

# TRAUMA INFORMED COMMUNITY BUILDING EVALUATION

A Formative Evaluation of the TICB Model and its  
Implementation in Potrero Hill

*HOPE SF Learning Center, July 2015*

## HOPE SF



HOPE SF is the nation's first large-scale public housing revitalization project to invest in high quality, sustainable housing and broad scale community development with minimal displacement of residents. There are four active HOPE SF sites – Alice Griffith, Hunters View, Potrero Terrace & Annex, and Sunnysdale. HOPE SF is led by the San Francisco Mayor's Office with dozens of public and private sector partners including The San Francisco Foundation and Enterprise Community Partners. The initiative has three primary goals: 1) improving outcomes for existing residents; 2) creating thriving, sustainable neighborhoods integrated within resources and infrastructure of surrounding communities; and 3) building quality housing and infrastructure. A central guiding tenet of the initiative is "resident development," which encompasses the strategies of community building, service connection and service coordination, all of which guide current efforts at each of the four active HOPE SF sites.

## HOPE SF Learning Center



The HOPE SF Learning Center is an applied evaluation and research center that prioritizes creating products that are practical and informative. Housed at the Health Equity Institute at San Francisco State University, the Learning Center brings together local academic institutions with the City, philanthropic partners and strategic consultants, to create a hub of knowledge generation and application for HOPE SF to ensure that the initiative builds on what works. Since its inception, HOPE SF has done a significant amount of evaluation, assessment and piloting work. The HOPE SF Learning Center integrates these activities into a formal structure to institutionalize and maximize these efforts and ensure they have significant impact. The Center produces reports, briefs and other materials for a variety of audiences: HOPE SF staff, public housing residents and community leaders, non-profit and City agency staff who serve HOPE SF communities, private and public funders, and various other practitioners and researchers in the fields of housing and health.

## BRIDGE Housing Corporation



BRIDGE Housing Corporation is a leader in the field of affordable housing with over 30 years of real estate development, property management and asset/portfolio management experience. BRIDGE's mission is to strengthen communities by developing, owning, and managing high quality, affordable homes for working families and seniors. Since inception, BRIDGE has believed that an apartment with an affordable rent should be a stepping-stone for advancement. Ranked among the most successful in the nation, BRIDGE has developed over 14,000 homes. BRIDGE serves as the Master Developer of Potrero Hill Terrace and Annex, which will redevelop 606 existing public housing units into 1,400+ mixed income, mixed use housing.

## **Acknowledgements**

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# Introduction

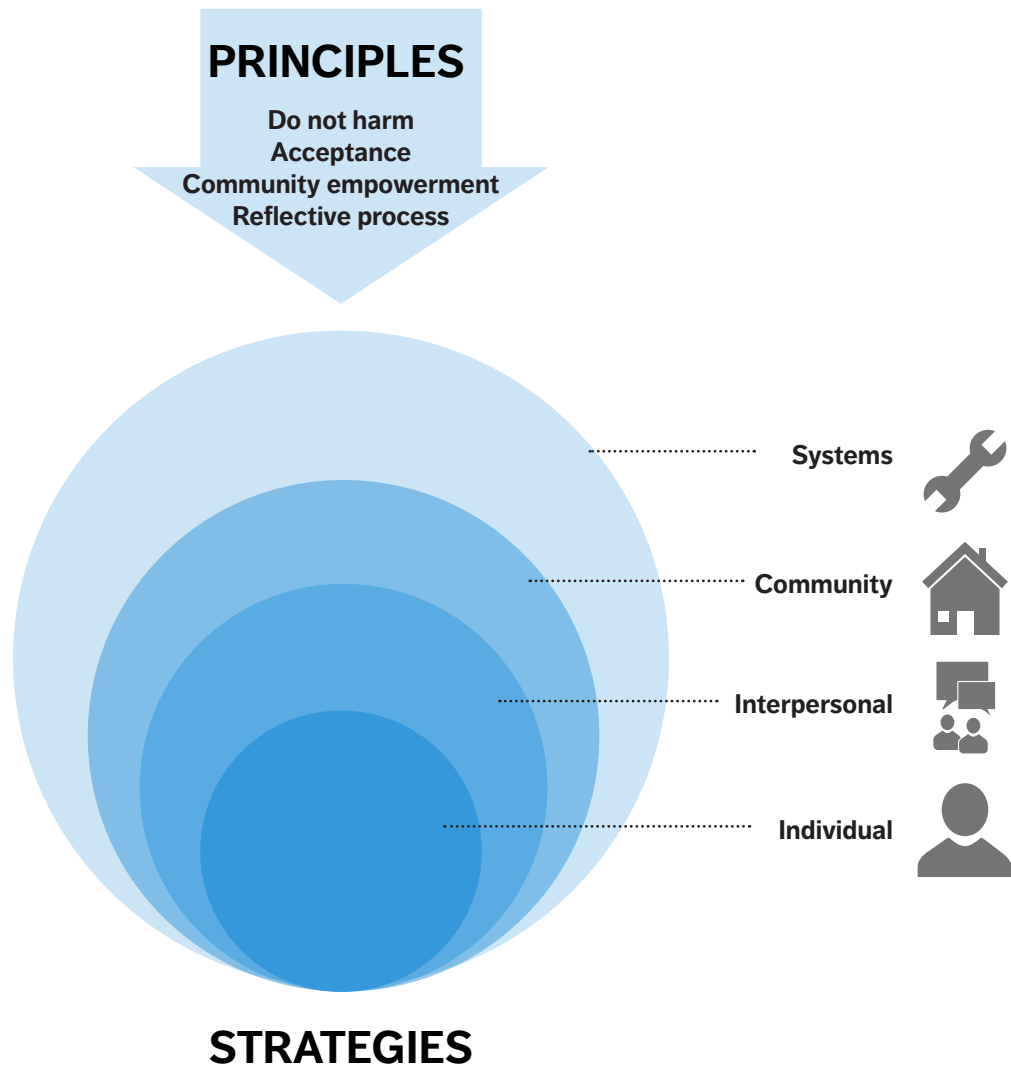
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Across the country, efforts to revitalize public housing emphasize the need for community building that strengthens the existing social fabric and readies community members to transition to new housing and mixed-income communities. However, these efforts are challenged by pervasive trauma experienced by residents living in public housing and low-income communities that results from exposure to the daily stressors of violence and concentrated poverty, as well as historic and structural conditions of racism, disenfranchisement, and isolation. For decades, traumatic experiences have been endemic in public housing communities in San Francisco, such as the Potrero Terrace and Annex (PTA). In 2011, BRIDGE Housing Corporation, a nonprofit affordable housing developer, partnered with the City of San Francisco to rebuild PTA as part of the City's HOPE SF initiative, the nation's first large-scale public housing revitalization project to invest in high-quality, sustainable housing and broad scale community development with minimal displacement of residents. Because the level of trauma and resulting chronic stress experienced by the residents of PTA public housing posed challenges to implementing traditional community building strategies, an alternative community building approach, one that acknowledged community and individual level trauma, began evolving. In 2014 BRIDGE Housing and the Health Equity Institute at San Francisco State University formalized this approach and developed the Trauma Informed Community Building (TICB) model.

At its core, TICB aims to increase the readiness of the community to sustain personal and neighborhood change. TICB strives to promote social cohesion and foster resiliency so that residents will have the capacity to adjust to changing circumstances, including the transition to a mixed-income neighborhood. Informed by the socio-ecological model, TICB acknowledges the interplay of individual, interpersonal, community and system level factors on residents' experiences, and aims to simultaneously target each of these levels in all aspects of community building efforts (Weinstein, Wolin, & Rose, 2014).

