Name:
**Narrative Attachment 41:
Schematic Drawings**

Name of Lead Applicant:
City of Milwaukee

Name of File:
Att41SchematicDrawings
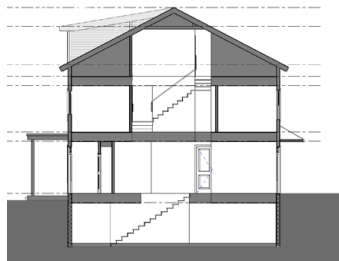
Example Townhomes

Elevation

Floor Plan

Building Section

Milwaukee Historical Precedent

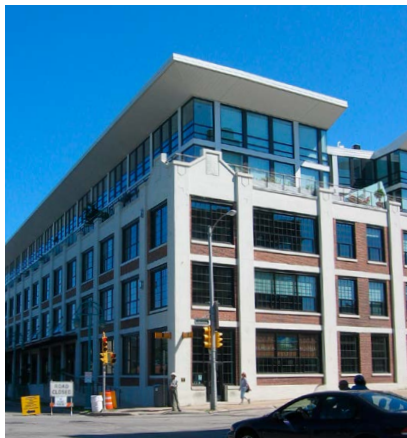Milwaukee Historical Precedent

Example Apartments
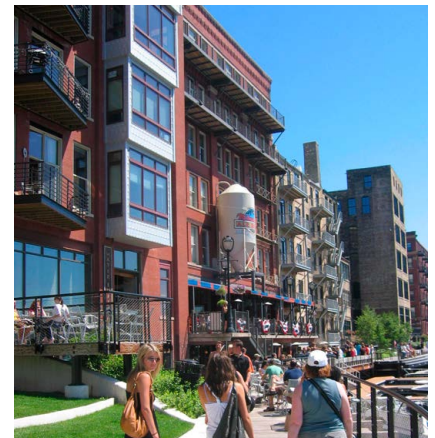

Elevation

Floor Plan

Building Section

Milwaukee Contemporary Precedent

Milwaukee Contemporary Precedent

SCHEMATIC DRAWINGS

Name:
Narrative Attachment 42: LEED for Neighborhood Development Documentation

Name of Lead Applicant:
City of Milwaukee

Name of File:
Att42LEED-NDDocumentation

TORTI GALLAS AND PARTNERS

Architects *of* Sustainable Community

Principals

John Francis Torti, FAIA

Thomas M. Gallas, CPA

Robert S. Wallach, AIA

Cheryl A. O'Neill

Charles G. Coleman, III, RA

Daniel Ashtary, AIA

Bruce D. Kennett, AIA

Sherief Elfar, AIA

Robert S. Goodill, AICP

Neal I. Payton, FAIA

Lawrence V. Antoine, AIA, AICP

Thomas E. Danco, AIA

Erik J. Aulestia, AICP

Troy McGhee, AICP

Brian E. O'Looney, AIA

Sarah Alexander, AIA

Andrew P. Czajkowski, AIA

Scott Welch, RA

Emeritus

Tunca Iskir

Sylvia S. Munero

9 February 2015

The Honorable Tom Barrett
Mayor, City of Milwaukee
City Hall Room 201
Milwaukee, WI 53202

Re: **CNI Attachment 42 - LEED for Neighborhood Development Documentation**

Dear Mayor Barrett,

As the project designers and master planners contracted to HACM for the Westlawn Housing Development, we attest that the design will meet all of the prerequisite requirements and obtain a minimum of 40 optional points meeting the requirements of LEED-ND Certified level. All new single family and multifamily units will be separately designed and constructed to LEED for Homes standards, as outlined in Attachment 43 of the CNI application. The prerequisites for an integrated design process, location of the project, site improvements, water and energy conservation and materials which benefit the environment will all be met. As you know from our current LEED-ND Certification at Westlawn Gardens (LEED ND Silver, the highest rated fully certified, implemented project in the country) the full certification is not granted until the neighborhood is fully commissioned, but the design intent is to obtain the optional points in the following ways, which are illustrated on the attached LEED-ND Checklist, and have been deployed and proven at Westlawn Gardens:

Smart Location and Linkage: Analysis of the site reveals that the Westlawn Housing Development should receive 20 of 27 points within this category. Redevelopment of the current Westlawn neighborhood is anticipated. It is within ¼ mile of bus stops along Silver Spring Drive and 64th. The design for a variety of housing types will meet the needs of persons from different age groups and abilities. These include: 3 story apartments with one- and two-bedroom units and two- to three-story townhouse units with 2 bedroom to 4 bedroom configurations.

Neighborhood Pattern and Design: The site plan design anticipates 23 points out of 44 total points for this section. As part of the Westlawn Gardens revitalization all Westlawn residents will have access to the large (30,000 square foot) Growing Power managed Community Garden, which includes raised beds to ensure resident participation in providing fresh foods for the neighborhood. Recreation venues include the Westlawn Gardens Community Park, the Silver Spring Neighborhood Center, Browning Elementary School, and planned pocket parks for the Westlawn Housing Development are all within a 1/2 mile walk of the site. Major commercial and civic facilities including schools, churches, banks, clothing stores, miscellaneous other retail, and restaurants all provide services within ½ mile of the Target Neighborhood.

Green Infrastructure and Buildings: The design projects 6 points out of 23 points for this section. 100% of the site which was previously developed shall be reused for the new development. The use of high albedo (reflective) roofing and shade trees all contribute to a reduction of heat-island effect. The continued installation of high efficiency (LED) exterior street lighting will   increase

Attachment 42a

LEED ND
DOCUMENTATION

infrastructure efficiency. In addition, we anticipate meeting or exceeding the Building and Landscape Water Efficiency requirements as we have on Westlawn Gardens. Proposed building designs shall perform at 26% improvement over ANSI/ASHRAE/IESNA Standard 90.1-2007 or better.

Innovation and Design Process/Regional Priorities: The design projects 6 points out of 10 points for this section, addressing exemplary performance in location and automobile use reduction, mixed income and universal design. Regional priority credits for housing and jobs proximity, as well as mixed income divers communities are also anticipated.

I, Lawrence Antoine, the LEED Accredited Professional consultant on the team attest that our site plan will be designed to meet the requirements of LEED-ND at the Certified Level, as described above.

Lawrence V. Antoine, Jr, AIA, AICP, LEED AP (BD+C)

Principal

LEED for Neighborhood Development v2009
Registered Project Checklist

Proj Name: Westlawn Housing Development Projected and Proposed

Date: 02/05/2015

Smart Location and Linkage — 27 Points Possible

Yes 20 | ? 0 | No 5

Y/?/N			Points
Y	Prereq 1	Smart Location	Required
Y	Prereq 2	Imperiled Species and Ecological Communities	Required
Y	Prereq 3	Wetland and Water Body Conservation	Required
Y	Prereq 4	Agricultural Land Conservation	Required
Y	Prereq 5	Floodplain Avoidance	Required
8	Credit 1	Preferred Locations	10
2 (No)	Credit 2	Brownfield Redevelopment	2
7	Credit 3	Locations with Reduced Automobile Dependence	7
1 (No)	Credit 4	Bicycle Network and Storage	1
3	Credit 5	Housing and Jobs Proximity	3
1	Credit 6	Steep Slope Protection	1
1	Credit 7	Site Design for Habitat or Wetland and Water Body Conservation	1
1 (No)	Credit 8	Restoration of Habitat or Wetlands and Water Bodies	1
1 (No)	Credit 9	Long-Term Conservation Management of Habitat or Wetlands and Water Bodi	1

Neighborhood Pattern and Design — 44 Points Possible

Yes 23 | ? 1 | No 20

Y/?/N			Points
Y	Prereq 1	Walkable Streets	Required
Y	Prereq 2	Compact Development	Required
Y	Prereq 3	Connected and Open Community	Required
2 / 10	Credit 1	Walkable Streets	12
3 / 3	Credit 2	Compact Development	6
2 / 2	Credit 3	Mixed-Use Neighborhood Centers	4
7	Credit 4	Mixed-Income Diverse Communities	7
1 (No)	Credit 5	Reduced Parking Footprint	1
2 (No)	Credit 6	Street Network	2
1 (No)	Credit 7	Transit Facilities	1
1 / 1	Credit 8	Transportation Demand Management	2
1	Credit 9	Access to Civic and Public Spaces	1
1	Credit 10	Access to Recreation Facilities	1
1	Credit 11	Visitability and Universal Design	1
2	Credit 12	Community Outreach and Involvement	2
1	Credit 13	Local Food Production	1
2	Credit 14	Tree-Lined and Shaded Streets	2
1	Credit 15	Neighborhood Schools	1

Green Infrastructure and Buildings — 29 Points Possible

Yes 6 | ? 0 | No 23

Y/?/N			Points
Y	Prereq 1	Certified Green Building	Required
Y	Prereq 2	Minimum Building Energy Efficiency	Required
Y	Prereq 3	Minimum Building Water Efficiency	Required
Y	Prereq 4	Construction Activity Pollution Prevention	Required

Green Infrastructure and Buildings, Continued

Y/?/N			Points
5 (No)	Credit 1	Certified Green Buildings	5
2	Credit 2	Building Energy Efficiency	2
1	Credit 3	Building Water Efficiency	1
1	Credit 4	Water-Efficient Landscaping	1
1 (No)	Credit 5	Existing Building Use	1
1 (No)	Credit 6	Historic Resource Preservation and Adaptive Reuse	1
1 (No)	Credit 7	Minimized Site Disturbance in Design and Construction	1
4 (No)	Credit 8	Stormwater Management	4
1 (No)	Credit 9	Heat Island Reduction	1
1 (No)	Credit 10	Solar Orientation	1
3 (No)	Credit 11	On-Site Renewable Energy Sources	3
2 (No)	Credit 12	District Heating and Cooling	2
1	Credit 13	Infrastructure Energy Efficiency	1
2 (No)	Credit 14	Wastewater Management	2
1 (No)	Credit 15	Recycled Content in Infrastructure	1
1	Credit 16	Solid Waste Management Infrastructure	1
1 (No)	Credit 17	Light Pollution Reduction	1

Innovation and Design Process — 6 Points

Yes 4 | ? 0 | No 0

Y/?/N			Points
1	Credit 1.1	Exemplary Performance: SLL #3 Locations/reduced auto	1
1	Credit 1.2	Innovation and Exemplary Performance: Provide Specific Title	1
1	Credit 1.3	Innovation and Exemplary Performance: Provide Specific Title	1
	Credit 1.4	Innovation and Exemplary Performance: Provide Specific Title	1
	Credit 1.5	Innovation and Exemplary Performance: Provide Specific Title	1
1	Credit 2	LEED® Accredited Professional	1

Regional Priority Credit — 4 Points

Yes 2 | ? 0 | No 1

Y/?/N			Points
1	Credit 1.1	Regional Priority Credit: Region Defined	1
1	Credit 1.2	Regional Priority Credit: Region Defined	1
1 (No)	Credit 1.3	Regional Priority Credit: Site Design For Habitat	1
	Credit 1.4	Regional Priority Credit: Mixed income Diversity	1

Project Totals (Certification estimates) — 110 Points

Yes 55 | ? 1 | No 49

Certified: 40-49 points, Silver: 50-59 points, Gold: 60-79 points, Platinum: 80+ points

<u>Name:</u>
Narrative Attachment 43: Documentation for Green Development and Energy Efficiency Strategies

<u>Name of Lead Applicant:</u>
City of Milwaukee

<u>Name of File:</u>
Att43DocGreenDevelEnerEff

Green Development Documentation

Green Development and Energy Efficiency:
Sustainability is a key component of the Westlawn Housing Development revitalization and is woven into every element of the proposal, reflecting HACM's long track record with green, sustainable development. HACM is a leader in the promotion and use of Energy Star technology and has been a member of the EPA's Energy Star Buildings and Green Lights Partnership since 1999. In 2007, HACM received an award for Sustained Excellence in Building Performance from Wisconsin Energy Star Homes.

In the revitalization at Westlawn Gardens HACM received a LEED for Neighborhood development (LEED ND) Silver Certification – the highest such rating in the nation. A LEED for Homes Platinum Certification for a single home was also achieved, with all others homes being built to the same standards and specifications. HACM will continue the same site and building development practices so that all subsequent phases are designed and constructed to similarly high standards of Green Building and Energy Efficiency. As such, our proposed, preliminary LEED for Homes (for both Single Family and Lowrise Multifamily) and LEED ND Criteria Checklists for the Westlawn Housing Development are included for reference in Attachments 42 and 43. In addition, we also anticipate achieving a National Green Building Standards (NGBS) Certification for all new homes.

In addition to the mandatory requirements for each of these standards, we plan to include the following general practices:

Integrated Design Approach: As with earlier phases, HACM will use an integrated design approach to the revitalization of the Westlawn Housing Development, involving the full development team at every stage.

Neighborhood Design: The Westlawn Housing Development site is located within a previously developed community, with close access to public transportation, shopping, schools, public infrastructure, jobs, etc. The proposed revitalization will strengthen Westlawn's linkages with the surrounding community, adding new streets, sidewalks, and other connections and be built with a mix of densities that support a high degree of neighborhood services while allowing for a transition down to the surrounding context. Public open space will be provided throughout the development and residents will have access to community gardens that not only provide access to fresh food but opportunities for involvement and a connection with the outdoors.

Site Improvements: HACM will meet the requirements for environmental remediation, erosion and sedimentation control, and landscaping will utilize native species and strategic placement of trees and plants that provide shade in summer and allow for heat gain in winter. A combination of creative approaches to handling storm water will be included in ways that are not only effective, but that serve as a public amenity. Where possible, existing site infrastructure will be reutilized.

