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ABSTRACT

This paper looks systematically at the experiences of two demonstration projects, Plain Talk and Community Change for Youth Development (CCYD), and discusses their attempts to implement resident involvement strategies. Chapter 1 is an introduction. Chapter 2 provides a brief overview of the two demonstration projects that indicates all sites in both projects experienced similar developmental phases in relation to resident involvement as they moved from planning to start-up to fuller implementation, although the projects differ in their goals and scope. Chapter 3 examines the following: the roles residents played during the planning phase and their relationships with site staff; how and why these roles and relationships changed and became a great deal more challenging and uncertain during initial program implementation; the strategies that sites used to overcome these challenges; and the range of roles that residents adopted as implementation progressed. The last chapter offers lessons from the Plain Talk and CCYD experiences and explores implications of these lessons for practitioners, program designers, and policymakers. (YLB)



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Public/Private Ventures is a national nonprofit organization whose mission is to improve the effectiveness of social policies, programs and community initiatives, especially as they affect youth and young adults. In carrying out this mission, P/PV works with philanthropies, the public and business sectors, and nonprofit organizations.

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This report draws on data collected over several years by a number of on-site research consultants. In Plain Talk, Judy Harper, Melanie Harrington, Gail Myers and Suzanne Tedesko conducted ethnographic research in four of the Plain Talk communities. In CCYD, Ginger Baber, Daniel Brantley and Pam Smith collected both qualitative and quantitative data in the CCYD communities. P/PV research staff who interviewed governance group members and other residents involved in CCYD and Plain Talk included Cindy Sipe, Laurie Kotloff, Yvonne Butler and Angela Jernigan. They all contributed their ideas to the question of resident involvement in community initiatives. For many, that question was among the most interesting in both initiatives, and the ideas in this report were developed through the team discussions we have had over the years.

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Introduction

This report looks at adult resident involvement in two demonstration projects: Plain Talk and Community Change for Youth Development (CCYD). Plain Talk, a five-site demonstration designed and funded by The Annie E. Casey Foundation, sought to involve local residents in addressing the community problems of teen pregnancy and transmission of sexually transmitted diseases (STDs). The four-year initiative was completed in 1997. CCYD, an initiative designed by Public/Private Ventures (P/PV), is a six-site demonstration that endeavors to draw together local institutional, human and financial resources to enhance the capacity of urban communities for supporting the successful growth and development of young people ages 12 to 20. The design of CCYD called for "buy-in" by participating communities and for local residents to play a key role in all aspects of the initiative. Planning in the three initial sites took place during 1995; implementation began in 1996 and will continue through 2001.2 Thus, the challenging process of involving residents in long-term change is still under way.

Both Plain Talk and CCYD represent a social policy approach that is community-centered and aims to make basic changes in the environment, institutions and human interactions that shape people's lives. This approach began gaining favor in the late 1980s and early 1990s. It had become increasingly clear that the more limited interventions, which were designed entirely outside the communities where the target population lived and which had dominated social policy for several decades, were not having lasting effects.

Thus, throughout this decade, a number of community-centered interventions have been implemented, focusing on areas that include youth development, neighborhood revitalization, school reform and social service integration. Central to these projects has been the notion that improving the lives of the poor requires

strengthening the community infrastructure and the capacity of community resources-residents and institutions—to help shape, plan, implement and sustain local change. These initiatives stress the importance of partnerships between residents and institutions, and often emphasize that sustained and committed resident involvement is essential for any community-level change. Community residents can contribute an inside view of the community's strengths and needs, access to social networks that can facilitate local buy-in, and the legitimacy and moral authority to address certain "touchy" community issues—all of which are important to the success of the initiative. Involving residents has also been seen as a way to build community leadership capacity, which, in turn, could help expand and sustain initiative accomplishments. Finally, resident involvement has been viewed by all participants in community-centered initiatives—funders, outside initiators and the target communities themselves—as a very powerful political idea, particularly given the failure of public- and private-sector institutions to solve problems in poor communities.

These were all factors in the decision of P/PV and The Annie E. Casey Foundation to make resident involvement a critical component of the CCYD and Plain Talk initiatives. There was also a desire to generate information for the social policy field about key questions that arise when residents are involved as key actors and decision-makers in community change efforts and to share any lessons that might be useful in these areas. These questions include:

What are the most effective and realistic vehicles for resident involvement? Resident advisory groups? Governance? Outreach and education? Activity planning and implementation? Political action? Should specific vehicles be used for different types of initiatives?

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- What are effective strategies for helping residents develop the capacity to play a leading role in community change? Can resident involvement be sustained over time?
- How can the initiative balance power and responsibility between paid agency staff and resident volunteers?

While resident involvement in community change was central to the design of both Plain Talk and CCYD, both were initiated by outside planners and funders. The original impetus did not come from the communities themselves. Thus, an additional key question concerns the effect that outside planners and funders (like P/PV and The Annie E. Casey Foundation), with their own goals and timelines, have on the process of involving residents in these initiatives.

Resident Involvement as a Recurring Social Program and Policy Theme

Grappling with these issues is important not only because the process of involving residents has been a challenge in the Plain Talk and CCYD initiatives but also because resident involvement strategies have cycled through American social programming and policy repeatedly during the last century. The idea of resident involvement in neighborhood-based social change and poverty initiatives began in the early twentieth century with the growth of urbanization and urban poverty. Progressive reformers and leaders of the early "settlement" movement introduced the notion of the local community as the unit for confronting urban ills and developed the strategy of "organizing residents" as a vehicle for improving neighborhood conditions. In the 1920s and 1930s, other community-based strategies, such as Saul Alinsky's "Back of the Yards Neighborhood Council" in Chicago, called for organized resident action.

However, it was the activism of the civil rights movement in the late 1950s and 1960s—and accompanying demands by poor, mainly minority residents for a larger voice in local planning and politics—that gave resident involvement strategies prominence in community initiatives sponsored by government, foundations and community-based organizations. For example, the federal government responded to minority residents' protests against the urban renewal policies of the 1950s, with federal mandates in the 1960s to involve public housing tenants in management. Also, the federal government's major anti-poverty programs of the 1960s—the Office of Economic Opportunity's War on Poverty and the Model Cities program—both emphasized residents' roles in decision-making. Later, in the 1970s, citizen participation requirements were included in the Community Development Block Grant program and the Housing and Community Development Act, which funded neighborhood planning processes in numerous cities. In an attempt to be responsive to community concerns, today's federal enterprise and empowerment zone initiatives similarly require resident involvement.



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Community-based organizations also used the resident activism of the civil rights movement to achieve a variety of community reforms. For example, the Henry Street Settlement in New York initiated "Mobilization for Youth," which used resident protests and demands to pressure social institutions into being more responsive to community concerns. And many of the original community development corporations (CDCs) were created around the same time as protest organizations. These groups emphasized "community control" and resident involvement in the direction and staffing of economic development activity.

With the implementation of the Gray Areas project in the 1960s, The Ford Foundation initiated the foundation sector's use of the neighborhood initiative as a response to urban poverty. The project provided funding and technical assistance to a number of inner city neighborhoods for the development and implementation of a comprehensive neighborhood plan by neighborhood residents and a lead agency. Ford continued this leadership in the 1970s by creating the Local Initiatives Support Corporation to support the growth of new and existing community development corporations. In the 1980s, when there appeared to be little public policy designed to address the ongoing deterioration and neglect of poor, urban communities, other foundations—both national and local—began to get involved, directing attention and resources to community-centered initiatives that included strong resident involvement components. Many of these are called comprehensive community initiatives (CCIs)—longterm projects designed to build the capacity of residents and local institutions to determine the broad social, economic and physical needs of the community and to take the lead in seeing that these needs are met. The Surdna Foundation's Comprehensive Community Revitalization Program, Annie E. Casey's Neighborhood Transformation and Family Development Initiative, and Ford's Neighborhood and Family Initiative are all examples. While the Plain Talk and CCYD initiatives are less comprehensive in scope than these CCIs, they are part of the same category of community-centered approaches that call for the heavy involvement of residents.

Overview of the Paper

In spite of the recurrence of "resident involvement" as a theme in this country's social policy, there has never been much clarity or agreement among policymakers, funders or practitioners about what is actually meant by the term; and there has been little study of its onthe-ground implementation in low-income communities so that "lessons learned" could be used to improve practice. Over the years, community-level initiatives—from The Ford Foundation's Gray Areas project, to the federal Model Cities effort, to current foundation-initiated and -funded projects like Plain Talk and CCYD—have struggled to identify realistic and useful roles for residents.

