

2006-2007 Evaluation Report Parramore Kidz Zone



Prepared by the
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Executive Summary

The evaluation research conducted this first year of the Parramore Kidz Zone (PKZ) project has underscored the need for the project. The residents of Parramore experience barriers to receiving needed services and to achieving an acceptable quality of life. The challenges they face daily are in direct contrast to the surrounding community of Greater Orlando, oftentimes called the "Happiest Place on Earth."

Key findings of the evaluation are:

- Over 500 children aged 0-18 were enrolled in PKZ in the first year of the project
- Most of the activities that the children were involved in were sports/physical activity-related or educational support, but PKZ linked children to a wide array of programs and services
- Increasing access to childcare/day care is a huge need in the community
- Educational attainment of the primary caregivers in the homes is high school or lower for most households, limiting their ability to find work
- Someone is employed in only half of the households
- Nearly half of the families do not feel safe in their neighborhood
- One-third of the families have children who are getting into trouble in the schools and the parents have stated that they need help with these children
- 41% of the households have at least one child with chronic health needs, most of whom have had problems receiving needed care and medications
- Despite these challenges, the families still have hope for the future and have mentioned that the presence of the PKZ Outreach team is a good sign for them.

The evaluators continue to strive for an accurate depiction of the situation in Parramore, so that the project's impact over the years can be accurately described and measured. It is important to keep the strengths and limitations of data sources in mind when analyzing, interpreting, and presenting data.

The household survey, the Developmental Assets Profile and the case studies described in this report provide rich and important qualitative information about the lives and struggles of the residents of Parramore, but reliance on this data as the sole information for planning and evaluation would be limiting. Frequently, respondents will tell the

interviewer what they think they want to hear. Also, respondents may chose to with-hold certain information if they feel that the information may reflect badly on them or cause them problems by sharing it.

As such, the evaluators will be focusing in the coming year on identification of more detailed secondary data on health, education, crime, economic and social services in the neighborhood to analyze alongside the surveys and interviews. Secondary data is typically less biased and more uniformly collected and will be instrumental in measuring the project's impact. The difficulty has been to find it at the neighborhood level.

The PKZ team is a pleasure to work with and the evaluators are privileged to be associated with such a meaningful project.

Respectfully submitted,

Karen van Caulil, Ph.D.
Executive Director
Health Council of East Central Florida, Inc.

Introduction

The Parramore Kidz Zone (PKZ) Project is an ambitious and critically important program geared to improving the lives of the children of Parramore in the City of Orlando. The program is partnering with health, social service, educational, recreational and economic programs in the community and linking the children and their families to these programs.

The Health Council of East Central Florida, Inc. (the "Health Council") has worked closely with PKZ leadership to develop and administer a program evaluation which identifies the health, social service, educational, recreational and economic needs of the Parramore community's children and their families. This information is intended to serve three major purposes:

- To develop baseline information about the community so that the evaluators can monitor and track changes in the indicators over time
- To identify key indicators to be collected by the Outreach Team for quantifying enrollment and program utilization
- To accurately describe the needs and perceptions of the community at the start of the project so that programs and services can be designed and targeted to areas of most need.

The Health Council of East Central Florida, Inc. appreciates the cooperation of CCSI, Inc., the outreach team, in facilitating access to the community. Without their assistance, the household surveys, case studies and the developmental assets profiles would not have been completed in a timely manner.

The following report provides background information and the evaluation findings for each component of the evaluation as well as recommendations based on these findings.

Background

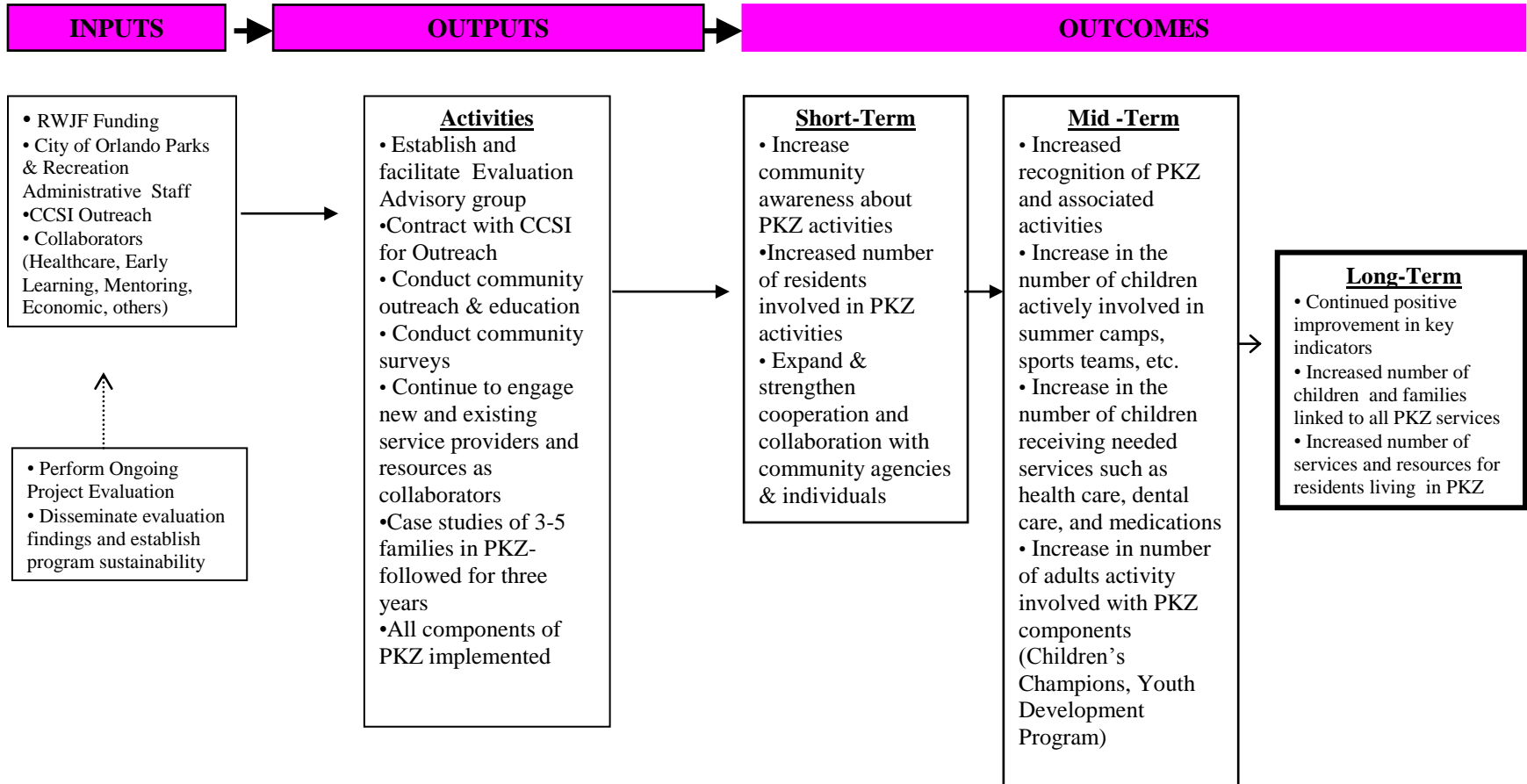
The Health Council was contracted to design and implement an evaluation framework for the three years of the project. The first year involved collection of baseline information including development and administration of a Household Survey, administration of Developmental Assets Profile, identification and study of specific families (case studies), and the collection and analysis of secondary data and program data.

The household survey will be repeated in year three of the project as a means of determining whether and how much the PKZ project has impacted the community. PKZ leadership and the Evaluation Advisory Committee will discuss whether the Developmental Assets Profile was the best tool for measuring the perceptions of the Parramore youth. Four families consented to participate in the evaluation study for all three years. The secondary data and program data will be collected and analyzed annually.

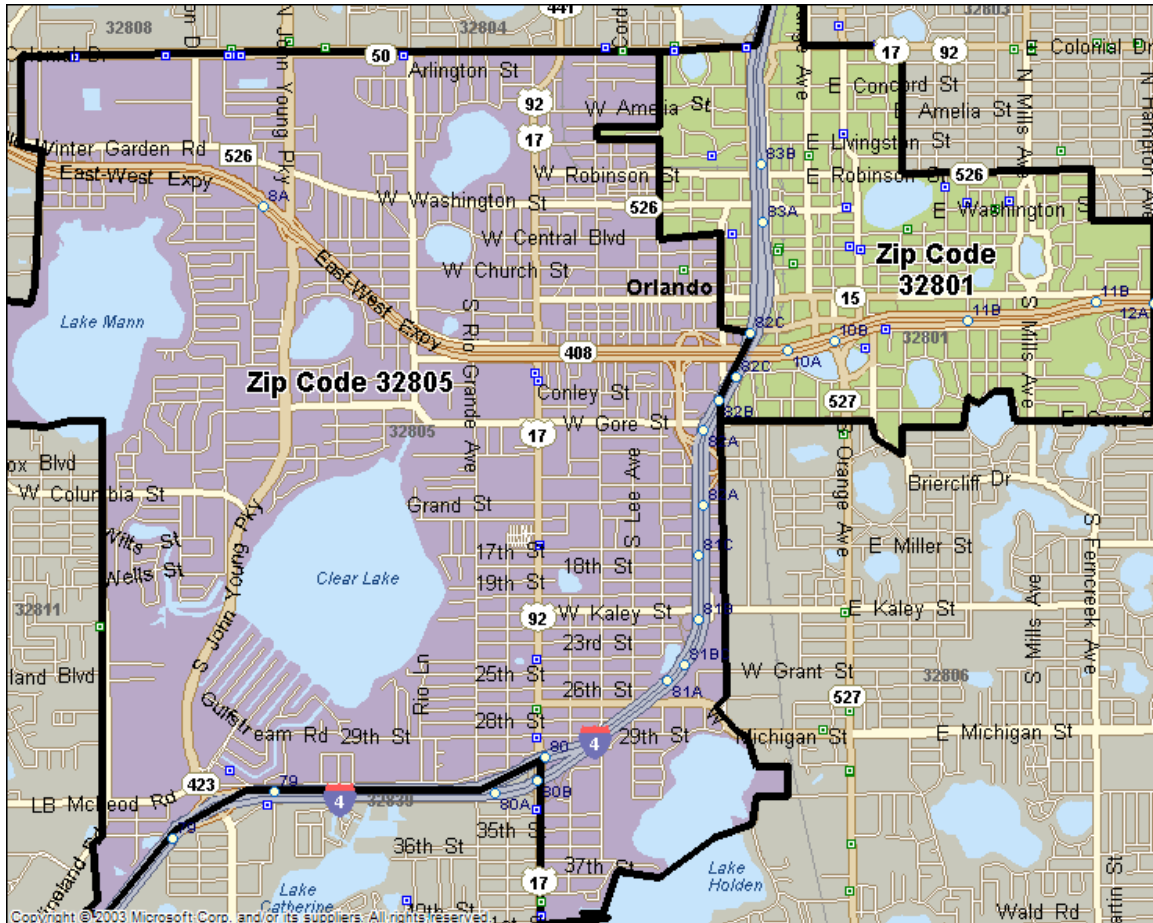
It should be noted that the findings of the surveys and profiles show a more favorable portrayal of the neighborhood than that shown in the secondary data collected in the Parramore neighborhood (i.e. crime statistics, child abuse and neglect, etc.). The families and individuals interviewed were of the opinion that everyone else was “bringing the neighborhood down.” Despite every attempt to randomly select households and youth for the interviews/surveys so as to describe the spectrum of challenges and issues, it must be noted that many households and individuals chose not to participate and divulge personal information. Many doors were not answered in the process of going door-to-door in the neighborhood. It can be assumed that families and individuals engaged in criminal activity would not participate in such research. This situation is a limitation of the research, yet it underscores the need to identify and collect more detailed secondary data on the families in Parramore, a priority of the evaluation team in Year 2 of the project.

The evaluation team developed the PKZ logic model early in the year to guide the design of the program evaluation. The logic model is found on the following page:

Logic Model -- PKZ Project
Goal: To make Parramore a healthy neighborhood for children by linking them and their families to a variety of health, educational, economic and social services.



The evaluation team learned early in the project that collecting data at a “Parramore” level was not always possible. The Parramore neighborhood does not have a dedicated zip code.



The map above defines the geographical borders of USPS zip code 32805 and 32801 in Orlando, Florida. Within these zip codes lies the area known as “Parramore.” The Parramore area is bordered on the east by Interstate 4, on the north by State Road 50, on the west by Orange Blossom Trail, and on the south by Gore Street. The Parramore neighborhood accounts for an estimated 28% of the population of 32805. When only zip code level data was available, zip code 32805 has been used.

Because there are similarly at-risk neighborhoods also located in 32805 which are not receiving the benefit of the PKZ program, the evaluators are concerned that attempts to measure the effectiveness of the PKZ

program will be problematic. Every attempt is being made to mine the secondary data at a census tract level.

Although zip code 32801 is located in the Northeast corner of the Parramore region, this is primarily commercial property and represents a very small piece of the total 32801 zip code area. Statistics used from zip code 32801 were determined not be reflective of the Parramore population and would distort the data collected for zip code 32805.

Household Assessment Survey

A household assessment survey of the residents of the Parramore neighborhood was undertaken to probe the current needs, barriers and access issues in the areas of health, economics, early learning, teen/youth development, mentoring, safety/social cohesiveness and the PKZ project. Following is a report of the survey results and implications regarding the areas listed.

Methodology

Community Concepts Services, Inc (CCSI) served as the outreach team to the community. They are a grassroots community based-organization founded by a former Parramore resident. All staff and most volunteers are current or former residents of the Parramore community. Workers were trained by Health Council staff on interview protocol and procedures.

Survey participants were identified using a list of addresses obtained from the City of Orlando's Geographic Information Systems (GIS) department. Addresses were closely reviewed and with the assistance of the outreach team, all commercial properties were excluded from the list. Addresses were randomly chosen, with each address in the community having an equal opportunity to be chosen. The survey team worked off the address list and went door-to-door requesting participation in the study. Only families with children under the age of 19 were asked to participate in the survey. A confidential 20-25 minute session interview session was held. Upon completion of the interview session, the families received a gift card as appreciation for their time with the interviewer.

The interview process lasted approximately 20 weeks and 100 families were surveyed.

Consent

All participants were asked whether they wished to participate in the survey and were guaranteed that their responses would be used for the purposes of improving the Parramore Kidz Zone Project.

Representation

A sample size of one hundred families was determined to be an adequate number of families for generalization of the findings. As such, 100 families were interviewed. One adult from each home participated in the interview process. The adult caregivers identified themselves as mother, father, grandparent, or

aunt. A total of 278 children under the age of 19 were identified in this random sample of families.

Results

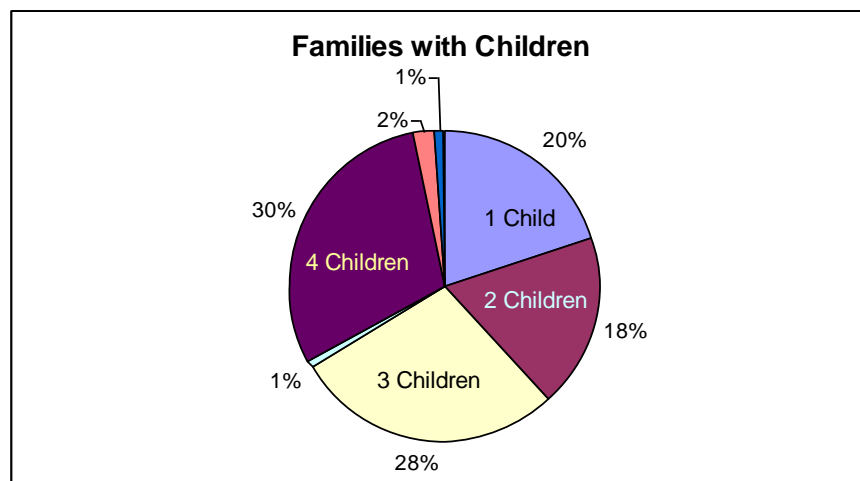
The following document consists of the PKZ Household Assessment questions and the answers received from all respondents.

Demographic information for the PKZ project

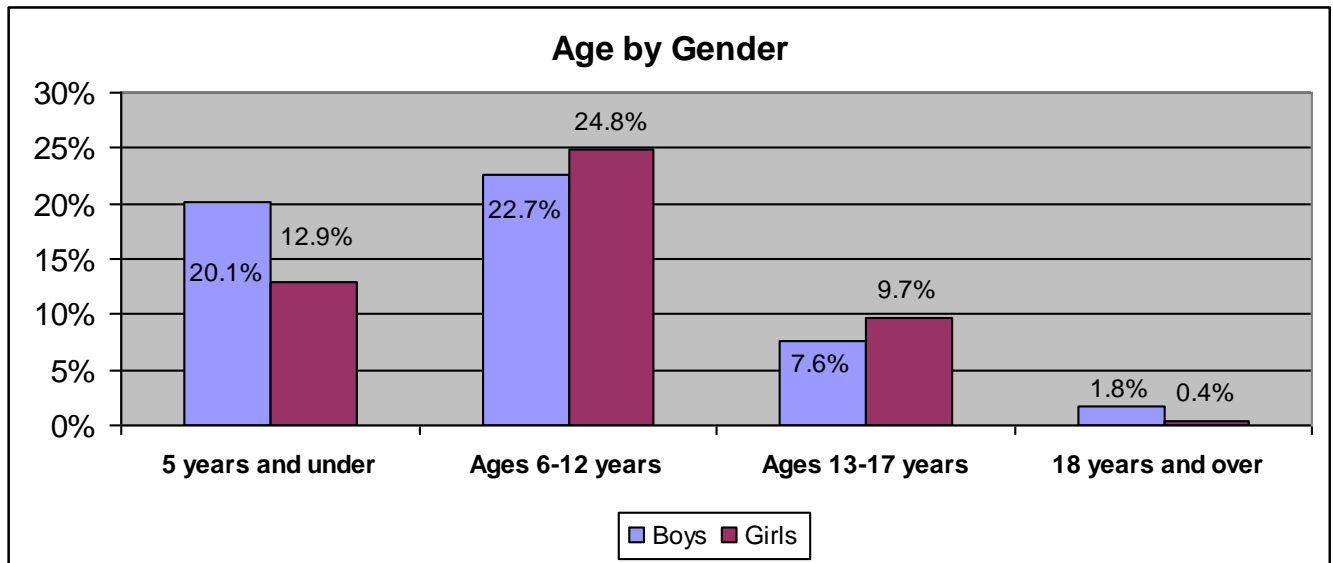
Questions 1-4 – Child's name, date of birth, age, gender school and grade:

A major objective of the PKZ project is to enroll community youth into the program. The household assessment survey served as a means of informing parents and caregivers about the project and associated benefits available for their children. The questions in this section were developed for the purpose of obtaining information about each child in the family and providing an opportunity to be enrolled into the program. Initial questions requested each child's name, age (to be included in the PKZ birthday club), gender, school and grade.

Of the 100 families surveyed for this assessment, 20 reported one child in their household, 18 reported two children, 28 reported three children, 30 reported four children, one household has three children and currently expecting another, two reported five children and one reported 9 children living at home. Of the children reported, 56 were boys aged five and under, 36 were girls aged five and under; 63 were boys aged 6-12, 69 were girls aged 6-12, 21 were boys aged 13-17, 27 were girls aged 13-17, 5 were boys 18 and over and one household reported one girl aged 18 at home.



Note: One family reported expecting the 4th child, 1% reported 9 children and 2% reported 5 children.



The ages reported of youth attending kindergarten through 12th grade revealed sizable differences in kindergarten through 8th grade. Most grade levels contained students two-to three years older than what is usually found in the grade. By high school, a change occurs and the ages reported in grades 9 through 12 reflect the standard ages. This change may be attributed to students dropping out, or perhaps social promotion.

