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Global Change and Indicators of Social Development

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Global Change and Indicators of Social Development

Abstract
Knowledge-based intervention has been a hallmark of community practice since the turn of the last century. Indeed, the social survey movement of the 1900s was a direct outgrowth of efforts on the part of community practitioners to systematically: 1) identify the nature, extent and severity of new and emerging social needs in their communities; 2) organize people and institutions to respond more effectively to those needs; and 3) establish baseline measures against which intervention successes and failures could be assessed (Zimbalist, 1977). Even the renaming of one of the profession's leading journals of the day, Charities and Commons, to The Survey illustrates the importance that practitioners assigned to the role of scientific inquiry for advancing practice. Mary Richmond's Social Diagnosis (1917) offered further reinforcement of the powerful relationship that practitioners recognized to exist between knowledge-based intervention and the realization of more effective outcomes. Today, of course, community practitioners all over the world seek to incorporate rigorous approaches to needs assessment, planning, program development and evaluation in their work with communities and other social collectivities (Andrews, 1996; Balaswamy & Dabelko, 2002; Chow & Coulton, 1996; Conner et al., 1999; Drummond, 1995; Johnson, 2002; Sawicki & Flynn, 1996; Schultz et al., 2000; Telfair & Mulvihill, 2000; Wong & Hillier, 2001; Zackary, 1995).

Comments
Chapter 28

GLOBAL CHANGE AND INDICATORS OF SOCIAL DEVELOPMENT

Richard J. Estes
University of Pennsylvania

Introduction

Knowledge-based intervention has been a hallmark of community practice since the turn of the last century. Indeed, the social survey movement of the 1900s was a direct outgrowth of efforts on the part of community practitioners to systematically: 1) identify the nature, extent and severity of new and emerging social needs in their communities; 2) organize people and institutions to respond more effectively to those needs; and 3) establish baseline measures against which intervention successes and failures could be assessed (Zimbalist, 1977). Even the renaming of one of the profession’s leading journals of the day, Charities and Commons, to The Survey illustrates the importance that practitioners assigned to the role of scientific inquiry for advancing practice. Mary Richmond’s Social Diagnosis (1917) offered further reinforcement of the powerful relationship that practitioners recognized to exist between knowledge-based intervention and the realization of more effective outcomes. Today, of course, community practitioners all over the world seek to incorporate rigorous approaches to needs assessment, planning, program development and evaluation in their work with communities and other social collectivities (Andrews, 1996; Balaswamy & Dabelko, 2002; Chow & Coulton, 1996; Conner et al., 1999; Drummond, 1995; Johnson, 2002; Sawicki & Flynn, 1996; Schultz et al., 2000; Telfair & Mulvihill, 2000; Wong & Hillier, 2001; Zackary, 1995).

This chapter discusses the contribution of social indicators, social reporting, and social indexes to community practice. The chapter is divided into two parts: Part I discusses the development of social indicators, social reporting, and social index construction from a historical perspective; Part II discusses the contribution of these innovations in community-focused social measurement from a contemporary perspective. The concepts discussed in both parts of the chapter are illustrated with examples drawn from
community practice in the United States and other countries. The chapter also contains links for practitioners to some of the most important sources of local, national and international social indicator data.

PART I:
SOCIAL INDICATORS AND SOCIAL REPORTING
IN HISTORICAL PERSPECTIVE

Social indicators, social reporting and the development of composite measures of social progress have a long history in American social science. Indeed, the earliest efforts in all three of these fields began in the United States--initially as part of the work of the Hoover Committee on Social Trends—but, subsequently, as part of the country’s assessment of the impact of its space program on American life. President Johnson’s “Great Society” program of the 1960s with its emphasis on the attainment of five national goals reinvigorated the social indicators effort and, in turn, forcefully linked the goals and processes of development to specific measurable outcomes.

One of the earliest contributions toward the development of a coherent conceptual framework for the emerging social indicator, social reporting, and social indexing “movements” was that made by Raymond Bauer (1966). In his edited volume on Social Indicators, Bauer offered a comprehensive framework for integrating analyses which, until that time, largely had been undertaken independent of one another, e.g., trend analyses of changes over time in the health, education, transportation, housing, labor, urban development, and other sectors of public activity. Simultaneously, Daniel Bell (1966) published Toward A Social Report in which he laid out the conceptual framework for undertaking and reporting to policy makers and the general public analyses of critical national trends. Wilbur Cohen (1968) subsequently applied the analytical principles specified by Bauer and Bell to the work the U.S. Department of Health, Education and Welfare (USDHEW, 1969) in much the same way that Robert McNamara was applying the principles of goal-focused planning, cost-benefit analysis, and task-centered project management to the work of the U.S. Defense Department.

Other early pioneers in these movements included the economist Donald Mc Granahan (1972) who, in his work with the United Nations Research Institute on Social Development (UNRISD) in Ge-
neva, created a system of statistical *congruencies* for understanding the stages through which poorer countries moved in their efforts to achieve progressively high levels of social and economic development. Campbell, Converse & Rodgers (1976) introduced qualitative assessments of life quality, including subjective *satisfaction with life measures*, into a field which, until that time, was dominated by approaches that used only objective measures to assess changes in development progress (Land & Spillerman, 1975; Morris, 1977; Streeten, 1981).

At the same time that the pace of work on social indicators and national systems of social reporting was quickening in the United States parallel trends were occurring in Europe. Most notable among these efforts was the index construction work of Drenowski & Wolf (1966). One of the early accomplishments of both the U.S. and European efforts was the establishment on the part of the United Nations of what was to become a vast archive of easily accessible statistical data relating to the social and economic development of its member states (United Nations, 1975).

