ACHIEVING THE ANCHOR PROMISE

Improving Outcomes for Low-Income Children, Families and Communities

A Report Submitted to The Annie E. Casey Foundation
August 2013
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Improving Outcomes for Low-Income Children, Families and Communities

by Steve Dubb, Sarah McKinley, and Ted Howard
with contributions from Deeohn Ferris and Farzana Serang

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The Democracy Collaborative at the University of Maryland

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About the authors

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We also acknowledge the exceptional support of our contributors, Farzana Serang and Deeohn Ferris, each of whom conducted 15 interviews. Serang’s and Ferris’ contributions go beyond conducting interviews and taking copious notes. Ferris helped identify and recruit community group leaders for the interviews, providing a valuable perspective for this work. Serang, in her interviews, brought her experiences working with PolicyLink and other nonprofit groups and pushed anchor institution respondents to identify clearly their definitions of community, which, as noted in this paper, varied widely. Additionally, this paper draws on research on the role of hospitals conducted by Holly Jo Sparks and David Zuckerman for The Democracy Collaborative, which we gratefully acknowledge here.

In developing this paper, we relied on the good will and contributions of 75 individuals who agreed to take an hour (or sometimes more) out of their day to participate in detailed qualitative interviews. Many also contributed in other ways, such as by suggesting additional key people to interview and helping us track down important articles and information. A full list of interview subjects and their affiliations is included in the Appendix.

Last, but not least, we wish to acknowledge the many people who read and commented on a draft of this report. We are very grateful for the helpful critical feedback provided by these readers: Susan Albertine, Kim Burnett, Denise Fairchild, Shari Garmise, Ed Gerardo, Maggie Grieve, Ira Harkavy, James Harvie, Rita Axelroth Hodges, David Maurrasse, Caryn Musil, Margaret O’Bryon, Manuel Pastor, Judith Ramaley, Michael Rich, Victor Rubin, Farzana Serang, Patricia Sobrero, Lee Stuart, Henry Taylor, Chris Walker, Wim Wiewel and David Zuckerman. While it was not possible to fully incorporate all of the valuable feedback we received, the final product has been greatly improved due to their contributions, edits and suggestions. All responsibility for errors and omissions remains, of course, our own.
It is widely acknowledged that hospitals and universities are anchor institutions—that is, place-based institutions that are tied to their location by reason of mission, invested capital, or relationships to customers or employees and hence have a vested interest in improving the welfare of their surrounding communities. A question that is increasingly arising, however, is to what extent are universities and hospitals conducting their work in ways that explicitly improve the lives of low-income children, families and communities that are often proximate to the campuses of these institutions in major urban areas.

The multi-faceted nature of anchor institutions’ work in the area of community engagement poses an additional challenge. While program measures do exist, most institutions do not have a systematic method of measuring or evaluating the impact of their work in communities.

This study aims to begin a conversation that might result in some common focus areas—that is, areas of community engagement where anchor institutions agree to measure the effectiveness of their community work at the level of the institution—and indicators—that is, ways to evaluate progress on the selected focus areas. Developing such a set of focus areas and indicators is, we believe, an important step in helping move the anchor institution field toward a more concerted and strategic focus on equitable, inclusive and place-based development.

Research for this report began in winter 2012, with most of the interviews taking place between May and July 2012. In sum, 75 interviews of anchor institution, national nonprofit, government and community organization leaders were conducted. These data are supplemented by hospital sector interviews that The Democracy Collaborative conducted in 2011 and 2012 for a related study on the roles of hospitals in community economic development.

Among the report’s findings are the following:

- **Anchor institution motivations** for engaging in community development include mission, self-interest, government incentives (both “carrots” such as grants and “sticks” such as IRS requirements) and religious motivations (for religiously affiliated institutions).

- **Ways to institutionalize engagement** include placing engagement language in mission statements, developing a strategic implementation plan, using incentives to reward engagement, creating a coordinating office, gaining trustee backing and adopting a commitment to partnering with community groups.

- **Common challenges** include cultural differences between anchor institutions and communities, the need to develop incentive and governance structures that support community engagement and the difficulty of developing institution-wide frameworks to measure community impact.

- **Different anchor institutions define the relevant “community” differently.** For some institutions, the focus area involves low-income adjacent neighborhoods; others take a regional approach; and some focus on non-adjacent, low-income neighborhoods.

- **Community groups benefit from the community engagement work of anchor institutions.** These benefits include gaining access to expertise and resources, the ability to bring other parties (e.g., city officials, businesses) to the table to resolve issues, obtaining technical assistance and gaining access to data regarding critical neighborhood concerns.

- **Shortfalls in anchor institution strategies from a community perspective exist in key areas.** These include insufficient consistency and institutional coordination, a failure to foster community ownership of data and projects and inadequate communications and transparency.
• Community groups would like to see improvements in anchor institution practice in many areas. These include greater assistance in leveraging anchor resources for community benefit, increased focus on transparency in communication, an increased community presence in decision-making, a clear “front door” or partnership center for community members to approach the institutions and an increased anchor institution commitment to job training and job creation.

• Measuring community impact of anchor institution work with community partners is challenging. Among these challenges are: 1) community impact is typically a collective product, rather than the result of any one actor’s intervention; 2) measurement often tilts toward the quantifiable, even though qualitative factors can be equally or more important; and 3) effectively measuring community impact often requires a long-term commitment of at least 10 years.

• Even though generating institution-wide measures of effectiveness is challenging, there is widespread interest in developing “good enough” indicators. Best practices of efforts to do so are presented and summarized. In particular, this includes: 1) focusing on what anchor institutions can control (for example, measuring key inputs in areas where there is good reason to believe there is a positive connection with outcomes and impact); 2) setting benchmarks; 3) identifying policy indicators where numerical goals won’t work; 4) establishing goals and timelines; and 5) making sure to include indicators related to improving local economic multipliers. Where possible, it is advisable to build on existing and readily available data sets (e.g., crime and public education statistics) to reduce data collection costs.

• Community groups and anchor institutions largely agree on what outcome measures should look like. Broadly speaking, proposed focus areas and indicators fall into four broad categories—economic development; public health, environment and safety; public schools and education; and community leadership and capacity building. These items were seen as important by both anchor institution leadership and community groups.

• We propose a dashboard with 12 key outcome areas designed to build knowledge in the field and ultimately increase the effectiveness of anchor institution work with and in communities. Those are: 1) local and minority hiring; 2) local and minority business procurement; 3) housing affordability; 4) business incubation; 5) arts and cultural development; 6) community investment; 7) public health; 8) public safety; 9) environmental health; 10) pre-K-12 education improvement; 11) community capacity building and democratic leadership development; and 12) asset building and ownership.
INTRODUCTION

Over the past few decades, and especially in the last 10 to 15 years, anchor institutions—particularly universities, but also increasingly hospitals and a broader array of place-based institutions, including local governments—have become increasingly engaged with local community building and economic development initiatives. Some universities, in particular, have made substantial investments—sometimes in the hundreds of millions of dollars, as well as the dedication of countless hours of faculty, staff and student time—to help improve low-income and disinvested neighborhoods in their communities, often directly adjacent to their campuses. With hospitals, too, albeit with less visibility, similar developments are evident.

Clearly, the potential of anchor institutions to collaborate with communities and contribute to community economic development in general—and to improve the wellbeing of low-income children, families and communities, in particular—is significant. Universities are place-based institutions with considerable human and intellectual resources; they educate 21 million students annually and employ more than three million people. Their purchasing represents roughly three percent of U.S. gross domestic product and they have endowment resources in excess of $400 billion. The hospital industry is even larger: five million Americans work for hospitals and, in aggregate, hospital sector procurement is in excess of $600 billion annually and endowments total roughly $500 billion. All told, hospitals and universities collectively employ eight percent of the U.S. labor force, with concomitant shares of investment and purchasing power.¹

In the Road Half Traveled, The Democracy Collaborative profiled a wide range of promising practices among universities. Subsequent Democracy Collaborative research has also identified similarly promising practices among hospitals. The idea of an anchor institution mission is increasingly accepted among university and hospital leaders, but lack of clarity over what the term means often results in limited connection of anchor institution strategies to improving outcomes for children, families and communities. Furthermore, in part because of a lack of precision in assessing efforts, many anchor strategies, in addition to achieving intended positive outcomes (e.g., enhanced safety, streetscape improvements and improved retail), also have unintended outcomes. At times, neighborhood revitalization around an anchor institution strategy can have uneven effects: some residents benefit from the neighborhood improvements, while others are priced out of the neighborhood. Even when residents do benefit, often the impact of the anchor institution activity on community wellbeing is less than desired.

For example, the University of Pennsylvania (Penn) is viewed as a leader in anchor institution work, with a multiple-vector initiative in West Philadelphia that has developed over more than two decades. Penn can point to many successes in its workings with public schools, as well as supporting significant neighborhood improvements, as evidenced by much improved public safety and a retail revival of the neighborhood. Yet, at Penn, Netter Center for Community Partnerships Director Ira Harkavy affirms that, “fundamentally the problems of West Philadelphia have not been effectively solved. The potential for full throttle engagement is great. We need to have a more conscious conversation. The necessary steps haven’t been taken. To be fair, it’s very hard to do.”²

In short, despite progress to date and the enormous potential, shortfalls remain. Universities and hospitals regularly issue community and economic impact reports that document their activities. But even the best of the current strategies leave much to be desired when it comes to identifying the impact of their economic and community development activities on low-income neighborhoods. To be sure, project-specific measures do exist, but institutions as a whole rarely measure the impact they have on the welfare of low-income children, families and communities.

In addressing this topic, we recognize that there are many challenges inherent in the metric
development process. We understand that, almost always, community economic development involves multiple actors and multiple objectives. Because of this, constructing a true logic model of anchor institution impact in community economic development would be nearly impossible. For example, if an anchor institution is a participant in community economic development in coalition with other groups, as indeed is in most cases advisable, then isolating the unique impact of the university or hospital in that coalition is going to be exceedingly difficult.3

Nevertheless, while measurement may be challenging, this does not mean that useful and informative indicators cannot be developed that can, over time, help anchor institutions improve the quality of their work with community partners and hence improve the wellbeing of children, families and communities. First, indicators provide a mechanism for accountability for anchor institutions that are undertaking the important work of leveraging their resources to achieve community benefit, making it much easier to incorporate goals into job descriptions, personnel evaluations, institutional strategic plans and the like. Second, indicators provide an important mechanism for transparency with community partners, including nonprofits, foundations and local governments. They also help hospitals and universities undertaking an anchor institution strategy communicate what they aim to achieve. Third, indicators allow more organizational learning by providing a measuring stick to assess and adjust strategies over time. Fourth, to the extent that at least a minimum set of common measures can be developed for the field, indicators will allow for more comparability and cross-institutional learning. The goal, in short, is to create a community of practice among institutions and community partners.

Nancy Zimpher, Chancellor of the State University of New York (SUNY) system, underlined both the difficulty and importance of this work. “Are you going to hold yourself accountable for solving problems that are largely outside of your control?” Zimpher asked rhetorically. “Yes, I think we’re crazy,” she replied to her own question. “That is exactly what we are saying . . . If American higher education is supposedly the best in the world, why are we plagued with so many societal problems? Surely, we need to be more engaged in solving the big problems.”4

In developing these measures, we seek to build on existing knowledge both from efforts already underway within anchor institutions themselves, as well as from knowledge generated from community economic development practitioners. In short, while we do not in this paper purport to develop models of causality, we do believe that the field of anchor institution research and engagement has progressed to the point where developing a common dashboard of focus areas and indicators is possible. In this paper, we will present a model for what such a dashboard might look like. Our hope is not to be the final word on these topics, but rather to generate a discussion within the field that will result in measures that might be piloted and further developed by anchor institutions and community partners.
A. WHY THIS REPORT NOW

As highlighted above, today universities and hospitals regularly tout their community impact and proudly proclaim their role as anchor institutions. Yet measurement of community impact remains limited. George Mehaffy, Vice President for Academic Leadership and Change of the American Association of State Colleges and Universities, said that when you talk about community impact measures, “There is a gap that you can drive a truck through.” One reason is turnover. Because average presidential tenure is 7-8 years, one reason to systematize measurement, Mehaffy said, is to answer for incoming presidents the question, “Where do I start?”

Shari Garmise, Vice President of the Urban Initiative at the Association of Public and Land-Grant Universities, noted that member university presidents want to be able to show how anchors impact their cities and present a more compelling story that goes “beyond marketing, anecdotes and good intentions.” Carol Geary Schneider, President of the Association of American Colleges and Universities, said that developing common indicators in the field “would be highly desirable.”

Hospitals, too, are increasingly interested in pursuing an anchor institution approach, making the need for effective measures of community intervention quite timely. Oliver Henkel, Chief External Affairs Officer of the Cleveland Clinic, stated plainly his institution’s perspective: “We are only as strong as the neighborhoods in which we are located. And I can’t overstate that.” Bill Schramm, Senior Vice President of Strategic Business Development at Henry Ford Health System, echoed Henkel’s views. “Our board, more than five years ago, before the economic meltdown, adopted as one of its six principles for an envisioned future. . . .to be a significant force in the redevelopment of the city of Detroit.”

Increased information regarding what are effective ways of leveraging hospital resources for community impact is also highly valued. As Ed Gerardo, Director for Community Commitment and Social Investment at the thirteen-hospital Bon Secours Health System, remarked, “There have been significant investments [in communities] at all levels, both at our corporate and local systems. This is a high priority activity for our mission services.”

Julie Trocchio, who is Senior Director of Community Benefit and Continuing Care at the Catholic Health Association, noted that nationally, “Hospitals are looking to the future to prepare, train, educate future physicians and nurses and look beyond standard health issues into the community.”

If institutional interest is growing, perhaps not surprisingly community groups are also highly interested in the development of clearer community impact indicators. Paulina Gonzalez, Executive Director of the Los Angeles-based nonprofit group SAJE (Strategic Actions for a Just Economy), noted that “being able to, by the end of the day, track what’s happening to the jobs, track what’s happening to those families . . . I think that would be extremely powerful.”

Elizabeth Yeampierre, Executive Director of UPROSE, a Brooklyn nonprofit that has partnered with a local hospital, said, “Procurement is always a problem. But hiring is huge . . . they’ll hire, but over a period of time these people will be gone . . . monitoring that for us is extremely important.”

Denise Fairchild, President of the Emerald Cities Coalition, a group that coordinates partnerships focused on sustainability and workforce development in 10 cities, stated plainly, “Having worked in the community change field for 35 years, that [anchor institution partnerships] is my core theory of change. We cannot change conditions of communities without anchor institutions.”

Developing the accountability of indicators, along with regular reporting of results, Fairchild said, are important steps in furthering this work.
B. RESEARCH DESIGN

Research for this report began in winter 2012, with most interviews taking place between May and July 2012. In sum, 75 interviews of anchor institution, national nonprofit, government and community organization leaders were conducted. This data is supplemented by hospital sector interviews that The Democracy Collaborative conducted in 2011 and 2012 for a related study on the roles of hospitals in community wealth building (expected to be published in winter 2013).

