

Community Indicators

Measuring Our Progress Toward Healthy Communities

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COMMUNITY SERVICES PLANNING COUNCIL

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Defining and Measuring a Healthy Community

The sign of a truly educated man is to be deeply moved by statistics.
George Bernard Shaw

How can we help our neighborhoods flourish? How do we create regional health? What makes a community a good place to live in and work in? How do we achieve a strong business climate and meet the needs of vulnerable seniors and children? These are not new questions. Communities across the nation are asking these questions and building the answers. One of the tools being used to guide the process is “community indicators.”

Community indicators are measurements of a community’s economic and social well-being. They tell us whether we are improving, declining, or remaining stable. But even more than a report card on how well we are doing, indicators help us to navigate. They provide insights into how the different aspects of our social structure interact. We can see the relationship between transportation, auto emissions, and air quality. We can see how closely tied are welfare reform and child care. The areas that most need our attention and resources become evident, and as stated in the *Minnesota Milestones* report, “What gets measured gets done.” The critical role that indicators play in community development is put forth strongly in the *Community Indicators Handbook*, “Community indicators don’t just monitor progress; they make it happen.”

The process of a community coming together to explore and select the best indicators is just as important as the indicators themselves. In the examples of indicator projects cited in this summary

report, community members in each area came together to identify key measurements reflecting the values and the unique features of their region.

The projects cited in this summary report are but the tip of an iceberg and represent just some of the options that other communities have chosen in the process of identifying community priorities, selecting indicators, gathering financial support, and determining the geographic area.

The *Minnesota Milestones* project was initiated and continues to be funded and operated by the State of Minnesota. *Sustainable Seattle* is volunteer driven, while the *Silicon Valley* project has business and corporate support. The Toronto project covers the city of Toronto in Ontario, *Sustainable Seattle* covers Seattle and King County, while the Jacksonville project covers a five-county region, and *Minnesota Milestones* takes in the entire state.

Here in the Greater Sacramento Region (or the Central Valley, or Capital Area, whatever moniker we use to indicate the several counties closely tied by air quality, waterways, highways, workforce and economy) we are fortunate to have a number of groups already talking and working together to improve the quality of life in this Region. The dynamic dialogue has begun.

Indicators Come in Several Flavors

A teen pregnancy rate of 69.7 for Sacramento County will have little meaning until compared to the statewide rate of 69.9 or until it is viewed in a historical context to see that the rate for Sacramento County has declined since 1990 when it peaked at 76.4. It is comparison that begins to give meaning to data. There are several ways to put statistical indicators into context.

Baseline

If statistical data for an indicator is not available or has not been collected, then a mechanism for collecting this information needs to be put into place. The first measurement taken is called a baseline. Subsequent data is then measured against this baseline to determine whether conditions are worsening or whether progress is being made. An example is the first *State of the City Report* which presented baseline data for Toronto.

Target Goals

A community can use target goals such as those established in the *Healthy People 2000* model, where minimum standards for health were identified and targeted for the year 2000. The current status of the community is then measured against those standards. *Minnesota Milestones* is a project that has identified target standards. For example in *Minnesota Milestones*, the targeted graduation rate for 1995 for state universities was 36%. In 1992 the state came close—35%, however in 1995 the rate was 33% which was below the target.

Trends Over Time

Another way of measuring progress is by comparing progress over a period of time. The Jacksonville Community Council looks at a five county area over a period of five years. Seattle also examines indicators over time. Depending upon the information available, the trend may cover one year, four years, or more than a decade.

Comparison to State or National Data

Indicators of community or regional well-being can be reviewed in the context of “the bigger picture” and compared to state or national-level data.

Benchmarking

Performance benchmarking is the process of making comparisons to the “best practices” in other communities which have been identified as models for community health and development.

Criteria for Indicators

How does a community decide which indicators to use? According to both *Sustainable Seattle* and the *Silicon Valley Joint Venture* project, good indicators should do the following:

- Reflect fundamentals of long-term community health (In other words, short-term needs should not sacrifice the long-term health of the community)
- Be bellwether tests of long-term community health
- Be understood and accepted by the community
- Have interest and appeal for media
- Be statistically measurable on a frequent basis

In its report, *Creating a Community Agenda*, Jacksonville identified the following criteria for its indicators

- Validity (Does it measure an issue directly related to community outcomes?)
- Availability and timeliness (Is the indicator readily available on an annual basis?)
- Stability and reliability (Is it compiled in a systematic and credible way which will be repeated every year)
- Understandability (Is it clear enough to be interpreted by the readers)
- Responsiveness (Does the indicator respond quickly and noticeably to change?)

- Policy relevance (Does it have relevance for policy decisions?)
- Representative (Do the indicators as a group cover important dimensions of the solution area?)

