

Appendix 5: OUP Telephone Interview

Contents

Introduction

Overview

Question Format A

Part 1: Implementation

Part 2: Goals and Outcomes

Part 3: Partners

Part 4: Funding

Part 5: Challenges

Part 6: Connection to Larger Project

Part 7: Connection to Broader University Community Revitalization Effort

Question Format B: Multi-purpose Centers/ College Facilities

Part 1: Implementation

Part 2: Goals and Outcomes

Part 3: Partners

Part 4: Funding

Part 5: Challenges

Part 6: Connection to Larger Project

Part 7: Connection to Broader University Community Revitalization Effort

Conclusion

Form 1

Telephone Interview

Prior to data collection, grantees will receive an introductory letter from HUD and an introductory e-mail from Abt explaining the purpose and stages of the study. Included in the introductory email from Abt will be an invitation to complete a brief web survey. This web survey will allow grantees to confirm the number of grants they received during the study period, list the activities they completed under each grant, and document activity timing, the partners and funders they worked with to implement the grant activities. Grantees will also be asked about the challenges they faced during implementation.

After completion of the web survey, Abt will send the grantee an email highlighting the topics we will discuss during the telephone interview. This email also will include Form 1, which is a list of outcomes we anticipate they might be able to report on, based on the two randomly selected activities that will be the focus of the telephone interview. If the grantee indicated on the web survey that at least one of the selected activities was part of a larger multi-purpose center or campus facility, Form 1 will inquire about all potential outputs and activities related to the additional activities listed by the grantee as part of this center or facility.

The grantee may choose whether to complete Form 1 and send it back to the interviewer prior to the interview, or to use it as a guide to answer questions during the interview.

INTRODUCTION

Hello, this is [NAME OF INTERVIEWER] with Abt Associates. Thank you for taking time to speak with me about the Office of University Partnerships'—OUP—grant(s) you received from the Department of Housing and Urban Development (HUD). The purpose of the study is to help HUD understand the types of activities undertaken with OUP grants and to document the changes that occur in communities and on university campuses as a result of OUP funding. We are interviewing 67 OUP grantees across the country and will use what we learn to prepare a report for HUD that describes what activities OUP is funding and how OUP grantees are affecting their local communities. This report will not identify individual grantees and the information you provide today will not be linked back to your organization.

Our interview today will take approximately 45 minutes. We will be focusing on your institution's work related to two activities funded by your institution's OUP grant(s): [ACTIVITY X] funded by your [GRANT YEAR] grant and [ACTIVITY Y] funded by your [GRANT YEAR] grant. We selected these activities at random from all those you included on your original grant application. We have chosen to discuss two activities in the hopes of collecting detailed information about a few activities rather than less detailed information about many. All grantees interviewed for this study will also be asked about two activities chosen randomly.

If you need to stop the interview at any time, please let me know as we go along. We can always schedule a follow-up call to resume the conversation at a later date.

Do you have any questions before we begin?

CONFIRMATION OF RESPONDENT'S ROLE IN IMPLEMENTATION

I'd like to begin by confirming who from your institution is participating in this call.

- 0.1 First, can you provide me with your first and last name, title, and a brief description of how long and in what capacity you have been involved with the OUP-funded grant projects?

First Name:

Last Name:

Title:

Role in applying for and/or implementing the OUP activities we're discussing today: _____

Length of involvement with OUP projects:

- 0.2 Next, can others on the call please identify themselves and provide me with the same information?

First Name:

Last Name:

Title:

Role in applying for and/or implementing the OUP activities we're discussing today: _____

Length of involvement with OUP projects:

(ADDITIONAL SPACE WILL BE PROVIDED IN THE SURVEY IF THERE ARE MORE PEOPLE TO INCLUDE)

OVERVIEW

On the web survey you confirmed that you received (*ENTER NUMBER OF GRANTS AND YEARS IN WHICH THEY WERE RECEIVED*). During our interview today we will discuss two of the activities you were able to implement with your OUP funds. These activities include [ACTIVITY X] and [ACTIVITY Y].

(IF EITHER OF THE RANDOMLY SELECTED ACTIVITIES WAS PART OF A LARGER COMMUNITY CENTER OR CAMPUS FACILITY, READ THE FOLLOWING):

On the web survey, you indicated that [ACTIVITY] was (implemented as part of a larger community center/a campus facility). Because of this, we'll be asking you about all of the other activities that you listed as part of the same (center/facility). We'll start the interview discussing these activities and then end the interview by talking about [ACTIVITY].

BEFORE BEGINNING THE INTERVIEW, YOU MUST SELECT WHICH QUESTION FORMAT TO USE, QUESTION FORMAT A OR B, FOR EACH OF THE TWO RANDOMLY SELECTED ACTIVITIES.

*QUESTION **FORMAT A** WILL BE USED FOR ALL ACTIVITIES THAT ARE NOT PART OF A MULTI-PURPOSE CENTER OR COLLEGE/UNIVERSITY FACILITY, AS REPORTED BY THE GRANTEE ON THE WEB SURVEY.*

*QUESTION **FORMAT B**, WILL BE USED FOR ACTIVITIES RELATED TO A MULTI-PURPOSE CENTER OR A COLLEGE/UNIVERSITY FACILITY.*

IT IS POSSIBLE THAT YOU WILL USE BOTH FORMATS DURING THE INTERVIEW, IF ONE ACTIVITY WAS RELATED TO A MULTI-PURPOSE CENTER OR FACILITY AND THE OTHER WAS NOT.

Question Format A

PART 1: IMPLEMENTATION

General Description

I would like to (begin/continue) by discussing the implementation activities related to [ACTIVITY] funded by the [GRANT YEAR] grant.

- 1.1 Please describe the work you implemented related to [ACTIVITY] that was **directly funded** by OUP.

- 1.2 Were there other activities directly related to this OUP grant that were funded by other sources? IF YES: Please describe which activities were funded by other sources.

