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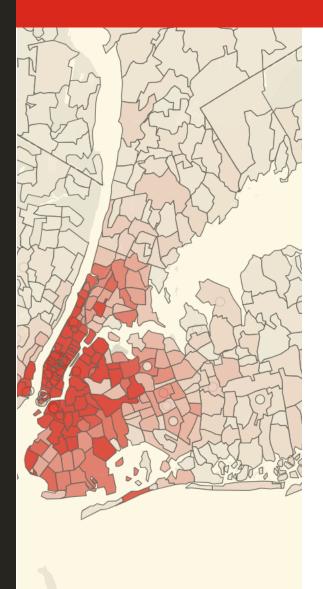
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EXECUTIVE SUMMARY

This report to New York Cares proposes a path the organization could use to potentially measure their volunteers' impact on community health. In this report, we define and demonstrate how impact volunteerism, a concept and strategy successfully used in cities around the country, could be applied to the imperative work of New York Cares and allow the organization to transition from an outputs to outcomes model.

This report is comprised of the scope of the Capstone, relevant research and key learnings from impact volunteerism, definitions and suggested indicators for measuring community health, recommendations to New York Cares, and lastly, a proposed logic framework and theory of change.

SCOPE OF THE CAPSTONE

The scope of the project for the SIPA Capstone team was how to define, measure, and illustrate New York Cares' impact at a community level beyond outputs. New York Cares provides an essential one-stop online platform to connect people with volunteering opportunities around the city. The platform not only serves as a tool to locate volunteer opportunities, it promotes opportunities for volunteers to address immediate needs of neighborhoods in the city. Our efforts in this capstone, focus on how one would take this model and consider best practices for transitioning to an outcomes model that is focused on measuring the health of a community.

In order to do this, we define impact volunteering and provide secondary research on how other organizations and local governments used the strategies of impact volunteering to tackle pressing public problems.

In the next section, we provide an enumeration of recommendations that are applicable and when possible complementary to the current practices of New York Cares. Our recommendations fall into the following three buckets:

- Increased engagement at the local level.
- Expanded evaluation and monitoring mechanisms.
- Long-term recommendations to improve impact of New York Cares' programs.

New York Cares indicated in one of our meetings that they would like to see comprehensive and big ideas. As such, you will see this is a bold proposal, focused on reorganizing towards a community-based strategy that allows New York Cares to not only maximize impact on community health, but also measure that impact. Given this bold proposal, when possible, we have provided recommendations and tactics that are scalable.



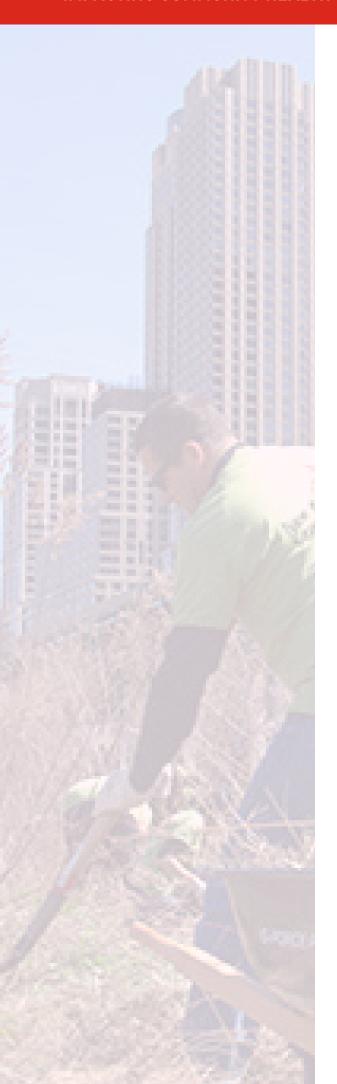
OVERVIEW: THE DATA

Our work began by examining data received from New York Cares to determine the community for the focus of our case study. There were three datasets provided:

- All of the volunteer projects that took place between 2008 and 2018, including the project name, the date, the address, the issue area, the partner, and the number of volunteers that participated.
- Demographic information of volunteers, the amount of projects that the volunteer has accomplished, and whether the volunteer is local to the project he or she participated.
- Survey responses from community partners and volunteers.

CASE STUDY: CORONA

Following analysis of the data, we chose Corona, Queens for the case study for this project. Corona was chosen because (1) the community is one with limited gentrification; (2) Corona had little to no presence from New York Cares (23 projects in 2008), followed by an increased presence over time in volunteers and partner organizations (222 projects in 2018); (3) all three focus areas of New York Cares were present in the projects represented there. This allowed us to better understand the potential volunteer impact over time. Our work in Corona helped question some of our assumptions and form ideas based on our firsthand work with volunteer projects, partner organizations, partner leads, and the Corona neighborhood.