In their publication, *Sierra Nevada Wealth Index*, the Sierra Business Council defines good indicators as:

- measurable and can be updated with existing and objective data sources
- measure the condition of assets which are of material importance to the region's wealth
- measure the condition in which there is active public interest

The Community Indicators Handbook thoroughly describes sixteen criteria to consider when selecting Indicators for a community. The *Handbook* states that a good Indicator should be:

- Relevant
- Valid
- Credible
- Measurable
- Consistent and Reliable
- Comparable
- Understandable
- A Leading Indicator (a predictor of potential problems)
- Compelling, Interesting and Exciting
- Of Interest to the Local Media
- Accessible and Affordable

An additional, or second set of criteria is then described to help Communities distill from a large, and probably overwhelming, list of possible Indicators those which would be the most precise. The *Handbook* suggests that the best indicators should:

- Relate to the Whole Community
- Connect with Vision and Values
- Make Linkages and Relationships
- Focus on Resources and Needs
- Be Creative and Action-Oriented

Some Processes and Tools For Indicator Projects

■ *Community Indicators Handbook*

Redefining Progress
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San Francisco, CA 94108
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Fax: (415) 781-1198

The Community Indicators Handbook, Measuring Progress Toward Healthy and Sustainable Communities, was published in 1997. The creation of this guide was the result of a collaborative process by Tyler Norris Associates, Redefining Progress, and Sustainable Seattle. The handbook summarizes more than 100 Indicator Projects in the United States and Canada, as well as describes the steps recommended for creating a community process to start an indicator project.

Briefly, the steps in the process, which are outlined in more detail in the *Handbook*, are:

1. Form a working group—the people who design the process, wade through the technical details, do the research and promote the final product.
2. Clarify your purpose—public education, policy background, performance evaluation
3. Identify your community's shared values and vision
4. Review existing models, indicators and data
5. Draft a set of proposed indicators
6. Convene a participatory selection process
7. Perform a technical review
8. Research the data
9. Publish and promote the report
10. Update the report regularly

■ *The Civic Index*

National Civic League
1445 Market Street, Suite 300
Denver, Colorado 80202-1717
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www.ncl.org/ncl

The National Civic League (NCL) in Colorado was selected in 1988 by the U.S. Public Health Service to develop and implement the U.S. Healthy Communities Initiative. The League developed *The Civic Index—Model for Improving Community Life*, to help communities evaluate their civic infrastructure. The ten components of *The Civic Index* are questions designed to help a community assess the processes it needs in order to work on its social well-being. The ten Components are:

1. Citizen Participation

Do citizens volunteer to serve on local boards?
How visible and active are local civic groups?
Do citizens know how local government works?
Is participation proactive or reactive?
Are citizens actively involved in major projects?

2. Community Leadership

Is there active leadership from all three sectors?
Is government willing to share the leadership turf?
Are there training programs available to nurture new leaders?
Is leadership results-oriented?
Is leadership risk-taking?
Do leaders take the long-term view?
Do leaders from the three sectors work well together?

3. Government Performance

Is government free of corruption?
Does government address qualitative concerns about services?
Is government professional and entrepreneurial?
Is government responsive and accountable?
Are services provided equitably?
Does government consider and utilize alternative methods of service delivery?
Is government a positive force in addressing community needs?

4. Volunteerism and Philanthropy

Is there an active community foundation?
Do local corporations have active giving programs?
Does the community have long-term philanthropic goals?
Do local programs encourage and honor volunteers and philanthropists?
Do government and business work closely with the nonprofit sector?

5. Intergroup Relations

Is the community dealing with ethnic and racial diversity?
Does the community promote communication among diverse populations?
Do all groups have the skills to become involved in the community?
Do groups cooperate in resolving broad disputes?
Do small, specific conflicts escalate into larger issues?
Is the community dominated by narrow special-interest groups?

6. Civic Education

Do schools promote or require community involvement?
Do schools, churches, and youth agencies offer civic education?
Do civic education efforts involve the entire community?
Do youth have ample opportunity to engage in community service?
Are schools teaching citizenship and civic responsibility?

7. Community Information Sharing

Do citizens have the information they need to make good decisions?
What role does government play in making information available?
Do schools and libraries play a role in informing the public?

Are there civic organizations designed for this purpose?
Do the media cover community issues fairly?
Do the media play an active and supportive role in the community?

8. Capacity for Cooperation and Consensus Building

Are there neutral forums and processes where all opinions are heard?
Are there informal dispute resolution processes?
Do community leaders have regular opportunities to share ideas?
Are all major interests represented in collaborative processes?
Do all three sectors work together to set common goals?
Do leaders reach collective decisions and implement them?

9. Community Vision and Pride

Is there a shared sense of a desired future for the community?
Has the community completed a broad strategic plan?
Does the community have a positive self-image?
Does the community preserve and enhance what is special and unique?
Does the community proactively monitor critical issues?
Does the community deal with problems before they become crises?

10. Inter-Community Cooperation

How do local governments relate to each other?
How do region-wide policy challenges get resolved?
Is economic development addressed on a region-wide basis?
Do leaders in the region have a common forum to discuss issues?
Are any services provided on a regional basis?
Are any planning activities carried out on a regular basis?

■ **Outcomes Toolkit**

The Healthcare Forum
425 Market Street, 16th Floor
San Francisco, CA 94105
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Fax: (415) 356-9300

The Outcomes Toolkit is a computer template for Community Indicators. It is a web-connected application designed to run on Windows 95 compatible computers that enables community partners to link via web technology to the Toolkit and share information. Communities using the Toolkit application select specific indicators that represent key goals reflecting the overall community vision. Using these indicators, the community can set target objectives for the future and track yearly progress toward these goals.

Founded in 1927 as the Association of Western Hospitals, The Healthcare Forum is a resource in education and applied research. The Outcomes Toolkit is a web-based product that is an outgrowth of a major effort to evaluate community-wide efforts to improve the quality of life in a community. The focus is to work with cross-sectoral leaders to rethink the ways that quality of life and community services are currently conceived and delivered. The Toolkit was developed collaboratively with communities and community leaders from around the country.

