DOCUMENT RESUME

ED 157 656 RC 010 627

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TITLE Descriptive Social Reporting and Systematic Needs Assessment: Tools for Decision Makers.
INSTITUTION Iowa Agricultural and Home Economics Experiment Station, Ames.
SPONS AGENCY Rural Development Service (DOA), Washington, D.C.
PUB DATE 3 Sep 78
NOTE 37p.; Paper presented at the Annual National Meeting of the Rural Sociological Society (San Francisco, California, September 3, 1978)

EDRS PRICE MF-$0.83 HC-$2.06 Plus Postage.
DESCRIPTORS Accountability; Attitudes; *Community Leaders; Decision Making; Delivery Systems; Economic Factors; Education; Employment; Environment; Health; Housing; Human Resources; Income; Information Dissemination; Information Needs; Methods; Natural Resources; *Needs Assessment; Planning; Policy Formation; *Quality of Life; Recreation; *Research Tools; *Rural Development; Safety; *Social Indicators
IDENTIFIERS *Iowa

ABSTRACT

A research project in nine Iowa counties attempted to show local level decision makers how to use social indicator data to improve quality of life and increase accountability in policy making. Tools presented were descriptive social reporting (a mechanism for organizing descriptive, time series, social indicator data) and systematic needs assessment (focus on data gathering techniques). A framework for descriptive social reporting was developed to encourage use of social indicators in rural development planning. These reports were presented to rural decision makers in a series of county conferences with data from state and federal sources on policy relevant areas of health, education, public safety, housing, income, employment, leisure/recreation, and physical environment. Social indicators for each were related to allocation of funds, structure and utilization of available services, and level of aggregate well being. Social indicators were also given for nonmanipulable factors: human resource, geographical/physical, and economic dimensions. Techniques for eliciting attitudinal data for needs assessment were then described (attitude survey, public forum, key informant) along with the social indicator technique for applying nonattitudinal data. Partly as a result of this project, an information delivery system is to be set up at Iowa State University to meet information needs of decision makers. (RS)

Descriptive Social Reporting and Systematic Needs Assessment: Tools for Decision Makers

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Presented at the annual national meeting of the Rural Sociological Society
San Francisco, California
September 3, 1978.

ABSTRACT

This paper focuses upon a research project conducted in a nine-county area of Iowa. The research project was a pilot attempt to provide social-indicators data to local-level decision makers for use in the policy process. The research project was funded by Title V of the Rural Development Act of 1972. Specifically, two "tools" that decision makers can use in striving to improve quality of life and to improve accountability in the decision-making process are described. The first tool, descriptive social reporting, can be used as a mechanism for organizing descriptive, time-series, social-indicator data. A systems framework was developed to organize data for dissemination to decision makers and to guide decisions regarding 'what data should be collected." The second tool, systematic needs assessment, focuses on techniques that can be used to implement the needs-assessment process. Systematic needs-assessment techniques focus on "how to collect data." Use of these techniques by decision makers is suggested as a mechanism for enhancing the accountability of the decision-making process.

The systems framework for social reporting was used to prepare a series of comprehensive social reports for nine counties in Iowa. These social reports, along with the systematic needs-assessment techniques, were presented in conferences in each county. Response to the conferences was very favorable. The authors propose that a working relationship among decision makers, researchers, and Extension personnel must be developed. A strategy for developing this "working relationship" in Iowa is described.

INTRODUCTION

"Quality of life" is a contemporary topic--one of the most talked about issues in today's world. The dimensions of life quality are literally ubiquitous. A variety of different aspects often are included as constituting the basis of life quality--depending on who is doing the defining: good schools, accessible health services, convenient transportation systems, satisfactory employment opportunities, and an adequate income are among the constellation of variables typifying common definitions of the term. Adding to the complexity is the fact that many broad conceptualizations often include all these attributes--plus many others.

It is logical to assume that we all, by and large, strive for "the good life." For this reason, decision makers at all levels of government view improved quality of life as a central goal; decision makers have the responsibility of developing, implementing, and evaluating social programs that are intended to provide the services that it is hoped will enhance quality of life for as many people as possible. The goal is far easier articulated than achieved; decision makers face the incessant responsibility of allocating scarce financial resources so as to optimize the satisfaction of pressing human needs.