GRADES	FEMALE AGE RANGE	MALE AGE RANGE
Kindergarten	5-6	5-7
1	6-7	6-8
2	7-9	7-9
3	7-10	8-11
4	9-12	9-11
5	11-12	10-12
6	11-14	11-13
7	12-13	12-15
8	12-15	13-16
9	14-15	14-15
10	15	15-16
11	16	17
12	18	18

Youth were reported as attending a variety of schools in Orange County. The following schools were reported by respondents:

Elementary School & number attending (K-6)	Middle School & number attending (6-8)	High School & number attending (9-12)	Alternative School & number attending (K-12)
Fern Creek - 29	Howard- 26	Jones - 8	***C.E.P. - 6
Princeton - 26	Carver - 2	Boone - 4	
Nap Ford - 11	Meadowbrook - 1	Dr. Phillips - 2	
Lake Como - 9	Memorial - 1	Edgewater - 2	
Dover Shores - 8	Robinswood - 1	Evans - 2	
Grand Avenue - 7	Wolf Lake - 1	Olympia - 2	
Orange Center - 6		Oak Ridge - 1	
Kaley - 4			
Hiawassee - 3			
Ivey Lane - 3			
Ridgewood Park - 3			
*Summit - 3			
Blankner - 1			
Meadow Woods - 1			
Rolling Hills - 1			
Rosemont - 1			
**Cherokee - 1			
Victory Christian - 1			
Agape (K-12) - 1			

*Cherokee operates as a public school for children with special learning needs.

** Summit is a K-8 public school of choice for children identified with specific Learning Disabilities (SLD. Many are also diagnosed with Attention Deficit Hyperactivity Disorder (ADHD).

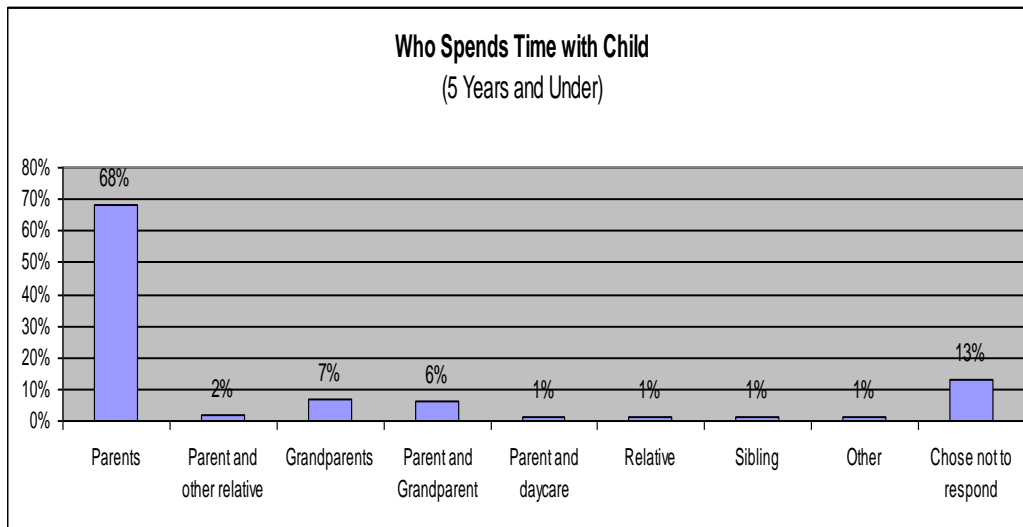
*** Community Education partners (C.E.P.) is an educational organization which partners with public schools to get at-risk students from grades 6 through 12 back on track. Low-performing and disruptive students are removed from public schools and placed in separate, structured campuses where academics, discipline and life skills are emphasized. Currently Orange County has two such locations and six youth were reported as attending classes there, which puts CEP as the second most attended high school in the study sample.

Additionally, there are two other types of learning facilities listed: Charter schools and Community Education Partners. Charter schools and the number of Parramore children reported attending were: Agape Christian Academy (1), Nap Ford Community School (11), Cherokee School (1), Summit Charter School (3) and Victory Christian Academy (1).

Early Learning

Question 5. Who spends the most time raising the child (or children) under 5 years of age in your home?

Parents (68 of 100) report that they spend the most time with their children under five at home, with two households reporting a parent and aunt, uncle or cousin raise the youngest children. Seven of 100 households report that grandparents are the primary caregiver, six report parent and grandparent, and one household each report a parent and daycare, aunt/uncle/cousin, or a sibling.



Question 6. What is the highest level of education of the person who spends the most time raising the young child/children?

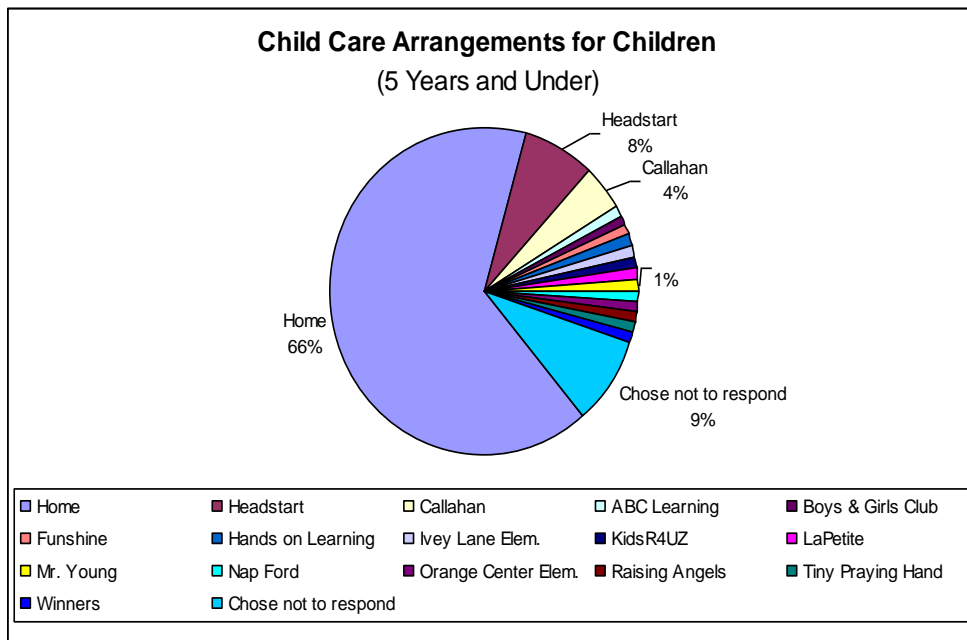
The highest level of education reported for 37 of these caregivers was high school, followed by some high school (27), some college (13), grade or middle school (8) and college graduate or higher (4). There were 10 respondents who chose not to answer this question.

As such, 64% of the primary caregivers/parents in Parramore have only attained high school graduation or less. This finding is significant in how it could impact the academic success of the children in the neighborhood. One of the strongest predictors of a senior in high school's expected level of educational attainment is his or her parent's level of educational attainment, according to a 2005 study released by the National Center for Education Statistics.

Question 7. Does the child under 5 attend a childcare center/preschool? If so, give the name of the center/school.

The majority of the households (61 of 100) do not have their children under five in a childcare center or preschool. Some of the parents indicated a lack of resources to pay for childcare; others indicated that they were unable to find a vacancy in a program they could afford. This may have some bearing on the low number of respondents reporting that they are receiving assistance from 4C (see Economics section, Question 36).

There were 32 households of the 100 households surveyed who did report having a child attend a childcare center or preschool, with only a small majority of the responses listing Head Start. The remaining responses were a variety of centers in and around the community. There were 8 households who did not elaborate as to which center was used.

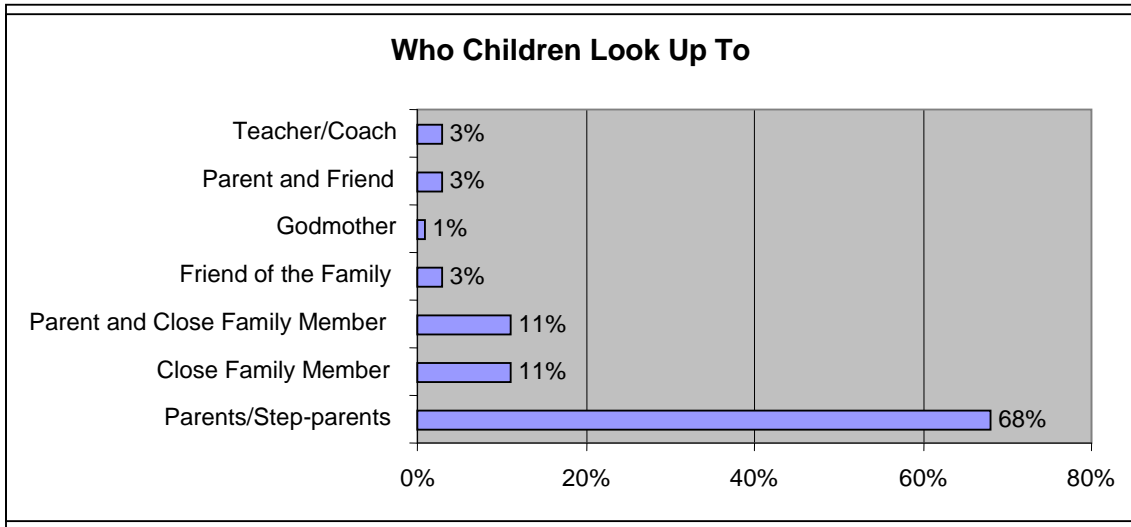


Teen/Youth Development/Mentoring

Question 8. Who is the adult that your children under age 18 look up to?

Children under 18 in their families look up mostly to parents or step-parents (in 68 of 100 households), with 11 looking up to some other close family member and 11 choosing both parent and close family member for their answer. Friends of the family or neighbors were the adults those children turned to in three households, while one each reported godmother, parent and friend of the family or neighbor, and closer relative or

teacher/coach. Two of the respondents chose not to answer this question.



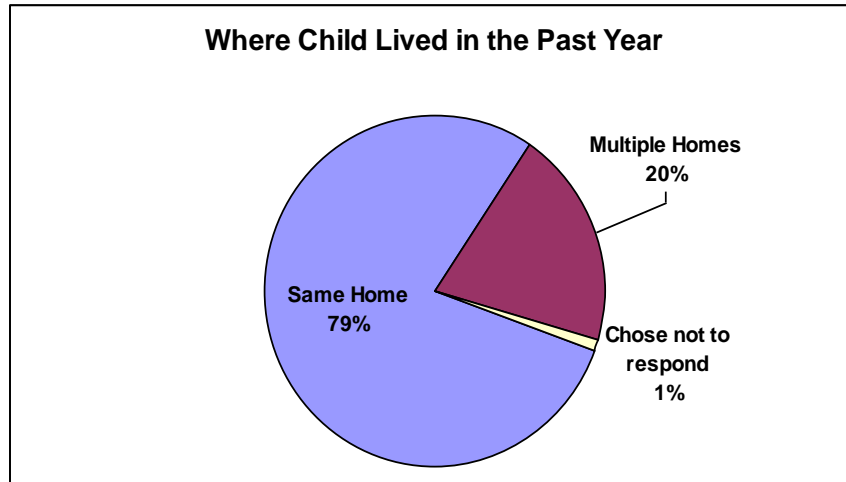
Question 9. Do you think your children under 18 will graduate high school?

Question 10. Do you think they will go to college?

Nearly all of the households (98 of 100) reported believing their children under age eighteen will graduate high school. The majority (91 of 100) also believe their children will go on to college.

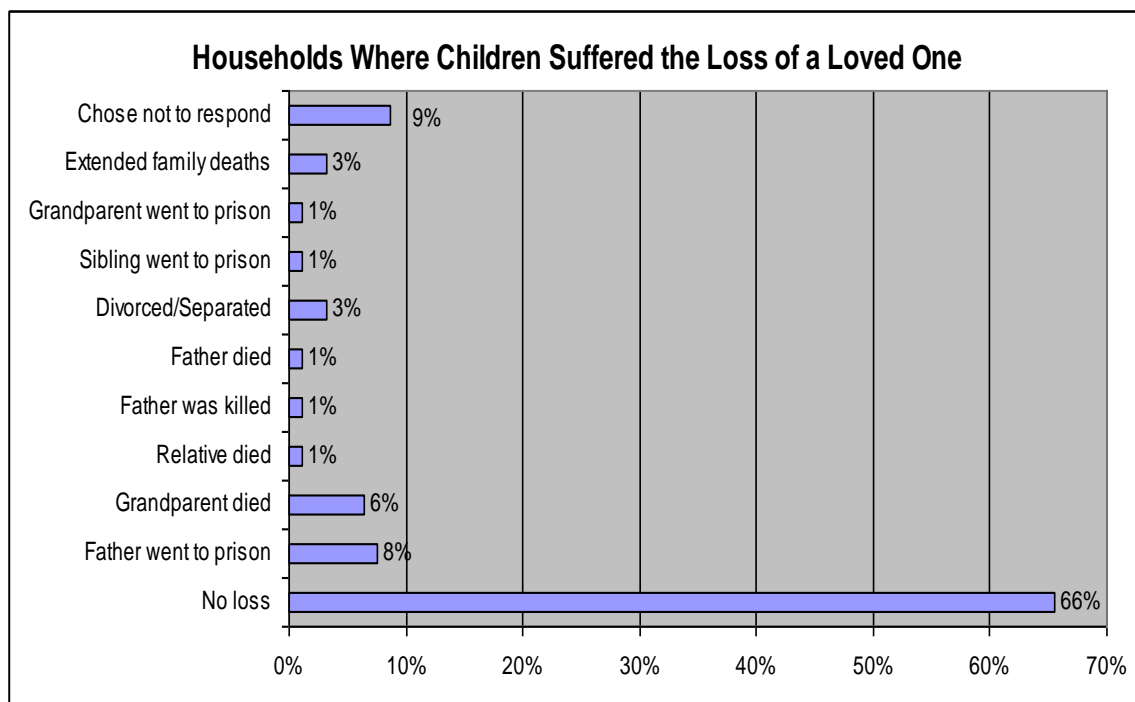
Question 11. During the past year have any of the children under age 18 lived in more than one home?

A sizable minority (20 of 100) of the children were reported as living in more than one home during the last year. The majority of responses (79 of 100) reported that the children did not live in more than one home during the last year. There was one “no response” to the question.



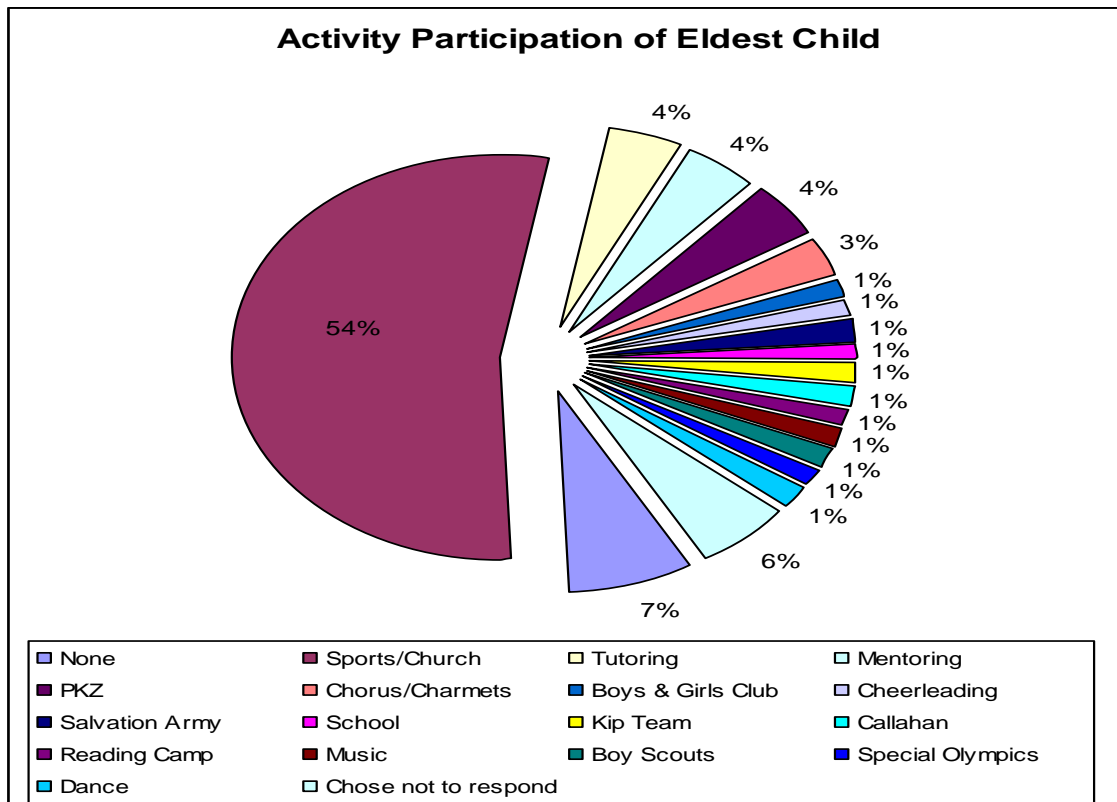
Question 12. During the past year, have any of the children suffered the loss of a significant person in his/her life?

Nearly a third of the families (32 of 100) were reported having lost a significant person in his/her life from a variety of causes. The most frequent causes reported were incarceration and death. A total of eight respondents did not elaborate on the type of loss the children endured.



Question 13. Are any of your children involved in any activities such as a sports team, a church group, a mentoring program or chorus? If not, do you want any of the children to be involved in an activity?

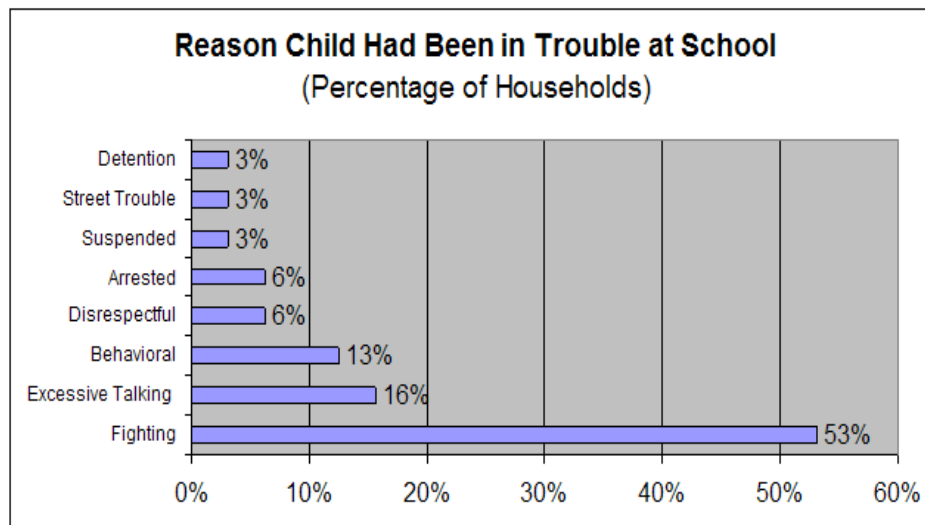
Half of the respondents reported that their children were involved with an activity. The most frequently listed sports, church and a variety of mentoring activities, including the PKZ program. Some families reported several children and multiple activities. A small group of respondents (12) did not want their children participating in any other activities.



The remaining half of respondents reported that their children are not involved in any activities. When asked whether they would like their children to participate in some particular activity, the majority stated "yes". The most requested activities for those who responded were: sports (27), cheerleading (6), church related (4) and a variety of after school activities such as Callahan Center programs, FCAT tutoring, music school, science programs, summer programs and fishing.

Question 15. Have any of your children gotten into trouble at school?

Children have been in trouble at school in 32 of the 100 households. Parents/caregivers reported fighting (17) as the major reason, followed by talking (5), behavior issues (4), disrespect (2), arrested (2), suspended (1), street trouble (1) and detention (1). Several reported multiple issues. There were 14 caregivers who elaborated regarding the age and gender of the children involved. They reported 14 boys aged 5-15 and 4 girls aged 6-16 among those who had been in trouble.



Question 16. Do you feel you are getting enough help for this child?

Question 17. Do you want more help for this child?

