

Camden

Bergen and Lanning Square

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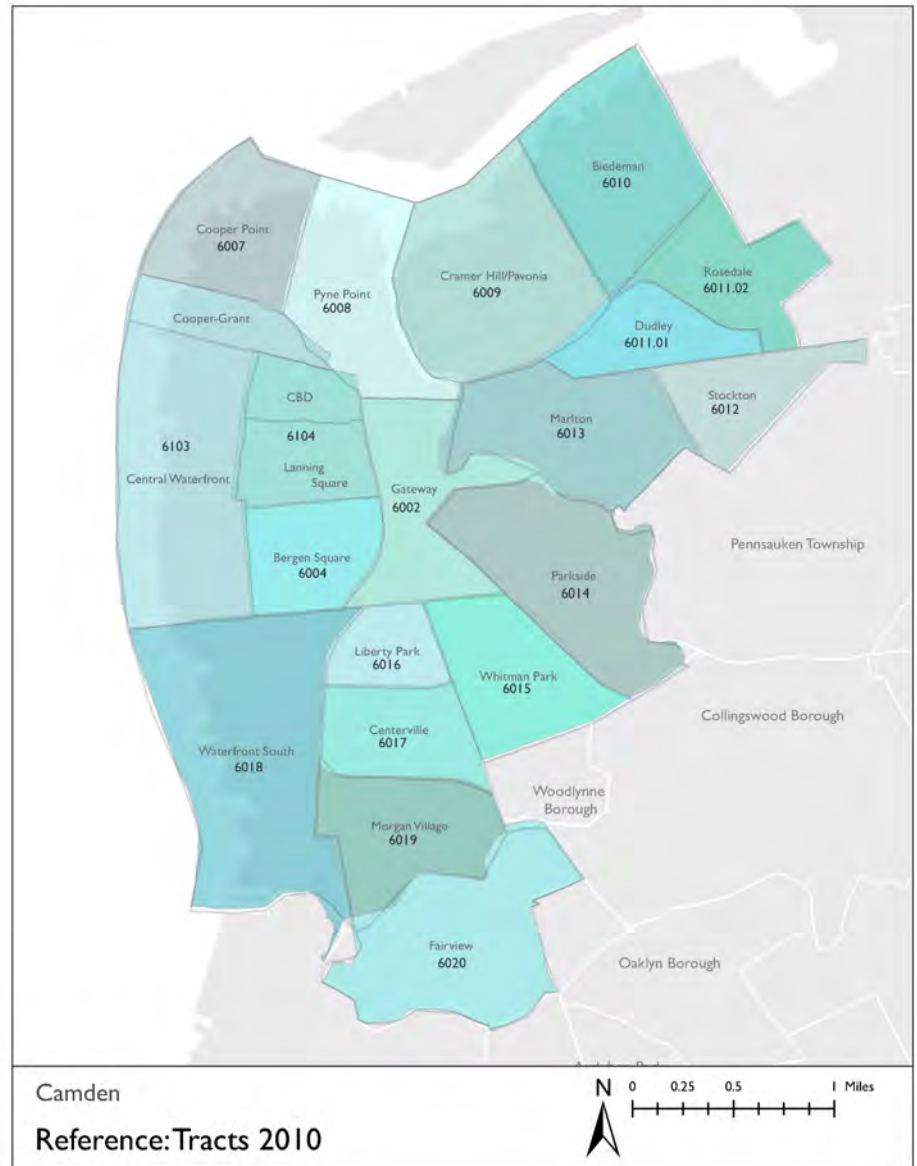
Neighborhoods

Lanning and Bergen Square

Lanning Square (census tract 6104) and Bergen Square (census tract 6004) are located in downtown Camden. Camden's waterfront district, which includes the Camden Aquarium, Susquehanna Center (formerly Tweeter Center), Campbell's ball field, Battleship NJ, and industrial uses, is just west. Interstate 676, a main thoroughfare that connects Camden with Philadelphia, is just east.

Once home to waterfront industrial workers, these neighborhoods are now at the heart of Camden's emerging post-industrial economy. Research, medical, educational, and tourism facilities surround the neighborhoods. Cooper University Hospital, a regional hospital, lies on the neighborhood's northern edge. Rutgers and other universities are just northwest. A considerable amount of money from the 2002 Municipal Rehabilitation and Economic Recovery Act was devoted to expanding these downtown job generators suggesting how important leaders think they are to growing Camden's service economy. More expansions are expected with a new Cancer Institute and a new dorm at Rutgers (Bautista, 2012). Cooper Medical School of Rowan University opened in 2012. The new Cooper Cancer Institute is planned to open in 2013 and there are plans for a College of Health Sciences (Cooper, 2012).

Cooper is engaged in redeveloping the neighborhood that surrounds it - Cooper Plaza. Cooper University Hospital partnered with community development and social services organizations (Habitat for Humanity, St. Joe's Carpenter Society, Center for Family Services, Greater Camden Partnership, and Cooper Lanning Civic Association) to develop a community plan in 2008. Their plan was approved and they received 1 million dollars for part one and are awaiting another million dollars for part II (Cooper, 2012; DCA, 2012; Crandell, 2012). Part I, the Cooper Plaza Housing and Economic Development Project, includes housing units, facades, "Clean and



Safe” program, art and health clinics (NJ DCA, 2012). The Clean and Safe Services cleans the neighborhood and the jobs go to Camden residents. Part II includes “funding for housing rehabilitation, expansion of St. Joe’s residential facade improvement program, an employer assisted housing program, clean and safe maintenance and security services, lot stabilization, installation of neighborhood surveillance cameras and streetscape improvements in the Cooper Plaza neighborhood” (Cooper, 2012). Cooper is working with Union Organization for Social Service to create an “apprentice training program” related to the new medical school at Rowan (Cooper, 2012). Cooper is also improving the adjacent Cooper Plaza historic neighborhood. In partnership with community development organizations like St. Joe’s Carpenter Society and NRTC funds from the state and NSP funds from the federal government, they are creating “worker housing” (Cooper, 2012).

Lanning-Bergen experienced tremendous post WWII decline as Camden’s waterfront jobs disappeared. Lanning Square’s proximity to the downtown business district and the potential to grow the waterfront, hospital, and educational institutions, has increased pressure to redevelop the neighborhood. A 2008 property survey found 577 vacant parcels out of 1,360 total parcels (both neighborhoods have been the subject of recent, often-contentious, redevelopment plans that involve relocating or displacing residents). Some projects involved a few housing developments while others included grand visions to transform the communities (City of Camden, 2008). Even as residents watch the redevelopment, they are concerned about their future in the neighborhoods. They recently went through contentious battles related to redevelopment with fears that they would be displaced. As the large job generators downtown expand, neighborhood residents worry about their future in the city (Osborne, 2010).



Cooper



Cooper Expansion

Camden Base Map

Legend

- ★ Advocacy Organization
- ▼ CDC
- ◆ Child Care Center
- ✦ Church
- ▲ Church Affiliated Organization
- Family Success Center
- ⌘ Library
- ◆ Neighborhood Organization
- Social Services Organization
- FQHC
- Health Services
- ✦ Hospital
- ⌘ Public School
- ⌘ Publicly Assisted Multi-Family Housing
- ⌘ Public Housing
- ⌘ River Line Station
- ⌘ PATCO Station
- ⌘ Bus Stop
- Focus Area
- Camden Board of Education
- Cemetery
- Church and Charitable Property
- University
- Commercial
- County Open Space
- Housing Authority
- Industrial
- Other School Property
- Parks
- Residential
- Vacant

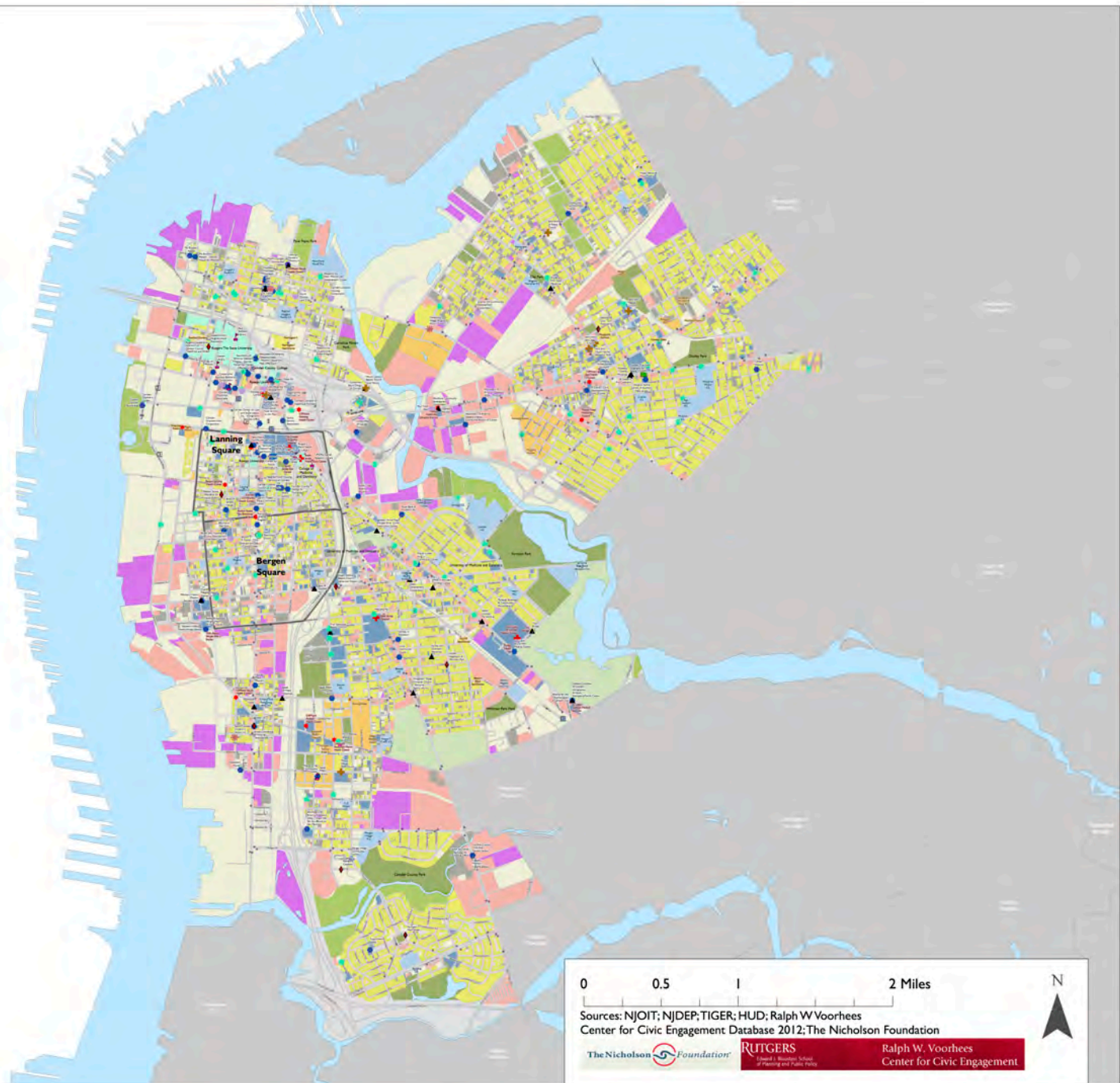


Table 1a. Characteristics of Lanning Square

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population	5,573	100%	Families (2010)	794	100%
			Female-headed with Children	338	43%
Age (2010)			Economic (2007-2011)		
Under 5 years	346	6%	Median Household Income	\$24,583 (+/- \$8,342)	
5-19 years	1,085	20%	Persons below Poverty	1,448	47%
20-64 years	3,772	68%	Total Civilian Labor Force	1,102	100%
65-74 years	164	3%	Employed	979	89%
75+ years	206	4%	Unemployed	123	11%
Race (2010)			Housing (2010)		
White	1,180	21%	Total Units	1,554	100%
Black	2,899	52%	Vacant Housing Units	404	26%
Asian	57	1%	Owner Occupied	492	43%
Hispanic	1,991	36%	Renter Occupied	658	57%
Household (2010)	1,150	100%			
Multigenerational	112	10%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Table 1b. Characteristics of Bergen Square

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population	3,237	100%	Families (2010)	739	100%
Age (2010)			Female-headed with Children	343	46%
Under 5 years	330	10%	Economic (2007-2011)ⁱ		
5-19 years	837	26%	Median Household Income	\$19,912 (+/- \$5,410)	
20-64 years	1,832	57%	Persons below Poverty	1,891	61%
65-74 years	132	4%	Total Civilian Labor Force	1,291	100%
75+ years	106	3%	Employed	917	71%
Race (2010)			Unemployed	374	29%
White	520	16%	Housing (2010)		
Black	1,685	52%	Total Units	1,425	100%
Asian	9	0%	Vacant Housing Units	400	28%
Hispanic	1,516	47%	Owner Occupied	358	35%
Households (2010)	1,025	100%	Renter Occupied	667	65%
Multigenerational	117	11%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Population

Between 2000 and 2010, Camden lost 3% of its population. Lanning Square was home to 5,573 people in 2010, a loss of 3% since 2000. Bergen Square meanwhile lost 17% of its 2000 population by 2010. Lanning is about half Black, 36% Hispanic and 21% White. Bergen has a smaller share of white residents and a larger share of Hispanic residents compared with Lanning. Both neighborhoods witnessed an increase in the share of white residents and a decrease in the share of black residents between 2000 and 2010 (US Bureau of the Census, 2000 and 2010).

