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Introduction

In late 2011, the Allegany Franciscan Ministries Board of Trustees began a process to identify a new strategic opportunity that would allow the organization to more deeply fulfill its mission, be more open to new and innovative ways to create healthier communities, provide for the highest and best use of available funding, promote systemic change, and continue to energize our community, volunteers and staff.

In December 2013, the board of trustees approved a new strategic initiative called the Common Good Initiative. In keeping with the mission to serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities, Allegany Franciscan Ministries has identified one community in each of the three regions and will work with its citizens and stakeholders to create opportunities, develop strategies, and make investments that lead to positive health outcomes in each community.

The initiative has multiple interrelated goals: to build collaboration, advocacy capacity, and resident leadership; to influence system changes and through those changes, long-term health and wellness indicators; and to ensure sustainability. Activities to achieve these goals include convening and engaging, investing, Councils for the Common Good in each community, partnering, and others. Allegany Franciscan Ministries obtained community input to identify priorities, each council then identified strategies to address these priorities. As shown, all three communities identified employment and economic opportunity, and two communities identified priorities for youth as well.

Figure 1: Community priorities, by community and type

<table>
<thead>
<tr>
<th></th>
<th>Employment and economic opportunities</th>
<th>Youth development opportunities</th>
<th>Safe and healthy neighborhoods</th>
<th>Community voices inform policies and decisions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lincoln Park</td>
<td>✓</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Overtown</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Wimauma</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>
Progress to Date

This section presents the progress toward the goals listed above. This section first presents data on implementation and investments, then data on the goals. Data in this section come from multiple sources: monthly and board reports of initiative activities and investments made, investment results from partner reports, and interviews with staff and stakeholders.

How is the Common Good Initiative being implemented?

In the past six months, each community finalized strategies for priorities, continued to develop the Council for the Common Good, and made progress on at least one priority, whether that was through funding, convening or developing a request for proposal to implement a comprehensive approach. In interviews, council members and staff particularly noted the development of each council as an accomplishment. Interviewees reported:

- “I think that there’s been a lot of progress, at least in our group, because I think that there is genuine respect for each other.”

- “I think individuals in a room do not make a group. That happens as a result of relationship building, as a result of a common idea, common vision that people are working towards. And I think what’s exciting is that with this group, we’re all on the same page about how we perceive the critical ways in which we can advance the priorities that have been established by the broader community. And I think that there’s considerable agreement and considerable commitment among members to work toward that end.”

- “I think everybody really understands what’s at stake and really understands what needs to take place to make a change. And I think that as a result of that, I think that we will be better able to serve in our capacity to advance the work of the common good.”

Next steps in the initiative are to develop an implementation plan for strategies, to continue to identify partners and investments, and to continue to develop the Council for the Common Good. Figure 2 on the next page presents Common Good Initiative milestones.

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1 For details on the methodology, please see Evaluation Plan v4 dated October 2014.
### Figure 2: Implementation milestones

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>Milestone</th>
</tr>
</thead>
<tbody>
<tr>
<td>June 2014</td>
<td>Determined the Common Good Initiative neighborhood</td>
</tr>
<tr>
<td>June 2014 and December 2014</td>
<td>Gathered community input</td>
</tr>
<tr>
<td></td>
<td>Identified potential priorities</td>
</tr>
<tr>
<td>January 2015 through December 2015</td>
<td>Conducted a community vision session</td>
</tr>
<tr>
<td></td>
<td>Selected priorities</td>
</tr>
<tr>
<td></td>
<td>Began making investments – first major grant</td>
</tr>
<tr>
<td>January 2016 through June 2016</td>
<td>Established the Council for the Common Good</td>
</tr>
<tr>
<td></td>
<td>Researched and determined possible strategies and potential partners</td>
</tr>
<tr>
<td></td>
<td>Continued to make investments</td>
</tr>
<tr>
<td>July 2016 through December 2016</td>
<td>Continued to develop the council</td>
</tr>
<tr>
<td></td>
<td>Conducted research on proposed strategies</td>
</tr>
<tr>
<td></td>
<td>Continued to make investments</td>
</tr>
<tr>
<td></td>
<td>Finalized strategies and identified desired system changes and long-term indicators</td>
</tr>
</tbody>
</table>