The vast majority of parents/caregivers (78 of 100) do not believe they are getting adequate help for the child who has been in trouble at school. A minority (11) felt they did not need more help and there were 11 who did not respond. Parents and caregivers of children who did not get into any type of trouble unexpectedly chose to respond to this question. They reported feeling that they were not getting enough help with their children.

Respondents reported counseling and intervention services as examples of the type of help needed. None reported the type of help they were currently receiving.

Question 18. Do any of your children get help with schoolwork?

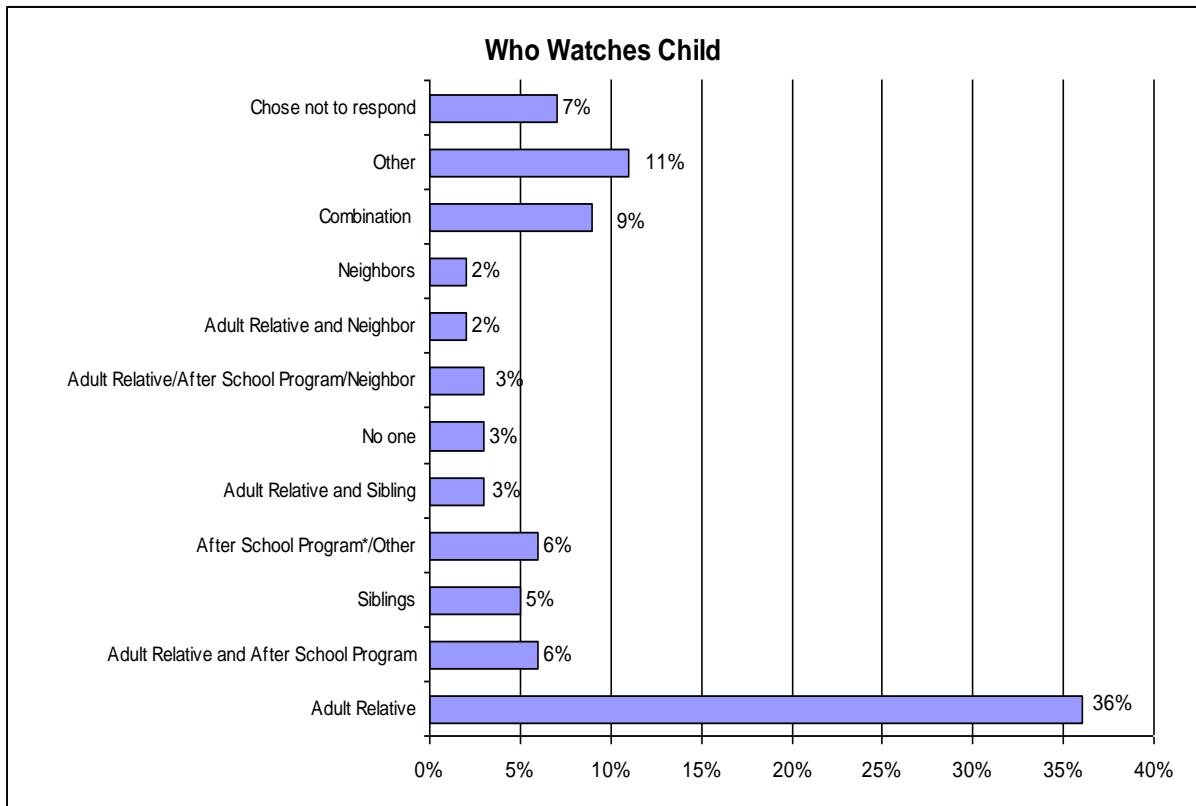
Question 19. If your children are not already enrolled, are you interested in enrolling them in tutoring programs?

The majority of parents/caregivers (69 of 100) reported their child received no help with schoolwork. For the minority (27) who did report receiving help, the most common sources reported were the Callahan or Downtown Recreation Centers, after school programs and church programs. There were four persons who did not respond to this question. When asked whether they want tutoring for their children, 69 of 100 caregivers said “yes.”

Supervision

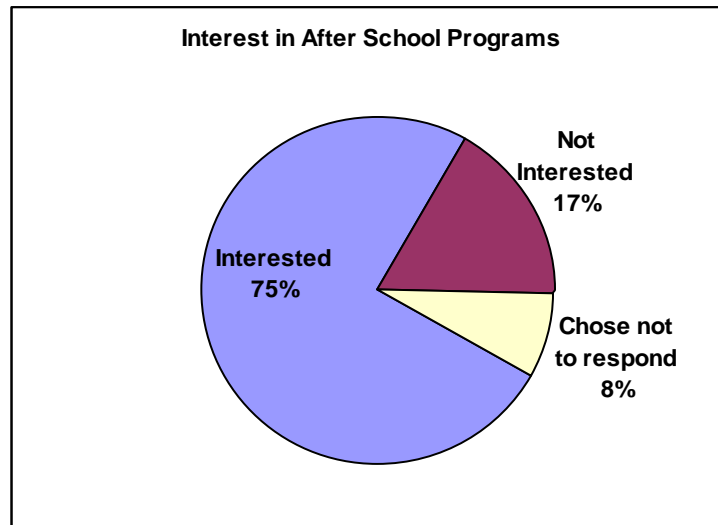
Question 34. When you're at work and your children aren't in school, who watches your children?

There was a wide variety of responses to this question, with the majority (36) listing “an adult relative” providing care. Other responses included siblings, after school programs and neighbors. There were only three responses that listed “no one” to this question. A limited number of responses included information concerning where the after school program was located. The Callahan Neighborhood Center was the most common answer.



Question 35. Are you interested in receiving information about after school programs for your children?

When asked if they were interested in information about after school programs, 75 families said “yes,” 17 said “no” and eight did not respond.

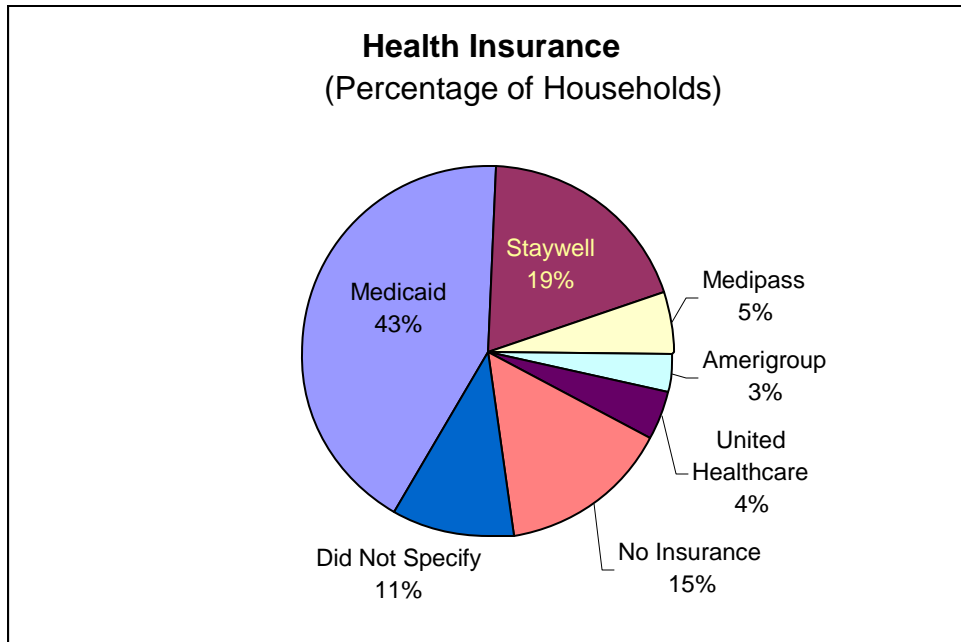


Health

Question 20. Do you have health insurance/Medicaid for your children?

Children are covered with some type of insurance in 80 of the 100 families assessed, with 14 reporting no insurance coverage, and three with coverage for only one child out of two children. There were two who listed “unsure” and one who did not answer the question. Medicaid (40 of 100 families) insured those who reported coverage, followed by StayWell (18), MediPass (5), and AmeriGroup (3). United Healthcare insures four of the families and one indicated “health insurance” with no specific company or program named. There were eight families who did not state the type of coverage they had.

StayWell, Amerigroup and MediPass are all Medicaid programs in some format, so 70% of the households are covered by a government health program.



Question 21. Have you or anyone in your home been pregnant in the past two years? If yes, who was pregnant and where did they received prenatal care?

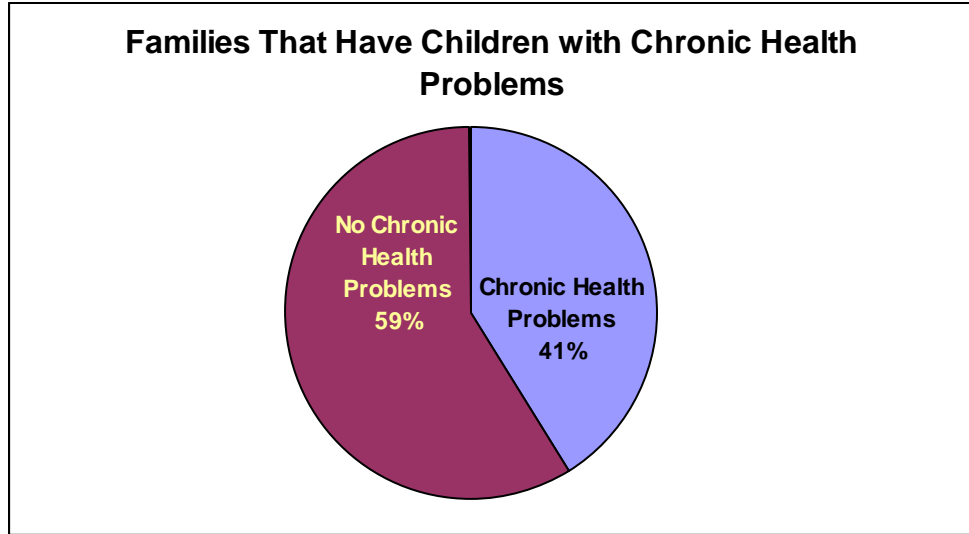
Nearly a third (31 of 100) of respondents reported someone in the household who was pregnant within the last year, 20 of whom were the household mother, one daughter and one live-in sister and nine did not say. Only 11 of the women stated their OB/GYN caregiver by name. The providers listed included the Orange County Health Department, hospital outpatient clinics and private providers or clinics.

Question 22. Do any of your children have an ongoing medical problem?

There were 41 of 100 families reporting children with chronic health troubles. Ages of the affected children ranged from one to twelve years in age. More boys than girls were reported to have a chronic illness. The majority (59) of the families stated there were no chronic health problems with their children.

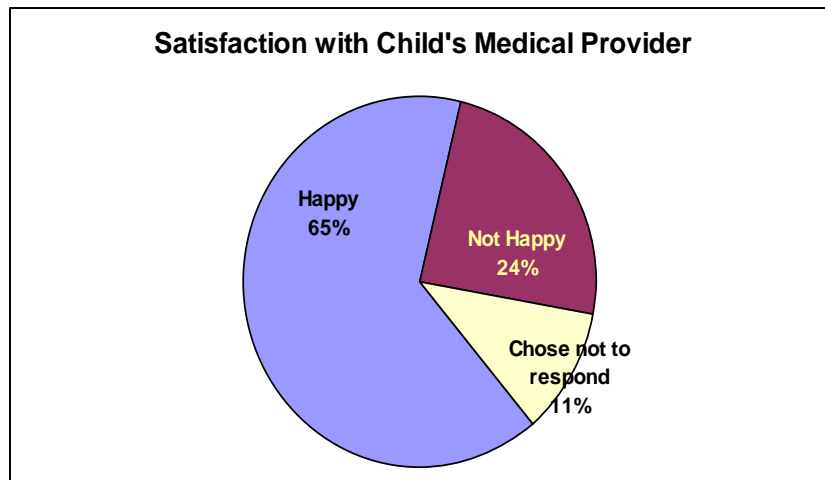
The most commonly reported health problem was asthma (26), followed by sickle cell anemia (3), bronchitis (3), allergies (2), heart murmurs (2), learning disabled (2), ADHD (10), nosebleeds (1), respiratory issues (1) and seizures (1). Some of the 43 families listed multiple health problems for their children.

Since the question asks about medical problems, the one response of “learning disabled” should not be generalized to the entire community.



Question 23. Does this child have a doctor who takes care of this problem and with whom you are happy?

The majority of the families (65 of 100) reported being happy with their children's medical providers while 24 were not and 11 did not respond to this question. The majority of medical professions providing care were found at the Orange County Health Department, hospital outpatient clinics or private practices.



Question 24. *The last time one of your school-aged children was too sick to go to school for several days, was this child seen by a medical person for this illness?*

Illness kept children in 16 of the families out of school in the past year, and 13 elaborated that pink-eye (2), bronchitis (2), colds (2), eczema (1), asthma (1), pneumonia (1), flu (1), strep throat (1), toothache (1) and one was hit by a car as the cause.

**The follow-up to Question 24, (24a) asked if the child was seen by a doctor and the provider's name (24b). These questions were likely misinterpreted as there were more responses than had previously listed a child being ill and unable to attend school. The responses provided the names of current medical providers being seen by the family. Providers identified were private providers and clinics. One respondent listed the "emergency room" as their source of care.

Primary Care Physicians Reported by Respondents

Dr. Baldwin	Dr. Moody	Dr. Tran
Dr. Bowen	Dr. Morefield	Dr. Vano
Dr. Carin	Dr. Muriel	Dr. Wall
Dr. Charity	Dr. Quidal	Arnold Palmer Hospital
Dr. Cohen	Dr. Robert	Copeland Pediatrics
Dr. Crow	Dr. Ross	Family Health Center
Dr. Cruz	Dr. Ryan	Heartland Pediatrics
Dr. Erhart	Dr. Sadek	County Health Dept.
Dr. Johnson	Dr. Schacko	Physician Associates
Dr. Kahn	Dr. Sheeks	Wasserman Pediatrics

Question 25. *Do you have a place to go to get your children's shots? If so, where?*

The majority of those interviewed (92 of 100) responded that they did have a place for their children to get their shots, seven reported they did not and one did not answer the question. The most common response listed was the "clinic".

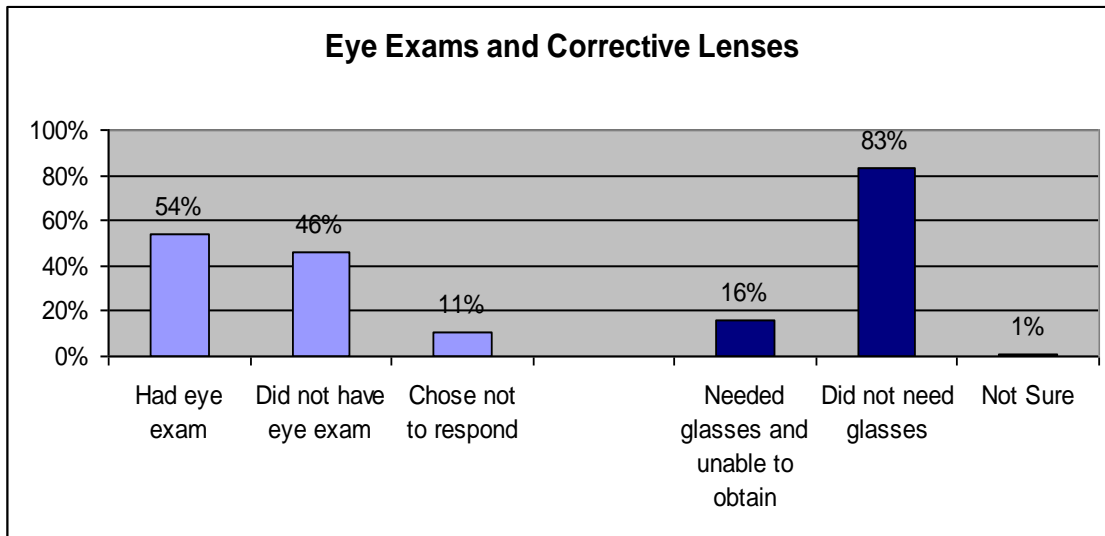
Question 26. *Have any of your children had eye exams? If so, where?*

Question 27. *Have any of your children needed glasses and not been able to get them?*

If so, why?

Children from 54 families reported they had eye exams while 46 of 100 families did not. Eye exam providers were schools, clinics and private

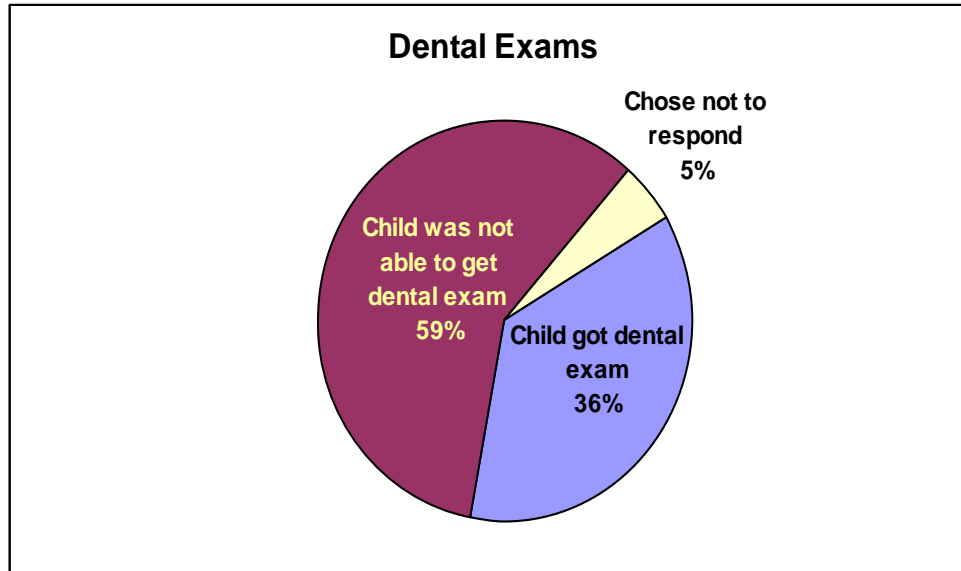
physician offices. Of the 100 assessed families, 16 reported their children had not been able to attain glasses they needed.



Question 28. When was the last time one of your children had problems with his/her teeth? Was this child seen by a dentist?

Families reported they were able to get their children dental exams in 36 of 100 families, and the majority (59) was not able to do so. There were five who did not respond to this question. Children reported needing to see a dentist ranged in age from one to eighteen years. There were twelve families who identified specific dental situations: cavities (2), needed braces (2), routine visit (2), chipped tooth (1), needing surgery (1), teething (1) and having a tooth pulled (1).

Dental providers were identified by 18 families and the most common listed were clinics and private dental offices.



