- GILES, M. W. (1993). The Atlanta Project: A community-based approach to solving urban problems. *National Civic Review*, 82, 354–363. Retrieved December 6, 2006, from <http://www.cpn.org/topics/community/atlanta.html>.
- HALPERN, R. (1995). *Rebuilding the inner city: A history of neighborhood initiatives to address poverty in the United States*. New York: Columbia University Press.
- JELLINEK, P. (2004a). *Reflections on the start-up of the Urban Health Initiative: If we had it to do over, what would we do differently?* Seattle, WA: Urban Health Initiative. Retrieved April 3, 2007, from <http://www.urbanhealth.org/docs/Reflections%20for%20web.pdf>.
- JELLINEK, P. (2004b). *The origins of the Urban Health Initiative*. Seattle, WA: Urban Health Initiative. Re-

- trieved April 3, 2007, from <http://www.urbanhealth.org/docs/The%20Origins%20for%20web.pdf>.
- KIRBY, M. (1998). Chapter 4: Vollintine-Evergreen, Memphis. *Cityscape: A Journal of Policy Development and Research*, 4(2), 61–87.
- KUBISCH, A., AUSPOS, P., BROWN, P., CHASKIN, R., FULBRIGHT-ANDERSON, K., & HAMILTON, R. (2002). *Voices from the field II: Reflections on comprehensive community change*. Washington, D.C.: Aspen Institute.
- LOCAL INVESTMENT COMMISSION. (2002). *Evaluation of the Local Investment Commission (LINC) of greater Kansas City, Missouri's before and after school program: Final report*. Kansas City, MO: Bush Center in Child Development and Social Policy. Retrieved January 2, 2007, from <http://www.kclinc.org/uploadedFiles/Data/reports/YaleBushEval.pdf>.
- METIS ASSOCIATES, & CITY UNIVERSITY OF NEW YORK CENTER FOR HUMAN ENVIRONMENTS. (2001a). *ACORN Neighborhood Partners Initiative: Report on the 2001 community survey*. New York, NY: Author. Retrieved January 4, 2007, from <http://web.gc.cuny.edu/Che/projects/npi/ACORN.pdf>.
- METIS ASSOCIATES, & CITY UNIVERSITY OF NEW YORK CENTER FOR HUMAN ENVIRONMENTS. (2001b). *Mid-Bronx Neighborhood Partners Initiative: 2001 community survey report*. New York, NY: Author. Retrieved January 4, 2007, from <http://web.gc.cuny.edu/Che/projects/npi/Mid-Bronx2001.pdf>.
- METZ, R. A. (2005). *Sustainable funding for program strategies*. Seattle, WA: Urban Health Initiative. Retrieved April 3, 2007, from http://www.urbanhealth.org/docs/Sustainable_for%20web.pdf.
- MEYER, D. A., BLAKE, J. L., CAINE, H., & WILLIAMS PRYOR, B. (2000). *On the ground with comprehensive community initiatives*. Columbia, MD: Enterprise Foundation.
- MILLER, A., & BURNS, T. (2006). *Going comprehensive: Anatomy of an initiative that worked — CCRP in the South Bronx*. New York: Local Initiatives Support Corporation.
- NARIO-REDMOND, M., MILLIGAN, S. E., & NORTON, J. S. (1998). *The 1997-98 Cleveland Community Building Initiative baseline report on collaborative relationships*. Cleveland, OH: Case Western Reserve University. Retrieved February 1, 2007, from http://povertycenter.cwru.edu/urban_poverty/dev/pdf/complete2.pdf.
- OMG CENTER FOR COLLABORATIVE LEARNING. (1997). *The Rebuilding Communities Initiative annual evaluation report: First year of capacity building*. Philadelphia, PA: Author.
- PASTOR, M., JR., BENNER, C., ROSNER, R., MATSOUKA, M., & JACOBS, J. (2004). *Linking Neighborhood Improvement Initiatives and the new regionalism in the San Francisco Bay area*. Santa Cruz, CA: The Center for Justice, Tolerance, and Community at The University of California Sant Cruz. Retrieved March 14, 2007, from http://cjtc.ucsc.edu/docs/r_Community_Building_Community_Bridging.pdf.
- PARZEN, J. (2002). *University partnerships with community change initiatives: Lessons learned from the technical assistance partnerships of the William and Flora Hewlett Foundation's Neighborhood Improvement Initiative*. Menlo Park, CA: William and Flora Hewlett Foundation. Retrieved March 14, 2007, from <http://www.hewlett.org/NR/rdonlyres/EF2DE98C-0C6C-464B-B4F0-01699B1DF059/0/UniversityPartnershipsReport.pdf>.
- PERKINS, T. (2002). *Comprehensive community initiatives (CCI): A comparison of community implementation plans*. Lincoln, NE: University of Nebraska Public Policy Center.
- PEW PARTNERSHIP. (1998). *Just call it effective: Civic change: Moving from projects to progress*. Philadelphia, PA: Author. Retrieved April 6, 2007, from <http://www.pew-partnership.org/research/effective/effective.html>.
- PROCELLO, A., & NELSON, G. (2002). *Evaluations and lessons learned from our grantmaking: The Health Improvement Initiative*. Woodland Hills, CA: The California Wellness Foundation. Retrieved December 29, 2006, from http://www.tcwf.org/pub_lessons/ezine3/content/print_version.htm.
- RAMSEY, R. (2001). Summary of learnings from comprehensive community initiatives and advice for the future. In D. M. Chavis (Ed.), *Workforce development and access to capital: Building blocks in thriving communities*. Battle Creek, MI: W.K. Kellogg Foundation.
- ROG, D. J. (1991). The evaluation of the Homeless Families Program: Challenges in implementing a nine-city evaluation. *New Directions for Program Evaluation*, 52, 47–59.
- ROG, D. J., & GUTMAN, M. (1997). The Homeless Families Program: A summary of key findings. In S. L. Isaacs & J. R. Knickman (Eds.), *To improve health and health care*. Princeton, NJ: The Robert Wood Johnson Foundation. Retrieved January 3, 2007, from

- http://www.rwjf.org/files/publications/books/1997/chapter_10.html.
- SPIILKA, G., & BURNS, T. (1998). *Summary final assessment report: Comprehensive Community Revitalization Program*. Philadelphia: OMG Center for Collaborative Learning. Retrieved January 4, 2007, from http://www.omgcenter.org/PDF/ccrp_final_assess_report.pdf.
- STONE, R. (ED.). (1996). *Core issues in comprehensive community-building initiatives*. Chicago: Chapin Hall Center for Children.
- VANDERWOOD, J. (2003). *Using data in the decision-making process*. Seattle, WA: Urban Health Initiative. Retrieved April 3, 2007, from <http://www.urbanhealth.org/docs/Using%20Data%20for%20web.pdf>.
- WALSH, J. (1997). *Stories of renewal: Community building and the future of urban America: A report from the Rockefeller Foundation*. New York: Author.
- WEITZMAN, B. C., SILVER, D., & DILLMAN, K. (2002). Integrating a comparison group design into a theory of change evaluation: The case of the Urban Health Initiative. *American Journal of Evaluation*, 23, 371–385.
- WRIGHT, D. (1998). *Comprehensive strategies for community renewal*. Retrieved February 20, 2007, from <http://www.commbuild.org/documents/wright.html>.
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