Regarding the pace of the initiative, interviewees who are not council members did not describe the pace as either too fast or too slow. One noted “They’re searching for the best impact and that right there is there more important than [expedience] to me” while another said, “I’m not saying it’s going too slow, I’m just anxious to see what that [larger investments] looks like.” Council members had mixed feedback, with some noting “We can speed up” and others noting “We’re moving quickly.” Two interviewees described the pace as “fits and starts.”

Implementation, however, also encompasses Allegany Franciscan Ministries’ approach to the work. The board provided clear direction that the Common Good Initiative should work with the community and help build capacity. The project has not kept to the original timeline due to the deliberate and intentional engagement with the community.

Most interviewees reported they were getting the information they needed, but some did note the need for more communication and a few noted the need for additional community engagement. Interviewees suggested meetings like the initial community meeting and more promotion of Allegany investments and efforts. In Lincoln Park, interviewees had fewer concerns about communication and noted the recent community meeting as a factor. Representative comments are as follows:
• “I went away from [the community meeting] with a lotta hope for the community and for ministries and for individuals that wanted to further a vision or a dream in the community, that this money was available and this was the processes. I think they went well outta their way, above and beyond the call of duty, to communicate that this last meeting.”

• “Allegany’s good to send out through email a bulletin, send things like that, but physically – I’m talking about impact, physically, [my colleague] has not seen any difference.”

• “My organization being a funding entity, I would like to know more regularly what the Common Good is doing.”

• “I think there’s a very good flow of information back and forth.”

• “But in terms of the broader community that was invited into the conversation early on and the conversations that were had around the community by [the VP], I think folks are like, ‘Okay, what’s happening? What are the next steps?’”

As noted, a few interviewees suggested additional community outreach, both to engage entities and to get information out. As one person noted, “I think there needs to be more of a grassroots kind of outreach to where people can see your face and people know who you are and they can say, ‘Well, I attended this and this event, and it was brought to us by this.’” Another said, “I definitely think that they’re taking the right approach. I’ve given some suggestions on how they can enhance their approach and making sure they have direct connection with the grassroots collaboration.” Another encouraged information sharing in “a format by which the community can come and hear it straight out the horse’s mouth.” Please note that Overtown and Wimauma are discussing holding community meetings to do just that.

Interviewees also had praise for the Common Good Initiative:

• “I’m very appreciative of all the work that’s going on through Allegany and what’s going on in the community. I’m thankful that you reach out to me for my input.”

• “[T]hey’re being very, very particular about how they extend these funds, because once you spend them, they’re gone, and that right there I really appreciate because it says to me they’re not just saying, ‘OK, well, we’re just going to give the money.’ No, they’re saying, ‘OK, we want to give the money; we want to make sure it helps in the best way possible.’ That right there is, honestly, I mean, that right there speaks volumes.”
“I was impressed that they sent some folks to different conferences and really tried to get input on good things that are happening in other parts of the country, and I think those are important to try to learn from what other communities have done.”

“I want it to be a success, and I feel like it started right.”

What have been the investments to date?

To date, the Common Good Initiative has made two types of investments: impact and grants and grants-related investments. Impact funds are smaller grants that support goals, address community needs, and/or communicate Allegany Franciscan Ministries’ commitment to the community. Grants and grant-related investments address priorities and/or system change. To date, $2,500,000 has been invested: $200,000 in impact funds and $2,300,000 in grants and grant-related investments. Figure 3 lists grants and grant-related investments awarded to date in each community; Figure 4 presents the impact funds and awarded by year.