Overall, 11 of our interviews were of university administrators (including five university presidents), 17 of university center directors or staff, 15 of individuals representing local community-based organizations, 11 of representatives from associations tied to the university sector, 15 of individuals from community development or advocacy groups, two of foundation officials, two of government officials and two of hospital representatives. Additionally, for a parallel research project, we conducted 32 interviews of hospital officials and draw on their responses as appropriate here. The Sustainable Communities Development Group, a group with roots in the environmental justice movement, led by Deeohn Ferris, conducted the interviews of community-based organizations. The list of community organization interviews was developed in a collaborative process and included a mix of environmental justice and neighborhood improvement groups.

Interviews typically were conducted by phone (although more than a dozen were in-person) and lasted on average about an hour. Themes covered (for university administration and center directors) included the following:

- What were their motivations for community engagement efforts;
- Whether or not their institutions felt they had an “anchor institution mission;”
- How each institution defined its community;
- How each institution defined what community engagement look like;
- How each institution currently measures community engagement; and
- What focus areas and indicators did they feel are most appropriate.

Interviews of community development groups, community-based organizations and others touched on similar themes, although with a different focus. With community groups in particular, we tried to get a sense not only of what indicators they would desire, but also what is working—and what is not working—with current anchor institution partnerships.

In addition to interview data, we reviewed relevant background literature on anchor institutions and on community impact measurement. Although not directly looking at community impact, a number of efforts have been made to evaluate community engagement work. These include the Carnegie Foundation for the Advancement of Teaching, which has developed an “elective classification” for community engagement; the American Democracy Project and the National Conference on Citizenship, which together are developing indicators of “civic health” (that focus on measuring the level of community social capital and participation in civic life, ranging from local meetings to elections) and the Coalition of Urban Serving Universities, which has conducted surveys of its university members’ activities. We also examined some of the different ways that indicators are currently employed in community development. This includes efforts by intermediaries such as the Corporation for Enterprise Development (CFED), NeighborWorks, the Annie E. Casey Foundation’s own measures of community impact and indicators developed in the field (such as Strive’s cradle-to-career set of educational achievement measures). We also reviewed community impact reports released by hospitals and universities, as well as community benefit agreements that are typically entered into by unions, community groups and city governments around major development projects.
C. REVIEW OF INTERVIEW FINDINGS

Interviews conducted for this report uncovered a high level of interest in the topic of anchor institution strategy and ways to measure its community impact. Below, we discuss our findings from three audiences: anchor institution leaders and staff; community group representatives; and a broad range of representatives from national association and community development groups.

1. Community Work: The Anchor Institution View

In our interviews with anchor institution leaders and partnership directors and staff, we found multiple factors that have motivated university and hospital leaders to embrace an anchor institution mission and decide to engage directly with community groups. Most important has been a leadership vision that sees community engagement as a core element of the institution’s mission. But additional factors clearly play a role, both external and internal. External factors can be economic or political (be they government “carrots” such as grants or “sticks” such as increasing IRS community benefit requirements) but can also be internal (for example, faculty or student pressure at a university).

Leadership Impact in Setting Anchor strategy

Most often, a central factor in institutional leaders choosing to adopt an anchor institution mission has been the recognition by senior leaders that engaging in community development is a means of securing the institution’s own self interest. For example, David Cox, Executive Assistant to the President at the University of Memphis, notes that, “15-20 years ago people began to become aware of the notion of the university as a key contributor to the health of the region—economically, socially, culturally and politically. Prior to that, the university was mainly seen as a place where people got degrees and entered the workforce. The current president came in 11 years ago and put in partnering with the community as a top priority...It has had a substantial effect on how the university is viewed externally. Now it’s integral to the perspective of external people in understanding the role of the university.”

James Harris, President of Widener University in Chester, a low-income suburb of Philadelphia, tells a more dramatic story. When Harris arrived at Widener, he noted, “The senior administration had put in place a long-term plan to enclose the campus with gates and fences.” On starting his presidency, however, Harris argued that, “this is not the direction we should be going.” Instead, the university conducted a two-year planning process that engaged many local community leaders and national community development experts. Now, based on that planning, the university’s focus has changed “to be mission-driven, using words such as civic engagement, judged by performance in community.” The plan the university adopted (“Vision 2015”) sets specific goals in three areas: economic development, community development and education.

George Kleb, Executive Director of the Bon Secours of Maryland Foundation, remarked that at a certain point taking on an anchor institution role became an organizational imperative. In Baltimore, it was “getting to the point where people making decisions to come and interview for a job, for example, or to have an elective procedure, were deciding not to come or go back home,” Kleb said, resulting in the hospital both losing potential employees and potential patient dollars. Kleb added, “[Bon Secours] got into the mode that led to a greater understanding that we are an anchor institution and have the potential to leverage that—in the 1990s, we were looking to address the marked disinvestment in the area surrounding Bon Secours.”

Steve Standley, Chief Administrative Officer of University Hospitals (UH) in Cleveland, observed that “what is unique about hospitals and colleges is, they have very fixed geographic locations and they tend to continue to invest in huge infrastructure over the years, regardless of where they are.” The dynamic in Cleveland, Standley added, is that “Twenty years ago there were a lot of other large,
corporate employers in this market... over time as Cleveland has changed, UH finds itself now, I believe, as the second largest employer in northeast Ohio, and so as that demographic shift occurred from an employer standpoint, my sense is that the responsibilities and quite frankly the external focus changed.” As a result, University Hospitals re-targeted procurement locally—according to Standley, between 2008 and 2011, the hospital “essentially doubled its spending” both within Cleveland and the northeast Ohio region.16

Andrew Frank, Special Advisor to the President on Economic Development at Johns Hopkins University in Baltimore, noted that Hopkins’ adoption of an anchor institution strategy is recent, but is now central to how senior leadership views the mission of the university. “Before the current president [Ron Daniels] came in, community engagement was less strategic,” Frank said. Now, Johns Hopkins is creating a more intentional anchor strategy, which Frank defines as working to “identify how the university’s interest overlaps with the community’s.” Hopkins is seeking to put these principles to work in what is known as the Homewood Community Partners Initiative, focused on six low-income and four middle-income neighborhoods that surround the Hopkins campus.17

Frank explained that, “We know that the perception of the surrounding neighborhood is a factor in attracting (or not) the best students, faculty and staff—impaired by surrounding neighborhood both in reality and perception. . . . We identified 10 neighborhoods and hired a consultant to work with those neighborhoods to see where interests overlap and develop a set of recommendations.” Recommendations were organized in five issue areas: public safety, quality of life, retail and commercial development, housing/blight elimination and economic inclusion (including a commitment to increased local hiring). The price tag of implementing the recommendations is estimated to be $60 million. Funding is expected to come from a range of sources, including Hopkins as well as government partners.18

Frank also emphasized the importance of gaining trustee support, so that efforts continue beyond the term of a single administration. Frank emphasized that, “We made the case internally—the Board of Trustees created a new community engagement committee to oversee engagement activities.”19

**Internal and External Factors Leading to Community Engagement**

The role of senior leadership is certainly a critical factor in any anchor institution strategy, but other influences, both internal and external, also play a role. At the University of Maryland, Baltimore, Richard Cook, Director of the School of Social Work’s Community Outreach Service, credits the desire for students to have exposure to real situations, coupled with a small U.S. Department of Housing and Urban Development (HUD) grant, for increasing his school’s community work.20 Patricia Sobrero, Associate Chancellor in the Office of Extension, Engagement and Economic Development at North Carolina State credits faculty for wanting “to successfully integrate learning, discovery and engagement through community engagement scholarship.”21 Similarly Robin Bachin, Assistant Provost for Civic and Community Engagement at the University of Miami, credits the very creation of the Office of Civic and Community Engagement that she heads to “a ground-up initiative from faculty who had already been engaged in community projects from community-based research to service-learning courses.”22 Particularly for state universities, the need to meet state priorities is also a motivating factor. In New York, as Chancellor Zimpher notes, “There is a SUNY campus within 30 miles from every New Yorker. They are the state’s university. Shouldn’t their goal be in service to the State?”23

**Figure 1: Factors Leading to Community Engagement**

- Leadership and board support
- Faculty/staff/student interest in community engagement
- Institutional mission
- Government funding
- Religious/spiritual motivation
Government also plays a role in encouraging anchor institution engagement among hospitals. Dr. Kimberlydawn Wisdom, Vice President of Community Health Education and Wellness at the Henry Ford Health System in Detroit, Michigan, noted that her position would not even exist were it not for the federal government. “I remember very clearly. Before, we waited on people to come to the health system. Then this whole transformation process came along. In part, I would say the federal government—it was called the agency for healthcare policy and research at the time—was asking healthcare to step outside of their four walls and move into their communities in a much more significant way. I remember very clearly that there was a discussion. Who would want to do community health? Who cares about community health? . . . Of course once the funding came through, it began to legitimize some of the work around community health. Because when the federal government gives you a $5 million grant to focus on the community that began to legitimize the work.”

For religiously affiliated institutions, religious and spiritual values can also be a motivating factor. Lina Dostilio, Director of Academic Community Engagement at Duquesne University, a Catholic institution with a strong social mission based in Pittsburgh, Pennsylvania, noted: “Our engagement with the community is influenced by a particular framework, Catholic Social Thought. It lends a specific way of being in the world . . . we are very concerned with taking responsible social action to address the injustices that affect those on the margins of society. A key purpose of higher education is to serve the dignity of all people. We were founded to educate the children of immigrant steelworkers. Our goal is to help them realize the dignity that they have.”

**Institutionalizing Engagement**

Declaring a goal of having an anchor institution mission, of course, is only the first step of the process. Key elements to successful engagement include: an explicit engagement mission at an administrative level that embeds engagement principles across the institution, a clear strategic plan for institutionalizing and implementing engagement work, a restructuring of incentives to reward effective engagement activities, a designated office to manage engagement activities, a defined advisory body involving all partners and a clear understanding that the engagement work must be in the mutual interest of both the institution and the community. As David Perry, Director of the Great Cities Institute at the University of Illinois at Chicago, pointed out, true anchors are “foundational to the community, not foundations of it.” Perry noted that [Harvard Business Professor Michael] Porter has shown that anchor institutions have grown in their share of the city economy. “My argument is did those institutions do anything to make them more important?” To be foundational to the community economy, Perry says, requires anchor institutions to think long-term and strategically about their place in community and act upon those insights.

**Restructuring of incentives at the institutional level for universities is often tied to changing the tenure and promotion guidelines. A number of universities have done this, including the University of Memphis and the University of Minnesota, both of which restructured tenure guidelines to include engaged scholarship as a requirement for tenure and promotion.** But incentives can also be important in administrative roles, such as purchasing. For example, the University of Pennsylvania sets institutional purchasing goals; sourcing managers are compensated, in part, by how well they do in meeting the university’s local purchasing goals.

Hospitals face similar challenges. Margaret Hewitt, formerly Vice President for Construction

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**Figure 2: Ways to Institutionalize Engagement**

- Explicit engagement language in mission
- Strategic implementation plan
- Incentives to reward engagement
- Dedicated coordinating office
- Commitment to partnership with community groups
at University Hospitals in Cleveland, emphasized that UH hired a third-party firm, Minority Business Solutions, to maximize the ability of the hospital system to meet its ambitious women, minority and local business contracting targets. It was not enough, Hewitt said, for economic inclusion to be on a manager’s checklist, because “there are many things that would cause it [economic inclusion] to fall to the bottom of the list.” Hewitt added, “We’ve decided we’re going to give it everything we’ve got, and if we don’t make it, it’s only because it can’t be done, because we’re figuring out all day everyday how to get it done, while we build the buildings. Minority Business Solutions was a big part of that, because they really kept everybody on task.”

George Kleb of Bon Secours emphasized the cultural challenges of working with communities: “The anchor institution needs to identify what’s its contribution and how it’s going to make its contribution,” Kleb said. “You need to engage the community meaningfully in planning and implementation and planning of a vision and desired outcomes. Long-standing and sustainable change is best achieved when the owners of it are the ones who most care about it . . . easy to say, hard to do.” Kleb added that this work also required a change in the hospital system’s normal way of doing things. “It was more about identifying what the core issues are and how to address them,” Kleb observed. “We took an asset-based community development approach. From a healthcare standpoint (especially acute health care), it’s usually about assessing and diagnosing problems, but building on assets is much more about looking beyond the obvious and looking for potential—looking for the synergies.”

Defining the Relevant Community
Another challenge in developing an anchor institution strategy is defining the relevant “community” on which to focus efforts. Many of the examples cited above—such as University Hospitals and Johns Hopkins—clearly have chosen to focus on adjacent low-income neighborhoods, but this is not always the case. Even within an institution, confusion on this point can exist. David Perry, who led a study for the 40-plus members of the Coalition of Urban Serving Universities, remarked that, “Some [university presidents] see communities as the institutions next door (geographic); others see the city and the region. Some see defining the community as an interactive process between themselves and other institutions, such the K-12 school system, city government and religious institutions.” Even within the same institution, different notions of community can coexist. Perry said the University of Illinois at Chicago itself “uses all of those definitions. Some activities are regional, some are inter-institutional and some are geographic. I would daresay that most complex research institutions don’t have a unitary definition of community.”

A second common approach is to focus regionally. John Krauss, Director of Indiana University Public Policy Institute, noted that, “IUPUI [Indiana University-Purdue University Indianapolis] would define its community, primarily, as regional and it would be some version of the central Indiana region, probably larger than Indianapolis.” James Votruba, President of Northern Kentucky University and Wim Wiewel, President of Portland State University, both indicated that their institutions also apply a largely “regional” definition of community.

Emory University illustrates a third approach—focusing on specific metropolitan neighborhoods that are not geographically proximate. “Our work is very place-based in its focus,” noted Michael Rich, Director of Emory University’s Center for Community Partnerships. Emory emphasizes “six clusters of neighborhoods, where we are working intensely with non-profits and government organizations to help them do capacity building.” This place-based approach represents a shift for Emory. “We looked at where Emory was based and the larger programs to see where we had partnerships,” said Rich. “The good news was we were doing a lot. The bad news...
was that so much of that work was disconnected and shallow. We were in over 300 schools, and that didn’t seem sustainable when the effort was so diluted. So we focused on school clusters and tied those within our key neighborhoods. Then we looked at demographics to develop what we called ‘partnership with a purpose’—let’s focus on Title I schools (schools with high numbers of low-income students) that could really use our help. A third factor was looking at places where Atlanta had initiatives that were under way that were based on a place-based model.”

Additional Challenges
Of course, institutions face additional challenges in conducting anchor institution work beyond getting incentives right and choosing an appropriate geography. Among these are cultural differences between anchor institutions and communities, the need to develop governance structures that allow work across department lines and the difficulty of developing institutional-wide frameworks to guide and measure community impact.

