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Compassion Connect

Compassion Clinic Volunteer Leadership Evaluation

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1. Organization and Program Overview

Compassion Connect's mission is to bring churches together to serve their neighborhoods. We believe there is brokenness and division in the world that is far too big for just one church, organization, or person to handle alone, so we create models of service that unite churches and mobilize passionate volunteers to put their faith in action. Our vision is churches and individuals everywhere choosing *unity over division* and *compassion over complacency*. The two primary issues we help churches address in their neighborhoods are community health and human trafficking. For the purposes of the Project Impact cohort, we focused on our Compassion Clinic service model, and specifically our Compassion Clinic volunteer leaders.

Compassion Clinics are free community health clinics led by local Churches and supported by Compassion Connect. Each Compassion Clinic is designed to provide compassionate services to our neighbors who lack access to basic health care such as medical, dental, vision, chiropractic, and more. We believe churches anywhere can work together to help their neighbors experience the love of Jesus through the provision of free basic healthcare. Our goal is to offer not only essential physical services to those who need them most but also provide warm meals, smiling faces, opportunities to receive prayer, and the transforming love of Jesus.

Intended Impact

While we hope clinics will change the lives of all of the guests who come to receive services, Compassion Connect's direct impact is not on those individuals but on the volunteers who come together from various churches to lead the clinics. Our goal is to steward those volunteers well and allow them a space to practice unity and compassion so that our Clinic guests can encounter the love and hope of Christ through them.

As an organization led by our core values, our hope is that all volunteers are experiencing our values in their time working with Compassion Connect. For the purpose of this evaluation, we identified the



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following four impacts we hope to have on volunteer clinic leaders, based on four of our seven core values. Our indicators and principles of change can be found in the appendix.

1. Clinic volunteers are empowered to use their gifts and skills in a meaningful way.
 - a. This reflects our value of “service.”
 - b. What we mean: Often people in the pews think “I can’t serve” because they don’t fit into the typical service roles offered by their church. They think, “I don’t have anything to offer, or I don’t know what my gifts and skills are.” We want people to realize that anything they do can be a vocational call from the Lord, and that service can be done meaningfully outside the walls of a church.
2. Clinic volunteers love working alongside other Jesus-followers despite their differences, which leads to a mindset of collaboration over competition.
 - a. This reflects our value of “unity.”
 - b. What we mean: Clinic volunteers are exposed to the concept of unity and realize its importance to their Christian faith. Although they may be hesitant at first to work with people from different denominations or backgrounds, once they experience it they realize that they have more in common than they thought. That leads to a changed mindset where they are quick to collaborate and slow to divide on future neighborhood projects.
3. Clinic volunteers recognize there is suffering in their own neighborhoods and feel compelled to step into it with love.
 - a. This reflects our value of “love.”
 - b. What we mean: Because the clinic took place in their own neighborhood, clinic volunteers are confronted with the reality that there are real needs in their community that they may not have been aware of before. Their experience with people who are different from them ignites a sense of compassion and understanding that allows them to develop a heart-posture of selflessness and humility. They develop Jesus’s eyes and heart for the struggling and hurting and feel that they have the power to do something about it.
4. Clinic volunteers feel that they have a way to put their faith into action.
 - a. This reflects our value of “love.”
 - b. What we mean: The clinic gives the volunteers an opportunity to act on their faith outside of a Sunday morning. They understand that as a follower of Jesus, actively being His hands and feet is a part of what it means to, “Love God and Love People.” They are inspired to seek more regular opportunities to serve in order to look more like Jesus, and are no longer satisfied with just “going through the motions” of their faith.



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2. Evaluation Methodology

The aim of our evaluation was to see what kind and quality of impact Compassion Connect is having on the volunteer leaders in our Compassion Clinics. To understand this, we explored two broad evaluation questions:

1. What kind and quality of impact are we having on these volunteers?
2. What aspects of our program are causing this impact?

Over the course of the project, we (a) developed and refined our ideas of intended impact and indicators, (b) designed and implemented a mixed methods outcome evaluation using both qualitative and quantitative means to collect and analyze data, (c) identified themes and findings, and (d) considered the implications of those findings for program improvement and innovation.

This project began by identifying and clarifying the intended impact of Compassion Connect. Once the ideas of impact had been developed, we used the Heart Triangle™ model to identify qualitative and quantitative indicators of impact on the mental, behavioral, and emotional changes in our volunteers. We used these indicators to design a qualitative interview protocol and a quantitative questionnaire to evaluate progress toward achieving our intended impact.

Qualitative Data Collection and Analysis

For the qualitative portion of the evaluation, we designed an in-depth interview protocol to gain data about the structural, qualitative changes resulting from our program. We used a purposeful stratified technique to select a representative sample from the population we serve. The number of program participants was about 100. Our sample size was 15 participants drawn from the following strata of our population:

- Clinic Leaders
- Length of Time Volunteering (1 clinic or less vs. 2 clinics or more)
- Age (over 50 vs under 50)

Our interview team consisted of Ashley (Volunteer Developer for Freedom Collective), Elise (Portland Regional Director), Anna (Communications Director), and Namitha (Clinics Director). We convened one-on-one interviews lasting from between 45 minutes and one hour in length and collected interview data.

We then analyzed the data inductively using a modified version of thematic analysis. Each interviewer



implemented the first three phases of thematic analysis (becoming familiar with the data, generating initial codes, and identifying themes) for each interview. Together, we developed common themes from the entire data corpus identifying the overarching and inter-interview themes that emerged from the full scope of our data analysis to illuminate the collective insights and discoveries. We mapped these themes visually and examined the dynamics among the themes, causes and catalysts of the themes, new or surprising insights related to the themes, and relationships between the themes that were revealed in the data. We then determined the most significant and meaningful discoveries and brought them forward as findings to be described in the final phase of thematic analysis, this report.

Quantitative Data and Analysis

For the quantitative portion of the evaluation, we designed a questionnaire to collect data on our quantitative indicators of impact. We administered this instrument to 70 clinic volunteers and 24 participants responded, a 34% response rate. The data were analyzed primarily using measures of central tendency. We identified key insights, patterns, and gaps within the data and incorporated these discoveries into the related findings. The most significant insights from the quantitative data are described in the following narrative.

3. Findings and Responses

Finding #1: Stories Defeat Prejudice

Key Insight: Many Compassion Clinic volunteer leaders we interviewed described a personal transformation whereby previously held stereotypical beliefs about those in poverty were transformed to empathy by hearing the stories of and interacting relationally with Compassion Clinic guests.

Description:

The data reveal that many Compassion Clinic leaders go into their time of service with some stereotypes about the demographic that our Compassion Clinic guests represent. The comments we heard highlight commonly held beliefs such as “Why can’t they just get a job?” and the sense that special treatment of some groups violates a core sense of fairness. However, as one clinic leader said,

My tolerance level was probably at a three which means I was not very tolerable. But now, especially with this Clinic...my tolerance level went up so high. I don't think I'm at a ten yet, but at an eight, because I hear their stories. And I go, “Oh, my gosh, that could be me.” They are a human being that was created by the Lord. And I cannot discount them. They are equal.



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Another leader said,

I knew there were people in our community who needed help but actually seeing them at Clinics and putting faces to those needs changed things for me because a lot of them are just like me. And so I would say it gave me more compassion for my neighbor, it helped me to view them differently and give them the benefit of the doubt in a lot of different situations.

We understand the body of data supporting this theme to mean that the Compassion Clinics provide an environment where authentic human interaction leads to an increased or even new understanding in Clinic leaders of the challenges their neighbors face, which allows them to see their common humanity and release some formerly held judgmental knee-jerk reactions. As Clinic leaders pray with guests, get out of their comfort zones, and have their eyes opened and hearts broken to the plight of their neighbor, they become a different person than they were before the Clinic. Their new awareness of individual suffering and sense that people are “Not so different from me after all,” allow them to gain a more nuanced understanding of their neighbor who they may not have understood before. Our quantitative data also supports this finding, as 91.7% of respondents indicated that their understanding of how to love people tangibly as Jesus would has changed through their involvement in the Compassion Clinics.

Significance:

We were excited to hear from our volunteers that as a result of their Clinic service, their tolerance levels are going up and they are getting out of their comfort zones. We were encouraged by this finding because it means that our volunteers are truly “Seeing the whole person through God’s eyes of heartfelt compassion,” and are “Intentionally respecting all people.” These phrases are taken directly from the “Love” section of our values document and it is refreshing to see them lived out and embraced by our key Clinic volunteers. The significance of this finding for Compassion Connect is that we should continue to do everything in our power to create environments for believers to authentically interact with those who are different from them, because in this way we can create the Jesus transformation we are searching for--not just on a corporate level but also in individual lives. If our volunteers are affirming that relationships and stories are key to their changing perspectives, then we should treat this even more as a defining strategy to the transformation we seek to help the Church achieve in local neighborhoods.

Possible Responses:

- Convene a meeting to brainstorm ways to increase our ability to allow people from all Clinic volunteer teams to have an interaction with guests
- Create a video for potential leaders that follows a guest or several guests through a Clinic and tells their stories
- One way to address potential prejudice amongst potential volunteers would be to share guest stories more often in meetings or in post-clinic emails or blogs in order to fight stereotypes



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- Ensure there is an intentional debrief/celebration time for volunteers after the Clinic where stories are shared, which will ensure everyone gets to hear about what happened in different areas of the Clinic

Finding #2: Proximity Is Powerful

Key Insight: One of the reasons our Clinic volunteer leaders find the Compassion Clinic model effective is because it brings them into proximity with their underserved neighbors whose paths they may not otherwise cross.

Description:

Many volunteer Clinic leaders mentioned that before being involved in the Compassion Clinic they encountered barriers to interacting with their struggling neighbors. While they said it can be too easy to stay inside one's comfort zone and Christian bubble, the Clinics provide an environment where relationship building and interaction is baked in, making it much easier to begin relationships--and conversely, much harder to go back to your world and forget the suffering they have seen. As one health professional volunteer said, "Working with them [the guests] moves you in a new way because you can't not have your heart broken for them."