Unfortunately, the election of successive conservative governments in the United States brought the social indicators and social reporting movements to a virtual halt in that country, albeit work on the international dimensions of development was continued by individual researchers. The effort continued uninterrupted, though, throughout much of Northern and Western Europe with the result that, today, the contributions of European social scientists to the measurement of national and international social progress are quite substantial (Berger, et al., 1998; Berger-Schmitt & Jankowitsch, 1999; Hagerty, Vogel, & Moller, 2002; Noll, 1996; Veenhoven, 1996; Zumbo, 2002).

**PART II:**
SOCIAL INDICATORS AND SOCIAL REPORTING IN CONTEMPORARY PERSPECTIVE

Monitoring and assessing changes in national and international development involves three discrete arenas of activity of interest to community practitioners: 1) social indicators; 2) social reporting; and 3) the construction of composite measures of social development. Fortunately, considerable work already has
been accomplished in each of these areas from which practitioners can draw ideas for application to their unique community planning, research and organization needs.

Social Indicators

Social indicators are two things: 1) they are **direct measures** of phenomena they purport to measure (e.g., infant mortality rate, educational attainment level, divorce rates, the number of deaths or injuries associated with civil protest actions); and 2) they are **indirect measures** of other, always more complex, phenomena that cannot be measured directly, or at least cannot easily be measured directly (e.g., infant mortality rate often is used as a proxy for the quality of local or national health systems, divorce rate often is used as proxy for “family stability,” and the number of deaths and injuries incurred in civil protest actions often is used as a proxy for “societal stability” or “societal cohesion.” Thus, as direct measures of phenomena of interest to community practitioners, social indicators can serve as powerful measures of changes in development levels over time. When selected carefully, social indicators also can serve as powerful measures of phenomena that are too complex or would be too expensive to measure directly (e.g., the comparative effectiveness of alternative service systems, hidden crime rates, not yet fully seen but emerging community needs, etc).

[Insert Chart 1 about here]

Social indicators fall into three basic categories: 1) **leading indicators** which tend to show the direction of future economic or social activity, e.g., increases in social cohesion in response to serious external threat; 2) **coincident indicators** which tend to track social and economic cycles with comparatively little time lag time, e.g., increases in crime rates during periods of growing unemployment or poverty; and 3) **lagging indicators** which measure how the economy or society was rather than how it is or will be, e.g., declines in social spending during periods of economic expansion. Chart 1 (the prevalence of global poverty for major world regions) and Chart 2 (childhood poverty rates for selected economically advanced societies pre- and post-public transfers) provide examples of lagging social indicators.

[Insert Chart 2 about here]
All three types of social indicators can contribute to the advancement of community practice, particularly in situations for which valid, reliable and timely data are needed (e.g., needs assessment and planning) or for which the identification of pre-intervention baseline performance measures are desired (e.g., goal-setting, pre- and post-intervention assessments, cost estimation, etc.). Social indicators also are used to assess changes over time in the performances of even larger systems including counties, states or provinces, nations and the world-as-a-whole.

Certain scientific criteria must be met in the using social indicators for knowledge-based practice—the same criteria that apply to the use of indicators across all fields of scientific inquiry:

1. Indicators must have an a priori clear and mutually agreed upon operational definition. These definitions must be in place prior to the collection of any data and, in any case, before the beginning of any analysis, i.e., infant mortality rate, for example, can only refer to the number of children per 1,000 live-born who die sometime between birth and before reaching their first birthday. Variations in this operational definition cannot exist and least of all in the context of the same or related analyses.

2. Indicators must validly measure what they purport to measure, i.e., per capita income should measure all sources of income to which the individuals have access (including public transfers and income from illegal sources) and not just those income sources that are reported by employers to public tax authorities.

3. Indicators must be reliable, i.e., the measures should produce the same results no matter who is doing the measuring (e.g., studies of access on the part of women to contraception or to abortion services should produce the same results when the same concepts and the same methods are applied to the same population).

4. Indicators must be representative of the population(s) for measures of the phenomena that are being sought (e.g., the degree of social cohesion or social cleavage among the residents of a given neighborhood).
5. Indicators must be **timely**, i.e., they must reflect the time period(s) of interest to the practitioner (e.g., specific days, weeks, months or years). Measure that are too old or otherwise do not reflect the time periods under consideration are of little use for purposes of assessing time-related social progress.

6. Indicators must have the capacity to be **aggregated and disaggregated** at various levels of analysis (e.g., by year, for particular communities or neighborhoods, or for particular subgroups on which the indicators are based--gender, age, racial, ethnic, religious, nationality, political groups, etc.)

7. Indicators must be **easily interpreted**. Highly esoteric indicators that are understandable by only a small cohort of specialists rarely have use in community practice (e.g., **racial-ethnic fractionalization index scores**).

8. Indicators must be **available** for purposes of analysis, i.e., practitioners must be able to secure access to the indicators of particular interest to their communities. In situations were administrative, classified, or commercial data are needed, then, prior arrangements must be made to secure access to such data.

9. To be useful in helping to guide community practice, indicators must reflect **changes over time** (e.g., changes over time in the quality of plumbing, housing, emergency services, communications and other types of physical and social infrastructure available to the residents of particular communities).

10. The choice of indicators must have **policy relevance**, i.e., their collection and analysis must contain the potential for advancing different policy outcomes that those identified in the absence of such data.