To begin to address this issue, the following paper looks systematically at the experiences of the Plain Talk and CCYD communities in their attempts to implement resident involvement strategies. Chapter II provides a brief overview of the two demonstration projects. While the projects differ in their goals and scope, all of the sites in both projects experienced similar developmental phases in relation to resident involvement as they moved from planning to start-up to fuller implementation, and Chapter III outlines these phases. Chapter IV looks more closely at the planning phase, the roles residents played during that time, and their relationships with site staff. Chapter V examines how and why these roles and relationships changed and became a great deal more challenging and uncertain during initial program implementation, while Chapter VI discusses the strategies that sites used to overcome these challenges and the range of roles that residents adopted as implementation progressed. Chapter VII offers lessons from the Plain Talk and CCYD experiences and explores implications of these lessons for practitioners, program designers and policymakers.



Overview of CCYD

The two demonstration projects, CCYD and Plain Talk, shared fundamental elements in their approach to resident involvement. Both provided a conceptual framework for community change and left it up to the lead agencies and sites to transform the concepts and goals into structures, processes and activities that drew on the strengths and characteristics of their particular communities and addressed local needs in ways that community members determined would be most effective. Sites in both initiatives faced similar broad challenges and experienced similar developmental processes.

At the same time, the initiatives differed in several important ways. Plain Talk's goal of protecting sexually active teens from pregnancy and disease was controversial in many of the communities because it appeared to conflict with cultural and religious beliefs concerning the importance of abstinence. CCYD's goal of providing supports and opportunities for youth was more easily embraced by a wider spectrum of the community. However, the initiative's focus was more comprehensive than Plain Talk's, which has presented additional challenges for residents and staff. Differences in the extent to which residents' roles were initially defined, as well as in the amount of training and support that the funder or intermediary provided for residents early on, also affected the ways that resident involvement took shape in the sites.

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CCYD's aim is to build infrastructures that provide supports and positive opportunities for young people throughout the target communities. By the early 1990s, it had become increasingly clear to the youth policy field that existing programming was not sufficient to address the spectrum of developmental needs of large numbers of American youth. In addition, although evaluations of youth-focused demonstrations showed positive short-term outcomes, long-term changes were difficult to achieve once programs came to an end.3 Given the research findings, P/PV designed CCYD to involve a wide range of key players in the community, who could work together to fill critical gaps in existing services for youth and build on the communities' assets to create structures and processes that would take root and endure.

CCYD provides a conceptual framework that focuses local efforts on five "core concepts" central to positive youth development: personal support and guidance from caring adults; work as a developmental tool; constructive activities that fill critical gap periods, such as after-school and summer hours; youth involvement in decision-making; and continuity of support through critical transitions in adolescents' lives. Local communities are responsible for building on that framework by creating their own collaborations and governance structures, and by designing and implementing activities. Resident adults and youth financial resources and local service providers are the key to the potential success of local efforts.

Although six sites are implementing CCYD, the most intensive research has been in three sites: Austin, Texas; Savannah, Georgia; and St. Petersburg, Florida. This paper draws primarily on the experiences in those sites. All the sites are urban, and all have relatively high rates of poverty; but there are significant ethnic and racial differences among the target areas, as well as differences in educational and employment levels. Residents of the target area in Austin are primarily Latino, while the target areas in Savannah and St. Petersburg are populated mostly by African Americans. In Savannah, a tight job market has led to high unemployment among youth in the target community, whereas St. Petersburg and Austin have much lower rates of unemployment.



The Lead Agencies

CCYD was explicitly designed to have substantial resident involvement and a strong lead agency was considered essential for helping the initiative grow within the target communities. One of the criteria used in site selection was the ability of the lead agency to involve a diverse group of community members who would bring with them a variety of resources. Not surprisingly, senior staff in all of the lead agencies have a strong interest in developing resident leadership, and all of the lead agencies also have a great deal of organizational capacity and strong relationships with service providers in their communities.

At the same time, the agencies themselves, and their relationships to the target communities, are very different. In Savannah, the lead agency, the Youth Futures Authority, is a community-change organization that, since well before CCYD, has focused its efforts on strengthening the lives of youth in the target area. The agency's former executive director (who recently left that position) is a long-time resident of the area and has developed a broad vision for long-term community change. In Austin and St. Petersburg, the lead agencies-the Community Services Division of the City of Austin and the Juvenile Welfare Board of Pinellas County (an independent taxing authority)—are both charged with serving an entire county. Senior lead agency staff in Austin and St. Petersburg do not live in the target communities, nor did they necessarily have strong ties to the communities before CCYD began. As we discuss in this paper, some of the qualities of the lead agencies have affected the paths of resident involvement within the sites.

Plain Talk

Begun in 1993, Plain Talk was premised on the idea that teen pregnancy and rates of STDs could be reduced through a community-wide effort that acknowledged local rates of teen sexual activity and devised strategies to protect sexually active teens. Throughout the 1980s, a number of approaches to reducing the rates of adolescent pregnancy and disease had been tried, but the problems remained relatively impervious to intervention. Although many programs focused on getting young adolescents to delay sexual activity or on preventing second pregnancies among teens who had already given birth to one child, few programs addressed the service or informational needs of sexually active youth who had not yet become pregnant. The Annie E. Casey Foundation had noted that, even though rates of adolescent sexual activity are similar in Europe and the United States, European countries have much lower rates of teen pregnancy and STD transmission. Researchers and practitioners have hypothesized that differences in rates are caused by social norms and by the kind and amount of health services available to youth.

Plain Talk was designed on the assumption that, to create change, it was essential to build a community consensus among adult residents and service institutions about the importance of protecting sexually active youth. Thus, community residents would have a key role in planning and implementing the initiative's activities.

Plain Talk was implemented in five neighborhoods across the country, which were either in or near San Diego, New Orleans, Atlanta, Seattle and Hartford. There was tremendous ethnic, racial and cultural diversity among residents across the communities: San Diego Plain Talk was implemented in a Mexican and Mexican-American barrio. The neighborhood population in Hartford was about half African American and half Puerto Rican, while the Seattle neighborhood included whites, Asian Americans and African Americans. In Atlanta and New Orleans, the residents were primarily African American.

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Three Phases Of Resident Involvement

The Lead Agencies

The Plain Talk lead agencies varied in size, mission, capacity and stability—factors that contributed to very different approaches to resident involvement. In New Orleans, the lead agency was a collaborative of local service providers with a small staff that was accountable to the site's public housing resident council. A philosophy of institutional change permeated the site's decisions. In San Diego, the lead agency was a stable and successful community health clinic that has thrived in the 1990s despite serving a politically unpopular clientele of Mexican immigrants. The clinic's success has been partly the result of successful fundraising among corporate donors, a strategy that has tended to minimize its once overtly political strategies for social change. The lead agency in the Seattle neighborhood was a settlement house; in Atlanta, the lead agency was originally a national women's wellness organization and later a local medical school. In Hartford, a nonprofit organization devoted to the reduction of teen pregnancy and infant mortality acted as the lead agency. As in CCYD, the lead agencies' relationships to the local communities contributed to the ways that resident involvement unfolded in the sites.

In addition, while CCYD was specifically designed as an initiative where residents would play substantial roles, the design of Plain Talk called for resident involvement but did not specify the kind or extent of involvement. Thus, staff in Plain Talk lead agencies varied in their goals for residents and in the roles that residents were encouraged to fulfill. In one site, staff clearly supported a resident-driven initiative. In two others, lead agency staff wanted residents to be involved but did not want them to have policymaking authority. Staff in the remaining two sites were less certain about the roles they wanted residents to play.

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The original designs of both CCYD and Plain Talk called for residents to be integral to the planning and later to the implementation of initiative activities. However, in neither initiative were sites given specific direction on how to achieve their goals with respect to resident involvement. During CCYD's planning phase, P/PV encouraged the sites to develop neighborhood advisory groups whose membership included adult and youth residents as well as service providers and others with access to resources in the broader community. The groups were to represent neighborhood interests, help plan initiative activities, mobilize the community and provide resources (people's time and skills). Beyond these broad areas of responsibility, however, the specific tasks and roles of the groups were left up to the sites.

Similar encouragement was given to the Plain Talk sites during planning, when community core groups were formed. The designers of Plain Talk assumed that the goals of the initiative were more likely to be achieved if youth and adult residents helped define the communities' needs as well as design and deliver services. As in CCYD, strategic planning guidelines for Plain Talk did not specify how residents should be involved. A number of questions were left for the sites to decide: Which residents should decide on the communities' needs? How should residents be involved in service design and delivery? What was to be the balance of power between agencies and residents?