Beneficiaries

- 1.3 Who did you expect to benefit from [ACTIVITY]? *(IF THE GRANTEE DOESN'T UNDERSTAND THE QUESTION, PROVIDE THE FOLLOWING EXAMPLES: RESIDENTS OF A PARTICULAR NEIGHBORHOOD, MEMBERS OF A PARTICULAR ETHNIC GROUP, OR INDIVIDUALS IN POVERTY.)*

- 1.4 *(IF THE ACTIVITY WAS FOCUSED ON A PARTICULAR POPULATION)*: Why did you decide to focus on this particular population?

1.5 How did potential beneficiaries learn about the project, or how were they recruited to participate?

1.6 Did these individuals end up benefiting from your work? *(IF THEY BEGIN TO DESCRIBE BENEFITS, TELL THEM THAT THE NEXT INTERVIEW SECTION WILL ASK SPECIFIC QUESTIONS ABOUT OUTCOMES AND ASK THEM TO WAIT TO DESCRIBE THE ACTUAL BENEFITS UNTIL THEN. IF THEY CONTINUE TO DESCRIBE THE BENEFITS, CAPTURE THE INFORMATION HERE AND THEN REFER TO IT WHEN YOU GET TO PART 2.)*

- YES
 NO

1.7 Were there other unexpected beneficiaries?

- YES → Who were they? _____

- NO

1.8 For any of the services you offered using OUP funding, did more individuals apply for assistance than you could serve?

- YES
 NO

PART 2: GOALS AND OUTCOMES

I want to turn now to the accomplishments you've been able to achieve related to [ACTIVITY].

- 2.1 When your institution decided to undertake this activity [ACTIVITY], what were you hoping to accomplish? *(PROBE FOR SPECIFIC GOALS OR PERFORMANCE TARGETS THAT THEY MAY HAVE SET.)*

- 2.2 *(IF THEY SET SPECIFIC GOALS OR PERFORMANCE TARGETS):* Were you able to measure your performance against these goals? If so, please tell me about the indicators you used to measure your performance. If you tracked outcome data using these indicators, will you email or fax me a copy of your outcomes?"

(IF YOU ARE ASKING QUESTIONS ABOUT THE FIRST ACTIVITY DISCUSSED DURING THE INTERVIEW, PROCEED TO QUESTION 2.3. IF YOU ARE ASKING QUESTIONS ABOUT ANY SUBSEQUENT ACTIVITIES, SKIP TO QUESTION 2.6)

(READ FOR THE FIRST ACTIVITY)

- 2.3 As a follow-on to the measures you just mentioned, we would also like to ask you about a few specific outputs and outcomes you may have observed.

In the email you received prior to this interview, we mentioned that we are gathering the same information from all grantees that completed similar activities in order to report on common accomplishments across all grantees. In the same email we sent you a list of outputs and outcomes we anticipated you might have achieved, as a result of your institution's work related to [ACTIVITY]. Some of the outcomes included: *(READ OFF A FEW OF THE OUTCOMES ON THE LIST. YOU DON'T HAVE TO READ THEM ALL OFF.)* Do you have this list available to you currently?

(IF YES, PROCEED TO 2.4.)
(IF NO, SKIP TO 2.5.)

- 2.4 Did your institution observe any of the outputs or outcomes related to [ACTIVITY]? Please describe the outputs and outcomes you observed, providing specific numbers whenever possible.

RECORD RESPONSES ON A CUSTOMIZED VERSION OF FORM 1 THAT ONLY INCLUDES THE ACTIVITIES AND OUTCOMES REPORTED BY THE GRANTEE.

- 2.5 No problem. We can walk through them one at a time and you can indicate whether your institution observed the output and outcome. If you did, please describe the outputs and outcomes you observed, providing specific numbers whenever possible.

PLEASE USE A CUSTOMIZED VERSION OF FORM 1 THAT ONLY INCLUDES THE ACTIVITIES AND OUTCOMES REPORTED BY THE GRANTEE. WALK THROUGH THE POTENTIAL OUTPUTS AND OUTCOMES FOR THE ACTIVITY THAT YOU ARE CURRENTLY DISCUSSING, RECORDING THE GRANTEE'S RESPONSES ON THE FORM.

(SKIP TO 2.8.)

(READ FOR THE SECOND ACTIVITY)

(IF THEY HAVE THE LIST AVAILABLE): Now let's turn to the second activity to discuss the common outcomes pertaining to [ACTIVITY] that we emailed to you *(READ OFF A FEW OF THE OUTCOMES ON THE LIST. YOU DON'T HAVE TO READ THEM ALL OFF.)*

- 2.6 Did your institution observe any of the outputs or outcomes related to [ACTIVITY]? Please describe the outputs and outcomes you observed, providing specific numbers whenever possible.

RECORD RESPONSES ON A CUSTOMIZED VERSION OF FORM 1 THAT ONLY INCLUDES THE ACTIVITY AND OUTCOMES REPORTED BY THE GRANTEE.

(IF THEY DON'T HAVE THE LIST AVAILABLE): As a follow-on to the measures you just mentioned, let's walk through each of the outcomes your institution might have measured about [ACTIVITY].

- 2.7 As I read off the outcome please indicate whether your institution observed it. If it did, please describe the outputs and outcomes observed, providing specific numbers whenever possible.

PLEASE USE A CUSTOMIZED VERSION OF FORM 1 THAT ONLY INCLUDES THE ACTIVITIES AND OUTCOMES REPORTED BY THE GRANTEE. WALK THROUGH THE POTENTIAL OUTPUTS AND OUTCOME FOR THE ACTIVITY THAT YOU ARE CURRENTLY DISCUSSING, RECORDING THE GRANTEE'S RESPONSES ON THE FORM.

2.8 Are there other outcomes we have not listed here that your institution observed and can tell us about?

2.9 What barriers did your institution face in measuring outcomes?

2.10 In addition to participant and community outcomes, we'd also like to know how the college benefited from [ACTIVITY]. Please describe any benefits to the college your institution observed.

(IF THEY DON'T MENTION ONE OR MORE OF THE ACCOMPLISHMENTS LISTED BELOW WHEN DESCRIBING THEIR UNIVERSITY'S BENEFITS, PROBE ABOUT THESE ACCOMPLISHMENTS DIRECTLY.)