Penn’s Ira Harkavy underscored a number of these challenges. “The first is community distrust and history. A second is institutional—making the case internally. Third are governmental structures. Trying to bring it together in a place-based way and fighting against the highly fragmented technocratic approach that exists. A fourth challenge is that you have to show that the work is productive and intellectual. Fifth: over time, it requires working on a continuing basis on relationships and not getting stuck on one program. Sixth, things fail, so you can’t have all of your eggs in one basket.”

Marilyn Higgins, Vice President of Community Engagement and Economic Development at Syracuse University, noted two challenges: one is the monetary cost. Second, similar to Harkavy, Higgins highlighted institutional fragmentation. Higgins observed that in some respects, “Universities are not organizations: They are federations of colleges.”

Lina Dostilio at Duquesne University highlighted the challenge posed by racial divisions. “The racial diversity here [in Pittsburgh] is narrower. We have large African American and Caucasian populations and much smaller Latino and Asian populations. We tend to think about race in black and white. The surrounding population is largely African American while we tend to be a largely Caucasian institution. It’s not a barrier, but it is a challenge. The empathy that we have for our neighbors makes us attend to those challenges.”

Judith Ramaley, former President at Winona State University, raised the issue of cultural differences in a broader sense: “Partnerships move into political and cultural problems—there is potential for misunderstandings and confusion because of the real difference of experience and expectation from people who come together from different sectors of society.”

The multifaceted nature of anchor institution work poses an additional challenge. Most institutions do not have a systematic method of measuring or evaluating the impact of their work with communities. Rather, evaluation occurs on a project-by-project basis. Many institutions use some form of self-reporting or satisfaction survey. Often these instruments focus internally on students and faculty (i.e. the university community) rather than on the impact on the communities with whom they are partnering.

For example, at the University of Memphis, Cox explained, the university evaluates “on a project by project basis, but it’s not systematic. It’s so vast that it’s very difficult. We hired a graduate assistant for a year to document all partnerships in the metropolitan area. We identified over 1,200 different partnership initiatives, so it’s a huge scale/struggle/...
process to create a system to systematically capture on an ongoing basis all of the community connections.”

At Michigan State University, Rex LaMore, Director of the Center for Community and Economic Development, said their project assessment focuses on three levels: 1) impact on individuals, 2) organizational capacity and 3) overall community level.40

Gretchen Seuss, Director of Evaluation at Penn’s Netter Center for Community Partnerships, mentioned that the public schools with whom Penn partners, “want to know what Penn does. Grants come and go, people come and go, so there are many changes and shifts. Just keeping track of inputs is our greatest challenge. . . . We’re still chasing [this kind of data]. It comes from all over the place. Even at Penn, we hear about this routinely—people who come across one of our sites—nobody knows where to go to get access to centralized information.”41

Andrew Furco, Associate Vice President for Public Engagement at the University of Minnesota, pointed out that, “Across 200-plus centers, the impact measures vary widely. Some units do a very good job of measuring the outcomes of programs. The main challenge is aggregating the data and findings across units. We can see how a particular project has impacted a particular community. But it is hard to say: ‘Here’s the broad impact we’ve had on large societal issues, like poverty.’ Across the programs, the measurements are different, the evaluation questions are different and the outcomes are different,” Furco said. “The individual programs are often not focused on or aligned with what the university has established as its strategic priorities. The university usually reports only on its strategic priorities, so those measures that don’t align, don’t get reported.” Furco added that his office is working to create a university-wide framework—through a public engagement indicators committee—to align public engagement measures with the university’s overarching metric priorities.42

2. Anchor Institution Work: The Community View
As we have seen, anchor institutions choose to become engaged in community development for a number of reasons—including sense of mission, institutional self-interest, internal pressure and external pressure. We have also seen many of the challenges institutions face in conducting this work—including challenges of setting up administrative and governance structures, defining the relevant community to focus on, racial and cultural challenges and efforts to develop coherent institution-wide measures. But how do community groups view these issues?

To begin to address this question, we conducted fifteen interviews of leaders of local community organizations. While the groups focus on a variety of concerns, they were selected because they share in common a commitment to improve the lives of residents, including children, of low-income neighborhoods (see Figure 5).

One perhaps obvious, but important, point to make at the outset: community groups tend to focus heavily on their specific relationships with “the hospital” or “the university” rather than evaluating overall institutional performance. That said, to get a very rough idea of how the institutions were viewed by community groups, we asked respondents to indicate their opinion of overall anchor institution performance in 10 areas. Not all respondents chose to offer rankings and some only chose to rank certain categories. While hardly a scientific survey, the responses do provide an interesting window on how community leaders perceive anchor institution activity. On a five-point scale, anchor institutions scored high (average score of 4 or more) in two areas: community investment (including real estate development) and public health. Anchor institutions, taken as a whole, did moderately well (average score between 3 and 4) in five areas: service learning, community-based research, environmental health, nonprofit capacity building and public education (pre-K-12) partnerships. Anchor institutions rated moderately low (average score between 2 and 3) in three areas: business incubation, local hiring and local purchasing (all of which are on the business or administrative side of the institution).

The range of activities pursued by the organizations whose leaders we interviewed is broad. For the Partnership Community Development Corporation (Partnership CDC) in West Philadelphia, one program area was constructing green roofs. A number
of organizations—many of whom have the word “environment” in their name—also have “green jobs” and/or environmental health issues as a core focus area. These include the Deep South Center for Environmental Justice in New Orleans, Detroi ters Working for Environmental Justice in Detroit, People for Community Recovery in Chicago, UPROSE in Brooklyn, the West Oakland Environmental Indicators Project in Oakland, California and WeAct for Environmental Justice in Harlem. Of course, many embrace a broader agenda. Harlem’s WeAct, for instance, was part of a coalition that negotiated a multi-faceted, 20-year, $150 million community ben-efits agreement with Columbia University.

Other community groups interviewed focus directly on community economic development goals and place relatively less emphasis on environmental justice issues. For the Northside Resident Redevel opment Council in Minneapolis, broadening youth engagement is a high priority. For Urban Habitat in Oakland, California, developing jobs around transit hubs is a central focus. For Hawthorne Community Center in Indianapolis, education and economic development are two key goals. For the Steel Valley Enterprise Zone in western Pennsylvania, small business development is a central area of focus. For the Atlanta Neighborhood Development Partnership and the Durham Community Land Trust (North Carolina), affordable housing is the primary focus of concern. A couple of groups—notably, the Ivanhoe Neighborhood Council in Kansas City and Strategic Actions for a Just Economy in Los Angeles—engage in broad-based advocacy on community economic development issues ranging from preventing dis-placement and small business development to affordable housing and promoting public safety.

The community organization representatives we interviewed also present a wide variety of relationships with anchor institutions in their community. All of the community groups we interviewed interacted with universities in some fashion. Some had partnered with both universities and hospitals. Engagement with a university or hospital could mean different things in different circumstances. It could mean, for example, working together to obtain a grant, receiving assistance with GIS (geo-graphic information systems) mapping and other data analysis, conducting research, getting interns, the use of university facilities for workshops and meetings, or negotiating community benefit agreements. Many relationships began with faculty engagement or outreach. Others were the result of a grant requirement, while still others formed out

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**Figure 5: Community Group Interviews**

- Atlanta Neighborhood Development Partnership (Atlanta, GA)
- Deep South Center for Environmental Justice (New Orleans, LA)
- Detroiters Working for Environmental Justice (Detroit, MI)
- Durham Community Land Trust (Durham, NC)
- Hawthorne Community Center (Indianapolis, IN)
- Ivanhoe Neighborhood Council (Kansas City, MO)
- Northside Resident Redevelopment Council (Minneapolis, MN)
- People for Community Recovery (Chicago, IL)
- Steel Valley Enterprise Zone (Western PA)
- Strategic Action for a Just Economy (Los Angeles, CA)
- Partnership Community Development Corporation (Philadelphia, PA)
- UPROSE (United Puerto Rican Organization of Sunset Park) (Brooklyn, NY)
- Urban Habitat & Race, Poverty and the Environment (Oakland, CA)
- WeAct for Environmental Justice (New York, NY)
- West Oakland Environmental Indicators Project (Oakland, CA)
of institutional imperatives such as expansion or safety concerns.

At the outset of their partnerships, a number of the organizations interviewed had a negative perspective of local anchor institutions. Some still do, but others have quite a positive opinion now that a partnership has developed. In general, some of the challenges community organizations identified of working with anchor institutions were the fear of gentrification, fear of being treated as an object being studied and a fear of not being treated as an equal partner—for example, with decisions in the “partnership” falling by default to the anchor institution “partner.” Other challenges are a little subtler and include the challenges of negotiating fragmentation and competition within large institutions, inconsistent follow-through, anchor institution arrogance (i.e., communicating the impression, correctly or otherwise, that the anchor institution does not care about the real needs of the community) and a sense of inaccessibility both in terms of employment and, in the case of universities, enrollment.

Community Benefits from Anchor Institution Partnerships

Those challenges acknowledged, community groups nonetheless report that they have obtained many positive results from partnership relationships. Among these are access to expertise, helping bring other parties (e.g., city officials, businesses) to the table to resolve community issues, technical assistance, assistance in articulating needs to policymakers and helping to inform and educate community leaders regarding critical neighborhood concerns.

John O’Callaghan, President and CEO of the Atlanta Neighborhood Partnership, credits Emory for taking its role as an anchor institution seriously and being an effective partner. O’Callaghan cited, for example, Emory’s partnership with Atlanta developer Cousins Properties to include workforce (affordable) housing goals (as a voluntary zoning condition) in a new project designed to provide housing opportunities near campus for its faculty, employees and health care staff. O’Callaghan emphasized that, “Having a university with a large hospital complex agree to voluntary zoning to ensure housing for families at or below 80 percent of area median income is a big deal here.”

Duke has also been a very engaged partner in affordable housing. Selena Mack, Executive Director of the Durham Community Land Trust, explained that, “Duke partners with Self-Help. Self-Help is essentially a credit union or banking institution. But Duke has, within the last ten years, developed a community economic development initiative with Self-Help. And so Self-Help and Duke are very much involved in this community, in our target community, and we have partnered with them on a number of projects. One of the ways we’re partnering is that Duke has provided funding for us to land bank property in this community . . . hundreds of properties have been bought through this land bank.”

Hawthorne Community Center in Indianapolis seems to have one of the most positive relationships with an anchor institution (IUPUI) of the organizations interviewed. One key factor for success here was that the Office of Neighborhood Partnerships and its umbrella organizational home, the Center for Service and Learning, focused specifically on improving an identifiable geographic region, articulated working with the community as a university-wide goal and sought out community leaders to act in decision-making roles. Also important was the fact that the relationship grew beyond the initial survival instinct of the university or pursuit of a particular grant. To sustain the effort for the long haul, the university created a permanent office in the community.
with little turnover, resulting in sustaining personal relationships. Diane Arnold of Hawthorne Community Center in Indianapolis affirmed that one benefit her group has had is that “We haven’t had a lot of turnaround in [IUPUI’s] Office of Neighborhood Partnerships (ONP) . . . I know with some institutions, you get a lot of turnover and people leave, so you have to start again.”

Cheryl Johnson, Executive Director of People for Community Recovery, also highlighted the importance of consistency of effort for her organization. Johnson noted that her group has worked with Chicago State University’s Geography Department for two decades. “We had put together a plan that became the Southeast Chicago Urban Environment Initiative,” Johnson said. “We called it SCUEI—and in the SCUEI we listed 20 facilities that needed to be cleaned.” The plan, developed in 1992, is still operating today, guiding remediation efforts.

Margaret May, Executive Director of the Ivanhoe Neighborhood Council in Kansas City, Missouri, said she appreciates the technical assistance her group receives from the Center for Economic Information at the University of Missouri, Kansas City. “We are a relatively poor, nonprofit organization; we struggle to keep our lights on, our staff paid and our doors open, which I don’t think is unusual for non-profits these days. So, having the ability to contact them when we need data, when we need maps, when we need help in grant writing or in planning, has been a tremendous benefit.” May also emphasized the importance of consistency of effort, stating that her work since 2002 with the Center “has truly been a tremendous value to us over time with a lot of different initiatives.”

Challenges Community Groups Face in Anchor Institution Partnerships
In other cases, organizational focus on the anchor institution and their community partners is less consistent. For example, Chuck Starrett of the Steel Valley Enterprise Zone was involved in a “Carnegie Mellon community assessment initiative” in western Pennsylvania in May 2008. Four years later, the focus had shifted. Now, said Starrett, “what’s happening is that there are other groups that are talking about doing new things.” Consistency of effort is a challenge elsewhere too. For example, while the Ivanhoe Neighborhood Council has maintained a decade-long partnership with the Center for Economic Information at the University of Missouri, Kansas City, May pointed out that her partnership today would not exist were it not for her earlier participation on the now-defunct community advisory board, Center for the City. “By having the Center for the City advisory board, we had regular meetings, I was aware and knew what was going on at the university,” May said. “I knew that there was a person, the director they had, that I could call her and she could connect me with whomever I needed. Now the Center for the City no longer exists. Because I have relationships with several professors, I can call and ask them . . . But occasionally, that becomes a research effort for them even—because with the size of the university, even though it’s not huge, they don’t exactly know who is doing what.”

Connie Galambos-Malloy, Senior Director of Programs at Urban Habitat, worked with urban planning professors on the University of California and Cal State campuses. She indicated that a challenge she has faced is institutional fragmentation. “Quite frankly, there is a bit of competition within the university. Within the same college, or the same department, there are often multiple professors working on issues that Urban Habitat wants to work on, and sometimes it’s difficult to engage with more than one on a team project because that’s rarely how they’re funded or encouraged to work.”

Steven Williams, Executive Director of Partnership CDC, a community development corporation in West Philadelphia, readily acknowledged the

Figure 7: Anchor Shortfalls from a Community Perspective
- Inconsistency of effort
- Institutional fragmentation
- Failure to foster community ownership of projects or data
- Lack of strategic focus
benefits his organization receives from partnerships with area anchor institutions, but said that efforts to date have not been adequate to meet community needs. Williams mentioned that his CDC has received technical assistance for green roof installation from Drexel University’s engineering department. Williams also pointed out that, “We’ve done work with the University of Pennsylvania (Penn). We have a board member who’s associated with Penn. Penn has an organization that does a lot of their outreach called UCD, University City District, funded heavily by Penn and Drexel University. We’re one of four partners with UCD in a program called Sustainable Communities, where we’re focusing on a geographic area where all four organizations have some involvement and we’ve done some collaboration in thinking of programming and outreach. Now this one program that UCD has started is a step in the right direction, but it’s a drop in the bucket at the same time.” Williams, like Galambos-Malloy, also emphasized the challenge of institutional fragmentation: “Each department, because the university is so large, they operate so widely that it’s hard to get a grasp of everything they’re doing.”