Table 2: Total Population of Focus Neighborhood, 2000 & 2010

Tract	2000	2010	Percent Change
104	5,723	5,573	-2.6%
4	3,880	3,237	-16.6%
Neighborhoods	9,603	8,810	-8.3%
Camden	79,904	77,344	-3.2%

(US Census 2000, 2010)

Table 3: Racial & Ethnic Representation in Focus Neighborhoods 2010

Tract	White		Black		Hispanic	
	Count	Percent	Count	Percent	Count	Percent
104	1,180	21.2%	2,899	52.0%	1,991	35.7%
4	520	16.1%	1,685	52.1%	1,516	46.8%
Neighborhoods	1,700	19.3%	4,584	52.0%	3,507	39.8%
Camden	13,602	17.6%	37,180	48.1%	36,379	47.0%

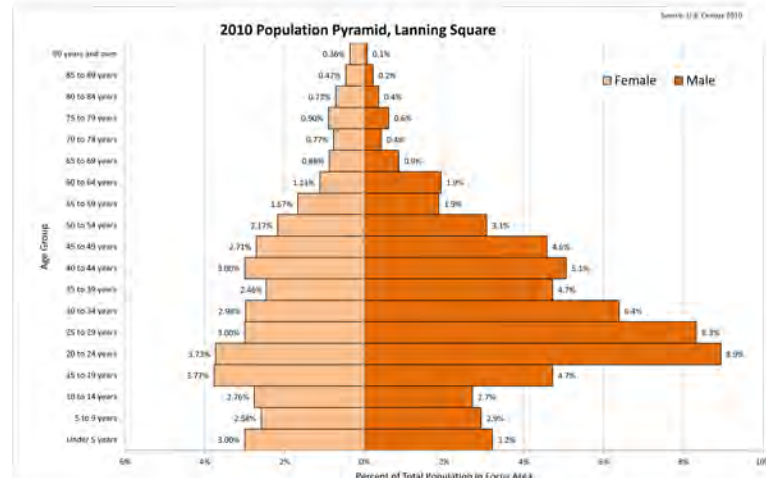
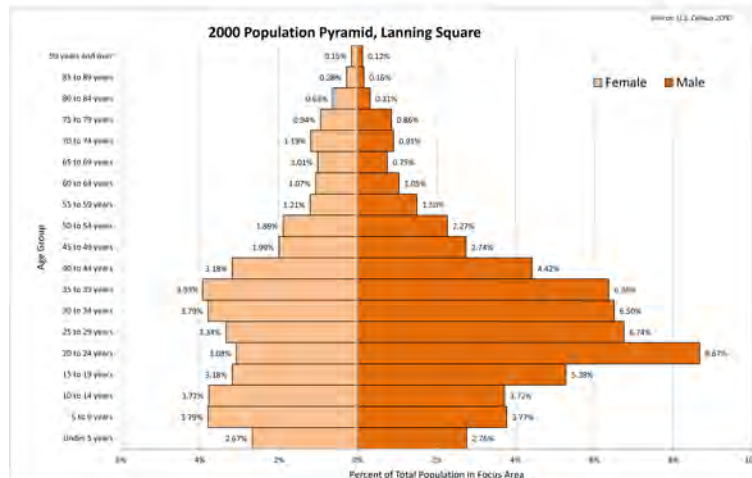
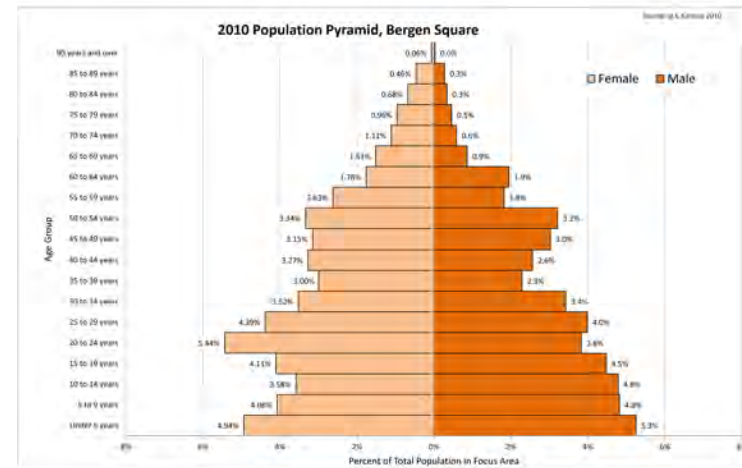
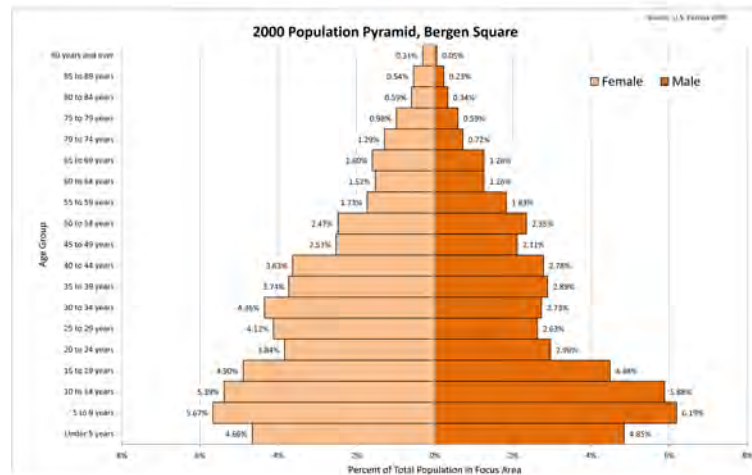
(US Census 2000, 2010)

Table 4: Changes to Neighborhood's Racial & Ethnic Composition, 2000 & 2010

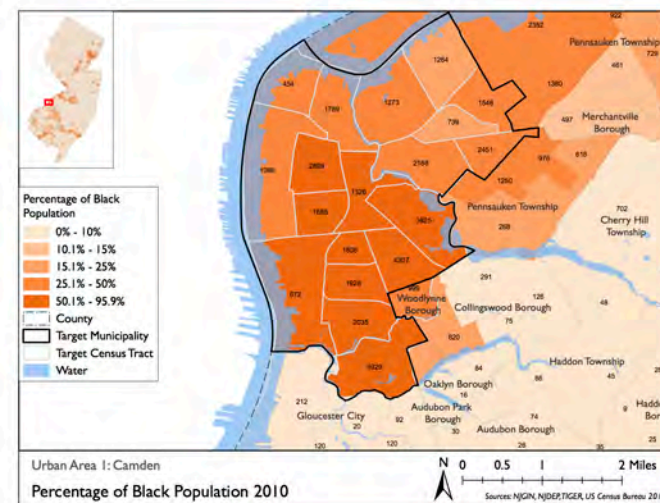
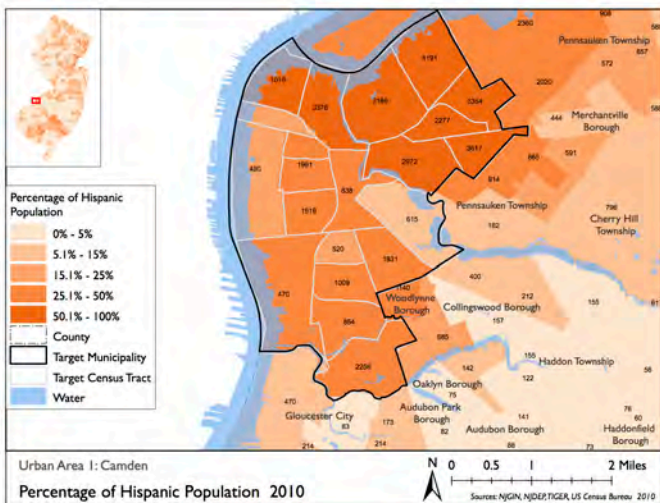
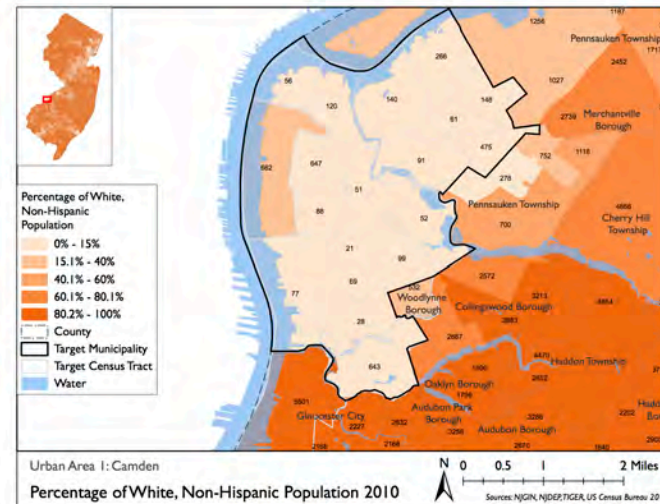
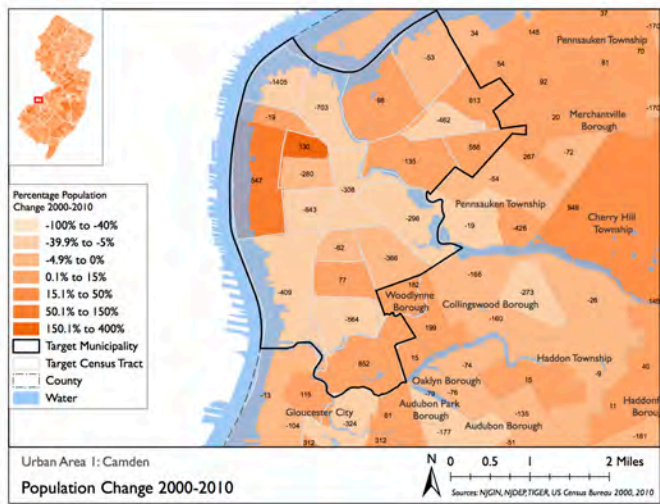
Tract	White		Black		Hispanic	
	2000	2010	2000	2010	2000	2010
104	17.7%	21.2%	59.6%	52.0%	33.8%	35.7%
4	13.3%	16.1%	58.5%	52.1%	40.5%	46.8%
Neighborhoods	15.9%	19.3%	59.1%	52.0%	36.5%	39.8%
Camden	16.8%	17.6%	53.3%	48.1%	38.8%	47.0%

(US Census 2000, 2010)

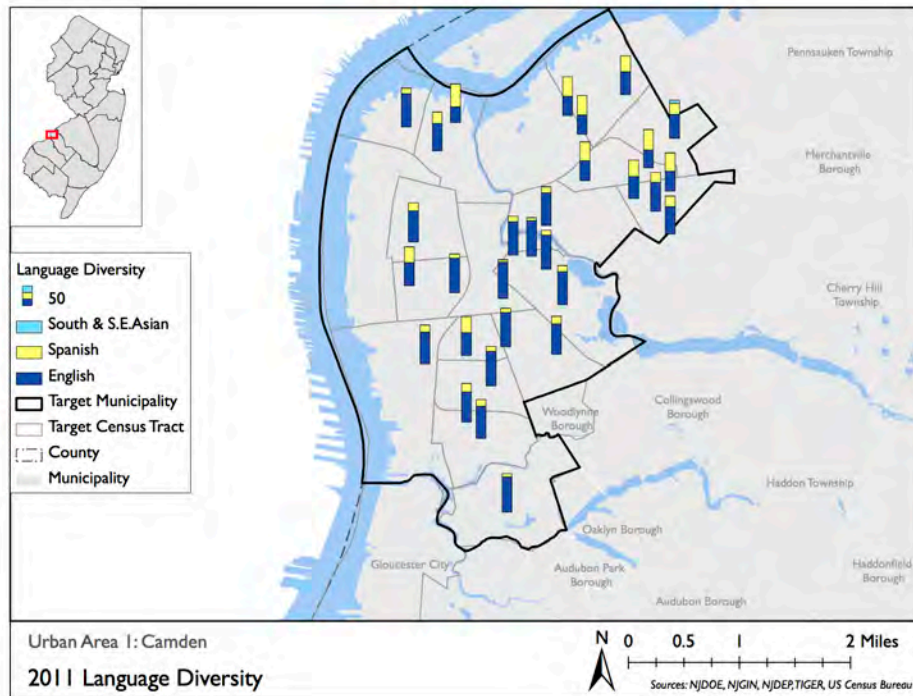
There's an interesting pattern change in both sets of the population pyramids comparing 2000 and 2010. Looking at that pattern in Bergen, in 2000, at the younger ages, the number of people by gender appears to be equal but once young men reach their teen years, they disappear from the chart leaving a consistently lopsided pyramid heavily weighted towards women. The 2010 population pyramid shows a much more balanced gender division throughout the age ranges. They are clearly back in the neighborhood in 2010 and the change between the two time periods is dramatic. The pyramids for Lanning Square suggest where those men are. There is a city jail downtown in Lanning Square.