11. The indicators selected to guide community practice must have the **capacity to reflect change(s)**, i.e., social progress or failure, over time. Static indicators, or indicators that do not have the capacity to reflect change(s) over some designated time period, have little use in community practice.
Community workers practicing in economically advanced countries are fortunate in having a vast array of high quality, socially relevant, indicators available to them. The capacity for collecting still other indicators also exists for these practitioners and, often, existing indicator collections can be enlarged by many of the same data collection organizations once the need for such indicators manifest themselves (e.g., selected governmental, and non-governmental organizations including universities and commercial organizations that undertake public opinion polls, neighborhood surveys, and the like). Practitioners in less economically advanced countries (and less economically advanced communities in well-off societies), unfortunately, have fewer established indicator sources available to them and, in many case, have fewer opportunities for collecting representative indicators--albeit such efforts often are possible at the level of single neighborhoods, communities, cities or other comparable levels of political organization.

Research staff of local universities often cooperate with community practitioners in collecting and analyzing data in which both groups share a common interest.

[Insert Chart 3 About Here]

Chart 3 identifies major U.S. and international social indicator collection and dissemination organizations. The chart includes both public and private organizations as well as highly specialized (e.g., e.g., Amnesty International, SIPRI, the Office of International Policy of the U.S. Social Security Administration) and more broadly focused organizations (e.g., the U.S. Department of Labor, the U.S. Department of Health and Human Services). Nearly all of the data provided by these organizations are updated annually. Some organizations update their most sensitive indicators even more frequently (e.g., the U.S. Labor Department, the Centers for Disease Control, and so on).

Almost all of the data available from these organizations may be obtained either without cost or, in a few cases, for only a nominal charge. Given their current electronic format, in most cases data available from these organizations can be disaggregated at various levels of analysis of interest to particular users (e.g., by census tracts, neighborhoods, income groups, and so on). Data disaggregation for more detailed levels of analysis, however, often is possible with very large publicly gathered data sets but, typically, a
fee is imposed for highly detailed levels of disaggregation, i.e., within communities data for different combinations of age, gender, racial, income, religious or other types of groups. Unlike the majority of national data sets, however, the social indicators contained in most international data sets rarely can be disaggregated at a level lower than the nation-state, albeit reports for extensively used indicators often can be requested (e.g., sub-national data for particular age, gender, or income groups).

Comparable data collection organizations and social indicator data sets are available from major public and private data collection bodies located in virtually all economically advanced countries and in many larger developing countries as well. Many international organizations also collect and disseminate highly specialized cross-national indicators on a systemic basis. In virtually all cases, data collected at the national and international levels may be used for cross-national comparative purposes but, always, one must check carefully for comparability of definitions and data collection methods (including time periods) across all the nations included in the analysis.

Social Reporting

As already noted, the international social reporting movement began at the same time as the international social indicators movement. Indeed, a very large reason why social indicators were collected at all was for their use in preparing social reports.

In their simplest form, social reports are no more than collections of social indicators that are put together between the two covers of a book. The *Statistical Abstracts of the United States* is a good example of a highly useful but primarily descriptive approach to the collection, reporting and dissemination of time-series data related to virtually all aspects of collective life in the United States. Today, virtually every country of the world has a similar series of statistical reports that track critical social, political and economic changes taking place in their society over time. Increasingly, these indicator collections are available in both print and electronic form, e.g., via CD-ROM or for downloading from the internet. Nearly all of these publicly-gathered and disseminated data now are available to users without charge.
In their more sophisticated form, national social reports include a critical analysis of the nature, sources and meaning of the broad-based changes that are taking place within their society. Many of these reports are far-reaching in conception indeed and, when implemented carefully, can serve as the basis for realigning public policies toward the attainment of new societal goals (e.g., the Swedish, British, German, Italian and Hong Kong national social reports). The tradition of European social reporting is particularly noteworthy with respect to its emphasis on the use of data to inform socially sensitive changes in administrative and legal policies.  

The situation of social reporting in the United States is at considerable variance with that found in other economically advanced countries. Although the United States collects and reports vast quantities of socially-relevant data, the country’s central government does not publish a formal *state-of-the-nation* social report. Rather, a plethora of highly specialized analyses emanate from departments and agencies of the central government as well as from an array of researchers and policy analysts working in private research organizations that depend on federal sources for the bulk of their financial support. Owing to the varied purposes and methodologies associated with these investigations, typically their separate results cannot easily be integrated into the work of others. Consequently, an almost always imperfect—certainly less complete and less timely—picture of critical social trends taking place in the United States emerges from even national analyses of critical social issues (e.g., changing patterns of poverty, changes in family structure and life, changes in community structure and life, increases or decreases in social solidarity, public attitudes toward various socially sensitive topics, etc.).

[Insert Chart 4 about here]

A variety of responses to the absence of a national social report for the United States have emerged over the past 15 years. Typically, and as suggested by the variety of social reports identified in Chart 4, local communities have developed their own approaches to social analysis and social reporting.

