



# Outcomes Measurement Plan For United Way of the River Cities

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# Outcomes Measurement Plan For United Way of the River Cities

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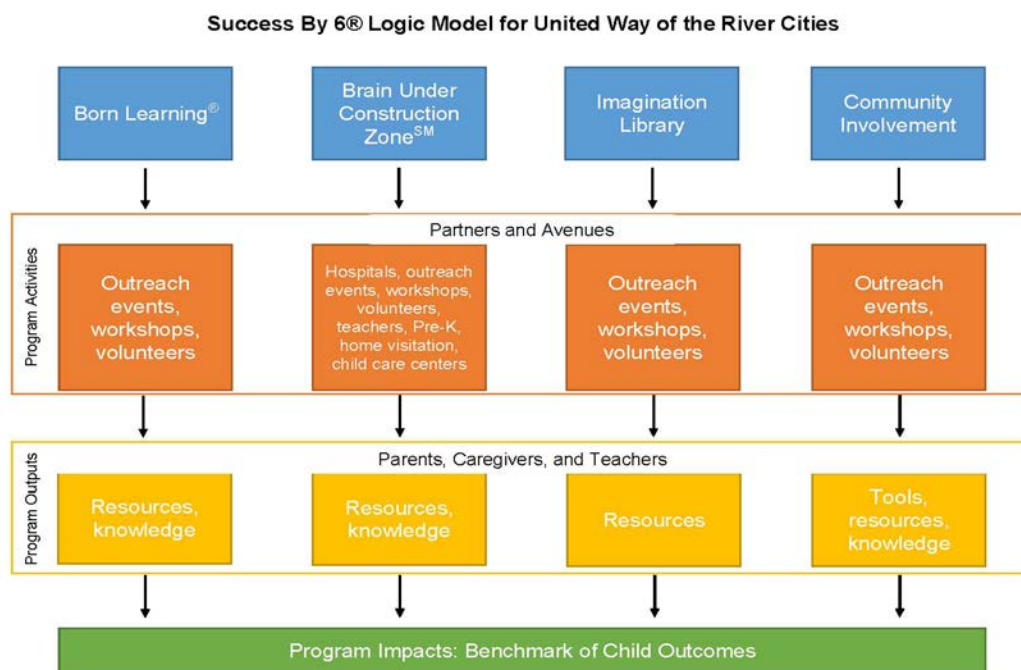
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## Executive Summary

United Way of the River Cities Success by Six (SB6) program provides resources and materials to partners, parents and caregivers to support healthy development and foster school readiness for families in the community. To assist United Way in measuring and communicating impact, the Center for Business and Economic Research (CBER) outlined a measurement framework that can be expanded to its entire education continuum.

The measurement framework begins with a logic model illustrating the pathway of United Way resources to broad community outcomes.



The measurement framework focused heavily on characterizing program outputs and providing recommendations for measuring these outputs. These recommendations include developing tools to gather feedback from resource recipients, as well as leveraging information already collected by program partners.

School readiness indicators were defined based on existing research which focused largely on health and family stability. Pilot measures of available school readiness indicators were also included; however, lack of consistent data suggest an opportunity for collaboration among United Way and program partners to identify common data needs and develop a coalition to promote data collection.

## Introduction

The Success By Six® (SB6) initiative strives to prepare all children for Kindergarten on mental, physical, emotional, developmental and social levels.<sup>1</sup> SB6 focuses on promoting healthy brain development in the first crucial years of children’s lives. Outcomes resulting from these foundational principles —such as 3<sup>rd</sup> and 4<sup>th</sup> grade reading, school readiness, middle school transition and high school graduation— demonstrate the benefits of healthy development practices in the lives of young children, yet can prove difficult to measure.