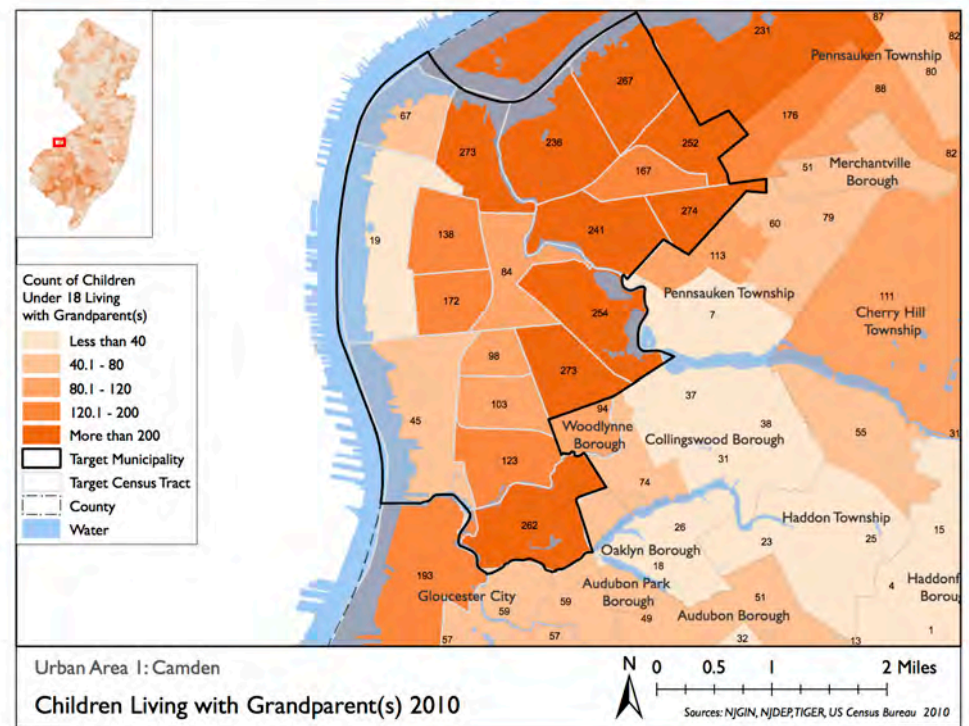
The maps below show the population characteristics of the Camden metropolitan area. They show a concentration of people of color in the city and white communities surrounding the city (U.S. Bureau of the Census, 2010).



To get a sense of recent immigration, in addition to Census data, we looked at the languages that people speak within the elementary schools. While East Camden has historically been the neighborhood with a high concentration of Latino residents, one of the two elementary schools in Bergen Square shows a large percentage of residents speaking Spanish. The elementary school in Lanning Square also has a sizable percentage of students who speak Spanish.



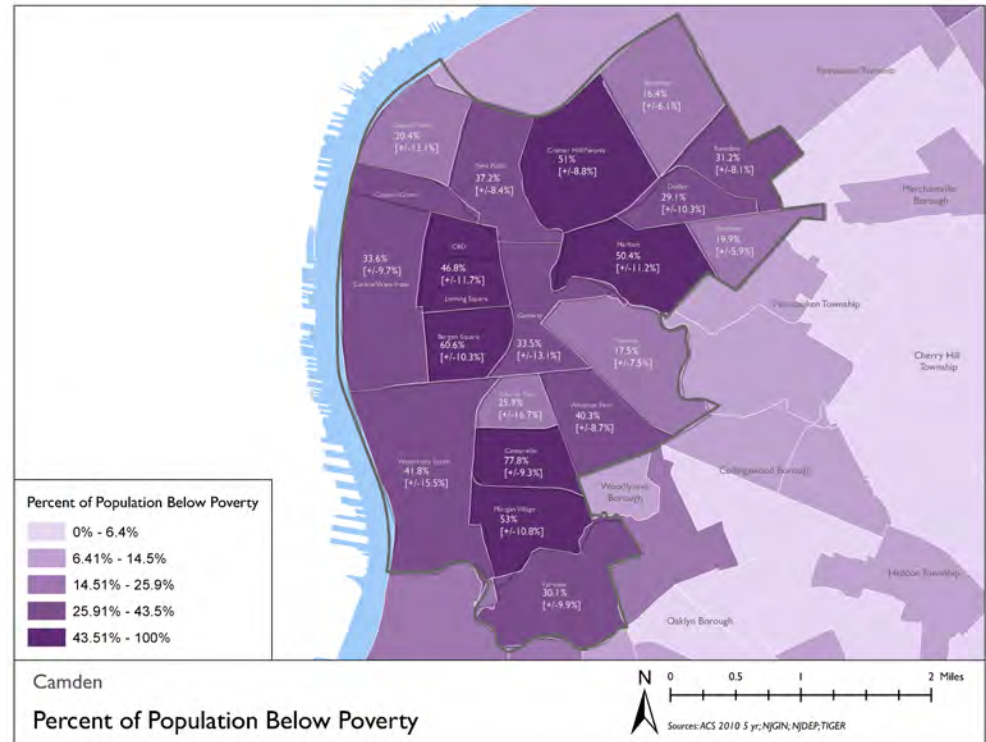
Many grandparents in Camden have children under 18 living with them. The numbers are higher in East and North Camden but Lanning and Bergen still have more than a 100 each.



Income

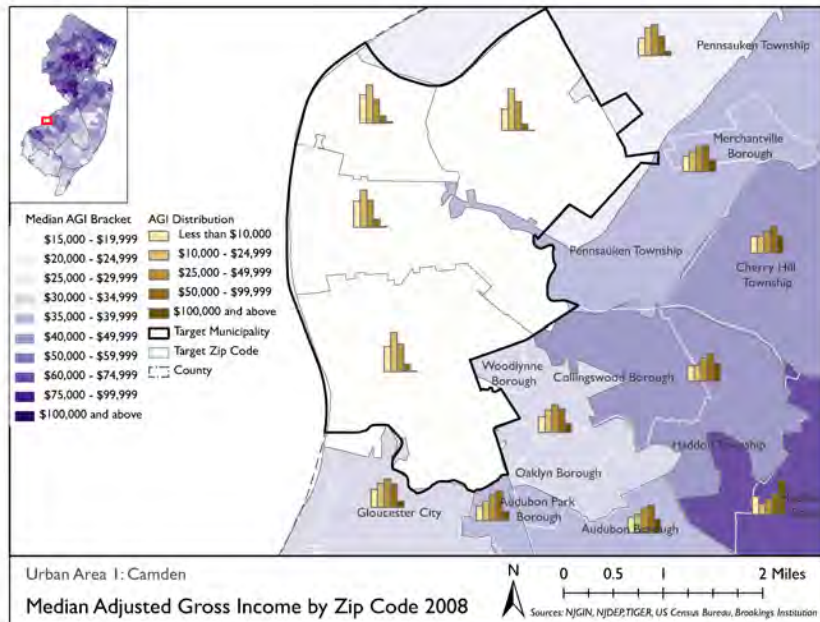
While Camden is home to many middle income residents, it also faces extreme and widespread poverty. Some middle and even higher income households live in Lanning-Bergen but there also many people with very low incomes. In 2010, 47 percent (+/- 12%) of people in Lanning Square and 61% in Bergen Square (+/- 10%) have incomes below the poverty line (ACS, 2010). The median household income in 2000 was \$22,013 in Lanning Square and \$21,130 in Bergen Square (U.S. Bureau of the Census, 2000, 2010).

The distribution of incomes shows how few upper incomes households there are and how households are concentrated in the lower income ranges. We can see this most usefully using IRS gross income tax data which is available most recently from 2008. The distribution is skewed far to the lower income categories showing that the majority of residents have a gross income far below \$49,000. This contrasts with surrounding suburban communities where residents may have higher job-related as well as investment



income (Brookings Institution).

Perhaps explaining some of the low incomes, nearly half of the families of Lanning Square and Bergen Square live in female-headed households (43% Lanning Square and 46% Bergen Square) (2010 Census). There is some multi-generational support; 10% of households in Lanning Square and 11% in Bergen Square live in homes with three or more generations. While these arrangements may suggest helpful intergenerational structures, they may also suggest that people lack the resources to live on their own. Living in overcrowded conditions can contribute to stress.



Education

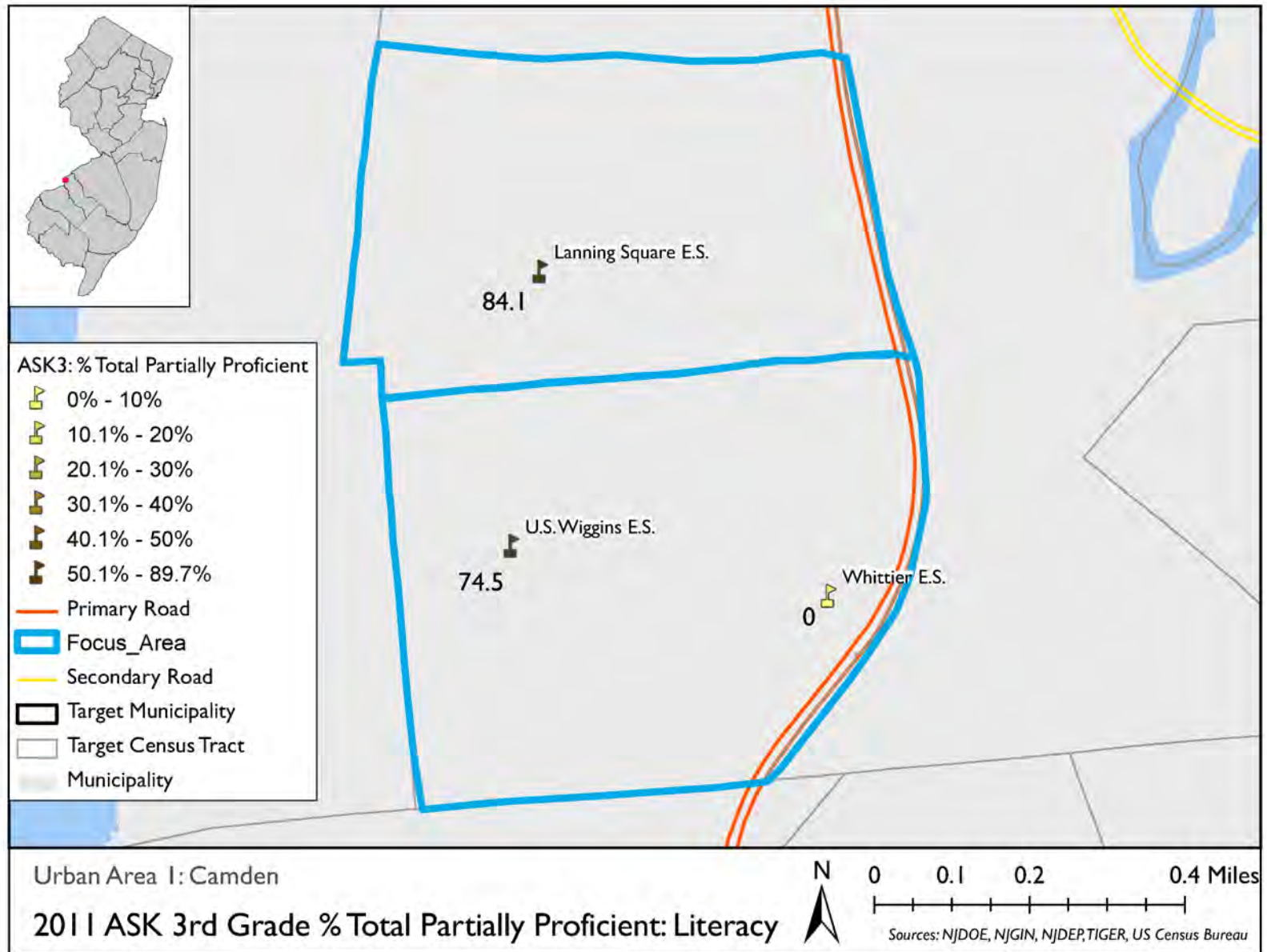
Lanning Square Elementary School, located between 5th Street and South Broadway on Royden Street, was closed in 2002 and the site, which is adjacent to the site for the new Cooper Medical School of Rowan University has been vacant since. Students have spent the past decade moving around to neighboring schools. After a particularly contentious political battle, the Camden Board of Education recently decided that it would allow a new charter school called the “Renaissance School” which will be part of KIPP Cooper Norcross Academy (Vargas, November 30, 2012). Norcross Foundation, Inc., established by State Assemblyman Donald Norcross and his brother George E. Norcross III, who play important roles in Camden’s power structure, is the charitable foundation of Cooper University Hospital and the Knowledge Is Power Program (KIPP). The foundation submitted a proposal to construct a privately run public “Renaissance” school, but the Camden School Board initially refused it in the wake of strong neighborhood opposition to charter schools (Vargas, September 25, 2012). More recently, the Center for Family Services in the Cooper Plaza and Cooper Lanning neighborhoods received a half million dollar federal Promise Neighborhood Planning Grant. The objective is to mirror the Harlem’s Children Zone by providing wrap around services and education from birth through college (Center for Neighborhood Services, 2012)

More than 80% of 3rd grade students at Lanning Square Elementary and Whittier Elementary and 75% at U.S. Wiggins score as partially proficient on the 3rd grade NJ literacy exam. Over 75% of families of students at Lanning Square and Whittier Elementary first language spoken at home is English. U.S. Wiggins student families first language spoken at home is 59% English and 41% Spanish. Both U.S. Wiggins and Whittier had relatively low student suspensions, at 5% and 3% respectively, while Lanning Square Elementary had a student suspension rate of 16%. Whittier Elementary also had a very high number of mobile students; 50% of their student population moved in and out of the school within the academic year. U.S Wiggins also had a high number of students with limited English proficiency.

