The Generations of Hope Community model: Opportunities and challenges for evaluation

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In this paper we discuss the opportunities and challenges of evaluating the Generations of Hope Community (GHC) model of social services, as implemented at Hope Meadows, the first GHC. This initiative is both a place where people live and a program to support the needs of vulnerable individuals. We begin with an overview of the model, followed by a brief review of the evidence for claims about the effectiveness and potential of this model. Next we present the evaluation protocol being developed as we move forward both at Hope Meadows and with replication sites. We conclude with a discussion of the need for new ways to think about evaluation.

Description of model.

The GHC model represents a new approach to providing support and service – an approach that taps the transformative power of intergenerational community living to address social problems. As a place, a GHC is an intentional, intergenerational neighborhood where older adults provide indispensable support to parents, children, and youth who, in turn, become instrumental in promoting the well-being of the elders as they age. As a program, it is designed to tackle social problems that are often resistant to intervention from conventional social service systems, by utilizing the contributions of all members of the neighborhood who are supported by a small staff.

At Hope Meadows, 12 families agree to adopt three or four children from the foster care system whose chances of finding permanency are slim, and approximately 50 older adults volunteer six hours per week to the community in exchange for below market-rate rent. Adoptive families and older adults remain in the neighborhood for as long as they want. Youth leave the neighborhood and transition to adulthood in the same ways other young adults do. Traditional programs and services (therapy, case management, tutoring, after-school programs) as well as nontraditional programs and services (camps, picnics, special neighborhood events, caring “grandparents”) are provided within and by the neighborhood.

Original program objectives

- Secure adoptions of children who otherwise faced the prospect of spending the remainder of their childhoods in foster care
- Provide an innovative system of support to families both pre- and post-adoption
- Provide opportunities for retirees to remain active and meaningfully engaged
The GHC logic model.

The GHC model was distilled from two decades of research and program experience. For example, the socially integrative function of Hope Meadows as a program and a place has been analyzed in preliminary fashion (Hopping 2003); several ethnographic studies of the emergence and consolidation of a “culture of care” within the neighborhood have been published, (Power, Eheart, Racine & Karnik, 2007; Eheart & Power, 2001; Power & Eheart, 2001); and a preliminary study of children adopted at Hope Meadows found that well-being increased the longer they lived in the neighborhood (Mitchell 2010).

Considered as a pilot project, Hope Meadows has demonstrated that one particular configuration of adoptive and post-adoptive supports can outperform the traditional system by innovatively extending the overall capacity of that system to benefit children, parents, and retirees. In this circumscribed sense, the program may be considered a *prima facie* proof of concept for the underlying program model (see Appendix 1).

It must be remembered, however, that the GHC model is still necessarily a work in progress. Hope Meadows has evolved since its inception in 1994, continuously refining the program and developing the capacities of the community; the GHC model derived from this experience has evolved along with it. It is important therefore to keep context in mind when identifying benchmarks of progress and evaluating achievements, both in terms of earlier vs. later periods in the program’s history, and in terms of the model itself, which is multi-layered and produces effects in multiple domains which unfold on multiple timelines.

Further, in light of the many new initiatives that are springing up around the country, and which have taken inspiration from the example of Hope Meadows, the question of validating the model’s effectiveness and potential will ultimately need to be examined from a multi-site perspective.

The model has, however, already begun to achieve an impact on the care and service industry, both in the United States and abroad. Serious inquiries and requests for assistance are growing steadily, and several dozen initiatives have been undertaken to replicate the success of Hope Meadows in part or in full, with several programs already in operation and another currently under construction. The GHC model has been the subject of roundtable discussions hosted by top-level federal officials concerned with integrating “place-based” services across agencies, and similar discussions have been held at state and local levels across the country.

The Hope Meadows project

The findings summarized below substantiate that, at the very least, Hope Meadows accomplished what it set out to do. Original objectives were:

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1 All references can be found in Appendix 2.
• to secure adoptions of children who otherwise faced the prospect of spending the remainder of their childhoods in foster care,
• to provide an innovative system of support to families both pre- and post-adoption and,
• to provide opportunities for retirees to remain active and meaningfully engaged.

The domains of evidence for these objectives are surveyed below, and opportunities to enhance or build on existing research and analyses are noted.

Securing adoptions and adding new capacity. At the outset of the program, the primary objective for Hope Meadows was straightforward and relatively simple: to secure stable adoptions for children who otherwise faced prospects of spending the remainder of their childhoods in foster care.