*TICB is an approach to community building that recognizes the everyday stresses in residents' lives, specifically the pervasive historical and current trauma brought about through community violence, generational poverty and racism.*

# Trama Informed Community Building Model



## Individual

- Provide opportunities for multiple interactions
- Ensure incentives and sense of personal reward
- Meet residents where they are
- Develop authentic relationships-set realistic expectations and never over promise

## Community

- Expand efforts through incremental growth, building from success
- Ensure that sustainability and quality is criteria for implementation and involvement in community efforts
- Provide visible, tangible activities that reflect community change
- Cultivate community leadership through support and skill building

## Interpersonal

- Model healthy behaviors
- Support peer to peer activities and interactions
- Provide opportunities that cultivate shared positive experiences
- Ensure all activities allow for personal sharing and mutual support

## Systems

- Reflect community voices and priorities to stakeholders
- Build partnerships for long-term investments in community change and effective service delivery
- Advance long term community vision and develop community wide strategy to reach goals

*\*Model from Weinstein, Wolin, & Rose, 2014*



## Evaluation Purpose

This formative evaluation of the TICB model and its implementation in the PTA public housing community was conducted between September 2014 and July 2015 by an evaluation team from the HOPE SF Learning Center. This evaluation was designed to support the further development of the TICB model as well as inform efforts to implement the model in Potrero Terrace and Annex and other communities.

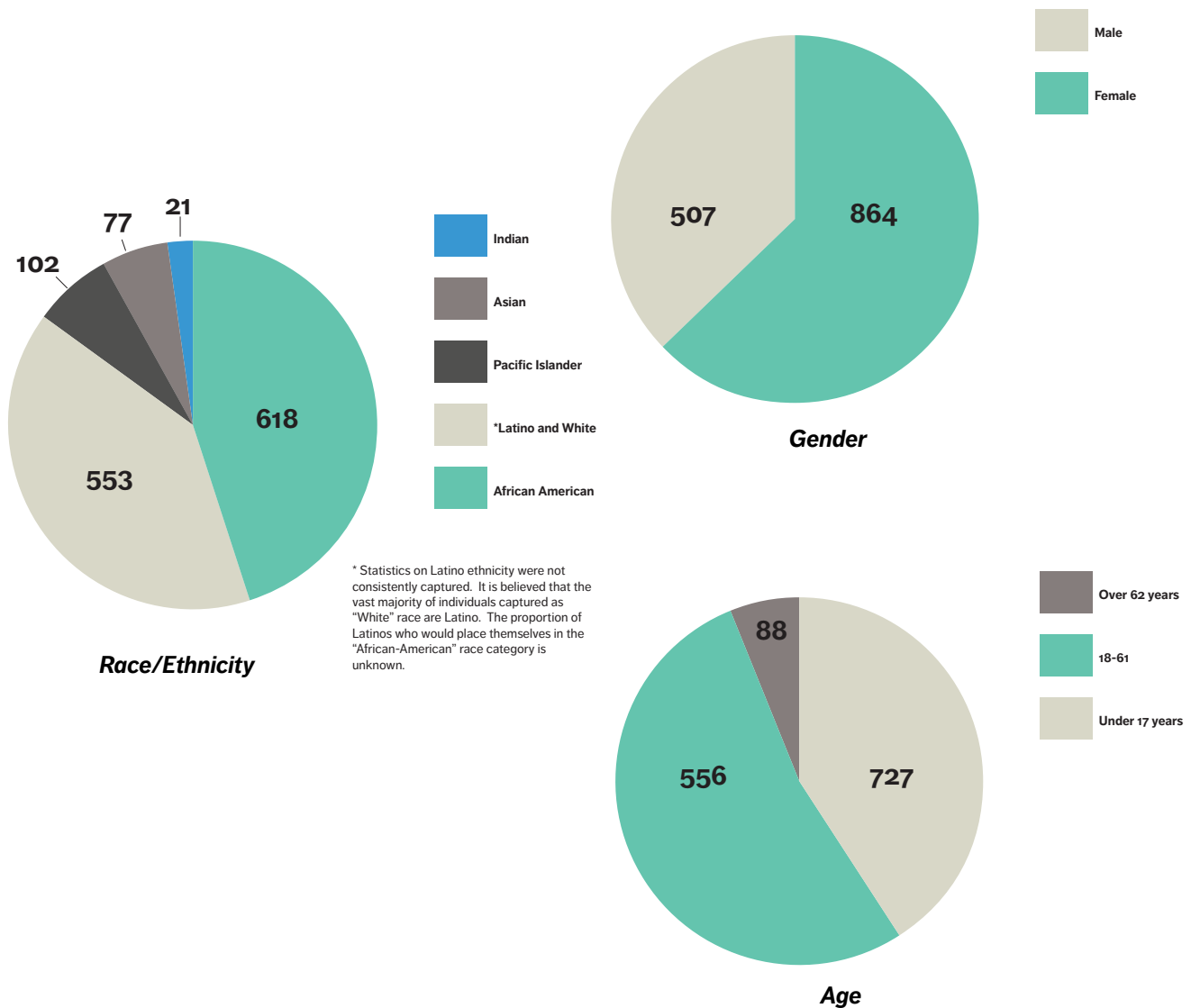
This evaluation seeks to examine the implementation and impact of the TICB model at PTA in order to:

- Understand the impact of ongoing TICB-informed programming through analysis of outputs and outcomes prioritized by stakeholder partners [see Appendix A].
- Identify facilitators and barriers to implementation of the TICB model in community-building work within PTA and the surrounding Potrero Hill neighborhood.
- Inform BRIDGE Housing's work to improve programming, and guide future program priorities and structures.
- Generate information to better understand the impact of the financial investment in helping to build community with and between public housing residents and residents of the surrounding neighborhood.
- Assess implications for replicability/reproducibility at other public housing communities, including the additional HOPE SF sites, and beyond.



As part of the City of San Francisco’s HOPE SF Initiative, BRIDGE Housing is leading the revitalization of the Potrero Terrace and Annex public housing site in partnership with the City of San Francisco and other community-based organizations, institutions of higher education and philanthropic partners. This revitalization effort includes the rebuild of 606 units of distressed public housing and the creation of another 1,000 new homes with a range of affordability, as well as community facilities and open space. While housing construction planning is underway today and construction has not yet started, the revitalization plan also focuses on bolstering existing social networks and services to improve the current social outcomes and lives of existing and future generations in the South Potrero neighborhood of San Francisco where PTA is located (BRIDGE Housing Corporation, 2014).

### Demographics of families living in PTA



BRIDGE's revitalization of PTA and the broader HOPE SF Initiative share a central goal of fostering community building among current public housing residents. In addition, BRIDGE envisions creating physical and social connections between residents of the South Potrero neighborhood where PTA is located and those on the more affluent north side of Potrero Hill, to bridge these now socially and geographically divided communities. BRIDGE's work to revitalize PTA employs intentional strategies to improve the larger South Potrero neighborhood by going beyond the boundaries of the public housing neighborhood (BRIDGE Housing Corporation, 2014). BRIDGE Housing's work at PTA is grounded in and informed by the Trauma Informed Community Building (TICB) model, developed by Weinstein, Wolin, and Rose (2014). It is important to note that the TICB model at PTA is evolving and is not fully implemented at this point. In particular, efforts to engage the system of providers working with PTA residents has not been fully realized at this point.

## Logic Model

A first step in this evaluation was the development of a logic model that lays out the principles, strategies, activities and outcomes of the TICB model at Potrero Terrace and Annex. The following illustration is an abbreviated version of a complete logic model which can be found in Appendix A. The four central TICB principles of 1) do no harm; 2) acceptance and meeting residents where they are; 3) support community empowerment; and 4) incorporate ongoing reflective processes, inform the TICB strategies at each level of the ecological model. These principles and strategies are then largely realized through community building infrastructure and activities. The ultimate outcomes that the TICB model aims to achieve are increases in engagement, connectedness, and readiness on the individual, interpersonal, community, and systems levels. The TICB model is an alternative to traditional community building models because the principles and strategies directly respond to the needs of traumatized communities. In addition, the outcomes go beyond just community building; they support community wellness as a whole.