- Number of faculty or university research projects conducted that were related to the work of the project
- Number of faculty publications that drew upon the work of the project
- Number of university students who participated in the project as volunteers
- Number of university students who participated in the project as part of a class assignment
- Number of university students who participated in the project in exchange for a stipend or academic funding
- Number of university faculty or students who participated in activities or endeavors sponsored by the partnership between the university and its community partners

2.11 Have you attempted to measure (this/these) benefit(s) to the college? IF YES: How? (*ASK FOR SPECIFIC NUMBERS.*)

2.12 Has your institution observed other benefits that we have not yet covered? IF YES: What are those?

2.13 (*IF THE ACTIVITY HAS ENDED, ASK THE FOLLOWING*): Have any of the benefits we talked about above, either for the community or the college, continued since the activity ended? IF YES, in what ways?

2.14 (*IF THE ACTIVITY IS ONGOING, ASK THE FOLLOWING*): What funding and/or staffing sources have you used to continue the activity since OUP funding ended?

PART 3: PARTNERS

On the web survey, you reported that (*READ THE PARTNERS FROM THE WEB SURVEY*) were key partners for [ACTIVITY].

3.1 Are there any additional partners you'd like to add related to [ACTIVITY]?

3.2 Who among these partners would you say played the lead role in implementation?

3.3 Please briefly explain the role of each of the partners.

3.4 What is the university's specific role in the partnership?

3.5 In terms of its use of OUP funding, which of the following statements **best** describes the college/university's approach to community development?

- Seeking to provide engaging, supportive learning environment for students and broader community.
- Acting in response to a crisis, taking the lead in improving conditions in its adjacent neighborhood.
- Focusing on neighborhood revitalization in non-adjacent neighborhoods

3.6 Did your college or university specifically sponsor a community development corporation (CDC) to assist with community revitalization? IF SO, was this CDC responsible for implementation of the OUP grant(s)?

PART 4: FUNDING

(IF AN ACTIVITY WAS NOT WHOLLY FUNDED BY OUP, READ THE FOLLOWING.)

- 4.1 For [ACTIVITY] I see that OUP funding represented roughly [PERCENT DETERMINED FROM WEB SURVEY] of the total cost of [ACTIVITY]. How was the OUP funding used? Did it, for example, fund a specific component of [ACTIVITY] or was it part of a general fund?

PART 5: CHALLENGES

THE QUESTION FOR PART 5 WILL ONLY BE ASKED IF THE GRANTEE INDICATED IN QUESTION 3 OF THE WEB SURVEY THAT THERE WAS AT LEAST ONE MAJOR CHALLENGE IN IMPLEMENTING THIS ACTIVITY. INTERVIEWER WILL HAVE LIST OF MAJOR CHALLENGES FROM WEB SURVEY QUESTION 3 DISPLAYED FOR REFERENCE.

- 5.1 In the web survey, you indicated that [LIST ITEMS MARKED AS MAJOR CHALLENGES FOR THIS ACTIVITY] [was a major challenge/were major challenges] in implementing [ACTIVITY].

(FOR EACH CHALLENGE LISTED, ASK:) Please describe the challenge your institution faced related to [ACTIVITY]. How did this challenge limit what you were able to implement and/or accomplish?

PART 6: CONNECTION TO LARGER PROJECT

TWO TYPES OF PROJECTS ANTICIPATED:

- 1. ONE ACTIVITY EXTENDING BEYOND THE GRANT PERIOD (E.G., AFFORDABLE HOUSING INITIATIVE STARTED IN 1995, CURRENT GRANT USED TO COMPLETE A SUBDIVISION FUNDED BY TWO PREVIOUS GRANTS).*
- 2. THE DEVELOPMENT OF A CENTER, WHICH ENCOMPASSES MANY ACTIVITIES, AND MAY OR MAY NOT EXTEND BEYOND THE GRANT PERIOD (E.G., BUSINESS DEVELOPMENT CENTER STARTED IN 2000, CURRENT GRANT USED TO OFFER NEW ENTREPRENEURIAL TRAINING COURSE AT THE CENTER; MULTIPURPOSE CENTER CREATED WITH THE CURRENT GRANT, WHICH ALSO FUNDS A JOB TRAINING PROGRAM AND A DAYCARE CENTER).*

6.1 Was [ACTIVITY] a completely new project that began with the [YEAR] OUP grant, or was it a continuation or expansion of a prior project? By project, I mean a discrete set of tasks or activities that are directly related to your use of OUP funding. We talk later about how this activity fits within a broader community revitalization strategy.

- NEW PROJECT → **SKIP TO PART 7**
- CONTINUATION OF PRIOR PROJECT → Please describe the purpose of this prior project.

6.2 When did this larger project begin? _____

6.3 Has the larger project ended or is it ongoing?

- Ended → Please provide the date when it ended: _____
- Ongoing

6.4 What was the timeline of OUP funding for [ACTIVITY] relative to the timeline of the larger project?

6.5 Were other types of activities other than [ACTIVITY] included in this project? IF SO, what were they?

6.6 Was any part of this larger project funded by a previous OUP grant? IF SO, which elements or activities of the project were funded by OUP and when did you receive the OUP funding?

6.7 Are there additional funders associated with this larger project beyond those we've already discussed?

6.8 Are there additional accomplishments associated with this larger project beyond those we've already discussed?

PART 7: CONNECTION TO BROADER UNIVERSITY COMMUNITY REVITALIZATION EFFORT

(ASK THESE QUESTIONS FOR ALL GRANT PROGRAMS OTHER THAN TCUP):

7.1 Was [ACTIVITY] part of a larger community revitalization strategy?

- NO → **SKIP TO END OF PART 7**
- YES → Please describe the strategy, including an approximate timeframe_____

- [FOR SECOND ACTIVITY] CHECK HERE IF THE ACTIVITY CONTINUES A STRATEGY DESCRIBED UNDER THE PREVIOUS ACTIVITY. STRATEGY NAME: _____
(SKIP TO THE END OF PART 7)

7.2 How did you select the (area/neighborhood) targeted by this strategy?

7.3 Where (is/are) the target (area(s)/neighborhood(s)) located?

- Neighborhood adjacent to campus
- Neighborhood non-adjacent to campus
- A combination of adjacent and non-adjacent neighborhoods.

FOR THE SECOND RANDOMLY SELECTED ACTIVITY, REPEAT PARTS 1-7, USING THE APPROPRIATE FORMAT, A OR B.