The complexity of the decision-making process is compounded by the fact that public policymaking is in an age of accountability. Accountability

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[1] Journal Paper No. J-9196 of the Iowa Agriculture and Home Economics Experiment Station, Ames, Iowa. Project No. 2142. The research reported in this paper was funded, in part, by Title V of the Rural Development Act of 1972.

can mean that: (1) the rationale for decisions must be explained to citizens (and sometimes defended), (2) services must be available to help meet vital human needs, and (3) available services must be successful at what they were designed to accomplish (i.e., meet vital human needs). The implications of accountability can be succinctly stated: decision makers are concerned about finding better ways to efficiently and effectively deliver services in economically feasible ways. There are at least three major ways in which decision makers can become successfully accountable: (1) involve citizens in the planning process, (2) use systematic strategies and techniques for needs assessment, and (3) systematically evaluate existing programs.

The purpose of this paper is to describe two "tools" that decision makers can use to promote successful accountability. The first tool, descriptive social reporting, can be used as a mechanism for organizing descriptive, time-series, social-indicator data. Although social reporting can be used as a vehicle for monitoring changes in quality of life, as measured by "objective" (nonattitudinal) statistical data and(or) "subjective" (attitudinal) data, the approach described in this paper will concentrate on guidelines for deciding what "objective," secondary data could be collected for needs assessment. The second tool, systematic needs assessment, focuses on techniques that can be used to implement the needs-assessment process. Several techniques considered in this paper can be used to elicit citizen input and involvement in needs assessment. Another technique describes a strategy for using social-indicator data for needs-assessment purposes.

Descriptive social reporting is part of an area of inquiry that has come to be known as social-indicator research. There has been a proliferation of interest in the concept of social indicators among both researchers and policymakers. The thrust of social-indicator research is embodied in the measurement of quality of life. It is widely assumed that indicators of quality of life can play an instrumental part in the planning process. The assumption is based on the belief that more and better information on quality-of-life trends can make an important contribution to the knowledge base upon which decisions are made. The social-indicator research described in this paper was conducted as part of the Iowa Title V program of the Rural Development Act of 1972. The purpose of the research was twofold: (1) to provide rural decision makers with quality-of-life trend data and (2) to demonstrate how these data could be used for needs assessment. A systems framework was developed to organize the data for dissemination to the decision makers. That systems perspective also was employed as a frame of reference for applying the assembled data for needs assessment.

Systematic needs assessment will be discussed in terms of four techniques: the public-forum approach, the key-informant approach, the attitude-survey approach, and the social-indicator approach. The discussion will follow the work of Warheit et al. [1975] and Fear et al. [1977,1978]. Systematic needs assessment can be viewed as part of the larger thrust for systematic decision making, which can be an important component in successful accountability. For instance, by using systematic procedures, decision makers can document how and why decisions were made. In addition, three of the referenced techniques (the public-forum,

key-informant, and attitude-survey approaches) can promote successful accountability by involving citizens in the needs-assessment process.

TOOLS FOR DECISION MAKING:

DESCRIPTIVE SOCIAL REPORTING AND SYSTEMATIC NEEDS ASSESSMENT

Descriptive Social Reporting

Needs assessment is an important part of the overall planning process. If social programs are designed to enhance quality of life, then decision makers must first identify important needs and assign priorities to these needs. Needs assessment is the attempt to delineate social needs. As Fear et al. [1977] have suggested, needs assessment may be defined as a systematic process for documenting policy-relevant needs. There are four major components to this definition:

(1) needs assessment should be systematic (that is, one or more methodical approaches should be used);

(2) needs assessment should be a process (that is, needs-assessment approaches should follow clearly defined steps or stages);

(3) needs assessment should focus on policy-relevant needs (that is, identified needs should be those that decision makers may attempt to meet through social policy); and,

(4) needs assessment should lead to documentation (that is, identified policy-relevant needs should be defined as such through objective and defensible reasons).

Social indicators can be used for needs assessment. Warheit et al. elaborate:

"The social indicators approach to needs assessment is based primarily on inferences of need drawn generally from descriptive statistics found in public records and reports. The underlying assumption of the approach is that it is possible to make useful estimates of the needs and social well-being of those in a community by analyzing statistics on selected factors . . . . As such, these statistics are regarded . . . to be indicators of need . . . . These factors . . . can be considered as social indicators and, when analyzed as constellations, they can provide important information about a community and the needs of those in it [1975, p. 47]."