## Community Building Activities

In Potrero Hill, the TICB model is largely realized through the implementation of community building activities that are open to both public housing residents and those in the surrounding South and North Potrero Hill neighborhoods. Since its implementation in 2011, there have been numerous additions to the community building activities. These activities take place in various locations around Potrero Hill, with most located in the public housing neighborhood. There are two distinct schedules of activities (Healthy Living Program and Garden Program), and each program publicizes its activities on a **monthly calendar** that is distributed to residents. For the Healthy Living Program, a monetary **incentive** is provided to participants in the form of a \$25 grocery gift card for involvement in six to eleven activities in a month and a \$50 card for 12 or more activities. For the Community Garden Program, a \$50 grocery gift card is offered for participation in six or more activities. The most an individual can earn in gift cards is \$100 per month. Multiple members (12 years or older) in a household can earn gift cards, in which a single household could receive hundreds in gift cards per month. The gift card incentives cost BRIDGE Housing an average of \$3,800 per month (approximately \$45,600 annually). Key to the incentive program is a monthly tracking sheet that holds stamps when

residents complete an activity. The design of the calendar and tracking sheets is intended to offer visual and concrete reinforcement of progress towards two key milestones: 6 activities per month or 12 activities per month. This visual approach provides immediate reinforcement and feedback of individuals' progress to goals.

Numerous community building activities take place weekly while other activities take place on a monthly or semi-regular basis, including the Rebuild Potrero Community Building Group and community-wide events. However, the majority of activities take place at the same time and place every week, with some implemented multiple times a week. The consistent and predictable scheduling of activities attempts to address the lack of stability and reliability residents in public housing may experience in their daily lives.

These activities fall into five major program areas -- Healthy Living, Gardening, Community Building, Leadership, and Healthy Generations. The specific community building activities implemented today include:

### **Healthy Living**

- Zumba
- Sober Living Group
- Walking Club
- Meditation
- Cooking/Nutrition

### **Community Garden**

- Garden Workday
- Adult and children garden classes
- Barrel Gardens

### **Leadership**

- SF Leadership Academy

### **Community Building**

- Monthly Community Building Group Meetings
- Community-wide events

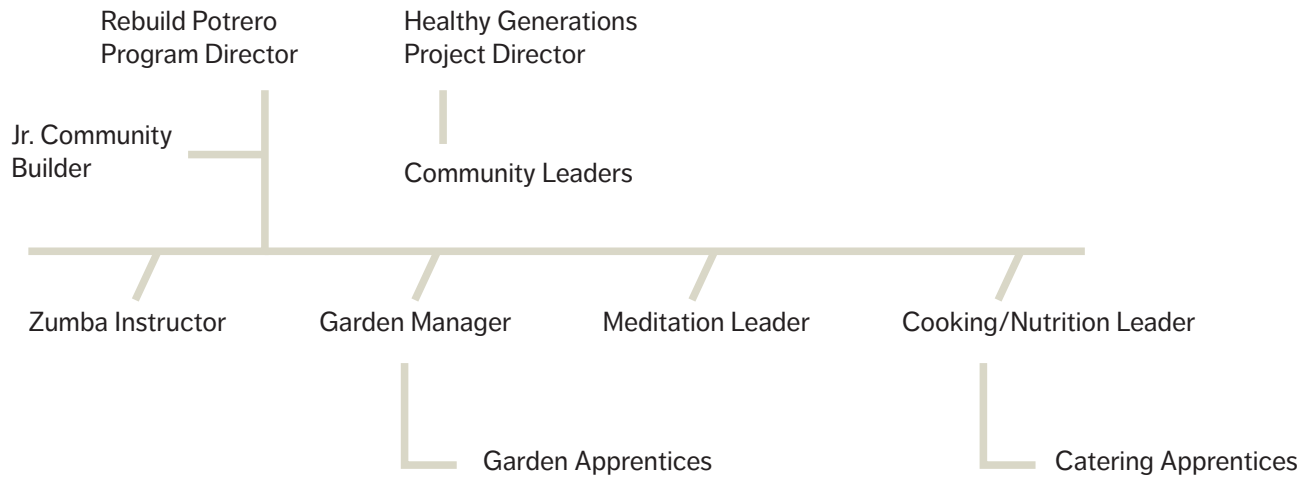
### **Healthy Generations**

- Family Play Group
- Family Laid Back Night
- Family Reading Group
- Walking School Bus to local elementary schools

## Staffing Structure

The implementation of the TICB model at PTA is overseen by the Rebuild Potrero Program Director. A Junior Community Builder, who is a resident, works directly with the Director to implement the community building activities, leading some individual activities and administering the attendance tracking systems and incentive distribution. The Director and Junior Community Builder are BRIDGE employees. For all other activities, staff either work on an independent contractor basis for BRIDGE Housing or are hired as employees by outside entities such as fiscal sponsors to lead specific activities, such as Zumba or cooking classes. A key strategy of TICB is supporting peer to peer interactions, so several residents work as Community Health Leaders leading the Healthy Generations activities; Apprentices work in the Community Garden activities; Catering Apprentices prepare meals for Healthy Generations; and residents serve as Activity Leaders for some of the Healthy Living activities such as meditation.

## Rebuild Potrero TICB Organization Chart



# Methods

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This evaluation was conducted by an evaluation team from the HOPE SF Learning Center at San Francisco State University in collaboration with staff of BRIDGE Housing between September 2014 and June 2015. This formative evaluation included multiple methods for examining the implementation of TICB at PTA including,

- 19 semi-structured interviews with Potrero Hill residents
- 17 semi-structured interviews with resident activity leaders, program staff and service providers
- Participant observation of community building activities
- Analysis of participation data and budget information
- 2 focused discussions about the concept of readiness

The evaluation team conducted nineteen semi-structured interviews with public housing residents and neighbors living in Potrero Hill who participated in one or more community building activities. All interviews were voluntary and took place on-site at various TICB activities between February and May 2015, ceasing when a saturation of themes was reached. Seventeen semi-structured interviews were also conducted by the evaluation team with resident activity leaders, Bridge Housing staff, and staff from community organizations and service providers serving PTA residents and the surrounding Potrero neighborhood. Interviews were conducted in English, Spanish, and Cantonese. These interviews examined residents' and providers' perceptions of community building activities and several intended individual and neighborhood-level outcomes regarding engagement, connectedness, and readiness.

**Table 2. Interview Respondents**

Interview Group	Description	No. of Interviews
Activity Participants	Participants in the activities who participate in one or more of the TICB activities	19
Resident Staff	Hired staff that lead TICB activities and are also residents of Potrero Terrace and Annex public housing	5
TICB Activity Staff	Hired staff who lead particular TICB activities	3
Potrero Hill Organization Staff	Staff who work for neighborhood organizations that serve the Potrero Hill community	6
BRIDGE Staff	Staff working directly for BRIDGE to do TICB work	3

Formal on-site participant observations of community building activities were also performed, in which HOPE SF Learning Center evaluation team members attended several community-building activities and noted interpersonal dynamics between participants, participants' interactions with staff, key attributes of the activities, and participant demographics.

Data on participation and program-related expenses were examined. This included examining participant attendance records at community building activities between 2011-2014, provided by BRIDGE staff. In order to understand the financial investments needed to effectively implement and maintain community building activities, line-itemized budgets and expenses between 2015 provided by BRIDGE were analyzed.

Finally, a considerable amount of effort went into refining the concept of "readiness" in the TICB model. First, a review of the literature about readiness was conducted. Numerous discussions were held within the Learning Center and with various partners to further understand readiness and how this concept fits into the TICB model and community work overall.

## **Limitations**

In an evaluation of this nature, there are some inherent limitations. First, the relatively small sample size of interviewees is not representative of the wider resident population. Interviewees self-selected by volunteering to be interviewed (convenience sampling) or by being recommended by a present staff member or another interviewee (snowball sampling). Additionally, interviewees did not include those who do not participate in community building activities, which likely limited our understanding of the barriers to participating in the programming as well as wider perceptions of the TICB-informed work at PTA.





