Harlem Children’s Zone

Kyle McCarthy and Betina Jean-Louis, PhD
This is one of a series of illustrative case studies, under the auspices of the Friends of Evidence, describing powerful approaches to evidence being taken by initiatives currently engaged in efforts to improve outcomes among disadvantaged children, families, youth and neighborhoods.

Lauded in print and on film, the Harlem Children’s Zone (HCZ) is widely acknowledged as one of the first innovators to develop a neighborhood-specific approach to poverty and a “cradle-to-career” pipeline of education and support for low-income children.

Evolving from the Rheedlen Centers for Children and Families, HCZ first began as a one block pilot program in the 1990s. Expanding in 2000 to 24 blocks and by 2007 to 97 blocks, HCZ is dedicated to providing a range of service programs, charter schools and community centers for children and families living in the Zone, where 63 percent of children are born into poverty.

In 2015, HCZ served 13,000 children and more than 12,000 adults. The pipeline starts with its “Baby College,” which aims to teach expectant and new parents how to raise happy, healthy babies, and moves through to its College Success Office, which seeks to ease the transition from high school graduate to college student. At each stage, HCZ supports the children of Central Harlem through wraparound schools and programs. The Harlem GEMS pre-Kindergarten sites get kids ready for school. The two charter schools, called Promise Academies, guide students to college. Healthy Harlem provides all children in the Zone an hour of exercise a day and 45 minutes of nutrition education a week. The community centers, which provide after-school programming for students and make available night and weekend activities to all residents of the Zone, remain a hallmark of HCZ.
The impact of the Harlem Children’s Zone, however, has spread far beyond Central Harlem. Through its Practitioners Institute, more than 450 domestic delegations, from 44 states and Washington DC, and 141 international delegations, from 68 countries, have learned about HCZ’s intensive and holistic approach to fighting poverty. In 2010, the federal government announced its Promise Neighborhoods program, which in the past six years has awarded federal grants to communities and non-profits building a pipeline of educational and supportive services inspired by HCZ. The Promise Neighborhoods Institute at PolicyLink, a partnership of PolicyLink, HCZ and the Center for the Study of Social Policy (CSSP), provides assistance to those looking to spread the HCZ approach by promulgating a results-based approach, identifying and lifting up best practices, connecting local initiatives with public and private funders and by providing management and coaching support. Even as HCZ continues to refine its strategies, its programs and philosophies are championed as key to transforming struggling communities and schools.

This case study looks at HCZ through the lens of how the organization, and its community initiatives, use and generate evidence to achieve its goals. Our analysis is organized around five characteristics of a more inclusive approach to evidence that CSSP and the Friends of Evidence group have identified as frequently encountered in initiatives that can be considered “evidence innovators.”
HCZ has built its strategies on a core set of principles, as enumerated in Figure 1. HCZ leaders knew from the beginning that they would need to demonstrate they were actually living these principles and achieving their desired outcomes.

As Betina Jean-Louis, Ph.D., HCZ’s director of research and evaluation, says, “We understood before others in the field that there was a change in the funding community, and that funders really were going to need outcome data. They weren’t going to be satisfied anymore with the case study or the ‘evaluation-light’ approach.” In response, Jean-Louis’s internal evaluation team was created as part of a business plan developed in 1999 to reach scale and serve 70 percent of the kids in the Zone. Since then, data and evidence of impact have been essential to honing HCZ’s programs.

A “culture of data,” in which everyone from senior leadership to student advocates use feedback to guide continuous improvement, has been consciously cultivated at HCZ. Chief Operating Officer Kwame Owusu-Kesse encourages staff to embrace data, even “ugly” data that may be uncomfortable or disappointing. “If you look at data, and are as religious and fanatical about data as we are,” he notes, “the data [are] not going to be pretty. But we can’t be shocked by the data. Rather, we need to use the information as a tool to build a better practice.”

HCZ built its pipeline of interventions and supports in full recognition of the uniqueness of its own community’s needs and opportunities. It reviewed lists of “proven programs,” recognizing the difficulty—and sometimes even inappropriateness—of implementing evidence-based programs with absolute fidelity. As an example of this challenge, HCZ leaders cite the Nurse-Family Partnership (NFP). NFP is a strong program with evidence of success based on experimental trials, but it serves first-time parents only. HCZ knew it had to also target and support the parenting needs of other populations, for example, second-time-around caregivers—grandparents who are raising a second generation of children. Thus, HCZ determined that NFP could not be the only offering for parents of young children in the Zone, but they use NFP as appropriate, connecting a few targeted individuals with the program and supporting their participation. Simultaneously, HCZ continued to expand its Baby College parenting classes and associated home visits to support all the other caregivers who did not qualify for NFP. Baby College, with its full range of services, remains the primary program provided to parents and guardians of young children.