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1 Examples of especially noteworthy European social reports include: *Belgo Data* and *Vrind* (Belgium); *Levevilkar I Danmark* (Denmark); *Donnees Sociales* (France); *Datenreport* (Germany); *Sintesi della Vita Sociale Italiana* (Italy); *Social and Cultural Report* (Netherlands); *Sosialt Utsyn Leveka I Norge* (Norway); *Social Trends* (United Kingdom); and *Indicadores Sociales Panorama Social* (Spain).
Many of these approaches are quite innovative. In every case, such reports tend to draw on a combination of social indicators collected at the federal and state levels in additional to original data collection that occurs at the local level. These processes also usually involve the participation of large numbers of people drawn from all sectors of the local community. Thus, community approaches to social indicator and social report development tend to be highly participatory and, in the process, promotes the development of a sense of ownership of the needs assessment, planning, goal-setting, and monitoring processes that occur all too rarely at higher, always more bureaucratic, levels of political activity, i.e., county, state/provincial, and federal.

Social Index Construction At the Local Level

A number of local initiatives also have resulted in the development of composite indexes of social progress that are used to monitor changes taking place in particular sectors of interest to local communities (e.g., housing, the environment, migration, poverty, etc.)—Chart 3. Two efforts at creating composite indexes for use in measuring major social changes at the national level, however, are Miringoff’s *Index of Social Health* (Miringoff & Miringoff, 1999) and the United Way of America’s *State of Caring Index* (United Way of America, 2000).

*Miringoff’s Index of Social Health (ISH)*

Miringoff and his associates at the Fordham University’s Institute for Innovation in Social Policy have been tracking social progress in the United States each year since 1985 (Miringoff et al., 1999). Using his own Index of Social Health (hereafter ISH), Miringoff monitors national performance on each of 16 social indicators including child poverty, infant mortality rate, crime trends, access to health care, affordable housing, and so on. He combines performances on each indicator into a statistically weighted index and, then, uses the resulting composite scores to report on “the state of the nation’s social health.”

The results obtained from application of the ISH often are surprising, at least to the general public. Miringoff’s team, for example, reports an inverse relationship between rates of economic expansion
and advances in the nation’s social health—sometimes with very dramatic losses occurring at the same
time the economy is expanding rapidly. ISH scores plummeted from a high of 77 (out of a possible 100)
earned in 1973 to only 38 in 1993. ISH scores recovered only slightly between 1993 and 1997, i.e., to 46.
Increasing poverty rates, including child poverty, rising crimes and suicide rates accounted for the most
significant social losses on the ISH.

Miringoff’s approach to social indexing raises many questions for methodologists but its value to
the public, including to politicians, is not questioned (Miller, 1997; Stille, 2000). National results ob-
tained from the ISH have inspired a number of communities to develop versions of the ISH applicable to
their local situation (Chart 4). The State of Connecticut, for which Miringoff has done extensive work,
now even mandates that an assessment of the state’s “social health” be conducted annually (Editor, 1998).

**United Way State of Caring Index (SCI)**
The United Way of America’s State of Caring Index (hereafter “SCI”) was developed in 1999 in response
to recognition of the need for more comprehensive measures of changing patterns of social cohesion and
social caring within American society. Four goals were associated with the development of the SCI: 1) to
highlight areas of social success for each state and for the nation-as-a-whole; 2) to identify areas that
needed improvement; 3) to compare current conditions with past conditions; and 4) to compare conditions
that existed in any one state with those found in other states and the nation-as-a-whole (United Way of
America, 2000).

In its present form, the SCI consists of 32 indicators divided across six sectors of development: 1) the
economy and financial well being (N=6); 2) education (N=8); 3) health (N=8); 4) volunta-
rism/charity/civic engagement (N=5); 5) safety (N=2); and 6) natural environment and other factors
(N=3). Findings obtained from application of the SCI are presented in a variety of ways: 1) composite
social caring scores are reported for the nation-as-a-whole; 2) composite social caring scores are reported
for each state of the United States; and 3) statistical and qualitative assessments are made of societal per-
formance in each of the six sectors covered by the SCI. One of the most impressive features of the
UWA’s report is its use of clearly illustrated charts and diagrams to focus the reader’s attention on critical areas in which social progress has and has not been made. The policy implications associated with each of the reports findings are both intuitive and compelling.

The United Way of America intends to publish updates to the national and state reports at regular intervals. Sectoral analysis will appear irregularly but, always, will accompany publication of the main report.

Social Index Construction at the International Level

Considerable work has been done on developing indexes for measuring social progress at the international level. The source of much of this work centers around various agencies of the United Nations (e.g., the United Nations Development Programme [UNDP], the United Nations Research Institute for Social Development [UNRISD]) and other organizations that invest heavily in international assistance to developing countries (e.g., the World Bank, the Organization for Economic Cooperation and Development [OECD], the U.S. Agency for International Development [USAID], etc.). A large number of academics also have taken up the challenge of developing composite measures of changes in national and international social progress.

In general, the international social index movement emerged side by side with the social indicator and social reporting movements. Indeed, many of the same people were involved in leadership positions for all three movements (e.g., Jan Drenowski, Mabub al Haq, Kenneth Land, Donald McGranahan, Morris D. Morris, Paul Streeten, among others). The goals of development assistance organizations and independent investigators working on the creation of international indexes of global social progress were the same: 1) to create new tools for use in monitoring changes in social progress throughout the world over time; 2) to establish baselines against which future changes in development could be measured; and 3) to serve as a basis for establishing new goals designed to advance world and national development objectives.

[Insert Chart 5 about here]
Chart 5 identifies some of the most widely used composite measures of international development that have emerged since the mid-1970s. Each of the indexes has its own following and each, in turn, has produced a body of empirical work that seeks to impact on national and international development activities.