Table 5: School Characteristics 2010-11

School	Grade Levels	Total School Population	% Partially Proficient 3rd Grade NJ Ask	First Language Spoken at Home	Students with Disabilities	Mobility	Limited English Proficiency	Student Suspensions
Lanning Square	Pre K-7	324	84%	English - 79.6% Spanish - 20.4%	16%	28%	0.90%	16%
U.S. Wiggins	Pre K-6	438	75%	English - 59% Spanish - 41% Adygei - .2%	16%	27%	21%	5%
Whittier	Pre K-5	204	87% (09/10)	English - 88.6% Spanish - 11.4%	23%	50%	0.50%	3%

(NJ Department of Education, 2011)



Housing

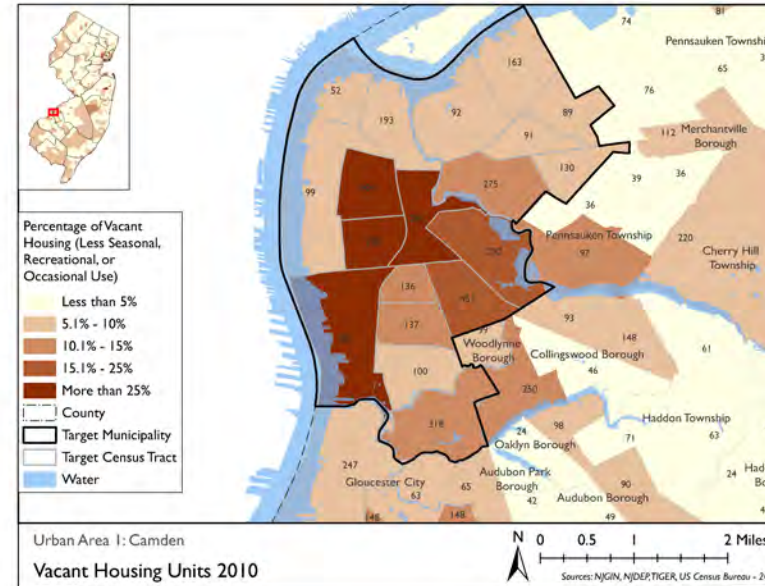
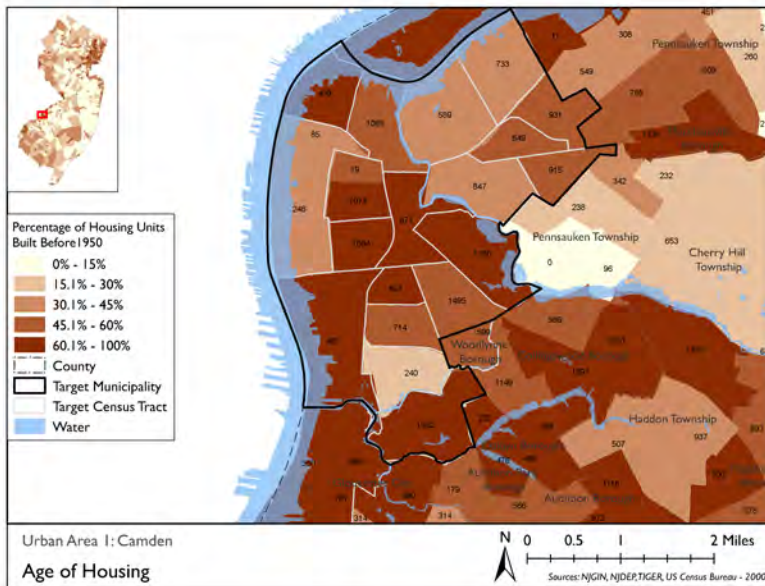
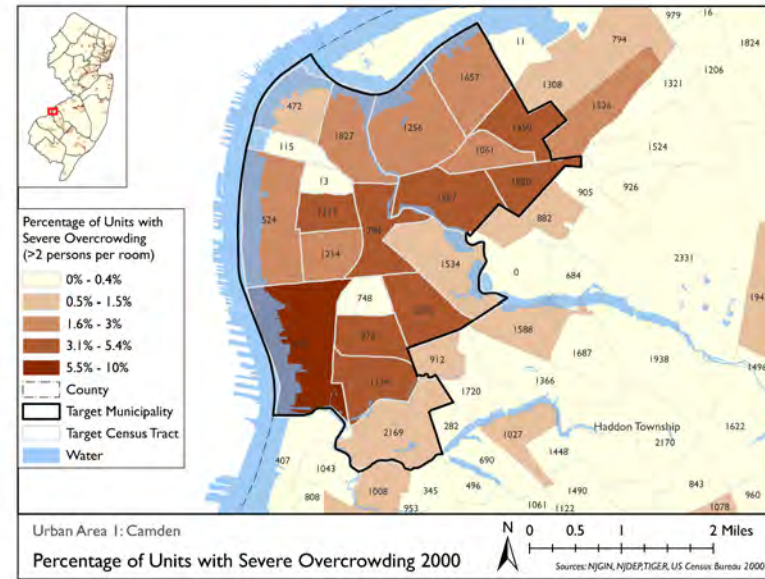
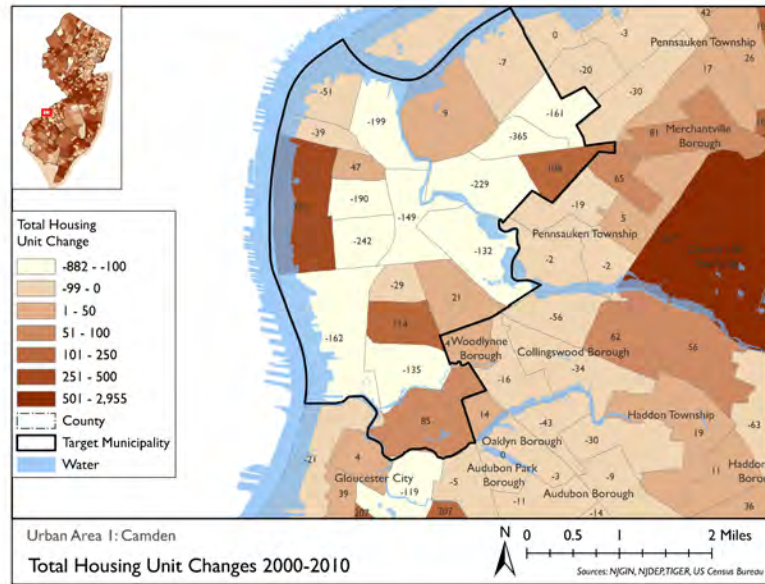
Lanning and Bergen are home to 2,979 housing units. Camden has higher homeownership rates than in some of the other study areas. While many residents energetically work to improve their housing, blocks and neighborhoods, Bergen and Lanning Square have suffered tremendous disinvestment. Between 2000 and 2010, Lanning Square lost 8% of its housing stock (190 housing units) and Bergen Square lost 15% (242 housing units). As of 2010, more than a quarter, 26% (404 units) of Lanning's and 28% (398 units) of Bergen's, housing units were vacant (US Census 2000, 2010). Over the last decade, both of these neighborhoods have been the sites for ambitious redevelopment plans but little in the way of redevelopment has materialized (Camden Division of City Planning, 2005; 2008). Older redevelopment efforts demolished housing, leaving now grass-filled vacant lots, as redevelopment failed to materialize. More recent redevelopment planning processes created tremendous stress as residents feared displacement and relocation and attended meetings and organized themselves to avoid displacement (Lake et al, 2007).

Table 6: Housing Unit Changes in Focus Neighborhoods, 2000-2010

Tract	Housing Units		
	2000	2010	Percent Change
104	1,697	1,554	-8.4%
4	1,667	1,425	-14.5%
Neighborhoods	3,364	2,979	-11.4%
Camden	29,769	28,358	-4.7%

(US Census 2000, 2010)

Cooper runs its own housing fairs, developed the Cooper Employer Assisted Housing program in 2011 to help its employees buy homes in Cooper Lanning, and is actively engaged in creating “worker” housing around the hospital downtown. As they say, “Cooper University Hospital understand the vital role homeownership plays with the stabilization of this vibrant neighborhood, and we encourage our employees to live where they work” (DCA, 2012). The city and state also run live where you work programs that provide additional resources. Cooper is working with a variety of community development corporations to improve facades, develop and redevelop housing in the Cooper Plaza/Lanning Square neighborhoods surrounding the hospital. St. Joe's Carpenter Society, Cramer Hill Community Development Corporation, M&M Development, and Habitat for Humanity are all working on this. NSP, NRTC, and other funding is making it possible (Cooper, 2012).



The housing stock is older in the neighborhood which means elevated concerns about lead poisoning. The Royden Street community, shown in the photos below, demonstrates the active and engaged community residents who have demonstrated their citizenship by rebuilding their block and their homes (Lake et al, 2007).



Crime

Non-violent crime including burglary, larceny, arson, and motor vehicle theft decreased 9% in 2012 compared with 2011, but 2012 was the deadliest year on record with 465 shootings and 67 homicides (Mast, 2012). In 2012, state officials broke up a heroin ring that appears to have been based out of the Lanning Square neighborhood (Gambardello, 2013). A few entities have mapped the murder locations over time. A 2006 map shows the Cooper-Lanning and Bergen neighborhoods as easily identifiable crime “hotspots” (Ratcliffe, 2006). The Courier Post maintains an online map that shows the locations of homicides between 2007 and 2010 with victim names and ages. In 2010, most are younger than 30. Each year shows concentrations of murders in Lanning and Bergen (Courier Post, online map). A Google Map that shows the location of murders in 2011 and 2012 shows about 18 in Bergen and Lanning Square (Google Map). Most of these murders took place mere blocks from Cooper Hospital.

To draw attention to this health crisis and to remember the victims, community leaders have erected crosses outside of Camden City Hall. Most of the homicides took place in four neighborhoods; Lanning Square was one of them (Simon, September 30, 2012). As violent crime is resulting in an unusually young death rate for Camden's youth, we list violence as one of the neighborhood's top health concerns. Community organization and healthcare staff are starting to put more attention on the connection between violence and well being. Cooper also address violence-based trauma through Cooper's Guidance, Preservation, and Support (GPS) program (Shelly, 2013). We return to this topic in the healthcare section below.



Photo credit: Paul Jargowsky, December 10, 2012

In terms of a crime response, to cut the city budget, the city plans to disband its police department and replace it with a non-union "Metro Division" of the Camden County Police (Chiaromonte, August 26, 2012). Cooper meanwhile includes safety in its neighborhood redevelopment efforts and is creating its own private security forces. "Key components of the Cooper Plaza plan in Camden...include streetscape improvements, facade renovations for homes on two key blocks, and the new Clean and Safe Cooper Plaza program. The latter is a public safety initiative that has brought on four employees...to help maintain a sense of security and pride in the Cooper Plaza neighborhoods" (Crandall, 2012: 8-9).

Crime related to another part of the economy, metals, is also a concern. People steal pipes and other metal from vacant housing but if the gas is still on, there is a risk of explosion. Most recently this reached the near crisis stage on the East Side. People are afraid that nearby properties will explode (Connors and Stamm, 2013). A few years ago, thieves stole appliances from a house under construction in Irvington and it exploded when workers entered the next day killing them.