Plain Talk sites received a lot of technical assistance directed at resident involvement during the planning year but then very little as implementation progressed. In contrast, in CCYD, sites received little technical assistance with resident involvement during planning and the first year of implementation. But, as the initiative progressed and it became clear that the CCYD sites were facing similar challenges, P/PV provided significantly more assistance in involving residents in governance.⁴



Despite the differences between CCYD and Plain Talk—as well as differences among the sites within each initiative—similar phenomena occurred vis-à-vis the resident groups. In fact, there appeared to be specific phases of development across the sites. The first phase, during which residents functioned primarily as planning advisory groups, was a period of enthusiasm and cooperation between residents and staff. The second stage began anywhere from a few months to a year after implementation. In that stage, which lasted from four months to more than a year, tensions and confusion emerged between staff and residents about their respective roles and responsibilities. Resident participation and energy dropped, and site staff struggled to reinvigorate the initiatives.

The next phase (not necessarily the final stage but the last stage we observed) came when residents and staff resolved some of the questions about resident roles and responsibilities. The transition from phase two to phase three was eased significantly when substantial amounts of technical assistance were provided to staff and residents. During phase three, residents took on roles that varied from becoming members of governance boards that set policy and budgets, to helping implement activities, to participating in the activities.

Understanding the developmental path of resident involvement should provide useful information for those who seek to help communities work with local agencies or governments to take control over their physical, social and economic environment. We do not know if it is possible to avoid the developmental phases of uncertainty and conflict in community initiatives: in fact, we suspect that the phases are inevitable. Issues of power and authority underlie all community initiatives, and parties involved often have different expectations about who should make decisions. Therefore, there are inevitable negotiations about how much authority should be transfered from agencies to local communities and the resources

over which communities should have authority. All parties to the negotiations have expectations. Predictable and well-defined periods may occur when expectations by one party may not be met by the other, resulting in tension and uncertainty. We think that the period after planning is one such period. However, although the phase may be unavoidable, the conflict and tension that emerge are not fatal. Indeed, negotiations that occur in an attempt to resolve the conflict can lead to creative solutions that enhance the initiative's work.

Even if such periods are inevitable, knowing that they will occur, the specifics of why they occur, and what they look like is useful. Understanding them as "typical" may minimize some of the hard feelings that arise. In addition, those who plan and coordinate community initiatives may be able to devise ways to shorten these periods of uncertainty when work may come to a near standstill—an important factor when funding from any one source is generally limited to a few years and programs do not have the luxury of being trapped in inefficient processes.

The following chapters detail how these phases manifested themselves in Plain Talk and CCYD.



Enthusiasm in Planning

During the planning period, sites had to recruit residents and help them define and carry out their roles. While all sites succeeded in this, staff faced challenges that ranged from recruiting residents who represented a broad cross-section of the community, to supporting residents as they developed the ability to contribute their voices to the planning process, to stepping back from their traditional roles and ceding some decision-making control to the residents.

Recruiting Residents

In both CCYD and Plain Talk, the planning period began with the formation of resident groups to advise staff of the communities' needs and wishes. Staff in all sites had considerable success recruiting residents to sit on planning boards to discuss the goals of the initiatives and ways of achieving the goals; but attracting residents who represented the range of perspectives within a given community required significant effort.

Using Lead Agency Contacts

In most of the sites, the lead agency had been part of the target community for a number of years and had established connections with community agencies, volunteer organizations and residents. Thus, staff was able to recruit many of their first group of community residents through their own network of contacts and through contacts of participating agency representatives. In CCYD, for example, one site recruited almost exclusively by sending letters to people who had attended meetings of a pre-existing community advisory group connected to the lead agency. A second site initially used what it called the "snowball method": residents of the community who were known to lead agency staff or other agencies were invited to attend early informational meetings about the initiative. They were then asked to bring other interested residents to subsequent meetings.

Recruiting through agency contacts was effective because it often drew residents who were leaders in their communities, who had experience participating in volunteer organizations, and who were well connected to other community groups and resources. In many instances, the residents' experience and connections were themselves valuable assets for further recruiting. The limitation, however, was that the group of residents recruited in this way was generally not representative of all residents. While in part, this limitation was predictable—lead agencies' networks were not all-inclusive—some less obvious factors also contributed.

In two of the Plain Talk sites, for example, the primary source of residents for the core planning group was the tenant association or resident council of the housing development where the initiative was focused. Working through a tenant association seemed an effective way for a site to gain access to a group of active residents who are representative of, respected by and



closely connected to their communities, but the situation proved more complicated. This type of recruiting did not bring immediate access to adult male residents in either site. In the developments, far fewer men than women were listed on leases; they were thus unreachable through the resident association lists.

In one site, the tenant association attracted a large number of active, committed female residents to Plain Talk from the beginning, but the second site faced more challenges in resident recruitment. There the association was divided by internal factions, and only a few of its members regularly attended Plain Talk meetings. In addition, while the population of the housing development was half African American and half Latino, the tenant association membership was entirely African American. When the association became formally involved with Plain Talk, Latino residents felt that the initiative was only for African Americans. Making matters worse, the association did not have a positive image in the community because residents viewed it as an arm of the housing authority, which was not well liked. The site was able to overcome the first challenge by hiring a Latino outreach worker and assistant project director. The second challenge became less important as the group expanded beyond the tenant association.

Geography was another limiting factor in the two CCYD sites that relied primarily on lead agency contacts to draw people into the planning phase. Each of these sites held its early meetings in a community center, and the location of the center had an influence on who attended and thus who would potentially become involved in the planning group. In both sites, most of the residents who came to the meetings lived near the centers, so large areas of the communities were not represented.

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Recruiting More Broadly

Sites thus found that they had to use other recruitment strategies to bring in residents who represented a larger segment of the community. To promote broad resident involvement, one CCYD site, which has a history of grassroots activism, worked with an organization that has expertise in grassroots organizing. The site successfully used neighborhood walks, fliers, and announcements in church and school newsletters to invite residents to attend meetings to discuss CCYD and its role in the neighborhood. To attract people from different parts of the neighborhood, the meetings were held at churches and schools in locations across the community.

For the Plain Talk sites, the community mapping effort early in the initiative turned out to be a key recruitment tool. The mapping was an intensive data collection activity through which residents gathered information about the conditions in the community that were the targets of change: adult and youth attitudes. knowledge and behavior related to adolescent sexuality, and the contraceptive services currently available to youth. Interest in participating in the community mapping drew residents to the initiative's core planning group. And the mapping process itself—during which residents interviewed other residents as part of the data collection effort—also introduced a large number of community members to the Plain Talk initiative and, in some cases, identified additional people for the core planning groups.

In several sites, word of mouth was the most effective recruitment tool. Initiative-sponsored Fun Days and other community events that introduced residents to CCYD or Plain Talk also attracted people to the planning groups. In addition, Plain Talk effectively used a financial incentive. Residents in each site received payments for conducting interviews as part of the community mapping and for participating in planning meetings and on other committees. The stipends were not just financially important; residents felt they elevated their status to one of paid employee rather than community volunteer.





Roles and Authority

In general, the attempt to involve community residents in significant planning roles was successful in both initiatives. The Plain Talk model, in particular, was activity oriented, with a timeline built around tasks and milestones. In addition to keeping the planning groups moving forward, these milestones meant that the residents were involved in concrete activities, where they were developing leadership skills and seeing their accomplishments—which, in turn, kept them interested in and committed to the initiative.

A Variety of Roles

While community-change initiatives are based on the assumption that resident involvement is essential, "involvement" can take a range of forms. In both initiatives, a key function of residents on the advisory groups was to inform the lead agencies about the communities' strengths and needs; and in three Plain Talk sites, the advisory groups also served as a core of informal outreach workers. Residents had other key roles as well. In the three CCYD sites, they were involved in developing the first-year implementation plan. In two of the sites, that was the primary form of resident involvement during the planning stage: a small percentage of the neighborhood's residents attended a series of meetings to design the plan. In the third site, the core group of involved residents was also mobilized to educate and recruit other residents.

In Plain Talk, because of the controversial nature of the initiative's goals, a central function of the core planning groups was to reach consensus about how to take the Plain Talk message into their communities. Although this involved developing implementation strategies, it first meant agreeing on how that message would be shaped to make it acceptable to a broad spectrum of the community. The core groups' efforts to reach consensus about the Plain Talk message proved doubly valuable in some sites, where it presaged some of the difficulties that would occur in delivering the message to the community. In San Diego, for example, cultural norms prohibited adolescent sexual activity, especially among girls. It was

therefore difficult for adults to acknowledge the reality of sexually active teens. This issue was as difficult for residents sitting on the advisory group to overcome as it was for the wider community. Over time, staff became skilled in reinforcing the Plain Talk message in culturally acceptable ways within the planning group, and this early learning served them well during implementation.

Who Makes the Decisions?