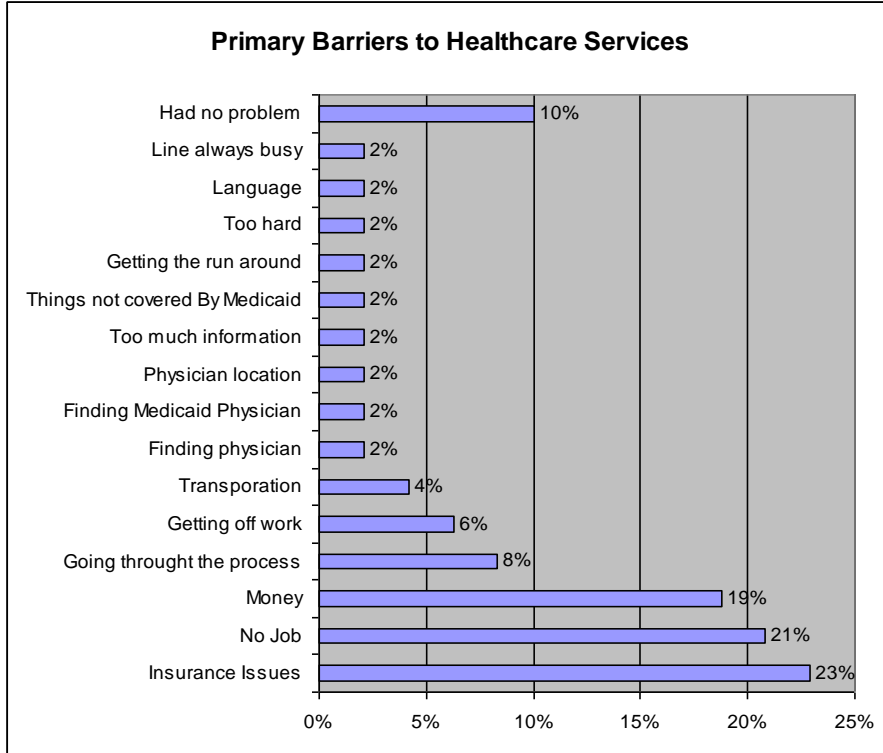
Vision and Dental Care Providers reported by Respondents

Vision Care Providers	Dental Care Providers
Dr. Chan	Dr. Ahmad
Dr. Coplin	Dr. Gary
Dr. Johnson	Dr. King
Dr. Morefield	Dr. Mills
Dr. Shirley	Dr. Nurrell
Dr. Striner	Dr. Nuygen
Nemours	Dr. Poor
Copley Eye Care	Dr. Roberts
20/20 Vision Center	Dr. Robin
Copeland Pediatrics	
Rosen Hotel Medical Center	
Holden Eye	
Head Start	
Orlando Eye	

Question 29. What makes it hard to get medical, vision, dental or other care for your children?

Surveyed families were asked to identify a primary reason they felt was making it hard for them to obtain medical, vision or dental care for their children and 58 families responded. Insurance issues were the primary barrier for 11 families. No job was listed by 10 families; money was listed by nine families; income and “going through the process” were each listed by four families; getting off work by three families; transportation or too young by two families; and one each as finding a physician for insurance, finding a physician to take Medicaid, finding a physician close

enough, too much information needed, bills, Medicaid not covering things, too many questions, get the run-around, mom working, no dental insurance, need paperwork, too hard, language (Creole) and phone line always busy. There were 10 families who reported that they had no problems accessing care leaving 90 families reporting some access issue.



Families were asked to prioritize a second barrier to accessing services and 20 responded. Barriers listed included the following: family income too high, a lack of resources or transportation, families need help applying for services, doctor doesn't take insurance, parents are students and don't work; HMO; new to area; support; work; no appointments, no job or not enough information.

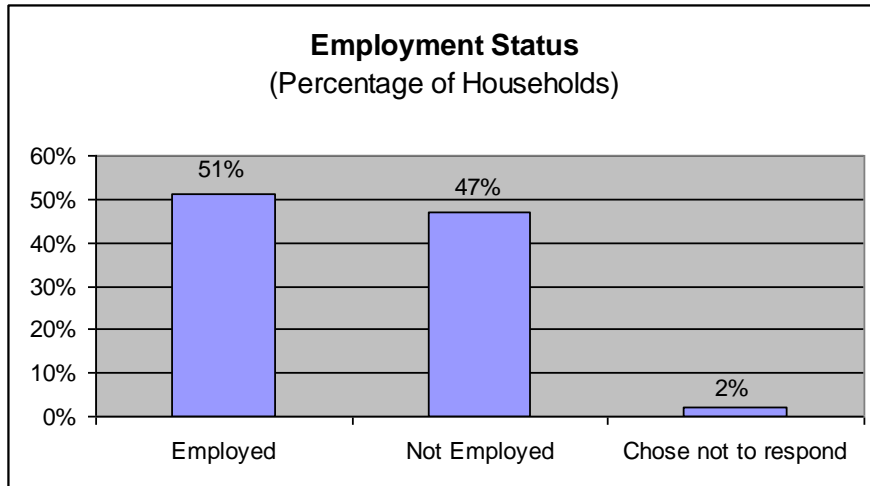
There were seven families listing a third barrier to services. They were: transportation, finding providers, lack of support, sick child, a lack of child support and being tired.

Economics

Question 30. Are you employed? If so, please give your employer's name.

A little more than half (51 of 100) responded that they are currently employed, while 47 are not and 3 declined to respond. Of those who are

working, the most common industries listed were fast food establishments, retail, manufacturing, hotels and nursing homes. Job descriptions listed were: housekeepers, Certified Nursing Assistants, cashier, housing specialist, lead coach representative and room attendant.



Employers reported by Respondents

McDonald's	Avanti of Orlando
Subway	Convergys
Taco Bell	Florida Pillow
Publix	Lakeside Behavioral Healthcare
7-Eleven	Environmental Health Testing
Best Western Hotel	Jewitt Orthopedic
Doubletree Hotel	Kelly Staffing
Rosen Plaza	MarKen Marketing
Vista Sheraton	Lutheran Towers
Universal Studios	Orlando Housing Authority
The Arena	Mears Transportation
Dollar General	Weiser Security
Goodwill Industries	

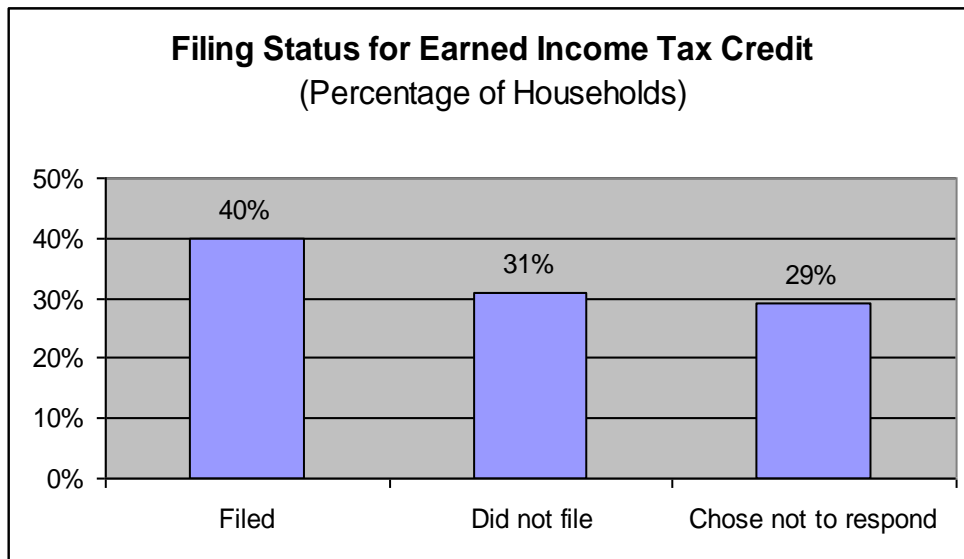
Question 31. Do you still get paid when you have to take time off from work?

Question 32. If you have health or family problems, does your employer let you adjust your work hours?

As employees, only 11 families reported the ability to take paid days off from work. The majority of those who are working said they had no paid days off. A total of 34 reported their employers will work with them to arrange scheduling for family or other emergencies.

Question 33. When you filed your last tax return did you claim the Earned Income Credit (EIC) deduction?

A majority of the persons who responded to this question (40 of 100) did file for the Earned Income Tax Credit last year. There were a sizable number of persons who chose not to answer this question (29 of 100) or to give a reason why they would not.



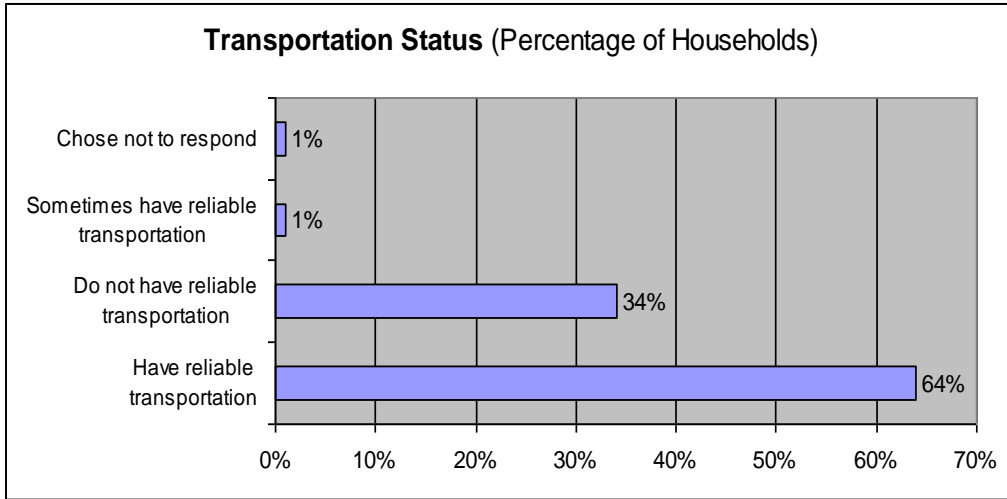
Question 36. Do you receive income assistance from any of the following: food stamps, social security, 4C, Workforce, WIC, Child support, other?

Respondents reported receiving the following benefits: food stamps (54), Social Security (22), 4C (14), Workforce (4), WIC (26), and child support (10). In the "other" category Medicaid or Disability were listed most frequently. On the average, there were 9 respondents who chose not to answer each section of this question.

Question 37. Do you have convenient and reliable transportation? If so, please describe.

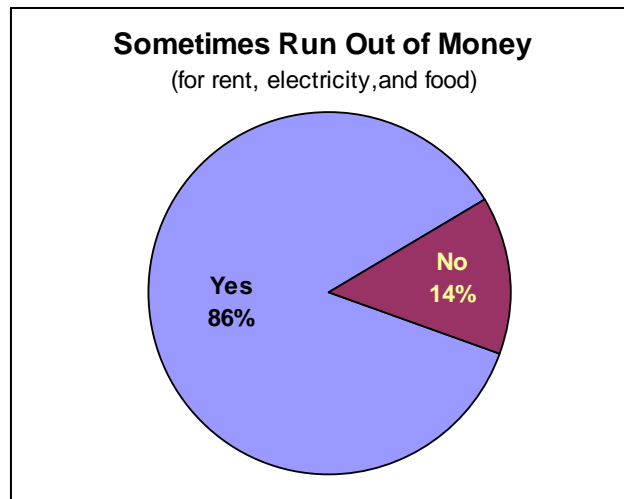
Almost two-thirds (64) of the respondents have what they consider reliable and convenient transportation. The most common method of transportation listed was a car, either one personally owned or belonging

to a relative or friend. Only 11 responded that the public bus was their primary mode of transportation.



Question 38. Do you sometimes run out of money to pay for things like rent, electricity and food?

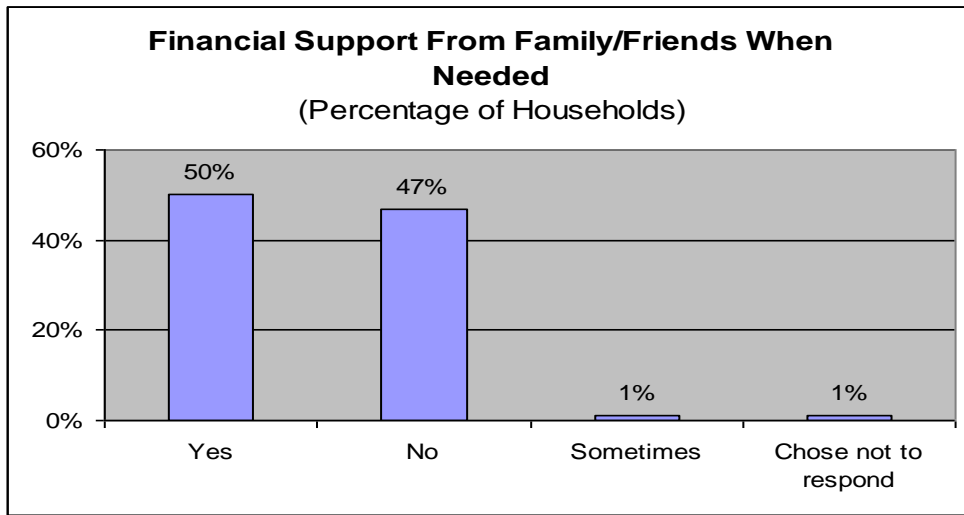
An overwhelming majority of respondents reported a shortage of money to pay for the essentials. Money sometimes runs out during the month for 86 of the families who were interviewed, while 14 reported it did not.



Question 39. Do you have family or friends you can count on when you need help with money?

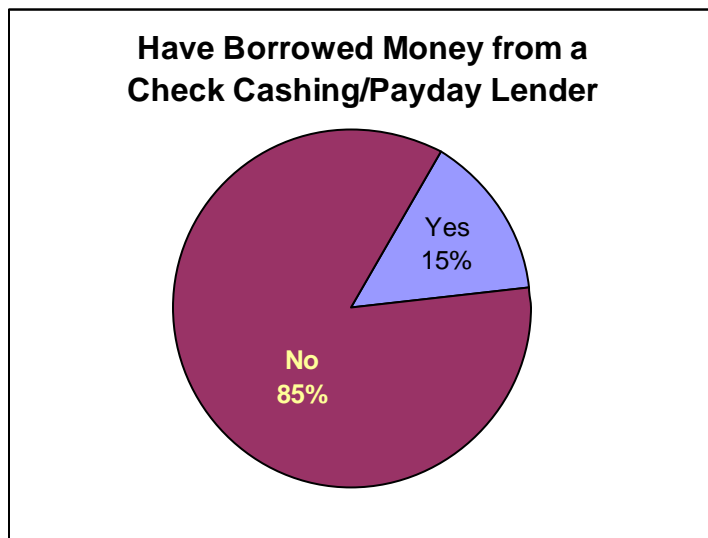
One-half of the respondents (50) reported that they do have someone they can count on to help them when they need money. There is a

sizable minority (48), who do not have anyone they can count on to assist them with money when needed.



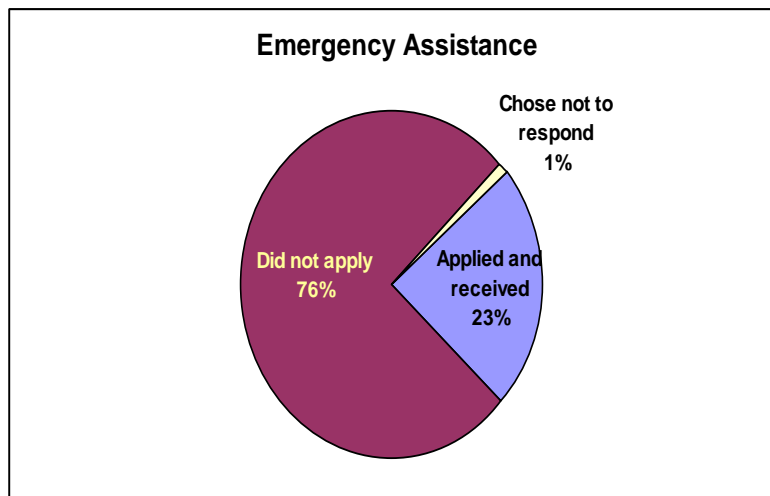
Question 40. Have you ever borrowed money from a check cashing/payday lender?

Despite reporting running short of money during the month (refer to Question 38), only 15 of the families have used a check cashing/Pay Day lender. The majority (85) reported they have not used this service. It has been noted that the Parramore residents interviewed may not have considered the local “Mom and Pop” stores as check cashing/payday lenders despite the fact that these stores offer those services.



Question 41. Have you ever applied for and received emergency assistance from a church or social service organization?

The majority of respondents (76 of 100) have not applied for or received emergency assistance from a church or social service agency. Churches or social service organizations with emergency assistance programs have helped 23 of the families. One respondent chose not to answer this question.



When asked the names of the places they had received help local churches (unidentified) were most often listed.

Question 42. Have you had problems with your electricity within the past two years?

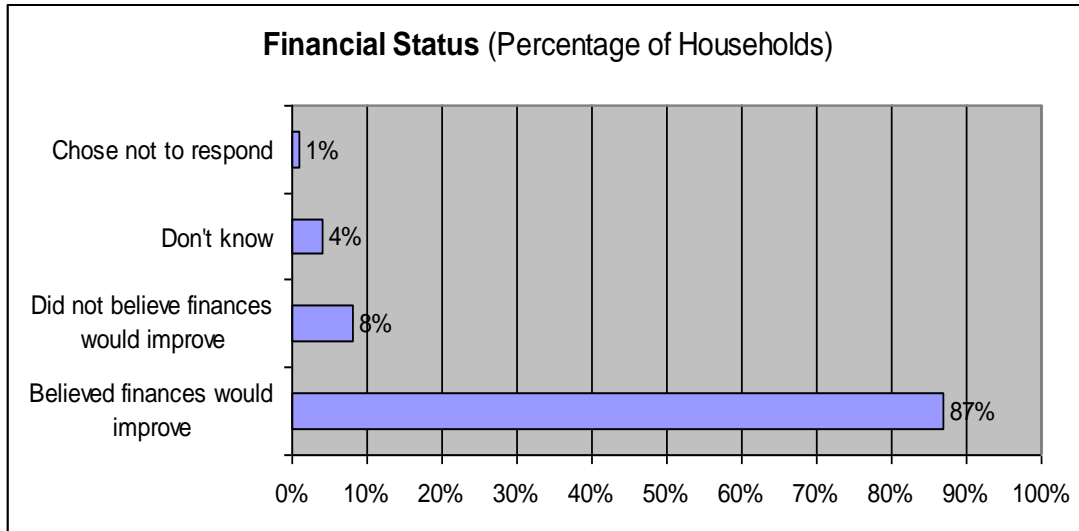
Keeping the electricity on has been a problem within the last two years for 40 of the families, while 60 reported no problem. Assistance with their electric bill was a common request by respondents in the *Additional Comments* section of this document.

Question 43. Have you every received food from a food bank or church?

Only 25 respondents reported receiving food from a food bank or a church. For those who had received food, several area churches were listed, along with three local food banks. Frequently, respondents were unable to name the organization they received food from and only could give a general street address.

Question 44. Do you think things will get better for you financially?

A great majority of the respondents think their financial status will improve and are very optimistic about their future.



Reasons given for the positive outlook included current and future employment expectations, education and spiritually-related beliefs. There were 28 persons currently employed or seeking work, six were going back to school and 26 responded with a combination of a belief in God, a special feeling, and/or that they were “good” people who would eventually prosper. Reasons given by those with a negative response include: not having enough money, poor health, no affordable housing, no job, no car, and all hope running out.

Safety/Social Cohesiveness

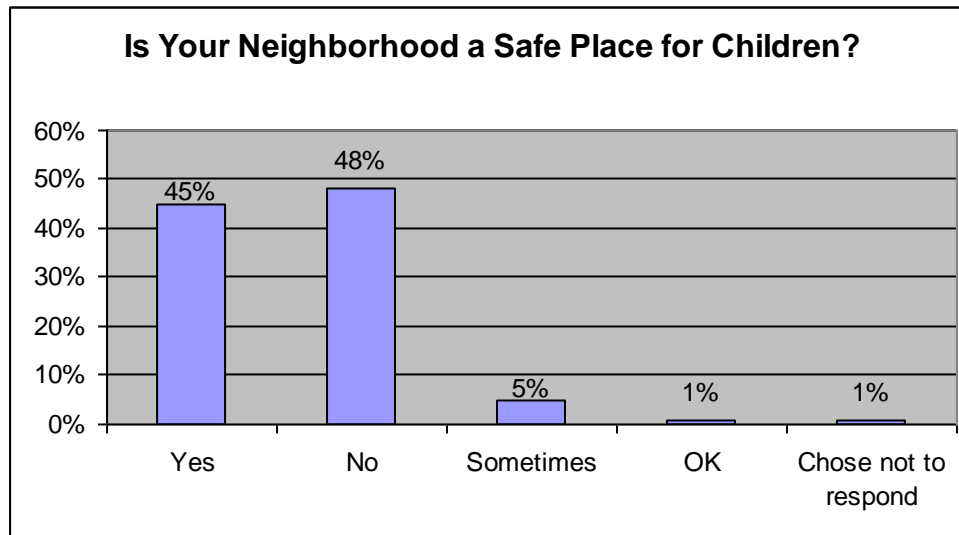
Question 45. Do you feel safe in your home?