Responding to this and similar challenges, and to assure it would be developing the most beneficial program mix for its particular blend of challenges, needs, interests, histories and resources, HCZ used evidence

---

Figure 2. HCZ Core Principles

1. Serve an entire neighborhood comprehensively and at scale.

2. Create a pipeline of support.

3. Build community among residents, institutions and stakeholders, who help create the environment necessary for children’s healthy development.

4. Evaluate program outcomes and create a feedback loop that cycles data back to management for use in improving and refining program offerings.

5. Cultivate a culture of success rooted in passion, accountability, leadership and teamwork.
from its own observations, as well as from its own and others’ research.

For example, in the late 1990’s, program staff noted that students were getting heavier. After experimenting with its own Get Fit and weight loss competition, HCZ asked Bridgespan, a non-profit consulting firm, to research methods and interventions proven effective for reducing body mass index (BMI) among children and young adults (as well as preventing increases over time in normal-weight individuals). As Geoffrey Canada, the president and former CEO of HCZ, told staff, “We don’t want to reinvent the wheel.” By scanning the country for best practices, Marlene Fox, senior manager for health programs, was hoping to build on proven research, rather than invent from scratch.

This frequently happens at HCZ: senior leaders and the dedicated evaluation team look to identify best practices and proven programs. However, rather than adopt an outside program wholesale, HCZ usually adapts a particular strategy to fit its particular neighborhood and population.

In this case, Bridgespan recommended the CATCH (Coordinated Approach to Child Health) curriculum, which combined nutrition and fitness classes for preK-8. HCZ adopted the curriculum, but after the consulting firm Mathematica Policy Research completed focus groups with middle school youth—another source of data—Fox found the curriculum was not as effective as hoped. The preteens did not like it; they wanted more cooking and tasting classes. The nutrition educators confirmed that the CATCH curriculum was a tough sell. In fact, they had already started modifying it on their own. With Mathematica’s focus group testing and their own informal surveys of nutrition teachers, Fox and the Healthy Harlem initiative codified changes to the CATCH curriculum to appeal more to adolescents.

Similarly, when the HCZ began using the Center for Youth Program Quality’s tool to help assess its after-school programming, leaders at HCZ did not feel wedded to every question. Rather, HCZ adapted the Youth Program Quality Assessment survey to fit its needs.

Often, the Harlem Children’s Zone finds itself venturing into relatively uncharted waters. Bessie Wilkerson, Ph.D., the director of education research, notes that although there is a plethora of research on what constitutes high-quality early childhood education, there is less information about helping older teens. As the evaluation and program teams develop the Post-Graduate Institute, or PGI, for graduates of all HCZ high school programs who need more support, they are among the first in the field figuring out how to improve the college success of these high-risk students. In cases like these, HCZ staff will often use existing research as a jumping-off point for developing their own programs.

2. Learning from Experience to Guide Continuous Improvement

Assessing the percentage of Harlem GEMS who are school-ready, or the number of fifth-graders outperforming their national counterparts, is an important part of measuring success. But to understand why and how interventions succeed, and to learn from experience to improve performance and results, HCZ does more than document results. It has multiple ways of reviewing the performance of its program components, understanding how well each is working and how they work together on behalf of children and families.

HCZ closely examines individual cases to determine whether a program’s practice matches its theory and design, using “HCZ Stat,” adapted from the CompStat crime strategy meetings held by many major urban police departments across the country.

During an HCZ Stat meeting, held several times a year, staff from all parts of the organization—including those not directly involved in programming, such as finance and Human Resources—gather to review the case notes describing several students, usually either particularly difficult cases or students whose troubles reflect a broader problem that HCZ would like to address, such as attendance or conduct. The appointed student advocate, tasked with helping the student problem-solve and connect to resources, will present the case, including relevant data on how the student is doing and what the interventions were. The senior managers ask questions to figure out how well a particular intervention has been applied and what road bumps have been hit.

During an HCZ Stat meeting, anyone can ask questions or make suggestions. Often, there is a call for a show of hands—how many others are having this particular problem? By asking if others struggle with similar challenges, Owusu-Kesse says, he encourages others to see HCZ Stat not as an “I gotcha” moment, but as an opportunity to reflect on what systematic changes might be made and how program staff might be better supported.

Because anywhere from five to nine representatives from each school and community center are present during an HCZ Stat meeting, changes in implementation can be made quickly. For example, on an individual level, a student advocate may confess frustration with a child’s grandmother, and a fitness instructor, who perhaps knows the grandmother from Sunday afternoon Zumba classes, will volunteer to speak with her.

