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WASHINGTON UNIVERSITY IN ST. LOUIS

Brown School

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Choice and Opportunity: Examining Housing Relocation and Organizational Partnerships Within Federal Mixed-Income Community Development Initiatives

by

Andrew Scott Foell

A dissertation presented to The Brown School of Washington University in partial fulfillment of the requirements for the degree of Doctor of Philosophy

> May 2022 St. Louis, Missouri

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Choice and Opportunity: Examining Housing Relocation and Organizational Partnerships Within Federal Mixed-Income Community Development Initiatives

by

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Doctor of Philosophy in Social Work Washington University in St. Louis, 2022 Professor Patrick J. Fowler, Chair

In the United States, residential segregation by race and class has resulted in the creation and growth of geographic areas of concentrated poverty, or the concentration of mostly poor families of color into extremely poor neighborhoods. Due to the durability of concentrated poverty, along with the numerous adverse effects of living in neighborhoods characterized by concentrated poverty, deconcentrating poverty has been a prominent focus of urban poverty policy and housing and community development practice. Mixed-income development initiatives have emerged as promising strategies that focus on assisting low-income families living in distressed public housing while simultaneously investing in housing and neighborhood redevelopment. These strategies target distressed public housing projects for redevelopment, while providing intensive case management and supportive services to families living at the housing site.

As a result of housing redevelopment, families living at the site to be redeveloped are offered housing vouchers to assist with housing relocation during the redevelopment phases of the project. Thus, mixed-income strategies typically require families to move offsite, and thus involve an involuntary move. Additionally, the successful implementation of mixed-income strategies requires a complex network of public and private sector partners who collaborate to

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deliver a variety of programs and services to CNI families and in the surrounding communities. However, not a lot is known about the housing relocation process that occurs during mixedincome development, particularly within the newest mixed-income strategy, the Choice Neighborhoods Initiative (CNI), a U.S. Department of Housing and Urban Development (HUD) sponsored program implemented in dozens of communities across the U.S. Additionally, collaboration dynamics within mixed-income initiatives, including challenges associated with housing relocation, have received little scholarly attention.

The purpose of this dissertation was to explore two goals of mixed-income strategies to: 1) improve quality-of-life for families through housing relocation, and 2) examine facilitators and barriers to partner collaboration within one mixed-income initiative, the South City Choice Neighborhoods Initiative (CNI) in Memphis, Tennessee. Data come from three primary sources. First, longitudinal administrative case records spanning 6 years from 2015 to 2021 for families living at the Foote Homes public housing site (n=383) were utilized to examine housing relocation and subsequent changes in quality-of-life indicators for families. Second, semistructured interviews with partner staff (n=17) were conducted to identify facilitators and barriers to collaboration, including challenges associated with housing relocation. Third, a survey of partner collaboration was implemented with South City CNI partners (n=32) to better understand the unique structure of collaboration within mixed-income development initiatives.

Results suggested that families impacted by the South City CNI experienced significant improvements in perceptions of home and neighborhood safety following housing relocation. However, families also experienced significant increases in stress over time despite many families moving to less disadvantaged neighborhoods. A social network survey of partner organizations, along with interviews with organizational staff, indicated that coordinating

Х

challenges, especially those associated with housing relocation, were particularly salient in Memphis. The presence of a high-capacity lead organization was essential for overcoming coordination challenges and distributing information and resources throughout the partnership network. Additionally, several bridging organizations were identified that exhibited high levels of internal and external credibility and worked tirelessly to ensure families remained at the center of CNI redevelopment efforts.

These findings suggest that families impacted by the CNI may require additional services that target sources of stress above and beyond current services. Additionally, strategies that develop organizational capacity, particularly those focused on enhancing the capacity of CNI lead organizations to address coordination challenges, may translate to effective and efficient allocation of information and resources that ultimately benefit CNI families.

Chapter 1: Introduction

1.1. Background and Introduction

Persistent residential race and class segregation is among the most enduring social problems in the United States (U.S.) because it constrains the ability of individuals and families to live healthy, productive lives. In the U.S., residential segregation by race and class has resulted in the creation and growth of geographic areas of concentrated poverty, or the concentration of mostly poor families of color into extremely poor neighborhoods (Jargowsky, 1997, 2015; Massey, 1996; Massey & Denton, 1993; Wilson, 2012). This spatial concentration of poverty into specific geographic areas results from complex interactions between racial and economic segregation, poverty, and public policy (Jargowsky, 1997, 2015; Massey & Denton, 1993; Quillian, 2012; Rothstein, 2017; Wilson, 1997, 2012). Scholars find that multiple social and health-related problems and markers of progress come spatially bundled together at the neighborhood-level (Sampson, 2012). Abundant evidence shows that social problems like crime, violence, child maltreatment, and others are spatially bound and concentrated into geographic hotspots (Coulton et al., 2007, 2018; Sampson et al., 2002; Sharkey, 2018). This scholarship also suggests that these phenomena are long-lasting (i.e., enduring), resistant to change (i.e., durable), and have far-reaching effects on individual and community health and well-being (Massey, 1996; Sampson, 2012; Sharkey, 2013; Wilson, 1997, 2012).

National data suggests that concentrated poverty has increased in recent years both in terms of the number of people that live in high poverty neighborhoods, as well as the number of neighborhoods designated as areas of concentrated poverty (Jargowsky, 2015; Sampson, 2012). One in four U.S. residents live in poverty areas, or areas where the poverty rate is at or above 20 percent, representing a total of 77 million people nationwide (Bishaw, 2014). In urban areas the

percentage of residents living in poverty areas doubles, with an estimated 50 percent of residents living in 13,200 poverty census tracts (Tatian et al., 2012). Concentrated poverty, or census tracts where 40 percent or more of residents are at or below the poverty threshold, roughly \$24,000 for a family of four, has doubled since 2000, rising from 7.2 million people to 13.8 million (Jargowsky, 2015). This represents a similar doubling of concentrated poverty observed between 1970 and 1990 (Jargowsky, 1997). The number of census tracts designated as areas of concentrated poverty has increased by 76% since 2000, rising from 2,510 tracts to 4,412 tracts, and 90% of all areas of concentrated poverty are located in urban, metropolitan areas (Jargowsky, 2015). High-poverty neighborhoods, or those where 30% or more of residents are at or below the poverty threshold, have also doubled since 1980 raising from 3,558 to 6,547 (Benzow & Fikri, 2020).

Living in areas of concentrated poverty severely compromises well-being and has been linked to numerous adverse health and socioeconomic outcomes across the life span (Ludwig et al., 2013; Sampson, 2012; Sharkey, 2013; Wilson, 2012). Burdens of concentrated poverty are not randomly distributed, and disproportionately affect individuals and families of color. One in four African Americans and one in six Hispanic Americans live in concentrated poverty compared to one in 13 White Americans (Jargowsky, 2015). Especially troubling is that compared to adults, concentrated poverty disproportionately affects young children six years old and under whose long-term life prospects may be most affected (Shapiro et al., 2015). Research across disciplines including psychology (Evans & Cassells, 2014; P. Kim et al., 2013), neuroscience (Hair et al., 2015), medicine (Shonkoff et al., 2012), public health and health policy (Raphael, 2011), and sociology (Wagmiller Jr. & Adelman, 2009), among others, reveal that the effects of early and enduring exposure to disadvantage do not disappear as children enter

adulthood. The fact that so many people grow up in places that limit their life prospects, compromise quality-of-life, and undermine regional prosperity (Jargowsky, 1997) is alarming and deserving of our collective attention.

It is now widely accepted among social scientists that neighborhoods influence a variety of socioeconomic outcomes (Chetty et al., 2016; Galster & Sharkey, 2017; Knaap, 2017). Abundant research suggests that where we live impacts our health and well-being, and emerging research suggests that the links between place and social, economic, and health outcomes are causal (Chetty et al., 2014, 2016; Chetty & Hendren, 2018a, 2018b; Ludwig et al., 2013; Sampson, 2012). The neighborhoods where children grow up have considerable explanatory power across outcomes in adulthood and these differences are not attributable to the individual characteristics of people themselves (i.e., self-selection). Chetty and Hendred (2014) found that residential segregation, income inequality, school quality, social capital, and family structure were highly correlated with indicators of upward socioeconomic mobility and partially explained spatial variations in upward mobility. Recent work by Chetty and Hendred (2018a, 2018b) suggest causal place effects across multiple child outcomes (e.g., income, employment, college attendance, marriage, teenage birth) in the magnitude of 4 percentage-points per year of exposure to better neighborhoods which were defined as neighborhoods with lower levels of racial/ethnic segregation and income inequality, and higher levels of education quality and social capital.

Chetty and Hendred (2018a) found that children who grew up in neighborhoods characterized by high levels of racial and ethnic segregation and income inequality experienced reduced future socioeconomic mobility. Specifically, a one standard-deviation increase in residential segregation decreased future child income by 5 percent (Chetty & Hendren, 2018a). Chetty and Hendred (2018a) also found that children that remained in poor neighborhoods

experienced income divergence at a rate of 4 percentage-points per year. Based on their results, Chetty & Hendred (2018a, 2018b) suggested that exposure to better environments for children between birth and 23 years old could result in as much as an 80% gain in income relative to permanent residents in receiving neighborhoods (e.g., neighborhoods where residents moved). The work of Chetty & Hendred (2014, 2018a, 2018b) provides some of the most compelling evidence that place matters for upward socioeconomic mobility, and the authors advocate for expansion of both people-based mobility programs and place-based programs designed to improve community conditions to reduce cumulative adverse childhood exposures.

Where we live influences our health, wealth, and access to numerous opportunities that support social and economic well-being. Literature on neighborhood effects suggests that lowincome families experience disadvantages based on their own poverty, which are exacerbated by living in concentrated areas of poverty due to isolation from institutions, opportunities, and resources that support health and well-being (Fraser et al., 2013; Sampson, 2012; Wilson, 2012). Living in areas of concentrated poverty increases risks of exposure to adverse social and physical conditions that exacerbate individuals' economic challenges (Chetty et al., 2014; Coulton & Pandey, 1992; Manduca & Sampson, 2019). Individuals living in neighborhoods of concentrated poverty exhibit poorer physical and mental health outcomes, tend to attend poor-performing neighborhood schools with higher dropout rates, possess weak job-seeking networks, and face high levels of financial insecurity (Kneebone & Holmes, 2016).

Neighborhoods of concentrated poverty have higher death, child abuse, and youth delinquency rates, and lower childbirth weights compared to neighborhoods with lower poverty levels (Coulton & Pandey, 1992; Sampson, 2012). Researchers also find that such neighborhoods have higher rates of unemployment and school dropout rates, which limits economic stability

(Coulton & Pandey, 1992). Especially troubling are the rates at which individuals are exposed to violence, particularly children, and the adverse effects such exposure has on indicators of health and well-being (Curry et al., 2008; Fowler et al., 2009; Gorman-Smith & Tolan, 1998; Nebbitt, 2015; Ozer et al., 2017; Sharkey, 2018; H. A. Turner et al., 2013; Wright et al., 2017). Prolonged exposure to concentrated disadvantage negatively affects a wide range of outcomes for children, including infant mortality, low birthweight, teenage pregnancy, delinquency, child maltreatment, and others (Coulton & Pandey, 1992; Oakes et al., 2015; Sampson et al., 2002).

Concentrated poverty has adverse effects on cities and regions as well. Concentrated poverty directly increases public spending on antipoverty programs and indirectly raises the cost of providing general public services to all residents, compromising the economic performance and fiscal health of metropolitan regions as a whole (Joassart-Marcelli et al., 2005). The latter finding is important and suggests that municipal expenditures beyond those devoted to antipoverty efforts are significantly impacted by poverty itself. In current policy contexts that prioritize people-based antipoverty programs (e.g., welfare payments, cash transfers) and devolve increasing responsibility for antipoverty efforts to local forms of government, costs associated with poverty increase as the capacity to address rising costs decreases (Joassart-Marcelli et al., 2005). These environments severely limit access to high quality services and opportunities for quality education, transportation, housing, and living-wage employment, all of which represent key resources necessary to support health and well-being (U.S. Department of Housing and Urban Development, 2011). These factors create a deeply complex, interconnected system that adversely affects residents, neighborhoods, and regions by depriving significant portions of the population of human capital development (U.S. Department of Housing and Urban Development, 2011).

Literature on concentrated poverty and neighborhood effects has heavily influenced public policy at the national and state levels (Spencer, 2004). Neighborhood effects research provides compelling arguments that investments in severely distressed neighborhoods, along with programs that assist families in moving out of such neighborhoods, may provide short- and long-term benefits to health and well-being by providing access to resources and opportunities that promote upward socioeconomic mobility (Chetty & Hendren, 2018a, 2018b). However, there remains limited evidence and consensus on effective solutions to address concentrated urban poverty and improve the lives of residents living in America's most distressed urban neighborhoods.

1.2. Policy Interventions to Address Concentrated Poverty

Due to the persistence and growth of concentrated poverty, along with the adverse effects of living in such neighborhoods, deconcentrating poverty has been a prominent focus of urban poverty policy and housing and community development practice. However, despite compelling evidence that prolonged exposure to concentrated poverty adversely affects children and families across a variety of important social, economic, and health outcomes (Sampson, 2012; Sharkey, 2013), we still know very little about what interventions work, for whom they work, and why they work (Kubisch et al., 2010; Neumark & Simpson, 2015). A key question in urban poverty policy and housing and community development practice is whether to invest limited public and private resources to assist people directly (i.e., people-based strategies), or to invest the same resources into revitalizing entire neighborhoods (i.e., place-based strategies) (B. Austin et al., 2018; Davidson, 2009; Glaeser & Gottlieb, 2008; Winnick, 1966). The people versus place debate is long-standing in community development practice, policy, and research (Crane & Manville, 2008; Crowley & Pelettiere, 2012; Galster, 2017; Glaeser & Gottlieb, 2008; Kline &

Moretti, 2013; Winnick, 1966). In practice, local government officials and community-based organizations focus efforts on both strategies, simultaneously investing in place-based strategies such as public space redesign and housing development while also supporting family wealth creation and housing relocation (Wolf-Powers, 2014).

People-based strategies, also referred to as mobility strategies, focus on connecting people living in poor neighborhoods to opportunities and resources by expanding housing choices and moving families into neighborhoods where such amenities already exist (Crowley & Pelettiere, 2012; Galster, 2017). People-based programs generally include the use of housing vouchers and mobility assistance (i.e., case management and wrap-around services) to expand social and economic opportunity for children and families by moving them to less racially and economically segregated neighborhoods (Johnson, 2012). The goals of people-based strategies are to create opportunity moves, or moves into lower-poverty, higher-quality neighborhoods under the presumption that families will experience positive neighborhood effects by gaining access to higher-quality services, amenities, and institutions (Kleit et al., 2016).

People-based housing mobility programs are generally designed around models of rational choice, where residential moves are based on utility maximizing decisions that balance individual needs and preferences with the associated costs of moving (Kleit et al., 2016). Additionally, families consider a variety of push (i.e., negative attributes of the place of origin) and pull factors (i.e., positive attributes of destinations) when making mobility decisions (Kleit et al., 2016; Rufa & Fowler, 2018). The general assumption underlying people-based programs is that people in low-income communities want to move to better locations, they will be able to move given adequate support, and they will stay in the destination neighborhood long enough to benefit (Kleit et al., 2016; M. A. Turner & Briggs, 2008).

Place-based strategies, also referred to as preservation or targeted strategies, focus on interventions within specific geographic areas to improve conditions where people live (Crowley & Pelettiere, 2012; Galster, 2017). Typically, place-based approaches include a comprehensive array of strategies that blend economic and human development, such as housing development, business assistance, social service provision, workforce development, and education reform, with goals to improve individual lives and transform targeted areas as measured by various indicators of improvement (e.g., income, employment, poverty, etc.) (Hopkins & Ferris, 2015). Core principles of place-based community development include comprehensive, multi-level strategies to address the full array of problems facing low-income communities (Fulbright-Anderson, 2006; O'Connor, 2012), participation by key community stakeholders (Ohmer, 2008; Perisho Eccleston et al., 2018), and cross-sector collaboration (M. J. Rich & Stoker, 2014).

Place-based community development strategies also attempt to restore norms, markets, and social justice (Wolf-Powers, 2014). Restoration of norms is predicated on decades of sociological research linking macrostructural changes to social and economic distress in poor neighborhoods, which erodes individual and collective trust, civility, responsibility, and ambition (Wolf-Powers, 2014). Restoring markets is rooted in observations that distressed neighborhoods lack functioning markets and require financial and human capital to resuscitate them to build individual and community wealth (Wolf-Powers, 2014). Restoring justice is borne out of concerns for equitable outcomes and the policies that support or impede equity (Wolf-Powers, 2014).

People-based approaches that seek to assist families by moving them out of segregated, high-poverty neighborhoods have demonstrated mixed effects (Ellen, 2020; Owens, 2017; Rothwell, 2015). While children tend to benefit most from such programs, adults and young

adults tend to realize minimal or no gains, and in some instances experiences losses (Chetty et al., 2016). Place-based approaches designed to transform neighborhoods to support the families that live in them have also demonstrated mixed-effects, and there remain many unanswered questions regarding intervention effectiveness to reduce poverty, unemployment, and impact other community-level indicators (Dillman et al., 2017; Foell & Pitzer, 2020; Kubisch et al., 2010; Neumark & Simpson, 2015). The inconclusive state of the evidence regarding the effectiveness of people-based and place-based initiatives has led to a new form of housing and community development policy interventions that combines elements of people- and place-based strategies. These mixed-income approaches seek to provide low-income families with resources and opportunities to move into housing and neighborhoods of choice, while simultaneously redeveloping distressed public housing.

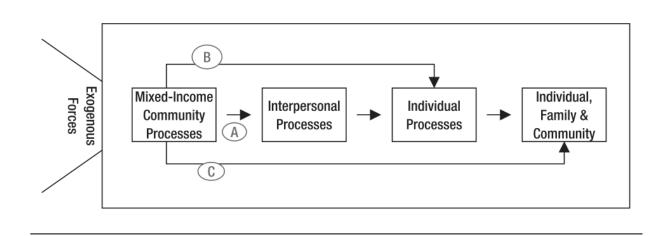
1.3. Mixed-Income Community Development

Mixed-income community development is one strategy for lifting families out of poverty that combines aspects of people-based and place-based strategies (Joseph et al., 2007). Mixedincome community development programs, such as the federal Housing Opportunities for People Everywhere (HOPE VI) program and the Choice Neighborhoods Initiative (CNI), include intentional efforts through federal policy to create mixed-income communities on the sites of severely distressed public housing (Chaskin & Joseph, 2015; Thurber et al., 2018). The goals of mixed-income community development strategies include place-oriented outcomes associated with economic desegregation and urban revitalization to provide access to and investments in improved services and amenities, and people-oriented outcomes associated with poverty alleviation via access to resource and information networks and through behavioral change (Levy et al., 2013).

HOPE VI, and other mixed-income development strategies like CNI, generally involve short- and long-term moves for families during the redevelopment and construction phases of projects (Goetz, 2010). The expectation is that these moves provide opportunities for families to move out of severely distressed communities into neighborhoods that provide resources and amenities to support family needs, ultimately leading to increased economic self-sufficiency. In the case of HOPE VI and CNI, residents generally experience an initial involuntary push to move as a result of the program's design, which targets distressed housing for redevelopment, and in some instances complete demolition and reconstruction. Such programs attempt to maximize pull factors that influence mobility decisions by offering housing relocation assistance through housing vouchers and supportive services to assist with relocation (Kleit et al., 2016).

The impetus for mixed-income development as an antipoverty strategy hinge on theories of social networks, social control, interpersonal processes and behaviors, and the political economy of place (Joseph et al., 2007). The rationale for mixed-income strategies is that positive changes to the residential environment through moves to higher-quality neighborhoods, local investment, and income mixing creates positive effects for children and families (Perry, 2017). The theoretical model proposed by Joseph, Chaskin, and Webber (2007) posits multilevel effects at the community, interpersonal, and individual levels through three primary pathways that influence individual, family, and community outcomes. The theory draws on neighborhood effects literature and assumes that context matters for individual and family well-being and that mixed-income environments provide more beneficial contexts for children and families compared to environments of concentrated poverty (Joseph et al., 2007). Figure 1.1 depicts the theorized effects of mixed-income development initiatives.

Figure 1.1



Note. Figure reproduced from Joseph, Chaskin, & Webber (2007)

First, the model suggests that mixed-income developments promote social interactions among individuals across income levels. Over time, social interaction leads to the building of trust and the sharing of information and resources to support individual processes (e.g., employment search), ultimately leading to improved employment and self-sufficiency outcomes (Pathway A). Social interaction may also promote pro-social behaviors that lead to improved educational and employment outcomes. Mixed-income strategies are also thought to promote interpersonal relationships, leading to improved accountability and reductions in negative behaviors, and ultimately reducing individual outcomes such as arrests and incarceration (Pathway A). Interpersonal processes are also hypothesized to decrease social isolation, bridge social distance, influence racial and class-based attitudes, and develop senses of common fate and shared responsibility (Perry, 2017). As such, mixed-income and racially diverse communities have the potential to build multiethnic and multiclass coalitions, reduce prejudice and discrimination, distribute resources and opportunities more equitably, and enrich democracy (Perry, 2017). Additionally, mixed-income strategies are hypothesized to increase community-level social control and collective efficacy, which increases the likelihood that individuals will abstain from negative behaviors (Pathway B). Greater community-level social control also promotes neighborhood safety and crime reduction, improving quality of life for individuals and families (Pathway C). Mixed-income strategies leverage external resources to support higher quality public services and infrastructure, which improves the quality of life for children and families in neighborhoods (Pathway C) (Joseph et al., 2007). Additionally, the development of mixed-income communities is hypothesized to create new market demand, leading to investment in higher quality goods and services for residents (Joseph et al., 2007; Levy et al., 2010).

There is also an emerging body of research on mixed-income neighborhoods that provides additional insights into the expected benefits and challenges of economic residential integration embodied in mixed-income development strategies. Most studies of stable racially and ethnically diverse and mixed-income neighborhoods find that such communities are more likely in regions with strong housing markets and growing and diverse populations (Ellen, 2000; Ellen et al., 2012; Kneebone et al., 2019; Krupka, 2008; Rastogi, 2016, 2019; R. A. Smith, 1993). Diverse housing supply in terms of unit age, unit-mix (e.g., single family, multifamily; ownership, rental), and housing cost is particularly important for producing and sustaining mixed-income neighborhoods (Ellen et al., 2012; Kneebone et al., 2019; Krupka, 2008; Rastogi, 2019; R. A. Smith, 1993).

Community amenities and assets such as parks, lakes, grocery stores, schools, community centers, transportation, and proximity to employment are also important factors for sustaining mixed-income neighborhoods because they supply resources to meet family needs and create *social seams* that promote interaction across racial, ethnic, and class divisions (Nyden et al.,

1997; Peterman & Nyden, 2001; Saltman, 1990). The development and maintenance of social seams is particularly important because abundant research suggests that residential integration does not necessarily equate to social integration (Chaskin, Khare, et al., 2012; Perry, 2017; M. A. Rich, 2009; Tach, 2014; Walton & Hardebeck, 2016). Therefore, social seams provide places and spaces that increase exposure to diverse lifestyles and behaviors and may facilitate the development of tolerance, social trust, and social organization (Tach, 2014), enhance social control and collective action towards mutual goals (Perry, 2017), and create opportunities to bring diverse perspectives together to address conflict, develop new ways of thinking, and resolve differences (Nyden, 2012; Perry, 2017). Additionally, local institutions and amenities, such as community centers, provide important resources that make life more affordable for low-income residents (Lumley-Sapanski & Fowler, 2017; Small, 2009; Small et al., 2008).

The local policy landscape is also important for creating and sustaining mixed-income neighborhoods, including effective regional fair share housing programs, secure organizational funding, deconcentrated public housing, comprehensive school desegregation programs (Saltman, 1990), and effective partnerships between community groups and large institutional actors (e.g., local and federal government) (Goodwin, 1979; R. A. Smith, 1993). Taken together, the literature on mixed-income neighborhoods suggests that mixed-income development may be most successful in communities that are proximate to local amenities and those where mechanisms for neighborhood change have been institutionalized to ensure community engagement, effective resource coordination, and accountability.

In addition to the hypothesized benefits of mixed-income communities for those who live in them, they may also represent viable options for voucher-assisted families that relocate during the development of mixed-income projects. Mixed-income neighborhoods may represent

opportunity bargains, or neighborhoods that improve outcomes for children and families without extracting higher rents that compromise financial security (Chetty & Hendren, 2018a, 2018b). Additionally, communities with less residential segregation and lower income inequality, representative of many mixed-income neighborhoods, generally promote upward socioeconomic mobility (Chetty et al., 2014). Such areas also may be more conducive to social interaction across racial, ethnic, and class groups, represent areas with reduced racial bias among Whites, and may reduce Black-White income disparities (Chetty et al., 2018).

1.4. Choice Neighborhoods Initiative (CNI)

The Choice Neighborhoods Initiative (CNI) incorporates mixed-income development strategies to improve housing and neighborhood conditions while assisting low-income families. The CNI is a national initiative funded by the U.S. Department of Housing and Urban Development (HUD) with the purpose of revitalizing distressed public housing in cities around the country. The CNI focuses on three primary goals: 1) replacing distressed public and assisted housing with high-quality mixed-income housing that is well-managed and responsive to the needs of the surrounding neighborhood; 2) improving outcomes of households living in the target housing related to employment and income, health, and children's education; 3) creating the conditions necessary for public and private reinvestment in distressed neighborhoods to offer the kinds of amenities and assets, including safety, good schools, and commercial activity, that are important to families' choices about their community (internal document, Social Policy Institute Project Overview). Since 2011, HUD has granted 108 CNI Planning Grants and 40 CNI Implementation Grants to communities across the U.S.

While the CNI builds on past redevelopment programs (e.g., HOPE VI), there are several differentiating factors that distinguish the initiative from previous efforts. The neighborhood

component is the largest differentiating factor between the CNI and similar housing and community development programs. For example, HOPE VI focused on improving neighborhoods almost exclusively through the redevelopment of housing. In contrast, the CNI sets a much broader agenda for neighborhood transformation focused on transforming high poverty neighborhoods into sustainable mixed-income neighborhoods that offer appropriate public services, assets, and amenities including high quality transportation, schools, and access to employment. Additionally, the CNI expands the range of groups that can apply to receive a grant beyond local public housing authorities (PHAs) (Gebhardt, 2014).

Unlike HOPE VI, the CNI also requires one-for-one replacement of each low-income housing unit. In other words, each public housing unit that is demolished must be rebuilt, expanding the opportunity for tenants to return to the redeveloped housing. The one-to-one replacement is an effort to correct a HOPE VI trend where a small minority of participants moved back to redeveloped HOPE VI communities. HUD also removed HOPE VI screening requirements on employment, education, and drug testing for re-occupancy lease agreements, further allowing residents to re-occupy their new communities. The CNI also brings an emphasis on improving education in target neighborhoods, requiring grantees to include schools early in their planning process. To be considered for a CNI grant, cities apply with the help from organizations that are responsible for the goals above (internal document, Social Policy Institute Project Overview).

Urban Strategies is often responsible for CNI Goal 2 which includes providing case management services to families before and after redevelopment of their homes (internal document, Social Policy Institute Project Overview). Urban Strategies is a national nonprofit organization that specializes in comprehensive neighborhood revitalization through results

informed human services development, strategic planning, and strategy implementation to ensure equitable opportunity where all children and families are safe and thriving. Since its founding in 1978, Urban Strategies has partnered on neighborhood transformation efforts in 24 cities and over 40 neighborhoods across the U.S. Annually, Urban Strategies serves roughly 100,000 individuals and 30,000 families through intensive case management, community engagement, and collective action partnerships (https://urbanstrategiesinc.org/about-us/).

Each CNI grantee identifies a target development, generally a HUD public or assisted housing site, to rebuild or rehabilitate, along with the neighborhood boundary to focus revitalization efforts (Gebhardt, 2014; Joice, 2017). Eligible neighborhoods must: 1) have a minimum of 20 percent of residents at or below the poverty line, 2) include an eligible severely distressed public or HUD-subsidized property, and 3) demonstrate one of the following: 3-year violent crime rate that is 1.5 times higher than the city average, long-term vacancy rates that are 1.5 times the city rate, or a low-performing school (Gebhardt, 2014).

Housing redevelopment often occurs in stages at each redevelopment site. Timelines for each CNI are not uniform (Joice, 2017; The Urban Institute, 2013) because financing, grantee capacity, and the size and scope of the revitalization efforts vary across sites (Joice, 2017). Housing at each site is often divided into sections, or phases, in preparation for demolition and reconstruction. Then local case management and housing partners work with families to assist with housing relocation. In some sites, relocation also occurs in phases and families who live in buildings targeted for redevelopment first may be offered the option of moving to another available unit onsite in a building that will be redeveloped in future phases. At other CNI sites, relocation occurs all at once, with all families given two primary relocation options to: 1) relocate to an available public housing unit offsite, or 2) relocate to housing in the private market

using a housing choice voucher (HCV). Due to the nature of redevelopment, participants in the same public housing site may be at various stages of the relocation process. The three stages in a CNI generally include:

- **Pre-Period:** during this time, participants have been informed that they will be moved and are receiving case management services.
- Redevelopment Period: during this time, participants relocate to a new housing unit and are given the following options: 1) move offsite to another public housing unit, 2) relocate to the private housing market using a HCV. In some cases, a phased relocation approach is taken and families living in buildings slated for redevelopment in the first phases of the project may be offered the opportunity to move to an available housing unit in another building onsite.
- **Post-Period:** during this time, participants are given the opportunity to move back into their redeveloped housing or stay in their current neighborhood.

Studies of the CNI are minimal, though a few publications provide informative reports on intervention processes and lessons learned. In an assessment of five CNI sites in early phases of implementation, The Urban Institute documented baseline conditions, planning and implementation processes, theories of change, and key accomplishments of CNIs in Boston, Chicago, San Francisco, Seattle, and New Orleans (The Urban Institute, 2013). They found that three of the five CNI sites consisted of partners with histories of collaboration. Additionally, housing efforts tended to have the highest levels of collaboration compared to neighborhood and people strategies. Early reports on CNI implementation also suggest that collaboration and partnership structures differ across sites, with some sites driven largely by a single lead agency while others involve more complex structures that are co-led and involve multiple implementation agencies (Pendall & Hendey, 2013; The Urban Institute, 2013).

Within each site, Joice (2017) found that attrition of baseline households was relatively low, with cumulative attrition ranging between 19 and 31 percent. Rates of return for CNI families also varied by site ranging from 12 percent in Chicago to 81 percent in San Francisco. Low rates of return across several sites were mostly due to incomplete housing construction that limited the number of residents who could return. Joice (2017) also found that among a cohort of baseline residents across sites, mean income and median income increased by 29 and 18 percent, respectively. The population of working adults with wage income increased across sites between 5 and 50 percent. However, poverty rates among baseline households fluctuated and did not reveal consistent patterns across sites. Much like studies of HOPE VI, there is preliminary evidence that CNI sites represent among the most severely distressed neighborhoods in their respective cities (Gebhardt, 2014). Analysis of CNI Planning Grant recipients found average poverty rates exceeding 40 percent, a commonly used threshold for areas of concentrated poverty. Additionally, CNI Planning Grant sites were highly segregated by race/ethnicity, had low educational attainment rates and median incomes, and experienced high rates of unemployment and property vacancy (Gebhardt, 2014).

1.5. Dissertation Goals and Objectives

This dissertation explores a unique federal mixed-income community development program, the CNI, which has goals to improve the lives of people and places by investing in housing, people, and neighborhoods (Joice, 2017; The Urban Institute, 2013). The CNI combines elements of people- and place-based approaches, by offering housing choice to families while simultaneously redeveloping distressed, often economically and racially segregated, public

housing into mixed-income communities. The unique structure of the program, which targets distressed public housing communities for redevelopment and the neighborhoods around them for investment, while simultaneously providing supportive services and housing relocation assistance to current residents, provides an opportunity to better understand housing relocation and quality-of-life outcomes associated with moving (e.g., safety, stress), and program partnerships and implementation processes.

Additionally, in contrast to other housing relocation and mobility programs, the CNI includes a unique *right-to-return* protection for residents that are relocated during the redevelopment phase of the program, which allows original residents the option of returning to the redeveloped mixed-income housing upon completion. This is much different from other historic and contemporary housing relocation and mobility assistance programs where the main program goals are to move residents to lower poverty neighborhoods long-term. The CNI represents a comprehensive, place-based community development program designed to improve housing and neighborhood conditions, as well as improve social, economic, education, and health-related outcomes for children and families. Since 2010, the U.S. Department of Housing and Urban Development has awarded 108 Choice Neighborhood Planning Grants and 40 Choice Neighborhood Implementation Grants (U.S. Department of Housing and Urban Development, 2021a, 2021b); yet the program has received little scholarly attention. This dissertation will focus on one CNI site in Memphis, Tennessee. The South City CNI was chosen because it represents a co-lead structure between a public housing authority (PHA) and city government, all original families have been relocated from the original housing site, and local partners have made substantial redevelopment progress at the site.

This dissertation utilizes data from the South City CNI to address several gaps in the current literature regarding mixed-income community development initiatives. Evidence is mixed on whether housing relocation programs improve neighborhood quality for children and families. Additionally, the extent to which the CNI improves neighborhood quality for residents during the development and post-development phases of the program remains unknown. Given the CNI's unique *right-to-return* policy, which gives target families priority re-entry into the newly developed CNI housing, it is possible that CNI families view their moves as temporary and may settle for lower quality housing in lower quality neighborhoods under the belief that they will be able to return to the neighborhood after development is complete. Families may also choose to move to nearby housing within the same neighborhood in the belief that such moves are temporary until they are able to move into the redeveloped CNI development.

Additionally, the CNI generally includes at least one involuntary move given the program's design to redevelop distressed public housing communities. Therefore, the CNI includes an initial housing push factor, whereas programs such as Moving to Opportunity and the Housing Choice Voucher (HCV) program focus primarily on pull factors to influence mobility decisions (Kleit et al., 2016). While housing relocation has been examined in other program contexts, an exploration of residential moves of CNI families has not been tested. Because securing high-quality housing in neighborhoods that provide supportive resources and opportunities is expected to confer numerous benefits to children and families, understanding housing relocation during CNI implementation represents a critical need. The CNI provides an opportunity to examine family relocation decisions, as well as differential improvements to neighborhood quality for residents who move to the private housing market using housing vouchers and residents who move to other public housing sites during the redevelopment period.

One of the biggest gaps in current research is limited in-depth understanding of organizational partnerships and program implementation processes necessary for large-scale community development interventions. A consistent finding in the literature on place-based and people-based strategies is that strong organizational partnerships are required to enhance program implementation to achieve policy goals, and it has been suggested that differences in collaboration and partner capacity may partially explain differences in outcomes across intervention sites (Chaskin, 2005; Chaskin et al., 1997; M. J. Rich & Stoker, 2014). Despite the breadth of research on organizational collaboration across disciplines, there have been few attempts to study organizational collaboration among mixed-income development initiatives. Therefore, the structure of organizational collaboration within these initiatives remains unclear. Additionally, there have been no known attempts to examine collaboration structures and how they may enhance or constrain implementation of mixed-income development initiatives.

1.6. Research Design and Study Context

This dissertation utilized case study research strategies to address the dissertation goals and objectives through a combination of quantitative and qualitative approaches to inquiry. Case studies are an approach to research that mix quantitative and qualitative research methods to explore and understand a real-life bounded system through detailed, in-depth data collection via multiple sources of information (Creswell & Poth, 2018; Padgett, 2017; Silverman & Patterson, 2015). This dissertation utilized CNI family data collected by case managers at a partner organization, Urban Strategies, and primary data collection through in-depth interviews and quantitative surveys with CNI partner staff in Memphis, Tennessee. Urban Strategies partners on multiple CNI implementation grants and serves primarily as the lead organization for people strategies, including case management services and housing relocation. Additional publicly

available data and documentation about the South City CNI were also incorporated into the dissertation to contextualize the case. Memphis and the South City CNI was chosen for this dissertation based on partner consultation, local context, and data availability to answer the dissertation research questions. Thus, the South City CNI serves as an illustrative case for further examining housing relocation and partner collaboration in the CNI.

