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**Decisions Affecting the Sustainability of Social Programs:
How Much Are They Based On Evidence?**

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Every year, countless new social programs are introduced worldwide. The logical assumption would be that programs that meet an identified need and prove effective will continue to exist. This assumption is inherent in the notion of evidence based policy. But is it really valid? Unfortunately, we all know of needed and effective social programs that do not last beyond the pilot stage. Thus, an important question that has occupied scholars in recent years is: What promotes sustainability? What increases the chances that a needed and effective program will survive?

To try to answer this question, we are in the process of conducting a comprehensive study of social programs that were introduced in Israel in the past thirty years. The study combines qualitative and quantitative approaches. In this talk, I will present the findings of the qualitative phase of the study, in which we carried out case studies of six programs, three of which have survived and three of which have not. For all of these programs, including

those that did not survive, there was an understanding, in some cases a written commitment that if the program proved effective the appropriate government agency would continue to fund it.

Information for the case studies was obtained from three sources:

- a. project proposals, correspondence, and other documentation, and
- b. the projects' evaluation reports.
- c. in-depth, open format interviews with key persons involved in the program and external stakeholders, including representatives of the relevant government ministries.

The interviews all began with some open ended questions asking the interviewees to tell about the program, whether or not it survived, and how they explain its survival or demise. Following this, more specific questions were asked about a range of features that the literature associates with sustainability.

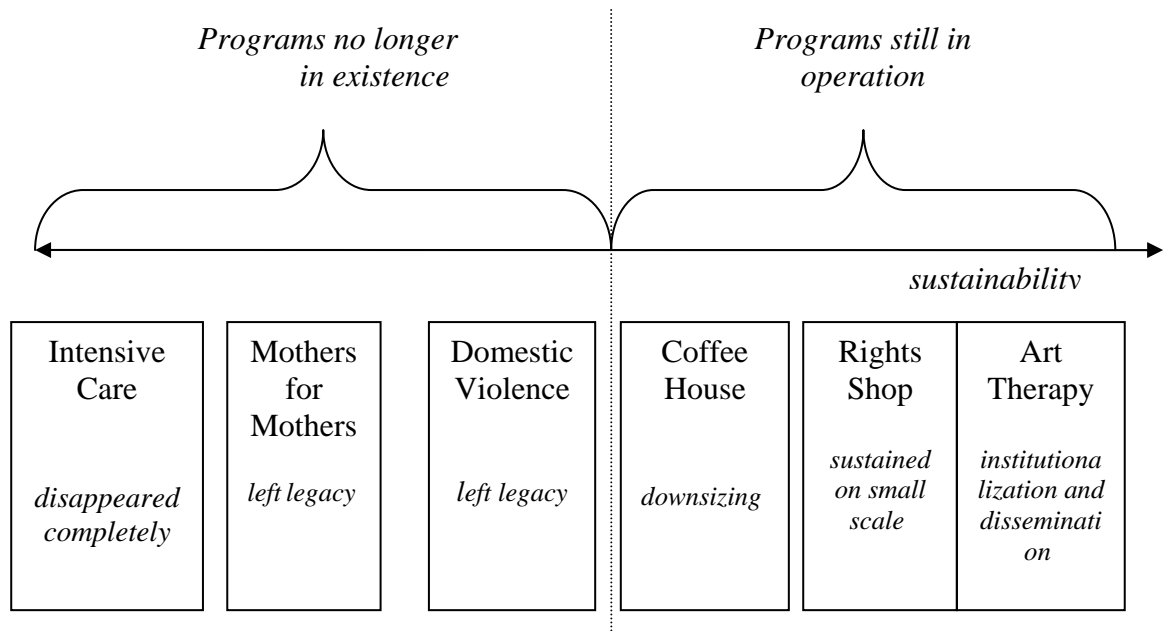
For our larger study, program sustainability is defined along three dimensions. The first is "scope," charted along a continuum. At the optimal end is maximum sustainability, in which the program is expanded and/or disseminated to other populations and places. At the opposite end is complete cessation, in which the program ceases to exist altogether. In between is the continuation of the program in the same format and organization.

The second dimension is the size of the sustained program, as measured by such things as the number of clients and employees, the size of its budget, and the length of time the program has been in existence. The third dimension is the institutionalization of the program at the organizational, community, and state levels. In this talk, I will focus on the first dimension – scope.