IF THIS IS THE SECOND ACTIVITY, PROCEED TO CONCLUSION

Question Format B: Multi-purpose Centers/College Facilities

PART 1: IMPLEMENTATION

General Description

I would like to begin by discussing the implementation activities related to (multi-purpose center/college facility) funded by the [GRANT YEAR] grant.

- 1.1 Please describe the (multi-purpose center/college facility) you constructed or implemented with OUP funds.

- 1.2 *(IF GRANTEE LISTED MULTIPLE FUNDERS ON THE WEB SURVEY FOR ANY OF THE ACITVITIES CONNECTED TO THE MULTI-PURPOSE CENTER/FACILITY, ASK THE FOLLOWING QUESTION):* Specifically, please describe what you implemented with the OUP funds, as compared to what you implemented using other funding sources.

- 1.3 Were there other activities connected with the development or operation of the (center/facility) that you haven't mentioned yet? IF YES: Please describe.

Beneficiaries

- 1.4 Who did you expect to benefit from the(multi-purpose center/college facility) *(IF THE GRANTEE DOESN'T UNDERSTAND THE QUESTION, PROVIDE THE FOLLOWING EXAMPLES: RESIDENTS OF A PARTICULAR NEIGHBORHOOD, MEMBERS OF A PARTICULAR ETHNIC GROUP, OR INDIVIDUALS IN POVERTY.)*

1.5 *(IF THE CENTER/FACILITY WAS FOCUSED ON A PARTICULAR POPULATION):* Why did you decide to focus on this particular population?

1.6 How did potential beneficiaries learn about the project, or how were they recruited to participate?

1.7 Did these individuals end up benefiting from your work? *(IF THEY BEGIN TO DESCRIBE BENEFITS, TELL THEM THAT THE NEXT INTERVIEW SECTION WILL ASK SPECIFIC QUESTIONS ABOUT OUTCOMES AND ASK THEM TO WAIT TO DESCRIBE THE ACTUAL BENEFITS UNTIL THEN. IF THEY CONTINUE TO DESCRIBE THE BENEFITS, CAPTURE THE INFORMATION HERE AND THEN REFER TO IT WHEN YOU GET TO PART 2.)*

- YES
- NO

1.8 Were there other unexpected beneficiaries?

- YES → Who were they? _____

- NO

1.9 For any of the services you offered using OUP funding, did more individuals apply for assistance than you could serve?

- YES
- NO

PART 2: GOALS AND OUTCOMES

I want to turn now to the accomplishments you've been able to achieve related to each of the activities you listed on the web survey as part of the (center/facility). Let's start with [ACTIVITY].

ASK QUESTIONS 2.1 THROUGH 2.8 FOR EACH ACTIVITY LISTED ON THE WEB SURVEY AS PART OF THE CENTER OR FACILITY. ONCE YOU'VE DONE THIS, CONTINUE TO QUESTION 2.9.

- 2.1 When you decided to undertake this activity [ACTIVITY], what were you hoping to accomplish? *(PROBE FOR SPECIFIC GOALS OR PERFORMANCE TARGETS THAT THEY MAY HAVE SET.)*

- 2.2 *(IF THEY SET SPECIFIC GOALS OR PERFORMANCE TARGETS):* Were you able to measure your performance against these goals? If so, please tell me about the indicators you used to measure your performance. If you tracked outcome data using these indicators, will you email or fax me a copy of your outcomes?"

(IF YOU ARE ASKING QUESTIONS ABOUT THE FIRST ACTIVITY DISCUSSED DURING THE INTERVIEW, PROCEED TO QUESTION 2.3. IF YOU ARE ASKING QUESTIONS ABOUT ANY SUBSEQUENT ACTIVITIES, SKIP TO QUESTION 2.6)

(READ FOR THE FIRST ACTIVITY)

- 2.3 As a follow-on to the measures you just mentioned, we would also like to ask you about a few specific outputs and outcomes you may have observed.

In the email you received prior to this interview, we mentioned that we are gathering the same information from all grantees that completed similar activities in order to report on common accomplishments across all grantees. In the same email we sent you a list of outputs and outcomes we anticipated you might have achieved, as a result of the activities you reported on the web survey we conducted earlier. Some of the outcomes included: *(READ OFF A FEW OF THE OUTCOMES ON THE LIST. YOU DON'T HAVE TO READ THEM ALL OFF.)* Do you have this list available to you currently?

(IF YES, PROCEED TO 2.4.)

(IF NO, SKIP TO 2.5.)

- 2.4 Did your institution observe any of the outputs or outcomes related to [ACTIVITY]? Please describe the outputs and outcomes you observed, providing specific numbers whenever possible.

RECORD RESPONSES ON A CUSTOMIZED VERSION OF FORM 1 THAT ONLY INCLUDES THE ACTIVITIES AND OUTCOMES REPORTED BY THE GRANTEE.

- 2.5 No problem. We can walk through them one at a time and you can indicate whether your institution observed the outcome. If you did, please describe the outputs and outcomes you observed, providing specific numbers whenever possible.

PLEASE USE A CUSTOMIZED VERSION OF FORM 1 THAT ONLY INCLUDES THE ACTIVITIES AND OUTCOMES REPORTED BY THE GRANTEE. WALK THROUGH THE POTENTIAL OUTPUTS AND OUTCOME FOR THE ACTIVITY THAT YOU ARE CURRENTLY DISCUSSING, RECORDING THE GRANTEE'S RESPONSES ON THE FORM.

(SKIP TO 2.8.)

(READ FOR ALL SUBSEQUENT ACTIVITIES)

(IF THEY HAVE THE LIST AVAILABLE): Now let's turn to the next activity to discuss the common outcomes pertaining to [ACTIVITY] that we emailed to you. *(READ OFF A FEW OF THE OUTCOMES ON THE LIST. YOU DON'T HAVE TO READ THEM ALL OFF).*

- 2.6 Did you observe any of the outputs or outcomes related to [ACTIVITY]? Please describe the outputs and outcomes your institution observed, providing specific numbers whenever possible.