Memphis received a \$250,000 CNI Planning Grant in 2010 followed by a \$30 million CNI Implementation Grant in 2015 (Table 1.1). The initiative is co-led by the Memphis Housing Authority (MHA) and City of Memphis (U.S. Department of Housing and Urban Development, 2015b, 2015a). The South City CNI also includes lead organizations for each strategy area for the grant: people, housing, and neighborhoods. The people strategy area is led by Urban Strategies, a national nonprofit organization that provides supportive services to low-income families in public housing. The housing strategy area is led by a private development company, McCormack Baron Salazar, a national affordable housing development firm. The neighborhood strategy area is led by the City of Memphis Division of Housing and Community Development. The leadership structure of the South City CNI appears as Figure 1.2.

Table 1.1

CNI Planning Grant	
Target Housing	Foote Homes
Award Year	2010
Award Amount	\$250,000
Lead Applicant	Memphis Housing Authority
CNI Implementation Grant	
Target Housing	Foote Homes
Award Year	2014-2015
Award Amount	\$29,750,000
Lead Applicant	Memphis Housing Authority
Co-Applicant	City of Memphis
Housing Lead	Memphis Housing Authority; McCormack Baron Salazar

South City Choice Neighborhoods Initiative (CNI) Grant Details

Figure 1.2

South City Choice Neighborhoods Initiative (CNI) Leadership Team



The South City CNI focuses revitalization efforts on Foote Homes, a 420-unit public housing complex and the last remaining traditional public housing site in the city. The South City Transformation Plan, the plan guiding CNI activities, includes plans for the redevelopment of Foote Homes and the surrounding neighborhood to include 712 mixed-income units, 600 of which will be constructed at the original site. The additional 112 units will be constructed offsite, and an additional 87 project-based vouchers (PBVS) will be reserved for use in the surrounding neighborhood for Foote Homes residents during family relocation.

The plan also includes the provision of supportive services and critical community improvements in the neighborhood. These investments include community meeting space and a fitness center onsite, as well as pocket parks and additional greenspace surrounding the site. Neighborhood investments include the development of an early childhood center, a family resource center, outdoor farmers market space, establishment of a microloan fund for new businesses, public park improvements, implementation of a public safety program, and complimentary efforts to leverage other neighborhood investments (e.g., historic train station renovation, HOPE VI developments). The redevelopment plan was carried out in six phases including 4 phases onsite, an onsite senior building (Phase 5), and offsite housing development in the neighborhood (Phase 6).

The Foote Homes public housing project was originally developed in 1940 and is located in the 38126 Zip Code. Table 1.2 provides summary statistics of the CNI project Zip Code compared to all other Memphis Zip Codes and Shelby County, TN.

Table 1.2

Changes in Indicators of Neighborhood Disadvantage from Baseline to Follow-Up for the CNI Project Zip Code, all other Memphis Zip Codes, and Shelby County, TN

	CNI Pro Co	oject Zip de [°]	Non-Project Zip Codes ^b		Shelby County	
	2010-14	2015-19	2010-14	2015-19	2010-14	2015-19
African American	94%	96%	51%	52%	53%	54%
Families Below Poverty	58%	59%	16%	14%	17%	15%
Female Headed Households	53%	44%	20%	19%	21%	20%
Unemployment	36%	24%	11%	7%	7%	5%
Population Under 18 years	35%	36%	26%	25%	26%	25%
Public Assistance	12%	3%	3%	2%	3%	2%

Note. CNI = Choice Neighborhoods Initiative; All data come from American Community Survey (ACS) 5-Year Estimates for 2010-2014 and 2015-2019.

^aThe CNI targets the Foote Homes public housing development located in the 63126 Zip Code. ^bNon-project Zip Codes include all Zip Codes fully or partially contained within Shelby County, TN.

The CNI project Zip Code is among the poorest, most racially segregated communities in

Memphis. Prior to housing relocation and redevelopment, which started in the Spring of 2016,

most residents of 38126 were African American (94%) which increased through 2019 (96%).

This is nearly double the percentage of Black families compared to other Memphis area Zip Codes. In 2014, the family poverty rate of 38126 was 58%, the highest among all Zip Codes in the Memphis area. By 2019, the most recent year for which data were available, the poverty rate in 38126 increased to 59% and remained the highest in the Memphis area. The family poverty rate for 38126 was nearly four times greater compared to other Memphis area Zip Codes. The unemployment rate for 38126 was 36% in 2014, and dropped to 24% in 2019, ranking highest among all Zip Codes in the Memphis area. Roughly 53% of families in 38126 were female headed households, which decreased through 2019 (44%), also ranking the highest among all Memphis area Zip Codes. The 38126 Zip Code included the highest percentage of households receiving public assistance in 2014 (12%) compared to other Memphis area Zip Codes, which dropped substantially through 2019 (3%).

The South City CNI was purposively chosen for this study based on partner consultation, local context, and data availability to answer the dissertation research questions. South City CNI partners have relocated all CNI families from Foote Homes, the site targeted for redevelopment, and have made substantial progress on proposed development phases. Thus, the South City CNI represents a grantee at later stages of housing redevelopment and initiative implementation. Additionally, while the South City CNI has experienced challenges inherent in mixed-income development, the initiative represents an effective, high functioning partnership model according to local partners (Jones & Bradley, 2021).

1.7. Specific Aims and Research Questions

This dissertation addressed the following specific research aims:

Aim 1. The first aim of the dissertation was to explore the extent to which South City CNI families improved their neighborhood environments and quality-of-life after housing

relocation. Aim 1 was addressed through the following research question: *To what extent are CNI households' housing relocation decisions associated with changes in neighborhood disadvantage and quality-of-life, controlling for baseline sociodemographic household characteristics?* To answer the broad research question, I utilize longitudinal case records from administrative data collected by Urban Strategies case managers, who provided services to 383 households originally residing at the Foote Homes housing site targeted for redevelopment through a CNI Implementation Grant. Household data were available from 2015 to 2021 and households were followed for between 1.5 and 6 years. The administrative data included baseline household characteristics along with three quality-of-life indicators of perceived home safety, neighborhood safety, and stress.

Aim 2. The second aim of the dissertation was to investigate the facilitators and barriers to collaboration and effective delivery of programs and services to CNI families, including those associated with the housing relocation process. Aim 2 was addressed through the following research question: *What facilitators and barriers do CNI partners identify to collaboration and the effective implementation of programs and services to CNI families*? For Aim 2 I extended insights from Aim 1 by investigating the facilitators and barriers to collaboration and program implementation, including challenges associated with the housing relocation process. I utilized key informant interviews with staff at CNI partner organizations to develop an in-depth understanding of organizational partnerships and collaboration in the CNI. Participants included staff members of CNI partner organizations in Memphis, TN, who were identified as knowledgeable about CNI-related activities by the lead grantee, the Memphis Housing Authority, and the lead people strategy partner, Urban Strategies. I conducted 17 semi-structured,

one-on-one online interviews to explore factors that supported and challenged interorganizational collaboration and influenced CNI implementation.

Aim 3. The third aim of the dissertation was to understand the structure of the CNI interorganizational partnership network and how the network structure impacted the delivery of programs and services to CNI families. Aim 3 was addressed through the following research question: *What is the structure of interorganizational relationships within the CNI partner network in terms of communication, collaboration, and trust?* I implement a social network survey of CNI partner organization (n=32) who were identified as knowledgeable about CNI-related activities by the Memphis Housing Authority and Urban Strategies. Online surveys were distributed to staff members at CNI partner agencies to assess collaboration, contact frequency, partner trust, collaboration capacity, and perceived effectiveness to deliver CNI programs and services. Exploratory social network analysis (SNA) was utilized to visualize the network and examine network structural characteristics.

The remainder of the dissertation is dedicated to exploring the specific research aims. In Chapter 2, I situate mixed-income community development strategies within two prominent development paradigms that guide federal housing and community development policy: peoplebased and place-based strategies. In this chapter I utilize longitudinal administrative data and multilevel mixed effects modeling to examine: 1) the extent to which families affected by the South City CNI in Memphis, TN improved their neighborhood environments through housing relocation during the redevelopment phase of the CNI, and 2) the extent to which family moves were associated with household quality-of-life in terms of perceived stress and safety. While Chapter 2 provides an examination of housing relocation and neighborhood attainment for CNI families, the quantitative models do not capture complexities in service delivery and program

implementation that may impact housing relocation. The ability to collaborate across sectors and build effective partnerships between diverse organizations is critical for complex, multicomponent interventions and the children and families served by such interventions. These dynamics are the focus of Chapters 3 and 4 of the dissertation.

In Chapter 3, I utilize semi-structured interviews with staff members at CNI partner organizations to better understand the barriers and facilitators to collaboration and program implementation, including those associated with housing relocation. In Chapter 4, I build on insights gained from partner interviews, which focus primarily on dyadic interpersonal aspects of collaboration, and examine CNI interorganizational partnerships from a network perspective to understand the partnership network structure of the South City CNI and how this structure may impact the effective delivery of programs and services to low-income families. In the fifth and final chapter of the dissertation I present recommendations for policy, practice, and future research.

The dissertation adds to the current literature on mixed-income community development in two primary ways. First, I provide among the first examinations of housing relocation and quality-of-life outcomes associated with the CNI. Second, I add to the literature on collaboration and partnership development among federal housing and community development initiatives and provide the first empirical examination of mixed-income communities from a network perspective by examining organizational partnerships and program implementation. All research activities were reviewed and approved by the Institutional Review Board (IRB) at Washington University in St. Louis and supporting documentation is included in the final dissertation Appendix.

Chapter 2: Housing Relocation and Neighborhood Attainment Among Choice Neighborhoods Initiative (CNI) Families

2.1. Abstract

Objective: Mixed-income development initiatives involve an involuntary, forced move for families who live in the distressed public housing sites targeted for redevelopment. Little is known about housing relocation under such conditions, and the extent to which families improve their neighborhood environments and well-being when provided assistance through intensive case management and housing vouchers. The objective of this study was to examine housing relocation and effects on family well-being among families affected by the South City Choice Neighborhoods Initiative (CNI) in Memphis, Tennessee.

Method: Longitudinal administrative case management data for 383 heads-of-household and multilevel mixed-effects modeling were utilized to examine housing relocation and quality-of-life outcomes for South City CNI families in terms of perceived home and neighborhood safety and perceived stress.

Results: Families who moved out of the project Zip Code moved to significantly less disadvantaged neighborhoods compared to families who stayed in the project Zip Code (b=0.-41, p<0.001). However, destination neighborhoods remained above sample mean levels of disadvantage. Additionally, all families experienced improvements to perceived home safety (b=0.02, p<0.001) and neighborhood safety (b=0.01, p<0.001), while also experiencing more stress over time (b=0.06, p<0.001) regardless of the relocation decision.

Conclusions: Additional housing assistance combined with programs and services that reduce family stress may be needed above and beyond current CNI services.

2.2. Introduction

Since the 1990s, concerns over concentrated urban poverty have led to mixed-income housing and community development initiatives that target distressed public housing for redevelopment and provide programs and services to families through case management services and housing relocation assistance. As such, they combine people-based aid, primarily in the form of intensive case management and housing relocation assistance (e.g., housing vouchers), alongside place-based investments to redevelop the targeted housing site and make critical community improvements in the surrounding neighborhoods. Mixed-income development is exemplified in the federal Housing Opportunities for People Everywhere (HOPE VI) program, which was implemented from 1993 to 2011, and the Choice Neighborhoods Initiative (CNI), which replaced HOPE VI and expanded the scope of the program to include a substantial neighborhood investment component.

The major premise of mixed-income development initiatives is that it is possible to improve the lives of public housing residents by helping them move to better neighborhoods and by investing resources to create healthier neighborhood environments at and around the mixedincome development site (Popkin et al., 2009). The people-based goals of mixed-income development include housing relocation assistance and supportive services to public housing residents to improve indicators of family well-being, such as income and employment, and those associated with quality-of-life like stress and safety (Oakley et al., 2015). Place-based goals of mixed-income development initiatives include transforming distressed public housing into mixed-income communities by developing higher quality affordable housing units, replacing a portion of low-income units with market rate units, attracting higher income tenants, and

investing resources into the surrounding neighborhood to promote economic revitalization (Oakley et al., 2015).

Despite nearly three decades of implementing mixed-income development initiatives, we still know relatively little about their impacts, particularly as it relates to housing relocation for families who must move for housing development to occur. Indeed, there are very few studies of CNI impacts on indicators of family health and well-being (Popkin et al., 2021). Thus, much of what we do know about housing relocation in mixed-income development initiatives comes from studies of HOPE VI. These studies show that many families relocate to the private housing market through vouchers or transfer to other public housing sites, while a smaller proportion of families relocate without housing assistance or seek homeownership opportunities (Buron et al., 2002; Popkin et al., 2009; Popkin, Katz, et al., 2004). Studies of HOPE VI consistently find that very few original families return to redeveloped mixed-income housing following relocation, though there is considerable variation across sites (Goetz, 2010, 2013; Gress et al., 2016). On average, the U.S. Department of Housing and Urban Development (HUD) estimates that just 27% of original residents return to mixed-income developments (Joice, 2017).

These findings raise concerns regarding potential resident displacement resulting from the housing redevelopment process and suggest that housing relocation and where families move in the process is a substantial factor that may contribute to resident quality-of-life following relocation. However, there remain many uncertainties surrounding the relocation process, particularly as it unfolds within the CNI. Additionally, resident return rates from prior initiatives tell us little about whether residents fared better or worse following relocation (Popkin et al., 2009). Despite low return rates, many residents relocated through programs like HOPE VI indicated that they were satisfied with their new housing and had no interest in returning to the

redeveloped mixed-income site (Levy et al., 2010; Popkin et al., 2009). Since a high proportion of families relocated under mixed-income redevelopment programs like HOPE VI and CNI do not return to the redeveloped mixed-income site, it is critical to examine the extent to which such initiatives promote moves to higher opportunity, less distressed neighborhoods that meet family needs.

The remainder of this chapter reviews literature on housing relocation programs and distinguishes relocation under mixed-income strategies, which include an involuntary, forced move for families. At the same time, the CNI includes a unique *right-to-return* policy that allows for priority re-entry into the redeveloped mixed-income housing, as well as a *one-for-one* unit replacement such that all units that are demolished must be replaced on-site or in the surrounding community. These unique policy mechanisms distinguishing the CNI from prior mixed-income strategies and create unique policy mechanisms that likely impact the housing relocation process in ways that have not fully been explored in current literature. I test these assumptions with an empirical model that examines the extent to which families impacted by the CNI relocate to higher opportunity, less disadvantaged neighborhoods during housing relocation, and the extent to which relocation decisions are associated with improvements to households' quality-of-life in terms of perceived stress and safety.

2.3. Background

2.3.1. Housing Relocation Programs and Neighborhood Attainment

Understanding housing relocation for low-income families is primarily informed by studies of housing demonstration programs whose primary intent was to provide voluntary opportunities for low-income families to move from socioeconomically disadvantaged neighborhoods into lower poverty, less segregated neighborhoods. Generally, these programs

offered low-income households housing subsidies (e.g., vouchers) to expand housing options for families in the private market and increased access to higher opportunity neighborhoods where families may not otherwise have been able to afford rents. Housing relocation programs were built on research that suggested that moving from neighborhoods characterized by high levels of disadvantage – like poverty, segregation, and crime - into higher opportunity neighborhoods would improve indicators of family health and well-being (Chetty et al., 2016; Rothwell, 2015). These expected benefits derived from exposure to neighborhood environments that were safer, less stressful, and provided necessary resources and opportunities to support low-income families and their children.

The *Hills vs. Gautreaux* supreme court case initiated one of the first large-scale housing relocation programs to assist low-income public housing families in moving out of substandard housing conditions using housing vouchers. Initiated in 1976 in Chicago, Illinois, Gautreaux I followed a quasi-experimental design, and eligible families with children who were interested in participating were randomly selected and allowed to move to neighborhoods that were less racially segregated using housing vouchers (Johnson, 2012). Evaluations of Gautreaux suggested that about 67% of participating families moved to lower poverty, less segregated neighborhoods primarily in the suburbs, and their children continued to live in similar neighborhoods as adults. Indeed, average neighborhood poverty rates for families were reduced from an average of 40% to 17% and these changes were sustained for up to 22 years following families' initial moves. Similarly, families moved from segregated neighborhoods where 87% of their neighbors were African American into more integrated neighborhoods where African Americans made up about 30% of the population (Duncan & Zuberi, 2006). And while Gautreaux did not assess effects on family well-being and quality-of-life, like mental health outcomes or perceptions of stress and

safety, the program did find substantial impacts on adult employment and children's education. While demonstrating promising effects, subsequent relocation programs have been unable to replicate findings from Gautreaux I primarily due to flaws in the program's study design and implementation including post-test only design and selection of participants who were more likely to successfully engage and remain in program activities (Johnson, 2012).

Based on the success of Gautreaux I, the Moving to Opportunity for Fair Housing Demonstration Program (MTO) was authorized in 1992 and implemented in 1994 across five cities in the U.S. Participants were randomly selected and assigned to one of the three relocation conditions: 1) housing vouchers in low-poverty neighborhoods, 2) Section 8 vouchers in any neighborhood, or 3) reassignment to public housing. Evaluations of MTO found that families assigned to the experimental group moved to neighborhoods with poverty rates that were about 35 percentage points lower than the control group, and families who received unrestricted housing vouchers moved to neighborhoods that were about 21 percentage points less poor compared to the control group (Ludwig et al., 2013).

Initial MTO program evaluations found negligible effects on adult employment and earnings and children's education. These findings were in part due to the superior research design of MTO, and because 80% of children remained in their original schools following relocation (Duncan & Zuberi, 2006; Johnson, 2012). However, more recent studies of MTO showed substantial benefits from moving to better neighborhoods in terms of increased earnings and college attendance rates for children who moved before the age of 13 (Rothwell, 2015). Teenagers and adults over 13 years old tended to realize no benefits, and in some cases experience adverse outcomes following relocation (Chetty & Hendren, 2018a, 2018b). Perhaps

the most promising program impacts were to improvements in quality-of-life outcomes including perceptions of safety, psychological distress, and depression (J. E. Rosenbaum & Zuberi, 2010).

The Housing Choice Voucher (HCV) Program has also aided in our understanding of the benefits and challenges of housing relocation for low-income families. The HCV was initiated in the 1970s as the Section 8 Voucher Program. Currently, the HCV program is among the largest housing assistance interventions in the U.S., assisting over 2 million families annually (Mazzara & Knudsen, 2019). The HCV program provides both project-based subsidies and vouchers that travel with families as they seek housing in the private market. Studies of voucher programs have found mixed results on the extent to which vouchers facilitate moves to higher opportunity, less disadvantaged neighborhood for families (Ellen, 2020; Owens, 2017; Pergamit et al., 2019; Varady, 2010).

Current research suggests that low-income families with children who utilize housing vouchers rarely live in low-poverty, high-opportunity neighborhoods (Mazzara and Knudson, 2019). In a study of the 50 largest metropolitan areas, Mazzara and Knudson (2019) found that about 14 percent of families utilized vouchers in low-poverty neighborhoods, defined as neighborhoods where the poverty rate was 10% or less. Approximately 33% of voucher assisted families resided in high-poverty neighborhoods, neighborhoods where the poverty rate was 30% or more. In their study, Mazzara and Knudson (2019) found that even fewer voucher assisted families lived in high-opportunity neighborhoods (5%), measured using a composite index including school quality, poverty, labor market engagement, access to jobs, and access to transit.

While the literature on housing relocation programs suggests that such programs are generally effective at moving some families to higher opportunity neighborhoods (Chetty et al., 2016; Ellen, 2020; Ludwig et al., 2013; Sanbonmatsu et al., 2012), this literature also suggests

that improvements may be marginal and apply to a relatively small number of families (Collinson & Ganong, 2018; Mazzara & Knudsen, 2019; Owens, 2017; Sampson, 2008). Additionally, the supply of available affordable housing, including units that accept housing vouchers, remains well below the number of families who need it (Mazzara & Knudsen, 2019). This is particularly true among high opportunity neighborhoods, where affordable housing options are further limited (Bergman et al., 2019). There is also evidence that certain families face numerous barriers to housing, such as families involved in child welfare services, in which housing mobility assistance programs may be less effective in terms of neighborhood attainment (Pergamit et al., 2017, 2019). In some instances, these programs may actually move families to neighborhoods that are objectively worse than their original residence (Collinson & Ganong, 2018; Feins & Patterson, 2005).

2.3.2. Housing Relocation Under Conditions of Involuntary Mobility

Despite the promising results of housing relocation programs like Gautreaux I, MTO, and the HCV, these programs did not involve involuntary, forced moves like those experienced by families living in public housing targeted for redevelopment through mixed-income initiatives. These families face unique constraints that may influence their relocation decisions in ways that may be substantially different from decisions made by families who relocate under less drastic conditions. Much of what we know about housing mobility under involuntary conditions comes from studies of HOPE VI.

Studies of HOPE VI revealed that many families faced numerous challenges during the relocation process that limited their housing options. These hard-to-house families, which included families with multiple complex needs such as severe mental illness, chronic health conditions, substance use problems, and criminal records, faced numerous challenges in the

private housing market and were more likely to relocate to other public housing sites (Popkin et al., 2009). Additionally, families with disabilities, families with long tenures in public housing, larger families, elderly households, and households that included family members with criminal offenses, faced additional barriers in the housing market due to their unique and complex needs (M. K. Cunningham et al., 2005). Larger households with children found it difficult to locate affordable housing that could accommodate their family and therefore were more likely to move in close proximity to the original redevelopment site or chose to remain onsite if given the choice (Kleit & Manzo, 2006). However, in a study of Chicago, IL families, larger households with children were more likely to utilize housing vouchers to move (Chaskin, Joseph, et al., 2012). Additionally, residents who were older chose to remain onsite, or relocated to public housing that was located in similar neighborhoods compared to the original site due to mobility challenges or to maintain access to local social and health services providers (Kleit & Manzo, 2006; Nguyen et al., 2016). Residents with lower levels of education, specifically those without a high school diploma or GED, also experienced or perceived limited housing options and chose to relocate to public housing in similar neighborhoods compared to their original residence (Clampet-Lundquist, 2004).

Despite these challenges, several studies found that HOPE VI families moved to safer, less poor neighborhoods (Chyn, 2018; Curley, 2010; Nguyen et al., 2016; Popkin et al., 2009). Chyn (2018) found that Chicago, IL, families relocated through programs like HOPE VI moved to neighborhoods that were roughly 21% less poor and experienced roughly 42% fewer crime incidents compared to public housing families who did not face involuntary relocation. These findings were similar to those of Chaskin, Joseph, Voelker, and Dworsky (2012) who found that families that relocated with vouchers under Chicago's Plan for Transformation moved to

neighborhoods with lower poverty rates. Nguyen and colleagues (2016) found that HOPE VI families in Charlotte, NC, relocated to higher quality neighborhoods compared to their original public housing residence. HOPE VI families in Philadelphia, PA that utilized housing vouchers moved to higher quality neighborhoods compared to their original residence and compared to HOPE VI families that relocated to public housing (Clampet-Lundquist, 2004). Findings were similar among HOPE VI families in Atlanta, GA, with voucher movers improving neighborhood quality compared to HOPE VI families that relocated to public housing (Oakley et al., 2011).

One caveat to these findings was that HOPE VI developments in some sites were among the most disadvantaged communities in their respective cities (Tach & Emory, 2017). Thus, most moves placed families in less disadvantaged neighborhoods. Indeed, several studies have found that HOPE VI families moved to neighborhoods that improved modestly compared to their original neighborhoods and remained very low income and racially segregated (Johnson-Hart, 2007; Keene & Geronimus, 2011; Kingsley et al., 2003; Oakley et al., 2011). In a panel study of HOPE VI families, about half of all families that moved using housing vouchers lived in neighborhoods with less than 20% poverty, but racial segregation remained high (Popkin et al., 2009). Relocated residents also tended to move within close proximity to the original redevelopment site with most moving a few miles away (Buron et al., 2013).

Although many relocated HOPE VI families were dispersed across neighborhoods with lower poverty, there was also evidence that HOPE VI voucher users clustered together in segregated, disadvantaged neighborhoods in some sites (Kingsley et al., 2003; Oakley & Burchfield, 2009). For example, Oakley and Burchfield (2009) found that voucher holders in Chicago, IL, were more likely to move to more disadvantaged neighborhoods and to areas with higher concentrations of other voucher holders. Conversely, residents who moved to other public

housing sites experienced only marginal improvements in neighborhood quality, reported substantial problems with crime and disorder, and felt unsafe due to drugs and illicit activities in their new neighborhoods (Popkin et al., 2009). Many families, particularly at sites that provided poor relocation services, moved to similarly distressed neighborhoods and a sizable number of families reported worse neighborhood and housing conditions (Buron et al., 2002; Popkin et al., 2009).

2.3.3. Benefits of Housing Relocation in Mixed-Income Initiatives

The most promising effects of mixed-income development initiatives appear to be to indicators of quality-of-life and mental health. Research suggests improvements on indicators of quality-of-life such as general stress, perceptions of home and neighborhood safety (Joseph & Chaskin, 2010; Levy et al., 2010, 2013; Webb et al., 2017), and neighborhood satisfaction (Brooks et al., 2005; Popkin et al., 2009; Popkin, Katz, et al., 2004; Popkin, Levy, et al., 2004). For example, studies of HOPE VI found that most residents that were relocated to the private housing market using vouchers reported significant reductions in depression and anxiety (Popkin et al., 2009; Webb et al., 2017). Additionally, residents who relocated to housing in the private market generally reported improvements in perceptions of neighborhood quality, fear of crime, and safety (Buron et al., 2002; Popkin et al., 2009; Popkin, Katz, et al., 2004; Popkin, Levy, et al., 2004).

Webb et al. (2017) found significant reductions in post-relocation depression among most residents who moved to the private market and those who moved to other public housing. These reductions in depression were also associated with increased feelings of safety, social support, and length of tenure in residents' new neighborhoods (Webb et al., 2017). However, a sizeable portion of movers (34%) reported increased depressive symptoms, particularly those residents

who reported high levels of pre-relocation social support (Webb et al., 2017). Additionally, individuals with high levels of depression were more likely to relocate to other public housing rather than to the private market via housing voucher (Webb et al., 2017). In one of the few studies of CNI families in Florida, relocated public housing residents reported significantly higher levels of stress compared to non-relocated families that lived in the same community (Donley & Nicholson, 2019).

Based on the literature, evidence is mixed on whether mixed-income community development interventions like the CNI improve neighborhood quality for residents during the redevelopment phases of the program. Given the CNI's unique *right-to-return* policy, which gives target families priority re-entry into the newly developed CNI housing, it is possible that CNI families view their moves as temporary and may settle for lower quality housing in lower quality neighborhoods under the belief that they will be able to return to the housing site after development is complete. The inconsistent findings of neighborhood quality improvement for families reported in the literature, along with expected low rates of return to mixed-income development sites, represent critical gaps in knowledge. Housing relocation and the extent to which the CNI facilitates family moves to higher opportunity, less disadvantaged neighborhoods is an important short-term indicator of program success. Additionally, the extent to which families improve their quality-of-life through housing relocation represents another gap in knowledge, particularly as it applies to current mixed-income strategies.

2.3.4. The South City Choice Neighborhoods Initiative (CNI)

This study examined housing relocation and family well-being in the South City CNI in Memphis, TN. The South City CNI received a \$250,000-dollar CNI Planning Grant in 2010, and a \$30 million-dollar CNI Implementation Grant in 2015. The South City CNI is led by the

Memphis Housing Authority (MHA) and co-led by the City of Memphis (U.S. Department of Housing and Urban Development, 2015b, 2015a). Additionally, the CNI has three core strategy areas: people, housing, and neighborhoods. Urban Strategies, a national nonprofit organization that provides supportive services to low-income families in public housing, leads the people strategy area. McCormack Baron Salazar, a national affordable housing development firm, leads the housing strategy area. The City of Memphis Division of Housing and Community Development leads the neighborhood strategy area.

The South City CNI focuses revitalization efforts on Foote Homes, a 420-unit public housing complex. The South City Transformation Plan guides initiative implementation and includes plans for the redevelopment of Foote Homes and the surrounding neighborhoods. Housing redevelopment includes 712 mixed-income units, with 600 units being constructed onsite, 112 units being constructed offsite, and 87 project-based vouchers (PBVS) reserved for use in the surrounding neighborhood for Foote Homes residents during housing relocation. The plan also includes the provision of supportive services for families and critical community improvements in the neighborhood. The redevelopment plan includes six phases of housing redevelopment, including four phases onsite, an onsite senior building (Phase 5), and offsite housing development in the neighborhood (Phase 6).

The South City CNI was purposively chosen for this study based on partner consultation, local context, and data availability to answer the dissertation research questions. South City CNI partners have relocated all CNI families from Foote Homes, the site targeted for redevelopment, and have made substantial progress on proposed development phases. Additionally, while the South City CNI has experienced challenges, the initiative represents an effective, high functioning partnership model according to local partners (Jones & Bradley, 2021).

2.4. Theoretical Framework

In this study I utilized the push-pull framework of housing choice to understand the dynamics of housing relocation for low-income families effected by mixed-income development initiatives like the CNI (DeLuca & Jang-Trettien, 2020; Kleit et al., 2016; Rufa & Fowler, 2018). The push-pull framework extends rational choice theories of housing choice specifically applied to low-income families. Rational choice theory suggests that housing decisions are based on utility maximizing, cost-benefit calculations informed by household needs, preferences, and available resources (Kleit et al., 2016). According to rational choice theory, families consider their current living situation, which may include satisfaction with housing and neighborhood quality, in relation to the costs and benefits associated with other housing and location options given limited resources and imperfect information (Kleit et al., 2016). In this process, all households consider a variety of push and pull factors when deciding if and when to move residences. Push factors include negative attributes associated with a family's current residence, whereas pull factors include the positive attributes associated with potential destinations (Kleit et al., 2016). Thus, housing relocation decisions represent a reasoning process whereby households weigh various push and pull factors to arrive at a rational housing choice.

However, low-income families face unique housing mobility challenges compared to middle- and upper-class families. Kleit et al. (2016) provide a conceptual framework to understand the unique trade-offs low-income families make between housing stability, residential mobility, and neighborhood quality. Kleit et al. (2016) suggest that household relocation decisions for low-income families results from an interactive process that includes: 1) underlying reasons for moving including push and pull factors, 2) mobility outcomes in terms of

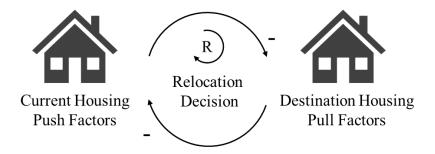
moving to similar, better, or worse neighborhoods compared to the original residence, and 3) the extent to which past and current moves have been voluntary or forced (Kleit et al., 2016).

Compared to the average household, low-income families often confront heightened push factors (e.g., poor housing quality, evictions, etc.) and unexpected pull factors (e.g., housing unaffordability, inadequate housing counseling and search assistance) that influence their housing decisions (Kleit et al., 2016). For example, low-income families may move within close proximity to their original residence to maintain social ties and connections to important resources and services to support basic family needs (e.g., childcare) (Kleit et al., 2016). Additionally, low-income families may experience and perceive limited housing options available to them, and therefore trade off neighborhood quality for housing quality and affordability (Rufa & Fowler, 2018). At the same time, low-income families with children may settle for lower quality housing to resolve immediate housing crises (e.g., homelessness) in order to preserve family stability (Rufa & Fowler, 2018).

The theoretical model suggests that low-income families who experience greater risks, including housing instability and the forced nature of the relocation decision, are more likely to make relocation decisions to resolve immediate housing crises (e.g., push factors), and thus are less likely to move to higher opportunity neighborhoods (e.g., pull factors) due to the need to secure affordable housing quickly. The push-pull dynamics of housing choice for low-income families appears as Figure 2.1. The figure illustrates a reinforcing dynamic of housing choice for low-income families under conditions of forced mobility. As push factors increase, pull factors – like neighborhood and school quality – become less salient in the relocation decision. As the salience of pull factors decreases, families prioritize resolving push factors with goals to find and lease affordable housing quickly.

Figure 2.1

Push-Pull Framework of Housing Choice for Low-Income Families.



Note. The push-pull framework illustrates that as push factors become more salient in the relocation decision, as is the case under conditions of involuntary mobility, pull factors become less important in housing choices for low-income families.

In the context of the CNI, all families experience an involuntary move because of the program's design to redevelop distressed public housing where families live. Therefore, the CNI acts as a shock that pushes family out of their current housing, with potential to induce reactive moves that are marked by limited time frames and short-term solutions to secure housing quickly rather than long-term solutions to secure affordable, high-quality housing in higher opportunity neighborhoods (DeLuca & Jang-Trettien, 2020). Given the CNI's unique *right-to-return* policy, which gives target families priority re-entry into the newly developed CNI housing, it is possible that CNI families view their moves as temporary and may settle for lower quality housing in lower quality neighborhoods with hopes of returning to the CNI site after development is complete.

Based on the theoretical framework and literature on housing choice in the context of involuntary mobility, several hypotheses emerge regarding housing relocation for CNI families. The literature suggests that relatively few families will move to higher opportunity neighborhoods due to immediate needs to secure affordable housing under a shortened relocation time frame imposed by the CNI. Additionally, given the *right-to-return* policy unique to the

CNI, families may choose to relocate near the CNI development site (e.g., relocate to housing in the surrounding neighborhood) in hopes that they may return to redeveloped CNI housing, or benefit from community improvements as a result of CNI community investments.

There are also several family demographic and socioeconomic factors that may influence housing relocation decisions for CNI families. Families with multiple complex needs may face additional barriers in the housing market that limit their housing choices. Larger families with children may find it difficult to locate affordable housing to accommodate family needs. Hard-tohouse households, such as those with disabilities and chronic health concerns, may be less likely to move to higher opportunity neighborhoods due to limited housing options suitable to their housing needs, limited search capacities, and the need to maintain proximity to local services, care providers, and social support networks.

Families that utilized housing vouchers were expected to move to higher opportunity, less disadvantaged neighborhoods compared to families who moved without vouchers. This was expected because of the spatial distribution of other housing options like relocating to other public housing developments, which tend to be located in predominantly low-income neighborhoods. In addition to factors expected to influence family relocation decisions to stay within or leave the CNI project neighborhood, families who relocated outside of the project neighborhood were expected to improve their neighborhood conditions relative to families who moved within the project neighborhood. This was expected because neighborhoods targeted by CNI grants tend to be highly distressed relative to other neighborhoods (Gebhardt, 2014). Additionally, all CNI families were expected to experience improvements in quality-of-life indicators as a result of moving out of the severely distressed public housing site targeted for redevelopment. Additionally, families who moved out of the project neighborhood were

expected to experience greater quality-of-life improvements relative to families who stayed in the project neighborhood as a result of improved neighborhood environments.

2.5. Study Purpose and Research Questions

The purpose of this study was to examine the extent to which mixed-income development initiatives, like the CNI, facilitated moves to higher opportunity, less disadvantaged neighborhoods during the housing relocation process, and whether these moves improved family well-being. The theoretical model proposed by Kleit et al. (2016) and informed by prior studies of mixed-income redevelopment interventions informed the following research questions: 1) what families stay in versus leave neighborhoods targeted by the CNI, 2) to what extent does the CNI facilitate moves to higher opportunity, less disadvantaged neighborhoods for families during the redevelopment phase of the intervention, and 3) to what extent do family relocation decisions impact changes to quality-of-life outcomes in terms of perceived stress and safety.

To address the research questions, I utilized novel administrative case management data for CNI families collected over a roughly six-year period from December 2015 through September 2021. This longitudinal data included household-level demographic and socioeconomic information for CNI families and allowed for the examination of changes in families' neighborhoods and quality-of-life over time.

2.6. Methods

2.6.1. Participants

Participants included families who lived in the Foote Homes public housing development and received case management services provided by Urban Strategies, Inc. (n=383). The sample included adults over 18 who were identified as the family head-of-household. All families either lived in Foote Homes at the time of the CNI Implementation Grant award in July 2015 or moved

into Foote Homes after the grant was awarded but prior to housing relocation which occurred from December 2015 through May 2017. At the time of the CNI grant notification, 414 families lived at Foote Homes. Families who lived at Foote Homes but who did not receive case management services provided by Urban Strategies were excluded from the study because data for those families were unavailable.