One leader powerfully and simply stated, "Proximity provokes us. Clinics do not solve the hard issues, but it is a gateway, it gives a connection point to people that are struggling." Overall, our data show that a significant reason why volunteers love the Clinics is because they are an effective vehicle to be in close proximity with fellow community members who they may not otherwise meet. Our quantitative data show that 66.7% of respondents volunteer more in their communities as a result of serving at the Clinic, which backs up our volunteer's statement that proximity is provoking--in a very good way.

Significance:

This finding is important because it highlights our value of creating models of service that are volunteer led and providing opportunities for people to gain perspective and grow in a life of reflecting Jesus. It also represents somewhat of an "a-ha" moment for our team as we now realize that proximity is a powerful aspect of the value that Compassion Clinic provides to our volunteer base. The fact that some volunteer leaders shared that they would not have a chance to get this close to their neighbors without the tool of the Clinic is eye opening. We may want to consider highlighting this benefit that we offer to churches who want to reach their vulnerable neighbors.

The significance of this finding (and the challenge it represents for our team) is also closely tied to that of Finding #1--we should continue providing and searching for new ways to create authentic experiences for our volunteers where they can break down barriers between themselves and their neighbors in order to more genuinely live like Jesus and share his love.



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Possible Responses:

- Emphasize to volunteers that they are crossing paths with those you wouldn't otherwise
 - You can be missional in your own backyard
 - Compelling guest stories
 - Communicate this with future pastors, churches, volunteers, donors, etc.
- Make space to hear stories of interactions
- In Post-Clinic meetings, be more intentional about asking what 'discoveries' from the Clinic changed how volunteers do something unrelated to Clinics (real life, church, driving in Portland?)
- Improve process of having Clinic community Promotions teams share their day-of-Clinic materials with HQ (photos, videos, interviews, etc) so they can be shared widely

Finding #3: Discovering the True Face of Service

Key Insight: Because of volunteering with the Clinics, leaders are developing a deeper understanding of truly selfless service that does not require any personal credit or accolades.

Description:

The data repeatedly reveal that Compassion Clinic volunteer leaders are leaving their volunteer experiences with a deeper understanding of what selfless service really looks like. As one volunteer leader put it, "I'm becoming more Christlike and serving people instead of seeking my own life. My desire is to live beyond myself more and more." There is a subtle difference between these motivations and approaches to serving, but our Clinic volunteers are truly embracing that they do this not for personal glory or to be a savior to their community members in need, but to get outside of themselves and authentically imitate Jesus' "no strings attached" love for others.

According to another clinic leader, "I am, at my core, a helper, and that is not always healthy because sometimes I do it for my own gain. As I get older I'm learning that it's God, not me, who is at the center of the universe. Compassion Clinics have helped me learn that it's okay when I work hard and someone else gets the credit."

We can infer that our audience's selflessness is growing from the fact that only 16% of survey respondents claimed they believed unity between believers was absolutely crucial before volunteering at the Clinic, and 54.2% found it to be crucial after the Clinic.

Significance:

This finding is important to us because it highlights our core value of love, and specifically this statement from our values document, "We value a culture of servant leadership and honoring others above ourselves." It also highlights our value of Jesus because the Compassion Clinic model has become an



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avenue for many of our leaders to discover more about their identity in Christ and how to live that out practically--even if that wasn't something they intentionally sought out in the beginning. It is definitely intriguing to discover that while volunteers do not always seek this out at first, it ends up being one of the deeply meaningful parts of the experience for them. It's encouraging to know that this kind of deep growth is happening in the hearts of our leaders. One challenge this finding may represent is that it causes us to wonder if as our volunteers are being pushed to grow, are they still enjoying it? Or are they thinking that selflessness is being pushed on them and they really would prefer to get the credit? We certainly do not want to force this on our volunteers but do want to pour into our leadership base and learn how we can make this an important aspect of their volunteer experience.

Possible Responses:

- Convene a meeting to brainstorm how to intentionally recognize our volunteers' selfless service in a way that ties into their spiritual growth and faithfulness to Jesus.
 - Answer this: "Is there a way to do this that still leads them to selflessness?"
- Help foster this mentality in newer leaders--consider a training session on what it actually means to serve, rather than learning the long way
 - Implement "The Heart of Service" training from Executive Director
- Include a mini devotional in our post-Clinic email to volunteers that encourages them to reflect on their service on a deeper level
- Make space for peer to peer recognition time during meetings

Finding #4: You Can't Turn Away from the Power of God

Key Insight: Many Clinic leaders shared that a powerful motivator for continuing their service is how they saw God working through the Clinic overall and through themselves specifically as they leaned on God to help them.

Description:

Multiple volunteer Clinic leaders shared their awe in seeing God "show up" in a powerful way through them and through the unity of the Church and broader community. One volunteer said, "On the day of the event you could just see that Jesus was there. The anointing of the Holy Spirit was on the property. You could see it in the smiles of the people, the joyfulness. The joy of the Lord was there. My walk with the Lord definitely went up a few notches."

Another leader shared,

Every Clinic I would cry at some point at home and think, "I am in way over my head." And so I had to go to God and ask, "How do I lead these leaders as they seek to serve?" I felt that if I came humbly, God would make up the difference--and he did. I think that's just a testament to



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God, bringing unity and peace. It helped me step back and let him take the reins, and that grew my spiritual life.

In addition, 71% of our quantitative survey respondents marked that because of serving at the Compassion Clinics, they feel very much or significantly more confident that they have what it takes to put their faith in action to make a difference in their community. These undeniable results of God's faithfulness and presence were highly affirming and motivating for these leaders. Other leaders shared examples of God's hand through on-site healings, prayer, and abundant provision even when things went wrong (supplies being forgotten, etc). This led to a general sense that the Clinic is not just an event, but truly a work of God.

Significance:

Part of what we can learn from this finding is that Compassion Connect can never go wrong in communicating to our volunteers the spiritual significance of what they are a part of. It is an element of value that we are able to offer to our audience (or at least create the conditions for it to occur and God does the rest!) and is something that perhaps we can emphasize more. We currently highlight the way Clinics act as a vehicle for volunteers to make a difference in the lives of their neighbors, but at their core they are also about God using each individual participant as a *divine* vehicle of love and mercy as well.

Possible Responses:

- During post clinic debrief meetings (or in post clinic surveys), provide time for leaders to share ways they have seen God show up in themselves or in someone else
- Share a verse or devotional with volunteers at the beginning of the Clinic during orientation
 - At orientation, encourage volunteers to keep their eyes open throughout the day for ways God shows up and at the end provide time to share those experiences
 - Maybe through a digital format because volunteers are usually exhausted by the end of the Clinic, especially the large ones
- Emphasize to future Church/Pastor connections that this is a space where we give your congregation the tools and environment to be used by God
 - Share those stories more often, especially between different Clinic communities
 - At the Compassion Clinic Summit
 - Clinic Facebook page
 - Post-Clinic emails
 - Blogs
- Create a guide or training on how to facilitate this conversation in a multi congregational community
 - "Charismatic with a Seatbelt"
 - "User Friendly Charismatic"



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- Encourage Clinic leaders to share powerful stories on the Compassion Clinic leader Facebook page

Finding #5: Compassion for a Purpose

Key Insight: Compassion Clinic leaders are experiencing a deeper sense of meaning and purpose through their volunteerism.

Clinic leaders are finding a deeper commitment to their purpose as a follower of Jesus to love others and share the gospel through service.

Description:

Multiple leaders said that because of their Clinic experiences, they are finding a deeper commitment to their purpose as a follower of Jesus to love others and share the gospel through service. “I am believing that I have a role in the bigger picture and can make a difference doing something small,” said one volunteer.

Another clinic leader also affirmed this sentiment, saying, “I feel that I have purpose and am able to do something with the giftings I have to make a meaningful impact.” We discern from this data that the Compassion Clinics are a useful tool for our volunteers to feel like they are making a difference and that this has implications for their deepest sense of worth and spiritual calling.

Our quantitative survey results also affirm this point, with 75% of respondents affirming their Compassion Clinic experiences very much or significantly led them to follow Jesus' call to be his hands and feet. More than 87% of respondents also feel more connected to the larger body of Christ as a result of volunteering with the Compassion Clinics. While there was not a specific question about purpose and meaning on the survey, we can extrapolate these quantitative results to support this finding, as following Jesus' call and feeling connected to new relationships and something bigger than one's self may definitely have an impact on one's sense of purpose.

Significance:

This finding highlights our value statement of being, “A ministry that relies on God for identity, purpose, and direction.” It has always been our intention that this sense of purpose and meaning bleed out from our organizational culture into our volunteers and we are encouraged that they are indeed experiencing this through their service. Again this is an intangible result of our volunteers' experience with us but it cannot be overstated. There is certainly a physical aspect of the services we provide to local Churches, but the opportunity for Jesus followers to go deeper into their call and spiritual purpose is one that is just as important as the act of service itself. Our team should take this into account for the future and make sure that we are emphasizing this element as a value-add for our audience.



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Possible Responses:

- Ask questions to volunteers during leadership meetings like “What is your purpose for being here?”
 - Have them share with their neighbor or reflect silently
- Communicate the urgency to pastors and the possible “failure result” for not participating
 - Those who are not serving outside the walls of the church are missing out! We have an opportunity to help them live out Jesus’ call to service
- Post Clinic Reflection Worksheet: What did you do today that had a significant impact on you?
- Create a training, reflection, or challenge to “share the gospel through service” to encourage volunteers to see how they are the hands and feet of Jesus
- Share more volunteer testimonials through communications channels (videos and print)
- How do we influence the volunteer experience that will lead to them making positive conclusions about the experience?
 - Emphasize that every clinic role is so important and missional--whether you’re a health professional or garbage collector
 - Discipleship and training of key leaders which then impacts the general volunteers--Have key leader Tony Barber create a discipleship video?
 - Share a 20 min peer to peer teaching or training at quarterly leader meetings

Finding #6: A Trusted Model

Key Insight: Clinic leaders value the clinic model because of the time-tested and proven value it provides to meet a very real need in their community that they would not otherwise be able to address.

Description:

Any church or person who wants to serve their community has a myriad of ways they could do that, including starting their own ministry. If a church wanted to launch their own free clinic, it certainly would not be impossible. However, we found that the participants we talked to highly value the opportunity to leverage the many years of experience Compassion Connect brings to the table, rather than reinventing the wheel. People see this as a very tangible and relatively easy way to make a significant impact in their community, in an area of need they otherwise would struggle to approach.

