Poverty in the Land of Plenty? Deconstructing Role of Community-Based Organizations in a Small Community

John Kevin Trainor
University of South Florida, john.trainor@mac.com

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Poverty in the Land of Plenty?
Deconstructing the Role of Community-Based Organizations in a Small Community

by

John Kevin Trainor

A dissertation submitted in partial fulfillment
of the requirements for the degree of
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Department of Anthropology
College of Arts and Sciences
University of South Florida

Major Professor: David Himmelgreen, Ph.D.
Heide Castañeda, Ph.D., MPH
Elizabeth Bird, Ph.D.
Rita DeBate, Ph.D., MPH
Karen Besterman-Dahan, Ph.D., R.D.

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DEDICATION

This dissertation is dedicated to my friends and family, without whom this endeavor would not have been possible. Thanks for always being there when I need research advice, a sounding board, and grammar help. Your support made this possible, and I love you all.
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ABSTRACT

Using the lens of a community-based childhood obesity intervention, it is possible to examine the role of non-profit organizations in community development and to deconstruct the “community” in community-based research and identify the many competing interests within a community. This contextual understanding includes how the community is formed, how a community’s agenda is set, and who will complete the tasks outlined in that agenda. In applied anthropological settings and public health interventions that are community-based, it is essential to understand the context of community and which community (or communities) the researcher is working with to ensure that the data you collect reflects the community you wish to impact.

The data collection for this dissertation occurred across phases. In Phase One, the focus was on collecting baseline data for a childhood obesity intervention using participant observation, unstructured interviews, and a community canvassing survey conducted with community volunteers who collected data going door-to-door. A midcourse review of results led to a shift in the research focus from the evaluation of a community-based intervention to an analysis of how community is conceptualized, with its various competing interests, in this particular context. To examine community membership, agenda setting, and how the community seeks to achieve its goals, this project utilized participant observation, unstructured interviewing, and semi-structured interviewing. Phase One data revealed that the community had limited interest in a childhood obesity intervention; additionally, local and county level data was ambiguous
about the actual need for such an intervention. As a result, Phase Two data was collected to shed light on the role of community.

There are three actors that make up “the community” at this project’s research site: 1) long-term residents, 2) short-term residents, and 3) the non-profit service providers, who work in the community. The extent to which the service providers are members of the community is somewhat contested, and honorary membership may be exchanged for other forms of capital. The agenda in the research setting appeared to be set by the local non-profit service providers, but data collection showed the importance of long-term residents (and, to a lesser extent, short-term residents) in guiding the focus of the non-profit agencies. To accomplish the goals of the agenda set in the community, a group of women emerged as key actors. In this dissertation I use the termed “Wonder Women” to connote an archetype of a resident in this community context; these women are residents who are committed to the agenda of the community and, through volunteering, are tested for their ability to work often exorbitant hours to achieve the goals of the community. The Wonder Women are worked until a breaking point, at which time they typically leave their post as key players in the community.

This research not only contributes to identifying and operationalizing the concept of “communities” in community-based research but presents a new cultural phenomenon: the emergence of “Wonder Women.” Further research into this phenomenon is required to determine if they are occurring elsewhere and to what extent. Moreover, this dissertation informs the work of non-profit organizations working in the United States. The importance of true community participation and ways to prevent volunteer burnout are emphasized in the lessons learned from the research.
CHAPTER ONE: INTRODUCTION
This dissertation is an ethnographic account of five years of working in a community I am calling The Neighborhood of Southern Town, USA. Pseudonyms are used throughout to ensure the confidentiality of research participants. The pseudonym, “The Neighborhood,” was initially chosen as more descriptive pseudonyms were too identifiable, but ultimately what the various actors in this context share is almost exclusively the physical space they live or work in and not a people-centered sense of community. The initial goal of the research was to understand the impact of a multilevel (individual, family, community) and multi-factor (nutrition, physical activity, etc.) community-based intervention on the prevention of childhood obesity. After working in the community collecting baseline data on prevention efforts and community readiness to address childhood obesity, it became clear that the community support needed to address this issue was lacking. Moreover, what emerged was a series of questions about the role of “the community” in addressing a childhood obesity prevention project, as well as the role of the non-profits working in the community.

Previous Research in The Neighborhood
For three years before the start of my dissertation research, I had worked on issues related to nutrition and physical activity in The Neighborhood and its surrounding communities. Initially, I was employed by the Florida Prevention Research Center (an office funded by the US Center for Disease Control and Prevention) as the evaluation coordinator for the State Obesity Prevention (SCOP) project. SCOP had been funded
to create a community-based physical activity promotion intervention based on the VERB Summer Scorecard intervention (VERB is not an acronym, but a trademarked social marketing campaign for tweens, whose spelling is all capitalized) (Bryant 2007). The goal of the SCOP project was to mobilize an already involved community interested in child health to create a sustainable intervention to increase physical activity in third to fifth-grade children that utilized existing community assets (e.g. gyms, sports leagues, and community activists) and outlets for physical activity.

SCOP took place in four elementary schools that had been matched on various characteristics, such as free and reduced school lunch rates, race/ethnicity, sex, and other socio-economic indicators provided by the school district. The research design was quasi-experimental; two elementary schools in East Tampa - The Neighborhood Elementary and Rockford Elementary - received the Scorecard intervention. A nearby school received an exergaming intervention (exergaming is using gaming technology like the Nintendo Wii and Dance-Dance Revolution to increase physical activity). One school received no intervention in Year One, as it served as a control in the quasi-experimental design. The Scorecard intervention was created in Kentucky by a community-based coalition working with the director of the SCOP project and was found to have potential to increase physical activity in tweens by reducing barriers to accessing physical activity and generating excitement through a social marketing campaign (Bryant et al. 2011, Bryant et al. 2008). SCOP was meant to replicate this intervention, including the community-based focus with a local coalition, to test its generalizability and verify its impact. The exergaming component was a novel project
out of the physical education department and was a pilot project being completed with new intervention and control comparison points.

The project took place in the 2008-2009 academic year, and had a mixed-methods design with most quantitative data coming from a pretest, posttest, and follow-up measure assessing levels and enjoyment of physical activity with third, fourth, and fifth-grade students at all four schools. This quantitative data was collected using the Physical Activity Questionnaire for Older Children (PAQ-C), a validated tool for estimating levels of physical activity in children nine to fifteen years of age (Kowalski et al. 2004, Kowalski et al. 1997). In addition to these surveys, a coalition - The Kids Action Network - was formed to bring together a group of community members and community organizations interested in creating a physical activity intervention. The hope was that the coalition, along with researchers from the Southern University (a pseudonym), would conduct individual interviews with teachers, administrators, and parent/child dyads.

Unfortunately, the coalition was not engaged in the research process, and their engagement in the work of the research project, was, in general, limited. The coalition consisted mostly of non-profit organizations working in the area that were primarily engaged in the hopes of securing funds and school personnel who were interested but overburdened by the demands on them from the schools. Research staff probed more into the lack of engagement by the coalition which initially seemed interested in the SCOP work using both informal, unstructured interviews and a small set of formal, semi-structured interviews. While it was clear that the lack of interest from the elementary school staff was due primarily to burnout and the intense focus on the school not
receiving a third failing rating, the reasons that the local not-for-profit community-based organizations’ (CBOs) interest waned was more explanatory about The Neighborhood. CBOs indicated that they felt there were more than enough services for the youth in The Neighborhood, but that services quickly dropped off as children graduated from The Neighborhood Elementary, located in the physical and idealized center of the neighborhood. This lack of services for older youth (and ultimately adults) in The Neighborhood appeared to have two related root causes. First, as children age, they may graduate from The Neighborhood Elementary (which goes to grade eight) or transfer to one of two nearby middle schools. With the open enrollment options based on poor school performance, hardship concerns, and on “magnet” educational options (STEM, Arts, etc.) which start in elementary school and continue through high school the children of The Neighborhood very quickly disperse. There appeared to be a recognized value in children attending The Neighborhood Elementary, at least during pre-dissertation and dissertation research, as seen by the number of local children whose parents kept them in The Neighborhood Elementary through fifth grade, but then exercised “choice” options for middle and high school. These options appeared to based on class offerings (Arts, STEM, International Baccalaureate) and not on geography. With the geographic dispersal of children across the city, the provision of services to older youth and adults was much more difficult than serving children in school-linked out of school time care settings.

Related to this issue of geographic dispersal, the CBOs working in The Neighborhood found it much more difficult to serve older youth and adults, primarily due to a lack of funding. It was unclear as to whether the lack of funding was because
neighborhood-center services made less sense for these geographically dispersed youth (i.e. these services would be better situated in specific middle and high schools) or if there is just less funding for older youth and young adults than there is for children. There is literature to support a decrease in funding for health and learning disabilities as children age into adolescence and a further decrease as they age into adults (Crowley et al. 2011, Nutt et al. 2007). Regardless of the root cause of decreased funding, the local CBOs in the neighborhood were initially engaged in the SCOP coalition with the hope that funds could be used to reach older youth. When it became clear that the funding priorities of the federal grant that paid for SCOP research required that services be provided to children, the interest and ultimately support of the local CBOs quickly dropped off.

In addition to interview data, the researchers collected quantitative and additional qualitative data on physical activity outlets in the community using an adapted form of the Physical Activity Resource Assessment (PARA) tool (Lee et al. 2008). This interview data and the PARA tool data were particularly useful in the research process for my dissertation, primarily in the first phase. The data from the PARA assessments helped the local YMCA to successfully apply for a grant to build a new playground in The Neighborhood. This data set was also a very helpful starting point to map the community and its assets as an early task in my dissertation research. The PARA data, incorporated with my asset mapping data, was also used in the community canvassing asset map, which will be discussed in Chapter Four of this dissertation.

Utilizing the data described above, the SCOP research team translated the VERB Summer Scorecard intervention to create a culturally-specific intervention aimed
at increasing physical activity in 3rd, 4th, and 5th graders in poor, urban East Southern Town. The resulting Scorecard intervention asked the children to track their physical activity on a Scorecard they could attach to their backpack or carry with them. In many ways, the greatest strength of this intervention was working with existing community assets that were physical activity outlets to increase access for the children in the Scorecard intervention. Activity outlets included bowling alleys, roller rinks, parks and recreation sites, and sports leagues. These community partners often gave reduced rates to Scorecard participants, and some even provided free access for those with a Scorecard. Community partners could then stamp the card after the child met the physical activity requirements. In addition to these community partners, teachers in the schools – both classroom teachers and physical education teachers - could also stamp the children’s cards. Finally, parents could sign off on a certain number of squares on the Scorecard, indicating completed physical activity. Children could then take their completed Scorecards to be entered into a drawing for various physical activity-related prizes like bikes (with helmets), sports equipment, and a Nintendo Wii.

The original plan for SCOP research included a participatory aspect in addition to the community-based emphasis that is described above with CBO and other input. While the intervention that was to be translated was a scorecard, the original intent was to use what ultimately be defined as a Community-Based Prevention Marketing (CBPM) which includes a participatory construction or translation of an intervention (Bryant et al. 2007, Bryant et al. 2010). As such, with true participation from the community, the intervention was not necessarily a scorecard- the core that was to be translated was the identification of existing community physical activity outlets and encouraging children to
utilize these assets. With a lack of true participation from the community, the scorecard model was replicated in The Neighborhood. The translation of the intervention was met with a modicum of success-children utilized the scorecards, although in a highly extrinsic fashion-with the goal of winning prizes, including the Nintendo Wii, which, at the time, was a big ticket item. For children who valued the prizes, there was a large amount of participation, with some children completing multiple scorecards worth of physical activity. For those that did not value the prizes, they often did not even use their scorecards to track mandated physical activity, such as physical education classes, which would have completed a quarter of the scorecard.

While not the focus of the SCOP work, nor of the dissertation, this limited engagement seemed to be the standard of community-based and participatory research, even though the community-based nature was minimal and the work was void of true community participation. The lack of true participation in the research is of great significance as The Neighborhood had repeatedly expressed to researchers that they felt “overstudied” or “under a microscope,” but with little to no benefit to the community (Hathaway 2005, Sabogal 2013). The idea that researchers’ points of view can be misconstrued as the views of the community (even if inadvertently as was the case with the SCOP research) increases the divide between researchers and the community. This misunderstanding created an initial divide between myself and The Neighborhood-emphasizing my role as a researcher-a person who can extract personal value from the community and provide nothing in return. This perception was exacerbated by changing funding priorities and the shift of SCOP research dollars away The Neighborhood.
It was originally intended that the State Prevention Research Center would apply for a five-year grant from the CDC to launch the SCOP physical activity program across all of Any County, USA with a continued emphasis on the two East Southern Town school sites. However, federal funding priorities shifted away from funding location-specific interventions that would require translation to research that was more readily replicated by communities with minimal assistance. As such, the State Prevention Research Center ultimately received funds to conduct a social marketing intervention targeted to train communities to use social marketing techniques to identify policy level needs in a community and advocate for change at that level.

The Evolving Role of the Researcher

Even though funding priorities had shifted and I continued working as an employee of the research center on a different project, it was my intent to continue working on childhood obesity interventions in East Southern Town. Unfortunately, with the promise of a large influx of federal funds off the table, many of those in the community that I had worked with became less interested in working with me, either because there was no money attached to the project, or due to mistrust after the State Prevention Research Center stopped working in the community. As will be discussed in the next chapter, the sentiment that many researchers take what they need from The Neighborhood and then simply leave is strongly felt in the community, by both residents as well as the non-profit agencies that work with researchers.

After a some time, I was approached by an individual about receiving data for several grant proposals to address childhood obesity in The Neighborhood. This individual was, at the time, an employee of the YMCA and would ultimately become my
key informant. With the approval of the State Prevention Research Center to share aggregate data, I agreed to meet to discuss available data and to hear about the grant opportunities. One of the opportunities was with a private foundation of a large local health insurance company. The grant was targeted to address childhood obesity in The State’s poorest communities by using multiple strategies across multiple levels of intervention (i.e. individual-level, interpersonal-level, community level, et cetera).

Early in discussions about how I might be involved in the process of implementing the project laid out in the grant proposal, I was offered a position as a paid internal evaluator on the grant. It was initially exciting to be offered this position, but I had concerns about being able to maintain independence as a researcher if I were being paid to evaluate by the YMCA. After discussions with several applied anthropologists, including my dissertation advisor, I decided to turn down the position as a paid evaluator. Instead, I offered my evaluation skills as an in-kind donation and tried to be as independent as possible.

Looking back after the research had ended, I am now ambivalent about my decision to turn down the position as an employee of the YMCA. Throughout the research process, I identified myself in every meeting - public or private YMCA leadership meetings - as a doctoral student in applied anthropology at the Southern University conducting my dissertation research. Even with this constant reaffirming of my position, it quickly became clear that I was seen as an employee of the YMCA. I was repeatedly asked throughout the process if I worked for the YMCA and when I stated that I did not, it was often to a response of surprise and the sentiment that I was “still one of them” (that is, YMCA employees).
The perception that I was a YMCA employee, or at least an extension of the YMCA, made it hard to gain trust and buy-in from some participants early in the research process. I often found that I was being told what the YMCA wanted to hear, even if the same individual expressed a different idea in a coalition meeting. While the YMCA does not normally carry such clout in the community, their role as the main grantee that would be passing through several hundred thousand dollars to local non-profits did provide them with clout, particularly in the early parts of data collection.

There was a benefit to not being a paid employee of the YMCA, however: my ability to maintain an independent point of view allowed me to openly disagree with the YMCA’s position at several times throughout data collection. While I never had an occasion or need to disagree on any issues critical to the structure of the project, there were several times where I was vocal in my disagreement on its implementation including data collection methodologies and funding priorities. The freedom to do this openly in a community setting certainly helped to soften the notion that I was part of the YMCA. It does seem likely, though, that my leadership role in the grant meant that, at least to some, I was part of the YMCA or at least that I shared information with the YMCA.

Even if there was this perception that I might share information with the YMCA, I did not share any of my personal dissertation data with the YMCA. The ethical conduct of my research was of the utmost importance to me, especially working in a community-based and somewhat participatory setting. As such, respect for persons and their confidentiality was at the forefront of my data collection process. At one point, the YMCA expressed interest in my research notes as a data source for report writing, but I
did not share them. As an active participant in the grant process that was a part of my research, I did feel that I could not make decisions that did not take into account the knowledge I had gained during fieldwork. There was never any time where taking a side on an issue could have exposed a research participant (e.g., taking a contrary stand to make sure a participant’s voice was heard). I was, however, concerned that this could be a possibility, and if participants had any concerns with the YMCA I encouraged them to talk to the YMCA staff directly and that I would not share their information. As an outsider, but also a participant, a constant concern of mine throughout data collection and even analysis/writing was positionality. Initially, it seemed as though I would always be seen as one hundred percent outsider and as such my role at the local university and the impact on other researchers’ studies was a concern of mine. Slowly over the more than five years, I worked in The Neighborhood, there were many times that my role as researcher seemed secondary to my identity in the community. As such, positionality was a critical focus of thought and concern throughout the research process was the many power relationships at play (between the university and the community, between my committee and the community, between myself as researcher/scholar and the community where educational attainment was most commonly at the high school level) and how these power relationships were ambiguous at best (Dilger and Huschke 2015).

Lee (2015) indicates that one way to be self-reflexive and conscious of positionality is to critically analyze the questions asked of the researcher by study participants. The almost exclusive majority of questions that I received from participants were related to what participants identified as the “best practices” of data collection and
childhood obesity intervention. Recognizing the complexity of the issue of childhood obesity, the most common question I received was “what actually works?” (in reducing the prevalence of childhood obesity). If you take the perspective of Lee (2015), my positionality focused on my identity as a researcher and the belief that there was truth or fact in the “scientific” pursuit of obesity intervention. Internally, I was focused on the social and political dimensions of my positionality and the moral imperatives I felt to do no harm and maximize the benefits to research participants as elaborated in the principles of beneficence and justice (National Commission on the Protection of Human Subjects, 1978). When asked questions about conducting research and the known impacts of obesity prevention, the positions I took were based in the scientific literature as outlined in chapter two of this dissertation. In many ways, I envisioned myself as a scientific advisor the coalition, and I was often called upon to discuss the evidence base for various topics or to comment on the viability of implementing various programs. When issues of social justice arose, which was rare, I took the point of view of a poverty studies scholar. Particularly with the YMCA staff, this position/role was appreciated. I often came prepared with examples from the literature on topics to present and discuss.

The Evolving Focus of the Research

As discussed above, the initial focus of my research was on the implementation of a multi-level, multifactorial childhood obesity intervention. As such, the research was to be structured around three hypotheses:

H1: Structural issues will play an important role in child nutrition.

H2: Peers, social networks, and prestige will greatly influence children’s food choices.
H3: Using Action Research and participatory methodologies will provide a richer, culturally-specific understanding of child nutrition.

This focus came directly out of the three prior years of research I had completed in the Neighborhood but added a nutrition component to the previous focus on physical activity as the means to affect childhood obesity in the Neighborhood.

Even though I had worked for several years in the Neighborhood before starting my dissertation research, it was still necessary to work to build rapport in the community, especially after my employer had moved their research from the Neighborhood to another site. My main strategy to build rapport was to conduct intensive participant observation. I attended any and all community events that I was able to, making sure to both reaffirm and strengthen existing connections as well as meet new residents and service providers. Participant observation included unstructured interviews about the structural issues related to obesity, e.g. food assistance policy, the built environment, ensuring physical activity in out of school time care, etc. The grant on which I ultimately volunteered as a local evaluator launched their coalition during this period and I began to attend the coalition meetings as well. To gather data on the structural issues related to childhood obesity, an anticipatorily created community survey was constructed through a series of coalition events where community members and non-profits created a series of questions to better understand obesity and general perceptions of health in the community.

I did not anticipate that moving from an intervention focused on increasing children’s ability and time to play to a wider-focused intervention on the many dimensions of child obesity would result in such a significant decrease in interest from
the community, as well as from the non-profits working in the community. As will be discussed in Chapter Six of this dissertation, results from a community canvassing survey as well as analysis of participant observation data indicated little interest in a focus on child obesity prevention. There was substantial interest, however, in co-morbidities of obesity, in particular, diabetes and heart disease, but these were perceived as issues pertinent to the adult community.

Using the preliminary data I had collected, I decided it was critical to reevaluate the focus of my research. If I chose not alter course, I was likely setting myself up for failure, as I did not expect to have access to the same groups with this limited interest in childhood obesity. Additionally, if I chose not to alter course, I felt I would be missing the opportunity to collect data on a topic of value. As such, my difficult choice to change focus was clear. My new research questions focused instead on the role of “community” in the widespread “community-based work” happening in The Neighborhood, even if some of this appeared to be community-based in name only. My new research questions became:

1. Who is a member of The Neighborhood community?
   a. How do race and class impact this?
   b. To what extent is community membership place-based?

2. How is the agenda of the community set?
   a. To what extent does the notion of “community readiness” from public health theory inform this? Are there valid critiques of the notion of community readiness?
   b. How does class guide the community agenda?
3. How is the community organized?
   a. Who will complete the work that is identified?
   b. Does the organization of the community reinforce the racial and class-based divides in the community?

To answer these questions, more participant observation and interviews were employed. I had collected large amounts of participant observation data related to the construction of community and how the community managed to complete agenda that are set, but it was not the focus of my previous participant observation. As such, I began to conduct unstructured interviews that specifically addressed these issues. After data analysis, I constructed a semi-structured interview guide to be used with the coalition on issues focused on readiness to assess how the work would be completed. The semi-structured interviews also examined coalition function and relationship with the community.

Findings

While anthropologists use “the community” as the level of analysis, it is a concept that is not well-defined (MacFarlane 1977, Amit and Rapport 2002, Metzel et al. 2007). Moreover, the definition of community for evidence-based interventions should be “a group of people with diverse characteristics who are linked by social ties, share common perspectives and engage in joint action in geographical locations or settings” (MacQueen et al. 2001: 1929). While this definition seems reasonable, it is based on a study of 76 interviews with those at-risk for HIV and 42 HIV vaccine researchers. The generalizability of a definition of community with such as small research sample that is not representative of the population of individuals receiving health interventions,
nevertheless a wider population of “Americans” or “Westerners.” As such, defining community became a critical aspect of this research on a community-based childhood obesity intervention. If the concept of community cannot be clearly and adequately operationalized, how can impacts on that group be measured?

Defining community membership in The Neighborhood was not as easy as it first seemed. After several years of participant observation, I knew that some non-profit service providers perceived themselves to be members of the community, even though they did not live in The Neighborhood. My bias as an outsider and an anthropologist made this seem almost laughable that employees of non-profits who are firmly entrenched in the upper middle class, many of whom have white privilege and get to go home to their gated communities at night could be considered community members. While I would argue that my initial assumption is correct and how most residents would respond if asked, it is also more nuanced than this. Through exchanges of social and economic capital, community gatekeepers do control access to what I call “honorary membership” in The Neighborhood community. By spending enough time working in The Neighborhood (and therefore bringing money and services), non-profit service providers can be granted this honorary membership. While I was never able to have someone mention this honorary status explicitly, many long-term service providers did openly claim that they were members of “the community” in interviews. Additionally, it was clear to other service providers who had this status and who did not. The identity as an honorary member was clear to most individuals as those who had this status routinely self-identified as members of the community. Moreover, the strength of an individual’s relationship with key community gatekeepers was a clear indicator of one’s
status as an honorary member of the community. The community gatekeepers were present at most community events, and they did not shy away from being vocal about which service providers they had a positive relationship with and which service providers with which they did not have such a relationship. Additionally, the lack of the community gatekeepers’ attendance at service providers events was seen as a clear indication that this event was not supported by the gatekeepers.

In addition to the question of non-profit service provider membership, the distinction between two groups of community residents also clearly emerged from the first day of data collection on this research project. There was a clear distinction between the long-term residents of The Neighborhood, many of whom owned their property and had aspirations for a renaissance of The Neighborhood, and the short-term residents who moved to the community for affordable housing and who often moved around the East Southern Town area, as was documented by tracking the movement of students between local elementary schools over two years in East Southern Town in my previous research. This movement of some of Southern Town’s poorest residents is well known, to the extent that a nearby East Southern Town neighborhood has a nickname that invokes the transient nature of its residents. This divide between residents would become critical as the dissertation continued.

The second research question asked who set the agenda for The Neighborhood Community. To answer this question, it became clear that the divide between the long-term residents and short-term residents was of critical importance. Long-term residents were focused on improvements to the community that also happen to increase land value, e.g., more green space, installing sidewalks, and repairing derelict housing units.
Short-term residents were focused meeting their immediate needs such as childcare, access to food, and training opportunities. Initially, I believed that the non-profits working in The Neighborhood controlled the community agenda. It seemed the most likely explanation for how a large grant bringing hundreds of thousands of dollars to the community to provide services that linked together to create a child obesity intervention could happen in the light of a general disinterest in the specifics of childhood obesity. To a certain extent, this is true, without the non-profit agencies working the area, in particular, the YMCA, there would not have been a grant to do this work.

As began to examine the role of non-profits in the community, I reviewed reports and field notes from all three projects I had worked on in The Neighborhood. At first, it was easy not to approach community gatekeepers to ask for support, as this is a normal method to gain access to a community. Paired with participant observation and interviews, though, it became clear that this was more than an entrée to the community. Of course, gatekeepers control some aspect of the community, or they would not be gatekeepers. What happens, though, when those gatekeepers in many ways represent a small portion of the community?

The gatekeepers, who were a married couple I will call the Sanders, were well established in the greater Southern Town Community. They were active in local politics through their personal efforts working in the community and their social networks. These social networks gave them a large amount of social capital, including recognition as the main community gatekeepers when researchers came to work in The Neighborhood. To gain buy-in from the Sanders, and in theory the community, CBO staff often gave the Sanders’ some level of agenda-setting power in research projects and non-profit service
provision. Being given these roles, then, increased their social capital through new connections within Southern Town area.

While this building of social capital is not altogether unsurprising, it is potentially problematic when the gatekeepers do not represent the community as a whole, but one special interest of a minority of residents. The Sanders were the first to bring the “problem” of short-term, renting residents to my attention, although this divide was also evident through participant observation and data collection. Moreover, while renters make up a significant minority of roughly one-third of county households, in The Neighborhood renters outnumber home-owning households two to one (US Census Bureau 2011). Not only were the Sanders representatives of the minority perspective, but the gatekeeping they provided was also most often related to service provision for or research about, the majority they felt were the problem in the community. By studying the problematizing of short-term residents, a picture of gentrification in The Neighborhood emerged.

It would be oversimplifying the situation and incorrect to classify the short-term residents as powerless and the long-term residents, led by the Sanders, as powerful agents intent on ridding the Springs of renters. In reality, the short-term residents did have the power to set the agenda at the service provision level, as it was their needs that were addressed by the non-profit organizations providing services. While the role of the short-term residents in setting the community was secondary, they certainly had a role in the agenda-setting process, particularly as researchers and service providers established themselves in the community.