2.6.2. Procedures

Household-level data for CNI families was collected by Urban Strategies case managers roughly six months prior to the first development phase of the CNI starting in December 2015. De-identified household-level administrative data was made available through a partnership between Urban Strategies and the Social Policy Institute (SPI) at the Brown School at Washington University in St. Louis (IRB# 202006188). All data were deidentified by Urban Strategies staff and transferred to a shared online folder that was password protected and available only to the research team. Data come from multiple family assessments which documented head-of-household sociodemographic information, employment and housing statuses, relocation assistance type (e.g., voucher utilization), Zip Code information for baseline and current location of the family, and quality-of-life indicators of perceived stress and safety. Neighborhood attainment data were collected from select indicators from the American Community Survey (ACS) 5-Year estimates at two non-overlapping time points that corresponded to baseline (ACS 2010-2014) and follow-up (ACS 2015-2019) assessments. Neighborhood data were exported directly from Social Explorer for all Zip Code Tabulation Areas (ZCTA) fully or partially contained within Shelby County, TN.

2.6.3. Measures

Household Demographic Characteristics. Household demographic data for CNI families included gender, age, and race/ethnicity. All data were gathered from the family's headof-household. Gender was a binary variable (e.g., male, female). Age was a continuous variable measured in years. Race/ethnicity was a nominal categorical variable with six response options (e.g., Asian, American Indian or Alaskan Native, Black or African American, Caucasian or White, Hawaiian or Pacific Islander, Other). Race/ethnicity was transformed into a binary variable for Black or African American (1) or non-Black or African American (0).

Household Socioeconomic Characteristics. Household socioeconomic data for CNI families included employment status, educational level, marital status, disability status, chronic health status, and household size. Employment status was a binary indicator assessed through the following item: Are you currently employed, in school or in a job-training program (yes/no)? Educational level was an ordinal categorical variable with seven response options: 1) less than high school, 2) some high school or GED training, 3) high school diploma or GED, 4) some college, 5) Associate's degree, 6) Bachelor's degree, or 7) Master's or Professional degree. Educational level was transformed into a binary variable indicating less than high school (0) and high school graduate or GED or more (1). Marital status was a nominal categorical variable with seven response options (e.g., common law, divorced, domestic partner, married, separated, single, widowed). Marital status was transformed into a dichotomous variable for not partnered or married (0) and partnered or married (1). Disability status was a binary dichotomous variable assessed by the following item: Do you have a disability (yes/no)? Chronic health status was a binary dichotomous variable assessed by the following item: Do you have a chronic health condition (yes/no)? Chronic health conditions included high blood pressure, Type II diabetes,

asthma, overweight, arthritis, high cholesterol, and other. Household size was a continuous variable representing the total number of family members in the household.

Household Housing Assistance Type. Housing assistance was a nominal categorical variable with six response options including: 1) relocated to non-HUD assisted rental housing, 2) received a Housing Choice Voucher (HCV), 3) relocated to public housing, 4) relocated to Project-Based Section 8 unit, 5) relocated to a tax credit unit, 6) relocated to homeownership, 7) other relocation assistance. Housing assistance type was transformed into a binary dichotomous variable for families who relocated without a housing voucher (0) and those who relocated using a housing voucher (1).

Household Relocation Decision. Relocation decision was a binary dichotomous variable indicating whether a family moved to a different Zip Code during relocation (0) or stayed in the project Zip Code (1). Family Zip Codes were recorded once at baseline and were also available for each household's current known Zip Code at the time of data collection in September 2021.

Assessment Year. Assessment year was created using dates of assessments in order to assess change in quality-of-life outcomes over time. Because household assessments were not consistent across families and time, yearly panels were created such that baseline for all families occurred between December 2015 and December 2016, and follow-up occurred yearly after baseline. Families who had multiple assessments within each year were collapsed such that sociodemographic characteristics were time invariant and outcome measures were averaged across assessments within each panel. For analysis, time was centered based on the sample mean.

Quality-of-Life. Three indicators of quality-of-life were used to assess changes in family well-being over time in terms of perceived home safety, neighborhood safety, and stress. Perceived stress was assessed with one item: On a scale of 1-5, how would you rate your level of

stress? Response options included no stress (1), very low stress (2), somewhat stressed (3) high stress (4), and severely stressed (5). Perceived home safety was assessed with the following item: On a scale of 1-5, how safe do you feel in your home? Response options included not safe (1), somewhat safe (2), safe (3), very safe (4), and extremely safe (5). Perceived neighborhood safety was assessed with the following item: On a scale of 1-5, how safe do you feel in your neighborhood? Response options included not safe (1), somewhat safe (2), safe (3), very safe (4), and extremely safe (2), safe (3), very safe (4), and extremely safe (2), safe (3), very safe (4), and extremely safe (5). While single item measures to assess complex psychosocial phenomena like stress and safety are not ideal, studies have shown adequate reliability and validity of similar single item measures (Assari, 2017; Littman et al., 2006). Additionally, similar items have been utilized in previous studies of mixed-income development initiatives like HOPE VI (Holin et al., 2003; Popkin et al., 2009; Popkin, Levy, et al., 2004).

Neighborhood Attainment. Household-level changes to neighborhood attainment were assessed using six indicators from the American Community Survey (ACS) 5-Year Estimates for two non-overlapping time points that corresponded to baseline and follow-up family assessments (baseline = ACS 2010-2014; follow-up = ACS 2015-2019). The six indicators included the percentage of: 1) families below poverty, 2) African American population, 3) unemployment 4) female headed households, 5) children under 18 years old, and 6) public assistance households (Sampson et al., 1997). These indicators were used to create an index of neighborhood disadvantage at baseline and follow-up using principal components analysis (PCA) with varimax rotation. The items demonstrated adequate reliability at baseline ($\alpha = 0.79$) and follow-up ($\alpha=0.94$) and were normed to the Memphis metropolitan area. Component at baseline ($\lambda=4.67$) that explained 78% of the total variance of the six variables, and one component at follow-up

 $(\lambda=4.41)$ that explained 73% of the total variance of the six variables (Tables 2.7 to 2.10, Chapter 2 Appendix). For analysis, regression weighted scores were calculated by standardizing each neighborhood indicator by the mean and standard deviation of all Memphis Zip Codes and multiplying each standardized indicator by the predicted component scores from the PCA. Next, disadvantage indices were created by averaging across all indicators for baseline and follow-up. The follow-up index was time adjusted by standardizing each indicator by the baseline mean and standard deviation. Finally, a regression weighted time adjusted change score was created to reflect changes in neighborhood attainment from baseline to follow-up for all families (Table 2.11, Chapter 2 Appendix).

2.6.4. Data Analysis Plan

Data analyses occurred in several steps. Initially, bivariate tests of associations were conducted to explore baseline differences between household characteristics and relocation decisions for households who remained in the CNI Zip Code at follow-up (i.e., stayers) compared to households who moved out of the CNI Zip Code (i.e., leavers) during the redevelopment phase of the CNI. Bivariate associations for the following key variables were examined: age, gender, marital status, household size, disability status, chronic health status, employment status, education status, and housing assistance type.

Next, the need for propensity score weighting of the relocation decision was assessed using logistic regression. Household-level propensity scores were estimated using theoretically important baseline demographic and socioeconomic characteristics for families who stayed in the same neighborhood (e.g., control) and families who moved to different neighborhoods (e.g., treatment) (Research Question 1, Figure 2.2). The distribution of propensity scores for each group was examined for group equivalence for the propensity to relocate within or outside the

CNI Zip Code. This analytic approach was taken because it was assumed that baseline differences would exist between households who stayed compared to those who left the project Zip Code. The analytic approach represents a common method in non-random observational studies to statistically adjust for selection into a treatment of concern if differences between groups exists (P. C. Austin & Stuart, 2015; Guo et al., 2020; H. Kim, 2019). Propensity scores represented the probability of receiving the treatment conditional on a set of theoretically important observed covariates (P. R. Rosenbaum & Rubin, 1983). In the case of the CNI, the treatment of concern was relocation into a different neighborhood than that from the original public housing site.

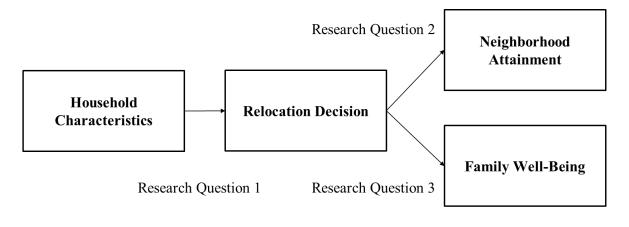
Next, linear regression analysis was utilized to examine associations between the relocation decision and changes in neighborhood attainment from baseline to follow-up, controlling for household baseline characteristics (Research Question 2, Figure 2.2). This followed a model building approach whereby baseline demographic and socioeconomic characteristics were entered into the first model and the relocation decision was added to the second model.

Finally, multilevel mixed-effects modeling was utilized to examine change over time in three quality-of-life indicators to assess family well-being: home safety, neighborhood safety, and stress (Research Question 3, Figure 2.2). Separate models were conducted for each outcome because they were conceptualized as representing distinct psychosocial phenomenon and did not represent a single construct of well-being when examining internal consistency reliability ($\alpha = 0.59$). Unconditional models included the repeated outcome assessments and time in level one and a household identifier at level two. Time was modeled as linear, quadratic, and cubic for each outcome and the best fitting model was selected based on reductions in AIC, BIC, and LL.

Next, Conditional models added a group by time interaction term to examine differential change over time based on households' relocation decision, covarying baseline characteristics and change in neighborhood disadvantage from baseline to follow-up. Because each model was the same except for the addition of time terms, they were considered nested. This analytic method was chosen because it was appropriate for modeling change over time for repeated measurements in the dependent variables (Snijders & Bosker, 2012). The full conceptual model tested appears as Figure 2.2.

Figure 2.2

Conceptual Model of Choice Neighborhoods Initiative (CNI) Family Housing Relocation



Baseline (Month 0 to 12) CNI Intervention (Month 12) Follow Up (Months 13 to 72)

2.7. Results

2.7.1. Sample Characteristics

Participants included 383 heads-of-household who lived at Foote Homes and received case management services from Urban Strategies in Memphis, TN. Prior to analysis, sample attrition was examined. Households were considered lost to follow-up if they were missing assessment data for the final three years of the study period (n=87). Bivariate analyses indicated

that households who were lost to follow-up were significantly more likely to receive a housing voucher and were younger, on average, compared to all families at baseline (Table 2.12, Chapter 2 Appendix). When examining baseline household characteristics collectively, household who were lost to follow-up were more likely to receive a housing voucher compared to households with follow-up assessments (Table 2.13, Chapter 2 Appendix). Therefore, the sample may underrepresent households who were able to secure housing vouchers and move quickly.

Families served by Urban Strategies (i.e., CNI families) were similar to all families that lived in Foote Homes at the time of the CNI Implementation Grant award and were primarily African American, female headed households. Table 2.1 includes select household characteristics of CNI families compared to HUD data for Foote Homes families and all public housing households in Memphis in 2015.

Table 2.1

Select Household Characteristics of Choice Neighborhoods Initiative (CNI) Families Compared to All Foote Homes Families and Memphis Housing Authority Families

	CNI Family Data ^a		Foote Homes 2015 ^b			HA 15 ^b
	n	%	n	%	n	%
Total Households	383	100%	394	100%	2,838	100%
Race/Ethnicity						
African American	381	99%	390	99%	2,753	97%
Age						
24 years or less	13	4%	20	5%	114	4%
25 to 49 years	211	57%	229	58%	1,164	41%
50 to 60 years	84	23%	91	23%	653	23%
61 years or more	60	16%	55	14%	937	33%
Family Type						
Female headed households	355	93%	362	92%	2,072	73%
Female HH with children	167	47%	209	53%	993	35%

Average Household Size	2.7	-	2.5	-	2	-
Employment Status ^c	109	28%	95	24%	1,036	27%
Disability Status ^d	99	24%	83	21%	1,078	38%

^aData from administrative case management records.

^bData from U.S. Department of Housing and Urban Development (HUD) Picture of Subsidized Households 2015 (<u>https://www.huduser.gov/portal/datasets/assthsg.html#2009-2020</u>). Number of total units in Foote Homes was 420 units. Memphis Housing Authority (MHA) total units was 2,974.

^cEmployment data for HUD Subsidized Households represent the percent of heads of households where wages were a major source of income.

^dDisability status for HUD Subsidized Households represent the percent of heads of households ages 61 and under who reported having a disability.

Sample characteristics by relocation decision appear as Table 2.2. The sample included

African American households (99%), most of which were female headed (93%). Average age for

the sample was 46 years (M=45.79, SD=14.21) and ranged from 21 to 93 years. Households

included approximately three people per household (M=2.72, SD=1.69). The majority of

households had a high school degree or more (57%) and about a third were employed (30%).

Roughly 26% of the sample reported having a disability and 24% reported a chronic health

condition. At baseline, just under half of all households received a housing voucher to assist with

relocation (45%). At baseline, all families reported low levels of stress (M=1.72, SD=1), and felt

generally safe at home (M=3.09, SD=0.86) and in the neighborhood (M=2.92, SD=0.92).

Table 2.2

Associations Between Baseline Household Characteristics and Relocation Decisions among Choice Neighborhoods Initiative (CNI) Families in Memphis, TN

		otal =383)	Stayer (n=138)		Leaver (n=245)					
	Freq	%	Freq	%	Freq	%	Test ^a	Sig		
Race										
African American	381	99.48	136	98.55	245	100	χ ² =3.57	p=0.13		
Caucasian	1	0.26	1	0.72	0	0				
Other Hispanic	1	0.26	1	0.72	0	0				

Gender								
Female	355	92.69	127	92.03	228	93.06	$\chi^2 = 0.14$	p=0.71
Male	28	7.31	11	7.97	17	7.94		
Marital Status								
Single	356	92.95	122	88.41	234	95.51	$\chi^2 = 0.15$	p=0.10
Married	4	1.04	1	0.72	3	1.22		
Missing	23	6.01	15	10.87	8	3.27		
Disability Status								
Yes	99	25.85	38	27.54	61	24.90	$\chi^2 = 11.62$	p=0.004
No	264	68.93	86	62.32	178	72.65		
Missing	20	5.22	14	10.14	6	2.45		
HCV Status								
Yes	174	45.43	52	37.68	122	49.80	$\chi^2 = 5.23$	p=0.02
No	209	54.57	86	62.32	123	50.20		
Education Status								
Less than HS	163	42.56	63	45.65	100	40.81	$\chi^2 = 0.85$	p=0.36
HS or more	220	57.44	75	54.38	145	59.18		
Employment ^b								
Yes	109	28.46	39	28.26	70	28.57	$\chi^2 = 0.004$	p=0.95
No	274	71.54	99	71.74	175	71.43		
Chronic Health								
Condition ^c								
Yes	92	24.02	38	27.54	54	22.04	χ ² =1.46	p=0.23
No	291	75.98	100	72.46	191	77.96		
	Μ	SD	Μ	SD	Μ	SD	Test	Sig
Family Size	2.72	1.69	2.78	1.56	2.68	1.77	t=-0.56	p=0.58
Age	45.79	14.21	46.97	15.08	45.12	13.71	t=-1.22	p=0.22
Baseline Stress	1.72	1.00	1.69	0.93	1.73	1.04	t=-0.44	p=0.66
Baseline Home								
Safety	3.09	0.86	3.14	0.84	3.06	0.87	t=0.82	p=0.41
Baseline								
Neighborhood Safety	2.92	0.92	3.04	0.87	2.85	0.92	t=1.93	p=0.06

Neighborhood Safety 2.92 0.92 3.04 0.87 2.85 0.92 t=1.93 p=0.06 aResults of Pearson χ^2 tests reported when cell contains greater than 10 observations. Results of Fisher's exact test reported when cell contains 10 or fewer observations.

^bEmployment represents whether a head of household was enrolled in an employment, education, or training program at baseline.

^cSelf-reported chronic health status. Chronic health conditions include high blood pressure, arthritis, diabetes, and other chronic physical and mental health problems.

From baseline to follow-up, 36% of families moved within the project Zip Code and 64%

left the project Zip Code. Relocation destinations at follow-up appear as Figure 2.3. In the figure,

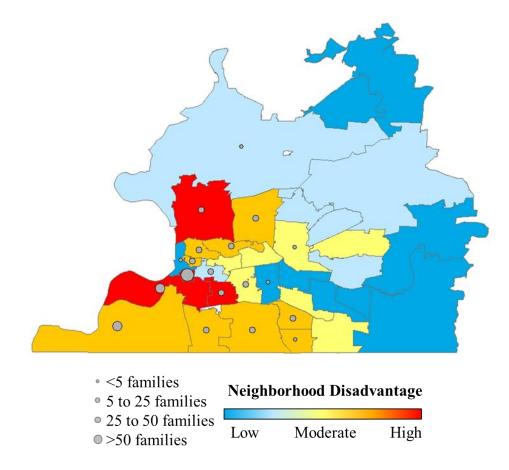
circles indicate the number of families living in a particular Zip Code at follow-up. Circles are

sized by the number of families that moved such that larger circles indicate more families. Zip

Codes are symbolized such that red indicates higher disadvantage and blue indicates lower disadvantage. The largest circle on the map is located within the CNI project Zip Code.

Figure 2.3

Relocation Destinations for Choice Neighborhoods Initiative (CNI) Families at Follow-Up



2.7.2. Research Question 1: What Families Stay Versus Leave Neighborhoods Targeted by the Choice Neighborhoods Initiative (CNI)?

Bivariate tests of association and logistic regression for the relocation decision were conducted to examine baseline household differences in decisions to stay versus leave the project Zip Code. Bivariate results appear as Table 2.2. Results indicated that housing assistance type was significantly associated with the relocation decision (χ^2 =5.23 p<0.05). Specifically, households who received a housing voucher were more likely to leave the project Zip Code. Additionally, disability status was associated with relocation decisions (χ^2 =11.62 p<0.01). Specifically, households without a disability were more likely to leave the project Zip Code. All other baseline household characteristics were not significantly associated with the relocation decision (Table 2.2).

Logistic regression results for the propensity to relocate outside of the project Zip Code appear as Table 2.3. Logistic regression results suggested that when considering all baseline household characteristics together, perceived neighborhood safety was significantly associated with decisions to leave the project Zip Code (OR=0.60, p<0.05). Specifically, households that reported feeling safer in the neighborhood at baseline were less likely to relocate to a different Zip Code at follow-up. There were no other significant differences in relocation decisions between households who stayed in the project Zip Code and those who left the project Zip Code. Further examination of the logistic regression results using a likelihood ratio test and area under the curve (AUC) indicated that baseline household characteristics were not reliable predictors of the relocation decision; results indicated that the model was not much better at predicting the relocation decision than random chance (AUC=0.63). Additional sensitivity analyses including interaction terms between housing voucher status, household size, and household age were also conducted and substantive results remained unchanged (Table 2.14, Chapter 2 Appendix). Thus, because stayers and leavers were nearly equivalent on observable baseline characteristics, propensity score weighting was determined unnecessary for subsequent analyses.

Table 2.3

Logistic Regression Results for Associations Between Baseline Household Characteristics and the Propensity to Relocate Outside of the Project Zip Code

	OR	SE	CI Lower	CI Upper	Z	р
Female	0.98	0.45	0.40	2.40	-0.04	0.97

$\begin{array}{c c c c c c c c c c c c c c c c c c c $	Disabled	0.96	0.30	0.51	1.79	-0.14	0.89
$\begin{array}{c c c c c c c c c c c c c c c c c c c $							
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
Age0.980.010.961.00-1.350.18Household Size0.860.070.741.01-1.810.07Housing Voucher1.490.350.942.341.710.09Baseline Stress1.070.130.841.360.550.58Baseline Home Safety1.440.380.862.431.370.17Baseline Neighborhood Safety0.610.150.371.00-1.980.04LL-225.29LR χ^2 15.58Prob> χ^2 0.16AUC0.63LinkTestbSECI LowerCI Upperzp_hat1.030.57-0.092.151.810.07_hatsq-0.020.35-0.720.67-0.060.95_cons-0.010.23-0.460.44-0.030.98LL-225.29LR χ^2 15.59Prob> χ^2 0.000.00							
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		0.98	0.01	0.96	1.00	-1.35	
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	-	0.86	0.07	0.74	1.01	-1.81	0.07
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	Housing Voucher	1.49	0.35	0.94	2.34	1.71	0.09
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		1.07	0.13	0.84	1.36	0.55	0.58
LL -225.29 LR χ^2 15.58 Prob> χ^2 0.16 Pseudo R-squared 0.03 AUC 0.63 LinkTest b SE _hat 1.03 0.57 -0.09 2.15 _hatsq -0.02 0.35 -0.72 0.67 -0.06 0.95 _cons -0.01 0.23 -0.46 0.44 -0.03 0.98 LL -225.29 LR χ^2 15.59 prob> χ^2 0.00 0.00	Baseline Home Safety	1.44	0.38	0.86	2.43	1.37	0.17
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Baseline Neighborhood Safety	0.61	0.15	0.37	1.00	-1.98	0.04
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	LL	-225.29					
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	$LR \chi^2$	15.58					
$\begin{array}{c c c c c c c c c c c c c c c c c c c $	$\text{Prob} > \chi^2$	0.16					
$\begin{array}{c c c c c c c c c c c c c c c c c c c $	Pseudo R-squared	0.03					
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		0.63					
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	LinkTest	b	SE	CI Lower	CI Upper	Z	р
$\begin{array}{c c c c c c c c c c c c c c c c c c c $	_hat	1.03	0.57	-0.09	2.15	1.81	0.07
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	_hatsq	-0.02	0.35	-0.72	0.67	-0.06	0.95
LR χ^2 15.59 Prob> χ^2 0.00	_cons	-0.01	0.23	-0.46	0.44	-0.03	0.98
$Prob>\chi^2 \qquad 0.00$	LL	-225.29					
	$LR \chi^2$	15.59					
Pseudo $\mathbf{R}_{-squared}$ 0.03	$Prob > \chi^2$	0.00					
- i seddo R-squared 0.05	Pseudo R-squared	0.03					

Note. Age and household size are mean centered

2.7.3. Research Question 2: Does the Choice Neighborhoods Initiative (CNI) Facilitate

Moves to Less Disadvantaged Neighborhoods for Families?

Bivariate tests of association were conducted to examine associations between household relocation decisions, neighborhood disadvantage at follow-up, and changes in neighborhood disadvantage from baseline to follow-up (Table 2.4). Given the unique design of the South City CNI, all households moved prior to housing redevelopment with some families moving within the project Zip Code (e.g., stayers) and others moving out of the project Zip Code (e.g., leavers). Both types of moves could result in changes to neighborhood disadvantage. For stayers, neighborhood change represented change within the project Zip Code. For leavers, neighborhood change represented change due to moving to a different Zip Code.

Results indicated that the relocation decision was associated with neighborhood disadvantage at follow-up (t=-29.62, p<0.001), and changes in neighborhood disadvantage from baseline to follow-up (t=-26.60, p<0.001). Leavers and stayers both reduced their levels of neighborhood disadvantage over time. However, households who left the project Zip Code experienced significant reductions in neighborhood disadvantage from baseline to follow-up (M=-0.86, SD=0.22) compared to households who stayed in the project Zip Code (M=-0.46, SD=0.07). Stayers reduced their neighborhood disadvantage by approximately one standard deviation while leavers reduced their neighborhood disadvantage by two standard deviations relative to the mean of all Memphis area Zip Codes.

At follow-up, leavers were living in less disadvantaged neighborhoods. However, they remained in neighborhoods that were approximately one standard deviation above the sample mean level of neighborhood disadvantage for all Memphis area Zip Codes. Additionally, while stayers experienced reductions in neighborhood disadvantage over time, the project Zip Code remained the most disadvantaged Zip Code at baseline and at follow-up relative to all other Memphis area Zip Codes (Table 2.11, Chapter 2 Appendix).

Neighborhood Characteristics at Follow-Up and Changes from Baseline to Follow-Up for Choice Neighborhoods Initiative (CNI) Stayers Compared to Leavers

	Stayers (n=138)	Leavers (n=245)		
	M(SD)	M(SD)	t	р
Neighborhood Disadvantage	0.55(0.09)	0.16(0.16)	-29.62	p<0.001
Δ Neighborhood Disadvantage	-0.46(0.07)	-0.86(0.22)	-26.60	p<0.001
% Poverty	57.41(7.87)	26.23(8.68)	-36.95	p<0.001
Δ % Poverty	0.78(0.86)	-31.22(11.38)	-32.97	p<0.001

% African American	95.42(2.98)	82.06(18.95)	-10.80	p<0.001
Δ % African American	2.11(0.51)	-11.54(19.16)	-8.36	p<0.001
% Unemployment	23.34(2.88)	13.28(5.11)	-24.64	p<0.001
Δ % Unemployed	-11.55(1.28)	-21.96(6.38)	-18.94	p<0.001
% Public Assistance	3.34(0.20)	2.91(0.81)	-7.72	p<0.001
Δ % Public Assistance	-8.30(1.51)	-8.90(1.53)	-3.81	p<0.01
% Female Headed Households	43.15(3.48)	27.99(7.70)	-26.42	p<0.001
Δ % Female Headed Households	-8.89(2.01)	-24.69(9.22)	-19.85	p<0.001
% Children Under 18	35.12(2.20)	24.98(5.92)	-24.00	p<0.001
Δ % Children Under 18	-36.64(2.45)	-47.38(7.03)	-17.35	p<0.001

Note. Neighborhood disadvantage index is regression weighted and time adjusted based on baseline means and standard deviations. Changes in the percentage of other neighborhood indicators represent raw percentage point change from baseline to follow-up.

Households who relocated outside the project Zip Code moved to neighborhoods that were roughly 37 percentage points less poor and about 11 percentage points less racially segregated compared to families who stayed in the project Zip Code. Across other neighborhood disadvantage indicators, all families experienced reductions; however, families who left the project Zip Code experienced significantly greater reductions relative to stayers. Household baseline characteristics were not significantly associated with changes in neighborhood disadvantage from baseline to follow-up (Tables 2.15 and 2.16, Chapter 2 Appendix).

Linear regression results of change in neighborhood disadvantage from baseline to follow-up and household relocation decisions appear as Table 2.5. Results indicated that all families experienced reductions to neighborhood disadvantage from baseline to follow-up (b=-0.46, p<0.001). Household relocation decision was the only significant predictor of changes to neighborhood disadvantage from baseline to follow-up (b=-0.41, p<0.001). Specifically, families who left the project Zip Code moved to neighborhoods that were approximately 0.41 units less disadvantaged relative to families who stayed in the project Zip Code.

Regression Results for Changes in Neighborhood Disadvantage from Baseline to Follow-Up for

	b	SE	CI Lower	CI Upper	t	р
Intercept	-0.46	0.17	-0.07	0.09	-7.70	0.00
Female	0.01	0.04	-0.07	0.09	0.26	0.80
Disabled	0.02	0.03	-0.03	0.08	0.89	0.37
Chronic Health	0.02	0.03	-0.03	0.07	0.74	0.46
Education (HS or More $= 1$)	0.02	0.02	-0.06	0.04	-0.46	0.65
Employed	-0.01	0.02	-0.06	0.04	-0.47	0.64
Age	-0.00	0.00	-0.00	0.00	-1.04	0.30
Household Size	0.01	0.01	-0.01	0.02	1.04	0.32
Housing Voucher	0.02	0.02	-0.02	0.06	1.08	0.28
Stress	-0.01	0.01	-0.03	0.01	-1.34	0.18
Home Safety	0.00	0.02	-0.03	0.04	0.17	0.86
Neighborhood Safety	-0.01	0.02	-0.04	0.03	-0.43	0.67
Left Zip Code	-0.41	0.02	-0.45	-0.36	-19.44	0.00
DF	12					
F	33.28					
R-squared	0.53					
Adj R-squared	0.52					
RMSE	0.18					

Choice Neighborhoods Initiative (CNI) Stayers Compared to Leavers

Note. Age and household size are mean centered. The following variables were excluded because they contained cell counts of less than 5 percent: race, marital status.

2.7.4. Research Question 3: Does Housing Relocation Impact Family Well-Being?

Multilevel mixed-effects models were conducted to examine change over time in family well-being for households who stayed in the project Zip Code compared to those who left the Zip Code. Three quality-of-life indicators were utilized for analysis: perceived home safety, neighborhood safety, and stress. There was a significant but weak negative correlation between perceived stress and neighborhood safety (Table 2.17, Chapter 2 Appendix). Additionally, perceived home and neighborhood safety were positively correlated. However, because each indicator was conceptualized as representing unique psychosocial phenomenon, separate models were conducted for each outcome. Results of the final conditional models for home safety, neighborhood safety, and stress appear as Table 2.6. Results of multilevel mixed-effects modeling appear for the unconditional and conditional models for home safety (Table 2.18, Chapter 2 Appendix), neighborhood safety (Table 2.19, Chapter 2 Appendix), and stress (Table 2.20, Chapter 2 Appendix).

Results of the unconditional models indicated that perceived home safety improved for all families over time (b=0.02, p<0.001). Similarly, perceived neighborhood safety improved for all families over time (b=0.02, p<0.001). For both home and neighborhood safety models, change was quadratic meaning that the rate of change increased over time. Despite improvements to perceived home and neighborhood safety, stress also increased for all families over time (b=0.06, p<0.001). For the stress model, change was linear meaning that the rate of change increased at a constant rate over time.

Results of the final conditional models (Table 2.6), which included the group by time interaction, baseline household characteristics, and change in neighborhood disadvantage, suggested that home (b=0.02, p<0.001) and neighborhood safety (b=0.01, p<0.001) improved for all families over time. Baseline household characteristics were not significantly associated with changes in home and neighborhood safety over time. Additionally, there were no differential effects on home and neighborhood safety for those who stayed versus those who left the project Zip Code, controlling for baseline household characteristics. Results of the perceived stress model indicated that, on average, stress increased over time for all families (b=0.06, p<0.001). Having a chronic health condition was also significantly associated with stress over time (b=0.61, p<0.001), with those reporting chronic health conditions experiencing increased stress from baseline to follow-up relative to households without chronic health conditions. No other baseline household characteristics were significantly associated with changes in stress over time.

Additionally, there were no differential effects on stress for those who stayed versus those who

left the project Zip Code, controlling for baseline household characteristics.

Table 2.6

Final Conditional Models of Change in Perceived Home Safety, Neighborhood Safety, and Stress

	Home Safety			Neighborho	od Safety		Stress		
Random Effects	Variance	SE	CI	Variance	SE	CI	Variance	SE	CI
Time(Years)	0.05	0.00	0.04-0.06	0.06	0.01	0.05-0.07	0.04	0.00	0.04-0.05
Intercept	1.22	0.11	1.02-1.45	1.37	0.12	1.15-1.63	1.02	0.09	0.85-1.21
Slope	0.17	0.02	0.13-0.21	0.20	0.02	0.16-0.25	0.12	0.02	0.09-0.16
Residual	0.14	0.01	0.13-0.16	0.17	0.01	0.15-0.18	0.17	0.01	0.16-0.19
Fixed Effects	Estimate	SE	Z	Estimate	SE	Z	Estimate	SE	Z
Intercept	3.36	0.30	11.34***	3.19	0.30	10.29***	1.86	0.30	6.16***
Time(Years)	0.22	0.03	6.66***	0.21	0.04	5.93***	0.06	0.02	3.91***
Time(Years ²)	0.02	0.01	3.64***	0.01	0.01	2.78**	-	-	-
Group	-0.13	0.17	-0.78	-0.04	0.18	-0.21	0.04	0.16	0.28
Group x Time	-0.01	0.06	-0.26	-0.02	0.06	-0.38	-0.01	0.03	-0.34
Group x Time ²	0.00	0.01	0.51	0.01	0.01	0.55	-	-	-
Female	0.27	0.18	1.50	0.24	0.19	1.30	-0.23	0.18	-1.25
Disabled	0.21	0.12	1.72	0.23	0.13	1.80	-0.11	0.13	-0.90
Chronic Health									
Status	-0.04	0.12	-0.35	-0.08	0.12	-0.63	0.61	0.12	5.06***
Education(HS or									
more)	0.02	0.09	0.20	0.05	0.10	0.50	-0.01	0.09	-0.14
Employed	0.11	0.10	1.10	0.01	0.11	0.08	-0.08	0.11	-0.77
Age	-0.00	0.00	0.16	0.00	0.00	0.46	-0.00	0.00	-0.43
Household Size	-0.03	0.03	-0.94	-0.01	0.03	-0.42	-0.02	0.03	-0.64
Housing Voucher	-0.00	0.09	-0.00	-0.02	0.09	-0.22	0.12	0.09	1.28
Δ Neighborhood									
Disadvantage	-0.02	0.24	-0.08	-0.08	0.25	-0.31	-0.29	0.25	-1.18
Observations	1773			1773			1773		
Ν	363			363			363		
Wald	89.82***			80.40***			58.30***		
DF	19			19			19		
LL	-1632.01			-1774.69			-1734.21		
AIC	3302.02			3587.38			3502.41		
BIC	3406.15			3691.51			3595.57		
LR Test	1638.69***			1583.67***			1532.74***		

Note. *p<.05, **p<.01, ***p<.001

Sensitivity analyses were conducted by omitting change in neighborhood disadvantage, which did not substantially change model results.

Figure 2.4 shows marginal effects for changes in perceived home safety (Panel A),

neighborhood safety (Panel B), and stress (Panel C). For home safety, stayers and leavers felt

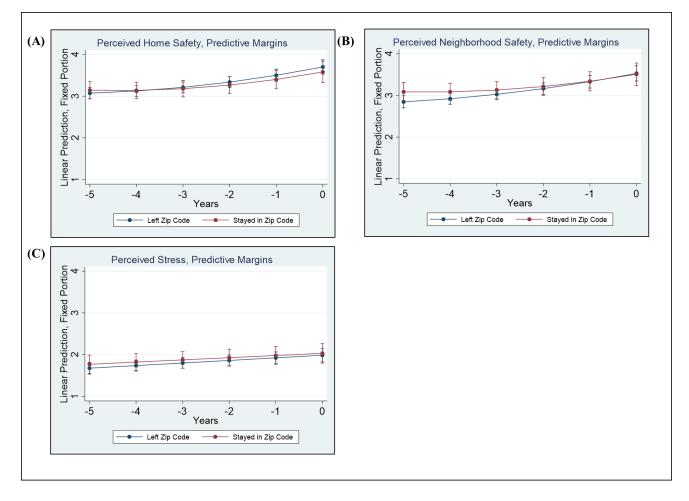
safe at baseline, which increased over time such that families who left the Zip Code felt safer

than families who stayed in the project Zip Code. However, these differences were not

significant. For neighborhood safety, leavers felt less safe at baseline compared to stayers, which increased such that leavers felt as safe as stayers at follow-up. However, these differences were not significant. Finally, stayers and leavers felt relatively little stress at baseline, which increased such that both groups felt somewhat stressed at follow-up. Again, group differences were nonsignificant.

Figure 2.4

Changes in Perceived Safety and Stress Among Choice Neighborhoods Initiative (CNI) Families by Housing Relocation Decision



2.8. Discussion

This study is among the first studies to assess household relocation decisions for families impacted by the Choice Neighborhoods Initiative (CNI), and subsequent associations with quality-of-life improvements. Findings suggest that most families relocated outside of the project Zip Code during the redevelopment phases of the South City CNI, while about a third moved within the project Zip Code. Families who left the project Zip Code moved into significantly less disadvantaged neighborhoods from baseline to follow-up compared to families who stayed in the project Zip Code. Families who stayed in the project Zip Code also experienced reductions in neighborhood disadvantage from baseline to follow-up. Yet, the project Zip Code remained the most disadvantaged neighborhood in Memphis. Moves outside the project Zip Code did not translate into greater improvements to safety and stress compared to families who stayed in the project Zip Code. Indeed, all South City CNI families experienced improvements in senses of home and neighborhood safety while simultaneously experiencing small but significant increases in stress. Findings of increased senses of home and neighborhood safety are in line with past research which demonstrates that families relocated through HOPE VI and other housing relocation programs typically report feeling safer and more satisfied with their new home and neighborhood environments post-relocation (Ludwig et al., 2013; Popkin et al., 2009).