In both initiatives, the creation of a resident-only or resident-dominated planning group with clear decision-making authority seemed to be an important precondition for real resident leadership. Unsurprisingly, however, this was not easy to achieve. It required that agency staff (both the lead agency and other local agencies involved in planning) step back from their traditional roles and support residents as they developed the skills and confidence to step forward as decision-makers.

While the CCYD resident advisory groups were responsible for developing the first-year implementation plans, the sites varied in the amount of control that lead agencies turned over to residents. In two of the communities, the lead agencies saw their roles as "supporters" of the resident planners, and the final documents were clearly "resident plans." Although the documents were drafted by professional staff, they were based almost entirely on input from resident groups and required approval by those groups. The residents felt that this was a good strategy and that the final plans accurately reflected their desires for their neighborhoods. In the third site—where CCYD is part of a larger, already existing intervention strategy in the neighborhood—lead agency staff took the leadership role in developing the plan, with the intention of transferring decision-making authority to the community during the implementation period. Thus, while the final document built on residents' input, the residents' ideas were incorporated into the ideas and plans of agency staff.



In CCYD, apart from the lead agency, there was relatively little involvement of local service agencies during planning. Lead agency staff felt that the planning process would have been dominated by these organizations and that the result would have been proposals for "traditional services" because the agencies would have seen CCYD primarily as another source of funding.5 In two of the Plain Talk sites, however, the planning teams were initially dominated by local agency representatives, and it proved difficult for the residents, who were nonprofessionals; to act as equal partners with the professionals. During meetings, residents were reluctant to contribute to discussions and decisions, and many of them stopped attending. Residents explained their withdrawal from the process by pointing out the class and language differences (or communication skills) between themselves and the agency representatives. In one site, in response, the project manager asked agency representatives to scale down their presence at meetings so residents would become the dominant group, which proved successful. In both sites, residents eventually formed their own planning teams and were given authority to make decisions, with the agency representatives functioning as advisors and consultants.

Overall, across the sites, there was a great deal of excitement during the planning period. Community residents who sat on the groups felt they were being listened to, and lead agency staff believed the activities that were planned would be better attended and better structured as a result of the advice they received from residents. Whatever divisions of authority existed between staff and residents did not cause much concern since resident involvement and enthusiasm were high.

However, after the planning periods, the advisory group structures either broke down or changed in almost all the sites. In CCYD, the advisory groups began to transform into governance boards. In four Plain Talk sites, the groups took more divergent paths.

Uncertainty in Implementation

Unlike the planning period, during which resident advisory groups functioned effectively and sites believed that meaningful resident involvement could be achieved, the 12 to 18 months of program start-up proved discouraging and difficult for all sites. It became increasingly clear that the resident advisory groups faced challenges. In five of the eight sites, residents indicated that they were burned out, and they left the groups (in one site, approximately one-third of the members dropped out; in the other four, half or more did). In those five sites, residents complained that there was little for them to do, and they were unwilling to recruit others under those circumstances. In the other three sites, although fewer people dropped out, residents said they were unclear about their roles.



The Conundrum of Post-Planning Advisory Groups

In retrospect, the inability of many of the sites to maintain advisory groups is not surprising since the function of the groups was time limited. As the initiatives moved into implementation of activities in which staff played key roles, the need to convene advisory groups on a regular basis decreased. As their advisory function disappeared, the residents in the groups began to grumble that they were not doing anything, and their frustration mounted. Not surprisingly, both residents and site staff asked: "If residents are not making decisions and developing policy, what is their role? What does 'involvement' mean?"

The situation is similar to the problems that nonprofit organizations sometimes have with advisory groups. On the one hand, there is the hope that advisory groups can legitimize the organization's activities and that members of the group can act as occasional consultants who help to further organizational goals. On the other hand, the tasks set before the advisory groups are often so ill-defined that their advice and feedback is not helpful.

The risk in community initiatives is that site staff may decide that resident advisory groups are not helpful, when the reason they may be ineffective is that their tasks are not clearly defined. In Plain Talk, there was no clear next step for the groups, and the residents' complaints either led site staff to find new ways of involving the groups or to decide that their function was too ill-defined to justify maintaining them. As a result, a number of residents who had been involved early on were lost to the initiative.

At one site, the advisory group, although it shrank in size over time, continued to meet regularly to hear updates about and comment on the implementation of the local initiative. It also participated in a planned social action to get a school-linked health clinic into

the community. In the other three sites, the advisory groups became early audiences for health education and communication workshops implemented by site staff. The groups in two of those sites eventually stopped meeting. In the third site, the advisory group continued to meet every other week, ultimately taking on some informal policymaking functions.

In both CCYD and Plain Talk, the uncertainty about how to sustain the advisory groups or (particularly in the CCYD sites) transform them into policymaking boards led in all instances to a situation in which staff made most decisions about the initiative. Staff identified possible partners to implement activities, negotiated with agencies to provide services and took the lead in budget decisions.

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The Challenge of Creating **Governance Boards**

In one of the Plain Talk sites and all three CCYD sites, the lead agencies wanted the resident advisory groups to make the transition into becoming governance boards (or neighborhood councils), but the process proved extremely difficult. In all four sites, tensions emerged over who had the authority to make decisions, and the actions of residents and staff during this period reflected the tensions.

One site, with a history of strong grassroots organizing, insisted that the initiative should be resident driven; and the lead agency, acting in cooperation with the resident governance group, fired professional staff and promoted residents to key staff positions. In doing so, residents hoped that ultimate control over the local initiative would rest firmly within the community. In another site, the executive director of the lead agency unilaterally disbanded the resident group because he did not think it was developing into the strong neighborhood governance body he had hoped for. He then formed a new group and devoted staff resources to strengthening it. Two other sites had trouble making timely decisions. In one of those sites, a strong commitment by the lead agency for resident governance led to the development of a Memorandum of Agreement (MOA) between the agency and the governance board that spelled out roles and responsibilities. The agreement ceded significant authority for making decisions about CCYD activities to the governance council and became a model for other sites in the initiative's third and fourth years. In the first year of implementation, however, the governance group did not have the capacity to use its authority, rendering the MOA useless. (In the second and third years, however, the MOA proved to be a useful tool for the site.)

While the sites have had varying degrees of success in creating governance boards, the challenges involved in doing so were significant. The governance boards in the three CCYD sites originally created bylaws or organizational structures that did not work. One board was committed to consensus building and chose not to have formal leadership positions, such as an elected or appointed chairperson. However, this lack led to difficulties in resolving conflicts and making decisions. In addition, when decisions needed to be made prior to the board's next scheduled meeting, calling an ad-hoc meeting was difficult because no one had the authority to do so. In another site, the board created bylaws that inadvertently made it difficult to allocate funds for activities and to recruit new board members.

In general, when the neighborhood councils functioned poorly, decisions were stalled and staff became frustrated and impatient. As a result, staff tended to take matters into their own hands and make key decisions. which sometimes resulted in activities for youth but also tended to produce anger and frustration among board members. In one site, for instance, staff implemented a number of innovative activities with the help of other social service providers; but the community governance group did not support their efforts, and most of the activities were short-lived.

The sites were aware that creating bylaws and effective organizational structures for the governance boards was a key factor in the boards' ability to make timely decisions-but how to achieve these structures was far from obvious in the early periods of the initiatives. While lead agencies had the capacity and experience to create boards, the staff who worked most closely with the initiatives did not necessarily draw on that capacity and instead allowed the residents to take the lead in creating the early structures. Staff wanted the governance boards to develop autonomously, so they hesitated to become too involved. However, as the original boards began to founder in CCYD, lead agency staff began to become more involved in board development.7

Training for Residents

In all of the boards, some community residents brought important organizational skills to the policymaking groups. Many, however, were inexperienced in group process and initially unfamiliar with the skills necessary for a smoothly functioning board—a fairly typical situation with new boards, where a common understanding does not yet exist about what the board's operating process should be. While both CCYD and Plain Talk attracted strong neighborhood leaders with important networks, the leaders within individual governance groups did not always agree on what direction the boards should take, and the disagreements sometimes crippled efforts to move forward. Training on how to make timely decisions contributed substantially to the success of the groups. It lowered the number of con-

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flicts and provided ways to overcome potential conflicts. All three CCYD boards participated in board retreats at which they were re-introduced to the goals of CCYD and where they worked together to develop mission statements or visions that fit their communities' needs and reflected the goals of CCYD. Two of the boards also participated in team-building exercises.

In addition to developing capacity in decision-making and team work, a number of board members needed training in reading budgets and understanding how to make budgetary decisions. Across the sites, people who already possessed some of those skills became involved in the boards—but dealing with budgets is not a widespread skill. These challenges were further complicated by the fact that budgetary decisions needed to be connected to measuring the effectiveness of activities that were being funded and implemented. The sites that have achieved some measure of board stability and effectiveness are beginning to become involved in these evaluation tasks.