Some of the principles identified by the Forum to guide the community process are:

- Multiple factors cause community problems; therefore, efforts to effect behavioral, environmental, and social change must be multidimensional or multisectoral.
- Collaboration across governmental jurisdictions and across the public, private, and nonprofit sections is needed.
- A customer-centered community makes every effort to discover, serve, and satisfy the needs of its members within the constraints of its resources.

The most effective way to achieve a customer-centered community is to enhance the role of the customers in decision-making.

- Reducing disparity in education, opportunity and environmental risk within society is essential to a healthy community.
- Strategic planning is key to developing an appropriate fit between the between the community's outcomes and resources and its changing opportunities.
- A communications process that results in public awareness is an essential element to fostering community transformation.
- An effective monitoring system leading to outcomes-based accountability ensures appropriate assessment of the achievement of outcomes.

Just some of the indicators that a community could use are given as examples in the demonstration model of the Toolkit:

Adults Registered to Vote
Unemployment
Childhood Immunization
Infant Mortality
Birthrate Among Teens
Graduation Rate
Crime
Juvenile Crime
Air Quality
Median Family Annual Wage

Examples of Indicator Projects

■ *Healthy People 2000*

National Health Promotion and Disease Prevention Objectives

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
Hyattsville, Maryland

Healthy Communities 2000

Guidelines for Community Attainment of the Year
2000 National Health Objectives
American Public Health Association
1015 Fifteenth Street, N.W.
Washington, D.C. 20005

History/Process

Healthy People 2000: National Health Promotion and Disease Prevention Objectives was published by the U.S. Department of Health and Human Services Public Health Service. The 600+ page report was the product of a national effort involving health experts, national organizations, all state health departments, as well as the Institute of Medicine of the National Academy of Sciences. *Healthy Communities 2000* is designed to help communities put into practice the *Healthy People 2000* objectives. Community members can adapt the national targets according to local needs. The three broad goals of *Healthy People 2000* are to:

- Increase the span of healthy life for Americans
- Reduce health disparities
- Achieve access to preventive services

Geographic Area: National

The specific priority areas (indicators) selected by Healthy People 2000:

Health Promotion
Physical Activity and Fitness
Nutrition
Tobacco
Alcohol and Other Drugs
Family Planning
Mental Health and Mental Disorders
Violent and Abusive Behavior
Educational and Community-Based Programs
Health Protection
Health Protection
Occupational Safety and Health
Environmental Health
Food and Drug Safety
Oral health
Preventive Services
Maternal and Infant Health
Heart Disease and Stroke
Cancer
Diabetes and Chronic Disabling Conditions
HIV Infection
Sexually Transmitted Diseases
Immunization and Infectious Diseases
Clinical Preventive Services
Surveillance and Data Systems

■ *Creating a Community Agenda*

Indicators for Health and Human Services

prepared for United Way of Northeast Florida by Jacksonville Community Council, Inc.

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Jacksonville, FL 32207

Phone: (904) 396-3052

Fax: (904) 398-1469

History/Process

In 1995 the Jacksonville Community Council implemented a volunteer committee process to create the Community Agenda. JCCI members, United Way Community Solution volunteers and the general public were invited to participate. Nine committees were formed with approximately 120 volunteers. The committees corresponded to the nine United Way solution areas or categories to which United Way allocates funding. The committees met from June to October 1995. Each year a committee reviews the document to update the information. The indicators are evaluated to determine if they appropriately measure community outcomes.

Geographic Area

Five county area in Northeast Florida, including the counties of Baker, Clay, Duval, Nassau, and St. Johns.

Other Issues

The report identified seven overriding issues that surfaced repeatedly in the committees:

- Access to Services/Transportation (Adequate, affordable, accessible transportation)
- Adequate Housing (Affordable, quality, permanent housing)
- Child care (Quality, affordable child care)
- Employment-related services (Job-training skills, literacy programs and employment)
- Early identification (Early identification of at-risk youth and individuals for prevention)

- Advocacy and guardianship (Individuals with disabilities, elderly individuals, and victims of abuse and neglect need advocates to protect their rights and provide assistance.)
- Access to information (The community needs a single source of comprehensive information about health and human services that serves as a source for community members and service providers.)

Indicators

The report begins with a basic demographic overview of the five-county region then examines the social indicators for each county over a period of five years. In addition to reviewing the indicators, each section identifies unmet needs, desired outcomes, and suggestions for additional indicators. The indicators examined in the 1997 report are:

Prepare Children to Enter School, Ready to Learn

Mothers receiving early prenatal care
Newborns with birthweights of 5.5 pounds and over
Children receiving scheduled immunizations
Public school promotions from 1st to 2nd grade

Provide Opportunities for Positive Youth Development

Students enrolled in public elementary-school extended-day programs
Fourth grade performance on the Florida Writes! Test
Eighth grade performance on the CTBS test
Public school attendance
Public high-school graduation rate
Readiness for higher education
Employment rate for young adults
Graduate success

Assist Children and Youth in Crisis

Births to teen mothers per 1,000 live births
Subsequent births to teen mothers
Public high-school dropout rate
Outcomes for public-school dropouts
Juvenile delinquency rate per 1,000 population
Alcohol/drug-related juvenile arrests per 1,000 population
Violent deaths per 10,000 youth