Findings of increased stress for families runs counter to much of the available literature. While the literature indicates potential for initial increases in stress resulting from relocation and displacement, relocated families generally experience improvements on many indicators of mental health, including stress, over time (Goetz, 2010; Ludwig et al., 2013; Popkin et al., 2009). While the linear increase in stress reported in this study is surprising, qualitative literature on housing relocation suggests that the relocation process is a stressful process for low-income families (Frescoln et al., 2017; Hankins et al., 2014; Rosenblatt & DeLuca, 2012), and is often

marked by uncertainty and unpredictability. Low-income families navigate multiple challenges in the housing market which may be stressful – like difficulty locating properties and landlord discrimination (M. Cunningham et al., 2018). Additionally, families may experience added financial stress associated with increased housing costs through rent and utilities (Brooks et al., 2005; Levy et al., 2010; Popkin et al., 2009; Popkin, Levy, et al., 2004). Families may also experience multiple moves after initial lease up, which may be an important source of stress for families. While, not available in the current data, past studies indicate that low-income families who relocate from public housing often make multiple moves (DeLuca et al., 2019; Ludwig et al., 2013; Sanbonmatsu et al., 2012).

The HOPE VI literature also lends some support for increasing stress for families impacted by involuntary, forced relocation through mixed-income development. This literature suggests that despite families reporting increases in senses of safety, HOPE VI families continued to experience residential instability after their initial move, limited improvements to education and employment opportunities, and little or no improvements in physical and mental health years after housing relocation (Byck et al., 2015; Fraser, Burns, et al., 2013). Research also suggests that families in public housing often rely on locally embedded social networks for emotional and material support, which may be disrupted when families relocate (Byck et al., 2015; Curley, 2009; Fullilove, 2004). Navigating new home and neighborhood environments following relocation may also increase stress as families adapt to and cope in new environments (Gibson, 2007; Keene & Geronimus, 2011).

Another potential explanation for findings of increased stress concerns the fact that many families reported feeling very little stress at baseline. Therefore, increased stress may be partially due to scale attenuation and representative of a floor effect. In other words, because families

were not very stressed at baseline, any changes to housing and neighborhood circumstances were likely to increase stress. Thus, an interesting question remains about why families living at Foote Homes felt generally safe and relatively little stress at baseline given the distressed nature of the housing site and high levels of neighborhood disadvantage. The literature is particularly instructive on this point and suggests remarkable resilience and adaptive coping strategies for public housing families as they confront risks embedded in their housing and neighborhood contexts (Keene & Geronimus, 2011). Thus, it may be the case that families living at Foote Homes had developed successful coping strategies and routine practices that reduced stress associated with living in a community context with multiple stressors.

2.9. Limitations

There are several study limitations that must be considered alongside study findings. A primary limitation of this study includes the single-site, non-experimental nature of the study. Additionally, this study focused on a single cohort of families in the South City CNI in Memphis, TN, a midsized Midwestern city, which likely limits the ability to generalize findings to other cities where the relocation process and associated housing market dynamics differ. Additionally, the use of administrative case records, which rely on family self-reports and case manager data entry, increase risks for error in the data. Similarly, the use of single-item measures for complex psychosocial phenomena like stress and safety represents another study limitation as these measures may fail to capture the full range of family experiences and pose threats to construct validity. Scale attenuation could also have influenced results, with many families reporting very low levels of initial stress at baseline.

Sample attrition represents another limitation that reduced the analytic sample size to families with more complete data. Individuals who were actively receiving case management

may be overrepresented in the sample and those not active, presumably with lower levels of needs, may be underrepresented. It is also possible that families who stayed in the project Zip Code differed from families who left the Zip Code on unobservable characteristics, which may have influenced results. The relatively small initial sample and attrition over time may have biased results and contributed to limited statistical power to detect differences between groups.

2.10. Implications

Prior literature suggests that moving to less distressed, higher opportunity neighborhoods is associated with improved quality-of-life, particularly in terms of senses of safety and stress. While this study found support for increased senses of home and neighborhood safety for families, families also experienced increases in stress over time. This finding suggests that additional services that target specific sources of stress for families may be needed above and beyond current services.

One of the most salient stressors for families impacted by mixed-income development strategies is the housing relocation process. The literature suggests that this process is extremely stressful for families and may have long-term negative consequences for families particularly if they are relocated under involuntary, forced conditions. Thus, in addition to the intensive case management services that many families receive through the CNI, additional assistance with the housing relocation process may be needed. Housing navigators – staff who work alongside families to identify and address specific housing needs and preferences – represent a promising strategy to compliment case management services (Bergman et al., 2019). These navigators provide assistance with rental applications, discuss the location and availability of housing in higher opportunity neighborhoods, and work alongside other service providers to ensure that families housing needs are met in tandem with other family concerns. Additionally, providing

material and emotional support following relocation may be needed. For example, financial stress associated with the relocation process represents another potential target for intervention, as families balance increased housing costs associated with living in private market housing. Additional assistance with application fees, moving expenses, security deposits, and utilities may be needed to support families with complex housing and service needs.

In addition to direct services to CNI families, strong partnerships between housing agencies, service providers, and landlords may be necessary to increase housing options for families in the private market (Aliprantis et al., 2022; DeLuca & Rosenblatt, 2017). A recent study by Bergman et al. (2019) found that in additional to targeted housing assistance and short-term financial assistance, developing strong partnerships with landlords who owned properties in higher opportunity areas was essential to increasing housing choice for families. In additional to creating a list of pre-screened landlords who accepted housing vouchers, the program also included landlord incentives like a damage mitigation fund to cover additional property expenses not covered through tenant security deposits. Other studies have found that minimizing barriers to landlord participation in voucher programs may increase the supply of affordable housing in higher opportunity neighborhoods to the ultimate benefit of low-income families (Galvez, 2010; Galvez & Oppenheimer, 2020).

In this chapter I provided a deeper understanding of residential mobility and neighborhood opportunity moves for families impacted by the CNI. However, the quantitative methods utilized to examine family relocation decisions do not capture complexities in service delivery and program implementation that may impact the effective delivery of programs and services to families, including those associated with housing relocation. The ability to collaborate across sectors and build effective partnerships between organizations is critical for complex,

multicomponent interventions like the CNI, and the children and families served by them. Indeed, the South City CNI relies on an extensive network of nonprofit, private, and governmental agencies to deliver a variety of programs and services to families and assist with the housing relocation process. In the next chapter I turn attention to further understanding this dynamic collaboration process, including barriers and challenges to program and service delivery.

2.11. Chapter 2 Appendix

Table 2.7

Results of Internal Consistency Reliability for Neighborhood Disadvantage Index

		Item-Test	Item-Rest	Average Interitem	
Item	Ν	Correlation	Correlation	Correlation	Alpha
Neighborhood Disadvantage 2010-2014					
% African American	40	0.90	0.86	0.70	0.92
% Poverty	40	0.93	0.90	0.69	0.92
% Unemployment	40	0.87	0.81	0.72	0.93
% Population under 18 years	40	0.65	0.51	0.82	0.96
% Female Headed Households	40	0.98	0.96	0.66	0.91
% Public Assistance	40	0.92	0.88	0.69	0.92
Test Scale	-	-	-	0.72	0.94
Neighborhood Disadvantage 2015-2019					
% African American	40	0.89	0.84	0.65	0.90
% Poverty	40	0.94	0.90	0.63	0.89
% Unemployment	40	0.80	0.71	0.69	0.92
% Population under 18 years	40	0.68	0.54	0.76	0.94
% Female Headed Households	40	0.96	0.94	0.61	0.89
% Public Assistance	40	0.84	0.77	0.67	0.91
Test Scale	-	-	-	0.67	0.92

				%		
Neighborhood	%			Population	% Female	
Disadvantage 2010-	African	%	%	under 18	Headed	% Public
2014	American	Poverty	Unemployment	years	Households	Assistance
% African American	1.0	-	-	-	-	-
% Poverty	0.80	1.0	-	-	-	-
% Unemployment	0.82	0.82	1.0	-	-	-
% Population under						
18 years	0.49	0.48	0.31	1.0	-	-
% Female Headed						
Households	0.88	0.91	0.80	0.63	1.0	-
% Public Assistance	0.75	0.88	0.81	0.48	0.90	1.0
				%		
Neighborhood	%			Population	% Female	
Disadvantage 2015-	African	%	%	under 18	Headed	% Public
2019	American	Poverty	Unemployment	years	Households	Assistance
% African American	1.0	-	-	-	-	-
% Poverty	0.79	1.0	-	-	-	-
% Unemployment	0.76	0.76	1.0	-	-	-
% Population under						
18 years	0.45	0.55	0.28	1.0	-	-
% Female Headed						
Households	0.88	0.90	0.67	0.70	1.0	-
% Public Assistance	0.68	0.78	0.63	0.47	0.75	1.0

	Eigenvalue	Proportion	Cumulative			
Component						
1	4.67	0.78	0.78			
2	0.76	0.13	0.90			
3	0.28	0.05	0.95			
4	0.16	0.03	0.98			
5	0.11	0.02	0.99			
6	0.04	0.01	1			
Variable	Comp 1	Comp 2	Comp 3	Comp 4	Comp 5	Comp 6
% African American	0.42	-0.09	0.70	-0.39	-0.25	0.34
% Poverty	0.44	-0.12	-0.33	-0.33	0.72	0.26
% Female Headed	0.45	0.09	-0.07	-0.29	-0.13	-0.82
% Unemployment	0.41	-0.39	0.26	0.75	0.20	-0.14
% Public Assistance	0.43	-0.10	-0.57	0.13	-0.60	0.32
% Population <18	0.28	0.90	0.08	0.28	0.10	0.13

Principal Components Analysis of Baseline Neighborhood Disadvantage Index, 2010-2014

	Eigenvalue	Proportion	Cumulative			
Component						
1	4.41	0.73	0.73			
2	0.79	0.13	0.87			
3	0.36	0.06	0.93			
4	0.25	0.04	0.97			
5	0.17	0.03	0.99			
6	0.03	0.01	1			
Variable	Comp 1	Comp 2	Comp 3	Comp 4	Comp 5	Comp 6
% African American	0.43	-0.19	0.39	-0.60	0.35	0.42
% Poverty	0.45	-0.06	-0.08	0.11	-0.79	0.40
% Female Headed	0.46	0.17	0.14	-0.31	-0.21	-0.78
% Unemployment	0.39	-0.50	0.27	0.66	0.24	-0.16
% Public Assistance	0.40	-0.07	-0.85	-0.05	0.32	0.00
% Population <18	0.31	0.82	0.15	0.34	0.24	0.19

Principal Components Analysis of Follow-Up Neighborhood Disadvantage Index, 2015-2019

Neighborhood Disadvantage at Baseline and Follow-Up for All Memphis Area Zip Codes

	Ν	Μ	SD	Min	Max		
Neighborhood Disadvantage Baseline	40	0	0.36	-0.54	1.04		
Neighborhood Disadvantage Follow-Up	40	0	0.35	-0.55	0.87		
Neighborhood Disadvantage Follow-Up (Time Adjusted)	40	-0.13	028	-0.55	0.57		
Neighborhood Disadvantage Baseline to Follow-Up							
(Time Adjusted)	40	-0.13	0.09	-0.47	-0.01		
Note. Neighborhood disadvantage indices represent regression weighted values. Time adjusted							

values were calculated using baseline means and standard deviations. The CNI Project Zip Code was the most disadvantaged neighborhood at baseline and follow-up.

Bivariate Associations Between Baseline Household Characteristics and Attrition at Follow-Up

	Base	Year 2	Year 3	Year 4	Year 5	Year 6	No Follow-Up ^a
Total Sample	383	225	311	240	284	136	87
% Total	100	58.75	81.20	62.66	74.15	35.51	22.72
Race							
% African American	99.48	100	99.37	99.58	99.30	98.53	98.85
Gender							
% Female	92.95	94.22	93.57	92.08	92.25	94.12	90.80
Marital Status							
% Single	98.89	99.08	99.01	98.73	99.29	99.26	98.83
Disability Status							
% Yes	25.85	22.63**	26.71	28.15	28.37	20*	22.02
HCV Status							
% Yes	45.43	45.78	51.77***	52.08***	50.35***	54.41**	58.62**
Education Status							
% HS or more	57.44	60.44	58.20	56.25	55.99	60.29	64.37
Employment							
% Yes	28.46	30.22	27.97	27.92	29.93	32.35	26.44
Chronic Health Condition							
% Yes	24.02	19.56**	23.79	23.33	23.94	15.11**	18.39
Relocation Decision							
% Left	63.97	32.89	33.44*	37.92	35.92	24.26***	22.99**
Family Size	2.74	2.92**	2.82**	2.73	2.72	2.92	2.92
Age	45.47	45.41	44.81*	46.11	45.91	42.63***	42.49**
Base Stress	1.72	1.67	1.76	1.63*	1.70	1.63	1.60
Base Home Safety	3.07	3.08	3.08	3.05	3.06	3.02	2.87*
Base Neighborhood Safety	2.91	2.93	2.91	2.90	2.89	2.81	2.67*

Note. *p<0.05, **p<0.01, ***p<0.001^aNo follow-up includes households who were missing data for the last 3 years of the study period.

	OR	SE	CI Lower	CI Upper	Z	р
Intercept	38.08	82.69	0.54	2685.05	1.68	0.09
African American	0.15	0.22	0.01	2.73	-1.28	0.20
Female	0.58	0.29	0.22	1.55	-1.09	0.28
Disabled	0.97	0.37	0.45	2.06	-0.09	0.93
Chronic Health	0.93	0.35	0.44	1.96	-0.20	0.84
Education (HS or More $= 1$)	1.37	0.38	0.80	2.35	1.13	0.26
Employed	0.75	0.23	0.40	1.38	-0.93	0.35
Marital Status (Single =1)	1.13	1.38	0.10	12.34	0.10	0.92
Age	0.98	0.01	0.95	1.00	-1.85	0.07
Household Size	0.94	0.09	0.78	1.12	-0.70	0.49
Housing Voucher	1.87	0.49	1.10	3.13	2.32	0.02
Stress	0.80	0.12	0.60	1.02	-1.48	0.14
Home Safety	0.91	0.21	0.58	1.42	-0.43	0.07
Neighborhood Safety	0.70	0.15	0.46	1.06	-1.67	0.09
LL	-184.57					
$LR \chi^2$	26.17					
$Prob > \chi^2$	0.02					
Pseudo R-squared	0.07					
AUC	0.67					
LinkTest	b	SE	CI Lower	CI Upper	Z	р
_hat	1.28	0.51	0.29	2.27	2.53	0.01
_hatsq	0.13	0.20	-0.27	0.53	0.62	0.54
_cons	0.10	0.31	-0.51	0.72	0.33	0.74

Logistic Regression of Baseline Household Characteristics and No Follow-Up

Logistic Regression Results for Associations Between Baseline Household Characteristics and

	OR	SE	CI Lower	CI Upper	Z	р
Female	1.07	0.50	0.43	2.70	0.15	0.88
Disabled	0.69	0.28	0.31	1.51	-0.93	0.35
Disabled X Housing Voucher	2.27	1.38	0.69	7.47	1.35	0.18
Chronic Health	0.70	0.22	0.37	1.30	-1.14	0.26
Education (HS or More $= 1$)	1.16	0.28	0.72	1.85	0.60	0.55
Employed	0.84	0.23	0.49	1.44	-0.63	0.53
Age	0.99	0.01	0.96	1.02	-0.60	0.55
Age X Age	1.00	0.00	1.00	1.00	-0.66	0.51
Age X Housing Voucher	0.99	0.02	0.95	1.03	-0.51	0.61
Household Size	0.90	0.10	0.72	1.12	-0.95	0.34
Household Size X Housing Voucher	0.92	0.15	0.67	1.27	-0.51	0.61
Housing Voucher	1.18	0.34	0.67	2.07	0.56	0.58
Baseline Stress	1.07	0.13	0.84	1.36	0.55	0.58
Baseline Home Safety	1.39	0.37	0.83	2.33	1.24	0.22
Baseline Neighborhood Safety	0.62	0.16	0.38	1.02	-1.88	0.06
LL	-223.93					
$LR \chi^2$	18.30					
$Prob > \chi^2$	0.25					
Pseudo R-squared	0.04					
AUC	0.63					
LinkTest	b	SE	CI Lower	CI Upper	Z	р
_hat	0.83	0.43	-0.01	1.68	1.93	0.05
_hatsq	0.14	0.30	-0.45	0.72	0.46	0.65
_cons	0.04	0.19	-0.36	0.40	0.11	0.91
LL	-223.82					
$LR \chi^2$	18.51					
$\text{Prob} > \chi^2$	0.00					
Pseudo R-squared	0.04					

the Propensity to Relocate Outside of the Project Zip Code

Note. Age and household size are mean centered. The following variables were omitted due to containing cell counts of less than 5 percent: race, marital status.

Bivariate Associations Between Baseline Household Characteristics and Changes in

	n	М	SD	t	р
Race/Ethnicity					
Black	381	-0.71	0.26	17.86	0.00
Other	2	-0.47	0		
Gender Identity					
Female	355	-0.71	0.27	0.02	0.98
Male	28	-0.71	0.23		
Marital Status					
Single	356	-0.72	0.27	-0.21	0.84
Other	4	-0.75	0.19		
Disability Status					
Yes	99	-0.70	0.27	-0.79	0.43
No	264	-0.73	0.26		
Chronic Health					
Yes	92	-0.69	0.25	-0.83	0.41
No	291	-0.72	0.27		
Education Level					
HS or more	220	-0.71	0.26	-0.01	0.99
Less than HS	163	-0.71	0.26		
Employment					
Yes	109	-0.72	0.27	0.2597	0.80
No	274	-0.71	0.26		
Housing Voucher					
Yes	174	-0.72	0.26	0.82	0.41
No	209	-0.70	0.27		
Relocation Decision					
Stayer	138	-0.46	0.07	-26.60	0.00
Leaver	245	-0.86	0.23		

Neighborhood Disadvantage from Baseline to Follow-Up

Note. Results of t-tests with equal variances reported for the following household characteristics: gender identity, marital status, disability status, employment status, and housing voucher status. Results of t-tests with unequal variances reported for the following household characteristics: race and relocation decision. Nonparametric Wilcoxon Ranked Sum Tests were conducted to check for robustness. In nonparametric tests, race/ethnicity was not significantly associated with changes in neighborhood disadvantage (z = 1.61, p = 0.108). All other associations between household characteristics and changes in neighborhood disadvantage from baseline to follow-up remained consistent with t-test results.

Correlation Matrix for Baseline Household Characteristics and Changes in Neighborhood

Disadvantage from Baseline to Follow-Up

	Age	Household Size	Δ Neighborhood Disadvantage
Age	1	-	-
Household Size	-0.56***	1	-
Δ Neighborhood Disadvantage	0.01	0.09	1
Note. *p<0.05, **p<0.01, ***p<	0.001		

Correlation Matrix for Quality-of-Life Indicators

	Stress	Home Safety	Neighborhood Safety
Stress	1	-	-
Home Safety	-0.05	1	-
Neighborhood Safety	-0.06**	0.85***	1
Note $*n<0.05$ $**n<0.01$ $**$	0.00	0.05	1

Note. *p<0.05, **p<0.01, ***p<0.001

	Null Model			Model 1			Model 3		
Random									
Effects	Variance	SE	CI	Variance	SE	CI	Variance	SE	CI
Time(Years)	0.05	0.00	0.04-0.06	0.05	0.00	0.04-0.06	0.05	0.00	0.04-0.06
Intercept	1.25	0.11	1.06-1.49	1.25	0.11	1.05-1.48	1.22	0.11	1.02-1.45
Slope	0.18	0.02	0.14-0.21	0.17	0.02	0.14-0.21	0.17	0.02	0.13-0.21
Residual	0.14	0.01	0.13-0.16	0.14	0.01	0.13-0.16	0.14	0.01	0.13-0.16
Fixed Effects	Coef	SE	Z	Coef	SE	Z	Estimate	SE	Z
Intercept	3.66	0.07	54.94***	3.70	0.08	45.16***	3.36	0.30	11.34***
Time(Years)	0.21	0.03	7.84***	0.22	0.03	6.61***	0.22	0.03	6.66***
Time(Years ²)	0.02	0.004	4.85***	0.02	0.01	3.68***	0.02	0.01	3.64***
Group				-0.12	0.14	-0.86	-0.13	0.17	-0.78
Group x Time				-0.01	0.06	-0.25	-0.01	0.06	-0.26
Group x Time ²				-0.004	0.01	0.53	0.00	0.01	0.51
Female							0.27	0.18	1.50
Disabled							0.21	0.12	1.72
Chronic									
Health Status							-0.04	0.12	-0.35
Education(HS									
or more)							0.02	0.09	0.20
Employed							0.11	0.10	1.10
Age							-0.00	0.00	0.16
Household									
Size							-0.03	0.03	-0.94
Housing									
Voucher							-0.00	0.09	-0.00
Δ									
Neighborhood									
Disadvantage							-0.02	0.24	-0.08
Observations	1808			1808			1771		
Ν	383			383			363		
Wald	76.95***			79.71***			58.30***		
DF	7			10			19		
LL	-1674.86			-1673.66			-1734.21		
AIC	3363.72			3367.32			3502.41		
BIC	3402.22			3422.32			3595.57		
LR Test	1688.35***			1685.22***			1532.74***		

Multilevel Mixed-Effects Modeling Results for Changes in Perceived Home Safety

Note. *p<.05, **p<.01, ***p<.001

Sensitivity analyses were conducted by omitting change in neighborhood disadvantage, which did not substantially change model results. Race and marital status were omitted because cell counts contained less than 5 percent. Analytic sample reduction due to listwise deletion of missing covariates. Robustness checks were performed by running Null Model and Model 1 with the analytic sample from Model 3, which did not substantially change model results.

	Null Model			Model 1			Model 3		
Random									
Effects	Variance	SE	CI	Variance	SE		Variance	SE	CI
Time(Years)	0.06	0.01	0.05-0.07	0.06	0.01	0.05-0.07	0.06	0.01	0.05-0.07
Intercept	1.39	0.12	1.17-1.64	1.39	0.12	1.17-1.64	1.37	0.12	1.15-1.63
Slope	0.21	0.02	0.16-0.25	0.21	0.02	0.16-0.25	0.20	0.02	0.16-0.25
Residual	0.17	0.01	0.15-0.18	0.17	0.01	0.15-0.18	0.17	0.01	0.15-0.18
Fixed Effects	Coef	SE	Z	Coef	SE	Z	Estimate	SE	Z
Intercept	3.52	0.07	49.89***	3.54	0.09	40.78***	3.19	0.30	10.29***
Time(Years)	0.20	0.03	6.86***	0.21	0.04	5.87***	0.21	0.04	5.93***
Time(Years ²)	0.02	0.004	3.68***	0.01	0.01	2.67**	0.01	0.01	2.78**
Group				-0.07	0.15	-0.45	-0.04	0.18	-0.21
Group x Time				-0.02	0.06	-0.35	-0.02	0.06	-0.38
Group x Time ²				0.01	0.01	0.60	0.01	0.01	0.55
Female							0.24	0.19	1.30
Disabled							0.23	0.13	1.80
Chronic									
Health Status							-0.08	0.12	-0.63
Education(HS									
or more)							0.05	0.10	0.50
Employed							0.01	0.11	0.08
Age							0.00	0.00	0.46
Household									
Size							-0.01	0.03	-0.42
Housing									
Voucher							-0.02	0.09	-0.22
Δ									
Neighborhood									
Disadvantage							-0.08	0.25	-0.31
Observations	1808			1808			1773		
Ν	383			383			363		
Wald	66.87***			71.76***			80.40***		
DF	7			10			19		
LL	-1815.52			-1813.32			-1774.69		
AIC	3645.03			3646.64			3587.38		
BIC	3683.53			3701.64			3691.51		
LR Test	1642.05***			1639.59***			1583.67***		

Multilevel Mixed-Effects Modeling Results for Changes in Perceived Neighborhood Safety

Note. *p<.05, **p<.01, ***p<.001

Sensitivity analyses were conducted by omitting change in neighborhood disadvantage, which did not substantially change model results. Race and marital status were omitted because cell counts contained less than 5 percent. Analytic sample reduction due to listwise deletion of missing covariates. Robustness checks were performed by running Null Model and Model 1 with the analytic sample from Model 3, which did not substantially change model results.

	Null Model			Model 1			Model 3		
Random									
Effects	Variance	SE	CI	Variance	SE	CI	Variance	SE	CI
Time(Years)	0.04	0.00	0.04-0.05	0.04	0.00	0.04-0.05	0.04	0.00	0.04-0.05
Intercept	1.07	0.10	0.90-1.28	1.07	0.10	0.90-1.28	1.02	0.09	0.85-1.21
Slope	0.12	0.02	0.09-0.15	0.12	0.02	0.09-0.15	0.12	0.02	0.09-0.16
Residual	0.17	0.01	0.16-0.19	0.17	0.01	0.16-0.19	0.17	0.01	0.16-0.19
Fixed Effects	Coef	SE	Z	Coef	SE	Z	Estimate	SE	Z
Intercept	2.02	0.06	33.90***	2.04	0.07	27.77***	1.86	0.30	6.16***
Time(Years)	0.06	0.01	4.80***	0.07	0.02	4.15***	0.06	0.02	3.91***
Group				-0.07	0.13	-0.57	0.04	0.16	0.28
Group x Time				-0.01	0.03	-0.46	-0.01	0.03	-0.34
Female							-0.23	0.18	-1.25
Disabled							-0.11	0.13	-0.90
Chronic									
Health Status							0.61	0.12	5.06***
Education(HS									
or more)							-0.01	0.09	-0.14
Employed							-0.08	0.11	-0.77
Age							-0.00	0.00	-0.43
Household									
Size							-0.02	0.03	-0.64
Housing									
Voucher							0.12	0.09	1.28
Δ									
Neighborhood									
Disadvantage							-0.29	0.25	-1.18
Observations	1808			1808			1773		
Ν	383			383			363		
Wald	23.08***			23.43***			58.30***		
DF	6			8			19		
LL	-1801.35			1801.18			-1734.21		
AIC	3614.702			3618.36			3502.41		
BIC	3647.702			3662.36			3595.57		
LR Test	1534.58***			1534.92***			1532.74***		

Multilevel Mixed-Effects Modeling Results for Changes in Perceived Stress

Note. *p<.05, **p<.01, ***p<.001

Sensitivity analyses were conducted by omitting change in neighborhood disadvantage, which did not substantially change model results. Race and marital status were omitted because cell counts contained less than 5 percent. Analytic sample reduction due to listwise deletion of missing covariates. Robustness checks were performed by running Null Model and Model 1 with the analytic sample from Model 3, which did not substantially change model results.

Chapter 3: Examining Collaboration and Partnership Development in the Choice Neighborhoods Initiative (CNI)

3.1. Abstract

Objective: Cross-sector partnerships are increasingly utilized to address the complex, interrelated problems that affect low-income communities. Not a lot is known about the unique barriers and facilitators of collaboration within these cross-sector partnerships particularly those concerned with issues of housing and community development.

Method: This study examined facilitators and barriers to partnership development and collaboration within the South City Choice Neighborhoods Initiative (CNI) in Memphis, Tennessee. Semi-structured, in-depth interviews were conducted with organizational staff at key partner organizations (n=17) to better understand collaboration dynamics.

Results: Findings suggest that the essential challenges of mixed-income development in Memphis were related to the complexities of coordination. The presence of a high-capacity lead organization that fostered frequent communication, engaged in trust-building activities, and effectively attended to emerging initiative challenges aided the implementation process. Additionally, partners with high levels of internal and external credibility were important for increasing legitimacy and sustaining efforts that balanced the goals of project partners and those of the targeted community.

Conclusions: Lead agencies played a fundamental coordinating role within the South City CNI. These organizations, especially the Memphis Housing Authority, were trusted and had the capacity to fulfill their role within the CNI while also occupying the central role of coordinating communication, sharing information, and allocating resources to community partners.

3.2. Introduction

Community development interventions typically target multiple risk factors at multiple socioecological levels (e.g., individual, family, community, system) and include work across multiple domains (e.g., housing, education, health, workforce development, etc.). Thus, cross-sector partnerships are increasingly utilized to address the complex, adaptive, and interrelated problems that affect low-income communities such as poverty, housing quality and affordability, educational achievement, unemployment, crime and violence, and others (Fraser & Kick, 2007; D. M. Greenberg et al., 2017; Quiroz Becerra et al., 2019; M. J. Rich & Stoker, 2014). Demonstrating strong cross-sector partnerships that can effectively work together to establish and achieve collective goals is often a precondition of funding receipt through various local, state, and national funders (Luke et al., 2010). However, not a lot is known about the unique facilitators and barriers of collaboration within these cross-sector partnerships (van Puyvelde & Raeymaeckers, 2020), particularly those concerned with issues of housing and community development (Joseph et al., 2019).

Partnerships are important for the implementation of community development strategies (Joseph et al., 2019; Kubisch et al., 2010; M. J. Rich & Stoker, 2014). Strong partnerships between local housing authorities and other family systems such as child welfare services, schools, and property owners have the potential to affect housing relocation decisions for families (Bergman et al., 2019; Pergamit et al., 2019), and may also impact the ability of partner organizations to deliver services necessary to achieve program goals. The functioning of interorganizational partnerships and the ability of partners to collaborate to deliver programs and services is important because of the associations between effective initiative implementation and positive community- and population-level outcomes (Brown et al., 2012).

Despite the associations between partner collaboration, intervention implementation, and community-level outcomes, there are few studies of housing and community development initiatives that provide in-depth examinations of the dynamics involved with initiating, managing, and sustaining cross-sector collaborative partnerships. This is an important gap in knowledge because funded activities require cross-sector collaboration to fulfill grant goals and objectives. However, the literature makes clear that there exist significant difficulties in getting diverse stakeholders with distinct experiences, backgrounds, and cultures to work together effectively to address complex problems (Bryson & Crosby, 2006; Cross et al., 2002; Provan & Kenis, 2008).

The Choice Neighborhoods Initiative (CNI), a U.S. Department of Housing and Urban Development (HUD) sponsored program, is one federal initiative that requires cross-sector partnerships to deliver numerous programs and services to assist low-income families living in distressed public housing communities. The CNI includes broad goals and objectives towards people, housing, and neighborhood transformation that require collaboration between public, nonprofit, and private for-profit organizations. CNI organizational partners commit to joint planning, management, and resource investment over time within a specific local community, which includes a distressed public housing site targeted for redevelopment. Each CNI site typically competes for a 1-year Planning Grant, followed by an Implementation Grant that, if awarded, spans roughly 7 years or more.

The CNI requires an immense amount of sustained coordination between partners for successful implementation. As such, the funding guidelines require that potential applicants identify a lead applicant who is the primary entity responsible for implementing project plans, a co-applicant to assist with implementation, and principal team members for each of the three

strategy areas (e.g., people, housing, and neighborhood) (The Urban Institute, 2013). However, few studies have examined cross-sector partnerships and collaboration processes among housing and community development interventions generally, with fewer focused on the unique policy context of the CNI. Thus, facilitators and barriers associated with collaboration and program and service delivery remain largely unknown. This paper addresses these gaps in knowledge by drawing on organizational theories of cross-sector partnerships to understand barriers and facilitators to collaboration in the South City CNI in Memphis, Tennessee.

3.3. Background

3.3.1. Cross-Sector Partnerships and Interorganizational Collaboration

Cross-sector partnerships include organizations representing two or more sectors (e.g., public, private, nonprofit) that share information, resources, activities, and capabilities to achieve outcomes that could not be achieved by individual organizations and sectors alone (Bryson & Crosby, 2006, 2015). The importance of partnerships and collaboration is well-established in theories of organizations, public administration, and strategic planning (Bryson & Crosby, 2015), as well as community coalitions (Brown et al., 2012; Feinberg et al., 2005; M. T. Greenberg et al., 2007; Provan et al., 2004, 2005; Provan & Kenis, 2008; Wandersman et al., 1996), organizational collective action (Feiock, 2013), and urban governance (Pierre, 2014; Stone & Stoker, 2015). Jointly these theories suggest that the capacity of single organizations, and often single sectors, is far too limited to sufficiently address complex and adaptive social and economic problems.

The development of cross-sector partnerships allows organizations to draw from a broader range of resources and expertise to improve service efficiency, enhance organizational capacity, and work more effectively to address complex problems through networks of

relationships (Gilchrist, 2019; Keyes et al., 1996; Provan et al., 2005; Provan & Kenis, 2008). These benefits may occur because organizations control and have access to different resources – what scholars refer to as social capital – that can be coordinated for collective action (Keyes et al., 1996; Pierre, 2014). Thus, cross-sector partnerships increase the potential for organizations to share capital that can be leveraged within a network of partners to achieve common goals and objectives.

Yet, despite the promises of cross-sector partnerships to enhance the efficiency and effectiveness of program and service delivery, establishing and maintaining them is not without difficulties. There are a variety of factors that influence the ability of organizations to collaborate across sectors and several frameworks have been proposed (Bryson & Crosby, 2015; Foster-Fishman et al., 2001; Goodman et al., 1998; Turrini et al., 2010). These frameworks suggest the importance of initial internal and external collaboration conditions (e.g., local context, resources, preexisting relationships), as well as the establishment of effective collaboration processes (e.g., developing trust, commitments) and procedures (e.g., norms, rules, accountability) (Bryson & Crosby, 2015; Provan & Milward, 2001; Turrini et al., 2010).

Initial internal conditions have been routinely identified in the literature as important for effective partnership development and collaboration. Two internal conditions seem particularly salient for cross-sector collaboration: organizational capacity and relational dynamics. Preexisting relational dynamics between partners, along with histories of collaboration, both positive and negative, are important factors that influence partnership development and initiative implementation (Bryson & Crosby, 2015). Specifically, organizations that have established relationships and a positive history of collaboration over time tend to face fewer collaboration challenges.

The literature also suggests that high-capacity lead organizations that have sufficient resources, are trusted by partners, have political influence, and can effectively communicate with partners are essential for successful cross-sector collaboration (Chaskin, 2001). High-capacity lead organizations are particularly important for developing partnerships that are likely to establish effective processes and procedures to facilitate collaboration (Chen & Graddy, 2010). Lead organizations are also important for mobilizing partners to address immediate implementation challenges while also fostering the collective ability to learn and adapt to changing social, economic, and political environments (Bulger et al., 2021). Thus, lead organizations play a central role in providing empowering leadership, developing high-quality interpersonal relationships among partners, establishing clear and directed tasks, planning and obtaining funds for sustainability, and garnering support from key community members, all of which are critical for well-functioning collaborations (Brown et al., 2012). Additionally, literature suggests that high-capacity organizations that collaborate to develop and achieve common goals may be more likely to experience positive initiative outcomes relative to initiatives with disparate goals and weak collaboration capacity (Fraser & Kick, 2007).

Thus, the presence of a high-capacity lead agency is particularly important for successful cross-sector partnerships. These organizations typically enter contractual relationships and are mandated to coordinate partner organizations across sectors. Lead organizations are responsible for coordinating partners to establish collective goals and objectives and deliver programs and services to meet them (Chen & Graddy, 2010; Provan & Kenis, 2008; van Puyvelde & Raeymaeckers, 2020). Lead organization networks are goal-directed and are setup for a specific purpose and evolve over time based on intentional coordination efforts by network members (Provan & Kenis, 2008). The role of the lead organization may emerge from network members

or be mandated by funders (Provan & Kenis, 2008). The lead organization is also responsible for balancing tensions and tradeoffs that arise within the network, including issues of efficiency versus inclusiveness, internal versus external expectations, and flexibility versus stability (Provan & Kenis, 2008).

In addition to internal conditions, collaboration processes - the practices that partners establish for developing trust, shared understanding of problems, commitments toward collective actions, and project planning – are also important for developing partnerships and facilitating effective collaboration (Bryson & Crosby, 2015; Nowell, 2009). These processes include practices for establishing clear partner roles and responsibilities, incorporating structures for facilitating partner communication, creating performance measurement and accountability mechanisms, and securing adequate resources for program implementation (Bulger et al., 2021; Joseph et al., 2019). Collaboration processes are important because partners may embody different institutional logics – the set of norms, rules, governance, and decision-making processes that dictate how they work with partners (Bryson & Crosby, 2015).

Joseph and colleagues (2019) found that key challenges of cross-sector collaboration included differing institutional logics and the ability to manage communication and coordination between partners across sectors. Repeated interactions and shared experiences mitigated these challenges by building trust and allowing organizations to adapt and develop flexible approaches to problem solving (Joseph et al., 2019). These processes also have potential to increase internal legitimacy and promote accountability towards upholding partner commitments (Provan & Kenis, 2008). Absent intentional efforts to establish processes that acknowledge and manage these differences, divergent motivations and practices of partners and varying definitions of project success may create conflict and stall progress during implementation (Joseph et al.,

2019). Additionally, lack of coordination has potential to impede the development of trusting relationships necessary to effectively coordinate resources and services necessary for project implementation (Jackson, 2018, 2020).

