

















HUMAN CAPITAL UPDATE

Park Morton Steering Committee - MAY 25,2017

OVERVIEW - NCI HUMAN CAPITAL PROGRAM

- NCI partners with service providers to provide comprehensive case management and other services to residents in New Communities neighborhoods.
- Since 2007, NCI has provided almost \$30M in grants to service providers in all 4 neighborhoods.
- For FY17, NCI allocated \$330K for Park Morton to: Housing Opportunities Unlimited (HOU); Dance Institute
 of Washington; and Athletes United for Social Justice a \$145K increase over FY16.
- Services are delivered on a 2-tier model:
 - Tier 1 is comprised of comprehensive case management intense interaction with households at redevelopment sites with a particular focus on relocation and return readiness.
 - Tier 2 is comprised of other services health and wellness, employment, education, financial literacy and parenting support – aimed at improving the overall neighborhood.
- Typically, there is no more than one provider per site focused on tier 1 services, and the rest are focused on tier 2.
- Through human capital, NCI adds capacity and resources to support overall neighborhood vitality, but also addresses issues that may challenge the ability of public housing residents to successfully maintain a household in the redeveloped community.
- In 2016 NCI began a year-long evaluation and revamp of the human capital program, the centerpiece being a needs assessment and evaluation conducted by the Urban Institute.
- We asked: Is NCI providing access to services that support our goal of 100% Resident Success that every current resident has both the opportunity and a path to return and stay in the new mixed-income communities?

100% RESIDENT SUCCESS

The 100% Resident Success platform was the impetus for our year-long evaluation and revamp. We challenged ourselves to structure a program that aspired to the following:

At NCI, we and our partners are striving for 100% Resident Success. This means creating a clear and realistic path to success for every single resident. That means:

- Every resident is strongly encouraged to return/stay and thrive as an important part of their new mixed-income community.
- Every resident has both the opportunity and a path to return/stay.
- Every resident has access to all the information they need to make the best choice for them and their family.
- Every resident is offered the support needed for a successful relocation, whether temporary or permanent, and whether or not they choose to live in the new mixedincome community.
- 10 years from now, every original resident is stably housed and personally thriving, wherever they have chosen to live.

Conducted by: The Urban Institute

Study Goals:

- Update data about resident housing, health, human services and other needs
- Evaluate how well existing services meet human capital goals
- Make recommendations for how services should expand and/or change
- Make recommendations for how to better measure NCI's progress
- Make recommendations for how to operationalize NCI's 100% Resident Success platform

Study Activities:

- Assess current provider performance using interviews, observations and focus groups
- Expand DCHA's existing community needs assessment survey to analyze NCI developments as a group
- Plan for changes to FY17 human capital services

Assessment Methods:

- Resident Survey 110 NCI households surveyed
- Focus Groups 6 groups conducted (3 adult, 3 youth)
- Service Assessment 11 interviews conducted with 16 stakeholders (case managers, service navigators, other service providers, and government agency staff)
 - Howard and UDC students conducted surveys.
 - DCHA residents served as "field locators" doing outreach, communications and logistics.
 - Interviews were conducted onsite with tablets using a mobile and secure survey platform.

The needs assessment paints a complicated picture of parents who are doing their best for their children, but often in daunting circumstances where progress can be hard to achieve.

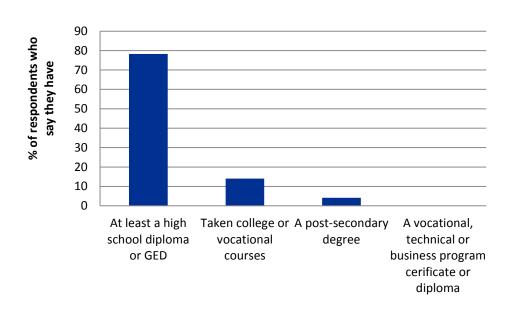
CHILDREN & YOUTH - HIGHLIGHTS

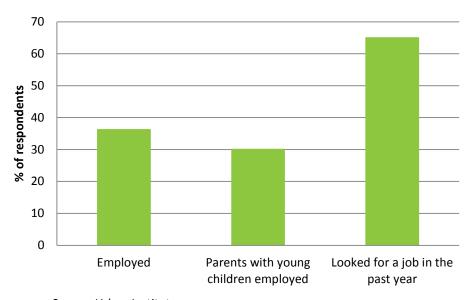
- Parents are an asset, with almost all reporting high levels of engagement (reading, telling stories, singing songs or playing outside) with their children multiple times per week, and almost half reporting overall positive behavior among their children.
- At the same time, parents report high levels of chronic health problems among their children, with 40 percent suffering from asthma, 22 percent who are overweight, and 20 percent reporting a condition that requires regular care.
- Almost 40 percent of parents have been contacted by their child's school about behavioral problems, 21 percent of the children have been excluded or expelled from school, and 15 percent have repeated a grade.
- Over 60 percent of parents report behavioral problems among their children that could be linked to poor mental health.
- Some 26% of parents have been contacted by Child Protective Services.

EDUCATION & EMPLOYMENT – HIGHLIGHTS

- Almost 80 percent of parents have a high school diploma or GED.
- Still, few work outside the home with just 36 percent reporting that they are employed.
- And a high number are dependent on public assistance (above and beyond their housing subsidy)

 84 percent are enrolled in SNAP, 51 percent in TANF/PA, and 40 percent in SSI.