Figure 3: Grants and grant-related investments, by community

<table>
<thead>
<tr>
<th>Organization</th>
<th>Project description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lincoln Park</td>
<td>Funding to support three Street Outreach Workers positions for the Gang Initiative ($120,000). An additional $15,000 for the Lincoln Park Advisory Committee to create a resource guide for Lincoln Park Residents, a memorial garden in memory of victims of violence in Lincoln Park and materials to support LPAC’s community mobilization activities.</td>
<td>$135,000</td>
</tr>
<tr>
<td>St. Lucie County BOCC</td>
<td>For the Lincoln Park Community Center: A Time to C.H.I.L.L. youth summit</td>
<td>$10,000</td>
</tr>
<tr>
<td>City of Fort Pierce</td>
<td>For matching grants to nine organizations for summer youth programming in the Lincoln Park community</td>
<td>$41,950</td>
</tr>
<tr>
<td>Fort Pierce Police Department</td>
<td>Funding to decrease crime, improve community relationships and increase transparency, through equipment, technology, and a community relations efforts (matched by the City of Fort Pierce).</td>
<td>$250,000</td>
</tr>
<tr>
<td>Florida Dept. of Health in St Lucie County</td>
<td>To decrease infant deaths by hiring a registered nurse to assess, monitor, and improve the service system for women and infants</td>
<td>$140,000</td>
</tr>
<tr>
<td>Overtown</td>
<td>Support the Overtown Children &amp; Youth Coalition’s development of strategic goals and its master plan</td>
<td>$5,000</td>
</tr>
<tr>
<td>Organization</td>
<td>Project description</td>
<td>Amount</td>
</tr>
<tr>
<td>---------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>Catholic Volunteers in Florida</td>
<td>To recruit volunteers to increase the capacity of organizations serving Overtown</td>
<td>$42,500</td>
</tr>
<tr>
<td>Overtown Children and Youth Coalition, Wimauma</td>
<td>Capacity development grant to formalize the collaborative and implement its master plan to improve outcomes for children and youth in Overtown</td>
<td>$600,000</td>
</tr>
<tr>
<td>Wimauma</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Beth-El Farmworker Ministry, Inc.</td>
<td>Provide funding to support a mission outreach/volunteer coordinator who will work directly with clients seeking long term economic self-sufficiency.</td>
<td>$95,000</td>
</tr>
<tr>
<td>Enterprising Latinas, Inc.</td>
<td>Economic development infrastructure to support microenterprise and implement a resource center for low income women in Wimauma; this is a joint partnership with the Children’s Board of Hillsborough County.</td>
<td>$200,000</td>
</tr>
<tr>
<td>Issue Media Group/83 Degrees Media</td>
<td>Creation of a story bank of articles about people, projects and innovations in Wimauma.</td>
<td>$70,000</td>
</tr>
<tr>
<td>Safe and Sound Hillsborough</td>
<td>Remove the barrier of transportation for children and adults to attend summer enrichment activities at Hillsborough Community College.</td>
<td>$10,000</td>
</tr>
<tr>
<td>Suncoast Community Health Centers, Inc.</td>
<td>Ensure a part-time benefits coordinator to assist family access to public assistance resources.</td>
<td>$50,000</td>
</tr>
<tr>
<td>St. Joseph’s Hospital</td>
<td>Funds will support increased capacity for frontline staff at the clinic. Increasing access to healthcare services for our migrant community is paramount to creating a healthy Wimauma.</td>
<td>$300,000</td>
</tr>
<tr>
<td>Catholic Charities of St. Petersburg</td>
<td>Capacity building grant to provide administrative, planning and direct services to support the only free clinic in the Wimauma community.</td>
<td>$150,000</td>
</tr>
<tr>
<td>Catholic Volunteers in Florida</td>
<td>To support two full-time volunteers with Catholic Charities to assist the clinic with addressing community priorities.</td>
<td>$58,000</td>
</tr>
<tr>
<td>Hispanic Services Council</td>
<td>Bridge funding to continue the work of the Puentes de Salud (Bridges to Health) Project.</td>
<td>$125,000</td>
</tr>
<tr>
<td>Hillsborough County Schools</td>
<td>Installation of covered shelters over the basketball courts at two elementary schools in Wimauma.</td>
<td>$40,000</td>
</tr>
</tbody>
</table>
Figure 4: Impact funds and grants and grant-related investments, by community and by year