Together with Education Matters, United Way’s dropout prevention program, SB6 forms the foundation for the United Way of the River Cities’ Education Initiative Continuum. The programs are complementary, providing support for parents, families and teachers throughout grade levels from birth to early adulthood. The Education Initiative Continuum “promotes student success in preparation for school, work and life” with focus on five key areas:

- Kindergarten Readiness
- On-Grade Level Reading
- Middle School Success
- High School Success
- Post High-School Success.<sup>2</sup>

## About Success By Six®

SB6 connects five counties in the western West Virginia and southeastern Ohio region. The four West Virginia counties—Cabell, Wayne, Lincoln and Mason—are established and well-connected. Lawrence County, Ohio, is a new addition to the SB6 outreach efforts. Currently, SB6 consists of three core campaigns to promote the importance of healthy early brain development: Born Learning®, *Brain Under Construction Zone*<sup>SM</sup> and Imagination Library.

The **Born Learning**® campaign provides help and information for parents, grandparents and caretakers of young children through advertisements and educational material.<sup>3</sup> The materials describe the importance of early learning and provide age-specific tools to achieve developmental milestones.<sup>4</sup> The United Way of the River Cities SB6 initiative partnered with St. Mary’s Medical Center (SMMC) and the Greater Huntington Parks and Recreation District (GHPRD) to build a Born Learning® trail.

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<sup>1</sup> <http://www.successby6online.org/whatwedo.html>

<sup>2</sup> United Way Education Initiative Continuum

<sup>3</sup> <http://www.successby6online.org/whatwedo.html>

<sup>4</sup> <http://www.bornlearning.org/about-early-learning>

Through **Brain Under Construction Zone<sup>SM</sup>**, SB6 brings awareness to the importance of early brain development, promotes developmental and behavioral education for families of children up to age five and advises how daily activities can be opportunities to teach young children.<sup>5</sup>

The **Imagination Library**, founded by Dolly Parton in 1996, brings awareness to the importance of reading by providing one free, age-appropriate book each month to children up to age five.<sup>6</sup> SB6 organizes the Cabell County Imagination Library as part of its efforts.

## Current Activities

SB6 produces informational packets for new parents. These packets include helpful developmental information and tools—including the Building Connection booklet, a SB6 brochure and a black-and-white mobile card—to encourage healthy development practices. Other tools that can be enclosed in the packet include Women, Infant and Children (WIC) and Children’s Health Insurance Program (CHIP) information, safe sleep tips and other safety materials from non-profits.

The Brain Under Construction Zone<sup>SM</sup> project provides a systematic, community-based approach to promoting the importance of early brain development and ensuring a child’s readiness for school. Area hospitals purchase SB6 packets to supply to new parents. As of 2014, Cabell Huntington Hospital purchased 2,000 for the year, SMMC purchased 550 for the year and Pleasant Valley Hospital purchased 500.<sup>7</sup> This suggests that SB6 potentially provides educational materials to 3,000 families each year. In the community, the Success by Six<sup>®</sup> 12 messages are reinforced at various sites. The materials and information provided to the parents at birth are found throughout locations in the community.

## Existing Literature

Existing literature identifies a number of key factors in promoting school readiness among young children—specifically those under six years of age.<sup>8,9</sup> Four prevalent theories of readiness include:<sup>10</sup>

- Idealist/nativist—readiness is determined by the level of maturity that develops in the child, not from external influences

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<sup>5</sup> <http://www.successby6online.org/whatwedo.html>

<sup>6</sup> <http://www.imaginationlibrary.wv.gov/Pages/default.aspx#>

<sup>7</sup> According to discussions with United Way staff.

<sup>8</sup> Rhode Island KIDS COUNT (2005)

<sup>9</sup> Sheridan, S. et al. (2010). p. 125-156.

<sup>10</sup> Mehaffie and McCall (2002)

- Empiricist/environmental—readiness is the characteristics of the child’s behaviors that encompass skills that lead to mastery of goals (knowing colors, shapes, spelling own name)
- Social constructivist—readiness stems from the community; whether a child is ready is determined by the community standards of readiness
- Interactionist—readiness is a bidirectional concept in which children must be internally ready for school, and schools must be ready for children

By adequately preparing young children and fostering healthy environments during their formative years, school readiness efforts set children up for success. Children who have basic cognitive, physical, social and language skills, among others, when entering school are more likely to experience academic success and gain and maintain employment.<sup>11,12</sup> School readiness efforts are aided by supporting families, schools and communities in providing early childhood development opportunities.<sup>13</sup> One key aspect of these efforts is parental engagement.