I'll begin with a few words about the programs.

- "Art Therapy" provides art therapy for children at risk who had been placed in institutional care.
- "The Rights Shop" is a "store front" program to provide persons with information, skills, and assistance in obtaining the rights and benefits to which they are entitled from government agencies.
- "Coffee House Counseling" is an informal counseling program for troubled adolescents, located in coffee houses throughout Israel.
- "Group Therapy for Domestic Violence" was a group therapy program for men who engage in domestic violence.
- "Mothers for Mothers" was a program aimed at improving the functioning and emotional well being of mothers in ultra-orthodox families with many children.
- "Intensive Care for Alcoholics" is a day center designed to fill the gap between expensive short term hospital care, and low intensity ambulatory care program, which had high attrition rates.

As showed in the following figure the programs exhibit a range of sustainability.



Sustainability Continuum

"Intensive Care for Alcoholics" disappeared completely. "Mothers for Mothers" also disappeared, but left a legacy, in that the workers it had trained were incorporated into other programs. "Group Therapy for Domestic Violence" also disappeared, but left a legacy in the form of trained manpower and an offshoot day care program for violent husbands. "Coffee House Counseling" is still in operation, but in the process of downsizing and some sites are at risk of closure. "Rights Shop" is stable and expanding its services in two sites, but had closed down at a third site for lack of resources. "Art Therapy" has become a stable, integral part of the services of some 60% of the institutions for children at risk in Israel, and indications are that it will continue to expand to more.

Putting the nuances aside for the time being, we can state that the first three programs named survived beyond their pilot stage, while the last three did not.

The question I will focus on in this talk is how the programs that survived differ from

those that did not. Before answering this question, however, I would like to briefly describe the programs at the two ends of the continuum. I'll start with Art Therapy, the most thriving and disseminated of the programs.

Art Therapy

- **Operating body:** NGO
- **Funding body:** A large private fund that supports programs in the field of education
- **Rationale:** Children who suffer from a variety of deprivations (e.g., cognitive, emotional) respond better to non-verbal therapy than to verbal therapy.
- **Location of pilot:** multiple residential facilities for children at risk.
- **Nature of program:** the addition of individual/group art therapy to the existing educational and treatment activities at the facilities.
- **Years of pilot:** 1990-1995
- Evaluation of the program indicated improvement in the functioning of the children who participated in the program.
- The program has been incorporated into the regular budget of the residential homes supported by the Ministry of Welfare.
- There are now art therapists providing therapy in 64 out of the 100 or so residential facilities for children at risk in Israel.
- The program is being actively disseminated to the remaining facilities.

What was done to attain this high degree of sustainability?

- The Ministry of Welfare, which is responsible for the care of children in placement,

was a partner in the program from the very beginning.

- From the beginning, efforts were made to raise money from a variety of sources.
- When such funding could not be raised, the NGO that initiated and sponsored the program funded it from its own budget.
- Steps were taken to integrate the art therapists, who were contracted workers, into the treatment teams.
- Champions for the program were assiduously cultivated at all levels: within the NGO, within the residential facility, among high profile figures in the Israeli scene, and within the Ministry of Welfare.

External factors that facilitated the sustainability of the program.

- The great sympathy for children at risk in Israel facilitated fundraising.
- Children at risk are a high priority population in the Ministry of Welfare.
- Art therapy is a widespread and trendy form of treatment that is widely perceived as effective.
- Israel has an abundance of trained art therapists who are willing to work for low wages.
- The Ministry of Welfare's Supervisor of the facilities for children at risk acted as the program's champion in the Ministry. He found ways of incorporating the art therapy program into the Ministry's regular funding of residential facilities.

The program at the other end of our spectrum, which disappeared completely without so much as a trace, was **Intensive Care for Alcoholics**.

- **Operating body:** Quasi non-governmental body
- **Funding body:** The Special Projects Fund of Israel's National Insurance Institute
- **Location of pilot:** two centers for treating alcoholics
- **Nature of program:** full day intensive treatment, three days a week, 6-8 weeks
- **Intervention methods:** a combination of individual, group, family and community interventions
- **Rationale:** Two very different types of publicly funded treatment for alcoholism are available in Israel: relatively low intensity ambulatory treatment that has very high dropout rates and hospitalization whose high cost and inconvenience make it available to only a very few alcoholics. The Intensive Care program, which provided high intensity ambulatory treatment, offered a much needed middle course.
- **Years of pilot:** 1998-2000

Reasons to expect that Intensive Care would have survived

- It met an obvious need.
- The program interventions had a clear rationale and articulated theory of change.
- The program was based on a successful program implemented in the USA.
- The evaluation findings showed that the program was implemented as planned and that the main outcome – reduced consumption of alcohol --was achieved.
- The program management, its steering committee, and other stakeholders all perceived it as a success story.
- Before the program was undertaken, the Ministry of Welfare had provided a letter with a written commitment to fund the program if it proved effective.