![Bar chart showing impact funds and grants and grant-related investments](chart1.png)

Figure 5 presents the same information as in Figure 4, but organized by priority. Each investment was reviewed to see if it aligned with one of the community priorities and/or was made to support community engagement or build capacity. To date, 71% of investments were aligned with community priorities, 34% were for capacity building, and 22% had a focus on community engagement if community engagement was not the priority addressed. (Several grants had multiple purposes so the total is more than 100%.) Seventeen of the 99 investments made, representing 3% of grant dollars awarded, were neither for a priority, for capacity building, nor for community engagement. Please note that each neighborhood’s priorities were slightly different but were assigned to a common category.

Figure 5: Funding made, by priority

![Pie chart showing funding made](chart2.png)
What is the progress in promoting and supporting collaboration, advocacy, and leadership?

This section provides highlights from the last six months in three areas of interest: collaboration, advocacy, and leadership. Please note that this only reflects the period from July to December 2016; the next report will reflect the initiative to date. Data in this section are from monthly reports provided by the vice president of each region, board reports, investment reports, and interviews with stakeholders.

Collaboration

In the past six months, the initiative has encouraged collaboration through developing partners for strategies (including non-traditional partners), building relationships, funding collaborative efforts, and convening. A few highlights are as follows:

- With Common Good Initiative funding, the Roundtable of St Lucie County is building a collaborative infrastructure: establishing an intervention team of 13 agencies, implementing MOUs, and building a referral network.

- Partners were gathered in Wimauma to explore new opportunities to enhance child readiness for school entry. In addition, investments are being leveraged through funding by other entities.

- The Overtown Council designed a request for proposal that established and defined clear collaborations around the advocacy communication and community organizing goals for Overtown.

- The VPs continue to meet with representatives from other funders, faith organizations, businesses, government entities, and educational stakeholders in order to engage a variety of sectors and partners in the initiative.

Advocacy

In the past six months, the initiative has supported advocacy through investments, through advocating for the community to be heard, and through developing specific strategies. A few highlights are as follows:

- With Common Good Initiative funding, the Lincoln Park Advisory Council hosted a meeting with Chief Probation Officer Wydee’a Wilson around issues of disproportionate minority
contact and the civil citation process. The Lincoln Park Advisory Council has also set a priority of engaging residents in the civic process.

- The VP and Wimauma Council members supported efforts to have Wimauma voices heard at the Hillsborough County affordable housing initiative meeting.

- As of December 31, a request for proposal (RFP) for the community voices inform policies and decisions priority in Overtown was ready to disseminate in the community. RFP goals include outreach to engage the community in advocacy and build an advocacy network.

**Leadership**

In the past six months, the Common Good Initiative has developed leadership through the Council for the Common Good and sponsoring council members to attend the Homeboy Industries conference in Los Angeles.

**Capacity**

Interviewees raised interrelated issues related to the capacity to collaborate, advocate, and lead: time, resources, reactivity, and isolation. A lack of time and available resources limit collaboration, advocacy and leadership, and leadership and advocacy are isolated and reactionary. For example, interviewees report that smaller organizations lack the time and resources to develop collaborations and are more competitive for funding. Interviewees also noted that there is a desire to advocate, but that what advocacy occurs is reactive versus proactive and that people and organizations are not collaborating to advocate as one voice. Interviewees noted that residents lack both the time and skills to effectively advocate for the community. Interviewees noted that resident leaders also lack the time and sometimes the skills and that current leadership is reactive but working in isolation and not collaborating. Finally, smaller organizations often do not have the capacity to receive funds. Representative quotes are as follows:

- “But there’s no one who is connecting all those pieces. So, well intending folks are still working in isolation because there is no organization. There is no one who speaks or understands or knows beyond their microcosm of activities what’s happening or what should be happening.”

