

Philanthropy Journal

OF NORTH CAROLINA

A new challenge

United Way donors want to see results

In a competitive funding environment, United Way agencies realize they must show concrete proof that their programs are successful. But proving that solutions work is not as easy as simply proving how an agency spends its money. The cozy days of the United Way family of agencies may soon be over.

By SEAN BAILEY

Big changes are on the horizon for United Way agencies.

The way such nonprofits prove they are doing good is about to undergo a major rethinking. When funding time rolls around, it may no longer suffice for the agencies simply to describe how they try to solve community problems. Donors want proof the solutions work.

MANAGING

"We are talking about a major paradigm shift in human services that is going on across the nation, and United Ways are just becoming a part of that wave," says Dennis K. Orthner, a professor at the School of Social Work at the University of North Carolina at Chapel Hill.

Orthner is playing a key role in bringing the new thinking to North Carolina. Last summer, he briefed United Way executives throughout the state about how to critically measure programs by looking for real, concrete changes in the lives of people touched by United Way funding.

Rather than evaluating systems in the traditional way by looking at the "actions or activities" that an agency takes in spending money, the new "outcome-oriented" approach

involves measuring the impact of the program on the people it is designed to serve.

This shift in evaluating programs stems from changes in how private employers measured workplace performance under the rubric of "reengineering" the corporation. Big business wanted proof that its profits were being wisely and efficiently spent. Now, many of those same corporations demand that their philanthropic contributions be held to a similar measure.

"There was a time when they simply wanted to know that their money was being spent effectively, but today they want to know they are making a difference with the funding decisions we make," says Gloria Pace King, executive director of the United Way of Central Carolinas in Charlotte.



Dennis Orthner

Measuring "return on investment" in the private sector is often a straightforward, quantifiable process. But measuring the delivery of human services - youth programs, respite care for families with terminally ill members, homeless shelters - may prove more elusive. Sometimes successful outcomes cannot be easily defined or can be measured only over a long period of time.

"How do you detect the difference between vague good works and something that really, concretely contributes to the condition of the people being served," Orthner says. "That is the dilemma."

RESULTS, NOT ACTION

Charity was less complicated in earlier times. In many cities, United

Way agencies essentially controlled the funding decisions. Business and industry happily participated in trying to remedy community problems, and the United Way was the best organized and least complicated way of doing it. Decisions about funding community priorities essentially came from the staffs of the agencies.

The key feature of this arrangement was stability. Once a nonprofit joined the "family" of agencies, its long-term funding was virtually guaranteed. The only key issue regarding funding was how well the local annual appeal fared.

Measuring program effectiveness only was a matter of the agency explaining what it did. If an agency continued delivering a service to clients, that in itself was justification for continued funding. For instance, a

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A decade of need

Raleigh free clinic marks 10th anniversary

Staff and volunteers at The Open Door Clinic in Raleigh are celebrating the organization's 10th birthday with mixed emotions. They are happy to be providing needed services but are sobered by the growing number of patients lining up each week for free health care.

By BARBARA SOLOW

Raleigh

It's just after 5:30 on a steamy late-summer afternoon and the waiting room at The Open Door Clinic in downtown Raleigh is full.

A little boy in a sweat-stained T-shirt grabs a fistful of animal crackers offered by one of the clinic volunteers, then dashes back to his mother. A rail-thin woman in office-worker clothes flips quietly through the pages of a magazine. An elderly man sitting next to her coughs, rubs his hand across his eyes and shifts wearily in his seat.

Down the hall, clinic Director Marilyn McNeely is answering questions about the evening's schedule and

HUMAN RESOURCES

helping volunteers find needed forms and equipment.

Ordinarily, patients would have been lined up outside the renovated depot that houses the free clinic and two other projects of the Urban Ministries of Raleigh. But today, it was just too hot, McNeely explains.

"I couldn't have them all standing out there in that sun so I asked everyone to come in early."

When it opened 10 years ago in one room of a downtown church across from Moore Square, the free

clinic was the first of its kind in North Carolina. Since then, it has become a model for a network of about 15 similar clinics operating throughout North Carolina.

The Open Door - now located in a renovated warehouse on Smart Drive near downtown - provides free medical exams, lab tests, medicines and referrals to 3,000 low-income patients a year on a budget of about \$110,000. A network of 300 medical and "lay" volunteers keep the walk-in clinic and its licensed pharmacy running three nights a week for up to 25 patients a night.

In recent years, gynecological and dental care have been added to the list of available services, and on Wednesdays, the clinic is open by appointment to patients with chronic diseases.

Like many of those involved with The Open Door, McNeely - who began her tenure at the clinic as a volunteer nurse - has mixed feelings about the organization's 10th anniversary.

"I'm glad that we're here to take care of people who really need care," she says.

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Doctors Mike Rodman and Leslie Marshall examine a patient at the Open Door free clinic in Raleigh.

Photo courtesy of Raleigh Urban Ministries



Students relax at East Carolina University, which, along with its medical center, dominates the nonprofit sector in Greenville.

Photo by Merrill Wolf

At a crossroads

Challenges confront Greenville nonprofits

As Greenville's most generous corporate citizen reduces its operation, competition for funding and the need for better communication in the nonprofit sector are intensifying.

By MERRILL WOLF

Greenville

The sudden appearance of a vast medical complex is the first indication that a visitor has reached Greenville. In contrast to the tobacco fields of rural Pitt County, clusters of medical offices begin to line U.S. 264,

A SENSE OF PLACE

marked by signs advertising a plethora of medical specialties.

Soon the University Medical Center looms on the left. Like the city itself, the medical center is dominated by Pitt County Memorial Hospital, Greenville's largest employer. A banner hanging above the emergency-room entrance gives new meaning to the hospital's initials: "People Care More Here," it reads.

This phrase could be the city's

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Community relations touchdown

In his new community relations job for Duke Power, Richard Williams draws on his experience - and the inspiration of his mentor.

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Targeting dollars for growing needs

Tar Heel United Way affiliates that are raising their fundraising targets say they are doing so because member agencies need more help.

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