Our survey data show that before serving in Compassion Clinics, many people who are now leaders did not know about health needs in their community, let alone have a way to help with them (see below). Compassion Clinics gives community members a way to become aware of and step into the real needs of the community in a way that they otherwise would not be able to address.

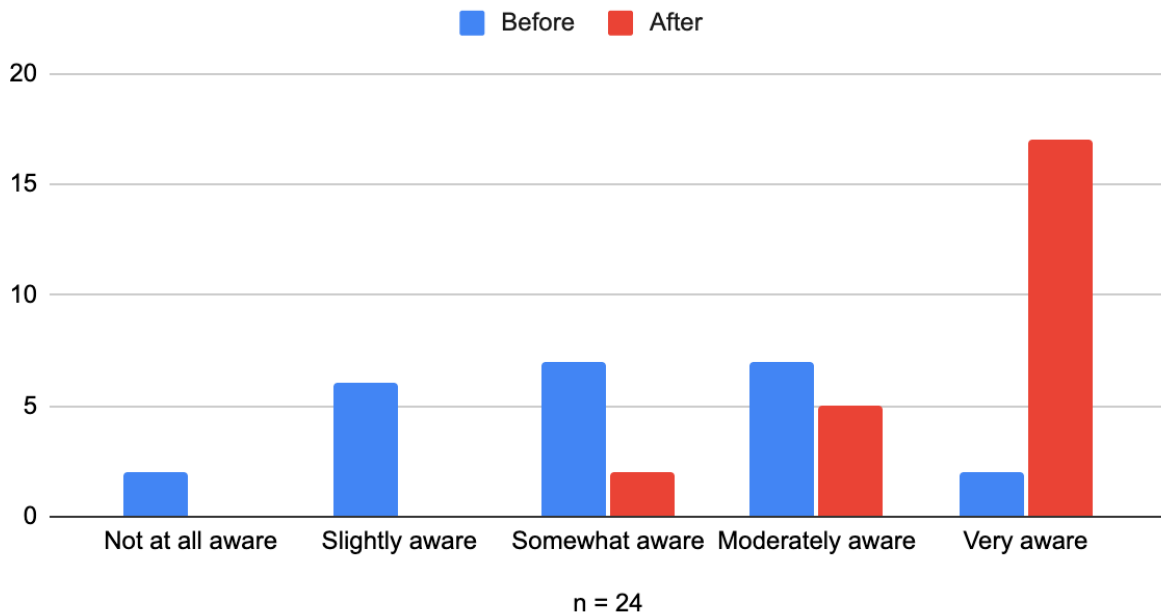


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Responses to the question, “How aware were/are you of the need for health services in your neighborhood, before and after serving at Compassion Clinics?”



In addition, clinic leaders value the micro-approach that allows them to focus on their immediate neighborhood instead of the broad stroke of all of Portland, and they feel empowered by Compassion Connect staff and leadership. They trust our experience and leadership, and see us as bringing a level of legitimacy to their work. As one participant said, “Clinics give my church the opportunity to engage the community in a critical way, and meet a real need. Compassion Connect makes it easy to serve the community. It gives us the opportunity to be a part of something bigger.”

Significance:

We are glad to see that our partners find value in the clinic model and that they trust us to help them do great work in their communities. This illustrates success at expressing our Service value which states, “We create models of service that meet real needs by reflecting God’s heart for the hurting and oppressed,” as well as our Excellence value that says, “We are known as a good and reliable partner by local churches and organizations,” and “We are a dependable organization that takes pride in doing work with quality.”

Possible Responses:

- Conduct a value audit of the unseen/intangible part of what we offer, and incorporate findings into our package agreement



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- Represent this in a visual of some sort, such as a timeline, to present during the trust building phase with new church partners
- Prioritize research of cities, neighborhoods, healthcare needs, etc so that we can continue to show prospective partners that we know what we are talking about

Finding #7: Living Out Personal Gifts and Skills

Key Insight: Compassion Clinics' unique volunteer-led approach allows people with any background to discover or deepen their unique gifts and skills through serving in a clinic.

Description:

The qualitative data demonstrate that one of the things people appreciate and enjoy about serving at a clinic is the ability to deepen specific gifts and skills. For some, they even discover gifts or skills they had not known they had or could use to serve their community. Participants observe that no matter what they like to do or are good at, they will be put to use at a Compassion Clinic.

One participant said, "This is a great thing for people who don't know where to serve." Others may have a very specific idea of how to serve but are surprised by other opportunities to be stretched. For example, one doctor observed that he started volunteering at Compassion Clinics to share his medical skills and knowledge, but through his service he realized he can do so much more. Another participant reflected about putting his skills as a dentist to use, "There is a stereotype that only missionaries overseas can really help, but really, these clinics are a perfect avenue for serving and doing ministry here and in their own backyard!"

This point is further supported by our quantitative data, which show that over half of respondents feel very much or significantly more confident that they have what it takes to put their faith into action to make a difference in their community.

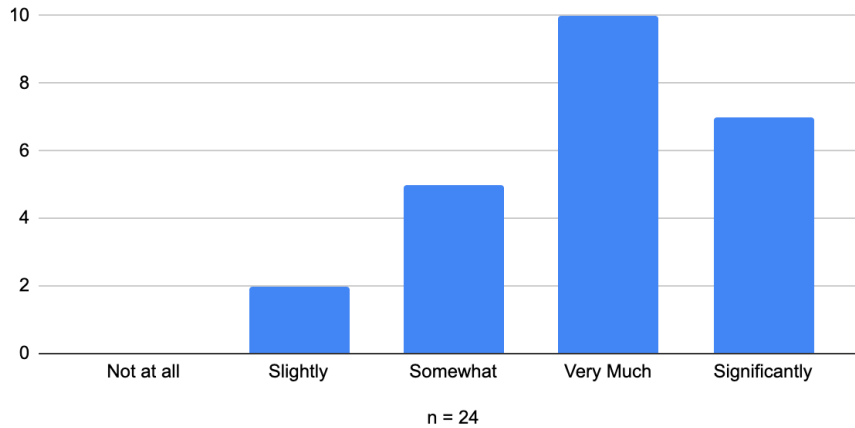


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Because of serving at the Compassion Clinics, how much more confident do you feel that you have what it takes to put your faith in action to make a difference in your community?



Significance:

For us, clinics have never been as simple as providing medical or dental care. We value the churches coming together and really owning their clinic through volunteer leadership and investment. It is great to see that this pays off in a way that benefits not only the bigger picture, but also the individual volunteers themselves through their growth. This is something we can share with others who may be considering volunteering at a clinic but are not sure if they will fit. This finding also illustrates success at expressing our Service value which states, “We value opportunities for people to gain perspective and grow in a life of reflecting Jesus,” and our Excellence value that says, “We commit to a culture where people participate in meaningful work as empowered servant leaders of the mission.”

Possible Responses:

- In communications, highlight the variety of skills needed in clinics that go beyond healthcare professionals to attract people of *all* gifts and skills so they may experience this
- Share volunteer stories that emphasize how unique skills were used
- Emphasize the opportunity for real tangible noticeable leadership development by being involved in a clinic

Finding #8: One Role, Many Motivations

Key Insight: While some clinic leaders have touching stories of feeling nudged by God to step into clinics, others end up here from happenstance. There is no one way to end up in a leadership position.

Description:

While our assumption was that clinic leaders ended up in their position of leadership after prayerful consideration, the data show that sometimes, it is not quite that intentional. Some expressed simply



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seeing a gap and stepping in because no one else would. Others are somewhere in between, such as one participant who said “I knew I could use my skills of administration and coordination to do something that brings resources to people that desperately need it.” They saw a gap, saw the impact their skills could bring, and stepped in.

Our survey data show that 83% of participants indeed saw their act of joining clinic leadership as stepping out in faith. This suggests that even for people who may have joined to fill a gap, it can still be an act of faith to say “yes” to stepping up to lead the clinic.

Regardless of why people start, they are impacted by their service and leadership and see that God honors their stepping out in faith. In our survey, we asked the open-ended question, “Please describe three ways you saw God use you as you served at the Compassion Clinic(s)?” One of the most common words in the responses is “leadership.” Participants not only get to experience growth in their leadership and see the difference their leadership can make, they see this all as God using them through their decision to step out in faith and become a clinic leader.

Significance:

This is significant because it adds nuance to the way we see and interact with our volunteers. We can no longer go in with the assumption that everyone is there for the same reason, but we can still do our best to ensure that they have a meaningful experience. It will be important to not over emphasize coming to leadership through a transformational prayer experience, so that others do not feel less significant or valued. It will also be important to remember this when seeking out new leaders--not to overlook the volunteer who is a little unsure as this actually may be the more common experience.

Possible Responses:

- Ensure we validate that people are there for many different reasons, but even if they sort of stumbled into their role it can still definitely be a God thing
- Create an “I’m here because” graphic that highlights different motivations for serving
- Watch for volunteers that show leadership potential and invite them to step up (don’t just wait for them to be “called”)
- Taking Finding #7 a step further--showing people that not only is there a place for them to serve, but there is a place for them to lead and go farther on the spectrum

Finding #9: Success Outside the Box

Key Insight: One of the challenges of clinic leadership is confusion around the definition of Clinic success.

Description:



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The qualitative data demonstrate that often leaders have to re-frame or re-define what success looks like over the course of their involvement in clinics. When they first got involved, they may have been unsure of the measure of success or had a wrong idea of what the real goal was of their work. It is easy to think that at a Compassion Clinic success is simply about how many guests are treated, but it is not that simple. Compassion Connect's volunteer onboarding process does not currently include a clear definition of success, which could be contributing to the confusion.

One major measure of success that participants do not often see up front is unity. Any one individual church can serve lots of people, but Compassion Connect pushes churches to come together as one Body, even when that is harder than it would be on their own. That can be hard to come to terms with for individual churches. Multiple leaders mentioned tension in decision-making when it comes to things like location of their clinic. It would be easy to walk away in times like those, but as they have evolved in their perspective of success, clinic leaders have embraced the value of unity. The leaders know, as one person put it, "Even when it doesn't go exactly how you want it to go, we need each other." Unity is a part of the success of a Compassion Clinic.