RECORD RESPONSES ON A CUSTOMIZED VERSION OF FORM 1 THAT ONLY INCLUDES THE ACTIVITIES AND OUTCOMES REPORTED BY THE GRANTEE.

(IF THEY DON'T HAVE THE LIST AVAILABLE): As a follow-on to the measures you just mentioned, let's walk through each of the outcomes you might have measured about [ACTIVITY].

- 2.7 As I read off the outcome please indicate whether your institution observed it. If you did, please describe the outputs and outcomes you observed, providing specific numbers whenever possible.

PLEASE USE A CUSTOMIZED VERSION OF FORM 1 THAT ONLY INCLUDES THE ACTIVITIES AND OUTCOMES REPORTED BY THE GRANTEE. WALK THROUGH THE

POTENTIAL OUTPUTS AND OUTCOME FOR THE ACTIVITY THAT YOU ARE CURRENTLY DISCUSSING, RECORDING THE GRANTEE'S RESPONSES ON THE FORM.

2.8 Are there other outcomes we have not listed here that your institution observed and can tell us about?

2.9 What barriers did your institution face in measuring outcomes?

2.10 In addition to participant and community outcomes, we'd also like to know how the college benefited from [ACTIVITY]. Please describe any benefits to the college your institution observed.

(IF THEY DON'T MENTION ONE OR MORE OF THE ACCOMPLISHMENTS LISTED BELOW WHEN DESCRIBING THEIR UNIVERSITY'S BENEFITS, PROBE ABOUT THESE ACCOMPLISHMENTS DIRECTLY.)

- Number of faculty or university research projects conducted that were related to the work of the project
- Number of faculty publications that drew upon the work of the project
- Number of university students who participated in the project as volunteers
- Number of university students who participated in the project as part of a class assignment
- Number of university students who participated in the project in exchange for a stipend or academic funding
- Number of university faculty or students who participated in activities or endeavors sponsored by the partnership between the university and its community partners

2.11 Have you attempted to measure (this/these) benefit(s) to the college? IF YES: How? *(ASK FOR SPECIFIC NUMBERS.)*

2.12 Has your institution observed other benefits that we have not yet covered? IF YES: What are those?

2.13 *(IF THE ACTIVITY HAS ENDED, ASK THE FOLLOWING)*: Have any of the benefits we talked about above, either for the community or the college, continued since the activity ended? IF YES, in what ways?

2.14 *(IF THE ACTIVITY IS ONGOING, ASK THE FOLLOWING)*: What funding and/or staffing sources have you used to continue the activity since OUP funding ended?

PART 3: PARTNERS

On the web survey, you provided us with a list of key partners that helped implement your work related to each of the activities that were part of the (multi-purpose center/college facility).

3.1 Would you say that you had one large partnership that worked together to develop and operate the (center/facility) or was it a series of smaller partnerships, each of which was focused on a different set of activities?

- Single partnership
- Series of activity-focused partnerships

IF THEY RESPONDED "SINGLE PARTNERSHIP," ASK QUESTIONS 3.2 THROUGH 3.6 ONCE, FOCUSING ON THE CENTER OR FACILITY AS A WHOLE. IF THEY RESPONDED "SERIES OF ACTIVITY-FOCUSED PARTNERSHIPS," WALK THROUGH QUESTIONS 3.2 THROUGH 3.6 FOR EACH ACTIVITY ASSOCIATED WITH THE CENTER OR FACILITY. WHEN YOU HAVE CONFIRMED THE PARTNER LIST FOR ALL ACTIVITIES, CONTINUE TO QUESTION 3.7.

3.2 Are there any additional partners you'd like to add related to [ACTIVITY]?

3.3 Who among these partners would you say played the lead role in implementation?

3.4 Please briefly explain the role of each of the partners.

3.5 What is the university's specific role in the partnership?

3.6 In terms of its use of OUP funding, which of the following statements **best** describes the college/university's approach to community development?

- Seeking to provide engaging, supportive learning environment for students and broader community.
- Acting in response to a crisis, takes the lead in improving conditions in its adjacent neighborhood.
- Focusing on neighborhood revitalization in non-adjacent neighborhoods

3.7 Did your college or university specifically sponsor a community development corporation—CDC—to assist with community revitalization? IF SO, was this CDC responsible for implementation of the OUP grant(s)?

PART 4: FUNDING

REPEAT QUESTION 4.1 FOR EACH ACTIVITY LISTED AS PART OF THE CENTER OR FACILITY

(IF AN ACTIVITY WAS NOT WHOLLY FUNDED BY OUP, READ THE FOLLOWING.)

- 4.1 For [ACTIVITY] I see that OUP funding represented roughly [PERCENT DETERMINED FROM WEB SURVEY] of the total cost of [ACTIVITY]. How was the OUP funding used? Did it, for example, fund a specific component of [ACTIVITY] or was it part of a general fund?

PART 5: CHALLENGES

THE QUESTION FOR PART 5 WILL ONLY BE ASKED IF THE GRANTEE INDICATED IN QUESTION 3 OF THE WEB SURVEY THAT THERE WAS AT LEAST ONE MAJOR CHALLENGE IN IMPLEMENTING THIS ACTIVITY. INTERVIEWER WILL HAVE LIST OF MAJOR CHALLENGES FROM WEB SURVEY QUESTION 3 DISPLAYED FOR REFERENCE.

- 5.1 In the web survey, you indicated that [LIST ITEMS MARKED AS MAJOR CHALLENGES FOR THIS ACTIVITY] [was a major challenge/were major challenges] in implementing [ACTIVITY].

[FOR EACH CHALLENGE LISTED, ASK:] Please describe the challenge your institution faced related to [ACTIVITY]. How did this challenge limit what you were able to implement and/or accomplish?

PART 6: CONNECTION TO LARGER PROJECT

We will not be asking questions under Part 6 about multi-purpose centers and college facilities. These centers and facilities are by definition, “larger projects.” Therefore, questions from Parts 1-5 will have already captured this information.

PART 7: CONNECTION TO BROADER UNIVERSITY COMMUNITY REVITALIZATION EFFORT

ASK THESE QUESTIONS FOR ALL GRANT PROGRAMS OTHER THAN TCUP THAT FUNDED A MULTI-PURPOSE CENTER. ASK THE QUESTIONS ABOUT THE CENTER RATHER THAN THE RELATED ACTIVITY. WE WILL NOT BE ASKING THE QUESTIONS ABOUT COLLEGE FACILITIES.