The evaluation learnings bring together the results of the various data gathering methods together with the evaluation team's analysis. They are intended to inform the field that is interested in the further development of the TICB model as well as program staff who currently or may in the future implement TICB informed activities. The learnings focus on 1) **outcomes** of TICB and the effects of the community building activities on participants and the community; and, 2) **implementation** factors that have an impact on residents, the wider community and the systems that interact with the Potrero Hill community.

### **Outcomes**

- Participation
- Connectedness
- Health Improvement
- Safety

### **Implementation**

- Structure
- Incentives
- Conflict Management
- Resident Leadership

# Outcomes

The following learnings are focused on the effects of the community building activities implemented at PTA on the residents who participate. The evaluation interviews provided rich information about how engagement in these activities has a substantial impact on the lives of residents.

## Participation

*Participation of both PTA residents and greater Potrero Hill residents in community building activities grew substantially since the introduction of the TICB model.*

Participation in the TICB activities was examined for the years 2011 and 2014, based on data availability. Individual data sets were created from the available data for 2011 (January-December) and 2014 (January-November). An additional dataset was created for a six-month period in 2013 (July-December), but this is not presented here for purposes of clear comparison. It should be noted that the 2014 data represents 10-11 months, and as such should be considered an undercount of participation in 2014. Complete data for 2011 and 2014 are provided in Appendix B.

Participants in TICB activities were both PTA and greater Potrero Hill residents. Both of these groups were the focus of recruitment efforts by BRIDGE Housing with a greater emphasis placed on recruiting PTA residents. These efforts resulted in an increase in PTA resident participation over this time, from 23% of the overall PTA population participating in a community building activity in 2011, to 33% participating in 2014 (see Table 3).

In 2014 roughly one third of the participants in TICB activities were residents of the greater Potrero Hill neighborhood. The Healthy Living activities were particularly successful in engaging greater Potrero Hill community residents in that year. This was the area of greatest growth for community participation.

Residents of PTA comprised the vast numbers of new participants in the Community Building Meetings in 2014. It is likely that some of this increased participation in Community Building events is attributable to recruitment for the presentations of community revitalization plans.

**Table 3: Participation in TICB, 2011-2014**

<b>Total Participation in Community Building Activities</b>	296 people in 2011 729 people in 2014
<b>Percent Increase in Participation in Community Building Activities Between 2011 And 2014</b>	240%
<b>Percent of Community Building Participants From Greater Potrero Hill Area, 2014</b>	35%
<b>PTA Resident Participation in Community Building Activities, 2014</b>	458
<b>Percent of PTA resident population participating in community building activities.</b>	23% in 2011* 33% in 2014**

\*Total population estimated at 1280, per HOPE SF baseline report, 6/2012

\*\* Total PTA population estimated at 1370, per HOPE SF stats report, 3/2015

## Connectedness

*Community building activities foster new and meaningful connections between participants and are a catalyst for cross-cultural and multi-generational relationships.*

Most of the community building participants reported that they now say “hello” to fellow activity participants outside of the structured activities when they see them in the community. Many participants said they would not otherwise have greeted these individuals if they had not gotten to know them through the activities. Some participants have developed friendships and socialize with other participants after getting to know them. Many interviewees reported that these connections are some of the most important experiences to come out of their participation in the activities.

Respondents primarily mentioned new cross-cultural connections, which overcome language barriers and cultural differences. New connections have been made between public housing residents and those living in the wider Potrero community. These connections between the public housing and non-public housing residents have helped to break down stereotypes that participants had before these connections were made. This phenomenon is of particular significance in the context of the coming development of a mixed-income community that is likely to become increasingly diverse. In addition, some participants are connecting across age groups in the Zumba, gardening, and Healthy Generations groups. Participants report that the cross-generational connections have been particularly important within family groupings, and occur when a parent and children participate together in a fun activity.

Participants reported, and the evaluation team observed, that relationship-building between participants was fostered by activities that allowed for: authentic and natural conversation (like walking club and walking school bus), laughter and fun (such as Zumba), teamwork (like gardening), and family bonding (Healthy Generations family nights). Of additional significance are the activity leaders who create safe and relaxed space for these relationships to build organically over time.

***“Before, the people were first coming and they very upset a lot at each other, and after day by day, month by month, year by year, they seem a lot better because I think we always see each other.”***

***-Public housing resident***

***“I’ve seen the mix of the neighborhood. I know who the people are from public housing and I know who are the people from the neighborhood and I’ve seen the integration of the two. You know, and I’ve seen people come from other places like myself. And so there’s a lot of different people now, you know, and everybody seems to be okay with it. Everybody just enjoys it.”***

***- Greater Potrero Hill resident***

*Children and youth, and non English-speaking adults face ongoing barriers to engagement in community building activities, creating a missed opportunity for including these key segments of the community in efforts to foster connectedness.*

Young people are often unable to participate in the community building activities because of activity age requirements or because they are not accompanied by an adult. This is mostly noted in Healthy Generations activities. The timing of the activities is also a barrier, as many children and youth are in school during these times. In addition, there are no youth-specific community building activities. Many respondents identified activities for children and youth as a community priority that is not currently filled by existing community building activity offerings. In addition, non-English speaking adults face barriers due to difficulty learning about activities and difficulty accessing the activities once they are aware of them. The community calendars are published in English and Spanish, and Cantonese-speaking respondents reported that many Chinese community residents typically throw away the activity calendars and are unaware of the activities available to them. There are also no Chinese or Spanish-speaking resident staff or Peer Leaders, so this rich source of recruitment is not accessible to non-English speaking adults. It is not clear how the Samoan population at PTA is impacted as Samoan community members' perspectives were not captured in the evaluation interviews.

***“It’s not like me just walking, because I can walk my dog by myself, and I do that. But to walk with other people through the neighborhood is another kind of health. It’s creating health in the community.”***

***- Greater Potrero Hill resident***

***“As far as the community building, every meeting I see the same individual. I’m just going to say, the younger community, they’re not attracting the younger community... that’s half the Hill. You have young mothers, young families living together, but you don’t see them at these meetings. And then when that day comes, what’s going to happen?”***

***- Resident staff member***



***“You meet a lot of different people from different races that live up here in the community with me that I would never know if I wouldn’t come to these activities. I probably would have seen them but I wouldn’t have known them, but now I know them.”***

***- Public housing resident***

## Health Improvement

*Mental and physical health improvements experienced as a result of attending community building activities matter to participants and foster ongoing engagement.*

Several respondents reported that since beginning to participate in the community building activities, they have noticed positive shifts in their mental and/or physical health, which motivates them to continue their attendance. Participants shared about improved self-esteem, reduced depression, greater sense of relaxation, and greater sense of happiness. In terms of physical health changes, a few individuals reported changes in diet (including eating more fruits and vegetables, and less red meat), getting more exercise, losing weight and maintaining weight loss, and experiencing reduced asthma symptoms. These reported physical health improvements oftentimes directly impacted their mental health and led to feeling a sense of personal reward. Still, for many participants, activities that incorporate physical activity, fun and/or feeling relaxed encourage ongoing engagement. In the current version of the TICB model, individual health behavior outcomes are not the central objective of implementing TICB approaches. However, the reported physical and mental wellbeing improvements should be noted as a significant consequence of the implemented activities as well as a critical motivation for ongoing engagement.

In addition, the participation data show that the community building activities that incorporate physical activity are the access points of greatest uptake for residents of the wider Potrero Hill community. It is noteworthy that both the Zumba class and the walking club offer participants the benefits (noted above) of physical activity, without a competitive context or requiring much interpersonal negotiation. This suggests that non-competitive, low-stress, group exercise creates an environment that perpetuates internal personal reward and nurtures cross-cultural and cross-socioeconomic connections.