Collaboration procedures are also important for effective collaboration. These procedures include structures that govern collaborative work, including norms and rules, and dictate how agreement on collaborative goals and actions are reached. Research suggests that formal accountability mechanisms through legal contracts and consent decrees are critical to ensure that initiatives are implemented in line with original plans, and in cases where plans must change, that partners have established procedures to negotiate decisions (Jackson, 2020). Partnerships that do not include formal accountability mechanisms may struggle during implementation and may be more likely to make decisions that diverge from original program plans (Jackson, 2020). These changes have potential to limit transparency, foster mistrust, and may reduce the likelihood that partners will follow through on their commitments. Therefore, collaborations with higher levels of commitment and formal accountability mechanisms may be more effective during project implementation (Jackson, 2020).

Collaboration procedures also assist with building program integrity where partners make effective use of scarce resources, combat corruption, and adapt based on lessons learned (M. J. Rich & Stoker, 2014). Collaboration procedures also include mechanisms to facilitate power sharing between actors across sectors (M. J. Rich & Stoker, 2014). Collectively, these procedures facilitate broad partner representation, the ability to adapt and restructure, and foster transparency in the standards, rules, policies, and practices guiding initiative decision-making and implementation (M. J. Rich & Stoker, 2014). On the other hand, practices and procedures

that generate partner exclusion may reduce transparency and create barriers to collaboration (Bulger et al., 2021).

External conditions are also important for understanding cross-sector collaboration. Local housing market conditions, resource availability, and local politics shape partner interactions and may act as barriers or facilitators to collaboration (Jackson, 2020). For example, political divisions and historic racial tensions may limit partnership development and possibilities for action due to their impact on partner trust (Kegler et al., 2010). Community support for projects also impacts collaboration, with sites that face higher levels of community opposition experiencing more challenges during implementation (Comrie, 2018). The ability to promote meaningful community participation in decision-making processes and effectively manage conflict are critical to the success of cross-sector partnerships (M. J. Rich & Stoker, 2014). These external conditions have potential to create tension between initiative ideals and goals, and the business side of completing the work within established financial and time constraints specified in the grant (Jackson, 2020; Vale et al., 2018).

3.3.2. Mixed-Income Development and the Choice Neighborhoods Initiative (CNI)

Mixed-income housing and community development strategies represent a unique social and economic context for examining cross-sector partnership development and collaboration dynamics. These initiatives target distressed public housing for redevelopment into mixedincome communities, while simultaneously investing in neighborhood development projects and providing a range of programs and services to families at the targeted public housing site and within the broader community. Cross-sector partnerships are essential for implementing mixedincome development initiatives, and the literature suggests considerable variability in the goals and capacity of partner organizations to deliver services and engage in cross-sector collaboration

(Bulger et al., 2021; Jackson, 2018, 2020; Joseph et al., 2019; Oakley et al., 2015; Popkin, Katz, et al., 2004; Turbov & Piper, 2013). Prior research also suggests that the intensity and complexity of mixed-income development initiatives creates a unique program context for which organizations may have limited experience coordinating and sustaining (Joseph, 2010).

In a baseline report of the first five CNI implementation grantees, the Urban Institute (2013) found that partnership structures and relational dynamics differed across sites, which influenced initiative implementation. The report demonstrated that partners at some sites exhibited centralized coordination processes led by a few key organizations, whereas others operated as a decentralized, loosely connected network of partners. Lead organizations, partnership teams, and collaboration structures also differed across sites, with some CNI implementation grants led by national nonprofit and for-profit organizations, while others were led by local government entities, local public housing authorities, or jointly by both.

In Boston's CNI, which was led by the City of Boston, partners operated as a loosely connected set of partners that collaborated on specific and discrete aspects of the CNI Transformation Plan – the overall plan guiding program activities. And while partners reported working well together, the loosely connected structure created limited clarity on leadership roles within the CNI. Additionally, while some partners had a strong history of collaboration and trusting relationships, many partners did not have long histories of working together. In Chicago's CNI, the initiative established clear leadership roles among key partner organizations which included the Preservation of Affordable Housing (POAH) as lead agency and City of Chicago as co-lead. And while POAH assumed primary coordinating responsibilities, partners identified the need for a stronger and clearer coordinating role for the City of Chicago and other institutional partners, like the Chicago Housing Authority (CHA), Chicago Public Schools

(CPS), and Chicago Police Department (CPD), to address broader external factors that influenced initiative success (e.g., affordable housing, educational achievement, crime). Like Boston, Chicago CNI partners did not have extensive histories of working together to implement complex initiatives like the CNI and relied primarily on partner collaboration within specific activities of the CNI. For example, CHA assisted with housing relocation by providing vouchers to families but were not a primary partner on the CNI grant (Galvez, 2013).

In New Orleans, the CNI included a housing authority and city government lead and colead structure between the Housing Authority of New Orleans (HANO) and City of New Orleans. The New Orleans CNI proceeded with high levels of internal coordination among a small group of high-capacity and experienced partners, primarily led by HANO. Thus, strong collaborative relationships and established processes for resolving implementation challenges were identified as essential aspects of implementation success. In San Francisco, the lead applicant was a private affordable housing developer, McCormack Baron Salazar, and the colead agency was the San Francisco Housing Authority (SFHA). The San Francisco CNI involved a complex network of organizational partners and was implemented as an extension of a much larger mixed-income development initiative, HOPE SF, which included three additional public housing sites targeted for redevelopment. Thus, efforts of HOPE SF had created a strong infrastructure for collaboration that carried over to CNI efforts. In Seattle, the Seattle Housing Authority (SHA) served as lead applicant and was also the lead agency for each strategy area (e.g., people, housing, neighborhood). Thus, unlike other CNI grantees, SHA acted as the central coordinating agency for the entire CNI and worked to galvanize a small, strategic group of partners for implementation.

In addition to the Urban Institute's baseline report, Bulger et al. (2021) interviewed staff at 22 CNI planning and implementation sites to examine the extent to which mixed-income initiatives incorporated processes and practices of social inclusion in their design and implementation. The authors found that establishing a strong network of service providers was essential to successful intervention implementation and providing effective programs and services to CNI families. Additionally, intentionality around building trust, establishing shared commitments, embodying adaptive and flexible planning strategies, and ensuring that each initiative component was cohesive and clearly connected to the goals of the CNI was vital to successful program implementation.

These initial findings suggest substantial variability in collaboration capacity and relational dynamics among CNI partner agencies. Partners across sites may represent different collaborative histories, with partners in some sites collaborating over prolonged periods of time across multiple initiatives while others have more limited partnership histories. Thus, working relationships between public sector entities, as well as trust and willingness to partner across sectors, has potential to influence collaboration capacity and program implementation. External factors, such as local opposition to CNI plans and decision-making processes may also differ across sites, with potential to influence collaboration dynamics and implementation timelines. And while these dynamics have been explored in limited detail among the first five CNI implementation grantees, there remain many questions about how these dynamics have unfolded in other CNI sites that received funding in more recent years.

Based on the literature, evidence suggests that there may be competing internal and external conditions that influence CNI partner capacity to collaborate to effectively implement programs and services to achieve people, housing, and neighborhood goals. These collaboration

factors have not been adequately applied to housing and community development interventions despite recognition that organizational capacity and collaboration dynamics are integral to intervention success (Joseph et al., 2019; M. J. Rich & Stoker, 2014).

Because differences in local context, initiative goals and objectives, and partner capacity are consequential to intervention implementation and the achievement of people, housing, and neighborhood goals, in-depth explorations of partner relationships and collaboration dynamics in mixed-income development initiatives are sorely needed. Specifically, facilitators and barriers to collaboration as experienced by partners across sectors may offer insights for improving implementation to best serve families and their communities. These insights have potential to identify specific challenges during CNI implementation and ways to address them that are grounded in partner experiences. Mixed-income development initiatives provide a unique context for exploring the facilitators and barriers to collaboration among multilevel, multicomponent housing and community development initiatives like the CNI.

3.3.3. The South City Choice Neighborhoods Initiative (CNI)

This study examined collaboration among organizations involved in the South City CNI in Memphis, TN. The South City CNI received a \$250,000-dollar CNI Planning Grant in 2010, and a \$30 million-dollar CNI Implementation Grant in 2015. Thus, the South City CNI represents a grantee in later stages of the implementation process. The lead applicant for the South City CNI is the Memphis Housing Authority (MHA). The City of Memphis serves as the co-lead applicant on the grant (U.S. Department of Housing and Urban Development, 2015b, 2015a). Additionally, the CNI has three core strategy areas: people, housing, and neighborhoods. People strategies are led by Urban Strategies, a national nonprofit organization that provides supportive services to low-income families in public housing. The housing strategy area is led by a private development company, McCormack Baron Salazar, a national affordable housing development firm. The neighborhood strategy area is led by the City of Memphis Division of Housing and Community Development. These partners have a long history of work together, having completed several HOPE VI projects prior to receipt of the CNI Implementation Grant (City of Memphis & Memphis Housing Authority, 2013; Freiman et al., 2013).

The South City CNI focuses revitalization efforts on Foote Homes, a 420-unit public housing complex. The South City Transformation Plan guides initiative implementation and serves as the overall plan for the initiative. The document includes plans for the redevelopment of Foote Homes and the surrounding neighborhood to include 712 mixed-income units constructed across six development phases. The plan calls for the development of 600 units at the original site, 112 units offsite, and an additional 87 project-based vouchers (PBVS) for use in the surrounding neighborhood by Foote Homes families. The plan also includes the provision of supportive services for families and critical community improvements in the neighborhood (Memphis Housing Authority, 2013).

The South City CNI was purposively chosen for this study based on partner consultation, local context, and data availability to answer the dissertation research questions. South City CNI partners have relocated all CNI families from Foote Homes, the site targeted for redevelopment, and have made substantial progress on proposed development plans. Additionally, while the South City CNI has experienced challenges, the initiative represents an effective, high functioning partnership model according to local partners (Jones & Bradley, 2021).

3.4. Theoretical Framework

In this study I draw from literature on cross-sector partnerships and social capital theory to understand the unique facilitators and barriers to collaboration within the South City CNI in

Memphis, TN. Applied to cross-sector partnerships, social capital theory suggests that organizations enter collaborative partnerships to acquire tangible resources and benefits to address complex public problems, which would not be available to organizations working in isolation (Keyes et al., 1996). These benefits and resources include various forms of capital – like knowledge, information, and money – which become available to organizations as they collaborate with other organizations. Social capital theory suggests that long-term relationships built on trust and reciprocity are foundational to successful cross-sector partnerships, as are the development of mutual interests and a shared vision guiding collaborative work.

Yet, literature on cross-sector collaboration document the tensions that arise when organizations across sectors enter collaborative relationships (Bryson & Crosby, 2015; Joseph et al., 2019). These tensions include different working and communication styles, organizational priorities, definitions of success, problem definitions, and understandings of roles and responsibilities. Despite these numerous tensions, there are many examples of successful crosssector partnerships that have managed to overcome these challenges by focusing on processes and structures that facilitate the development of shared goals, clarify roles and responsibilities, and promote effective communication and coordination (Joseph et al., 2019; Madden, 2012). However, how these issues unfold within complex housing and community development initiatives like the CNI have received little scholarly attention.

3.5. Study Purpose and Research Questions

Little is known about organizational collaboration and partnership development within housing and community development interventions (Joseph et al., 2019), despite decades of intervention research that suggests that such partnerships are vital to program implementation and initiative success. We know little about how collaborative networks develop within these

initiatives or how their structure and processes evolve over time. We also know little about differences in the local context of collaboration and differences in program policies, practices, and partnerships (Levy et al., 2010; M. J. Rich & Stoker, 2014; Tegeler & Gevarter, 2021).

The available literature suggests that collaborative partnerships are critical to intervention effectiveness, particularly within complex, multicomponent strategies exemplified in mixedincome development. Yet, in-depth accounts of collaboration and implementation processes in community development generally, and mixed-income development strategies specifically, is absent from the literature (Joseph et al., 2019). Therefore, one of the biggest gaps in current research is in the examination of the cross-sector partnerships necessary for implementing housing and community development interventions (Comrie, 2018; Joseph et al., 2019).

To address these gaps in knowledge, the purpose of this study was to examine organizational partner perspectives of facilitators and barriers to collaboration and partnership development in the South City CNI. This study addresses these gaps in knowledge through the following research question: What facilitators and barriers do organizational partners identify as integral to the effective implementation of programs and services to families in the South City CNI in Memphis, TN?

3.6. Methods

3.6.1. Participants

Participants for this study included staff members at community-based organizations, government entities, and private agencies that collaborated to implement a variety of programs and services in the South City CNI in Memphis, TN. Inclusion criteria included organization staff who were over 18 years of age, who spoke English, and who were identified as

knowledgeable about CNI activities by the lead organization for the South City CNI, the Memphis Housing Authority (MHA), and the lead people-strategy partner, Urban Strategies.

Participant recruitment proceeded as follows. An initial list of key partner organizations was developed based on the South City CNI website, as well as a review of publicly available administrative documents, including the South City CNI Transformation Plan. Next, a staff member at MHA, the lead grantee for the South City CNI, was informed of the study and asked to participate in an initial conversation to discuss the purpose, goals, and objectives of the study. Following the conversation, MHA staff were provided the initial list of CNI partner organizations to review for inclusion in the study and were asked to provide the names and contact information of additional CNI partners who should be included but did not appear on the initial list. This strategy was chosen because there was no readily available list of South City CNI partners. Next, MHA was consulted to identify participants to invite to interviews. This is a common approach utilized to identify key partners in organizational collaboration research (Comrie, 2018; Krauss et al., 2004; Provan & Milward, 1995). In total, 32 organizations were identified as key partners in the South City CNI.

A total of 17 staff representing 15 partner organizations participated in the interviews, and participants were selected for interviews using purposive sampling techniques in consultation with MHA. Staff represented organizations working in each CNI strategy area including the people (n=9), housing (n=4), and neighborhood teams (n=4). Participants represented organization staff that occupied executive positions (e.g., executive directors, chief executives), as well as project management staff and program directors. Interview participants represented a subsample of all South City CNI partners (47%) and were selected based on their historic and current knowledge of CNI activities.

3.6.2. Procedures

Semi-structured interviews of staff members at CNI partner organizations were conducted to better understand facilitators and barriers to collaboration from the perspectives of partner organization staff. Participants were informed of the study by email and invited to participant in an online interview via Zoom. All staff members who were invited to participate in an interview agreed to participate. Informed consent was obtained verbally prior to audio recording each interview. Most interviews lasted approximately one hour. All interviews were recorded following verbal consent of participants and were securely stored online, and password protected. All interviews were transcribed verbatim and imported into NVivo version 20 to assist with data management and analysis. To encourage participation, email reminders were sent weekly in collaboration with MHA. After three recruitment attempts via email, the MHA was consulted to encourage participation. Interviews occurred between March 2021 and September 2021. Recruitment materials for CNI partner interviews appear in the Chapter 3 Appendix. All study procedures were approved by the Washington University in St. Louis Institutional Review Board (IRB# 202102034).

3.6.3. Measures

A semi-structured interview guide was designed to assess CNI partnerships and collaboration. Informed by literature on cross-sector partnerships and studies of mixed-income community development initiatives, the interview guide included questions to assess partner roles within the CNI (e.g., goals, objectives, tasks), collaboration and implementation processes including facilitators and barriers to collaboration, and major accomplishments and achievements that resulted from partnering on the CNI. Participants were asked to reflect on their initial engagement with South City CNI efforts, as well as their current involvement with the initiative and partnerships with other organizations (Joseph, 2010). Participants were also asked about relationships with other key partner organizations, including those with CNI lead agencies (Provan et al., 2005). Participants were also asked about significant barriers or challenges to collaboration (Freiman et al., 2013), along with factors that they viewed as helping overcome these challenges. The interview guide appears in the Chapter 3 Appendix.

3.6.4. Data Analysis Plan

Data analysis occurred in three steps congruent with qualitative data analysis and case study research: 1) preparing and organizing the data, 2) reducing data to themes through the coding and recoding process, and 3) presenting data in figures, tables, or a discussion (Creswell & Poth, 2018). Data analysis was descriptive in nature and aimed at generating pragmatic, practice- and policy-relevant insights (Dey, 1993). Data analysis included a mixed inductive and deductive approach, and multicycle coding methods were utilized to identify patterns and themes in the text data (Saldaña, 2016) in order to describe the South City CNI case and its context (Creswell & Poth, 2018).

Prior to first-round coding, I read each transcript in full to get a sense of the entire interview. After reading each transcript, I wrote analytic memos for each interview which captured my thoughts, reflections, and emergent findings (Creswell & Poth, 2018). I then approached each transcript with predetermined codes while allowing for the identification of emergent themes directly from the data. Because I was interested in identifying common facilitators and barriers to collaboration, these structural codes were applied to the data during the first round of coding and formed the basis for more detailed coding in later rounds (Saldaña, 2016). Next, I reviewed each interview and identified *noteworthy quotes* that stood out in the data (Creswell & Poth, 2018; Saldaña, 2016) and were representative of key barriers and

facilitators to collaboration. This first round of structural coding was followed by additional rounds of simultaneous coding to identify codes, categories, and themes directly from the text (Saldaña, 2016). Specifically, holistic codes were applied to the data to identify broad topics within the structural codes, followed by pattern coding to identify categories and themes in the data (Saldaña, 2016).

3.7. Results

3.7.1. Sample Characteristics

Seventeen staff members at CNI partner organizations participated in interviews, representing the perspectives of 15 organizations. Participants included executive-level staff (n=9) along with project managers and program directors (n=8) that were knowledgeable about CNI activities. Interviews with South City CNI partners represented diverse perspectives from staff members at agencies working across people (n=9), housing (n=4), and neighborhood strategies (n=4). Participants also included representatives from organizations across government (n=6), nonprofit (n=10), and private sectors (n=1). Participants also included staff who had been involved in the South City CNI Planning Grant process, as well as newer partners who had initiated engagement in recent years. Participants also included a representative from each lead organization involved in the South City CNI.

3.7.2. Summary of Themes

Across interviews, participants revealed that *coordinating challenges* represented common barriers to collaboration and the effective delivery of programs and services to CNI families. Specific coordination challenges included those associated with housing relocation, managing complex budgets within resource constraints, shifting organizational arrangements, and navigating diverse program perceptions. Additionally, the emergence of the COVID-19

pandemic substantially impacted partnerships in Memphis, particularly as it related to

coordinating partner communication and sharing information and resources. Themes, categories,

and example codes appear as Table 3.1.

Table 3.1.

Themes Related to Barriers and Facilitators of Collaboration in the South City Choice

Neighborhoods Initiative (CNI)

Category	Theme	Example Codes
Barriers		
to Collaboration	Coordination Challenges	Housing Relocation
		Managing Complex Budgets
		Resource Constraints
		Shifting Organizational
		Arrangements
		Diverse Program Perceptions
	COVID-19	Limited Interaction Opportunities
		Disruptions to Rhythm
		Losing Ground
		Amplification of Pre-Existing
		Challenges
Facilitators		
of Collaboration	High-Capacity Lead Organization	Frequent Communication
		Strengths-Based Leadership
		Network Nucleus
		Establish Collective Mission,
		Vision, Purpose
		Balancing Project Tension
		Synergistic Efforts
		Trust Building
	Credible Network Connectors	Connecting the Dots
		Relationship Building
		Internal and External Legitimacy
		Community Engagement
	History of Collaboration	Past Interactions
		Shared Experiences
		Trust Building
		Collective Learning
		Capital Exchange
		HOPE VI Implementation

Overcoming coordination challenges required the presence of a *high-capacity lead organization* that was flexible and adaptive to constantly evolving sociopolitical environments. This lead organization was a key facilitator of collaboration within the South City CNI, which relied on extensive cross-sector partnerships and diverse funding sources to complete. In addition to strong lead agency coordination, there were several other organizations, generally communitybased nonprofits, which had high levels of internal and external credibility and were integral to ensuring that the South City CNI progressed through implementation while maintaining the mission and vision to serve marginalized, low-income families. These organizations – which I refer to as *credible network connectors* – occupied a bridging role within the CNI by creating connections between partners. Additionally, these organizations played a fundamental role in enhancing the CNI's external legitimacy with outside community organizations and neighborhood residents. Finally, the South City CNI benefited from a *long history of partner collaboration*, which allowed for the development of trusting relationships which in turn promoted strong partner commitment and accountability towards shared goals and objectives.

3.7.3. Barriers to Collaboration in South City

Coordination Challenges in the South City CNI

Throughout interviews with CNI partners, it became apparent that the complexity of the South City CNI required immense amounts of coordination for planning and implementing the various components of the initiative. Key coordination challenges that emerged in the data included: housing relocation, managing complex budgets within resource constraints, shifting organizational arrangements, and navigating diverse program perceptions. Additionally, the COVID-19 pandemic further complicated coordination challenges by altering partner communication and venues for sharing resources and providing services to families.

Coordinating Housing Relocation

One of the major coordination challenges that South City CNI partners faced was that of housing relocation, which was required to begin redevelopment and construction at Foote Homes. A housing partner described the coordination challenges associated with the CNI, and emphasized the difficulties posed by housing relocation:

Affordable housing is never easy on a good day. The money that we received from HUD sounds like an awful lot, it's \$29,750,000. But when you're looking at building over 700 units of housing, supporting neighborhood projects, and providing case management services, that does not go very far. So, specifically on the housing side, I mean what it takes to actually build those 700 units is over \$200 million, so we've got to leverage those federal dollars to be able to get other sources of funding... So, that takes a lot of work to be able to coordinate all that. Just the day-to-day work of coordinating and the different aspects that go into it. There's a lot of moving pieces. All the people that initially lived there at Foote Homes had to be relocated. So, that was a whole process. Now that they've been relocated, Urban Strategies continues to engage with them and provide case management services, but that is challenging. It would be challenging to engage with people if they were all living in one spot, but when they were relocated, they were scattered throughout the city. So that's challenging to keep those folks engaged... None of this is particularly easy, and it can involve a lot of different partners, funding sources, and entities that are involved that all may have different requirements. So, you're just kind of juggling a lot of different pieces.

There were two unique constraints that made coordinating the relocation process

particularly challenging in Memphis. The first constraint was related to the unique context of Foote Homes as the last remaining traditional public housing development in the city. As such, Foote Homes was viewed as a development that provided housing to many hard-to-house families who faced multiple barriers in the housing market. Partners mentioned that many families who lived at Foote Homes had lived there for generations, and several had been previously displaced through other development efforts, specifically those associated with HOPE VI. Thus, several families at Foote Homes had extremely limited options in the housing market and experienced immense difficulties during relocation. A people strategy partner identified the importance of strong partnerships when navigating the complex challenges families faced during relocation:

A lot of families who lived in Foote Homes had been displaced during other development work... We had people who had been displaced by at least three HOPE VI grants and they were not ready to live in the greater community... it was overwhelming for them... we had to really assist them heavily with the process. You know, sometimes you have to walk with folks. You have to lean on those partners that are out there. You won't be successful if you don't depend on experience or collaboration.

Another partner discussed the unique context of Foote Homes and implications for

delivering programs and services to families, including those associated with relocation. The

partner described how this context fostered a great deal of mistrust between service providers

and residents that had to be addressed during the CNI planning and implementation process. The

people strategy partner explained:

Memphis is the only city that can say we have eliminated all traditional public housing. We have no more traditional public housing in the city. We are the first city to be able to say that... So, when you got to where some families had moved from one housing development to the next, and then you have the very last housing development, that was the most difficult of the grants that we had to tackle. And it took a lot of work to really engender trust with the residents and then hope for what their community will look like and how they will be a part of that. So, I think that's always one of the largest challenges you have in a situation like this so that people don't feel like their communities are being gentrified, but you are creating a place for them to actually come back to so that they benefit from all the revitalization that's happening around them... So, engendering the type of trust that we needed to have with our residents made it possible for us to say why this community is your community, why you're the authors of your own solutions to how this community becomes a thriving community. We aren't coming in saying this is what needs to happen, but we're working in partnership with you to really empower and amplify what you think your community needs in order to be a thriving community. So, you know I'm talking about trust in building that collaboration to me, was one of the biggest challenges.

The second constraint that made housing relocation challenging in Memphis was due to

the simultaneous condemnation of two nearby privately owned housing projects, the Warren

Apartments and Tulane Apartments, which had failed several HUD inspections at the time of

housing relocation at Foote Homes. This forced families living in an additional 400 low-income

housing units into the housing market at the same time that CNI partners were attempting to relocate families from Foote Homes. This meant that hundreds of additional low-income families were searching for affordable housing at the same time. A partner on the people strategy team discussed the need to pivot and adjust to these unforeseen challenges to ensure that families were supported:

In Choice Neighborhoods or HOPE VI, there's different models for relocation. In Memphis for the Foote Homes CNI grant, they did the massive relocation. Everyone was moved off site around the same time, or they started the relocation, so they could do the demolition. There are some that may be done in phases, but we made the decision to go ahead and demolish the entire site so we could start the rebuild. During the time of relocation in Memphis, there were two apartment complexes in the city that were condemned by the federal government. So, then you have the competing priorities with these properties being condemned and relocation. So, I think they had to pivot and go through those condemned properties and make sure the market could absorb all the families from the condemned properties in addition to the families that were relocating out of Foote Homes... Now we didn't have those other families to relocate, but I think they were voucher developments, which meant it was the Housing Authority's responsibility to try to absorb and get everybody relocated.

Coordinating Complex Budgets within Resource Constraints

In addition to the coordinating challenges associated with relocation, another challenge involved managing complex budgets within resource constraints. These challenges included the immense complexities of coordinating a variety of programs and services across three distinct but interconnected strategy areas, all of which included different funding mechanisms and timelines. Additionally, partners frequently described the CNI Implementation Grant as necessary but not sufficient to address the complex challenges that families confronted at Foote Homes and in the surrounding neighborhood, which had resulted from decades of disinvestment. This meant that a seemingly large amount of funding was insufficient to address issues that had materialized and accumulated over decades.

One CNI partner described these constraints as primarily limiting resources to support *housing adjacent work* – or projects that were viewed as vital for the success of the redeveloped

housing but were often not planned for and funded through the CNI grant itself. The partner viewed these projects as essential to the long-term success of the South City CNI, which included programs and projects for neighborhood and community-wide improvements. A housing strategy partner stated:

So, generally the constraints of the multi-phase budget that is built at a point in time but has to be implemented over a period of time. I would say that's a really big upfront one [challenge]. I would say the scope of work that needs to be completed within those resources, which we just talked about. The site preparation and the streets, the housing construction itself. Also, the housing adjacent work that's critical to a successful community, but often isn't planned for upfront. Like parks and artwork... stuff that takes the community from bricks-and-sticks into much more of a living breathing organism that I think people start to feel like it's more of their home. That's so important, but costs money and takes time and community engagement... I think the point I want to make is that there are all of those challenges, even in a city and state where the partners are so communicative and collaborative and supportive.

And while funding was a constraint to the overall efforts of the South City CNI, a few

nonprofit organization staff mentioned that successfully coordinating and navigating these

resource constraints was vital to the collaborative efforts in Memphis. One neighborhood

strategy partner stated:

There are some nonprofit organizations who are territorial. So, although collaboration is key, when it comes to funding, everybody is vying for the same dollars. And so that can sometimes strain relationships or make them really even nonexistent. But we try to collaborate, we try to stay as open and honest as we possibly can to make sure that we get the work done.

Another neighborhood strategy partner echoed these sentiments, describing how

competition for scarce resources could threaten collaborative efforts if not coordinated

effectively. The partner explained:

I think collaboration more broadly can be challenging because we're resource poor and there are a lot of community development corporations that are fighting for the same scarce dollars for operating. I think we leave some collaboration and some synergy on the table if everybody's scrambling for the same operating dollars and they're not looking at how they can align and leverage and multiply their efforts.

Coordinating Amidst Changing Organizational Arrangements

Coordinating challenges were magnified by changing organizational arrangements as a

result of staff turnover at CNI partner organizations. A housing partner described how

partnerships had evolved over time since receiving the CNI Implementation Grant:

It's just that the challenge of when we applied for the grant back in 2015, there were different organizations that supported our application and we talked about what are some possibilities of working together. In some cases, leadership changed in some of these organizations and so that can pose a challenge. It doesn't mean that they're not still interested in working with us, but it just means that whatever plan or strategy we had in 2015, as leadership changes and then in some cases it depends on the organization, for some organizations that means they've got different priorities or different focus areas. So, you've got to adjust and that can be a little bit challenging because that can mean that the commitment that was made in 2015, how it looks in 2019 or 2020 is different.

Because of the evolving nature of partnerships, several partners identified the importance

of establishing structured processes to reorient partners towards the mission, vision, and goals of

the South City CNI. A people strategy partner stated:

You know, one of the largest challenges is always that you don't have the same people who began the process with you then, when you end the process right. So, I don't think that the vision has changed. One of the biggest challenges is realigning folks to the shared goals and outcomes that we're trying to achieve. That's part of the collaboration process is how do you bring people back to that center. One that families are at the center of all decisions and the focus for the Choice Neighborhood.

Coordinating Differing Program Perceptions

Coordination challenges also included navigating different, often contradictory

perceptions of the South City CNI between different stakeholder groups. One housing partner

mentioned navigating diverse perspectives as a challenge during the CNI planning and

implementation process:

I think the challenges in our market specifically are just the perception of the program and the perception of what's happening when you tear down something and build something new. This area is in a much different neighborhood than all the other projects. It's very close to downtown Memphis. So, there's a lot of other projects happening near and around it. And so, I think there's this perception of not being affordable and not being for the people that lived there before and some tensions because of that. And so, we have to help dispel some of that misinformation. In those cases, it's just people either making assumptions or not asking, not getting the right information... But there's just a general tension. How do you make something new but also acknowledge and celebrate what was there before? It's a strong community. There are a lot of people in the community that have a very affectionate view of the public housing... because that's where they grew up and their family grew up.

Another people strategy partner described the tensions between community members

who were celebratory about the efforts of the South City CNI, compared to others who viewed

the initiative with skepticism and in some cases anger. The people-strategy partner stated:

You know you have everything from new people coming in and excited and saying "wow, how can I live right there"... Then you have other individuals that say "this is what they wanted all the time. They did not want poor people...they did not want us here all the time. The whole strategy all along was not building this, this was about moving poverty away from our downtown center." So, you have everything from celebratory, to anger, and cynicism, you know, and distrust.

Multiple partners discussed this tension and described examples of how CNI partner

organizations attempted to navigate and address these challenges to ensure that diverse

community voices were represented in the work of the South City CNI. A specific example was

in the naming of streets within and surrounding the housing development. A housing strategy

partner stated:

We had a lot of conversations about just what we should name it, what streets should be called. Things like that because people still wanted to have that attachment, which of course we expect, respect, and honor through all those elements. We listened to their feedback and we had a very devoted street naming, particularly for the current part of the development, to make sure that they felt heard, and they still felt connected and understood that we weren't trying to erase or take away from what was there before. We just wanted to provide a better environment for people. So, I think that's been the biggest challenge is just navigating that community and helping people feel like we're there to do what we think will benefit them and I hope that they feel the same way.

Another housing partner discussed the inevitability of these competing perspectives and

the need for equity and inclusion in the decision-making process. The partner stated:

Everybody is not going to be happy. That's just the way it is. But I think one thing that people will say is that the message hasn't changed. You know I've been consistent I've been accessible I've been open. And you know I've invited people to the table that weren't traditionally invited to the table... and I think sometimes you need to bring people in the room, because otherwise they're going to be standing outside talking and

you can't control the message. And when they're in the room, they become part of the conversation, part of the solution... And so, I think it's a benefit to any project. Just to have people included and people to be heard as much as possible.

COVID-19 and Collaboration in the South City CNI

The COVID-19 pandemic represented a unique sociopolitical context for the South City CNI. Partners often discussed CNI related activities pre-pandemic, indicating that business-asusual had been substantially impacted by the pandemic. Partners discussed how routine ways of working together had been disrupted, and partners were still learning how to navigate disruptions to service and program delivery resulting from the pandemic.

One way the pandemic influenced collaboration was by limiting in-person contact that organizations had with one another. The impact of this disruption was most notably felt among partners outside of lead organizations who relied on these in-person opportunities to receive program updates about initiative progress. Additionally, the pandemic also influenced the extent to which program partners, particularly grassroots community organizations and direct service providers, were able to engage and stay connected with CNI families. A few participants described being "off schedule" and "losing touch" with some CNI partners. A housing partner described how the *rhythm* of working with partners had been disrupted during the pandemic:

We really had gotten into a rhythm of offering programming through this Resource Center connecting residents with these other organizations or entities that had programs. And all that kind of thing with COVID, you know, the school building is closed, you just can't do all that in person activity. And so that's been challenging because the work that we were doing changed. And then for a lot of the partners, I mean their work has changed. And everybody's had to regroup and they're just thinking about how do we keep the doors open. And so, the bandwidth for new initiatives is not quite there. So, that's been challenging for the partnerships because we've been meeting quarterly and really gotten into that rhythm and COVID really disrupted all of that. And all of that does not always easily translate to a virtual platform. So that's challenging.

A people strategy partner mentioned the pandemic as representing a significant challenge to delivering programs and services to families. The people partner stated: I think the biggest change has really just been the pandemic. We were able to bring people into our space and host all types of meetings [and] press conferences... It's all been in person. I think that as we started having meetings, we realized what people needed in our space, and we just kept growing it out... Now with the pandemic, trying to manage live events and be able to social distance, and the sanitizers, and the contactless, and all of those things... The thing that's been a challenge for a lot of the agencies is that when you think about doing things virtually and you're connecting or need to connect with the population that's already disenfranchised, at risk, they don't have the digital infrastructure to be able to do a lot of these things remotely. Now that we've shut down, people who normally would have come in to use this free service, they didn't have that either.

A people strategy partner described having lost touch with some organizations due to the

pandemic. The partner described how this disruption in contact and communication created

distance between partners and limited opportunities to work together:

And I think through the pandemic, we've lost touch a little bit. And we haven't worked as closely together I would probably say in the last six months.

A neighborhood partner described specific constraints in working on neighborhood

projects. The partner described:

It's been challenging for everyone in the pandemic, because we're not able to get people out there. Because if I were in a pandemic and the first time I heard about this program, I'd be suspicious as a homeowner. Especially if I'm older and people always trying to have schemes to take their homes. And so, seeing us face to face and really getting to know us, it's different than me calling you. So, we would have had getting-to-know-you events and frequently ask questions... And so, the challenge of the pandemic is true for any business because it disrupted how we operate... We've had to adapt. And we still did homes during the pandemic, probably not as many as I think we could have done because people were unsure...

The partner went on to describe how the pandemic had strained systems that were

essential for coordinating and completing neighborhood projects. The partner discussed how

adaptation delays for permitting, along with substantial cost increases and availability of

materials, had impacted project timelines. The partner explained how these delays were

particularly challenging for completing smaller projects, like those associated with

homeownership in South City:

Our code enforcement department was shut down. They moved to electronic, but it took them a while. It's kind of like some colleges that were not online, it took them a while to adapt. And so, we were impacted by their adaptation to a pandemic... And then supplies. So, our supply chain. We're talking about challenges beyond our control. Construction went up probably 300 or more percent. So, if we needed to replace any wood, the cost to us went up. So that limited the amount of repair we can do on some people's houses."

While coordinating challenges and the COVID-19 pandemic had potential to disrupt and delay CNI implementation, CNI partners also routinely identified partner characteristics and collaboration strategies that allowed the South City CNI to acknowledge and address these challenges while working collaboratively to identify solutions to effectively move forward.

3.7.4. Facilitators of Collaboration in South City

High-Capacity Lead Organizations in the South City CNI

Partners frequently identified the presence of a high-capacity lead organization as essential to the successful coordination and implementation of the South City CNI. The lead organization was described as the nucleus of the South City CNI who was responsible for coordinating communication to all CNI partners that worked in the people, housing, and neighborhood strategy areas. Thus, the lead organization played a fundamental role in connecting partner organizations to the comprehensive work of the CNI. In Memphis, the lead organization was the Memphis Housing Authority (MHA). A housing partner described discussed MHA and the general structure of partnerships in the South City CNI:

[There is] lots of contact... stakeholder meetings...we communicate all the time... I guess I would just say it's just a big loop. It's a big circle and there are a lot of crossing lines through the nucleus to all the different groups on the outside of the circle.