One framework for the utilization of social indicators in the needs-assessment process is outlined by Warheit et al.[2] But the question is then: What are social indicators? One definition with substantial merit has emerged from the myriad discussions regarding this question. Land [1971] suggests that social indicators are variables that measure the social processes that

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[2] Social-indicator data may be used, among other ways, to measure and monitor social conditions. Data of this sort often have been published in social reports. These documents typically represent data books that include a myriad assortment of social-indicator data (i.e., social statistics) measuring a broad array of policy-relevant areas, such as health, education, housing, and income. The dissemination and organization of this social-indicator data is descriptive social reporting. Descriptive social reporting is one aspect of social-indicator research that can make an immediate contribution to the planning process. The more technical social-indicator modeling activities are not as readily utilized in the planning process.

occur within social systems. This definition stresses the need to: (1) view social indicators as time-series measures, (2) consider the interrelationships among sets of social indicators, and (3) develop meaningful social-system frameworks that focus on social process [Land, 1975].

The social-systems framework that will be described in this paper has been used to organize social-indicator data into descriptive social reports. This framework for descriptive social reporting was developed as part of a design for encouraging the use of social indicators in rural development planning [see Fear et al., 1978; Carter, Klonglan, et al., 1977; and Klonglan et al., 1976]. Nonattitudinal, census-type, secondary data were organized and disseminated to rural decision makers using the framework [e.g., see Carter, Ganey, et al., 1977]. As will be discussed later in this paper, the framework also can be employed as a means for applying the organized data for systematic needs assessment.

The components of the framework involve macrosociological factors that affect social well-being. Specific consideration is given to key factors that decision makers can manipulate to help bring about desired outcomes. Attention also is devoted to nonmanipulable factors (that is, factors that affect aggregate well-being, but are largely out of the decision makers' control).

As Cordes et al. [1975] have suggested, social services are intended to have an impact on quality of life. Services are implemented so that people can use them to meet their needs. One of the primary functions of various policy subsystems, such as the health and education subsystems, is to mobilize requisite financial and human resources so that services can be delivered to those who are in need.

Decision makers can mobilize services to influence social well-being. But the human condition is such that needs are unlimited, whereas the financial resources that would be required to create and maintain all the desired services are limited. Therefore, it is imperative that services efficiently and effectively meet high-priority needs if they are to have an optimal impact on social well-being. Three interrelated features of service-delivery systems, which are important to take into account during needs assessment, often can be measured by nonattitudinal, census-type data: (1) the allocation of financial resources used to fund services; (2) the structure of services (i.e., professional personnel and facilities) that has been created via the allocation of funds; and (3) the utilization of available services (i.e., the extent to which existing services are over- and under-utilized, the geographic and economic accessibility to services by people in need, and the equitableness of service use by various target groups). Each of these features can, and should, be measured on a time series. An illustration of the interrelationship among the three components of the service-delivery system, and their connection to well-being, is presented in Figure 1.

(Figure 1 about here)

Forces or factors typically outside the realm of the decision makers' control also theoretically can affect well-being through their impact on the service-delivery system. Crawford [1975] comments:

> Within a community, ecological, demographic, economic and other considerations are . . . forces that will affect the community's mix of services. Whether the population is dispersed or concentrated, whether the population is predominantly young, old, or

middle-aged, whether the population is increasing or decreasing, and the tax producing and type of employment in local industry will all undoubtedly make for differences in the array, magnitude, and distribution of services.

These nonmanipulable factors must be taken into consideration when planning, but decision makers have little control over these factors. For instance, most decision makers cannot directly control population change, the rural-urban distribution of the population, the composition of the population by age, climatic conditions, or general economic vitality. But each of these factors can have implications for the type and extent of social services offered. A sharp decline in population size could have negative consequences on the local tax base, and, in turn, result in termination of many previously available services. On the other hand, rapidly growing towns can experience severe overutilization of services occurring when the demand for existing services--and in many instances the need for new services--outgrows the quantity and variety of available services. The aggregate level of well-being can be affected through the impact of these phenomena on the service-delivery system. Several important nonmanipulable factors, which together constitute a resource base, are described in Table 1. The interrelationship between the nonmanipulable and manipulable factors in terms of impact on aggregate well-being is portrayed in Figure 2.

(Table 1 and Figure 2 about here)

The systems framework described here was used as a frame of reference for organizing the data included in a series of descriptive social reports [e.g., see Carter, Ganey, et al., 1977]. The data were presented in a time-series at the county level. County-level data were aggregated and

also presented for the multicounty and state levels. Each of the social reports included 12 chapters. The initial chapter outlined the potential applicability of social-indicator data for needs assessment and also provided an overview of the systems framework that would be used to organize the data [Carter, Ganey, et al., 1977:1-17]. More than 200 indicators were presented in the following 11 chapters. One chapter was devoted to each of eight policy-relevant areas: health, education, housing, public safety, income, employment, leisure and recreation, and the physical environment. In each of these eight chapters, social indicators were reported for each of four components: (1) the allocation of funds for services in the policy area, (2) the structure of available services in the policy area, (3) the utilization of available services in the policy area, and (4) the status (level) of aggregate well-being in the policy area. The remaining three chapters included data on the resource base. Each chapter included social indicators for one of the three dimensions: (1) the human resource dimension, (2) the geographical/physical dimension, and (3) the economic dimension. All the data in the reports were drawn from federal or state sources. Several criteria were used to select the indicators included in the data books. During the research, interviews were conducted with rural decision makers (N=32). One of the topics considered was the extent to which they had used social-indicator data for planning. This information was used to help select the social indicators that appeared in the data book. Other criteria were:

(1) Was the indicator frequently mentioned in other social-indicator data books?

(2) Does the indicator seem to possess face validity? (i.e., Does the indicator measure the general concept that it purports to measure?)

(3) Are data for the social indicator available at the county level?

(4) If the data are available, were the data timely? (i.e., Are they of the post-1970 variety?)

(5) If the data were available and timely, could the data be portrayed in a time series? (i.e., Data should be available for at least two time periods so as to permit the anlaysis of change) [Carter, Klonglan, et al., 1977, p. 15].

Systematic Needs-Assessment Techniques

The descriptive social reports were disseminated to rural decision makers (N=185) at a series of county-level conferences. A needs-assessment theme was emphasized in the 1-day, 5-hour conferences. A conference workbook on needs assessment was prepared and used as the primary teaching device [see Fear et al., 1977]. An overview of the workshop agenda is presented in Table 2. Four complementary techniques for undertaking systematic needs assessment were among the topics considered in the workbook. As discussed previously, three techniques (the attitude-survey, public-forum, and key-informant approaches) were presented as ways to elicit attitudinal data that could be used for needs assessment. The social-indicator approach was presented as a technique for applying nonattitudinal, census-type data in needs assessment. Conference participants were given a sketch of the steps for each needs-assessment approach. Several of the salient advantages and disadvantages associated with each approach also were communicated. The lecture and discussion on these techniques stressed some of the "do's and don'ts" associated with correct implementation.

The past experiences of conference participants were drawn into the presentation to highlight key points.

(Table 2 about here)

The participants were encouraged to consider using several needs-assessment techniques in combination. The three attitudinal techniques and the nonattitudinal, social-indicators technique can complement each other in providing better information for decision-making purposes. For example, use of the social-indicators approach might lead one to conclude that additional services in one of the policy areas (e.g., education) should be offered. However, conclusions based on "objective" data do not tell the decision makers whether people would avail themselves of the new services. Thus, decision makers may want to use one of the attitudinal needs-assessment approaches to answer this question before allocating funds to create new services. Another example of the complementarity of these techniques concerns the availability and timeliness of objective data. Secondary data useful to a decision maker may not be available or may be outdated. The basic techniques of the attitude-survey approach can be utilized to collect needed data. Finally, a needs-assessment study using the social-indicator approach could be completed, and this information then could be used in a public forum to generate discussion and collect information on people's attitudes toward the findings.

Not only are these four systematic needs-assessment techniques complementary in nature, but the framework for descriptive social reporting also complements the four needs-assessment techniques. Recall that the descriptive social-reporting framework was described as a "tool" for organizing data, and the four systematic needs-assessment techniques were described as a "tool" for collecting data. That is, the needs-assessment

techniques tell the decision maker how to collect data, but not what data to collect. The framework for descriptive social reporting helps the decision maker decide what types of data are needed.

Conference participants were shown how the social reports were organized and then were shown how the systems framework could be employed for needs-assessment purposes. A three-step procedure for accomplishing this objective is outlined in Table 3. This procedure was used by decision makers at the conference to work through an example of the social-indicator approach to needs assessment. As the reader will note, the decision maker is required in Step 1 to use the "systems thinking" of the social-reporting framework to select various social indicators for subsequent analysis. This same "systems thinking" could be used to decide what questions to pose at public forums, to key informants, or in a questionnaire for an attitude survey. That is, it would be important for decision makers contemplating the initiation of new services, increasing existing services, or terminating an existing service to understand constituents' attitudes toward that service. Do people think that: (1) the amount of financial resources allocated to that service system should be changed, (2) the structure of services should be changed, (3) services need to be more accessible to encourage utilization, and (4) the current level of well-being warrants a change in the service system?