The presence of a community agenda has little value if there is no one to work
toward the goals of that agenda. The final research question of this project asks: who will do the work of the “community” and whose “community” is it? While the non-profit organizations had employees, the non-profit agencies placed a great value on having residents of The Neighborhood volunteer their time to work in the community as well. This emphasis on having the poor volunteer their time, which comes from funding agencies’ neoliberal perceptions of individual responsibility, was reified by the non-profit agencies and accepted by residents as the model of non-profit intervention.

While volunteer commitment of residents was simply a “check box” on the evaluation reports of many non-profits, this volunteerism was seen by some non-profits as a kind of trial period for potential employees. If having residents volunteer their time was valued, then hiring residents to work for the non-profit was prized. These resident-employees were often zealous about their new role in the community and often worked countless extra hours ostensibly to improve their community. This process created an archetypical role I describe as and have termed “Wonder Women.” These Wonder Women are characterized by passion, which is harnessed by non-profits to create over-committed and under-supported employees who eventually burn out on their new role in the community.

**Structure of the Dissertation**

Chapter Two discusses the literature relevant to the dissertation. First, the chapter briefly examines the relevant literature on how communities have been defined and how this informs the perspective with which community-based research data is collected. The community literature is supplemented with a discussion of the large increase in the number of non-profits since the 1980s and their role as welfare providers.
in a neoliberal state. As many anthropologists have worked with non-profits, a
discussion of the main critiques of non-profits in this role is also examined.

Chapter Three describes the setting of the research project. A clear delineation
of The Neighborhood as geographic space is provided, along with demographic
information pertinent to the research questions. Finally, a brief history of The
Neighborhood is presented that provides the reader with the context needed to
understand the long-term residents and the renaissance of The Neighborhood they are
trying to create. Chapter Four presents the research methods used in this dissertation.
Data collection was divided into two phases. In Phase One, the focus was on the
evaluation of a community-based childhood obesity intervention. After a mid-course
analysis of data, the focus of the dissertation shifted toward an ethnography of
community formation and function.

Chapter Five presents the results of the dissertation research. Results includes
baseline data from the evaluation of the childhood obesity intervention and then
examines the reasoning for the shift in the dissertation research. The new focus of the
research is on the role of the community and the non-profits providing services in the
community on setting the community’s agenda. The data collected is then presented
and analyzed using Bourdieu’s forms of capital as the lens of analysis.

Chapter Six presents a discussion of the findings and ties together the themes of
this project. The role of Wonder Women is examined as a key force of change in the
dissertation setting as well as an exploration of the limited sustainability of this role.
Also, to the role of social and economic capital in shaping the community and the piece
that non-profits play in this examined The final chapter of the dissertation, Chapter
Seven, summarizes the research. The conclusion examines the significance of the findings to anthropology, service providers, and the community; this includes lessons learned and recommendations for non-profits working in The Neighborhood.
CHAPTER TWO: REVIEW OF THE SCIENTIFIC LITERATURE

Community in Anthropological Literature

To examine research that was intended to be community-based as well to understand the role of not-for-profit community-based organizations in The Neighborhood, a specific focus on community - and its definition and operationalization - is critical. As Macfarlane (1977) purports, the problem of defining community is as central to sociology as the problem of defining culture in anthropology. As such, a complete history and analysis of community in the social science literature is beyond the scope of this dissertation. The aim of this chapter is to provide a brief overview of a social science understanding of community and then draw out literature on the topics of community membership and gentrification to provide a foundation for the second half of this dissertation.

Historical Ideas of Community

Historically in anthropology community has been defined as a group of people sharing at least one of three things: a common locality, common social structures, or a common interest or goal. These ideas appear to be rooted in the 1887 work of Tonnies, who theorized that communities were held together by the bonds of blood, the bonds of geography, and the feeling of group membership (Tonnies 2001 [1887]). All three of
these ideas are related, but social scientists have favored one over the others in earlier explanations of community.

Minar and Greer (1969) favored Tonnies notion that geography and the physical context are the lynchpins of community. The geography that is shared by a community creates problems which are also shared and create a common perspective of a community (Minar and Green 1969). Geography then, as an adversarial force creates unity in the group. This shared perspective allows for groups to work jointly to address shared problems and creates feelings of interdependence and ultimately group membership (Minar and Green 1969).

While in many ways this is the least nuanced idea of community, geography is critically important in the structuring of a community. Legal codes, housing policies, and even the flow of people are bound by geographic, or geopolitical, boundaries. As such, the geographic lines that divide or merge groups of people play a powerful role in the way communities are structured (Smith 1999, Frug 1996, Mohan 2002). These geopolitical lines can be used to segregate communities, force integration of communities, and even increase social polarization (Mohan 2002).

Social structures and the roles they create were the glue which held together communities to anthropological theorists like Warner (1941). The primary hypothesis of this theoretical perspective was that the way society is structured, particularly its economic structure, dictates the way communities are formed (Warner 1941). Warner placed a strong emphasis on class, although it was quickly seen through participant observation that economic wealth and power did not equate to class (1941). To understand the ranking of members in a community it is also essential to “value and
symbol systems of the community (Warner 1941, 789). While this theoretical perspective failed to predict the rank of an individual in society, it did focus on the social mechanisms which support society rank and therefore the mechanisms which support communities (Warner 1941).

Durkheim first tackled the idea the figurative bonds of community and a feeling of community identity in his 1893 book *The Division of Labor in Society* (Durkheim 1933). This bond that members of community shared was called the collective conscious (Durkheim 1933). The collective consciousness comes from a set of shared beliefs about the world and shared morals (Durkheim 1933). Through this collective consciousness, social fact emerges; without the interaction of people in, particularly in the community, there is no reality of social fact (Durkheim 1933, Durkheim 2014). Social facts are broadly defined - they can include legal codes, economic systems, and religions - what was briefly defined as the first class of social fact by Durkheim (1933, 2014). The second class of social fact dealt with the demographics of a community, including geographic dispersion, ways of communicating and ordering a society (Durkheim 2014).

In the way that Durkheim has described society and communities, it is the interaction between individuals that creates the reality of a community and social facts. As such, while communities may be geographically based, they need not be so it the agreed upon social fact defines community in other terms. This collective consciousness which is shared among members of a community allows for a much more nuanced definition of community and one that can be in flux.
Troublesome Nature of Community

Throughout an extensive literature review on how the idea of community is conceptualized and operationalized two descriptors prevailed to describe the process of defining community: community is both “highly contested” and “polysemic” (Walters 2008, Phillips 2015, Taylor 2016, Hillery 1955, Kumar 2005). As early as 1955 George Hillery had identified 94 definitions of community, many of which still impact a sociological understanding of the concept of community. Even today, scholars struggle with the concept of community; Alleyne argues that “Community is so fundamental a concept encompassing as it does myriad ways of thinking and talking about human collectivities that it is quite unsurprisingly a term which is impossible to define” (2002: 608). In Hillery’s early meta-analysis of the term community, two main (and opposing) concepts can be mapped onto the many definitions of community: “geographic area” (place) and the “presence of a common characteristic other than area” (people and relationships) (1955). Of the 94 definitions of community Hillery identified, 70 were related to place, 21 were related to people and relationships, and the remaining three were based on what Hillery called “ecological relationships” (1955).

In addition to the contention between people and place in community, there are other issues with understanding and operationalizing community. One such issue is the mutability of community and the overlapping communities to which people belong. As such, a common pitfall in the application of community to applied social science such as community-based natural resource management and community-based tourism is the homogenization of community (Flint et al. 2008, Taylor 2016). Homogenizing community, particularly in applied social sciences, excludes an emic understanding of a given community, its decision-making practices and often prevents the development of community empowerment that is central to many community-based research methodologies (Taylor 2016). Moreover, in conducting community-based research, communities are not nearly as homogenous as research may assume (or see in preliminary research), which complicates participation in community-based work (Farrelly 2011). If empowerment is a focus of community-based work, a focus on who is empowered (and who is not) is ultimately as important as a focus on how empowerment happens (Farrelly 2011, Taylor 2016). To examine participation and empowerment, one must focus on local government, micro-politics, and varying cultural values (Bramwell and Lane 2011, Farrelly 2011, Taylor 2016).

Another common problem that arises in the study of community relates to its multifarious definitions: the ambiguity in defining community makes it a malleable, mutable concept which has implications for both research and practice. To academics and non-academics alike community is ambiguous; it is at one and the same time an ideal (a desired way of living, i.e. civil society), a focal point for conflict and division, and the object of governmental attention and interaction (e.g. economic development,
resource management, and distribution) (Newman and Clarke 2016). With a community so ambiguous and mutable, it can be mobilized and appropriated - within and between communities, in political projects and within academic research (Newman and Clarke 2009, 2016).

A classic example of this, which has a great impact on the focus of this dissertation research, is the concept of a culture of poverty where “deficient communities peopled by poor families [are] the source of ‘cycles of deprivation’” (Newman and Clarke 2016: 3). An appropriation of community and valuing relationships is at the crux of Granovetter’s theory on the “strength of weak ties” (1973) which was the theoretical foundation of poverty deconcentration policies such as HOPE VI (Greenbaum 1998, Hathaway 2005, Siewell and Thomas 2015). According to this theory, the weak ties people living in poverty have with people who are not living in poverty are more valuable (or useful) to lift people up out of poverty (Granovetter 1973, Greenbaum 1998, Hathaway 2005). This appropriation of communities and relationships (and which were more valuable) led to housing project “revitalization” into mixed-income communities resulting in a significant decrease in the government-supported housing for individuals living in poverty (Greenbaum 1998, Hathaway 2005, Siewell and Thomas 2015).

More than Place: Relationship-Based Community

While there is agreement that many people in the same place can have shared experiences (Hancock et al. 2012, Fine et al. 2000, Waylen et al. 2013), people in the same place can also have “multiple, varied, interacting and potentially conflicting interests and concerns” (Waylen et al. 2013: 575). As such, place may have an impact
on community, but the relationships of the people in a given space are more critical to the understanding of community than the space itself. Shared interests and concerns that shape social life and interactions of groups are more relevant than the physical location groups are located in (Hoggett 1997, Waylen et al. 2013).

Outside of the constraints of place, the community can be seen symbolic, imagined, identity markers (Hancock et al. 2015, Amit and Rapport 2002). This focus on the social construction of community has meant that concrete social relationships have often been lost to researchers according to Amit and Rapport (2002) and Hancock et al. (2015). It has been argued that community studies has shifted its focus to “narratives of tension, conflict, and exclusion” (Phillips 2015: 227) to the extent that the social has been separated from the sense of community (Amit and Rapport 2002, Neal and Walters 2008, Phillips 2015).

To re-couple the social and the community, researchers have attempted to focus on both the symbolic nature of community as well as the concrete impact community can have on the lives of individuals. Community as a concept is “felt and ‘done’ as well as being imagined and symbolic” (Hancock et al. 2015: 345), it can be simultaneously abstract and concrete. Neal (2009) emphasizes this point by examining rural identities in England. In these communities, an emotional desire for the classic or quintessential image of a small village spurred residents to invest time and effort to solidify a specific, nostalgic sense of community (Neal 2016).

*Forms of Capital and Communities*

Social scientist Pierre Bourdieu (1984) also provides a theoretical lens through which to look at community membership via his notion of forms of capital. An
examination of capital is an important lens through which to view community. This is especially true of social capital which is tied to one’s social network (see below). To understand how communities form we must understand how its constituent members interact, for without that interaction there would be no community (Durkheim 2014, Warner 1941). By examining forms of capital, an important theoretical tool emerges for the analysis of community data.

Social Capital and Social Networks

As a term, social capital has been employed by numerous branches of social science, education, and health sciences since the early 1900s (Hanifan 1916). However, two primary theorists have been identified as leaders of perhaps conflicting schools of social and cultural capital. Pierre Bourdieu and James Coleman both developed theories related to the currency of social relationships in the 1980s. From both perspectives, social capital is a byproduct of social relationships that allows the recipient to gain access to resources. Coleman describes social capital in this way: “If A does something for B and trusts B to reciprocate in the future, this established an expectation in A and an obligation on the part of B” (1988:102). Colman goes on to directly relate these ideas to parents and the impact of social capital in their children’s education. He identifies three types of social capital that can be used: 1) trading favors, 2) information exchange and 3) setting norms or boundaries (1988:113-115).

Much of the research since Coleman, (as illustrated by such researchers as Carbonaro 1998; Lee and Bowen 2006; Schlee et al. 2009) has focused on how well individuals know each other and how much they interact with each other. The idea behind this strategy is that the stronger an individual’s connection with others, the more
likely they will have the opportunity to build social capital. Sociologist Nan Lin identifies this process by stating that: “...social capital consists of resources embedded in social relations and social structures, which can be mobilized when an actor wishes to increase the likelihood of success in a purposive action” (Lin 2002:24). Lin's work is in direct contrast to Coleman. Coleman supports what he refers to as closed networks which reinforce social norms (1988). In theory, these social norms (which emphasize formal education) tacitly rely on social control (Coleman 1988).

Sociologist Alejandro Portes has been a staunch critic of Coleman's work by stating that Coleman focused almost exclusively on the benefits of social capital to the individual. “Old people could walk the streets at night without fear and children could be sent to play outside because tight community controls guaranteed their personal safety.” (Portes 2000:3) Portes goes on to describe the mutation of this idea into one of community benefit—that everyone in the community benefits from a lower crime rate. This model of social capital became highly popular in the 1990s spurred on by research such as Robert Putnam’s 1993 Bowling Alone. Portes critiques Coleman for not being critical enough of the social influence of capital. Another sociologist, James DeFilippis, extends this argument to housing policy (2001). DeFilippis argues that Coleman and Putnam’s descriptions of social capital are fundamentally flawed as they fail to acknowledge the role of power in community development (2001).

*Cultural Capital*

Bourdieu's conception of social and cultural capitals varies slightly from Coleman's. In Bourdieu's seminal work, *Forms of Capital*, he differentiates between social capital (which emerges through social networks), cultural capital (attitudes,
knowledge, skills, the advantage that they have by nature of who they are within the society) and economic capital (Bourdieu 1986). Bourdieu's understanding of social capital and networks is more nuanced than Coleman's offering a system where social ties have differing levels or quality (Horvat et al. 2003, DeFilippis 2001). Economic, cultural, and social capital were threaded throughout the data collected for my dissertation. Beyond the obvious impact of economic capital in revitalization and gentrification, cultural capital and social capital emerged as explanatory in how community is defined in the neighborhood. Moreover, the Wonder Women who ‘get things done’ in the neighborhood can leverage their social and cultural capital to be change makers in their community. As such, forms of capital are an important lens of analysis.

Beyond Bourdieu's three types of capital, cultural capital can be further broken down into three types: embodied, objectified and institutionalized. (Bourdieu 1986) Embodied cultural capital represents the habitus, an individual's character or way of thinking about the world that is inherited through socialization and enculturation. I'll discuss this idea further below. The objectified cultural capital represents goods or things that are owned and the institutionalized cultural capital recognized by institutions (such as academic credentialing). The concept of habitus deserves further discussion. Habitus is shaped by the collapsed dualities of body-mind and sign-significance (Csordas 1990). Habitus is the socially informed body (Bourdieu 1977); it is subjective and not individual as it is shared by members of the same group or class and as a result, the world is understood as an “endless circle of mutually reflecting metaphors” (Bourdieu 1977, pg 91, VonWolputte 2004). The habitus serves two functions: to
generate human practices in relation to objective structures and to serve as the unifying principle to the whole of social practices (Bourdieu 1977, Csordas 1990). Habitus attempts to explain social practices (human behavior) in mind-body interactions with symbols, that is to say, that through the body we learn the behavioral tendencies of our social group that are often taken for granted, such as gestures and preferences for fashion, entertainment and food (Warin et al. 2008).

Food was an important avenue for Bourdieu’s understanding of habitus and the socially informed body. Bourdieu argued that food and eating were more than just a process to nourish the body; food and eating are a performance of gender, class, and identity (Bourdieu 1979). That is to say, that food has symbolic value and is, therefore, central to the reproduction of habitus (Warin et al. 2008). It is interesting with this historical background in the symbolism of food, that embodiment theory has not been applied more to the domain of obesity. In a study by anthropologists and public health professionals examining the role of motherhood and obesity, embodiment was central to understanding women’s low priority to lose weight. In a cohort of 550 women who were clinically identified as obese via BMI measure none of the women identified as obese, in fact, a few women who knew their BMIs fit into the obese category were shocked that they may be called obese (Warin 2008). These women did not embody cultural or medical representations of the obesity; their understandings of food and weight were located in their habitus- both within their socio-economic environment and within their gender (Warin 2008).

Applying these notions to community building, the three forms of cultural capital could be represented by an individual’s attitudes and beliefs about how their
neighborhood should look (and how involved they should be in the process), the
capacity to assist their community through the acquisition of things and finally the
individual’s educational achievement level as an indicator of status.

**Non-Governmental Organizations and Anthropology**

The non-governmental organization (NGO) came into the limelight with the
founding of the United Nations in 1945 (Schuller and Lewis 2014). As neoliberalism has
spread throughout the West and post-colonial states, the role of the NGO has grown
rapidly (Kamat 2004, Banks et al. 2014). While Laura Nader first called for anthropology
to “study up” including research at the “major institutions and organizations that affect
our everyday lives” (1972: 3) the boom of anthropological research of non-profits and
NGOs did not begin until the late 1980s (Schuller and Lewis 2014). Over the past thirty
years, the focus of anthropological inquiry has grown substantially.

Defining NGOs can be somewhat problematic, both due to the wide variety of
NGOs in existence today as well as the various epistemologies that have been used to
analyze them. It has been noted that in many ways it is easier to describe what an NGO
is not that what is is (Fisher 1997). This idea is even inherent in its name- non-
government organization (Schuller 2007). The World Bank defines NGOs as “private
organizations that pursue activities to relieve suffering, promote the interests of the
poor, protect the environment, provide basic social services, or undertake community
development” (World Bank 1995: 13). The United Nations definition of an NGO is similar
but adds that NGOs are non-profit organizations and voluntary groups (UN 2017).
Additionally, the definition provides a wider net for what NGOs do – they are “task-
oriented, driven by people with a common interest,” and who “bring citizen’s concerns to
governments, monitor policies and encourage political participation” (UN 2017).

To further complicated matters, as early as 1997, Fisher noted that NGOs go by
a wide variety of names and acronyms. Some designations provide additional insight
into structure or function, such as Community-Based Organization (CBO), Grass-Roots
Organization (GRO), or Membership Supported Organization (MSO) (Fisher 1997).
Other designations in many ways add layers of ambiguity, including People’s
Organization (PO), Grass-Roots Support Organization (GRSO), Intermediary Support
Organization (ISO) and Quasi-Autonomous NGO (QUANGO) (Fisher 1997). Names can
also include funding streams- GONGO and DONGO refer to government organized and
donor organized NGOs.

The focus on many early NGOS was international development work but as the
number of NGOs has grown rapidly, so have their areas of focus (Schuller and Lewis
2014, Schuller 2007, Fisher 1997). NGOs have expanded beyond the “frontier” and into
western nations, where they provide welfare and social services in neoliberal
economies where government-provided services have decreased (Laws 2014, Schuller
and increasing connection to the government (such as GONGOs), the distance between
NGOs and governments can be hard to discern (Alvaré 2010). Moreover, many places
where there has been a proliferation of NGOs, governments and multi-national NGOs
can and do provide “official” status to NGOs working in a given locale (Alvaré 2010,
Schuller 2007).
Not only have NGOs grown in quantity and expanded the services they provide, but they have also “forged innovative and increasingly complex and wide-ranging formal and informal linkages with one another, with government agencies, with social movements, with… international NGOs, and with transnational issue networks” (Fischer 1997: 441). It is these relationships that are of great concern to anthropologists (Fischer 1997, Islam 2016). By studying NGOs, anthropology can better understand local and translocal linkages that allow for the movement of knowledge, money, and people (Fischer 1997). Beyond reconsidering how NGOs impact the flow of ideas and assets, the impact how anthropology views government. NGOs invite anthropology to reconsider conventional ideas of governance and Foucaultian notions of governmentality and control (Fisher 1997); the presence and work of NGOs effectively change the relationship between citizens, associations and the state (Fisher 1997).

One way in which NGOs engage the citizenry is through participation. The goal of participation is rooted in the 1960s and 1970s in both the west and the colonial world when activists demanded a change in the “social contract” including increased autonomy and participation in decision-making Schuller 2007). As early as the 1990s participation had been coopted as a buzzword of development and NGO work (Fisher 1997), and it is still alive today as will be discussed in the role of community participation and “Wonder Women” in this dissertation. There is concern amongst researchers that participation is little more than rhetoric in NGO function (Fisher 1997, Islam 2016, Schuller 2007, Burger 2015). In his work in Haiti, Schuller created a matrix to qualitatively measure participation in the work of NGOs (2007). This tool looks at processes NGOs use from an early discussion about the problems present in an area
through impact evaluation and then indicated if donors, NGO staff, and the target population had a role in that process (Schuller 2007). While participation is seen as a best-practice, the empirical evidence for this is scant (Burger 2015). Moreover, true participation and engagement are not free, nor even the cheapest means of working as an NGO (Burger 2015). The costs of participation and engagement are critical as NGOs are not inherently altruistic, and even as non-profit organizations, the bottom line is often in clear focus within NGOs (Burger 2015). As such, Burger claims that the best way to increase and ensure participation is through donor mandate, where NGOs are held accountable for ensuring participation on the local level (Burger 2015). This, though, is also imperfect; as will be discussed in this dissertation, funder mandates for participation does not mean that a truly engaged participation with the local community will happen.

Beyond the pitfall of less-than-true participation, an important critique of NGOs is that they potentially stand to reproduce the very inequality they are tasked with diminishing (Islam 2015, Peters 2016, Maes 2014, Mosse 2013, Uchiyamada 2004). Peters describes how many local NGO staff hide or de-emphasize their knowledge and skills to conform to International NGOs’ perceptions of local staff and gain employment and achieve professional goals (2016). In turn, the NGOs de-emphasize the role of these staff and often limit the ability of the staff to make decisions and lead on the ground (Peters 2016). Uchiyamada notes a similar de-emphasis of local knowledge in NGOs through the everyday process of professionalization (2004, Mosse 2013). By keeping indigenous knowledge in the lower-tiered, more junior employees and emphasizing their role as passive, these employees are made to feel that they are “a
cog in the bureaucratic machine” (Uchiyamada 2004: 6). These hierarchical inequalities lead to not only diminished roles and diminished recognition, limiting the potential of local NGO staff of achieving professional goals.

In relation to this idea of the professional in NGO and development work, the lives of aid workers can provide insight into the makeup of NGOs and their potential shortcomings. Development studies (and the study of NGOs) has, until recently, ignored the role of aid workers’ personal lives; this may in part be due to the supposition that aid workers enter the field for altruistic reasons and do not want their individual work highlighted (Fechter 2012). If personal lives of aid workers are examined, there are two core aspects of Fechter’s work that must be applied to the domestic NGOs in the United States: variability in agency and obligation (2012). First, it is important to note that not all aid workers have the same level of agency (Fechter 2012). Varying levels of agency mirrors the discussion above about local NGO staff versus international staff (Peters 2016) and the difference between junior and senior staff in recognizing the local (Uchiyamada 2004). Some aid workers based on the social status (in a local setting or their home) have a great amount of agency while others have very little (Fechter 2012). Bearing this in mind, Fechter calls for a ‘pedagogy of the non-oppressed,’ where those aid workers are trained to change their attitudes and practices toward those engaged in aid delivery (Fechter 2012). With this internal focus on improving the wellbeing of local aid workers and the agency of more privileged aid workers, change can be achieved (Fechter 2012).

In addition to reproducing inequality with local staff, NGOs can also reproduce inequality with their volunteers. Maes describes the substantial role and impact of
community health workers on the provision of care for HIV and AIDS patients in urban Ethiopia (2014). Although these volunteers provide a real, quantifiable service, they are expected to provide these services solely for their satisfaction (Maes 2014). The donation of work is not a point of shame or hidden from the public; one NGO advertised on posters that “Volunteers are not paid—not because they are worthless, but because they are priceless.” (Maes 2014: 97) This engagement of local skill that is only valued by external NGOs without remuneration just reproduces the inequalities that exist in urban Ethiopia.

Beyond employees and volunteers, NGOs can also reproduce inequalities in the populations they serve. Islam contends that while many NGOs focus on helping the poor, they have become biased towards helping the less poor (2016). While this may be perceived as going after the low-hanging fruit as it were, the lack of focus on the poorest only helps to marginalize further and increase the poverty gap for the poorest of the poor (Islam 2016). In Bangladesh this happens in micro-lending; NGOs did not provide loans to goldsmiths and blacksmiths as they were not guaranteed to repay loans, further increasing their debt (Islam 2016). The detriment to goldsmiths and blacksmiths was compounded by the fact that many programs other than micro-lending flowed through these NGOs and as a result the poorest of the poor did not “remained beyond these services” (Islam 2016; 109).

One final critique of note about the expansion and role of NGOs is the role of traditional, for-profit business in the NGO and development arenas (Mosse 2013). Under the guise of public-private partnerships and/or corporate social responsibility, for-profit agencies can play an active role in NGO service delivery (Mosse 2013, Idemudia
2011, Rajak 2011). Beyond ensuring that the role of business in NGO service provision is ethical—meeting local and international standards (e.g. conflicts of interest), there is also concern that role of business is appropriate (Idemudia 2011, Rajak 2011, Mosse 2013). Appropriateness of business in the non-profit provision of services relates to the agreement between the desires of the business and the local reality or need for such services (Idemudia 2011). Idemudia explains that a disjuncture between “global expectations” (the desired change of businesses) and local priorities has largely been a disjuncture between the global north and south (2011). These same ideas can be applied domestically, though, to a disjuncture between the desires of businesses and the “local” or on-the-ground reality of poverty in the United States.

The use of an anthropological lens to examine the provision of NGO services highlights many potential pitfalls for even the most well-intentioned NGOs. From valuing the majority over the lived experience of the minority to reproducing poverty through service provision, there are many areas where anthropologists can help to improve the provision of services by NGOs. This dissertation will examine the role of a rich network of NGOs in a small community and explore ways in which service provision could be optimized to fit local needs and respect the knowledge and work of local actors.

**Literature in Relation to the Research**

The context of the scientific literature is critical to both the contextualization of the research and analysis of data collected. A survey of childhood obesity interventions provides the importance of a cross-cutting, multilevel intervention (Bell et al. 2016, Berg et al. 2016, Community Guide 2009) which first drew me to my field site. The potential to evaluate an intervention that could apply the small assortment of evidence-based
intervention practices at a time when the incidence and prevalence of childhood obesity seemed to be growing beyond control was exciting and had the chance to make a real impact (Community Guide 2009). More than knowing what interventions are evidence-based, an understanding of the etiology of obesity and its interconnectedness with social structures is of great importance to guide observation and later data collection methods. Without the background of the social determinants of health and specifically obesity (Chaufan et al. 2015), the documentation the processes of community organization, activation through the work of Wonder Women, and gentrification would not have been possible.