A people strategy partner described MHA as exhibiting strengths-based leadership and having the capacity to manage relational dynamics so that the CNI benefited from diverse voices and perspectives. The people strategy partner stated:

And for Choice you know, we had you know our Memphis Housing Authority is kind of like the ultimate lead... they were able to lead in a way that was really strengths-based. It

was really pulling other people in, allowing the voice of the people to really guide the process. So, they really approached it as partner, and you know when you're in a city like Memphis, strong ties, long relationships... they [MHA] were able to navigate that. And I think that's key. The savviness of the lead organization in navigating those local dynamics, really being a servant to the process, and they were able to exhibit those qualities.

A housing strategy partner described MHA's capacity in the lead agency role as

exhibiting dynamic leadership qualities and intentionality about addressing substantial problems

with potential to impact the CNI. The partner's reflection suggested that while the South City

CNI experienced problems similar to other CNI sites, MHA's leadership and coordinating

capacity helped partners address challenges directly while working towards positive outcomes.

The housing partner stated:

Dynamic leadership, addresses issues head on, doesn't seem to let them linger. They [South City CNI] have issues. There are so many issues. The same issues as other urban metropolises across the country, but they seem to not scurry from them, but embrace and work towards a result that is more positive... And the intentionality that I have seen from the partners to try and create short-term and long-term solutions is significant.

Structured Opportunities for Frequent Communication

Multiple partners described how MHA's approach created synergy throughout the

initiative, which made partners feel connected to each other and the joint work of the CNI even if

they were not in direct contact. This synergy was the product of structured opportunities for

frequent communication and information sharing. A housing partner, who worked on the housing

and neighborhood strategy teams, stated:

I've never worked on other CNIs or another HOPE VI so I can't say if this is normal or abnormal, but I think there's generally synergy within the whole project... There isn't a lot that goes on that we're not talking to each other about. And when there are things that go on in the neighborhood that, although it isn't directly impacting the development and the construction in housing, the housing team still wants to know what's happening beyond their walls and what's going on around the neighborhoods. So, there is generally just a lot of synergy because we all are involved in multiple parts indirectly or directly. One of the ways MHA created synergy was through consistent and frequent

communication. Frequent communication and opportunities to learn from others were identified

by several partners as essential for successful program implementation. A neighborhood partner

stated:

We have fairly regular communication with them [MHA]. It's a great relationship...With [other organization], we don't directly interact with them regularly outside of CNI meetings, but we are made aware of things happening in the Zip Code... And then the Housing Authority we check-in in between because we don't directly, we're not directly partnered with them. Obviously, they're just overseeing everything and work obviously very closely with the housing team and the people team. We don't work with them as closely on the neighborhood component. But they are great about keeping everyone up-to-date. They check in very regularly. They keep us up to date on stuff that we may not know what's going on.

Another partner explained that communication was essential to connecting the various

activities of the CNI together, which helped partners see connections across work areas. The

housing partner stated:

I really do think that this communication and collaboration piece is really key. So, one example is that they have stakeholder meetings. And they do them quarterly. And everyone pre-COVID sits around a table, and they talk, and they bring up issues and they invite certain people to present at certain times. But they keep in touch, so no one, the pieces and the parts don't feel siloed they feel connected. And I think that's been really successful.

A people strategy partner discussed the value of bringing partners together to share ideas

and solve problems:

Bringing different minds together so that you can get different ideas, helping to solve any issues or problems that one organization may be having by bouncing ideas off of each other, or you may be presented with an issue that another organization has already had and been able to solve. And then just finding out other opportunities that may be available for funding or moving families forward. So just knowledge sharing mainly.

Another people strategy partner described how the meetings coordinated by MHA and

other partners helped them see how their work was connected to the big picture of the CNI. The

partner mentioned:

And so, unfortunately, I missed it [meeting] last month but I can't wait to reconnect. That's a convening that they host that I think is a really, really good one because we do want to reduce redundancies and sometimes there is a tendency for us to work in silos. I don't even think it's intentional sometimes. It's down doing the work. And so, being able to step back and think about how all of our pieces work together to help residents and build communities. I think it is pretty powerful.

Trust Building Activities

Frequent communication created strong ties between partner organizations. Over time,

these opportunities developed trust and allowed for flexibility when addressing challenges while

also fostering accountability and commitment to shared goals and objectives. Another people

strategy partner described:

In doing this work, we all had the same goal and that is to move our residents forward. And it takes collaboration. And for years, there were times when we would be meeting on a monthly basis, or quarterly basis with Memphis Housing Authority staff. We would be making referrals. So, that's how we developed a close relationship with those organizations. Same thing with [other organization]. They would make referrals. Our staff members would be in communication with their staff members. And so, because of the nature of our work, we just developed those close ties.

Partners also discussed the overall transparency and willingness to work across

differences among partners. One housing partner stated:

Anyone who's remotely related to the area, we invite them to our meetings. And when we have our executive committee meetings or community meetings, we're not trying to exclude anyone because they don't necessarily understand or know what's going on. We allow them that. We give them the space to have those conversations. So, nothing has been, at least since the project has started and I've been involved, anything that's been insurmountable. A lot of it has just been about having a conversation... I think we're very open and very transparent and very accessible. So, there aren't people that we're not willing to invite or talk to or have a conversation with.

Credible Network Connectors in the South City CNI

In addition to strong lead agency coordination, another type of organization that emerged

from conversations with South City CNI partners included what I call credible network

connectors. These were staff members at community-based organizations that had prominent

levels of internal credibility with CNI network partners, as well as high levels of external

credibility with community groups and neighborhood residents that were outside of the CNI

partner network. One housing partner described a local community-based organization as

integral for keeping a pulse on how community residents felt about different projects occurring

through the CNI:

We work very closely with one of the local CDCs [Community Development Corporations] and she'll say, 'people feel this way. How can we help them?' And she's been involved in many of our conversations. We talk with her regularly, but she'll also bring concerns and we'll listen, and we'll address them. So, those come directly from the community or at least from the people she's dealing with in the community.

The same housing partner confirmed the importance of these community-based

organizations as enhancing CNI efforts. The partner stated:

You have to have those partnerships. Particularly not just for the good, but they help you because some of them can talk to people that we can't. Like the Director of [community-based organization]. I mean she has the ability to talk to people. They will tell her stuff. They will confide in her about what they want and about what they don't want. So, she has a good sense, a really true sense of being on the ground helping us to understand what's desirous and what we need to do differently.

Another community-based organization exemplified the bridging role that these

connectors provided within the CNI partner network. The people strategy partner described the

work like this:

Written inside of the grant are about 45 or 50 agencies who have committed to provide services in the community. When I got the grant, they handed it to me in a notebook. I read through it, and I highlighted all the agencies and what their purpose and mission was, and the commitment to the grant. I started making phone calls. I had to look up who the contact person was and all that and say, "Hey, I'm a part of this Choice Initiative Grant. I see that you're written in. How can we partner? Well, I have the space. You could bring the people. What do you need me to do and what can you do for us?"... That's really how we got started. Then word of mouth. As I tackled that list, somebody told somebody else, somebody told somebody else. With all of that being said, even now some of our partners are not even partners who were on our list. They're just partners in the city who want to make a presence in the community, and we make it happen... That's what we're trying to do. We just try to connect the dots and make some stuff happen.

Another partner worked at a community-based organization and described the importance

of connecting service providers to ensure that families had access to a broad range of services

while also connecting the work of the CNI to efforts in the neighborhood. The people strategy

partner stated:

I'm definitely grassroots on the ground, boots on the ground... I'm knocking on doors, I'm [going] door to door. I walked through the crowds of the gang bangers, and I tell them who I am and what I'm doing. They may not know my name, but they know that lady with the long dreadlocks. So, I try to at least make myself visible in the neighborhood. Whenever I have events, I would pass out flyers in the community, put them in people's doors... And so, my passion is just, I'm just driven by seeing the excitement in the residents, seeing the implementation of projects... And so that's what drives me. Every time I see a successful project, even when one doesn't pan out the way I wanted to, I just try to figure out, well, how can I make this better? How can I make this work the next time? How can I reach more residents? How can I be more impactful? I live and sleep and dream this. I go to bed thinking about this, I wake up thinking about this.

History of Collaboration and Committed Partners in the South City CNI

The South City CNI partnership network also benefited from a long history of collaborative efforts that allowed organizations to develop trust and establish processes and procedures for working together. These partnerships included current work on projects that were complimentary to work in the CNI, such as work towards meeting the goals of citywide and regional initiatives, as well as past partnerships on similar projects through the federal HOPE VI program. Indeed, partners routinely talked about past HOPE VI efforts during interviews and discussed building collective organization capacity through grant writing, project planning, and program implementation. Additionally, experiences working together to implement HOPE VI allowed partners to identify the challenges and shortcomings of past efforts while attempting to incorporate lessons learned into the implementation of the CNI. These joint efforts served to build trust between partners and established lead organizational legitimacy that directly influenced efforts through the CNI.

One people strategy partner described the history of collaboration between organizations that went back decades to the first HOPE VI grant in Memphis. The partner described how partners routinely worked together across programs, often attending the same trainings and developing shared goals and visions for their joint work. These continuous opportunities for learning and adaptation fostered deeply held commitments and accountability within the South

City CNI. The people strategy partner stated:

It's really a lot of the same nonprofit organizations that are engaging in all this space. So, they're likewise a part of all of these plans... [we] just finished doing a HOPE VI application...we did it again three years ago. It's the same crowd that we're bringing to the table...And we're trying to leverage all these things off each other...The same crowd was doing the Evidence to Success planning with Casey, the Promise Neighborhood planning, and the Choice Neighborhoods plan. Same folks. So, you know, it's repetition...There is a sense that's strong enough that 90% of the providers are going to respond and feel compelled to respond...but the strength behind that is there's enough connection and enough attention to collective impact that we're all up... we have a Memphis STRIVE connection, so all of the language, the training that has covered a lot of us...trainings where all of this same crowd has been a part of this movement of really understanding we have to align and move toward the same, not just the same work, but really the same goals to really have an impact that we need in the city... again it's us being very intentional about even framing that all of this work, from the HOPE VI grants have led us to this place of Choice Neighborhoods, you know what I'm saying? That this is a growth pattern, this is a culmination of all this work.

This history of working together and high levels of partner trust was particularly salient

for galvanizing support to address resource limitations in the CNI. For example, several

organizations identified themselves as filling gaps in funding to ensure that families were

supported beyond the housing development itself. Another people partner mentioned:

And then it's the lack of resources right. So, when you're getting a Choice Neighborhoods \$30 million grant, most of that is to the actual development and building the housing right. It's not like you're just putting a lot of money into an infrastructure to support that. You're not putting a lot to the community organizations that are carrying out programs. So, that's why our role as a philanthropic partner has always been so pivotal. And how we're able to leverage but also how we see ourselves as providing those very critical resources that families need. And that it has to be at the center of what families tell us that they need for their own sufficiency to then help them to get to the point of security.

The same partner went on to describe how the history of collaboration had built up broad

organizational capacity among various CNI partners, which assisted with CNI implementation.

In addition to the lead organization, MHA, several partners mentioned the capacity of

organizations within each strategy area and the need to invest in capacity building to ensure

continuity of service provision and sustainability beyond the CNI grant period. The partner

mentioned:

You always go into these types of processes thinking one way and you learn so quickly what real capacity means. It's a term folks use in the nonprofit world quite a bit, but when you get into the meat of something as large as this particular partnership and collaboration, you understand there's no way to even plan for the type of capacity you need. It's a learning process right. I think to our benefit having those previous HOPE VI grants prepared us in ways that we didn't realize... We knew after the first HOPE VI grant that you needed capacity to continue to support those families. It [HOPE VI] ends with the five-year grant. It's over after the new development is built. That's it. There's no other capacity in place, or there's no other funds coming to support that community. So, we learned early on what that meant. So, building the infrastructure to support our families and case management across the continuum has been a tenet and values statement for us in Memphis. And that's why we localized our case management... We were very specific about the continuity of both staff and personnel and services that needed to be provided for families. So, that is one that I think we've made an intentional investment over the years to make sure that that happens.

3.8. Discussion

This study examined barriers and facilitators to cross-sector partnerships and collaboration within the South City CNI in Memphis, TN. This study provides among the first in-depth explorations of partnership and collaboration dynamics within the CNI and makes several notable contributions to the literature on mixed-income housing and community development initiatives.

In addition to consistencies with prior literature, this study also adds new insights into partnership and collaboration dynamics within complex housing and community development initiatives. One key finding was the identification of coordination challenges as a foundational problem for the implementation of the CNI. This aligns with prior research on cross-sector collaboration and complex community initiatives (Joseph et al., 2019; Peters, 2018). While resource scarcity and external conditions matter, the ability to effectively coordinate resources, no matter how scarce, and manage external constraints, no matter how intractable, seems fundamental to effective collaboration within complex initiatives like the CNI. In the South City CNI, organizational partners embraced these challenges and established processes and procedures to address challenges and achieve collective goals and objectives embedded in the CNI.

In Memphis, the identification of a clear lead organization with primary coordinating responsibilities was frequently identified as a core strength of the South City CNI. This addressed an immediate hurdle that arises in cross-sector partnerships working jointly to address complex problems, the institutional void, where singular organizational actors may feel limited coordinating responsibility to address issues that are perceived as beyond their organizational mandates (van Tulder & Keen, 2018). Through strategic coordination and intentional boundary crossing across different areas of work, MHA and South City CNI partners have been able to, at least to some extent, fill this institutional void and achieve a fairly high degree of policy integration, or the creation of synergy between various programs and services focused on broad strategic goals (Peters, 2018). This also allowed South City CNI partners to overcome the numerous barriers to the development of affordable housing, which many partners suggested were common problems that generally applied to all CNIs. This is consistent with prior research suggesting that a key difference between successful and less successful collaborations is in part a function of partner capacity and willingness to address challenges, resolve problems through adaptation, and move forward to achieve initiative goals (Madden, 2012).

It also became clear through discussions with South City CNI partners that COVID-19 represented a significant disruption to collaborative efforts. Not only did the pandemic substantially increase the costs of doing business through material costs and supply chain challenges, but it also limited the opportunities for in-person contact, which was an essential mechanism for sharing information, generating new ideas, and fostering trust between partners.

While partners adapted to new ways of working together through the pandemic, new and emerging partnerships were put on hold as partners focused efforts on maintaining organizational stability and finding ways to meet the basic needs of CNI families.

Consistent with prior literature on cross-sector collaboration, I identified the presence of several initial internal conditions that impacted cross-sector collaboration (Bryson & Crosby, 2015). The most notable internal condition that enabled strong partnerships and collaboration in South City was the extensive history of collaboration among CNI partners dating back to initial HOPE VI developments in the mid- to late-1990s, and likely much further. This partnership history, which partners spoke about as a strength, was a key factor that allowed organizations to come together, establish plans, and identify roles and responsibilities for moving these plans into action. This sustained history of collaboration also served to establish norms of working together, partner engagement practices, and decision-making processes that maintained program integrity while remaining flexible and adaptive to address new and emergent problems. Sustained engagement between partners across a variety of housing and community development initiatives developed an accumulated knowledge base among partners and a shared language to discuss local problems and solutions.

Several notable processes and procedures facilitated collaboration within the South City CNI including structured and consistent opportunities for communication and information sharing (Bryson & Crosby, 2015; Joseph et al., 2019). This was exemplified in the establishment of quarterly partner meetings which provided a venue where partners could provide updates across different areas of work, express and address challenges, and review data and project metrics to chart progress and make adjustments. These processes and procedures, which materialized over decades of collaboration across organizations, established high levels of

partner trust and a collective sense of commitment and accountability towards shared goals and objectives. These opportunities also provided a venue for partners to reframe problems, coproduce innovative solutions, and galvanize network resources needed to move forward (Howell & Wilson, 2019). This culminated in program and service delivery systems that benefited organizational partners and fomented a network of partners that intentionally worked together towards a collective vision. This suggests that structured and consistent opportunities for communication and knowledge sharing are integral within complex initiatives like the CNI.

Another contribution of this study is in the identification of organizations that occupy a connecting role within the CNI. These organizations, often community-based nonprofits, were well connected within the CNI partnership network and had developed high degrees of internal and external credibility. Internally, these organizations were viewed as trusted representatives of the communities they served. At the same time, staff at these organizations worked tirelessly to gain the trust of stakeholders outside of the CNI to ensure that the work of the CNI was inclusive of and responsive to a variety of community concerns and incorporated diverse community perspectives. These efforts went beyond formal service provision to include substantial amounts of unfunded relationship building and connecting work. These organizations held firm to the end goal of thriving families in South City and the 38126 Zip Code. By starting with the ends in mind (Bryson & Crosby, 2015) these partners engaged in a process of continual learning and reorientation towards the mission and desired outcomes and aspirations of the CNI.

3.9. Limitations

Limitations of this study include the single-site case study design. This study was conducted in a single CNI implementation site, the South City CNI in Memphis, TN, which likely differs in terms of local context, the size and scope of the CNI project, the stage of project

implementation, and the quantity and quality of partnerships compared to other CNI sites. This is a key limitation in the ability to generalize beyond the South City CNI. Additionally, the cross-sectional, retrospective nature of the study represents another limitation concerning potential recall bias and the ability of participants to recall information accurately and honestly about their involvement in the CNI. To assist with recall, interview questions and prompts focused on initial partnership development and evolution over time. Additionally, the sample of partners included those who the lead organization identified as current, active partners who had collaborated within the past 12 months. Therefore, perspectives from staff at less active organizations, or those representing organizations who had ceased collaborating on the CNI were not included in this study.

Additionally, staff who participated in interviews, while representing diverse perspectives and representing organizations across sectors and domains of work, may systematically differ from partners who were not interviewed in terms of their views of the CNI. Because this study utilized purposive sampling techniques and recruited participants in partnership with the lead organization, it is possible that interviewees were more involved and held more favorable attitudes towards the South City CNI. Despite these limitations, findings from this study provide additional insight into partnership development and collaboration in mixed-income community development.

3.10. Implications

There are several implications for the findings of this study. First, is in the need to identify and address key coordination challenges that must be overcome to successfully implement the bundle of programs and services embedded in the CNI. In Memphis, identifying or establishing a lead agency to coordinate the initiative was particularly important to navigate

complex internal and external dynamics associated with cross-sector collaboration in the CNI. This organization was trusted by CNI partners and had the capacity to fulfill their own role within the CNI implementation process while also occupying the central role of coordinating communication, sharing information, and allocating resources to community partners. While the lead agency structure was identified as a strength in Memphis, assigning and agreeing upon coordinating responsibilities outside of the lead CNI grantee could be sufficient in other CNI sites. Additionally, this does not mean that the lead coordinating agency must be directly connected to every CNI partner. In fact, the South City CNI demonstrates that being well connected to organizations who themselves are well connected may be an effective coordination strategy. Additionally, an explicit focus on lead coordinating agency capacity building should be a core feature of the CNI planning process prior to implementation.

The findings of this study also support the value of information sharing about key challenges, successes, and lessons learned among CNI partner organizations. While these insights were particularly important within the South City CNI, it is likely that the benefits of information and knowledge sharing could extend across CNI planning and implementation grantees as well. Annual convenings of CNI grantees have occurred in the past (Urban Strategies, 2019; U.S. Department of Housing and Urban Development, n.d.) and represent a potential avenue for building knowledge and local capacity to implement the CNI by bringing together grantees across funding cohorts to learn from each other.

Implications for future research include examining collaboration and partnership dynamics in other CNI planning and implementation sites and across funding cohorts. This research could shed light on differences in partnership successes and challenges, organizational capacity, and partner readiness to implement the range of programs and services envisioned in

the CNI. This research could also offer insights into key challenges at earlier and later stages of CNI implementation.

In this chapter I explored the barriers and facilitators to collaboration in the South City CNI in Memphis, TN, including those associated with the housing relocation process. Using interviews with CNI partners staff, I identified key coordinating challenges associated with CNI implementation, and identified the presence of high-capacity lead organizations, credible network connectors, and initial enabling conditions which facilitated collaboration in Memphis. Qualitative data collected through in-depth interviews provided insights into interpersonal partnership dynamics and collaboration processes, including facilitators and barriers to collaboration and the effective delivery of programs and services in the CNI. However, these data do not sufficiently capture important structural characteristics of the CNI partnership network that may be important for effective collaboration and service delivery. These collaboration processes and structure are further explored in Chapter 4 through a network survey of CNI partner organizations.

3.11. Chapter 3 Appendix

South City Choice Neighborhoods Initiative (CNI) Interview Recruitment Email

Dear [Organization Representative Name],

My name is Andrew Foell and I am a social work doctoral student at Washington University in St. Louis. I am currently in the dissertation phase of my degree program and I am partnering with Urban Strategies and the Memphis Housing Authority to examine organizational partnerships and collaboration in the Choice Neighborhoods Initiative in Memphis, TN. The purpose of this study is to better understand the facilitators and barriers to collaboration and implementation in the Choice Neighborhoods Initiative.

I would like to invite you to participate in a phone interview via Zoom to discuss your experiences as a partner on the Choice Neighborhoods Initiative. I obtained your contact information from [Staff name of lead agency], who thought you would provide valuable insights for the study. The interview should take approximately 30-minutes to one hour depending on how much information you would like to share.

Participation in this study is completely voluntary and your decision to participate, or not participate, will not affect your organization's services or role in the Choice Neighborhoods Initiative. If you decide to participate, your responses will remain confidential and you may decline to answer any questions.

If you would like to participate or have any questions about the study, please contact me at <u>andrewfoell@wustl.edu</u>. Thank you very much for your consideration of this research study.

Sincerely, Andrew Foell, MSW, MPP (pronouns: he/him/his) PhD Student Brown School Washington University in St. Louis Campus Box 1196 One Brookings Drive St. Louis, MO 63130 [e] andrewfoell@wustl.edu [w] https://sites.wustl.edu/afoell/

Choice Neighborhoods Initiative Partner Interview Guide

Date of Interview:	
Name of Partner:	
Name of Organization and Position:	

Introduction

Thank you for agreeing to participate in this interview. We are interviewing you because of your experience as a partner organization in the Choice Neighborhoods Initiative (CNI) in Memphis, TN. We are interested in your perspective on the barriers and facilitators to collaboration and implementation of the Choice Neighborhoods Initiative in Memphis, TN. We are interested in your own experiences and there are no right or wrong answers to any of our questions.

Participation in this study is completely voluntary and your decision to participate, or not participate, will not affect your organization's services or role in the Choice Neighborhood Initiative. The interview should take approximately one hour depending on how much information you would like to share.

With your permission, I would like to audio/video record the interview because I don't want to miss any of your comments. All responses will be kept confidential. This means that your interview responses will be de-identified and your interview responses will only be shared with research team members. We will ensure that any information we include in our reports does not identify you as the respondent. You may decline to answer any question or stop the interview at any time and for any reason.

Are there any questions about what I have just explained?

*Ask for verbal consent: Verbal consent was obtained/not obtained from participant

May I turn on the digital recorder?

*Please note that this interview guide only represents the main questions to be discussed with the participants and as such does not include the various prompts that may also be used (examples given for each question). Non-leading and general prompts will also be used, such as "Can you please tell me a little bit more about that?" and "What does that look like for you".

Interview Questions

Rapport Building and Stakeholder Role

- 1. Before we begin, could you tell me a little bit about yourself and your role with [ORGANIZATION NAME]. Please introduce yourself and tell me a little about your work and responsibilities within [OGANIZATION NAME].
- 2. When did you start at [ORGANIZATION NAME]?
 - a. Probe 1: Did you work with this organization prior to the CNI?
 - b. Probe 2: If yes, what have been the most noticeable changes to your work since the CNI began?

Stakeholder Role in the Choice Neighborhoods Initiative (CNI)

- 3. Can you tell me a little about your role in the CNI?
 - a. Probe 1: What are your organization's main tasks/objectives within the CNI? Have these changed over time? If so, how?
- 4. What are the biggest challenges to your work with the CNI?
 - a. Probe 1: What constraints have you experienced while working with the CNI?
 - b. Probe 2: What are some strategies you have used to overcome these challenges?
- 5. What are some of the benefits that your organization has experienced as a CNI partner?

CNI Collaboration and Implementation

- 6. Next, I'd like to ask about CNI implementation and collaboration. Could you tell me about how the CNI lead organization(s) has built relationships with implementation partners?
 - a. Probe 1: What formal or informal mechanisms (policies or practices) are in place to facilitate communication between partners?
 - b. Probe 2: How would you describe the relationship between CNI leadership and CNI partner organizations? What is the role of the CNI lead organization(s)?
 - 7. Based on your experiences with the network, how has collaboration evolved over time? Have there been any noticeable changes in the way partners work together?
 - a. Probe 1: Have new partners been added to the network? Has progress been made in developing stronger relationships between partners?
- 8. From your perspective, who/what organizations are the most central or important partners for doing your work?
 - b. Probe 1: Are these organizations part of the CNI implementation team?
 - c. Probe 2: Are there any CNI partners that have access to resources that are integral to your work? Are there partners that have access to resources outside the network that are integral to the CNI?

CNI Outcomes and Achievements

- 9. Could you indicate some of the major outcomes and achievements of the CNI network that stand out for you?
 - a. Probe 1: What are some of the biggest achievements of the CNI to date?
- 10. What factors, mechanisms or strategies has the network used to achieve these outcomes?
- 11. What are the biggest strengths of the CNI in terms of collaboration?
- 12. What are the biggest challenges or barriers to collaboration that could be improved to improve collaboration?

Conclusion

- 13. Are there other people you think I should talk to in order to better understand collaboration and implementation of the CNI?
- 14. Are there other details about the CNI network that you'd like to share that would be beneficial in understanding collaboration or network effectiveness?
- 15. Anything else that you would like to comment on that I have not asked you about?

Thank you very much for your time today. If you have any follow up questions, please feel free to contact me at <u>andrewfoell@wustl.edu</u>.

Chapter 4: Partnership Network Structure in the Choice Neighborhoods Initiative (CNI)

4.1. Abstract

Objective: Cross-sector partnerships are increasingly called upon to address the complex social and economic problems faced by families living in low-income, high poverty neighborhoods. There has been limited scholarly attention exploring these networks, their structural properties, and implications for program and service delivery within housing and community development initiatives.

Method: This study examined cross-sector partnerships among key partner organizations (n=32) within the South City Choice Neighborhoods Initiative (CNI) in Memphis, Tennessee. Organizational staff completed a social network survey which included questions about their existing partnerships and collaboration with other agencies. Exploratory social network analysis (SNA) was utilized to visualize and describe the partnership network.

Results: The South City CNI represented a relatively dense and moderately centralized network in terms of communication (density=0.28), collaboration (density=0.36), and trust (density=0.35). Three partner organizations emerged as central for coordinating information and resources across the network, but their positionality changed across each network.

Conclusions: Findings suggest that the South City CNI partner network is dense and moderately centralized, which may provide a structure that balances network connectivity with efficient information and resource distribution to coordinating initiative implementation. Understanding cross-sector partnerships and relational structures of housing and community development initiatives can aid researchers and practitioners in developing strategies for organizing effective service delivery systems.

4.2. Introduction

Cross-sector partnerships are increasingly called upon to address complex public problems that extend beyond the capacity of individual, single-sector organizations. A consistent finding across housing and community development research is the importance of collaborative partnerships to implement complex, multilevel interventions and achieve program goals (Fraser & Kick, 2007; D. M. Greenberg et al., 2017; Quiroz Becerra et al., 2019; M. J. Rich & Stoker, 2014). Additionally, cross-sector partnerships are essential for supporting sustained improvement in outcomes for people with complex socioeconomic and health-related needs (Brewster et al., 2019). Thus, research on cross-sector partnerships has largely evolved from whether cross-sector partnerships are needed to address complex social, economic, and environmental problems, to how cross-sector partnerships should be organized, structured, governed, and expanded (van Tulder et al., 2016).

Despite recognition of the need for cross-sector collaboration to solve complex problems, there is a dearth of literature on collaboration dynamics within mixed-income housing and community development interventions (Joseph et al., 2019). These interventions include multiple goals toward people, housing, and neighborhood transformation within low-income public housing communities, and involve partners in the public, private, and nonprofit sectors that work together to deliver a variety of programs and services within a geographically defined area. Within such initiatives, there is variability in the goals and capacity of partner organizations that challenge collaborative efforts (Oakley et al., 2015; Popkin, Katz, et al., 2004; Turbov & Piper, 2013). The structure of collaborative relationships that emerges from such partnerships may also differ, which is important for understanding the extent to which interventions may be effectively implemented and programs and services delivered efficiently (Provan & Milward, 2001).

However, the unique structure of collaboration generated through mixed-income development strategies is underdeveloped in the literature, and the utilization of formal methods for quantifying collaborative networks among community-level interventions is minimal (Feinberg et al., 2005; Korn et al., 2018; McGlashan et al., 2018).

In this study I explored cross-sector partnerships and collaboration network structure in the South City Choice Neighborhoods Initiative (CNI) in Memphis, TN. Using social network analysis (SNA), I sought to better understand the structure of collaborative relationships between partner organizations within a complex, multicomponent housing and community development initiative. The CNI provides services to low-income public housing families, engages in housing demolition and redevelopment, and makes substantial neighborhood investments in areas surrounding the redeveloped housing site. Network analysis is a beneficial yet underutilized technique that may be helpful to cross-sector partnerships working to address a wide range of social issues and community problems by providing insights on the existing nature of organizational collaboration that may facilitate or limit the achievement of collaborative goals and objectives (Provan et al., 2004, 2005).

4.3. Background

4.3.1. Cross-Sector Partnerships and Collaboration Networks

Cross-sector partnerships include multiple organizations within the public, private, and nonprofit sectors that agree to jointly work together to address mutual concerns and common goals and objectives (Bryson & Crosby, 2006, 2015). Organizations engaged in cross-sector partnerships share resources, co-sponsor activities, and leverage different organizational strengths and capabilities to achieve outcomes unachievable by organizations working apart from one another (Bryson & Crosby, 2015). These partnerships are increasingly called upon to deliver complex, multicomponent housing and community development initiatives that target the redevelopment of distressed public housing, provide programs and services to low-income families, and implement a variety of community-level programs to advance resident health and safety within low-income communities (Joseph et al., 2019). As a result, cross-sector partnerships create networks of relationships across organizations. These relationships are important for understanding how resources may be distributed and mobilized for collective action to achieve common organizational and network goals.

The literature suggests that there are many dimensions upon which cross-sector partnerships vary (Brewster et al., 2019). These factors include what types of organizations are involved, how organizations work together, the extent of connections across organizations, and the positionality of organizations within partnership networks (Brewster et al., 2019; Provan & Kenis, 2008). Literature also suggests that organizations that enter cross-sector partnerships have varying levels of capacity to effectively engage in collaborative relationships (Foster-Fishman et al., 2001; Goodman et al., 1998). These differences are consequential for the ability of organizations to collaborate to deliver programs and services, address community concerns, and achieve collective goals and objectives (Brown et al., 2012; Igalla et al., 2020; Provan & Milward, 2001; J. G. Smith, 2020). Additionally, whether cross-sector partners view their joint work as effective – what some scholars refer to as *network effectiveness* or *network performance* – is important for understanding the extent to which certain network structures facilitate effective and efficient service delivery systems (Igalla et al., 2020; Provan & Kenis, 2008; Provan & Milward, 2001).

4.3.2. Collaboration Networks in Mixed-Income Community Development

Mixed-income development initiatives target the redevelopment of distressed public housing into mixed-income communities. These strategies are exemplified in the federal Housing Opportunities for People Everywhere (HOPE VI) program and contemporary efforts through the Choice Neighborhoods Initiative (CNI). These federal programs target distressed public housing for redevelopment into mixed-income housing, provide a variety of programs and services to low-income families, and invest in community improvement projects designed to revitalize entire neighborhoods. As such, mixed-income development initiatives require extensive partnerships between organizations in the public, nonprofit, and private sectors.

Studies on partnership development and collaboration within mixed-income development initiatives are limited (Joseph et al., 2019). Existing studies provide qualitative evidence on differences in organizations involved, partnership structures, and lessons learned across implementation sites (Comrie, 2018; The Urban Institute, 2013; Urban Institute & MDRC, 2015). In a study of two HOPE VI sites, Comrie (2018) found that forging strong partnerships between community organizations, local housing authorities, and public schools was essential for coordinating effective education programming to benefit low-income children and families. This suggests that the composition of partnership networks may matter for the achievement of partnership goals and program outcomes. Additionally, case studies of the first five CNI implementation grantees suggested substantial variation in leadership structures, coordination activities, and relational dynamics across CNI sites. For example, initiatives were led by local public housing authorities, city governments, and entities in the private sector. Additionally, CNI partners were highly connected and collectively governed at some implementation sites, whereas others were loosely connected and more centralized (The Urban Institute, 2013). Despite this

notable literature, no studies have attempted to empirically document and explore cross-sector partnerships within mixed-income development initiatives generally, or the CNI specifically.

4.3.3. The South City Choice Neighborhoods Initiative (CNI)

This study examined collaboration among organizations involved in the South City CNI in Memphis, TN. The South City CNI represents a grantee in later stages of implementation, having received a \$250,000-dollar CNI Planning Grant in 2010, and a \$30-million-dollar CNI Implementation Grant in 2015. The Memphis Housing Authority (MHA) serves as the lead applicant for the Implementation Grant and the City of Memphis serves as the co-lead applicant (U.S. Department of Housing and Urban Development, 2015b, 2015a). In addition to the lead and co-lead applicants, there are lead agencies for each of the three strategy areas for the grant which include people, housing, and neighborhood strategies. The people strategy area is led by Urban Strategies, a national nonprofit organization that provides supportive services to low-income families in public housing. The housing strategy area is led by a private development company, McCormack Baron Salazar, a national affordable housing development firm. The neighborhood strategy area is led by the City of Memphis Division of Housing and Community Development.

The South City CNI focuses revitalization efforts on Foote Homes, a 420-unit public housing complex and the last remaining traditional public housing site in the city. The South City Transformation Plan, a plan that guides initiative implementation, includes plans for the redevelopment of Foote Homes and the surrounding neighborhood to include 712 mixed-income units, 600 of which will be constructed at the original site. The additional 112 units will be constructed offsite, and an additional 87 project-based vouchers (PBVS) will be reserved for use in the surrounding neighborhood for Foote Homes residents during family relocation. The plan

also includes the provision of supportive services for families and critical community improvements in the neighborhood. The redevelopment plan includes six phases, including 4 phases onsite, an onsite senior building (Phase 5), and offsite housing development in the neighborhood (Phase 6).

The South City CNI was purposively chosen for this study based on partner consultation, local context, and data availability to answer the dissertation research questions. South City CNI partners have relocated all CNI families from Foote Homes, the site targeted for redevelopment, and have made substantial progress on proposed development phases. Additionally, while the South City CNI has experienced challenges, the initiative represents an effective, high functioning partnership model according to local partners (Jones & Bradley, 2021).

4.4. Theoretical Framework

This paper draws from social network theory to understand the extent to which partners work together to implement programs and services in the CNI. Network theory refers to the processes and mechanisms that interact with network structures to yield outcomes for individuals and groups (Borgatti & Halgin, 2011). Network theory is concerned with the consequences of network variables such as having many ties (e.g., density), and occupying central network positions (e.g., centrality) and how these characteristics influence how network resources are accessed by members to address mutual concerns (Borgatti & Halgin, 2011). Thus, network theory suggests that the pattern of relational connections, or ties, yields a particular network structure, and actors, or nodes, occupy certain positions within that structure that are consequential for how resources are distributed and accessed by network members (Borgatti & Halgin, 2011). Social network theory suggests that the structure of collaborative relationships, which includes organizations and their patterns of interactions, and network processes, or the

nature of relationships among and between organizational actors, are important for understanding the extent to which information and resources can be mobilized or flow through the network to achieve collective goals and objectives. Thus, structure and process aspects of collaborative partnerships are important determinants of what partners can accomplish by working together (Borgatti & Halgin, 2011).

Network theory and empirical literature examining collaboration networks has also identified structural characteristics of networks that may facilitate effective collaboration. This literature suggests that the network structure of collaborative relationships falls on a continuum between highly dense versus highly centralized networks. Dense networks are those where all or most network members are connected to each other and jointly share decision-making and coordinating responsibilities (Provan & Kenis, 2008). At the other end of the spectrum are highly centralized networks where one organization holds decision-making power and coordination responsibilities. In the middle of this density-centralization continuum are networks where a small group of network members may jointly coordinate network activities and have shared decision-making power (Provan & Kenis, 2008).