Another measure of success is if a doctor is able to hear the guest out and help them meet their needs. One doctor had the realization, "All you can offer sometimes is to be present, offer education, offer other resources. You don't have a lot to offer (a clinic room, sink, supplies), but that doesn't mean what you do have doesn't have value." She mentioned that it was hard at first coming from a traditional doctor's office to a pop up clinic in a church, but her perspective of success has evolved.

Finally, one volunteer leader described his shift from thinking of success as serving clinic guests only to serving the people around him, the other volunteers. He said, "I have realized it's not just about the immediate results in front of me, but through reproducing leaders and disciples." Our volunteer-led model means that for some in leadership positions, this shift is necessary. Loving and leading the volunteers around you is key to ensuring quality in the clinic as a whole.

Clinics are about more than just checking people off a list, they are about churches coming together in unity to care for a whole person--body, mind, and spirit--by having volunteers who love the people and each other. Our leaders understand this now, but they have not always, and it is worth considering how we can get them to understand this sooner so that all volunteers will be on the same page from the beginning.

Significance:

This finding reminds us how clinics can be a difficult adjustment for someone who has never done something like this before. That is not inherently bad, but it is important to clarify measures of success up front so that there are no unnecessary surprises or conflict down the line, and people have something



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to celebrate even when things don't go as they expected. It also makes us consider who we want as partners, especially higher up such as church partners--we want to pursue relationships with people who align with our values and do not get too caught up in the numbers. The leaders we interviewed clearly understand our Unity value which says, "We value bringing multiple churches together to serve their community as one," but it is worth considering how we can help volunteers understand that even earlier.

Possible Responses:

- Clearly define measures of success from the beginning for all volunteers
- Train leaders to set and internalize success measures so they will lead it on a peer to peer basis
- Prioritize relationships with churches who are humble and open to seeing the big picture rather than only focusing on numbers

Finding #10: Our Leaders Love Service

Key Insight: Many of our leaders were already passionate about serving their community before getting involved with clinics, and Compassion Clinics are just one way they serve their community.

Description:

We often have a picture in our mind of people who serve at a clinic for the first time having such an amazing and transformative experience that they fall in love with serving and can not wait to come back and do it again, or even seek out other opportunities to serve in other ways than clinics. Both our quantitative and qualitative data show that while this may certainly be true for some, for most of the leaders, service was a strong passion in their lives before they ever came to a clinic. Compassion Clinics may provide a way for them to serve that they otherwise would not have, but it is just one of many ways they impact their community.

Only one third of our survey participants say their involvement in Compassion Clinics is related to them serving more in their community, outside of just the clinics. Our survey also asked, "How important was/is service to living out your faith, before and after serving at a clinic?" The figure below shows a small change, but participants have an incredibly high baseline of importance of service.

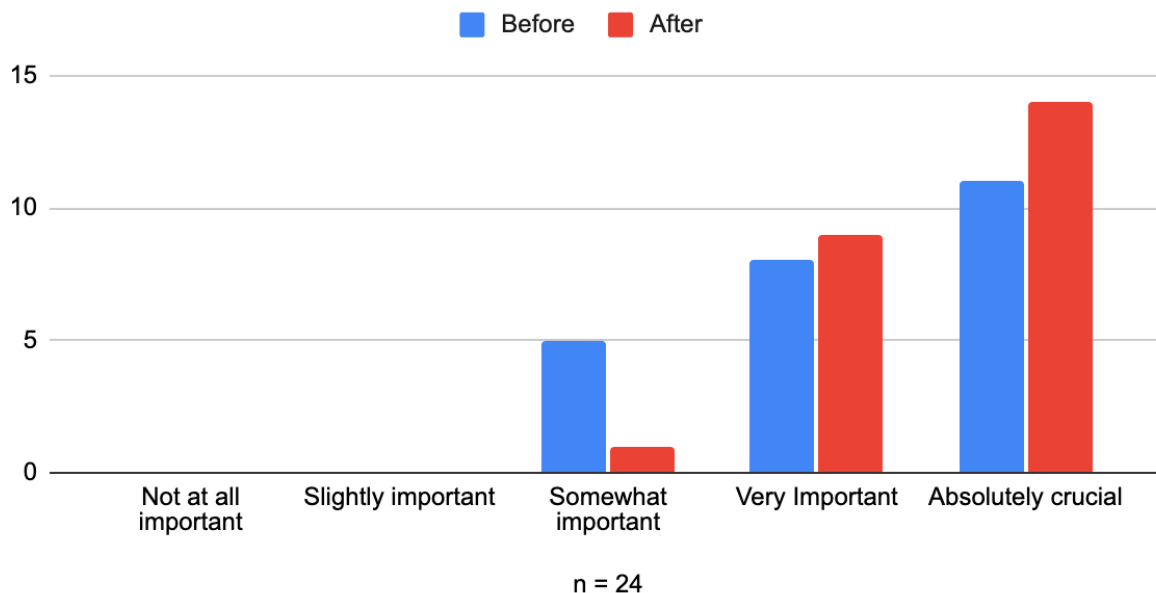


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How important was/is service to living out your faith, before and after serving at a clinic?



One participant commented, “We’re commanded to serve, so it’s part of obedience to Christ.” This seems to be the perspective that many leaders bring to their involvement in the clinics. That does not mean there is no room to grow, however. One person said, “I was a server even before I was a Christian, but I’ve grown to see service as *worship*, and clinics have helped me live that out.”

Significance:

This finding is significant because it changes the emphasis as we share volunteering opportunities with others. We are thankful for the service-oriented volunteers we do have and the passion they bring. However we also must have caution because we do not want to go into a church and ask for only the people who are already overstretched. We wish we could tap into the others, the people who are not natural “servers” and may not otherwise get involved. We will consider how we can reach more of these people while not devaluing our amazing volunteers who are already passionate. Our Unity value says that, “We value an inclusive, loving environment that unites volunteers in their passion to serve,” so we most certainly are not against gathering passionate people! We also say in our Service value that, “We value opportunities for people to gain perspective and grow in a life of reflecting Jesus,” so our hope would be to reach even more people to give them this opportunity to grow.

Possible Responses:



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- When we present to pastors of new church connections for the first time, emphasize that when they are thinking of possible people to get involved, they should not just choose the first person that comes to mind. Instead, they should think of someone with untapped potential who may not be as involved in serving other ways.
- Utilize influencers in the church who can bring people along who are hesitant to serve, and encourage them along the way
- Survey church attendees who are not involved in serving to discover the barriers

Finding #11: Collaboration and unity is out of necessity and Jesus.

Key Insight: Collaboration and unity between churches is necessary and also, Jesus commands it.

Description:

We found that collaboration and unity through the Compassion Clinics is a helpful tool for churches, organizations, and individuals who just cannot do it on their own. One clinic leader explained the importance of collaboration by saying, “We’re such small churches in North Portland we HAVE to communicate and collaborate. We don’t really have a choice. But it allows us to dream bigger than we otherwise would be able to.” Not only does unity give churches more resources but it also brings freedom to dream bigger with those who may have different perspectives.

We also asked the question, “Were there times when working with others that made you feel like you could do it better by yourself?” That question was often met with a chuckle and reasons why they could not do it on their own. A clinic leader from Gresham shared, “I have thought many times I could do it on his own, but now at 63, I know what I can and cannot do... I don’t think that anymore.” When pride is set aside and we are able to come alongside others in service, there are blessings, and the importance of working together is highlighted.

We also found that collaboration and unity are achieved and strived for because it is Jesus’ call! One clinic leader shared, “Compassion Clinics opened my eyes that there can be people [from other churches] who love Jesus too, and can even be more in tune than I am. My church doesn’t necessarily have all the right answers. I learned about that in seminary, but had never experienced it until I lived it in Compassion Clinics.” We have seen through our data that there can be an “us vs. them” mentality, and sometimes it takes experience uniting with other believers in a clinic setting to change that mindset.

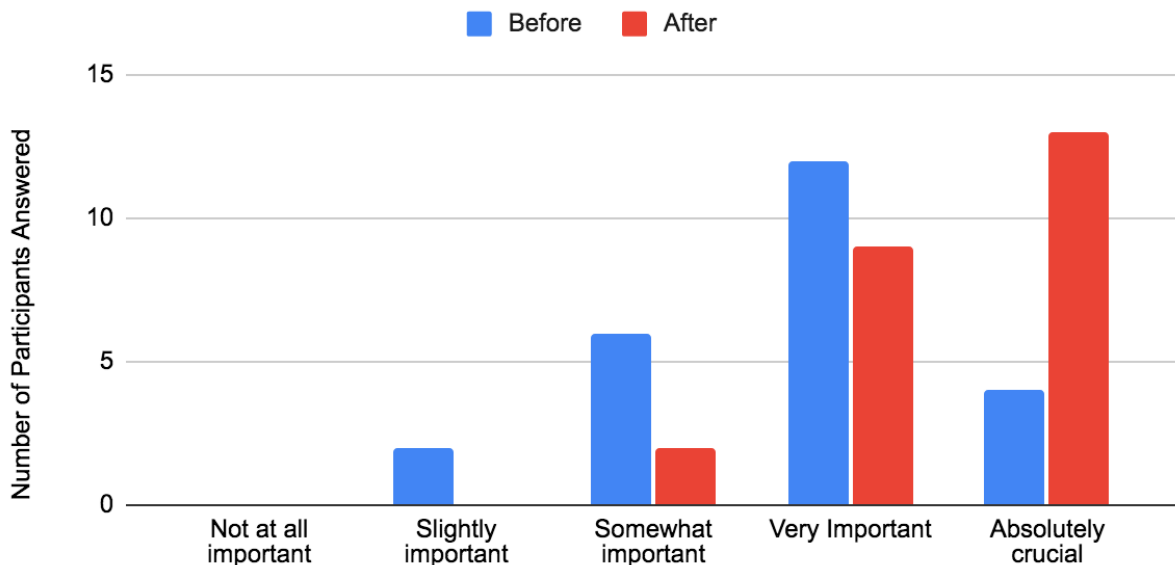
Also, the quantitative data show a shift in leaders who believe unity is important amongst believers from “very important” to “absolutely crucial.” Compassion Clinics have led volunteers to see that unity is a valuable aspect of faith.