Most children who come into foster care can expect to return home within a year. Those who stay longer face ever-diminishing chances of eventually finding permanency (return home or adoption). The children referred to Hope Meadows, on average, had already spent over three years in care, representing about 60% of their lives to that point. Statistically the chances these children would otherwise find permanency had dwindled to about 56% (on average), with the odds of aging out of foster care increasing more rapidly the longer they remained in care. Adoptions of larger groups of three and four siblings can be particularly difficult to arrange, but by design Hope Meadows is uniquely suited to addressing the challenges of such sibling-group adoptions. One group of three siblings had been in foster care for seven years before placement and eventual adoption at Hope Meadows. Overall 70% of the children referred to Hope Meadows came with siblings.

Historical data indicate that the program did achieve its goals for 72 children. Statistically about 40% would otherwise have aged out of foster care or come under the purview of the juvenile justice system. Figure 1 shows the breakdown by year. In FY95, for example, nine children were referred to Hope, and all were ultimately adopted, whereas given their ages and time already spent in care, one would expect (statistically) only about six of them (5.9) to have ever found permanency.

**FIGURE 1. Comparison of actual vs. statistically-expectable permanencies.** Darker-shaded bars indicate the number of children adopted from a given year’s cohort of referrals, while lighter-shaded bars indicate the statistically-expectable number, given the children’s ages and time already spent in foster care.
The overall rate of permanency (adoption or, in a few instances, return home) at Hope Meadows has always been high (85%). This outcome was achieved, in part, by attracting new families who would not otherwise have considered adopting from foster care (72% of all adoptive families at Hope Meadows), thus adding new capacity to the child welfare system rather than simply competing effectively within it for adoptive resources. Moreover, of the handful of families with prior foster-adoptive experience, half adopted more children than they otherwise would have.

**Developing new supportive systems.** Hope Meadows has pioneered the development of innovative systems of support for adoptive families, providing instrumental, informational, and emotional support to parents, both before they adopt children from the foster care system and after the adoptions, for as long as they live at Hope Meadows. Instrumental support for all parents includes housing, employment benefits, and informal assistance from community members. In lieu of foster care payments per child, one parent in each household is employed by Generations of Hope, receiving a salary, health insurance, life insurance, and the opportunity to participate in a retirement plan. These benefits allow one parent to remain at home, or to work part-time, during periods when their adopted children most need a parent’s full attention.

Parents are provided with needed informational support on an ongoing basis. Hope Meadows has regular formal and informal parent gatherings where parents come together to discuss relevant topics, host a guest speaker, or engage in an agreed upon activity. Because Hope staff work in an office that is located in the neighborhood, such offerings can be more easily and readily arranged than in traditional services. Over the first ten years nearly 400 educational programs were provided to Hope parents. Hope Meadows also maintains a library of parenting and child/family development literature, and sends parents to relevant conferences, trainings, and workshops.

The parents at Hope Meadows receive emotional support from the seniors, the staff, and other adoptive parents who understand and empathize with them as they face the challenges of raising children adopted from the foster care system. Their neighbors provide care, understanding, reassurance, and opportunities for emotional expression. At Hope Meadows neighbors (seniors and other parents) are the people that parents turn to first for help and support. In a recent survey, 100% of Hope parents reported that they feel their children are safe in the neighborhood and that there are adults in the neighborhood that would help their children if they were not available. Such supports have long been recognized as essential aspects of social services; but rarely have programs been built to enhance and draw specifically on this aspect of community support.

**Opportunities for retirees.** Over its history Hope Meadows has enabled over 130 seniors to reside in a safe, affordable and supportive community with a compelling and socially significant purpose. These Hope seniors (occupying forty households in the neighborhood) perform myriad tasks – staffing an afterschool program, serving as crossing-guards, chaperoning overnight trips, providing babysitting on a moment’s notice to free a parent to focus attention on another child in crisis, etc. As a program, Hope Meadows offers basic scaffolding for such supportive interactions and arrangements, which retirees utilize and build on to reliably deliver an average of 274 hours of volunteer activity every week, at an estimated value of more than $300,000 per year.
In addition to helping families, seniors themselves benefit from living in the neighborhood. They seem to be defying the usual degenerative model of aging. Despite serious health problems, many have found a way to overcome pain, discomfort, and disability, and to remain vitally engaged in the community (Power, et al., 2007). In surveys conducted in 2003 and in 2008, 98% reported that there are people in the neighborhood who they could always count on for help, 87% reported visiting with neighbors at least once a week, 83% said their volunteer work made them feel needed, and 78% reported that their volunteer work helped them feel they were making a difference in the lives of others.