Engaging and educating parents on the importance of providing a healthy, positive home environment and age-appropriate educational and developmental opportunities to their children is a key component of school readiness success.<sup>14,15</sup> Sheridan, et al. (2010) found statistical significance of teacher reports for interpersonal competencies (such as attachment and initiative) among disadvantaged school children participating in the Getting Ready intervention, which involves a strong parental engagement component.<sup>16</sup> A separate analysis found statistically significant results with respect to language, reading and writing skills among children in the Getting Ready intervention compared to those who were not a part of the initiative.<sup>17</sup>

Socioeconomic indicators also contribute to school readiness. Factors such as poverty, maternal depression and availability of adequate child care have been shown to affect cognitive development and physical well-being.<sup>18,19</sup> Children aged three to six who fall below the poverty threshold were found to lag other children in letter recognition, counting to 20 or higher, writing their own name and reading words in a book, and those with more educated parents were found to have higher cognitive and literary readiness skills relative to those with parents holding lower levels of education.<sup>20</sup>

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<sup>11</sup> Child Trends Data Bank. (2012)

<sup>12</sup> Health, et al. (2014)

<sup>13</sup> NAEYC. (2009)

<sup>14</sup> Sheridan, et al. (2008)

<sup>15</sup> Sheridan, et al. (2011)

<sup>16</sup> Sheridan, et al. (2010)

<sup>17</sup> Sheridan, et al. (2011)

<sup>18</sup> Clarke, et al. (2012)

<sup>19</sup> Rhode Island KIDS COUNT (2005)

<sup>20</sup> Child Trends Data Bank. (2012)

Examples of school readiness assessment tools include: <sup>21</sup>

- Skills tests—paper and pencil-type test, such as the Metropolitan Readiness Test which measures student first-grade readiness.<sup>22</sup>
- Developmental assessments—evaluations of children given developmental expectations for age group<sup>23</sup>
- Quick samplings—assess language, motor, number skills, etc., examples of which include the Brigance K and 1 Screen for Kindergarten and First Grade<sup>24</sup>
- Performance-based assessments—measures of demonstrated learning from teachers' records and samples of child's work to describe progress<sup>25</sup>.

The NAEYC maintains that school readiness must be flexibly and broadly defined as children develop in different ways and at different rates, and all areas of development and learning must be included. However school readiness can be narrowed down to five distinct domains, each of which is a crucial component in healthy development in young children:<sup>26</sup>

- Physical well-being and motor development
- Social and emotional development
- Approaches to learning
- Language development
- Cognition and general knowledge.

These school readiness domains establish the central focus of a 17-state school readiness initiatives called the National School Readiness Indicator Initiative (NSRII).<sup>27</sup> NSRII was implemented with the objective of creating measurable indicators of school readiness to inform programs and policy-making.<sup>28</sup> The seventeen state teams were: Arizona, Arkansas, California, Colorado, Connecticut, Kansas, Kentucky, Maine, Massachusetts, Missouri, New Hampshire, New Jersey, Ohio, Rhode Island, Vermont, Virginia and Wisconsin. Within each state, multi-agency teams worked to develop comprehensive indicators and the capacity for data collection and measurement.

## Outcomes Measurement Plan

For the SB6 initiative, United Way identifies **school readiness** as the most important outcome. Yet the local effects the initiative has on this outcome have yet to be

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<sup>21</sup> Mehaffie and McCall (2002)

<sup>22</sup> Hildreth and Griffiths (1933)

<sup>23</sup> Mehaffie and McCall (2002)

<sup>24</sup> <http://www.casamples.com/downloads/11968s.pdf>

<sup>25</sup> Maryland State Department of Education (2002)

<sup>26</sup> Rhode Island KIDS COUNT (2005)

<sup>27</sup> Rhode Island KIDS COUNT (2005)

<sup>28</sup> Rhode Island KIDS COUNT (2004)



quantified. The initial framework for the measurement plan consists of two pieces. The first is a logic model describing the program's initiatives, activities, and outputs to illustrate the mechanisms leading to the outcomes of interest.<sup>29</sup> From the logic model, measurable program outputs may be identified as well as opportunities for primary data collection, such as through participant feedback surveys. Program outputs are the most direct measure of United Way's efforts, thus collecting these output measures is a critical component of measuring and communicating United Way's impact in the community.