Environment

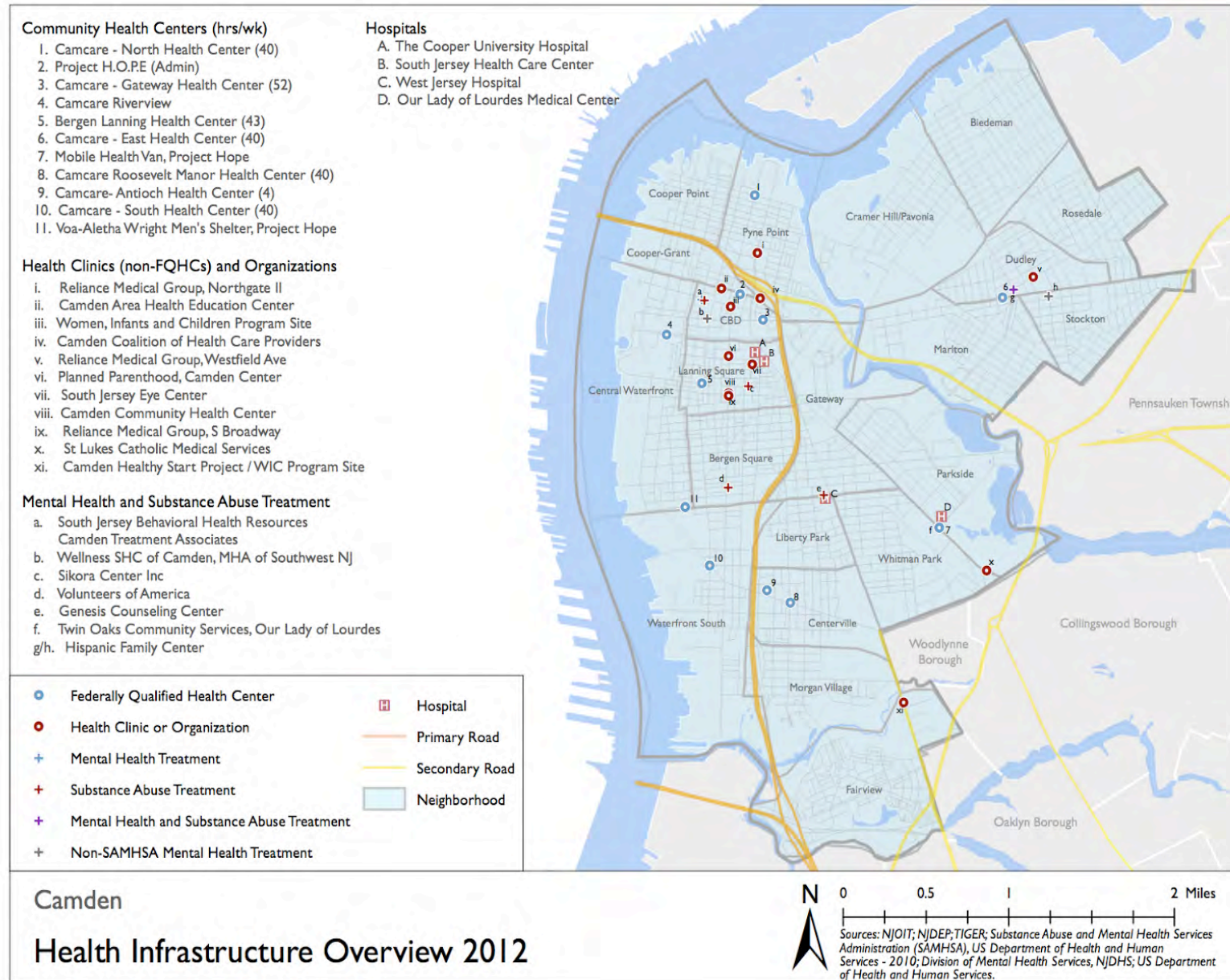
Camden residents struggle with many environment-related concerns. The Waterfront South community and many other residents in Camden have long been concerned about air and water quality. In the early 2000s, they worked with the state to conduct a study and found “relatively high particulate levels; and that some of this particulate matter contains significant quantities of toxic metals, such as arsenic, cadmium, lead, manganese and nickel” (NJ Department of Environmental Protection, 2005: 5). Following the report, there were steps to reduce particulate emissions but many of these concerns remain in Camden and in other urban areas. Cooper meanwhile is improving three parks around Cooper Hospital - 7th Street Median Park, Cooper Commons Park, and Triangle Park (Cooper, 2012). And Cooper works with Cooper Lanning Civic Association and others to create the Cooper Sprouts Garden on 7th and Newton Avenue. Camden Grows helps the organization and recently received a large USDA grant to do so, and it supports a farm stand (DCA, 2012).

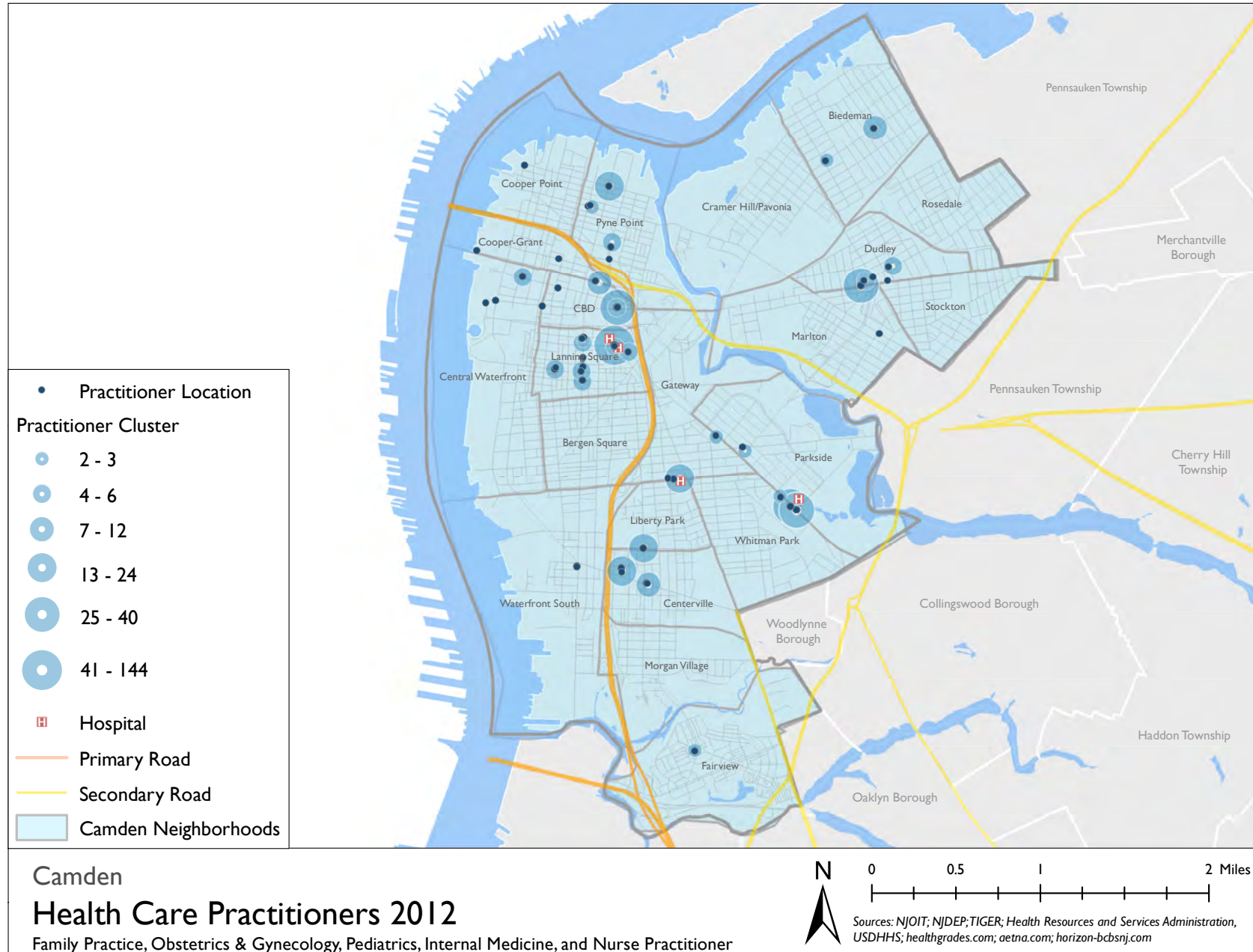
Health

Health Issues

Trying to capture the primary health concerns in Camden at the moment is a pretty daunting task. Camden residents struggle with diabetes, obesity, and high blood pressure and they struggle with violence, drug abuse, and the challenges involved in lacking regular access to medical care. Violence is emerging as a health issue that health providers are seeking to address. For many years it was seen as a public safety issue but people are starting to question whether there is a trauma for people who fear and/or are affected by this much repeated violence. Asthma is a leading health care concern. Housing conditions exacerbate respiratory illnesses with their poor circulation systems, presence of mold, lead, and asbestos (camconnect.org; camdenhealth.org). The housing stock is old, there has been lots of demolition, and over the years, to make up for its dwindling tax base, Camden has agreed to hold often unwanted regional things like a sewage treatment plant. It is also home to many industrial uses. “Studies show that Camden City residents have unusually high rates of respiratory diseases, especially asthma. People with asthma are particularly vulnerable to the effects of pollution. Camden City residents have elevated rates of cancer of the lung, esophagus, stomach, liver, kidney, and pancreas. Lung cancer rates are especially high compared to the state-wide rates” (Bryant and Wallace, 2010). As one interviewee pointed out, Camden has very complex patients with very complex needs with a healthcare system that is inadequate to provide for these needs (Interview, 2013). Despite the best of efforts of Camden health providers and the city’s non-profit organizations, there are many remaining challenges. Healthcare appointments often involve long waits and then are short which doesn’t meet the full needs of patients and there are few to no follow-up appointments. Language and/or educational barriers can make it difficult for patients to understand services. And there is a lack of patient engagement in the city’s healthcare system (Interview, 2013).

Healthcare Organizational Infrastructure





Lanning and Bergen Square residents live about as close to major health institutions as is possible. The main healthcare providers for primary and preventative care in this area are FQHCs and the hospital networks. The Lanning Square neighborhood is home to Cooper Hospital and to the city's federally qualified health center. Cooper Hospital serves residents in neighborhoods all over Camden, but it's no surprise that there is a heavy concentration of patient visits from Lanning and Bergen Square, given their nearby location. Immediately around the hospital there are a number of health services. The South Jersey Eye Center, Planned Parenthood Camden Center, Mobile Health Van, and Services Empowering Rape Victims are all located in adjacent blocks. In the center of the neighborhood, there is the Camden Community Health Center and the Bergen Lanning Health Center. Cooper also reaches out into the neighborhood with a variety of partnerships and efforts. Cooper is a partner in the Promise Neighborhood effort to create a new school which would replace the Lanning Square school that was demolished in 2003. Cooper says that as part of the efforts, it helps with community events, provides free flu shots and hosts a baby shower at the hospital for community residents, among other things. With Norcross Foundation, Cooper Medical School, and Delaware Valley Volunteers of America, it also provides holiday food and gifts for residents in Cooper Plaza and Lanning Square (Cooper, 2012). Cooper has staff who address violence and Cooper Medical School of Rowan University is thinking about how they address violence as a health issue (Shelly, 2013b).

There is an extended system of hospital care in Camden consisting of Cooper, Lourdes, and Virtua Hospitals, all of which are clustered in the northern part of the city. These three hospitals formed the Camden Health Information Exchange (HIE), a collaborative data sharing network, in 2010. The objective of the HIE is to aid healthcare providers to improve care delivery. The HIE web-based technology connects communication among the 100 plus participating healthcare providers to real-time access of important medical information or clinical data on Camden patients. Through the collaboration, the HIE provides the following hospital data: ADT (admissions/discharge/transfer) transactions, lab results, radiology results, and discharge summaries. This collaboration aims to reduce unnecessary duplication and inefficiencies through fostering improved care coordination. Further, the data collected through the HIE can be used to identify patients for possible enrollment in the Coalition's Care Management and Care Transitions programs, which are used to improve the care transitions and care coordination of high cost, complex patients (camdenhealth.org).

The Camden Area Health Education Center runs a few innovative programs including the mobile health van to provide services for the homeless who mainly stay in non-residential areas. AHEC works with Kennedy and their medical students who participate with the van as part of their clinical rotations to help them learn and provide care. They use cutting edge approaches including peer education through schools and religious institutions. They work on improving health by ensuring regular health access. The mobile health van has been in operation for twenty years. By using community connections, they target areas that they know have high homeless or at risk populations. In this way, they can respect the dignity of the users because most people at risk are unlikely to physically go to a clinic during the days because of transportation problems or they simply don't want to be seen going to a clinic. The mobile van operates during weekday evenings and weekends to maximize community exposure. They specifically target the homeless population, drug abusers, and sex workers. Through the van they operate a syringe access program, which is one of five programs operated throughout the state as a pilot program. It allows for users to exchange their used needles for clean, sterilized ones to help reduce the spread of HIV. The van also offers flu shots, STI screenings, and referrals to other operations in the city like Project HOPE and early prevention centers at Kennedy and Cooper Hospital. They coordinate with the urban treatment center to distribute methadone which is used to help manage addiction. The organization also runs a farmers market from June to October in two locations that sell flowers, fresh fruits and vegetables, and other ready-to-eat foods like sandwiches. They source from two farmers and honor WIC and SNAP (Interview with AHEC, 2012). The community response has been very positive. They are currently working with the Community Health Workers Institute to help develop a training curriculum to train health workers as part of the Affordable Care Act – this will help to tie community and healthcare operations by mobilizing staff within doctors' offices to

identify individuals who have fallen out of care (this was mentioned in Newark too as being of interest). This ties in with the Health Information Exchange program that seeks to monitor individuals' health and self-maintenance after they are treated at the hospitals. It represents another way that a joint social work/healthcare directive can help to stabilize individuals suffering from complex health problems and monitor them before they cycle through the hospital system multiple times for the same condition.