In Minneapolis, Ishmael Israel, Interim Director of the Northside Residents Redevelopment Council hailed the University of Minnesota’s building of “a multi-million dollar center that’s in the heart of our community. I think the success of it is it has given broadband access to residents, it has given meeting spaces to residents, and it has given our council, our organization a meeting space. It’s given us a center because it’s literally in the district that we represent.” Still, Israel noted that one frustration for him is a lack of a sense of community ownership in the final project. “We lease space from across the street, and I don’t know whether you’d say that was just bad negotiation on behalf of the administration on our side, or what, but we lease meeting space now . . . we used to own the space.”

Margaret Gordon, Co-Director of the West Oakland Environment Indicators Project, raised a similar theme about ownership of data. “[Community] ownership of documents and materials is important,” Gordon said. “Those are part of our values that West Oakland Environmental Indicators Project has developed over the years.”

What Community Groups Want from Anchor Institution Partnerships
Guy Williams, Executive Director of Detroiters Working for Environmental Justice, has worked with both the University of Michigan (Ann Arbor) and Henry Ford Health System on community health and green job training. Those efforts have led to modest successes. But he expressed a larger vision of what anchor institutions could accomplish. Williams said he would love to have a larger conversation with hospital, university and foundation leaders regarding the question “How can we have people work, have equity in their place of employment and have it really be successful as a growing business concern? Achieving that in a meaningful way in the city of Detroit would be fantastic, and it would help us meet, at least here, one of our primary goals.”

Paulina Gonzalez, Executive Director of SAJE (Strategic Actions for a Just Economy) in Los Angeles, also has large ambitions. “We’re working with the University of Southern California’s Institute for Mul-

Figure 8: What Community Groups Seek from Anchor Partners

- Leveraging of resources
- Transparency/communication
- Community presence in decision-making
- Centralized community partnership office
- Job training and job creation

Agricultural Literacy on a digital media project, but we are especially engaged in the expansion of the university into the community and the $1 billion development that they are undertaking. What we’ve asked is that the university enter into a partnership with the local community and really think about this as a project and a national model on how to do development in a way that lifts up the community around it rather than displacing it. One way to do that is by providing good jobs for local residents. SAJE focuses on ensuring local and targeted hiring provisions and a living wage component, so that targeted communities suffering from high rates of
poverty that surround the university have access to job training and job placement, and even career path training associated with the jobs."55

Peggy Shepard, Executive Director of WeAct for Environmental Justice, recently completed an advocacy campaign similar to the one that SAJE is engaged with USC now. The Harlem effort sought to get Columbia to commit as part of their expansion in West Harlem to “plan their campus with the community. The result has been a community benefits agreement, Shepard indicated. “We have been part of setting up a local development corporation, which is administrating the $150 million that Columbia has put into a fund for projects in West Harlem. And so we are on the steering committee that is setting that up and just now hiring its first Executive Director and about to staff up. This will be a local development corporation that administers projects utilizing the $150 million and interacts with Columbia over supposedly the next twenty or so years in its build-up.”56

As can be seen, the achievements of presently existing anchor institution-community partnerships that improve conditions for children, low-income families and communities extend across a broad range of areas, including affordable housing, public education, community health, community building, green jobs and community economic development. The potential for greater achievements going forward is also strong.

This is not to deny the substantial challenges. Above, we have identified some of them—lack of consistency in anchor institution effort, anchor institution fragmentation, failure to foster community ownership and lack of overall strategic focus, among them. An additional challenge raised by a number of the organization respondents we interviewed involved is communications and transparency. Diane Arnold of Hawthorne Community Center in Indianapolis put the challenge this way: “In any project or anything you work on, or any initiative, you have to decide who’s going to drive the bus and who’s going to ride on the bus . . . there are times in our partnership and relationship with the university that it is appropriate for the university to be driving the bus on this particular project or initiative. Sometimes, it’s important for a community organization to be the driver of the bus and have the other people on there. Sometimes, it’s important that it’s resident driven. So I think that appreciation and that trust—that you can ride on the bus and not be the entity that’s making the major decisions, but it’s OK to be there and be a part of that, but not be in charge—is important.”57

The majority of community respondents expressed, in some fashion a desire for more resources leveraged, more transparency and greater communication from the institutions and a generally greater community presence in decision-making. Many of the suggestions were process oriented. For example, Ishmael Israel of the Northside Residents Redevelopment Council in Minneapolis said, “I would think that if the endeavor is to partner with the community, there should be community members on the committee that decides what kind of grant opportunities they would make available.”58 Similarly, Paulina Gonzalez of Strategic Actions for a Just Economy in Los Angeles said the creation of a community advisory board would be highly beneficial.59

Connie Galambos-Malloy of Urban Habitat in Oakland, California, recommended the creation of some sort of centralized office both to connect community organization with the best fit within the institution and also to be able to share information.”60 Peggy Shepard of WeAct for Environmental Justice in Harlem also said an office of community-based research that knows “all of the research partnerships that are going on” would be highly valuable. Shepard added that investment in the improvement of nonprofit partner capacity could also help. “I think the concept of an on-loan executive or loan staff fellows is really important,” Shepard said.51

Some respondents also called for anchor institutions to expand their community presence. Cheryl Johnson of People for Community Recovery in Chicago called for universities to “Really [bring] the students into the community, having real internships in the community.”62 Margaret Gordon of the West Oakland Environmental Indicators suggested the location of an anchor institution community-based office could serve as a central intake point for community partners.63
Common indicators could be an important tool in achieving clearer transparency, of course. So we asked community organizations their thoughts on how anchor institutions might best measure the community impact of their activities, as well as their opinions on what topic areas they believe are most important. Diane Arnold of Hawthorne Community Center in Indianapolis, emphasized education. “I think because a lot of our emphasis has been on education, a key metric for us is looking at the educational attainment,” Arnold said. This could include “looking at graduation rates, as well as looking at how students have access to these wrap-around services that then help them really focus on their academic achievement.”

Not surprisingly, given the nation’s high unemployment rate—particularly among people of color and residents of low- and moderate-income communities—several respondents identified job creation and job training as priorities. Paulina Gonzalez of Strategic Action for a Just Economy in Los Angeles said, “There’s should be tracking of outcomes by implementing tracking mechanisms in terms of job placement and job retention.” Margaret Gordon of West Oakland Environmental Indicators Project emphasized “entry-level training of impacted residents” as an important priority. Selina Mack of Durham Community Land Trust stressed job creation, but added, “Not just job creation, but job training” linked to anchor institution career track jobs. Elizabeth Yeampierre of UPROSE in Brooklyn also called for a greater focus on job creation and job training, but stressed the importance of preparing residents not only for jobs, but high quality jobs in which employees have real responsibility: “We don’t want to have a sort of apartheid where our people just answer the phones and assemble the parts. We want to see them in decision-making positions.” Yeampierre also emphasized the importance of “building non-profit capacity so that we can be sustainable over time.”

Beverly Wright, Executive Director of the Deep South Center for Environmental Justice in New Orleans, said she would like to see more effort by anchor institutions “supporting entrepreneurship in minority communities.” Wright also emphasized the important of tracking of racial indicators. “When they say affordable housing here, it’s usually not affordable to anyone but white people,” Wright said.

3. Broadening the Conversation: Views from Nonprofit and Community Development Groups

As the interviews of community organization leaders document, despite obvious areas of tension and frustration, it is clear that many community organizations have benefitted from community partnerships. Yet what is equally clear is that many of the issues that children, families and communities face—such as lack of jobs, health disparities and educational shortfalls—persist.

To address these challenges from a broader range of perspectives, we interviewed a number of people who were neither from community organizations nor anchor institutions. Some represented associations linked to anchor institutions. Some represented associations linked to anchor institutions. While approaching the issues from an anchor institution perspective, these officials are not connected to any single institution. A number of respondents also hail from regional labor and national advocacy groups. We also spoke with two foundation leaders and officials from two federal government agencies.

Assessing Motivations for Anchor Institution Work

One topic concerned the reasons some universities and hospitals have embraced an anchor institution role. John Saltmarsh, Director of the New England Resource Center for Higher Education, highlighted changing national and international norms. “As colleges and universities, nationally and globally, are held to account to more effectively address social issues and improve the human condition, the issues of community engagement, politically engaged scholarship and university-community partnerships move to the forefront.”

Bill Dillon, Executive Vice President of the National Association of College and University Business Officers, said he saw two industry drivers in education. “The first,” Dillon said, “relates to how universities are funded. If they’re public, they’re
funded by public money. Private schools are funded by philanthropy and community support. In both of those instances, it is very important that those institutions are well regarded especially in the state or locality where they reside.” The second, Dillon added is that “More selective institutions woke up in the last decade or two and realized how important it was to their own welfare to have the interest of their immediate community in mind.”

David Maurrasse, Director of the Anchor Institution Task Force, identified three factors. “There are survival factors,” Maurrasse said, roughly corresponding to Dillon’s second reason. There is also “More pressure from local governments (e.g., payment in lieu of taxes).” Maurrasse also said that he has seen an increased “appetite for peer engagement and a greater knowledge about what other anchor institutions are doing.”

Kinnard Wright, Grant Specialist at the U.S. Department of Housing and Urban Development (HUD), observed that the “Concept of anchor institutions has evolved over time. Once it became university-wide, it was integrated into administration and changing rules about tenure, purchase requirements, procurement of land and finally hiring.” Margaret O’Bryon, outgoing President of the Consumer Health Foundation, which works more with hospitals, held a more cautious view. “A shift is needed . . . There are people who want to work in the community, but they just don’t know how. What is needed,” she said, “is a great intermediary to work together on all of the different pieces. People are busy. This isn’t their primary line of business.”

Necessary Elements for Successful Anchor Institution Engagement

Another area of focus in the interviews was on the necessary aspects of a successful anchor institution approach. Liz Hollander, formerly Executive Director of Campus Compact and now a Senior Fellow at Tufts, echoed the idea identified by many community group respondents that communications are critical and advocated that there be a central place that can coordinate effort. “Create a vehicle for the community to get to them,” Hollander said. “Create a front door that people can find. The influence of advisory boards that provide a real opportunity for residents to have a voice in the process,” Moody advised. “You need a process to engage residents in a way that community residents want to return: you don’t want them just to leave and be angry or bitter.”

George Mehaffy of the American Association of State Colleges and Universities emphasized the need for an overall strategic framework to guide anchor institution work. Mehaffy’s group has promoted the idea of “stewards of place,” by which the organization means promoting a “fundamental set of relationships that are local or regional.”

Martin Blank, Executive Director of the Institute on Educational Leadership, also mentioned the importance of having an overall strategic direction. Using the University of Pennsylvania as an example, Blank asked, “Does the University have a coherent strategy with how it aligns its assets to get the outcomes it wants? Wharton, Penn undergrads and graduate schools may each do things in a community. They show up at University City High School as discrete partners, as each is seeking its own visibility.”

The importance of coordination was highlighted by a couple of other respondents. Daniella Levine, President and CEO of Catalyst Miami, a community development intermediary that has worked with...
Amee Bearne, National Coordinator of the Democracy Commitment, a program that promotes civic engagement among community colleges, made a similar point. “Often, the left hand doesn’t know what the right hand is doing. There is so much happening in other departments and student life that faculty, staff and administrators don’t know to the fullest extent what programs or projects are taking place at their college. There is significant value in simply getting people to talk to one another about what’s going on and to collaborate. Having a designated office of civic engagement helps a lot.”

Omar Blaik, President of U3 Ventures, a group that has worked with the University of Pennsylvania and is now working with hospitals and universities in Detroit, argued that presidential leadership could help break through the fragmentation. “Leadership is number one and institutional capacity is number two. The latter concerns resources and to what extent is there an infrastructure that can support and encourage that work.” Blaik added, “If you have a strong leader that says this is something I want done, it cannot stop there. It needs to be reflected in the organizational structure, policy, decision-making process, the way the cabinet works and so on. If none of that gets changed to reflect the priority, the priority doesn’t happen.”

Howard Elliott of the Elliott Management Group, who works with hospitals, similarly observed, “It can only happen from the top. . .You need more senior level management and you must track and measure it.” Joe McNeely, Executive Director of the Central Baltimore Partnership, agreed with Blaik and Elliott on the centrality of anchor institution leadership but also emphasizes the equal importance of engaging with community residents through a participatory process. In the case of the Homewood Initiative with Johns Hopkins that McNeely coordinated, this included a seven-month process culminating in “circulating a draft [plan] to the community before publication.”
D. WHAT IS MEASURED NOW?

Thus far, we have examined how anchor institution leaders and partnership center directors and staff, community organizations and third party groups, such as consultants and association leaders, view the current state of anchor institution work in the arena of community economic development. Here we take a look at some of the ways that different groups in the fields of anchor institutions and community economic development have sought to develop indicators. The examples selected are varied and intended to demonstrate distinct efforts at different levels—whether intended as institutional assessments, project and program-specific evaluations, or broader data analysis tools—that attempt to quantify and analyze community change and impact. The overview below is not meant to be comprehensive, but does provide a sampling of the approaches of both university and hospital specific measures, as well as a few nonprofit, community development and foundation approaches.

1) Carnegie Community Engagement Elective Classification Criteria
The Carnegie Foundation for the Advancement of Teaching’s set of classifications is the leading framework for recognizing the achievement of institutions of higher education in the country. Their Community Engagement elective classification is, as its name implies, a voluntary classification first introduced in 2006 that recognizes institutions based on their commitment to community engagement. For the purposes of classification, community engagement is described as “the collaboration between institutions of higher education and their larger communities (local, regional/state, national, global) for the mutually beneficial exchange of knowledge and resources in a context of partnership and reciprocity.”81 Earning a community engagement classification is determined by self-reporting of the institution in response to an application produced and reviewed by a national advisory panel. Institutions are asked to report on: whether or not community engagement is part of their mission statement; whether their leaders promote engagement; whether there is infrastructure in place to support engagement; whether and how budgets and funding is directed toward engagement; whether incentives are provided to promote engagement; and how these activities are assessed or tracked. Institutions are also asked to describe if and how the community is included in departmental and institutional planning for community engagement.