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Before/After serving in a Compassion Clinic, how important to your Christian walk was/is unity between believers from other churches?



Church and Pastor Meetings with the goal of unity and collaboration already exist. About those meetings we heard from one clinic volunteer, “Unity is more easily achieved serving the community through tangible ways rather than theological meetings.” This clinic volunteer also shared, “I don’t even think about denominations at clinics.” When at a clinic the goal is to serve and love as Jesus does, and participants’ mindset is seeped in unity and collaboration, their attention to differences decreases.

Significance:

This finding highlights our value of Unity. Specifically, “We value bringing multiple churches together to serve their community as one,” and “We value an inclusive, loving environment that unites volunteers in their passion to serve.” This is important because we see through clinic leaders’ responses that they understand the value of unity and are living it out. This is also encouraging to us because unity is something that can be difficult to get started and keep going. Seeing that our clinic model helps clinic leaders and volunteers strive towards unity means that our organization is accomplishing one of our goals. But in this day and age, collaboration and unity is not always present and is difficult to strive towards. So that leaves us to ask the question, “If collaboration and unity are important to a follower of Jesus, then why is it so difficult?” Hearing from our clinic leaders that Compassion Clinics are a tangible way to put Jesus’ call into action is so encouraging! Our biggest “a-ha moment” is hearing that when the desired goal of the group is service (clinics), rather than going into a space where your denomination /



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church is the center of the conversation, unity and collaboration are more easily achieved and even celebrated.

Possible Responses:

- Intentionally pursuing more churches that may be small and overlooked that could not do a big outreach event on their own, because we know we add lots of value for them
- Being flexible in what we are asking of churches. It is not just funds we ask for, we are also asking for volunteers and other things..do not want money to be a barrier
- Consider these questions: How do we communicate the necessity of unity to large churches who could do it all on their own? How to come alongside your brothers and sisters from smaller churches. Can you humble yourself to be part of something collaborative for the benefit of the full Church?
- Have a good theological foundation for unity that we can share and emphasize with churches (potentially larger ones especially)
 - Some large churches are hesitant to join in collaboration because they are able to do clinics, big events, etc. by themselves.
- Some sort of forum or training--if collaboration and unity is so important, why is it so difficult? (Incorporate into our Compassion Clinic Summit)
- Emphasizing our angle of unity + service is really important (testimonials and maybe even some data?)

Finding #12: Relationships are built when serving together.

Key Insight: Clinic leaders love the connections made between other clinic leaders and volunteers. There is excitement and celebration when coming together to plan!

Description:

Working closely with others in a service setting brings communities together and encourages friendship and collaboration to continue far past the clinic date. Our data showed that the community grown between volunteers is why some continue coming back. One clinic volunteer shared how she and her husband are the only people from their church that serve at clinics. She shared her love for getting to interact and serve alongside those who she would not otherwise meet. Another clinic volunteer shared, Compassion Clinics give opportunities to live out service actively alongside others, which can be lacking in other aspects of life.

The data also show that the relationships developed through Clinic leadership are still growing and thriving. Our clinic volunteers are excited to meet others from different neighborhoods and clinics because they share the same passion and a common interest. As one volunteer put it, "There is beauty in the different ways people express their faith. Each volunteer brings their own unique ways they do their



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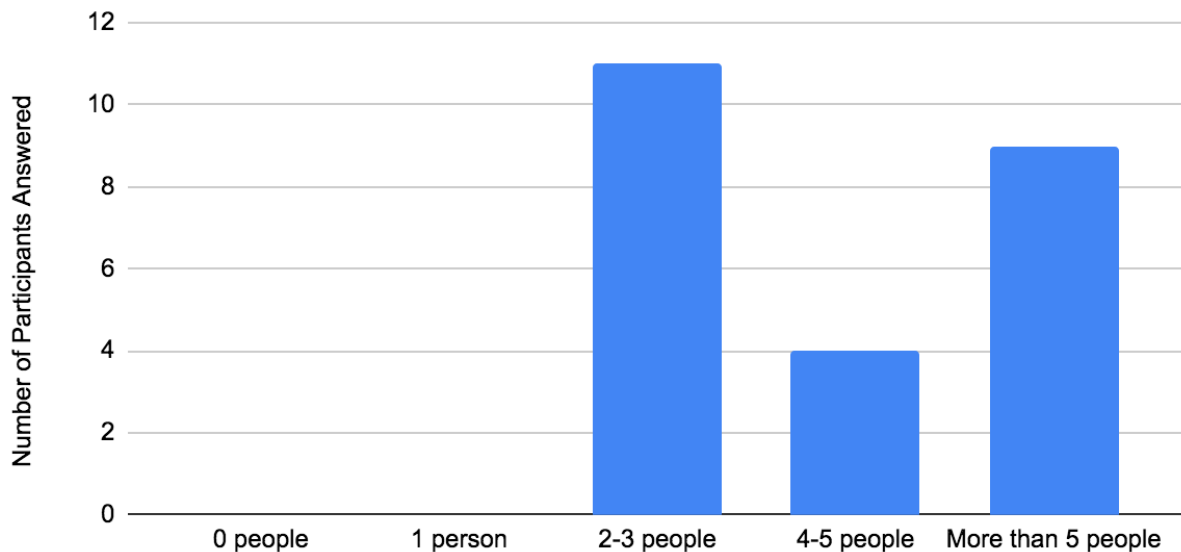
work, and it's so cool to watch them come alive in that. God displays his creativity through this." Our data show that volunteers are encouraged and inspired by the community that surrounds them at Compassion Clinics.

Significance:

Our hope for clinics is not only collaboration and unity during the event, but also collaboration and unity with continued relationships. This finding is most encouraging because we learned that volunteers and clinic leaders do care about those they are serving with, not just a one-time event. This finding also highlights our values of unity and love found in our values document, which states, "We will build a united family atmosphere among staff and volunteers," "We will foster healthy relationships between local church leaders," "We value an inclusive, loving environment that unites volunteers in their passion to serve," and "We value a culture of Servant Leadership and honoring others above ourselves." Our biggest "a-ha moment" is learning that the community aspect of Compassion Clinics is a huge value add to our leaders, which leads us to pay more attention to this in the future and strive to create more opportunities for volunteers to gather outside of the clinic date.

This finding is also supported in our quantitative data:

How many volunteers from the Compassion Clinics have you continued to communicate with/keep up with after the clinic?



Our assumption was that the most common answer would be "1 person," and to our excitement, clinic volunteers are keeping up with more people than expected.



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Possible Responses:

- Create more opportunities for volunteer leaders to gather outside of the clinic date (family atmosphere, community)
- Emphasize to prospective leaders (millennials, etc.) the impact that getting to be a part of the volunteer team will have on them.
- Recognizing leaders who do come regularly to planning meetings (incentivizing somehow) Other leaders recognizing them.

Finding #13: It's easier to follow than lead.

Key Insight: Sometimes it is difficult to get clinics going in areas where there is no church leadership and engagement.

Description:

As one clinic leader put it, “We often see that there are many individuals and churches who are willing to follow in unity, but not step up and lead. Which is okay in seasons, but doesn’t give you the full picture for sustainability. It’s really hard sometimes to get people to go to a leadership commitment. It means giving in when you don’t want to sometimes.” Another clinic leader shared, “Some people do not have time to focus on things other than their church (especially smaller churches), we just need to be exposed to each other.” The data demonstrate that time, hesitancy, and pride can get in the way of leading. It is easier to follow than lead, but there are blessings that come when we step up in love and care.

A clinic volunteer shared her experience of trying to start a clinic, reporting that many churches would rather just contribute money towards the clinic, rather than time and effort. Churches that only contribute money are still a huge contribution and blessing, but for the full reflection of our model and core values, as well as sustainability, we seek for churches to support in leadership and volunteering as well. Through sharing our model and vision, this is a way we can highlight the importance of contributing time and effort among churches.

Significance:

This finding highlights our values of unity and service, which state, “We value bringing multiple churches together to serve their community as one,” “We build and display unity of local churches to redeem the image of the church in the Community,” and “We create models of service that are volunteer led.” This is important because our model of Compassion Clinics require collaboration and unity between churches. We wonder if simply recruiting more leaders could resolve this challenge. If we are not reaching out and asking, it is very unlikely that they will step up for various reasons. With a personal ask as well as sharing all that comes with stepping into a leadership position, the chance of the volunteer saying yes is higher.



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Possible Responses:

- Reach out to churches that have too much on their plate or do not want to step out, to hear how collaboration and unity is best achieved with those barriers
- Use action steps from other findings to promote improvement in this area.
- Reach out personally to volunteers who are committed and invite them into a leadership position.
- Designate a Clinic Leader to be the “onboarding leader”, they will take space and time to meet with the prospective leader, and share all that comes with joining the leadership team. These meetings would consist of meeting twice or three times, and checking in and answering questions - this would hopefully insure a healthy and beneficial onboarding period.

4. Conclusion

Insights Into Impact

At the beginning of this project our team hoped we would find evidence that:

1. Our Compassion Clinic volunteer leaders are being empowered to use their gifts and skills in a meaningful way,
2. They love working alongside other Jesus followers despite their differences,
3. They recognize there is suffering in their own neighborhoods and are stepping into it with love, and
4. They feel the Clinics are an effective way to put their faith into action.

A scan of our thirteen findings reveals that eight strongly affirm our Intended Impacts, and five support our values but do not necessarily fall under the scope of the highly focused impact statements.

Additionally, a handful of findings also yielded discoveries we can learn from in our quest for improvement.

Several findings show that our Compassion Clinic model is on its way to realizing **Impact #1**: that leaders are being empowered to use their gifts and skills in a meaningful way. In particular, **Finding 7** reveals that Compassion Clinics’ unique volunteer-led approach allows people with any background to discover or deepen their unique gifts and skills through serving in a clinic, and **Finding 5** confirms that Compassion Clinic leaders are experiencing a deeper sense of meaning and purpose through their volunteerism.