- “[Leaders] are so focused on whatever specific goal, it’s not always looking across the board for the entire community. It’d be nice if they could come together and advocate with one voice.”
• “Organizations that are a little more established can allow themselves a partnership, ‘cause they have the funding coming in. There’s not a lot of incentive to share if you don’t have a lot of extra resources.”

• “Organizing around particular issues and putting forth a policy agenda is a piece that is not happening around this community. There are a lot of voices chiming in to what needs to be done, but I don’t see a true organized effort around a particular issue or set of issues that would influence elected officials or a policy in a bit way. So there’s a level of sophistication and capacity that can be furthered.”

• Interviewees noted that there is capacity to advocate, but that currently, “it’s more reactionary than proactive. Like, ‘Here’s what we want, and here’s what we need. Let’s start planning forward.’ There’s little of that.”

• It’s a difference of relationship versus strategy.” [Organizations have relationships, but don’t work together on a common strategy]

• “People aren’t really ready to receive funds either from Allegany or from anyone else, and so how do you build the capacity so that they’re ready?”

**What system changes have occurred (i.e., is the fence gone)?**

System changes have been described by staff and council members as long term, multi-faceted, not a Band-Aid, leveraged, fiscally sound, preventative, address root causes, partner driven/collective, diverse, policy-focused, inclusive, barrier-breakers, generational, and disruptive. Another way to think about system changes is to consider the adage “Give people a fish and you feed them for a day. Teach people to fish and they will be fed for a lifetime.” But as Allegany board member Sister Margaret Mary asks, “What do you do if there is a fence around the pond?”

In the past six months, each Council for the Common Good identified desired system changes. The complete list is provided in Appendix B. Although each community identified system changes independently, there were commonalities across the three communities (see Figure 6 on the next page). For example, each community wishes to increase community capacity for advocacy, whether that is through creating an advocacy infrastructure (e.g., organizations, networks), developing resident skills, or both. Communities also wish to increase the partners and resources working on issues (most efforts are currently isolated) to generate the benefits of collaboration and to build sustainability.
Figure 6: Desired system changes common across communities

- Increased community capacity for advocacy
- Increased resources and partners working on issues
- Changes in social norms such as community image and the community feeling it is “one community” and not a specific sector or group
- Increased capacity, including organizational sustainability, residents served, and the quality of services

Future reports will report on how the strategies influenced system changes. For example, one grantee has already reported “We have other resources that have been leveraged by the dollars that were provided by Allegany. We have folks talking to us now about wanting to support the work. People are calling us, instead of me being the one that sort of pursues others.” This is an example of how an investment can support the system change of increased resources and partners working on issues.

Is there positive movement in health and wellness indicators?

As noted, the community set priorities, and each council developed strategies to address those priorities. Those strategies should result in the system changes and the system change should result in changed health and wellness indicators. Again, although each community developed their list of health and wellness indicators to influence independently, there were commonalities (Figure 7). For example, each community hopes to change the system around employment, whether that is aligning job training with job demand, increased collaboration around economic development and investments, or more partners and investment in business development. All – or any – of those system changes should lead to increased employment, income, and/or wages. The next step will be to define these indicators and establish baseline data.

Figure 7: Health and wellness indicator commonalities across communities

- Employment, including self-employment / entrepreneurship
- Income
- Wages
- Youth development indicators (education, employment, risk behaviors)
- Youth health and wellness
**How will efforts be sustained?**

Each community will define sustainability for its efforts and baseline sustainability will be assessed in the next report. Sustainability indicators may include diverse funding streams, system changes, ongoing support of behavior changes, dissemination of relevant products (NORC, 2010), leadership, capacity, and a sustainability plan.

**What are we learning through this process?**

This section summarizes the lessons learned since the last report. Sources for this section are predominantly interviews with Allegany Franciscan Ministries staff, but also includes data from stakeholder interviews, staff meetings, board reports, and other documents.

