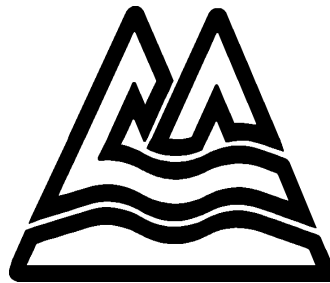


# **Views on Poverty**

Poverty Benchmark Analysis  
Multnomah County Oregon



Department of Support Services

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*[www.multnomah.lib.or.us/budget/eru/](http://www.multnomah.lib.or.us/budget/eru/)*

# Why Don't Programs Work?

Lisbeth Schorr asks, "Why do models of excellent schools, effective job training, and wonderful early childhood programs remain only models? "

Schorr argues that the reason is that there is a mismatch between the bureaucracies to protect program staff and program clients and the program's essential need for discretion, flexibility, responsiveness, and coherence which are essential to success.

And will devolution of authority solve the bureaucracy problem? Schorr thinks not, "State agencies can match federal agencies in dumb and counterproductive rules. ... city halls and state capitals can work every bit as poorly as Washington."

Will integrated services and collaboration reduce bureaucracy? No. Schorr argues that collaboration "has resulted in service integration coming to be seen as an end in itself rather than as a means to achieve improved outcomes. The difficulty of the task also has deflected attention from the possibility that the services being integrated may be inappropriate, of mediocre quality, rendered grudgingly, and wholly inadequate to actual needs."

Instead of integration of existing bureaucracies, what is needed is "new social policies." One new policy to free "human services from a straitjacket of rigid rules and centralized micro-management" is results-based accountability.

# 6 Advantages to Outcome-Based Accountability

1. Outcome accountability can replace - or diminish the need for - centralized bureaucratic micro-management and rigid rules.  
*Be careful that safeguards against fraud and abuse are not abandoned and outcomes accountability becomes a screen for unprofessional processes.*
2. Outcomes information can assure funders and the public that investments are producing results.  
*Be careful that determinants for program outcomes are often outside the control of those being held accountable.*
3. Agreement on desired outcomes facilitates cross-system collaboration for children.  
*Be careful as responsibility for both progress and failure cannot be fully ascribed to a particular agency or program.*
4. Agreement on desired outcomes helps to minimize investment in activities that do not contribute to improved outcomes.  
*Be careful that programs may be distorted and those programs that are most easily measure take priority over those that are more difficult to measure*
5. Information about outcomes enhances the ability to make judgments about the effects of change.  
*Be careful that even effective programs may seem to accomplish less than than they do.*
6. A focus on outcomes clarifies how much change funders and the public can expect from investments made.  
*Be careful to separate outcomes from ambitions. Be careful to separate legitimate process goals from program outcomes.*

# Intensity and Access is too "Expensive"

1. A Maryland boot camp offering intensive rehabilitation to juvenile offenders that had been universally considered successful was closed in 1996 because "it stood out in terms of cost." Ignoring studies showing that the intensity of the program, including follow-up mentoring, and monitoring, was responsible for its success, negotiations were underway to replace the program with a less expensive version--shorter stays, more beds, fewer staff, and less follow-up support.
2. Ford Foundation's Quantum Opportunities Program program youths succeeded significantly beyond the control groups. In one city QOP youths had 1/5th as many high school dropouts and three times as many enrolled in college. In another city, only 7% of participants had babies as teenagers compared to the 28% in the control group.

This program was not expanded because the cost of \$10,000/youth for a four year period.

3. In Elmira, New York a pilot nurse home-visiting program teamed nurses and mothers of high risk babies for a two year period. It succeeded in reducing prematurity, child abuse, accidents among babies and subsequent pregnancies and welfare dependence among the mothers. When the program expanded, the nurses' caseloads doubled, the duration of their visits curtailed, and visits stopped when the baby was four months old. The original nurses left because they felt the watered down version could not achieve its intended purpose.

*...we move from one isolated success after another, only to abandon it, dilute it, or dismember it before it can reach more than a few...*