Additionally, the framework requests that applicants report on curricular engagement, which covers learning outcomes and educational integration of community engagement principles. The final area of focus is on Outreach and Partnership, which categorizes the different approaches that institutions may take to engagement. The framework considers outreach activities to be those where institutional resources are made available to both campus and community, while partnerships are defined as collaborative relationships between institutions and community with the result being mutually beneficial outcomes for both. These efforts are tracked through descriptive examples of mutuality, kinds of resources made available, feedback mechanisms from communities and the existence of faculty scholarship documenting these activities.82

2) The Campus Civic Health Initiative
The Campus Civic Health Initiative is a new effort (begun in March 2012) of the American Democracy Project at the American Association of State Colleges and Universities to measure, and ultimately improve, campus and community civic health. The stated goals of the initiative are threefold: 1) to develop tools for assessing the civic health of college and university campuses and of communities; 2) to expand understanding of the state of civic health on campuses and in local communities; and 3) to identify and share ways that college or university partnerships with local communities can improve the civic health of the campus or community.83

The civic health indicators that have been identified are the following: political engagement, public
work, volunteering and giving, group participation, online engagement, social trust, civic knowledge and agency and social connectedness. For each of these focus areas, a number of possible key indicators are given. For example, to measure political engagement, you could use voter registration and turnout numbers or the number of calls made to elected officials, or for public work, you could measure how many people are attending meetings or working with their neighbors to solve community problems. These indicators are part of a matrix that is meant to assess campus and community—both local and state-level—as well as campus-community partnerships to capture any overlap between the two. The next step in the process will be to pilot the assessment tool at the 30 participating campuses.84

3) Coalition of Urban Serving Universities
The Coalition of Urban Serving Universities (USU) is a national network of 46 public urban research universities that has studied the effects of university partnerships programs on both institutions and communities. USU works to develop a body of knowledge and uphold best practices that help guide future efforts and does so using national statistics and survey data. Among its projects, USU has a Strengthening Communities Initiative, which supports university efforts to revitalize neighborhoods, build community capacity and strengthen regional economies. In 2009, the USU conducted an in-depth survey of university activities in the following areas: “1) overall engagement of leadership, faculty, students; 2) partnerships that improve urban communities; 3) economic development and technology transfer; and 4) physical and neighborhood development.”85

In the survey’s first field—engagement of leadership, faculty and students—data reported on the number of students participating in service-learning and other engagement efforts, the number of classes taught in those arenas and how many boards and committees university leaders participated on. The next field—partnerships that improve urban communities—documented different types of partnerships including those with nonprofits, local schools, public health initiatives, small business and sustainable development. The economic development and technology transfer field looked at activities related to workforce development and job creation as well as innovation and technology transfer. Physical and neighborhood development tracked real estate development, public safety, beautification and transportation. Indicators used to measure public safety initiatives included money spent on public-safety initiatives, providing safety infrastructure such as lighting and making campus police available to communities.86

For every field that the USU survey reported on, it highlighted best practices from within its membership. In a related report, the USU highlighted more detailed case studies of findings from its survey that showed how specific universities are 1) prioritizing and institutionalizing engagement; 2) developing human capital; 3) creating industry clusters and promoting innovation, creating quality places; and 4) building civic capacity and promoting equity.87

4) Community Benefits Agreements
Community Benefits Agreements (CBAs) are project-specific, negotiated legally binding agreements between a developer and a community—often represented by community-based organizations or labor unions—that ensure that community residents will share in the benefits of local development projects. Many anchor institutions—frequently hospitals, and occasionally universities—enter into CBAs with communities. Benefits provided for in CBAs are as varied as the communities they protect and depend on that community’s needs. Examples of provisions include: living wage minimums, “first source” (local) hiring, affordable housing funding commitments, development of neighborhood-serving child care facilities and construction of recreational facilities.88

CBAs create a benchmarking approach to development. They clearly express desired outcomes, determine a timeframe in which goals must be met, and set up a system to monitor and report on those outcomes. Often goals are expressed in percentages, such as “x percentage of workers hired must come from the community.” Increasingly common is the inclusion of “best effort” phrasing that allows the developer to show that it has made its best effort
to meet percentage goals. Both percentage goals and “best effort” wording allow for flexibility but also present certain challenges in actually delivering on the expressed desired outcomes. Nevertheless, the use of CBAs has demonstrated measureable successes in meeting goals determined by communities affected by development. One of the more celebrated CBAs was negotiated by the Los Angeles Alliance for a New Economy (LAANE) in 2001 for the development of the Staples Sports Arena and included provisions to improve parks and recreation, create living-wage jobs, target employment opportunities to local low-income residents, commit money to affordable housing development and partner with community-based organizations.

In addition to tracking progress in meeting stated community outcomes, many CBAs also require formal assessments of the long-term impacts of developments. While environmental impact studies are often already required for development contracts, CBAs often specify that developers provide social and economic impact reports that assess the impact of the development on the type and quality of neighborhood jobs, availability and costs of services, public finance and tax base, economic climate for small businesses, public safety and housing affordability.

5) Strive

The Strive framework is a “cradle to career” approach to educating and improving the lives of children in disinvested communities. The framework has four main tenets: 1) shared community vision; 2) evidence-based decision-making; 3) collaborative action; and 4) investment and sustainability. As part of evidence-based decision-making, the framework provides a comprehensive data management system that supports the measurement of community-level outcomes.

Strive releases an annual report card which lays out a set of benchmarks or goals for their target area and the corresponding indicators that support each. Strive’s five main goals are that 1) every child is prepared for school; 2) every child will be supported in and out of school; 3) every child will succeed academically; 4) every student will enroll in college; and finally 5) every child will graduate and enter a career. To measure support, for example, at the school, community and family level, the following indicators were among those used: school attendance; dropout rates; incidents of juvenile justice; percentages of children abused; civic engagement; parent/caregiver involvement; and access to mental healthcare. Indicators of academic success use reading and math proficiency and graduation rates. The other goals use test scores and other publicly available data. All indicators are determined through focus groups and collaborative meetings among partners.

6) Annie E. Casey Foundation: KIDS COUNT

The Annie E. Casey Foundation’s KIDS COUNT project is “a national and state-by-state effort to track the well-being of children in the United States” with the goal of raising awareness of children’s issues in local, state and national policy. As part of the KIDS COUNT project, the Foundation releases annual Data Book reports and maintains a Data Center, both of which use publicly available data to measure the well being of children and highlight key issues affecting them, considering educational, social, economic and physical impacts. Data are available at the national, congressional district, county, school district and city level across the country, and can be compared across states as well.

The KIDS COUNT Data Center allows for very specific data analysis. For example, if you were interested in knowing the poverty rates of children across states, you could drill down to specific indicator measures. Among these are: children in poverty; children in extreme poverty; children in poverty by age; children below different percentages (150-250 percent) poverty; persons 18-24 in poverty; single-parent families with related children below poverty; and children living below poverty threshold in immigrant families. Each data point has definitions and data sources, which rely on various publicly available sources, including the American Community Survey or, for example, the Adoption and Foster Care Analysis and Reporting System (AFCARS).
7) NeighborWorks Success Measures
Success Measures is an evaluation tool created by NeighborWorks America for nonprofits and funders that helps them to analyze and document the impact that they have in the communities where they work. Using a participatory approach, Success Measures incorporates consulting and technical assistance, a variety of measurement tools and a web-based data system to allow users to customize options. Success Measures tools are made up of 122 indicators that can be used off-the-shelf or customized to measure the impact of community development activities.

Indicators are available in the following impact areas: affordable housing; community building and organizing; community stabilization; economic development; financial capacity; green affordable housing and communities; race, class and community; and value of community development intermediary services. Each area is subdivided into topic “sets” and, from there, into specific outcome areas with corresponding indicators. For example, the affordable housing impact area breaks down into three sets—benefits to residents, benefits to community and benefits to locality and society. Set one—benefits to residents—includes indicators to determine housing cost and affordability; quality of housing; wealth creation through homeownership; environmentally sustainable design and construction; and personal effectiveness and stability.94

8) CFED’s Assets and Opportunities Scorecard
CFED’s (the Center for Enterprise Development) Assets and Opportunities Scorecard is a state-by-state look at America’s financial security and of policies to promote economic opportunity. The Scorecard assesses state performance across five issue areas: 1) financial assets and income; 2) business and jobs; 3) housing and homeownership; 4) health care; and 5) education. Within these five issue areas, there are 101 separate outcome and policy measures to determine both the financial health of state residents and their ability to build assets. Data is primarily collected from public sources such as the US Census and the Bureau of Labor Statistics.

Each issue area identified in the Scorecard asks a question and then aims to answer the question using outcome and policy data. For example, the “financial assets and income” issue area asks: “Are there widespread opportunities for wealth creation and protection, particularly for low-income residents?” Asset ownership and financial security are the main focus areas that underlie this question. Some indicators that get at these matters include: income poverty rate; asset poverty rate; liquid asset poverty rate; net worth; unbanked and under-banked households; credit card debt; and bankruptcy rates. These indicators can be and are broken down by race, gender, family structure and income, where possible. For each outcome metric, states are compared to each other and then given a national rank.95

The data presented in CFED’s Scorecard are meant to illustrate how state policies can help move individuals and families toward financial stability and greater economic opportunity. For each focus area, data gathered using policy indicators from the Scorecard demonstrate how states are performing and where they stand to improve.96

9) Initiative for a Competitive Inner City
In 2011, the Initiative for a Competitive Inner City (ICIC) produced a report on how anchor institutions can and do promote economic development of inner cities. The study focused on hospital systems, colleges and universities, and was based on a review of secondary literature, numerous interviews and a roundtable discussion of leaders from anchor institutions. The result of ICIC’s report was a strategic framework meant to act as a guide to anchor institutions engaged in community development work and, ultimately, to illuminate shared values between anchor institutions and communities. The framework identified seven ways (or “capacities”) that anchor institutions interact with their communities. Those seven capacities were: 1) as a provider of products or services; 2) real estate developer; 3) purchaser; 4) employer; 5) workforce developer; 6) cluster anchor; and 7) community infrastructure builder. In each area, ICIC recommended that anchor institutions set specific goals, devise unique strategies and monitor progress.97

For each of the seven areas, ICIC offered ways anchor institutions can apply the framework, as
well as a selection of best practices where such applications have been successful. Key indicators include the number of participants in community health programs and changes in targeted health outcomes to show results as a provider of products and services; local procurement as a portion of total spending; and number of local vendors as a percentage of total vendors.\textsuperscript{98}

10) Catholic Health Association and Community Benefits Reporting
In the 1980s, the Catholic Health Association of the United States (CHA) first established a framework for hospitals to plan and report their community benefit. In 2008, when the Internal Revenue Service created a “Schedule H” for nonprofit hospital reporting, it relied heavily on the CHA format in developing its requirements.\textsuperscript{99} The expressed goals of the CHA guidelines are to help health-care organizations “to identify community needs, make prudent choices for scarce resources, budget proactively, use standardized accounting and reporting approaches, build and strengthen relationships in the community, and demonstrate accountability and transparency to communities.”\textsuperscript{100}

CHA’s guide to accounting for community benefits includes details on what constitutes quantifiable community benefits—both specifically for people living in poverty and for the broader community. Examples of quantifiable community benefits for persons living in poverty include: charity care at cost, unreimbursed costs of public programs such as Medicaid, health professions education, subsidized health services, cash and in-kind contribution for community benefit and community building activities.\textsuperscript{101}

Within the community-building category, activities include: physical improvements and housing; economic development; community support; environmental improvement; leadership development and training for community members; coalition building; community health improvement advocacy; and workforce development. These activities are accounted for through self-reported number of programs offered related to each activity, number of persons served and funding expended on delivering those activities.\textsuperscript{102}

CHA’s model stresses the importance of collaboration with community leaders and building transparent relationships. Referencing a social work text, \textit{Bridges Out of Poverty: Strategies for Professionals and Communities}, CHA sets up an indicator framework that considers environmental (political/social climate, history of collaboration in the community), membership (mutual respect, understanding and trust, ability to compromise), procedural and structural (decision making procedures, stake in process and outcome), communication and resource (availability of funds and intermediary abilities) factors. This framework is intended less for accountability purposes and more to act as a guideline in navigating cultural differences.\textsuperscript{103}
E. MOVING TOWARD INDICATORS OF COMMUNITY IMPACT

Overview
To this point, we have examined the state of anchor institution work in community economic development and some ways that different groups, operating from a range of perspectives, have sought to measure their impact. Here we begin to identify key indicators that measure overall anchor effectiveness in the area of equitable development and community wealth building—specifically, as they relate to improving the lives of low-income families, children and communities.

In considering the development of indicators, two central questions arise: 1) what to measure and 2) how to measure. There are significant challenges in both of these areas.

Determining “what to measure” requires identifying the various ways that anchor institutions can, consistent with their missions, act to build community wealth and support equitable and inclusive local development that benefits low-income children, families and neighborhoods. At issue are the tools at an anchor institution’s disposal. Although not all anchor institutions are alike—indeed, there is a huge gap between Ivy League schools and community colleges or, for that matter, between large hospital systems like the Mayo Clinic and small community hospitals—there nonetheless is a considerable stock of knowledge regarding best practices of what anchor institutions can do.

A critical related question, however, is political: that is, what areas are anchor institutions willing to hold themselves accountable for? For example, some institutions formally adopt poverty reduction as a goal; others do not. Fortunately, a growing number of anchor institutions are making commitments, if not to poverty reduction per se, at least to improving the welfare of the surrounding community in a manner that reduces poverty. For example, James Votruba, outgoing president of Northern Kentucky University, pointed out that even though poverty reduction is not an explicit goal, “Our work is benefiting low-income families. Very little of our rhetoric involves equality and social justice, but those values are embedded in much of this work.”

It is also, of course, easier to develop indicators for some desired outcomes than it is for others. To get a better sense of what to measure, we asked anchor institution representatives, community group leaders and others for their thoughts on this topic.

About Community Wealth Building
Community wealth building is a form of community economic development that puts wealth in the hands of locally rooted forms of business enterprise, with ownership vested in community stakeholders. (For more information, see: www.Community-Wealth.org.) Such anchored businesses, by reinvesting profits in their localities, help build wealth in asset-poor communities. As such, they contribute to local economic stability and reduce the leakage of dollars from communities, thereby reinforcing environmental sustainability and equitable development.

Community wealth building strategies spread the benefits of business ownership widely, thus improving the ability of communities and their residents to own assets, anchor jobs, expand public services, and ensure local economic stability.

If informed by such a perspective, hospitals and educational institutions have the potential to be powerful agents to build both individual and commonly held assets.
With community group leaders, we posed an open-ended question to elicit their thoughts regarding priority outcome areas and indicators. We also, as discussed above, asked for their broad assessments of anchor institution practices in ten areas: local hiring, business incubation, local purchasing (support for local, minority and women-owned business), community investment, service learning partnerships, community-based research, public health, environmental quality, public education and capacity building of local nonprofits. All fifteen of the interviewed community group leaders indicated that they felt these items should be among the key outcome areas used to assess the community activity of anchor institutions. They also independently added affordable housing as an eleventh item.106

With leaders of anchor institutions, associations and community development groups, we elected to use a more structured approach, initiating discussion by posing an initial list of potential outcome areas. Our initial list was informed by our knowledge of best practices in the field, organizational priorities and by our focus on specific ways anchor institution activity can benefit low-income children, families and communities.

Broadly speaking, these outcome areas corresponded to one of four categories: economic development, education partnerships, health and safety and community building. These four categories, empirically, represent a large majority of anchor institution work in and with communities.

For economic development, we identified five areas of focus: 1) local hiring; 2) local purchasing; 3) business incubation; 4) housing; and 5) community investment (endowment and operating dollars).

With education partnerships, we identified two focus areas: 1) pre-K-12 public school partnerships (and related “cradle-to-career” efforts like Strive); and 2) community education (broadly defined as two-generational learning that focuses on parents, as well as children).