Taken together these findings echo and affirm that our explanation for statement of **Impact #1** is not just words on paper but is actually something our key leaders are experiencing, “We want people to realize



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that anything they do can be a vocational call from the Lord, and that service can be done meaningfully outside the walls of a church.”

Several of our findings also demonstrate that Compassion Clinics are making progress toward **Impact #2**. Specifically, we can point to **Finding 11** and **Finding 12** which show that Clinic volunteers love working alongside other Jesus followers despite their differences, which leads to a mindset of collaboration over competition. These two findings reveal that many clinic leaders feel collaboration and unity between churches is necessary for those who could not do it on their own, and also because Jesus commands it. They also reveal that Clinic leaders love the connections made between their peers, which generates excitement and celebration when coming together to plan.

However, **Finding 13** shows there is still work to be done to see this second impact come to fruition, as some communities struggle to recruit a variety of leaders that represent a healthy mix of local churches. It is still sometimes easier for a church to go its own way or simply contribute financially rather than committing to the more difficult path of co-ownership with others.

Additionally, our findings show that Compassion Clinics have also made headway toward **Impact #3** with a small caveat. **Finding 1** describes the process of Clinic leaders developing a greater sense of empathy for Clinic guests by listening to them and hearing their stories and provides strong evidence in favor of **Impact #3**. This finding reveals that volunteers’ experience with people who are different from them ignited a sense of compassion and understanding that allows them to develop a heart-posture of selflessness and humility. **Finding 3** also shows that because of volunteering with the Clinics, leaders are developing a deeper understanding of truly selfless service that does not require any personal credit or accolades. Together these findings suggest that we are well on our way to ensuring that Clinic volunteer leadership teams are recognizing the suffering in their neighborhoods and are stepping into this messy but meaningful arena with love.

However, one caveat is the discovery in **Finding 10** that many of our leaders are already passionate about serving their community before getting involved with Clinics, and Compassion Clinics are just one way they serve their community. This shows that **Impact #3** is, to some degree, happening prior to Compassion Connect’s involvement because the types of volunteers we attract already see service as an essential part of their faith DNA, and therefore we can not take all the credit.

Our fourth and final impact statement was a bit harder to assess. **Finding 2** does support **Impact #4** as we discovered that before serving with Compassion Connect many volunteer Clinic leaders encounter barriers to interacting with their struggling neighbors. For these leaders, the Clinics provide an environment where relationship building and interaction is baked in, making it much easier to begin



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relationships and effectively put their faith in action.

We did not discover further evidence toward this last impact. This could be because of the way our questions were phrased, or it could mean that we are not having as big of an impact in this area as we would like. It is very important to us that our volunteers feel the Clinics are an effective way to put their faith into action, so this is an area we will want to pay attention to in 2021.

Steps Forward

Our team thought of many creative responses to our findings. Here are a few that clearly rose to the top, which we would like to implement right away.

- Post-Clinic Reflection
 - We will invite all volunteers to a post-clinic meeting where they can debrief the clinic, share stories to encourage one another, reflect together on how God used them, and share why the experience was impactful.
 - One of the concepts we learned early on in Project Impact is the idea that “evaluation is educative.” This idea is that through asking the right questions, people will come to conclusions that help them learn about themselves and their experiences with our organization. Our findings from clinic leaders is that they mostly understood the deeper principles of the clinics such as the importance of unity and that the clinic is a vehicle for God to use them, but it took them awhile to get there. To increase the quality of experience of newer volunteers, we’d like to help them come to similar conclusions through intentional reflection times post-clinic.
- Clearly Defined Success
 - We will be clear and up front about our values in every meeting we have, from our initial vision casting meetings to our volunteer training, so everyone who comes in contact with us knows that we care more about Jesus and Unity than numbers or efficiency.
 - Without clarity, people can easily assume that success is based on numbers. We are a Jesus organization and a Unity organization, not primarily a medical organization. We don’t want a situation where people would look at a clinic that was smoothly run and served a lot of people, but wasn’t led by multiple churches coming together, as a resounding success. We also don’t want people to see a small and humble clinic with six churches faithfully showing up to provide loving care to just eight or nine people as a failure. Most of our volunteer leaders who have been with us for a long time understand this, but we want to instill a clear understanding in all volunteers from the very beginning.
- Value Proposition
 - We will better represent the value clinics offer to prospective volunteers by being more



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specific about why other volunteers have loved and experienced growth in their experience volunteering with clinics.

- A huge benefit of this evaluation was that we got to hear why people loved volunteering at Compassion Clinics and what it offered them that they didn't have before. We had some ideas of course, based on assumptions and anecdotes, but now that we have a more thorough understanding we can better share these benefits with people who are considering volunteering for the first time, volunteers who are considering their first leadership role, or churches considering new involvement. Some of these key takeaways we plan to highlight include:
 - The ability to encounter and minister to people whose path they would otherwise not cross (see finding 2)
 - The opportunity that clinics create for volunteers to practice and develop unique spiritual gifts and skills and be used by God (see findings 4 and 7)
 - That involvement with clinics is more than just service, it is an aspect of deep discipleship that can deepen your purpose and meaning (see finding 5)
 - The collaboration with other people and churches becomes one of the most fun and beloved aspects of clinic leadership, even though it can be hard at first (see finding 12)

Opportunities for Future Evaluation

Moving forward we, as Compassion Connect, commit to evaluating an aspect of one of our programs each year. This past year we specifically looked at our Compassion Clinics, and have already seen the benefits of Project Impact on our Clinic Model. There are other areas within Compassion Clinics that we could look into, including Clinic Guests, Clinic Experience, Clinic Church Partnerships, and others that we could identify. We also want to look into our anti-exploitation ministry, the Freedom Collective. This could be done through evaluating impact on populations such as our mentors, volunteers, the youth we serve, and other aspects that we could identify through the years. The area of impact we choose each year will be determined by the executive leadership team. We also see value in bringing others within our organization to come alongside the evaluation of our program areas and the implementation of the changes we identify. This will require us to check in with program directors and teams for accountability and awareness of how these measures are being put in place, so we will create a quarterly meeting to check up on our organizational efforts to implement our knowledge from Project Impact.



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5. Appendix

Indicators of Impact

Impact #1 – Clinic volunteers use their gifts and skills in a meaningful way, which empowers them to adopt a lifestyle of service that reflects Jesus’ heart. (Value: service)

What we mean: Often people in the pews think “I can’t serve” because they don’t fit into the typical service roles offered by their church. They think, “I don’t have anything to offer, or I don’t know what my gifts and skills are.” When we have accomplished this impact, clinic volunteers realize that anything they do can be a vocational call from the Lord, and that service can be done meaningfully outside the walls of a church.

E3 (Quantitative Indicators of Impact)

What do people know now that they didn’t know before as a result of your program?

- Know they have helpful gifts and skills
- Know that they can be used for Jesus
- Understand that using their skills for Jesus can be an ongoing way to live out their faith
- Know anything can be a vocational call from the Lord
- Know service can be done meaningfully outside the walls of the church
- Know that their actions are planting seeds even if they can’t see immediate change right away

What can people do now that they couldn’t do before as a result of your program?

- Put their skills in action to serve
- Seek out opportunities/ they want to find ways to serve
- Share stories of their service

How do people feel now that they didn’t feel before as a result of your program?

- **Empowered, capable, confident**
- Feel purposeful and fulfilled that they have a new way to live out their faith in Jesus

E4 (Qualitative Indicators of Impact)

What might they believe about themselves or others that they didn’t believe before?

- Increased belief in their sense of self worth, going from feeling underutilized or like they don’t have a place in the Church to feeling integrated and like they truly have something to offer
- They have a new outlook on what the Church is and is meant to be....believe that the Church is an active body in the world, not just a building
- Believe that Jesus wants us to tangibly be serving and loving our communities and that Church is not just a Sunday activity--called to go out, not just stay in. (Serving is an integral part of their faith)
- Trust that they can make a difference

How might they become different (operate or show up differently) as a result of your program?

- They grow into what scripture calls us to do; i.e. get out there and serve/love in tangible ways
- They become people who seek out service opportunities because it’s become a part of their faith & life
- Their stories of service become part of their testimony that they frequently share

What might they love (be more committed to and stick with even when it’s difficult) as a result of your program?

- **They love serving and putting their gifts into action because they see the bigger picture**



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	<ul style="list-style-type: none"> They love that there are so many unique ways to serve beyond typical church roles
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Impact #2 – Clinic volunteers love working alongside other Jesus-followers despite their differences, which leads to a mindset of collaboration over competition.
(Value: unity)

What we mean: Clinic volunteers are exposed to the concept of unity and realize its importance to their Christian faith. Although they may be hesitant at first to work with people from different denominations or backgrounds, once they experience it they realize that they have more in common than they thought. That leads to a changed mindset where they are quick to collaborate and slow to divide on future neighborhood projects.

E3 (Quantitative Indicators of Impact)

What do people know now that they didn't know before as a result of your program?

- They know there is a spiritual call to unite with other believers
- They recognize they have more in common with believers from different backgrounds than they might have thought

What can people do now that they couldn't do before as a result of your program?

- They seek out opportunities to be with or serve with other believers
- They have connections with other churches/individuals they didn't have before

How do people feel now that they didn't feel before as a result of your program?

- They feel connected to the larger body of Christ, part of something bigger
- They are eager to hear about other churches' beliefs, challenges, etc.
- They feel inspired to continue taking steps to live in unity with other Christians

E4 (Qualitative Indicators of Impact)

Believe

- Clinic volunteers believe that working together with other Jesus followers truly has a greater impact than individual service
- Clinic volunteers have a heart change toward other believers, seeing them as just as beloved by God

Become

- They develop lasting/meaningful relationships with other believers
- Clinic volunteers become ambassadors of unity/collaboration within their spheres (church, etc).
- They become people who think "how can we do this better together?"
- They embrace doing the harder thing than the easier thing

Love

- They stick with collaboration through their commitment to working together despite the challenges.
- Clinic volunteers love (value, enjoy, find fulfillment) working alongside other Jesus-followers *love in the



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natural sense but also as a choice because they value it so much

Impact #3 – Clinic volunteers are loving stewards of their own neighborhoods.
(Value: love)

What we mean: Because the clinic took place in their own neighborhood, clinic volunteers are confronted with the reality that there are real needs in their community that they may not have been aware of before. Their experience with people who are different from them ignites a sense of compassion and understanding that allows them to develop a heart-posture of selflessness and humility. They develop Jesus's eyes and heart for the struggling and hurting and feel that they have the power to do something about it.