**Physical Quality of Life Index (PQLI)**

The Physical Quality of Life Index (hereafter “PQLI”) was developed in the mid-1960s by Morris David Morris and his colleagues at the Overseas Development Council (Morris, 1979; Streeten, 1981). Morris sought to achieve three purposes with the index: 1) to refocus the international debate on poverty and development to include more than just economic outcomes; 2) to focus international attention on the primacy of human development as the central goal of development work; and 3) to serve as a measure of changes over time in nations achieving their development priorities.

The PQLI consists of three indicators: 1) infant mortality; 2) life expectation at age one; and 3) basic literacy. Country performances on each indicator are combined into unweighted composite scores that range from a low of 0 for countries with the least favorable development performances to 100 for those with the most favorable. Re-applications of the PQLI allow for assessments over time of the changing capacities of governments to better meet the basic needs of their populations.

Despite its initial influence in the field of development monitoring, the PQLI is rarely used today both because of the elementary nature of the indicators included in the index and the availability of other, more robust, analytical tools.

**84’s Index of Social Progress (ISP; WISP)**

The Index of Social Progress (hereafter “ISP”; “WISP”) initially was conceptualized by this author in 1976 (Estes, 1976). In its present form, the ISP consists of 45 social indicators divided among 10 sectors of development: Education, Health Status, Women Status, Defense Effort, Economic, Demographic, Geographic, Political Chaos, Cultural Diversity, and Welfare Effort. Statistically weighted versions of the
index (WISP) are used periodically to assess the changing capacity of the world-as-a-whole and major world regions to provide for the basic social and material needs of their populations (Estes, 1984, 1988, 1998, 2003). Chart 6 illustrates the types of results that are obtained through application to the analysis of worldwide social development trends over time.

[Insert Chart 6 about here]

In recent years, the author has adapted the ISP for use in monitoring social development trends occurring at the national level as well. Chart 7 illustrates the use of the ISP for analyzing development trends that occurred in the United States between 1970 and 2000. An even more tailored version of the ISP recently was created to monitor changes in social development for Hong Kong SAR (Estes, 2002).

[Insert Chart 7 about here]

**The United Nation’s Human Development Index (HDI)**

The Human Development Index (hereafter “HDI”) was introduced by the United Nations Development Program (hereafter “UNDP”) in 1990 as part of its now annual series of *Human Development Report(s)*. The HDI builds on the conceptual legacy of both the PQLI and Drenowski & Scott’s *Level of Living Index* (Drenowski & Scott, 1966).

The HDI uses three indicators to assess national and international progress in "human development": *longevity* (as measured by life expectation at birth), *educational attainment* (as measured by adult literacy rates in combination with primary, secondary, and tertiary school enrollment levels), and *standard of living* (as measured by real *Gross Domestic Product* or *Purchasing Power Parity*). Country performances on each of these indicators are transformed into standardized scores and, then, using a moderately complicated system of statistical weights are combined to produce a single composite HDI score.

Like the previous indexes, the HDI attempts to focus international attention on both the economic and non-economic aspects of development, e.g., the persistence of global poverty, gender inequality, the relationship between social and economic development and the need of people everywhere to participate more fully in framing both the goals and means of development. In 1995, the UNDP released two addi-
tional indexes that focus specifically on the changing status of women throughout the world, i.e., the 
*Gender Related Development Index* (GDI) and the *Gender Empowerment Measurement* (GEM).

**THE CONTRIBUTION OF SOCIAL INDICATORS, SOCIAL REPORTING AND SOCIAL INDEX CONSTRUCTION TO CONTEMPORARY COMMUNITY PRACTICE**

Social indicators, social reporting and composite indicies of social progress can and do play an important role in community practice. When applied correctly, these tools can be used to advance community practice in at least five ways: 1) by providing an integrated conceptual framework into which diverse social, political and economic phenomenon can be incorporated; 2) by helping to identify the goals toward which development activities can be directed and the means by which these goals can be attained; 3) by identifying specific targets that are to be achieved within designated time periods; 4) by providing a baseline against which subsequent success and failure can be assessed; and 5) by fostering active participation and a sense of ownership among and between all the stakeholders involved in the development and application of more knowledge-based approaches to practice.

The use of social indicators, social reports and social indexes, of course, is not the answer to every challenge that confronts community practitioners. Their judicious use, though, can help both to further rationalize our practice and, at the same time, promote progressively higher levels of goal attainment in our work with communities.

**REFERENCES**


Bell, D. 1969. Toward a social report I, Public Interest 15, 72-84.


Estes, R. J. 2002. Toward a Social Development Index For Hong Kong: The Process of Community Engagement” (in collaboration with Chua Hoi Wai, John Fung, and Anthony Wong), Social Indicators Research 58(1-3), 313-347.


Chart 1

People Living on Less than $1 Per Day by Major Regions, 1998 (N=1,199 Million)
Chart 2

Selected Child Poverty Rates:
Pre- & Post- Tax Credits and Transfers

Source: Lee Rainwater & Timothy Smeeding, 1995
## Chart 3
### Selected Public and Private Sources of Social Indicators