Energy Efficiency and Water Conservation:
Energy Star standards will be met throughout, including for all appliances and lighting. With the exception of the midrises, electricity will be individually metered to each unit raising resident awareness. All exterior lighting will be on sensors or timers to insure efficient use. In general, HACM is interested in maximizing the development's Home Energy Rating System (HERS) score exceeding that which is typical for these types of construction, including using HVAC systems with Seasonal Energy Efficiency Ratios (SEERs) as high as 16 or 18. In addition, emphasis will be placed on maximizing the insulation value and minimizing the amount of air leakage for all building envelopes. Although HACM does not believe it will be able to include on-site renewable energy sources at this time, units will be designed to make their future incorporation as seamless as possible. In addition to the conservation of water supported by the use of native landscapes, HACM will install high efficiency water conserving appliances and fixtures throughout residential units.

Material and Resources: Consistent with earlier phases, HACM will strive to maximize the use of environmentally preferable products and systems. In addition, HACM expects to utilize similar strategies relative to waste management, which to date has achieved diversion rates as high as 80% thanks to a number of strategies including panelized construction.

Healthy Living Environment: HACM and its team will comply with all the mandatory checklist items from each rating system, governing adequate ventilation, healthy air quality, preventing moisture infiltration, and keeping pests and pollutants out. The project also greatly benefits from the choice not to include attached garages, which pose additional challenges to indoor air quality.

Awareness, Operations and Maintenance:
In addition to providing manuals to both maintenance staff and residents, HACM will also provide new resident orientations that highlight all the green features of the new development. In addition, HACM will seek to raise public awareness of the site's sustainability, likely through a combination of multimedia tools, articles and signage.

LEED for Homes Simplified Project Checklist

for Homes

Builder Name:	*Altius Construction - Ryan Raskin*
Project Team Leader (if different):	*Phil Vetterkind, Sustainable Building Solutions*
Home Address (Street/City/State):	*6220 W. Birch Ave, Milwaukee, WI*

Westlawn Housing Development

Project Description:

Building type: *Single Family and Multi-family Low-rise*   Project type: *Large Production*

# of units: *All New Units*   Avg. Home Size Adjustment: *1080 sq. ft.*

Adjusted Certification Thresholds

Certified: **45.0**   Gold: **75.0**

Silver: **60.0**   Platinum: **90.0**

Project Point Total
Prelim: *89.5 + 24.5 maybe pts*   Final: *77*

Certification Level
Prelim: *Gold*   Final: *Gold*

Final Credit Category Total Points
ID: 9   SS: 13   EA: 10   EQ: 17
LL: 10   WE: 5   MR: 11   AE: 2

---

date last updated : *2/5/2015*
last updated by : *Murphy Antoine*

Innovation and Design Process (ID)		(No Minimum Points Required)	Max Points	Y/Pts	Maybe	No	Y/Pts
1. Integrated Project Planning	1.1	Preliminary Rating	Prereq	Y			Y
	1.2	Integrated Project Team	1	1	0		1
	1.3	Professional Credentialed with Respect to LEED for Homes	1	1	0		1
	1.4	Design Charrette	1	1	0		1
	1.5	Building Orientation for Solar Design	1	0	0	N	0
2. Durability Management	2.1	Durability Planning	Prereq	Y			Y
Process	2.2	Durability Management	Prereq	Y			Y
	2.3	Third-Party Durability Management Verification	3	3	0		3
3. Innovative or Regional	3.1	Innovation #1	1	1	0		1
Design	3.2	Innovation #2	1	1	0		1
	3.3	Innovation #3	1	1	0		1
	3.4	Innovation #4	1	0	0		0
		Sub-Total for ID Category:	11	9	0		9

Location and Linkages (LL)		(No Minimum Points Required)	OR	Max	Y/Pts	Maybe	No	Y/Pts
1. LEED ND	1	LEED for Neighborhood Development	LL2-6	10	10	0		10
2. Site Selection	2	Site Selection		2	0	0		0
3. Preferred Locations	3.1	Edge Development	LL 3.2	1	0	0	N	0
	3.2	Infill		2	0	0		0
	3.3	Previously Developed		1	0	0		0
4. Infrastructure	4	Existing Infrastructure		1	0	0		0
5. Community Resources/	5.1	Basic Community Resources / Transit	LL 5.2, 5.3	1	0	0	N	0
Transit	5.2	Extensive Community Resources / Transit	LL 5.3	2	0	0	N	0
	5.3	Outstanding Community Resources / Transit		3	0	0		0
6. Access to Open Space	6	Access to Open Space		1	0	0		0
		Sub-Total for LL Category:		10	10	0		10

Sustainable Sites (SS)		(Minimum of 5 SS Points Required)	OR	Max	Y/Pts	Maybe	No	Y/Pts
1. Site Stewardship	1.1	Erosion Controls During Construction		Prereq	Y			Y
	1.2	Minimize Disturbed Area of Site		1	1	0		1
2. Landscaping	2.1	No Invasive Plants		Prereq	Y			Y
	2.2	Basic Landscape Design	SS 2.5	2	2	0		2
	2.3	Limit Conventional Turf	SS 2.5	3	3	0		3
	2.4	Drought Tolerant Plants	SS 2.5	2	1	0		1
	2.5	Reduce Overall Irrigation Demand by at Least 20%		6	0	6		0
3. Local Heat Island Effects	3	Reduce Local Heat Island Effects		1	0	0		0
4. Surface Water	4.1	Permeable Lot		4	0	0		0
Management	4.2	Permanent Erosion Controls		1	1	0	N	1
	4.3	Management of Run-off from Roof		2	0	0	N	0
5. Nontoxic Pest Control	5	Pest Control Alternatives		2	2	0		2
6. Compact Development	6.1	Moderate Density	SS 6.2, 6.3	2	0	0	N	0
	6.2	High Density	SS 6.3	3	3	0		3
	6.3	Very High Density		4	0	0	N	0
		Sub-Total for SS Category:		22	13	6		13

Attachment 43b

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GREEN BUILDING DOCUMENTATION

LEED for Homes Simplified Project Checklist (continued)

				Max Points	Preliminary Y/Pts	Preliminary Maybe	Preliminary No	Final Y/Pts
Water Efficiency (WE)		(Minimum of 3 WE Points Required)	OR	Max	Y/Pts	Maybe	No	Y/Pts
1. Water Reuse	1.1	Rainwater Harvesting System	WE 1.3	4	0	0	N	0
	1.2	Graywater Reuse System	WE 1.3	1	0	0	N	0
	1.3	Use of Municipal Recycled Water System		3	0	0	N	0
2. Irrigation System	2.1	High Efficiency Irrigation System	WE 2.3	3	0	0	N	0
	2.2	Third Party Inspection	WE 2.3	1	0	0	N	0
	2.3	Reduce Overall Irrigation Demand by at Least 45%		4	0	0	N	0
3. Indoor Water Use	3.1	High-Efficiency Fixtures and Fittings		3	1	0		1
	3.2	Very High Efficiency Fixtures and Fittings		6	4	0		4
		Sub-Total for WE Category:		**15**	**5**	**0**		**5**
Energy and Atmosphere (EA)		(Minimum of 0 EA Points Required)	OR	Max	Y/Pts	Maybe	No	Y/Pts
1. Optimize Energy Performance	1.1	Performance of ENERGY STAR for Homes		Prereq	Y			Y
	1.2	Exceptional Energy Performance		34	8	0		8
7. Water Heating	7.1	Efficient Hot Water Distribution		2	0	0	N	0
	7.2	Pipe Insulation		1	1	0		1
11. Residential Refrigerant Management	11.1	Refrigerant Charge Test		Prereq	Y			Y
	11.2	Appropriate HVAC Refrigerants		1	1	0		1
		Sub-Total for EA Category:		**38**	**22.5**	**3**		**10**
Materials and Resources (MR)		(Minimum of 2 MR Points Required)	OR	Max	Y/Pts	Maybe	No	Y/Pts
1. Material-Efficient Framing	1.1	Framing Order Waste Factor Limit		Prereq	Y			Y
	1.2	Detailed Framing Documents	MR 1.5	1	0	0	N	0
	1.3	Detailed Cut List and Lumber Order	MR 1.5	1	0	0	N	0
	1.4	Framing Efficiencies	MR 1.5	3	0	0	N	0
	1.5	Off-site Fabrication		4	4	0		4
2. Environmentally Preferable Products	2.1	FSC Certified Tropical Wood		Prereq	Y			Y
	2.2	Environmentally Preferable Products		8	4.5	2		4.5
3. Waste Management	3.1	Construction Waste Management Planning		Prereq	Y			Y
	3.2	Construction Waste Reduction		3	2.5	0.5		2.5
		Sub-Total for MR Category:		**16**	**11**	**2.5**		**11**
Indoor Environmental Quality (EQ)		(Minimum of 6 EQ Points Required)	OR	Max	Y/Pts	Maybe	No	Y/Pts
1. ENERGY STAR with IAP	1	ENERGY STAR with Indoor Air Package		13	0	13		0
2. Combustion Venting	2.1	Basic Combustion Venting Measures	EQ 1	Prereq	Y			Y
	2.2	Enhanced Combustion Venting Measures	EQ 1	2	2	0		2
3. Moisture Control	3	Moisture Load Control	EQ 1	1	0	1	N	0
4. Outdoor Air Ventilation	4.1	Basic Outdoor Air Ventilation	EQ 1	Prereq	Y			Y
	4.2	Enhanced Outdoor Air Ventilation		2	2	0		2
	4.3	Third-Party Performance Testing	EQ 1	1	1	0		1
5. Local Exhaust	5.1	Basic Local Exhaust	EQ 1	Prereq	Y			Y
	5.2	Enhanced Local Exhaust		1	1	0		1
	5.3	Third-Party Performance Testing		1	1	0		1
6. Distribution of Space Heating and Cooling	6.1	Room-by-Room Load Calculations	EQ 1	Prereq	Y			Y
	6.2	Return Air Flow / Room by Room Controls	EQ 1	1	1	0		1
	6.3	Third-Party Performance Test / Multiple Zones	EQ 1	2	2	0		2
7. Air Filtering	7.1	Good Filters	EQ 1	Prereq	Y			Y
	7.2	Better Filters	EQ 7.3	1	1	0		1
	7.3	Best Filters		2	0	0	N	0
8. Contaminant Control	8.1	Indoor Contaminant Control during Construction	EQ 1	1	1	0		1
	8.2	Indoor Contaminant Control		2	0	0	N	0
	8.3	Preoccupancy Flush	EQ 1	1	1	0		1
9. Radon Protection	9.1	Radon-Resistant Construction in High-Risk Areas	EQ 1	Prereq	Y			Y
	9.2	Radon-Resistant Construction in Moderate-Risk Areas	EQ 1	1	1	0		1
10. Garage Pollutant Protection	10.1	No HVAC in Garage	EQ 1	Prereq	Y			Y
	10.2	Minimize Pollutants from Garage	EQ 1, 10.4	2	0	0	N	0
	10.3	Exhaust Fan in Garage	EQ 1, 10.4	1	0	0	N	0
	10.4	Detached Garage or No Garage	EQ 1	3	3	0		3
		Sub-Total for EQ Category:		**21**	**17**	**13**		**17**
Awareness and Education (AE)		(Minimum of 0 AE Points Required)		Max	Y/Pts	Maybe	No	Y/Pts
1. Education of the Homeowner or Tenant	1.1	Basic Operations Training		Prereq	Y			Y
	1.2	Enhanced Training		1	1	0		1
	1.3	Public Awareness		1	1	0		1
2. Education of Building Manager	2	Education of Building Manager		1	0	0		0
		Sub-Total for AE Category:		**3**	**2**	**0**		**2**

LEED for Homes Simplified Project Checklist

Addendum: Prescriptive Approach for Energy and Atmosphere (EA) Credits

Points cannot be earned in both the Prescriptive (below) and the Performance Approach (pg 2) of the EA section.

Energy and Atmosphere (EA)			(No Minimum Points Required)	OR	Max	Y/Pts	Maybe	No	Y/Pts
2. Insulation		2.1	Basic Insulation		Prereq	Y			Y
		2.2	Enhanced Insulation		2	2	0		0
3. Air Infiltration		3.1	Reduced Envelope Leakage		Prereq	Y			
		3.2	Greatly Reduced Envelope Leakage		2	0	0		0
		3.3	Minimal Envelope Leakage	EA 3.2	3	3	0		0
4. Windows		4.1	Good Windows		Prereq	Y			Y
		4.2	Enhanced Windows		2	2	0		0
		4.3	Exceptional Windows	EA 4.2	3	0	0	N	0
5. Heating and Cooling		5.1	Reduced Distribution Losses		Prereq	Y			Y
Distribution System		5.2	Greatly Reduced Distribution Losses		2	2	0		0
		5.3	Minimal Distribution Losses	EA 5.2	3	0	3		0
6. Space Heating and Cooling		6.1	Good HVAC Design and Installation		Prereq	Y			Y
Equipment		6.2	High-Efficiency HVAC		2	0	0		0
		6.3	Very High Efficiency HVAC	EA 6.2	4	4	0		0
7. Water Heating		7.1	Efficient Hot Water Distribution		2	0	0	N	0
		7.2	Pipe Insulation		1	1	0		0
		7.3	Efficient Domestic Hot Water Equipment		3	3	0		0
8. Lighting		8.1	ENERGY STAR Lights		Prereq	Y			Y
		8.2	Improved Lighting		2	0	0	N	0
		8.3	Advanced Lighting Package	EA 8.2	3	3	0		0
9. Appliances		9.1	High-Efficiency Appliances		2	1.5	0		0
		9.2	Water-Efficient Clothes Washer		1	0	0	N	0
10. Renewable Energy		10	Renewable Energy System		10	0	0	N	0
11. Residential Refrigerant		11.1	Refrigerant Charge Test		Prereq	Y			Y
Management		11.2	Appropriate HVAC Refrigerants		1	1	0		0
				Sub-Total for EA Category:	38	22.5	3		10

GREEN BUILDING
DOCUMENTATION

Rocky Marcoux
Commissioner
rmarco@milwaukee.gov

Martha L. Brown
Deputy Commissioner
mbrown@milwaukee.gov

February 9, 2015

Mayor Tom Barrett
City of Milwaukee
200 E. Wells Street
Milwaukee, WI 53202

RE: Land Use Certification for the FY2014/2015 Choice Neighborhoods Initiative –
Implementation grant for the transformation of the Westlawn Neighborhood.