COMMUNITY ENGAGEMENT: THE DATA

We selected an active community in Corona, Queens as our theoretical sample because New York Cares presence has increased over time, covering diverse volunteer service types. In addition, Corona remains a diverse community that has been less influenced by gentrification which would dramatically change and complicate an analysis of community health. Our community engagement focused on working directly in the community and researching trends in the community's core community health indicators over time. We participated in a series of experiences including:

- Attended orientation processes and signed up as new New York Cares volunteers.
- Participated in "Young Authors" at PS19 Q in February. In this education program with youth, we met with approximately ten elementary school students taking part in a creative writing class with approximately 7 volunteers (including our group).
- During PS19Q we also spoke with the program leader to better understand their experience. Nicole, the program lead, expressed incredibly positive sentiments about her time with New York Cares, finding this program, and working closely with the students in Queens. She started with New York Cares two years prior, and began working with seniors far from her home, but soon decided to use her skills as a creative writer in her backyard, working with youth.
- Attended a community board meeting in March to learn about the community from the residents including local, state, and federal representative offices, police officers, and community civic and business leadership.
- Participated in a "LEGO Session" for second graders in April. In this education program with second graders, we met approximately 15 students.
- During the session, we had the chance to speak with the program leader, Christel. She indicated to us that the LEGO sessions provide a space for students to use their creativity and learn to work collaboratively.

II. Relevant Research & Key Learnings

Defining Impact Volunteering

Through our secondary research, we have explored a concept that New York Cares could implement to move towards an outcomes rather than outputs model: impact volunteering. Impact volunteering is a strategy that engages volunteers to identify and solve critical social problems in collaboration with relevant stakeholders including community members, neighborhood councils, city agencies and local community organizations in new and innovative ways that will have a real and measurable impact on needs of identified neighborhoods.

Successful impact volunteering initiatives engage all relevant stakeholders to develop a shared vision, set short and long-term goals for their community, and then work together to achieve those goals. While this is often done alongside government, we believe that New York Cares breadth of partnerships, scope of experience, and convening power, could work within a community to execute such a strategy, and thus, work to improve community health.

In another view, according to a study by Stanford, impact volunteering initiatives involve a centralized infrastructure, a dedicated staff, and a structured process that leads to a common agenda, shared measurement, continuous communication, and mutually reinforcing activities among all participants.

17% of the participants of a survey conducted by NYC Service described that not knowing where to find opportunities prevented them volunteering and 52% of the participants responded that the most common channel of learning about volunteer opportunities is through families and friends. New York Cares' existing volunteer management infrastructure is critical to addressing this capacity gap and makes New York Cares an indispensable and relevant stakeholder that can share its best practices. Addressing this capacity is critical to achieving the common agenda and measuring the outcomes of impact volunteering.

The American Cities Initiative, a coalition of more than 260 cities that implemented impact volunteering in their cities, recognizes that "the most successful cities are those in which the chief executive understands and appreciates Impact Volunteering and deploys city resources to ensure its success."

The City of Detroit's impact volunteering plan, Serve Detroit, sets out three key goals by leveraging resources of local government, resident volunteers, corporate and faith-based volunteers, to create a strategy that tackle some of Detroit's most pressing problems. The shared vision for Detroiters is the problem of financial instability of residents and specifically, the crisis of tax foreclosed properties.

II. Relevant Research & Key Learnings

From Detroit's experience, the process of creating the service plan has been a transformative experience that helped clarify the city's thinking around volunteerism and generated ideas about what more can be accomplished with volunteers. Through one of its initiatives, "We Want You to Stay", the Detroit Serve outlined a goal to reduce the number of occupied properties going into the County tax auction.

Through impact volunteering, they held 15 Tax Foreclosure Prevention Workshops, recruited 10 neighborhood groups and 100 volunteers to conduct door to door outreach to 3,000 occupied foreclosed properties in 21 targeted neighborhoods. In the end, this reduced the number of occupied properties going into 2017 County Auction from 7,000 properties in 2016 to 3,000 occupied properties in 2017.

'Impact Volunteering' Strategies

Based on our research, successful impact volunteering strategies in response to local needs include:

- Identify priorities and use volunteers to target a community's critical and urgent needs.
- Set clear outcomes and measures to evaluate progress.
- Leadership from an organization acts as a forcing mechanism for relevant stakeholders to work together towards the same measurements.
- Measure progress against clear goals; create accountability for results.
- Create a volunteer recognition system; Recognition programs are an essential tool for promoting sustained and increased participation over time
- Assign and empower project leaders to each initiative and ensure that project leads have access to resources.

In the next section, definitions and indicators for measurements of community health are outlined. By employing this strategy of impact volunteering with the ultimate goal of community health, these suggested definitions and indicators could be used as a roadmap for the types of areas that could be short term areas of focus for New York Cares with a community.

