Allegany Franciscan Ministries
Common Good Initiative

Lincoln Park Evaluation Report
December 2015
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Introduction & Background

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” (CGI). 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.

Also at the December 2013 board meeting, the board approved the desired results and evaluation expectations regarding the CGI and an initial evaluation plan was prepared; the plan was modified with input from the regional vice presidents and the board of trustees. As part of that plan, an evaluation report for each community and for the initiative as a whole will be prepared every six months. This is the third of those reports. As strategies are still being determined, the report includes limited baseline data. As future reports are prepared, additional baseline data and conclusions will be provided. The table below presents when evaluation data will be available and when impacts are expected to occur.

Figure 1: Table of expected evaluation information

<table>
<thead>
<tr>
<th>Year 1: Community input and setting priorities (July 2014 – June 2015)</th>
<th>Years 2-7: Implementation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assess implementation</td>
<td>Assess implementation, document lessons learned, document investments (ongoing).</td>
</tr>
<tr>
<td>Document lessons learned</td>
<td>Changes in systems, increased collaboration, and changes in community engagement. Initial changes may occur at the end of Year 2 and then builds over time.</td>
</tr>
<tr>
<td>Gather baseline data</td>
<td>Sustainability begins to develop the end of Year 2.</td>
</tr>
<tr>
<td>Document quick wins and initial investments</td>
<td>Movement in health &amp; wellness indicators beginning Year 4.</td>
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</tbody>
</table>
Evaluation Questions

Each evaluation question is listed below. The criteria for assessing each evaluation question is provided in a text box on the left hand side of the page. Data, if available, are then provided and analyzed. For details on the methodology, please see Evaluation Plan v4 dated October 2014. Limitations are also noted, mostly that it is early in the process and so there is limited data available. Future reports will be able to document trends over time and draw initial conclusions.

This report presents data on Lincoln Park. Although this report is for the internal use of the foundation, a few summary items are listed below to provide context for the report.

- During the community visioning session, the participants identified two priorities: (1) quality jobs with a livable wage based on concerns regarding a lack of quality job opportunities and lack of accessible training for residents for quality jobs and (2) safe and healthy neighborhoods based on their concerns around violence, gangs, and crime.
- Local residents have been involved in revitalization efforts and there are existing structures to support community development and mobilization.
- Interviewees noted that not all current leaders live in Lincoln Park, but there are potential leaders from the area.

To what extent is the CGI being implemented as planned?

Criteria
Describing and comparing (Weiss, 1998) commonalities; a general inductive approach for qualitative data (Thomas, 2006).

Each region chose a Common Good Initiative neighborhood in June 2014. Between June 2014 and December 2014, efforts focused on gathering community input and identifying priorities. During the time period January 2015 through June 2015, the community worked to identify priorities, conduct a community visioning session, and select priorities. From July 2015 through December 2015, the following activities occurred:

- Researched and determined possible strategies and potential partners.
- Explored possible investments and with investment partners.

In addition, the VP identified potential Common Good Advisory Council members and continued to make new connections and build relationships. The next steps are:

- To share the strategies with the community for feedback
- For the commission/board to approve investment models
- To award grants and grant-related investments
Implementation, however, also encompasses how CGI is approaching 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. See the initiative-wide report for data on this aspect of implementation.

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

This question is only analyzed at the initiative-wide level, not at the individual community level. See the Common Good Initiative evaluation report for data on this question.

**To what extent is there positive movement in health and wellness indicators?**

<table>
<thead>
<tr>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive movement in indicators (e.g., % of residents that have been to a doctor in the last 12 months).</td>
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</tbody>
</table>

Strategies for each community have not been approved, so no baseline data in health and wellness indicators are provided at this time. Community members, most likely the Council for the Common Good but also others, will provide input into the appropriate indicators.

**To what extent are there documented changes in systems that create/maintain health deserts?**

<table>
<thead>
<tr>
<th>Criteria</th>
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<tbody>
<tr>
<td>Positive movement in system indicators.</td>
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</table>

Strategies for each community have not been approved, so no baseline data for system indicators are provided at this time. Specific indicators will be identified in a participatory process by the community; however, one system change is already in progress. For the past six months, Allegany Franciscan Ministries, the City of Fort Pierce and the county staff have been meeting to discuss a grocery development prospectus for the Lincoln Park neighborhood. It’s anticipated that this economic opportunity will potentially bring 20 to 40 jobs to employ members of the Lincoln Park community and spur economic development for the immediate area. This prospectus includes land acquisition, aggressive recruitment with incentive packages and a Request for Proposal (Process) upon obtaining interest.
What is the evidence that efforts will be sustained?

**Criteria**
Each community will demonstrate achievement of X% of system indicators.

Baseline sustainability will be assessed after strategies have begun. Sustainability indicators may include diverse funding streams, system changes, ongoing support of behavior changes, dissemination of relevant products (NORC, 2010), increased awareness, and a sustainability plan.

What is the evidence of collaboration and partnership?