Dear Mayor Barrett:

As the appropriate local official with the necessary authority for the City of Milwaukee, I am familiar with the plans for the Westlawn neighborhood as developed for the FY 2014/2015 Choice Neighborhoods Implementation grant application to the U.S. Department of Housing and Urban Development.

The proposed family residential homes, apartment buildings, grocery store, splash pad, and retail space are permitted uses under the existing City of Milwaukee Detailed Planned Development Zoning for the targeted Westlawn site. I hereby certify that all required discretionary land use approvals, other than any required design review, have been secured for the developed and undeveloped land. These discretionary land use approvals include the first phase of development, regardless of the proposed land use type (e.g. retail, commercial, housing, etc.), and all land use approvals for all housing planned, regardless of how they will be financed (i.e., whether with Choice Neighborhoods grant funds or leveraged funds).

Should you have any questions or require any further information, please do not hesitate to contact me. We look forward to the implementation of this exciting transformation plan for the Westlawn neighborhood.

Sincerely,

Vanessa L. Koster
Planning Manager

809 North Broadway, Milwaukee, WI 53202-3617 ● Phone (414) 286-5800 ● www.milwaukee.gov/dcd
Milwaukee Business Information: www.choosemilwaukee.com
Page 110

Name:
**Narrative Attachment 45:
Federally Qualified Health Center**

Name of Lead Applicant:
City of Milwaukee

Name of File:
Att45FedQualifiedHealthCtr

MILWAUKEE

HEALTH SERVICES, INC.

Mission: To provide accessible, quality, primary and related health care services to Milwaukee residents, with our continuing emphasis on medically underserved families and individuals.

January 28, 2015

EST. 1989

**Martin Luther King
Heritage Health Center**
ADMINISTRATION
2555 North MLK Drive
Milwaukee, WI 53212
(414) 267-2022
(414) 372-7420 fax

**Isaac Coggs Heritage
Health Center**
8200 West Silver
Spring Drive
Milwaukee, WI 53218
(414) 760-3900

www.mhsi.org

Mayor Tom Barrett
City Hall
200 East Wells Street Room 201
Milwaukee, Wisconsin 53202

Dear Mayor Barrett:

As President and Chief Executive Officer of Milwaukee Health Services, Inc., I am pleased to provide this letter of commitment in support of your 2014 application to the U.S. Department of Housing & Urban Development for Choice Neighborhood Implementation funding to transform the Westlawn neighborhood.

Milwaukee Health Services, Inc. (MHSI) is a Federally Qualified Health Center (FQHC) that operates from two (2) sites: the MLK Heritage Health Center at 2555 N. Martin Luther King Drive and the Isaac Coggs Heritage Health Connection at 8200 W. Silver Spring Drive. MHSI offers a range of primary health care services including physician, dental, behavioral, benefit determination, and pharmacy. As an FQHC, we service everyone regardless of income, or third party coverage, and seek to provide high quality care in accessible locations and at convenient times. Our two sites primarily target the residents of Milwaukee's north side, but we service patients from all over the county.

Thus, we want to confirm that Westlawn, which is located only 14 blocks from our Isaac Coggs Heritage Health clinic, is in our focus area. In addition, we want to confirm our commitment to working with the Housing Authority and its staff and partners to collaborate on health strategies related to your Westlawn transformation plan. We believe that the strategies that we can be most effective with include assisting those residents without a primary care medical home to become a patient at the Isaac Coggs Heritage Health Center, and to continue ongoing clinic services for those already connected to MHSI (your resident survey indicated that over 6% of residents currently already use the clinic). We also would like to provide some health promotion and education and information programs geared towards the residents of Westlawn during the grant period.

New Leverage

MHSI firmly commits to providing the following new activities in support of the People component of the proposed Transformation Plan during the five-year grant period to serve those original or new residents living in the targeted Westlawn housing development:

1. Expanded outreach to Westlawn residents: It is our understanding that one of the major health strategies described in your grant is to outreach to persons that do not currently have a medical home and connect them to a quality medical home. Considering that MHSI serves all regardless of third party coverage, we believe that MHSI would be a good medical home for those Westlawn residents that do not have one currently. Our staff will work closely with your case managers to reach out to these residents and will do outreach and promotion to residents of Westlawn at Resident Council meetings and through mailings/flyers. We estimate that this commitment will entail 8 hours of staff time per month x $16.94/hour (salary and benefits) x 60 months of the grant, or $8,131 total leverage.

Milwaukee Health Services, Inc. strongly supports the Westlawn Choice Neighborhood Transformation Plan and believes that it will have a significant impact in truly transforming the Westlawn community's housing, people and neighborhood.

Sincerely,

Tito Izard, M.D.
President/Chief Executive Officer

TI/gnv

Name:
Narrative Attachment 46:
Section 3 Annual Summary Report

Name of Lead Applicant:
City of Milwaukee

Name of File:
Att46Sec3AnnualSummaryReport

N/A

Name:
**Narrative Attachment 47:
Anchor Institution Engagement**

Name of Lead Applicant:
City of Milwaukee

Name of File:
Att47AnchorInstitutionEngagement

N/A

<u>Name:</u>
Narrative Attachment 48: Organizational Chart

<u>Name of Lead Applicant:</u>
City of Milwaukee

<u>Name of File:</u>
Att48OrganizationalChart

Organizational Flowchart   Attachment 48

Applicant	Co-Applicant
Mayor Tom Barrett, City of Milwaukee	Antonio M. Pérez, Housing Authority of the City of Milwaukee

Westlawn Choice Leadership Team: RACM (Neighborhood), HACM (Housing and People), and MPS (Education)

Housing	Neighborhood	People	Education
HACM	RACM	HACM	MPS

Housing	Neighborhood	People	Education

Resident Leadership
Architectural &
   Engineering
Construction Contractors
Dept. of Public Works
WE Energies
	Resident Leadership
	Dept. of City
	   Development
	Dept. of Public Works
	Dept. of Neighborhood
	   Services
	Strong Neighborhoods
	Office of Environmental
	   Sustainability
	Dept. of Administration
	Northwest Side CDC
	Havenwoods Economic
	   Devt Corp.
	Greater Milw. Committee
	We Energies
	Milw. County Parks
	Milw. Police Department
		Resident Leadership
		City Health Dept.
		Growing Power
		Impact Planning Council
		MAWFA
		MAWIB
		MCSC
		MIlw. Health Services
		Milw. Job Corps
		SSNC
		UWM College of Nursing
		Westlawn Partnership for
		   Healthier Environment
		WATDA
		WRTP/Big Step
		WWBIC
			Resident Leadership
			SSNC
			Day Care Services for
			   Children
			Browning Elementary
			Kilbourn Elementary
			Kluge Elementary
			Banner Preparatory
			Carmen Northwest

Name:
**Narrative Attachment 49:
Program Schedule**

Name of Lead Applicant:
City of Milwaukee

Name of File:
Att49ProgramSchedule

ATTACHMENT 49 - Program Schedule

Grant Deadlines/ Milestones

Grant Award (final fund obligation deadline)	09/30/2015
Grant Agreement Executed	01/31/2016
Environmental Assessment	11/01/2015
Final Expenditure Deadline	09/30/2021
Final Report and all Grant Close-out Documentation Submitted to HUD	12/15/2021

Housing	Start	Finish
Closing of first phase	01/31/ 2016	05/01/2016
Relocation of Residents	01/15/2016	03/31/2017
Demolition	04/01/2016	06/01/2017
Phase 1 Construction – 10 Units	06/01/2016	02/28/2017
Phase 2 Construction – 136 Units	08/08/2017	09/30/2019
Phase 3 Construction - 203 Units	10/01/2018	12/31/2020
Phase 4 Construction – 45 Units	05/01/2019	08/31/2020
Phase 5 Construction – 135 Units	04/01/2016	09/30/2021
Phase 6 Construction - 50 Units	06/01/2018	09/30/2021

People	Start	Finish
Case Management Services	11/01/2015	Ongoing beyond grant
Health Care Home / Health Insurance Awareness Program	11/01/2015	Ongoing beyond grant

Enhanced Youth Develop. Afterschool Program (SSNC)	11/01/2015	Ongoing beyond grant
Job Skills Training (SSNC, MATC, MAWIB etc.)	11/01/2015	Ongoing beyond grant
Enhanced ECE Programs and Participation (SSNC,MPS)	11/01/2015	Ongoing beyond grant
Enhanced K-12 Educational Programs (MPS)	11/01/2015	Ongoing beyond grant
Outreach, Enrollment & Parental Involvement Program	11/01/2015	Ongoing beyond grant
Section 3 Program for Construction Employment (HACM)	11/01/2015	12/15/2021

People

Retail Corridor Improvements (DCD, HEDC)	06/01/2016	09/30/2021
Foreclosed Property Acquisition Program	11/01/2015	09/30/2021
Housing Rehab/Construction	04/01/2017	09/30/2021
Neighborhood Watch and Beat Patrol Program	11/01/2015	09/30/2021
Business Dev. Program (Fresh Foods Initiative of GP)	06/01/2017	09/30/2021

Critical Community Improvements

Westlawn Retail Space Development (HACM, MEDC)	10/01/2018	12/31/2020
Retail facade grants (Silver Spring between 51st and 76th)	11/01/2015	9/30/2021
Foreclosure / home assistance Program	11/01/2015	12/31/2019
Healthy Neighborhoods Initiative	11/01/2015	12/31/2019
Financing for commercial & ED. projects	01/01/2017	12/31/2021
Construction of water playground	04/01/2017	09/01/2017

The Creative Curriculum® for Preschool
A Comprehensive, Integrated Curriculum and Assessment System

To ensure positive outcomes for children who attend pre-kindergarten, programs need an appropriate and effective curriculum and assessment system. The National Association for the Education of Young Children (NAEYC) and the National Association of Early Childhood Specialists in State Departments of Education (NAECS/SDE) recently published definitions of appropriate curriculum and assessment and provided indicators of effectiveness. The Joint Position Statement, *Early Childhood Curriculum, Assessment and Program Evaluation: Building an Effective, Accountable System in Programs Birth Through Age 8* (2003) provides clear guidance for determining whether a curriculum and assessment system is likely to produce positive outcomes for children, preparing them for success in school and in life.

The Creative Curriculum for Preschool Is Comprehensive

The definition of comprehensive curriculum presented in the Joint Position Statement differs from narrower approaches that define curriculum as a sequence of lessons. Comprehensive approaches to curriculum are based on an understanding of the complex social/emotional, physical, and cognitive development of young children and take into account the way preschool-aged children learn. A comprehensive curriculum provides guidance on the many factors that lead to a high-quality program and presents all aspects of teaching young children effectively. This thorough guidance contrasts with approaches that give teachers a rigid script to follow.

The Creative Curriculum for Preschool is a comprehensive curriculum, linked to an assessment system, that fully meets the criteria for appropriateness and effectiveness. It addresses teachers' need to know **what** to teach and **why**, and **how** children learn best. With such a curriculum, teachers can respond to the individual needs and learning styles of all of their children. It is one of the only curriculum and assessment systems that is inclusive of all children—those developing typically, children with disabilities, and English language learners.

The Creative Curriculum for Preschool specifies the literacy, math, science, social studies, arts, and technology content to be taught, based on published standards. It relates directly to the subject area curricula used in elementary schools, so children's learning in preschool forms the basis of all of the learning that will follow.

The Creative Curriculum for Preschool Is Scientifically Based

The Creative Curriculum for Preschool, 4th edition and *Literacy: The Creative Curriculum® Approach* draw on research from over 100 scientific studies, including the work of Drs. Christopher Lonigan (2000), Grover Whitehurst (1998), Susan Neuman (1990, 1991, 1998), and Joseph Torgesen (1998), as well as research syntheses by the National Early Literacy Panel

1

(2004) and the National Reading Panel (2000). The curriculum translates findings from these studies into specific instructional strategies to improve literacy and language outcomes for children. *Mathematics: The Creative Curriculum® Approach* translates the findings of Baroody (2004), Clements (1997, 1999, 2003, 2004), Copley (2000, 2004, 2005), Starkey (1992) and others into carefully planned strategies and specific lessons to improve mathematics outcomes for children.

The Creative Curriculum for Preschool is a scientifically based, research-tested model. To date, four studies have been conducted to evaluate the effectiveness of *The Creative Curriculum for Preschool*. The most recent study was conducted by Philliber Research Associates for The Hartford Foundation for Public Giving. This evaluation of 188 children enrolled in 14 childcare centers found significant gains for children who were in classrooms receiving *The Creative Curriculum* intervention. Using the Early Screening Profiles, researchers found that children in *The Creative Curriculum* classrooms made statistically significant gains in the cognitive/language profile, motor profile, and self-help profile over what would be expected of children of the same age during the same amount of time. In addition, an evaluation of the Department of Defense Sure Start program (Abbott-Shim, 2000), involved nearly 100 children in 10 randomly selected classrooms using *The Creative Curriculum*. Trained data collectors administered classroom observations, child assessments, and parent questionnaires to determine the quality of classroom teaching practices and to assess children's developmental gains. Another study, conducted by the Louisiana Department of Education (LDE, 2001), also examined developmental gains for children in classrooms using *The Creative Curriculum*. The results indicated positive average gains in three developmental areas: social/emotional development, cognitive development, and physical development. Finally, The Family and Child Experiences Survey (FACES), sponsored by the US Department of Health and Human Services, found that *The Creative Curriculum* was the most widely used curriculum in Head Start and that programs that used an integrated curriculum showed greater gains in several cognitive and social/emotional areas.