Most changes, however, are programmatic or managerial. For instance, Owusu-Kesse recalls an incident in which staff was puzzled to discover that a student did not seem to benefit from an after-school program’s academic support. After examining the student’s dismissal record, the staff discovered that he was leaving before the academic portion of the after-school program. With site directors from all the after-school programs present, it was quick and easy to agree to move toward flexible ordering of activities, so that if a student had an early dismissal from an after-school program in which academics was
scheduled last, academics could be flipped with physical education or enrichment, and the student wouldn't miss the academic intervention.

Similarly, because representatives from across the organization are present, difficulties requiring coordination can also be addressed. For example, if staffing or vacancies have been a problem, HR is present to take notes and brainstorm directly with program staff. HCZ Stat meetings, then, function as an accountability check. But it also presents an opportunity to share best practices and collectively solve problems.

HCZ's Quality Improvement and Strategic Planning team, or QISP, visits sites, provides direct support and coaching, and participates in HCZ Stat meetings. This team ensures that programs are implemented effectively and helps them continually improve. Additionally, some programs convene their own Stat meetings, focusing exclusively on their own initiatives.

HCZ also holds mid-year and end-of-year data meetings, separate from HCZ Stat. In addition, senior leadership staff meets every two weeks to discuss agency business, making sure discussions of data and results are an important part.

HCZ funders also contribute to a sense of accountability by reviewing data. Although private funders grant HCZ a large degree of autonomy, all staff acknowledges that if data showed that a program was not working, the funders would expect changes to be made.

Community members are another source of evidence and learning for improvement. Many of the schools that HCZ administers within its charter school authority have parents' associations, where parents can learn more about, for instance, new testing and Common Core requirements. Some programs have youth advisory boards, which give input and help plan youth-centered activities. Similarly, two community advisory boards, one general and one specifically for the St. Nicholas Community Center, help analyze and shape programming. Faith leaders, business owners, school principals and other prominent community members help staff review decisions and keep HCZ connected to the neighborhood. For instance, after an early community board meeting, HCZ decided to roll out adolescent after-school programming immediately, rather than build up gradually from early childhood. Community leaders pointed out that it was important for younger children to see older teens involved in positive activities. They also recognized how tremendously destabilizing it was to have a great number of adolescents in the neighborhood without positive outlets for their energy. This sensitivity to its context is part of what has distinguished the Harlem Children's Zone from the beginning.

3. Using Multiple Forms of Evaluation to Gain Understanding of the Impact of its Interventions

The Harlem Children’s Zone contains many feedback loops. As Fox notes, "Redundancy is part of the success of our programs." HCZ tracks the impact of various parts, and well as the whole, of its interventions.

HCZ’s most ambitious evaluations have taken place around its schools. Early in the establishment of its schools, the HCZ agreed to share data from the initial Promise Academy lotteries with Harvard economist Roland Fryer and his colleague Will Dobbie (currently at Princeton). Dobbie and Fryer examined data for several cohorts of elementary and middle school students, and concluded in a peer-reviewed study that students who had entered Promise Academy as sixth-graders had closed the black-white achievement gap in math and halved it in English. A later paper, focusing on these same students during the transition to college, found increased academic achievement and college attendance, and decreased pregnancy and incarceration rates, among Promise Academy lottery winners.
Jean-Louis explains that for most of its activities, HCZ relies on comparisons with national norms (rather than constructed comparison groups, which are much more costly) to assess its progress. She notes that if HCZ children are meeting national norms in third-grade math or college readiness, they are outperforming other low-income African American children and youth.

The HCZ does not normally employ an experimental evaluation design using randomized control trials (RCTs), in part because of ethical considerations: it does not want children to be denied or wait for services in the interests of a randomized evaluation. However, there are exceptions. To decide whether engagement in Get Fit contributed meaningfully to a child’s efforts to lose weight, Healthy Harlem included program activities (team-building exercises, exercising five days per week regardless of the number of days attending program and engaging in goal setting and checking in on behavioral change) for only half of the eligible overweight or obese students. All children, however, received weekly nutrition lessons and 60 minutes of exercise every day they attended program. At year’s end, the data showed a meaningful reduction in the BMI of the children who engaged in the program activities.

The Healthy Harlem evaluation incorporated multiple methods in evaluating this very complex and expansive initiative, including youth and parent surveys; parent, staff and youth focus groups; staff interviews; program observations; BMI measurement; and assessment of students’ fitness levels. Mathematica and HCZ worked closely together to facilitate the great deal of work required for the evaluation. As part of Healthy Harlem, Mathematica makes recommendations on data collection and evaluation and produces an impact assessment interpreting data related to BMI and other data. The internal evaluation team, in addition to the weekly meetings, trains Healthy Harlem staff on Efforts to Outcome (ETO) data collection, entry and basic analyses.