**Evaluation protocol**

A central claim of the GHC model is that by cultivating a network of caring intergenerational relationships, problem-solving can shift from intervention *in* community to community *as* intervention. Given the right conditions, ordinary people of all generations will care for one another in ways, and to a degree, that go beyond the scope both of a typical neighborhood *and* of traditional social service interventions – neighbors will provide extraordinary levels of neighboring (care and support) within the normal course of daily living.

Each person at Hope Meadows brings into the community a wealth of experience, expertise, and individuality. Through the relationships that emerge, these individual assets are naturally infused into the life and activity of the community. Unlike conventional social service interventions, the strategies for action in a GHC grow out of relationships rather than the other way around, and this enables supports and services to evolve, becoming more deeply textured as members learn from daily encounters how to help one another. Most Hope Meadows residents develop a deep sense of belonging and commitment to one another, making it easier than is typically possible in long-established social service systems to find more timely and effective answers to complex problems. Sixteen years of work at Hope Meadows provides documentation of this approach (see Appendix 2).

Moving forward, the goal of research and development regarding the GHC model is to explore and come to more fully understand the emergent pathways through which the community itself “becomes the intervention.” This will entail looking more closely at the trajectories of intergenerational relationship networks themselves, how they emerge and evolve, and how specifically they contribute to outcomes.

Further research is being planned to examine more deeply the key dimensions of the GHC Logic Model (see Appendix 1) including the expansion of social networks and the extension of the time-horizon on relationships emerging within these networks. Opportunities to compare implementations and outcomes across multiple replication sites are being explored as well.

**Expanded social networks.** In the GHC program, the precursors of an expanded social network include the volunteer and event systems (as well as housing and professional services) which function not only as a support system to children and families, but also as critical elements in bootstrapping emergent social and cultural processes. These, in turn, generate several extended multi-generational family systems within a complex multistranded network. Recent innovations in programming at Hope Meadows to support elderly and frail residents bring opportunities to better understand the broader significance of an
expanded social network. Current plans to create adaptive housing for the frail elderly at Hope Meadows will include close tracking of their sense of safety and security, the adaptation of their activities and roles to ensure continuing meaningful engagement within the community, and their sense of belonging and well-being – and how all these factors facilitate aging-in-place and aging-in-community.

**Extended timeline.** Programs based on the GHC model provide unique opportunities for tracking interconnected life course trajectories (life course transitions and transformative gains) within a known context. Present goals include a systematic review of existing and incoming data on child developmental outcomes, as well as family and senior well being at Hope Meadows. Much can be done retrospectively with child, family, and senior data, but prospective research must also be designed. The GHC model presents a unique opportunity to explore aging as a developmental process intertwined with child and family development, under the special circumstances of a collaborative effort to heal traumas of neglect, abuse, poverty, and abandonment. The synergic effects of such an arrangement have already been explored in published studies (see for example the special double issue of *Children and Youth Services Review*, Sep/Oct 2001 on Generations of Hope), but much remains to be learned.

**Explore variations across replication sites.** As numerous new GHC initiatives enter the planning stage and some become operational, the potential to dramatically accelerate the learning and modeling process emerges as well. The range of programmatic goals being addressed now encompasses not only foster-adoption, but also optimizing the independence of developmentally disabled adults, the launching of older youth exiting foster care, and the stabilizing of young mothers in recovery from substance abuse. The scale and nature of senior involvement in such initiatives will need to be worked out from the ground up as new experimental designs. Several other foster care and/or adoptive programs are already in operation, and most of these have taken liberties with the model, thus creating a sort of natural experiment in implementations. We will also need to tease out the optimal roles and obligations for staff and other professionals and examine in more detail the influence of site design and program supports.

As we explore these variations across replication sites, it is essential that there be clear, measurable and carefully evaluated outcomes. Measurable outcomes in any GHC necessarily include, for all residents, an increase in supportive intergenerational relationships, a sense of belonging to purpose and place, meaningful engagement, physical safety and security, and perceived well-being.

These domains of evaluation, along with operational variables and examples of measurement tools, are summarized in Appendix 3. Other measurable outcomes will vary depending on the particular vulnerable population a GHC is designed to support. For example, at Hope Meadows measurable outcomes include the reduction of long-term foster care for children through adoption and the improvement of high school graduation rates, while outcomes at a site focusing on stabilizing the lives of young mothers could include remaining drug free and becoming financially independent.