Research suggests that network density, or the extent to which partners are highly connected throughout a network, is positively associated with the ability to complete tasks and collaborate effectively in coalitions (Feinberg et al., 2005). Dense networks can more freely share information and coordinate actions across members and are resistant to external shocks and network disruptions that may challenge collective action (Marwell et al., 1988). Dense networks also facilitate trust-building through the sanctioning process (Burt, 2000). Dense networks with close ties where many partners make up the core collaboration network may also be better equipped to pursue community change strategies and community-level interventions (Feinberg et

al., 2005). Dense networks also enhance partner commitments and reduce collective action problems like accumulating benefits without making fair contributions (e.g., free riding) and neglecting responsibilities to the detriment of the network (e.g., shirking) (Feiock, 2013).

However, dense collaboration networks may be inefficient in certain contexts, particularly those that involve heterogenous actors and immense amounts of coordination. In such contexts, more centralized network structures may be preferred wherein a small number of trusted and well-connected members coordinate between members that have limited direct contact with one another by bridging resources and coordinating action (Marwell et al., 1988; Provan & Kenis, 2008). These well-connected organizations that can leverage relationships with powerful network members may be particularly effective at achieving program goals due to their unique ability to galvanize support and mobilize organizational actors (Chaskin & Greenberg, 2015). Indeed, research on cross-sector partnerships have identified the presence of bridging organizations that convene and manage partner relationships as essential to effective collaboration (Selsky & Parker, 2005). Yet, highly centralized networks may struggle to navigate environments that exhibit unpredictability and rapid change (Gilchrist, 2019).

Literature also suggests that different network structures may emerge based on differences in the local context of collaboration, including the unique goals and objectives of the initiative. For example, Provan and Kenis (2008) suggest that trust, goal consensus, and network size are key determinants of network structure. Specifically, in contexts where trust and goal consensus are high, dense networks are likely to form among a small group of partners. However, as network size increases, trust may become less distributed across all network members, goal consensus is likely to decline, and the need for more centralized network structure may be required to effectively coordinate network activities (Provan & Kenis, 2008).

Based on this literature, it is likely that partner relationships and the structure of collaboration differ across CNI sites in ways that impact intervention implementation and the extent to which partners may effectively collaborate to achieve initiative goals and objectives. However, these dynamics have not been explored in the context of the CNI. Thus, the structure of collaboration in the CNI remains unknown, as does the extent to which certain network structures may be preferential (e.g., dense versus centralized) for implementing mixed-income development interventions. To address these gaps in knowledge, this study examined CNI partnerships and collaboration from a network perspective using social network analysis.

4.5. Study Purpose and Research Questions

The available literature suggests that the CNI may provide a unique policy context that influences the structure of relationships between collaborative partners. Yet, examining the structure of partner relationships in collaboration networks within housing and community development interventions has received little scholarly attention. To address these gaps in knowledge, the purpose of this study was to examine the South City CNI partner network from a network perspective. Thus, this study addressed the following research questions: 1) What is the structure of interorganizational relationships within the South City CNI partner network in terms of communication, collaboration, and trust?, 2) To what extent is the structure of interorganizational relationships similar and different in terms of communication, collaboration, and trust?

Given the unique context of the CNI, which includes a lead and co-lead grantee structure along with lead agencies within distinct people, housing, and neighborhood strategy areas, it was expected that the CNI partner network would be highly centralized such that MHA and the City

of Memphis would be the most central and influential actors in the network. Additionally, lead agencies within each strategy area were expected to be central actors that were connected to each other and connected to MHA and the City of Memphis. These lead agencies were also expected to be highly connected to partners within their respective strategy areas and were expected to facilitate communication to other organizations partnering within each strategy area. It was also anticipated that there would be relatively few connections across strategy areas within the network.

4.6. Methods

4.6.1. Participants

Participants for this study included staff members at community-based organizations, government entities, and private agencies that collaborated to implement a variety of programs and services in the South City CNI in Memphis, TN (n=32). Organization staff were eligible to participate if they: 1) were over 18 years of age, 2) spoke English, and 3) were identified as knowledgeable about CNI activities by the lead organization for the South City CNI, MHA, and the lead people-strategy partner, Urban Strategies.

Relational strategies were utilized to specify the boundaries of the South City CNI partnership network (Knoke & Song, 2020). An initial list of key partner organizations was developed based on the South City CNI website, as well as a review of publicly available administrative documents, including the South City CNI Transformation Plan and U.S. Department of Housing and Urban Development Grantee Summaries. Next, a staff member at MHA, the lead grantee for the South City CNI, was informed of the study and asked to participate in an initial conversation to discuss the purpose, goals, and objectives of the study. Following the conversation, MHA staff were provided the initial list of CNI partner

organizations to review for inclusion in the study and were asked to provide the names and contact information of additional CNI partners who should be included but did not appear on the initial list (Doreian & Woodard, 1992; Knoke & Song, 2020; Krauss et al., 2004). The use of organizational staff as respondents on behalf of organizations is a common and acceptable practice in social network research (Brewster et al., 2019; Feinberg et al., 2005; Luke et al., 2010; Provan & Milward, 1995).

4.6.2. Procedures

A social network survey was developed to assess organizational collaboration and collaboration capacity among South City CNI partner organizations. A total of 32 organizations were identified as South City CNI partners and a knowledgeable staff member at each organization was invited to participate in the online survey. The network survey and implementation procedures adhered to best practices in network research (Borgatti & Molina, 2005). Staff at MHA pilot tested the initial survey and provided recommendations for minor revisions to question wording prior to implementation. The final survey was sent to MHA for approval before distributing it to the partner list. Next, participants were informed of the study and invited via email to participant in the online survey via Qualtrics.

Modified fixed-list sampling procedures guided survey distribution and data collection efforts (Doreian & Woodard, 1992; Krauss et al., 2004). Distribution started with the initial key partner list approved by MHA. Participants were invited to complete the survey and were given the option to identify additional partners missing from the initial list (Doreian & Woodard, 1992; Knoke & Song, 2020). Additional collaborative partners were invited to participate in the survey if they were nominated by two or more CNI partners (Doreian & Woodard, 1992). Three respondents nominated five additional partners that did not appear on the original roster.

However, each nominated organization was not identified as a partner by more than one respondent. Therefore, the nominated organizations were not added to the list or invited to participate in the study. Weekly email reminders were sent to participants to encourage participation. After three recruitment attempts via email, the lead agency was consulted to encourage participation. Participants were offered the opportunity to opt-in to a raffle for a \$100 visa gift card as compensation for their participation. Data collection occurred between December 2021 and March 2022. All study procedures were approved by the Washington University in St. Louis Institutional Review Board (IRB# 202102034). Study materials appear in the Chapter 4 Appendix.

4.6.3. Measures

Interorganizational Collaboration. Network data come from three questions that assessed organizational collaboration in terms of: 1) general collaboration, 2) communication, and 3) trust. One multiple response question was used to identify all organizations that respondents partnered with within the last 12 months. Collaboration was defined as sharing information, providing contracted services, making client referrals, co-sponsoring activities, and conducting community assessments. Responses to this question also determined the list of partners that appeared in subsequent collaboration questions. The following question was used to assess communication: How often does your organization have contact (such as meetings, phone calls, or e-mails) with the following organizations? Response options included yearly (1), quarterly (2), monthly (3), and weekly (4) contact (Krauss et al., 2004; Lee et al., 2012). For analysis, communication was dichotomized into having contact quarterly or more (1) and having no contact or only yearly contact (0). This coding minimized the number of null dyads in the network which could cause analytic challenges (Lee et al., 2012). One evaluative network

question was utilized to assess partner trust and included the following item: I trust members of this organization to fulfill their roles and responsibilities in the CNI? Response options ranged from very untrustworthy (1) to very trustworthy (5). For analysis, partner trust was dichotomized into somewhat or very trustworthy (1) and neither trustworthy nor untrustworthy, somewhat untrustworthy, or very untrustworthy (0). This dichotomization was chosen because it was conceptualized that responses of somewhat trustworthy and very trustworthy were indicative of a positive, trusting relationship. Similar approaches have been utilized in other network studies to indicate close partner relationships (McGlashan et al., 2018).

Respondent and Organization Characteristics. Respondent characteristics were collected for descriptive purposes and included participant's current job or position title, gender identity, and racial/ethnic identity. Organization characteristics included organization sector (e.g., government, nonprofit, for-profit, other), primary area of work in the CNI (e.g., people, housing, neighborhood), what year the organization became involved with the CNI, and whether the organization participated in the CNI Planning Grant process prior to engagement with the CNI Implementation Grant.

4.6.4. Data Analysis Plan

Exploratory social network analysis was utilized to describe and visualize the South City CNI partnership network. Common network measures were utilized to describe the South City CNI network and the centrality of organizations within the network. At the network level, these measures included network size, density, components, diameter, and clustering. These measures represent common metrics to describe network structure (Luke, 2015). Network size represents a count of the number of nodes in a network. Network density, a measure of observed collaboration ties relative to maximum possible ties, was utilized to describe the structure of

collaboration in the whole network (Luke, 2015). Network density ranges from 0 meaning no partners are connected to one another, to 1 meaning that all partners are connected to every partner in the network. Thus, network density represents a measure of network interconnectivity (Luke, 2015). Highly dense networks are indicative of shared governance structures where all network members routinely share information and work together to make decisions, whereas networks with lower densities indicate more centralized network structure where activities may be coordinated by one or a small number of key organizations (Provan & Kenis, 2008). These centralized networks may indicate brokered forms of governance where one or a few network members have decision making authority and power within the network.

Networks may also have one or many components, which are groups and subgroups within a network. Networks with one component indicate that all members of the network are directly or indirectly connected to one another, whereas networks with two or more components indicates distinct member groups where members are connected to one another but disconnected from members in other components. Network diameter is a general measure of how compact a network is based on the longest of the shortest paths required to get information or resources from one actor to another. Thus, network diameter can be thought of as the worst-case-scenario for sending information and resources across a network (Luke, 2015). Clustering represents the number of closed triangles, or triads, within a network. Triads are groups of three nodes that are all connected to one another, and clustering is a general measure of triads relative to the total possible number of open and closed triads in a network (Knoke & Song, 2020; Luke, 2015).

In addition to measures of overall network structure, four node- or actor-level centrality measures were assessed to understand CNI partner centrality within the collaboration network: 1) degree, 2) betweenness, 3) closeness, and 4) eigenvector centrality. These are common metrics

utilized to describe network actors. Degree centrality represents a count of the number of ties each actor has within a network. Thus, degree centrality indicates how connected and visible an actor is within a network. Betweenness centrality is calculated as the percentage of shortest paths that pass through the node. Thus, betweenness centrality measures the extent to which a node is situated between pairs of nodes in a network (Luke, 2015) and indicates how influential an actor is for bridging information and resources within a network. Closeness centrality is a measure of how close an actor is to all other actors in the network. Thus, nodes that are closer to all other nodes in the network represent more prominent actors in the network. Eigenvector centrality is a measure of how well connected nodes are to other nodes who themselves are well-connected. Thus, eigenvector centrality is a general measure of influence within a network (Knoke & Song, 2020). Together, these measures were utilized to identify key partners in the South City CNI that may be important for understanding how information and resources flowed through the collaboration network.

Data visualization and analysis occurred in Gephi version 0.9.2. For analytic purposes, the South City CNI was treated as an undirected network and all relational ties were considered bidirectional. Missing relational data (e.g., ties) due to survey nonresponse were handled using simple imputation methods based on observed relational ties of survey respondents (Huisman, 2014). This approach resulted in 100% coverage of the South City CNI partnership network. For graph visualizations, missing data for organizational characteristics (e.g., organization type) of nonrespondents were entered by the author based on publicly available information about the organization. All other data for nonrespondents were treated as missing. Each network was visualized using the Fruchterman-Reingold layout algorithm. The Fruchterman-Reingold algorithm is force-directed and treats edges like springs to situate nodes that are closer and more

connected towards the center of the network and situates nodes that are less connected towards the outer edges of each network graph.

4.7. Results

4.7.1. Sample Characteristics

A total of 19 respondents, each representing different organizations, completed the survey representing a 59% survey response rate. Sample descriptive statistics appear in Table 4.1. Respondents indicated that their organizations represented the following agency types: governmental (n=4; 21%), nonprofit (n=11; 58%), private (n=2; 11%), and other organization type (n=2; 11%). Most respondents indicated that their organization worked in the people strategy area (n=12; 63%), with fewer respondents working in the housing strategy area (n=3; 16%), neighborhood strategy area (n=1; 5%), or across multiple strategy areas (n=3; 16%).

On average, respondents indicated that their organization had been involved with South City CNI efforts for about 7 years (M=6.47, SD=3.10), and initial engagement occurred between 2010 and 2019. Just over a third of respondents indicated that their organization had participated in the CNI Planning Grant process (n=7; 37%), while a smaller percentage indicated they had not participated (n=6; 32%) or did not know (n=5; 26%). The majority of respondents identified as women (n=13; 68%) and just under half identified as African American or Black (n=9; 42%). Many respondents were at the executive levels of their respective organizations (n=8, 42%) and represented executive directors, chief executive officers, or agency presidents and vice presidents. Additionally, about 32% (n=6) of respondents were project managers or program directors at their respective organizations.

Table 4.1

South City Choice Neighborhoods Initiative (CNI) Respondent and Organization Characteristics

	n	%
Organization Characteristics		
Organization Type		
Governmental	4	21%
Nonprofit	11	58%
Private	2	11%
Other	2	11%
Strategy Area		
People	12	63%
Housing	3	16%
Neighborhood	1	5%
Multiple Areas	3	16%
Participated in CNI Planning		
Yes	7	37%
No	6	32%
I don't know	5	26%
Missing	1	5%
6	М	SD
Years Involved	6.47	3.10
Respondent Characteristics	n	%
Race		
African American or Black	8	42%
White or Caucasian	6	32%
Two or more identities	1	5%
Missing	4	21%
Gender Identity		
Woman	13	68%
Man	2	11%
Missing	4	21%
Job Title	-	,
Executive	8	42%
Project Manager or Program Director	6	32%
Other	-	
	1	5%

4.7.2. South City Choice Neighborhoods Initiative (CNI) Communication Network

The South City CNI communication network appears as Figure 4.1. The communication network represents all partners that had contact at least quarterly or more with other CNI partners. In the figures, nodes (e.g., organizations) are represented by circles and edges (e.g.,

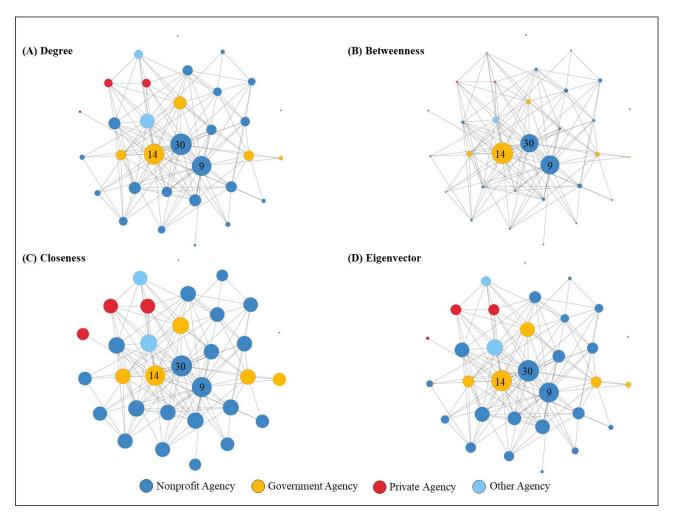
relationships) are indicated by lines between nodes. Nodes are colored by organization type indicating what sector the organization represented.

The communication network consisted of 32 nodes and 139 edges, resulting in a network density of 0.28. This suggests that in terms of communication, roughly 28% of actual ties are realized in the South City CNI. The communication network included two isolates, or organizations that were not connected to any other organization in terms of communication. This resulted in 3 network components that were not connected to one another. Diameter of the communication network was 3.0, meaning that approximately three steps were required to communicate information across the network. Clustering was high in the communication network as indicated by an average clustering coefficient of 0.60, meaning that organizations were likely to have communication ties with organizations that communicated with each other.

In Panel A of Figure 4.1, nodes are sized by degree centrality which represents the number of ties each organization has with other organizations in the network. In the communication network, degree centrality ranged from 0 to 23, with partners having approximately nine communication ties with other CNI partner organizations (M=8.69, SD=5.78). In the figure, larger nodes indicate organizations that have more collaborative relationships in the network. In Panel B of Figure 4.1, nodes are sized by betweenness centrality which represents a count of the number of shortest paths between two other nodes that pass through the node. Thus, higher betweenness centrality scores represent organizations that have more influence and may act as bridges or brokers of information and resources within the network. Betweenness centrality for the communication network ranged from 0 to 72 with a mean betweenness centrality score of 10.03, SD=18.43.

In Panel C of Figure 4.1, nodes are sized by closeness centrality with larger nodes indicating that the actor is closer to all other nodes in the network. Closeness centrality for the communication network ranged from 0 to 0.83 (M=0.55, SD=0.17). In Panel D, nodes are sized by eigenvector centrality with larger nodes indicating actors who are connected to other actors who are well-connected in the network. Eigenvector centrality ranged from 0 to 1 (M= 0.45, SD = 0.26). Visualizations of the communication network revealed that MHA (Organization #14) and Urban Strategies (Organization #30) were central organizations in terms of communication. Additionally, visualizations highlighted the centrality of a community-based nonprofit organization (Organization #9) that occupied a central position within the network. This particular organizations who had been involved in the CNI Planning Grant process.

Figure 4.1



South City Choice Neighborhoods Initiative (CNI) Communication Network

Note. Memphis Housing Authority (MHA) = 14, Urban Strategies = 30, Community-Based Organization = 9. All nodes sized by centrality measures: degree (Panel A), betweenness (Panel B), closeness (Panel C), and eigenvector (Panel D). Ties between two organizations represent quarterly or more frequent contact (e.g., monthly, weekly). Graphs visualized using the Fruchterman-Reingold layout algorithm using Gephi Version 0.9.2.

4.7.3. South City Choice Neighborhoods Initiative (CNI) Collaboration Network

The South City CNI collaboration network consisted of 32 nodes and 180 edges resulting

in a moderate network density of 0.36 (Figure 4.2). This suggests that about 36% of possible

collaborative relationships exist within the South City CNI. The South City CNI collaboration

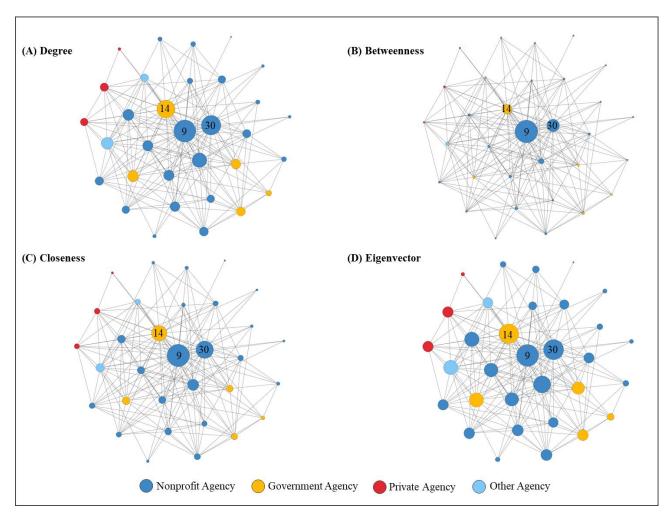
network was comprised of one component, meaning that all members of the network were

directly or indirectly connected to one another. Diameter of the collaboration network was 2.0,

indicating a compact network where information and resources took approximately two steps to get from any one organization to another. The collaboration network also exhibited high levels of clustering with a clustering coefficient of 0.71.

In the collaboration network, degree centrality ranged from 1 to 31, with CNI partners collaborating with an average of 11 other partner organizations (M=11.25, SD=6.88). Betweenness centrality in the collaboration network ranged from 0 to 116 with a mean betweenness centrality score of 9.88, SD=23.00. Closeness centrality ranged from 0.51 to 1 (M=0.62, SD=0.11). Eigenvector centrality ranged from 0.07 to 1 (M=0.48 SD=0.22). Visualization of the South City CNI collaboration network revealed that the network was moderately dense and included several key organizations that were central and more visible in the network, potentially acting as brokers of information and resources. Like the communication network, MHA (Organization #14), Urban Strategies (Organization #30), and the community-based nonprofit organization (Organization #9) were all well connected and central in the collaboration network.

Figure 4.2



South City Choice Neighborhoods Initiative (CNI) Collaboration Network

Note. Memphis Housing Authority (MHA) = 14, Urban Strategies = 30, Community-Based Organization = 9. All nodes sized by centrality measures: degree (Panel A), betweenness (Panel B), closeness (Panel C), and eigenvector (Panel D). Ties between two organizations represent that organizations had collaborated within the past 12 months. Graphs visualized using the Fruchterman-Reingold layout algorithm using Gephi Version 0.9.2.

4.7.4. South City Choice Neighborhoods Initiative (CNI) Trust Network

The South City CNI trust network appears as Figure 4.3. In this network, ties existed

between organizations if respondents indicated that a somewhat or very trustworthy relationship

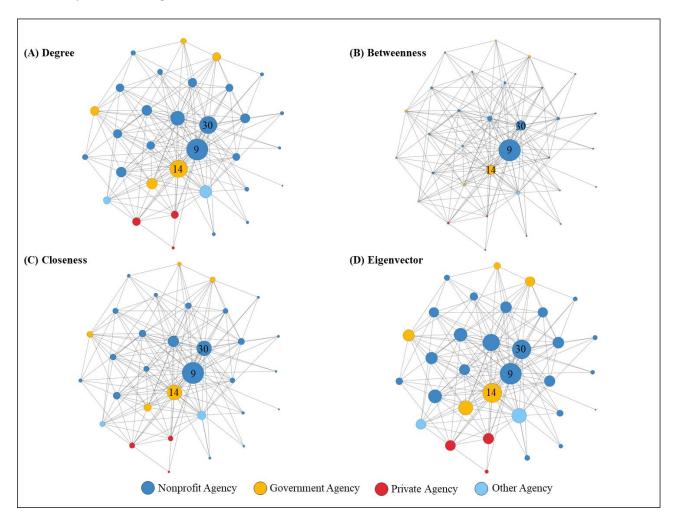
existed with other partner organizations. The South City CNI trust network consisted of 32

organizations and 174 edges, resulting in a network density of 0.35. Like the collaboration

network, the trust network included one component where all members were connected.

Diameter of the trust network was 2.0 and clustering remained high at 0.72 indicating a compact network of trusting relationships. In the trust network, degree centrality ranged from 1 to 31. On average, organizations reported approximately 11 trusting relationships with other CNI partners (M=10.86, SD=6.85). Betweenness centrality for the trust network ranged from 0 to 124, with an average betweenness centrality score of 10 (M=10.06, SD=23.89). Closeness centrality for the trust network ranged from 0.51 to 1 (M=0.62, SD=0.10). Eigenvector centrality ranged from 0.07 to 1 (M=0.47, SD=0.22). Again, MHA, Urban Strategies, and the community-based nonprofit organization remained central in the trust network.

Figure 4.3



Note. Memphis Housing Authority (MHA) = 14, Urban Strategies = 30, Community-Based Organization = 9. All nodes sized by centrality measures: degree (Panel A), betweenness (Panel B), closeness (Panel C), and eigenvector (Panel D). Ties between two organizations represent that organizations had a somewhat or very trustworthy relationship. Graphs visualized using the Fruchterman-Reingold layout algorithm using Gephi Version 0.9.2.

4.7.5. Comparing South City Choice Neighborhoods Initiative (CNI) Networks

Descriptive statistics for the South City CNI communication, collaboration, and trust networks appear as Table 4.2. A few notable similarities and differences exist when comparing each network. In terms of differences, the South City CNI collaboration and trust networks are slightly denser than the communication network. Thus, the collaboration and trust networks appear to be more interconnected compared to the communication network. This suggests that communication tends to be more centralized compared to trust and collaboration within the South City CNI. Additionally, there are a few organizational isolates in the communication network, or organizations that have no ties to other partners in the network. This suggests that at least in terms of communication on a quarterly or more basis, there may be a small number of organizations within the South City CNI that are disconnected from the network.

Table 4.2

Descriptive Statistics for the South City Choice Neighborhoods Initiative (CNI) Communication,

	Communication	Collaboration	Trust
Network Level			
Nodes (Size)	32	32	32
Edges	139	180	174
Components	3	1	1
Density	0.28	0.36	0.35
Diameter	3	2	2
Clustering	0.60	0.71	0.72
Node Level	M(SD)	M(SD)	M(SD)
Degree Centrality	8.69 (5.78)	11.25 (6.88)	10.86 (6.85)
Betweenness Centrality	10.03 (18.43)	9.88 (23.00)	10.06 (23.89)
Closeness Centrality	0.55 (0.17)	0.62 (0.11)	0.62 (0.10)
Eigenvector Centrality	0.45 (0.26)	0.48 (0.22)	0.47 (0.22)

Note. Descriptive statistics calculated based on undirected network graphs with isolates included.

In terms of similarities, the communication, collaboration, and trust networks all consist

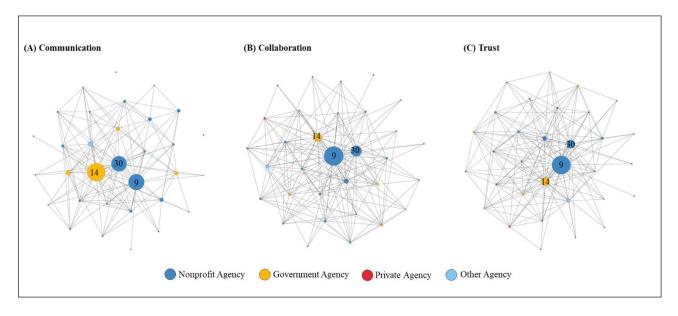
of a small number of partner organizations that are more central within the networks.

Additionally, these key organizations are the same agencies in each network, but their centrality

or positionality changes dependent upon the type of relationship examined. This becomes

apparent when examining each network side-by-side (Figure 4.4).

Figure 4.4



Bridging Organizations in the South City Choice Neighborhoods Initiative (CNI)

Note. Memphis Housing Authority (MHA) = 14, Urban Strategies = 30, Community-Based Organization = 9. All nodes sized by betweenness centrality and colored by sector for communication (Panel A), collaboration (Panel B), and trust (Panel C). Graphs visualized using the Fruchterman-Reingold layout algorithm using Gephi Version 0.9.2.

Unsurprisingly, one key organization is MHA, the lead coordinating agency for the South City CNI. While MHA occupies a central position across all networks, they are more central in the communication network in terms of brokerage. Urban Strategies, the lead people strategies partner, also occupies a central position within each network, but appears to play a much more central bridging role for communication compared to collaboration or trust. A third organization also appears prominent in each network and represents a community-based nonprofit organization. This nonprofit organization occupies the most central position within the collaboration and trust networks and remains central, but less prominent in the communication network. This suggests potential shifts in organizational roles in the South City CNI which is dependent upon the type of partner relationship examined. Node level centrality measures for each network appear in the Chapter 4 Appendix (Tables 4.3, 4.4, and 4.5).

4.8. Discussion

In this study, I examined cross-sector partnerships in the South City CNI from a network perspective and quantified the structure and strength of interorganizational partnerships in terms of communication, collaboration, and trust. Using social network analysis and a survey of South City CNI partner organizations, this study provides the first network study of the CNI and makes several notable contributions to the literature on mixed-income housing and community development initiatives.

Findings of this study suggest that the South City CNI represents a relatively dense yet moderately centralized partnership network consisting of communication, collaboration, and trusting relationships. While these relationships are widely distributed across CNI partners, a small group of key partner organizations emerged within the South City CNI that act as bridges of information and resources throughout the network. Perhaps unsurprisingly, MHA, the lead coordinating agency, and Urban Strategies, the lead people strategy agency, were central actors in each network. However, lead agencies for the housing and neighborhood strategies did not appear central in the networks. Additionally, a community-based nonprofit organization also emerged as an influential actor in the South City CNI. Available literature suggests that such moderately centralized collaboratives that include a group of key influential organizations may be more effective at facilitating communication and collaboration across network members compared to highly dense networks especially within heterogeneous networks (Provan & Milward, 1995; Raab et al., 2015). Within the South City CNI, these influential organizations have potential to fulfill vital bridging roles in the network, what network theorists describe as structural holes – or relational gaps between organizations that occupy different positions within a network (Burt, 2004). These gaps are particularly important in contexts where partners have long histories of working together such is the case in the South City CNI.

The South City CNI communication network was less interconnected (e.g., lower density) compared to the collaboration and trust networks and was the only network that contained organizational isolates that were disconnected from other partners. This suggests that, at least in terms of quarterly or more frequent communication, there may be some CNI partners that are not in regular communication with other partners. Literature suggests that consistent and frequent opportunities for communication is a facilitator of collaboration because it cultivates trust, commitments, and shared understanding of problems and potential solutions (Ansell & Gash, 2008; de Montigny et al., 2019). Organizations that are disconnected from partnership efforts may have inadequate access to information and resources to contribute to collective goals (Ennis & West, 2014) and may become unmotivated to continue their engagement over time (de Montigny et al., 2019). Additionally, less connected partners may be unable to voice their concerns and bring to bear their unique experiences and perspectives to develop understanding about and address emergent issues (de Montigny et al., 2019).

Another interesting finding was that the South City CNI trust network was very similar to the collaboration network in terms of density. Trust is among the most commonly cited facilitators of effective collaboration (Ansell & Gash, 2008; Bryson & Crosby, 2015; de Montigny et al., 2019; Provan et al., 2005; Provan & Fish, 2007) and findings of this study suggest that there exist high levels of partner trust that is widely shared across the South City CNI partner network. Literature on cross-sector partnerships suggests that trust is an important initial condition for partnership success and developing trusting relationships over time is vital to effective delivery of programs and services (Bryson & Crosby, 2015). And while the available literature suggests the importance of trusting relationships within cross-sector partnerships, social network analysis allows for the strategic targeting of trust building by visually depicting

partnership networks and identifying areas where partner relationships could be strengthened. Additionally, the identification of key network actors who themselves are trustworthy within the network provides additional insights on where trust building might occur, and which organizations may be best equipped to facilitate the diffusion of trust through the network.

Another notable finding is that many respondents indicated that they had not been involved in the South City CNI Planning Grant, which occurred in 2010 prior to the awarding of the CNI Implementation Grant in 2015. This suggests that there may exist limited continuity of partners across CNI Planning and Implementation grants, and the South City CNI network and the organizations involved in CNI efforts have evolved over time. Thus, it is possible that network structure and partner relationships may look different among CNI implementation grantees during the initial stages of implementation compared to those that emerge at later stages. While unavailable within the current study, documenting CNI partnership networks at different stages and timelines of implementation and examining partnership changes over time represents a key area for future research.

4.9. Limitations

There are several limitations of this study that must be considered alongside study findings. A primary limitation of the study includes the retrospective nature of the study and cross-sectional study design. A potential limitation in retrospective surveys is the potential for recall bias and the ability of respondents to accurately identify collaborative partners. However, this limitation was minimized by asking respondents about current CNI partnerships over the past 12 months. Documenting network changes longitudinally would be preferable. However, retrospective surveys are common in social network studies and represent an appropriate alternative to studying collaboration networks when longitudinal data are unavailable.

Another potential limitation is the low survey response rate of 59%. While the response rate for the network survey was above average survey response rates for general surveys in social science research, studies have shown that network survey response rates of about 75% are preferable when conducting social network research (Hoppe & Reinelt, 2010). The primary limitation associated with low response rates in social network research includes the impact of missing relational data from nonrespondents. Studies have shown that ignoring missing data may bias estimates of network statistics (Huisman, 2014), though studies have shown that estimates may be reliable with as much as 25% missing data (Costenbader & Valente, 2003; Krauss et al., 2004). To address this limitation, I used simple methods to impute missing edge data based on observed information from survey respondents. Although not ideal, this imputation method is commonly used in social network studies (Krauss et al., 2004). While this approach resulted in 100% coverage of the South City CNI partner network, it is likely that the approach underestimated the number of actual ties in the network (Huisman, 2014). Despite these limitations, the study provides important insights on network structure and collaboration within mixed-income initiatives upon which future research can build.

4.10. Implications

The development of cross-sector partnerships has proliferated in recent years. As such, attention to developing and strengthening cross-sector partnerships has emerged as a core area for housing and community development research, policy, and practice. Successful development of these partnerships builds the capacity and capital required to facilitate community change efforts (Robertson et al., 2012).

The South City CNI appears to have struck a balance between being overly dense and overly centralized. The presence of a core group of central partner organizations suggests that the

South City CNI partnership network may more readily diffuse information and resources to other non-central partners. Emerging empirical literature suggests that cross-sector collaborations that can effectively balance network cohesiveness, or connections between partners, with network range, or the extent to which diverse actors are integrated, represent optimal structures to enhance network performance and generate positive community-level outcomes to address public problems like crime reduction and economic development (Siciliano et al., 2021).

Implications of this study include the utilization of social network analysis and social network tools to empirically document and examine cross-sector partnerships and the network structure of interorganizational collaboration within complex housing and community development initiatives. Specifically, social network tools may be utilized to examine existing partner relationships and identify gaps in resource and information linkages that can be strategically targeted to strengthen partnerships (Provan et al., 2004). Additionally, network visualizations have potential to identify what partners may be missing from the network that could be integrated into the network to address emerging concerns. For example, public safety and crime prevention have been significant concerns for residents in distressed public housing communities targeted for redevelopment through mixed-income initiatives like the CNI. However, law enforcement and crime prevention agencies were not identified as primary partners within the South City CNI. Additionally, partners integral to housing relocation efforts – like property management companies and landlords – were also not identified as key partners in South City. Social network analysis allows for the identification of these partnership gaps so that actionable strategies can be developed to expand partnerships in areas that could benefit broader efforts within South City.

While the implications of the study are broadly applicable to other CNI planning and implementation grantees in terms of the documentation and description of CNI partner networks, it is likely that different partner characteristics and collaboration structures exist in other CNI sites. Thus, key areas for future research include documenting partnership and collaboration dynamics in a broader set of CNI grantees. This information could provide useful information not only about what factors and conditions give rise to particular characteristics of network structure, but also what structures may be most effective towards particular short- and long-term people, housing, and neighborhood outcomes.

4.11. Chapter 4 Appendix

South City CNI Partner Survey Recruitment Emails

Dear [Organization Representative Name],

My name is Andrew Foell and I am a social work doctoral student at Washington University in St. Louis. I am currently in the dissertation phase of my degree and I am partnering with Urban Strategies (USI) and the Memphis Housing Authority (MHA) to examine organizational partnerships and collaboration in the Choice Neighborhoods Initiative in Memphis, TN. The purpose of this study is to better understand the facilitators and barriers to collaboration and implementation in the Choice Neighborhoods Initiative.

I would like to invite you to participate in an online survey to assess your experiences as a partner on the Choice Neighborhoods Initiative. I obtained your contact information from [Staff name] at MHA and [Staff name] at USI, who thought you would provide valuable insights for the study. The online survey should take approximately 20 to 30 minutes to complete, and includes questions about collaboration capacity and collaborative relationships in the Choice Neighborhoods Initiative.

Participation in this study is completely voluntary and your decision to participate, or not participate, will not affect your organization's services or role in the Choice Neighborhoods Initiative. If you decide to participate, your responses will remain confidential and you may decline to answer any questions. If you submit a completed survey in its entirety, you will have the option to be entered into a raffle to win a \$100 Visa electronic gift card. Raffle winners will be notified the week of December 20, 2021.

If you would like to participate, please use the link below to access the online survey.

Survey Link: [survey link here]

If you have any questions about the study, please email me at <u>andrewfoell@wustl.edu</u>. Thank you very much for your consideration of this research study.

Sincerely,

Andrew Foell, MSW, MPP (pronouns: he/him/his) PhD Student Brown School Washington University in St. Louis Campus Box 1196 One Brookings Drive St. Louis, MO 63130 [e] andrewfoell@wustl.edu [w] https://sites.wustl.edu/afoell/

South City Choice Neighborhoods Initiative (CNI) Partner Survey

Introduction

Welcome to the Choice Neighborhoods Initiative (CNI) Partner Network Survey. The purpose of this study is to understand the factors that influence partnerships and collaboration to implement CNI programs and services to assist children, families, and neighborhoods. Survey data will be used to inform recommendations to improve programs, practices, and policies. If you choose to participate, you will be asked to provide information about what organizations you interact with regularly, along with background information about your organization. The survey will take about 20 minutes to complete.