This chapter provides a broad overview of the three crosscutting topics of this dissertation: obesity, poverty, and community. By bridging the theoretical gaps between these domains, it is possible to ground the observations made and data collected in The Neighborhood within the existing literature. I will use the ideas presented in this chapter throughout the rest of the dissertation as means to both ground my work in anthropological thought and advance the discipline’s understanding of these topics in relation to each other. Additionally, I will extend these ideas from the literature into new areas— in particular, Wonder Women and a unique variant of gentrification from within.
CHAPTER THREE: SETTING
This chapter examines the setting of this dissertation research, The Neighborhood, Southern Town, USA. This description includes previous research I have conducted in the community, the need for this research, a description of the community’s demographics, and a review of the community’s history that is pertinent to this research. By more closely examining the setting of this research a clearer context emerges. This chapter also allows for some level of reflexivity about my role as a researcher and in the community in general.

Why The Neighborhood?

Research for this dissertation was conducted in The Neighborhood, neighborhood of Southern Town. I chose this location to explore community-based childhood obesity prevention because of my previous research in this community. In July 2008 I was hired by the State Prevention Research Center (an office funded by the United States Centers for Disease Control and Prevention) as the evaluation coordinator for the State Childhood Obesity Prevention (SCOP) project. SCOP had been funded to promote childhood physical activity using a community-based intervention translated from the VERB Summer Scorecard intervention (VERB is not an acronym, but a trademarked social marketing brand) (Bryant 2007). The goal of the SCOP project was to mobilize an already active community with interest in child health to create a sustainable intervention that utilized pre-existing assets and outlets for physical activity in the community.
The SCOP research project took place at two elementary schools in East Southern Town—The Neighborhood Elementary and Rockland Elementary. The research employed a quasi-experimental design with a third school hosting an exergaming intervention (exergaming uses video gaming technology like the Nintendo Wii and gaming software such as “Dance-Dance Revolution” to increase physical activity). Finally, one school received no intervention in year one and served as a control. Researchers chose the three intervention sites and the control site as they were determined to have significant risk factors for childhood obesity based on data from the local school district’s office of physical education. Additionally, with the correlation between poverty and obesity (Levine 2011, Hoeforth and Curtin 2005, Pena and Bacallao 2000), this added to potential impact the intervention could have.

The initial project ran in the 2008-2009 academic year and had a mixed methods design with quantitative data coming from a pretest, posttest and follow-up assessing levels and enjoyment of physical activity with third, fourth and fifth-grade students at all four schools (two Scorecard intervention, one exergaming intervention, and the control). In addition to these surveys, a coalition—The Kids Action Network—was formed to bring together a group of community members and community organizations interested in translating a social marketing-based physical activity intervention. This coalition, along with researchers from the Southern University, conducted individual interviews with teachers, administrators and parent/child dyads (DeBate et al. 2011). In addition to these interviews the coalition collected quantitative and qualitative data on physical activity outlets in the community using an adapted form of the Physical Activity Resource Assessment tool (Lee et al. 2008).
Informed by these data, a culturally specific intervention aimed at increasing physical activity in 3rd, 4th, and 5th-grade students in these communities was implemented. Using interview and Coalition data, the intervention was tailored to the local community. Tailoring included finding the types of physical activity outlet would be best suited to get children active as well as details about the Scorecard and tracking physical activity. There was a prolonged focus on how tracking should occur, (e.g., who can vouch for a child’s activity, how often a parent can vouch for their child’s activity, ways to engage with local activity outlets who would be a part of tracking, etc.). This intervention was translated from the Scorecard intervention created by Bryant et al. (2008) in urban Kentucky.

This intervention helped children (and their parents/guardians) find existing opportunities to be physically active, such as a neighborhood park, as well as reduce barriers to existing physical activity outlets (such as free nights at roller skating rinks and free or reduced registration to local child sports leagues). In addition to helping children find places to be physically active, the intervention included a tracking mechanism for physical activity – a small card, or “Scorecard,” where physical activity outlets could mark that a child had been active.

The work to construct, implement and evaluate an intervention led to over three years of employment and personal involvement in The Neighborhood community. The connections made during this time and the research base established made The Neighborhood an attractive field site for my dissertation research.
Location

The Neighborhood is located in the northeast quadrant of the City of Southern Town, USA and is a part of a collection of neighborhoods referred to as East Southern Town. This area is both a neighborhood in Southern Town as well as a federal census tract. The only difference between the neighborhood and census tract is that the neighborhood includes a community pool in the southwest corner of the neighborhood while this is not included in the census tract.

As of the 2014 American Community Survey by the US Census Bureau, Southern Town is an urban center in the State with approximately 348,000 residents in the city limits and over 4.3 million residents in the metropolitan statistical area (US Census Bureau, 2014). While residents debate the exact level of a sense of community, The Neighborhood is a clearly defined geographic space, unlike many other East Southern Town neighborhoods. The Neighborhood is designated by the US Census Bureau as Census Tract 7, Any County, USA. Census data indicates that The Neighborhood has roughly 6,000 residents living in a one square mile area (US Census Bureau, 2014).

The population is 62.2% African American/Black and has a high number of individuals and families living below the federal poverty line - 48.2 percent, compared to 28.5 percent in the greater Southern Town community (US Census Bureau, 2014). This already high level of residents living below the poverty line is compounded when we look at these statistics by race. For example, 63 percent of Black of African American households receive Supplemental Nutrition Assistance Program (SNAP) funds while only 33.3 percent of white residents qualify for SNAP funds (US Census Bureau, 2014).
Poverty is apparent in income disparity in The Neighborhood. Twelve percent of households have an income greater than $50,000 and more than 60 percent of households have incomes of less than $25,000 with a median income of $20,469. Such a high rate of poverty is indicative of one common theme that has emerged from my research, which is that class may be as divisive an issue in building community in The Neighborhood as race. Class-based division can be seen in the divide between the short-term and long-term residents; these groups are racially similar in their makeup but have varying SES/class status. The long-term residents are predominantly homeowners who have lived in the neighborhood for many years and are passionate about revitalizing the neighborhood. The short-term residents are predominantly renters who move between the low-income housing options in the neighborhood and the surrounding area. The percent of residents who rent in the neighborhood is twice the percent found in the greater city in which the neighborhood is located (US Census Bureau 2014). Below are tables which provide important demographic information from the neighborhood. As the neighborhood is also a census-defined tract, obtaining specific data from many government sources is possible.

**History of The Neighborhood**

The area known as The Neighborhood emerged around 1900 as one of The State’s first tourist attractions as a result of the natural springs located there for which is still known (Feldman and Hathaway 2002). Development of The Neighborhood began in the early 1900s when an entrepreneur built bathhouses and accompanying amenities for the tourist attraction including a pool, fishing pond, and walking trails around the springs, all of which were segregated and did not allow African Americans to use these
facilities (Planning Commission 2004). By 1920, the original entrepreneur had sold much of his land in The Neighborhood to a real estate developer (Planning Commission 2004; Armstrong & Jackson 2007). This developer further built an infrastructure for tourism including an alligator farm and a large arcade which included a resort hotel, bank, and other amenities (Armstrong & Jackson 2007; Arney 2012). This arcade became the hub of activity in the community (Armstrong & Jackson 2007). In addition to these new tourist amenities, the development of The Neighborhood included two landmarks that would ultimately become central to a The Neighborhood identity: a Tower and The Neighborhood pool (Planning Commission 2004; Armstrong & Jackson 2007).

The Neighborhood saw considerable residential growth in the 1920s and early 1930s as middle class, white individuals, began to develop the area. In addition to this development by whites, a section of The Neighborhood known as ‘The Hill’ developed as a farming community for African Americans in the northwest section of The Neighborhood (Planning Commission 2004). ‘The Hill’ name still exists today in contemporary The Neighborhood. While this farming community solidified The Hill as an area inhabited by African American Southern Town, the African American residents of The Hill were widely excluded from the attractions in their own neighborhood due to segregation (Jackson 2009). Segregation and bias were so powerful that in the 1920s and 1930s The Hill was excluded from The Neighborhood community to the extent that The Hill was viewed as its own neighborhood (Jackson 2009).

The state was an early adopter of segregation laws, and these laws had impacts on African American communities throughout the state. (Meier and Rudwick 1969).
These segregation laws meant that the African American community was physically separated into insular enclaves (Mirabal 1993, Greenbaum 1998). As the efforts of the civil rights movement were realized, the city began its urban renewal process which first demolished many African American communities and then forced desegregation (Greenbaum 1998). The urban renewal process then began to replace affordable housing units that had been available throughout the city with new units in The Neighborhood. These new affordable housing units were primarily unadorned, concrete block duplexes and were seen as undesirable (Feldman and Hathaway 2002).

For its first thirty years, The Neighborhood was highly successful and economically viable, but this began to change with the economic downturn of the Great Depression; a flood exacerbated this in 1933 that nearly destroyed the area’s facilities (Feldman and Hathaway 2002). Due to the economic depression and loss of infrastructure, The Neighborhood entered a period of decline.

After an initial period of success in the early 1900s and a period of decline in the 1930s, The Neighborhood experienced a cycle of ups and downs, interest and involvement, followed a lack of support from the city, county, and state (Feldman and Hathaway 2002). One such boom period occurred during World War II. The Neighborhood underwent a period of revival due to the influx of military personnel seeking affordable housing in the area (Feldman and Hathaway 2002). In the late 1970s, the City of Southern Town created a community development plan in an attempt to “revitalize” the neighborhood’s houses which had been built mainly to accommodate seasonal tourists (Feldman and Hathaway 2002). This revitalization plan removed the historical seasonal housing units that had fallen into disrepair and replaced them with
low building cost, less desirable, concrete-block houses and duplexes (Feldman and Hathaway 2002). Whatever the intent of city planners (which is beyond the scope of this dissertation), this “revitalization” project in many ways lead to the future blight of the community by creating undesirable housing and helping to create a pattern of transitory residents who do not live in the community for extended periods of time. This cycle of population movement became important to understanding community building and will be addressed later in this dissertation.

In the late 1990s, The Neighborhood was the subject of another attempt to revitalize poor communities. In 1997 the Southern Town Housing Authority received a $32.5 million HOPE VI grant from the US Department of Housing and Urban Development (HUD) to demolish two large public housing units and replace them with mixed-income housing (Feldman and Hathaway 2002). The HOPE VI program allowed housing authorities across the United States to demolish public housing units and rebuild them with new mixed-income units (HUD, KCHA, Greenbaum 2001). The effect of the HOPE VI program is to deconcentrate poverty. The deconcentration focus of housing policy that drives HOPE VI is embedded in the belief that concentrated poverty creates more poverty. The mechanism for this being children who only know life in poverty and do not have the knowledge, skills, and connections to “escape poverty.” This view of poverty perpetuating poverty is tied to Lewis’ notion of the “culture of poverty,” except the current model “invoke(s) social capital… instead of enculturation, with public housing exemplifying a state of social bankruptcy” (Greenbaum 2001: 2). Deconcentration extends to claim that if poor (black) people could only have wealthy (white) people to look up to and emulate, they could lift themselves out of poverty.
HOPE VI adopts Wilson’s view of “social disorganization” which devalues the social organization of public housing residents under the assumption that these social interactions can only create negative social capital (1987, 1996). This idea of “social disorganization” in poor communities sets up a social capital dichotomy between poor communities and wealthy communities that diminishes the notion of social support and the value of stability in poorer communities (both of which are seen as positives and indicators of wellbeing in wealthy communities).

As a result of the HOPE VI grants in Southern Town, The Neighborhood received more than 60 relocatees from old public housing sites (Feldman and Hathaway 2002). The majority of HOPE VI relocatees moved into other public housing units or rentals that accept Section 8 “housing choice vouchers” (Feldman and Hathaway 2002). In The Neighborhood, the only option for subsidized housing was Section 8 as no public housing units exist in the area. The issue of Section 8 housing and temporary residents (often referred to in a negative fashion as renters or movers) may be the most commonly repeated theme I experienced in my work in The Neighborhood, indicating a substantial divide in the community which I will examine in this dissertation.

On my very first visit to The Neighborhood, a key informant provided me with a windshield walking tour of the area and introductions to several gatekeeper community members. In November 2008, the issues of a divide between short and long term residents emerged multiple times over the course of the afternoon. The concern presented to me that day focused on established community members’ belief that renters (ostensibly including Section 8 recipients and HOPE VI relocatees) did not have
a sense of pride in The Neighborhood and therefore took less care with their homes and were less involved in the community.

Amidst the economic crisis of 2008, known as the great recession, there was yet another wave of outside involvement in The Neighborhood. While on the aforementioned windshield walking tour of the neighborhood lead by a former resident and current service provider in the neighborhood, HUD signs were posted in front of many abandoned residences which had been foreclosed in the housing crisis. In 2008 the City of Southern Town applied for $13.6 million to deal with a large number of abandoned, foreclosed homes (Zink 2008). Southern Town’s mayor allocated these funds to purchase 110 abandoned, foreclosed homes primarily in The Neighborhood (Zink 2008). Of these homes 40 were scheduled to be renovated and sold, 40 were slated to be torn down and rebuilt, and 30 were to be made available to renters (Zink 2008). It is unclear how this most recent attempt to ostensibly revive The Neighborhood will impact the community.

**The Neighborhood Elementary School as a Community Hub**

The Neighborhood elementary school is the main hub for this research. I used the school as a hub because it is in many ways the non-geographic center of the neighborhood. The school houses the YMCA (a key partner), it is a center of activity for children in the community, and is a center of prevention activities and service provision to residents (e.g. food bank, job seeking, library). The school served in many ways as a center of the community as it houses the public library and there are several adjacent spaces open to the community. The school houses many of the out-of-school time care facilities that serve the area and would ultimately be partners in the research.
Additionally, the elementary school is relatively close to the physical center of the community.

The Neighborhood and its school today are racially concentrated with high percentages of its residents living in poverty and unemployed (US Census Bureau 2014, Feldman and Hathaway 2002). This racial concentration is present in the elementary school, with 80 percent of students identified as “Black/African American” according to US Census categories (US Department of Education 2008a). The Neighborhood Elementary School is a Title I school which offered pre-kindergarten through fifth grade (now eighth grade) classes. The high rate of poverty and unemployment in the neighborhood is mirrored by the fact that over 87 percent of students are eligible for free breakfast and lunch (US Department of Education 2008a).

The Neighborhood Elementary school has seen many repercussions from the institution of No Child Left Behind (NCLB). From 1998 to 2001 The Neighborhood Elementary received a rating of “D” for its overall school grade and from 2001-2002 through 2005-2006 the school received a grade of “C”. The following two consecutive academic years (2006-07 and 2007-08) the school received a grade of “F” (Florida Department of Education School Accountability Report 2008). With the “double F” record, under NCLB, class sizes were reduced from 23 to approximately 15 in 2008, with a student-teacher ratio of 16.4:1 (US Department of Education 2008a). The F designation allowed parents more options to send their children to other schools in the area (US Department of Education 2008b). While touring the community in November 2008, we saw many school buses- all of which were bringing children home whose parents had chosen to send them to a different school. All of the children on buses were
known to go to other schools as the county school district does not provide busing for children who attend The Neighborhood Elementary due to the small geographic area of The Neighborhood.

With a “double F” rating, many parents, teachers, and administrator feared that the school would be closed down. In addition, a key informant who led the tour of The Neighborhood and who is housed in the school’s main office noted that there was a 75 percent turnover of teachers at the school in 2008, in addition to having a new principal for the third year in a row. This turnover is most likely related to the continued poor performance of the school and the “accountability” of teachers and administrators in NCLB (US Department of Education 2008b).

*The Southern Town Metropolitan YMCA*

With changing funding priorities and the indication from the Kids Action Network that there were more than enough services for children (and not enough for older youth and adults), the SCOP program was not renewed. With this change, I had considered conducting my research in another community that I would potentially be working in with the new focus of the research center that housed SCOP. During this period, I was approached by a local non-profit organization, the Southern Town Metropolitan YMCA, and was asked to work with them on a new initiative funded by a major health insurance company foundation, the *Embrace a Healthy State* campaign. This campaign targeted several communities across the state that had identified childhood obesity or related issues as a community concern. The intended impact was to curb the then rising rates of childhood obesity in the state.
Initially, my only connection with this campaign was that I was asked to share data I had helped collect as a part of the SCOP evaluation on child physical activity levels. When the Southern Town Metropolitan YMCA received a sizeable grant to conduct community-based childhood obesity prevention, I was approached again to see if I was interested in working with the group on their initiative as an evaluator. There was an extensive period of discussion and reflection with my contact from the YMCA, my dissertation advisor and myself about the impact of being paid to conduct my dissertation research- primarily as this meant that I would be funded by (and in a way beholden to) the YMCA as a contract employee. I ultimately decided that it was in the best interest of the research study to remain independent and not paid by and beholden to a funder, but to take on a key role as an evaluator volunteering my time. This decision was imperfect, as will be seen later in this document, but I believed it was the only way to ensure relative freedom from funder’s constraints while providing access to this obesity prevention initiative.

This chapter provides the background necessary to understand the community in which I entered to conduct my dissertation research. Many factors including geography, demographics, community structure, and economic structure both guided the research process and informed my analysis of data. The next chapter of this dissertation examines the literature relevant to topics addressed in my research and analysis. This chapter on the setting of the research and a chapter on the review of the literature provides the foundation of which data collection and analysis occurred.
The Role of CBOs in The Neighborhood

The Neighborhood has many community-based organizations (CBOs) operating within its boundaries. These CBOs range from large, multi-million dollar, not-for-profit agencies such as the YMCA, to very small organizations with one to one and half full-time equivalencies of staffing. As CBOs/nonprofits/NGOs increasingly provide the services that governments once provided, there has been an increasing need for CBO-based services in The Neighborhood (Mendoza and Vernis 2008, Smith and Lipsky 2009). This shift from government assistance to CBO services can be seen in the provision of food and nutrition-related services.

One of the CBOs that was a part of this research and a part of the working groups (discussed below) was the local food bank agency. This agency had grown from a local food bank into a member of a national network of food banks that provided multiple other food and nutrition services such as school breakfast, school lunch assistance, and out-of-school-time care food augmentation. While there is a rich history of food banks working in tandem with the government to fill emergency gaps in food availability (Koc et al. 2008, Caraher and Cavicchi 2014, Mabry 2011), the role of the food bank agency had grown to fulfill roles once filled by the federal, state and local governments.

In addition to food bank/nutrition services CBOs that are present in The Neighborhood, many agencies are working to affect positive change in the community. These include literacy focused CBOs, physical activity/sports focused CBOs, arts (including visual arts, musical arts, and theater arts) focused CBOs, mentoring-focused CBOs, CBOs that provide out of school supervision, tutoring/education focused CBOs,
social and legal advocacy CBOs, employment-related CBOS, and heritage/education CBOs. To give an idea of the scale, there were eleven CBOs who worked with the researcher in guiding the work of the CBO tasked with passing-through funding agencies. In addition to these eleven CBOs, there were another six CBOs that received pass-through funding in the mini-grant process described below. These seventeen CBOs served the roughly 6,000 residents (ACS 2009), of which the majority of these CBOs focused on children who comprised 18.2% of The Neighborhood population (ACS 2009).
CHAPTER FOUR: METHODS

This chapter discusses the methods utilized in this dissertation research. The methods are divided into two phases. The first phase consisted of participant observation, asset mapping, and constructing a community-based survey under the premise of collecting baseline data for a community-based childhood obesity intervention. After analysis of the survey data was completed the focus of the dissertation shifted to examine the mismatch between this large, supposedly community-based initiative and what the community wanted. To better understand how this happened, I set out to understand how the idea of community is created in The Neighborhood and how the work the neighborhood wants to undertake gets done (phase two). Methods to address this question included participant observation and semistructured interviews. Methodologically speaking the research evolved from an applied evaluation anthropology dissertation to a much more traditional ethnographic study. The methodological process can be seen in figure two below.
Initial Research Questions

The initial focus of the dissertation was to be an evaluation of a multi-level childhood obesity intervention. To build a baseline for the research beyond the data I had collected in my previous research in The Neighborhood (see chapter three), I completed seven months of participant observation. After three months of participant observation, I began to apply the knowledge gained to conduct unstructured interviews and begin asset mapping. Twenty-three unstructured interviews with community leaders, non-profit service providers, and community residents were conducted and focused on the perceived need of a childhood obesity intervention and the existing structures that could support said intervention. This work was to build the foundation to examine three early hypotheses of this dissertation:
H1: Structural issues will play an important role in child nutrition.

H2: Peers, social networks, and prestige will greatly influence children’s food choices.

H3: Using Action Research and participatory methodologies will provide a richer, culturally specific understanding of child nutrition.

**Participant Observation**

Participant observation was conducted using Bernard’s (2011) description of participant observation. This definition expands on earlier definitions like those of Marshall and Rossman (1989) who describe participant observation as "the systematic description of events, behaviors, and artifacts in the social setting chosen for study" (79). Bernard’s approach to participant observation includes a wide array of activities including natural conversations with informants, unstructured interviews, checklists, questionnaires and other methods that would not be seen as intrusive (2011). In a review of participant observation methodologies, Kawulich describes Bernard’s method of participant observation as “impression management” (2005).

In many ways, impression management best describes one of the two overarching goals of the early participant observation work completed as a part of this dissertation. As with all participant observation work, one goal was to be present and active in the community at the same time being as unobtrusive as possible while making systematic observations. It was critical to re-establish myself in the community; I had spent three years working in the neighborhood as a recognizable employee of a research center. When the research center I worked for moved from its focus on direct childhood obesity intervention to look at health policy formation in Kentucky, it was
perceived that millions of dollars in funds over several years was taken from The Neighborhood. While this was not quite true regarding monetary scale, it was irrelevant as that was not the widely accepted perception. Residents and service providers alike perceived me as part of a group that left the community with little to nothing to show for their support in previous research. As discussed in chapter two, The Neighborhood community has been the focus of much research in the past, often with little perceived (or actual) benefit to the community (Arney 2012, Sabogal 2013). This sometimes tenuous relationship with researchers has bred distrust between the community and those who are looking to study the community for their personal gain (such as a degree, tenure, or for grant funds). It would have been disingenuous to distance myself from the group that left as I was still employed by the research center and instead focused on being as visible as possible (and appropriate) at every community event as well as just “hanging out” in the community whenever possible.

The issue of my employment and the change in research focus of the center I worked for came up in virtually every interaction with service providers and long-term residents. Questioning ranged from the polite “whatever happened to the SCOP research project” to direct confrontations where I was accused by gatekeepers of using The Neighborhood to meet my needs and leaving the neighborhood no better than I had found it. In all instances, I explained that funding priorities had shifted which caused the research center’s focus to shift. I went on to explain my role in the work of the YMCA and that I was volunteering my time to provide evaluation assistance to the YMCA. In return, the YMCA was granting me access to the coalition and grant-making process of which the childhood obesity intervention consisted.
In an effort to diminish any distrust that may have existed my primary strategy was to be as present in the community as possible. This included all events related to the research, but also any community event I could attend including neighborhood association meetings, events hosted by non-profits, and just “hanging out”- talking with people waiting to pick up their children from after-school care or in other venues where I was able to observe unobtrusively and participate when appropriate. In the first phase of the research, research-related events included coalition meetings, community survey town hall meetings where the survey was constructed, and small events about local food.

Other community events that I attended included back to school fairs, library events, community fundraisers, parks and recreation events, and many others. The goal of attending these events was primarily to be seen, and, when possible, to be seen as helpful to the community. In addition to being seen, these opportunities were used for informal, unstructured interviews. Unstructured interviews started, at first, as small talk to make sure that community gatekeepers knew I was present at the event and slowly turned into unstructured interviews of increasing length to discuss questions as they arose during my time in the community. While the commitment of time spent in the community was one way to overcome the barrier of distrust, it was also clear from discussions with fellow researchers in the community that the time commitment trust building would take was on the scale of years.

My relationship with the YMCA meant that it was possible to have greater access to and acceptance from many of the non-profits. As briefly discussed in the introduction, my prior work as the evaluation coordinator for the Statewide Childhood Obesity Project
(SCOP) and the relationships I was able to build during that time with The Neighborhood Elementary and with local non-profits lead to my connection with the YMCA. Initially, I was contacted by the YMCA and asked to share data from the SCOP study for use in a grant application for the Embrace a Healthy State Initiative. When the YMCA was awarded the grant for an initiative to prevent childhood obesity by strengthening existing resources for physical and social well-being using a coalition-based model in The Neighborhood, I was invited to join their team as a local, quasi-internal evaluator in addition to the evaluation happening at the funding foundation level.

The grant’s foci were to be solidified by the community in a community-based process, but the funder was hopeful that the grantee would work on the many areas that impact childhood obesity including nutrition, physical activity, the built environment, safety, and policy. This type of approach was in line with The Community Guide’s recommendation (as discussed in chapter three) and the literature in general about making impacts on the incidence and prevalence of childhood obesity.

When the grant was awarded the YMCA identified a need for a local evaluator at the YMCA, and I was asked to take on this role by my key informant. It was my hope that by volunteering with the YMCA as an evaluator I would have better access to those working in the community and ultimately the populations with which they worked. This avenue of access had its strengths and weakness, which is examined in greater depth in a later chapter.

**Constructing an Asset Map**

One of the requirements of the grant was the creation of a community coalition to help lead the work of the grant in a community-based if not participatory fashion. The
YMCA coordinated and convened a coalition composed of community members, community leaders, and local non-profit employees. The YMCA was uniquely poised to lead a local childhood obesity prevention effort in The Neighborhood, as it was already running comprehensive programs aimed at obesity prevention. This focus is, in fact, why the YMCA was identified as the umbrella agency for this process by the funders.

The Creating a Healthier Neighborhood for Kids (CHNK) initiative emerged from a collaborative process. Early in the first year of funding, the YMCA staff attended the meetings of The Neighborhood Action League Neighborhood Association as well as other community groups’ meetings and met with local nonprofits working in the neighborhood to raise awareness about efforts related to childhood obesity and to develop the coalition.

Among these stakeholders that formed the coalition, a core group that was both passionate about childhood obesity and able to dedicate regular time and effort came together to form a task force that would steer the Creating a Healthier Neighborhood for Kids (CHNK) initiative. This core group that would ultimately become the steering committee consisted of fifteen members, primarily consisting of local non-profit employees working in the community as well as a city official and two residents.