The Creative Curriculum for Preschool Is a Complete System

The Creative Curriculum system includes the following:

- A review of current research and learning theory, described in practical terms so that teachers can understand and explain to others the reasons for their instructional approaches.

- An overview of child development knowledge and the many ways that children are unique, including temperament, learning styles, interests, life experiences, culture, and special needs.

- Strategies for setting up a learning environment—the context for teaching. It shows teachers how to select and organize materials and to arrange a classroom; how to create a balanced schedule and routines; and how to build a classroom community, teach social skills and conflict-resolution strategies, and handle challenging behaviors.

- The content to be taught—the knowledge and skills children are expected to learn in literacy, math, science, social studies, the arts, and technology. The content is based on standards in each subject area and correlates well with elementary school curricula and state early learning standards.

- A wide range of instructional strategies so that teachers can take full advantage of multiple opportunities for intentional teaching during large- and small-group times, teachable moments, and long-term studies.

CURRICULUM , continued

Indicators of Effectiveness	How *The Creative Curriculum* for Preschool Meets This Indicator
Curriculum builds on prior learning and experience.	Teachers find out what children know and can do through ongoing assessment: observing, conversing, and discussing with families. This information serves as a starting point for determining the new concepts to be learned.
Curriculum is comprehensive.	*The Creative Curriculum for Preschool* is comprehensive and addresses all areas of development: social/emotional, physical, cognitive, and language. It also includes all subject-matter areas: literacy, math, science, social studies, the arts, and technology.
Professional standards validate the curriculum's subject-matter content.	Content for the curriculum was based on national standards of the various professional organizations. A recent review by the Florida Center for Reading Research indicates that the literacy "content information provided for teachers is aligned with current research."
The curriculum is likely to benefit children.	Research indicates that *The Creative Curriculum for Preschool*, when implemented as intended, will result in positive child outcomes. (See the Web site, *www.TeachingStrategies.com* for a research summary.)

5

Promise Neighborhoods

Policy Factsheet

After-School Programs with Academic Support Services

Reasons for Policy

- An estimated 15% of children aged 6-12 are regularly unsupervised after school.[1]
- More than two-thirds of low- and moderate-income youth do not have parental supervision available after school.[2]
- Unstructured, unsupervised after-school time is associated with increased violence, delinquency, sexual intercourse, smoking, alcohol and drug use, and poor academic outcomes.[3]

Community Groups

- Local Consumer Protection Agencies
- Local District Attorney
- Local Government

Policy Components

- Provide positive adult supervision while offering academic, youth development, and recreational activities
- Employ evidence-based training methods for the program that incorporate a planned set of activities which use active forms of learning to target positive youth development
- Involve partnerships between community-based organizations (and/or universities) and schools

Desired Outcomes

- Reduced risk-taking behaviors
- Positive youth development
- Enhanced academic, social, emotional, and behavioral growth

Level of Evidence Available to Evaluate Effectiveness of Policy

For all policies we describe on this website, we have applied the Standards of Evidence as defined by Flay et al. (2005) in the Standards of Evidence document published by Prevention Science.

The effectiveness level of this policy is 1: Evidence-Based Policies Meeting Criteria for Effectiveness.

The levels of effectiveness as noted are:

1. meets criteria for policy effectiveness (consistent, positive outcomes from at least two high-quality experimental or quasi-experimental trials using a comparison group or interrupted time series design);
2. consistent evidence available linking policy with positive outcomes from high-quality observational studies only;
3. insufficient evidence available for policy or policy components.

Achievable Results

The following summary of achievable results is based on a published review of the scientific evidence.[4]

Significant improvements have been observed for:

- Reading achievement among students at risk for school failure (small effect size of 0.07)[5]
- Mathematics achievement among students at risk for school failure (moderate effect size of 0.26)[5]
- Child self-perceptions, including self-esteem, self-concept, self-efficacy (moderate effect size of 0.34)[6]
- School bonding (small effect size of 0.14)[6]
- Appropriate behavioral control (small effect size of 0.18)[6]
- Performance on standardized school achievement tests (small effect size of 0.16)[6]
- Grades in school (small effect size of 0.11)[6]

Significant reductions have been observed for:

- Problem behaviors, including non-compliance, aggression, delinquent acts, disciplinary referrals, and rebelliousness (small effect size of 0.19)[6]
- Self-reported drug use (small effect size of 0.11)[6]

Community Examples

- SeaTac, Washington facilitates before and after school camps for local children throughout the school year.
- Broward, Florida host before and after school programs for elementary and middle school children.

Links to Policy Examples

- [SeaTac, WA, Ordinance 92-1017] (http://www.ci.seatac.wa.us/Modules/ShowDocument.aspx?documentid=802 (page 89) ""Establishes compensation plan for After School workers"")
- Broward, FL, Chapter 7 Ord. No. 2004-02, § 1, 2-10-04

References

1. Vandiere, S, Tout, K, Zaslow, M, Clakins, J, & Capizzano, J (2003). Unsupervised time: Family and child factors associated with self-care. Washington, DC: Urban Institute.

2. US Bureau of Labor Statistics (2000). Families with own children: Employment status of parents by age of youngest child and family type, 2001-2002 annual averages. Retrieved from http://www.bls.gov/news.release/famee/t04.htm.

3. U.S. Department of Education & U.S. Department of Justice (2000). Working for children and families: Safe and smart after-school programs. Washington, DC: Government Printing Office. Retrieved from http://www.ed.gov.

4. Flay, BR, Biglan, A, Boruch, RF, Ganzalez Castro, F, Gottfredson, D, Kellam, S, Moscicki, EK, Schinke, S, Valentine, JC, & Ji, P (2005). Standards of evidence: Criteria for efficacy, effectiveness and dissemination. Prevention Science, 6(3), 151-175.

5. Lauer, PA, Akiba, M, Wilderson, SB, Apthorp, HS, Snow, D, & Martin-Glenn, ML (2006). Out-of-school-time programs: A meta-analysis of effects for at-risk students. Review of Educational Research, 76(2), 275-313.

6. Durlak, JA & Weissberg, RP (2007). The impact of after-school programs that seek to promote personal and social skills. Chicago, IL: The Collaborative for Academic, Social and Emotional Learning.

🔳 Blog Roll

PNRC Member Blogs

Finding the YES in Prevention

Posted by: LaDonna Coy, MHR, CPS, CDLA
feedproxy.google.com

A Conversation with Jerry Patterson about Coercion

http://promiseneighborhoods.org/policies/after-school-programs-academic-support-services/...   9/2/2013

Comprehensive Literacy Plan

The MPS Comprehensive Literacy Plan was developed in response to the 2008 External Literacy Review report, the work of the Literacy Self-Study Committee and the MPS Strategic Plan reading goal to design a plan of action to increase Pre-K-Grade 12 reading achievement. As a key component of literacy reform in MPS, this blueprint has been designed to guide the development of consistent quality Pre-K-Grade 12 literacy instruction, assessment and professional development across the district. This new grade specific and cross-department document represents the work of school and district-level staff and community and university partners.

To provide clarity regarding what constitutes effective literacy instruction, the MPS Comprehensive Literacy Plan identifies what is recommended in daily practice for reading and writing instruction at each grade level. Aligned with the MPS Comprehensive Literacy Framework, Common Core State Standards and research-based best-practices, the plan employs explicit, intentional and differentiated instruction centered on the needs of all students. Its main purpose is to address rigor in curriculum content and the manner in which the content is delivered. Moving from a celebrated history of decentralization to the current curricular coherence demands an articulation of detailed practices that must be implemented in grade levels and classrooms across the district.

Acknowledgement of the developmental nature of literacy is the key premise of the MPS Comprehensive Literacy Plan. An effective district-wide comprehensive literacy program is a powerful vehicle that enables students to become successful, independent readers and writers. Exemplary teachers provide a comprehensive program by providing meaningful instruction in reading, writing, listening, speaking, language, viewing and literature. As they model good reading and writing, they connect skills and strategy development across the literacy continuum. The structure of the MPS Comprehensive Literacy Plan is based on three main elements. Lessons begin with whole group instruction designed to introduce grade-level skills and concepts to all students. The majority of time in the literacy block is dedicated to differentiated small group instruction configured to provide students with meaningful learning experiences designed to meet specific learning needs. Finally, all students reconnect during the whole group instruction to conclude the reading or writing portion of the literacy block. This three-element design is based on best practice in instructional design. Differentiated instruction theory purports that learners respond most readily to lessons tailored to meet their particular instructional needs. All teachers should be able to regularly assess student reading difficulties and strengths in order to provide appropriate differentiated instruction to meet individual needs. Literacy must be viewed as the ability of individuals to communicate effectively for the real world. This must involve teaching the abilities to listen, read, write, speak and view things with thinking being an integral part of each process.

MPS educators, including staff who work primarily with students in special education, are expected to utilize the MPS Comprehensive Literacy Plan for purposes of planning, discussing, and informing when working individually and with colleagues, families, and the community. The plan is based on the Response to Intervention (RtI) 3-tier model. Each grade level consists of three integral components: RtI Tier 1 focuses on the Core Curriculum. In this tier, literacy programs and resources, assessments, literacy block structure and instructional methods are identified along with student performance goals, best practices, and universal strategies. We expect all students to succeed; therefore information on access to the core curriculum for English language learners and students with disabilities and home/community connections is also included. For RtI Tier 2 (Early Intervening Services/supplemental intervention) and Tier 3 (intensive intervention), reading programs and supports, entrance/exit criteria, and progress monitoring information are provided for each identified targeted student population. Expectations for classroom environment and a plan for literacy professional development are also incorporated into the document.

The *Comprehensive Literacy Plan* is research and evidenced based and aligned to the K-Grade 12 *Common Core Standards for English Language Arts and Literacy in History/Social Studies & Science.* It is centered around the work and findings of the International Reading Association and the National Council of Teachers of English (*IRA/NCTE Standards for English Language Arts*), Robert Marzano (*Building Background Knowledge for Academic Achievement* and *Classroom Instruction That Works*), the National Reading Panel, the National Institute for Literacy, the Partnership for 21st Century Skills, *Reading Next, Writing Next,* and the National Center for Education Evaluation and Regional Assistance: Institute of Education Sciences.

Support for the implementation of the Comprehensive Literacy Plan is provided. All MPS educators, including staff who work primarily with students in special education, will have ongoing professional development focused on the key components of the Comprehensive Literacy Plan through district sessions and job-embedded, school-based opportunities. Cross-department collaboration between Central Services staff will also ensure consistency, coherence and alignment in messages, expectations and professional development for literacy. Families are also a crucial component of student success, therefore, MPS will also provide literacy sessions and supports for families that are aligned, targeted and focused. Furthermore, MPS has numerous community connections and partnerships which provide additional resources.

Assisting Students Struggling with Reading: Response to Intervention (RtI) and Multi-Tier Intervention in the Primary Grades

Summary

This guide offers five specific recommendations to help educators identify struggling readers and implement evidence-based strategies to promote their reading achievement. Teachers and reading specialists can utilize these strategies to implement RtI and multi-tier intervention methods and frameworks at the classroom or school level. Recommendations cover how to screen students for reading problems, design a multi-tier intervention program, adjust instruction to help struggling readers, and monitor student progress.

Recommendations

	Recommendation	Level of Evidence
1.	*Screen all students for potential reading problems at the beginning of the year and again in the middle of the year.* Regularly monitor the progress of students at risk for developing reading disabilities. *Source* 🗎 – *1231 KB*	Moderate

Tier 1 intervention/general education

	Recommendation	Level of Evidence
2.	*Provide time for differentiated reading instruction for all students based on assessments of students' current reading level. Source* 🗎 – *1231 KB*	Minimal

Tier 2

	Recommendation	Level of Evidence
3.	*Provide intensive, systematic instruction on up to three foundational reading skills in small groups to students who score below the benchmark score on universal screening.* Typically, these groups meet between three and five times a week, for 20 to 40 minutes. *Source* 🗎 – *1231 KB*	Strong
4.	*Monitor the progress of tier 2 students at least once a month.* Use these data to determine whether students still require intervention. For those students still making insufficient progress, schoolwide teams should design a tier 3 intervention plan. *Source* 🗎 – *1231 KB*	Minimal
5.	*Provide intensive instruction on a daily basis that promotes the development of the various components of reading proficiency to students who show minimal progress after reasonable time in tier 2 small group instruction (tier 3). Source* 🗎 – *1231 KB*	Minimal

Authors

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DOINGWHATW⌖RKS
research-based education practices online

Policy Factsheet from the Promise Neighborhood Research Consortium - Neighborhood Watch Programs

Reasons for Policy
- Neighborhood watch can deter offenders if they know local residents are likely to report suspicious activity.
- Neighborhood watch may also reduce criminal opportunities, such as creating signs of occupancy when neighbors are away from home.