(Table 3 about here)

How did conference participants evaluate the descriptive social-reporting framework and the presentation of the systematic needs-assessment techniques? Workshop participants were asked to complete an evaluation questionnaire at the close of the program. The evaluation questionnaire

was created by the project staff to provide a mechanism for gauging the participants' immediate reaction to the day's agenda. The data generally show a favorable response. A very high percentage (93.0%) of the participants felt that the social report would be useful for planning. Data also suggested that many decision makers understood and saw the relevance of the systems framework. For example, less than 15% of the participants indicated that the presentation on how to use social indicators for needs assessment was unclear to them. In addition, more than 85% of those who attended felt that the use of the social-indicators approach could help them become more effective decision makers. Concerning the attitudinal approaches, 97.4% felt that the presentation of the survey, key-informant, and public-forum approaches offered good learning experiences. Another indication of the usefulness of these attitudinal approaches was that 100% of the participants felt that decision makers need to learn how to get citizens involved in the planning process.

In summary, decision makers at the conferences saw the relevance of, and need for, training in use of the framework for descriptive social reporting and systematic needs assessment. The question is how can researchers, Extension personnel, and decision makers work together most effectively to utilize these "tools" for enhancing quality of life?

DEVELOPING A WORKING RELATIONSHIP BETWEEN RESEARCHERS AND DECISION MAKERS: HOW TO ENCOURAGE USE OF THESE TWO TOOLS FOR DECISION MAKING

Fear et al. [1978] discuss how Janowitz's [1970] model for applied sociology was used as a frame of reference for the research described here. Two important features of the project that reflect this model were the use of decision makers' input during the early stages of the research and the close working relationship that was established with state,

regional, and local Extension staff. Janowitz suggests that researchers adopt an enlightenment model that rejects the notion of finding definitive answers to policy questions. Rather than searching for definitive answers, researchers should seek to "enlighten" decision makers to potential strategies, techniques, or approaches for solving planning problems. Further, the researcher must engage in dialogue with decision makers. Such dialogue has been a constant feature of the research project described in this paper.

The research project was a pilot project for a designated nine-county area in Iowa. One of the first activities undertaken as part of the project was to interview a sample of decision makers in the Iowa Title V rural development region. The purpose of the interview was to obtain a better understanding of the decision-making process and structure at the local level, as well as to identify some of the problems, concerns, and needs shared by local decision makers.

In addition to decision makers, state-level Extension sociologists, regional (multicounty) development specialists, and county Extension directors played vital roles in the evolution of the project. Extension personnel helped to clarify and encourage the achievement of project goals. They also assisted in the dissemination of the information developed by the project staff to audiences in the field.

Such interaction among researchers, Extension personnel, and decision makers tremendously enhanced the quality and utility of the research activities. Negotiation among these groups is essential to quality-of-life and social-indicator research. A system to institutionalize this working relationship will be put in operation in 1978.

An Iowa Information System: CD-DIAL

The pilot project described in this paper and another Iowa State University pilot project, which involved collecting attitudinal data in the Iowa Title V region,[3] were designed as initial steps in creating an information system at Iowa State University. The development of the system is being sponsored by Title V of the Rural Development Act of 1972.

Impacts from these two pilot projects on the communities and counties in the Title V region continue to be felt. As the publications of the two projects were disseminated, requests for assistance from both Extension personnel and researchers were generated. These requests came from agency personnel, elected officials, and community leaders.

Two general types of requests were generated. First, there were requests for examining, packaging, and interpreting secondary data, such as census and vital statistics. With the 1980 population census close at hand, this type of request probably will continue. Second, there were requests for assistance in conducting community surveys. The expertise

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[3] Primary data were gathered from random samples of residents in 27 communities in the Iowa Title V region as part of the "Good Community Project." The project was directed by Dr. Willis J. Goudy. Data derived from mailed questionnaires included information on the perceived quality of services and opportunities available at the local level. These data have been used in a number of planning contexts. In addition, information regarding questionnaire construction and data-collection techniques has been shared by project staff with Iowa decision makers outside the pilot region. For more details, see: Goudy, 1975a; 1975b; and Goudy and Wepprecht, 1977.

requested has included questionnaire construction, sampling designs, interviewing techniques, and data interpretation.

Thus, there is a need to develop a delivery system for meeting the information needs of decision makers. In the past, these information requests have been dealt with on a "time-available" basis. Because there has not been a central office to handle these requests, most individuals did not know where to seek assistance.

For these reasons, a campus-based information-delivery system has been proposed. The purpose of the system, named the Community Development Data, Information, and Analysis Laboratory (CD-DIAL), is twofold: (1) to collect, analyze, and disseminate information derived from secondary sources for planning purposes and (2) to create, analyze, and disseminate primary data for planning purposes. The Laboratory will serve as a repository for secondary and primary data. Laboratory staff will commence operation during the 1979 fiscal year. Requests for data and assistance by Iowa decision makers will be channeled to Laboratory staff through county and area Extension personnel.