<table>
<thead>
<tr>
<th>Organization</th>
<th>Title</th>
<th>Frequency</th>
<th>Comments</th>
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<tr>
<td><strong>SELECTED PUBLIC DATA SOURCES IN THE UNITED STATES</strong></td>
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<tr>
<td>U.S. Department of Commerce, Bureau of the Census</td>
<td>Historical Statistical Abstracts of the United States</td>
<td>Annually</td>
<td>Provides access to thousands of time-series indicators from 1790 to 1970. Many of these indicators may be accessed via either electronic (free) or print form. Data are available both at the national and state levels. <a href="http://fisher.lib.virginia.edu/census/">http://fisher.lib.virginia.edu/census/</a></td>
</tr>
<tr>
<td>U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics</td>
<td>Vital Statistics of the United States</td>
<td>Monthly</td>
<td>Contains a comprehensive set of time-series data related to birth, mortality, fetal death, marriage and divorce, etc. Data are quite detailed and can be used for national, state and local analyses. Data also are linked to dozens of other data sets assembled by the Centers for Disease Control and Prevention that are of interest to health and social scientists.: <a href="http://www.cdc.gov/scientific.htm">http://www.cdc.gov/scientific.htm</a></td>
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**SELECTED PRIVATE DATA SOURCES IN THE UNITED STATES**

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<th>Organization</th>
<th>Title</th>
<th>Frequency</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annie E. Casey Foundation</td>
<td>Kids Count Data Book: State Profiles of Child Well-Being</td>
<td>Annually</td>
<td>One of the most comprehensive statistical summaries of changing social, educational and economic conditions of U.S. children in each of the nation’s 50 states, D.C. and the U.S. Virgin Islands. Data are updated regularly and are presented for the nation-as-a-whole, by state and for many local communities. <a href="http://www.allkidscount.org/">http://www.allkidscount.org/</a></td>
</tr>
<tr>
<td>National Center for Charitable Statistics (of the Urban Institute)</td>
<td>Charitable Statistics of the United States</td>
<td>Continuously updated</td>
<td>Publishes a variety of continuously updated data bases concerning all aspects of private philanthropy in the United States at the following internet address: <a href="http://nccs.urban.org/data.html">http://nccs.urban.org/data.html</a></td>
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<tr>
<td>Organization</td>
<td>Title</td>
<td>Frequency</td>
<td>Comments</td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td>------------------------------------------------------------</td>
<td>-----------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Amnesty International</td>
<td>Statistics on Human Rights Violations</td>
<td>Continuously</td>
<td>Publishes both qualitative and quantitative analyses of the changing human rights situation for most countries of the world. Many of AI’s most penetrating reports can be downloaded without charge from their website. <a href="http://www.amnesty-usa.org">http://www.amnesty-usa.org</a></td>
</tr>
<tr>
<td>Stockholm International Peace Research Institute (SIPRI)</td>
<td>SIPRI Yearbook (of military and defense expenditures)</td>
<td>Annually</td>
<td>Reports nearly 100 time-series indicators on all aspects of weaponry production, sales and distribution around the world. <a href="http://www.sipri.org">http://www.sipri.org</a></td>
</tr>
<tr>
<td>United Nations Educational, Scientific and Cultural Organization (UNESCO)</td>
<td>Statistical Yearbook</td>
<td>Annual</td>
<td>Reports about 150 indicators on a time-series basis for all member states of the United Nations. Focus is on educational, scientific and cultural performances of member countries. <a href="http://unescostat.unesco.org/">http://unescostat.unesco.org/</a></td>
</tr>
<tr>
<td>United Nations High Commissioner for Refugees (UNHCR)</td>
<td>Refugees and Others of Concern to the UNHCR: Statistics</td>
<td>Annually</td>
<td>Provides a large quantity of statistical data concerning the involuntary movement of people both within and across international borders, e.g., persons displaced by war, economic disasters, natural disasters, and so on. <a href="http://www.unhcr.org">http://www.unhcr.org</a></td>
</tr>
</tbody>
</table>
## Chart 4
Selected Approaches to Community Social Reporting
In the United States and Canada