III. Measuring Community Health: Definitions & Suggested Indicators

In order to measure and evaluate the impact that volunteers have on community health, New York Cares must first have a common definition of community health and then develop indicators for evaluation. We have suggested three distinct definitions for New York Cares from the World Health Organization (WHO), the Centers for Disease Control (CDC), and the Massachusetts Department of Public Health's Office of Healthy Communities. Following feedback from New York Cares, our focus is on the WHO definition.

Proposed Definition

New York Cares embraces impact volunteering to empower individuals to contribute to the health of their community. "Community health as: environmental, social, and economic resources to sustain emotional and physical well being among people in ways that advance their aspirations and satisfy their needs in their unique environment."

Name of Institution	Healthy Community Definition		
World Health Organization, Ottawa Charter for Health Promotion	Community health as: environmental, social, and economic resources to sustain emotional and physical well-being among people in ways that advance their aspirations and satisfy their needs in their unique environment.		
Centers for Disease Control	A community that is continuously creating and improving those physical and social environments and expanding those community resources that enable people to mutually support each other in performing all the functions of life and in developing to their maximum potential.		
The Massachusetts Department of Public Health's Office of Healthy Communities	A Healthy Community is where people come together to make their community better for themselves, their family, their friends, their neighbors, and others. A Healthy Community creates ongoing dialogue, generates leadership opportunities for all, embraces diversity, connects people and resources, fosters a sense of community, and shapes its future.		

III. Measuring Community Health: Definitions & Suggested Indicators

Evaluative Indicators and Wellness Indexes

The table below encapsulates some core indicators for a healthy community that we believe could potentially be used as measurements and indicators for success. These were chosen with an eye towards (1) ability to measure improvements in community health and (2) core program areas of New York Cares ie: improving public spaces, providing for immediate needs, and education:

Indicator	"Type"	Source	
Graduation Rates	Education	New York Department of Education	
Standardized Test Scores	Education	New York Department of Education	
Disconnected Youth (% ages 16 - 24 not in school and not working)	Education	New York State, and navigated by neighborhood through: data2go.nyc	
Employment	General/Socio- Economic	New York State, and navigated by neighborhood through: data2go.nyc	
Population below poverty line	General/Socio- Economic	New York State, and navigated by neighborhood through: data2go.nyc	
Retention Levels for programs	Social Community Bonds	New York Cares survey & tracking data	
Socialization for Seniors & Individuals with Disabilities	Social Community Bonds	Local community engagement	
Social Clubs & Affinity Groups	Social Community Bonds	Local community engagement	
PTA Membership & Local Councils	Social Community Bonds	Local community engagement	
Human Development Index (years of schooling, life expectancy at birth, GNI per capita)	Human Development	New York State, and navigated by neighborhood through: data2go.nyc	
Child & Adolescent Health (including access to healthy food)	Public Health	Prevention Agenda 2019-2024: New York State's Health Improvement Plan	

Evaluative Indicators and Wellness Indexes

Social-emotional Learning for Students: Social and emotional learning for students is the process through which students understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships, and make responsible decisions.

Measure this by: (1) Academic improvement; (2) Improved Behavior (ie: dropout rates, school and classroom behavior issues, drug use, teen pregnancy, mental health problems, and criminal behavior.)

Socialization for Seniors and Individuals with Disabilities: Too often, individuals with disabilities and older people living by themselves are isolated, because of physical, intellectual or emotional reasons. Inclusive and accommodating volunteer opportunities add a richer dimension to their lives and provide educational, cultural, and recreational programs that could effectively reduce isolation and enhance social thinking and social skills.

Measure this by: (1) Survey for happiness level; (2) Collect medical reports from local hospital for mental/ physical health improvement; (3) Family feedback.

Taking into account this research and potential framework pieces, in particular the strategy of impact volunteerism, below are recommendations that New York Cares could incorporate to move to an outcomes based model on measuring their impact on community health. Given the length of time and process for executing on this objective, when possible, each recommendation provides a sliding scale and timeline, process, and tactics to use for incorporating such ideas in New York Cares.

I. Increased Engagement at the Local Level

1. Engage in a community from the beginning

A community knows itself best, and working directly in the community from an early stage is the only way to understand, measure, and evaluate community health improvements. Research has shown that a grassroots approach maximizes impact of an organization's efforts. Leveraging New York Cares partner relationships and working directly in the community create incentives for the community to not only support your work, but also take ownership of the common objectives.

For areas where New York Cares has not had a strong presence, this is an excellent way to better understand the landscape and how people view the potential local partners on the ground. For areas where New York Cares has had a strong presence, this still provides an opportunity to re-introduce the organization, present more opportunities for potential partnerships, and better understand the immediate and current needs of that individual community.