Source: Urban Institute

HOUSING, HEALTH & SAFETY - HIGHLIGHTS

- Despite so many households enrolled in SNAP, 1 in 3 still report experiencing food insecurity.
- Even though public housing is supposed to be some of the most affordable and stable housing in the city, many still struggle with housing expenses, with 37 percent having been late on rent in the past year, and 23 percent threatened with eviction.
- Many families also report unhealthy housing conditions, with 70 percent reporting problems with rats/mice, 58 percent reporting mold, and 41 percent reporting uncomfortably cold conditions.
- Families are raising their children in dangerous conditions, with almost 80 percent reporting drug sales, drug use and shootings/violence.
- In focus groups, both youth and adults expressed concerns about property maintenance and safety issues, with lighting at properties being a particular complaint that is related to both maintenance and safety.
- Still, a persistent fear expressed in focus groups was that of being pushed out of their homes as a result of the looming redevelopments, with rent arrears and poor credit perceived as the main barriers to new housing.
- These conditions likely provide some explanation for why the most prevalent poor health conditions are related to behavioral health challenges with almost half reporting elevated worry, 32 percent reporting anxiety, and 25 percent reporting depression.

SERVICE PROVISION – HIGHLIGHTS

- Residents had overwhelmingly positive things to say in focus groups about external service providers and expressed a desire for more services, including more afterschool, youth development and employment services.
- But overall too few residents participate, especially given the challenges they face, with only 34 percent participating in job training and 24 percent involved in programs to address health concerns.
- Only 46 % of children are involved in afterschool, tutoring or mentoring programs, and 30% are receiving behavioral health counseling. (Compare this to the 60% with reported behavioral problems that could be linked to mental health issues.)

PARK MORTON SPECIFIC FEEDBACK - HIGHLIGHTS

- Adults and youth concerned about loitering, ineffective policing, and safety for children
- Youth also especially noted lack of activities, poor police relations and loitering
- Residents noted concern and even suspicion about the redevelopment plan, and noted barriers to participating in meetings
- Residents have a desire to stay post-redevelopment as long as drug problems abate
- Residents value HOU, as well as services provided by other local orgs (Bread for the City & SOME)
- Residents want more focus on youth activities and job-related services

RECOMMENDATIONS

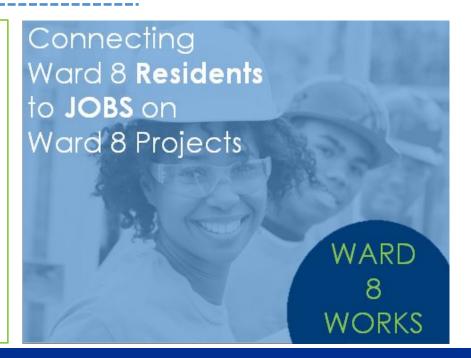
- Improve government agency level communication and collaboration, particularly between DMPED and DCHA, but also with government support services agencies (DHS, DOH, DBH, CFSA, DOES, etc.)
- Maintain a focus on on-site services to reduce barriers to access.
- Increase services in areas of primary need employment & job training; youth services & educational enrichment, especially out-of-school time programs; health & wellness including behavioral health and substance abuse treatment; and crime & safety.
- Develop a closer partnership (possibly a pilot) with DOES to focus on training, peer to peer exchange, etc.
- Deepen partnership with DBH, as their services target core needs of NCI families
- Develop a mental health liaison for the properties that do not currently have one

FY17 ENHANCEMENTS BASED ON THE STUDY

- New roadmap for service delivery to operationalize 100% Resident Success that includes:
 - Annual outreach to all residents with a right to return to ensure they are aware of their eligibility for new housing, pathways to become eligible, and to update anticipated timelines for relocation into new housing.
 - Annual screening of all residents with a right to return to capture high-level data about their current needs, including identifying households who may have developed additional barriers to stability and need more intensive services.
 - New service tiers to capture residents who may not agree to comprehensive case management, but may participate in service referrals and/or general community building activities.
 - Regular caseload discussion and referral meetings between all service providers and (where applicable) DCHA navigators and relocation specialists at each property
- Housing Stability & Wellness Survey Ongoing screening (launching summer 2017) to assess over time if households are:
 - Informed Is the household aware of the redevelopment plan, relocation plan, return criteria and services available?
 - Stably Housed Is the household in a unit (either on or offsite) that does not pose health/safety concerns, is the right size, and does not pose a housing cost burden?
 - Personally Stable Does the household have any barriers to housing stability, selfsufficiency and/or wellness?
 - Personally Thriving Does the household have increasingly positive indicators in: Employment & Income; Neighborhood Safety; Physical & Behavioral Health; and Educational Attainment?
- New Behavioral Health Liaison for Park Morton & NW1
- Continued training on co-occurring disorders and trauma informed systems therapy
- New partnership with DOES and other public & private partners to focus on employment

NEW JOBS PILOT

Last fall, NCI began planning a pilot aimed at getting construction jobs for public and other subsidized housing residents on development projects in their ward. We launched Ward 8 Works in April with 30+ government, service provider and development partners all focused on getting Ward 8 residents jobs on a dozen development projects.



WARD 1 WORKS IS NEXT!

Before the first jobs begin, we will invite residents to:

- Become part of a "Cohort" where they will get support to become "job ready" for construction
- Give us information that tells us about their existing job readiness
- Work with a provider to address barriers Background, ID, Transportation, Child Care, Etc.
- Attend regular sessions on topics like drug testing and expungement
- Participate in peer and mentoring activities

When the first jobs are available:

- Hiring Events Will Prioritize the Cohort
- The Cohort is like a "VIP Pass"

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