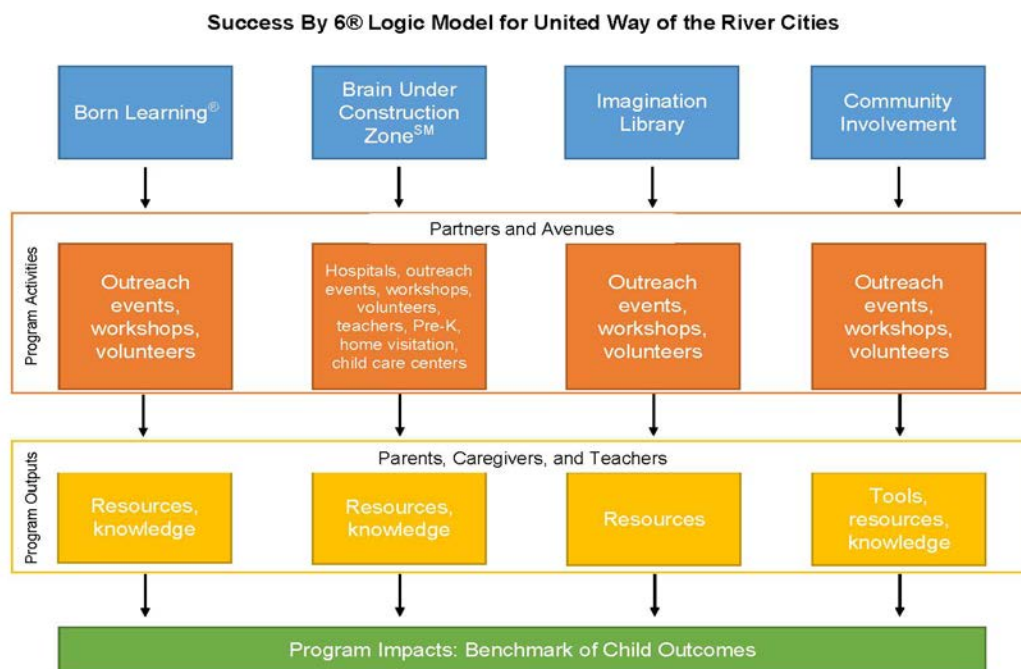
The second component consists of the data available for the core indicators measuring school readiness. These indicators are modeled after the National School Readiness Indicator Initiative (NSRII). Outcomes are illustrated in a pilot framework for Cabell and Lincoln counties. Outcomes are broader, and longer term, community characteristics.

### **Success by 6 Logic Model Framework**

The logic model for United Way of the River Cities' SB6 program outlines the transmission mechanism to key outcomes for the major program initiatives. SB6 contains 3 major initiatives, as noted previously, as well as a community involvement component. The graphic below illustrates the program activities and outputs.

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<sup>29</sup> For a review of logic model development see W.K. Kellogg Foundation. (2004). "Logic Model Development Guide". <http://www.smartgivers.org/uploads/logicmodelguidepdf.pdf>



As illustrated, each of the major initiatives leads to impacts through providing parents, caregivers and teachers with resources, knowledge or tools to assist with school readiness.