Suggested tools to engage directly in the community:

- · Attend and participate in community board meetings and town halls.
- Meet with community leaders: council members, policy officers, police officers, religious leaders, school officials.
- Participate in neighborhood need-finding exercises organized around specific geographic locations through conversations and surveys with community members, volunteers, and team leads.
- Visit local non-profit partners in their service areas to understand their work, and host roundtables to discuss community challenges and identify critical needs of the community.
- Establish focused and limited partnerships with local non-profit organizations, city government, community boards, and neighborhood advisory councils, to support these organizations more effectively.

2. Understand main community health concerns and create concrete community-health focused objectives

As articulated previously, impact volunteerism involves creating a set of common objectives, both short and long-term, that you can work with the community to achieve. New York Cares' focuses - immediate needs, public spaces, education - are broad enough that a community's needs could easily be defined within those areas.

While the long-term objective will be improving community health, the immediate objectives could be more focused. For example, if youth crime numbers are rising in a community, New York Cares could support the community by increased volunteer opportunities in education and physical-wellness programs for youth. If obesity levels are high, New York Cares can support the community by increased volunteer opportunities in physical-wellness and public space improvement projects. Furthermore, by working with relevant stakeholders to articulate clear and measurable outcomes, New York Cares can better articulate how and where it's improving community health.

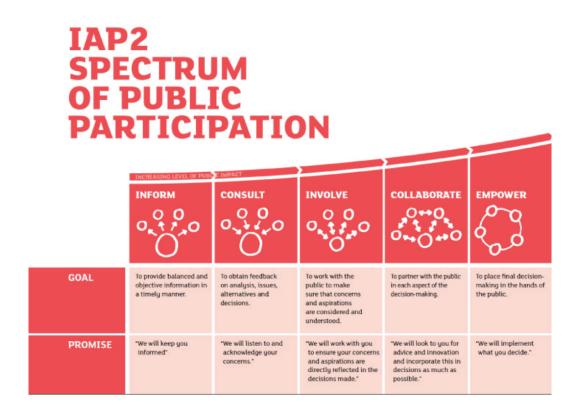
Core questions to engage with the community:

- Where are the resources already being spent and should New York Cares add additional capacity resources to those areas or does it need to focus on a different area?
- What is the problem and how are those problems currently being addressed?
- Are there programs that are duplicative in the community? Could New York
 Cares help to combine such programs for greater impact and more
 successful outcomes?
- Who else should you be talking to?

3. Measure & track your community engagement

New York Cares currently moves its volunteers up the "ladder of engagement" from volunteers to program leads effectively. This is a great way to increase awareness, involvement, and ownership over volunteer activities. As you engage with a community to decide on a core focus or challenge to tackle, it is also important to track the engagement within the community as well.

The International Association for Public Partnership has developed a spectrum for engagement (see below). At one end is informing, at another is empowerment. This tool could be useful as you consider ways to enter and engage with a local community, but it could also be a tool for considering how to work with another constituency, your partner organizations.



4. Increase the sustainability of programs by increasing leadership from the community

Ownership over programs either with program leads or through volunteerism is strongest when there are members of the community involved in, and taking leadership roles with programs. There are countless examples where programs driven by community members, or at least people who know the community, work the best. For example, police officers who participate in community policing and know the community are shown to be more successful in combating crime. This was found because police officers were more likely to know and understand the community, spend time in the community, and care about the community.

This same logic can and should be applied to volunteering, with volunteers from the community taking the lead in many of these community-based volunteer activities. By empowering people who know the community, or even providing them the opportunity to codesign some of the work, it can contribute to the impact assessments and is seen as a best practice by many including organizations like the Knight Foundation.

Examples for how to engage locally and expand leadership roles in the community:

- Train Community Engagement Program Leaders to manage relationships with core partner nonprofits, and routinely check in with them to receive timely updates on obstacles and challenges. New York Cares' program leads are a strong, core audience and participants that could "move up the ladder" to provide even more support for New York Cares'.
- Work with these leaders and the programs to recruit volunteers from the community through community board meetings, parent-teacher activities, or by simply working in public spaces.
- Volunteering is known to "support the impact of community-based organizations in the places where they serve, but also connect individuals to one another and to the issues facing their community". As the health benefits of volunteering are well documented, promoting volunteerism has the potential to help increase the health benefits to the community.
- Carnegie Mellon University has noted that older adults who volunteer for at least 200 hours per year are healthier (reduced risk of hypertension and high blood pressure). Working with various stakeholders and audiences in the community to volunteer nearby could be a great way to increase health all around.