<table>
<thead>
<tr>
<th>Author/Creator</th>
<th>Title/Name</th>
<th>Frequency</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SELECTED APPROACHES TO COMMUNITY SOCIAL REPORTING IN THE UNITED STATES</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grand Traverse Regional Community Foundation</td>
<td>Quality of Life for the Grand Traverse Region (Michigan)</td>
<td>Annually</td>
<td>The Quality of Life Index is a community-based effort which attempts to identify, measure and annually report on ten different areas that affect the quality of life of everyone in the region. <a href="http://qualityindex.nmc.edu/toc.html">http://qualityindex.nmc.edu/toc.html</a></td>
</tr>
<tr>
<td>Critical Trends Assessment Program</td>
<td>Critical Trends Report (Illinois)</td>
<td>Annual</td>
<td>The CTAP is an on-going process to evaluate changes in environmental quality in the State of Illinois. It also provides scientific support for the Ecosystems Program under Conservation 2000, a multi-year initiative to preserve and restore Illinois’s ecosystems. <a href="http://dnr.state.il.us/orep/ctap/CTAPI.htm">http://dnr.state.il.us/orep/ctap/CTAPI.htm</a></td>
</tr>
<tr>
<td>Jacksonville Community Council</td>
<td>Quality of Life in Jacksonville: Indicators For Progress (Florida)</td>
<td>Annually</td>
<td>Trends in the local quality of life are tracked through 89 measurable indicators. Most come from publicly available data sources, but several come from a random, telephone opinion survey. Data for most of the indicators are available starting with 1983, and all indicators are updated annually. The indicators measure the quality of life in nine areas: education; the economy; public safety; the natural environment; health; the social environment; government and politics; culture and recreation; and mobility. <a href="http://www.jcci.org/">http://www.jcci.org/</a></td>
</tr>
<tr>
<td>North Carolina Progress Board</td>
<td>2020 Draft Goals and Measures (North Carolina)</td>
<td>In progress</td>
<td>The North Carolina Progress Board aims to form a data-based vision of North Carolina in the next 20 to 30 years. With goals and targets set, state leaders and agencies can work now toward making that vision a reality-- and helping each of us attain the best quality of life possible. <a href="http://www.ncpb.state.nc.us/">http://www.ncpb.state.nc.us/</a></td>
</tr>
<tr>
<td>City of Racine</td>
<td>Sustainable Racine (Wisconsin)</td>
<td>Annually</td>
<td>Throughout the Sustainable Racine planning process, an often used visual tool of what sustainability means was a three legged stool. For Racine, the “stool” on which development rests consists of the environment, the pursuit of equity and growth of the economy. <a href="http://www.sustainable-racine.com/">http://www.sustainable-racine.com/</a></td>
</tr>
<tr>
<td>Sustainable Seattle</td>
<td>Indicators of Sustainable Community (Seattle, Washington)</td>
<td>Annually</td>
<td>Sustainable Seattle is a citizen group working to improve the region’s long-term health and vitality--cultural, economic, environmental and social. The <em>Indicators of Sustainable Community</em> are the product of a community dialogue about the region’s future. Hundreds of Seattle-area volunteers have invested thousands of hours to design and research this integrated &quot;report card.&quot; <a href="http://www.sustainableseattle.org/">http://www.sustainableseattle.org/</a></td>
</tr>
<tr>
<td>Twin Cities East Metropolitan Area,</td>
<td>Social Outcomes for Our Commu-</td>
<td>Annually</td>
<td>The report measures progress on five outcomes critical to the social health of the region’s approximately one million resi-</td>
</tr>
<tr>
<td>Author/Creator</td>
<td>Title/Name</td>
<td>Frequency</td>
<td>Comments</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>--------------------------------------</td>
<td>-----------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Minnesota</td>
<td>Community (Minneapolis &amp; St. Paul, Minnesota)</td>
<td></td>
<td>dents: school readiness and success; affordable housing; economic opportunities; community safety; and healthy start for youth. <a href="http://www.cyfc.umn.edu/Parenting/outcomes.html">http://www.cyfc.umn.edu/Parenting/outcomes.html</a></td>
</tr>
<tr>
<td>Edmonton Social Planning Council</td>
<td>Social Health Index (Edmonton, Canada)</td>
<td>Annually</td>
<td>The Index is a composite of 15 local indicators used to create an overall assessment of the community’s social health. <a href="http://www.edmspc.com/">http://www.edmspc.com/</a></td>
</tr>
<tr>
<td>Flamborough Information &amp; Community Services</td>
<td>Social Reporting (Ontario, Canada)</td>
<td>Periodically</td>
<td>Since 1995, the town of Flamborough has sought to monitor changes in the quality of its overall social life. The process involves people from all walks of life and has a special focus on the needs of vulnerable population groups. <a href="http://www.infoflam.on.ca/">http://www.infoflam.on.ca/</a></td>
</tr>
<tr>
<td>City of Ontario</td>
<td>Quality of Life Index Project (Ontario, Canada)</td>
<td>Continuous</td>
<td>The Quality of Life Index Project (QLI) has been running for two years with funding from Health Canada. Results to date include three reports on the Quality of Life in Ontario (Fall 1997, Spring 1998, Fall, 1998), several background papers, a website and twenty community partners. This is an innovative approach to social reporting, based on hard data in a comparative framework with both provincial and local dimensions. <a href="http://www.osdc.org/socrep.html">http://www.osdc.org/socrep.html</a></td>
</tr>
</tbody>
</table>
### Chart 5
Examples of Composite Measures of Social Progress
Used in International and Comparative Research