It was a desire of the YMCA, the funder, and myself for the survey process and the work as a whole to be as community-based and participatory as possible. The process utilized to create and launch a community-based survey was threefold. A community asset map was wanted to both guide the future work of CHNK as well as to have as a resource for to those who took the survey. In addition to the asset map, the survey itself had to be constructed. Finally, a team of community members and
volunteers had to be trained to collect survey data as well discuss issues of importance with the survey participants.

I was asked to complete the asset mapping portion of the survey roll out. Initially, this was intended to be a participatory process with residents and local non-profit employees engaging in the research process. Due to the time constraints of the funding agency, though, this task largely became an individual research task. While this was not the participatory ideal that was hoped for, as a part of my early participant observation I had conducted several mapping exercises that could inform the work; all sites identified as potential community assets were reviewed by local non-profit employees as well as community members.

In compiling sources for an asset map, three sources of data were utilized: participant observation and community mapping data from my early work in the community, physical activity resource data from my work on the SCOP project, and a list of community resources prepared by the YMCA. A key informant provided me with a windshield walking tour of The Neighborhood. This driving tour of the community helped to both expose me to some key community assets but to also situate them relative to their distance from key community place markers, mainly the elementary, the water tower, and two large parks. After the tour, a map was drawn into field notes with key place markers and assets.

From this initial map, unstructured interviewing was completed with community residents, and local non-profit employees to both confirm that services and resources identified on the windshield walking tour were indeed perceived as assets to the community as well as to identify places I had not yet identified. Armed with the data
from the unstructured interviews, I continued community asset mapping on foot. This mapping was done in a systematic fashion. The one square mile area of The Neighborhood was divided into quadrants, and each quadrant was then observed on foot a minimum of four times. Periods of observation included weekday morning observation, weekday afternoon/early evening observation, weekend morning observation, and weekend afternoon/early evening observation. As these resources such as parks, clinics, and convenience stores could potentially be used or unused based on the time of day and day of the week, it was critical to observe them systematically across the variable of time. As many of the community resources I was interested in were outdoor locations for physical activity, it was clear that seasonality would likely play a role in the use/value of resources. All observations were conducted in the late summer; to minimize the impact of seasonality informal interviewing about the use of these resources was utilized as well as triangulation with other data sources on community assets as described below.

Data was also utilized from the SCOP work done by myself and other researchers on staff to help build my asset map as well as identify areas for potential intervention with the coalition. This work has been published in the Journal of Community Health (DeBate et al. 2011). Physical activity resource asset mapping was conducted using the Physical Activity Resource Assessment (PARA) tool for all physical activity resources within a three-mile radius of The Neighborhood Elementary. (Lee et al. 2005; DeBate et al. 2011). The PARA tool requires the rating of community resources across 25 elements: 13 elements are features of physical activity (e.g. tennis courts and playgrounds); the remaining 12 elements are amenities (e.g. water fountains
and trash cans) (Lee et al. 2005; DeBate et al. 2011). These 25 elements are rated on a three-point scale of 1/poor to 3/good with a 0 indicating that the element was not present (Lee et al. 2005; DeBate et al. 2011). In addition to the 25 elements rated at each resource, nine incivilities are identified and measured on a similar three-point scale; examples of incivilities include sex paraphernalia and evidence of vandalism (Lee et al. 2005; DeBate et al. 2011). Finally, DeBate et al. conducted parent-child dyad interviews with individuals who lived in the community for a minimum of three years and who utilized these resources to seek confirmation of the scoring of resources which was conducted by graduate students of differing class and ethnic backgrounds than most residents of the community (2011). For the purposes of the creating an asset mapping for my dissertation research, I included all of the resources located within the bounds of The Neighborhood, including those that create boundaries/align with boundaries such as Ranger Park and The Neighborhood pool. With one of the goals of the larger project funded through the YMCA being the repair and support of existing resources, it was critical to map the entire neighborhood and assess physical activity outlets at this early stage for potential comparison later.

The YMCA also provided a list of community assets whose origins had been lost. It was originally thought that this list came from a local non-profit, but after discussing the asset list with this group, it was clear that they had not created. The origin of the asset list and the confusion around it was attributed to community researchers; as best as anyone could tell the asset list was the result of some research or class project conducted in the community that did not particularly benefit the community. The lost knowledge of the origins of the asset list highlights the constant influx of researchers
and student volunteers in the community who, whether well intentioned or not, have made community residents feel like they are under a microscope with no benefit to themselves and local non-profits feel as though they invest in research and university partners with little in return. The main difference between this YMCA list and the other two sources was the inclusion of local places of worship.

Using data from the resources above, a list of potential community assets was created. The list included service providers, churches and other local resources (such as parks, libraries or other amenities). This asset list was then vetted with local non-profits. All known non-profits working the community, regardless of their engagement the YMCA, were contacted via email with phone call follow ups. These non-profits were asked to review the list by doing the following: 1) identify resources that had been missed, 2) identify resources that had closed or were no longer present, 3) list any concerns that may exist related to the identified community resources.

Soliciting feedback from other non-profits working in the neighborhood was harder than I initially imagined, even with the call for a review of community assets coming from my key informant. E-mail and phone solicitation for feedback were not enough for most service providers. I ultimately met with four service providers individually to go over the list of assets, and this was combined with e-mail feedback from three different service providers. It was clear from feedback that the list of assets was comprehensive. No new community assets were added, although several small businesses (e.g., a karate studio) were removed as they were identified as closed or not geared toward residents of the neighborhood. Many small businesses related to physical activity on the North and West boundaries of The Neighborhood were noted by
service providers as being “unfriendly” to residents of The Neighborhood or only used by college students to the North and middle to upper-class families to the East. While these were removed from assets maps at the recommendation of service providers, they were retained in a separate list to be approached if the coalition intervention ultimately overlapped with the services they provided.

More than review by service providers, the assets identified needed to be vetted by community members; both for accuracy and to identify those assets which were most important to be included in a small scale asset map that would be provided as a part of the community canvassing and survey process. A small, easily-printed asset map was used for canvassing as opposed to a larger scale online map that was also created. Using a series of three CHNK town hall meetings and two regular coalition meetings residents were recruited to vet assets, in the hope that places and services identified by researchers and local service providers were seen as valuable assets to residents of the community.

An early afternoon town hall meeting had six residents in attendance, the early evening town hall meeting had twelve residents attend and the third (weekday) meeting had three residents attend. After vetting assets with the community, the small scale and large scale asset maps were prepared for use in the community canvas/survey. Figures two and three below show examples of the redacted versions of these asset maps. These maps have been blurred to help protect the identity of the Neighborhood, but are included to give an idea of scale and feel for the two versions of the asset map.
Figure 2 Online Large-Scale Asset Map Sample (Blurred)

Figure 3 Asset Map Used in Community Canvassing (Blurred)
The Pathway to a Community-Based Survey

It was initially my intent to create a community survey consisting primarily of validated scales so that comparisons could be made with known data sets. The draft also included the addition of specific grant-driven questions. Early drafts of this survey were met with concern by the CHNK steering committee. It was felt that the questions were too “research-y” and that they would be off-putting to residents who were asked to answer the questions. This concern matched my experience in the community as well as the literature on work in the community which emphasized the feeling of being over-researched and how this can foster distrust between community members and researchers (Arney 2012, Sabogal 2013). Even so, I felt it was still critical to have data that could be used to make valid comparisons.

The CHNK steering committee envisioned the survey as first and foremost a means to introduce ourselves to the committee while collecting some baseline background information from community members. Moving forward with this idea the steering committee created a draft survey. As a member of the steering committee, I encouraged the use of standardized questions where appropriate, and these were sometimes used in areas such as fruit and vegetable consumption and physical activity levels. The steering committee broke the survey down into nine topical areas: access to health foods; parent and family habits; childcare and schools; the physical and built environment; screen time; the local neighborhood association; and general health concerns/access to health care.

After several revisions by the committee and myself as a skilled researcher, the draft survey was shared with anthropology colleagues familiar with the area for
feedback. Finally, over series of three open community meetings, residents were able to provide feedback. In these forums there was a total of 22 resident participants who provided feedback; while this may seem like a small number, all local non-profit staff members were very pleased with the turnout. There is certainly a self-selection bias of participants; this was mitigated by trying to capture new residents to provide feedback. To do this, one meeting was held in The Neighborhood Library immediately following an unrelated community event. The presence of free lunches in the CHNK survey review meeting enticed approximately ten community members who were completely new to the process stay and participate.

Incorporating feedback from all three review sessions a final version of the community canvassing survey was agreed upon. In this agreement, it was decided that survey should be no longer than one page, front and back. This length would both limit the burden on residents completing the survey as well as allow enough time to reach as many residents as possible on canvassing day. A copy of the survey can be found in Appendix C.

Preparing for Canvassing

To complete the community canvassing and survey in a timely fashion, it was clear that more than our core team of fifteen members would need to be involved. It was decided that volunteers could be recruited as a part of Martin Luther King Day “A Day On,” volunteerism. Due to external factors, the canvassing had to be rescheduled for mid-February 2011. Ideally, the CHNK steering committee wanted The Neighborhood residents to act as canvassers. Having resident-canvassers, both maintained the community-based spirit of the initiative, but also allowed residents to meet others in the
community. Additionally, the coalition hoped that resident-lead canvassing would increase: buy-in, willingness to listen to canvassers, and completion of the survey. Due to a need for more canvassers, outside volunteers were also recruited. Of the 40 canvassers, twelve were Neighborhood residents (roughly 30%).

Canvassers were required to undergo a four-hour training. This training included three main components: cultural sensitivity training, data collection basics including ethics, and safety protocol training led by the police department. The training was offered over three weekends and were managed by YMCA staff. To be eligible to volunteer all three aspects of the training were required, although it was allowed to partially attend the training one weekend and complete the training on a different weekend.

On the day of canvassing, there was one more brief training on safety and how to use walkie-talkies that the city police provided. The 40 volunteers divided into four teams of ten. Each team was given a quadrant of the neighborhood to canvas. Teams were further divided into pairs to begin canvassing. The use of pairs was both a safety measure as well as point of convenience for data collection. Canvassers conducted surveys orally; having a second canvasser available to record a community member’s responses as well as take any pertinent notes- including requests for more information- made the interaction feel more like a conversation.

**Revised Research Questions**

After analysis of the survey data which (presented in the following chapter), it became clear to me that The Neighborhood did not have high levels of support for a community-based childhood obesity intervention due to residents’ minimal interest in the
issue of childhood obesity as seen in survey results and brief informal interviewing. Changing the research focus from obesity prevention to an unpacking of the notion of community in a community-based project to better understand what didn’t work, new research questions needed to be established. The analysis of the survey data and participant observation data lead to the construction of three overarching research questions.

1. Who is a member of The Neighborhood community?
   a. How do race and class impact this?
   b. To what extent is community membership place-based?

2. How is the agenda of the community set?
   a. To what extent does the notion of “community readiness” from public health theory inform this?
   b. How does class guide the community agenda?

3. How is the community organized?
   a. Who will complete the work that is identified?
   b. Does the organization of the community reinforce the racial and class-based divides in the community?

To address these questions, a traditional anthropological approach was taken to collect data. Participant observation continued as it had previously, but guided by the new research questions. Unstructured interviewing was repeatedly used to help process ideas that arose from participant observation and to ultimately guide the construction of more-structured interview guides. Finally, semi-structured interviews were used to take
a more in-depth look at the questions and potential answers that emerged from participant observation and unstructured interviews.

**Participant Observation with the Coalition and Working Groups**

In this phase of the research, three main locations for participant observation were used: coalition meetings and events, community events, and as a part of the team tasked to award coalition grants to meet the goals set forth by the CHNK working groups. All of these locations proved to be fruitful. The coalition and work groups were very active in the period following the public meeting which shared results of the survey and the year-one report. The goal of the coalition, and the work groups, in particular, was to find the best way (i.e. the most culturally appropriate, neighborhood-specific ways) to spend the grant monies from the health foundation sponsor. Efforts were designed to meet the needs of the grant funder and ostensibly the community, although this could be questioned with the general lack of interest in childhood obesity by the community. The coalition met bi-monthly at this time, and the work groups met as needed - this often meant monthly, but sometimes more frequently as needs arose, such as attending a community event on their topical area.

As the coalition members debated and discussed their role and how they could impact childhood obesity, the coalition set the following goals for the community-based intervention. The goals set forth were to: increase healthy food options in The Neighborhood, increase safety in our play spaces, increase opportunities for people in The Neighborhood to interact and be involved, promote community health education, and increase healthy eating and active living for children and families. These goals were made using feedback from the community canvassing and the finalized work groups.
Table 1: Coalition Work Groups

<table>
<thead>
<tr>
<th>Final Work Group</th>
<th>Goal</th>
<th>Funding Priorities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Food &amp; Nutrition</strong></td>
<td>Increase healthy food options within the community.</td>
<td>Community gardens</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Farmers markets</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Healthy cooking classes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Foodbank services</td>
</tr>
<tr>
<td><strong>Community Outreach</strong></td>
<td>Increase opportunities for resident engagement.</td>
<td>Communications strategy</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Volunteer involvement plan</td>
</tr>
<tr>
<td><strong>Safety, Access &amp; Community Pride</strong></td>
<td>Improve neighborhood health and safety.</td>
<td>Access to safe play spaces</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pedestrian safety</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Community beautification projects</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Home health inspections</td>
</tr>
</tbody>
</table>

During a town hall meeting, the working groups were given revised overarching goals (See Table 5 above). Using these goals to guide their discussions, the workgroups were tasked with selecting funding priorities that would help the coalition achieve its goals. The funding priorities are also listed in Table 1. In Table 1 there are
only three workgroups listed; this is because only three of the six workgroups had the longevity required to reach consensus and recommend funding priorities. Some of the work groups merged, some changed focus areas, and some disbanded. Beyond the merging of work groups, the Health workgroup was folded into the Food & Nutrition and Safety, Access & Community Pride work groups, based on the participants' interest.

**Participant Observation with the Leadership Team and Granting Community Proposals**

The last area where I conducted participant observation was as a member of a seven-person leadership team that administered the granting process outlined by the original grant awarded to the YMCA to build the coalition and support the community in preventing childhood obesity. Over the course of the grant, there were three years of “mini-grants” administered by the leadership team. The leadership team consisted of myself, three senior staff members from the YMCA, a program manager and a financial manager from the funding agency, and a staff member from a local agency that funds various projects in the community. The leadership committee had approximately $300,000 to fund over three years.

When I was first approached to be a member of the leadership team, I was unsure as to whether or not I should agree. My key informant who recruited me felt that my knowledge of the evidence base on childhood obesity prevention as well as my evaluation experience would provide a much-needed perspective on the committee. After much deliberation about how much participation was too and ethical concerns about guiding the future of service provision in The Neighborhood, I decided to embrace the applied nature of my work and participation component of participant observation.
and agreed to be a member of the leadership team and review grant applications. I did, though, at every meeting (two annually for three years), reiterate my role as a researcher and that my experiences with the leadership team would be folded into my research.

**Semistructured Interviews**

Thirteen semistructured interviews were used to collect more focused and more emic data than was collected from participant observation and unstructured interviews. According to Bernard (2011), semistructured interviewing is more in-depth than unstructured interviewing due to the fact that semi-structured interviews follow a set list questions, asked in a specific order and which are open-ended. While the interview guide is a clear path to follow, semistuctured interviews provide the interviewer to follow leads as they emerge from the interview process, often through the use of probing (Bernard 2011). The proper use of an interview guide allows for “reliable, comparable qualitative data” (Bernard 2011).

Semistructured interviews were used with the coalition board members; according to Bernard (2011) this is the best method to collect data when talking to “high-level bureaucrats and elite members of society.” These interviews were conducted with the leaders of the Creating a Healthier Neighborhood for Kids (CHNK) Coalition, many of whom work excessive schedules and had little time for interviews. Knowing that outside my key informant and a few coalition members I knew I would be able complete unstructured interviews with at ease, the rest of the coalition leaders were likely one-time chances to interview and as such the focus of a semistructured interview was critical.
The interview guide consisted of sixteen questions broken down into four topical areas: participant background and role in The Neighborhood, Community Organization/Community Building, Community Readiness, and the CHNK Coalition. When approached via email or in person, participants were informed the interview would take over an hour; in the end, the interviews lasted much closer to two hours as participants were eager to share their experiences on the topic. Of the 17 coalition members (one of which included me), 13 were interviewed about their experiences using the guide; the other two had moved on from their work on the coalition and could not be reached at the time of the interview. Due to the change in dissertation focus, these interviews came late in the life of the coalition. While time elapsed and history may impact data quality, the fact that over one-third of interviewees had changed positions and almost no one had anything to lose by talking to me, interview answers were highly candid. A copy of the interview guides and probes can be found in Appendix D of this dissertation.
CHAPTER FIVE: RESULTS
This chapter examines the results of the previously described methods. The first phase of the dissertation which was initially created as an evaluation of a unique childhood obesity intervention gathered baseline data through the methods of participant observation, asset mapping, unstructured interviews and a community survey. After a change in focus to examine the role of the community, phase two data collection included continued participant observation, unstructured interviews, semistructured interviews and additional unstructured interviews. Analysis of all qualitative data was done by hand using both deductive in inductive coding techniques. Deductive codes included membership, agendas, community action, class, and gender. Inductive codes emerged from observation and early iterative analysis. Inductive codes included long-term resident, short-term resident, gentrification, and Wonder Women.

Asset Mapping Results
The asset map created from the process described above resulted in a map of over 50 community assets that was to be shared with neighborhood residents on the day of the community canvassing and community survey. The process of incorporating several layers of community feedback resulted in two main themes: safety and the role of churches as community assets. During the asset mapping process issues related to opposing emic versus etic perspectives emerged - resident and researcher views did not always match as seen below. The results also mirror the larger questions of this dissertation, specifically as there is a push across the social sciences and public health
for community-based research, what makes the community in community-based research and who can claim membership in a community?

The issue of safety created some unique differences between the researcher, local non-profit employee, and resident’s points of view. Community assets, in particular, some parks, created two very different points of view on safety. Areas considered to meet minimums for safety through etic observation and analysis were considered by some residents to be unsafe, or at least not safe enough to be assets. The same results were found by DeBate et al. when they compared their scoring of the PARA tool with feedback from parent-child dyad interviews (2011).

In both the work done by DeBate et al. (2011) and the feedback from this asset mapping process, the bar for safety was set by participants at the level of letting your children play there unattended (or with minimal supervision) as opposed to concrete physical safety/risk of harm (broken glass, unsafe playground equipment, etc.). For example, one parent was concerned about bullying in a park, and another resident, who was not a parent was wary of the activity teens at another playground. Concern over older youth in the parks does make sense as the DeBate’s work was specifically for a child-level health intervention and that the title of this project was Creating a Healthier Neighborhood for Kids. Independent researchers are not guaranteed to understand the social element of public space, even with multiple observation points at varying times. Additionally, it is hard to make judgments about the social environment- a group of kids in a park can be a positive or it can be a gang. While there is some level of observation that accounts for this, it is imperfect. It is unclear if the same review of community assets would occur if it were unrelated to children.
Another important differentiation between ideas of safety may have to with membership in the community. There was not a large enough group to reach any scientifically valid conclusion, but there was some level of disagreement between residents on how safe the community was. Some residents, like the ones described above, were concerned about potential drug-related activity and teens/older youth while others were more concerned about bullying. It appeared that these opinions broke down the residential dividing line of homeowner and renter or at least long-time resident and new residents- the former have older (or no) children, the latter are more likely to have young children.

The majority of participants were long-time residents and homeowners. Not surprisingly the ability to participate in community-based initiatives, even when meetings take place outside of business hours, is difficult for most people, but it becomes especially difficult for residents who live at or below the poverty line and often work more than one job to make ends meet. One participant at a town hall to create the community survey indicated that they initially only attended the meeting for the free meal that was provided. There had been an adult education class in the library meeting space immediately before the town hall, and when the young father saw the free food, he chose to stay. At the event described later in this chapter where smoothies were made, community attendance was supported by the fact that the event started with a step demonstration by a step dance group from The Neighborhood’s elementary school. Many parents came on this Saturday at lunch time to see their children perform and to get a free lunch. Several of the parents I talked with indicated that it was rare for them to be able to attend child events with their work schedules. It is easier for older, often
retired, residents, and financially secure residents to find the time to participate in community-based activities such as this one.

As will be discussed in detail later, the issue of owner versus renter or long-term versus short-term resident consistently arose during this fieldwork. The discussion arose in the asset mapping portion of the research process and consistently reappeared throughout the research. In this first instance, the divide between “movers” and long-term residents emerged through a discussion about preserving the heritage of the community and incorporating community preservation as an asset. It was then stated by a gatekeeper in the community that “the ‘movers’ do not invest in The Neighborhood” and are not motivated to spend the effort to improve The Neighborhood. Unsurprisingly – either because the perception of the ‘movers’ by long-term residents is correct, because the ‘movers’ did not feel welcome, or because these movers face the many time and financial burdens of the poor- there were no ‘movers’ present. Briefly, the discussion moved to an even more pointed discussion about ‘movers.’ I was surprised by how freely one long-term resident expressed their angst about the short-term residents; “Movers aren’t invested in [The Neighborhood]. They have no pride in their houses… [and] are just here until they find somewhere better.” My key informant asked the coalition to think about strategies to best engage the community’s newest residents, but the discussion was quickly shifted to how much buy-in from ‘movers’ was needed for the coalition’s work to be successful and ways to specifically targeted long-term residents going forward.

Two important ideas emerge in this discussion that became key themes as a new focus of the research emerged. One of these themes is rooted in the language used by
meeting participants, particularly the language used by long-term residents to ‘other’ short-term residents. In fact, in the very first collation meeting, the long-term residents were simply called ‘residents,’ while the short-term residents were called ‘movers.’ These names referenced the fact that short-term residents often moved between low-income housing units; “Movers aren’t in it for the long haul. How can they be involved [in this project] if they don’t want to be here?” Intentional or otherwise, this nomenclature creates a clear picture of what it means to be a resident of The Neighborhood. To be a resident one must do more than reside within census tract seven the county, you must live there for an undisclosed period of time and be invested in improving the neighborhood. While these are reasonable expectations for social membership in a community, this also means that ‘movers’ are often excluded from the community of The Neighborhood. This question of who makes up a “community” and how the community is defined can have sweeping impacts on community-based work- be it intervention or more traditional research.

Another important theme that emerged in this early coalition meeting and re-emerged throughout the research is a question of agency. The othering of ‘movers’ is rooted first and foremost in the fact that they do not choose to live in The Neighborhood for the long term. Long-term residents asserted that short term “don’t care about the neighborhood;’ “they are just here until they find somewhere [they think is] better.” The perception that some of the poorest people in US society have the agency to choose where they live and for how long is specious when in fact this is often decided for them based on things like Section 8 housing policy, and landlord housing policy. This also extends into the time and energy requirements needed to be actively involved in a
community. How then can an inclusive idea of the community be established? I have little doubt that the long-term residents desperately wanted the short term residents to become engaged members of the community. This sentiment emphasizes the importance of the resident-lead Safety, Access & Community Pride workgroup, which focused on creating a neighborhood that all residents could feel proud about living in.

Another result of asset mapping was uncovering dissonance between the values of non-profit leaders and community residents. In early discussions about asset mapping with local non-profits’ leaders, churches were identified as important community assets, both for their spiritual and community-building value as well as the fact the welfare policies of then-President Bush which envision communities of faith as key agents of change (Carson-Thies 2009, Pipes and Ebaugh 2002). During the community forums that were held to construct and refine the community survey, the majority of feedback happened in small groups tasked with discussing a focal topic of the survey and providing feedback. After a brief period, each group would then discuss another topic of the survey and provide feedback. This process continued until all groups had discussed each of the content areas on the survey. In addition to the survey content areas, the community asset map was included as a topic of discussion to elicit community feedback on the asset mapping work.

It quickly and consistently emerged in each group and each separate town hall meeting, that churches did not play the role that was expected by the coalition. The churches located within the boundaries of The Neighborhood and those close by often did not primarily serve the residents of The Neighborhood. While out of the scope of this research it did not appear that the community was less religious than other US
communities, but that the churches in the community were relatively new establishments that moved into cheap properties in the neighborhood. Most of these churches served non-residents primarily (occasionally with small groups of residents), and some had the interest to be service providers but did not currently provide services to The Neighborhood. As a result of this feedback, only one religious institution made it on to the asset map shared during the community canvassing, and that church provided out of school enrichment services for youth in the community.

**Community Canvassing and Survey Results**

At that time there were approximately 1,500 occupied residences according to information from the City of Southern Town and the Southern Town Police Department. Of these 1,500 households, 243 (~18%) completed community surveys on the canvassing day, January 30, 2011. Canvassing began around 12:30 pm to allow participants time to return from religious services and continued into the late afternoon/early evening. Demographics of participants are provided below in Table 6; roughly half of participants were young (18-35) and almost three quarters self-identified as Black or African American. The average number of people in a given household was 3.87. These demographics are in line with the overall population of The Neighborhood at the time as can be seen in the 2010 Census data in chapter two.

**Table 2: Survey Participant Demographics n=243**

<table>
<thead>
<tr>
<th>Age of Participants</th>
<th>Percent</th>
<th>Self-Identified Race or Ethnicity of Participants</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 – 35 years</td>
<td>46.7</td>
<td>Black or African American</td>
<td>74.1</td>
</tr>
<tr>
<td>36 – 55 years</td>
<td>39.6</td>
<td>Caucasian or White</td>
<td>14.0</td>
</tr>
<tr>
<td>56+ years</td>
<td>13.7</td>
<td>Hispanic or Latino</td>
<td>10.1</td>
</tr>
</tbody>
</table>
To learn more about access to food in an area that had been identified as a food desert (Arney 2012, Sabogal 2013), survey participants were asked where they shopped for fruits and vegetables as well as where they shopped for all other food items. Participants were asked to select as many stores as they used from a list and were given the opportunity to add other venues where they access food. It was not surprising that nearly three-quarters of participants shopped at the Wal-Mart Neighborhood Market for their groceries as this was the closest geographically and was perceived to have the lowest prices, but there were some surprises in this basic data as can be seen in figure five below.

![Figure 4: Where Residents Shop](image-url)
It was surprising that in a food desert where researchers (Chavez 2013) and non-profit leaders had identified transportation as a key barrier to accessing food, this study found that the average number of stores shopped at was two. Furthermore, shopping at more than one store seems to be related to accessing fruits and vegetables. There was only a fifty percent chance that a survey participant shopped at the same store for fruits and vegetables as they did for other groceries. It is unclear from this survey if this is related to quality, cost, or some other factor. It was also somewhat surprising that almost seven percent of survey respondents indicated that they shopped at the Farmer’s Market which was not listed as a response choice. A preference for the farmer’s market is particularly surprising as the market is roughly three miles from The Neighborhood; this is a short ten-minute drive, but a long 38-minute bus commute or hour walk for those who do not have access to a vehicle.