Community Groups
- Community-based Organizations
- Law Enforcement
- Local Government

Policy Components
- Organized block watches, usually run by a block captain
- Use of property-marking and home security surveys
- Use of a neighborhood liaison to the local police department

Desired Outcomes
- Reduction in neighborhood crime
- Greater social cohesion
- Reduction in the opportunity for crime to occur
- Improved relationship with local law enforcement

Level of Evidence Available to Evaluate Effectiveness of Policy
For all policies we describe on this website, we have applied the Standards of Evidence as defined by Flay et al. (2005) in the Standards of Evidence document published by Prevention Science.

The effectiveness level of this policy is 1: Evidence-Based Policies Meeting Criteria for Effectiveness.

The levels of effectiveness as noted are:
1. meets criteria for policy effectiveness (consistent, positive outcomes from at least two high-quality experimental or quasi-experimental trials using a comparison group or interrupted time series design);
2. consistent evidence available linking policy with positive outcomes from high-quality observational studies only;
3. insufficient evidence available for policy or policy components.

Achievable Results
- 16-26% reductions in crime

Community Examples
- Wake Village, Texas has a blog used to communicate with members of the local community about events and other activities.
- Palm Springs, California Police Department has a Neighborhood Watch program

Links to Policy Examples
- Wake Village, Texas Code of Ordinances, Title 3 Chapter 32.15
- Palm Springs, California Ordinance 1666. Section 2.55.130 Establishes a Neighborhood Empowerment Program in which Neighborhood Watch programs are included
  http://www.themoviecolony.org/docs/Ordinance1666.pdf

Be sure to check with your state, county, and municipal governments regarding potential existing laws that may impede any new policy development.

The Campbell Collaboration Library of Systematic Reviews
The Campbell Library

Search for:

[   ] [Title ∨] [Search 🔍]

The Effectiveness of Neighborhood Watch: A Systematic Review

Download: [📄 Review] [📄 Protocol] [📄 User abstract]
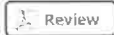
Authors:	Trevor Bennett, David Farrington, Katy Holloway
Published:	31.12.2008
Group:	Crime and Justice
Volume:	4
Issue nr.:	18

Abstract:
Objectives: The primary aim of this review is to assess the effectiveness of neighborhood watch in reducing crime.Neighborhood watch sometimes comprises a stand-alone scheme and sometimes includes additional program elements. The most common combination of program elements is the 'big three' (neighborhood watch, property marking and security surveys). Studies were selected for inclusion in the review if they were based on a watch scheme either alone or in combination with any of the other 'big three' elements.

Criteria for inclusion of studies: Neighborhood watch sometimes comprises a stand-alone scheme and sometimes includes additional program elements. The most common combination of program elements is the 'big three' (neighborhood watch, property marking and security surveys). Studies were selected for inclusion in the review if they were based on a watch scheme either alone or in combination with any of the other 'big three' elements. The main quality control was that the studies should be based on random allocation or a pre-post test design with a comparison area.

Search Strategy: Studies were identified by searching 11 electronic databases. In addition, studies were sought using on-line library catalogues, literature reviews, lists of references, and published bibliographies. Leading researchers in the field were also contacted when there was a particular need to do so.

Data collection and analysis: The narrative review was based on 19 studies (covering 43 evaluations) and the meta-analysis was based on 12 studies (covering 18 evaluations). The data used included police-recorded crimes and self-reported victimizations.

Main findings: The main finding of the narrative review was that the majority of the schemes evaluated indicated that neighborhood watch was effective in reducing crime. The main finding of the meta-analysis was that the weighted mean odds ratio for all studies combined was 1.19 using the fixed effects method and 1.36 using the random effects method. The results of both methods show that neighborhood watch was associated with a reduction in crime of between 16 per cent and 26 per cent.

Reviewers' conclusions: This review concludes that neighborhood watch is associated with a reduction in crime.

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What Have We Learned From Evaluations of Crime Prevention Through Environmental Design Strategies?

A range of strategies and programs have been evaluated to determine the effectiveness of CPTED. Although some studies have attempted to use true experimental designs when studying CPTED, a majority of the strategies have been studied using quasi-experimental designs. In addition, there are few process evaluations of CPTED, which limits what is known about how these strategies are implemented, whether they are implemented properly, and potential reasons for program failure. Few studies have examined long-term goals or been designed to provide unequivocal evidence indicating whether the CPTED strategy or other factors (e.g., seasonal variations or overall reduction in crime rates) were responsible for observed outcomes. However, **systematic reviews** of CPTED evaluation studies as well as results from individual studies provide preliminary evidence that implementing CPTED strategies does impact crime. Research also suggests the importance of taking the local contexts of a neighborhood into account when implementing CPTED strategies. Overall, the evidence currently available on the effectiveness of CPTED indicates that these strategies are promising although more rigorous evaluations are needed to show more clearly how and why these strategies work.

Territoriality
Territoriality is a primary concept upon which many CPTED strategies are based. It is directed toward making changes to design features of buildings and locations to instill a sense of ownership or pride for a particular area so that criminals are discouraged from offending. Improving the landscaping of a particular area, removing graffiti, and making clear demarcations between public and private spaces are examples of territoriality. Studies examining whether implementation of features designed to clearly define public and private spaces can reduce crime have shown that implementing territoriality strategies can reduce fear of crime. Implementation of these strategies has also been shown to be related to reduced levels of recorded crime.

Access control
Access control seeks to direct the movement of potential offenders to reduce opportunities for offending. Although there is little research examining natural access control methods, a few studies have found that implementing measures such as bullet proof barriers at banks reduces robberies. Installing street barriers on streets with high levels of drug trafficking and homicides has been shown to decrease homicides. However, when compared with neighboring jurisdictions, at least one study showed that street closures did not reduce robberies and assaults to a significant degree.

Surveillance
Most surveillance studies have focused on CCTV. Surveillance involves the implementation of various types of strategies that make it more likely that an offender will be noticed when committing a crime therefore surveillance is intended to deter individuals from offending. One surveillance strategy known as Closed Circuit Television (CCTV) has been studied most extensively in the United Kingdom. CCTV has been shown to reduce recorded vehicle crime and robbery in some studies while other studies of CCTV have shown it to be ineffective. A systematic review of CCTV

showed the strategy to be effective in decreasing vehicle crime, but not effective in reducing violent crime. Some studies have also shown CCTV to significantly reduce levels of fear of crime in a community. Security guards have been shown to affect the likelihood that a bank robbery will occur and to reduce auto thefts. Note that there is some concern that CCTV may have unintended negative consequences such as displacing crime from one area to another.

Activity Support
Activity support includes elements of territoriality, access control, and surveillance. It involves the placement or planning of activities in locations that are more vulnerable to crime so that natural surveillance can be utilized to reduce crimes. Examples include placing street vendors or outdoor eating areas near strategic locations to encourage more desirable activity. Evaluations of this strategy provide preliminary evidence that opportunity for committing crime is reduced when desirable activities increase.

Maintenance
Maintenance involves routine maintenance of surrounding areas and buildings to foster a positive image that helps to discourage crime and reduce the fear of crime. Research indicates that the routine maintenance of the urban environment does reduce crime. For example, clean up programs have been shown to reduce graffiti. Repairing vandalized train equipment has been shown to not only increase train availability but decrease reported crimes against persons.

Target Hardening
Target hardening involves implementing features (e.g., home security measures, peepholes, street lighting, or reinforced front and rear doors) that will make it more difficult to commit a crime. This method has a long history as a crime prevention measure. Early studies of improved street lighting using quasi-experimental designs (e.g., before/after comparisons with no control area) produced inconclusive results concerning its ability to reduce fear of crime. However, studies that were more rigorously designed (e.g., used experimental and control areas) showed a decrease in crime. A systematic review of street lighting measures showed that across the studies examined in the review, crime was reduced by 20%. Research suggests that target hardening methods help to reduce burglary.

NEXT

https://www.bja.gov/evaluation/program-crime-prevention/cpted2.htm   2/6/2015

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Program Profile

Philadelphia (Pa.) Foot Patrol

Evidence Rating: Effective - One study ✓4

Program Description

Program Snapshot

Gender: Both

Geography: Urban

Setting (Delivery): Other Community Setting, High Crime Neighborhoods/Hot Spots

Program Type: Community and Problem Oriented Policing, Foot Patrol, Situational Crime Prevention, Violence Prevention, Hot Spots Policing, General deterrence

Current Program Status: Not Active

Program Director:
Nola Joyce
Deputy Commissioner, Strategic Initialives & Innovations
Philadelphia Police Department
One Franklin Square, Room 310
Philadelphia PA 19106
Phone: 215.686.3125
Website
Email

Program Goals
Late during the first decade of the 21st century, violent crime levels rose to epic proportions in Philadelphia, PA. As of 2008, there had been more than a hundred shootings recorded in the city each month since 2002. Further, crime data indicated that a noticeable and consistent cycle of increased violent crime occurred during summer months. Violent crime had become so rampant that the community had begun to view it as a public health threat, placing pressure on law enforcement to address the issue. In response, the Philadelphia Police Department developed the Philadelphia Foot Patrol strategy, which used proactive, nonthreatening, and community-oriented approaches to local policing. The strategy combined these approaches with techniques borrowed from hot spots policing, disseminating foot patrol to specific high-crime locations. The overall goal was to create significant reductions in violent crime by increasing officer presence in high-crime locations, specifically during the summer months.

Target Sites
The strategy concentrated on implementing foot patrol at certain addresses, street segments, and clusters of microspatial units with high levels of violent crime in Philadelphia.

Program Activities
The strategy emphasized increasing police visibility and presence in high-crime locations and thus did not concentrate on specific activities of officers while on patrol. During the implementation of the strategy, officers engaged in various types of activities while patrolling assigned locations. Some officers engaged in extensive community-oriented work, speaking to community members and visiting child care centers and juvenile hangouts. Other officers took a more crime-oriented approach to their patrol assignment, stopping vehicles at stop signs and intersections, and interviewing pedestrians. In sum, the strategy used a meticulous analysis of the distribution of violent crime across locations, to successfully employ visible presence of officers in the most problematic areas.

Key Personnel
Proper implementation of the strategy relied on coordinating various divisions within the Philadelphia Police Department to accurately identify high-crime locations and coordinate the assignment of officers to designated areas. It was also necessary for patrol officers to maintain a visible presence in assigned patrol locations.

Program Theory
The Philadelphia Foot Patrol strategy used a spatially oriented approach that borrowed ideas from several complementary criminological theories, including rational choice, routine activities, and environmental criminology. Spatially oriented crime control programs aim to make changes in areas that provide crime opportunities in order to create constraints on criminal behavior. Such an approach includes a concentration on deterrence in specific areas, to increase certainty of disruption, apprehension, and arrest using enhanced visibility of police. The rational choice theory posits that the decision to commit a crime is made rationally by an offender, that it is a deliberate decision made after judging that the potential benefits of the crime outweigh the potential risks. The routine activities theory posits that a criminal act occurs when there is a convergence of a suitable target in the absence of a capable guardian. In theory, this complements rational choice because, when the opportunity to commit crime is presented, the offender is more likely to make the choice to offend. The role of place is introduced by environmental criminology, also known as crime pattern theory, which suggests that a reduction in offending will occur if characteristics of an environment are altered to make the location less appealing to criminals. Through a combination of rational choice, routine activities, and environmental criminology, a theory arises that making changes to an environment can have a significant impact on a potential criminal's decision to commit crimes in that area. Therefore, the foot patrol strategy followed from the premise that increasing officer visibility in high-crime locations would render such locations less optimal for criminal offending, leading to a deterrent effect and a reduction in violent crime.

Evaluation Outcomes

Study 1
Reported Violent Crime
Ratcliffe and colleagues (2011) found that the target areas experienced a relative 23 percent statistically significant reduction in reported violent crime in comparison with the control areas. These effects were most noticeable in target areas with the highest levels of preintervention violent crime, as target areas in the top 40 percent on pretreatment violent crime counts had significantly less violent crime during the operational period. These findings suggest that targeted foot patrols in violent crime hot spots can significantly reduce violent crime levels, as long as a threshold level of violence exists initially.

Displacement and Diffusion Effects
An analysis of displacement and diffusion effects indicated a reduction of 90 crimes in the target areas, which was offset by an increase of approximately 37 offenses occurring in buffer zones surrounding target areas—leading to an overall net effect of 53 violent crimes prevented across the city of Philadelphia. The analysis indicates significant evidence of displacement of violent crime to nearby locations; however, these effects were outweighed by direct benefits seen in target areas.

Incident Type Frequency
The frequency of all incident types increased during the operational period, compared with pretreatment levels. Results indicate that the foot patrol officers (as identified by their radio call signs) contributed substantially to the rise in proactive

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police activity observed in treatment areas. In treatment areas, pedestrian stops by police officers increased by 64 percent, vehicle stops increased by 7 percent, police disruptions of disturbances increased by 47 percent, disruptions of narcotics incidents increased by 15 percent, and disruptions of disorder incidents increased by 57 percent. Finally, arrests increased by 13 percent. Based on these increases, it can be inferred that the proactive activities used in walking patrol increased the enforcement of minor violations. It is possible that such proactive policing techniques helped increase police visibility in treatment locations, thereby contributing to reductions in violent crime.

Evaluation Methodology

Study 1
Ratcliffe and colleagues (2011) conducted a randomized controlled trial to assess the impact of the Philadelphia Foot Patrol strategy in reducing crime during the summer, when violent crime levels in Philadelphia, PA, tended to peak. The experiment was intended to isolate the specific impact of foot patrol as a crime-reduction strategy in order to examine its feasibility to create meaningful reductions in violent crime. The evaluation took place during peak summer months in 2009.