Local health care providers report repeat visitors as an ongoing challenge, with certain patients, sometimes referred to as “superusers,” returning multiple times a year, often for the same complaints that brought them there previously. A community leader explained that there are plenty of healthcare providers in Camden but people still tend to go to the emergency room since that is what they grew up doing (Interview, 2013). Compounding this problem is a lack of standards for communication between the multiple doctors who may be caring for the same patients, between hospitals and private practices, and even between specialists within the same hospital. This inhibits truly personalized care for complex health problems such as diabetes (Hernandez, June 12, 2012). The Camden Coalition of Healthcare Providers created the Camden Health Information Exchange (HIE), a comprehensive database of patient care, to address this problem. The Camden Coalition of Healthcare Providers operates the HIE.

Community Coalitions and Organizations that Provide Health Services

The Camden Coalition

The Camden Coalition of Healthcare Providers is a comprehensive social service organization dedicated to improving health in Camden. In addition to improving healthcare, the organization seeks to address housing, access to good quality food, legal services, and a variety of other issues. They have almost taken the place of the older comprehensive community development organizations, streamlining the healthcare system in Camden (camdenhealth.org). Their goal is to develop programs and provide coordination among healthcare providers, hospitals, and physician practices to reduce the number of patient hospital visits. By improving the quality of care and cutting unneeded admission costs, and therefore taking “superusers” and other high-cost hospital patients out of the system, the Coalition seeks to decrease the cost of health care overall and improve patient care.

Superusers tend to be people who are often dealing with social issues, such as substance abuse, mental health issues, homelessness, language barriers, and other social support issues, which cause them to have a hard time prioritizing their health needs and maintaining adequate medical maintenance. The majority of the patients in the program struggle with these social issues that isolate them from local avenues of social support, which are compounded with physical medical conditions, such as diabetes, hypertension, or severe asthma. For many who face social issues as well as medical issues, access to healthcare can be limited or even denied. Many past substance abusers, for example, find it difficult to receive healthcare outside of the hospital. Once they have been labeled as drug users, some healthcare organizations, such as acute rehab centers for patients with skilled nursing needs, will not admit them, even if they are no longer actively using drugs. Many homeless people, meanwhile, have a hard time prioritizing healthcare needs when they do not feel safe at night or have limited access to transportation. New immigrants may not know the language or health care system well enough to successfully navigate the various channels of care (Interview, 2013).

Jeffrey Brenner, executive director of the coalition, has been working at the head of this initiative for 10 years, recently helping to secure monetary awards under the Affordable Care Act to develop these programs to improve care and reduce healthcare costs. Brenner also advocates for in-home follow-ups after a patient is released from the hospital to stabilize the patient and ensure they don't return to the hospital unnecessarily (Gawande, January 24, 2011). The Camden Coalition grew out of meetings of interested healthcare professionals in 2002 who wanted to change the face of healthcare in Camden and evolved into a non-profit aimed at improving the quality and accessibility of healthcare in Camden. It does this by rethinking how hospitals, healthcare providers, and various stakeholders engage patients and how healthcare information is exchanged (Interview, 2013) The Health Information Exchange program is the result of a research project Jeffrey Brennan conducted to map "hotspots" of "superusers" in the city. They define superusers as people with recurring hospital visits who don't have primary care and/or insurance who represent a drain on hospital resources because of the cost of care that will never be recovered. Interventions are data driven through the health information exchange. They target patients who are in their 3rd admission or more in 6 months from Cooper, Lourdes, Virtua hospitals and the Coalition triages from this list. Registered nurses visit these identified patients, explain the program to them, and offer to enroll patients in the program which is completely voluntary (Interview, 2012).

The program runs in 90 day cycles and is intended to be a terminal program. The nurse works with patients to get them medically stable which may involve substance abuse programs or behavioral or mental counseling and connects them with primary healthcare providers. It also helps connect individuals to services that will help them navigate insurance since most patients are uninsured, underinsured, or receive Medicare or Medicaid. The ultimate goal is to connect patients with primary providers. The RN conducts weekly home visits until patients are stabilized, and then the team switches over to LPN and other staff to individually identify and treat patient needs. Home visits are less frequent until hopefully patients can navigate the healthcare system on their own with their primary healthcare providers.

The Coalition also works with the Center for Family Services on a hospital based intervention program to redirect the lives of youth involved in violent behaviors or have been the victims of violence. They receive daily reports from the hospitals on patient records and recurring visits. They recently started a new program to gather data to follow patients after program completion, because sometimes they are re-admitted. They started this a few months ago and began to gather this data. They are hoping within 6 months to have concrete data to understand recidivism rates. They are also working on a cross-site learning program to help other communities across the country implement a similar program in their healthcare systems (Interview with Camden Coalition, 2012).

CAMcare

CAMcare is a federally funded federally qualified community healthcare organization started in the 1970s by a group of community activists and healthcare providers who seek to provide high quality preventative health care at 8 locations. They advertise with television commercials and brochures. CAMconnect participates in CamConnect, which allows them to gather and share information regarding patients in Camden. Because CAMcare provides a full array of services, it sees families through their life cycles - mom, dad, baby, children, and grandparents. Camden has a high rate of Emergency Room use. CAMcare has worked to decrease emergency room visits by working with hospitals to encourage patients to follow up with a primary healthcare provider. They have found this to be only somewhat effective since often patients may not. CAMcare's normal hours of operation are from 8am to 4:30pm and with grants they have expanded their hours two days a week from 4:30pm to 8:30pm. CAMcare provides additional services because they receive additional reimbursements and funding from other sources. They find some reimbursement challenges though. Most insurance will only reimburse for only one visit per day but the center provides multiple services in one location which creates a billing problem. Even if they have all of the specialty services at one location, they cannot run patients

from service to service. Insurance companies fear providers will over-use the specialty services. CAMcare would like to provide its patients with more specialty care and behavioral health services including mental, social, and sociological services because they feel that these have a major impact on healthcare in general. They feel that behavioral health could be partially responsible for the high use of the emergency rooms in Camden. This would require more space, money, time, and resources for CAMcare to provide these services (we heard this across most of the focus areas) (Interview, 2012).

Project H.O.P.E.

Project H.O.P.E. at the Bergen Lanning Health Center (<http://www.projecthopecamden.org>) is one of five Federally Qualified Health Center (FQHC) homeless projects in New Jersey. They are a community health center that provides services to individuals in Camden who are homeless or at-risk homeless. The at-risk homeless include those who are underinsured, uninsured, in public housing, living with numerous people, or anything that could enhance their possibility of being homeless. Project HOPE began in 1993 under the Lourdes Hospital System. Project HOPE grew from a small group of individuals who gave sandwiches out to the homeless into an organization that provides a full-range of healthcare services. It offers primary care, the treatment and counseling for physical and mental health ailments, preventative care such as checkups, food for diabetics distribution, and other social services. It provides walk in STD testing. Project H.O.P.E. runs a mobile health van with a schedule that brings it downtown and into a variety of neighborhoods. It provides social workers, medical providers, screenings, referrals, testing, and other services. They have a fulltime outreach worker who goes around to various sites around the city to health-fairs, transit stops, events, etc... They get patients from referrals from other agencies. Quite often some other organization will be helping an individual with finding housing and realize that this individual also needs healthcare and they refer them to Project HOPE (Interview, 2012).

Many of Project HOPE's clientele hold jobs but make very low wages, which causes them to be homeless or at-risk to be homeless. This means regular business hours would not be accessible for them; this is why Project HOPE offers hours outside of the regular business hours. Also, they allow walk-in visits so clientele are not restricted by appointments. Project HOPE has a mobile health van. Since early 2011, the mobile health van is not on the regular schedule as it was before because of lack of funding. The mobile health van used to have a regular schedule with regular locations in different key spots of the community (transit stops, community centers, etc...). It was highly utilized. What was significant was that since the homeless population typically has a great distrust of social services and federally funded programs, this mobile health van acted as a "giant icebreaker" in that it was a successful way of going into communities and connecting individuals to their healthcare options. Right now the van is used for health events for health screenings, preventative healthcare, and healthcare education (Interview, 2012).

The organization attempts to make sure patients are able to see the same doctor each time so that relationships can be built. A huge part of this relationship is to help individuals move past the facade of the healthcare system and to communicate the importance of preventative proactive healthcare: this includes monitoring BMI, diabetes, cancer screening and so on. They monitor everything because they must report to federal government. They feel that they could better serve the population by offering more specialized services such as mammograms and dental care. While CAMcare already offers dental care for about \$5, Project HOPE would like to be able to offer dental care to those who can't even afford \$5 (Interview, 2012).

Volunteers of America Delaware Valley

Volunteers of America Delaware Valley operates a number of organizations in Camden and is part of the larger umbrella of VOA, which is one of the nation's largest charitable organizations. The Anna M. Sample House Complex is a 65 bed transitional housing shelter that helps homeless women re-enter society as self-

sufficient members of the community. All patients are accepted through referrals provided mostly by the local borough of social services of Gloucester or through the hospital system (Cooper, Lourdes). The complex is open all day, all year long. Patients come from Gloucester and Camden counties but only through a referral basis. The local borough of social services provides a per diem fund for each patient which is redeemable within a twelve month period from the date of initial referral for patients to complete the program. As condition of payment for services provided at the complex, the women must agree to participate in a workforce program sponsored by the borough of social services requirement. The time limit on participation makes it difficult though to re-use the program if residents experience recurring homelessness. Once a patient is accepted, however, they may stay as long as they need until they are deemed self-sustaining. Lourdes' crisis center also serves as a base for referrals and the complex recommends the services at the crisis center for residents to use. A staff member serves as the outreach coordinator to canvas the streets to encourage homeless people to seek referrals from the borough of social services. The organization has targeted neighborhoods within the two counties it serves and goes to the places where they know a homeless population exists. The organization works in collaboration with other agencies within the community including the Hispanic Family Center, Center for Family Services, Co-Star Unity and the VOADV substance abuse facility. Each individual accepted into the program is provided with a case manager who conducts an assessment of individual needs in collaboration with the board of social services. This case manager mostly manages behavioral health outcomes but VOADV has a relationship with Cooper hospital for patients to get physicals, TB shots, and other physical health screenings and care. There is no on-site medical facility. Currently in the works is an expanded program with Cooper that will provide direct health services as well as transportation to and from the complex to the hospital. The services provided on-site include money management, substance abuse, mental health, resume building, and employment training (Interview, 2012).

The Center for Family Services, Inc.

The Center for Family Services, Inc. (<http://www.centerffs.org>) is an organization with a long history supporting the families of Camden that provides several services intended to target behaviors that inhibit the emotional and physical support functions of families. Their array of services includes behavioral counseling, family support, violence prevention, substance abuse treatment, and trauma services. The Center employs a small group of core employees, while volunteers support most of its activities. The Center for Family Services is the result of a merger of three organizations in 2000. At the time of integration, the individual organizations were well known individually, but the board worked on an aggressive re-branding campaign to promote their new services and advertise their outreach. The organization has an extensive mailing list and online newsletter. There is a recognition that access to social services and medical care can be limited by a number of factors including cultural mistrust, chaotic lifestyles, and transportation limitations that make visiting an office or clinic undesirable. As a result, the organization focuses on making in home visits for many of their services. Some treatments, like those for substance abuse, are conducted in office, but many of the behavioral treatments are conducted in the family home. Many of the families who benefit from the services are targeted through a contracting agency, like DYFS, but one of the other main goals of the organization is to reach out to families before they "fall into the system". Other agencies with whom CFFS works with include the Division of Addiction Services, Juvenile Justice Division, Camden and Gloucester Youth Services Commission, Division of Community Affairs, Division of Women, the Attorney General's Office, and local domestic violence shelters.

The goal is to keep individuals in their own homes while providing education about healthy lifestyles and health prevention steps a family may take at home, whether it is to combat a mental health issue, violence, or nutrition. Each service has connections to broader community organizations, and the staff work to help residents connect with and access the services and resources they need. There are multiple layers of counseling provided by the staff that seek to integrate the individual into a larger "family" that brings together community connections. Rather than focus on specific problems and the remedies for mental or social issues, they look at the levels of need of a particular person that influence more basic human needs like homelessness or hunger first.

Currently, there is a new Family Success Center that opened on Broad Street that works with the Division of Children and Family. CFFS is also working to develop the Promise Neighborhood in Cooper/Lanning with Cooper Hospital through the school system. This would support a birth to college initiative for every child in the neighborhood and effort is being spent now trying to identify existing services and how they can be more concentrated through a virtual network. Funding for all components of the organization is limited and is often a challenge. Since the staff work so closely with government organizations, it is not uncommon for them to move into the state agencies (Interview, 2012).

Camden Center for Law & Social Justice

The Camden Center for Law & Social Justice helps low income residents with immigration and domestic violence issues, among other things <http://www.cclsj.org/about-us/>

STOP (Stop Trauma on People)

The organization was founded by Father Jeff Puttoff. STOP was responsible for the crosses outside of city hall. They are trying to raise a discussion about the deaths as more complicated than a violence issue. They see it as having economic, social, and public health. The organization counted the number of people who were killed in homicides between 1995 and 2012 - 710 in all and will put up 710 crosses to raise awareness (Shelly, 2013). There is concern that the violence and lack of safety creates a situation of constant threat which takes a toll on youth and families in the city.