In addition to physical access to food, in particular, fresh fruits and vegetables, accessibility (as determined by affordability) was of interest. In constructing the survey with non-profit workers, community leaders and community residents at large, affordability was asked via one simple, straightforward question: Do you consider fresh fruits and vegetables affordable? 75.7 percent of respondents indicated that they believed fresh fruits and vegetables to be affordable. This result was surprising and was likely affected by social desirability and the fact that proper rapport to disclose a lack of money and food security was not and could not be established in this collection format. Additionally, the lack of specificity of the question could account for this result; bananas and carrots are affordable, but this does not represent the full range of fresh fruit and vegetables that would be needed in a healthy diet. Unfortunately, the coalition’s desire
for the community to create and vet questions increased ambiguity (see discussion in chapter six). Regardless of the perception of cost, there is still some driving factor leading respondents to shop for their produce in a different store than the one they frequent for other groceries.

Beyond access to foods, coalition members and community residents were interested in the types of food that residents ate. Initially, I had proposed asking previously validated questions that would allow for comparisons to other groups, such as questions about fruit and vegetable consumption and other questions similar to those on the Behavior Risk Factor Surveillance System (BRFSS) and the Youth Risk Behavior Surveillance System (YRBSS). It was ultimately decided by the coalition and confirmed by the residents who provided feedback that these questions felt too research-focused and could potentially raise concerns and limit participation in this research-sensitive community. Instead, a question was asked about who does the cooking in the home (if anyone) as well as a question about family’s/household’s favorite foods.

Table 3: Cooking in the Home

<table>
<thead>
<tr>
<th>Who Cooks in the Home?</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Survey Participant</td>
<td>65.1%</td>
</tr>
<tr>
<td>Spouse</td>
<td>14.8%</td>
</tr>
<tr>
<td>Parent</td>
<td>8.7%</td>
</tr>
<tr>
<td>Split evenly with another</td>
<td>10.5%</td>
</tr>
</tbody>
</table>

As presented in table seven above, the majority of respondents (65.1%) indicated that they did most of the cooking in the home. Others indicated that their spouse or significant other did most of the cooking (14.8%). 10.5% split the cooking evenly with another in the house, and 8.7% indicated that their parent did the majority of
the cooking. Of the foods listed as family’s/household’s favorites, the following were the most popular: chicken (baked, fried, other ways), fish and seafood, macaroni and cheese, broccoli, rice and beans, greens, and spaghetti. While this information was interesting, when I was asked to analyze the data and present it the community as well as the foundation funding the intervention, it was decided that this data was anecdotal at best and that BRFSS and YRBSS data should be presented on topics related to food consumption. In particular, fruit and vegetable consumption, as well as free and reduced school lunch rates, were identified by the coalition as areas of interest. Table eight below shows how The Neighborhood compares to the county, state and the Nation from 2010 Census, BRFSS and YRBSS data (2014). There was not Neighborhood-specific data available on fruit and vegetable consumption, but only 8.5 percent of the 243 survey respondents indicated that they ate fruits and vegetables on a daily basis and therefore this figure was used as a stand-in for presentations in the community.

**Table 4: Comparison Data**

<table>
<thead>
<tr>
<th></th>
<th>United States</th>
<th>The State</th>
<th>County</th>
<th>The Neighborhood</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meets 5-a-day requirement</td>
<td>23.4%</td>
<td>24.4%</td>
<td>22.3%</td>
<td>8.5%*</td>
</tr>
<tr>
<td>Eligible for free/reduced school lunch</td>
<td>41.2%</td>
<td>44.6%</td>
<td>51.5%</td>
<td>94.2%</td>
</tr>
<tr>
<td>Meets adult moderate or vigorous physical activity requirements</td>
<td>51.0%</td>
<td>46.2%</td>
<td>40.3%</td>
<td>Unknown</td>
</tr>
<tr>
<td>Child physical activity- 60 minutes, 5 days/week</td>
<td>63.0%</td>
<td>59.2%</td>
<td>65.4%</td>
<td>Unknown</td>
</tr>
<tr>
<td>Three or more hours of child screen time/day</td>
<td>32.8%</td>
<td>38.2%</td>
<td>Unknown</td>
<td>43.0%</td>
</tr>
</tbody>
</table>

In addition to food consumption, the survey asked about physical activity and the environment. The survey included questions about adult physical activity, child physical
activity and screen time (see appendices for a copy of the survey). Again, these questions did not match standardized variables from other sources, and I was asked to present data that linked to these topic areas to the funders as well as to the community as a whole. Table eight also includes these reference points. While there is not Neighborhood-specific data on child physical activity that is in the same format as state and national databases. Previous research I have completed in the community as a part of the Scorecard research indicates that children in The Neighborhood are moderately physically active, with an average physical activity questionnaire (PAQ-C) score of 3.2 out of 5.0 for fifth and sixth graders (Bryant et al. 2016).

Beyond collecting data that relates to obesity, namely consumption and physical activity data, data was also collected on the perceived risk of obesity in the community as well as the perceived risk of other diseases—see figure six below. Survey participants (n=243) were asked to indicate which of the health concerns listed were of concern to them; they were presented with the list in the table and told they could choose as many as they wanted and could add any disease not listed. Without limitation of answer options, obesity was the third most common choice of participants. Diabetes and hypertension (both influenced by obesity, increasingly for youth as well as for adults) were rated higher than obesity. Concern over diabetes and hypertension is not surprising as these are also diseases common in Black communities and poor communities (Hass et 2013, Wilcox et al. 2013). The question emerges, though, that if the intervention had focused on diabetes or hypertension prevention as a means to address obesity, would there have been greater community buy-in? There was a brief
discussion about shifting focus with the funder, but the funder had prioritized work with children and in particular obesity prevention at the primary and tertiary levels.

Figure 5 Diseases of Concern to Residents n=243

![Bar Chart]

Based on the survey results discussed above in with an unclear need and a lack of interest (and potential mistrust of researchers) on the community’s part which permeated much of the early work I had completed in The Neighborhood I questioned the value and need of the research I had begun on childhood obesity prevention. Repeatedly, though, the question of community – who is a community member, what role do service providers play in the construction of community, and others- emerged from various data sources, even those that did not seem to have any relation to these questions. For example, as means to get better access and buy-in from key gatekeepers in the community, two questions were added to the community canvassing survey about The Neighborhood association.

When this was first presented to me, I was asked to construct a few questions that might be useful for the neighborhood association. Knowing that this was a sensitive topic and a precarious relationship with gatekeepers, I proposed two simple questions
on the barriers to joining and the potential benefits of a neighborhood association.

These seemed logical questions to help in recruiting new members which was a primary goal of the association at the time. The barriers to joining the association question, which I perceived to have innocuous answer choices (the time commitment of being a member is too great, not knowing the association existed, and not knowing anyone involved) was immediately challenged by the gatekeepers as being too sensitive. The questions were ultimately replaced with the question “Do you know about The Neighborhood Action League, the neighborhood association?” and a question of the benefits of the association. The benefits question was also edited by the gatekeepers to ask about the benefits of their association, not neighborhood associations in general. Because of this rewording, I broke down the results of the benefits by those who knew of the association and those who did not because those who did not know about the association would not be able to know its benefits, but could only guess at potential benefits (see the figure below).

Figure 6: Benefits of the Neighborhood Association (n=243)
As seen in figure seven above, of the 243 survey respondents, 50.6 percent knew of the neighborhood association while 49.4 percent did not. The benefits question was skipped by many survey participants, as many who did not know the neighborhood association existed did not answer the question of the benefit of the neighborhood association. While this was the case, the answers provided were similar among those who knew of the association and those who did not, but still answered. The areas where there was the greatest difference in responses were in the response choices “helping the neighborhood,” i.e. the association helps the neighborhood and “sense of community,” i.e. the neighborhood association builds and/or fosters a sense of community. While this survey does not have the power or sophistication to make generalizations, it is still interesting to note that “a sense of community” along with “meeting neighbors” were the least common responses among both groups. This data hints at disjointed ideas of community and who is a part of the community.

In this chapter, data collection from the first year has been presented. Year one methods and areas of data collection included rapport building, asset mapping, launching a coalition and assisting a community canvassing to raise awareness about the coalition and survey the community about the perceived health needs and dietary habits. Through a recursive, iterative analysis of data collected, it became clear that the obesity focus of my dissertation research was not the most compelling part of the process in which I was engaged. The results below demonstrate a lack of interest in obesity and describe how the research changed to capture data around community agenda setting and community involvement.
The Original Workgroups

Based on the community survey, the coalition identified a new set of priority areas for intervention. These areas were selected from the survey data, coalition meeting data, the scientific literature on obesity prevention, and from the funder’s primary target areas. At this stage, six priority areas were initially identified for intervention: 1) Healthy Foods and Nutrition, 2) Community Outreach, 3) Policy & Advocacy, 4) Youth & Families, 5) Health, and 6) Child Care (Early Childhood & School Age). These priority areas allowed the CHNK Coalition to create intervention leverage points, encourage community buy-in, and increase participation. A working group was established for each priority area. Working groups had a co-chair structure where, when possible, one chair was a community member, and another chair was a non-profit employee or volunteer with subject matter expertise. When the results of the survey were presented to the community more broadly, the coalition was able to launch the working groups simultaneously. Below, I provide a brief summary of each working group’s charge.

Healthy Foods and Nutrition Workgroup

The Healthy Foods and Nutrition Work Group was mainly focused on food security, although this was not the language used by the committee. The committee was concerned about the lack of grocery stores in the neighborhood as well as an even larger dearth of fresh fruits and vegetables in the area. While getting a large grocery store to open in or near the neighborhood was beyond the scope and budget of this coalition, one of the primary foci of the group was to institute a farmer’s market in the
community that would accept EBT food assistance monies from the Supplemental Nutrition Assistance Program (SNAP).

**The Community Outreach Workgroup**

The Community Outreach Work Group was the brainchild of non-profit employees and the long-term residents. The goal of this group was to focus on community organizing and the creation of a database of residents who wished to be more involved in the community and who were open to receive emails about the neighborhood. This committee was co-chaired by an active resident who had recently been employed by a non-profit. It was clear that this resident wanted to use this committee to build a more engaged community. The goal of community engagement seemed in some ways to be in contrast to the goal of the non-profit employees and long-term residents who wanted a ready list of residents with whom to share information about the non-profit’s upcoming events. Such a list was aligned with the non-profit’s goals which included a way to quantify community participation as part of funder evaluations.

**The Policy and Advocacy Workgroup**

The Policy & Advocacy Work Group was the least cohesive group due to very limited early engagement by residents and non-profit leaders alike and to its de facto closure due to lack of participants. The group lacked focus from the beginning; potentially due to a lack of knowledge and self-efficacy on policy issues. Group discussions often waivered from very specific actions that were only tangentially related to policy such as creating joint-use agreements (as opposed to creating policies to make them more viable) to sweeping policies that would have to happen nationally and
with large bodies of support, such as changing the foods accessible via SNAP and Women, Infants, and Children (WIC). The Policy and Advocacy Work Group ultimately became the Safety, Access and Community Pride Work Group. This new name meant a shift in focus away from a policy orientation towards an intervention approach to improve the community. While the previously cited literature on green space and safety were not part of this group’s discussion, this group focused on topics of access (to things like green space), culturally appropriate construction of safety (one that limited police involvement when possible) and re-establishing community pride.

The Youth and Families Workgroup

The Youth and Families Work Group had the opposite problem of the Policy and Advocacy Work Group- they had an over-abundance of ideas that were targeted at improving the health and well-being of youth and families, but lacked a mechanism to implement their ideas. Ultimately, this lead to the combination of the Youth and Families group with the Child Care Work Group. Originally, the Child Care Work Group was composed solely of local non-profit employees. While such a committee clearly has value, this committee was duplicative of several other coalitions in the community. To connect the non-profit leaders with concerned residents and provide the concerned residents with potential avenues to implement their ideas (the specific non-profits that worked in a given area), the combination of the two groups created a synergy to make a change in the community. More than most committees, the work of the Child Care, Youth, and Families groups strongly helped to shape the grant priorities of the coalition.
The Healthy Living Workgroup

The final work group of the coalition was the Healthy Living Work Group. The goal of this group was to promote health education in the neighborhood as well as ensuring a medical home for children and families. Compared to the other work groups, this was one of the less active groups. Coalition members expressed that this topic area was the expertise of the non-profit that was leading the grant and therefore solely their domain. Additionally, as was seen in the community survey results, health was not a primary interest area of the community. This lack of interest and supposition that one organization could promote the health of the entire community was a barrier to making progress in community health. As will be discussed in the discussion of grant selection below, this disinterest- and therefore lack of community input- lead to a very traditional selection of health education interventions.

As described above, the six original work groups consolidated into three final work groups over the course of six months to a year. The new work groups emerged with clear goals, objectives, and members. A discussion of how these three workgroups guided the process of providing mini-grants to the community partners appears later in this chapter.

Communities of Stakeholders

Before I discuss how I revised my research questions given the new focus on the community, I believe it is useful to return to a discussion of stakeholder groups to provide additional context. As discussed previously, three main groups of stakeholders emerged through the process of early fieldwork: long-term residents, short-term residents or ‘movers,’ and employees of non-profit organizations working in the
community. It is important to examine the way that each of these groups shaped the trajectory of the Coalition and how they utilized their power directly and indirectly.

**Long-term Residents**

It became clear through my participation in the Coalition and informal interviews with long-term residents that they felt health should not be a primary focus--at least those that had organized through the neighborhood association. The primary focus of these long-term residents was the revitalization of the neighborhood, and they believed that many health issues could be addressed through revitalization efforts. Concerns of the long-term residents focused on “derelict properties” (as both an eyesore and public safety concern) and “creating a sense of community pride.”

Through informal interviewing it became clear that this segment of the community had “bought in” to the childhood obesity prevention efforts because many of them saw potential overlap between the childhood obesity prevention efforts and the potential to fund the neighborhood association and or its affiliated neighborhood museum through the coalition’s granting process. For these residents, building a “healthier Neighborhood” was a general means to address the multi-faceted issue of neighborhood development. One long-term resident repeatedly asserted that “for the neighborhood to be healthy, there needs to be a sense of community pride.” While this is certainly true, at times “community pride” seemed to become the code word for revitalization and it was always imperative to unpack what residents meant when they used the term. This language originally came from the annual report of another community that had received the same funding as the YMCA in The Neighborhood to address childhood obesity. The phrase community pride quite adequately seemed to cover the issues of the most
interest to long-term residents including a cleaner neighborhood with a marketable history.

The long-term residents most often exerted their power through the neighborhood association and its leaders, the Sanders. The Sanders were significant gatekeepers who controlled access to the community. Their role as gatekeepers was certainly earned as they had advocated for the neighborhood in many venues and had spent countless hours and years working to improve the neighborhood for all residents. The gatekeepers’ granting or withholding of access was not limited to potential researchers who were interested in The Neighborhood, but also included influence over non-profit organizations working in the community and influence of local and state-funded community development monies through their role in city politics. It is arguable that their overarching influence on neighborhood resources meant that the long-term residents had some level of control over community agenda, particularly in the services the neighborhood received and inclusion or exclusion in community development work funded in the neighborhood and its impact

Short-term Residents

Short-term residents were much more difficult to access during this phase of participant observation and unstructured interviewing. Difficulty reaching short-term residents may be due to my role in the coalition and the potential perception that the process favored the long-term residents. Additionally, rapport building was difficult with the short-term residents. The difficulty may be due to the time constraints associated with being poor in the US such as working multiple jobs and managing welfare benefits (if the residents are lucky) or may be with the perception of me and my identities as
outsider, researcher, and white. The area that was perceived by long-term residents and non-profit employees to have the most power to increase buy-in of short-term residents was a focus on child care opportunities and how they could be used to increase physical activity. This was in line with the stated desires of the short-term residents in coalition and work group meetings. One short-term resident was particularly excited about the potential impact of the intervention, stating “I want to know that my kid is taken care of… with good food and the chance to learn and play” when in out of school time care.

This focus on the children of short-term residents can be seen as positive, but in many ways short-term residents were largely disregarded outside of the children (a problem with the heavy child focus of CBOs in The Neighborhood. It could be argued that the scope of work of the coalition was advantageous to all stakeholder groups, but long-term residents and non-profit employees stood the most to gain from the potential work of the coalition and its work groups. Non-profit employees would be able to receive more funding to provide their services through coalition mini-grants and have better access to community members if the community outreach work group turned out to be effective. Long-term residents also stood to gain much more than the short-term residents. By supporting the projects of long-term residents, particularly the neighborhood association and the neighborhood museum, the long-term residents (and more specifically their leaders) stood to gain much from the coalition’s work with little benefit to the adult short-term residents. A bias toward long-term residents is a shortcoming of the mini-grant structure and the politics of the vast network of CBOs and does not rest squarely on the shoulders of long term residents.
The Final Workgroups

Of the six original work groups, three workgroups (including merging and restructuring) lasted long enough to suggest priority areas for funding. These three groups were the Food and Nutrition Work Group, the Community Outreach Work Group and the Safety, Access & Community Pride Work Group. Below is a description of the areas of focus of the work groups and how they identified funding priorities. Workgroups met monthly, when possible, at times set by the participants in the work group. The chosen time was most often weeknights around 7:00 pm.

Food and Nutrition Workgroup

The four areas to fund that were identified by the Food & Nutrition work group were community gardens, farmer's markets, healthy cooking classes and food bank services. While this may at first seem like a solid plan, it is both somewhat lacking in creativity as well as a clear focus for The Neighborhood.

Community Gardens

Observationally, community gardens were particularly popular with funders and researchers in this time frame, 2010-2014. It seems likely that this is the reason that community gardens were identified as the first funding priority for the work group. There were, however, more than three active community gardens in the one-square-mile area that makes up The Neighborhood. It is true that these community gardens could use funds to help expand and or sustain the garden, but it did not represent a novel approach to improving food and nutrition in this community. It would have been potentially powerful to try to expand the garden at The Neighborhood Elementary School and increase fresh fruit and vegetable options in the cafeteria, but the school
had been largely uninvolved in the process other than being the physical host to the YMCA in The Neighborhood.

In previous research I had conducted in this community the school had a laser focus on increasing test scores with the principal’s conference decked out like a war room- the walls pasted with charts of every student, their most current test and pre-test score and areas of need. While the school had bounced back from being rated a double F to a B, it quickly dropped to a C the following year. Also, over the course of my dissertation research, there was a minimum of three principals at the school. This focus on testing and maintaining test scores likely limited the involvement of the school in other community-based activities.

**Farmer’s Market**

Farmer’s markets were also identified as a funding priority for the Food & Nutrition work group. As noted in the canvassing results, many residents shopped at the local(ish) Farmer’s Market, a brick and mortar location about three miles from The Neighborhood which sold both local and non-local produce. The work group wanted there to be a farmer’s market in the neighborhood that could be held in an open space that on a regular basis, preferably weekly if possible. The work group also felt it was critical that the farmer’s market accepts EBT/SNAP benefits. While this is increasingly common today, it was seen as a potential barrier and a strong reason to fund what could eventually be a money-making venture for whichever group took on this task.

Initially, it was hoped that an existing market might add a day into their schedule to host a market in The Neighborhood. The second choice for a farmer’s market was to find a non-profit or a collaboration of non-profits to take on building a new farmer’s
market from scratch. This will be examined more in a discussion of the grant selection process, but it was difficult to find buy-in for the second project as well. It is unclear if this was because no group was working in this area directly already or if it was felt this was not needed by the non-profits working the area.

**Cooking Classes**

Healthy cooking classes were also identified by the work groups as a funding priority. Cooking classes were one of the more traditional public health education interventions selected and one that had potential to be fraught with class and race-based assumptions, but this is not to say that it cannot be an effective means of intervention when it is done well and targeted to the community. For example, it can easy for some to fall into the stereotypical trap of homogenizing “black cuisine” when trying to teach healthier cooking techniques (e.g. here’s a way to make collard greens with less fat or here’s a way to make baked chicken instead of fried). Also, it is easy to base cooking on ingredients that are not culturally appropriate or affordable to those living in the community.

An example of the use of culturally inappropriate foods being utilized can be seen in a coalition community building event. The coalition hosted a step show of kids from The Neighborhood Elementary as well as a local High School. In addition to the step demonstration a “healthy” meal was provided, and there was a small presentation on the work of the coalition, followed by a cooking demonstration. The cooking demonstration was put on by the local organic grocery store, and the recipe was for a kale smoothie. I was surprised by the choice as I was sitting in the audience and had not been a part of planning the event. At first, it seemed that maybe the demonstration
was received positively by the community members in attendance - they were asking questions and were positively engaged.

The atmosphere in the room shifted with the addition of dates to the smoothie. A participant asked how much dates cost and what else could be used to sweeten the smoothie. The grocer proceeded to provide a list of alternative sweeteners that perplexed me, and I consider myself an upper-class white man and 'foodie.' The discussion then quickly turned to the cost of the smoothie, which even in bulk buying was out of the reach of most participants, as they were quick to point out. The final piece of evidence about the culturally inappropriate nature of the demonstration came when samples were provided. Most children refused to try the thick, green-black concoction. Many adults “tried” samples; as they did the garbage cans began to fill with mostly-full sample cups, and the room began to fill with chatter about how unpalatable the smoothie was.

**Expanded Food Bank**

The final funding priority of the Food & Nutrition work group was to expand food bank services. It was never clear as to how this expansion would be achieved. The non-profit group which ran the local food banks had representation on the coalition and was active in increasing the number of free school breakfast and meals provided in out-of-school-time care. An expansion, though of food bank services was never fully realized, even at the planning level. This is not unexpected as the group had the most funding priorities, but it is interesting that a service that may have directly benefited the adult, short-term residents was not achieved. While this was not purposive in any way that I could see as a work group participant, coalition member, and funder of mini-grants, it
did promote the image that the coalition was not there to help the adult short-term residents.

*Community Outreach Workgroup*

The Community Outreach work group identified two funding priorities: a communications strategy and a volunteer involvement plan. It was decided early on that there needed to be a communications strategy to consistently message materials to the community and to reach as many members of the community as possible. The work group, led by a “Wonder Woman” (see discussion for more), had long discussions about the best ways to reach people living in The Neighborhood. Early on it was decided that while most residents do have email addresses, that this was not the best way to reach out to the neighborhood. This discussion happened in early 2011 before internet access was ruled by federal courts to be a utility (Kang 2016), and before smartphones reached the ubiquity, they have achieved today. Many residents still accessed their email at the library, dining establishments (e.g. McDonalds and Starbucks) or a friend’s residence if they could not afford internet service in their home. Intermittent access was seen by the work group to greatly diminish the usefulness of email in communications with The Neighborhood residents.

The resident chair of the Community Outreach work group also took the lead in creating a phone database of residents. The database was built using comment and interest cards at the many events that occur in the neighborhood. Not only was the human capital needed to effectively utilize a phone-based communication strategy too costly, but it was also quickly discovered that many residents change their numbers and/or have gaps in their phone service on a regular basis. Because of this, the phone
numbers in the neighborhood database were often unreliable. The chair of the work group was a resident who had initially volunteered in with the work group and was ultimately employed by a non-profit in the community and represented them in her role as workgroup chair. Unrelenting, the “Wonder Woman” chair of the work group still collected phone numbers and constantly updated the database with the new numbers and removed old numbers.

Finally, the group tried a strategy that was decidedly low-tech. Members of the workgroup were scheduled to be out in the neighborhood at peak times, such as school dismissal, to socialize with residents and discuss the CHNK Coalition including any upcoming events. These community ambassadors were occasionally decked out with sandwich boards, but the one-on-one, intimate discussions were seen as the best communication strategy. Again, temporarily thriving in her role as a “Wonder Woman,” the work group chair took countless shifts to complete neighborhood outreach.

Community engagement was a critical focus for this “Wonder Woman,” and as such she consistently overcommitted to the efforts of the work group. Unfortunately, such a strategy is hard to sustain, especially as there was no CBO or agency that could be funded through a coalition mini-grant to continue this outreach effort.

In addition to a communications strategy, the Community Outreach work group set volunteer involvement as a funding priority. “Volunteer involvement” was chosen as the term because it CBO staff and residents felt that “volunteer engagement” was non-profit/research jargon and that residents would not relate to or clearly understand the engagement piece of volunteer engagement. The plan behind this funding priority was to create a core group of residents who were passionate about topics of interest to the
community and willing to volunteer their time for concrete needs and events. This plan never really came to fruition- partly because there were limited resources put in place to support it and partly due to lack of interest by residents to build a volunteer bank.

**Safety, Access, and Community Pride Workgroup**

The Safety, Access & Community Pride Work Group identified four funding priorities. Access to safe play places was the first funding priority. Additional priorities included pedestrian safety, community beautification, and home health inspections. Due to the large mix of interest areas and constituents, there was a diverse pool of recommendations.

**Playground Safety**

Very early in the planning process, my key informant and I successfully applied for a new playground as a part of a nationwide granting process to install playgrounds as a means to increase physical activity and increase a sense of community- the grant required a certain amount of volunteer labor to install the playground. This playground, along with at least four others, was in place within the boundaries of The Neighborhood at the time this work group established this priority. The focus of the priority was not to increase the number of playgrounds but to increase accessibility and safety in existing playgrounds. The work group conceptualized safety in play spaces as cleanliness, well-maintained play equipment, and adult supervision when possible and appropriate. This notion of safety in many ways matched the findings of my previous work in the community as a part of the State Childhood Obesity Prevention Project. In that study, parent and child dyad interviews about neighborhood play spaces found that most play spaces were viewed as safe by children and by parents who had lived in the area for
longer. Newer parents did express some concerns about safety, although this was often about older teens congregating in parks and parents not knowing their intentions (DeBate et al. 2011).

*Pedestrian Safety*

Pedestrian safety was an issue that was first raised by the policy work group that was now defunct. Within The Neighborhood, the majority of streets do not have sidewalks and the major thoroughfare streets’ sidewalks, are often in a state of disrepair. The policy work group and then the Safety, Access & Community Pride work group, wanted to apply for City of Southern Town funds to install more sidewalks in the community, especially on paths frequently used by children walking to and from the elementary school. In addition to sidewalks, there was a desire to have speed bumps installed on some streets commonly used as cut-throughs by neighborhood residents and city residents alike. Pedestrian safety is not a Neighborhood-specific problem; Southern Town was rated as the second most dangerous city for pedestrians in the US according to a Transportation for America report utilizing National Highway Traffic Safety Administration data (Patrick 2011).