CONCLUSION

The recent popularity of social indicators reflects a widespread interest in optimizing objectivity and rationality in the complex process of public policymaking. One specific contribution of the research described in this paper is associated with the broader concern for making better use of existing statistical information. As Anderson and Kravits [1978] have commented, it can be safely concluded that many policy decisions are made without the analysis of relevant, quantitative data.

Furthermore, the suggested needs-assessment techniques represent potential avenues for successful accountability in public decision making.

The Community Development Laboratory briefly described in this paper constitutes a general approach whereby a land-grant institution, through its research and Extension components, can provide the kinds of information and services on an ongoing basis that could "make a difference" in the quest for accountability.

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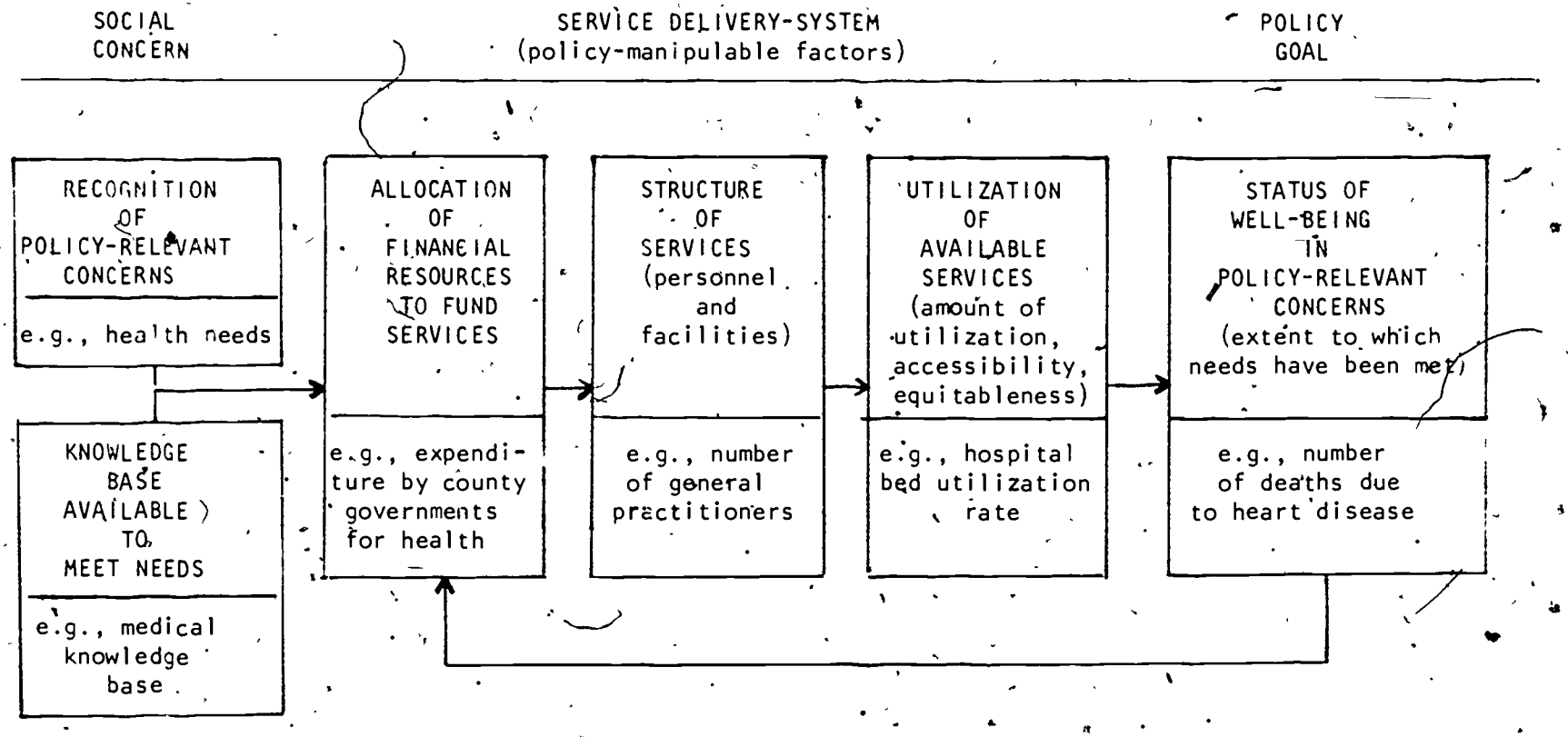
Figure 1. A systems framework for measuring key policy-manipulable factors that affect social well-being.*