II. Expanded Evaluation & Monitoring Mechanisms

Once extensive community engagement has taken place and core objectives have been identified, it is important to evaluate and monitor your core community-based health objectives. The indicators provided above could be a guideline for what types of measurements for success you may be looking for once those short and long-term objectives are identified. Please see below for some recommendations for opportunities to expand your monitoring and evaluations:

5. Require specific time commitments for some defined projects and programs

Currently, volunteers for many of New York Cares programs are only committed to a one-time volunteer experience. Research regarding youth development has consistently demonstrated that young people benefit from close relationships with positive adult role models. Research suggests that for mentoring youth in particular, a time-commitment of a 12-month duration has the most positive impact. For specific opportunities in areas related to children and children's education, New York Cares should require longer commitment from volunteers to have a greater impact.

6. Evaluation practices that include volunteers, project leaders, and partner organizations

While New York Cares provides surveys to volunteers and project leads, we have identified several opportunities for improvement. First, volunteers, especially new volunteers, should receive a feedback survey after each event. This can help New York Cares identify areas for improvement, improve logistics and productivity, and receive real-time feedback on what volunteers saw and experienced while in the community. Volunteers would be given a platform to rate their experience and provide more descriptive details of any positive and negative aspects of their volunteer project. This may also allow qualitative data to be immediately developed when the experience is fresh in the volunteers' minds. These surveys should include questions regarding their experience with New York Cares, volunteer matching, and the program itself, and provide volunteers with the option to identify if they are from the community.

Partner organizations also should be evaluated more effectively to determine how successful they are in their outcomes. If their outcomes directly connect to the capacity building and resources that New York Cares provides, it is in New York Cares - and the community's - best interest to partner with organizations that are executing effectively. Metrics may vary depending on the community, the project, and the objectives, but all should be aware of the process and participate in the evaluation process. This is widely done by other successful organizations that provide resources including the Robin Hood Foundation and the United Way.

Additional tactics for collecting additional information for evaluation of programs includes:

- In addition to surveys, another practice for collecting information regarding the success
 of the programs is to consider quarterly interviews and exit interviews with program
 leads.
- Casual focus groups with volunteers, program leads, partner organizations, and recipients of the volunteering.
- Track new and repeat volunteers to understand when and why some volunteers may not return and so you can better understand what factors attract local vs. nonlocal volunteers.
- One successful tactic to consider has been screening and matching program leads with projects that match their skill-sets and experience. While in Corona, one program lead explained to us that she had originally been working with seniors in the Upper West Side, but soon realized as a creative writer she could participate in writing activities with students in her own backyard. This experience of the program lead complements a research that states that the benefits of screening and matching volunteers, and done with location in mind, could make more effective programs focused on the local community's health.

III. Long Term Recommendations

7. Consider structural reorganization: from program verticals to neighborhood verticals

Given the recommendation above in regard to local community engagement focused on the individual community needs, correlating staff focus in this way as well, could also help target resources and efforts. A community's problems and successes are local, as is its health. Promotion of localized volunteer engagement and partner relationship management to geographical categories would put even more emphasis on supporting community health. This would allow New York Cares to further understand community-wide needs and more actively prioritize holistic community-health solutions that New York Cares can meet.

We understand the research and overall recommendations in this report may be considered bold. However, we believe the initial shifts in strategy, organization, and trainings will be a positive lift for staff, partners, and volunteers. We believe most can be accomplished by the current staff and program leads once the initial efforts and changes towards a more neighborhood approach are made. By empowering local community members and working with leads to further bolster M&E efforts, New York Cares can ensure the effective and efficient use of resources, and can evaluate the extent to which he volunteer project has had the desired impact. There may need to be a resource reallocation due to potential additional trainings, and more focus put in specific areas.

8. Create a New York Cares mobile application

Over 75% of Americans own smartphones, so creating a mobile application would reach a larger audience and has the benefit of improving volunteer / user experience. A mobile platform will modernize how volunteers, team leaders, and donors participate in projects and engage with New York Cares. Its operational and organizational functions would ultimately improve user function, volunteer engagement, communication and marketing, and monitoring and evaluation.

According to Deloitte's 2018 mobile consumer study, American consumers check their phones at least 52 times per day. Given that New York Cares focuses on creating an easy user experience for volunteers, an app would be a strategic method to increase awareness, increase the number of volunteers, and make it simple for volunteers to find and sign up for their next project. The app would prioritize convenience, accessibility, and quick service. Volunteer groups, partners, and organizations looking to convene volunteers would be able to access the application to more easily organize, coordinate, and execute a volunteer group event with New York Cares. Team leaders would be able to use the app for logistical needs including taking attendance at each volunteer event, accessing the required materials and resources for a volunteer project, and answering any logistical questions during the day of the volunteer event. For New York Cares staff, New York Cares would likely get more accurate and up to date information because of the user-ease providing information on retention rates, volunteer sign ups, volunteer engagement and attendance for specific events, topics of interest, and geographic locations.