Building resident capacity is expensive and time consuming. The community board in the Plain Talk site that made policy decisions for the initiative had been developing for many years; it had begun as a resident council for a housing development, acting primarily as an advisory board to the local housing authority, but it became increasingly independent over the years. The most successful CCYD governance board went through a planned, eight-month development process, after which it was able to start making key decisions. Board and staff members are interested in further development to help the board become a tax exempt organization with the capacity to manage the neighborhood family resource center, which is the central location for CCYD.

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Bureaucracy vs. Democracy

The difficulty that sites encountered with the process of board development suggests that an early recognition of the time and resources needed to build residents' governance capacity may alleviate some of the tensions between boards and lead agencies that result from each group expecting too much too soon. In addition, in many cases, lead agencies must be willing to make changes in the way they do business if they wish to nurture an effective governance board.

The German sociologist Max Weber pointed out in a famous essay that there is a fundamental tension between bureaucratic processes and democracy, especially the self-governing democracy of small groups.8 Bureaucracies have strong self-sustaining mechanisms—such as written rules and procedures, specialized authority structures and a reliance on specialized expert knowledge. Because of bureaucracies' efficiencies and stability, citizens cede power to bureaucratic institutions; in turn, bureaucracies contribute to the maintenance of social order in many arenas—among them the political, the social service and the economic. Tensions emerge, however, because bureaucracies' strong mechanisms mean that bureaucratic institutions are slow to respond to the concerns of citizens and slow to change. In addition, in any partnership between a bureaucracy and a citizen's group, the bureaucracy has operational advantages (staff time, efficient procedures, expertise) that may lead to situations where power to make decisions rests with the bureaucracy despite intentions to share it.

The inherent tensions between bureaucracy and the democratic processes of local communities are visible in both CCYD and Plain Talk. The lead agencies, which act as fiscal managers, have accounting systems that facilitate the lead agencies' missions. The systems do not necessarily produce useful information for the governance boards. Board members in the CCYD communities have complained at various points that the lead agencies do not provide them with important budgetary information; and when it has been provided, it is sometimes incomplete or presented in ways that are not useful for the board. Without budget information that includes year-to-date actual expenditures as well

as total funds allocated to the initiative's activities, the governing boards' ability to make decisions about funding is severely restricted.

In other ways, staff commitments to bureaucratic efficiency sometimes overtake their commitment to local governance in the initiatives. Staff are often in strong positions to make decisions: they have a lot of knowledge at hand, and they have more time committed to the initiative than do volunteer board members. It is often more efficient for staff to make decisions than to take the decisions to the board, get items on the agenda, make presentations to the board and then act on the board's decisions. This issue crops up repeatedly. For instance, in one CCYD site, staff planned and implemented activities that drew together a number of service providers. The process worked well in terms of activity implementation, but it eventually generated resentment on the part of the board. In the early implementation period of another CCYD site, staff planned and implemented all activities. The result was a governance board that was passive and uninvolved, which, in turn, caused concern among staff. These two examples illustrate the most frequent responses by governance groups when staff begin to operate independently of the groups: the governance group resists, and the dynamics between staff and the board can get messy; or the board members participate less and less in the initiative.

When governance boards resist, the tensions between professional, bureaucratic functioning and community governance can become very painful. One board explored the possibility of breaking away from the lead agency, but it did not have the fiscal or organizational capacity to manage the initiative without the agency's support. Another board all but disintegrated as people became increasingly disillusioned with the unpleasant dynamics between staff and the board. These two boards were able to resolve some of their difficulties, but the process was arduous.

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Developmental Struggles

For several reasons, we think that the struggles experienced by the sites during early implementation were, in part, developmentally necessary. The fact that all the sites faced questions about how much authority the residents should have suggests that these tensions may be integral to the process of developing resident involvement in a political environment that increasingly encourages community empowerment. When the initiatives began, community members were pleased to be involved and willing to let staff drive activities. As the residents became more knowledgeable about the goals of the initiative, they began to request greater authority.

The struggles, however, also resulted from a lack of clarity about roles. In one site, for example, the resident group was told in words and through organizational charts that it would oversee the initiative. However, the group did not have decision-making authority over budgets or activities. Unsurprisingly, board members began to insist that staff cede authority to them since they had been led to believe that they oversaw the initiative. In other sites, as residents developed the capacity to make decisions and steer the initiative, they began to define the directions in which they wanted the initiative to go. Residents' visions did not always reflect those of the staff, and most of the sites faced a number of challenges as staff and residents redefined their relationships and the directions of the local initiatives.

The actual processes played out somewhat differently across the sites. In some sites, there was considerably more conflict among residents and staff over what the goals of the resident groups were supposed to be. In sites in which lead agency staff were clear about the groups' roles, there was significantly less conflict than in sites where staff were uncertain of the groups' roles. In addition, the lack of understanding of the kinds of technical assistance needed to support effective resident governance boards contributed to the struggles. Ultimately, the contribution of resources, including training, advice and administrative support, from the lead agency or national field staff was the key to creating better functioning governance groups. Thus, while the developmental dynamics might inevitably slow a site's progress toward residence governance, the process could be somewhat better managed.

Resident Roles: Strategies for Resolution

By the end of the first year of implementation, we began to hear clearly formed definitions from local lead agencies and resident groups of residents' roles in the initiatives. Community governance boards created vision and mission statements. Residents' participation in governance, activity implementation, outreach and recruitment rose in all sites. Although we do not yet know all the results of the increased participation, particularly in CCYD, which is ongoing, we have seen increased enthusiasm and support for initiative activities within the communities as the sites have resolved some of the tensions around resident involvement that marked the start-up and early implementation periods. Below we explore the types of resident involvement that have emerged.

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Setting Policy and Making Decisions

Creating community governance boards that have real power and are effective in making decisions is a tremendous challenge. While the three CCYD sites have achieved some level of resident governance, the process is ongoing, and the following discussion is a commentary on the current "snapshot in time."

The three boards—all of which were reconstituted earlier in the initiative—are at very different places in their development. In two sites, the boards are exploring becoming tax exempt organizations and taking steps to become effective decision-making groups. They are pushing staff to get the kinds of information—including budgeting information—they need to make decisions, and one of them is beginning to use assessment tools to monitor the activities it is funding. (One of the sites is the CCYD site where residents had the least decision-making authority during the planning period.) At the same time, the boards continue to face challenges, particularly in setting up functioning committees and recruiting residents to serve on them.

The board in the other site is still struggling to find a structure that works: its desire to have equal participation among all members and a decision-making process based on reaching consensus means that it is often difficult to make decisions. At the same time, the board has had the key role in defining community needs: it identified the school dropout rate (which is very high in the community) as the major issue the initiative should address, and focused on planning and implementing youth development activities related to remaining—and succeeding—in school.

Sites that have made the most progress in developing governance boards have benefitted from having lead agencies with a commitment to empowering poor communities—lead agencies that, in fact, believe it is in their own self-interest to have strong groups of residents who make decisions for their communities. When tensions and conflicts arise between agencies and residents, lead agency staff find ways to work with the community residents. They also have a strong commitment to building resident capacity, making conscious efforts to train residents both through formal workshops and more informal approaches to leadership development. Finally, the development of formal MOAs between the governance boards and lead agencies ultimately contributed to the strength of the gov-



ernance boards. MOAs provided shared understanding and expectations for all parties, thereby strengthening relationships as well as the governance boards' capacities. As we noted earlier, however, the MOAs were more useful as the initiative matured than in the early years.

As this report has discussed, the challenges to creating policymaking groups in the communities targeted by the initiatives are substantial; the solutions to the problems are time consuming and may have unexpected financial costs. Given the costs, is it worthwhile to create and nurture such boards? We cannot yet determine with certainty whether the boards contribute to the development of an initiative that is sensitive to local conditions and creates widespread local support and participation—and, therefore, positively affects the lives of local youth. In Plain Talk, the only community with a governance board implemented the initiative that was most sensitive to local concerns, and there was a high degree of energy and support within the community for the initiative. However, high resident involvement in staffing also contributed to the success in that site, and it is difficult to disentangle the relative effects of the governance board and the presence of residents as staff.

In CCYD, it is too early to determine what the contribution of the policymaking boards will be to the lives of youth in the communities. The ultimate goal of CCYD is to improve youth's outcomes in an entire community, and the means by which the initiative hopes to do so is through the creation of multiple youth development opportunities. Whether a neighborhood governance council will facilitate the creation and maintenance of activities that provide those opportunities, and do so in a way that provides advantages over other means of implementing activities (for example, through extensive agency collaboration within a target community), is an open question.