7.1 Was [ACTIVITY] part of a larger community revitalization strategy?

- NO → **SKIP TO END OF PART 7**
- YES → Please describe the strategy, including an approximate timeframe _____

- [FOR SECOND ACTIVITY] CHECK HERE IF THE ACTIVITY CONTINUES A STRATEGY DESCRIBED UNDER THE PREVIOUS ACTIVITY. STRATEGY NAME: _____

7.2 How did you select the (area/neighborhood) targeted by this strategy?

7.3 Where (is/are) the target (area(s)/neighborhood(s)) located?

- Neighborhood adjacent to campus
- Neighborhood non-adjacent to campus
- A combination of adjacent and non-adjacent neighborhoods.

FOR THE SECOND RANDOMLY SELECTED ACTIVITY, REPEAT PARTS 1-7, USING THE APPROPRIATE FORMAT, A OR B.

IF THIS IS THE SECOND ACTIVITY, PROCEED TO CONCLUSION

CONCLUSION

Thank you for your time today and your willingness to participate in this study. We will be selecting some grantees that participated in this phase of the study for site visits once we have completed all of the telephone interviews. We will review the types of projects implemented by each grantee and select a cross-sample of grantees that represent the broad range of projects implemented. If you are selected as one of the grantees we hope to visit, we will contact you again, via telephone or email, and ask if you might be willing to participate. We expect to make these calls in the Fall of 2011.

Thank you again for your participation in today's call. The information you have provided is very helpful for understanding the important work accomplished with the OUP program funds.

FORM 1

Form 1 will be customized for each grantee based on the activities selected as the focus for the telephone interview. In the instance where the randomly selected activities were part of a larger multi-purpose center or university facility, all activities listed as part of the center or facility will be included in the outcome discussion. Interviewers will delete all outcomes that are not related to these grant activities. Form 1 will then be sent via email to grantees prior to the telephone interview, enabling them to prepare for the interview by investigating their project accomplishments. Grantees will have the option of sending their completed Form 1 back to the interviewer prior to the call; however, this action is not required.

When completing the interview, the interviewer will use the customized form that was sent to the grantee. The exact activities on the form will correspond to the type(s) of activities completed by the given grantee. The interviewer will ask the appropriate combination of questions 2.4-2.7 (based on the survey skip patterns) and then record on the form any specific outcomes reported. If the interviewee reports outcomes not on our list, the interviewer will record the information in the other category, providing as much detail as possible.

Through a random selection process, we selected two of your institution's grant activities as the focus of our upcoming interview. Below, we have listed the outputs and/or outcomes that we anticipate you may be able to report on related to these two activities. This list is a starting point to help facilitate the conversation, so if there are additional project accomplishments that you would like to report, please be prepared to discuss those as well.

If you'd like, you can check the boxes for which you have data, include the information you have in the space provided, and send this information back to me before our call. This may help shorten the duration of the telephone interview.

For Affordable Housing projects:

Construction of new affordable housing units (either in new or existing facility)

- Acquisition of property
- Number of units produced (Please include #: _____)
- Number of units occupied (Please include #: _____)
- Number of units occupied for one year (Please include #: _____)
- Percent occupied with successful payment history (Please include %: _____)
- Other: _____

Rehabilitation/renovation of affordable housing

- Number of units rehabbed/renovated (Please include #: _____)
- Number/percent of rehabbed/renovated units retained as affordable housing (Please include #/%: _____)
- Percent of rehabbed/renovated units occupied (Please include %: _____)
- Percent of rehabbed/renovated units occupied for at least one year (Please include %: _____)
- Number of renovated/renovated units occupied with good payment history (Please include #: _____)
- Other: _____

For Public Facilities and Improvement projects:

New or expanded recreation center

- Square footage added or improved (Please include #: _____)
- Number participating in organized activities (Please include #: _____)
- Number participating in sports/health activities (Please include #: _____)
- Improved health outcomes (Please include outcomes: _____)
- Other: _____

Multi-purpose center

- Number participating in organized activities (Please include #: _____)
- Participant satisfaction (Please include summary of changes in satisfaction: _____)
- Other: _____

Day care facility

- Square footage added or improved (Please include #: _____)
- Number of additional children served (Please include #: _____)
- Percent of children served who did not have certified child care prior to attending the daycare and now do (Please include %: _____)
- Parent satisfaction ratings. Please include summary of changes in satisfaction: _____
- Other: _____

Computer center

- Square footage added or improved (Please include #: _____)
- Approximate value of new equipment added (Please include \$ AND SUMMARY of new equipment: _____)
- Number of additional individuals served on a weekly or monthly basis (Please include # and unit of measurement (e.g., weekly/monthly) _____)
- Participant satisfaction (Please include summary of changes in satisfaction: _____)
- Other: _____

Park/playground

- Acreage added or improved (Please include #: _____)
- Approximate value of new equipment added (Please include \$ AND SUMMARY of new equipment: _____)

- Number of after-school activities added (Please include # and description:

_____)
- Number of children involved in summer camp (Please include #:
_____)
- Percent change in summer camp enrollment from previous year (Please
include %: _____)
- Other: _____

Infrastructure

- _____) Number of houses with improved water quality (Please include #: _____)
- _____) Number of houses with improved sewer (Please include #: _____)
- _____) Feet of sidewalks added (Please include #: _____)
- _____) Increase in walkability (Please include summary of changes: _____

_____)
- _____) Increase in ADA compliance (Please include summary of changes: _____

_____)
- _____) Improvement in pedestrian/auto safety (Please include summary of improvements: _____

_____)
- _____) Other: _____

College/university facility

- _____) Square footage added or improved (Please include #: _____)
- _____) Approximate value of new equipment added (Please include \$ AND SUMMARY of new equipment: _____

_____)
- _____) Increased enrollment (Please include #: _____)
- _____) New degrees offered (Please list new degrees: _____)
- _____) Increased faculty recruitment/retention (Please include description of changes: _____