- As each council has developed, members have become more focused on system changes and sustainability rather than focusing on needs and funding discrete programs.

- In two communities, past history influences the level of trust, desire to advocate and lead, and the need for transparency in both the Common Good Initiative and its partners.

- The Common Good Initiative continues to challenge the internal capacity of Allegany Franciscan Ministries.

Challenges in the next six months will likely relate to the time needed to balance working with the council, identifying and managing investments, and working on collaboration, advocacy, and leadership outside of investments. Although the staff team mentioned ambiguity and changing roles less frequently in the last six months versus earlier periods, staff noted these issues will be a challenge going forward. In this six-month period, staff mentioned accepting the pace and accepting the barriers of doing this work as a lesson learned. For example, in working with councils on strategies, one staff member noted, “It just felt like it took forever. But now they have got a robust picture of what they want success to look like, changes they hope to see in community, and actual steps. That has been just really gratifying.”

A few commonalities across communities have already been noted: common priorities, common strategies, common system changes, common indicators, and common issues around capacity. In regards to the common priority of jobs and economics, one person noted a common challenge was going to be, “How do we understand what the community wants and how do you make the connections between that and what’s available? What might be coming as opportunities and what are the barriers to getting jobs?”
Conclusions

There are several highlights in this report:

- Each council has finalized strategies and identified the resulting system changes and health and wellness indicators to influence.

- Councils have developed, or are developing, into working teams.

- $2.5 million has been invested to date in the Common Good Initiative communities.

- Each community is not only addressing priorities, but also working to influence collaboration, advocacy, and resident leadership.

There are also two items to discuss:

- Interviewees recommend more communication with stakeholders, more community engagement, and more promotion of accomplishments.

- A lack of time, lack of resources, isolation, and reactivity are barriers to collaboration, advocacy, and leadership.
References


NORC. (2010). *Developing a conceptual framework to assess the sustainability of community coalitions post-federal funding.* Bethesda, MD: NORC.


Appendix A: Data Sources

Interviewees included 26 stakeholders. While most interviewees were repeated from the first set of interviews, some substitutions have been made. The design is not longitudinal but cross-sectional, so any substitutions must represent the same community sector. The three vice presidents also participated in one formal interview each, as did the president of the foundation.

Documents included monthly reports from each vice president, documents forwarded from the vice president (e.g., meeting notices, planning documents, reports, and meeting summaries), staff meeting notes, board packets and minutes, and program planning documents.
Appendix B: Priorities, strategies, system changes, and health and wellness indicators

For each community, the community priority, vision statement, strategies, system changes, and long-term indicators are provided “at a glance” over the next three pages. Please note that in both Lincoln Park and Wimauma, the council has identified strategies and system changes for an additional priority that will support the two priorities identified by the community (i.e., capacity building and a backbone organization).
**Lincoln Park**

<table>
<thead>
<tr>
<th><strong>Community priority: Quality jobs and livable wages</strong></th>
<th><strong>Community priority: Safe and healthy neighborhoods</strong></th>
<th><strong>Build capacity</strong> (supporting effort identified by the council)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Lincoln Park residents will have access to quality jobs and livable wages.</td>
<td>Lincoln Park residents will live in a safe and healthy community.</td>
<td></td>
</tr>
</tbody>
</table>

**Strategies**
- Strengthen and leverage existing job training resources to align with potential workforce opportunities for Lincoln Park residents
- Promote small business creation in the Lincoln Park community
- Community outreach and promoting success; incentives
- Grocery retail/healthy food financing
- Endorsing positive images in the Lincoln Park community
- Facilitate opportunities for community cleanups
- Partner and build capacity of organizations focused on the community

*Business capacity is reflected in quality jobs and livable wages priority*

**System changes**
- Increased alignment between job training resources and workforce opportunities
- Changed social norms and expectations around training and employment
- Increased resident participation in in-demand job training
- Increased resources and partners that support business creation
- Strengthened partnerships for sustained efforts
- Increased capacity of local food systems
- Increased access to healthy food
- Changed social norms around Lincoln Park’s image
- Increased organizational capacity
- Increased sustainability