Your participation in this survey is completely voluntary. You may choose to stop your participation at any time and you may skip any questions you do not want to answer. There are no right or wrong answers and your responses to the survey will remain confidential. There are no foreseeable risks or direct benefits to participating in this study. The main benefit to participating is in providing information to inform strategies to increase communication and collaboration in the CNI. All participants who submit a completed survey will have the option to opt-in to a raffle for a \$100 Visa giftcard.

If you have questions for the research team, please contact andrewfoell@wustl.edu or you may contact the Human Research Protection Office at 1-(800)-438-0445 or hrpo@wustl.edu. Thank you very much for your consideration of this research study.

Organizational Characteristics

Organization Name	
Organization 1	
Organization 2	
Organization 3	
Organization 4	
Organization 5	
Organization 6	
Organization 7	
Organization 8	
Organization 9	
Organization 10	
Organization 11	
Organization 12	
Organization 13	
Organization 14	
Organization 15	
Organization 16	

1. What is the name of your organization?

Organization 17	
Organization 18	
	_
Organization 19	
Organization 20	
Organization 21	
Organization 22	
Organization 23	
Organization 24	
Organization 25	
Organization 26	
Organization 27	
Organization 28	
Organization 29	
Organization 30	
Organization 31	
Organization 32	
Other Organization Not Listed [open response]	

- 2. What year did \${Organization Name} become involved with the Choice Neighborhoods Initiative (CNI)?
 - a. 2010
 - b. 2011
 - c. 2012
 - d. 2013
 - e. 2014
 - f. 2015
 - g. 2016
 - h. 2017
 - i. 2018
 - j. 2019
 - k. 2020
 - 1. 2021
- 3. Did \${Organization Name} participate in a Choice Neighborhoods Initiative (CNI) Planning Grant prior to involvement in the Choice Neighborhoods Initiative (CNI) Implementation Grant?
 - m. Yes
 - n. No
 - o. I don't know
- 4. Which of the following best describes \${Organization Name}?
 - p. Government Agency
 - q. Nonprofit Agency
 - r. Private or For-Profit Agency
 - s. Other Nongovernmental Agency (e.g., community group, tenant association, etc.)

- 5. The Choice Neighborhoods Initiative (CNI) has goals toward people, housing, and neighborhood transformation. What primary goal area does \${Organization Name} contribute to in the CNI?
 - t. People
 - u. Housing
 - v. Neighborhood
 - w. Other (Please specify)
- 6. Does \${Organization Name} serve as a lead organization for the Choice Neighborhoods Initiative (CNI)? (Select all that apply)
 - x. People Lead
 - y. Housing Lead
 - z. Neighborhood Lead
 - aa. No, my organization does not serve as a lead organization

Collaboration

7. For each organization in the table, please indicate whether you or members of \${Organization Name} have worked together on the Choice Neighborhoods Initiative (CNI) in the last 12 months. Working together includes: 1) sharing information; 2) financial or contracted services; 3) co-sponsoring activities; 4) making client or service referrals; or 5) conducting community assessments.

If \${Organization Name} has relationships with organizations not listed, you can write-in those organizations in at the end of the table.

Organization Name	Have you worked with this organization in the past 12 months? (Select all that apply)
Organization Name	
Organization 1	
Organization 2	
Organization 3	
Organization 4	
Organization 5	
Organization 6	
Organization 7	
Organization 8	
Organization 9	
Organization 10	
Organization 11	
Organization 12	
Organization 13	
Organization 14	
Organization 15	
Organization 16	
Organization 17	

Organization 18	
Organization 19	
Organization 20	
Organization 21	
Organization 22	
Organization 23	
Organization 24	
Organization 25	
Organization 26	
Organization 27	
Organization 28	
Organization 29	
Organization 30	
Organization 31	
Organization 32	
Other Organization Not Listed [open response]	
Other Organization Not Listed [open response]	
Other Organization Not Listed [open response]	

8. For each organization in the table, please indicate how you have worked together in the past 12 months. (Select all that apply)

		Financial Relationships or	Co- Sponsoring Activities (programs, events,	Client or	
Organization Name	Sharing Information	Contracted Services	reports, etc.)	Service Referrals	Community Assessments
			,		
Organization 1					
Organization 2					
Organization 3					
Organization 4					
Organization 5					
Organization 6					
Organization 7					
Organization 8					
Organization 9					
Organization 10					
Organization 11					
Organization 12					
Organization 13					
Organization 14					
Organization 15					

Organization 16			
Organization 17			
Organization 18			
Organization 19			
Organization 20			
Organization 21			
Organization 22			
Organization 23			
Organization 24			
Organization 25			
Organization 26			
Organization 27			
Organization 28			
Organization 29			
Organization 30			
Organization 31			
Organization 32			
Other Organization			
Not Listed [open			
response]			
Other Organization			
Not Listed [open			
response]			
Other Organization			
Not Listed [open			
response]			

9. How frequently do you or members of \${Organization Name} typically contact or interact (such as meetings, phone calls, or e-mails) with the members of the following organizations regarding the Choice Neighborhoods Initiative (CNI)?

	At LeastAt LeastYearlyQuarterly		At Least Monthly	At Least Weekly
Organization Name	Contact	Contact	Contact	Contact
Organization 1	0	0	0	0
Organization 2	0	0	0	0
Organization 3	0	0	0	0
Organization 4	0	0	0	0
Organization 5	0	0	0	0
Organization 6	0	0	0	0
Organization 7	0	0	0	0
Organization 8	0	0	0	0
Organization 9	0	0	0	0
Organization 10	0	0	0	0
Organization 11	0	0	0	0

	r		-	1
Organization 12	0	0	0	0
Organization 13	0	0	0	0
Organization 14	0	0	0	0
Organization 15	0	0	0	0
Organization 16	0	0	0	0
Organization 17	0	0	0	0
Organization 18	0	0	0	0
Organization 19	0	0	0	0
Organization 20	0	0	0	0
Organization 21	0	0	0	0
Organization 22	0	0	0	0
Organization 23	0	0	0	0
Organization 24	0	0	0	0
Organization 25	0	0	0	0
Organization 26	0	0	0	0
Organization 27	0	0	0	0
Organization 28	0	0	0	0
Organization 29	0	0	0	0
Organization 30	0	0	0	0
Organization 31	0	0	0	0
Organization 32	0	0	0	0
Other Organization Not				
Listed [open response]	0	0	0	0
Other Organization Not				
Listed [open response]	0	0	0	0
Other Organization Not				
Listed [open response]	0	0	0	0

10. Please indicate how much you and members of \${Organization Name} trust each organization to fulfill their roles and responsibilities in the Choice Neighborhoods Initiative (CNI)?

			Neither Trustworthy		
Organization Name	Very Trustworthy	Somewhat Trustworthy	Nor Untrustworthy	Somewhat Untrustworthy	Very Untrustworthy
Organization 1	0	0	0	0	0
Organization 2	0	0	0	0	0
Organization 3	0	0	0	0	0
Organization 4	0	0	0	0	0
Organization 5	0	0	0	0	0
Organization 6	0	0	0	0	0
Organization 7	0	0	0	0	0
Organization 8	0	0	0	0	0
Organization 9	0	0	0	0	0

Organization 10	0	0	0	0	0
Organization 11	0	0	0	0	0
Organization 12	0	0	0	0	0
Organization 13	0	0	0	0	0
Organization 14	0	0	0	0	0
Organization 15	0	0	0	0	0
Organization 16	0	0	0	0	0
Organization 17	0	0	0	0	0
Organization 18	0	0	0	0	0
Organization 19	0	0	0	0	0
Organization 20	0	0	0	0	0
Organization 21	0	0	0	0	0
Organization 22	0	0	0	0	0
Organization 23	0	0	0	0	0
Organization 24	0	0	0	0	0
Organization 25	0	0	0	0	0
Organization 26	0	0	0	0	0
Organization 27	0	0	0	0	0
Organization 28	0	0	0	0	0
Organization 29	0	0	0	0	0
Organization 30	0	0	0	0	0
Organization 31	0	0	0	0	0
Organization 32	0	0	0	0	0
Other					
Organization					
Not Listed					
[open response]	0	0	0	0	0
Other					
Organization					
Not Listed					
[open response]	0	0	0	0	0
Other					
Organization					
Not Listed					
[open response]	0	0	0	0	0

Collaboration Capacity

Thinking about \${Organization Name}'s involvement in the Choice Neighborhoods Initiative (CNI), please indicate the extent to which you agree or disagree with the following statements:

Strongly	Somewhat	Neither agree	Somewhat	Strongly
disagree	disagree	nor disagree	agree	agree

11. Agencies in this					
community have a					
history of working					
together.	0	0	0	0	0
12. Trying to solve					
problems through					
collaboration has been					
common in this					
community. It has been					
done a lot before.	0	0	0	0	0
13. Leaders in this					
community who are not					
part of the CNI seem					
hopeful about what we					
can accomplish.	0	0	0	0	0
14. Others in this					
community who are not					
part of the CNI would					
generally agree that the					
organizations involved					
in the CNI are the					
"right" organizations to					
make the CNI work.	0	0	0	0	0
15. The political and social					
climate seems to be					
"right" for starting a					
collaborative project					
like the CNI.	0	0	0	0	0
16. The time is right for the					
CNI.	0	0	0	0	0

Thinking about \${Organization Name}'s involvement in the Choice Neighborhoods Initiative (CNI), please indicate the extent to which you agree or disagree with the following statements:

	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
17. People involved in the					
CNI trust one another.	0	0	0	0	0
18. I have a lot of respect					
for the other people					
involved in the CNI.	0	0	0	0	0
19. The people involved in					
the CNI represent a					
cross section of those	0	0	0	0	0

who have a stake in					
what we are trying to					
accomplish.					
20. All the organizations					
that we need to be					
involved in the CNI					
have become involved					
in the CNI.	0	0	0	0	0
21. My organization					
benefits from being					
involved in the CNI.	0	0	0	0	0
22. People involved in the					
CNI are willing to					
compromise on					
important aspects of					
CNI projects.	0	0	0	0	0

Thinking about \${Organization Name}'s involvement in the Choice Neighborhoods Initiative (CNI), please indicate the extent to which you agree or disagree with the following statements:

	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
23. The organizations that					
belong to the CNI					
invest the right amount					
of time in our					
collaborative efforts.	0	0	0	0	0
24. Everyone who is					
involved in the CNI					
wants it to succeed.	0	0	0	0	0
25. The level of					
commitment among					
CNI partners is high.	0	0	0	0	0
26. When the CNI makes					
major decisions, there					
is always enough time					
for members to take					
information back to					
their organizations to					
confer with colleagues					
about what the decision					
should be.	0	0	0	0	0
27. Each of the people who					
participate in decisions	0	0	0	0	0

in the CNI can speak for the entire					
for the entire					
organization they					
represent, not just a					
part.					
28. There is a lot of					
flexibility when					
decisions are made;					
people are open to					
discussing different					
options.	0	0	0	0	0
29. People in the CNI are					
open to different					
approaches to how we					
can do our work. They					
are willing to consider					
different ways of					
working.	0	0	0	0	0
30. People in the CNI have					
a clear sense of their					
roles and					
responsibilities.	0	0	0	0	0
31. There is a clear process	_				
for making decisions					
among the partners in					
the CNI.	0	0	0	0	0
32. The CNI is able to	0	0	0	0	0
adapt to changing conditions, such as					
fewer funds than					
expected, changing					
political climate, or	0	c .	c .	C C	c .
changes in leadership.	0	0	0	0	0
33. The CNI has the ability					
to survive even if it had					
to make major changes					
in its plans or add some					
new members in order					
to reach its goals.	0	0	0	0	0
34. The CNI has been					
careful to take on the					
right amount of work at					
the right pace.	0	0	0	0	0
35. The CNI is currently					
able to keep up with the					
work necessary to	0	0	0	0	0

coordinate all the			
people, organizations,			
and activities related to			
this collaborative			
project.			

Thinking about {Organization Name}'s involvement in the Choice Neighborhoods Initiative (CNI), please indicate the extent to which you agree or disagree with the following statements:

	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
36. People in the CNI	0	0	0	0	
communicate openly					
with one another.	0	0	0	0	0
37. I am informed as often					
as I should be about					
what is going on in the					
CNI.	0	0	0	0	0
38. The people who lead					
the CNI communicate					
well with CNI partners.	0	0	0	0	0
39. Communication among					
people in the CNI					
happens both at formal					
meetings and in					
informal ways.	0	0	0	0	0
40. I personally have					
informal conversations					
about the CNI with					
others who are involved					
in the CNI.	0	0	0	0	0

Thinking about {Organization Name}'s involvement in the Choice Neighborhoods Initiative (CNI), please indicate the extent to which you agree or disagree with the following statements:

	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
41. I have a clear understanding of what the CNI is trying to					
accomplish.	0	0	0	0	0

12 Poople involved in the					[]
42. People involved in the					
CNI know and					
understand our goals.	0	0	0	0	0
43. People involved in the					
CNI have established					
reasonable goals.	0	0	0	0	0
44. The people involved in					
the CNI are dedicated					
to the idea that we can					
make this project work.	0	0	0	0	0
45. My ideas about what					
we want to accomplish					
with the CNI seem to					
be the same as the ideas					
of others.	0	0	0	0	0
46. What we are trying to					
accomplish with the					
CNI would be difficult					
for any single					
organization to					
accomplish by itself.	0	0	0	0	0
47. No other organization					
in the community is					
trying to do exactly					
what we are trying to					
do.	0	0	0	0	0

Thinking about {Organization Name}'s involvement in the Choice Neighborhoods Initiative (CNI), please indicate the extent to which you agree or disagree with the following statements:

	Strongly	Somewhat	Neither agree	Somewhat	Strongly
	disagree	disagree	nor disagree	agree	agree
48. The CNI has adequate					
funds to do what it					
wants to accomplish.	0	0	0	0	0
49. The CNI has adequate					
"people power" to do					
what it wants to					
accomplish.	0	0	0	0	0
50. The people in					
leadership positions for					
the CNI have good					
skills for working with					
other people and					
organizations.	0	0	0	0	0

51. The CNI engages other					
stakeholders, outside of					
the CNI, as much as we					
should.	0	0	0	0	0

Thinking about \${Organization Name}'s involvement in the Choice Neighborhoods Initiative (CNI), please indicate the extent to which you agree or disagree with the following statements:

	Strongly	Somewhat	Neither agree	Somewhat	Strongly
	disagree	disagree	nor disagree	agree	agree
52. A system exists to					
monitor and report the					
activities and/or					
services of the CNI.	0	0	0	0	0
53. We measure and report					
the outcomes of our					
collaboration.	0	0	0	0	0
54. Information about CNI					
activities, services, and					
outcomes is used by					
members of the CNI to					
improve our joint work.	0	0	0	0	0

Thinking about {Organization Name}'s involvement in the Choice Neighborhoods Initiative (CNI), please indicate the extent to which you agree or disagree with the following statements:

	Strongly disagree	Somewhat disagree	Neither agree nor disagree	Somewhat agree	Strongly agree
55. CNI partners work					
together to identify					
unmet needs in the					
community.	0	0	0	0	0
56. CNI partners work					
together to decide how					
to fill gaps in services.	0	0	0	0	0
57. CNI partners usually					
make their own plans					
without consulting one					
another.	0	0	0	0	0
58. CNI partners act toward					
a common goal.	0	0	0	0	0

59. CNI partners are often					
in competition with one					
another.	0	0	0	0	0
60. CNI partners get a lot					
accomplished by					
working together.	0	0	0	0	0
61. CNI partners have					
trusting relationships					
between organizations.	0	0	0	0	0
62. CNI partners have					
access to resources					
(e.g., expertise,					
facilities, funding) that					
support collaboration					
between organizations.	0	0	0	0	0
63. CNI partners keep each					
other up to date about					
the issues we work on.	0	0	0	0	0
64. CNI partners					
communicate about					
individual					
clients/patients that we					
serve together, when					
needed.	0	0	0	0	0
65. CNI partners share					
information that helps					
the system of care work					
better.	0	0	0	0	0
66. CNI partners have					
trouble communicating.	0	0	0	0	0

Perceived Network Effectiveness

Please indicate how effective the Choice Neighborhoods Initiative (CNI) has been to date in achieving each of the following accomplishments:

	Not at all effective	Slightly effective	Moderately effective	Very effective	Extremely effective
67. Demonstrating that it	chiceuve	encenve	eneeuve	enecuve	
is contributing to the					
provision of efficient,					
high quality programs and services to the					
community and CNI					
target population.	0	0	0	0	0

68. Providing benefits to					
the community and					
CNI target families					
that would not be					
possible with					
uncoordinated					
services.	0	0	0	0	0
69. Providing a broad					
range of services that					
effectively address the					
full needs of the					
community and CNI					
target population.	0	0	0	0	0
70. Demonstrating to state					
or federal agencies the					
contributions that CNI					
partners can make to					
improving programs					
and services.	0	0	0	0	0

Please indicate how effective the Choice Neighborhoods Initiative (CNI) has been to date in achieving each of the following accomplishments:

	Not at all effective	Slightly effective	Moderately effective	Very effective	Extremely effective
71. Achieving its people-					
based goals/objectives					
(e.g., housing					
relocation, service					
delivery, employment					
training, etc.)	0	0	0	0	0
72. Achieving its housing-					
based goals/objectives					
(e.g., housing unit					
rehabilitation,					
demolition,					
construction, etc.).	0	0	0	0	0
73. Achieving its					
neighborhood-based					
goals/objectives (e.g.,					
critical community					
improvements,					
neighborhood safety,					
etc.).	0	0	0	0	0

- 74. In what specific areas has the Choice Neighborhoods Initiative (CNI) been most effective? (open response)
- 75. What one thing do you think the Choice Neighborhoods Initiative (CNI) should do to increase effectiveness? (open response)

Respondent Characteristics

- 76. What is your current job or position title at \${Organization Name}? (open response)
- 77. How many years have you been involved in the Choice Neighborhoods Initiative (CNI)? (open response)
- 78. How do you describe your racial and ethnic identity? (Select all that apply)
 - a. American Indian or Alaska Native
 - b. Asian
 - c. Black or African American
 - d. Native Hawaiian or Pacific Islander
 - e. Hispanic, Latino, or Spanish Origin
 - f. White or Caucasian
 - g. Other Racial or Ethnic Identity (open response)
 - h. Prefer not to answer
- 79. How do you describe your gender identity?
 - a. Woman
 - b. Man
 - c. Non-binary
 - d. Other (open response)
 - e. Prefer not to answer
- 80. Would you like to enter a raffle for a \$100 Visa giftcard?
 - a. Yes
 - b. No
- 81. What is your name? (If "Yes" to previous question)
 - a. First Name (open response)
 - b. Last Name (open response)
- 82. What is your preferred email address? (open response)

Conclusion

Thank you for taking this survey! Your response has been submitted. If you have questions for the research team, please contact andrewfoell@wustl.edu or you may contact the Human Research Protection Office at 1-(800)-438-0445 or hrpo@wustl.edu.

Table 4.3

South City Choice Neighborhoods Initiative (CNI) Collaboration Network Actor Centrality

Actor	Degree	Betweenness	Closeness	Eigenvector
Org 9	31	116.35	1.00	1.00
Org 30	27	60.82	0.89	0.92
Org 14	25	44.50	0.84	0.90
Org 23	20	20.67	0.74	0.78
Org 29	16	10.96	0.67	0.65
Org 2	15	5.34	0.66	0.66
Org 21	15	4.48	0.66	0.66
Org 17	14	4.46	0.65	0.63
Org 31	14	5.81	0.65	0.62
Org 19	13	7.38	0.63	0.51
Org 24	13	5.05	0.63	0.57
Org 16	12	4.48	0.62	0.52
Org 22	12	4.68	0.62	0.49
Org 10	11	3.83	0.61	0.48
Org 11	11	4.52	0.61	0.47
Org 28	11	3.12	0.61	0.48
Org 1	10	2.87	0.60	0.43
Org 3	10	0.69	0.60	0.49
Org 4	10	1.26	0.60	0.47
Org 6	10	1.18	0.60	0.50
Org 15	10	1.45	0.60	0.46
Org 20	7	0.24	0.56	0.37
Org 27	7	0.66	0.56	0.32
Org 26	6	0.25	0.55	0.33
Org 32	6	0.62	0.55	0.26
Org 13	5	0.09	0.54	0.27
Org 25	5	0.13	0.54	0.27
Org 8	4	0.13	0.53	0.21
Org 5	3	0.00	0.53	0.17
Org 7	3	0.00	0.53	0.19
Org 18	3	0.00	0.53	0.20
Org 12	1	0.00	0.51	0.07

Measures

Table 4.4

South City Choice Neighborhoods Initiative (CNI) Communication Network Actor Centrality

Actor	Degree	Betweenness	Closeness	Eigenvector
Org 30	31	60.99	0.83	1.00
Org 14	27	72.40	0.81	0.96
Org 9	25	62.97	0.78	0.92
Org 29	20	15.66	0.66	0.74
Org 2	16	11.03	0.64	0.66
Org 21	15	5.98	0.63	0.66
Org 31	15	5.08	0.63	0.67
Org 23	14	6.43	0.63	0.65
Org 19	14	10.78	0.62	0.53
Org 17	13	4.25	0.59	0.56
Org 6	13	1.95	0.59	0.61
Org 22	12	10.02	0.59	0.46
Org 28	12	5.74	0.60	0.51
Org 24	11	14.75	0.59	0.49
Org 15	11	3.66	0.59	0.48
Org 1	11	2.93	0.58	0.44
Org 3	10	1.30	0.57	0.47
Org 4	10	3.25	0.56	0.41
Org 10	10	0.96	0.56	0.46
Org 11	10	9.62	0.56	0.34
Org 16	10	8.89	0.56	0.35
Org 20	7	1.04	0.57	0.43
Org 25	7	0.14	0.54	0.34
Org 26	6	0.14	0.52	0.26
Org 7	6	0.17	0.52	0.27
Org 27	5	0.00	0.50	0.20
Org 32	5	0.58	0.43	0.10
Org 13	4	0.25	0.51	0.16
Org 8	3	0.00	0.45	0.08
Org 5	3	0.00	0.45	0.08
Org 12	3	0.00	0.00	0.00
Org 18	1	0.00	0.00	0.00

Measures

Table 4.5

Actor	Degree	Betweenness	Closeness	Eigenvector
Org 9	31	124.58	1.00	1.00
Org 14	25	49.46	0.84	0.90
Org 30	25	51.00	0.84	0.88
Org 23	20	21.34	0.74	0.78
Org 29	17	13.25	0.69	0.69
Org 2	15	5.74	0.66	0.67
Org 31	14	6.74	0.65	0.62
Org 21	14	4.35	0.65	0.63
Org 19	13	8.32	0.63	0.52
Org 17	12	3.32	0.62	0.56
Org 16	12	4.54	0.62	0.52
Org 24	12	4.68	0.62	0.53
Org 10	11	4.14	0.61	0.49
Org 11	11	5.36	0.61	0.47
Org 22	11	4.89	0.61	0.46
Org 28	11	3.18	0.61	0.49
Org 3	10	0.69	0.60	0.50
Org 4	10	1.39	0.60	0.47
Org 6	10	1.04	0.60	0.51
Org 15	10	1.46	0.60	0.46
Org 1	7	0.63	0.56	0.33
Org 20	7	0.43	0.56	0.37
Org 27	7	0.71	0.56	0.32
Org 32	6	0.67	0.55	0.27
Org 26	5	0.00	0.54	0.30
Org 7	4	0.00	0.53	0.22
Org 13	4	0.10	0.53	0.20
Org 25	4	0.00	0.53	0.25
Org 5	3	0.00	0.53	0.17
Org 8	3	0.00	0.53	0.19
Org 18	3	0.00	0.53	0.20
Org 12	1	0.00	0.51	0.07

South City Choice Neighborhoods Initiative (CNI) Trust Network Actor Centrality Measures

Chapter 5: Discussion

5.1. Summary of Dissertation Findings

This study investigated two primary goals of the Choice Neighborhoods Initiative (CNI) to: 1) improve the quality-of-life for low-income families living in distressed public housing by increasing access to affordable housing and neighborhood opportunity through housing relocation, and 2) leverage cross-sector partnerships to deliver high quality programs and services to families, redevelop distressed public housing into mixed-income communities, and make investments in community improvement projects to enhance health and well-being of neighborhood residents. To interrogate these goals, I leveraged administrative data along with primary data collected through in-depth interviews and a social network survey of South City CNI partner organizations in Memphis, TN.

In Chapter 2, I utilized novel administrative data of longitudinal case records and multilevel mixed-effects modeling to examine neighborhood attainment and quality-of-life improvements for low-income families living in distressed public housing targeted for redevelopment through the South City CNI. I found that housing relocation increased access to higher opportunity, less disadvantaged neighborhoods for families that moved out of the CNI project Zip Code. Despite improvements to neighborhood quality for many CNI families, the neighborhoods where families moved remained above the sample mean levels of neighborhood disadvantage. Additionally, housing relocation within and outside the CNI project Zip Code did not translate into differential quality-of-life improvements between families who stayed versus those who left the project Zip Code. Indeed, over the six-year study period, all CNI families experienced increased senses of home and neighborhood safety, as well as increased stress.

In Chapter 3, I utilized semi-structured in-depth interviews with staff at CNI partner organizations to identify facilitators and barriers to collaboration within the South City CNI, including challenges with the housing relocation process. In analysis of interview data, I identified coordinating challenges as key barriers to collaboration in the South City CNI. Specific coordination challenges included those related to the housing relocation process, managing complex budgets within resource constraints, changing organizational arrangements, navigating diverse program perspectives, and the unique context of the COVID-19 pandemic. I also identified several facilitators of collaboration, which included the presence of a highcapacity lead organization, credible network connectors, and a long history of collaboration as essential for overcoming challenges associated with coordination.

In Chapter 4, I built on insights gained through partner interviews by empirically documenting and describing the South City CNI collaboration network in terms of communication, collaboration, and trust. Using social network analysis, I found that the South City CNI consisted of 32 partner organizations that collaborated across a variety of areas including sharing information, making client referrals, co-sponsoring activities, engaging in contracted services, and conducting community assessments. The South City CNI exemplified a relatively dense, yet moderately centralized partnership network characterized by widely distributed interrogational relationships along with a small group of central organizations that coordinated network activities. The remainder of this chapter is dedicated to exploring implications for policy and practice as well as directions for future research.

5.2. Implications for Policy and Practice

The findings presented in Chapter 2 and 3 of this dissertation support prior research indicating that housing relocation is a substantial challenge in mixed-income development. The

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availability of housing vouchers combined with housing search assistance allowed many South City CNI families to locate housing in neighborhoods that were significantly less disadvantaged compared to the CNI project Zip Code. However, just over a third of families relocated within the CNI project Zip Code. And while neighborhood disadvantage decreased in the CNI project Zip Code over time, the neighborhood remained the most disadvantaged neighborhood in the Memphis area. Despite changes in exposure to neighborhood disadvantage for families who stayed versus left the CNI project Zip Code, relocation decisions did not translate into differential quality-of-life effects in terms of stress and safety. While findings of increased senses of home and neighborhood safety following relocation is largely congruent with prior research, findings of increased stress are somewhat contradictory compared to prior literature.

Interviews with South City CNI partner staff provided additional insights into the challenges associated with housing relocation that helped contextualize the findings from Chapter 2. Through these interviews, it became apparent that two key factors were particularly important for understanding housing relocation efforts in Memphis. The first was the unique context surrounding the public housing site targeted for redevelopment through the CNI Implementation Grant. The Foote Homes public housing development was the last remaining traditional public housing site in Memphis. As such, many families who lived at the site had been previously displaced by other development initiatives, including some who had been displaced multiple times from previous HOPE VI redevelopments. This mean that many families faced multiple challenges and barriers that made them hard-to-house in the private housing market. Additionally, the simultaneous condemnation of two nearby apartment complexes strained the local housing market, ultimately forcing hundreds of additional low-income families into the market at the same time South City CNI partners were relocating residents from Foote Homes.

Staff at CNI partner organizations highlighted these factors as creating a unique social and economic context that influence housing relocation in Memphis.

Addressing issues of housing relocation along with other coordinating challenges required the presence of a high-capacity lead organization along with other key connecting organizations that worked together to share information and collaborate to address the collective goals and objectives of the South City CNI. The central coordinating role of the Memphis Housing Authority (MHA) was frequently identified by CNI partners as a strength, particularly in terms of communication, transparency, adaptability, and willingness to productively engage conflict in ways the incorporated diverse voices and perspectives.

Together, these findings suggest that additional housing relocation and supportive services may be needed to address the full range of issues that CNI families confront before, during, and after relocation. Despite many South City CNI families moving to less disadvantaged neighborhoods and most families feeling safer in their new home and neighborhood environments, literature suggests that many relocated families experience higher rates of crime perpetration and violent victimization after relocation compared to the general population (Hayes et al., 2013). Additionally, it is well documented that relocated households face additional stressors that may minimize the potential benefits of relocating to higher quality housing in less disadvantaged neighborhoods. These stressors includes additional financial stress and the stress associated with navigating new home and neighborhood environments. Thus, supportive services that focus on stress management and reduction post-relocation may be needed above and beyond current CNI services. Additionally, ongoing support to promote safe and stable housing also represent promising approaches to ensure that families maintain housing or have the resources to assist with additional moves if needed. Developing and strengthening partnerships with quality housing management companies and landlords represents another viable strategy to increase housing choice and neighborhood opportunity for low-income families (Bergman et al., 2019).

In addition to programs and services targeting CNI families, findings of this study also highlight the importance of network interventions to strengthen cross-sector collaboration within complex housing and community development initiatives. These interventions include the identification of network *champions* that are uniquely positioned to diffuse information and resources to network members (Valente, 2012). This is particularly important when piloting new programs and services or communicating information that may be controversial where network members and external stakeholder have divergent views (Valente, 2012). Additionally, the identification of isolated members of a collaboration network could inform actions to strengthen connections with these agencies, while also generating new and innovative ideas and capitalizing on partner strengths and capacities (Cross et al., 2002; Valente, 2012). Other network interventions include targeting resources to network members that occupy bridging positions in the network to ensure that they are adequately resourced to fulfill their role in the initiative and serve as network connectors among other partners. Network interventions might also focus on adding new organizational partners or rewiring existing linkages between partners to assist with information and resource flows (Valente, 2012).

Finally, devoting more attention to pre-existing organizational and collaborative capacity seems essential for the effective delivery of programs and services to low-income families and the successful implementation of mixed-income development initiatives. The case of the South City CNI, and likely other planning and implementation sites, suggests that there are substantial coordination challenges associated with implementing complex multilevel and multicomponent initiatives that include people, housing, and neighborhood goals and objectives. These initiatives

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necessitate that partner organizations can effectively work together to develop a shared mission and vision for the initiative, establish clear goals and objectives, create clear roles and responsibilities, and establish transparent policies and procedures that govern work across sectors.

5.3. Implications for Future Research

Over a decade after the first CNI Planning and Implementation grants were awarded, we still know relatively little about successes, challenges, and outcomes of the initiative. While research is emerging that partially addresses these gaps in knowledge, we are just beginning to understand the extent to which the CNI has improved lives for people and transformed housing and neighborhood conditions that promote healthy youth and family development. This dissertation contributes to this body of knowledge while highlighting additional areas for future research.

In mixed-income housing and community development initiatives, the process and outcomes related to housing relocation represent a fundamental area that should be the focus of future research. Studies of HOPE VI have been instrumental in our understanding of the challenges related to involuntary, forced relocation of low-income families in public housing. Additional studies of how this process unfolds within the CNI, the current federal effort toward mixed-income development, should be implemented across other CNI sites. This research should incorporate quantitative and qualitative methods to better understand short- and long-term outcomes in terms of housing quality and stability, neighborhood attainment, and social, economic, and health-related outcomes for families. Answering key questions about where families relocate and whether these moves translate into improvements to family well-being represents a critical area for future research. Answering these important questions requires the

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appropriate partner capacity and necessary data collection systems and infrastructure that allows for the tracking of family data over time. Additionally, qualitative studies that incorporate the perspectives and experiences of families directly affected by the CNI are also needed. Specifically, how families make decisions regarding housing relocation, the challenges and barriers they face during the relocation process, and ongoing issues they face post-relocation represent areas for future exploration.

In terms of partnership development and collaboration, social network analysis represents a useful tool that provides insights into how partnership networks are structured and how they may be managed and modified to achieve collective goals and objectives (Robertson et al., 2012). While this dissertation examined partner characteristics and collaboration in the South City CNI in Memphis, TN, it is likely that different partner and collaboration dynamics exist in other CNI planning and implementation sites. Thus, key areas for future research include documenting partnership and collaboration dynamics in a broader set of CNI grantees. These efforts could compliment and contribute to national evaluation efforts currently underway (U.S. Department of Housing and Urban Development, 2020). Currently, there are 108 CNI Planning Grantees and 40 CNI Implementation Grantees at various stages of development across the U.S. Understanding partner characteristics and collaboration structures at different stages of planning and implementation could provide valuable insights regarding the development and evolution of cross-sector partnerships in mixed-income development initiatives. Longitudinal assessments of CNI collaboration network structure and evolution over time also represents an important area for future research.

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Appendix

Urban Strategies Letter of Support for the Dissertation



September 10, 2020

IRB #: 202102034

Andrew Foell, MSW, MPP Doctoral Student Washington University in St. Louis 1 Bookings Drive, Campus Box 1196 St. Louis, MO 63130

Dear Andrew:

I am very pleased to offer support for your dissertation proposal on behalf of Urban Strategies, Inc. Your investigation into family outcomes and partner collaboration in the Choice Neighborhood Initiative (CNI) is timely and relevant.

Urban Strategies provides a comprehensive, place-based approach in responding to the diverse needs of CNI families in project sites across the United States. Given our extensive experience in the design and implementation of human capital building and community development strategies for CNI, we are well positioned to help you seek and secure data access on CNI families. Additionally, we are well equipped to make introductions to CNI partners to facilitate data collection on CNI collaboration. We also look forward to providing feedback and input on emerging findings that can inform our programs.

Good luck with the dissertation proposal,

Donovan C. Duncan

Donovan Duncan, BS, MA Executive Vice President Urban Strategies, Inc.

MEMPHIS HOUSING AUTHORITY

Choice Neighborhood Initiative (CNI) is timely and relevant.

and input on emerging findings that can inform our programs.

8 Leave

October 21, 2020

Doctoral Student

St. Louis, MO 63130

Dear Andrew:

Andrew Foell, MSW, MPP

Washington University in St. Louis 1 Bookings Drive, Campus Box 1196



700 Adams Avenue Memphis, TN 38105 (901) 544-1102

Marcia E. Lewis Chief Executive Officer

Dexter Washington Chief Operating Officer

MHA BOARD OF COMMISSIONERS

Justin Bailey Michael Boyd Kathy Moore Cowan Lisa Wheeler Jenkins Mary W. Sharp



Good luck with the dissertation proposal,

Dexter Washington Chief Operating Officer Memphis Housing Authority



Ellen Eubank CNI Project Manager

"Striving for Excellence and Nothing Less"

I am very pleased to offer support for your dissertation proposal on behalf of the Memphis Hous-

ing Authority (MHA). Your investigation into family outcomes and partner collaboration in the

As a lead applicant of the Choice Neighborhood in Memphis, Tennessee, MHA fosters partnerships with local governments, nonprofit organizations, and private businesses throughout the Memphis area to leverage support and resources for CNI families. Additionally, we routinely work with local agencies to assist over 25,000 families in public and assisted housing and man-

age over 2,500 public housing units. Given our extensive experience partnering with local organizations to assist families in public housing, we are well equipped to make introductions to CNI partners to facilitate data collection on collaboration. We also look forward to providing feedback

IRB #: 202102034

Washington University in St.Louis

Human Research Protection Office

IRB ID #:	202102034	
То:	Andrew Foell	
From:	The Washington University in St. Louis Institutional Review Board,	
Re:	Choice and Opportunity: Examining organizational partnerships within federal mixed-income community development initiatives	

Approval Date: Next IRB Approval Due Before:	02/08/21 N/A		
2018 Common Rule/Equivalent Protections Yes			
Type of Application:	Type of Application Review:	Approved for Populations:	
New Project Continuing Review Modification	Full Board: Meeting Date: Expedited Exempt Facilitated	 Children Signature from one parent Signature from two parents Prisoners Pregnant Women, Fetuses, Neonates Wards of State Decisionally Impaired 	