Regarding health and safety, we identified three focus areas: 1) public health; 2) public safety; and 3) environmental health.

In the area of community building, we identified five focus areas: 1) nonprofit capacity building; 2) fostering community ownership; 3) community-based research; 4) assisting community groups to raise funds (by, for example, sharing grant funding on projects); and 5) participation in public planning.

In addition to building on best practices, these criteria, of course, build on other efforts to determine indicators. For example, ICIC, as noted above, includes local purchasing, local hiring, local vendors and local employment among its key indicators.107 The Catholic Health Association includes housing, economic development, environmental improvements and public health (community health improvements) among its community benefits measures. Matthew Meekins and Kerry Ann O’Meara, who sought to provide a ranking of “contributions to place” for the American Association of State Colleges and Universities in a 2011 journal article, include capital investments, sustainability initiatives and economic development among their categories.108

Feedback Regarding Proposed Outcome Areas and Indicators

In our interviews, we found considerable support for the categories we listed. As anticipated, we were also provided with many suggestions of additional categories, as well as ideas regarding the kind of indicators that would best measure progress in those areas. Harry Boyte of Augsburg College encouraged the addition of an indicator for leadership development or, as he put it, “developing civic agency and empowerment.”109

In the same vein, Amee Bearne of The Democracy Commitment recommended including indicators that track civic health and participation such as voting numbers and frequency of contacts with elected officials.110 Similarly, Richard Cook of the University of Maryland at Baltimore suggested an indicator that looks at the “sense of belonging or collective efficacy.”111 Kent Koth, Director of the Center for Service and Community Engagement and of the Seattle Youth Initiative at Seattle University echoed this notion, suggesting that both leadership development and coalition building be included as core to achieving an anchor institution mission.112

James Votruba of Northern Kentucky University suggested adding an indicator that looks at the “alignment of civic and nonprofit leadership.”113
Votruba added that, “One way to judge the extent of civic engagement is institutionalized is to assess the extent to which institutional dimensions such as faculty incentives and rewards, budget, leadership selection and evaluation, and strategic planning are aligned to support civic/public engagement outcomes.” James Harris of Widener University suggested building community voice and bringing in resources from partners outside the community as two key goals that should be incorporated into the dashboard of desired outcomes. Harris also mentioned that Widener developed a survey to track the impact of civic engagement activities at both the university and partner organization level. Michael Rich of Emory suggested adding an outcome measure that looked at arts and cultural development, as did Nancy Zimpher of SUNY and David Maurrasse of the Anchor Institutions Task Force.

Other respondents focused more on refining criteria on the initial list. For example, Drew Klacik, a Policy Analyst at the Center for Urban Policy and the Environment at Indiana University’s Public Policy Institute, cautioned that to evaluate the university’s role in public planning, it is important to look “five years from now or ten years from now and examine what impact that has had on the community.” Desiree Westlund of the Front Range Economic Strategy Center in Denver emphasized tracking race and class within the category of “local” benefit. “Our metropolitan planning organization is all white and when we call this out, people freak out and want to run to the hills, so we talk about who benefits. That’s why the agreements we negotiate are called community benefits agreements,” said Westlund.

Robert Franco, Director of the Office of Institutional Effectiveness at Kapiolani Community College, also recommended developing indicators that explicitly tracked benefits for underserved groups. Madeline Janis of the Los Angeles Alliance for a New Economy emphasized that a lot goes into achieving meaningful local hiring. “It’s not just local hiring targets — it’s community outreach, it’s job readiness, it’s training, it is about wages and benefits and it’s career path advancement.” Janis also suggested a number of environmental measures, including “sustainable building practices, dealing with waste and recycling in a job creating manner, and energy use on an ongoing basis.” Kim Burnett, a consultant to foundations and community development organizations, advocated outcome measures that incorporated asset building and quality jobs. Victor Rubin, Vice President of Research at PolicyLink, noted “who gets hired and if they stay in the community” would be an important indicator of the impact of anchor institution local hiring.

James Harvie, Executive Director of the Institute of Sustainable Communities in Duluth, Minnesota, noted that there are two different models of public health indicators. As Harvie put it: “The United States gets very granular very quickly (reduce asthma, diabetes, obesity). In Sweden, the goal is to create the conditions out of which improved health emerges, a much more fundamental set of indicators and goal setting related to social and economic conditions.”

Most comments involved additions or refinements like the above. Yet some also encouraged limiting the number of indicators. Wim Wiewel of Portland State, for example, suggested that to be effective, a national system should focus on a few key indicators that are common to a great many anchor institutions. “Stick to the big ones.” Wiewel advised. “Otherwise, people will feel it is more work. Individual institutions will be excited, but that’s not a national focus.” Kent Koth of Seattle University encouraged us to identify broad outcome areas but leave room for context-specific indicators.

Challenges of Implementing Key Indicator Systems

Wiewel’s and Koth’s comments take us beyond the question of what to measure to a second key issue: how to measure. In addition to the important pragmatic issues they raise, one challenge is the need to identify a plausible link between institutional action and community impact. Additional challenges include making sure that the indicators are designed to help anchor institutions improve community impact over time, as well as surmounting operational issues, such as data collection and a commitment to track data over time.
A leading community development financial institution (CDFI), Coastal Enterprise, Inc. (CEI) of Maine, put the challenge of measuring institutional effectiveness this way: “The most promising and possibly the most difficult area to assess or even describe impact is the long-term role of the CDFI institution in the financial industry and in the community. Impact must be looked at over time in the whole portfolio rather than in a specific deal.”126 Change a few words in the above—such as replacing “CDFI” with “anchor” and “deal” with “program”—and the same difficulty arises regarding the institutional impact of anchor institutions.

Not surprisingly, this matter has not gone unnoticed. Shari Garmise of the Association of Public and Land-Grant Universities pointed out, “We are talking about complexity here—university actions exist in a wider web. Nobody goes it alone: whose outcome is it?”127 Wim Wiewel, President of Portland State echoed Garmise’s comment. “We are simply one player among many,” Wiewel said.128 Rex LaMore, Director of the Center for Community and Economic Development at Michigan State University observed that, “Interventions are often focused and modest. When there is improvement, it is difficult to determine if it is what you did or other factors.”129

A second challenge is to make sure that indicators actually measure what is important. As former Winona State President Judith Ramaley pointed out, “We tend to focus on what we can measure rather than on the equally important outcomes that have to do with attitudes, propensities and ways to work together.”130 Andrew Frank at Johns Hopkins similarly observed the difficulty of accounting for the “qualitative things that are more difficult to measure.”131 This problem is very familiar in the field of educational testing, for example. In particular, No Child Left Behind critics argue that test-linked measures have led to a “teach to the test” mentality that has arguably resulted in diminished outcomes in non-measured areas.132 John Burkhardt, Executive Director of the National Forum on Higher Education for the Public Good, noted that there is “a lot of pressure right now to engage metrics, many related to education issues. The field of education is in danger of being overrun by that kind of thinking.”133

Harry Boyte, Co-Director of the Center for Democracy and Citizenship at Augsburg College cautioned: “You can talk about outcomes, but you miss the real impact if you don’t look at knowledge production and culture.”134

A third set of challenges is operational. Cory Bowman, Associate Director of Penn’s Netter Center for Community Partnerships, pointed out that collecting the data presents its own set of challenges. “Logistical and partnership issues need to be addressed to effectively collect and analyze what’s there,” said Bowman.135 Madeline Janis of the Los Angeles Alliance for a New Economy (LAANE) emphasized the need for a long-term view. “The time lapse in order to measure,” Janis said, “is at least 10 years.”136 The need for long-term tracking may seem obvious, but is often easier said than done. For instance, US Department of Agriculture program leaders in the National Institute for Food and Agriculture, which works with land-grant colleges, noted that their funding authorization did not permit tracking of outcomes beyond five years.137

Despite, or maybe because of, the difficulties with measurement, the desire for better indicators is both widespread and strong. Manuel Pastor, Director of the University of Southern California’s Program for Environmental and Regional Equity, argued that, “We should do a better job in terms of metrics, be more specific and conscious of them over time.”138 Leif Elsmo, Executive Director of Community and External Affairs at the University of Chicago Medical Center, said, “We are pretty weak on the metrics front and that’s a problem because how do you know if you’re achieving exceptional urban health in 2025 without metrics. We are working
on a pilot population base study, so we can get a baseline.”

Ways to Overcome Measurement Challenges
Fortunately, there are ways to mitigate the obvious measurement challenges. One option is to use a menu approach. Maggie Grieve, Director of Success Measures at NeighborWorks America, explained how their program developed. “Executive directors of community development corporations in the mid-1990s were pretty good at counting housing units and bad at measuring outcomes. Foundations were beginning to talk about outcomes. The CDC leaders decided it was better for them to get control of what to measure and came up with an original set of 44 things that could be measured.” There are now over 120 measures, but an individual community group might focus on as few as three-to-five key indicators.

Chris Walker, Director of Research at Local Initiatives Support Corporation (LISC), made a number of observations regarding how to set up indicators. First, Walker said, while anchor institutions need to look at outcome measures, “They’re a long way from that—it’s easiest for them to measure their own activities and to focus on things like purchasing and hiring” that are under direct institutional control. Second, Walker suggested that, “The idea should be to set benchmark percentages, so that, once you’ve done that, you can say you’re an engaged institution.” Third, Walker suggested that you “can measure success by the existence of policy—is there a policy to develop green space for example? Procurement practices are a matter of policies. Are those policies in place? What does that tell you about the institution?” Not all indicators, Walker stressed, need be quantitative, “some are ordinal: yes/no, good/bad, lots/little.” More broadly, Walker stated, since measuring “true community impact” is next-to-impossible, a more reasonable standard to use is “level of effort.” “For example,” Walker said, “four percent of endowment invested in social impact programs is very useful as a benchmark.” Walker added that, “Setting standards is a way to be more impactful than anything that resembles an impact statement. It creates an expectation that this is what should be done.”

Henry Taylor, Director at the Center for Urban Studies at SUNY Buffalo, said that he has “never been turned on by metrics,” but, similar to Walker, advocated setting clear benchmarks, standards and targets. “Without a target you can’t hit anything,” Taylor emphasized. Increasingly, anchor institutions are using performance measures and targets on the ground, with positive effect. Jeff Rich, Executive Director of GL Envision, a subsidiary of Gundersen Lutheran Health System—based in La Crosse, Wisconsin—noted that Gundersen aims to meet 100 percent of its energy needs through renewable sources by 2014. Having a target is important, Rich said. “We set a goal and thought ‘what is a reasonable timeline to do all of this?’ Because if you make it too long, there’s no urgency or management changes. . .but you can’t make it so short that you burn yourself out in a year or two and can’t sustain anything else you’re doing. David McCombs, Vice President of Enterprise Resource Planning and Supply Chain Operations for Bon Secours, affirmed the importance of goal-setting to increase procurement from local, minority-owned and women-owned businesses. “We have a target, we have a focus, we have some priorities, and obviously when you have that in place you can coordinate your resources toward a priority and you can create some momentum,” said McCombs.
Omar Blaik of U3 Ventures emphasized that his group has successfully employed indicators in their work. The indicators, Blaik said, are “driven by the strategies that we bring—hire local, buy local, live local.” Blaik identified some of the factors they measure: “How much annual procurement is done, locally—locally defined geographically? How many faculty and staff live around the campus? How many students live on campus or at the edge of campus?” Other indicators include retail (square feet) per student available and percentage of hires from the neighborhood. Blaik added that, “All of that in our mind is very much indicative of the outcomes of engagement that spill over to the City and neighborhood . . . All of our metrics are driven from that. Those are extremely powerful tools to tell people who walks the walk and who doesn’t. Many institutions say they are engaged, but when you dig deeper, all of those institutions fail in those tests. Those that husband resources and stop the leakage are the ones that create a tremendous impact around them.”

Many other anchor institutions are also developing indicators. Michael Rich at Emory noted that the university is beginning to work out key indicators for education. “We have been tracking a number of indicators on student outcomes, disciplinary issues, and comparing those outcomes to other middle schools,” Rich said. “The first year of data has strong indications that our work is making a difference and the topics of interventions match up with deep declines versus other schools in absenteeism and content areas with improvement also match up with what we’ve done.” At Penn, Gretchen Seuss mentioned that the Netter Center for Community Partnership has chosen, based on a community planning process, to focus its indicators in five areas: civic engagement, environmental health, human health, economic health and education.

In Cleveland, Ohio, University Hospitals (UH) in 2005 made a decision to intentionally target $750 million in construction expenditures (and an additional $450 million in related expenditures) over five years to directly benefit the residents of Cleveland and the overall economy of Northeast Ohio. At the end of the Vision 2010 project, Steve Standley, the hospital system’s Chief Administrative Officer noted, “The real transition for UH is what we have learned during this last five years, which is how to reach out, how to do business-to-business [outreach], what we really can do with our spend.” Key indicators included diversity goals (minority and female business targets were set and monitored), procurement of products and services offered by local companies, hiring of local residents and other targeted initiatives. UH is also a partner with other Cleveland area anchors—including the Cleveland Clinic and Case Western Reserve University—in the Greater University Circle Initiative, a place-based community development strategy intended to expand access to transportation, improve housing, revitalize the public schools in the area, and create jobs and wealth for residents of low-income neighborhoods through the nationally recognized Evergreen Cooperatives and other business development and attraction strategies.
F. DEVELOPING AN EQUITY INDICATORS AND COMMUNITY BENEFITS DASHBOARD

The point is not to measure everything — [identify] one or two key data points on a dozen indicators . . . While in each area, there are hundreds of things, let’s agree on a few key indicators . . . Perfect data can be the enemy of the good.

Wim Wiewel, President, Portland State University

In the course of our research, two things became nearly immediately evident. One was the quick realization that while one might demonstrate the community impact of a program, isolating community impact is not possible if the “unit of analysis” is the anchor institution itself. A second observation, however, was much more encouraging—and that is the existence of considerable, albeit not total, consensus regarding the different things that an anchor institution can do as a partner to improve the welfare of children, families and communities.

To move the discussion forward and build on the consensus we did find, we felt it was important to put together a “dashboard” that might provide a simple picture of key activities that an anchor institution — be it a hospital, university, or some other place-based employer — can do to help ensure that their work in community is truly benefitting the community and its residents. We began, as we indicated above, with an initial list of 15 categories, in order to provide a target list that might generate discussion and feedback. In developing a chart for this paper, we carefully considered the suggestions and feedback we received from interview subjects. That input led us to make changes to our original design: one was to add the category of “arts and cultural” development, as this was identified as a high priority by a number of respondents.

We also tweaked three categories based on respondents’ comments — making sure to signal the importance of pre-K-12 partnerships and adding “asset building” and “democratic leadership development.” Community education was, by contrast, dropped from the list — not because we think it is at all unimportant, but we felt it was not as easily measured: the asset building component, at least to the extent it incorporates financial education, creates a partial measure in this area. We also consolidated the community categories into the two broader categories of “community building and democratic leadership development” and “asset building and ownership.” Ultimately, we ended up with 12 broad categories.