*Community Beautification*

Community beautification was the third funding priority of this workgroup. The workgroup had several discussions on what a focus on community beautification might look like in practice. All agreed on increased community clean up days and increased free/low-cost collection of large items curbside to deter dumping. There was disagreement, though, as to what should be advocated for regarding housing and zoning. At this time there was still a large number of abandoned and foreclosed
properties after the great recession and how to deal with the properties was hotly contested. In 2008, the then-mayor had proposed buying 110 blighted properties in The Neighborhood using HUD funds (Zink 2008). Of those 110 properties, it was proposed to demolish 40, renovate and sell 40, and rent the remaining 30 (Zink 2008). While this plan never came to fruition, it does demonstrate both sides of the issue well. The long-term contingent was keen on seeing houses renovated and sold; short-term residents felt the need for more affordable housing, and the non-profit employees fell somewhere in between. The YMCA benefitted from the demolition of two adjacent properties in The Neighborhood by the city and used the land to build a maternal and child health facility.

Home Health Inspections

Home health inspections were the final funding priority of the Safety, Access & Community Pride workgroup. This idea originated in the health-focused work group which was lead by a public health nurse. This nurse had worked at the Health Department office that had formerly been located in The Neighborhood. After that office had closed, she continued to work for the Health Department and work in The Neighborhood. Concerned about environmental exposure to lead, the home health included lead testing which had been identified as a potential problem in the area—particularly in the soil. In addition to lead testing, the home inspections were envisioned as home and family health centered. With a holistic approach to these encounters, it was hoped that public health nurses and other public health officials could start a campaign to encourage all residents to eat more healthily and be more physically active, by providing residents with information on and access to services to help implement healthy eating and physical activity. Unfortunately, about eighteen months
into the process the public health nurse took a different job and stopped participating in the collation’s work; without her leadership, the health-focused work group disbanded and was absorbed into the other work groups.

**Results of Mini-Grant Funding**

The mini-granting process yielded much information about how local non-profits connect with each other and The Neighborhood as a whole. One of the first decisions the core leadership group needed to make was to determine how to award the funds as this was not prescribed by the funding agency. After discussions about sustainability, need, and cohesion for residents, it was decided that organizations could be awarded multi-year awards contingent on successful progress during each grant year. It was also decided that while the grant process was competitive, funding preference would be given to those who applied to provide services that met funding priorities.

Applicants completed their grants in an online submission portal provided by the foundation funding the overall grant. In addition to the mini-grant narrative, grantees provided budgets, board membership lists (if applicable), tax exemption letters, and any supporting documents they chose. The applications were then provided to the leadership committee for review. Before meeting each committee member was asked to score all grants and provide a funding decision of yes, no, or maybe. These were then compiled for review by the committee as a whole. In year one, the leadership team was organized by my research’s key informant. The year one grants selection process was relatively straight-forward. The coalition as a whole had worked to spread the year-one report that had been compiled and included a description of the coalition’s funding priorities along with a request for proposals. The outreach and technical assistance
provided to grantees likely helped to make a strong applicant pool. When the leadership team convened, there was a great degree of consensus based on the individual ratings given to grants from each team member.

The discussion in year one then revolved around how much of the total $300,000 to obligate - both regarding multi-year grants and as well as the number of grants to fund. After a brief discussion, it was decided to fund one-third of the grant money in year one (and equal amounts in years two and three) and to obligate no more than 50% of year two funds in multi-year grants. Ultimately it was decided that three high priority projects would receive contingent multi-year funding including sports leagues, work related to community gardens, and youth development.

Year two and year three funding cycles were much less clear. This may be due to the fact that my key informant had left the YMCA and was no longer leading the initiative. In both year two and year three, the individual review process was the same as in year one, but unlike in year one, not all reviewers came having supplied scores and critiques in advance. A lack of consensus, possibly resulting from a lack of preparation, lead to a new line of discussion, particularly the relationships leaders had with other groups. In particular, there were discussions about the ‘political implications’ of who was funded.

It was difficult to be an unbiased reviewer in general as The Neighborhood is small and the community of non-profits working in the neighborhood, while large for one square mile, is an even smaller group of people. As early as year two, the end of the grants process was on reviewers’ minds and played a role in the discussions, and potentially the awarding of grant funds. Two examples illustrate how the granting
process evolved and became more of a political tool (and maybe community building tool) than an obesity reduction tool. One focuses on a non-profit employee who had worked in the community for over a decade and whose normal funding was in jeopardy. The other has to do with community gatekeepers and concern over their continued support.

In the case of the well-established non-profit who was at risk of losing their funding source, the contentious issue had to do with meeting the need of the community versus the goals of the grant. The non-profit served in an educational capacity in the community. In year-two their grant request was to continue their educational work and increased time for physical activity. When that was not funded, and feedback was given, their year-three grant included buying a health education curriculum to include as a part of the education services provided. Unfortunately, the leadership team felt that there were better uses of grant funds than that curriculum. That said, there was a prolonged debate, even after that consensus was reached, as to whether or not it was better to fund a weaker proposal and keep a colleague’s organization afloat while they secured other funding. The issue was so contentious, in fact, that it was not ultimately agreed upon in the leadership meeting and was brought back to the funding agency and YMCA leadership for further feedback.

This line of discussion is important to my research, as it starts to solidify the idea of a community of non-profit employees that work in The Neighborhood. As soon as I started working in The Neighborhood, several years before my dissertation research began, I was told by several people who had worked in the community that they considered themselves residents. This was an interesting idea to me that I will examine
later in this dissertation. Beyond their perceived or real membership in The Neighborhood, it became clear over the course of my dissertation work that regardless of membership in The Neighborhood community, this group of non-profit employees had built their own community within The Neighborhood.

The other telling part of the grant selection process was a discussion about funding a gatekeeper in the community. This gatekeeper controlled many forms of access to the community, particularly access to the long-term residents and access to credibility among local funding agencies, i.e., if the gatekeepers were not vocal in their support of a project, most local funders would not fund the project. These gatekeepers had proposed a project to support a heritage center to showcase the history of The Neighborhood. In year two funding, they were told by the leadership committee that they should apply again in year three and tie their proposal into community pride to align with the funding priorities. The year-three proposal had similar issues, and the leadership team struggled with whether or not to fund the proposal. The concerns did not seem to be related garnering the gatekeepers’ support, as the project was coming to a close and this was not mentioned in very candid discussions. Instead, the concern seemed to be about how to genuinely engage and enrich the community and still honor the granting process- there were two members of the larger funding agency on the leadership team who made it clear the foundation required the grants to match the childhood obesity focus in some way, even if indirectly. Additionally, while unspoken, it seemed as though there was a desire to fund the grant, if only partially, as a sign of respect and gratitude to the gatekeepers. A funding decision on this grant was postponed for review by the funding agency as well as asking for revisions from the gatekeepers.
This research shows several important aspects of how community emerged through a granting process. The leadership team lead by people who claimed some level of community membership felt that funding a heritage center was critical to support a sense of identity and pride in the neighborhood. This discussion was happening outside contemporary research indicating that neighborhood pride can positively impact health interventions, including childhood obesity interventions (Millstein and Sallis 2011, Siewell and Thomas 2015). Instead, this came from a concern about bettering the community; it could be argued that this was just an altruistic desire to better the community, but these advocates had indicated on several occasions that they considered themselves members of the community.

The debate over whether or not to fund a neighborhood heritage center also highlights how the construction of community was perceived by the leadership team and the coalition as a larger body. The focus on community gatekeepers, at a time when access was not at the forefront, does hint at the fact that these gatekeepers are viewed as core members of the community. This view, regardless of its accuracy, helps to situate the collation (and the non-profit leaders who make up the body) as other in the view of the community members who may feel marginalized by the long-term resident community and society as a whole. This begins to speak to research question three-how is the community organized and who will complete the work that is needed to be done? One of the work groups that struggled was the community outreach group which was tasked with not only messaging to the community but create a ready-built, accessible team of volunteers to do the work that is needed.
Semistructured Interview Results

All but one of the interview respondents were employed by non-profits working in The Neighborhood Community either at the time of interview or during their connection with the CHNK Coalition. The only interview respondent that was not a non-profit employee was a community resident and leader. Of the interview respondents, four were white and non-Hispanic, one was white and Hispanic, and the remaining eight were Black/African American. Three of the thirteen participants were men. This sample was dictated by the makeup of the coalition, regarding race/ethnicity the sample mirrored the makeup of the community. While there were three men interviewed, it seemed to me that men were often missing- both in leadership and community- at most events. Part of this has to do with the fact that one of the male interview respondents left the coalition after a year and the other two were often over-tasked with doing male-specific events such as a boys group and certain sports.

Most of the interview participants had long experiences working in and with The Neighborhood community; the average time reported working in the community by interview participants was 5.8 years, with a wide range of answers from one year to fifteen plus years. Respondents indicated that they had had many roles in the past and present within the community, with only two respondents indicating that they have only had their one, current role in the community. This fluidity between employers and work reinforces the idea of a community of non-profit employees in The Neighborhood, who are quick to help those who have worked in the community find new positions in the community. Four interview respondents had indicated that they either live in or have lived in The Neighborhood. Their tenure as residents varied greatly; one had lived in the
community for roughly one year, one had lived in the community for almost five years, and one had lived in the community for over fifteen years. The fourth participant lived in the community for approximately six years before moving out.

When participants were asked what they felt made The Neighborhood unique as a form of an ice breaker, two main themes emerged. One of the themes focused on the “rich history” of The Neighborhood and the need to preserve that history and educate local and city residents alike about The Neighborhood’s History. The second theme that emerged was the dual nature of the community. No interviewee referenced long- or short-term residents at this early juncture in the interview. Services providers, in particular, mentioned that there were segments of the population that were difficult to reach while others seemed “actively engaged” or at least “willing to participate if there was [a tangible] benefit to them.” For example, one participant said that “single parents are often too busy to come to meetings and events- we have to work around their schedules,” and another participant said that “it helps to have food at our events, more people come.” As such, these quotes hint that the harder-to-reach segment of the community that lives below the poverty line. Conversely, service providers praised that “there are some community members that are come to everything; it’s like a full-time job.” The ability to attend copious community events at a minimum demonstrates a large amount of free time and potentially some level of financial stability.

*Community Organization and Building*

Not a single interview respondent indicated that they believed obesity was the most important issue facing The Neighborhood, including multiple people who worked for the YMCA, the main funding agency for this project. With this knowledge in hand, it
is not surprising that the community had so little interest in childhood obesity. This is an example of an agency letting a call for proposals dictate the focus of their work. In defense of the YMCA, though, childhood obesity is within their main scope of work as is fostering communities. When I was repeatedly told that childhood obesity was not the main (or secondary) issue facing The Neighborhood, I probed as to why they interview participants had invested so much time and energy into this project.

Two answers were given by virtually all participants. The first is that from the beginning it was clear that there was to be a sizeable dollar amount of “mini-grant” money that would be spent on more than just physical activity and nutrition. The multi-component nature and the potential to receive grant money were strong motivators to keep the non-profit leaders involved. Additionally, the non-profit leaders noted that they were willing to help their fellow non-profit leaders when possible. This idea, tied with the fact that many of the participants have had many roles in the community, help to construct the notion that the non-profit leaders in The Neighborhood did form their own community built on reciprocity over time. The only non-profit employee indicated that they were involved because they were asked, but participant observation and unstructured interviews lead me to believe that they wanted to be asked and if they had not been they would not have supported the efforts of the coalition.

When asked what the largest issue facing The Neighborhood was, participants indicated poverty was the largest issue. Not all used the specific word “poverty,” but rather mentioned issues that were predominantly affected by poverty in the community. These issues included adult education, extra-curricular education for children and youth,
more parent involvement in children’s lives, and better access to emergency services such as short-term housing, utility assistance, and food assistance.

Participants were also asked to postulate what the average resident would say the biggest problem in The Neighborhood was, and these answers mirrored those of the participants. With a clear idea that poverty was the main issue in the community, it was surprising that when interview participants were asked what they would do to work on this issue is a funder asked them to, for the most part, they resorted to the same patchwork of services they currently provided. While I think that the services that most non-profits in the community provide have value, it was surprising that only two discussed the underlying structural issues as a priority to be fixed. Moreover, one of these participants had been asked to step down from their job, for reasons that could only be speculated as relating to the person’s salary and position in the organization (officially the organization disclosed that they were “moving in a different direction”). The other had expressed concerns that they were the next to be let go from the organization. This will be examined in more detail in the discussion of this dissertation.

Expecting that interview participants would identify poverty as the main issue facing residents, another question in the community organization section of the interview guide asked: “What role, if any, do you think local, state or federal policies affect the residents of The Neighborhood?” For the majority of participants, this question required extensive probing; the list of probes included the topical areas of zoning, infrastructure, SNAP and other welfare benefits, state-based unfunded physical education requirements, and educational policy/testing. With probing, welfare benefits and the difficulty of obtaining them emerged as an important policy-level need in the
community. Several non-profits in The Neighborhood, including two represented in this sample, provide assistance services in applying for and maintaining specific welfare benefits. This lack of focus on the policy level seems to be clearly tied to the short-lived nature of the policy working group. It seems as though that the on the ground nature of the work being done in The Neighborhood as well as the real, imminent need of residents, overshadows the larger structures that can perpetuate poverty. Funding may also play a role in this as I am unaware of many funding streams that focus on changing the structures that perpetuate poverty. A lack of focus on structural poverty may be because those issues are too large for one group to take on, or because funding agencies on some level rely on these same structures to raise their funds- be it donations from wealthy individuals, government support, or even just interest on foundation funds.

In the light of the great recession and the glut of vacant housing, I expected zoning to be a bigger issue on the minds of the coalition leaders, especially as the YMCA had land re-zoned from residential only to include a clinic and education center for new and expectant mothers. As previously mentioned there were well over 100 houses that were legally abandoned in a one-square-mile neighborhood. As much as the non-profit community in The Neighborhood seemed united, it was clear there was some level of silo-ing amongst the community members, each with a clear focus on their work in addition to trying to support the other non-profits working in the community.

*Community Readiness*

Drawing on the public health concept of community readiness (Edwards et al. 2000, Donnermeyer et al. 1997, Findholt 2007), I wanted to know if the notion of
community readiness played a part in the lack of interest and manpower in childhood obesity that was noted in early participant observation, community meetings, and the community canvassing. When asked who the leaders on childhood obesity are in The Neighborhood, the only answer that was given by all participants was the YMCA or the CHNK Coalition by extension. While there are other organizations working on increasing physical activity and improving diet, these were not mentioned by any of the participants.

To assess the participants' perception of readiness from another perspective, I asked if there were “any ever circumstances in which members of your community might think that childhood obesity was okay?” Overwhelmingly participants said that in fact there were. Some referenced that in the Black/African American community of which they were members that some degree of overweight and obesity could be seen as healthy and as beautiful. Other participants expressed that they felt that the divide between healthy and unhealthy in weight is not clear. For some this had to do with muscle mass, for others the belief that strict interpretations of BMI or raw weight were not the only or best way to determine health.

This lack of consensus on a “healthy weight” is particularly interesting as this is a group of coalition leaders who, at some level, are ‘experts’ as they lead a childhood obesity prevention campaign. While the coalition members that did not work for health and wellness non-profit agencies, did not have extensive training in nutrition and weight status, they were in a position of authority on this topic. If the leaders of this campaign, most of whom had masters’ degrees and all had bachelors’ degrees, felt that the idea of a healthy weight was unclear, how then did a community where 42.5 percent of
residents over 18 did not have a high school degree (U.S. Census Bureau 2014) grapple with this complex issue? What is the message the community is receiving about weight and health, and how clear is that message to understand?

This ambiguity is intensified in light of the following interview question which asked participants where they would direct an individual who expressed concern about their weight or their child’s weight. Predominantly participants answered that they would direct the person to their doctor or a health department clinic. Community canvassing results indicated that only 50 percent of residents had a primary care doctor. Another 31 percent relied on the health department; this was particularly problematic as at the time The Neighborhood Health Center run by the State Department of Health in Any County, had been closed and was slated to go to a new building just outside the boundaries of The Neighborhood. Even when the health center finally re-opened the demand for services outweighed the supply according to a key informant with the health department. Finally, 18 percent of respondents in the community services said they have nowhere to go and would use the emergency if they needed medical attention. In light of survey and interview data, the infrastructure to support individuals concern about their weight or their child’s weight is almost non-existent. This raises the question of the appropriateness then, of investing roughly half a million dollars in childhood obesity prevention unless the focus is solely on primary prevention.

Coalition Experience

The last topical section of coalition member interviews had to do with their coalition experience. The strongest theme that emerged from this section revolves around the community-based nature and participatory nature of the intervention.
Participants as a whole indicated that they felt the process was community-based. When probed as to what made the intervention community-based the answers varied greatly. Roughly half of the participants felt that the inclusion of the community gatekeepers in the process made the venture community-based. Those closely related to the YMCA and the leadership team focused on the early town halls that were held to raise awareness and seek feedback. Additionally, the strong reliance on the community to construct questions for canvassing helped to classify the work of the coalition as community-based to some interview participants.

When asked if the project was participatory, the overwhelming response was that while the canvassing was in some ways participatory, the overall work of the coalition was not. When probed as to why the distinction between the two communities of residents finally became clearly articulated. Participants indicated that the segment of the community that was regularly involved was not the segment of the community on which the prevention work was most often focused. Only a few mentioned the community segmentation being based on the how long a resident had lived in the community; most focused on class or socioeconomic status. That is to say that those community members involved were the ones who had enough time and energy to be involved, whereas there is a large segment of the community that is unable to participate at the same level due to time and money constraints.

I probed further to ask if the involvement of the more financially stable community members sent any message to the community or deterred them from being involved. Overwhelmingly participants expressed that they did not believe this to be the case. That being noted, I internally questioned if I was receiving a socially appropriate answer.
or if I had not established enough rapport and trust for a more honest answer. I was left with this question due to a clear distinction in how these two communities were discussed by non-profits and by gatekeepers in this interview, as well as by the long-term residents in participant observation. Non-profit leaders in the interview stressed that many residents were unable to participate due to time and money constraints. Specific examples of this included references to having more than one job, child care costs, and the limitation of free time in single-parent households. On the other hand, both in the interviews with the two gatekeepers and during participant observation (most often neighborhood association meetings) an unwillingness to participate and disregard for their community was identified as the reason short-term (or lower SES) residents were not involved.

Throughout the course of this phase of the research, three separate communities clearly emerged: long-term, comparatively higher SES residents, short-term, comparatively lower SES residents (that I have termed ‘movers’) and the non-profit community. How these communities merge or do not merge shapes the way any intervention in The Neighborhood can roll out and can limit its effectiveness. By examining how these communities are unified or disjointed, it is possible to see how in this neighborhood the perception of community membership alters how any community-based research can be implemented. While this cannot be generalized to other communities at this time, it does raise some questions about the role of “community” in community-based research. These questions can be examined in other communities to see if there are generalizable ideas as well as to help other researchers avoid some of the pitfalls encountered working in a divided community.
CHAPTER SIX: DISCUSSION

This chapter synthesizes the results of the more than five years of research in The Neighborhood. By examining the results of different forms of data and analysis, from both the initial childhood obesity-focused phase and into the community-focused phase, a clear image of how communities can be structured and achieve their often competing goals emerges.

To best explain how I arrived at these results and tied together the breadth of the work completed, this chapter will be structured as a review of my three overarching research questions and how the data collected helps to answer them. These research questions include: 1) Who is a member of the community? 2) How is the agenda of the community set? and 3) How is the community organized? One clear theme emerged across all three of these research questions, and that was the role of what I call “Wonder Women” was critical in answering each research question. By answering these questions, a complex, but a cohesive picture of what community means in The Neighborhood has emerged in this dissertation.

Revisiting the Research Questions

Who is a Member of the Community?

As I’ve shown previously, anthropologists deeply scrutinize the notion of community and challenge who is a community member. The complexity of the concept of community and its great malleability make it difficult to operationalize and solidify as a concrete construct in research (Hillery 1955, Newman and Clarke 2016, Phillips 2015,
Taylor 2016). In trying to understand how the community is structured through the lens of a public health intervention in The Neighborhood, it was critical to identify a theoretical perspective that could be utilized to operationalize community. The interaction-centered understanding of community as proposed by Theodori (2008) provides the strongest means to understand the shape and function of the community in The Neighborhood as it recognizes the reciprocal relationships between place and social interactions (Theodori 2008). Additionally, a reflexive perspective that attempted to regularly seek emic feedback on the many, changing etic perspectives was critical to avoid the appropriation of community as described by Newman and Clarke (2016).

Using this perspective, up to three separate communities of individuals emerged based on time and residence: at a minimum the two communities of long and short term residents create the larger community in The Neighborhood, and the third community composed of service provider interlocutors who spend a significant portion of their time in The Neighborhood, but generally do not reside there. Membership in these communities is fluid, and they are not mutually exclusive. For example, after an unspecified period of time (or perhaps the amount of community engagement), one can move from the short-term “movers” to the long-term resident community. While it seems likely that membership in the short- and long-term groups are mutually exclusive, short- and long-term group members can also be a part of the service provider community as I discuss below.

It also became apparent that it was rare but possible for an individual whose primary community affinity was service provider, also to be considered a long-term resident. One service provider had worked in The Neighborhood for more than a
decade and lived in the neighborhood for a significant period of time in the past. This fluidity in group membership, however slight, seems to have created potential space and desire for other long-term service providers to be members of the community, or at least “honorary” members. There was a strong desire among many service providers to be considered part of The Neighborhood. Many indicated that they were honorary members of the community or that they ‘felt like they were a part of The Neighborhood.’ It was ultimately unclear if this type of community membership was a true, emic perception of the mutability of community as described by Newman and Clarke (2009, 2016) and Amit and Rapport (2002), or if honorary membership was an outsider appropriation of community (Newman and Clarke 2016) that was tolerated by residents of The Neighborhood as it had value to them in the form of control over outsider influence and the influx of monies and services to The Neighborhood.

In unstructured interviews with community residents, though, this perception of service providers as residents was not shared. Not surprisingly, to residents, membership in the community had to do with where you lived, i.e. the physical location of your home. Furthermore, when residents were asked if the services providers were a part of the neighborhood, answers ranged from a simple “no” to “[they] have an important role in [The Neighborhood’s] success,” but there was no mention of any “honorary” resident status. While the service providers did not explicitly apply the word honorary to their community membership- this is just a device used in this dissertation for clarity- most did express how they felt a part of the community. Two service providers even going as far to say that The Neighborhood felt more like home than their own neighborhoods as they spend so much of their time there. Several service
providers even go as far is to introduce themselves in the following format “My name is X. I am with X nonprofit, and I have been working in The Neighborhood for X years.” For service providers who have worked in The Neighborhood for many years, this time commitment is a badge of pride and is a way that these service providers attempt to garner respect from new service providers, other service providers, and community members alike.

The disjuncture in how community membership is perceived likely has deeper roots than just one’s mailing address. Mailing address in much of the U.S., and certainly in The Neighborhood, is closely linked with issues of class, wealth, race and even health outcomes. Census data shows that those living in The Neighborhood are over three and a half times more likely to live at or below the federal poverty level than other county residents. The (census) ‘racial’ make-up of The Neighborhood is almost three times the proportion of minority residents than the rest of the county (US Census Bureau 2014). I posit that due to the marginalized nature of most, if not all, neighborhood residents, simply working in the area for forty or more hours a week does not equate to experiencing the life a poor person of color. Regardless of a service provider’s racial/ethnic background and class status, they can leave the Neighborhood at the end of their day and are part of other, more affluent communities.

The ambiguity of community has created the space for service providers to appropriate the idea of community and include themselves, intentionally or otherwise (Newman and Clarke 2016). This is also reflected in what Newman and Clarke describe as “tensions between empowerment and control of local populations through urban social development programmes” (2016: 3). Community serves as a mechanism to “fix”

Due to the sheer number of service providers, researchers and other professionals working in The Neighborhood, and the dollars they wield to make changes in the community, defining community membership is of critical importance. A clear delineation of membership that excludes service providers and other professionals provides members of the neighborhood with cultural and social capital by othering the service providers and researchers working in the community. The creation of community through exclusion can be seen in the work Bauman (2013) and Neal and Walters (2008). Service providers want honorary membership in the community as it provides them with the credentials that demonstrate their engagement with the community and allows them to both provide services and seek funding to provide more services. In exchange, long-term residents (and short term residents to a lesser extent) can direct the flow and leverage of funds coming into the community.

The ambiguity of community (Alleyne 2002, Amit and Rapport 2002, Newman and Clarke 2016) creates space for this give and take about who is a member of the community and unofficial honorary membership as exchange of cultural and social capital to in part control the use of outside funds in the community. The “Wonder Women” in The Neighborhood are poised to play a critical role in understanding both the exchange of forms of capital and the fluidity of community membership. As will be described in greater detail below, Wonder Women are members of The Neighborhood who have been identified by non-profit agencies as (over)committed individuals from the
community who are driven to make a positive change in their community. This passion and Wonder Women’s social capital is tapped into when non-profits hire these women to further the goals of the service providers.

Wonder Women, by definition, are both members of the community and members of the community service providers, researchers and other professionals. Over the course of the dissertation research, I worked closely with four “Wonder Women;” the first time I met a Wonder Woman was when I was introduced to my key informant when I was still working on the SCOP research project. I was unaware of the role at the time, although it was inherently obvious that key informant could do almost anything in the community- which is in many ways what made her such a strong key informant. The three other Wonder Women emerged throughout the research process-first getting engaged as volunteers and ultimately becoming staff before burning out.

Demographically speaking, the Wonder Women were all female and African American. They ranged in age from their mid-thirties to their mid-forties. All of the Wonder Women had at least one child, and it seemed that their families were what inspired them and propelled them to work so incredibly hard in the community. It is important to note that the moniker of Wonder Women is tongue-in-cheek and is used a partial critique of how these women are treated CBOs in the neighborhood. On the one hand, they do provide a significant amount of positive work in the community and act as advocates to improve their community. As such, they could be seen as heroines, working to improve not only their own lives but the lives of the neighbors. The perception of super-human endurance, though, is utilized by the CBOs who employ Wonder Women with often unrealistic expectations about how much work they can
accomplish. Moreover, they objectified, not in the sexual sense of the cartoon Wonder Woman, but as doers without limits to capacity.

The notion of Wonder Women first emerged in early analysis while working on the community phase of the dissertation. As such, I relied on informal, unstructured interviews with the Wonder Women. This was an incredibly easy and iterative process as I spent many days and night working with the Wonder Woman volunteering in The Neighborhood. The exception to this is my key informant who had left her role in the community before I conceptualized the community role of Wonder Woman. Even so, I was able to collect data retrospectively through informal interviews and a more comprehensive interview about leaving the community.