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Organizing and Implementing Activities

Several methods were used to involve residents in organizing and implementing activities across the sites in Plain Talk and CCYD. In some sites, residents became involved in activity implementation very early in the initiatives. In CCYD, this was particularly true in the case of coaching sports, where a well-established pattern of community adult volunteerism already existed. With the exception of sports—and, to a lesser extent, work-based learning opportunities—the sites are still developing ways to involve adult residents in implementing activities. One site has decided to focus its efforts on drawing parents of youth into the activities, in the belief that community parents must change their level of involvement in youth's lives in order to achieve community change. Their efforts, however, are just beginning.

In Plain Talk, sites first had to figure out how best to use residents in activities. In the beginning, the sites thought that residents could be trained as outreach workers and lay health educators who would deliver the Plain Talk message in their communities, and they started to prepare groups of residents for these roles. However, early efforts to train residents and supervise their work consumed staff resources, so most of the sites revised their plans. Two sites decided to focus their energies on providing in-depth training to a small group of residents (10 or fewer). Another site decided to use residents primarily as outreach workers, not as lay health educators. One site dropped plans to train community residents as outreach workers or health educators and concentrated on providing relatively superficial information on parent-teen communication to as many parents as possible, rather than focus directly on the Plain Talk message of protecting sexually active teens.

Nonetheless, resident involvement in outreach and education remained a key strategy for creating community consensus around the Plain Talk message of protecting sexually active teens, and residents' outreach and education efforts substantially affected sites' capacities to reach into the community and generate interest in Plain Talk workshops and other events. Because some of the communities were so leery of outsiders, including social service providers, residents proved invaluable in creating and nurturing links between the initiative and the community. In addition, they appeared to be more comfortable than profession-

al health educators from outside the community in engaging other residents in discussions about morality and health. They connected the work of Plain Talk to local cultural mores, such as those stressing the importance of knowledge and the importance of caring for youth. In fact, the involved residents in the Plain Talk communities felt that—because they were community members—they had the responsibility and the right to challenge other community members with the message that they should be protecting sexually active youth.

Training adult residents to facilitate health education workshops and other kinds of community education events also enhanced the sites' capacity to give workshops to many people in a relatively short time. While the training process was time-consuming and resource intensive, using residents to give workshops compared favorably in terms of cost to using professional staff. In the sites that used resident facilitators, far more people went to workshops than in the sites that did not—even though these sites began their workshop series later because of the time involved in training the resident facilitators.

Three Challenges

Some challenges have emerged in sites' efforts to involve residents in activity implementation. First, recruiting community members who can organize and implement activities takes a concerted effort, and the sites' success in recruitment has been uneven. For example, one Plain Talk site ultimately concluded that the core group of adults it had recruited early in the initiative was, to a large extent, not the group who could be most useful for implementing activities. Over time, the site was able to recruit a strong core of adult residents, but the process took much longer than expected. In another example, a CCYD site has been very successful in recruiting coaches for sports but much less successful in recruiting a core group of adults to help with other activities.

A second challenge is building capacity among residents so they are prepared to carry out the work. In Plain Talk, the sites had to train people in health education, anatomy and physiology, human sexuality, and presentation skills. The initial training took months of effort on the part of staff. Once trained in the basics of

giving presentations about sexuality and contraception, residents required ongoing training because, during presentations, they were often asked questions that they could not answer. Staff also needed to monitor and assess the quality and delivery of the information provided by resident trainers, a task for which they had little time.

In CCYD, the issues around training residents center on understanding positive adult-youth interactions. Among the adults who have volunteered their time to the CCYD youth development efforts, some are extremely skilled at building positive and supportive relationships with youth, whereas others bring important skills to the effort (organizational, artistic, etc.) but sometimes lack knowledge about how to interact effectively with adolescents. To the extent that sites have confronted the challenge of poor adult-youth interactions, they have tended to do so on a case-bycase basis as problems emerge. However, as sites' efforts develop and they begin to focus on quality issues, they will need to assess the performance of adults (both residents and staff) who interact with youth to ensure that activities are positive experiences for the youth. It may become necessary for the sites to build capacity in this area.

A third challenge involves the question of how to spend scarce resources. In many Plain Talk sites, residents were paid stipends to participate in implementing activities. Payment enhanced the commitment of those residents, but it also tended to limit their numbers since the funds available for stipends were limited. It was not unusual for residents to tell the researchers that they wondered why they should volunteer their efforts to the initiative when other residents were receiving stipends or, in some cases, had been hired as paid staff.9

It is clear from observing both Plain Talk and CCYD that involving residents in activity implementation—either as volunteers who may or may not receive stipends or as staff—has a positive effect on the possible number of activities that can be implemented, the number of people who can be included and on the reach into the community. One Plain Talk site trained four lay health educators, who then gave workshops to literally hundreds of residents in the course of a year,



and who also spoke informally to adolescents and adults about sexuality, contraception and STDs. The extensive personal networks of the volunteers was an important benefit to the site. In another Plain Talk site, several residents who were trained as outreach workers had extensive contacts among adolescents and were able to refer them to the health clinic when necessary. In CCYD, large-scale, ongoing activities, such as sports or the provision of work opportunities for youth, have benefitted enormously from the involvement of community adults.

The value to the initiatives in having residents involved in activity implementation suggests that the necessary recruitment efforts and capacity building are probably worthwhile. Whether sites should provide stipends to volunteers depends to some degree on what resources are available and whether it is in the sites' interest to have a few heavily involved and committed volunteers or a large number of volunteers with more limited commitment.

Adult Resident Participation in Activities

Both Plain Talk and CCYD ultimately wanted to involve large numbers of residents by having them participate in activities. The staff at The Annie E. Casey Foundation aimed to expose approximately 10 percent of target area residents to Plain Talk activities. They hoped that this would be enough people to create community consensus about Plain Talk's message—that it is important to protect sexually active youth. Although most of the Plain Talk sites did not achieve the 10-percent level within their communities, two involved approximately 800 to 1,000 adults and youth in Plain Talk community education activities in 1996 and 1997.

In CCYD, youth are the focus of activity participation, but having adults also participate is important to positively connect community adults to youth—a key goal of the initiative.

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Mobilizing for Specific Actions

Several sites have drawn on residents to mobilize for specific social actions. In Plain Talk, this took two forms: a successful letter writing campaign in one site to support the creation of a new health clinic and at another site a successful march to city hall to request that funds for health care be reinstated. In a CCYD site, an organizing institution has worked with mixed success to organize community residents around a series of issues that concerned local citizens, such as child safety and improving the schools' responsiveness to parents.

Mobilizing residents for social change has been done in sites that have strong resident decision-making as well as those that do not. It has worked best when the action around which the community has organized is closely related to the goals of the initiative. For example, part of Plain Talk's mission was to increase reproductive health services for adolescents, and both the letter writing campaign and the march to city hall were related to this mission. Under those circumstances, staff (who can provide important administrative support for the organizing goals) and residents (who can mobilize other residents) have worked well together.

Adults began to attend sports events at the local recreation center in large numbers. Other community adults became casually acquainted with activity coordinators. Still others watched youth in sports or volunteered to support teams. Site staff valued the casual participation of community adults because they considered it important to increasing the number and kinds of positive social ties among community adults and youth.

In contrast, in the CCYD site in which community organizing has been tried, the goals of the social actions that have been undertaken are ultimately related to improving the lives of community youth but are not central to the goals of the local initiative staff or resident council. While staff of the organizing institution have relied on initiative participants to help implement the actions, the social actions have not been fully supported by either staff or the neighborhood council. As a result, their success has been limited: some of the actions were successful; others were less so. For instance, on one block, community members successfully lobbied a small business that sold liquor to pro-

hibit public drinking on its premises since the area was heavily traveled by children going to and from school. However, a "get out the vote" walk designed to increase political participation in the community was poorly attended (it also rained that day). Recent actions with a local high school appear more promising since there is strong support from CCYD participants.

Because community mobilization is generally shortlived and the groups of residents involved in the actions break up when the goals have been met, mobilizing residents for social action is not a long-term strategy for resident participation. Instead, it complements other forms of participation and can occur in sites that have strong community policymaking boards as well as those that do not. In sites in which residents have a strong board, we expect that the board must support the action. The board may not only control financial resources required for the mobilization, but board members may also have extensive community networks that can aid or impede the action. In sites without such boards, staff may be able to draw on a few key residents to help them organize actions. A requirement, however, seems to be the existence of strong prior relationships between site staff and at least a few residents.

In both CCYD and Plain Talk, there was no doubt that mobilizing residents for specific social actions could produce results. This outcome is not surprising given the sensitivity of local political and social entities in the United States to well-organized and clearly directed political pressure. However, successful mobilization requires that the organizing body has much knowledge of the community's needs and social networks as well as knowledge of successful organizing tactics. Given the size of the staff in both CCYD and Plain Talk, it was the exception rather than the rule that there were people with enough commitment, time and skill to organize an effective action. Sites generally tended to use their funds for staff who could implement or administer programs rather than to support community organizers.