The majority of respondents reported feeling safe in their homes. A total of 78 said they did, 15 said they did not, 6 said sometimes, and one said “OK”.

This perception contrasts with their feelings about the safety of the neighborhood, however.

Question 46. – Is your neighborhood a safe place for children?

Nearly half (48 of 100) do not consider their neighborhood to be a safe place for children. A number of responses listed in the “Additional Comments” section of this document reveal several areas of crime and safety that are of concern.



The following are additional comments included on the surveys either by the assessor or the family themselves. This information was used by the outreach team to link the families to needed services:

- Light Bill over \$1000. Needs help.
- Badly needs insurance; transportation; accessing financial programs
- Drug problems in my area
- Client has a total of 11 children, 9 of whom live with her. Children range in age from 2-16. She has no car. Her children need dental and glasses, which she cannot afford.
- Continually runs short of money to meet basic needs
- DeWitt is a very safe street; needs help getting car fixed; needs counseling for eldest son; needs Medicaid; children need to see dentist.
- Drug dealers in area. Needs counseling /doctors and intervention programs for daughter.
- Drug dealers, shooting, speeding cars, police chases. Needs housing, transportation, 4C and employment

- Father needs help with marriage counseling, wants kids to be more involved in activities, needs clothing and shoes for kids, needs book bags and school supplies, needs food.
- I need help with electricity. I need help with food sometimes.
- I need help with rent and electricity real bad. Need food, 4-C, clothes, etc. Having my baby any day now and don't know what to do.
- I would like, or rather I need, 4-C for my kids because I am a single mother of four and I am unable to work because I have no one to watch my kids.
- Lots of mischievous activity. Mom needs 4-C assistance to work; needs dental info for children and eye care and glasses
- Maybe government makes it hard to get assistance; car troubles
- Mom needs insurance, needs home repairs done, needs pest control
- Need more food; need Assistance with Low Income Housing; Children need FCAT tutoring
- Need furniture and beds for children and self; all furnishings including bedspreads, carpets, etc; needs appliances
- Need help with food and electricity. "Just need help everywhere." Would like activities for all children, and tutoring
- Need help with housing assistance
- Needs 4-C assistance
- Needs 4C for childcare; needs help in finding a job
- Needs 4C for children; WIC; needs Furniture; needs Medicaid.
- Needs 4C for child; needs groceries for children
- Needs 4C for youngest two kids. Would like older ones in cheerleading and football; needs dental for children

- Needs 4C. Neighborhood could be better. Bentley Street is a problem
- Needs assistance with electric and phone; needs clothes and shoes for son
- Needs bus passes for herself and daughter aged 13; needs employment assistance; needs dental care for children. Needs medical insurance for three daughters. Would like activities for all children, and tutoring
- Needs financial, medical and dental help for kids; needs help enforcing child support
- Needs help for 16 yr. old son when he gets out of jail; 13 yr old son needs counseling/mentoring; 15 yr old son needs insurance and dental work; all family needs eye exams and mom needs glasses; needs better transportation; needs utility assistance; mom needs medication for arthritis
- Needs help getting insurance for child
- Needs housing assistance. Two children need glasses
- Needs insurance for her and family; needs medical resources for son with allergies and eye exams for family
- Needs medical insurance for son; needs child support, needs car; needs help with 4C because they require 20 hours work but she is going to college and can't do both
- Needs tutoring help for two youngest children; family needs insurance; need medical help; Mother needs assistance learning English; need money to pay phone bill
- Needs utility payment assistance
- Too many drug deals, prostitutes and homosexuals standing out. Needs dental help for children
- Too much shooting each other; children need eye care and dental care.

- Too much shooting. Afraid bullets will come through walls or windows. Drug dealers.
- Late night life on streets. Housing is affordable, but no place to raise children. Needs help to pay traffic fines to get license
- Too much shooting in neighborhood, needs medical assistance and doctor for child, mother and son have self-esteem and anger management problems
- Too much violence
- Two youngest children need Medicaid
- Very hectic/guns & crimes
- Was receiving AFDC prior to move but lost it because she didn't know it had to be renewed; making less money; \$500 rent due date of this survey, she does not have it.

Results of the Developmental Assets Profile, 2007

SECTION I: INTRODUCTION

The Developmental Assets Profile (DAP) is a standardized tool developed by the Search Institute. It is a measure of assets, which are described as “positive experiences and qualities identified by Search Institute as being essential to healthy psychological and social development in childhood and adolescence. These assets have the power to influence young people’s developmental trajectories, protect them from a range of negative outcomes, and help them become more productive, caring, and responsible adults.”

The DAP is a 58-item questionnaire that takes 5-10 minutes to complete. It provides “a quick, simple, valid, and reliable self-report of the Developmental Asset categories currently being experienced by [11-18 year old] adolescents.” It is not designed to quantify the actual presence of any of the 40 assets, but rather to measure the self-reported experience of the assets, grouped into categories.

This tool is being used as one of the methods to evaluate the Parramore Kidz Zone project. This report covers the data collection, analysis, and results of the DAP, administered during the spring of 2007.

SECTION II: METHODS

Instrument:

The DAP contains 58 items, such as “I feel safe and secure at home” or “I express my feelings in proper ways.” Respondents use a 4-step response scale to rate how often each item is true. The scale steps are “Not At All or Rarely”; “Somewhat or Sometimes”; “Very or Often”; and “Extremely or Almost Always”.

Within the DAP are two standardized methods of scoring and portraying the reported assets: asset categories and context areas. Both methods group items into constructs such as Support, Empowerment, School, Community, etc. The total scale score on the DAP, as well as the scale score on each grouping, is the validated method commonly used to interpret the data.

The profile is intended to be self-administered by the youth, although it can be administered verbally to the youth.

Sample:

This survey was administered to 50 youths living within the boundaries identified by the Parramore Kidz Zone project. Most of the youth were between ages 11 and 18; 2 youth were less than 11 years old. The majority of the youth were male (81 percent) and the vast majority identified themselves as Black (98 percent). The youths were selected by the PKZ program administrator based on their geographic residence and their availability to be surveyed.

Data Collection:

Search Institute recommends self-administration of the profile via paper and pencil, and it requires a reading level of grade 5.7. The youth's median grade level in school was 8th grade; their actual reading level is not known. An attempt was made to have them self-complete the profile, but the results of those surveys clearly indicated that valid information was not elicited. Either the profile was composed entirely of the same response, or a "Christmas tree" pattern of rhythmic and non-meaningful answers was apparent. These responses were discarded and the profile was then administered verbally by members of the evaluation team.

The people administering the survey are trained in research and evaluation with backgrounds in social services and non-profit organizations. The youth were surveyed during PKZ activities or at the recreation and activity centers in Parramore. For each youth, the administrator would explain the survey and response scale, and then read each item, noting the youth's response. If the youth needed clarification on any item, the administrator would attempt to clarify. Because it was done interactively, the youth would often make comments about their responses or the items. This provided qualitative data that would not have been available if the profile were self-completed.

Data Processing:

The responses for the 50 surveys were entered into a scoring spreadsheet provided by Search Institute. The spreadsheet calculates the individual's scale scores and context area scores, as well as the Group Average (the focus of this evaluation).

SECTION III: ANALYSIS AND RESULTS

Discussion of Analysis:

It is traditional to report on the data analysis methods and statistical results before a discussion of the possible explanations for the results. However, in this evaluation, the analysis chosen was influenced by these factors and therefore needs to be discussed up front.

Even before the data entry was done, the evaluators were discussing a possible bias in the answers due to the administration method and the characteristics of the youth. Specifically, the youth's responses were exceedingly positive. In addition, the verbal and non-verbal responses did not always indicate candor on the part of the youth. Theories about this effect include:

- The people administering the profile were significantly older than the youth, and obviously not part of the neighborhood. The youth may have felt they needed to answer positively in order to “look good for the outsiders.”
- The youth may have wished to reflect positively on the PKZ program, and perceived that strongly positive answers would do this.
- The youth may not have fully understood some of the concepts such as “solving social problems” and “being given useful roles and responsibilities.” Rather than appear unintelligent, the youth chose to give a strongly positive answer.
- The youth may believe that they do “always” feel in control of their life, have good neighbors who care about them, and plan ahead and make good choices (some of the items on the profile). However, their reality may be far different from the population against which this profile was normed (youth in Oregon and Minnesota). Search Institute does not provide specific data about the percentage of the population that was Black, nor was there information about socio-economic status, therefore this is only supposition.

Because of this bias, the evaluators chose to use additional analysis methods to interpret the data. Search Institute agrees that this bias may invalidate their standardized interpretation.

“Adolescents with total asset scores of 55-60 would be expected to be quite exceptional individuals with, for example, very high levels of internal and external assets in virtually all areas. They would, for instance, have very high commitment to learning and are likely to have relatively high academic performance. Likewise, they are likely to be very involved in a range of extra-curricular activities such as music, arts, sports, clubs, or organizations and even demonstrate leadership in those contexts. ...If other information about the adolescent does not square with the extraordinarily high total score, the validity of the DAP might be called into question.”

The sample had 41 youth (82 percent) who were rated with an Excellent or Moderately High level of assets. An Excellent level “implies abundant assets in most if not all asset categories...[they] have low risk of all types of negative outcomes such as alcohol and drug abuse, antisocial behavior and violence, and school problems and academic failure, and excellent prospects for high academic achievement, thriving, and leadership.”

This description is not corroborated by the PKZ program administrator's knowledge of their circumstances and conditions nor by the youth's comments made during or after administration, nor by the observation of the evaluators. Therefore, evaluators looked for additional analysis methods to make the tool more valid. It is recognized that these additional methods are not standardized nor statistically validated. However, it is hoped that their usefulness in interpreting the data outweigh their lack of standardization.

In addition to the standardized scales, the evaluators developed two supplementary categories. In order to appropriately distinguish them from Search Institute categories, we will call them Health Council categories, meaning a category developed by the evaluation team at the Health Council.

Analysis and Results:

Search Institute provides standardized scales, which group items into constructs. They also provide interpretations of the result ranges. The categories and interpretations are presented in Table 2 and 3 in the Appendix. The Group Average results are in the table below:

Table 1: Group Average Scores on Search Institute's Scales

Asset Scale Categories	Group Average Scale Score	Interpretive Label from Search Institute
1. Support	25	Good
2. Empowerment	22	Good
3. Boundaries and Expectations	25	Good
4. Constructive Use of Time	21	Good
5. Commitment to Learning	24	Good
6. Positive Values	23	Good
7. Social Competencies	21	Good
8. Positive Identity	24	Good
External Assets (scales 1-4)	23	Good
Internal Assets (scales 5-8)	23	Good
Total Score	46	Moderately High

Context View Areas	Group Average Scale Score	Interpretive Label from Search Institute
Personal	23	Good
Social	23	Good
Family	26	Excellent
School	25	Good
Community	21	Good

Health Council category: Self Control

This category was intended as a grouping of items that reflected the youth's ability to keep control of their emotions and impulses, and to make good decisions spontaneously. This included the following items from the instrument:

- Q4: I avoid things that are dangerous or unhealthy
- Q11: I express my feelings in proper ways
- Q14: I deal with frustration in positive ways
- Q18: I plan ahead and make good choices
- Q19: I resist bad influences
- Q20: I resolve conflicts without anyone getting hurt

This category was perceived as being important because the youth appeared more candid about these items, and possibly had greater self-awareness about this aspect of their situation. The low scores on these items are reflective of this candor and/or awareness.

Health Council Category: Safety outside the home

There is no scale within Search Institute's model which focuses on perceived safety. However, this issue was strongly represented in both the case study interviews as well as the Household Assessment Surveys. Specifically, respondents had noted serious safety concerns outside of the home. Therefore, the evaluators developed a category to address this. It included the following items from the instrument:

- Q25: I feel safe at school
- Q46: I have a safe neighborhood
- Q55: I have neighbors who help watch out for me

Evaluators intentionally did not include Question 17, "I feel safe and secure at home", in this category. Data from all three evaluation methods indicated a distinct difference between perceived safety at home versus safety outside the home. This category is intended specifically to represent the environment outside of the family's home.

Below are the data for the Health Council Categories:

Health Council Categories	Group Average Score	Interpretive Label from Search Institute
Self Control	20	Fair
Safety outside the home	18	Fair

Both of these categories show a lower average score than the categories above. As noted earlier, the low scores on these items may be reflective of the youth's candor, or possibly a greater self-awareness in this area.

SECTION IV: DISCUSSION

The youth surveyed reported a high level of assets related to their family life. Items such as "I have parents who try to help me succeed" and "I have a family that gives me love and support" are indicative of this category. The context scale of Family is the only one that received a score rated as Excellent. While the previous discussion about deceptively high responses should be noted, it is nonetheless meaningful that this category rose above the rest. These youths perceive their families as their

strongest and most supportive asset. This finding could be helpful in making decisions within the PKZ program. Other programs or services may also find viewing the family as a strong benefit useful in building the other asset areas of these youths.

All other Search Institute categories fell within the Good range (21-25). However, three received a score of 21, the lower limit of this range. All other categories were 23 or higher, except Empowerment (x=22). The Empowerment category includes Question 46: I have a safe neighborhood. The youth answered this question with candidly low responses, which brings down the entire score of Empowerment. Removing this one question from the category brings the Group Average up to 24, and so this category will not be included in the discussion of lower asset areas.

The three areas that received a score of 21 were:

Asset scale: Constructive Use of Time

Asset scale; Social Competencies

Context area: Community

Constructive Use of Time is a category related to extra-curricular activities such as sports, religious groups, clubs, family time, and creative activities like music or art. This category can be directly influenced by the PKZ program. Because the program offers so many activities and recreational opportunities for young people, there is reason to believe that this scale will rise over time. Search Institute states "constructive use of time in these four basic areas of adolescent life, contribute to healthy development and well-being." There is a second possible benefit: if youth are engaged in positive supervised activities, then they are not engaged in negative destructive activities during that time. A constructive use of time leaves less free time in which to be destructive.

Social Competencies pertains to "planning and decision making, cultural competence, and social skills involving the ability to build friendships, resist negative peer pressure, and resolve conflicts peacefully." It is a broad construct and contains a wide variety of items. In an attempt to narrow to a more situationally-valid set of items, evaluators created the Health Council category of "Self-Control" that is related to Social Competencies.

As stated previously, the grouping of items for the Health Council category of Self-Control reflect an ability to keep control of emotions and impulses, and to make good decisions in the moment. Based on part of

the idea of Social Competencies, it adds one item about managing frustration and removes three items unrelated to restraint and decision making. The results show that this more specific grouping better reflects an area in which these youth have low assets. Search Institute states that “a reported lack of resistance and decision making skills...are strongly associated with teen alcohol, tobacco, and drug abuse and other risk behaviors.” By looking at both the standardized category plus the situation-appropriate created category, the evaluators hope to get a balanced view of this aspect.

The categories of Social Competencies and Self-Control are less directly impacted by PKZ activities than Constructive Use of Time. However, they are important assets for these youth and may show improvement because of the additional support, guidance, and direction offered by the program and its activities. In addition, PKZ or other programs operating in the neighborhood may choose in the future to have targeted activities to improve these areas.

Community, a Search Institute context area, is also broad and is described by Search Institute as “assets related to neighborhood and community support, empowerment, and positive use of time in the larger community.” Given the context of Parramore and the issues PKZ is trying to address, it is easily understood why this scale would be lower than other assets. Again, this category is less directly impacted by PKZ activities. However, the current attention on Parramore by city officials, law enforcement, and social services may combine with the work of PKZ to result in improvements in this area. The Health Council category of Safety would also be affected by these forces.

Conclusion

By going beyond the traditional interpretation of the DAP, the results show that in Year 1 of the project, the youth feel strong support from their family, but have lower asset levels in constructive use of time, safety & community; and self-control. This information may prove helpful in future PKZ planning and the lower asset levels may rise as the program continues.

APPENDIX

Table 2: Search Institute's Scale Score ranges and interpretation for both Asset Scales and Context Areas

Label	Range of Scores	Interpretive Guidelines
Excellent	26-30	Abundant assets; most assets are experienced strongly and/or frequently
Good	21-25	Moderate assets. Most assets are experienced often, but there is room for improvement.
Fair	15-20	Borderline assets. Some assets are experienced, but many are weak and/or infrequent. There is considerable room for strengthening assets in many areas.
Low	0-14	Depleted levels of assets. Few if any assets are strong or frequent. Most assets are experienced infrequently. Tremendous opportunity for strengthening assets in most areas.

Table 3: Search Institute's Scale Score ranges for Total Score

Range of Scores	Interpretive Guidelines
52-60	Excellent levels of assets overall...Low risk of all types of negative behaviors...such as alcohol and drug abuse, antisocial behavior and violence, and school problems. [Also related to] positive outcomes such as school success, thriving, and leadership.
42-51	Moderately high levels of reported assets overall.
30-40	Relatively low and it is unlikely that there are significant strengths in many asset areas or contexts... have significantly higher risk of negative outcomes compared to other youth.
Less than 30	Low, represent lack of reported assets overall and/or very significant asset depletion in one or more asset areas or context... greatly increased risk for negative outcomes, including a variety of risk behavior patterns, academic underachievement and failure, peer conflict, and antisocial behaviors.

References

All quotations, plus the information in Tables 2 and 3, are from Developmental Assets Profile, Group Assessment User Manual, (2005). Minneapolis, MN: Search Institute.

Case Studies

Case studies were identified as an important aspect of the evaluation because of the rich information provided when in-depth interviews take place. Studying these families over the course of the project will allow the evaluation team to qualitatively measure the impact of the PKZ program in the neighborhood.

Four families were identified by the outreach team as families that reflected the broad range of demographics and challenges faced living in Parramore. The evaluators requested families that would likely stay in Parramore for the duration of the study. All four families participated in the household survey and the interviewers studied their responses in preparation for the interviews that took place. The families were informed that their information would be confidential and asked for verbal consent to participate in the study. No incentives were given to these families to participate.

PKZ Case Study #1

On May 17, 2007, we spoke with Case Study Person 1, who will be called Celine (not her real name). She is an African-American woman, about 45 years old. She has four grown children: one son is deceased, one son is in prison, one son attends community college, and one daughter works in law enforcement in the Orlando area. She has many grandchildren, but cares for three at this time. Celine lives in Griffin Park, in the Orlando Housing Authority apartments. These are primarily row houses painted yellow with white trim. When we arrived, she was sitting on the stoop talking with someone. The interview was conducted in her living room, which was neat and well-kempt.

Celine has lived in Parramore for 31 years, much of it in Griffin Park. Asked to describe her neighborhood, she first notes how much the area has changed over time. She specifically mentions all of the drug activity that occurs there now. She believes they need more security and police enforcement, and notes that within the past few months there has been more of a police presence and it has helped. Issues relating to safety are mentioned frequently during our interview. In fact, as we are leaving she points out a drug deal occurring just down the block. Because safety is such an issue in her neighborhood, this was a recurring theme in our conversation.

One of the ways that Parramore has changed is the type of businesses located there. The large grocery stores, like Winn-Dixie, closed down years

ago, leaving only small convenience stores. She tries to avoid them because they take advantage of people. For example, they charge tax on food despite being challenged about this practice. They charge a fee to use the EBT card, and they charge extra when buying individual stamps. In addition, they sell beer and cigarettes to minors without checking their age. Because of these things, Celine tries to never shop there. Instead, she takes the bus to a major grocery store, or asks for a ride from someone. There are businesses in other parts of Parramore, such as nail places or beauty salons or restaurants, but she feels there are not enough in her area to be convenient for her.

When asked what Parramore will be like in two years, she said she believes that it won't actually be a neighborhood anymore, especially Griffin Park. She believes that much of the district will be demolished, and the residents won't be able to live there anymore. She was very cynical because this has already happened to some parts of Parramore, and she believes it will continue to happen. She places a lot of blame for this on landlords who own properties but don't live in the neighborhood. They do not care about the properties and they let too many illegal or improper activities occur, and they let the buildings get run down.