Meet Basic Needs of Food, Shelter, and Clothing

Homeless census survey count per 100,000 population
New unemployment claimants
Public-school students eligible for the free or reduced-cost lunch program
Requests for City of Jacksonville emergency assistance
Persons receiving public assistance
Persons surveyed who report having no health insurance

Strengthen Families and Individuals

Foster children
Average length of stay in foster care
Employment rate
Births of mothers with at least 12 years of education
Divorces per 1,000 population
Children of divorced parents

Help Victims of Abuse and Neglect

Domestic violence-related crime reports
Child abuse reports
Children who are not reported to be abused/neglected

Provide Health Care, Education, and Support

Teen mothers receiving early prenatal care
Illegal substance-exposed newborns per 1,000 live births
Infant deaths per 1,000 live births
Emergency room visits without admissions
Newly diagnosed AIDS cases per 100,000 population
Sexually-transmitted disease reports per 100,000 population
Deaths due to heart disease per 100,000 population
Psychiatric and substance-abuse admissions per 100,000 population
Cancer deaths per 100,000

Help Individuals with Disabilities and Special Needs

Exceptional education students who complete high school
Exceptional education graduate success
Job placement for individuals with disabilities

Care for Frail, Elderly Individuals

Home health care visits per population ages 65 and over
Nursing home patient days per population ages 65 and over
People served and unserved by Meals on Wheels

■ **Minnesota Milestones**

Minnesota Planning
658 Cedar Street
St. Paul, MN 55155
Phone: (612) 296-3985
www.mnplan.state.mn.us

History/Process

Minnesota Milestones is produced by Minnesota Planning, a state agency charged with developing 30-year plan for the state which creates long-term accountability. It was begun in 1991 by Governor Arne H. Carlson to involve the public in setting goals for the state. Thousands of Minnesotans helped identify key areas of community well-being—economy, natural environment, community life, children and families, education, health, and quality of government. The process resulted in selecting 20 major goals and 73 measures of progress.

Geographic area: Statewide

Goals and Indicators

(The notation N/A means that data are not available.)

Our children will not live in poverty

Children living in households below the poverty line
(N/A) Percentage of parents who receive full payment of awarded child support

Families will provide a stable environment for their children

Teen pregnancy rate
Runaways
Percentage of 12th graders who have attempted suicide
Apprehensions of children
Children using alcohol or illegal drugs at least monthly
(N/A) Rate of divorces involving children
(N/A) Students who move more than once a year

All children will come to school ready to learn

(N/A) Percentage of 6th graders watching television or videos more than 40 hours per week
Percentage of parents satisfied with their child-care arrangements
(N/A) Percentage of children who have healthy diets
Abused or neglected children

Minnesotans will excel in basic academic skills

(N/A) Achievement test scores
Number of school districts with a 12th grade dropout rate over 10 percent

Minnesotans will be healthy

Infant mortality rate
Percentage of low birthweight babies
Percentage of children who are adequately immunized
Percentage of Minnesota adults who do not smoke
Life expectancy

Our communities will be safe and caring

(N/A) Percentage of people who feel they can rely on another person in their community for help
Violent crimes reported
(N/A) Percentage of people who feel safe in their communities
Percentage of people who have been crime victims
The rate of violent and injury-related deaths
Percentage of Minnesotans who volunteer for community activities
Youths who volunteer at least one hour a week

People who need help will receive it

Number of people using homeless shelters
(N/A) Percentage of recipients of AFDC on assistance more than 24 consecutive months
Percentage of unemployed people remaining unemployed more than 26 weeks
(N/A) Quality of life for people with long-term limitations

People with disabilities will participate in society

(N/A) Percentage of public facilities that are accessible

Minnesotans will value all cultures, races and ethnic background

(N/A) Number of discrimination complaints filed
Percentage of people who say they have been discriminated against
State legislators and constitutional officers who are members of an underrepresented racial or ethnic group
State legislators and constitutional officers who are female

Minnesota will sustain above-average economic growth

Minnesota's per capita gross state product as a percentage of U.S. per capita gross national product

Minnesotans will have the education to be a leader in the global economy

College graduation rates of various systems
Cost of college tuition
Percentage of high school graduates who are pursuing advanced training, apprenticeships or higher education one year after high school
Percentage of recent technical college graduates employed in a job related to their training
(N/A) Percentage of Minnesotans who use public libraries

Minnesotans will have a reasonable standard of living

Minnesota median family income as a percentage of U.S. median family income
Percentage of population living in households with incomes at least 200 percent of the poverty line
Percentage of Minnesotans with health-care insurance

Minnesotans will have decent, safe and affordable housing

Percentage of low-income housing units with severe physical problems
Percentage of low-income renters paying more than 30 percent of their income for housing
Home ownership rate

Small cities, rural and urban areas will be economically viable

Percentage of Twin Cities population living in census tracts with poverty rates 1.5 the state average
Percentage of population living in counties with per capita income less than 70 percent of U.S. nonmetropolitan per capita income
Minnesota nonmetropolitan per capita income as a percent of U.S. nonmetropolitan per capita income
Primary-care physicians per 10,000 people in nonmetropolitan Minnesota
(N/A) Minnesota's rank in telecommunications technology
Percentage of nonmetropolitan population in communities served by two or more options for shipping freight

Minnesotans will act to protect and enhance our environment

Average annual energy use per person
(N/A) Highway litter
Total water use

Solid waste produced and recycled
(N/A) Percentage of students passing an environmental education test

