

Why hard-nosed agencies measure soft

Commissioners sometimes look down their noses at ‘soft’ outcomes. “Give us the hard facts” they say. But in this piece Joy MacKeith of Triangle Consulting argues that there is nothing soft or woolly about measuring the internal changes that service users experience.

When it comes to measuring outcomes, the received wisdom is that it is the ‘hard’ outcomes that count. Does the homeless person have a tenancy? Has the unemployed person found a job? Is the problem drinker now on the wagon? This is what commissioners traditionally want to know when they review their contracts.

This is what the Treasury wants to know when the Comprehensive Spending Review comes around and departments have to make a fresh case for their budgets. But it is often the so called ‘soft’ outcomes which service providers use to evidence the effectiveness of their work. Okay, the service user may not have a job yet but they now believe that work is possible for them and have learnt some job search skills. No, they don’t have a home, but they are better able to manage the mental health issue which contributed to their homelessness.

Tools like the Outcomes Star are beginning to enable providers to do this in a consistent way – and to aggregate their data so that they can present the

outcomes achieved by a whole project or group of projects. The enormous popularity of the Star is testimony to the importance services place on measuring their outcomes in this way. Not only has the original version for the homelessness sector become the lead tool in the field, but other sectors are finding that the model works for them too and there is now a growing family of Star tools including a version for the mental health sector (the Recovery Star – see Sitra Bulletin May 2008) and versions for young people with substance misuse issues, older people and people getting back into employment.

Hard versus Soft?

Despite this there can be a sense, even

many amongst service providers themselves, that this data is inferior because the outcomes are ‘soft’ with all the connotations of woolliness conjured up by that word. Is this attitude helpful? Should we really give so much more weight to hard outcomes than soft? And are the terms ‘soft’ and ‘hard’ accurate and useful? The answer, I believe, is no, no, and no.

Firstly let’s look a little more closely at the terms we are using. The term soft outcome is usually used to describe things that change on the inside – perhaps more accurately named ‘internal’ outcomes. The term hard outcome is usually used to refer to changes that can be observed on the outside – more accurately referred to as ‘external’ outcomes. However, the term soft outcome is sometimes used to describe a step on the way to the ultimate goal. These could be internal changes or external changes and are also referred to sometimes as ‘intermediate’ outcomes. The table adjacent clarifies the distinction by applying it to the example of someone with a severe mental health issue.

So one reason why the term ‘soft’ outcome is not helpful is because it is used to refer to different things and is therefore ambiguous. Even more important than this is the fact that the term ‘soft’ can serve to devalue these changes. I would argue that it is these fundamental shifts in attitudes, beliefs and skills that are the primary determining factors in enabling a service user to achieve their goals, be they addressing a mental health or addiction problem, dealing with debt or building their living skills. The hard outcomes – getting a job or a tenancy are the observable, external manifestations of these internal changes. Someone has greater self-belief

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and job search skills, and as a result they are able to look for and find a job. They are better able to manage their mental health issue and so they are able to handle their affairs and maintain a tenancy. First the attitudes, beliefs and skills change (the soft or internal outcomes) and then it is possible for the circumstances of a person's life to change too (the hard or external outcomes).

Ticking the box

You can find someone a flat and tick your hard outcome box, but if their attitudes, beliefs and skills have not changed it is very likely that they will experience the same problems that originally resulted in them becoming homeless. You can give them a job, but if they haven't addressed their substance misuse problem then they are not likely to keep it for very long. It is the change on the inside that is most predictive of long-term success. And ultimately it is how it feels on the inside that matters most to all of us – feeling safe, in control, useful, happy.

When services start focussing on these important shifts, the client's experience of the service can be transformed. Says former mental health service user Stuart Couzell of his experience of using the Recovery Star:

"I felt fully involved; it was clear and easy to understand and it focussed on me as a whole person not just as a problem. It was

a considerable boost to see how well I am. It felt like a conversation; felt like the first time someone had really listened to me"

Stuart is now a member of staff at the mental health day centre that helped him through his recovery and stays that the Star was one of the things that made this possible.

Why is it so powerful? Because when service providers focus on, manage and measure what is happening to service users on the inside, they are working with the only real active ingredients in the recipe of service provision – the motivation, understanding, belief and skills

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of the person themselves to create change. When they focus on the internal changes, service providers signal to clients that this is what matters and that change is something that they themselves will create not just be a recipient of. When they share with the client what the journey of change is, they help that person to make sense of their journey so far and get a clear picture of what the next step is for them. And when services define the job

they are doing in terms of the changes they are aiming to facilitate, it creates a clarity of purpose and a focus to everything they do.

So let's not turn our noses up at soft outcomes, as if they were some kind of optional extra. These are the outcomes that really matter to service users. And if we are interested in long-term, sustained change rather than quick fixes and tick boxes, these are the changes that count. Better still, let's not call these outcomes 'soft' with all the soft-headed woolly-minded associations the word brings. Let's call them what they really are – internal

outcomes, the fundamental shifts in attitudes, beliefs and skills that underpin all sustainable change in a person's practical circumstances.

Of course hard (external) outcomes do matter and it makes sense to measure them. But if an agency is going to be really hard-nosed and focus on the things that really make a difference – they will make sure that they are measuring their 'soft' outcomes.

	Internal change (soft outcome)	External change (hard outcome)
Intermediate outcome (step on the way)	Some insight into what triggers and what helps to prevent relapse	Taking appropriate medication consistently
End outcome (final goal)	Has skills and understanding to manage mental health issue	No hospital admissions

Photograph: Zsuzsanna Kilian