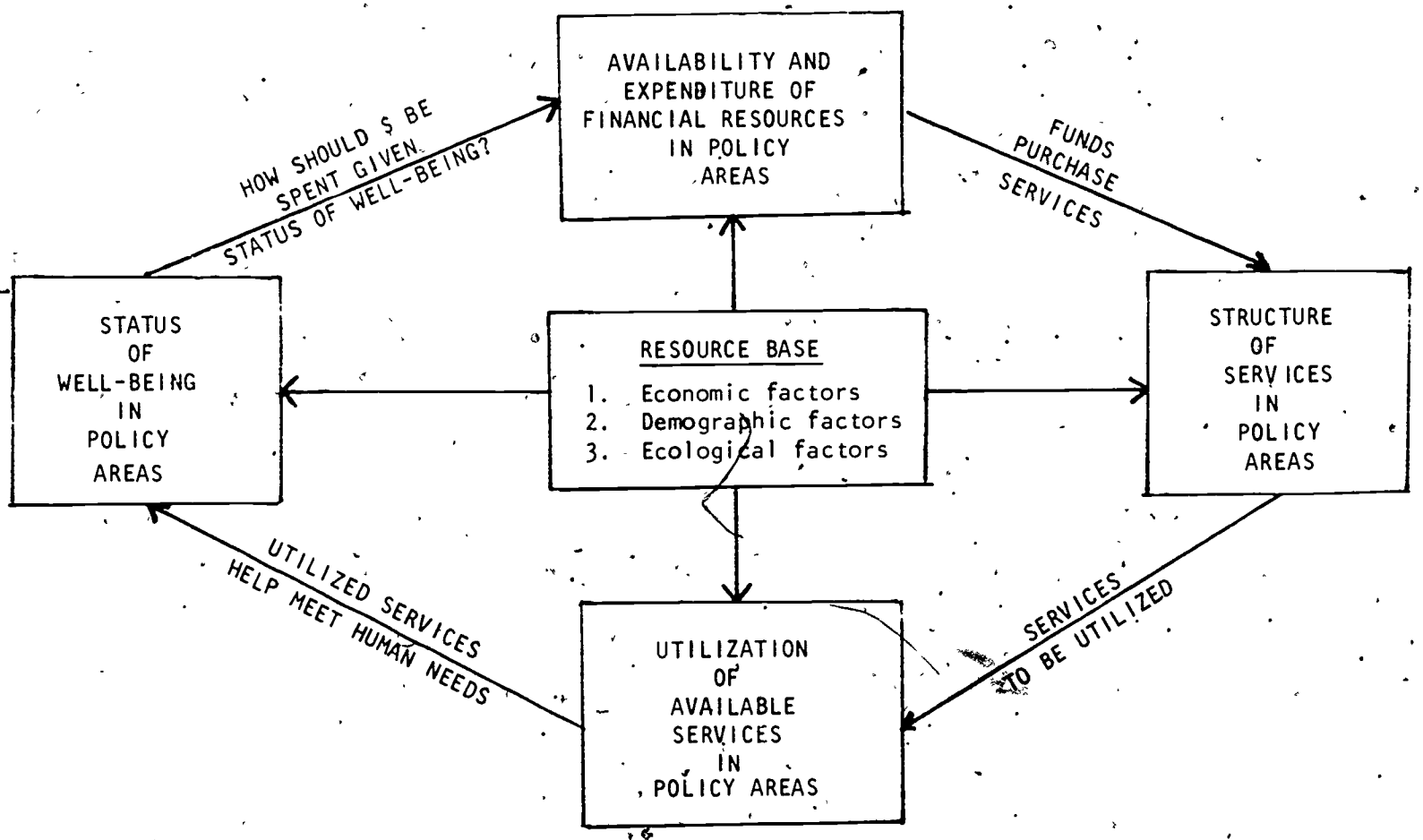
*The health subsystem is used as the basis for the different examples presented in each box.