The study began with the identification of hot spots using data from the incident (INCT) database of the Philadelphia Police Department for 2006, 2007, and 2008. High-crime areas identified by the database were then assigned to spatial units, producing 120 total locations for inclusion in the experiment. A randomized block design was then used to separate the locations into two groups; 60 were assigned as control locations, and 60 were assigned to receive treatment. Treatment locations were assigned two pairs of officers to engage in intensive foot patrol policing, while control locations received no foot patrol policing. The officer pairs were assigned either a morning (10 a.m. to 6 p.m.) or an evening shift (6 p.m. to 2 a.m.) that they policed Tuesday through Saturday nights. The pairs alternated morning and evening shifts every other week. This meant that the areas were not assigned foot patrols from 2 a.m. to 10 a.m. each day, and from 2 a.m. Sunday right through to 10 a.m. Tuesday each week.

A comparison of crime frequency in both the 60 target areas and the 60 control areas before and during the operational period was used to determine the impact of the strategy. Data from the immediate 3 months before the start of the experiment was compiled for use as a measure for a pretreatment period. The operational period of the experiment was executed using two phases. Phase 1 commenced on March 31, 2009, with officers in 24 foot patrol areas. Phase 2 commenced on July 7, 2009, and totaled 36 patrolled areas. Over the first 12 weeks of each phase combined, this theoretically provided for 57,600 hours of foot patrol activity. A linear regression model was used to determine the statistical significance of changes in violent crime for both groups between pretreatment and operational levels. Analyses of displacement and diffusion effects and incident type frequency were used to supplement the analysis of crime trends for the experiment.

- *Reported violent crime.* Data was provided by the Philadelphia Police Department from the INCT database, which assigns a Uniform Crime Report classification to all entries. Violent crime was defined as criminal homicide, all robberies (except cargo theft), and a majority of aggravated assaults. Violent crimes that were likely to take place indoors and were not expected to be prevented by foot patrol, such as rape, were excluded from the analysis.
- *Displacement and diffusion effects.* The total net effect of the operation was calculated to assess the possibility that the strategy displaced violent crime to nearby areas, or that violent crime reductions were diffused to nearby areas. This was examined using an analysis of effects in nearby buffer areas, which encompassed the area of about 1,000 feet around target sites. Effects were calculated by examining the ratio of the crime reduction in the target areas after factoring in the general change in the control areas and then taking into consideration any displacement or diffusion to the buffer area.
- *Incident type frequency.* The frequency of various minor criminal incidents was measured to examine the impact of increased proactive police activity after implementation of the foot patrol strategy. Such incidents were chosen as measures because of the likelihood that they would be handled by a patrol officer, as opposed to a call for service. A pedestrian stop was recorded when an officer conducted a field interview, a stop-and-frisk, or a search of suspect in the street. A vehicle stop was recorded when an officer pulled over an occupant in a vehicle. Disturbances were recorded for incidents that involved police disruption of rowdy behavior. Incidents involving narcotics were also recorded. Disorder incidents included public order offenses such as prostitution, public drunkenness, loitering, or violation of city ordinances. Arrests were also recorded, to provide possible indications of proactive police work.

Cost

There is no cost information available for this program.

Implementation Information

Patrol officers were required to receive specialized training and orientation to become familiarized with assigned locations. Officers received a 1-week orientation at the police district of their specific foot patrol location, after which they spent an initial period of a few weeks in and around their beat with an experienced officer. In addition, all patrol officers were provided with an initial criminal intelligence brief on their foot patrol area by the criminal intelligence unit. This training was necessary to ensure that officers were familiar with the community and environment where they were to patrol.

Evidence-Base (Studies Reviewed)

These sources were used in the development of the program profile:

Study 1
Ratcliffe, Jerry H., Travis Taniguchi, Elizabeth R. Groff, and Jennifer D. Wood. 2011. "The Philadelphia Foot Patrol Experiment: A Randomized Controlled Trial of Police Patrol Effectiveness in Violent Crime Hotspots." *Criminology* 49(3):795 –831.

Additional References

These sources were used in the development of the program profile:

Sorg, Evan T., Cory P. Haberman, Jerry H. Ratcliffe, and Elizabeth R. Groff. 2013. "Foot Patrol in Violent Crime Hot Spots: The Longitudinal Impact of Deterrence and Posttreatment Effects of Displacement." *Criminology* 51(1):65–102.

Temple University. N.d. "The Philadelphia Foot Patrol Experiment." Ambler, Pa.: Temple University College of Liberal Arts, Department of Criminal Justice.
http://www.temple.edu/cj/FootPatrolProject/

Related Practices

Following are CrimeSolutions.gov-rated practices that are related to this program:

Hot Spots Policing
Used by many U.S. police departments, hot spots policing strategies focus on small geographic areas or places, usually in urban settings, where crime is concentrated.

https://www.crimesolutions.gov/ProgramDetails.aspx?ID=234   2/6/2015

The Individual and Family Self-Management Theory: Background and perspectives on context, process, and outcomes

Polly Ryan, PhD, RN, CNS-BC
Kathleen J. Sawin, DNS, CPNP, FAAN

Current evidence indicates that individuals and families who engage in self-management (SM) behaviors improve their health outcomes. While the results of these studies are promising, there is little agreement as to the critical components of SM or directions for future study. This article offers an organized perspective of similar and divergent ideas related to SM. Unique contributions of prior work are highlighted and findings from studies are summarized. A new descriptive mid-range theory, Individual and Family Self-management Theory, is presented; assumptions are identified, concepts defined, and proposed relationships are outlined. This theory adds to the literature on SM by focusing on individuals, dyads within the family, or the family unit as a whole; explicating process components of SM; and proposing use of proximal and distal outcomes.

The need to manage chronic conditions and to actively engage in a lifestyle that fosters health is increasingly recognized as the responsibility of the individual and their family. Health problems have shifted from acute to chronic, and personal behaviors are linked to over half of chronic health problems.[1,2] Health care delivery has shifted to non-hospital venues with hospitalizations often eliminated or shortened. Criteria for hospital discharge are related to outcomes of conditions or procedures rather than the ability of patients or families to manage care.[1] It is estimated that half of all Americans are managing a serious chronic health condition at home. Over 12% of children have special healthcare needs and 23% of these children are significantly impacted by their condition.[3] In adults, 7% of persons between the ages of 45–54 and 37% of persons > 75 years of age are managing 3 chronic conditions.[1] While the values of health promotion are increasingly realized for individuals and families, few health-promoting strategies are routinely incorporated into the delivery of health care in many settings. Individuals and families are expected to sort through the myriad of contradictory health information of varying quality and engage in behaviors promoting their health. Personal efforts to engage in healthy behaviors are often derailed by social factors incongruent with health,[1,4] such as neighborhoods unsafe for exercise, peer-group norms related to food choices and alcohol, and expectations inherent in some family traditions.

As nurses and other healthcare professionals, our expectations for individuals and families to assume responsibility for managing their health care have outpaced our understanding of how to assist them to acquire the knowledge, skills, and social facilitation for health management. Studies related to the efficacy of self-management (SM) behaviors offer significant promise to improving health outcomes.[5-11] For individuals and families, the management of chronic health conditions leads to the improvement of their health outcomes; increased quality of life; and realignment of healthcare expenditures including a decreasing demand for health services and SM also contributes to the overall health of society.[12] Likewise, managing risk factors can improve health outcomes by preventing, delaying, or attenuating health conditions. While SM appears to offer significant promise, widespread agreement of what individual and family SM actually is and how it can be developed is just beginning to be understood.

The purposes of this article are to identify gaps in the science of SM and present a descriptive mid-range SM theory. Specific aims include (1) defining SM and identifying issues related to the conceptual clarity of the concept; (2) providing an understanding of the divergence in current conceptual and theoretical thinking and research; (3) presenting The Individual and Family Self-Management Theory (IFSMT), including a description of assumptions, concepts, and the relationships among

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emerges as essential to the model. However, he found that patient outcomes improved in 19 of the 20 studies that included SM support—providing evidence of the impact observed when SM support is a component of chronic care. Details of SM support are available in manuals prepared by the CCM team (http://www.improvingchroniccare.org).

Parry, Kramer, and Coleman[32,55–58] developed and are testing a program to facilitate transitioning across care delivery systems while maintaining or improving patient outcomes. Their Care Transition program is an interdisciplinary program that occurs over a 30-day period of time. The intervention focuses on medication SM, a patient-centered record, follow-up with healthcare providers, and knowledge/self-management of conditions. All participants have a specifically designed Personal Health Record. Nurses serve as transition coaches, teaching persons about their conditions and enhancing their skills to manage their illness and communicate with members of the healthcare team. Details of the program are available in manuals prepared and used during formal testing. Efficacy of the program is being tested currently.

Efficacy of Interventions and Programs

A review of 145 articles was conducted by Barlow and colleagues[14] to determine the efficacy of SM interventions and programs. This review was limited to chronic conditions (66 articles related to asthma, 18 to diabetes, and 17 to arthritis). While the majority of studies were conducted in the United States (n = 82), studies were also from the United Kingdom (n = 13), Australia (n = 10), and in other countries (n = 40). Most of the studies focused on adults, and several studies included both children and adults with asthma. SM programs were delivered across all venues via numerous delivery methods. In the majority of studies more than one delivery method was used. SM interventions included content related to condition-specific information, drug management, symptom management, self-regulation enhancement, and social support. Outcomes measures included physical, psychological, health status, knowledge, medication usage, self-efficacy, and use of SM behaviors. Compared to standard care recipients, participants benefited in terms of knowledge, performance of SM behaviors, self-efficacy, and health status. Venue and delivery method did not alter the positive impact of delivering SM interventions.

Summary: Gaps and Opportunities

The concept of SM has been developed, tested, and used over the past 4 decades. Interventions and programs have been designed and tested. There is a growing body of empirical evidence that SM interventions and programs improve the outcomes of persons with chronic illness. There is increasing evidence there is a common grouping of SM tasks across multiple chronic conditions, providing evidence of the need for condition-specific as well as non-condition-specific interventions to enhance SM. SM interventions and programs are effective for adults and children and their families. There is very promising evidence that outcomes from SM interventions and programs are more effective than usual care or traditional patient education. Inclusion of SM interventions into well-respected and innovative chronic care programs provides testimony to their effectiveness in a clinical setting.

However, gaps exist in the understanding of individual and family SM, the process of SM, and identification and measurement of outcomes sensitive to short-term behavior change and the impact of health behavior on long-range outcomes such as health status, cost, and quality of life. There is a considerable gap in our understanding of the similarities and differences of SM across developmental stages (young to older adult) and reciprocal relationships other's play in SM. Individual and family SM needs to be studied in children as well as in adults. While it is evident that parents and other adults are actively involved in SM tasks of children, it is not so evident that significant others, as well as children, impact SM of adults.

The processes individuals and families use for SM need to be explicated. Is the process similar for individuals and families? As young children develop, SM is most likely a transitional process. Is this transition process similar in any respect to declining SM abilities in older adults? Isn't it possible that young children and older adults have the capacity to contribute to adult SM?

Determining impact of health behavior change on health status is especially challenging for numerous condition- and measurement-related issues. Yet there is a real need to determine the efficacy of interventions on behaviors long before any change to health status could be observed. Hence, there are opportunities to conceptualize SM outcomes as both proximal and short-term and distal or long-term.

IFSMT: A NEW MID-RANGE DESCRIPTIVE THEORY

Gaps in SM knowledge and opportunities for continued knowledge development benefit from new theories. A new theory, IFSMT, is presented here as an alternative perspective. This new theory is being used to influence study designs, intervention and measurement development, and it is being tested across multiple conditions and populations. Rodgers, a recognized and well-respected nurse theorist and University of Milwaukee Wisconsin Self-management Center Scientist, proposed this new mid-range theory be considered a descriptive theory. Descriptive theories are based on deductive and inductive processes and

> . . . reveal the substance of a situation yet without structured linkages showing the specific nature of

Community gardens

Evidence Rating

Some Evidence

Health Factors

Diet and Exercise

Decision Makers

Philanthropy and Investors
Government
Community Member
Community Development
Non-Profit Leader
Community Spotlight

Atlanta Places of Worship Grow Gardens in their Yards

A community garden is any piece of land that is gardened or cultivated by a group of people. Community gardens are typically owned by local governments, not-for-profit groups, or faith-based organizations. Communities may support gardens through tax incentives, land banking, zoning regulation changes, or ongoing assistance through free services such as water or waste disposal.

Expected Beneficial Outcomes

- Increased access to fruits & vegetables

- Increased fruit & vegetable consumption

- Increased physical activity

- Increased availability of healthy foods in food deserts

Evidence of Effectiveness

There is some evidence that community gardens improve access to and consumption of fruits and vegetables (Draper 2010, McCormack 2010, Litt 2011, Lackey 1998, Blair 1991, Gilroy 2011, Alaimo 2008). Community gardens can also increase physical activity for gardeners (Draper 2010, Lackey 1998,

Gilroy 2011). Community gardens are a suggested strategy to increase fruit and vegetable availability in food deserts (Hendrickson 2006, UW IRP-McCracken 2012, CDC-Food deserts), promote healthy eating, and reduce obesity (IOM-Government obesity prevention 2009, TFAH-Levi 2011, CDC-Zoning healthy eating, CDC-Fruits and vegetables 2011). However, additional evidence is needed to confirm effects. Gardening is considered moderate-intensity aerobic exercise and heavy gardening vigorous and muscle-strengthening exercise (US DHHS-PAG). Community gardens can reduce barriers to healthy food access associated with transportation, cost, and food preference (Gilroy 2011). Successful community gardens may also have social benefits such as increased nearby property values, increased community engagement and pride, or improved neighborhood safety (Voicu 2008, LGC).