Interest in resident involvement as a key component in community-based social interventions shows no signs of abating. In fact, with the current emphasis on the use of volunteers to solve serious societal problems, the focus on the roles that residents can play to better their communities may get even stronger. The experiences thus far of the CCYD and Plain Talk initiatives have much to tell the field about the promise and complexity of involving residents in the complicated business of community change. These "lessons" include learning about strategies that appear useful for involving residents; roles that residents may effectively take and under what circumstances; the phases that appear to be inevitable in the process of involving residents; and the realities of working with residents and local institutions to implement ideas generated by outside entities.

While the communities that participated in Plain Talk and CCYD may not be representative of all poor communities around the country, their relatively common experiences in attempting to involve residents in community change seem to imply a broader relevance to the conclusions we have drawn. CCYD is still in operation, and although Plain Talk has formally concluded, some communities are continuing the work of the initiative. Therefore, we expect that both of these initiatives will continue to provide important lessons for the field.

 Residents can play important roles in furthering the goals of a community-change initiative, although some roles appear easier to carry out and more immediately viable than others.

In both CCYD and Plain Talk, the original designers—P/PV and The Annie E. Casey Foundation—intended that residents would play central roles in the initiatives and believed that resident involvement was critical to initiative success. The experience across all eight communities indicates that residents can be central to local

initiative progress. Among the different sites, they planned for the initiative and advised lead agencies; helped to recruit additional residents to planning groups; used their "insider status" and "moral authority" to lend legitimacy to the initiative and its message; helped to organize and implement activities, and participated in activities themselves; served as outreach workers and educators; and, in some instances, set policy and made programmatic and budgetary decisions.

While the degree to which residents played these roles varied across the sites, it seems that residents adopted some roles more easily than others. Sites were generally successful in involving residents in up-front planning for the initiative. In CCYD, residents worked with the lead agencies to produce the initial and subsequent yearly plans that reflected the desires of the community; and in Plain Talk, residents played the critically important roles of carrying out the community mapping and framing a locally acceptable Plain Talk message about protecting sexually active teens. The sites were also quite successful in engaging residents to recruit other residents into the initiative. This "recruitment" role seemed natural since the residents who initially filled that role were usually those who were already active in the community and had extensive networks to tap.

We speculate that the success of involving residents in early planning was partly because of the sites' relatively short, activity-oriented planning periods: residents stayed focused and energized. In addition, the planning period represented the first phase of the initiative, when enthusiasm was high about the initiative, when enthusiasm was high about the initiative's potential, and relationships and cooperation between residents and agency staff were generally good—before the hard work of implementation and struggles over power and control began.

In both Plain Talk and CCYD, residents have also been involved in helping to implement the local initiative—by working to implement activities and in some cases by participation on governing boards. Involving residents with the implementation of activities seemed most beneficial when there was a tradition of resident participation to build on or where it was clear that resident involvement would be crucial for effectively carrying out the activity. In CCYD, for example, athletic and work-learning activities were delivered by residents



with previous experience in those areas. In several Plain Talk sites, residents played key roles as outreach workers and lay health educators who disseminated the Plain Talk message throughout their communities.

2. Involving residents in implementation is very different from and far more difficult than involving them in planning.

While it seems clear that using residents to deliver activities can be important and sometimes even critical to implementation, it can also involve significant time and resources. As we have noted in this report, the planning phase of both initiatives was characterized by excitement and cooperation among all parties; but with the start of implementation came burnout, particularly on the part of residents, along with uncertainty over roles, and distrust between residents and program staff. All of this made the already difficult work of implementation even more difficult. In Plain Talk, several sites gave up on the idea of using residents as outreach workers and lay health educators, and instead hired outside professionals to deliver the Plain Talk workshops to the community.

In addition, attracting residents who could effectively deliver the activities also presented some challenges. During the planning phase of both initiatives, time, interest and commitment were the primary requirements of residents for participation. However, involvement in implementation required residents to either have particular skills or be willing to take the time to develop new skills. In Plain Talk, residents needed to be trained to facilitate the health education workshops, while in CCYD, residents needed training in how to interact with youth in the "developmentally appropriate" ways that were fundamental to the initiative. While training did take place in Plain Talk, and was essential for developing resident capacity to support the initiative, it took more time and resources than expected and needed to be reinforced periodically. However, the two Plain Talk sites that were most committed to investing time and resources in training residents to implement activities had the most success in achieving the Plain Talk goals. While those sites began

their community health education workshops later than the other sites—because they were taking the time to train residents to serve as facilitators of those workshops—they ultimately attracted more people from the community to attend the workshops; and the content of those sessions, more than in the other sites, clearly addressed the central Plain Talk issue of protecting sexually active teens.

Resident involvement in governance seems to be the most complex and difficult form of involvement to achieve.

In CCYD, in particular, resident involvement in governance was interpreted by the sites as meaning resident leadership in setting policy, allocating funds and making critical decisions about the direction of the initiative. While the presence of a resident-led governance board or committee gave the lead agencies an identifiable group of residents with which to partner and implement initiative plans, it also presented difficult challenges related to control and to the use of initiative resources, including time, money and technical assistance. There was more emphasis on this type of resident involvement in CCYD than in Plain Talk while all three of the CCYD sites have worked to implement resident-dominated governance groups, only one of the Plain Talk sites focused on this issueand the following discussion draws primarily on the CCYD experience thus far.

As is always the case in initiatives that invite residents to share in the decision-making, there was a significant amount of trust and relationship building that had to go on between the residents of the target neighborhoods and their institutional partners, including the lead agencies, other local agencies and the outside initiators and funders. This was the case even though the institutions involved clearly voiced their support for resident leadership in the initiative. Some of the need for trust building is caused by the general mistrust that poor residents have for institutions that are mandated to use their resources to serve the community but have not solved problems that the community faces. This situation was exacerbated in several of the CCYD



communities because residents had been involved in past improvement efforts initiated by outsiders (and in some instances supported by these same local agencies), but those efforts had fallen short of residents' expectations and left them disappointed and skeptical. Given these factors, the power issues that arose in the sites, particularly early in implementation—power struggles that were costly in terms of the initiative's timeline and attention to basic goals—were probably inevitable. Trust building continues to be an ongoing process in the CCYD sites.

A related challenge in attempting to involve residents in governance had to do with the need for helping them develop the skills necessary for taking on governance roles. Few residents in the CCYD initiative came to the governance groups with previous experience in policymaking or organizational budgeting. The initial gap between the skills of the professionals and those of the residents highlighted issues of power, distrust, and the use of time and resources. CCYD site staff were frustrated when residents pushed for authority and control they did not yet have the skills to exercise; and residents, in turn, were frustrated and distrustful when agency staff used their skills and resources to unilaterally make critical decisions in order to push the initiative along.

Both the local lead agencies and the project's initiator lacked experience in working with resident-dominated governance groups, which inevitably added to the difficulties. There was a great deal of uncertainty about how and when it was appropriate to provide the groups with direction and when it was best to let them find their own way. As a result, the groups floundered for a significant period—again causing frustration and the loss of resident participants and time and resources. Clearly, the technical assistance that was eventually provided and proved beneficial should have come earlier—probably beginning during the planning period—to help the groups begin to grapple with the governance issues they would face and to identify the types of future technical assistance that would be most useful for them.

It is still unclear whether the investment that the sites, initiative designers and funders have made in resident governance will ultimately pay off. This is something we will continue to observe in CCYD. While some governance groups are functioning better than others, the groups remain very small, somewhat fragile and still focused on attempting to establish their roles in the initiative with lead agencies and the wider community. At least one is seeking this legitimacy by exploring the possibility of becoming a 501(c)(3) organization, and all of the groups are being encouraged to strengthen their relationships with local service delivery institutions in order to increase their clout and stability. At this point, however, only a small number of residents in each site are involved in the governance groups, and the attention paid to helping those groups function well has detracted from concentrating on strategies for involving residents in other meaningful ways in the initiative.

4. Lead agencies play a critical role in determining the extent to which, and how, resident involvement unfolds in local communities.

Although they varied in size and mission, the lead agencies across both initiatives were generally established institutions with solid connections in the community; and while they shared a general commitment to the involvement of residents in the initiatives, the level and form of that commitment varied. These factors were particularly important to the implementation of resident involvement strategies in the sites.