**Concluding thoughts: An important caveat**

Finally, and perhaps most importantly, when evaluating intergenerational community living as a significant form of social service (one that is both a place and a program), we must bear in mind that it is
not necessary to prove through formal program evaluation that a stable family and supportive community are good for kids.

For children who have experienced severe “traumas of belonging,” becoming re-embedded within systems of family and community leads to outcomes that too often are overlooked and undervalued. These re-embedding outcomes, connecting children to people and place, should be further facilitated and closely monitored – but it is easy to miss the fact that children, upon placement within Hope Meadows, achieve almost immediately a goal that eludes most children who grow up in foster care well into their adult years: to have a secure place and role within a naturally-emergent network of kin and extended kin-like relationships. At Hope Meadows, moreover, this network is also highly diverse with respect to age, race, ability, and life experience, and has no obvious institutional features to distinguish it from any “normal” neighborhood. This embedding impact is achieved so quietly and suddenly that evaluators can either miss it entirely or fail to know what to do with it.

At Hope Meadows, residents align their efforts on the program goals of securing adoptions and promoting the well-being of families, but they do this for the most part by simply living their lives in community, and they tend to experience this as intrinsically valuable. It may be the case that this particular arrangement of people and place also pays off in terms of more distal effects such as improved attention in school, diminishing aggressive behavior, increased high school graduation rates, or lifetime earning capacity. At a more basic level, however, the program’s value does not depend on subsequent outcomes.

It is important to bear in mind why research and evaluation are being conducted at all, and what is being requested by demands to “see the supporting evidence.” Shortly after establishing Hope Meadows, its administrators sought the advice of Dr. Edward Zigler, Sterling Professor of Psychology and Director of the Center in Child Development and Social Policy at Yale University, regarding evaluation planning. Somewhat to their surprise, he counseled that it is not necessary to conduct sophisticated evaluations to prove that family and community are good for children.

We must not slip into the error, Dr. Zigler cautioned, of imagining that the value of embeddedness in family and community needs to be proven before being endorsed as a program goal. What can be profitably examined are the specific means of achieving such embeddedness, and the emergent effects and the opportunities deriving from it to elucidate fundamental processes and potentials of deeply collaborative living.
Finally, consider the ramifications of Dr. Zigler’s remarks for larger questions of civil society: healthy neighborhoods and community are a primary good for kids (not to mention seniors, parents, staff, and the wider community of township and state). Formal program evaluation often doesn’t really address such primary goods, and leaps to the task of proving, for instance, that community is good for something else, maybe enhanced self-esteem or mathematics achievement. At some point however the sequence has to stop, and other forms of deliberation must take over regarding what goods are to be collectively valued and why. Such deliberations are occurring more formally at Hope Meadows now, and as we engage in interchanges with emergent GHCs, the conversation will expand and open new venues.

At the level of civic deliberation and reflexive organizational development, informed by a continuing stream of research inquiry and results, there is immense potential to be tapped for opening new trajectories of conscious community. This potential, we believe, may lead to bold new strategies for empowering members of communities to address apparently intractable social problems.
## Appendix 1: GHC logic model

<table>
<thead>
<tr>
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<th>Informal neighboring</th>
<th>Intergenerational relationship network</th>
<th>New paradigm</th>
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<td>Everyday acts of care and support</td>
<td>Culture of care and support</td>
<td>Intergenerational Community as Intervention (ICI)</td>
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<td></td>
<td>Intergenerational relationships</td>
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<td>Material supports</td>
<td>Volunteer system</td>
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<td>Added social service system capacity</td>
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<td>Family stipends</td>
<td>Tutoring &amp; mentoring</td>
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<td>Increased human &amp; social capital</td>
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<td>Family health</td>
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<td>insurance</td>
<td>Peer support</td>
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<td>Reduced rents</td>
<td>Event system</td>
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<td>Site Design</td>
<td>Afterschool activities</td>
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<td>Contiguous</td>
<td>Routine gatherings</td>
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<tr>
<td>neighborhood</td>
<td>Special events</td>
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<tr>
<td>Universal design</td>
<td>Community trips</td>
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<tr>
<td>Intergenerational Center(s)</td>
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<tr>
<td>Senior and family households interspersed</td>
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<tr>
<td>Residents</td>
<td>Housing management</td>
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<td>Vulnerable</td>
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<td>population</td>
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<td>Families</td>
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<td>Retirees</td>
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<td>Program staff</td>
<td>Professional services</td>
<td>Transformative gains</td>
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<tr>
<td></td>
<td>• Child and Family</td>
<td>• Recovery from traumas</td>
<td>Enhanced socio-emotional resilience and well-being</td>
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<td></td>
<td>• Senior</td>
<td>• Emotional maturation</td>
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<td>Families</td>
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<tr>
<td></td>
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<td>Seniors</td>
</tr>
</tbody>
</table>