### Program Activities and Outputs Measurement

As program activities are the first step in achieving outcomes, measuring activities is a key component of illustrating impacts. On an annual basis, program activities for which United Way or their partners may currently have information consist of items such as:

- Number of workshops or outreach events held, by type or theme
- Number of informational packets provided to partners, by topic or theme
- Number of volunteers, or volunteer hours
- Number of participating partners, by type

Program activities generate program outputs, which then lead to outcomes or impacts. Parents, caregivers and teachers are the target audience for SB6 materials and resources. The participation of individuals in the target audience constitute the program outputs of these different activities. Examples of potentially measurable program outputs include:

- Attendance at events, by target audience category
- Level of involvement/participation at events
- Number of individuals receiving informational packets, by partner/venue and topic/theme
- Usage of informational materials
- Perceived value of informational materials

To measure the impacts of these outputs, United Way would need to implement a consistent format for collecting the information from program partners and recipients. Suggestions for collecting this information include:

- A sign-in sheet or similar for gathering event attendance
- A feedback questionnaire for participants at the end of workshops or events
- A follow-up questionnaire included with informational materials distributed to the target audience. The follow-up questionnaire may be in the following formats:
  - an addressed, stamped hardcopy for recipients to send back to United Way;
  - a web address for an electronic questionnaire
- A questionnaire or reporting form for program partners

To facilitate receiving response, questionnaires should be brief with a limited number of key dimensions. To facilitate ease of tabulating results, questions should be structured with multiple choice responses, rather than open-ended. Feedback questionnaires may also ask if recipients are willing to be contacted for a more extensive follow-up later, and to provide some form of contact information if so.

Follow-up questions and format should be tailored to program activities. While more information on specific activities is required to produce an appropriate format, examples of generally applicable follow-up and feedback questions include:

- For events/workshops
  - Are you attending this event as a teacher, caregiver, or parent?
  - Have you attended this event previously? If so, how many times?
  - Which topics did you find most valuable? Least valuable?
    - Include list of topics from which to select options such as:
      - Very valuable
      - Somewhat valuable
      - Not at all valuable
  - Which informational materials do you anticipate using once you leave?
    - Include list of materials from which to select
  - Which specific events/exhibits did you visit?
    - Include list of events/exhibits from which to select
  - For parents/caregivers –
    - How many children are in your household, and their age ranges?

- Under 1 year
- 1 to 3 years
- 3 to 5 years
- 6 years or older
- If you are a teacher, approximately how many students do you teach in a year, and at what grade level?
- For informational packets/materials distributed
  - Which topics did you find of greatest value?
    - Include list of topics from which to select options such as:
      - Very valuable
      - Somewhat valuable
      - Not at all valuable
    - Which materials/techniques do you anticipate using or have you implemented?
      - Include list of materials/techniques, with options such as:
        - Was implementing prior to receiving materials
        - Plan to implement
        - Have already implemented
        - Will not implement

Additionally, SB6 partners may currently be gathering data and information for other reporting requirements that would be useful in establishing and measuring outcomes. These data may be of the kind outlined above, or additional items related to volume of materials distributed, for example. It is suggested that the United Way discuss potential collaboration and sharing of information already collected and compiled by program partners.

## Core Indicators of School Readiness

NSRII identified seven core indicators that prepare children for school. Each of these foci are an essential component in school readiness endeavors and connect each of the key players in child development from birth to age six and into children's elementary years. These indicators include:<sup>30</sup>

- Elementary test scores
- Kindergarten skills and behaviors
- Ready Children
- Ready Communities
- Ready Early Childhood Education (ECE)
- Ready Families

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<sup>30</sup> Rhode Island KIDS COUNT (2005)

- Ready Schools.

The Initiative established components within each section (such as immunizations as a part of Ready Children) and identified measurable indicators (such as immunization rates and the percentage of children who are up-to-date on immunizations by age 2). Not all states participated in each component, and in some cases, individual states may have identified multiple indicators per component.

Given the available information, CBER considered the number of indicators and participating states by component and identified seven in which at least half of the states participated:

- Immunizations (Ready Children)
- Health Insurance (Ready Communities)
- Prenatal Care (Ready Communities)
- Child Care-Quantity (Ready ECE)
- Child Abuse and Neglect (Ready Families)
- Poverty (Ready Families)

A review of available data sources for indicators within these components indicated the indicators which may be measurable for counties in West Virginia to assist United Way with articulating program outcomes. The table on the next page outlines the core indicators measurable and data sources. These indicators are presented to illustrate the data that are available for indicators identified in existing research. While not all are necessary they may form the basis for measuring the progress towards goals and outcomes for the United Way SB6.