_____)
- _____) Improved research capabilities (Please include summary of improvements: _____

_____)
- _____) Other: _____

For Economic Development projects:

New construction of commercial building (IF SPACE USED FOR SMALL BUSINESS INCUBATOR, DON'T CAPTURE HERE, MARK BELOW)

- Square footage added (Please include #: _____)
- Approximate value of new equipment added (Please include \$ AND

SUMMARY of new equipment:

_____)

- Additional commercial activity observed (Please include summary of new activity: _____

_____)

- Number of new units or amount of new square footage occupied (Please include #: _____)

- Other: _____

Renovation and/or expansion of commercial building (IF SPACE USED FOR SMALL BUSINESS INCUBATOR, DON'T CAPTURE HERE, MARK BELOW)

- Square footage added or improved (Please include #: _____)
- Approximate value of new equipment added (Please include \$ AND

SUMMARY of new equipment:

_____)

- Additional commercial activity observed (Please include summary of new activity: _____

_____)

- Number of renovated units or amount of renovated square footage occupied (Please include #: _____)

- Other: _____

Create/expand small business incubator

- Square footage added or improved (Please include #: _____)
- Approximate value of new equipment added (Please include \$ AND

SUMMARY of new equipment:

_____)

- Number of businesses assisted (Please include #: _____)

- Additional commercial activity observed (Please include summary of new activity: _____

_____)

- Number of units or amount of square footage occupied (Please include #: _____)

- Other: _____

Create/expand micro-businesses/micro-enterprises

- Number of additional clients served (Please include #: _____)

- Number of businesses created (Please include #: _____)

- Number of business sustained (Please include #: _____)

- _____) Number employed by new or sustained businesses (Please include #:
 - _____) Business revenue of new or sustained businesses (Please include #:
 - Other: _____
-

Create Community Development Corporation (CDC)

- CDCs created (Please include #: _____)
- Activity of created CDC (Please describe activities: _____
_____)
- Provide technical assistance to CDCs (Please include # and description: _____
_____)
- Number of CDCs served (Please include #: _____)
- Services offered (Please include summary of services: _____
_____)
- Type of assistance offered by CDC: _____
- Other: _____

For Interim Assistance or Clearance projects:

- Create open space/beautification (Please include summary of space created/beautified: _____
_____)
- Acres cleared/improved (Please include #: _____)
- Acquisition of land (Please include # of parcels or acres acquired: _____)
- Number of projects completed (Please include #: _____)
- Decrease in property vacancy rate in surrounding area (Please include % decrease: _____)
- Increase in property values in surrounding area (Please include % increase: _____)
- Increase in neighborhood public/open space inventory (Please include summary: _____
_____)
- Other: _____

Decrease in crime

- Removal of blight (Please include summary: _____
_____)
- Number of projects completed (Please include #: _____)
- Number of buildings razed/improved (Please include #: _____)
- Number of acres cleaned/improved (Please include #: _____)
- Decrease in property vacancy rate in surrounding area (Please include % decrease: _____)
- Increase in property values in surrounding area (Please include % increase: _____)
- Decrease in crime (Please include summary of decrease: _____
_____)

Increased youth involvement in school and/or employment (Please include summary of increase: _____)

Other: _____

For Public Services projects:

Establish/implement GED programs

- Number of cohorts trained (Please include #: _____)
- Number of additional participants (Please include #: _____)
- Percent of graduates achieving GED (Please include %: _____)
- Percent of graduates enrolled in college or training program (Please include %: _____)
- Participant satisfaction (Please include summary of satisfaction: _____

_____)
- Other: _____

Establish/implement adult literacy programs

- Number of cohorts trained (Please include #: _____)
- Number of additional participants (Please include #: _____)
- Increase in literacy scores (Please include summary of increase (#/%: _____)
- Percent of trained individuals that enroll in GED programs (Please include %: _____)
- Percent of trained individuals that enroll in college or training program (Please include %: _____)
- Participant satisfaction (Please include summary of changes in satisfaction: _____

_____)
- Other: _____

Create/implement job training/vocational programs

- Number of cohorts trained (Please include #: _____)
- Number of additional participants (Please include #: _____)
- Percent of program graduates placed in employment (Please include %: _____)
- Percent that retain employment for 6, 12, or 24 months (Please include %: _____)
- Percent that advance in employment (Please include %: _____)
- Change in rate of advancement since receiving OUP funding (Please include #/% _____)
- Reported satisfaction of employers of participants with the training (Please include summary of satisfaction: _____

_____)
- Participant satisfaction (Please include summary of satisfaction: _____

_____)
- Other: _____

Create/implement self-improvement programs

- Number of cohorts trained (Please include #: _____)
- Number of additional participants (Please include #: _____)
- Participant satisfaction (Please include summary of satisfaction: _____
_____)
- Other: _____

Establish/implement day care programs

- Number of programs established (Please include #: _____)
- Number of children served (Please include #: _____)
- Percent of children served who did not have certified child care prior to attending the daycare and now do (Please include %: _____)
- Parent satisfaction ratings (Please include summary of satisfaction: _____
_____)
- Other: _____

Establish/implement health/wellness programs

- Number of programs established (Please include #: _____)
- Number of additional participants served (Please include #: _____)
- Completed health screenings (Please include #: _____)
- Number of additional participants in regular exercise programs
- Increase in detection or management of blood pressure levels (Please include % decrease: _____)
- Increase in detection or management of cholesterol levels (Please include % decrease: _____)
- Increase in detection or management of diabetes (Please include % decrease: _____)
- Other: _____

Establish/implement substance abuse programs

- Number of programs established (Please include #: _____)
- Number of additional participants served (Please include #: _____)
- Percent completing program (Please include %: _____)
- Percent substance free 3, 6, and 12 months after program completion (Please include %: _____) (INCLUDE SEPARATE FIELDS FOR 3, 6, and 12 months)
- Percent of graduates employed (Please include %: _____)
- Percent of graduates enrolled in formal schooling (Please include %: _____)
- Other: _____

Establish/implement recreational programs

- Number of programs established (Please include #: _____)
- Number of additional participants served (Please include #: _____)
- Decrease in high school dropout rate (Please include % decrease: _____)
- Decrease in crime rates (Please include % decrease: _____)
- Time spent in healthy activities/exercise (Please include # or description of changes observed: _____)