Since residents maintain them and land often comes from vacant abandoned lots, community gardens are relatively inexpensive (LGC). Placing community gardens in low income areas can reduce disparities in access to healthy foods, especially fresh fruit and vegetables (PolicyLink-Flournoy 2005). Community gardening can also reduce food costs for participating families (PolicyLink-Flournoy 2005, Gilroy 2011).

Impact on Disparities

No impact on disparities likely

Implementation Examples

Numerous municipalities support community gardens. For example: Boston and Portland (Oregon) have zoning ordinances specifically for gardens (PHLP-Land Use); Chicago NeighborSpace is authorized to purchase vacant land to preserve it for gardens (Chicago NeighborSpace); and cities like Seattle, Washington DC, Cleveland, San Francisco, Oakland, and Berkeley have included community gardens in their comprehensive city plans (PHLP-Land Use).

Rural areas and smaller municipalities also support community gardens. For example: Dyer County, Tennessee established community gardens as part of its wellness efforts, and Hernando, Mississippi gives produce from its community garden to lower income residents (TFAH-Levi 2011).

Additional examples of organizations supporting successful community gardens include: Growing Power in Milwaukee, WI (GP-WI); Nuestras Raíces in Holyoke, MA (NR-MA); Neighborhood Progress in Cleveland, OH (NPI-OH); City Harvest in Philadelphia, PA (PHS-CH, Vitiello 2009); and Cleveland Step's Program in Cleveland, OH (CDPH-Steps).

Implementation Resources

ACGA - American Community Gardening Association (ACGA). Locate your nearest community garden.
ChangeLab-Community gardens - ChangeLab Solutions. Community gardens for public health: A webinar about how local governments can support community gardens.
WI DHS-Got Dirt - Wisconsin Department of Health Services (DHS). Nutrition and physical activity program: Got dirt? Gardening initiative.
PolicyLink-CGs - PolicyLink. Equitable development toolkit: Urban agriculture and community gardens. 2008.
HA Davis-Gardening tips - Davis A. Home landscaping tips for building the perfect garden. HomeAdvisor (HA).

+Citations - Evidence

* Journal subscription may be required for access.

CDC-Zoning healthy eating - Centers for Disease Control and Prevention (CDC). Zoning to encourage healthy eating.
Alaimo 2008* - Alaimo K, Packnett E, Miles RA, Kruger DJ. Fruit and vegetable intake among urban community gardeners. Journal of Nutrition Education and Behavior. 2008;40(2):94-101.

Community-Based Approaches to Prevention and Management of Hypertension and Cardiovascular Disease

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Community hypertension (HTN) outreach seeks to improve public health by identifying HTN and cardiovascular disease (CVD) risks. In the 1980s, the National Heart, Lung, and Blood Institute (NHLBI) funded multiple positive community studies. Additionally, the Centers for Disease Control and Prevention's (CDC's) Racial and Ethnic Approaches to Community Health (REACH) program addresses CVD risks. In 1978, in Baltimore, MD, the Association of Black Cardiologists (ABC), organized barbershops and churches as HTN control centers, as in New Orleans, LA, since 1993, the Healthy Heart Community Prevention Project (HHCPP).

Also, the NHLBI Community Health Workers and Promotores de Salud are beneficial. The American Society of Hypertension (ASH) Hypertension Community Outreach program provides free HTN and CVD screenings, digital BP monitors, multilingual and literacy-appropriate information, and videos. Contemporary major federal programs, such as the Million Hearts Initiative, are ongoing. Overall, the evidence-based Logic Model should enhance planning, implementation, and dissemination. *J Clin Hypertens (Greenwich).* 2012; 14:336–343. ©2012 Wiley Periodicals, Inc.

Cardiovascular disease (CVD) is the leading cause of mortality in both industrialized societies and the developing world, but is of particular concern in the United States, as it accounts for nearly 20% of health care costs and 30% of Medicare expenditures.[1] Related medical costs and productivity losses approach $450 billion annually, and inflation-adjusted direct medical costs are projected to triple over the next 2 decades.[2] Each year, more than 2 million Americans have a myocardial infarction or stroke, with total mortality of more than 800,000, which includes the largest contributor of lower life expectancy among blacks.

Hypertension (HTN) is the leading cause of CVD, which accounts for the majority (66%) of US deaths, along with several other major risk factors such as smoking, obesity, and elevated cholesterol. The public health approach to HTN not only potentially diminishes hypertension-related morbidity and mortality, but also curtails health care costs. For instance, reducing average population sodium intake to 2300 mg/d could save $18 billion in health care costs annually, and a 5% reduction in the prevalence of HTN would save $25 billion in 5 years.[1]

Therefore, public health HTN interventions offer the promise of decreasing CVD across various populations at risk, particularly in the underserved and disadvantaged communities, which are disproportionately burdened by HTN and its effects. Social determinants of health can be addressed through organizations (governmental, private, or nonprofit) by educating and encouraging people about lifestyle modifications, such as regular physical activity, eating healthy foods, and utilizing preventive health services.

Community HTN programs aim to achieve widespread behavioral change and risk reduction by identifying HTN and unrecognized CVD risk factors. Cardiovascular (CV) outreach efforts have been increasingly implemented during the past 40 years, but despite their continued promulgation, the clinical evidence supporting their efficacy is limited. Evidence for community programs is essential to avoid unrealistic promises of CVD risk and disease reduction and waste of scarce financial resources. Furthermore, there is concern for the development of a health-disparities industry in which stakeholders, including health researchers, consultants, authors, policy makers, and others, may profit with minimal or only modest demonstrable outcomes.[3]

This paper highlights various CVD risk and hypertension-related community outreach programs, from peer-review reports, widely respected Web sites, and the primary author's own experience, based on participation or personal knowledge. Included are early research studies, individual efforts, nonprofit professional organizational initiatives, and recent major federal CVD prevention programs. This review especially focuses on programs specifically designed to target certain racial/ethnic minorities and socioeconomically disadvantaged persons, more likely to experience disparate CVD outcomes.

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EVIDENCE-BASED RESEARCH IN COMMUNITY PROGRAMS FOR REDUCTION OF HYPERTENSION AND CVD RISK FACTORS

The evidence-based approach to health care is the optimal method to determine effective and efficient clinical practices. Therefore, documentation of the effectiveness of intervention methods in real-world settings is essential, including community-based research, with randomized trials or quasi-experimental studies. However, many of the earlier trials may not adequately serve as comprehensive models for minority communities in an increasingly diverse America.

NHLBI-Funded Research

In the 1980s, the National Heart, Lung, and Blood Institute (NHLBI) funded multiple community studies to document the effectiveness of various approaches to CVD risk reduction, including hypertension. Winkleby and colleagues,[4] from the Stanford Center for Research in Disease Prevention, analyzed three community intervention programs including the Stanford Five-City Project, the Minnesota Heart Health Program, and the Pawtucket Heart Health Program (Table I). The conclusions from these studies increased the evidence and understanding of how to work with various communities to promote CV health. These NHLBI-supported studies included work site initiatives on controlling overweight or obese employees by environmental interventions, changing cafeteria food offerings, and increasing time for physical activity, with overall trends in positive outcomes.

Additionally, a 2010 analysis pooled data from three major studies to clarify intervention effects with greater sample size and power than could be attained by the single studies.[5] Time trends were estimated for reduction of multiple major CVD risk factors, including cigarette smoking, blood pressure (BP), total cholesterol, body mass index, and even coronary heart disease mortality risk in women and men aged 25 to 64 years. Although results of these programs were not statistically significant, they suggested potential benefits of community-based approaches to CVD morbidity and mortality while illustrating the challenges of evaluating community-based prevention. There is some evidence of a positive impact on lifestyle and obesity in the disadvantaged populations, including American Indian communities. For example, the Activity Counseling Trial (ACT) compared several patient education and counseling approaches[6] and demonstrated practices that directly correlated with decreased CVD risk.[7]

TABLE I. Selected Cardiovascular Disease Risk and Hypertension-Related Community Outreach Programs

Name of Outreach Program or Policy Initiative	Type of Program
National Heart, Lung, and Blood Institute (NHLBI)	Early community-based research studies
• Stanford Center for Research in Disease Prevention: Stanford Five-City Project, the Minnesota Heart Health Program and the Pawtucket Heart Health Program	
• Activity Counseling Trial	
Center for Disease Control and Prevention (CDC)	Early community-based research and applied science
• The Racial and Ethnic Approaches to Community Health (REACH) program	
Healthy Heart Community Prevention Project (HHCPP)	Community-based effort
BARBER-1 of hyptertension control	Community-based effort
NHLBI	Federal community-based efforts and research
• Educational Campaign with Every Heartbeat Is Life	
• Community Health Workers, including Promotores de Salud	
• Health Education Awareness Research Team (HEART) trial	
International Society of Hypertension in Blacks (ISHIB)	Non-profit professional organizational initiative
Association of Black Cardiologists (ABC)	Non-profit professional organizational initiative
American College of Cardiology (ACC)	Non-profit professional organizational initiative
American Heart Association, the American Stroke Association (AHA/ASA)	Non-profit professional organizational initiative
American Society of Hypertension (ASH)	Non-profit professional organizational initiative
Public Health Action Plan to Prevent Heart Disease and Stroke ("Action Plan")	Recent major federal and not-for-profit cardiovascular prevention program
• The National Forum for Heart Disease and Stroke Prevention	
Million Hearts Initiative	Recent major federal cardiovascular prevention program, including federal, state, and local. Nonprofit and business partners
Community Outreach and Cardiovascular Health (COACH) Trial	Community-based research study
Positive-Affect Intervention and Medication Adherence in Hypertensive African Americans Trial	Community-based research study

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Equipping & inspiring service providers to increase key outcomes, especially for with who face employment barriers.

The WorkNet Model – An Overview

Career Development & Job Placement for People with Barriers

More than 20 years of front-line research has gone into developing the WorkNet Model of Career Development & Job Placement for People with Barriers. As a model of Career Development, the focus is not merely job placement and retention but on long-term, sustainable economic self-sufficiency, as well as career success and satisfaction. As a model of Job Placement, extensive focus and support is also given to candidates as they market themselves to employers who offer their career path. The result is an employee with a better attitude who learns quicker and works harder and a community member whose career clarity and know-how allows them to be career resilient throughout their working life, making them more valuable to employers and able to maintain self-sufficiency and career success.

> *The goal of the WorkNet Model is to help people to begin and succeed in careers that lead to success and satisfaction, with a special focus on helping people with significant barriers to sustain positive life change, maintain economic self-sufficiency, and become career resilient.*

MODEL GOAL, DISTINCTIONS & KEY OBJECTIVES

The goal of the WorkNet Model is to help people to begin and succeed in careers that lead to success and satisfaction, with a special focus on helping people with significant barriers to sustain positive life change, maintain economic self-sufficiency, and become career resilient.

Here are the most important things that define and distinguish the WorkNet Model:

- It is based on solid Career Development theory and practices but is designed to be practical, user-friendly and applicable for job seekers and career changers at all levels.
- Its authors have a special passion and proven ability to help people facing significant barriers to employment including a history of government dependence, poverty, incarceration, mental instability, drug and alcohol abuse, immigration or refugee status, limited education, and more.
- It is the chosen model of the largest providers of employment services to the "difficult-to-place" in Australia, New Zealand, England and Scotland and has touched more than 1 million lives across the globe in the last two decades.
- It is developed by Christians who understand that each of us is uniquely created by God, who loves us and has a wonderful plan for our lives, and that work is a vital part of becoming and expressing who He created us to be. You will not find scripture in our curriculum, but our faith is our motivation and our "Theology of Work" presents the Biblical scriptures from which these ideas come.

The key objectives that facilitate the goal of the model include helping candidates:

- Discover their "what's in it for me?" to begin and succeed in a career and using their natural motivation to engage them to the career development and job search processes.
- Clarify the most important fascinations, skills, and values they want to incorporate into their career decision-making process.
- Identify their career goals, explore possible career paths, choose a career direction, and select the job(s) they will pursue next.
- Identify and overcome the barriers that keep them from getting and succeeding in the job they are pursuing next and to do so in a way that equips them to overcome barriers that could keep them from succeeding and advancing throughout their careers.
- Understand how employers think and how to succeed in today's business culture, allow them to identify their "what's in it for them?" to embrace these ideas, and support them in becoming "bi-cultural" throughout their working lives.
- Learn to advance their careers by pursuing a raise or promotion within their company or making a planned move to another company.

- Design and implement an individualized job search strategy that allows them to quickly secure a job that moves them closer to their career goals.
- Manage their life/work balance and job performance once hired, mentor them on career success strategies, and support them in making at least one planned career move.

PROVEN SUCCESS

The WorkNet Model produces excellent measurable results.

Job Placement	90%+
Job Retention at 1-Year	64%
Job Upgrade within 1 Year	29%

VITAL COMPONENTS OF THE MODEL

The comprehensive WorkNet Model covers the entire career development process, from stabilization beyond job placement. These five vital components represent the <u>content</u> of the model, the lessons offered to candidates. The WorkNet job seeker curriculum covers these components, and we offer staff training on each of them.

Foundations for Success

There are dynamics that are constantly in play throughout the career development process and a person's career. WorkNet's unique approach includes identifying and reducing fear surrounding change, new expectations and responsibilities, failure, success, and more, as well as identifying and mobilizing a person's motivation in life and toward work, and teaching and supporting decision-making and personal responsibility. These concepts run throughout the model, from recruitment, engagement and orientation, through job placement, and into post-placement support, and we use a 50/50 approach to the partnership that allows these lessons to be taught, practiced and integrated.

Life/Work Planning

... How can I do work that works for me?