Table 1. A systems framework for measuring key nonmanipulable factors that affect well-being: The resource base

NONMANIPULABLE FACTORS	DIMENSIONS OF THE RESOURCE BASE	ILLUSTRATIVE SOCIAL INDICATORS
1. DEMOGRAPHIC FACTORS	1. HUMAN RESOURCE DIMENSION	
	Population Composition	Population under age 18
	Population Distribution	Population density
	Population Change	Net migration rates
	Living Arrangements and Family Structure	Rate of marital dissolutions
2. ECOLOGICAL FACTORS	2. GEOGRAPHIC/PHYSICAL DIMENSION	
	Natural Resources	Value of mineral production
	Climatic Conditions	Total precipitation in inches
	Organization of the Land	Percent of land as harvested cropland
3. ECONOMIC FACTORS	3. ECONOMIC DIMENSION	
	Government Sector	Per capita tax revenue
	Transportation and Communication Sector	Percent occupied housing units with a telephone
	Agricultural Sector	Average value of ag products sold
	Commercial and Industrial Sector	Per capita retail sales

Figure 2. A systems frame of reference for the macrosociological factors that affect social well-being.*

Policy Areas: Health, Education, Public Safety, Housing, Employment, Income, Physical Environment, and Leisure and Recreation



*Changes in the resource base can affect the policy areas of health, education, income, etc., and, in turn, changes in the status of well-being for a policy area can affect service delivery and status of well-being for other policy areas.

Table 2. Overview of the workshop agenda (Fear et al., 1978)

SEGMENTS	KEY TOPICS	TIME-FRAME (in minutes)
Purpose of Workshop	1. Purpose of RDA of 1972--Title V 2. Overview of interviews with local decision makers; some findings from the interviews 3. Overview of agenda	25
SEGMENT 1: An Overview of the Needs-Assessment Process	1. The importance of human needs in the policy-making process 2. Definition of needs assessment 3. Definition of planning 4. The place of needs assessment in the planning process 5. The significance of citizen input for needs assessment	75
SEGMENT 2: The Survey, Key-Informant and Public-Forum Approaches for Needs Assessment	1. Sketch of three systematic techniques for eliciting effective citizen input in needs assessment 2. Advantages and disadvantages associated with each technique	60
SEGMENT 3: The Social-Indicator Approach for Needs Assessment	1. Overview of the social indicator approach 2. Distribution of "Social Report" 3. Overview of how report was prepared 4. Overview of how data in the report (and other data books) can be used for needs assessment 5. Illustration of how data in the report can be used for needs assessment	105

Table 2. (Continued)

SEGMENTS	KEY TOPICS	TIME-FRAME (In minutes)
SEGMENT 4: The Extension Service as a Source of Assistance Following the Workshop	1. Kinds of assistance offered 2. Who to contact	15
Formal Evaluation of the Workshop by the Audience	Completion of an evaluation questionnaire by participants	15

Table 3. How to implement the social indicator approach for needs assessment: A three-step process (presented to conference participants in conjunction with the distribution of the social indicator data books).

AT ISSUE	STEP	PROCEDURES
What do you want to know?	STEP 1	1. In what *area of well-being* are you concerned (for example, health)?
Where can the information be found in the report?		2. What is your *specific focus of interest within that area* (for example, the need for additional medical services)?
		3. *What would you like to know about your county* to help you decide (or assess) whether this need exists? Depending on the issue under scrutiny, you may want to focus your interest on: --The *resource base* (for example, the population composition by age) --The *level of well-being* (for example, the infant mortality rate) --*Available* (existing) *services* (for example, the number of hospital beds, number of doctors) and *utilization of services* (for example, the number of hospital admissions, number of patients served) --*Financial resources* (for example, dollars allocated by the county government for health)
		4. *Refer to the Social Report.* The first page of Chapters 2-12 presents a list of the indicators included in the respective chapter. For example, if your area of concern is health, you'll want to turn to the first page of the Health Chapter and look specifically at the indicators included in that chapter.

Table 3. (Continued)

AT ISSUE	STEP	PROCEDURES
		5. *Make a list of the page numbers* where you have found social-indicator data that may be used to measure what you want to know about your county.
Removal of appropriate data from report Analysis of data on an indicator-by-indicator basis.	STEP 2	1. *Write out the title of the table* for each indicator you have selected in #5 of Step 1. 2. For each indicator, *pull the appropriate data out of the report.* Organize the raw data and percent change data for each indicator. 3. What are your findings from the analyses of each indicator? *Make an assessment* of what the data seem to be suggesting. Pay particular attention to: --The conditions that the data describe --The direction of change (Are things getting better or worse?) --The intensity of change (How much better or worse do things appear to be?) --How your county compares with the multi-county region and/or state in terms of changes in conditions.
What are some overall interpretations that can be made based on the data analysis?	STEP 3	1. *Make a list of the findings* you derived from the analysis of data (from #3 of Step 2). 2. *Look at all the findings* from a comprehensive perspective. Write down what your overall interpretations of these findings are. What are your final conclusions?