***“I was depressed because my sister died a year ago, and hadn’t been out of the house or nothing, because I’ve been depressed. And then I start exercising and I feel much better doing Zumba and the walking. I feel more energetic and less depressed. I feel I can do things because I used to come up the hill, and I kept losing my breath and had no energy because I was so overweight. I weighed like 200lbs. So I think my health life is much better. It’s fantastic actually.”***

***- Public housing resident***

***“[the garden class has] taught me a lot about eating right and especially the gardens and the vegetables and the soil, they taught me a lot of stuff I didn’t know.”***

***- Public housing resident***

## Safety

*“Zones of Safety” may exist around community building activities, while community safety is a significant challenge to participation in activities.*

Respondents reported they feel a sense of safety while at community building activities, even if the immediate surroundings are unsafe. For example, participants of the Healthy Generations gatherings who feel unsafe traveling between the activity and home described themselves feeling very safe and protected while at Healthy Generation activities. This sense of localized zones of safety seems to derive from a combination of factors including the connectedness between participants, the location of activities in neutral territories, and the presence of consistent staff. This phenomenon was described for activities that take place at set locations as well as for the walking school bus and the walking club, which seem to provide mobile zones of safety for the participants. It is possible that the extent to which participants perceive their activity as being protected from danger is also related to the cohesion that exists within the group itself. This phenomenon was particularly striking in the walking club, where there seems to have developed a zone of safety around the walkers, providing protection from “drama” and violence, even while walking through the same streets perceived as dangerous in other moments.

In contrast, more general concerns about safety were identified as a challenge to engaging residents in the community building activities. The Terrace and Annex neighborhoods within public housing at Potrero are considered to be two separate neighborhood territories. Ongoing violent conflict between the two creates a divide that residents are often reluctant to cross. As a result, some residents felt apprehension about attending activities outside of their side of the neighborhood, which presents a barrier to their participation in a variety of activities. Further, activities that take place during the evening or outside the immediate public housing are also challenging, due to safety concerns and travel distance, and some interviewees said these activities may be viewed as more unsafe. Some interviewees shared they do not attend the evening or further away activities unless they have a ride or can drive themselves there. Others shared that they make sure to walk to the activity with other participants, which makes them feel safer.

***“I look at the other people who have started coming to the walk, and realizing how much they put some of their fears - how much it’s helped with their fears of going out into the neighborhood and walking around and meeting new people. ‘Oh. I just heard a shooting last night, you know.’ That’s what somebody said. They heard a shooting last night, and then they get up that day and then like, ‘But I’m going to go to the walk, because I know we’re going to be safe on the walk.’ And so, that slowly changed people’s psyches.”***

***- Resident staff member***

# Implementation

The following learnings focus on aspects of the implementation of the TICB model at PTA. Interviewees had much to say about the processes, structures, and key program elements that guide the community building activities.

## Structure

*The routine of the weekly activities assists in providing a sense of structure and consistency for residents.*

Participants noted that certain structural aspects of the activities made it easier for them to continue to participate, such as location within or close to the community, time of the activity, and the free cost to participate. Participants report that these activities have become part of many of their weekly routines and that the consistency of the schedule makes it easier for them to attend. This predictable and stable schedule embodies the TICB central aim to “de-escalate chaos” that may be present in some residents’ lives. Participants also felt comfortable with who is leading the activities making it easier for them to regularly attend. Furthermore, activities reflect the central TICB principle of “meeting residents where they are” which creates more inclusive environments that intentionally encourages and welcomes all levels of skills and knowledge. Participants responded to this approach and felt that they are met on their own terms and are not asked to conform to structures that are forced upon them. They commented that there was “no judgment” at the activities, and the environments created by both staff and other participants always felt fun, easy-going, and relaxing.

At the same time, PTA resident participants reported that distrust of programming persists among their friends and neighbors who do not participate in activities in Potrero. Interviewees speculated that the history of inconsistent programs in the community has resulted in a barrier to engagement for many residents who may not trust that the TICB activities will persist over the long-term. New and ongoing services and programs can work to acknowledge a history of distrust stemming from inconsistent or unfitting services in the community and the challenges that history poses in building trust to engage participants from the community.

***“I think it would have to do with the consistency. They become familiarized with each other. They know it’s their space. It’s their group in other words. They know who’s or about who’s going to be there, what families, what kids, just that connection. They know that’s what they do every week.***

***- Resident staff member***

*Community building activities, in particular the walking school bus, provide an access point for institutions to connect with PTA residents on their terms, while other system partners need more clarity about how to connect with the TICB work at Potrero. Some systems partners are not aware of the trauma informed approach guiding community building at Potrero.*

The Walking School Bus at PTA is led by Resident Peer Leaders in the Healthy Generations Project. Peer Leaders walk throughout Potrero public housing and pick up children and walk them as a group or “walking school bus” to either Starr King or Daniel Webster Elementary Schools. Staff of local schools and school groups like the Parent Teacher Associations (PTAs) have begun to walk with the Walking School Bus to meet the children and parents who live in Potrero public housing and build relationships with that community. School staff who have had the opportunity to participate in the Potrero Walking School Bus see this as an opportunity to engage families that normally are distant or isolated from school services. The Walking School Bus is the most primed access point for education related institutions because the activity directly relates to a specific topic and incorporates a service, but other activities are not developed in such a way for institutions to engage in.

Other organizations have a desire to partner and engage in the TICB model’s implementation in Potrero, however some staff of organizations were unaware that they could participate in this work or what their role could be. These organizations are motivated to be more involved because of the redevelopment and understanding that community building has significant implications for their work with the Potrero Hill community. In addition, some of these organizations have ideas of how they would like to partner with BRIDGE and the community building work, but are unsure of how to start this partnership or engage with the work. Interviewees desired an appropriate “access point” to the community -- like those who have participated in the walking school bus -- as a way for system level organizations to engage in TICB and the revitalization of Potrero.

System organizations interviewed were also not familiar with the trauma informed approach being used to guide the community building work in Potrero Hill. There was some understanding that activities were happening on a regular basis with the goal of bringing people together, but those interviewed were not aware that there were over-arching principles informing the structure and implementation of these activities. One system partner commented that their organization wants to adopt a trauma informed approach in their work, but did not know that the community building activities in Potrero use that approach. This could be an opportunity for collaboration and learning for organizations who want to use similar trauma informed strategies in their work in Potrero.

***“I think if [Rebuild Potrero] asked for our help we would be happy to participate...We want to build a much tighter relationship between the schools and the communities on Potrero Hill. And what’s that look like and how can people of [Rebuild] Potrero help provide us with forums and public housing communities. How can they help us with outreach to get some of the families on the Hill to come visit the school and see what it’s about and...to help facilitate some meaningful conversations along those lines.”***

***- System level staff member***

## Incentives

*The gift card incentive acts as a motivator for engagement in community building activities and has become an integral and relied upon source of income for many participants.*

Some participants spoke about the gift card as the sole motivator for participation in community building activities at first, but that they eventually grew to enjoy the actual activity itself. The gift card proves to also be a motivator for continued engagement and to attend more activities throughout the month. Some participants said that if they only needed to attend a couple more activities during the month to meet the requirement for the gift card, they would push themselves to do so in order to get the incentive. Some participants attend mainly to get the incentive, but if they enjoy the activities, they continue to attend even after they no longer qualify for the gift card. As expected, some participants do stop attending activities once they qualify for the gift card.

Participants who regularly qualify for the incentive rely on the gift card each month for extra income for groceries and house supplies. Some participants have multiple members of their household attend, and the total accumulated gift card amount substantially helps those households each month. A perceived positive aspect of the gift cards is that the money is flexible and can be spent at any time, so participants have the freedom to make their own choices of how and when they can spend it. One participant reported that they save the gift cards for major holiday meals when they host family members; another participant described that they trade the gift card amount with their children who attend the activities as a way for them to “earn” allowance or personal items they would like to buy from other stores.

Given the realities of hunger and food insecurity faced by some residents of PTA, the increased access to food for participants who receive both the gift card incentive and the additional food incentives at activities is not insignificant. A few participants commented that having the gift cards cover their food expenses for the month allows them to purchase other items that they need, but do not normally have extra money for such as school supplies or items for their home. Participants are using this gift card resourcefully in their monthly budgets and now count on this extra income when planning future expenses.