Outstanding Health Needs

There are a variety of insurance and non-insurance barriers to healthcare in Camden. People who are underinsured or uninsured have trouble accessing care, especially accessing follow-up specialty healthcare that sometimes have stricter health insurance requirements and/or are more expensive. People may apply for charity care and/or have to pay a co-payment (Interview, 2013). There are some clinics in Camden that offer great services but because people cannot afford the sliding scale fees or co-pays, they often forgo the services which means follow-ups do not happen. This, in turn, means that patients do not keep up with necessary healthcare services or perhaps do not take the necessary drugs to maintain their health. Cathedral Kitchen runs a dental clinic and they try to avoid these problems by making special arrangements with specialty dentists for when their clients need more complex care such as root canals. However, they only refer when it is a serious situation because they do not want to wear out their welcome (Interview, 2013). Additionally, those who are underinsured or uninsured are unable to cover the additional support to keep medically stable people at home rather than becoming “superusers.” Further, since most of the mainstream medical community in Camden locates its specialty services outside of Camden, receiving adequate healthcare is difficult, especially when relying on public transportation (Interview, 2013).

Mental Health Services

There is a great unmet demand for mental health services in Camden and for integrating mental and physical healthcare systems. Camden’s mental health services are very much used and have waiting lists. An interviewee explained that nearly everyone the organization encounters needs some sort of mental health

service. However, that interviewee also indicated that while there are a few great psychiatric services in Camden, such as South Jersey Behavioral Health, Hispanic Family Center, Nueva Vida, and Twin Oaks, they are unable to adequately serve Camden's need for mental health services because of the long waiting lists (Interviews, 2013). One interviewee explained that often the needs of their clientele are beyond what a social worker is able to do so they will refer clientele to a psychologist but the long waiting lists make using those resources difficult. One organization's client had been on a waiting list for ten weeks to see a psychologist (Interview, 2013). Often, people with long-term chronic issues are receiving mental health services for long periods of time, while people with immediate acute issues are unable to access mental health services (Interview, 2013).

While mental health providers are great in Camden, there are simply not enough to serve Camden's demand (Interview, 2013). Camden has plenty of great hospitals but they primarily address physiology issues and there is definitely a need for more support around mental health services (Interviews, 2013). Since there are not enough mental health providers, people seek mental health services outside of Camden, which causes increased access issues for the urban poor because many have no ability to get to services outside of the city. Some have no car; some services are not accessible via public transit, and some cannot afford public transit. Additionally, because most mental health services are offered during working hours, a lot of people forgo receiving the proper care because they cannot take the time off of work. There needs to be nighttime and weekend hours to properly serve the urban poor (Interview, 2013).

Interviewees noted that in resolving the long wait lists, the existing mental health services could do a much better job of communicating with primary care services (Interview, 2013). Most other interviewees note that the insurance and cost issues also need to be addressed. A lot of psychologists do not see patients who are uninsured or underinsured. An interviewee indicated that while some mental health providers offer sliding fees, there is definitely a gap in what kind of outside services Medicaid patients and underinsured patients can receive (Interview, 2013). Co-payments and sliding fees are an issue since so many people cannot even afford minimum payments (Interview, 2013). Due to this, it is a real challenge for social workers to find mental health services for their clientele (Interview, 2013). Often, patients are handed a list of providers that accept their insurance, but when they call, they may find out that providers no longer accept it. This contributes to the long waits for the few providers who do.

Crime

There was general agreement among interviewees that crime in Camden affects community health. The high crime rate affects all aspects of the quality of life. It over stresses the city and its ability to provide services (Interview, 2013). It probably has increased the number of hospital visits (Interview, 2013). It makes it scary to walk out of house and causes stress and wear and tear on people, anxiety and depression. Almost everyone in Camden knows someone who has been murdered (Interview, 2013). One interviewee explained that crime has a lasting impact on the health of Camden's youth. It is difficult for youth to get enough physical activity because it isn't safe enough for them to go outside. When adults are repeatedly traumatized they tend to disassociate from their body and become numb and block all emotions. What needs to happen is to offer experiences that bring people who have experienced adverse trauma back to their bodies (Interview, 2013). Mental health and trauma informed behavioral services are Camden's greatest needs (Interview, 2013).

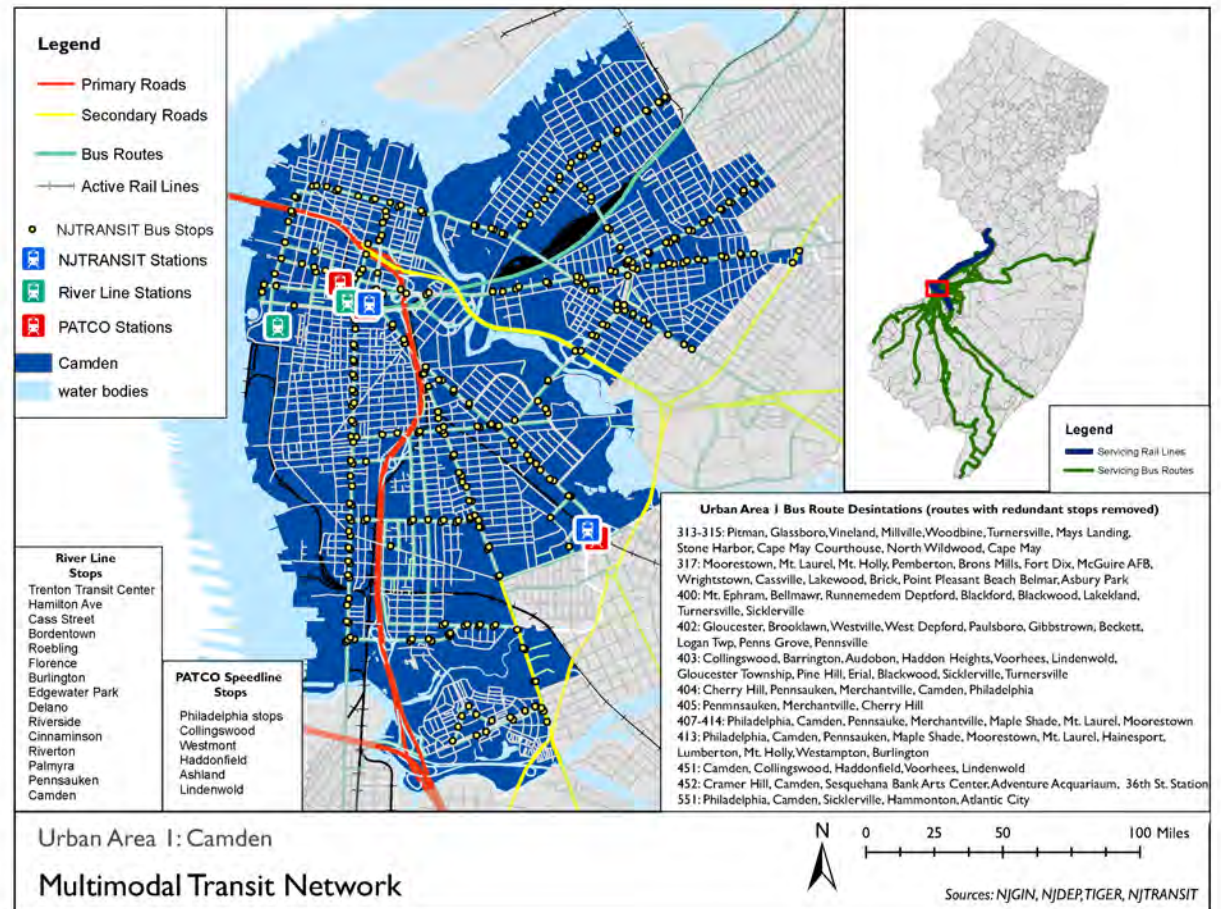
Fresh Food

Camden has a lack of access to healthy food and easy access to unhealthy food such as chips and sugary drinks (Interview, 2013).

Transportation

Camden is an accessible city from the perspective of the South Jersey/Philadelphia region. Various transit agencies transport passengers from Camden, including NJ Transit, SEPTA, and Delaware River Port Authority. For Camden commuters, the Walter Rand Transportation Center is a major transit hub located just north of Lanning Square in the Broadway neighborhood that services train and bus routes. For those working in Philadelphia, a PATCO train ride is a 10-15 minute trip. For local bus commuters, NJ Transit operates many bus routes with stops throughout the Camden County area. Camden is one end of the River Line light rail service (the other end is Trenton), and gives residents access to numerous south Jersey towns situated along the state border. For tourists of Camden's waterfront attractions, including the Susquehanna Bank Center and the Adventure Aquarium, the RiverLink ferry service operates in half hour increments and takes passengers between Camden's waterfront and Penn's Landing in Philadelphia.

In the focus neighborhoods there are a couple of public transportation options. On the northern border of Lanning Square and southern border of the CBD there are nearby PATCO and River Line stops. However south of the CBD there are no rail options. The bus is a more viable option for residents. Bus stops are almost entirely on South Broadway in Lanning and Bergen Square. The exceptions are stops near the South Jersey Health Care Center, UMDNJ and The Cooper University Hospital in Lanning Square and on Dr. Charles Brimm Boulevard in Bergen Square. Having the majority of bus stops on South Broadway is advantageous with South Broadway running down the middle of the two neighborhoods. This only makes it a 2-4 block walk to a bus stop for most residents. It is also important that almost all of the health service providers in the two neighborhoods are near bus stops, with the exception of Bergen Lanning Health Center (bus stops are located 5 blocks away) and the South Jersey Eye Center (bus stops are located 3 blocks away). One interviewee explained that because the major healthcare facilities are located along bus routes in a small geographic area, healthcare is very accessible in terms of



transportation and it's what happens once you get to the healthcare facility that determines the level of accessibility (Interview, 2013). However the convenience of the bus service is almost entirely dependent on the scheduling of the buses and the frequency of stops at a certain stop in a day as well as the destinations of the bus routes. Another interviewee pointed out that even though Camden is only about 9 square miles, public transportation takes a long time, is unpredictable and has many delays (Interview, 2013).

For the mobility impaired, public transportation options are considered to be indirect and not easily accessible. This makes using public transit as a means for accessing healthcare especially difficult for the mobility impaired and otherwise disabled (Interviews, 2013). There are transportation alternatives for the mobility impaired offered through the Camden County Board of Social Services and Medicaid but there are problems with reliability and understanding how to use the resource. Trans vans for the mobility impaired either don't pick up or pick up late and they take a patient to an appointment and leave the patient there for a long time. Highlighting the physical barriers for using transit alternatives for accessing healthcare, an interviewee explained that in regards to major mobility impairments such as the morbidly obese, these trans vans are not staffed or equipped to properly care for the patients (Interview, 2013). Additionally, since Camden's mainstream medical community does not operate its specialty follow-up services in Camden, public transportation alternatives pose a challenge for people who have to travel to receive the adequate healthcare services (Interview, 2013). Generally people are less mobile if they don't have their own car (Interview, 2013)

Community Organizations and Infrastructure

There are also numerous faith-based organizations that provide services to the community such as soup kitchens, youth development/after school programs, and homelessness prevention. Many of the community organizations focus more on homelessness, addiction counseling, youth development, and emergency food provisions than on health care.

Broadway Family Center (<http://www.broadwayfamilycenter.com>)

The center supports health education through interactive field trips to various community organizations throughout Camden and guest speakers who provide information to parents on healthcare topics.

Cathedral Kitchen (<http://www.cathedralkitchen.org/>)

Cathedral Kitchen, which has been working in Camden since 1976, is the largest emergency food provider in Camden and serves 375 meals a day in its dining room. Cathedral Kitchen addresses health issues by providing its clientele with healthier meals. They used to serve soda because it was provided cheap from the NJ food bank; however, they no longer do that. They also are using fresh ingredients to make meals healthier. They have an executive chef who really works to make the meals delicious so that clients will eat it. Its clientele encompasses the homeless, the at-risk homeless, and it also serves a fair number of the working poor. Cathedral Kitchen's clientele have identified issues such as a lack of affordable housing, job opportunities, job training opportunities, and affordable specialty healthcare services such as dental care. Cathedral Kitchen runs a free dental care clinic with volunteer dentists 2 days a week. Appointments are necessary and there is a waiting list. Also, because people were coming in from outside of Camden and taking advantage of the services, Cathedral Kitchen began to collect information on people seeking the dental services. The only thing they ask patients to pay for are dentures to ensure that they are used. Since Cathedral Kitchen has a close relationship with a denture manufacturer who only charges Cathedral Kitchen the cost of making the dentures, Cathedral Kitchen only has to charge the patients that amount which is about \$300, as opposed to the normal cost at a dentist of \$5,000. They allow patients to set up payment plans, but before they order the dentures, everything must be paid (Interview, 2013).

Camden Area Health Education Center, Inc (AHEC) (<http://www.camden-ahec.org>)

This organization runs a mobile health van in mostly non-residential areas to target homeless populations. They provide basic health services like health screenings, flu shots, and STI screenings, and sponsor a farmer's market. They offer a needle exchange to provide clients with clean needles as a preventative measure to reduce the spread of HIV. Through a key partnership with Kennedy, the organization supports a chronic disease self-management program and peer education.

Camden County Habitat for Humanity (<http://habitatcamden.org>)

Camden County Habitat for Humanity promotes community revitalization increasing opportunities for home ownership.