What was done to promote sustainability?

- When the Ministry did not honor its commitment, the host organization management and the initial funder tried to persuade it to do so.
- When the Ministry remained adamant, the initial funder suggested that the host organization apply for a three year funding extension to implement the program at different sites.

Steps that the host organization might have taken to increase the chances of sustainability but which were not:

- Making changes in the program to reduce its high cost
- Shifting funds to Intensive Care from the ambulatory program
- Accepting the offer of a funding extension to implement Intensive Care at different sites.
- Raising funds from other sources.
- Mounting a public struggle to change the Ministry's policy.

Deterrents to taking these steps

- Being a quasi - NGO, the host organization
 - ✓ relied on government funding,
 - ✓ was not in a position to mount a public protest against Ministry policy

- ✓ might have found it difficult to raise funds from other sources
- Alcoholics arouse little public sympathy in Israel, making raising funds for their treatment difficulty
- In Israel's bureaucracy, the bodies providing care for alcoholics are relatively weak, with less clout, for example, than bodies providing care for drug addicts.

Now that I've detailed the key factors related to the sustainability and non-sustainability of the two programs at the opposite ends of the spectrum, I will talk about three groups of features that emerged from our analyses of the six cases.

The first group consists of features that were the same for all the programs and so could also not distinguish between the programs that are still in operation, Coffee House Counseling, the Rights Shop, and Art Therapy, and the three that ceased operating after their initial funding expired, namely Intensive Care, Mothers for Mothers, and Group Therapy for Domestic Violence. All six programs met an identified need and were positively evaluated, albeit with reservations and suggestions, by external evaluators. All were based on a clear theory of change. All had stable structures themselves and were situated in stable host organizations. Each received adequate funding for three years. Nor did the programs differ in the stiff competition for resources that they faced or in the dedication or competence of their leadership.

In other words, program evaluation, program effectiveness, having a theory of change, the stability of the host organization, and duration and adequacy of initial funding did not distinguish between the programs that were sustained and those that were not. We do not know whether the lack of these features reduces the chances of a program's sustainability; the

existence of the features, however, seems to have been insufficient.

The second group consists of features that differed from program to program, but were not consistently related to their sustainability. These are the program's degree of innovativeness, its cost relative to other programs, its use of volunteers alongside professional staff, its development of its human capital, the readiness of the host organization to take risks, and the size of the program relative to the size of the host organization, and the sympathy generally allotted to the beneficiaries of the program.

The lack of a consistent relationship between these features and the sustainability of the six programs does not mean that these features are unimportant or that they have no impact on sustainability. For example, it is hard to say that innovativeness – or, more precisely, the lack of innovativeness -- has no impact on sustainability when the most highly sustained program, "Art Therapy," was by far the most traditional and conservative of the six. Along similar lines, most of the interviewees in the "Intensive Care for Alcoholics" program explained how the high cost of this program relative to the less intensive ambulatory program that was available adversely affected its survival. In our view, at least some of the features that varied from program to program but did not clearly distinguish between the programs that are still in existence and those that are not, may be related to the degree of sustainability. This is one of many questions that we will be able to better examine in the quantitative phase of the study.

The third group is the most meaningful, in our view. This group consists of a fair number of features that distinguish all three programs that are still in operation – Art Therapy, Rights Shop, and Coffee House Counseling -- from two of the three that are not: Mothers to Mothers and Intensive Care for Alcoholics. The third program that did not

survive, Group Therapy for Domestic Violence, had all the features of the three programs that survived, but ceased to exist because of competition with rival programs sponsored by powerful governmental and non-governmental bodies.

I will now present the features that distinguish Art Therapy, Rights Shop, and Coffee House Counseling from Mothers to Mothers and Intensive Care for Alcoholics. In keeping with distinctions made in the literature, the features are organized by those pertaining to the program, those pertaining to the host organization and its leadership, and those pertaining to relationships with bodies in the organizational environment external to the program and host organization.