To become a data-driven organization, HCZ built up both internal and external evaluation teams. A dedicated internal evaluation team, with ten full-time staff members, help track evidence from:

- best practices and program models that come from outside HCZ
- focus groups with students and parents
- surveys administered to parents, youth, and staff
- data related to the 600 goals of HCZ, which program managers, aides and student advocates regularly collect (These numbers include attendance figures, test scores, figures on parental engagement and behavior metrics.)
- individual case studies—particularly of challenging students—which HCZ staff regularly review through HCZ Stat meetings, discussed earlier.

1 It should be noted that high school seniors were not subject to random assignment. All seniors received the program. While HCZ anticipated maintaining relationships with them as they attended college in the following year, program leaders knew that they would not have the regular access to them that participation in a year-long program, following graduation, would require. HCZ leaders did not want any of the seniors to miss the opportunity to fully engage in the intervention.
This evaluation team, headed by Jean-Louis, also translates these raw data into manageable bits of information for the communications and development teams. They pay attention to process and observe sites to ensure fidelity to established intervention practices. Finally, while cultivating this “culture of data,” they must also occasionally temper enthusiasm for data collection from staff that may not be financially or logistically feasible.

Data, of course, are useless if recorded haphazardly. To prevent this, each program site has its own data staff members, who work to ensure that data are recorded accurately and consistently and that the appropriate internal reports are generated. HCZ has also invested in a database team. Under the leadership of the director of evaluation, the ETO (Efforts to Outcomes) director and a three-person team provide training and oversight for the more than 300 individuals who regularly interact with the database.

Many outside evaluators have also collaborated with HCZ. Bridgespan and economists Roland Fryer and Will Dobbie have all used data from HCZ to conduct evaluations and make recommendations. One of the most frequent collaborators has been Mathematica, which has participated in longitudinal studies with GEMS and Healthy Harlem. Mathematica has advised HCZ not only on progress toward certain benchmarks, but also helped HCZ perfect its data collection methods. For example, when Healthy Harlem began, Mathematica recommended that program staff collect BMI for each student with joint training and guidance from Mathematica and HCZ; after additional observations and concerns raised by Mathematica, HCZ determined that it would be best to retain nurses who could record data with greater accuracy. Mathematica endorsed these recommendations.

One of the key parts of any infrastructure for evaluation and building evidence is the actual databases. Lauren Scopaz, who leads HCZ’s performance measurement work, focuses in part on helping HCZ’s performance measurement work, focuses in part on helping staff to obtain access to data, ensuring the data are accessible, understandable, relevant and useful to frontline program staff and program managers in making programmatic decisions and adjustments. An internal team of HCZ staff is also thinking how to streamline the more than 20 databases HCZ uses, among them ETO, HCZ’s online agency system; Infinite Campus, used by their schools; and i-Ready, which helps assess literacy and math skills.

Finally, HCZ holds several yearly “Delving into Data” sessions, aimed at increasing staff comfort with data and encouraging the exchange of information. These sessions range from agency-wide sessions, which seek to deepen understanding across program areas, to sessions that group programs according to type, which allow programmatic directors to concentrate on specific operational strategies. From July 2014–June 2015, HCZ conducted six such meetings, with the goal of meeting monthly in 2016.

Conclusion

Owusu-Kesse, a former banker, left Wall Street to become the COO of HCZ, yet the leap does not seem as large to him as it might to others. He recalls:

“I felt comfortable with my transition from Wall Street to the Harlem Children’s Zone, because in many ways it is run like a business, in terms of high pressure, high accountability, the uses of data to inform practice, delivering the highest possible product to our customers, which is our children and families, continuously learning and improving, [and] putting the systems in place to help share that learning across the organization.”

A high-pressure, high accountability model, with data at its center, does not mean an allegiance to a narrow range of ways to gather evidence. In fact, the opposite is true. By deliberately building redundancies into its evaluation and assessment methods—by surveying middle school youth and their teachers, by studying the test scores of 100 fifth-graders and the solitary struggles of one—HCZ makes room for many kinds of knowledge. Children and community members express their priorities; one site manager learns from another; intensive case studies reveal obstacles previously obscured by dry attendance records. HCZ Stat meetings aid communication, drive improvement and encourage collective problem-solving across the organization and Delving into Data sessions help ensure that evidence guides decision-making and problem solving. By building a strong culture of data supported by a robust infrastructure and incorporating evidence from multiple methods and sources, HCZ ensures continual evolution, working constantly to better serve and champion the children and families of Central Harlem.

For more information about the Harlem Children’s Zone and the tools available for building similar initiatives, please go to http://hcz.org.