E3 (Quantitative Indicators of Impact)

What do people know now that they didn't know before as a result of your program?

- Know that there is suffering in their neighborhood
- They know what it looks like to tangibly serve their neighbors
- They realize they have more in common with the people they serve than they may have thought.

What can people do now that they couldn't do before as a result of your program?

- Volunteers take more ownership of their role in community/spiritual transformation
- Because the clinic opens their eyes to community needs and individuals facing different challenges than they are, they begin to empathize and seek to carry the burdens of others even more
- They are able to provide tangible help to the people in their community (by referring them to Clinics)

How do people feel now that they didn't feel before as a result of your program?

- Selfless and humble, aware
- Heartbrokenness/lament that leads to more empathy
- Desire to share Jesus' love because they have received so much

E4 (Qualitative Indicators of Impact)

Believe

- They believe that through love, they can truly make a difference
- They accept that Jesus' ministry serving the "least of these" was a call for them too
- They believe that love is both a feeling *and* an action
- They believe everyone is a child of God
- Have faith that they have the power to do something to alleviate the suffering of people in their neighborhood who are struggling & hurting

Become

- Clinic volunteers become people of faith who show compassion to those in their neighborhood
- Clinic volunteers become people who are motivated to serve not just out of a sense of duty or guilt but out of a sense of their common standing and "belovedness" in the eyes of God
- Become people that prayerfully seek out opportunities to love-- break my heart for what breaks yours

Love

- Clinic volunteers love their neighbors as themselves
- Clinic volunteers embrace their community because they have developed Jesus' eyes and heart for the struggling and hurting



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Impact #4 – Clinic volunteers are more like Jesus. (Value: Jesus)

What we mean: Volunteers take the opportunity to act on their faith outside of a Sunday morning. They understand that as a follower of Jesus, actively being His hands and feet is a part of what it means to, “Love God and Love People.” They are inspired to seek more regular opportunities to serve in order to look more like Jesus, and are no longer satisfied with just “going through the motions” of their faith.

E3 (Quantitative Indicators of Impact)

What do people know now that they didn't know before as a result of your program?

- They know that service is an integral part of their faith and walk with Jesus
- They know that a hallmark of Jesus' ministry was not just preaching but serving--he modeled service for us.
- They know how to love people tangibly as Jesus would

What can people do now that they couldn't do before as a result of your program?

- They no longer just “go through the motions” of their faith but are trying out a deeper and more satisfying way to express their faith
- They make service an integral part of their faith & walk with Jesus
- They follow Jesus' call to be his hands and feet

How do people feel now that they didn't feel before as a result of your program?

- They feel more fulfilled & purposeful in their Christian walk since they are following Jesus' call
- They are feeling new confidence that Jesus can and will use them in amazing ways when they step out in faith

E4 (Qualitative Indicators of Impact)

What might they believe about themselves or others that they didn't believe before?

- They believe that “going through the motions” is no longer a whole picture of their faith--serving meaningfully in an essential element of their faith rather than an optional piece
- They believe that the Holy Spirit equips them to equip/inspire other believers on this journey

How might they become different (operate or show up differently) as a result of your program?

- Clinic volunteers become more like Jesus!
- They become people who seek more regular opportunities to serve in order to look more like Jesus
- When they serve, they become people who are doing it with the attributes of Jesus (the fruit of the spirit: humility, kindness, selflessness, love, etc)

What might they love (be more committed to and stick with even when it's difficult) as a result of your program?

- They love showing up for their neighbors even when it's hard because they know this is what Jesus would do
- They are committed to loving God by loving their neighbors
- They embrace loving other people even though this is very difficult!



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Principles of Change

Critical features of your program, initiative, or strategies	The theory or principle behind the feature of your approach
Volunteer led--local leadership & ownership by (preferably) church lay leaders. Volunteers leading volunteers. There are opportunities to go deeper in volunteering through taking on greater leadership roles	This is not a CC owned project; for true community transformation to happen it should be led by the community for impact and sustainability. The Clinic is never meant to be a one day event; it is meant to address deeper, ongoing community challenges and in order for that to happen, it is not sustainable for Compassion Connect to own the process. Community transformation is necessary because there are systemic issues that no one person, church, or organization can handle alone.
We don't have Clinic events hosted by only one church, there must be at least 3 to encourage true Unity	Jesus talks about unity as his final prayer for believers.
We remove as many barriers from church participation as possible (financial, etc).-	We value churches of all sizes & types being able to participate. We want this to be a reflection of the neighborhood, not of the churches with the most resources. All churches are needed.
Our Clinics are replicable and scalable	We think this vision is not geographically bound, it is bigger than just one city or state. Jesus loves everywhere and can benefit from working together to serve their neighbors
Stakeholder churches have crucial areas of investment (prayer, leadership, finances, volunteers, etc)	With quality comes preparation; one of our values is excellence. Again, this is not a CC owned project; for true community transformation to happen it should be led by the community for impact and sustainability. Churches need to have some "skin in the game" as a sign of real investment and ownership. These steps help leaders connect on a relational level as well.
We call our clinic attendees guests, and want love and relationship to be an integral part of the guest experience	This is for the benefit of both the guest and the volunteer because it equalizes the playing field and removes barriers, creates empathy, etc.



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Both service and unity are key features of the clinic model.	This is important to Jesus, plus the act of doing united service will lead to more unity and more community transformation. Unity is more sustainable and tangible when it is paired with service.
We encourage hosting in a school or public building rather than a church (not mandatory)	Helps build secular community relations, and helps make our guests feel comfortable. This is a key feature of our Clinics because as churches build relationships of trust with secular groups such as schools and governments, these groups will turn to the Church when other community needs arise. Hosting a Clinic in a school also increases the likelihood that guests will attend, and schools are the best way to access many families in need in the community.

What additional principles do you hold which might not yet show up in your programs?

1. Feature- The Clinics lead to ongoing unity of the Church and deeper relationships amongst volunteers and the guests they serve. Principle- If the Clinic only occurs on one day, can community transformation really be possible, and is unity actually being expressed? If we want to create real change and ongoing unity, church & community relationships are key. both unity of the Church and ongoing guest relationships with volunteers
2. Clinics are meant to be holistic (body, mind, spirit) and transformative--does the reality match how much we talk about that piece? Is the person really different by the end of the clinic?
3. Feature- The churches and volunteers serving reflect the population of the community. Principle- We don't want to be "White Saviors". We value diversity and unity amongst ALL believers which in turn reflects the population of the clinic guests.



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Qualitative Protocol

1. What ways has your participation in Compassion Clinics made you more aware of the suffering and brokenness within your community? What are you still learning about your community? → How has that awareness affected the way you think about others, what's possible or not with people and organizations, how you affect people, etc.
2. In what ways has volunteering with the clinic given you the opportunity to act as the 'hands and feet of Jesus' in the life of someone who is hurting? In what ways have you struggled to connect your actions during the Clinic to Jesus' call? (Is there ever a disconnect?) → How has your experience with the clinics revealed more about your identity in Christ?
3. How did you feel more connected to others and to the larger body of Christ while serving your community? Were there times when working with others that made you feel like you could do it better by yourself? → Despite that, why are you committed to hold onto and live out unity?
4. What have you discovered about unity through your experiences volunteering at the Compassion Clinic(s)? → How have these discoveries evolved how you see other believers?
5. What have you learned about service through your experience with the Compassion Clinics? → How have these experiences changed your mindset about the role of service in your faith?
6. When you think about serving your community, what feels the most overwhelming to you? → How has your experience volunteering at the Compassion Clinics, despite those fears, made you more dedicated to Loving People?
7. What significant strides have you made in your spiritual life through volunteering with the clinics? → In light of these strides in your spiritual life, how has your motivation to serve evolved overtime as you've served with the clinics?
8. What experiences from the clinic have led you to realize doing this type of service is an integral part of your faith? → How has your story of service volunteering with the clinic become part of the testimony you share with others?
9. What makes you feel more capable and empowered when serving at a Clinic? What still brings discomfort? → How has that experience changed your dedication to putting your gifts into action outside of the typical "four walls" of the church?
10. When you think of planning the next clinic, what are you most excited about? → How have those things kept you invested in this work and are there other aspects that keep you going?



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Quantitative Instrument

SCALE QUESTIONS: Please circle the answer that best represents your experience with the Compassion Clinics.

- *Because of serving at the Compassion Clinics, how much more confident do you feel that you have what it takes to put your faith in action to make a difference in your community?*
 - **5-** Significantly **4-** Very Much **3-** Somewhat **2-** Slightly **1-** Not at all
- *To what extent has your experience with Compassion Clinics led you to follow Jesus' call to be his hands and feet?*
 - **5-** Significantly **4-** Very Much **3-** Somewhat **2-** Slightly **1-** Not at all
- *How many other volunteers from the Compassion Clinic have you continued to communicate with/keep up with after the clinic?*
 - **5-** More than 5 people **4-** 4-5 people **3-** 2-3 people **2-** 1 person **1-** 0 people

YES/NO QUESTIONS:

- *Yes or no: As a result of serving with Compassion Clinics, do you volunteer more in your community outside of the Clinic?*
- *Yes or no: Do you feel more connected to the larger body of Christ as a result of volunteering with the Compassion Clinics?*
- *Yes or no: Has your understanding of how to love people tangibly as Jesus would changed through your involvement in the Compassion Clinics?*
- *Yes or no: Did you see getting involved with volunteer leadership with the clinic as an act of stepping out in faith?*

SHORT ANSWER QUESTIONS:

- *Please describe three ways you saw God use you as you served at the Compassion Clinic(s)?*
- *Name three spiritual/personal gifts or talents that you have seen blossom during your Clinic volunteer experience(s)?*

RETROSPECTIVE QUESTIONS:

- *How aware were you of the need for health services in your neighborhood, before volunteering with clinics?*
 - **1** – not at all aware
 - **2** – Slightly aware
 - **3** – Somewhat aware
 - **4** – Moderately aware
 - **5** – Very aware



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How aware are you of the need for health services in your neighborhood after volunteering with clinics?