With respect to the program, there were two differentiating features. The three surviving programs all had multiple sources of funding and a fund raising strategy. Both of the non-surviving programs relied on a single source of funding, and neither had a strategy for raising other funds.

With respect to the host organization, there were marked differences in structure and leadership, as well as in the "place" of the program in the organization. Structurally, the host organizations of the three surviving programs were all independent NGOs. In contrast, the host organization of Mothers for Mothers was a department of a local municipality, while the host organization of Intensive Care for Alcoholics was registered as an NGO but functioned as an arm of the Ministry of Welfare.

The heads of the host organizations of the three programs that survived all acted as champions of the program. They fought hard to sustain it and exercised considerable initiative, ingenuity, and flexibility to keep the programs going. For example, when they found their program in financial straits, the heads of the host organizations of all three

surviving programs took cost cutting measures. When Coffee House Counseling was threatened with closure, the head of the host organization mounted a public protest to pressure the government for its continuation.

The leaders of Mothers for Mothers and Intensive Care for Alcoholics did not fight for the continuation of the programs, showed little ingenuity or flexibility, and little inclination or ability to maneuver within the bureaucratic maze. Mother to Mothers ceased to exist in large measure because the head of the municipal department that hosted it insisted on receiving only earmarked funds, when the Ministry of Welfare wanted to fund the program through indirect channels – a solution that the host organization of Art Therapy accepted for many years until it was finally incorporated fully in the Ministry of Welfare's regular budget. When the initial funding expired for Intensive Care for Alcoholics, and the Ministry of Welfare reneged on its commitment to fund it on a permanent basis, the head of its host organization simply gave up. He even failed to take up a suggestion by National Insurance Institute, which was funding the pilot, to apply for a three year extension of support.

The heads of the host organizations of the three surviving programs were also distinguished by the centrality that they gave to fundraising and lobbying. All three understood the paramount importance of fundraising, placed a great deal of thought and energy into marketing the programs to prospective donors and funders, and developed extensive personal ties with prospective donors. In addition, all three mobilized members of the community to lobby government agencies on the program's behalf, and one, the head of the organization that hosted Coffee House Counseling, even brought the beneficiaries of the program to demonstrate for it. The heads of the host organizations of Mothers to Mothers and of Intensive Care for Alcoholics did not engage in fundraising and lobbying or,

apparently, consider these tasks part of their function.

By 'place,' we mean both the priority the host organization allotted the program and the integration of the program into the workings of the organization. All three programs that survived were top priority in their organizations, so that particular efforts were made to ensure their sustainability. The two programs that did not survive were secondary to the main programs offered by their host organizations. Mothers to Mothers was one of many programs offered by the municipal department that hosted it. Intensive Care took second place to a less expensive, long standing alcohol rehab program in its host organization.

By 'integration' of the program into the host organization, we mean its links with other programs the organization hosts. All three programs that survived were closely linked with other programs in their host organizations, with overlapping staffs and connected activities. In contrast, Mothers to Mothers and Intensive Care functioned more as independent programs in the host organization, with separate staffs and activities. The integration of the program in the host organization may be viewed as an indication of the importance the organization attributes to the program and of its commitment to the program.

With respect to the relationships with the external environment, the three programs that survived benefited from a welter of relationships with elements in the immediate and extended community. All three developed cooperative ties with other agencies in the local community for the provision of their services and coalitions for joint advocacy and lobbying. Our belief is that, in all three cases, the close cooperation with other organizations helped to make the programs a part of the communities in which they operated and more difficult simply to cut or uproot.

In addition, the leaders of all three programs that survived had managed to cultivate

champions in the community, many of them well known individuals with connections and influence, who promoted the program and helped to garner funding for it. Along with this, the heads of these programs' host organizations had also cultivated champions within the governmental agencies from which they sought funding. These were people of influence who became enthusiastic about the programs and fought for them within the relevant government agency.

For neither of the programs that ceased to exist had the heads of their host organizations cultivated anything near the complex of alliances or working relations with other bodies that these three programs had. Nor had they cultivated champions who promoted the programs, either in the community or in the government agency into which they sought to incorporate the program.