### Inputs

- Housing management
- Repairs/upgrading

### Program

- Tutoring & mentoring
- Program support
- Peer support

- Afterschool activities
- Routine gatherings
- Special events
- Community trips

### Activities & Outputs

- Social & legal casework
- Therapy sessions
- Parenting education
- Senior education

### Proximal Goals for Vulnerable Populations

### Medial Outcomes

### Distal Outcomes

- Meaningful engagement
- Belonging
- Safety and security
- Transformative gains
- Proximal goals for vulnerable populations
- Successful lifecourse transitions
  - High school graduation
  - First employment
  - Cope with death of spouse
  - Aging-in-community

### New Paradigm

- Intergenerational Community as Intervention (ICI)

- Advanced human & social capital
Appendix 2 – Selected publications

Articles & Chapters


Power, M. B., & Eheart, B. K. (2001). Crisis in a foster home: The need for a caring community. *Children and Youth Services Review*, 23(9/10), 719-742. (An earlier version of this paper was published in *The Sociological Quarterly*, 2000, 41, (1)).


**White Paper Series**

*Intergenerational Community as Intervention*, GHDC White Paper Series: Volume 1, Number 1

*Completing the circle of care: Alternative housing at Hope Meadows*, GHDC White Paper Series: Volume 1, Number 2

*Restoring hope: Integrating living and learning communities for vulnerable youth*, GHDC White Paper Series: Volume 1, Number 3

*Designing Generations of Hope Communities: Some lessons from Hope Meadows*, GHDC White Paper Series: Volume 2, Number 1

*Generations of Hope Communities*, GHDC White Paper Series: Volume 2, Number 2

*Creating the Everyday Magic of a GHC: Language*, GHDC White Paper Series: Volume 3, Number 1

*Generations of Hope Communities: Harnessing the Transformative Power of Diversity*, GHDC White Paper Series: Volume 3, Number 2

*Rethinking interventions: Addressing the mental health needs of vulnerable children and youth through intergenerational community*, GHDC White Paper Series: Volume 4, Number 1


*A Generations of Hope Community for Adults with Developmental Disabilities and Caregiving Families*, GHDC White Paper Series: Volume 5, Number 1

*Generations of Hope Neighborhoods: Transforming Congregate Care Facilities*, GHDC White Paper Series, Volume 5, Number 2

*Generations of Hope Communities: Strengthening Family and Community for Disabled Veterans*, GHDC White Paper Series, Volume 5, Number 3

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### Appendix 3: Summary of potential evaluation components

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<th>Variables</th>
<th>Measurement</th>
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<td>• Number of Relationships</td>
<td>• Social Network Analysis</td>
</tr>
<tr>
<td>Relationships</td>
<td>• Quality of Relationships</td>
<td>• Ethnographic Analysis</td>
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<tr>
<td></td>
<td>• Nature of Relationships</td>
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<tr>
<td>Belonging</td>
<td>Extent to which community members feel that they are part of a shared</td>
<td>• Social Connectedness Scale</td>
</tr>
<tr>
<td></td>
<td>purpose and place</td>
<td>• Ethnographic Analysis</td>
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<td></td>
<td></td>
<td>• Focus Groups</td>
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<tr>
<td>Meaningful Engagement</td>
<td>• Volunteer Hours/Activities</td>
<td>• Survey methods</td>
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<td></td>
<td>• Tutoring/Mentoring Time/Activities</td>
<td>• Analysis of archival records</td>
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<td></td>
<td>• Extracurricular Activities for</td>
<td>• Participant-Observation</td>
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<td></td>
<td>Children and Community Support</td>
<td></td>
</tr>
<tr>
<td>Safety &amp; Security</td>
<td>Perception of and actual nature of crime and safety</td>
<td>• Self-report data</td>
</tr>
<tr>
<td>Well-being</td>
<td>Assessment of quality of life,</td>
<td>• Local crime statistics</td>
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<tr>
<td></td>
<td>physical and emotional well-being</td>
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</table>

- Flourishing scale
- QALY
- Capability sets