Minnesotans will improve the quality of air, water and earth

Air pollutants emitted from stationary sources
Days per year that air-quality standards are not met
Percentage of river miles and lake acres that meet fishable and swimmable standards
(N/A) Percentage of monitored wells showing ground water contamination
Soil erosion per acre of cropland
Toxic chemicals released or transferred
Quantity of hazardous waste generated
Number of Superfund sites identified and cleaned up

Minnesota's environment will support a diversity of plant and animal life

Diversity of songbirds
Number of endangered, threatened or special-concern native wildlife and plant species
Acres of natural and restored wetlands
Acres of forest land
Land area in parks and wildlife refuges

Minnesotans will be able to enjoy the state's natural resources

Miles of recreational trails
Number of public access sites on lakes and rivers

People will participate in government and politics

Percentage of eligible voters who vote in gubernatorial elections
Percentage of dollars contributed to campaign coming from small contributions

Government in Minnesota will be cost-efficient

Percentage of the state budget for which goals and outcome measures have been established
(N/A) Percentage of the local government budgets for which goals and outcome measures have been established
Percentage of Minnesotans who say they get their money's worth from their local and state taxes

■ *Sustainable Seattle,*

Indicators of Sustainable Community,
A status report on long-term cultural, economic,
and environmental health for Seattle/King County
Sustainable Seattle
514 Minor Avenue North
Seattle, WA 98109-5516
Phone: (206) 622-3522
Fax: (206) 622-3611
www.scn.org/sustainable

History/Process

Sustainable Seattle is described as a volunteer network and civic forum with the goal of achieving sustainability, defined as “meeting the needs of the present without compromising the future.” The “Indicators Project” which charts Seattle’s progress in its cultural, ecological, economic and social systems initially grew out of a conference in November 1990 in which community leaders came together around the idea of citizens choosing their own ways of measuring long-term community well-being. The Sustainable Seattle Network came together in February 1991 with 30 volunteers meeting to further the concept of creating indicators to measure the health of Seattle. The Indicators Task Team met over a period of six months to create a draft list of key indicators. Then a Civic Panel of more than 150 citizens and leaders was recruited to meet over a second six month period to finalize the indicators, analyze the relationships between them, and assess their impact. The list of potential indicators grew to 99 before being narrowed to a final selection of 40. The data are gathered from public information, existing research and public opinion polling. The 1998 report is the third since 1993.

Geographic Area Seattle and King County

Indicators:

Environment

- Wild Salmon
- Ecological Health
- Soil Erosion
- Air Quality
- Pedestrian- and Bicycle-Friendly Streets
- Open Space near Urban Villages
- Impervious Surfaces

Population and Resources

- Population
- Water Consumption
- Solid Waste Generated and Recycled
- Pollution Prevention
- Local Farm Production
- Vehicle Miles Traveled
and Fuel Consumption
- Renewable and Nonrenewable Energy Use

Economy

- Energy Use Per Dollar of Income
- Employment Concentration
- Unemployment
- Distribution of Personal Income
- Health Care Expenditures
- Work Required for Basic Needs
- Housing Affordability
- Children Living in Poverty
- Emergency Room Use for Non-ER Purposes
- Community Reinvestment

Youth and Education

- High School Graduation
- Ethnic Diversity of Teachers
- Arts Instruction
- Volunteer Involvement in Schools
- Juvenile Crime
- Youth Involvement in Community Service
- Equity in Justice
- Adult Literacy

Health and Community

- Low Birthweight Infants
- Asthma Hospitalizations for Children
- Voter Participation
- Library and Community Center Usage
- Public Participation in the Arts
- Gardening Activity
- Neighborliness
- Perceived Quality of Life

■ *Sierra Nevada Wealth Index*

The Sierra Business Council
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Truckee, CA 96160
Phone: (530) 582-4800
Fax: (530) 582-1230

History/Process

The Sierra Business Council was founded in 1994 and is led by a steering committee of business leaders which oversees the Council's work in research, policy analysis, and advocacy. The Index was developed by the Sierra Business Council to describe the social, natural and financial capital. The 42 indicators published in the 1996 report were selected by the Sierra Nevada Wealth Index Advisory Committee. Most of the data come from federal and state government sources and is collected and published at the county level.

Geographic Area - Four primary regions:

North: Plumas and Sierra Counties.
North Central: Nevada, Placer and El Dorado Counties
South Central: Amador, Calaveras, Tuolumne, Mariposa Counties
East: Alpine, Mono, and Inyo Counties

Indicators:

Social Capital

- Population Growth
- Population by Age
- High School Drop-out Rate
- School Achievement
- SAT scores
- Per Pupil Expenditures
- Volunteerism
- Voter Participation
- Library Use per 100 Persons
- Per Capita Expenditure on Community Recreation
- Age-adjusted Death Rates
- Physicians Per 100,000 People
- Births to Teenage Mothers
- Percent of Children in Poverty
- Violent Crime

Natural Capital

- Farmland Acreage
- Net Change in Acreage Enrolled in the Williamson Act
- Acres Initiated for Non-renewal in the Williamson Act
- Agricultural Acreage
- Gross Revenue per Acre
- Total Agricultural Revenue
- Forest Type and Seral State of National Forest Lands
- Young and Old Growth Timber Harvests
- Public and Private Timber Harvests
- Wholesale Value of Sierra Nevada Hydroelectricity
- Water Use of Rivers in Thousand Acre Feet and as Percent of Total Use
- River and Stream Quality
- Lake and Reservoir Water Quality
- Mono Lake Level
- Lake Tahoe Clarity
- Groundwater Quality
- Cumulative New Wells
- Federal and State Listed Species
- Aquatic Habitat Status
- Central Valley Chinook Salmon Spawning Stock Estimates