**Criteria**
Each community will demonstrate increased collaboration and partnerships.

The goal, over time, is that each community will demonstrate increased collaboration and partnerships on items such as the number and quality of relationships, the level of relational trust between partners, and the diversity of roles. In order to assess the status of the community, the evaluator conducted qualitative interviews with representatives in various sectors to ask about their work in the neighborhood, their collaborations, and the activities of other organizations. Results reflect interviewees’ perceptions.

Figure 2 provides a picture of current collaboration and partnership. Each sector is represented by a circle. The sectors referenced by the most interviewees include nonprofit and faith; the sectors referenced the least are health, law enforcement, business, and civic. In prior interviews, interviewees reported funding from Children’s Services Council, United Way, and the Hunt Foundation and limited resources from the city and the county. This fall, more interviewees mentioned funding from the city, as well as donations from the faith community and one corporate donation.

<table>
<thead>
<tr>
<th>From an interviewee:</th>
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<tbody>
<tr>
<td>“We’re seeking active involvement in helping with the social/economical need of the community also because it’s just so important that we all come together.”</td>
</tr>
</tbody>
</table>

The lines between sectors in Figure 2 represent awareness (...); resource sharing, joint events, referrals, or donations (---); or service delivery collaborations (===). As shown, the Lincoln Park area has a fairly well developed network, where sectors show a mix of relationships. Since June, additional connections have been described by interviewees, most of which had occurred since the last interview.

In past interviews, interviewees noted a lack of communication and competition among some neighborhood efforts. During this round of interviews, participants reported new collaborations, but also noted that historically in Lincoln Park “there hasn’t been some of the best collaboration.” One participant reported that the dynamic is improving and credited Allegany Franciscan Ministries for assisting in changing that dynamic. Another
noted that multiple efforts to build collaborations have been implemented in the last 18 months.

As a result of the priorities being identified at the community visioning, potential government partners have engaged with Allegany Franciscan Ministries in developing strategies for those priorities. In addition, the regional vice president continues to connect with residents and variety of sectors.

Figure 2: Network map as of December 2015

What is the evidence of community mobilization and capacity?

Criteria
Each community will demonstrate increased capacity on indicators relevant to that community.

The goal is that each community will demonstrate increased capacity on indicators relevant to that community but may include items such as structures and mechanisms for community input and participation, the presence of resident leaders, resident and institutional participation in the community, the presence of a champion, residents having facilitation and problem-solving skills, and residents having and using social capital. In order to assess the status in each community, the evaluator conducted qualitative interviews with representatives in various sectors to ask about how
they mobilize the community (or how they are engaged, if a resident), structures for community mobilization, and examples of community mobilization. Results reflect interviewees’ perception.

As expected, there has been little change to date. Most interviewees described an engaged community that had several established structures, such as the advisory council (part of the county-wide roundtable group), and Restoring the Village. There are also project-specific advisory committees.

This fall, most interviewees categorized the presence of grassroots leaders as “some” to “a lot;” however, two interviewees noted that local leaders were not from Lincoln Park, while others noted that there are “people who have leadership ability” who could be developed. Current grassroots leaders enact their leadership by attending decision-making meetings and mobilizing others to attend. These leaders were described as “having a following” or “having the respect” of people.

Interviews suggest a variety of capacity needs such as developing local leaders and smaller nonprofits and supporting collaborations. As one interviewee noted, “There’s some other small 501(c)(3)s that participate in trying to do things, but they don’t have the sustainability or the support. We have a lot of 501(c)(3)s. People have ideas, but they don’t necessarily have the skills, and that can cause them to fail. That’s kind of the problem we have. We have a lot of 501(c)(3)s. It’s just getting them together to do the things we need to do.”

From an interviewee:
“A lot of them are now advocating people in this community to get out and go let their voices be heard, and be a part of the decision-making processes within this area. Whether it be going to city meetings, county commission meetings, just trying to get them involved. Even school board meetings, things like that, to get them involved.”
What investments were made, how were they made, and what were the results?

Quick wins and initial investments from the last six months were:

- $1,003 to Zion’s Daughter of Distinction Ministries for the Ryan White Program, Pastoral & Bereavement providing care, counseling and support for people with HIV/AIDS who have no other source of coverage or face coverage limits.
- $10,000 to St. Lucie County Board of County Commissioners for Lincoln Park Community Center “A Time to C.H.I.L.L.” Youth Summit.
- $41,950 to the City of Fort Pierce for matching grants to nine organizations receiving public service awards for primarily youth-driven and youth-serving projects.
- $5,000 to In the Image of Christ for a mentoring trip for young men who live in the Lincoln Park community.

Please see the initiative-wide report for an analysis of the investments made to date.

Conclusions

As this report includes predominantly baseline data, there are no community-level conclusions to draw at this time. See the initiative-wide report for conclusions about lessons learned and investments to date.
References


Appendix A: Data Sources

**Interviewees**

Interviewees included seven stakeholders from the following sectors: nonprofit, faith, funder, health, education, and residents. 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 vice president also participated in a formal interview.

**Documents & other**

- Monthly reports from the vice president.
- Documents forwarded from the vice president (e.g., meeting summaries).
- Information obtained through email updates and staff meetings.