People will come to the neighborhood to do their drug business, and it causes a real problem for the residents. She used to call the police, but found that the police would come to her house rather than directly approaching the car and the people conducting the drug deal. This notified everyone that she was the person who had called the police, so she does not call the police anymore. The police say their policy is to go to the car directly, but that is not Celine's experience.

She no longer feels close with people in the neighborhood. She knows most of their faces, but doesn't know many of their names. "When I first moved here, it seems everyone worked together, and everyone watched out for each other's kids, and everyone disciplined each other's kids. Now the children have no respect, and no one knows each other."

However, based on her stories and our observation of interactions with various people who came to her door, she is certainly quite aware of what is happening and the people involved. Celine obviously cares about people, even though she is frustrated by her neighbors. We saw her giving advice to a pregnant teen, and quizzing a 5-year-old boy as to why he was not in school. She told a story of a neighbor who was a single mom with three children, living across the street. The mother had to leave very early each day to get to work. One morning, Celine saw case workers from social services go to the house, and she knew that the three

kids were there alone. So she quickly went across the street to speak with the social service people: she told them that each morning she watched the kids from her front door when the mother was gone, and did the same thing after school. She did this so the social services people wouldn't take the kids away from their mother. She wryly noted that it was a good thing they didn't ask her the mother's name, as she did not know it. "Well, she was so thankful, she has acted like my best friend ever since." Not everyone appreciates Celine watching over the neighborhood, and she has had many children and parents become angry at her. She noted that she tries to keep to herself more now.

She complained that so many of the residents don't participate and don't care about the neighborhood. An example was a mandatory community meeting for all residents. She saw people there she had never seen before. More than half the residents left the meeting when the mandatory part was completed, even though there were other guest speakers with useful information.

Celine used to help in a summer feeding program for children held at their apartment complex. One of the obstacles was the lack of organized activity for the children, as this was simply a food program. Therefore the program was not as successful as it could have been. However, they did feed a lot of children. She was unhappy that other parents would not come and help with tasks like mopping the floor, getting the food off the truck etc. She also worried that extremely small children would come by themselves for the food: their parents didn't bring them.

Another example of the lack of participation is the computer lab in the apartments, which no one uses. They will start a class with 25 people but only 10 will finish. She says the parents don't push their kids to participate, and they don't volunteer to help. So Celine just doesn't get involved anymore. She doesn't like to volunteer, because nobody else does. However, she is considering volunteering to help the PKZ program, because she sees how much they are doing for kids.

Every day she sees children fight when they get off the bus, especially the children in middle school. She used to try and stop the fights, but doesn't anymore. She noted that one can control the elementary kids a little more, but she doesn't interfere with the middle school or older teens. "If you hold one child back, then the other one will hit 'em. Then the first child's mother will come back and be angry at you for holding 'em down. You can't win." She says she now just watches the fight or yells at them to stop.

The three grandchildren for whom she cares are the children of her deceased son: a 7-year old boy, a 9-year-old girl, and a 10-year-old girl. These children are jointly cared for by Celine, the children's mother, and the children's aunt. The aunt has legal custody at this time but is not very involved in their care. The grandchildren spend a lot of time with Celine after school and on weekends. The boy stays more than the two girls. She noted that the girls don't like her rules, and there isn't as much to do with her as when they are with their mother. However, the boy really enjoys being there. Celine has a lot of board games and video games and movies, and wants the children to play with those. She strongly prefers to keep the children inside, not out in the yard or in the street. She will occasionally go to the park with them but she will not let them go to the park by themselves because it is not safe.

When her son was alive, she did not worry so much about safety. He lived there and she felt safer with him there. With him gone, she worries a lot more. She doesn't open her door at night to people, even ones she "who rob you." She used to leave her front door open to get a breeze, or sit out on the porch in the evenings. She does not do that anymore because she feels it is not safe. Similarly, she used to sleep with her windows open upstairs to get a breeze, but no longer does that. "It's not safe to have your doors or window open."

Celine mentioned repeatedly that part of the problem with the neighborhood was that there were no activities for youths. She believes that if they have more to do, they will get into trouble less. "They really need activities for them, or they'll go around breaking windows, throwing fireworks, things like that." She specifically wondered if there could be swimming lessons at the local pool. However, offering activities isn't enough. She has tried to enroll her grandchildren in activities before, but she was frustrated with the obstacles. Either the program was full; or they advertised the wrong day for enrollment, or she arrived and found that the children were not eligible or similar reasons. For parents that are not willing to get involved, these obstacles would prevent their kids from doing anything. "You have to bring it right to them, make it really easy to participate."

This summer, she has signed all three of her grandchildren up for the PKZ programs. Miss Toni came into the neighborhood on her bicycle and signed up every willing family that she could convince. She had flyers, she knocked on doors, and she stopped people on the sidewalk. Celine was impressed by Miss Toni's enthusiasm and commitment and thinks she is doing a great job. She has asked Miss Toni to keep the kids' activities in the Callahan area if possible, because it's easier to get bus transportation

there. She noted that she hoped part of the program was to provide bus passes for the kids. However, even if it doesn't, she will find a way to get her grandchildren to the programs. She was very appreciative of the PKZ activities.

Transportation is a big issue, as she does not have a car and she takes the bus everywhere (or gets a ride from someone). She has a very good understanding of the bus routes. The bus stop is at the corner, and she will take the bus to places where she is familiar. However, she will not take a bus if she is not familiar with the destination.

All three children are in school, but Celine is not as involved in their schoolwork. The children's mother is involved more with school than is Celine. The boy is in kindergarten now, (at age 7), and has been in kindergarten since age five. He seems to have a learning problem, and they are just now starting to get help from the county to address this. She is frustrated that it has taken the school system this long to act to help him, given that he has already spent two years in kindergarten. The oldest girl has been held back a grade, but will be allowed to move forward this year as long as she maintains her progress over the summer. If she does not show that she can keep up in the first ten days of school, they will put her back to the prior grade again. Apparently, she is quite talkative and this interferes with her learning. The middle child does well in school, and all three children like going to school. Celine noted that all three children would benefit from individual tutoring.

Celine told the story of how one of the girls got in trouble and received a two-day suspension. The school wanted the mother to come get her right away, but she was not available. In addition, the girl had a terrible headache (which she has regularly). Celine asked the school to let her lie down in the nurse's office until her mother came. The nurse agreed, but told Celine that she should have the girl go to bed earlier and then she wouldn't have headaches. Celine was offended that they thought the headaches were caused by the girl's bedtime.

Celine attends some of the school ceremonies and special presentations, when the children's mother tells her in advance and gives her a ride. One day the middle grandchild called her in the morning, and was receiving an award that afternoon. Celine wanted to go to see it, but couldn't contact the mother to get a ride. She was disappointed, and the girl was disappointed, but there just wasn't transportation available to get there.

The children's aunt currently has legal custody of these three children, although the mother has custody of some of the other 10 children. The

aunt is not really taking care of the children. She is involved with drugs and uses the support checks for her own purposes. Celine and the children's mother are working through the court system to try and regain custody. Celine told the story of how the social worker would come for a visit, and the mother would pretend that she was the aunt so that she wouldn't get in trouble for being with the children. When they went to court one day, the social worker was there and recognized the mother. So she had to explain the whole story to the judge. The judge said that he needed to hear the aunt's side of the story, and gave them 30 minutes to go and get the aunt and bring her to court. The aunt refused to come, but the mother recorded the conversation on her cell phone and played it for the judge. The judge did not punish the mother for pretending to be the aunt, but told her from now on she had to have another adult present during visits. Another story was when the social worker came to the mother's house for an inspection. The mother had the children for whom she did not have custody hide under the beds. At the end of the inspection, the case worker said she knew the mother had more children living with her, because there were too many beds and too much food. However, because she had not seen the children, she could not write it up.

It appears that the children's mother respects and appreciates Celine. Celine can't afford much food for the children on her fixed income, and the mother brings food for them whenever they stay with Celine. She also drives Celine places and won't accept gifts from Celine because she can't afford them.

Celine's son was very involved with these three children, plus all of the mother's other children. When he was sick in the hospital, the mother would take six or eight kids in her van to see him. They all called him "Dad", though he was not the father of many of them. He had ten children before he died. Celine mentioned that his father had 19 children before passing away.

Celine has lupus and has many symptoms because of it. She has a new doctor who is coordinating her care, and she tries to get all of her doctors in a small geographic area so she doesn't have to travel too far to get to them. Her father suffers from Alzheimer's and she has had difficulty finding a nursing home for him because of his outbursts against other residents. He is currently being moved to a home with eight people per room, and she feels this attempt will fail, as well.

Two of the children have frequent headaches. However, the aunt has the Medicaid information, so it is difficult to get doctor's care for them. The aunt is not releasing the Medicaid information, but after the court

changes custody of the children, they will schedule physicals. In addition, the children need dental care. There used to be a mobile dental van that would come to the neighborhood and all the children got their teeth cleaned and received very good dental care. However, the dental people were overcharging Medicaid, and got closed down. She feels they need a clinic in the neighborhood because so many people don't have healthcare. Another option for the clinics is to have specific days when one could bring children to the clinic for free. She sees many children not getting the healthcare or immunizations they need. She remembers when the schools would immunize the children, and believes that was a better system.

Celine was very willing to talk about her experiences and thoughts, and invited us to contact her again with further questions.

PKZ Case Study #2

On May 29, 2007, the person for Case Study 2 was interviewed. She is an African-American woman about 37 years old and will be called Tammy (not her real name). She has four children, all girls, ages 17, 13, 12, and 11. They all live together in Parramore. She has lived in Parramore since she was two years old, although occasionally they have lived in other parts of Orlando.

Tammy has seen Parramore change quite a bit in her lifetime. She says the biggest change is that so many buildings are gone now. It really feels empty to her, with all the buildings torn down, the apartments gone, and all the demolition that's occurred.

When asked to describe the neighborhood, she immediately says that it's not dangerous like some people say. She says "it's not the environment it's just some of the people." Because she has lived there for so long, she is very comfortable in Parramore. She says it's nice because people look out for each other. She knows the neighbors; they all know her and her children. When she goes into a store, everybody knows her and says hello. Many of the people have known her since she was a little girl. Some neighbors have moved away, but many have stayed or moved to another block, but still within Parramore. At one point in her life, she moved to the East side of Orlando because she thought it would be better, but it didn't feel right. So she moved back to Parramore, which really feels like home to her.

In discussing the businesses that are present in Parramore, she listed the Family Dollar Store and the main corner store, along with some

restaurants, hair and nail places, etc. There used to be major stores such as Winn Dixie, Woolworths, JC Penney's, but they all left decades ago. She noted that the main corner store is a place where PKZ could put up fliers and everyone would see them.

Asked what Parramore will be like in two years, she says she hopes they don't take away the main corner store. In general, "they shouldn't take away buildings and business, but instead they should improve what is already there." She feels it's a shame that they've taken away so many things. Without prompting, she says that she does not plan to leave Parramore or live anywhere else. This is her home; this is where she feels comfortable, where she wants to live. She told us a story of a friend who moved away because she thought she was better than everybody else, but it didn't work, and now she's back. Tammy thought the same thing when she moved to the east side of Orlando but she learned that she prefers to live in Parramore.

When asked about the safety of the neighborhood, she notes that "it's only some of the people that cause the danger. There are a lot of good people who live here and who get to know each other really well. The new ones are the people that don't really care about the neighborhood. You just need to get to know them better and need to reach out to them. People really need to reach out to each other."

Tammy has never had a problem with things being dangerous, because she makes an effort to stay away from danger. She doesn't go to places where it might be unsafe. When she sees a dangerous situation occurring, she just leaves. She is also working to teach her girls to identify dangerous situations and not get involved. Tammy has a friend who has two girls, but doesn't let the girls play outside much, and keeps them very close to home. Tammy believes her friend needs to let her girls get out and experience things so that they can learn how to take care of themselves. Otherwise they will become teenagers and start running with the wrong crowd and not know how to handle themselves.

Tammy uses the buses for transportation and knows every bus route. Sometimes the buses work well, but sometimes they run late. Also, they can break down on the highway and then one has to wait over two hours for another bus to come. This causes people to be late to work or late for appointments. There are many bus stops right near her apartment, and she knows how to get where she needs to go.

Three of her girls are in school. The two youngest girls love school. The middle one is not very interested in school, and her oldest has dropped

out of school for right now. She stopped during 11th grade. Tammy and Ms. Toni are working to get the oldest girl back into school again.

Her children attend the same school where she went as a youth. The youngest two children do very well in school and really like it. One of them has done well enough that she was promoted a grade. The other one excels in math, and "can do any math problem that you put down in front of her." The middle girl likes school too, but she wants to be in control and has an attitude with the teachers. Tammy has talked a lot to help her understand she has to stay in school and have a better attitude. The girl doesn't fight at school, although Tammy notes that she'll wait until after school, and then take the fight somewhere else.

In general, she believes that this is a good school. She notes that some teachers at the school are not there to help the kids. Instead, they are there to boost their own ego or to feel in control of other people. Tammy makes it a point to observe and monitor the teachers of all of her children, because some of them are not good teachers (although many are). "My kids are going to get an education before I go to my grave. I'm going to make sure that they make something of themselves."

Her children have participated in some school activities, such as dancing and a college tracking program. They've all had mentors for quite some time. She took the kids out of the regular school and went to a charter school for a time. She feels that helped because they received more individual help and one of her younger children really needs that one-on-one help.

We discussed parenting and her philosophy about raising children. She became pregnant for the first time at age 15 but that baby boy went to another family. She needed bed rest during her pregnancy, and so dropped out of school. Her mom never talked to her or her sisters about things, so she never had anyone to guide her. By the time she realized how the world worked and started talking to her younger sister, it was too late and her younger sister was pregnant at age 14. As a result of these experiences, she talks all the time with her girls. She says "you have to have a good relationship with your kids or you have no relationship and they have no one to guide them." She feels this way about all youth: they need someone to talk to them, to listen, and to guide them. It doesn't have to be their parents but someone needs to watch out for them and pay attention to them.

She notes that some parents just don't want to be involved with their kids and they don't have a relationship with them. The PKZ program is trying to

reach out so parents can see what is available. "Maybe if they can come and see what's going on for their kids, maybe they'll change. The children want to be involved it's just the parents who don't want to make an effort."

Tammy feels her sister's daughter is not going in the right direction because she is not getting enough guidance. Tammy is trying to push her niece in the right direction and give her someone to talk to. Tammy believes that kids really need someone to talk to, and they need a lot of guidance or else someone can manipulate them easily. We talked about what makes one child more likely to get into trouble than another. She says that it has to do a lot with the approach of the adult. You can't just get respect from a child. You have to earn the respect. If you approach the child wrong, they're not going to give you any respect.

She used to live in Griffin Park and felt it was a bad situation. The kids didn't have any respect and there was a lot of dangerous things going on, and nobody cared or looked out for each other. "Some of the parents there are just sperm donors, they don't have any respect for kids and they don't care about the kids at all." She saw adults not treating children with respect and not involved with their children, so the children didn't learn to have any respect for the parents. She left Griffin Park because she believed that her kids would either end up in prison, pregnant or dead. She repeated that although it's hard to make end meet where she is living now, it's better than burying the children or seeing them go to prison.

Her children have participated in many of the PKZ programs, and she overflows with praise for it. "Thank God for the program and Ms. Toni. Ms. Toni's programs are a huge help, we just wouldn't know what to do without her."

"Without her there would be no activities for the kids. Ms. Toni wants to get everybody involved. Before Ms. Toni, there wasn't any help for anyone in Parramore." Her children have participated in the Digital Youth program, flag football, dance team, cheerleading, and more. "If Ms Toni offers it, they will try it."

Regarding healthcare, she has Medicaid for the kids, but still waiting on the Medicaid card for herself. She needs to get allergy pills and sinus medication, because she gets terrible sinus headaches that are worse at night. Her children had good health at one time, but were diagnosed with asthma after living in Griffin Park. The kids are all seeing a dentist at the moment, but she needs to find an eye doctor for them. The eye doctors that she used to know no longer accept Medicaid.

When asked about economic assistance, she says that has applied for the earned income tax credit every time she has a new job, but she's never received it. In her mind, receiving it is linked with beginning a new job. She has food stamps at the moment, and commented about how helpful they are. She knows that she won't have them for a long time, but they really help right now. She used to get WIC for all of her kids and it helped so much. "I loved WIC, because even if there was absolutely no food in the house, I could take my WIC card and go and get cereal and milk and peanut butter and feed the kids." Getting enough food is one of her biggest challenges. "It's been so hard to feed them. The girls can really eat, and the older they get the more I struggle to feed them well."

She emphasized that she is going to stay in Parramore. This is her home, it's where she feels she belongs, and she intends to stay.

PKZ Case Study #3

On June 9, 2007, we spoke with Case Study Person 3, who will be called Henry (not his real name). He is an African American man about 60 years old, and has four grandchildren: a 15-year-old girl, two boys ages 11 and 12, and a baby girl who is five months old. The grandchildren live with their mother (his daughter) but they are often at his house. Henry's wife, who will be called Diane, takes care of the baby each day after she finishes work. Henry is retired from a local bakery but now works part time at a used car dealership. He pulled out some lawn chairs and we sat talked in front of his house.

Henry has lived in Parramore for 17 years, all in the same house, and he grew up in central Florida. Henry is a very active citizen in his neighborhood and told us numerous stories about the neighborhood and his efforts to keep it safe and clean for the people who live on the street. Our conversation kept coming back to all the issues of the neighborhood and the efforts he, his wife, and some neighbors make to keep it a nice place to live.

He lives in a single family house on a residential street, but there is a small apartment building across the street, with about 15 units. This building has been the source of a lot of trouble in the neighborhood. When asked how he would describe the neighborhood, he said it used to be a fine neighborhood, but things have changed. At one time the apartments were rented by mostly elderly people who were friendly and neat. However, they have been replaced by young people who do not care about the neighborhood and who have been involved in illegal activities,

including drugs and prostitution. Sometimes things have gotten better, and sometimes they get worse, but Henry keeps on trying to make it better.

Henry was unhappy with the person who owned the apartment building. He believes that they needed to do a background check on everyone. Because "when they would evict someone, their cousin would just come and move right in, and it would be just as bad." There is a parking lot at the rear of the building. Originally the police would patrol the neighborhood streets, but they would not go around to the back of the apartment building where the parking lot was located. This was where a lot of the illegal activity was occurring: stolen cars, drug deals, and prostitution. Henry repeatedly called the police to have them drive around the back of the apartment building. When the police started patrolling the back of the apartment building, the illegal activity was greatly reduced.

At one time, the house next door was rented out and was used as a house for prostitution. He warned the owner about it, but the owner refused to take control. The city eventually seized both the house and the apartment building across the street. This was about ten or fifteen years ago. They boarded it up and sold it. Henry noted that things were better for awhile, especially when there was no one living at the apartment building.

During one period, the drug and prostitution activity was particularly bad, and he had repeatedly called Drug Enforcement. The police sent a SWAT team to arrest a number of people. The SWAT officers were stationed on roofs in the neighborhood, around back of the apartment, and in the street. They arrested a number of people. Henry was glad, but also sad. He commented "It makes me feel bad. They are Black, and I'm Black. This shouldn't happen. It made me feel real bad, but if you don't act right, I'm going to call the police."

Henry stated that it is the younger people that are the trouble, and that older people are actually scared of their own kids. "I'm not scared of them, and I am going to keep getting after them if they're doing something wrong." He believes more police presence and more enforcement is the way to make things better.

Henry later tells a story which illustrates his courage. Apparently a man who lived in an apartment building behind Henry's house (not the one in front of it) broke down a portion of the fence in the back yard. The purpose was to easily go back and forth between the two apartment

buildings. This was obviously trespassing and Henry was unhappy about it. One day he saw the man cutting through the yard, and Henry told him not to walk through the yard anymore, but rather to walk around using the street. The man picked up a brick and threatened Henry. Henry immediately went inside, got a weapon, and told the man that he needed to walk around his property. The man called the police, who sent three squad cars. They talked to Henry and got the whole story, and then left without incident or further questions.