Financial Capital

- Local Job Growth
- Per Capita Income
- Wage Comparison:
 - Transfer Payments, Capital Payments,
 - Local Wages, Commute Wages
- Private Sector Employment
- Small Businesses
- Annual Change in Jobs
- Unemployment Rates
- Relative Size of Goods-producing and Service-producing Sectors
- Industry Sectors, Top Three and Bottom Three
- New Manufacturing Jobs
- New Residential and Commercial Construction
- Construction Jobs as a Percentage of Total Jobs
- Wages in Service Sector Jobs
- Service Sector Wages Relative to Average Private Sector Wages
- Recreation and Tourist-related Employment
- Estimated Travel and Recreation Oriented Businesses
- County Revenue from Transient Occupancy Tax

■ **Joint Venture: Silicon Valley Network**

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www.jointventure.org

History/Process

Joint Venture is a 501(c)(6) non-profit organization with the vision of “building a sustainable community to compete globally.” It is a collaboration of people in business, government, education and the community who have joined together to identify and to act on regional issues affecting the economic vitality and quality of life. The fourth annual *Index of Silicon Valley* continues the ongoing effort to track progress toward a community vision which was first outlined in 1993 in *Blueprint for a 21st Century Community*.

The indicators are published in a printed report as well as posted on the Joint Venture web site. The web site also includes an on-line questionnaire to solicit input from the community.

1. What do you value about Silicon Valley as a place to live and work?
2. What do you most fear about the Valley’s future?
3. Describe your desired future for Silicon Valley.

Geographic Area:

Joint Venture defines the 1,500 square miles of Silicon Valley as Santa Clara County plus adjacent parts of San Mateo, Alameda, and Santa Cruz counties in Northern California. This area reflects the geographic patterns of the Valley’s core industries and its workforce.

Indicators:

The 36 indicators were chosen in consultation with the Joint Venture Board of Directors and an Advisory Board of Bay Area economists. Twenty-one of the indicators appeared in previous versions of the *Index of Silicon Valley*. Fifteen are new.

Economic Indicators

Job Quantity

- Employment
- Job Growth/Industry Sector
- Employment Growth compared to Labor Supply

Job Quality

- Average Real Wage
- Average Wage by Industry Sector
- Household Income Distribution

Business Vitality

- Percent of state’s exports
- New Business Starts
- Women on Boards
- Venture Capital
- Corporate R&D
- Federal R&D at Bay Area Universities
- Commercial Vacancy Rate

Quality of Life Indicators

Education Workforce

- High School Drop-out Rate
- SATs
- Community College Enrollment
- Engineering Graduates

Built Environment

- Vehicle Delays
- Per Capita Transit Ridership
- Housing Affordability
- Rental Market
- Housing Starts

Natural Environment

- Bad-Air Days
- Carbon Emissions
- Per Capita Water Usage

Community Health

- Percentage of Low Birth-Weight Infants
- Percent of Hospitalizations Preventable With Early Care
- Comparison of County to National Goals for Unhealthy Behaviors

Children and Youth

- Childhood Immunizations
- Child-Support Collections
- Child-Care Slots
- Child Poverty

Civic Engagement and Governance

- Large-Company Giving Per Employee
- Households Giving to Charity

■ **Toronto's** ***First State of the City Report***

City of Toronto, Healthy City Office
20 Dundas Street West
Toronto, Ontario M5G 2C2
Canada
Phone: (416) 392-0099
Fax: (416) 392-0089

History/Process

Toronto's First State of the City Report, a hundred-page report was published in June of 1993 by the Healthy City Project. The Project examined seven fundamental areas of community life to find strengths and weaknesses, identify stakeholders and describe current initiatives.

Geographic Area: City of Toronto

Indicators

This project was guided by the three "Es" of Healthy City Toronto: Environment, Economy and Equity. The 1993 report provided a "baseline" for:

Economic Life

- layoffs
- part-time jobs
- newcomers
- unemployment
- cost of living
- income distribution
- women, work and income

Environment

- the ecosystem
- Air quality index
- Street level pollution
- CFCs
- Energy Consumption
- Indoor Air
- Water Quality and Quantity
- Drinking Water
- Parks and Nature
- Land Use Patterns
- Soil
- Pesticides and Food
- Garbage

Health

- Births
- Deaths
- Illness and Disability
- Hunger and Nutrition
- Physical Activity, Exercise and Recreation
- Smoking
- Alcohol and Drugs
- Sexual Practices and AIDS
- Stress

Education

- funding
- education and poverty
- enrollment trends
- National and International Comparison
- Literacy
- ESL
- Dropout Rates
- Disability and Education

Housing

- availability
- affordability
- adequacy
- housing for people with disabilities
- homelessness, visible and hidden
- underhoused, at risk for homelessness

Transportation

- vehicle emissions
- home and work - commuting
- traffic congestion
- mode of travel
- lower automobile occupancy
- public transit for people with disabilities
- traffic accidents

Safety

- alcohol and drug related crimes
- homicides and violent crimes
- assaults
- domestic violence
- robbery
- child abuse

The Capital Region

■ *Human Services Information System*

Community Services Planning Council
909 - 12th Street, Suite 200
Sacramento, CA 95814
Phone: (916) 447-7063
Fax: (916) 447-7052

History/Process

The Human Services Information System was developed in the mid-1980s as a public/private partnership to provide a central clearinghouse for measurable data about the people and social and economic indicators of the region as well as descriptive and categorized information on public and non-profit services. This information is used by program planners, funders and policy-makers in the region. Periodic reports on the region's Trends and Issues are published.