***“I’m not coming for a [gift card] or anything like that. I’m just coming to get healthier and learn something, to be educated and to be a part of my community. I’m not worried about a [gift card].”***  
**- Public housing resident**

***“The main reason I go is because my mom doesn’t support me anymore. I have to buy my own groceries and everything else so - and it helps. I don’t have to use the money out of my check, I can use these and save the money from my check for something else.”***  
**- Public housing resident**

*Some staff and participants discussed that perceived discrepancies in the protocol for distribution of the gift card incentive can be problematic.*

Staff members are also the monitors of which participants qualify for the gift card, and though there is an official policy around this, some participants felt that judgment calls are made by staff around this matter. In order to get full attendance credit that goes towards receiving the incentive, participants must arrive on time and stay for a set amount of time or the whole duration of the activity. In some instances, participants are unable to attend the entire activity and depending on who the participant is and what their reason is for not being able to fully participate, staff will give these participants stamps or credit for attending. For example, one participant is unable to arrive on time to an activity because of their work schedule, and a staff member gives this participant credit for their attendance even though they are late, which can be seen as giving “special treatment” to particular participants. This has created some tension and controversy for some participants who may not understand the reasoning behind these decisions and feel that they are being treated unfairly.

*It is important to note that there are also a variety of non-monetary incentives offered through the community building activities.*

A few activities provide either full meals (Healthy Generations Project dinners, Community Building Meetings, and the cooking class), access to fresh produce (gardening), or a take-home craft or project (Healthy Generations Project). Some gardening participants have their own plants or “babies” in the garden, which can be seen as incentives also.

## **Conflict Management**

Community building activities provide a significant opportunity to foster conflict management skills. However, there is not a decentralized, well-articulated approach to conflict management that is applied across all activities.

At times, conflicts arise between participants in community building activities or between residents of PTA and in the great community. The community building activities create a significant opportunity for modeling effective conflict management techniques and building the capacity of residents to resolve inter-personal issues. For instance, resident staff discuss techniques for remaining calm in the face of conflict so as to serve as a role model for participants. However, implementation of community building activities lack a fully articulated approach to conflict management that has clear expectations understood by participants and resident staff. Individual judgment about how best to de-escalate conflict may be relied upon in the absence of protocols and lack of clarity about the approach can breed confusion or additional conflicts.

Furthermore, a central staff person was seen as serving as the primary mediator of conflicts that arise between community building activity participants. Several interviewees shared experiences in which conflict within an activity arose between participants and that would consistently turn to one core staff person to resolve the conflict, even in minor incidences. While having staff available to de-escalate conflicts and provide support is essential, having participants build their own skills around conflict management is a critical piece of community building. One striking example of residents handling conflict on their own occurred during the Walking Group in which a community

member drove their car up to the Walking Group to confront one of the participants. When the community member realized that they were disrupting the Walking Group, this person stepped back and said they would “respect the walk” and left. This type of decentralized conflict management should be fostered.

***“On the one hand, conflict is happening. On the other hand, it’s conflict that’s happening in a sort of structured, monitored environment. So, in a way, people are getting an opportunity to support each other through that conflict in a way that you wouldn’t if you were having it on the curb.”***

**- Staff member**

## **Resident Leadership**

*Resident staff play significant leadership roles in implementation of community building activities which greatly enhances participant engagement and their own personal and professional development.*

Staff members who are also public housing residents at PTA play important roles as not only leaders for their activities, but also as effective recruiters for participation in activities. As a result of their dual role of staff member and resident, they provide a sense of trust and safety within the activities. Having a familiar and consistent face leading the activities provides stability for many residents, which contributes to participants’ continued engagement in the activities and contributes to the overall success of TICB. The history of distrust of new services was an identified barrier to engagement in these activities, and resident staff act as a bridge between new services and residents as they are representatives of both groups.

Taking on leadership roles and gaining specialized skills in a field of interest while being financially compensated can be transformative for many residents. Resident staff have also gained new skills and knowledge through their work related to gardening, cooking and catering, child development, facilitation, and conflict management. Resident staff are seen as role models and sources of leadership, information, and support. While this experience can be positive and build self-efficacy, this can also be a significant burdensome role to maintain, and consequentially, resident staff members can suffer secondary trauma, taking on the trauma of those that they work with. Interview participants recognized that additional emotional support is necessary for resident staff in managing this dual role of resident and staff member, and ultimately, in sustaining the success of TICB-informed programming. Resident staff also require intensive management and training from supervisors and other staff members in addition to emotional support.

Of particular note is the position of Junior Community Builder, a resident staff member who acts as gatekeeper (enforcer and arbiter of rules), advocate (manager of conflict, including sending participants home when deemed appropriate), outreach worker (lead recruiter for activities), fiscal manager (managing and coordinating incentives), activity leader (walking club and sober living/ New Beginnings support group leader), and role model for other residents. There are perceptions of both advantages and drawbacks to the unique nature of this role. This individual is seen as a friend and “mother figure” to many and a “force of nature” in organizing and maintaining the TICB activities.



*“Now I talk to everyone, and I want to know how everyone’s doing. They stop me and tell me about their day and what they did... So I can feel that we’ve created a bond. And it might not be like a really strong bond, but it’s something. And I feel like if they felt like they needed to talk to me about something that they could come talk to me about something.”*

*- Resident staff member*

# Discussion

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This evaluation of the implementation of the TICB model at Potrero Terrace and Annex public housing site demonstrates the meaningful impact this work has on the residents and the wider community. There are clear ways in which this model both acknowledges the real trauma residents face and introduces pathways to engage residents, strengthens inter-resident connections while creating cross-cultural relationships, and fosters health improvement and an improved sense of safety. Furthermore, the way in which the TICB model is implemented has a significant role in realizing its benefits. The following recommendations focus on how the overall TICB model might be further developed as well as how implementation of the model might be enhanced.

### **Further Development of the TICB Model**

*Continue to explore the concept of “readiness” and its theoretical constructs to develop clear measures and maximize opportunities in the model for promoting readiness facilitators.*

A stated purpose of the TICB model is to increase “readiness.” Through this evaluation there is more clarity that readiness is both promoted by and needed at all levels of the ecological model -- individual, interpersonal, community and system. Staff and residents from all of the four HOPE SF public housing communities, including PTA, participated in focused discussions of “readiness” to examine its meaning and facilitators. Some common ideas of readiness emerged:

- Individuals must be ready to “be responsible for one another” and “let go of fear and drama.”
- In families and inter-personal relationships, people must be ready to change how they get along.
- Public housing and neighboring communities must be ready to “accept a common community identity” and “take ownership of change.”
- The system of government and service providers needs to be ready to “see itself as a single [coordinated] body” and “see residents as knowledgeable.”

The role of TICB in promoting these different types of readiness and others such as readiness to engage with services; readiness to live in new housing; or readiness to change behaviors, requires continued exploration and development of the model. Two key areas for future research and discussion are 1) how to measure readiness, including grounding the model and continued research in theories about readiness and change at the various levels of the ecological model; and 2) how to realize the full potential of community building activities as a foundation for promoting skill development, supporting behavior change and personal growth.

First, future evaluation of TICB and its implementation requires articulation of a theoretical basis for readiness promotion and measurement. The evaluation team has identified several theories that could inform the continued development of the model and the measurement of readiness. Stages of Change theory (Prochaska and DiClemente, 1983) defines the steps an individual must go through to be able to enact a personal change. Diffusion of Innovations theory (Rogers, 1962) may inform strategies and the measurement of the readiness of the entire community to adopt new norms, while Community Readiness theory (Oetting, et al., 1995) can inform how to assess the community’s stages of readiness for collective action. Organizational change theories, such as Stage Theory and Organizational Change Theory (Butterfoss, Kelger, and Fancisco, 2008) provide constructs that may inform how to understand and promote the systems readiness to engage and serve residents in a new way.