One of the first questions I asked Wonder Women was why they had chosen to be so involved. Two of the Wonder Women said that it felt like a natural progression from a regular volunteer, to super volunteer to Wonder Women. One of the two Wonder Women who had this pathway to the role described herself as a perfectionist and overachiever. These descriptors could be applied to both of these two Wonder Women and can explain the progression from regular volunteer to over-committed volunteer. A third Wonder Woman was very explicit in saying that she had hoped that by volunteering she would make herself invaluable to one of the CBOs and find employment. While this did happen, it seemed to be more than she bargained for in the end. Finally, the last Wonder Woman I was able to work with felt like she got swept up in a series of political changes. She indicated that she had trouble saying no to people, especially if she could see a beneficial outcome to taking on more tasks.
While the core reasons that the four Wonder Women did vary, they all also mentioned that they were taking on this role for their families. For some this likely did, in part, reference a paycheck, but the Wonder Women were quick to point out that it was so much more. They were proud of the position of prestige that they held what that might mean for their families. Two of the Wonder Women indicated that they believed they were showing their children that there are many possibilities if you work hard. This was especially poignant to me as I envisioned them as an expendable labor source in a neoliberal market. The stories of the Wonder Women could easily be twisted to show how upward mobility is real if you just pull yourself by your bootstraps. Thankfully, that discourse did not emerge. Finally, all of the women indicated that taking part and making a difference in their community inspired them to continue in their roles.

The path to burning out for Wonder Women varied greatly. The time spent in the Wonder Woman role ranged from over five years to just under one year employed by a CBO. The great difference in the time the women occupied their role as employees of CBOs/Wonder Women likely varied by how valued they felt they and, in a related way, they potential of their jobs. The two women with the longest tenures had been promoted more than once by the CBOs where they worked. This recognition of the women’s labor likely impacted how long they were willing to fill the role of wonder women. The longest serving Wonder Woman had been promoted several times, to the point that when she was unceremoniously let go, she was a vice president of a large CBO.

This unique role in more than one community provides Wonder Women with not only fluidity but the power to diminish the differences between service providers and residents. Service providers clearly feel that by “empowering” the Wonder Women to
take an active role with some amount of power (however small) that the Wonder
Women will be more likely to advocate for service providers in the community and
potentially for their inclusion in the community. There is also the expectation among the
agencies that hire Wonder Women that the women will recruit other members of the
community to become actively engaged in a particular agency’s work. The non-profit
agencies in The Neighborhood indicated in interviews that many of their funders
required a certain amount of “community engagement” which was measured in a count
of the number of residents who volunteered with the agency and the number of hours
volunteered by residents.

*How is the Agenda of the Community Set?*

Claiming that there is only one agenda in The Neighborhood would be giving into
the pitfall of assuming homogeneity in a community (Saarinen 2006, Taylor 2016). The
many changing agendas in The Neighborhood are a result of the clear segments within
the community; including their interaction and the sheer number of community
development initiatives in The Neighborhood which create more moving pieces in the
idea of community and more reciprocal interactions between the members of the

From an etic perspective, it appears that long-term residents exert a significant amount
of control on the neighborhood’s agenda through the above-mentioned relationships
and leverage of social, cultural and ultimately economic capital. By setting the agenda
and controlling the flow of funds coming into the community, the long-term residents can
move forward with their agenda. The agenda of the long-term residents is along the
lines of returning The Neighborhood to it its perceived glory days as a haven for middle
to upper-class black communities. This desire to return The Neighborhood to its glory days was discussed in interviews and during participant observation. Also, the work to create a museum and heritage center and references the halcyon days of the past help to construct this image.

Beyond funding for the museum and heritage center, long-term residents have some level of control over many of the funds that come into the community, both directly and indirectly. Directly, as leaders of the neighborhood association and through their activity in city politics, community grants are often directed to projects the long-term residents have vetted or that they directly sponsor. Indirectly, they wield power through their social networks. The key long-term residents were gatekeepers, whose approval was ‘required’ for all three projects I worked on in The Neighborhood. By required, I mean that the researchers who lead the two first projects I worked on were informed that these gatekeepers’ buy-in was essential to working in the community and being successful. For the CHNK Coalition, the gatekeepers had already been approached for their approval when I joined the team—long before funding had even been secured.

Furthermore, it is not just an initial approval that is required of these gatekeepers. During the five years of funding that the CHNK Coalition received, there were at least two instances that I was aware of where these gatekeepers came to the leadership of the coalition and expressed their concern about the direction of the groups work. These gatekeepers made it clear that if their concerns were not addressed that they would withdraw their support from the coalition and that with the withdrawal of their support, that many others would stop supporting the group. The first time this issue came up, it resulted in the removal of a paid employee serving on the leadership committee. There
seemed to be widespread support for this decision, but it was never clear if that support was independent or influenced by the long-term resident gatekeepers. The second time the issue arose, there was a concerted effort to bring these gatekeepers around to the coalition’s point of view, and, while not as a result of the gatekeepers’ concerns, it was helpful that the potential for their project to receive funding kept the gatekeepers engaged.

It is a testament to the dedication of the gatekeepers how much influence they had in The Neighborhood and the city. Gatekeepers’ influence was a result of their sheer determination and passion to improve their community. This influence in many ways stemmed from the constant presence and willingness to be a part of any discussion related to The Neighborhood. This high level of participation over many years has made the Sanders’ incredibly knowledgeable about not only The Neighborhood but the complex city and county politics that affect the lives of residents.

As the Sanders’ age, their dedication has not waned. At the time I was active in the Neighborhood the Sanders’ had indicated a desire to begin to step down from leadership positions, but remain engaged in The Neighborhood. They had identified the neighborhood association leadership as a place they could step down and hand over the reins to the next generation of community leaders. At that time there was not a clear person identified to take over the position. It would be a great loss to the Neighborhood if the Sanders’ were not able to mentor the next generation of community leaders and pass over the torch.

Political relationships were important not just within The Neighborhood, but within and between the CBOs that provide services to the community. In an interview with a
CBO staff member, they referenced the political notion “trickle-down economics,” describing an idea of trickle-down health where policies were being made, and actions were being taken at levels above the coalition. The policies and decisions set an agenda that benefitted the non-profit agency administering the coalition’s grant administrator, and that were supposedly going to improve the health of The Neighborhood residents, but in the end had little impact. In part, this the participant being interviewed was referencing a push for obesity interventions which place the onus on the affected individual, in particular, physical activity and diet change. Not only do these types of interventions not work on the community level (Guide to Community Preventive Services 2014), they are the types of interventions that the grant administrator runs as their primary income generator. What was particularly shocking about this quote is it came from an employee of the grant administrator agency and one whose background was in traditional health promotion and physical education models. It appeared from the outside that this person was brought in by their employer to replace my key informant for the purposes of diminishing the social justice perspective that was at the forefront of my key informant’s expressed intent in leading this work, refocusing the intervention on physical activity. Somewhat surprisingly, this new leader very quickly changed her opinion about the root causes of any health issues in the neighborhood; she readily described the largest problem facing the community as poverty and inequality after a short period of time in The Neighborhood. It was from this new perspective, but with a constant push from her agency’s leadership, that she described trickle-down health
As the administrator of the coalition’s grant funds, the YMCA could not receive funds from the grant to provide services to the community from this grant outside of the overhead it was allotted to lead the coalition and attempt to ensure the sustainability of the initiative. Still, throughout the interviews with coalition members, there was the belief that the YMCA was setting the agenda and stood the most to gain from this work. Initially, outside of interviews with the Y’s own employees who had insight into the inner workings of the organization, this seemed curious. It was not until probing about community readiness that the reason for this belief emerged. By setting an agenda about childhood obesity in a community with minimal perceived need for childhood obesity, the YMCA was able to set both the short and long-term agendas of the community. Furthermore, as the administrator of a large grant, the funds to improve the overall health of the community flowed, or more aptly trickled-down, from the Y’s leadership.

Wonder Women also play an important role in community agenda setting in The Neighborhood. In part due to their multiple memberships as both a resident and service provider, Wonder Women can be incredibly influential. Wonder Women can take their emic perspectives and use them to try to guide the work of service providers. While not always successful, Wonder Women created open dialogues in coalition meetings and other community meetings about the issues they saw as most critical to their community. One example of this was one Wonder Woman who felt very strongly that the “community pride” piece of the coalition walked a fine line between wanting to help the neighborhood and imposing values on the neighborhood and punishing neighbors who could not or would not conform. For example, some long-term residents
argued that code enforcement to get trash off of lawns, houses and vacant lots was an important part of the work of the Safety, Access and Community Pride workgroup. At two different times, two different Wonder Women took this issue head on, expressing their concerns that fines for code enforcement not only disproportionately impacted the poorest of residents, but it also brought additional individuals with legal authority to The Neighborhood where there was already large amounts of mistrust. Ultimately it was decided that the coalition should negotiate with the city and county to have more neighborhood cleanup days. These days did rely on volunteers, often from The Neighborhood, to go out and clean up the neighborhood, but they also included free curbside pickup of oversize trash that normally required fees that not all residents were able to afford.

There are many ways in which Wonder Women had the power to assist in the agenda setting of the community. While often not in a position of enough power to direct the types of services the non-profit they were employed by would provide, they were able to influence the provision of those services in ways that better matched their views and dreams for The Neighborhood. This took many forms including an attempt to turn the creation of a volunteer database into a small grassroots movement of residents advocating for their community, negotiating with neighborhood owned businesses to provide more access to physical activity in mutually beneficial ways. These negotiations bring the needs of short-term residents to the table when only long term resident needs were being discussed; constantly seeking input from as many residents as possible grounds the work of community non-profits in the real and perceived needs of the residents of The Neighborhood. As such Wonder Women often carried a burden of
living in two worlds at times feeling like they were the sole voice of the community - a large responsibility for any individual to carry.

**How is the Community Organized and Who Will Do Its Work?**

As discussed in the previous chapter, one of the priorities of the community outreach work group was a community engagement plan which included a way to reliably reach residents and a plan to engage residents as volunteers - the idea being that residents themselves would take an active role in changing/bettering the community. This was a lofty and potentially misguided goal of having paid employees, often of a different class background, asking the predominantly low-income residents of The Neighborhood to volunteer their time to advance the work of a non-profit agency and ostensibly help the community for the better. In this light, it is not hard to understand why the work group and the non-profits struggled to achieve this goal.

There was, though, repeated success in finding residents to commit to the cause as it were and work extensively, both paid and unpaid, to better the lives of The Neighborhood residents and be showcased by the nonprofits as model citizens. Virtually all of the volunteers and paid staff were women. It is, therefore, inescapable to look at the gendered aspect of who does the work of community.

I first presented the idea of “Wonder Women” at the 2012 Annual Meetings of the American Anthropological Association. Over the course of my work in The Neighborhood, there have been at least four Wonder Women who have worked tirelessly, often with little reward, to make an impact in their community. Rather than describe each woman individually (which might risk revealing their true identity and compromise their confidentiality) I present below a composite description of the Wonder
Women as this both creates the clearest picture of the role as well as helps to protect the anonymity of the Wonder Women I have been able to work within The Neighborhood.

Wonder Women were, as the name suggests, all women. It is difficult to determine if gender is critical to the role of Wonder Women or if it is an artifact of other processes, most strongly the large number of what the US Census Bureau calls “Female householder, no husband present, family household,” i.e. female single parent households. According to the 2011 American Community Survey, which most closely matches the timeframe of data collection, 40% of all households and 56% of all families in The Neighborhood were headed by female single parents. This is almost two times the rate for Hillsborough County and more than three times the rate for the US as a whole (US Census Bureau 2016).

Additionally, the reason that these community advocates were women is also guided by the fact that all of the research I have undertaken in The Neighborhood- and therefore all of the non-profits I work with- have been associated with children. While one could argue that as a generality child care is assigned to women in our society, this is a simple matter of math in The Neighborhood. 56% of families headed by single women and 30% of families headed by jointly by married couples (who were by law heterosexual at this time), female parents outnumber male parents two to one (US Census Bureau 2016).

During my time in The Neighborhood, there was one father who briefly looked like he might fall into the role I have classified as Wonder Women. He was unemployed and extremely active in his children’s life- from leading a walking school bus to school
involvement, and out of school time enrichment involvement. His dedication to his children and the effort he was willing to expend to better their lives had not gone unnoticed, but as he was being tapped to take on a larger role he declined citing his need to find employment. Employment is an important aspect of Wonder Women which will be discussed later in this composite sketch.

The Wonder Women that I worked with all identified as Black, but it does not seem like race or ethnicity is a defining characteristic of a Wonder Woman. In my experience, it seems that the important aspect that all Wonder Women share was that they were marginalized members of society, not that they specifically identified as Black. They are marginalized as women, and they were all marginalized as poor women at some point in time in their lives. It would certainly add to the concept of Wonder Women if further ethnographic research were done on the role of race and ethnicity.

Wonder Women were all active in the community before fulfilling that role. In each case, these women identified as willing to work, but more importantly having social and cultural capital in the community. Wonder Women’s social capital came from their extensive social networks both in The Neighborhood as well as the city in general. Certainly, none of the Wonder Women were shy about sharing their opinions, and this outspokeness was important in their selection by local non-profits as potential employees. In addition to being outspoken Wonder Women were unique in their ability to provide constructive criticism; this makes sense as local non-profits would not likely tap their opponents to work as allies. More often than not Wonder Women’s cultural capital came from the work they were already doing as advocates for or in The Neighborhood on their own; it was this capital the women had that made them
candidates to be Wonder Women in the first place. After being identified in the above ways as potential candidates by a local non-profit agency, the women were then asked to volunteer for the given non-profit. This volunteer work is in many ways a cost-free trial employment period to see how the women would interact with other non-profit leaders and to test the level of commitment of these women to work, often long hours, for the sake of the community.

For the women who passed the test of increased responsibility and commitment as volunteers, they were offered a paid role with a non-profit in the community. With the paid role came increased responsibility and workload. As the workload ramped up, so did their commitment to the work they were doing and the feeling that they were making a positive impact on The Neighborhood. In interviews with the Wonder Women, it does not appear that they were explicitly asked to commit to the long hours, many of which were unpaid in their salaried positions. Certainly, though, from an outsider perspective, they appear to be encouraged to over-commit to their work. First, Wonder Women were encouraged to over commit by example, as the majority of non-profit employees that hired Wonder Women were active in the community above and beyond their traditional forty hour weeks. In interviews with non-profit staff, statements such as “a sixty-hour work week is (a) good week,” or “this work demands that I am present for every event in the community, regardless of purpose… if I am not seen once it is assumed that I am no longer working in [The Neighborhood].” This over-commitment was also encouraged- or potentially required- by assigning tasks to Wonder Women that would take large amounts of time and work to complete, but only allotting a small amount of their paid work time to complete the task. For example, in creating a database of residents,
expectations were set extremely high- there was a goal of having a phone number or email address for all adult residents, but the Wonder Woman tasked with this was only asked to commit a few hours a week to the assignment.

Over-commitment is key to the role of Wonder Women, and as such, the role of Wonder Woman is not a sustainable role for any individual in the community and may not be sustainable as a process where Wonder Women are cycled through ad nauseam. There is no clear timeline for how long a Wonder Woman will work as an employee of local non-profits and the reasons why Wonder Women transition out of that role varied but are all related to realizing that their level of commitment cannot continue. Of the Wonder Women I had the privilege to work with, their tenure lasted as short as 16 months and as long as nine years. This variation seems to be explained by the roles the Wonder Women were given in the non-profits they worked for as well as their ability to move up in the organization, although this certainly could be researched further in the future. In interviews with Wonder Women after they stepped down from that role in The Neighborhood, they were extremely candid about why they chose to move on. Officially the motivations the women had for stepping down from their role have included taking new jobs outside of The Neighborhood and stepping down to spend more time with their families. In interviews, though, former Wonder Women is expressed that they felt too much was demanded of them in their role as Wonder Women. One former Wonder Woman said that she “took the job to be involved in my kids’ life… and now I am lucky if I get to eat a meal with my kids or hear about their days.” This over commitment is critical to the role of Wonder Women, not only because it is a defining characteristic of
the women themselves, but because the over-commitment is an expectation the non-profit leaders have of these women.

Based on interviews, non-profit leaders do not view Wonder Women as expendable, at least not expressly. In fact, they openly state their fears that these women will burn out and concern over how difficult it would be to replace the Wonder Women. However, that expressed belief is not always realized in the actions of the non-profit leaders; their actions indicate there is a sense that these women are dispensable and can be replaced. Non-profit leaders do not actively discourage the over-commitment of the Wonder Women and continue to push them to increasingly spend energy and invest emotionally in their work. In many ways over commitment and emotional investment (via a sense of personal responsibility and belonging to the community) is normalized and expected. The difference between Wonder Women and other non-profit employees, beyond their status as residents, has to do with the view that Wonder Women can be replaced, while the core non-profit leaders perceive themselves to be almost immutable parts of the neighborhood. Additionally, the level of personal responsibility and expectation of emotional commitment is much higher—if they fail, they have let their community down.

Wonder Women are key change agents in The Neighborhood community as they work toward whatever goal first made them invest their time and energy into the community as described above in the discussion of research question two. If they are members of the short-term resident community, which they often are, they gain the respect of the long-term residents due to their commitment to the neighborhood. As such they have a role in all three community groups and wield a large amount of social
and cultural capital. It does not appear, either from observations or interviews that Wonder Women realize the amount of capital they wield; if they do realize the potential power they have they do not exercise it either due to a lack of self-efficacy or fear for the safety of their position working for a non-profit. Interviews with Wonder Women after they stepped down from their official roles indicate that these women may not have been aware of the power they had in their role coupled with a sense of duty to the agency they worked for to not be outspoken in any way that was counter to the agency’s official stance. The reasons that Wonder Women are not able to fully use their social and cultural capital they have in their role is an area I would like to explore in future research.

Community-Based Organizations Politicized?

With more than seventeen CBOs working in The Neighborhood (or specifically with its residents) and only approximately 6,000 residents (ACS 2009), the proportion of CBOs in The Neighborhood to the population is in many ways staggering. The amount of CBOs is further exacerbated by the fact the majority of these CBOs targeted their services on the roughly 1,200 children aged nine years or younger (ACS 2009). As neoliberal policies have shifted the responsibility of caring for the nation’s neediest from the government to CBOs, the amount of CBOs operating in the US has increased, and their services have diversified (Laws 2014, Winston et al. 2002). As such, the seventeen CBOs who participated in this research were not the only CBOs who were working in The Neighborhood. These seventeen CBOs did encompass all the CBOs who were based in The Neighborhood’s geographic boundaries. There were many more city-wide
and national CBOs who did, at times, provide services to the residents of The Neighborhood.

With more than seventeen agencies seeking to provide welfare and social services to a relatively small population, resources were limited. One role that I was able to take on as a participant observer in the research was as a mini-grant reviewer. The role of grant reviewer was incredibly informative as I was given access to the internal documents of most of the CBOs working in The Neighborhood. The majority of CBOs in the US are small in scale; in 2016 fifty percent of not-for-profit agencies who disclosed their revenue statements reported an operating income of less than $100,000 (NCCS 2016). The overwhelming majority of the CBOs operating in The Neighborhood fit into this small scale category. This is in contrast to the financial agent of the mini-grants, the city-wide YMCA with 2016 net assets of over $40 million (YMCA 2016). While this likely explains why the funding foundation chose the YMCA as the financial agent and organizing agency for the grant- there is a clear capacity- it exacerbated the strained relationships of the CBOs in The Neighborhood.

With mini-grants averaging $20,000 annually, with the potential for three years of funding at this level, the local CBOs were competing for what was often 25 to 50 percent of the operating budgets. The possibility of three years of funding at this level meant that some grantees would be able to shift a sizeable portion of their time from fundraising to service provision. Of the grantees that applied for mini-grants, most had two to four staff, but several had only one person on staff. As such, a shift away from fundraising to service provision was seen as a real victory for some grantees. One applicant who was interviewed during the first mini-grant cycle described the potential of
three years funding at that level as a “luxury” where they could focus their time and effort on the children they served.

While pumping over $500,000 into the funds available to the CBOs working in The Neighborhood was a boon to service provision, it was not without its cost. While $500,000 sounds like a decent sum of money, divided over three years and amongst six to ten agencies annually, this money only skims the surface of need. A lack of funds to meet all needs meant that not only was the grant process competitive; it was also highly political. With more than seventeen CBOs working in a small geographic space, they formed their own community.

As with any community, there were social norms and relationships to be recognized if not honored. For example, the Sanders,’ as key gatekeepers and some of the most dedicated people working in The Neighborhood, likely needed to be recognized in this process. It was originally thought that under their leadership the local museum would apply for funds to put on a food/nutrition/physical activity set piece for which the mini-grant would pay. Wisely, the Sanders’ wrote a grant that focused on the museum and avoiding mission creep. They had been incredibly active from the beginning and provided critical guidance to the Safety, Access & Community Pride workgroup. Their grant, while clearly fitting into the community pride focus, was not funded in the first two years. In the final year, the grant selection committee had very candid discussions about whether the museum grant should be funded, just out of respect the role of the Sanders. This was highly contentious, especially as two seats on the panel of six were for representatives from the foundation funding the overall childhood obesity prevention initiative. Ultimately, it was successfully argued that in the
cultural context of The Neighborhood, community pride was critical to the “health” of the community and that pride and a sense of safety could increase utilization of neighborhood physical activity outlets.

While it would be easy to say that the museum was funded solely as a political gesture that would be short-sighted and incredibly unfair to the Sanders’ and The Neighborhood as a whole. Over a year was spent on prioritizing the needs of The Neighborhood and the one workgroup that truly engaged residents, long-term and short-term alike, was the safety, access, and community pride workgroup. This group emphasized the shortcomings of an “if you build it, they will come” mentality. There had been many smaller initiatives to augment the physical activity outlets in The Neighborhood—from new playground equipment to new sports leagues. While there is a clear value to this, it does not address the underlying issues that prevent the use of existing resources in The Neighborhood.

The political nature of the min-grants did not just relate to the residents of The Neighborhood. The community of service providers and their social obligations also impacted the provision of mini-grants. While there are several examples of how existing social relationships impacted the mini-grants, there is one example which explains the role of existing relationships. One long-term CBO in The Neighborhood had been involved from the early days of the CHNK initiative. The CBO was a single-person initiative housed under an umbrella 501(c)3, which shifted some financial responsibilities away from the staff of one. Even with this structure, having only one staff to solicit funds and provide direct service to youth is a demanding and tenuous situation. In the first two grant cycles, this CBO applied to augment their services with nutrition
education. While the grant was competitive, there was concern over mission creep and sustainability. As there was always more requested in grant applications than could be funded, this grant was repeatedly not funded.

In the third and final round of grants, even after incorporating a research-informed set of training materials, it appeared as though the grant was not going to be funded. At this point, a member of the grantee committee shared that if the CBO did not receive funding from the mini-grant process, they most likely would have to cease operating in The Neighborhood until they secured additional funds. This started a discussion that ranged from concern over the loss a service that had been in The Neighborhood for almost a decade to concerns about the one staff member, for who running the CBO was their primary source of income.

What was the most surprising about the discussion that ensued, was the role of the funding agencies two seats on the grant selection committee. Unlike in the discussion regarding funding the museum grant, where there was significant concern from the funding agency about how the grant fit their priorities, there was little to no concern about potentially funding a CBO on the brink of closure. Even though there is not a strong link between nutrition education (alone) and health behavior change and even though sustainability was a concern (it was unclear if the grant would keep the CBO’s doors open for the entire grant year), the funding agency was not concerned as there was a fiscal agent in the role of the Umbrella agency.

Again, the priority of the funding agency shaped provision of mini-grants in a way that would likely not have happened had they not played such a strong role throughout the entire process. While it certainly the right of the funder to set conditions on the
money they provide to CBOs, it seems that CBOs need to be ready to negotiate the terms of the funding on the front end of the accepting funds. From this research, it appears that the CBOs did not feel empowered to negotiate with funders, but it appears to be critical, especially when the goal of the project was to community-based and participatory.

For example, the community canvassing survey found that the number one health concern in The Neighborhood was adult onset diabetes. If the community tells you that childhood obesity is not a concern, but that diabetes is a concern, there needs to be the room to meet the needs of the community, especially in a situation like this where there is clear overlap between the proximal issue of childhood obesity and the distal outcome of adult onset diabetes. The idea of shifting focus was shared with the funding agency, which responded that incorporation of adult diabetes prevention was possible, but that the main focus of the grant was childhood obesity. What would have been the impact if the community had identified a completely unrelated health issue such as addiction or sexual health as the most important? While it may seem obvious that a community-based, participatory endeavor should seek funding after an issue is identified, how viable is that? In the case of the neighborhood, the promise of half a million did help to energize the community-residents and service providers alike-in a way that would likely not have been possible if it were an unfunded initiative. Additionally, the popularity of community-based and participatory work (Banks et al. 2013, Salimi et 2012) has made it all the more fundable. As such, CBOs need to be savvy about when to utilize these techniques and ensure that the funding agency is
open to a truly participatory process and how it may shift the goals of the work to be funded/completed.

**What is the “Community” in Community-Based?**

At the start of this dissertation research, the thought that operationalizing community appeared to be a relatively simple task. With a focus on the prevention of childhood obesity and an applied perspective along the lines of Laura Nader (1972), the community was operationalized as those who resided within the physical boundaries of The Neighborhood in addition to a subset of interest, the community of service providers working in The Neighborhood. Very quickly these two, place-based communities began to melt away, intermingle, reform and then change again as residents became service providers, residents had social divides and so on. This highly malleable idea of community as described by Newman and Clarke (2009, 2016) and Amit and Rapport (2002) created an unanticipated, complex problem, particularly as the research focus shifted from childhood obesity prevention to an ethnographic understanding of community-based research.

With the attention of the research on the community-based process and not the impact of an obesity intervention, a paradigm of community-based research (and therefore of community) needed to be identified. It was imperative to the researcher that the “community” be left in a better position than before the research started. A transformative Freirian approach (1970) seemed unrealistic with limited on-the-ground engagement with the research. It was also out of the scope of the research to conduct community organizing in the vein of Saul Alinsky to create an alliance of community-driven institutions (Jamoul and Wills 2008). Instead, working with service providers and
residents when possible, an asset-based community development (ABCD) approach seemed the most appropriate to the scale of the research (Smock 2004). ABCD focuses on developing and realizing a community’s assets to enable it the community to solve its problems (Newman and Clarke 2016, Smock 2004).

As the focus of the obesity intervention work had been based on existing asset recognition and development, an ABCD approach appeared to make sense until the question of defining community arose. Who is the community? From the public health perspective of the previous work I had done in The Neighborhood previously, the community was very clearly the community of service providers as they were the gatekeepers of physical activity spaces and had the ability to implement nutrition-based changes. Noting the caution of Newman and Clarke (2016) that ambiguity in defining community can lead to the appropriation of community, defining the community as service providers was an oversimplification when their goal was to mobilize the community.