Life/Work Planning, also called career planning, deals with issues such as exploring career options, choosing a career direction that supports the person's values and allows them to do work they love, developing career plans, and balancing work and life. WorkNet's unique approach also deals with redefining "work" and the role it can play in life, the difference between jobs and careers, why everyone can have a career and begin immediately, dreams and motivations, as well as fear, internal and external sabotage, past patterns and triggers to watch for, and how to integrate career development with other important dynamics, like addiction recovery, faith, family and values, parole conditions, mental illness and health, compliance in government programs, healthy relationships, etc.

Overcoming Barriers

... How can I overcome what's keeping me from getting, keeping and advancing in work I want?

We all have barriers to employment, and most employment approaches include traditional strategies for overcoming them. However, if your program seeks to serve people with especially challenging barriers, traditional approaches don't go far enough. WorkNet's unique and long-term approach teaches a reliable, memorable way for candidates to think like the employer to identify their own barriers and a proven process for overcoming any barrier with our five "SOLAR Solution Tools." Candidates can use this knowledge immediately and throughout their working life to develop long-term, career enhancing solutions that respect who they are and satisfy the employer (and they can pass this knowledge onto others).

Succeeding in Today's Business Culture

Research

Below are brief summaries of demographics and outcomes from YouthBuild programs, plus key external studies conducted on YouthBuild programs since 1996.

Outcomes and Demographics

Demographics

Demographics of YouthBuild students in the United States, based on data submitted to YouthBuild USA:
- 100% are low-income.
- 93% enter without a diploma.
- 71% are men; 29% are women.
- 53% are African American; 22% are Latino(a); 20% are White;

3% are Native American; 2% are Asian American.
- 39% have received public assistance.
- 33% are court-involved.
- 26% are parents.

Outcomes

In the United States, based on data submitted to YouthBuild USA:
- 71% of enrollees completed the program.
- 71% of enrollees obtained their GEDs/high school diplomas, industry-recognized credentials, or both.
- 51% of enrollees went on to postsecondary education or jobs averaging $9.24 an hour.
- 79% of those placed retained their placements for at least six months.
- Recidivism rates within one year of enrollment for court-involved YouthBuild students averaged 13%.

Synopses of Key Research on YouthBuild (in chronological order)

Qualitative Studies

Ronald F. Ferguson et al., YouthBuild in development perspective: A formative evaluation of the YouthBuild demonstration (http://www.eric.ed.gov/ERICWebPortal/search/recordDetails.jsp?
ERICExtSearch_SearchValue_0=ED413381&searchtype=keyword&ERICExtSearch_SearchType_0=no&_pageLabel=RecordDetails&accno
=ED413381&_nfls=false&source=ae) . **Department of Urban Studies and Planning, Massachusetts Institute of Technology, 1996.**

This study, a qualitative and quantitative analysis, examined the first five demonstration sites for two full cycles. It included pre and post interviews of over 60 students. Comparison with other nationally known youth programs including Job Corps showed that YouthBuild had the highest level of GED achievement. The study defined the observable stages of personal development that students went through to change their identity and relationship to society. It also defined the key elements of the top performing sites correlated with high outcomes. These elements included: 1) attention and support from the sponsoring agency; 2) excellent leadership at the program level; 3) fidelity to the YouthBuild philosophy and program design; 4) sufficient flexible funding to address issues as they arose without bureaucratic obstacles; 5) control by the sponsoring organization over the construction sites and housing development; 6) excellent training and technical assistance; and 7) a cohesive, caring, and competent staff.

Anne Wright, The YouthBuild Welfare-to-Work Program: Its Outcomes and Policy Implications (https://youthbuild.org/sites/default/files/basic_page/2011/08/129/The YouthBuild Welfare-to-Work Program-Program Outcomes and Policy Implications_July 2001.pdf) . **YouthBuild USA, 2001.**
This is a study of a three-year grant funded by DOL run from 1998 to 2001 by YouthBuild USA at ten programs. The outcomes of the YouthBuild Welfare-to-Work (WtW) program were higher than those of other WtW programs recruiting under the same eligibility regulations, with 50 percent of all trainees being placed in a job at the end of the program, compared to 44 percent of other WtW program enrollees. YouthBuild graduates earned an average of $7.91 an hour in their first job placement (in 2001), compared to $6.81 an hour for other WtW program participants.

Andrew Hahn, Thomas D. Leavitt, and Erin Horvat. Life After YouthBuild: 900 YouthBuild Graduates Reflect on Their Lives, Dreams, and Experiences (https://youthbuild.org/sites/default/files/basic_page/2011/08/128/Life After YouthBuild - Full Rpt.pdf) . **Heller School at Brandeis University, 2004.**
This study combined a 15-page survey of 900 graduates from over 30 programs and in-depth interviews with a cross-section of 57 randomly selected graduates at eight programs. Both the survey and the interview

results showed that YouthBuild graduates are highly positive about their program experiences, appreciating both the family-like environment and the high expectations of the staff. The survey results showed that 75 percent of these graduates were either in postsecondary education or in jobs averaging $10 an hour; 91% of graduates rated their YouthBuild experience highly; 85% were still involved in community activities; and a high percentage were successful and free of government supports using a variety of indicators. Many graduates also expressed a need for more assistance with personal or career-related issues after graduation.

Wally Abrazaldo et al, Evaluation of the YouthBuild Youth Offender Grants
(https://youthbuild.org/sites/default/files/basic_page/2011/08/128/Evaluation of the YouthBuild Youth Offender Grants - Final Report.pdf). **Social Policy Research Associates, 2009.**
DOL selected YouthBuild USA to participate in its Incarcerated Youth Offender Program, granting $18.2 million over three years to YouthBuild USA for 34 local YouthBuild programs enrolling over 1200 youth. Outcomes exceeded all but one of the short-term targets, including enrollment, completion, GED/HSD attainment, placement, wages, and recidivism. DOL engaged Social Policy Research Associates (SPRA) to do a thorough qualitative study of the program in its third year. The evaluation assessed recruitment and enrollment, educational services, vocational training, case management and retention, and youth leadership and community service.

The study found that all the programs adhered to the basic YouthBuild program design and philosophy, and beyond that the higher performing programs shared certain characteristics: they were usually part of a larger sponsoring agency in which leadership treated YouthBuild as a priority, had a lower student-to-staff ratio, offered their GED preparation or high school classes onsite with teachers from similar backgrounds as the students, effectively linked vocational training to academic instruction, offered industry recognized certifications, had a youth policy council to advise the director, and offered both housing rehabilitation and new construction. It found that the intensity of partnerships with other local agencies did not correlate with higher outcomes. It was more important to have a cohesive internal program community.

Andy Hahn and Tom Leavitt. The Efficacy of Education Awards in YouthBuild AmeriCorps Programs
(https://youthbuild.org/sites/default/files/basic_page/2011/08/128/REPORT_YouthBuild_AmeriCorps_Evaluation_February07.pdf).
Center for Youth and Communities, Heller School for Social Policy and Management, Brandeis University, 2007
This report looks at the degree to which AmeriCorps Education Awards affect involvement in postsecondary education-related activities, utilizing comparisons between YouthBuild AmeriCorps and other YouthBuild completers. The analysis showed that (1) program completers at YouthBuild AmeriCorps programs were more likely than completers at non-AmeriCorps YouthBuild programs to have applied to and been accepted to postsecondary education or training institutions, and to be preparing for a variety of postsecondary educational options, and (2) within the YouthBuild AmeriCorps respondent population, those who actually earned an AmeriCorps Education Award were more likely to apply to, be accepted to, and be enrolled in post-secondary institutions than those who did not earn an AmeriCorps Education Award. Effects were particularly strong among black men.

Michael Midling and Jillianne Leufgen. An Analysis of GED Attainment at YouthBuild AmeriCorps Programs (https://youthbuild.org/sites/default/files/basic_page/2011/08/128/YouthBuild AmeriCorps Eval Report.pdf). **Social Policy Research, 2010.** The researchers studied 31 YouthBuild AmeriCorps programs. They analyzed GED attainment in relation to program practices and demographics of students served, and conducted surveys of students and staff, as well as in-depth interviews in five programs. They concluded that the students were "overwhelmingly positive" about their experiences in YouthBuild, expressing that both the teachers and other staff "cared about them as individuals" and "did whatever necessary to help them reach their educational goals." Various educational practices correlated with higher GED outcomes: higher teacher to student ratios; offering high school diplomas as well as GED's and thereby enriching the curriculum; managing the educational program internally rather than outsourcing it to a partner organization; alternating academic and on-site hours frequently – no less frequently than every other week; and using mixed teaching styles including individual tutoring and group teacher presentations. They found that screening out students based on academic proficiency did not correlate with higher GED achievement. One observation that surprised the researchers was that previously incarcerated students were three times more likely to achieve their GED. They hypothesized possible higher motivation but recommended further exploration of why this was so.

Peter Levine. Pathways into Leadership: A Study of YouthBuild Graduates
(http://www.knightfoundation.org/media/uploads/publication_pdfs/YouthBuild_report_for_Knight_Foundation.pdf). **CIRCLE, Tufts University, 2012.**
This report studied YouthBuild students who had participated in YouthBuild USA's pathways into civic leadership and found them to be extraordinarily effective. Young people who faced enormous challenges at entry to YouthBuild and barely expected to live to age 25 changed their trajectory, internalized the skills and values to become committed civic leaders, with many becoming non-profit professionals, pastors, and even elected officials.

Kathleen A. Tomberg. Youth Development Through Service: A Quality Assessment of the YouthBuild AmeriCorps Program (https://youthbuild.org/sites/default/files/basic_page/2011/08/128/ybac2013.pdf).

Transitional Jobs:
Background, Program Models, and
Evaluation Evidence

Dan Bloom

February 2010

mdrc
BUILDING KNOWLEDGE
TO IMPROVE SOCIAL POLICY

Third, job developers may have a hard time using the TJ experience to improve their clients' odds of getting and holding a regular job. In theory, the fact that an individual has worked and performed well for a number of weeks or months in a transitional job should provide valuable evidence of an employment track record for a job developer who is trying to persuade an employer to consider a client for a job opening. In fact, in many TJ programs, there is a lack of "continuity" between the TJ component and the job development services — that is, they operate as distinct components.[45] In some programs, the job development services may not benefit much from the fact that participants have worked in a transitional job, and they may look much like job development services in programs that do not offer transitional jobs.

Some programs have attempted to address this issue by ensuring that job developers and case managers work with the same group of participants; this may help the job developers get to know their clients better and learn about their performance in the TJ assignment. For example, in Philadelphia's TWC, staff are arranged in teams that all work with the same group of participants. Each team includes a job developer and case managers who specialize in particular phases of the program.

Emerging Evidence on the Impacts of TJ Programs

Several studies have described TJ programs and tracked their outcomes, but, until recently, there was no rigorous evidence on the impacts of these models. This is changing, however, as results begin to emerge from three ongoing evaluations of TJ programs that are using random assignment research designs:

- **The Center for Employment Opportunities (CEO) evaluation.** Part of the HHS Enhanced Services for the Hard-to-Employ project, this evaluation is assessing the New York City-based CEO, one of the nation's largest and best-known TJ programs for former prisoners. In 2004-2005, nearly 1,000 parolees who showed up at CEO seeking service were assigned, at random, either to a program group that was eligible for CEO's regular TJ program or to a control group that was offered basic job search assistance (also from CEO).[46] The study is tracking the program's impacts on employment, recidivism, and other outcomes.

- **The Transitional Work Corporation (TWC) evaluation.** Also part of the HHS Hard-to-Employ project, this evaluation is testing two alternative employment strategies for long-term or potentially long-term TANF recipients

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[45]Kirby et al. (2002).

[46]Random assignment was conducted only in weeks when the number of people seeking services was larger than the number of available TJ slots.

in Philadelphia. Nearly 2,000 people who met the study criteria were assigned, at random, to a group that was referred to TWC — a large, established TJ program — and was required to participate; or to a second group that was referred to a program called "Success Through Employment Preparation" (STEP), which focused on up-front assessment and preemployment services, and that was required to participate; or to a control group that was not required to participate in work activities and was not permitted to enroll in either TWC or STEP. The study is tracking impacts on employment, welfare receipt, and other outcomes.

- **The Transitional Jobs Reentry Demonstration (TJRD).** Initiated by the Chicago-based Joyce Foundation and also funded by the JEHT Foundation and the U.S. Department of Labor, this project is testing TJ programs for former prisoners in Chicago, Detroit, Milwaukee, and St. Paul. In 2007-2008, approximately 1,800 men who were recently released from prison and who agreed to participate in the project were assigned, at random, to a TJ program or to a program providing basic job search assistance. The study is tracking employment and recidivism outcomes for at least one year.[47]

The CEO evaluation has released results covering three years after people entered the study, and the TWC study has released results for a two-year follow-up period; the TWC study will eventually follow sample members for at least three years.[48] Results from the TJRD project will be available in mid-2010. (See Box 1 for more information about CEO, TWC, and the St. Paul site in the TJRD project.)

All three studies collected data on participants' characteristics at the point of study entry. For example, participants in the CEO study were mostly over 30 years old and had an average of seven prior convictions. Those in the TWC study had received 40 months of welfare benefits, on average.

Figure 1 shows the flow of study participants into the CEO and TWC programs and studies. As the figure shows, there is a key difference in the design of the two studies. In the CEO study (the top panel of the figure), individuals entered the study and went through the random assignment process when they showed up to CEO's office seeking services. Thus, by definition, 100 percent of the people in the program group showed up to CEO. Of those, almost

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[47]See Bloom (2009).

[48]The most recent published reports cover two years of follow-up for CEO (Redcross et al., 2009) and 18 months of follow-up for TWC (Bloom et al., 2009). However, slightly longer-term results from both studies were presented at the research conference of the Association for Public Policy Analysis and Management (APPAM) in November 2009.

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