Second, evaluation learnings show the substantial potential of community building activities to promote skill acquisition, behavior change and shifts in attitudes -- the very foundation of readiness. How to leverage and build on this foundation is not straightforward as it is both a strength of TICB and a potential challenge to its implementation. TICB and its community building activities were not conceived of as “interventions” and there is a high premium on their fun, non-judgmental, easily accessible nature. Moving emphasis to direct outcomes- oriented activities may compromise engagement and other positive outcomes. It is necessary to both preserve all that makes the community building activities effective, while also creatively leveraging the opportunity to further promote readiness.

For example, financial literacy may be primed by the use of the gift card incentives as acquiring and utilizing them requires planning and budgeting over the course of the month and even year in some cases. Intentionally enhancing community knowledge around financial management by leveraging structure already provided by the gift card incentive system could increase community members’ financial planning skills and strengthen individual and family level economic security. Further examining how to capitalize on these opportunities will strengthen the model and the effectiveness of its implementation.

*Incorporate strategies that promote improvements in physical and mental health in the TICB model in order to contribute to individual and community-wide healing.*

Promoting fun, decreasing isolation, and fostering relationships are all current strategies of the TICB model that play a critical role in combatting the effects of stress and trauma. However, the model’s approach to promote healing should be expanded to include strategies that promote physical activity and health. This is a core strategy to promote the healing the model seeks to achieve. The positive impacts of these activities on stressed individuals are well known. As was confirmed in the resident interviews, the benefits of such strategies are twofold. They both support improved wellbeing and healing for individuals, while also fostering engagement in activities through personal rewards. Future evaluation of TICB should include examination of the impacts on mental and physical health and measurement of health improvements resulting from participation in community building activities.

In addition, physical activity -- in particular activities that are non-competitive and do not require previous skill or discussion of performance -- seemed to foster connections across cultural and socio-economic groups. This is a significant opportunity to build upon in new mixed income communities and could be a strategy towards developing deeper connections between disconnected groups of people. Building a cohesive diverse community may be greatly enhanced by supporting physical activities which bring together a cross section of people in a fun, rewarding environment.

*Incorporate strategies to foster community safety in the TICB model.*

TICB was shown to promote “zones of safety” within a neighborhood that experiences violence regularly and this community safety co-benefit should be incorporated as a more explicit strategy in the model. For example, by increasing resident participation as well as the number of activities available, it is conceivable that the zones of safety would increase. Increased localized zones of safety could improve a community’s greater sense of security overall. Still, continuing to ameliorate

safety concerns may further increase participation in activities and feelings of trust in programming and within the community as a whole. Such considerations could include locating activities in “neutral” spaces. Accessibility issues should also be considered such as not having activities too far from the public housing, and facilitating safe transportation both within the public housing site and to outside locations.

*Incorporate a strategy of supporting and fostering conflict management skill development among residents and staff to foster connectedness, build trust, and de-escalate chaos.*

Having tangible tools and resources to build positive interpersonal relationships is foundational to healing from trauma, individually and on a community level. Although the original TICB model identifies de-escalating stress and building social cohesion as core aims, it does not specifically name addressing conflict management skill development as a means to achieving those outcomes. This evaluation found that while interpersonal conflicts between residents within activity spaces occur, the TICB model does not explicitly prioritize formal skill development related to managing those conflicts. Institutionalizing a clear commitment to this key form of internal community capacity-building by adding it as a component to the model could help to foster stronger and more trusting interpersonal relationships between residents as well as between residents and staff.

The implementation of TICB offers an opportunity for building conflict management skills in residents as well as staff and leadership. Staff and leadership are key in modeling new norms around addressing conflicts. It is essential that a clear approach to conflict management be adopted and articulated. Restorative Justice, Non-Violent Communication and other approaches to handling interpersonal conflict offer methods for addressing interpersonal issues that arise. Resident and program staff can be trained in methods and serve as both role models and guides to activity participants. Ideally, the cumulative effect of multiple resident staff having training in an approach and hundreds of residents’ exposure to those methods would ultimately be seen in community norms about how to address conflict.

### **Strengthen Implementation of TICB**

*Ensure implementation of TICB has stable and sustained funding over time.*

The implementation of the TICB model is a meaningful, yet resource-intensive proposition. To effectively address and remediate the effects of long-term community trauma and nurture a connected and engaged community, a variety of capacities, funding, and a longitudinal outlook are required. The experience of TICB implementation in PTA makes it clear that sustained funding is critical to the effort. A central tenet of this work is to provide a consistent presence over time. Consistency is at the core of building trust, and any community implementing TICB must plan to provide activities and structure over the long-term. For that reason, it is crucial to have a stable or self-generating funding source that will be sustainable over many years.

The costly nature of providing the incentives may need to be further examined in considering long-term sustainability of TICB-informed programming. Taking into consideration the historical trauma these communities have had with disappearing resources and services, the removal of this incentive after participants have come to rely on it may perpetuate this cycle. Other programmatic changes might be explored such as capping the number of participants to keep the incentives cost

from increasing or limiting the number of gift cards for which each participant can qualify. Some questions organizations may ask themselves before creating budgets for TICB work might be: what kind of incentives do we want to offer? Is it possible to use a phased approach initiating external incentives that are intended to motivate and then moving to more intrinsic rewards over time? Are different types of incentives possible? What types of incentives are sustainable? In thinking about the target population, how important are these incentives in implementing TICB? If the incentives are not sustainable, are we going to cause more harm to the community we serve? Understanding the history of the community and what the realities of their needs are can help inform some of these decisions around incentives.

*Work to ensure all groups represented within a community are able to participate in TICB activities.*

Outreach practices, the structure and the content of activities implemented all matter in efforts to engage diverse segments of the community. For example, outreach materials not printed in a widely-spoken language within a community can inadvertently exclude them from participating and may even make some residents feel unwelcome to do so. Additional components of activities and other TICB-informed efforts in a community like time of day an event is held, location, and stipulations like age requirements can also exclude some community members from participating. While it is not possible to align with every residents' needs, it may be necessary to create more opportunities for engagement for some groups that currently are not well represented in community building activities and as a result do not experience the individual and community benefits. One key way to promote a diversity of participants is to ensure resident staff or activity leaders reflect the array of residents living in a community. Addressing language barriers to participation is particularly necessary to ensure wider engagement.

*Inform system partners and community organizations about TICB including its principles, practices, and how to build on the approach to connect with residents.*

Institutions related to education, safety, health, and transportation provide numerous services to the Potrero Hill community, but may not have a deep level of engagement with the people they serve. Having appropriate access points available for institutions to connect with residents to hear their needs, concerns, and build relationships is a key piece of TICB work. Some current community building activities lend themselves as forums for outside systems representatives to connect with residents, including the Walking Club, the Walking School Bus, Community Events, and the Rebuild Potrero Community Group. Clearly defining for institutional partners how they can engage through these or other activities is necessary to ensure effective connections are made.

In addition, systems partners need more information about TICB and its implementation at Potrero. As trauma informed work becomes more well-known and embraced, institutions that serve Potrero residents may already have adopted trauma informed principles. For these partners, there is a meaningful opportunity to create synergy between their work and TICB. For organizations unfamiliar with a trauma informed approach, education about TICB is an opportunity to build their capacity to serve Potrero residents effectively. Enhancing their understanding of the implementation of TICB at Potrero will enable them to be better partners to staff and residents.

*Collect program data in a systematic and strategic manner in order track outcomes and continually improve quality of activities.*

Effective program-related data collection and storage is critical for tracking TICB outcomes over time. A comprehensive system will permit ongoing assessment of engagement and community impact by producing consistent, accurate and comparable data over time. A simple system employing sign-in sheets and an electronic database are already in place in Potrero. Using other technology, such as electronically collecting data via tablets and automatically uploading data into a database, could improve efficiency. Regardless of the data collection method, data should be collected consistently and kept in an electronic format, such as an excel spreadsheet, and routinely managed and to ensure that inaccuracies are identified and resolved, and up-to-date.