This could also be used as a marketing and communication tool to:

- Directly communicate with & share messages to partners, donors, and volunteers.
- Message volunteers on changes & updates to the volunteer event
- Manage a chat service to provide day-of assistance for volunteers & team leaders.
- Notify all users of annual or one time New York Cares events (e.g. coat drive, annual volunteer thank you events, etc).
- Provide visibility to users (volunteers, donors, organizations, etc.) at all times via mobile phone.

Rationale and Overview

Taking into account these recommended changes, and our proposed intention to enable New York Cares to expand from a volunteer linkage platform strategy to a volunteering-for-impact organizational strategy, we propose here a reframed New York Cares' logical framework towards volunteerism in select neighborhoods to suit both the impact volunteerism and Collective Impact frameworks.

In creating this adapted Logic Framework, we have used the Logic Model received from New York Cares as a starting point, and focused squarely on the "Volunteers" strategy vertical within this pre-existing Logic Model. Our focus solely on the "Volunteers" strategy vertical stems from the communication we have received from New York Cares' staff that New York Cares' model of partnership with partner organizations / field organizations is embedded and enshrined in the organization's core model. Our main aim in adapting New York Cares' pre-existing logic framework was to update the organization's approach to volunteer recruitment, deployment, and utilization (and the organizational structure that enables these core functions of New York Cares).

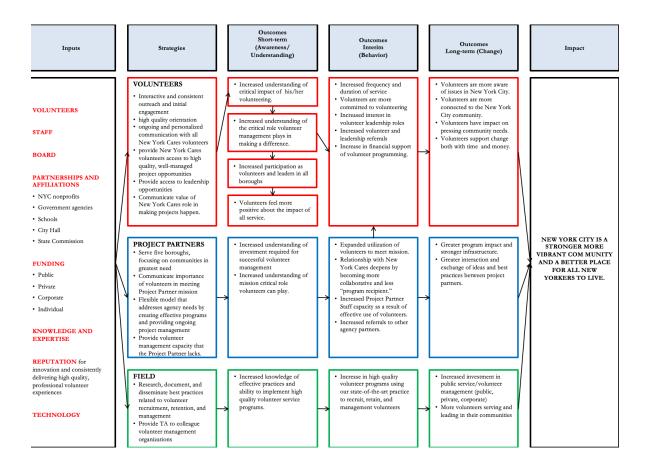
Following the recommendations listed above, the following adapted Logic Framework and Theory of Change use the same general inputs illustrated in the pre-existing New York Cares' Logic Model, yet shifts the model to an Inputs-Outputs-Outcomes-Impact framework, emphasizing this approach's differentiation between measurement of output and measurement of qualitative and quantitative outcomes. In addition, this adapted Logic Framework includes critical assumptions that underpin each progression within the framework, overlaid with the relevant indicators (Section 2) and means of verification (Section 4) to evaluate, validate, and track progress on these indicators.

This adapted logical framework is supported by a slightly reframed theory of change that aims to establish the impact-oriented organizational shift demonstrated throughout our recommendations and in the adapted Logic Framework.

Adapted Logical Framework

Our exercise in rethinking New York Cares' logical framework follows on from our core recommendations that are aligned with the Impact Volunteerism and Collective Impact Frameworks. In building this adapted logical framework, we used the starting point of New York Cares' pre-existing framework:

New York Cares Pre-Existing Logic Framework



Our focus for the adapted Logic Framework was to focus on the "Volunteers" strategy vertical, as we felt this approach was within our initial scope of work and aligned with New York Cares' core objectives for our consultancy. We have chosen to use a Left-to-Right, Upward-Climbing logic model framework, together with assumption statements, to fully elucidate our proposed model for New York Cares' service delivery for volunteer-led impact.