The agencies' connections in the communities allowed them to use their pre-existing networks to recruit the initial core group of residents who helped plan the initiatives and who, at least theoretically, established a base for ongoing resident involvement. The drawback was that these initial residents were usually the people already known to the lead agencies—either the "usual suspects" who were used to getting involved in community activities or people who lived within a geographic area that was familiar to the agency. This kind of first-stage recruitment was a logical and useful strategy. It allowed the agencies to quickly develop a core of residents with whom to begin working, and some of



these residents also had their own networks they could tap to bring additional participants into the initiative. However, the strategy also had limitations. It did not help to promote broad involvement from the community or attract people with a variety of perspectives. Lead agencies found that they had to use additional strategies and make extra efforts to involve the broader base of residents that seems essential in a community-wide change effort.

Once the initial planning for the initiative was over, the lead agencies' own institutional needs and resources were critical in determining the role that residents would continue to play. Agencies either helped residents take on policymaking or activity-implementation roles; supported their continued involvement in advisory or other capacities; or stopped supporting the groups altogether—in which case, the groups disbanded. In Plain Talk, the lead agency that was most focused on community empowerment was the only site that involved residents in governance. In CCYD, all three lead agencies saw resident-led governance groups as a vehicle for helping them work more productively with neighborhoods, and, thus, they supported these groups' ongoing development.

While it is very likely that the continued existence of the CCYD resident governance groups will depend heavily on lead agency support, the reality is that some agencies have structural issues that work counter to the very notion of effective resident governance. The CCYD lead agencies range from a well-established community-based organization to a unit of city government; and in spite of their expressed intentions to cede resources and decision-making power, it has often been difficult for them to do so. In some instances, the existence of resident-led governance required those institutions to relinquish to residents functions that were fundamental to their own operations, such as budget monitoring, staff oversight and contracting with other organizations for service delivery. Thus, institutions' good intentions sometimes interfered with their own functioning, making it difficult to follow through. In some cases, their efforts

were frowned upon or even prohibited by their boards or other constituents. In other cases, when these agencies wanted to cede authority to residents, it was difficult for their bureaucracies to be responsive in a timely and useful manner. One lead agency, for example, was unable to provide the resident governance group with understandable budget information about the CCYD initiative because its system for tracking budgets made it difficult to generate the information that residents needed to make decisions.

5. Since at least three phases of resident involvement seem inevitable in a community—change initiative, better preparation for those phases could help to alleviate some of the difficulties and facilitate the ongoing process of implementing the initiative.

In two very different initiatives and among very different sites, we observed three distinct phases in the process of involving residents: an initial period of high energy and cooperation between residents and staff, a second phase characterized by tensions about roles and responsibilities, and a third phase where some resolution began to take place. Given their consistent manifestation among the sites, these phases may be inevitable. In fact, some of these phases may be repeated over time in long-running initiatives—a possibility we will be alert for in the continuing evolution of CCYD.

However inevitable these phases might be, designers of community-change initiatives can prepare for them and plan technical assistance strategies to intervene in order to lessen the effects of the phases on initiative timelines and resources and help prevent local implementation from stalling. Initiative designers could, for example, plan to take advantage of the good feelings between residents and institutions early on in the initiative. They could then begin to help residents clearly determine how they want to be organized and involved during the implementation phase, and identify the technical assistance they will need to help them achieve their goals.

The presence of an outside initiator of a local community-change initiative creates pressures that inevitably have an effect on resident involvement.

In both CCYD and Plain Talk, the designers (P/PV and The Annie E. Casey Foundation) stressed that they were providing communities with a framework and that the sites had a great deal of freedom and autonomy to implement the framework in accordance with local plans. In CCYD, in particular, there has been a great deal of emphasis on the decision-making power of residents. However, the priorities and outside perspective of the initiative designers have been a powerful influence on the local events.

First, the frameworks themselves brought an outside agenda and approach to the community. In Plain Talk, the central message of protecting sexually active teens was controversial in several sites; and in CCYD, while residents agreed with the overall goals of the initiative, the approaches laid out in the design were not always a perfect fit with the desires and values of the residents. However, the initiators' role as creator of the design—and in some cases, as technical assistance provider, funder and evaluator—gave them significant leverage in resolving these issues with local residents and institutions.

In addition, communities faced externally imposed timelines for accomplishing tasks and reaching milestones. These timelines had both positive and negative effects. In both initiatives, the relatively short planning periods, with concrete tasks that had to be completed, helped contribute to the high energy and sense of accomplishment that marked the first phase of the sites' efforts. The Annie E. Casey Foundation provided ample technical assistance to the Plain Talk sites during this period, which helped sites and residents stay on track and deal efficiently with challenges that arose.

Later in the initiatives, however, the externally imposed timelines and benchmarks tended to complicate sites' efforts to involve residents in implementation. Lead agencies' accountability to outside funders inevitably affected agencies' relationships with residents. There was a tension between the time and resources involved in developing resident capacity and the necessity of

meeting funders' benchmarks. In CCYD, lead agencies at times made major decisions about the initiative that the resident governance groups felt were their responsibility to make. In Plain Talk, several sites decided to use professional health educators instead of residents to deliver the Plain Talk message in the community because they felt they could not spend the time and resources to train residents and still meet the requirements of the funder's timeline.

The CCYD initiative recently received funding to continue operations through 2001, and we intend to continue following the issue of resident involvement in the project sites as well as in other community-change initiatives around the country. Central to our ongoing investigation will be the following questions: (1) Can the developmental phases of resident involvement be better managed with more experience and information? Do the phases repeat themselves in long-term efforts like CCYD? (2) Are there ways to lessen the inevitable tensions between the goals of outside funders and designers and the time and resources that meaningful resident involvement appears to require? (3) Ultimately, is there a significant and long-term payoff-for the communities and for funders-as a result of the time and resources they are investing in resident involvement strategies?



Endnotes

- 1 CCYD is funded by a consortium including: The Ford Foundation, The Annie E. Casey Foundation, Ewing Marion Kauffman Foundation, U.S. Department of Health and Human Services, The Commonwealth Fund, Charles Stewart Mott Foundation, Charles Hayden Foundation, Surdna Foundation, The Pinkerton Foundation, Booth Ferris Foundation, Altman Foundation, The Clark Foundation and Merk Family Fund.
- 2 The three initial sites are in Austin, Texas; St. Petersburg, Florida; and Savannah, Georgia. In 1997 and 1998, operations began in three additional sites: Kansas City, Missouri; the Lower East Side of New York City; and Staten Island, New York
- 3 P/PV was made particularly aware of this issue in the late 1980s after the initial positive impacts from its STEP project-the Summer Training and Education Program-faded in the face of participants' unchanged social environment. STEP was a research demonstration initiated in 1984 to test the effects of a two-summer remediation, work and life skills intervention on the lives of 14- and 15-year-olds from poor urban families, who were already seriously behind academically. The program had impressive impacts on youth during the two years they were enrolled; but once they left STEP and returned to their regular school and life routines, they experienced the same school dropout, college entrance, teenage pregnancy and employment rates as control group youth who had not participated in STEP. See Gary Walker and Frances Vilella-Velez. Anatomy of a Demonstration: The Summer Training and Education Program (STEP) from Pilot through Replication and Postprogram Impacts. Philadelphia: Public/Private Ventures, 1992.
- 4 The two CCYD sites that received significantly lower levels of operational support—including technical assistance, direct grants and research effort—did not develop strong governance boards. We have not included accounts of those two sites in this paper because we lack important information that would allow us to compare and contrast them to the other sites.
- The lead agencies recognized that service providers would be needed to support and implement some elements of the communities' plans, and thus, two of the sites regularly kept local agencies informed about the CCYD efforts during the planning period.

- 6 The term governance board is widely used in community initiatives to refer to advisory groups, policymaking groups, or groups that are convened as a way of disseminating information to the community. In this paper, we use the term to refer exclusively to groups that have the authority to set policy, allocate funds and make crucial governance decisions.
- 7 Plain Talk sites did not have as strong a commitment to resident governance as the CCYD sites. In large part, this was a function of the different emphasis put on resident governance in the two initiatives. When the Plain Talk advisory groups began to face difficulties, staff in many of the sites decided to focus on ways to involve residents in activities or outreach instead of governance. We discuss these roles in a later section.
- 8 Max Weber: "Bureaucracy," in From Max Weber: Essays in Sociology, pp. 196-244. 1946. Edited by H.H. Gerth and C. Wright Mills. New York: Oxford University Press.
- 9 In all but one of the Plain Talk sites, residents were hired as staff to facilitate community outreach and education. Although most of the sites hired one or two residents, one of the sites was fully staffed by residents. In addition, in three Plain Talk sites, between five and 10 residents received stipends to conduct regular outreach and education.

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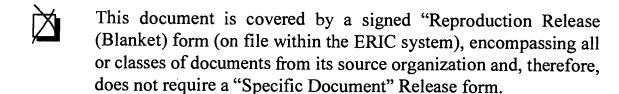
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