## Outcomes Measurement Plan for United Way of the River Cities

Table 1: Core Indicators

Category	Indicator Measures	Age Group(s) (yrs)	Most Recent Year	State Data Available	County Data Available	Source
Ready Children	<b>Immunizations</b>					
	DTaP	N/A	2013	X		CDC National Immunization Survey
	Polio	N/A	2013	X		CDC National Immunization Survey
	MMR	N/A	2013	X		CDC National Immunization Survey
Ready Communities	<b>Health Insurance</b>					
	Hepatitis B	N/A	2013	X		CDC National Immunization Survey
	Health insurance status	Under 6; 6-17	2013	X	X	U.S. Census Bureau
	Private health insurance status	Under 6; 6-17	2013	X	X	U.S. Census Bureau
Ready Communities	<b>Prenatal Care (PNC)</b>					
	Public health insurance status	Under 6; 6-17	2013	X	X	U.S. Census Bureau
	Medicaid enrolled children who receive dental care	Under 5	2013	X	X	KIDSCOUNT Data Center
	Births with early PNC	N/A	2003	X	X	KIDSCOUNT Data Center
Ready Early Child Education	<b>Child Care-Quantity</b>					
	Women receiving PNC in 1st Trimester	N/A	2005	X	X	WVDHHR
	Child care centers	N/A	2013	X	X	WVDHHR
	Number of PNC visits	N/A	2005	X	X	WVDHHR
	Child care center capacity	N/A	2013	X	X	WVDHHR
	Registered family child care homes	N/A	2014	X	X	KIDSCOUNT Data Center
Ready Families	<b>Child Abuse/Neglect</b>					
	Pre-K enrollment	4	2014	X	X	KIDSCOUNT Data Center
Ready Families	<b>Poverty</b>					
	Eligible children served by Head Start	3-4	2014	X	X	KIDSCOUNT Data Center
Ready Families	<b>Child Abuse/Neglect</b>					
	Child abuse/neglect (per 1,000 children under 18)	Under 18	2012	X	X	KIDSCOUNT Data Center
Ready Families	<b>Poverty</b>					
	Percent of Children in Poverty	Under 5; 5; 6-11; 12-14; 15; 16-17	2013	X	X	U.S. Census Bureau
	Children approved for free/reduced lunch (K-12)		2011	X	X	KIDSCOUNT Data Center

## Secondary Indicators

To the extent possible, CBER also considered other common indicators that, while not frequently used among the majority of NSRII states, are available publicly for West Virginia counties. These data include such indicators as:

- Students with disabilities
- Low birth-weight babies
- Child and infant mortality
- Child care quality measures
- Births to mothers with less than 12<sup>th</sup> grade education
- Teenage and unmarried births

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## Outcomes Measurement Plan for United Way of the River Cities

Table 2: Secondary Indicators

Category	Indicators and Measures	Age Group(s) (yrs)	Most Recent Year	State Data Available	County Data Available	Source
Kindergarten Skills and Behaviors	<b>Disability Prevalence</b>					
	Students with disabilities	3-5	2012-13	X	X	WVDE
Ready Children	<b>Infant and Child Health</b>					
	Low birth weight babies (%)	N/A	2012	X	X	KIDSCOUNT Data Center
	Child deaths (per 100,000 children 1-14 years)	1-14	2011	X	X	KIDSCOUNT Data Center
	Infant mortality (per 1,000 live births)	N/A	2012	X	X	KIDSCOUNT Data Center
Ready Early Childhood Education	<b>Child Care Quality</b>					
	Licensed child care centers participating in Quality Tier programs	N/A	2014	X	X	KIDSCOUNT Data Center
	Child care workers with no formal training in caring for children	N/A	2014	X	X	KIDSCOUNT Data Center
	Child care centers that are NAEYC accredited	N/A	2013	X	X	KIDSCOUNT Data Center
Ready Families	<b>Family Stability</b>					
	Families with related children who receive cash assistance	N/A	2013	X	X	KIDSCOUNT Data Center
	Births to mothers with less than 12th grade education	N/A	2012	X	X	KIDSCOUNT Data Center
	Children under 6 who live in families with all available parents in the labor force	0-5	2013	X	X	KIDSCOUNT Data Center
	Teen births (per 1,000 females 15-19 years)	15-19	2012	X	X	KIDSCOUNT Data Center
	Births to unmarried teens (10-19 years)	10-19	2011	X	X	KIDSCOUNT Data Center