Using the lens of community’s malleability and mutability, the community was operationalized as those that lived, worked or played in The Neighborhood. At any given time, the community that interfaced with the researcher could be from the sub-groups of long-term residents, short-term residents, and service providers. Who was represented themselves as a member of the community at any given time could and did change. Moreover, with these three sub-populations of community, it was important to recognize the varying power differentials and how they shaped community (Bauman 2001, Neal and Walters 2008, Newman and Clarke 2016).
As “applied” research grows and various forms of “community-based” research (e.g. Community-Based Action Research, Community-Based Natural Resource Management, Participatory Action Research) become more and more commonplace (Damon et al. 2017, Israel et al. 1998, Minkler 2005, Minkler and Wallerstein 2011), it is imperative that researchers take a more critical approach to deconstructing the “community” in community-based research. This could take the form of recognizing the limitation of research and specifically addressing how the operationalization of community in a research project was limited in scope and could be a threat to validity through to a full examination of how a given community is formed, how it changes, and the inherent power differentials that exist within and between communities.
CHAPTER SEVEN: CONCLUSION
Through more than five years of working in The Neighborhood, I have collected large amounts of data, qualitative and quantitative. Analysis of this data, with a focus on public health-based interventions to classic ethnography whose research questions emerged through participant observation, has resulted in new perspectives on how community is organized in The Neighborhood. From the Wonder Women who in many ways are the glue of the community and work to advance the community’s agenda to the process of gentrification that may result in long-term residents pushing the short-term residents further to the margins (physically or culturally), The Neighborhood is a truly unique setting that can help to advance anthropological understandings of community. This chapter examines the lessons learned, including potential policy recommendations, as well as the overall significance of the findings presented in this dissertation including significance to research participants, the non-profits working in The Neighborhood and to Anthropology in general. This chapter also briefly addresses the weaknesses of this study and how they can be bolstered by future work. Finally, areas for further study are highlighted, and their potential impacts are briefly explored.

Significance of Findings
The significance of this research varies across the levels of the research process from the participants on the ground to the body of anthropological theory. There are implications for the participants of the study, who were almost exclusively non-profit service providers, although this significance can also expand to residents of The
Neighborhood as a whole. There are also real implications for the understanding of the role of NGOs and how they integrate with communities. Finally, the most important significance may be for anthropology and the understanding of the theory and processes of gentrification and community investment.

The participants of the research were predominantly employees of non-profit organizations and service providers in The Neighborhood community, although there were also participants who were not employed by a non-profit and were a part of the research due to their role as a resident of The Neighborhood. For both of these groups, findings around how the community agenda is set and how the work of the community is done has significance. The reliance on Wonder Women is a potential pitfall for both the non-profits who use their labor and the community who in theory reaps the benefits of that labor. Wonder Women are not sustainable as a phenomenon. As individual workers Wonder Women face high levels of burnout as discussed in chapter six. Also, as a means of getting work done and as a form of community engagement, Wonder Women are not a viable solution in The Neighborhood; at some point, there may not be someone willing to take on such a demanding role. For the work of the community to be done, there needs to be a balance between the work of the non-profits, and the work of the community. For the community to be actively involved, they must be a part of setting the agenda of the work to be done. As obvious as this suggestion may sound, perceptions of what or who is the community of The Neighborhood has meant that this has not been achieved. While there can be a role for gatekeepers and the agenda of the long-term residents until the short-term residents are engaged, the buy-in of these residents will be minimal at best.
There is also significance for the work of non-profit and non-governmental organizations beyond the confines of The Neighborhood. This dissertation calls for a reflexive review of how community engagement happens. With the best of intentions, there may be Wonder Women (or Wonder Men) employed by other agencies who believe they are offering a community member a chance to better themselves and the community. This thought, though, is wrought with an inherent power differential where the community member is lacking, and the community agency provides or adds worth or value to the community member.

While there may always be power differentials, if there is enough reflexivity and the building of true partnerships, true collaboration between non-profits, or even researchers, and community members can be achieved. Even within The Neighborhood, the work of Arney (2012), Sabogal (2013), and Hathaway (2005) shows that such relationships are possible. The difficulty with this type of research or non-profit service provision is that it can be incredibly time-consuming to build the types of relationships necessary. Working primarily with non-profit employees and long-term residents who had more power than I did, it took over three years of intensive participant observation to gain true access and be a part of discussions and decisions that were incredibly personal and private.

With the relatively widespread acceptance of community-based methods in research, this question of what defines a community and who is counted in a community becomes increasingly important. Recognizing the rich history in anthropology and sociology of how community can be defined and that multitude of communities that can exist in any given community, how do researchers decide how best to engage a given
community? While this question may not be the newest question in anthropological methods or community-based research, it still bears important consideration. An uncritical approach to understanding the community of interest in “community-based” research, there are many pitfalls that range from an oversimplification by the homogenizing of community to the appropriation of community, all of which present real threats to the validity of research findings.

Moreover, anthropological perceptions of communities active in an area and selection of key informant may permanently affect the level of access and trust a researcher can gain in a community. In an applied world of rapid assessment and business-like timelines, extended timeframes for early participant observation to get to know a community and identify key informant(s) is often not possible. As such, it essential that all researchers, but especially applied researchers involved in rapid assessment work take into account how they are defining community and how this can impact their results.

**Lessons Learned and Recommendations**

This dissertation has focused extensively on collaboration with non-profit organizations/community-based organizations. This was a useful method of gaining access to a community and identifying key informants for the research. Having this entrée to the community, though, shaped the dissertation research; in many ways, the research became a study of CBOs and how they engage the community as opposed to truly studying “the community.” This is not a negative, in fact, much of the previous research in The Neighborhood focused on the lived experience of residents and in many ways problematized the role of CBOs in The Neighborhood (Arney 2012, Sabogal
2013, Hathaway 2005), but is nonetheless critical recognize and interrogate. A focus on the CBOs and insight into their internal processes provides a novel insight into The Neighborhood, but this needs to be further examined in the context of the lived experience of residents.

It can be difficult to conduct community-based, participatory research, especially if you start with a preconceived area of interest (Banks 2013, Salimi 2012). Even a focus on an issue as broad as health can impede a truly community-based, participatory study. For example, you might find that economic issues are the main concern of a given community and as such, concern about health conditions, even those closely related to economic stability, may be minimal. In some ways, research (depending on its funding) can be flexible around these issues. How, though, do CBOs do community-based, participatory work? CBOs inherently bring to the table a focus area, generally identified in the organizations’ missions and visions, and (hopefully) supported by their funding sources.

For CBOs to participate in initiatives that are truly community-based and participatory, they need to be brought in after the community has set its priorities and goals. As mentioned above, this is in some ways problematic, as there needs to be an agency or group of individuals that is invested in leading a community-based, participatory initiative and that can bring the community together to set priorities and goals. This could a group of concerned citizens or could potentially be a CBO or research organization, but if the initiative is agency-based funding needs to be closely examined. It is imperative that CBOs actively negotiate the terms of funding with the
foundations, governments and other agencies that provide the financial means for CBOs to provide services.

While active negotiation may be difficult for CBOs, especially in times where funds may be scarce, it is critical for the health of the agency and ultimately the communities they serve. “Mission creep,” the shift away from an organization’s core purpose (usually to secure funding), is a constant concern for CBOs (Dolnicar et al. 2008, Jonker et al. 2008, Jones & Wellman 2010, Standerfer and Schaefer 2011). If mission creep results in a reduced ability for CBOs to provide the services that impact their desired outcomes, a proactive stance on negotiating with funding agencies is critical. While this research process has indicated that some CBOs may be wary of negotiating with funders (as seen in the relationship between the Foundation and the YMCA as well as the relationship between the YMCA and mini-grantees), a two-way relationship between grantor and grantee is critical for success.

At first glance, it may appear that grantors hold all of the power, but they ultimately cannot provide the services they value, which is why they have engaged grantees, and as such, it is critical that grantees utilize the power that they have as agents on the ground with the ability to affect change. This will likely be a learning process for most CBOs who have been trained by funding agencies to squeeze the round peg that is a given agency into the square hole that is a funding opportunity. CBOs should still exercise judgment in finding appropriate funders, but should then negotiate terms that best match their needs when appropriate funders are engaged. While this could easily be the focus of future research, I would hypothesize that some funders would see this a sign of health and resilience in an agency they could
potentially fund and that the more regularly that negotiations between funders and agencies occur, the more open funders will be to such negotiations.

In addition to the relationship between funders and CBOs, there are clear lessons learned about “Wonder Women.” As currently constructed, the path of Wonder Women leads to burnout. For the CBOs that utilize these community members who are passionate about the mission and vision of the CBO and are hyper-engaged, there needs to be changes to make the work of these individuals sustainable. First and foremost, reasonable expectations need to be set for these individuals. While it may seem appropriate to harness the excitement and passion of Wonder Women, there should be no difference in expectations for Wonder Women than there for other employees.

As discussed above, funding for many CBOs is limited, and for small agencies, there may be a natural tendency for all employees to work sixty hour weeks and devote their lives to the CBO, but this is equally as unsustainable as Wonder Women. It may not be negative to encourage a small amount of “volunteer” or “pro-bono” work for Wonder Women and other employees, but this needs to be balanced with the expectation of give and take. If community members become hyper-engaged because they see value for their families, it cannot be expected that they work at levels that require them to sacrifice their families. There is the clear potential for the “Wonder Woman” role to be beneficial to the women, the CBO employing them, and ultimately they communities they serve. By setting clear guidelines for compensation, work hours, and promotion potential, a mutually beneficial relationship can be established.
Weaknesses of the Dissertation

As an applied anthropologist who has worked in government and non-profit settings, one of the greatest weakness of this dissertation was the time commitment required to conduct the research. It would have been possible after the community survey to have decided to continue to evaluate the childhood obesity intervention, even though it was clear to me from the survey results and my participant observation that there was no interest in such an intervention and with its community-based emphasis meant there was likely to be little impact. The flexibility to both change the focus of your research and to spend large periods of time at a field site is often not possible in an applied setting.

Another weakness of the dissertation is the small amount of time I was able to spend with and collect data from short-term residents. This decision was conscious, after difficulty engaging short-term residents for even brief informal interviews, it was clear that if the focus of the dissertation was on this portion of the community, I might not be able to get a potentially representative sample. This lack of access to short-term residents was two-fold. I had not spent enough time with that portion of the community to build trust and potentially lost trust by being seen as a part of the service providers in the community and the potential perception that I was allied with long-term residents. Additionally, due to the long history of extensive research in the community (see chapter two), one of the first things short-term residents asked when I disclosed that I was a researcher working my doctorate was if there was an incentive for their participation. This is a perfectly acceptable question, but my lack of funding to conduct my research
meant that if I did work with short-term residents, I would need to find some way to provide a reasonable research incentive to participants.

My interview sample of thirteen coalition members/long-term residents is not incredibly large. This was because the population I had identified for semi-structured interviews was members of the CHNK Coalition of which there were fifteen. The timing of interviews was critical, as most occurred as the project was winding down; this means that I had both built a strong rapport with coalition members, but also that they had little to lose by being forthright in the interview process. I was ultimately surprised by the level of candor participants exhibited in their interviews. As the interviews progressed, they were augmented with informal, unstructured interviews with the long-term residents that were not a part of the coalition to round out the data collected in the semi-structured coalition member interviews.

**Opportunities for Future Research**

The greatest limitation of the research is the small sample size, dictated in part by a small population of interest. To better understand generalizability of the findings of this research, opportunities for future research include repeating part of the study in The Neighborhood and replicating the study elsewhere.

Replication of this study elsewhere would help to understand better the generalizability of both the internal gentrification happening in The Neighborhood as well as the Wonder Women phenomenon. In presentations of this research at the American Anthropological Association annual meetings as well as in discussions with other researchers, it would appear that this phenomenon is not unique to The Neighborhood. Therefore, beyond replication of the phenomenon, a more in-depth
analysis of the forces that create Wonder Woman is critical. Moreover, is it possible that the Wonder Woman-CBO relationship could be constructed in a way that is more mutually beneficial? Is there room for advancement for these women in the CBOs that employ them? Can clear processes be put into place that both impede burnout and further engage the community?

The course of this research project was winding and at times quite difficult. Finding that there was in fact little interest in your research questions in the community and potentially limited value of the findings based on need, this forced me to return to the roots of anthropology and rely on participant observation to discover what things of importance were happening in the community. It was fortuitous for me as a researcher and a sign of cohesion that the will of the community drove the work of coalition towards the questions of interest and did not just replicate a childhood obesity intervention that was of no value to the community.
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APPENDIX A: USF INSTITUTIONAL REVIEW BOARD APPROVAL LETTER

January 14, 2013

John Trainor
Anthropology
4202 E Fowler, SOC 107
Department of Anthropology
Tampa, FL 33612

RE: Expedited Approval for Initial Review
IRB#: Pro00009278
Title: Community-based Understandings of Childhood Obesity Prevention

Dear Mr. Trainor:

On 1/13/2013, the Institutional Review Board (IRB) reviewed and APPROVED the above referenced protocol. Please note that your approval for this study will expire on 1/13/2014.

Approved Items:
Protocol Document(s):
Proposal final.docx

Consent/Assent Documents:
Community Leader Interview - CECIC minimal risk.docx.pdf
Resident, Service Provider and Community Leader Interview Adult IC minimal risk.docx.pdf

Please note, the informed consent/assent documents are valid during the period indicated by the official, IRB-Approval stamp located on the form—which can be found under the Attachment Tab. Valid consent must be documented on a copy of the most recently IRB-approved consent form.

Online informed Consent form granted a Waiver of Informed Consent Documentation (does not require a stamped form).

It was the determination of the IRB that your study qualified for expedited review which includes activities that (1) present no more than minimal risk to human subjects, and (2) involve only procedures listed in one or more of the categories outlined below. The IRB may review research through the expedited review procedure authorized by 45CFR46.110 and 21 CFR...
56.110. The research proposed in this study is categorized under the following expedited review categories:

(6) Collection of data from voice, video, digital, or image recordings made for research purposes.

(7) Research on individual or group characteristics or behavior (including, but not limited to, research on perception, cognition, motivation, identity, language, communication, cultural beliefs or practices, and social behavior) or research employing survey, interview, oral history, focus group, program evaluation, human factors evaluation, or quality assurance methodologies.

Your study qualifies for a waiver of the requirements for the documentation of informed consent as outlined in the federal regulations at 45 CFR 46.117(c): An IRB may waive the requirement for the investigator to obtain a signed consent form for some or all subjects if it finds either: (1) That the only record linking the subject and the research would be the consent document and the principal risk would be potential harm resulting from a breach of confidentiality. Each subject will be asked whether the subject wants documentation linking the subject with the research, and the subject's wishes will govern; or (2) That the research presents no more than minimal risk of harm to subjects and involves no procedures for which written consent is normally required outside of the research context.

As the principal investigator of this study, it is your responsibility to conduct this study in accordance with IRB policies and procedures and as approved by the IRB. Any changes to the approved research must be submitted to the IRB for review and approval by an amendment.

We appreciate your dedication to the ethical conduct of human subject research at the University of South Florida and your continued commitment to human research protections. If you have any questions regarding this matter, please call 813-974-5638.

Sincerely,

[Signature]
John Schinka, PhD, Chairperson
USF Institutional Review Board
APPENDIX B: INFORMED CONSENT DOCUMENT

Study ID: CR3_Pro00000275 Date Approved: 1/13/2016 Expiration Date: 1/13/2017

Informed Consent to Participate in Research
Information to Consider Before Taking Part in this Research Study
Resident, Service Provider and Community Leader Consent

IRB Study # 9278

You are being asked to take part in a research study. Research studies include only people who choose to take part. This document is called an informed consent form. Please read this information carefully and take your time making your decision. Ask the researcher or study staff to discuss this consent form with you, please ask him/her to explain any words or information you do not clearly understand. We encourage you to talk with your family and friends before you decide to take part in this research study. The nature of the study, risks, inconveniences, discomforts, and other important information about the study are listed below.

We are asking you to take part in a research study called: Community-based Understandings of Childhood Obesity Prevention.

The person who is in charge of this research study is John R. Trainor, MS. This person is called the Principal Investigator. However, other research staff may be involved and can act on behalf of the person in charge. The Principal Investigator is being guided in this research by David A. Hammelgreen, PhD.

The research will be conducted in the Sulphur Springs neighborhood of Tampa, FL.

Purpose of the study
The purpose of this study is to:

• The purpose of this study is to better understand the role of community-based methodology in preventing childhood obesity. This will be achieved through the documentation of the creation and implementation of a community-based childhood obesity prevention project in a low-income community in urban Florida. You are being asked to participate due to your role on the Creating a Healthier Sulphur Springs for Kids Coalition or your connection to Sulphur Springs as a resident, service provider or community leader.
• This study is being conducted as dissertation research to fulfill parts of the requirements for the Principal Investigator’s PhD in Applied Anthropology at the University of South Florida.
Study Procedures

If you take part in this study, you will be asked to:

Participate in a one hour taped interview with your permission. The interview is semi-structured, with open-ended questions. There are no right or wrong answers to these questions. Topics covered in the interview include your role in Sulphur Springs, your perceptions of the community, perceptions of community readiness to act on issues the community deems important and your experiences with the Creating a Healthier Sulphur Springs for Kids Coalition.

The interview is approximately one hour in length. There is only one interview associated with this part of the study and your consent will only require the one hour. The interview will take place between January 2013 and December 2013 at a location of your choosing, including, but not limited to: the Principal Investigator’s office, your office, a public location such as Starbucks. With your consent the audio from the interview will be digitally recorded. These recordings will be stored on an un-networked, password protected hard drive in the Principal Investigator’s office. Only the Principal Investigator, Co-PI and those required by law will have access to recordings (see privacy and confidentiality below).

Total Number of Participants
About 65 individuals will take part in this study at USF.

Alternatives
You do not have to participate in this research study.

Benefits
We are unsure if you will receive any benefits by taking part in this research study.

Risks or Discomfort
This research is considered to be minimal risk. That means that the risks associated with this study are the same as what you face every day. There are no known additional risks to those who take part in this study.

Compensation
You will receive no payment or other compensation for taking part in this study.

Privacy and Confidentiality
We will keep your study records private and confidential. Certain people may need to see your study records. By law, anyone who looks at your records must keep them completely confidential. The only people who will be allowed to see these records are:

- The research team, including the Principal Investigator, John Trainor, and his faculty advisor, David Himmelgreen.
Certain government and university people who need to know more about the study. For example, individuals who provide oversight on this study may need to look at your records. This is done to make sure that we are doing the study in the right way. They also need to make sure that we are protecting your rights and your safety.

Any agency of the federal, state, or local government that regulates this research. This includes the Department of Health and Human Services (DHHS) and the Office for Human Research Protection (OHRP).

The USF Institutional Review Board (IRB) and its related staff who have oversight responsibilities for this study, staff in the USF Office of Research and Innovation, USF Division of Research Integrity and Compliance, and other USF offices who oversee this research.

We may publish what we learn from this study. If we do, we will not include your name. We will not publish anything that would let people know who you are.

Voluntary Participation / Withdrawal

You should only take part in this study if you want to volunteer. You should not feel that there is any pressure to take part in the study. You are free to participate in this research or withdraw at any time. There will be no penalty or loss of benefits you are entitled to receive if you stop taking part in this study. Decision to participate will not affect your job status with your employer. You will not be asked to represent your employer in the interview, only to present your personal opinions.

You can get the answers to your questions, concerns, or complaints

If you have any questions, concerns or complaints about this study, or experience an adverse event or unanticipated problem, call John K. Trainor, MS at 813-635-6195.

If you have questions about your rights as a participant in this study, general questions, or have complaints, concerns or issues you want to discuss with someone outside the research, call the USF IRB at (813) 974-5638.
Consent to Take Part in this Research Study
It is up to you to decide whether you want to take part in this study. If you want to take part, please sign the form, if the following statements are true.
I freely give my consent to take part in this study. I understand that by signing this form I am agreeing to take part in research. I have received a copy of this form to take with me.

_________________________  ____________________
Signature of Person Taking Part in Study                Date

_________________________
Printed Name of Person Taking Part in Study

Consent for Audio Recording in this Research Study
It is up to you to decide whether you agree to be audio recorded. If agree to be audio recorded, please sign the form, if the following statements are true.
I freely give my consent to be audio recorded as a part of this study. I understand that by signing this form I am agreeing to take part in research. I have received a copy of this form to take with me.

_________________________  ____________________
Signature of Person Taking Part in Study                Date

_________________________
Printed Name of Person Taking Part in Study
Statement of Person Obtaining Informed Consent

I have carefully explained to the person taking part in the study what he or she can expect from their participation. I hereby certify that when this person signs this form, to the best of my knowledge, he/she understands:

- What the study is about;
- What procedures will be used;
- What the potential benefits might be, and
- What the known risks might be.

I can confirm that this research subject speaks the language that was used to explain this research and is receiving an informed consent form in the appropriate language. Additionally, this subject reads well enough to understand this document or, if not, this person is able to hear and understand when the form is read to him or her. This subject does not have a medical/psychological problem that would compromise comprehension and therefore makes it hard to understand what is being explained and can, therefore, give legally effective informed consent. This subject is not under any type of anesthesia or analgesic that may cloud their judgment or make it hard to understand what is being explained and, therefore, can be considered competent to give informed consent.

Signature of Person Obtaining Informed Consent / Research Authorization ____________________________ Date ____________________________

Printed Name of Person Obtaining Informed Consent / Research Authorization ____________________________
APPENDIX C: COMMUNITY SURVEY

To help your family and neighborhood, please complete this survey. This survey is voluntary and you may skip any question you choose not to answer for any reason.

1. Where do you shop for groceries? (Check all that apply)
   ○ Wal-Mart Neighborhood Market
   ○ Save-A-Lot
   ○ Meat Market
   ○ Publix (Busch)
   ○ Publix (Nebraska)
   ○ Other: ________________________________
   ○ Not Applicable

2. Where do you shop for fresh fruits and vegetables? (Check all that apply)
   ○ Wal-Mart Neighborhood Market
   ○ Save-A-Lot
   ○ Meat Market
   ○ Publix (Busch)
   ○ Publix (Nebraska)
   ○ Other: ________________________________
   ○ Not Applicable

3. Do you consider fresh fruits and vegetables affordable?
   ○ Yes  ○ No

4. In the last seven days, how many times did you eat fruits or vegetables?
   ○ I did not eat fruits or vegetables in the last 7 days
   ○ 1–3 times in the last 7 days
   ○ 4–6 times in the last 7 days
   ○ 1–2 times per day
   ○ 3–4 times per day
   ○ 5 or more times per day

5. Do you garden?
   ○ Yes  ○ No

6. Are you aware of community gardens in your neighborhood?
   ○ Yes  ○ No
   ○ If yes, where?

7. If you cook in your home, who does the majority of cooking?
   ○ Yourself
   ○ Spouse or significant other
   ○ Parent
   ○ I don’t cook at home
   ○ Other: ________________________________

8. What is a meal you enjoy eating regularly?
   ________________________________

9. Where do you get information about nutrition and health? (Check all that apply)
   ○ Medical provider
   ○ Newspapers and magazines
   ○ Church
   ○ Internet
   ○ Health Fairs
   ○ Family/Friends
   ○ Television
   ○ No where
   ○ Other: ________________________________

10. Where do you go for health care/where is your medical home?
    ○ Health Center
    ○ Private Doctor
    ○ Hospital/Emergency Room
    ○ Nowhere
    ○ Other: ________________________________

11. If you have children, about how many hours per day do they watch TV or play video games?
    ○ 3 or more hours per day
    ○ 1–2 hours per day
    ○ Less than one hour per day
12. If you have children, do they play outside?
☐ Yes  ☐ No

13. How often are you or your children physically active?
   You:
   ☐ Every Day
   ☐ 2–3 days per week
   ☐ 1 day or less per week.
   Your Children:
   ☐ Every Day
   ☐ 2–3 days per week
   ☐ 1 day or less per week
   ☐ Not applicable

14. What is your most common way of getting around town?
   ☐ Car
   ☐ Bus
   ☐ Friend
   ☐ Walking
   ☐ Bicycle
   ☐ Other: __________________________

15. Do you know Sulphur Springs has a neighborhood association?
   ☐ Yes  ☐ No

16. What are the benefits of joining the Sulphur Springs Action League Neighborhood Association?
   ☐ Meeting your neighbors
   ☐ Helping in the neighborhood
   ☐ Having a say in what happens in the neighborhood
   ☐ Having a sense of community
   ☐ Other: __________________________

17. Do any of the following health conditions concern you, your family or your community? (Check all that apply)
   ☐ Diabetes
   ☐ Obesity
   ☐ Hypertension
   ☐ Substance Abuse
   ☐ Heart Disease
   ☐ Cancer
   ☐ Other: __________________________
   __________________________
   __________________________

Age (circle one): 18–35  36–55  56 or older
Number in household ______

Ethnicity (Check all that apply)
☐ Black/African-American
☐ Caucasian
☐ Caribbean/Caribbean-American
☐ Asian/Asian-American
☐ Hispanic/Latino
☐ Other (please list): __________________________
APPENDIX D: INTERVIEW GUIDE AND PROBES

SERVICE PROVIDER SEMI-STRUCTURED INTERVIEW

Background- Role in the Springs

1) How long and in what capacities have you worked in Sulphur Springs?
   a. Multiple agencies?
   b. Multiple positions/roles?

2) What is your favorite thing about working in Sulphur Springs?

3) Is there anything you dislike about working in Sulphur Springs?

4) What makes this neighborhood unique?

Community Organization and Community Building

5) What do you think is the biggest issue facing Sulphur Springs today?
   a. Why is this the most important issue?
   b. Were there other issues you considered before answering this question?
   c. What do you think the primary root/cause of this issue is?

6) If your agency were tasked by a funder to address this problem, what would you do?
   b. Anything you would avoid doing?

7) What do you think residents of Sulphur Springs would choose as the largest problem facing their community?
   a. If not the same as #5, Why do you think this differs from your response?

8) What role, if any, do you think local, state or federal policies affect the residents of Sulphur Springs?
   a. Zoning?
   b. Built environment infrastructure?
   c. Food stamps/SNAP?
   d. PE requirements?
   e. FCAT/NCLB?
Community Readiness

9) Who are the leaders specific to the issue of childhood obesity in Sulphur Springs?
   a. How are the leaders involved in this issue?
10) How does the community support the efforts to address childhood obesity?
    a. Are there any ever any circumstances in which members of your community might think that childhood obesity is okay?
11) What are the primary obstacles to addressing the issue of childhood obesity in Sulphur Springs?
12) Who would an individual affected by childhood obesity (child, parent, other family member) turn to first for help in Sulphur Springs?

CHSSK Coalition

13) What is your relationship with the CHSSK coalition?
    a. Member?
    b. Grantee?
    c. Workgroup member? Workgroup chair?
14) How would you describe your experiences working with the coalition?
    a. Strengths of this process?
    b. Weakness of this process?
15) One of the goals of the CHSSK initiative was to utilize community-based and participatory methods. To what extent do you think:
    a. The process has been community-based?
       i. What makes you think that?
    b. The process has been participatory?
       i. What makes you think that?
16) Is there anything else you would like to add?

Thank you for your time and assistance with this project!