This central information system was originally developed, and continues, under the guidance of an Advisory Committee that has included over the years community volunteers as well as representatives from:

Alta California Regional Center
Area 4 Agency on Aging
Child Action
School of Health and Human Services,
California State University, Sacramento
Healthy Community Forum
Real Estate and Land Use Institute
Sacramento Area Council of
Governments (SACOG)

Sacramento City Manager's Office
City of Sacramento Planning and Development
Sacramento County Executive's Office,
Dept of Human Assistance,
Dept of Health and Human Services
Probation Office
Sacramento County Office of Education (SCOE)
Sacramento Employment and
Training Agency (SETA)
Sacramento Housing and Redevelopment
Agency (SHRA)
Sacramento Metropolitan
Chamber of Commerce
Sacramento Public Library
Sacramento Regional Foundation
Sierra Health Foundation
United Way Sacramento Area

Geographic Area: Five-county region of Amador, El Dorado, Placer, Sacramento, and Yolo, as well as the State of California.

Indicators:

The data helps the community identify areas or populations in need. Resources can then be directed to fill gaps in service and avoid duplication. Over the years more than 150 indicators were identified and tracked. Data are collected annually for each of the five counties in the region as well as for the state of California. Many of these indicators have been tracked since the inception of the Information System, thus offer a historical context to show long-term trends, as well as comparisons to the state as a whole.

Population and Diversity

- Population Estimates
- Estimated Population for Cities in the Region
- Annual Population Growth
- Net Driver License Address Changes
- Components of Population Change
- Natural Increase
- Net Migration
- Median Age
- Population Projections by Race/Ethnicity
- Population by Age Group, Gender and Ethnicity
- Enrollment in Public Schools by Ethnicity
- Interpreting Services by Language,
UC Davis Medical Center
- Limited English Proficient Students
- Limited English Proficient Students
by Language Spoken

Economy and Income

- Consumer Price Index
- Per Capita Personal Income
- Total Employment
- Number of Unemployed Persons
- Unemployment Rates
- Labor Force
- Number of Business Permits
- Taxable Sales
- Taxable Sales of Retail Stores
- Average Wages per Job
- Employment by Industry
- New Jobs Created
- Education
- Pupil Service Staff: Number and Rate
- Average Scholastic Aptitude Test Scores
- High School Graduates Enrolling in
Higher Education
- School Enrollment Public and Private
- Public School Enrollment by Grade Level
- Annual Percent Increase in School Enrollment
- Dropout Rates for Grades 9-12 by Ethnic Group
- Public School Enrollment Projections

Health

- Live Births
- General Fertility Rates
- Teen Births by Age of Mother
- Age Specific Birth Rates
- Percent Low Birthweight Infants
- No Prenatal Care During First Trimester
- Infant Deliveries Paid for by MediCal
- MediCal Funded Abortions
- Death Rates

- Infant Death Rates
- Number Deaths Due to AIDS and Deaths by Age
- Cumulative Incidence of AIDS Cases
- Sexually Transmitted Diseases
(Syphilis, Gonorrhea, Chlamydia)
- Reported Cases of Hepatitis (Type B)
- Tuberculosis Cases
- Emergency Room Visits, Non-Urgent Conditions
- General Acute Care Hospital Occupancy Rates
- Average Length of Stay in Acute Care Hospitals
- General Acute Care Hospital Beds
per 1,000 persons
- Persons Per Physician
- Persons per Dentist
- Licensed Long Term Care Beds
per 1,000 Population
- Estimated Percent of Live Births
to Unmarried Women
- Local Mental Health Programs, Clients Served
- Causes of Deaths, per 100,000 Population
- Communicable Disease Cases
- Developmental Disability Clients

Public Assistance -

Care of Vulnerable Populations

- Number Certified Eligible for MediCal
- Number Certified Eligible for MediCal, by Age
- MediCal Utilization by Certified Eligibles
- MediCal Program Total Annual Payments
- Children Receiving AFDC-Family Group
Assistance
- Food Stamp Recipients
- Homeless Assistance Programs
- In-Home Supportive Services Cases
- Children in Foster Care
- Supplemental Security Income by Age
- General Relief Caseloads

Substance Abuse

- Deaths Due to Drugs
- Alcohol Related Deaths
- Driver License Suspension and Revocation
- Adult Felony Drug Arrests
- Total Adult Drug Arrests
- Juvenile Felony Drug Arrests
- Adult Felony DUI Arrests
- Juvenile Felony DUI Arrests
- Drug-Related Hospital Discharges
- Alcohol-Related Hospital Discharges
- Alcohol-Involved Motor Vehicle Deaths
- Infants Referred to Child Protective Services
due to Perinatal Substance Exposure