In putting together a dashboard, a primary goal was to focus specifically on anchor institution activities that directly benefit children, families and communities in low-income communities. This does not make anchor institution activity that benefits wealthier members of society unimportant; it is simply not the focus of our proposed outcome areas and indicators. Second, we also attempted, to the extent possible, to identify key indicators where data collection challenges are (we hope) manageable. A third goal was to provide flexibility and develop categories that are purposefully broad. A fourth goal was to identify indicators where actual examples of best practices among anchor institutions are readily identifiable. A fifth was a desire to identify practices that apply to anchor institutions writ large and not only institutions of higher education. Institutions with specific missions, of course, may want to add additional indicators.

Clearly, some indicators might make sense for higher education institutions, but not hospitals. One obvious one is targeting enrollments to enroll local, low-income community residents. For community colleges, of course, workforce development is part of their core mission and indicators specific to that category would be appropriate. Another methodological note is that the dashboard we designed is purposefully silent on the definition of the relevant “community.” Certainly, in designing
these indicators, we are operating with a lens that supposes a focus on a target neighborhood or neighborhoods. That said, with a bit of tweaking, we believe similar indicators could be applied to a “regional” definition of community as well. One last methodological note is that many of the indicators below are “input” and not outcome or impact measures. For example, it is obvious that “dollars spent or invested” does not necessarily equate with “dollars spent or invested well.” Nonetheless, budgets reflect priorities and the level of institutional financial commitment to working in and with communities is a significant indicator in assessing the actual level of institutional effort.

Figure 12, below, which provides an initial sketch of what an “Anchor Institution Community Benefit Dashboard” might look like, builds on these considerations.

Developing indicators, particularly those that might apply across a broad range of local contexts, is more of an art than a science. Still, careful consideration went into identifying each key outcome area. In terms of indicators, where possible we built on expert judgments, but the indicators listed should be seen as more illustrative than definitive. To provide some additional context, we discuss each of the proposed focus areas (and related indicators) briefly below.

**Economic Development**

**Focus Area 1: Local and Minority Hiring**

*Desired Outcome: Equitable Local and Minority Hiring*

The first focus area, local and minority hiring, should come as no surprise. This could be called the “jobs” category. As is well known, children whose primary caregiver(s) are employed are in a much better position to excel educationally.152

The potential for community impact is large. Allison Gold, a program manager at Living Cities, notes that a study in Detroit found that Henry Ford Health System, Wayne State University and Detroit Medical Center had the potential to achieve a target of “35 percent local employment over the next 10 years.”153 In Detroit, Henry Ford is taking initial steps in pursuit of this strategy, in cooperation with U3 Ventures. Evidently, setting a clear definition of “local” is critical to generate meaningful numbers. In terms of data, many anchor institutions already track hiring diversity; sorting payroll data by zip code should also be doable. In addition to counting the number of jobs, it is important to track jobs that pay a living wage, as community organizations interviewed for this report emphasized.

**Focus Area 2: Local and Minority Business Procurement**

*Desired Outcome: Equitable Local and Minority Business Procurement*

The second focus area, local procurement, also is a well-documented method for anchor institutions to leverage their economic power and, indirectly, create more jobs for local community residents by increasing local economic multipliers. Above, we discussed the work of University Hospitals in Cleveland in this area. The University of Pennsylvania is also well known for this work. In Fiscal-Year 2011, it purchased $95.6 million in goods and services from local suppliers in a seven zip-code region, an area where it once purchased practically zero.154 A very rough estimate of the economic multiplier impact effects suggest this likely generates about 200 jobs and $6 million in area wages that otherwise would not exist.155

**Focus Area 3: Housing Affordability**

*Desired Outcome: Affordable Housing*

As noted above, community groups saw a housing indicator as a high priority. Henry Taylor of SUNY Buffalo cautioned us to “use actual market data, rather than number of units.”156 Context is important here—in some cases, employer assisted housing is effective. In some cases, community land trusts can be a helpful preservation tool.

A few institutions, such as Duke University (Durham Community Land Trust is noted above) and the Mayo Clinic, have supported these.157 The indicator of maintaining affordability—30 percent of income has been the standard measure for several decades now—is our attempt to ensure that
## ANCHOR MISSION DASHBOARD

**COMMUNITY BENEFIT**

<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>INDICATORS</th>
<th>DATA SOURCE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EQUITABLE LOCAL AND MINORITY HIRING</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Percent of local and minority hires in staff positions</td>
<td>Institutional data</td>
</tr>
<tr>
<td></td>
<td>• Percent employed at living wage or above</td>
<td></td>
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<tr>
<td><strong>EQUITABLE LOCAL AND MINORITY BUSINESS PROCUREMENT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Percent of procurement dollars directed to local, minority-owned, and woman-owned businesses</td>
<td>Institutional data</td>
</tr>
<tr>
<td><strong>AFFORDABLE HOUSING</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Dollars invested in creating affordable housing</td>
<td>Institutional data</td>
</tr>
<tr>
<td></td>
<td>• Dollars invested in community land trusts</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Percent of households below 200 percent of poverty line that spend &lt;30 percent of income on housing</td>
<td>Institutional data, official records (census)</td>
</tr>
<tr>
<td><strong>THRIVING BUSINESS INCUBATION</strong></td>
<td></td>
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<tr>
<td></td>
<td>• Jobs and businesses created and retained (1 year, 5 years)</td>
<td>Institutional data</td>
</tr>
<tr>
<td></td>
<td>• Percent of incubated businesses serving low-income and minority populations</td>
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</tr>
<tr>
<td></td>
<td>• Dollars directed toward seed funding for community-owned business</td>
<td></td>
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<tr>
<td><strong>VIBRANT ARTS AND CULTURAL DEVELOPMENT</strong></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>• Dollars spent on arts and culture-based economic development</td>
<td>Institutional data</td>
</tr>
<tr>
<td></td>
<td>• Number of arts and cultural jobs and businesses created and retained</td>
<td></td>
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<tr>
<td><strong>SOUND COMMUNITY INVESTMENT</strong></td>
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<tr>
<td></td>
<td>• Percent of endowment and operating dollars directed toward community impact investments (e.g., support of community development financial institutions)</td>
<td>Institutional data</td>
</tr>
</tbody>
</table>

Figure 12. Anchor Institution Community Benefit Dashboard
<table>
<thead>
<tr>
<th>OUTCOME</th>
<th>INDICATORS</th>
<th>DATA SOURCE</th>
</tr>
</thead>
</table>
| **COMMUNITY BUILDING** | **STABLE AND EFFECTIVE LOCAL PARTNERS** | - Existence of partnership center or community advisory board  
- Positive feedback from survey of service-learning/capstone partners  
- Civic health index rating | Institutional and survey data |
| | **FINANCIALLY SECURE HOUSEHOLDS** | - Percent of households in asset poverty  
- Dollars spent on community financial education  
- Dollars and human resources directed to income tax filing assistance | Official records; institutional data |
| | **EDUCATION** | - High school graduation rate  
- Percent of students advancing to college or apprenticeship programs  
- Math and reading proficiency | Public school reported data |
| | **SAFE STREETS AND CAMPUSES** | - Dollars spent on streetscape improvements  
- Rates of violent crime  
- Rates of property crime | Institutional data, survey data, official records |
| | **HEALTHY COMMUNITY RESIDENTS** | - Dollars spent on public health initiatives (e.g., clinics)  
- Number of grocery stores per zip code | Institutional data, official records |
| | **HEALTHY ENVIRONMENT** | - Percent of carbon emissions  
- STARS index rating  
- Greenhealth index rating | Institutional data |
low-income residents are not “priced out” of the neighborhoods undergoing revitalization.

Focus Area 4: Business Incubation  
*Desired Outcome: Thriving Business Incubation*

Business incubation, of course, is, like the first two focus areas, a tool that can help create jobs, as well as build wealth. Many business incubation efforts focus on tech transfers that often don’t employ many low-income residents. However, it is possible to employ business incubation at a powerful tool to support low-income residents. For example, the Syracuse University-supported South Side Innovation Center has targeted programs for traditionally underserved entrepreneurial groups including low-income individuals, people with disabilities, women and minorities. Founded in 2006, the Center has helped create over 130 new businesses. In 2012, it received an award from the National Business Incubator Association for “incubator of the year.” In terms of indicators, we recommend tracking jobs created and retained both over one year (short term measure) and five years (mid-term measure). The five-year date is arbitrary, but at least puts in a reasonable period to try to track lasting results over a longer period of time.

Focus Area 5: Arts and Cultural Development  
*Desired Outcome: Vibrant Arts and Cultural Development*

As noted above, the fifth focus area—arts and cultural development—was added due to the expressed interest of a number of interview subjects who rightly saw arts and cultural development as an important strategy both for building more interesting places as well as a source of economic development. The Connective Corridor project, also supported by Syracuse University, which employs arts as a part of more comprehensive community revitalization strategy, provides a valuable illustration of the potential of this strategy. For initial indicators, we propose a similar measurement strategy as with business incubation generally.

Focus Area 6: Community Investment  
*Desired Outcome: Sound Community Investment*

Our final economic focus area is community investment. Here we focus on two indicators—one involves operating dollars, which have often been used on “place-making” investments, such as retail districts. A second indicator is endowment dollars. A leading example is the University of Cincinnati, which dedicated nearly 15 percent of its endowment (nearly $150 million) under former President Nancy Zimpher to capitalize a community loan fund to support redevelopment in seven nearby neighborhoods. Chris Walker of LISC, above, suggested that four percent of endowment might be a reasonable benchmark level. As impact investing gains greater prominence, we anticipate that more anchor institutions will choose to invest small percentages of their endowments to support local community economic development.

Focus Area 7: Community Capacity Building and Democratic Leadership Development  
*Desired Outcome: Stable and Effective Local Partners*

The last two focus areas involve community building. Working to grow the capacity of the community, be it through assisting community organizations or developing new leadership, helps create a more equitable partnership between community and anchor institution by building trust of the institution while ensuring that the institution has a stable and effective local partner. For community building and democratic leadership development, based on our interview data, we recommend a focus on policy measures. Community members clearly indicated that having a central partnership center “front door” and a community advisory board were important. We also recommend a survey of service-learning and capstone partners. Gail Robinson of the American Association of Community Colleges mentioned that her organization conducted a survey between 2009 and 2011 that provides a means of beginning to look at the community impact of partnerships, in cooperation with Learn and Serve America.
noted above, American Association of State Colleges and Universities and the American Association of Community Colleges are developing an index of civic health indicators. We believe that index could be a useful metric for assessing anchor institutions’ commitment to democratic leadership development.

Focus Area 8: Asset Building and Ownership
*Desired Outcome: Financially Secure Households*

Our last focus area is asset building and community ownership. Building wealth and building a sense of community ownership were common themes in our interviews. Our indicators here build off of key indicators in the asset-building field, such as the percentage in asset poverty, budget for financial education and income tax filing assistance support. We also believe that anchor institutions can help seed community-owned business. In Cleveland, the Cleveland Clinic, University Hospitals and Case Western Reserve University contributed seed capital to support the Evergreen Cooperative Initiative and have also been instrumental in the NewBridge Center for Arts and Technology as a workforce development strategy. But this is not a unique example. For example, in Syracuse, the university is providing $207,000 in seed funding for the development of a local food co-op that broke ground in May 2012.162

Education

Focus Area 9: Pre-K-12 Education Partnerships
*Desired Outcome: Educated Youth*

For education, there is a wide range of partnership efforts. A number of examples exist, including the Strive program mentioned above, the Harlem Children’s Zone project and many university efforts.163 Hospital partnerships with schools may be less common, but also exist, including Dayton-Ohio based Good Samaritan Hospitals partnership programs with nine local high schools.164 Wim Wiewel of Portland State advised a focus not so much on the university’s impact, but rather a focus on the question of “Are we making progress as a community or not?”165 The possible list of indicators is endless, but a few basic ones, such as graduation rate, advancement to college or apprenticeship and math and reading proficiency build on existing datasets and provide a good starting point for assessing impact.

Health, Safety & Environment

Focus Area 10: Public Safety
*Desired Outcome: Safe Streets and Campuses*

Our next three focus areas concern public health, public safety and the environment. Public safety gets talked about less than some other topics in community economic development, but is often a leading factor in persuading a hospital or university to adopt an anchor institution strategy. Certainly this was the case with Bon Secours Hospital and was also the case for both Penn and Yale.

Business improvement districts and other place-making strategies (retail development) have proved to be effective strategies here, so we list that as a potential indicator. Obviously, official crime statistics are also important data. As Wim Wiewel of Portland State noted, “We already have to report all incidents. We have annual reporting through the Cleary Act. That is readily reportable data.” Naturally, universities don’t control the crime rate. However, efforts at Penn and Yale, both of which report sharp reductions in crime after they initiated their anchor institution efforts, strongly suggest that universities can strongly affect local neighborhood crime rates (crime fell by 40 percent in Penn in roughly six years).166

Focus Area 11: Public Health
*Desired Outcome: Healthy Community Residents*

Regarding public health, the fundamental importance of public health to community welfare is clear. A 2011 Centers for Disease Control report finds that, “People who live and work in low socioeconomic circumstances are at increased risk for mortality, morbidity, unhealthy behaviors, reduced access to health care and inadequate quality of care. Striking disparities in non-completion of high school and poverty exist within the U.S. adult population and no improvement has been achieved between 2005–2009.”167
There are a number of universities and hospitals that work in this area. For instance, a 2011 University of Chicago, Illinois report finds that there were 884,804 contacts in the area of “Children’s Health Education and Youth Development,” as well as 5,692 contacts for “community health.” Kaiser Permanente has supported the development of more than 50 farmers markets across the country. Based on our interviews, we recommend basic indicators such as the level of health disparity in infant mortality and dollars spent on public health initiatives (e.g., clinics) and to support healthy food access in partner communities.

Focus Area 12: Environmental Health

Desired Outcome: Healthy Environment

Much like public health, any number of indicators can be used in this area, a major focus of many of the community groups interviewed for this report. One obvious indicator is carbon emissions. Wim Wiewel of Portland State noted that due to the campus presidents’ commitment to climate change, “We all had to come to a goal of how we’re going to get to climate neutrality. We report on how well we are doing on that goal. That is an existing metric.” Beyond that, we recommend incorporating existing indices. For universities, the STARS (Sustainability Tracking, Assessment & Rating System) index provides a useful baseline.

Among hospitals, Practice Greenhealth’s Greenhealth Sustainability Dashboard plays a similar role, as well as the US Green Building Council’s “LEED for Healthcare” rating and the “Green Guide for Health Care” (developed by Health Care Without Harm and the Center for Maximum Potential Building Systems). A number of institutions have prioritized environmental goals; Gundersen Lutheran’s work in energy efficiency was mentioned above. Portland State and Emory are both known for their sustainability work, including a focus by both on local procurement that lowers energy costs by reducing the need to transport produce, while generating local jobs.