Although the above features were presented separately, in accord with the typology that exists in the literature, we can see a great deal of overlap and interconnectedness. In our view, at the center of the picture is the human factor. Contrary to expectations, the program leadership seems to have played a less determining role than the leadership of the host organization in the survival or non-survival of the six programs we analyzed. This may be because, in the cases studied, the leaders of the host organizations were all closely involved in and identified with the programs. We believe that the drive, dynamism, and decisions of the leaders of the host organizations – the actions they took and did not take – were crucial to the fates of the programs.

With this, it must be stated that having a dynamic leadership, which cultivated champions, lobbied and raised funds, showed flexibility and creativity in solving problems, knew how to maneuver in the bureaucratic maze, and gave the program high priority does not

guarantee program survival. This is evident in respect to Group Therapy for Domestic Violence, which shared all the features of the programs that survived, but is no longer operating. This program fell prey to factors outside its control. At the same time as this program was running, three separate bodies -- the Ministry of Welfare, a powerful and well-connected women's organization, and a research center at a major university -- all developed similar programs. Group Therapy for Domestic Violence was crowded out, probably because the NGO that hosted it did not have the clout of these bodies, and also because its leadership was content to let stronger organizations, with greater resources, do the job.

In preparing this talk, my colleague, Professor Shimon Spiro, and I were torn between the desire to discuss each case in detail and the desire to present a general picture. I'm uncomfortably aware that I could do neither fully. I have not conveyed the unique dynamics of each case and the general picture that I've given obviously needs verification.

Professor Spiro and I are now looking forward to the quantitative stage of our study. In this stage we will examine a research model in some 200 social welfare programs randomly sampled from a data base we had built of around 800 programs. The research model is based on the literature and the findings of our case studies. It contains all the variables that the literature associates with sustainability or the lack thereof, as well as features that emerged from the qualitative phase. Our reason for including all these variables, even the ones that did not distinguish the three surviving programs from the two defunct ones, is that six cases are obviously too few to draw firm conclusions from. For those of you who are interested, here's the model.

Initial Conditions

Program

Financial Resources

1. multiple sources of funding
2. length of initial financing
3. strategy for continuing financing

Human Resources

4. quality of staff
5. development of human capital

Project Theory

6. clear definitions of aims, target population, activities and desired outcomes
7. theory of change that links problem to be solved with interventions and desired outcomes
8. knowledge about other programs addressing the same problems
9. uniqueness
10. creation of new knowledge

Program Evaluation

11. evaluated
12. found effective
13. found efficient
14. findings disseminated

Performance

15. of leadership
16. of program (e.g., flexibility)

Dimensions

17. size of project vis a vis size of organization
18. local or national

Host Organization

Characteristics

1. stability
2. flexibility
3. risk taking
4. atmosphere
5. free resources
6. NGO vs. government agency

Attitude towards project

7. supportive
8. champions

Social and Organizational Environment

1. attitude towards problem, target population, and program interventions
2. political legitimacy
3. public support
4. competition with other organizations over resources and fields of operation
5. cooperation with other organizations

Actions Needed to Foster Sustainability

By the Program

Within the program

1. develop and implement fundraising strategies from the beginning of the project
2. apply to various and diverse financing sources
3. build a solid organizational structure
4. develop program's human capital
5. develop a program theory
6. have program evaluated and disseminate the findings

In Host Organization

7. cultivate managerial support for program
8. cultivate program champions

By Host Organization

In the Host Organization

1. link program with other programs in the organization
2. incorporate program budget in regular budget

in the Community

1. market the program
2. build co-operation with other organizations
3. cultivate program champions
4. build a support network
5. cultivate program champions
6. negotiate/ pressure/ lobby to institutionalize the program in the relevant public agency or service
7. create option for a public struggle to sustain the program

Vis a Vis Government Agencies

1. Build up the organizational capacity of the host organization.
2. Maintain supportive contact with program after funding ends.
3. From the very beginning work with host organization on phase out of support
4. Encourage sustainability enhancing activities, such as manpower development and the writing of a manual.

Sustainability Indicators

1. Scope -- degree and form of program continuation: complete cessation, legacy, continuation in the same format, expansion and/or dissemination to other populations and/or places.
2. Size of sustained program: number of clients and employees, budget, years in existence, etc..
3. Program institutionalization at the organizational, community and state

We expect that the quantitative phase will teach us more about the interactions of the many variables and their relative contributions to program sustainability.

Thank You