One story in particular illustrates Henry's neighborhood participation. People were driving too fast down the street, so he repeatedly called his City Council Representative. She came to his street to assess the situation. He showed her the volume of traffic and high speed, and pointed out that there were no speed limit signs anywhere on the street. She agreed with him and promised that signs would be erected, and they were. He feels this helped but they now need speed bumps.

Henry is very aware of the people and the activity on his street, and he is quick to report illegal activity. He said he has called drug enforcement hundreds of times to report people who don't belong in the neighborhood. Other ways he works to keep the street safe include:

- When there is an unfamiliar car, he calls on the tag number to see if it is registered in the neighborhood. Cars that don't belong there are ticketed and/or towed.
- He asked the owner of the apartment building to put up a No Trespassing sign so police could enforce it.
- He calls the police when the parties are too loud or out of control.

In addition to trying to keep the street safe, Henry also works hard to keep the youth out of trouble. He commented that these days, no one has time for the kids. "Back when I was growing up, there wasn't anything but time. You spent all day with your mother and your father, and they were always around. Now, no one has time for the kids." He and a few of the neighbors try to provide them with activities and keep them from doing what they shouldn't, but Henry comments about how hard it is.

He believes that the key to keeping children out of trouble is to keep them active. He said a number of times how important this is. By keeping their bodies active, it keeps their minds active and keeps the kids out of trouble. He has a lot of balls and other equipment around his porch. Whenever he sees his grandkids sitting around, he makes them go play ball, ride bicycles, play games or do something else active. "If you don't keep active, then you might get in with the wrong people. People will try

and make you do something, something maybe you don't want to do, and then you'll regret it. You have to protect yourself and you have to think for yourself." His grandchildren don't get into trouble because they keep so active and he keeps such a close eye on them.

He worked with the city to have them purchase some goal cages so that the neighborhood children could play sports. He secured the agreement of the church next door to use their parking lot when there is no service. Now they set up the goals in the church parking lot to have the kids play. He also asked his neighbor across the street to allow children to play in her yard, which is wide and opens right up to a parking area next to her. This gives a second play area, one with some grass.

Henry feels it is important to keep the street clean. The trash barrels in the apartment across the street were a problem. Residents would not take in their trash barrels, despite a zoning rule that they have to be inside by evening of the pick-up day. He kept reporting the problem, and finally they came and painted the apartment numbers on each of the trash barrels so it was apparent who was not taking in their barrels. Now all the barrels go inside. However, he is still frustrated by the amount of litter. If a barrel tips over and some trash spills out, no one from the apartment building will pick it up. It will lay there until a neighbor picks up, or it blows into his yard and he picks up.

We asked what he thinks will happen to the neighborhood in the future and he said he hopes that it gets better, but he didn't seem sure that it would. A woman down the street is starting a Neighborhood Watch, to try and have better control over the neighborhood, and he hopes that this will help. They had one in the past, but it didn't work out.

Henry calls the police whenever anybody is doing something wrong, and he knows the phone numbers of all of the police, enforcement agencies, city offices, and all the council members. He has a long list of phone numbers and he calls whomever he needs to in order to get things done. He obviously is really trying to make a difference in his neighborhood. He said "you gotta fight the battle; you have to keep on working to make it better."

Henry and his wife are also trying to make a better situation with the church located on the corner of their street. They are currently experiencing problems with the members of the church. Services start late in the evening and do not end until 10 or 11 P.M. They park all over the street and in people's yards and even in the middle of the street. Apparently they are also rude and disrespectful. Henry noted

that church members have permission to use the Hughes Supply parking lot, but they don't use it. The church is currently a Haitian Methodist group, and many of the members don't speak English (which adds to the difficult situation). There used to be a Baptist group that also used the church and Henry strongly preferred the Baptist pastor. The pastor was very involved in helping the community. He held food distributions and once a week had a clothing distribution, and they would have summer activities for the kids. The pastor would also walk around the neighborhood and invite people to come to church. Apparently the Methodists did not want to continue to let him use the church because his was a Baptist congregation. Henry believes this was silly. "Aren't they all serving God? What does it matter what they call themselves?"

Henry's grandchildren live close and come to visit all the time. We didn't discuss school as much because the children's mother is much more involved with their schooling. He did note that he monitors the boy's homework to make sure they are doing well in school. He has a computer in his home for the grandchildren to use.

The two boys are very athletic. They both play football for Callahan, and so they must keep their grades up in order to keep playing football. The team did extremely well this year. They could have gone to Detroit for a national championship, but the team didn't have the money to go that far. However, he was proud that they got all the way to winning in Tallahassee. His granddaughter does well in school and was part of cheerleading.

All three older grandchildren are enrolled in the PKZ programs for the summer. Henry and Diane feel that it's important to keep the children very active because it keeps their minds occupied and keep them out of trouble. Their mother keeps them enrolled in sports or cheerleading. Henry noted that he is very glad to have the summer recreation program, and he offered to help Ms. Toni recruit more kids by going door to door in his neighborhood or donating items to the program.

Henry had a heart attack about five or six years ago, but he just had a checkup a few weeks ago and he's in good health. He's still smokes cigarettes and takes blood pressure medicine every day. He has a good relationship with one of his doctors. The doctor will occasionally take Henry and a friend to a Florida Gator's game. They will meet at Cracker Barrel, where the doctor will buy them supper, and then they go enjoy the game together.

Henry and Diane were extremely willing to talk and share their experiences. Their involvement in the neighborhood is genuine and long-lasting.

Case Study #4

On June 12, 2007, we spoke with Case Study Person 4, who will be called Anton (not his real name). He is a Haitian man, about 35 years old. He has five or six children and lives with his wife and children in an upstairs apartment in Parramore. The apartment was cluttered with furniture and children's items but was well-kept. Anton was welcoming and willing to answer specific questions, but he was reserved and did not volunteer extra information or many details of their lives.

When asked the ages of his children, he told us their eldest boy is 10 years old. They also have a six-year-old girl, a four-year-old boy, a two-year-old boy and a six month old baby boy. They have lived in Parramore for four years and have lived in central Florida for 13 years since they emigrated from Haiti.

When asked to describe the neighborhood, Anton said that he doesn't have any problems, but that he keeps to himself and doesn't interact much with people in the neighborhood. He goes to work and then he comes home and spends time with his family in his apartment. He notes that other people say it is unsafe, but he himself has not had any trouble. He did make a comment that indicated he interacts with the Haitian community, and he does know his neighbors somewhat.

We asked him about the safety in the neighborhood for the children. He said the children do not go outside much. They are either in daycare or school or after-school programs. The two eldest children will occasionally play in the yard, but not often. Most of their time at home is spent in the apartment.

We asked if he was happy living in the apartment in Parramore and if he intended to stay. He said that he was happy enough there, but noted that he didn't need to live in luxury. He pays more attention to the spiritual aspects of life and not so much the material aspects. He felt the apartment and neighborhood were good enough. He did note that his family was not as satisfied as he was and they might like a more comfortable place. However, he feels it is more important to pay attention to God and the spiritual part of life.

Anton has a car and does not use public transportation. He works on International Drive and commutes there by car. He noted that the

commute coming home in the afternoon is bad but the morning is not so crowded.

When asked what businesses or shops he uses, he said he generally goes outside of the neighborhood to the Wal-Mart or the Cuban grocery store or other similar stores. There is a corner store across the street where he will buy small items like milk or toilet paper. He says that the owner of the store is friendly and nice. He would like to have a Save-A-Lot, Wal-Mart or any of the large stores right there in the neighborhood because that would be really convenient. However, since he has reliable transportation it seems that it is not an issue for him.

The 10-year-old son is in school during the day, and then goes to the Jackson Center for after school programs and activities. Anton said he is a very intelligent boy, and all of his teachers comment on this during the parent-teacher conferences. He does well in school and likes all of the subjects, and has had only one disciplinary incident. He did receive some tutoring a few years ago, and apparently it was helpful. Anton noted that one-on-one tutoring is always helpful for children. Anton feels that the school does a good job, and he has no suggestions for improvement. He was similarly satisfied with the Jackson Center activities, and noted that his son is often there until 6:00 P.M. with the various events.

The son plays football at Callahan and did well this year. He will be playing for Edgewater in a program for which his mother enrolled him. When he grows up, he wants to be a firefighter. Based on Anton's comments, it appears that his wife is in charge of the children's schooling and activities, as Anton was not aware of the details.

The six-year-old girl was recently in a Head Start program and will be going to elementary school in the fall. She is good at reading and apparently she talks a lot. The other children go to the Orlando Day Nursery. Anton was pleased with the Orlando Day Nursery although he commented that the children came home messy, wearing dirt, paint, sand, etc. However, he knows that is a result of children's play, and he didn't seem upset by it. At Orlando Day Nursery, they give the children lunch and snacks and supposedly breakfast. However, Anton and his wife make sure to give their children breakfast at home. They believe breakfast is a very important meal and they aren't quite sure the children get breakfast every day at the school. So they make sure to feed them before they go to daycare.

We asked how the PKZ program should let them know about new activities. He said that putting a brochure on the door or a calling on the

phone would be effective. They learned about the program from Miss Toni, when she went door-to-door handing out brochures and enrolling children. Anton said their 10-year-old boy is always calling Miss Toni with a question or Miss Toni is always calling their home. He views her and the program as a valuable resource.

We asked what makes one child get into trouble when another one doesn't. Anton says that what a child sees happen at home is an important factor, and that parents need to raise their children correctly. "Good behavior starts at home" he said, "and it's really important to teach them what God likes and doesn't like." He feels children need someone to talk to and someone to pay attention to them. "Too many parents let their children get away with things and they need to raise their children the way they're supposed to."

The whole family has health insurance through United Healthcare, from his wife's employer. Their dental insurance is through CIGNA. Therefore, they have no trouble getting healthcare when they are in need. They choose providers through the preferred provider listing. If they have a sick child, they call and are generally seen that same day. They might have to wait a month or two to get a regular checkup appointment, but if they are sick then they are seen promptly. He noted that they were all very healthy and that good health was a gift from God.

Regarding economic assistance, they have never signed up for food stamps because they are uncomfortable with the idea. He and his wife worry that there are strings attached to that money. His wife has WIC for the five-month-old, and they receive 4C financial assistance to help with the cost of childcare. When asked about the earned income tax credit he said in 2004 they received a check from the IRS in the middle of the year. He was happy because it seemed like extra money. However, when he filled out his tax forms, that money was deducted from his refund so it didn't end up being extra money at all. He was not familiar with the earned income tax credit outside of this experience.

When asked about suggestions for other programs, he said that he would like to see computer classes for adults. He has mentioned that idea to Miss Toni, but he hasn't heard anything yet. He also thinks that it would be helpful to have career advice and programs to help people find employment or to secure better employment.

Secondary and Program Data

The Health Council continues to search for and secure secondary data for all the key indicators described in the PKZ proposal. As mentioned earlier, collecting this data at a neighborhood level is complicated since Parramore is not a dedicated zip code community. The Health Council will work closely with the City of Orlando, the Outreach agency, and local, regional and state agencies to obtain neighborhood or zip code level data for the following indicators, all data points identified in the original grant for the PKZ project:

- a. Childcare - PKZ participants**
 - Childcare Subsidies - number enrolled
- b. Economic/Financial - PKZ participants**
 - Tax Services - number filing and total amount of refunds
- c. School Performance – Parramore youth**
 - Education/Academics
 - High school graduation rate
 - Absenteeism – actual number or rate
 - In-school/out-school suspension
- d. Extracurricular/Recreational - PKZ participants**
 - Summer Camps
 - Guide to Free and Low Cost Summer Camps for Downtown Kids on a Budget – CCSI produced
- e. Career/Job Preparation - PKZ participants**
 - Leadership Skills – Track and record description and participant info
 - Motivational Speakers- Track and record description and participant information
 - Goal-setting Exercises- Track and record description and participant info
 - Mentoring – number of participants
- f. Health Care - PKZ participants**
 - Medicaid/Florida KidCare – number enrolled
 - Mental Health - number seeking services and types of service
 - Dental Health – number seeking services and types of service
 - Immunization- number seeking services and types of vaccine
 - Teen pregnancy rate (birth rate)
 - Low birth rate
 - Infant mortality

g. Transportation Services - PKZ participants

- Detailed use of the van – Places visited, number of PKZ youth transported

h. Creative Arts - PKZ participants

- Painting – description of activity and number of PKZ youth participating
- Multi-media training– description of activity and number of PKZ youth participating

i. Housing - Parramore/PKZ participants

- Housing-Rehab
 - Homeowners Assistance
 - Building 300 new mixed residential units within two years. How many PKZ residents able to take advantage of this opportunity.
- Neighborhood clean-ups
- Shelters

k. Crime Rates – Parramore only

- Law Enforcement
 - Neighborhood watch- number established and number of PKZ adults/families participating
 - Drug/ Prostitution Free Zone – arrest rate
 - Juvenile arrest rate
 - Child abuse and neglect rate

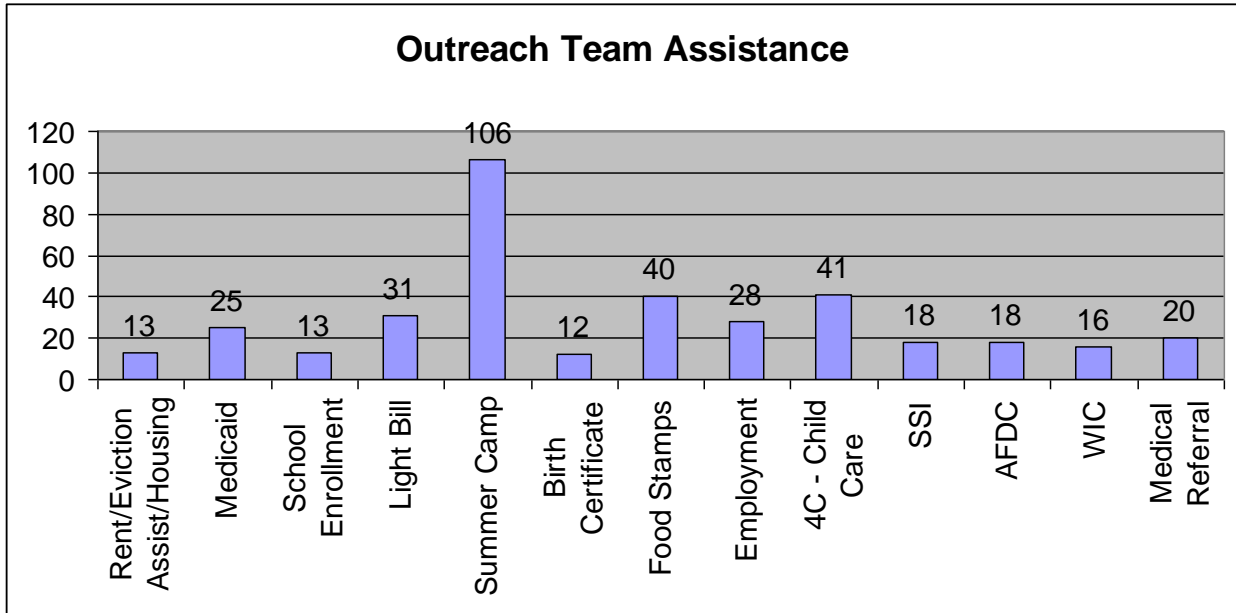
Outreach Team Program Data

In the first year of the PKZ project, CCSI was able to link 520 children to needed services and programs and work with over 200 families. This accounts for more than a quarter of the children who live in Parramore. CCSI's outreach team also conducted 100 household assessment surveys/in-depth interviews as part of the evaluation effort.

It is estimated that there are 1522 households with and without children in Parramore. The PKZ Outreach Team engaged 222 households with children in Parramore in the first year of the project, either offering support or engaging them as volunteers for the PKZ programs and activities.

Of the 222 families, the mother is the head of the household in approximately 90% of the families, and/or the main contact parent for the PKZ Outreach Team. Over 30% of the contact parents are employed. The Outreach Team recruited 12 parents to assist as volunteers in the PKZ programs and activities.

The following table show the types of assistance provided to the families by the Outreach Team in the first year of the project:



CCSI enrolled approximately 350 youth in summer programs in 2006, including the Mad Cow Theatre, the University of Central Florida School of Film, and the New Image Youth Center.

CCSI enrolled 73 children in homework rooms, providing tutoring, computer/internet access, snack, and supplies for homework/school projects.

CCSI provided emergency financial assistance to nearly 100 families in the first year. Food assistance was the greatest need with 65 families requesting assistance. Other needs included job placement, utility bill payment, housing assistance, transportation assistance and payment for medications.

CCSI held many initiatives, events and activities throughout the year:

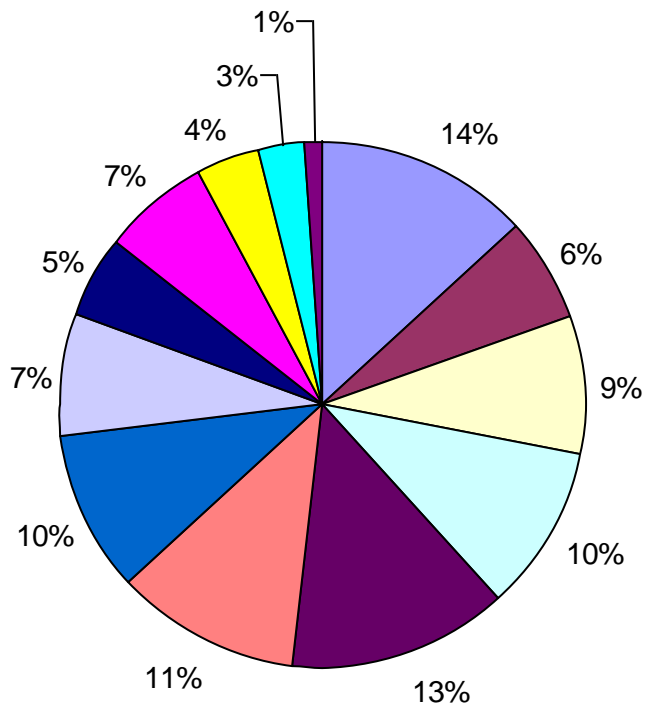
- Creation of the Teenz of Parramore Youth Advisory Council (TOP) – comprised of 12 youth, aged 11-17 who meet regularly and are responsible for planning events in the neighborhood in the following categories: community service, schools, and media. The youth

advise the outreach team as to what they want to happen in the neighborhood.