**Health and wellness indicators**
- Employment
- Wages
- Healthy eating
- Feelings of safety
- Decreased chronic health conditions

Will support other two priorities
## Overtown

<table>
<thead>
<tr>
<th>Community priority</th>
<th>Community voices inform policies and decisions</th>
<th>Accessible affordable high quality youth development opportunities</th>
<th>High quality employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategies</td>
<td>- Outreach to local citizens</td>
<td>- Support for Overtown Children and Youth Coalition (OCYC)</td>
<td>- Training to obtain certificates and two-year degree programs; entrepreneur programs.</td>
</tr>
<tr>
<td></td>
<td>- Work with organizations</td>
<td>- Education opportunities for adults working with children and youth</td>
<td>- Business development for profit and non-profit</td>
</tr>
<tr>
<td></td>
<td>- Develop advocacy network</td>
<td>- Marketing and messaging</td>
<td>- Specialized HR</td>
</tr>
<tr>
<td></td>
<td>- Multi-media campaign</td>
<td>- Affordable youth development opportunities</td>
<td></td>
</tr>
<tr>
<td>System changes</td>
<td>- Increased capacity of structures for community influence</td>
<td>- Increased capacity of organizations serving youth (e.g., quantity and quality of services, stability)</td>
<td>- Increased resources &amp; partners to support business development</td>
</tr>
<tr>
<td></td>
<td>- Increased resident engagement as documented though civic participation or advocacy activities.</td>
<td>- Changed social norms around Overtown’s image</td>
<td>- Others TBD</td>
</tr>
<tr>
<td>Health and wellness indicators</td>
<td>- Increased collective efficacy</td>
<td>- Youth development indicators (education, employment, risk behaviors)</td>
<td>- Employment</td>
</tr>
<tr>
<td></td>
<td>- Violence and crime (cross-strategy indicator)</td>
<td>- Youth health, including behavioral health.</td>
<td>- Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Violence (cross-strategy indicator)</td>
<td>- Education</td>
</tr>
</tbody>
</table>
### Wimauma

<table>
<thead>
<tr>
<th>Community priority: Economic opportunities</th>
<th>Community priority: Out of school time</th>
<th>Backbone organization (supporting effort identified by the council)</th>
</tr>
</thead>
</table>
| All Wimauma residents will have access to economic opportunities. | All Wimauma youth and children will grow up in a safe, healthy and nurturing environment. | - Develop advocacy infrastructure  
- Community uses organization as one voice to advocate for other priorities  
- Convene and facilitate activities  
- Primary means of accomplishing goals, the “go to” |

#### Strategies
- Create entrepreneurship opportunities  
- Develop and expand access to quality and livable wage earning jobs  
- Creation of workforce development training / resources that build a career and college path for individuals  
- Promote and invest in access to enrichment activities  
- Develop and expand sustainable and diverse financial support for youth engagement  
- Develop a common set of standards for all opportunities  
- Develop advocacy infrastructure  
- Community uses organization as one voice to advocate for other priorities  
- Convene and facilitate activities  
- Primary means of accomplishing goals, the “go to”

#### System changes
- Increased collaboration among businesses to achieve common goals  
- Changed social norms: “one community”  
- Sustainable businesses  
- Increased investment in Wimauma: jobs, job training, and entrepreneurship  
- Increased quality of existing sites (i.e., safe environment, learning occurs, appealing and meaningful activities).  
- Increased capacity of the OST system by adding high-quality sites  
- Increased connections between OST and other systems (i.e., wrap-around)  
- Increased community advocacy  
- Changed social norms: “one community”  
- Increased resident leadership

#### Health and wellness indicators
- Employment, including self-employment  
- Income  
- Wages  
- Youth development indicators (education, employment, risk behaviors)  
- Youth health and wellness  
- Increased community advocacy  
- Changed social norms: “one community”  
- Increased resident leadership  
- Will support other two priorities