At a minimum the following indicators should be collected for each participant:

### **Demographics**

- race/ethnicity
- gender
- date of birth
- primary language(s) spoken and read
- address

### **Participation**

- name of activity
- whether participant was in attendance each available session

These data should be entered in spreadsheets that encompass one full year of all community building programming. These sheets should have a row for each participant identified by name or unique identifier, and should have a column for every activity by session and by month. For example, if the Walking Club meets 8 times in May, 2015, there should be 8 columns with headers for the dates the walking club will meet that month and year. For each participant in the walking group, an indicator (like a “1”) would be entered for each date in May, 2015 that they went on the walk.

Having these data available by year for the entire group of participants will enable analyses about patterns of participation throughout the month and throughout the year, as well as illuminate points of entry into the program and patterns of participation diffusion to subsequent activities. Collecting information on where participants live will facilitate analysis about patterns of activity access based on residence location. Additional data may be collected on a regular basis as determined by evaluation needs.

# Conclusion



Trauma Informed Community Building was developed as a model in response to the significant need for an approach to fostering social cohesion in communities facing chronic, severe stress. After several years of implementation in Potrero Terrace and Annex public housing site, the effects of the model are promising. Community residents, both from the public housing site and surrounding neighborhood, come together in increasing numbers in community building activities and form new bonds. Improved health and well-being stems from engagement in rewarding community physical activities such as walking and Zumba. The structure and processes of TICB implementation also contribute to positive outcomes for residents with the consistency, incentives, and resident leaders being particularly important.

There is much to learn from the effort underway at Potrero Terrace and Annex, which both push forward the TICB model itself and inform continued efforts to strengthen its implementation. A trauma informed approach to community building seeks to break cycles of disconnection between residents as well as between systems and the community. This is one step towards the most effective way to address the trauma experienced in communities -- eliminate the violence, isolation, and other causes of pervasive and persistent stress.

# Citations

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Bridge Housing Corporation. (2014). Rebuild Potrero Transformation Plan: HUD Choice Neighborhoods & HOPE SF Initiative (pp. 1–88).

Weinstein, E., Wolin, J., & Rose, S. (2014). Trauma Informed Community Building: A Model for Strengthening Community in Trauma Affected Neighborhoods (pp. 1–24).

Prochaska, J. and DiClemente, C. (1983) Stages and processes of self-change in smoking: toward an integrative model of change. *Journal of Consulting and Clinical Psychology*, 5, 390–395.

Rogers, Everett M. (1962). *Diffusion of Innovations*. The Free Press. New York.

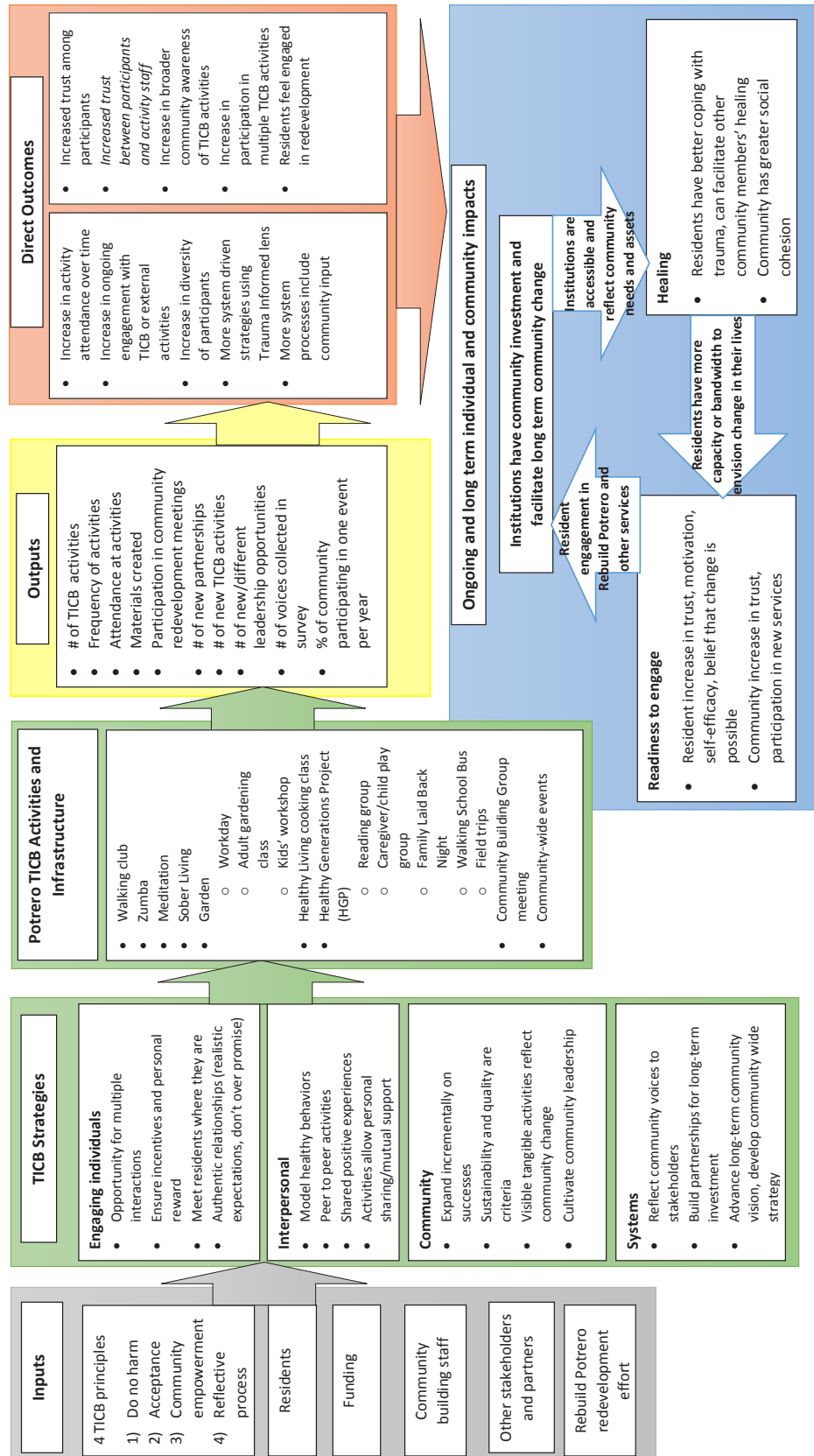
Oetting, E.R., Donnermeyer, J.F., Plested, B.A., Edwards, R.W., Kelly, K., & Beauvais, F. (1995). Assessing community readiness for prevention. *The International Journal of the Addictions*, 30(6), 659 - 683.

Butterfoss, F. D., Kelger, M. C. & Fancisco, V. T. (2008). Mobilizing Organizations for Health Promotion: Theories of Organizational Change. In K. M. Glanz, Bk. K. Rimer & K. Viswanath (Eds.), *Health behavior and health education: Theory, research, and practice* (Chapter 15), 4th Edition, San Francisco, California: JosseyBass.

# Appendix

# Appendix A: Logic Model

DRAFT Trauma Informed Community Building (TICB) logic model



# Appendix B: Participation Data

	2011 <sup>1</sup>	2014 <sup>2</sup>
<b>Total number of participants</b>	296	729
• Number of PTA residents		458
• Number of greater community residents		252
• Number missing resident status		19
<b>Healthy Living Activities</b>	142	
• Total number of participants		342
• Number of PTA participants		182
• Number of greater community participants		159
<b>Healthy Generations</b>	*	
• Total number of participants		88
• Number of PTA participants		88
• Number of greater community participants		0
<b>Gardening</b>	*	
• Total number of participants		85
• Number of PTA participants		75
• Number of greater community participants		9
<b>Community Building Group and community-wide events</b>	**	
• Total number of participants		385
• Number of PTA participants		284
• Number of greater community participants		85

<sup>1</sup> Data collected during calendar year, 2011

<sup>2</sup> Data collected during 10-11 months of 2014. The data presented should be considered an undercount of the true participation during the year 2014.

\* These activities had not yet been implemented in 2011

\*\* These data were not available for this time period