## Measurable Outcomes

### County Pilot

To illustrate the relevant metrics potentially available, data were collected for two counties served by SB6 – Cabell and Lincoln. In each case, the most recent data available were collected. Where multiple potential age groups were noted, data were collected for the youngest, as the most relevant to the SB6 programs and initiatives. Finally, for data that were not readily available at the county level, immunization rates in particular, county-level estimates were created by applying the state immunization rates to estimated child population within the counties.<sup>31</sup> Table 3 contains the pilot estimates of core outcome indicators for the two county area. Table 4 contains the county pilot measures for secondary indicators of interest.

The data indicate that some dimensions of interest may not yield strong improvement results over time as rates are near 100 percent, for example percent of children with health insurance. Additionally, some metrics of interest may not be updated at frequent enough intervals to gauge progress, such as the prenatal care indicators.

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<sup>31</sup> The child population aged 1-3 in each county was estimated using Census Bureau population estimates by age for the state and assuming that the age distribution for West Virginia applies to each county. The number of immunized children in the state was then approximated combining the NIS data with Census population estimates for children aged 1-3 in West Virginia. It was then assumed that each county's share of children overall and their share of immunized children.

## Outcomes Measurement Plan for United Way of the River Cities

Table 3: County Pilot Estimates for Core Indicators

Category	Indicator	Measures	Cabell County	Lincoln County
Ready Children	Immunizations*	3+ DTaP	90.7%	88.8%
		3+ Polio	89.3%	87.5%
		1+ MMR	85.3%	83.5%
		3+ Hepatitis B	73.3%	71.8%
Ready Communities	Health Insurance	Percent of Children with health insurance coverage	97.0%	100.0%
		Percent of Children with private health insurance	52.0%	37.0%
		Percent of Children with public health insurance	50.0%	85.0%
		Medicaid enrolled children who receive dental care	41.1%	37.1%
Ready Communities	Prenatal Care (PNC)	Births with early PNC	89.0%	88.1%
		Women receiving PNC in 1st Trimester	84.9%	87.6%
		Number of PNC visits	1,142	290
Ready Early Child Education	Child Care-Quantity	Child care centers	29	5
		Child care center capacity	2,675	219
		Registered family child care homes	93	9
		Pre-K enrollment	68.7%	89.6%
		Eligible children served by Head Start	40.8%	49.0%
Ready Families	Child Abuse/Neglect	Child abuse/neglect (per 1,000 children under 18)	12	20.8
Ready Families	Poverty	Percent of Children Under 5 in Poverty	9.6%	11.0%
		Children approved for free/reduced lunch (K-12)	53.5%	66.8%

\*Estimated from state level CDC immunization data and Census Population Estimates