- Homework Rooms – approximately 82 children participated in three homework rooms, five days a week
- In the summer of 2006, 350 children were enrolled in summer camp
- Over 450 children participated in afterschool programs
- Over 70 children were enrolled in childcare and early learning
- Back to School Event – over 1 100 children and parents attended
- Writing Contest – over 350 youth participated in this summer project
- Fall Break Bash – 250 youth attended this event
- Dances – two dances were held with approximately 300 children attending
- Mentoring – connected 44 children to approximately 350 hours of mentoring
- Basketball teams – 69 youth participated on 4 teams
- Football camp – 175 youth participated
- Football Banquet – 80 youth and their families participated
- Football Team TV debut – 17 youth and 4 coaches participated in this media event
- Field trip to Universal Studios – 55 youth and 12 chaperones attended
- Thanksgiving Turkey Giveaway – 500 families attended
- E/A Tiburon Company Tour – 30 youth and 4 chaperones attended
- Christmas Party – 215 youth attended; 85 families in total
- Kids Day Out/Disney Wide World of Sports – 45 youth and 8 chaperones
- Head Start Family Day – 35 families participated
- Deter Gang Involvement activity – 50 youth attended
- Orlando Magic Dinner and Game – 28 youth participated
- Kickball Tournament – 55 youth participated
- Spring Break Movie Marathon – 89 youth attended
- Spring Bling event – 35 youth participated
- New Image event – 250 youth participated
- Dance Team/Troupe – 30 youth participated
- Pool Party/Swim Team Recruitment – 350 youth participated
- Grief Event – 50 youth participated
- Barbecue – 21 youth participated
- Job Fair – 172 attendees signed in; estimated attendance was much high

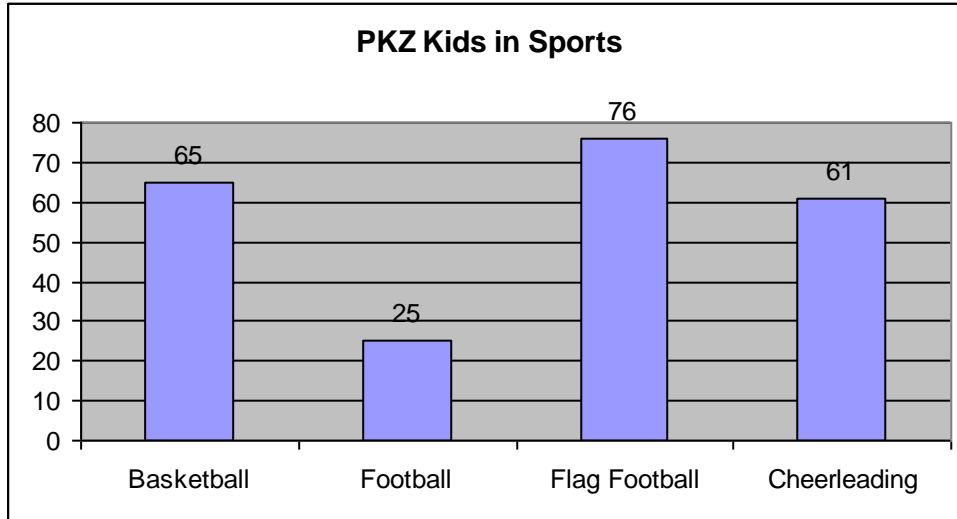
Of the 520 children enrolled in PKZ, 45% are girls and 55% are boys. The following chart shows the grade level of the PKZ enrollees:

Grade Level of PKZ Enrollees



- Kindergarten and younger
- 1st grade
- 2nd grade
- 3rd grade
- 4th grade
- 5th grade
- 6th grade
- 7th grade
- 8th grade
- 9th grade
- 10th grade
- 11th grade
- 12th grade

CCSI enrolled over 200 children in sports (includes team and camps) as depicted in the table below. For each child on a sports team, CCSI arranged for the sports physical and paid for the exam:



The Health Council will continue to work with the Outreach Team on collection of statistics on the activities and the referrals and linkages they make in the community. The Health Council will also work with them to develop a mechanism for measuring the level of satisfaction with the programs and assistance.

Secondary Data

School performance data for Parramore residents has been formally requested and will be incorporated into the evaluation when it is obtained. At this time, the data available is by school. Parramore residents are zoned to several different schools and do not have dedicated elementary, middle or high schools.

Housing:

The Health Council will be assisting the City of Orlando in conducting a consumer needs assessment for housing in the fall of 2008 for a different project. This information will be shared with the PKZ program and incorporated into this report.

However, the City of Orlando Housing Department has provided the following information about new and expanded programs geared to improving the housing situation in the Parramore area in 2006-2007:

- 23 rental units in the Parramore community have been rehabilitated this past year.
- An additional 10 units, owner occupied, have also been rehabilitated.
- A total of 7 new rental units are scheduled to be built in the 2006/2007 time frame.
- The City has provided down-payment assistance to twenty-one homeowners.
- There are currently two homeless shelters: Coalition for the Homeless and Rescue Mission
- The "Storefront Improvement Program" aims to improve the exterior of businesses in Parramore. To date, four store owners have received assistance, and an additional four property owners will be assisted in 2007/2008.

The Health Council will continue to work with the City of Orlando to identify data on the housing needs of Parramore residents.

Health:

Special data requests are being addressed with the State of Florida for census level data on the teen birth rate and the other health related indicators in Parramore. This data, once received, will be incorporated into this report. Florida CHARTS only provides health data

at a county and sometimes a zip code level, although the data is sent to Tallahassee at a census level.

Crime:

The table below shows the number of arrests, arrestees and charges for the following crimes in the Parramore area. This data was provided by the Orlando Police Department. The number of arrests means the total number of times a physical arrest was made. The number of arrestees means the number of people arrested. For example, if the same person was arrested on three different occasions, then this would count as three arrests and one arrestee. The number of charges is the total number of charges applied to that arrest. One person could be associated with multiple charges.

Crimes:

- Murder and non-negligent manslaughter
- Robbery
- Drugs/Narcotics
- Drug Equipment
- Prostitution/Commercialized sex offenses

The juvenile crime rate (arrests, arrestees and charges) increased significantly from 2004 through 2006.

	2004			005			2006		
	Adult	Juvenile	Total	Adult	Juvenile	Total	Adult	Juvenile	Total
Arrests	925	52	977	994	68	1062	845	96	941
Arrestees	841	46	887	888	60	948	775	74	849
Charges	1580	79	1659	1769	97	1866	1435	164	1602

The following table shows more detail about the juvenile crime in Parramore:

	Juvenile 2004				
Crime	Felony	Misdemeanor	Warrant	Other	Total
Murder and non-negligent manslaughter	2	0	0	0	2
Robbery	7	0	0	0	7
Drugs/Narcotics	24	13	0	0	37
Drug Equipment	0	3	0	0	3
Prostitution/Commercialized Sex Offenses	0	0	0	0	0
Total	33	16	0	0	49
	Juvenile 2005				
Crime	Felony	Misdemeanor	Warrant	Other	Total
Murder and non-negligent manslaughter	1	0	0	0	1
Robbery	15	0	1	0	16
Drugs/Narcotics	37	6	1	0	44
Drug Equipment	0	1	0	0	1
Prostitution/Commercialized Sex Offenses	0	2	0	0	2
Total	53	9	2	0	64
	Juvenile 2006				
Crime	Felony	Misdemeanor	Warrant	Other	Total
Murder and non-negligent manslaughter	2	0	0	0	2
Robbery	16	0	0	0	16
Drugs/Narcotics	60	11			71
Drug Equipment	0	1	0	0	1
Prostitution/Commercialized Sex Offenses	0	0	0	0	0
Total	78	12	0	0	90

Arrestees by Gender and Race- Juvenile 2004		
Race	Male	Female
White	4	2
Black	41	5
Oriental		
Indian		
Unknown		
Total	45	7

Arrestees by Gender and Race- Juvenile 2005		
Race	Male	Female
White	3	
Black	62	3
Oriental		
Indian		
Unknown		
Total	65	3

Arrestees by Gender and Race- Juvenile 2006		
Race	Male	Female
White	10	2
Black	84	
Oriental		
Indian		
Unknown		
Total	94	2

Arrestees by Gender, Age and Race 2004				
Age	Male	Female	White	Black
<11				
11				
12				
13	3			3
14	5	2		7
15	3	1		4
16	15	2	2	15
17	17	2	3	16
18	33	7	16	24
19	27	6	6	27
Total	103	20	27	96

Arrestees by Gender, Age and Race 2005				
Age	Male	Female	White	Black
<11				
11				
12	1			1
13	1			1
14	6			6
15	18			18
16	20		1	19
17	19	3	1	21
18	24	3	6	21
19	25	3	5	23
Total	114	9	13	110

Arrestees by Gender, Age and Race 2006				
Age	Male	Female	White	Black
<11				
11				
12	4			4
13	4			4
14	11	1	2	10
15	19		2	17
16	27		2	25
17	31	1	6	26
18	16	5	2	19
19	21	2	3	20
Total	133	9	17	125

The following chart shows the number of calls for suspected child abuse, neglect, and abandonment from the 32805 zip code to a State of Florida hot-line. We have requested a detailed report on the number of actual cases under investigation in this zip code:

Time	# of Reports Received
January 2004 to June 2004	324
July 2004 to December 2004	246
Total 2004	570
January 2005 to June 2005	283
July 2005 to December 2005	344
Total 2005	627
January 2006 to June 2006	352
July 2006 to December 2006	400
Total 2006	752

Additional crime statistics were available for the City of Orlando (includes the Parramore community), with all crimes increasing, except for forcible rape:

	Violent Crimes	Murder	Forcible Rape	Robbery	Aggravated Assault	Property Crime	Burglary	Larceny	Motor Vehicle Theft	Arson
2004	3,562	17	174	962	2,409	16,872	3,601	11,292	1,979	40
2005	3,881	22	165	1,204	2,410	18,226	3,882	12,175	2,169	42
2006	4,300	49	163	1,528	2,560	18,318	3,662	12,320	2,336	63

As stated earlier in the report, the evaluation team will continue to search for and obtain the secondary data during year two of the project, starting with data from 2005-2006 before PKZ started.

Summary and Recommendations

Health:

The majority of children are covered by some type of health insurance according to responses to the Household Assessment Survey. Medicaid was most often indicated as the coverage in force. In children under twelve years of age, chronic diseases were more prevalent. The most commonly reported health condition was asthma. Several of the families reported multiple health problems for their children. On a positive note, the majority of families are being seen by a physician for primary care who they are pleased with. On a lesser note, vision and dental services are not as readily available or accessible. The chief barriers identified to accessing care in the survey were: insurance issues (filing forms, finding a physician, making appointments), lack of a job and lack of money.

The Youth DAP survey contained limited information regarding health issues. Only three questions were identified as health-related. One wanted to know if youth were developing good health habits in general. The majority of the responses given were positive, quite possibly because there was no clear definition of "good health habits" given. The remaining questions inquired if youth avoided dangerous or unhealthy substances such as tobacco, alcohol and other drugs. Again, most of the youth responded positively that they did avoid such things. One limitation noted is several questions were more a measurement of emotional or mental health concerns, which is not addressed in any other component in this study.

Case study participants related stories of a variety of health issues and concerns for themselves and their children. Most primary care needs were being met for all. One primary care health concern was immunizations. Despite the Household Assessment Survey's results that an overwhelming majority of respondents (92 of 100) know how and where to access immunizations for their children, there are still children in the community who are unable to start school due to a lack of up-to-date shot records. According to Florida CHARTS, Orange County's 2004 (last date available) immunization rate for fully immunized 2 year olds was 84.6%, which was below the State rate of 85.3%. Attention to this matter is warranted since being able to enroll in school on time is important to the successful educational and social progress of a child.

The following are recommendations for the PKZ program to build upon based on the findings in the evaluation:

- Continue to partner with healthcare and social service agencies to bring “Health Navigators” and KidCare representatives to community sites in order to assist residents with filing for insurance coverage and navigating the system.
- Continue to partner with the Orange County Health Department and the Central Florida Immunization Coalition to increase the number of children receiving childhood immunizations.
- Increase partnership with healthcare and community based organizations (CBO) that provide health education on chronic disease management. Identify and/or provide sites in the community for educational sessions. Many CBO's will conduct needed training in an individual's home.

Mentoring and Teen/Youth Development:

A mentor can best be described as a coach, tutor or trusted counselor. Mentoring occurs when someone with experience or knowledge acts as a guide or advisor to someone with lesser experience or knowledge. From experience and even limited research, we know mentoring works.

Parents or other care giving adults are a child first teacher or mentor. A majority of parents and caregivers completing the PKZ Household Assessment Survey were very optimistic about the future success of their children. An overwhelming majority (98 and 91 respectively) believe they would both graduate high and college. Survey results reflect how important they are in their children's lives. They want their children to succeed and desire help to accomplish the task. This recognition is demonstrated by the response to a question regarding who is the adult that the child looks up to. The majority responded it was a parent or primary caregiver. Another question revealed that adult relatives are the most frequent caregivers when the parent is at work and the child is not in school. Survey respondents wanted help with their children and were overwhelmingly interested in a variety of youth oriented programs such as tutoring, sports, and mentoring programs and after school activities.

The results of the Search Institute's Development Assets Profile (DAP) for youth aged 11 to 18 years conducted during spring 2007 correspond with the findings above. The youth perceive their families as their strongest and most supportive asset. The majority of the youth were actively

looking for and participating in some type of recreational or sports related program outside of school. More structure positive activities can serve to assist youth in learning how to keep in control of their emotions and provide guidance on how to make good decisions for themselves.

Case studies participants in the PKZ program study proved to be very strong adults actively involved in the lives of their children and grandchildren. Each were able to quote a list of academic or sports related activities the children in their lives were involved in. All were dismayed at the number of youth committing crimes and firmly believed that good and safe activities for youth were important to helping them stay of trouble and learn to lead good lives.

Based on results from all sources it would indicate that the desire for a variety of academic and recreational extra-curricular activities is very high in this community. As such, the PKZ program is poised to deliver this very critical element. The program has the attention and trust of a great many in the community and the activities offered to date have been met with enthusiasm. Ways to bring in and/or establish more mentoring and youth development programs should be explored. The following are recommendations for the PKZ program to build on:

- Increase the number of mentors and mentoring programs offered. Reach out to local fraternities and sororities, particularly the alumni chapters as potential sources of mentors. Quite often these individuals are established business persons and this is a means to engage the business community also.
- Through PKZ explore the possibility of older teen acting as mentors to younger children. This could create an opportunity to work with the local school district and the program could potentially provide community service credit to youths. Community service helps to improve social competencies in youth and these credits are often a requirement for consideration for admission to college.
- Provide assistance in the form of organizational help to interested adults in the community willing to coach or lead a youth group. Assistance in the form of filing of necessary paperwork, securing space in a facility and helping with recruitment would be valuable.

Education:

Most of the parents/caregivers responding to the household survey indicated that their level of educational attainment is high school or lower. Finding ways to link the parents to programs which would assist them in completing school or going to college or other higher education should be pursued.

The majority of the parents/caregivers also indicated that their child is not receiving any assistance with homework and most indicated that support in this area is needed. Increasing the capacity of the homework rooms in Parramore would help meet that need.

Early Learning:

Parents or other care giving adults responding to the PKZ Household Assessment Survey reported spending the most time raising their children under five years of age. Acting in the role as their child's first teacher is a challenge for many. Further questions identifying the highest level of education of the adult providing care revealed many had not completed middle or high school. Regardless of their education, most encouraged and offered whatever support they could towards their children's educational endeavors.

While it is unknown how many of the youth participating in the DAP survey attended a childcare center or preschool, most held a positive view of school and a desire to do well. It could be argued more positive school-associated experiences early in life can only serve to enhance this desire and hopefully improve performance. This approach is possibly a way to address the wide age range variation reported in the survey results for those in grades K through 8. More preparation and taking advantage of preschool would equip children to do better in school.

Case study participants were also very concerned about their children doing well in school. During a case study interview session, a youngster of six years of age appeared and was asked if his mother had enrolled him in kindergarten. The case study participant was visibly dismayed that the child had not been enrolled yet. She made plans to encourage the child's mother to get started with the process. This emphasis on education of the young was evident among all the case study participants. Clearly, education is held in high esteem by the majority participating in this assessment process.

The ability to enroll children in a childcare center or preschool was greatly influenced by the financial resources available to the head of the household. Another important factor was the ability to locate a vacancy in a local childcare center or preschool. Noting the importance of providing early learning opportunities among children, the following are recommendations for the PKZ program to build upon based on the evaluation findings:

- Work with the City to increase the number of childcare and preschool centers available in the community.
- Develop ways to increase the number of 4C vouchers available to parents/caregivers. Assist parent/caregivers with completion of application forms.
- Partner with the local school district, workforce agency, churches and civic groups to bring adult education opportunities to the community. Present them in a positive manner to encourage participation.
- Encourage the City of Orlando to work with 4-C to be more flexible in their eligibility criteria so that parents who are in school are eligible for assistance, and not just employed parents.

Economics:

Based on the results of the Household Assessment Survey, the financial status of the majority of participants is fair to poor. For those who are employed, typical job titles were housekeepers, Certified Nursing Assistants and other low paying positions. A little more than half are employed, indicating a large unemployed population. The evaluation findings are similar to the findings in the most recent census data of 2000. Only a few who were employed have the ability to take time off with pay. For those who reported their employer will let them adjust their hours to deal with a family emergency, they still must work a sufficient number of hours to receive pay. Families are struggling and report difficulty paying utility bills and providing food for their children.

The youth economic viewpoint is unknown at this point. The DAP given to youths did not directly address any economic or financial issues. While a family's financial situation would undoubtedly have an impact on each youngster's viewpoint, there were no questions directly related to the issue.

The case study participants were very aware of their own and the community's economic and financial plight. Most related experiences of having limited resources and doing with less, while being very optimistic about the future. This is one of the reasons the PKZ program was important to them. It provided valuable activities and information for and about the children at no cost to them.

The following are recommendations for the PKZ program to build upon in this area based on the evaluation findings:

- Partner with Workforce to encourage more job-related opportunities for adults in the community. Utilize area churches and neighborhood centers for training and information.
- Engage seniors in the community by partnering programs geared for them. For example, Experience Works is a Department of Labor program that places seniors wanting to return to work at host agencies and paying their salaries directly.

Safety/Social Cohesiveness:

Safety is an ongoing concern for the Household Assessment Survey participants. While the majority (78 of 100) reported that they felt safe in their homes, the surrounding neighborhood was a completely different matter. This perception held true for the Youth DAP and case study participants. The majority of respondents do not consider their neighborhood to be a safe place for children. In the "Additional Comments" section of the Household Survey, there were several comments made related to the prevalence of drugs and crime and lack of safety in the community.

The attitude of youth participating in the DAP survey was similar to that of the adults. There were three questions concerning safety within the community included in the DAP survey. When the responses for these questions were extracted from the survey, they revealed that the youth did not feel safe in their neighborhoods. Similar to the adults most felt safe within their own homes.

Most of the case study participants were very concerned, vocal, and angry about the level of crime occurring in their community. All except for one had lived in the community for most of their lives and had witnessed first-hand the rise of crime and negative elements in the community. One long-time participant lamented that she no longer answers her door at night, even if she recognizes the person outside

because she is scared and does not trust people as much as she has in the past. To emphasize her point, she proceeded to point out a drug sale in progress to the interviewers.

Resident's concerns about crime are quite valid and understandable. For 2006, Orlando Police Department reported 96 juvenile arrests in the Parramore area. This is a 40% increase over the number of juvenile arrests in 2005. Youth arrested in 2006 were identified as being between the ages of 12 and 18, predominately male and African American. Despite these statistics, there still exists a great sense of community, especially among long-time residents. The desire is still strong to take back their community from those who are destroying it with drugs and violence.

The following are recommendations for the PKZ program in this area based on the evaluation findings:

- Continue to collaborate with the Orlando Police Department and support their programs to reduce crime and increase safety in the community.
- Continue to engage and recruit interested residents in the Children's Champion component of the program. This program can serve as a means to strengthen the community and provide residents with specific tools and strategies they can master and readily apply to day to day situations. Ongoing marketing efforts are necessary to educate the community on the program and keep them informed of its successes and progress.
- Collaborate with the Florida Department of Juvenile Justice/9th Judicial Circuit to increase and/or expand their programs in the Parramore community. The rationale for this recommendation is that this Department develops and administers multifaceted prevention programs that target at-risk students in grades k-12 who reside in high-risk zip codes such as Parramore.

Economic Recovery:

- Engage seniors in the community by introducing programs geared for them. For example, "Experience Works" is a Department of Labor program that places seniors wanting to return to work at host agencies and paying their salaries directly. The rationale for this recommendation is that throughout the community, many grandparents are the primary or secondary caregivers to their grandchildren under eighteen years of age. Often they have

inadequate incomes and an assortment of health issues. Despite this, they still look for ways to bring in additional income to help support themselves, their children, and grandchildren.

- Continue efforts to partner with Orange County Public Schools and the Agency for Workforce Innovation to bring in job coaching and job fairs for unemployed teens and adults in the community.

Next Steps

The evaluation advisory council will meet in November 2007 (and continue to meet quarterly) to discuss the evaluation methods and the findings from the first year and make recommendations for improvement in the methodology, if needed.

During year two of the project, the Health Council will continue to work with the City of Orlando, the Outreach agency, Orange County Health Department and other health agencies, public safety and the school district to collect, analyze and disseminate key secondary data indicators as well as continue to follow the case study families.

Additionally, the Health Council will work with the City of Orlando and the Outreach agency to identify a mechanism for measuring the Parramore community's awareness of the PKZ project.