We hope that this dashboard will help institutions to take a more strategic approach to working in communities, to better track the impact of their work over time and to help develop necessary goals for moving forward. The focus areas and indicators outlined here provide a good starting point, but developing benchmarks will be key to establishing a baseline from which future efforts can be evaluated. Setting benchmarks will also make it easier to formulate goals and put policies into place to better enable anchor institutions to positively impact low-income communities with whom they partner.
G. OUTLINING NEXT STEPS

Early in this paper, we quoted Nancy Zimpher, Chancellor of the State University of New York, who argued that anchor institutions “need to be more engaged in solving the big problems.” These problems are well known, but worth restating here. The Census Bureau reports that median household income in 2011 was 8.1 percent lower than it was in 2007. In 2011, 24.5 percent of all children under the age of six—nearly one in four—were in poverty. Nationwide, 46 million Americans were in poverty, a poverty rate of 15 percent. Fully 25 percent of small children in this country live below the poverty line.

Anchor institutions—because of their economic scale, as well as their central position within the nation’s health and higher education systems—can make an important difference in community economic development outcomes. In this paper, we hope we have provided a framework that can move forward the discussion of how hospitals, colleges and universities can, consistent with their health and educational missions, help reduce poverty, build community and promote beneficial environmental outcomes. Of course, the framework presented, even if it were to be accepted exactly as presented here, is only the first step of the process. A key next step is to further develop the indicators through piloting their implementation.

Creating a forum for sharing best practices is also important. Lee Stuart, Program Officer of LISC’s Duluth office, noted that, “It would be good to have a learning network so we could learn from one another. Not start over. Leverage from one another.”

Bill Dillon of the National Association of College and University Business Officers (NACUBO) observed that, “There is an association for almost everything—bookstores, lawyers, development, etc. But I’ve never heard of an association for community development administration or officials for universities. Ten years ago, NACUBO created an association for management associations, the Counsel for Higher Education Management Associations. It brings together boards chairs, etcetera, for planning and organizational issues. But no organization is specific to community development work.”

Beyond sharing best practices and refining practices as indicators are tested, another future step might be to begin to integrate these indicators into broader assessments of community engagement, such as Community Health Needs Assessment reports for hospitals and the Carnegie Foundation’s community engagement classification criteria for universities.

Over time, we look forward to seeing the further development of processes, training and tools to enable anchors to integrate equity indicators into their ongoing business practices. And we look forward as well to seeing community input integrated into indicators and monitoring to foster greater learning and mutual understanding between anchor institutions and community groups.

As David Perry of the University of Illinois at Chicago pointed out, even if this is not always acknowledged, there is a mutual dependency between communities and anchor institutions that creates a set of overlapping (if not always consistent) interests of the two. “You attract people from all over the country, because of your community,” Perry said. “If you only look at the anchor institution impact on the city,” Perry added, “that is only half of the phenomenon.”
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- Amee Bearne, National Coordinator, The Democracy Commitment
- Martin J. Blank, President, Institute for Educational Leadership
- John Burkhardt, Director, National Forum on Higher Education for the Public Good
- Bill Dillon, Executive Vice President, National Association of College and University Business Officers
- Jennifer Domagal-Goldman, National Manager, American Democracy Project, American Association of State Colleges and Universities
- Shari Garmise, Vice President, Office of Urban Initiatives, Association of Public and Land-Grant Universities
- Elizabeth Hollander, former President, Campus Compact and Senior Fellow, Tisch College, Tufts University
- Caryn McTigue Musil, Senior Vice President, Association of American Colleges and Universities
- George L. Mehaffy, Vice President for Academic Leadership and Change, American Association of State Colleges and Universities
- Terrel Rhodes, Vice President for Quality, Curriculum, and Assessment, Association of American Colleges and Universities
- Gail Robinson, former Manager of Service Learning, American Association of Community Colleges
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- Omar Blaik, Founder & President, U3 Ventures
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- James Harvie, Executive Director, Institute for a Sustainable Future (Duluth, MN)
- Madeline Janis, National Policy Director, Los Angeles Alliance for a New Economy (Los Angeles, CA)
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- Lee Stuart, Program Officer, Duluth LISC
- Deborah Visser, Director, Investments and Partnerships, NeighborWorks, Success Measures
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- Peggy Shepard, Executive Director, WeAct for Environmental Justice (New York, NY)
- Chuck Starrett, Administrator, Steel Valley Enterprise Zone (Homestead, PA)
- Guy Williams, CEO, Detroiter Working for Environmental Justice (Detroit, MI)
- Steve Williams, Executive Director, Partnership Community Development Corporation (Philadelphia, PA)
- Beverly Wright, Executive Director, Deep South Center for Environmental Justice (New Orleans, LA)
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- Oliver Henkel, Chief External Affairs Officer, Cleveland Clinic
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- Dave McCombs, Vice President of Enterprise Resource Planning and Supply Chain Operations, Bon Secours Health System
- Jeff Rich, Executive Director of GL Envision (subsidiary Of Gunderson-Lutheran Health System)
- William Schramm, Senior Vice President of Strategic Business Development, Henry Ford Health System
- Steve Standley, Chief Administrative Officer, University Hospitals
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• John Krauss, Director, Indiana University Public Policy Institute, Indiana University-Purdue University Indianapolis (IUPUI)
• Katherine Kravetz, Academic Director, Transforming Communities, American University
• Rex LaMore, Director, Center for Community & Economic Development, Michigan State University
• Manuel Pastor, Director, Program for Environmental and Regional Equity, University of Southern California
• David Perry, former Director, Great Cities Institute, University of Illinois at Chicago
• Michael Rich, Director, Center for Community Partnerships, Emory University
• Gretchen Seuss, Director of Evaluation, Netter Center for Community Partnerships, University of Pennsylvania
• Henry Taylor, Director, Center for Urban Studies, University at Buffalo
ABOUT THE DEMOCRACY COLLABORATIVE

Since 1999, The Democracy Collaborative has worked to build the deep knowledge, theoretical analysis, practical tools, network of relationships and innovative models representing a new paradigm of economic development in the United States. The hallmarks of this new approach include refocusing public and private resources to expand individual and family assets, broadening ownership over capital, restoring community banks and other local economic institutions, and returning wealth to communities as an essential strategy to end generational poverty, create quality jobs with family-supporting wages, stabilize communities and their environment, and address our nation’s growing wealth inequality. This is Community Wealth Building.

The Democracy Collaborative (TDC) is the premier innovator and field builder in the practice of Community Wealth Building, transcending underlying approaches and connecting these into an overall strategy. As the leading national voice on research, advisory and innovation for the movement of Community Wealth Building, the Collaborative promotes new models and efficient practices, informs public policy and establishes key indicators for moving this work forward rapidly.

TDC sustains a wide range of projects involving research, training, policy development, and community-focused work designed to promote an asset-based paradigm and increase support for the field across-the-board. Our research, strategy and policy website—www.Community-Wealth.org—is updated quarterly and is a comprehensive source for information about the community wealth building movement nationwide.

TDC is also recognized nationally as a primary architect of the Evergreen Cooperative Initiative in Cleveland, OH. The Evergreen Cooperative Initiative is a comprehensive community building and economic development strategy designed to transform Cleveland’s Greater University Circle by breaking down barriers between the area’s “anchor institutions” and its surrounding low-income neighborhoods (43,000 residents with a median household income below $18,500; 40% of the population lives below the poverty line). The Democracy Collaborative designed the original wealth building and economic inclusion strategy that formed the basis for Evergreen; TDC’s senior leadership continues to be heavily involved with the Initiative.

The goal of this anchor-based effort is to create jobs and build wealth among residents in order to stabilize and revitalize the neighborhoods of Greater University Circle and similar areas of Cleveland. The Initiative represents a “learning laboratory” and the essential building blocks of a new model of urban economic development, emphasizing as it does: (1) leveraging existing place-based economic assets (primarily anchor institutions such as hospitals and universities) for community benefit (in particular, low- and moderate-income neighborhoods and their residents); and (2) green business development based upon cooperative and other broader ownership forms that reinforce core values of equity, asset building and anchoring capital in order to stabilize place.
ENDNOTES


3. Regarding the challenges of identifying causality, one is reminded an episode of the comedy *Police Squad!* in which a forensics team takes casualties trying to reproduce (with a loaded gun) the conditions by which a murder took place. See: http://tvtropes.org/pmwiki/pmwiki.php/Main/CrimeReconstruction, accessed September 22, 2012.

6. Oliver Henkel, interview by Ted Howard and Holly Jo Sparks, Cleveland, OH: March 15, 2011.
7. Bill Schramm, interview by Holly Jo Sparks, Detroit, MI: November 19, 2011.
27. David Cox, interview by Sarah McKinley, June 18, 2012.
42. Andrew Furco, interview by Sarah McKinley, July 23, 2012.
44. Selena Mack, interview by Sustainable Communities Development Group, May 24, 2012.
46. Cheryl Johnson, interview by Sustainable Communities Development Group, May 9, 2012.
47. Margaret May, interview by Sustainable Communities Development Group, May 24, 2012.

49. Margaret May, interview by Sustainable Communities Development Group, May 24, 2012.


51. Steven Williams, interview by Sustainable Communities Development Group, June 28, 2012.

52. Ishmael Israel, interview by Sustainable Communities Development Group, June 6, 2012.


55. Paulina Gonzalez, interview by Sustainable Communities Development Group, June 29, 2012.

56. Peggy Shepard, interview by Sustainable Communities Development Group, May 18, 2012.

57. Diane Arnold, interview by Sustainable Communities Development Group, June 27, 2012.

58. Ishmael Israel, interview by Sustainable Communities Development Group, June 6, 2012.

59. Paulina Gonzalez, interview by Sustainable Communities Development Group, June 29, 2012.


61. Peggy Shepard, interview by Sustainable Communities Development Group, May 18, 2012.


64. Diane Arnold, interview by Sustainable Communities Development Group, June 27, 2012.

65. Elizabeth Yeampierre, interview by Sustainable Communities Development Group, June 13, 2012.


75. Martin Blank, interview by Steve Dubb, Washington, DC: June 19, 2012. Netter Center Assistant Director Rita Hodges notes that the Netter Center does seek to align efforts and regularly convenes partners for this purpose; that said, Hodges agrees that there is still work to be done to measure outcomes and impact more effectively (Rita Hodges, Personal Correspondence, October 28, 2012).


104. For example, regarding universities, see: Rita Axelroth Hodges and Steve Dubb, The Road Half Traveled, pp. 87-88, 207 (fn. 91).


108. Matthew Meekins and Kerry Ann O’Meara, “Ranking Contributions to Place: Developing an Alternative Model for Competition in Higher Education,” Public Purpose, winter 2011, pp. 6-9. We gratefully acknowledge the contribution of Harry Boyte, who called our attention to this important article.


139. Leif Elsmo, interview by Farzana Serang, June 12, 2012.
140. Maggie Grieve, interview by Steve Dubb, (as part of a group interview with Jessica Tomiko Anders and Deborah Visser [by telephone], Washington, DC: July 17, 2012.
144. Dave McCombs, interview by Holly Jo Sparks, Baltimore, MD: June 1, 2011.
151. See, for example, Matthew Meekins and Kerry Ann O’Meara, “Ranking Contributions to Place: Developing an Alternative Model for Competition in Higher Education,” Public Purpose, winter 2011, pp. 6-9. John Saltmarsh also brought up this theme in his interview (John Saltmarsh, interview by Sarah McKinley, August 6, 2012).
155. Making extrapolations with local economic multipliers is tricky, but the benefits can be considerable. For example, a local study of Grand Rapids and environs in 2008 found that if residents shifted 10 percent of their retail purchases to local stores ($840 million), this would generate 1,614 new jobs, $53.3 million in wages, and $137.3 million in economic activity. A shift of $100 million could thus be expected to achieve roughly one eighth of this amount, ceteris paribus. See: Civic Economics, Local Works: Examining the Impact of Local Business on the West Michigan Economy, Austin, TX and Grand Rapids, MI: Civic Economics and Local First, September 2008.
159. On the Connective Corridor, see Rita Axelroth Hodges and Steve Dubb, The Road Half Traveled, pp. 90-93.
163. For the Harlem Children’s Zone, see the organization’s website at http://hcz.org. For broader information of education partnerships at universities, see Rita Axelroth Hodges and Steve Dubb, The Road Half Traveled. See also Ira Harkavy and Rita Axelroth Hodges, Democratic Devolution: How America’s Colleges and Universities Can strengthen their Communities, Policy Memo, Washington, DC: Progressive Policy Institute, October 2012.
167. Centers for Disease Control and Prevention, Fact Sheet: Health Disparities in Education and Income, Atlanta, GA: CDC.
2011. See also the longer report from which this fact sheet is culled: Thomas R. Frieden, CDC Health Disparities and Inequalities Report—United States, 2011, Atlanta, GA: CDC, January 14, 2011.


177. David Perry, interview by Steve Dubb, June 12, 2012.

178. Asterisks refer to individuals cited in this report, who were interviewed for a separate but related Democracy Collaborative research project on the role of hospitals in community economic development.
ACHIEVING THE ANCHOR PROMISE:
Improving Outcomes for Low-Income Children, Families and Communities

Anchor institutions are enterprises such as universities and hospitals that are rooted in their local communities by mission, invested capital, or relationships to customers, employees, and vendors. All told, U.S. hospitals and universities combined spend over $1 trillion a year, have endowments in excess of $500 billion, and employ 8 percent of the labor force.

Many anchor institutions regularly report on community programming and activities. Some go even further and seek to pursue an anchor mission — making a commitment to consciously apply their place-based economic power, in combination with their human and intellectual resources, to better the long-term welfare of the communities in their regions. Yet, to date, few tools exist to help institutions reflect on and broadly assess the long-term impact of their anchor-mission activities, and particularly their impact on low-income communities.

This Democracy Collaborative research report aims to move the conversation from “programs” to “impact”—and specifically to the critical matter of how to deliver measurable benefits to low-income children, families, and communities. Using focused in-depth interviews conducted with more than 75 individuals from a wide range of positions, including hospital and university administrators, partnership center directors, national nonprofit organization leaders, federal officials, and community activists, Achieving the Anchor Promise offers insight into the needs of both communities and institutions, and, ultimately, identifies a set of indicators that can be used to assess community conditions and institutional effort.

Achieving the Anchor Promise broadly surveys the field and outlines the benefits of existing partnerships and leading “best practices,” as well as the challenges, from anchor institution and community perspectives. Despite vast differences in vantage point, considerable agreement is found on what areas are most important to prioritize in measuring and communicating anchor institution efforts and intention. A useful tool for community groups, researchers, students, and anchor institutions themselves, Achieving the Anchor Promise deepens our understanding of what it means for hospitals or universities to say they are pursuing an anchor institution mission and how this work can best be shaped to benefit their surrounding communities.