<table>
<thead>
<tr>
<th>Organization/Author</th>
<th>Title/Name</th>
<th>Frequency</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overseas Development Council (ODC)</td>
<td>Physical Quality of Life Index (PQLI)</td>
<td>Irregularly</td>
<td>The PQLI was developed in the mid-1960s by Morris David Morris and his colleagues at the Overseas Development Council (Morris, 1979; Streeten, 1981). The PQLI consists of three indicators: 1) infant mortality; 2) life expectation at age one; and 3) basic literacy. Country performances on each indicator are combined into composite scores that range from 0 to 100. Re-applications of the PQLI allow for assessments over time of the changing capacities of governments to meet the basic needs of their populations.</td>
</tr>
<tr>
<td>Organization for Economic Co-operation and Development (OECD)</td>
<td>Core Indicators For Measuring Development Progress</td>
<td>Continuous</td>
<td>For nearly two decades the OECD has sought to develop a set of &quot;core indicators&quot; closely associated with its international development assistance priorities (OECD, 1977). The organization's current set of 21 indicators are associated with a different development assistance goal: 1) reducing extreme poverty; 2) promoting universal primary education; 3) promoting gender equality; 4) reducing infant and child mortality; 5) reducing maternal mortality; 6) promoting reproductive health; and 7) protecting the natural environment (OECD, 1999). <a href="http://unstats.un.org/unsd/mi/mi_goals.asp">http://unstats.un.org/unsd/mi/mi_goals.asp</a></td>
</tr>
<tr>
<td>Estes, Richard J.</td>
<td>Index of Social Progress (ISP; WISP)</td>
<td>Published every 5 years</td>
<td>Developed at the University of Pennsylvania (Estes, 1976), the ISP consists of 45 social indicators divided among 10 sectors of development: Education, Health Status, Women Status, Defense Effort, Economic, Demographic, Geographic, Social Chaos, Cultural Diversity, and Welfare Effort. Statistically weighted versions of the index (WISP), are used to assess the changing social capacity of countries and major world regions. <a href="http://caster.ssw.upenn.edu/~restes/praxis/world3.html">http://caster.ssw.upenn.edu/~restes/praxis/world3.html</a></td>
</tr>
<tr>
<td>United National Development Programme (UNDP)</td>
<td>Human Development Index (HDI)</td>
<td>Annually</td>
<td>The HDI was introduced by the UNDP in 1990 as part of its now annual series of Human Development Reports (UNDP, 2002). The HDI uses three indicators to assess national levels of &quot;human development&quot;: longevity (as measured by life expectation at birth), educational attainment (as measured by adult literacy rates in combination with primary, secondary, and tertiary school enrollment levels), and standard of living (as measured by real GDP or PPP). <a href="http://www.undp.org/dpa/publications/hdro/98.htm">http://www.undp.org/dpa/publications/hdro/98.htm</a></td>
</tr>
<tr>
<td>United National Development Programme (UNDP)</td>
<td>Gender-Related Development Index (GDI)</td>
<td>Annually</td>
<td>Introduced by the UNDP in 1995, the GDI makes use of the same indicators as those contained in the HDI. However, the GDI assigns different weights to the indicators in order to reflect &quot;inequalities in achievement between women and men.&quot; In effect, the GDI is simply the HDI adjusted downward for gender inequality (UNDP, 1998a:15).</td>
</tr>
<tr>
<td>United National Development Programme (UNDP)</td>
<td>Gender Empowerment Measure (GEM)</td>
<td>Annually</td>
<td>Also introduced by the UNDP in 1995, the GEM assesses the extent to which women are &quot;empowered to take an active role in the economic and political life of a nation&quot; (UNDP, 1998a:15). The GEM tracks the percentage of women serving in each country's: 1) parliament; 2) as administrators and managers; and 3) as professional and technical workers. The GEM also measures women's earned income as a percentage of the income earned by men.</td>
</tr>
</tbody>
</table>

25
Chart 6

Average WISP Scores by Continent (N=161)
1970-2000

<table>
<thead>
<tr>
<th>Year</th>
<th>N Am (2)</th>
<th>Au-NZ (2)</th>
<th>Eur (36)</th>
<th>L Am (26)</th>
<th>Asia (45)</th>
<th>Africa (50)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1970</td>
<td>73.9</td>
<td>81.0</td>
<td>78.6</td>
<td>49.8</td>
<td>35.7</td>
<td>19.8</td>
</tr>
<tr>
<td>1980</td>
<td>77.3</td>
<td>81.6</td>
<td>80.4</td>
<td>50.4</td>
<td>38.5</td>
<td>19.9</td>
</tr>
<tr>
<td>1990</td>
<td>91.8</td>
<td>91.6</td>
<td>90.2</td>
<td>57.0</td>
<td>43.7</td>
<td>19.5</td>
</tr>
<tr>
<td>1995</td>
<td>78.8</td>
<td>83.9</td>
<td>82.1</td>
<td>55.4</td>
<td>46.0</td>
<td>21.4</td>
</tr>
<tr>
<td>2000</td>
<td>85.2</td>
<td>91.0</td>
<td>87.4</td>
<td>54.7</td>
<td>46.4</td>
<td>17.5</td>
</tr>
</tbody>
</table>

Chart 7

WISP Subindex Scores For the United States, 1970-2000

<table>
<thead>
<tr>
<th></th>
<th>Educ</th>
<th>Hlth</th>
<th>Wom</th>
<th>Def</th>
<th>Econ</th>
<th>Pop</th>
<th>Env</th>
<th>Chaos</th>
<th>Cul</th>
<th>Wel</th>
<th>WISP</th>
</tr>
</thead>
<tbody>
<tr>
<td>1970</td>
<td>20.9</td>
<td>19.9</td>
<td>20.9</td>
<td>-3.1</td>
<td>22.9</td>
<td>12.9</td>
<td>-20.1</td>
<td>21.9</td>
<td>12.9</td>
<td>13.9</td>
<td>72.0</td>
</tr>
<tr>
<td>1980</td>
<td>20.0</td>
<td>21.0</td>
<td>20.0</td>
<td>9.0</td>
<td>18.0</td>
<td>16.0</td>
<td>-12.0</td>
<td>26.0</td>
<td>16.0</td>
<td>13.0</td>
<td>77.0</td>
</tr>
<tr>
<td>1990</td>
<td>24.2</td>
<td>21.1</td>
<td>18.8</td>
<td>9.3</td>
<td>22.6</td>
<td>16.5</td>
<td>-22.6</td>
<td>26.0</td>
<td>16.2</td>
<td>13.7</td>
<td>90.2</td>
</tr>
<tr>
<td>1995</td>
<td>19.5</td>
<td>18.7</td>
<td>16.9</td>
<td>9.4</td>
<td>18.8</td>
<td>14.4</td>
<td>13.5</td>
<td>18.2</td>
<td>11.1</td>
<td>14.2</td>
<td>79.9</td>
</tr>
<tr>
<td>2000</td>
<td>23.7</td>
<td>19.3</td>
<td>15.7</td>
<td>9.4</td>
<td>19.5</td>
<td>18.7</td>
<td>6.5</td>
<td>20.0</td>
<td>10.5</td>
<td>14.1</td>
<td>84.8</td>
</tr>
</tbody>
</table>