Public Safety

FBI Index Crimes

Number of law Enforcement Personnel

*Reported Violent Crimes

*Reported Homicides

*Reported Aggravated Assaults

*Reported Forcible Rapes

*Reported Property Crimes

*Reported Motor Vehicle Thefts

 *Adult Arrests (Numbers and Rates)

 for each of these indicators

 *Juvenile Arrests (Numbers and Rates)

 for each of these indicators

Domestic Violence Calls

Domestic Violence Calls Involving Use of Weapon

Annual Number of Persons Sheltered,

 Women and Children

Calls Received by Domestic Violence Agencies

Adult Active Probation Caseloads

Investigated Reports of Child Abuse

Emergency Response Calls Child Protective

 Services

Elder Abuse Confirmed Reports

Dependent Adult Abuse

■ *Valley Vision and the Sacramento Region Economic Cluster Project*

7750 College Town Drive, Suite 208
Sacramento, CA 95826-2344
Phone: (916) 278-6793
Fax: (916) 278-4686

History/Process

Valley Vision began in 1993 as a result of an effort to deal with the re-use potential of Mather Air Force Base. This led to discussions that the region was facing critical long-range problems created by unrelenting population growth, and a need for region-wide participation in decisions that affect the entire region. Since then Valley Vision has conferred with local and national experts, held a series of conferences, community meetings and presentations. Valley Vision and the Sacramento Region Economic Cluster Project presented the Sacramento Region Economic Summit in June of 1998.

The Sacramento Region Economic Cluster Project worked in parallel with the Valley Vision project. Through a grant from the James Irvine Foundation this project worked to organize business, education, community and government leadership in a network of public-private partnerships to promote the long-term economic vitality and quality of life of the region.

Seven teams of “civic entrepreneurs” identified a series of projects, including the development of an annual report tracking the quality of life and economic vitality of the region. An action plan for the Quality of Life Indicators Project was presented at the Sacramento Regional Economic Summit on June 19, 1998. The plan included identification of indicators by January 1999 with a report published by June of 1999.

Geographic Area:

El Dorado, Placer, Sacramento, Sutter, Yolo and Yuba Counties.

Indicators:

Eight general indicator areas were presented at the Summit for discussion

- Economic Vitality
- Community Participation
- Mobility (Transportation)
- Education
- Sustainable Environment
- Housing Choice and Affordability
- Safety and Security
- Arts and Culture

Common Indicators

This is a summary list of some of the most common indicators and priority areas that are identified in Community Indicator projects:

Economy

- Population Growth
- Employment/Unemployment
- Number of Active Business Licenses
- Industry Sectors
- Persons/Children on Public Assistance
- Housing
- Number of Available Child Care Slots
- Agriculture - Crop/Orchard production

Health

- Immunization Rates
- Births to Teen Mothers
- Early prenatal care
- Low birthweights
- Infant Mortality Rate
- Cumulative AIDS Cases
- Emergency Room Visits,
for Non-Urgent Conditions

Education

- Public school attendance
- Public high-school graduation rate
- College graduation rate
- Readiness for higher education
- Public high-school dropout rate
- School test scores (SAT)
- Reading Scores

Transportation infrastructure

- Measurement of Commuting
(number of cars, hours per week, miles)
- Traffic congestion
- Automobile occupancy

- Public transit availability and use
- Air, water, rail transportation

Public Safety

- Juvenile delinquency rate
- Alcohol/drug-related juvenile arrests
- Children Living in Poverty
- Child Protective Services Cases
- Violent crimes
- Domestic violence

Civic Involvement

- Percentage of citizens who volunteer
- Voter Participation
- Charitable donations

Environment

- Open Spaces
- Air Quality
- Vehicle Emissions
- Fuel Consumed
- Water Quality - lakes and rivers
- Groundwater
- Water Consumed
- Land Use - urban, agriculture, forest, parks
- Wildlife - Federal and State Listed Species
- Aquatic Habitat Status
- Endangered or threatened
wildlife and plant species

Culture/Recreation

- Library Usage
- Public Park Spaces
- Per Capita Expenditure on
Community Recreation
- Miles of Bike or Recreation Paths
- Art Events or Programs

For More Information

Community Indicators Handbook

Redefining Progress
One Kearny Street, Fourth Floor
San Francisco, CA 94108
Phone: (415) 781-1191
Fax: (415) 781-1198

The Civic Index

National Civic League
1445 Market Street, Suite 300
Denver, Colorado 80202-1717
Phone: (303) 571-4343
Fax: (303) 571-4404
www.ncl.org/ncl

Outcomes Toolkit

The Healthcare Forum
425 Market Street, 16th Floor
San Francisco, CA 94105
Phone: (415) 356-4300
Fax: (415) 356-9300

Creating a Community Agenda

prepared for United Way of Northeast Florida by
Jacksonville Community Council, Inc.
2434 Atlantic Boulevard, Suite 100
Jacksonville, FL 32207
Phone: (904) 396-3052
Fax: (904) 398-1469

Minnesota Milestones

Minnesota Planning
658 Cedar Street
St. Paul, MN 55155
Phone: (612) 296-3985
www.mnplan.state.mn.us

Sustainable Seattle

514 Minor Avenue North
Seattle, WA 98109-5516
Phone: (206) 622-3522
Fax: (206) 622-3611
www.scn.org/sustainable

Sierra Nevada Wealth Index

The Sierra Business Council
P. O. Box 2428
Truckee, CA 96160
Phone: (530) 582-4800
Fax: (530) 582-1230

Joint Venture: Silicon Valley Network

99 Almaden Blvd., Suite 700
San Jose, CA 95113-1605
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www.jointventure.org

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