New York Cares Adapted Logic Framework

	Definitions	Indicators	Means of Verification	Assumptions
Impacts	1) Neighborhoods with embedded New York Cares volunteer support experience improvements on targeted healthy community indicators 2) New York Cares volunteerism resonates as an integral community service 3) New York Cares remains	1) Healthy-community indicators (Section III) 2) New York Cares qualitative and quantitative data from in-community stakeholders, partner organizations, and New York Cares' program leads on success and satisfaction with New York Cares' volunteerism. 3) Measuring alignment of New York	1) New York Cares internal annual review of city-level data measuring identified healthy-community indicators 2) New York Cares internal annual review of aggregate data, feedback, and surveys from constellation of incommunity partners 3) Annual assessment and overview of	
	adaptable to neighborhood-level reframed priorities to tackle acute and longer-term community health challenges.	Cares volunteer opportunities (by program bucket) with communities' core challenges (by health-community indicator sub-section)	best fit for New York Cares program opportunities with specific community challenges and healthy-community indicators targeted for improvement.	
Outcomes	1) Increased retention rate within volunteer programs 2) Partner community organizations expand capacity and begin reaching strategic output goals 3) Improved M&E Data from Partner Organizations (via Program Leads) 4) Advancing progress on targeted healthy-community indicators (targets specific to neighborhood)	1) Project-specific retention rates and volunteer follow-through rates for time commitment projects 2) Partner organizations internal impact metrics, # of volunteer opportunities within partner organization projects 3) Quality and consistency of incoming data from NYCares program leads / partner organizations 4) Neighborhood-level healthy-community indicators (Section III) relevant to community-specific challenges	1) NYCares Program Data Review 2) Post program-completion review of partner organization program data (reported by neighborhood-specific program leads) 3) Post program-completion intake and review of New York Cares qualitative and quantitative program data (reported by neighborhood-specific program leads) 4) Bi-annual review of neighborhood-specific healthy-community indicators by New York Cares staff.	1) New York Cares partner organizations are having community-wide impact on targeted indicators 2) Volunteer Program Leads commit to expanded M&E practices and increased deliverables to New York Cares 3) Partner organizations' programs are impactful and have the scale to advance progress on targeted healthy-community indicators (and not other lurking variables, gentrification, etc.)
Outputs	1) Neighborhood-specific volunteer plans (to guide corresponding volunteer opportunity direction) established 2) Neighborhood-specific stakeholder relationships formed and expanded 3) Impact volunteerism partnerships with relevant sectoral community organizations (corresponding to community's lagging healthy-community indicators) 4) In-community New York Cares Program Leads are recruited, trained, and established 5) High fill rates for newly established volunteer opportunities	1) # of neighborhood-specific drafted and executed New York Cares Volunteer Impact plans. 2) # of New York Cares community-specific stakeholder partners (e.g. community leaders, religious leaders, community board reps) 3) # of community organization partnerships (building on existing NYCares partnerships) formed following neighborhood-specific plans 4) # of in-community program leads recruited, trained, and starting volunteer opportunity oversight. 5) % of volunteer fill-rates on newly enshrined neighborhood-specific volunteer plans.	1) New York Cares Internal Management Data 2) Quarterly review of neighborhood-specific partnership / stakeholder landscape - identification of stakeholder gaps. 3) Quarterly review of neighborhood-specific New York Cares Volunteer Impact plans to ensure organization partnerships align with key community needs / challenges 4) # of in-community program leads recruited, trained, and starting volunteer opportunity oversight. 5) % of volunteer fill-rates on newly enshrined neighborhood-specific volunteer plans.	1) New York Cares neighborhood-specific Volunteer Impact plans are drafted and receive organizational support. 2) Community leaders and partner organizations work with New York Cares staff to develop said plans 3) In-community partner organizations working on targeted neighborhood challenges exist, need, and have capacity to take on New York Cares volunteers. 4) New volunteer opportunities (aligned with Volunteer Impact plans) attract New York Cares volunteer database and fill.
Inputs	1) Volunteers 2) New York Cares Staff (Neighborhood 3) Verticals 4) New York Cares Community 5) Ambassadors (Liaisons) 6) In-Community Program Leads 7) Digital Platforms (Mobile / Desktop) 8) New York City-Level Partnerships	1) # of Volunteers (disaggregated by home neighborhood and project beneficiary neighborhood) 2) # of New York Cares Neighborhood staff leads 3) # of New York Cares community-specific stakeholder partners (e.g. community leaders, religious leaders, community board reps) 4) # of New York Cares Program leads from the program's neighborhood 5) Version 1 (beta) of working mobile app published and downloadable 6) # of city-level guiding partnerships	1) New York Cares Program Data 2) Bi-Annual Review of New York Cares Internal Staffing Organization 3) Quarterly review of neighborhood- specific partnership / stakeholder landscape - identification of stakeholder gaps. 4) New York Cares Program Data and Program Leads reporting 5) New York Cares published and available for download 6) Quarterly review of city-level partnership / stakeholder landscape - identification of stakeholder gaps.	1) Recruitment of in-neighborhood program leads for neighborhood volunteer opportunities 2) Community leadership buy-in to New York Cares volunteer presence and support 3) New York Cares internal commitment to neighborhood-specific strategy (outlined in Sections 3 and 4) 4) City-level coordination established on NYC neighborhood-specific priorities

Overview of Adapted Logic Framework Model

	Definitions	Indicators	Means of Verification	Assumptions
Impacts				
Outcomes				
Outputs				
Inputs				

If [input] AND [assumption], then [output]. If [output] AND [assumption], then [outcome]. If [outcome] and [assumption], then [impact]

The progression of this Logical Framework begins in the bottom left corner with definitions of the core New York Cares inputs alongside the corresponding indicators for those core inputs. Moving along from left to right, the Logic Framework includes a "means of verification" for each of these corresponding indicators. Finally, the "assumptions" column is the bridge between rows, taking on the role of verifying key conditions before advancing from Inputs to Outputs, and ultimately to Impact. Following the "assumptions" column in each row, the Logical Framework model progresses to the next row up, extending along the framework's chain from inputs to impacts.