- 1 – not at all aware
 - 2 – Slightly aware
 - 3 – Somewhat aware
 - 4 – Moderately aware
 - 5 – Very aware
- *Before serving in a Compassion Clinic, how important to your Christian walk was unity between believers from different churches?*
 - 1 – not at all important
 - 2 – Slightly important
 - 3 – Somewhat important
 - 4 – Moderately important
 - 5 – Absolutely crucial

After serving in a clinic, how important to your Christian walk is unity between believers from different churches?

- 1 – not at all important
 - 2 – Slightly important
 - 3 – Somewhat important
 - 4 – Moderately important
 - 5 – Absolutely crucial
- *Before serving in a Compassion Clinic, how important was service to living out your faith?*
 - 1 – not at all important
 - 2 – Slightly important
 - 3 – Somewhat important
 - 4 – Moderately important
 - 5 – Absolutely crucial

After serving with a Compassion Clinic, how important is service to living out your faith?

- 1 – not at all important
- 2 – Slightly important
- 3 – Somewhat important
- 4 – Moderately important
- 5 – Absolutely crucial

DEMOGRAPHIC QUESTIONS:

- What is your gender? (Male/Female/Prefer not to Answer)



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- What is your age (under 30/30-50/over 50)
- How many years have you been involved with Compassion Clinics (less than 3 years/3-5 years/6-8 years/more than 8 years)



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Quantitative Results (Raw Data)

- *Because of serving at the Compassion Clinics, how much more confident do you feel that you have what it takes to put your faith in action to make a difference in your community?*
 - **5- Significantly:** 7 respondents
 - **4- Very Much:** 10 respondents
 - **3- Somewhat:** 5 respondents
 - **2- Slightly:** 2 respondents
 - **1- Not at all:** 0 respondents
- *To what extent has your experience with Compassion Clinics led you to follow Jesus' call to be his hands and feet?*
 - **5- Significantly:** 7 respondents
 - **4- Very Much:** 11 respondents
 - **3- Somewhat:** 5 respondents
 - **2- Slightly:** 1 respondents
 - **1- Not at all:** 0 respondents
- *How many other volunteers from the Compassion Clinic have you continued to communicate with/keep up with after the clinic?*
 - **More than 5 people:** 9 respondents
 - **4-5 people:** 4 respondents
 - **2-3 people:** 11 respondents
 - **1 person:** 0 respondents
 - **0 people:** 0 respondents
- *As a result of serving with Compassion Clinics, do you volunteer more in your community outside of the Clinic?*
 - **Yes:** 8 respondents
 - **No:** 16 respondents
- *Do you feel more connected to the larger body of Christ as a result of volunteering with the Compassion Clinics?*
 - **Yes:** 21 respondents
 - **No:** 3 respondents
- *Has your understanding of how to love people tangibly as Jesus would changed through your involvement in the Compassion Clinics?*



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- Yes: 22 respondents
- No: 2 respondents

- *Did you see getting involved with volunteer leadership with the clinic as an act of stepping out in faith?*
 - Yes: 20 respondents
 - No: 4 respondents

Please describe three ways you saw God use you as you served at the Compassion Clinic(s)?

I was able to get the fencing, toilets and wash stations donated. I was able to minister in prayer with many of our African families. I was able to meet the doctors, dentists and physical therapists and those that had participated for the first time and pray with them.

Prayed with them helped find services needed helped provide clothing and hygiene items brought in frozen chickens brought in crafts for children

First, I was trained as a social worker, and my education taught me to accept people where they were, not where I wanted them to be. Thus, I was able to serve them without judgment. Second, as an EA in Title 1, I worked with and taught at-risk youth. This experience showed me how easily it was for families and young people to slip through the cracks of our social safety net. Third, assisting at the Compassion Clinics was a natural off-shoot of my volunteering with Backpack Buddies, which provided healthy food and snacks for low-income families in two neighborhood grade schools.

Health education for the patients; encouragement to the staff; encouragement to the patients.

Getting to know other churches, getting to know local communities through door to door promotion, and filling in the gaps where our systems fail us

1. Prepared by HIm to be a non-denominational advocate 2. Used my talents of administration in a direct way 3. Found new and creative ways to get the whole community more involved in a way that gently exposed them to the power of God and of prayer.

help bring comfort to hurting people; prayer for our guests that Jesus would meet their needs of the day; fellowship/partnership in Jesus with other volunteers

1) Bringing churches together to serve our community
2) Bringing community groups (community college, optometrist, dentists) together to help those in need in our community
3) Helping Christians see that we together are the body of Christ from different church backgrounds

1) making contacts with people I would never have known, 2) impetus to creatively search for ways to benefit my community, 3) increased confidence that God will multiply the 5 loaves and 2 fish that I bring

Works of hospitality; moments of humility; connecting with other children of God with vastly different experiences than my own.



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Use of discernment, being a joy to others.

Connecting community leaders together to better identify those in need

Show love through hospitality of all guests

An able body, willing to show up and do easy day-of tasks

1. Vessel 2. Servant 3. Grace recipient

1. volunteer 2. clinic leader 3. board member

interpreting Spanish. praying with guests. networking with pastors

1) enabling others to serve others in a non-threatening environment, 2) encourage others to have confidence in their service, 3) giving others not directly involved with the clinic an outlet to serve their community.

Healing of body through offering dental and chiropractic services

Healing of mind through good conversation and making people smile

Healing of community as people could rely on the church to meet some of their needs.

Provide health services at clinic sites

Research health education materials to be used in the clinics

Consultation regarding how to provide health services during a pandemic

Discipline other believers to serve humbly, leading believers to function effectively in a culture felt to be generally hostile to Christians, and being face to face and/or shoulder to shoulder with others bearing God's image who I might otherwise have been dismissive of (being reminded of their value to God & by extension to me).

Name three spiritual/personal gifts or talents that you have seen blossom during your Clinic volunteer experience(s)?

Logistics, planning and organization, ability to connect businesses with Compassion Connect and bringing churches together!

My ability to connect quickly and ask what can I do to help them my heart wants to serve I really do love them

First, I was able to deepen my friendships with fellow volunteers from my church, because of our similar working experiences. Second, I was able to experience first hand the generosity of store owners and businesses who donated goods or funds to help run the clinics. Three, I saw so many people living out their faith by serving others selflessly.

Health education for the patients; encouragement to the staff; encouragement to the patients.

Listening capacity; empathy; tolerance/patience regarding others



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Connecting people, walking alongside, recruiting people to serve
This is Shan Hill. Not sure I would use the word blossom. But the clinics strongly use my God Given Talents of leadership, problem solving, organizing and motivation
helping those in need, ability to listen with compassion, teamwork in Jesus' Name
1) Leadership 2) Hospitality 3) Keeping Jesus the center
1) living in the reality of the unity Jesus prayed for, 2) a repeated lesson of how broad the kingdom of God is, 3) building of confidence that God's people are flexible and selfless
Humility, generosity, fellowship.
Faith, Empathy, Discernment
The ability to connect and to be hospitable as talents, and kindness as a gift
1. Humility 2.Trust 3. Dependency on God
faith, teaching, leadership
gift of discernment.gift of helps. gift of encouragement
1) kindness, 2) boldness, 3) perseverance
Connecting, equipping, and relationship-building
Compassion Clinics is only one of several ways I volunteer as a nurse practitioner. I do have a better understanding of the health care needs of homeless guests who I have served at the clinics. I have a better understanding of the limitations of serving in a setting with limited medical resources, especially during a challenging time such as a pandemic. The power of active listening is very therapeutic and sometimes this is all you can offer and this has been once again confirmed.
Empathy/emotional intelligence, mercy, hospitality

- *How aware were you of the need for health services in your neighborhood, before volunteering with clinics?*
 - 1 – not at all aware: 2 respondents
 - 2 – Slightly aware: 6 respondents
 - 3 – Somewhat aware: 7 respondents
 - 4 – Moderately aware: 7 respondents
 - 5 – Very aware: 2 respondents
- How aware are you of the need for health services in your neighborhood after volunteering with clinics?*



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- 1 – *not at all aware*: 0 respondents
 - 2 – *Slightly aware*: 0 respondents
 - 3 – *Somewhat aware*: 2 respondents
 - 4 – *Moderately aware*: 5 respondents
 - 5 – *Very aware*: 17 respondents

- *Before serving in a Compassion Clinic, how important to your Christian walk was unity between believers from different churches?*
 - 1 – *not at all important*: 0 respondents
 - 2 – *Slightly important*: 2 respondents
 - 3 – *Somewhat important*: 6 respondents
 - 4 – *Moderately important*: 12 respondents
 - 5 – *Absolutely crucial*: 4 respondents

After serving in a clinic, how important to your Christian walk is unity between believers from different churches?

 - 1 – *not at all important*: 0 respondents
 - 2 – *Slightly important*: 0 respondents
 - 3 – *Somewhat important*: 2 respondents
 - 4 – *Moderately important*: 9 respondents
 - 5 – *Absolutely crucial*: 13 respondents

- *Before serving in a Compassion Clinic, how important was service to living out your faith?*
 - 1 – *not at all important*: 0 respondents
 - 2 – *Slightly important*: 0 respondents
 - 3 – *Somewhat important*: 5 respondents
 - 4 – *Moderately important*: 8 respondents
 - 5 – *Absolutely crucial*: 11 respondents

After serving with a Compassion Clinic, how important is service to living out your faith?

 - 1 – *not at all important*: 0 respondents
 - 2 – *Slightly important*: 0 respondents
 - 3 – *Somewhat important*: 1 respondents
 - 4 – *Moderately important*: 9 respondents
 - 5 – *Absolutely crucial*: 14 respondents

- *What is your gender?*
 - *Male*: 13 respondents
 - *Female*: 11 respondents
 - *Prefer not to say*: 0



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- What is your age?
 - Under 30: 3 respondents
 - 30-50: 4 respondents
 - Over 50: 17 respondents

- How many years have you been involved with Compassion Clinics?
 - Less than 3 years: 11 respondents
 - 3-5 years: 5 respondents
 - 6-8 years: 1 respondents
 - More than 8 years: 7 respondents