_____)

- Increased youth involvement in school and/or employment (Please include summary of increase: _____)
- Participant satisfaction (Please include summary of satisfaction: _____)
- Other: _____

Establish/implement crime prevention programs

- Number of programs established (Please include #: _____)
- Number of additional participants served (Please include #: _____)
- Decrease in crime (Please include summary of decrease: _____)
- Other: _____

Establish/implement public safety programs/testing

- Number of programs established (Please include #: _____)
- Geographic reach of areas served (Please include summary of areas: _____)
- Other: _____

Establish/implement services for homeless persons

- Number/type of services established (Please include # and summary: _____)
- Number of additional participants served (Please include #: _____)
- Increase in number accessing shelter (Please include # and %: _____)
- Decrease in the number of homeless in the community (Please include % decrease: _____)
- Percent of clients moving into permanent housing (Please include %: _____)
- Percent of clients who are employed (Please include %: _____)
- Other: _____

Energy conservation counseling and testing

- Number of programs established (Please include #: _____)
- Number of additional participants served (Please include #: _____)
- Number of houses improved (Please include #: _____)
- Decrease in energy consumption (Please include # and %: _____)
- Costs savings (Please include savings per household: _____)
- Change in consumer behavior (Please include summary of observed changes: _____)
- Other: _____

Establish/implement educational programs (including activities with elementary and secondary schools)

- Number/type of programs established (Please include #: _____)
- Number of additional participants served (Please include #: _____)
- Number of courses completed (Please include #: _____)
- Graduation rates (Please include graduation rate and % change: _____)
- Number of participants enrolled in college or employed (Please include #: _____)
- Other: _____

For Planning and Capacity Building projects:

Develop/implement comprehensive plan

- Number of planning sessions held (Please include #: _____)
- Number of community members participating (Please include #: _____)
- Successful outcomes as a result of Training or Technical Assistance provided (Please include summary description: _____)
- Successful adoption of plan by appropriate body (Please include summary description: _____)
- Implementation of plan objectives (Please include summary of implementation: _____)
- Other: _____

Develop/implement capital improvement

- Number of planning sessions held (Please include #: _____)
- Number of community members participating (Please include #: _____)
- Number of projects planned or implemented (Please include #: _____)
- Successful adoption of plan by appropriate body (Please include summary description: _____)
- Implementation of plan objectives (Please include summary of implementation: _____)
- Other: _____

Develop/implement functional plan

- Number of planning sessions held (Please include #: _____)
- Number of community members participating (Please include #: _____)

- _____) Number of projects planned or implemented (Please include #: _____)
- Successful adoption of plan by appropriate body (Please include summary description: _____
_____)
- Implementation of plan objectives (Please include summary of implementation: _____
_____)
- Other: _____

Appendix 6: 60-Day Federal Register Number

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-5486-N-06]

Notice of Proposed Information Collection for Public Comment on Evaluation of the Office of University Partnerships Programs Telephone Survey

AGENCY: Office of Policy Development and Research, HUD.

ACTION: Notice

SUMMARY: The proposed information collection requirement described below will be submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

DATES: Comments Due Date: May 23, 2011.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and should be sent to: Reports Liaison Officer, Office of Policy Development and Research, Department of Housing and Urban Development, 451 Seventh Street, SW., Room 8230, Washington, DC 20410.

FOR FURTHER INFORMATION CONTACT: Ndeye Jackson, Department of Housing and Urban Development, Office of Policy Development and Research, 451 7th Street, SW., Room 8126, Washington DC 20401; telephone (202) 402-5737, (this is not a toll free number). Copies of the proposed data collection instruments and other available documents may be obtained from Ms. Jackson.

SUPPLEMENTARY INFORMATION: The Department will submit the proposed information collection to OMB for review, as required by the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35, as amended). This notice is soliciting comments from members of the public and affected agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including if the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses. This notice also lists the following information:

Title of Proposal: Evaluation of the Office of University Partnerships Programs.

Description of the need for information and proposed use: The Department is conducting this evaluation under contract with Abt Associates Inc. and its subcontractors, Econometrica and ACKCO. This study is an evaluation of four grant programs funded through HUD's Office of University Partnerships (OUP). The four OUP programs are: Historically Black Colleges and Universities (HBCU); Hispanic-Serving Institutions Assisting Communities (HSIAC); Alaskan Native/Native Hawaiian Institutions Assisting Communities (ANNHIAC); and Tribal Colleges and Universities Program (TCUP). This evaluation will be the first to systematically document program outcomes and to assess where certain factors, such as partnership structure or the types of activities completed with grant funds affect outcomes. To collect the information necessary for this study, the

Department will conduct two telephone surveys of staff members from a sample of OUP grant recipients that have received a grant between fiscal years 2005 and 2008. Surveys will be conducted with 67 OUP grantees. The first grantee survey will query the number of OUP grants an institution received during the study period; how the OUP grants were used; and whether the grants were interrelated. The second grantee survey will ask about: community outcomes were achieved; project beneficiaries other funding sources used in conjunction with OUP funding; and how partners worked together to implement grant activities.

Members of the affected public: The telephone surveys will affect approximately 67 institutional recipients of an OUP Program Grant.

Estimation of the total number of hours needed to prepare the information collection including number of respondents, frequency of response, and hours of response: For the OUP recipient survey, the researchers will administer a set of two interviews to 67 recipient staff. The first interview is expected to last 20 minutes; the second interview is expected to last 60 minutes for a total burden hour estimate of 90 hours.

<i>Respondents</i>	<i>Number of Respondents</i>	<i>Number responses per respondent</i>	<i>Average burden/ response (in hours)</i>	<i>Total burden hours</i>
<i>Telephone interview</i>	67	2	40	90

Status of the proposed information collection: Pending OMB approval.

Authority: Section 3506 of the Paperwork Reduction Act of 1995, 44 U.S.C. Chapter 35, as amended. Dated: March 14, 2011.

Raphael W. Bostic,
Assistant Secretary for Policy Development and Research.

[FR Doc. 2011-6607 Filed 3-21-11; 8:45 am]

BILLING CODE 4210-67-P