Theory of Change

Distilled from this adapted Logical Framework and from materials shared by New York Cares, we have developed the following "We / So That" theory of change statement to more directly define New York Cares' Collective Volunteer Impact Strategy.

We (New York Cares) equip and enable New Yorkers across the five boroughs of New York to support community-led and community-centered strategies through volunteerism opportunities so that New York City is a stronger more vibrant community and a better place for all New Yorkers to live.

CONCLUSION

This report is conceived through review of a body of research on impact volunteering and assessing the current practices of New York Cares through surveying project leaders, volunteering with New York Cares programs in Corona, and analyzing provided data.

The SIPA Capstone team, in this report, recommended bold and best practices of impact volunteering that would evolve and transition New York Cares' programs. We believe that engaging with local actors to create a shared vision and a plan of action will elevate New York Cares to a position to improve community health through strategies of impact volunteering outlined in this report. Therefore, the recommendations focus on amplifying local impact by strengthening New York Cares engagement with local communities and expanding strategic partnerships with relevant stakeholders.

We hope that New York Cares will find this report useful and fully embrace the recommended multidimensional and holistic approach to improving community health through impact volunteering.

ENDNOTES

Cobb, Mei. "Measuring Volunteer Impact." United Way Worldwide, 16 Mar. 2015, www.unitedway.org/blog/measuring-volunteer-impact#.

"Collective Impact (SSIR)." Stanford Social Innovation Review: Informing and Inspiring Leaders of Social Change, ssir.org/articles/entry/collective_impact.

"Community Engagement Matters (Now More Than Ever) (SSIR)." Stanford Social Innovation Review: Informing and Inspiring Leaders of Social Change, ssir.org/articles/entry/community_engagement_matters_now_more_than_ever.

Defining Healthy Communities. Health Resources in Action. 25 July 2013. https://hria.org/wp-content/uploads/2016/10/defininghealthycommunities.original.pdf

"Demographics of Mobile Device Ownership and Adoption in the United States." Pew Research Center: Internet, Science & Tech, Pew Research Center: Internet, Science & Tech, 5 Feb. 2018, www.pewinternet.org/fact-sheet/mobile/.

Fifield, Jen. "Can Diverse Police Departments Ease Community Tension?" PBS, Public Broadcasting Service, 22 Aug. 2016, www.pbs.org/newshour/nation/can-diverse-police-departments-ease-community-tension.

Hager, Mark. "Volunteer Management Practices and Retention of Volunteers". Urban Institute, 2004. https://www.nationalservice.gov/pdf/Management_Brief.pdf

"Healthy Places." Centers for Disease Control and Prevention, Centers for Disease Control and Prevention, www.cdc.gov/healthyplaces/terminology.htm.

International Association of Public Participation. About Us Spectrum, www.iap2canada.ca/aboutus. NYC Service. "A Blueprint to Increase Civic Engagement." 2008. nyc.gov/service.

Public Health Agency of Canada. "Ottawa Charter for Health Promotion: An International Conference on Health Promotion." Canada.ca, 14 Nov. 2017, www.canada.ca/en/public-health/services/health-promotion/population-health/ottawa-charter-health-promotion-international-conference-on-health-promotion.html.

Robin Hood. "Metrics." Robin Hood, 9 Oct. 2016, www.robinhood.org/what-we-do/metrics/.

Spangler, Todd, and Todd Spangler. "Are Americans Addicted to Smartphones? U.S. Consumers Check Their Phones 52 Times Daily, Study Finds." Variety, 14 Nov. 2018, variety.com/2018/digital/news/smartphone-addiction-study-check-phones-52-times-daily-1203028454/.

Stanford University. "Bringing Old and Young Together Benefits Both." Stanford News, 6 Sept. 2017, news.stanford.edu/2016/09/08/older-people-offer-resource-children-need-stanford-report-says/.

"Serve Detroit" - Service Plan. 2017. https://citiesofservice.org/resource/detroit-mi-service-plan/

"Volunteerism and US Civil Society (SSIR)." Stanford Social Innovation Review: Informing and Inspiring Leaders of Social Change, ssir.org/articles/entry/volunteerism_and_us_civil_society.

Yeung, Jerf W K, et al. "Volunteering and Health Benefits in General Adults: Cumulative Effects and Forms." BMC Public Health, BioMed Central, 11 July 2017, www.ncbi.nlm.nih.gov/pmc/articles/PMC5504679/.