## Outcomes Measurement Plan for United Way of the River Cities

Table 4: County Pilot Estimates for Secondary Indicators

Category	Indicator	Measures	Cabell County	Lincoln County
Kindergarten Skills and Behaviors	Disability Prevalence	Percent of students with disabilities	15.1%	20.6%
		Ready Children	Infant and Child Health	
		Low birth weight babies (%)	9.7%	12.1%
		Child deaths (per 100,000 children 1-14 years)	24.9	47.2
		Infant mortality (per 1,000 live births)	7.7	4.5
Ready ECE	Child Care Quality	Licensed child care centers participating in Quality Tier Programs	25.0%	0.0%
		Child care workers with no formal training in caring for children	48.9%	84.6%
		Child care centers that are NAEYC accredited	17.4%	0.0%
Ready Families	Family Stability	Families with related children who receive cash assistance	4.9%	3.5%
		Births to mothers with less than 12th grade education	17.0%	24.2%
		Children under 6 who live in families with all available parents in the labor force	51.5%	39.9%
		Teen births (per 1,000 females 15-19 years)	43.7	75.2
		Births to unmarried teens (10-19 years)	11.5%	12.8%

## Next Steps

### Education Initiative Continuum

To facilitate expanding the outcomes measurement to all of United Way of the River Cities educational programs, potentially relevant indicators were also identified. United Way's programs extends beyond early intervention to include on-grade reading, middle school substance abuse and prevention, and high school mentoring to mitigate dropout rates (Education Matters). Together, Success by 6 and Education Matters comprise the core of United Ways Education Initiative Continuum.<sup>32</sup>

Table 5 contains examples of indicators and measures that may be correlated with outcomes of interest for Education Matters specifically, and United Ways Education Initiative Continuum overall. While it was beyond the scope of this project to consider Education Matters explicitly, the indicators noted may be added to existing metrics collected by United Way. Table 6 contains estimates for the pilot counties. Used in conjunction with the indicators for SB6, these outcome measures may form the basis for expanded outcomes measurement.

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<sup>32</sup> <http://www.unitedwayrivercities.org/educon.html>

## Outcomes Measurement Plan for United Way of the River Cities

Table 5: Education Continuum Indicators

Category	Indicators and Measures	Age Group(s) (yrs)	Most Recent Year	State Data Available	County Data Available	Source
Elementary Test Scores	<b>Reading and Math Proficiency</b>					
	4th graders below proficient in reading		2013-14	X	X	WVDE
	8th graders below proficient in math		2013-14	X	X	WVDE
Ready Communities	<b>Teenager Outcomes</b>					
	Dropout rates		2013-14	X	X	WVDE
	Juvenile delinquency (per 1,000 youths 10-17 years)	10-17	2008	X	X	KIDSCOUNT Data Center
Ready Communities	<b>Housing Affordability</b>					
	Households paying more than 30% of income on housing costs		2013	X	X	U.S. Census Bureau

Table 6: County Pilot Estimates for Education Continuum Indicators

Category	Indicators and Measures	Measures	Cabell County	Lincoln County
Elementary Test Scores	<b>Reading and Math Proficiency</b>	4th graders below proficient in reading	62.3%	62.7%
		8th graders below proficient in math	66.6%	66.1%
Ready Communities	<b>Adolescent Outcomes</b>	Dropout rates	1.9%	1.9%
		Juvenile delinquency (per 1,000 youths 10-17 years)	19.5	54.1
Ready Communities	<b>Housing Affordability</b>	Households paying more than 30% of income on housing costs	28.5%	20.4%

## Future Refinements

With the data identified and framework in place, continued measurement of outputs and outcomes will provide United Way with metrics to illustrate and articulate program activities and progress towards community goals. Continued measurement will assist in validating output and outcome measures, while further exploration of programs and initiatives may suggest additional indicators of interest.

While outcome measurement is limited to available data at this time, future refinements could include creating custom tools for local primary data collection. Additional research may also suggest methods of estimating or interpreting local values for data of interest not readily available at the county-level; for example, alternative methods of estimating immunizations rates may be explored.

As the plan leverages the NSRII framework for identifying indicators, another recommendation is pursuing multi-agency partnerships in West Virginia to increase capacity for data collection and to facilitate future outcomes measurement. Assessing the extent to which West Virginia may be able to model the efforts of the NSRII partners, through identification of multi-agency partnerships, stakeholders, and resources, may improve future data availability and measurement. For example, if United Way and program partners identify a common need for measures currently unavailable, a coalition may yield greater success in promoting data collection and availability.

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