Center for Family Services (<http://www.centerffs.org/>)

Cooper works with CFS on the backpack program to give children school supplies and backpacks (NJ DCA, 2012). Through extensive collaboration efforts, CFS provides in-home counseling, education, and medical services with a focus on building strong family and community connections.

Cooper Lanning Civic Association

Cooper Lanning runs after school programs for youth (6-14 years.) They work with local law enforcement through a Community Town Watch and additionally provide opportunities for community members and college students to volunteer in community service and building projects.

Faith Tabernacle Church (<http://www.faithtabernacleclg.org/>)

Community services provided by this ministry include monthly food and clothes outreach as well as weekly addiction counseling.

Greater Camden Partnership

The GCP works to bring together actors from the public, non-profit and private sectors to create and implement sustainable and socially responsible revitalization projects in Camden.

Lanning Square West Residents in Action

Lanning Square West Residents in Action banded together to help push drugs out of their neighborhood. Local groups have also taken measures to improve the appearance of these neighborhoods and protect their natural assets. For instance, the Camden Shade Tree Advisory Board, in conjunction with the NJ Tree Foundation, Cooper Lanning Civic Association, and residents of the 300 block of Royden Street, planted 21 trees in Lanning Square in 2011.

The Neighborhood Center (<http://www.ncicamden.org>)

The Neighborhood Center is centered around childcare, child development activities and after school programs. Additionally, there is a strong focus on its “Community and Production Garden”, in which residents learn about vegetable cultivation. The produce grown goes toward the soup kitchen operations and families who participate in the program.

Neighborhood Housing Services (<http://www.nhscamden.org/NHSC/Home.html>)

NHS is a housing counseling agency that provides homebuyer education and credit-counseling to individuals pursuing homeownership.

Puerto Rican Unity for Progress (<http://www.prupnj.org/>)

PRUP runs case management programs aimed at improving access to economic and social opportunities for low income people, especially in the Hispanic communities. These programs cover the areas of employment, education & training, housing, entitlements, and legal assistance. Additionally, PRUP has a breast cancer awareness and prevention services, assisting women without insurance to receive free mammograms.

Seeds of Hope Ministries (<http://www.seedsofhopeministries.org>)

Seeds of Hope Ministries is a faith-based organization that oversees the activities of three services that target specific at-risk populations in Camden. These services include South Jersey Aftercare, offering prisoner reentry services, My Father's Hands, a group caring for Camden's homeless population, and She Has a Name, which provides female-centered support for the ill effects of prostitution and drug abuse. Seeds of Hope programs are primarily administered through a team of local volunteers, and supported through charitable donations. The main center is located just south of Bergen Square but has a wide reach in providing services.

UrbanPromise (<http://www.urbanpromiseusa.org>)

UrbanPromise was launched 25 years ago as a youth ministry by religious organizations in nearby Moorsetown who were dedicated to helping youth in Camden. It started as a summer program, grew into an afterschool program, and then evolved into a kindergarten through 12th grade school with a 4 million dollar budget. The mission of Urban Promise is to “equip Camden children and young adults with the skills necessary for academic achievement, life management, spiritual growth, and leadership” (<http://www.urbanpromiseusa.org/mission>). UrbanPromise launched the Wellness Center, a new program to address healthcare in Camden, this past Fall to address the health disparities and impact of growing up with violence. The wellness center is still working to craft itself but it will include a combination of physical and behavioral health services and will also focus on nutrition and physical activity. Further, it will have its services be trauma informed. The Wellness program has taught four grades of health classes, which focus on empowering healthy relationships and educating youth about birth control. The Wellness Center has also had a volunteer counselor come in to counsel a student and wants to expand those efforts. They are working on possibly partnering with Genesis Counseling to provide mental health services to students in UrbanPromise’s high school. The Wellness Center is in the process of developing a program for this summer that addresses healthcare education for youth. The summer program will focus on altering behavior to adopt more healthy habits. It will include a cooking course and non-competitive physical activity such as dance and yoga. They are making their physical activity non-competitive as a way of getting rid of the stress of competition and as a way getting everyone moving. This is based on the Catch Program from Texas (Interview, UrbanPromise, 2013; Mast, 2013 Jan 12).

Volunteers of America, Delaware Valley (<http://www.voadv.org>)

The Addiction Treatment Program provides long and short term treatment to men suffering from substance abuse. There is also an outpatient program that provides additional support in a group setting. Each patient is monitored by a case manager who coordinates the multiple layers of care, including treatment for substance abuse, mental health, and/or other co-occurring disorders as well as health education and vocational training. The center is located in Bergen Square.

Aletha R. Wright “Vision of Hope” Center

The Aletha R. Wright “Vision of Hope” Center is a transitional living program for homeless men, located in the southwest part of Bergen Square by the commercial shipping district. Its mission is similar to the women’s shelter, providing job training, counseling, and housing assistance to the program participants.

Anna M. Sample House Complex

The Anna M. Sample House is a transitional housing program for women and families who are homeless or facing another type of emergency. It provides shelter and supervision along with case management and programs that impart skills and knowledge to people. This referral-based program integrates workforce development with counseling to manage behavioral health outcomes. The program has a collaborative relationship with Lourdes and Cooper hospitals to provide physicals, health screenings, and other medical care. The center is located in the western half of Lanning Square.

Works Cited

- Bautista, Jessica. 2012. "Camden Task Force Praises 'Eds and Meds' Revitalization Efforts in Last Decade." *South Jersey Times*. October 5. http://www.nj.com/gloucester-county/index.ssf/2012/10/camden_task_force_praises_ed.html.
- "Bergen Square Neighborhood Redevelopment Plan." 2005. Publication. N.p.: City of Camden. February 10. <http://www.camconnect.org/datalogue/BergenSquareRedevelopmentPlan.pdf>.
- Bergmann, Sue. 2012. Vice President, Center for Family Services. Phone Interview. December.
- Brubaker, Harold. 2012. "Three Health-care Projects in Region Awarded Almost \$10 Million." *Philadelphia Inquirer*. May 9. http://articles.philly.com/2012-05-10/business/31642286_1_healthcare-providers-health-care-affordable-care-act.
- Bryant, Mark. 2012. President and CEO, CAMcare. Phone Interview. December.
- Bryant, Mark and Wallace, James. 2010. "Transition Report on Family Wellness." January 27. http://www.camconnect.org/datalogue/tran_wellness.pdf
- CamConnect. Web. <http://www.camconnect.org/>.
- Camden Coalition of Healthcare Providers, CamConnect. "Inpatient and Emergency Room Visits in Camden, NJ (Jan 2002-June 2008)." <http://www.camdenhealth.org/wp-content/uploads/2011/01/Inpatient-and-ER-Visits.pdf>
- Camden Division of Planning and Zoning. 2008. "Lanning Square: A Study to Determine the Need for Redevelopment." City of Camden. May. <http://www.camconnect.org/datalogue/Lanning%20Square%20Redevelopment%20Study.pdf>.
- Center for Neighborhood Services. 2012. "Promise Neighborhood." <http://www.centerffs.org/promise-neighborhood/welcome>.
- Chavis, Martha. 2012. Program Coordinator, Camden Area Health Education Center, Inc. (AHEC). Phone Interview. December.
- Chiaromonte, Perry. 2012. "Gritty N.J. City of Camden to Scrap Police Department amid Budget Woes." *Fox News*. August 26. <http://www.foxnews.com/politics/2012/08/24/camden-nj-to-reboot-police-department-by-new-year/>.
- Connors, Rosemary and Stamm, Dan. 2013. "Copper Thefts Cause Gas Leak in Community." *NBC10 Philadelphia*. January 8. <http://www.nbcphiladelphia.com/news/local/Camden-Copper-Thefts-Gas-Leaks-185965412.html>.
- Cooper Health System. 2012. "Housing and Economic Development Tour of the Cooper Plaza Neighborhood." January. http://www.cnjg.org/s_cnjg/bin.asp?CID=19478&DID=54212&DOC=FILE.PDF.

Courier Post Online. "Camden Homicide Map." <http://www.courierpostonline.com/section/CAMMAP/Camden-Homicide-Map>.

Courier Post Online. 2012. "Google Map of 2011-12 Camden Homicides." December 18. <https://maps.google.com/maps/ms?ie=UTF8&t=m&oe=UTF8&msa=0&msid=209498630757708657041.0004b396f64199d766548>

Gambardello, Joseph. 2013. "Officials Charge 36 in Connection with Camden Heroin Ring." *Philadelphia Enquirer*. January 11. http://www.philly.com/philly/news/20130111_Officials_charge_36_in_connection_with_Camden_heroin_ring.html

Gawande, Atul. 2011. "The Hot Spotters." *The New Yorker*. January 24. http://www.newyorker.com/reporting/2011/01/24/110124fa_fact_gawande.

Hernandez Sherwood, Christina. 2012. "Camden Works to Keep Diabetics, Others out of the Hospital." *Philadelphia Inquirer*. June 12. http://articles.philly.com/2012-06-12/news/32175653_1_diabetes-specialist-american-diabetes-association-research-medicaid.

Lake, Robert, Kathe Newman, Richard Nisa, Bradley Wilson, and Philip Ashton. 2007. *Civic Engagement in Camden's Revitalization*. Report to MDRC for the Ford Foundation.

Mason Gross, Rutgers Film Bureau. 2012. *Generation at Risk: Joining Forces to Fight Childhood Obesity*. <http://www.masongross.rutgers.edu/content/generation-risk-joining-forces-fight-childhood-obesity>.

Mast, George. 2013. "Camden's Overall Crime Dips." *Courier Post Online*. January 8. <http://www.courierpostonline.com/article/20130109/NEWS01/301090021/Camden-s-overall-crime-dips-fewer-burglaries-arsons-cited>

Mast, George. 2013. "Urban Promise: Moorestown Has Long Supported the Betterment of Camden." January 12. *Courier Post Online*. <http://www.courierpostonline.com/article/20130112/NEWS01/301120017/Urban-promise-Moorestown-has-long-supported-betterment-Camden>

Master Plan – Division of Planning and Zoning, City of Camden - Adopted on March 12, 2002
http://ci.camden.nj.us/economic/masterplan/MasterPlan_1t.pdf

Murray, Lucas. 2012. Hope is Growing. *Courier-Post*. September 17. <http://camdenchildrensgarden.files.wordpress.com/2011/08/courier-post-hope-growing-in-camden-garden-tour-9-17-12-hi-res-pub.pdf>

NJ Department of Community Affairs (DCA). NRTCP Clearinghouse. <http://www.state.nj.us/dca/divisions/dhcr/offices/docs/nrtc/clearinghouse.pdf>

NJ Department of Environmental Protection, Division of Air Quality. 2005. Camden Waterfront South Air Toxics Pilot Project. <http://www.nj.gov/dep/ej/camden/docs/finalreport.pdf>.

Osborne, James. 2010. "Camden Makes Deal With Lanning Square Residents." *Philadelphia Inquirer*. May 28. http://articles.philly.com/2010-05-28/news/24961830_1_redevelopment-zone-residents-eminent-domain

Project H.O.P.E.. Interview. 2012.

Ratcliffe, Jerry. 2006. Camden Crime Hotspots map. January-June 2006.

Riviera, Flora. 2012. Director, Mi Casita Daycare Center. Phone Interview.

Shelly, Kevin. 2013a. "Initiatives Support Healing Process to Help Camden Cope." *Courier Post Online* January 12. <http://www.courierpostonline.com/article/20130113/NEWS01/301130023/Initiatives-support-healing-process-help-Camden-cope>

Shelly, Kevin. 2013b. "Groups Make Case for Trauma Summit in Camden." *Courier PostOnline*. January 16.

Simon, Darran. "Camden, NJ on Track for Record Homicides." *PoliceOne*. PoliceOne. September 30. <http://www.policeone.com/patrol-issues/articles/5998287-Camden-NJ-on-track-for-record-homicides/>.

United States Census 2000. *American Factfinder*. 2000. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

United States Census 2010. *American Factfinder*. 2010. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

Vargas, Claudia. 2012. "Camden Board to Consider Renaissance School Proposals." *Philadelphia Inquirer*. September 25. http://articles.philly.com/2012-09-26/news/34083478_1_kipp-cooper-norcross-academy-charter-school-renaissance-schools.

Vargas, Claudia. 2012. "Surge of Prostitutes Has Camden Looking for Answers." *Philadelphia Inquirer*. October 12. http://articles.philly.com/2012-10-14/news/34432089_1_prostitution-mi-casita-drug-free-school-zones.

Vargas, Claudia. 2012. "What Will Effect of Cooper Medical School Be on Neighborhood?" *Philadelphia Inquirer*. August 4. http://articles.philly.com/2012-08-04/news/33020716_1_cooper-medical-school-camden-rebirth-cooper-plaza.

Vargas, Claudia. 2012. "In a Reversal, Camden School Board Approves KIPP Cooper Norcross Academy Renaissance School." *Philadelphia Inquirer*. November 30. http://articles.philly.com/2012-11-30/news/35437165_1_benjamin-franklin-academy-kipp-cooper-norcross-academy-norcross-foundation.

Trenton

Ewing and Carroll, Hanover Academy, North 25, Battle Monument
Stuyvesant/Prospect, Central West

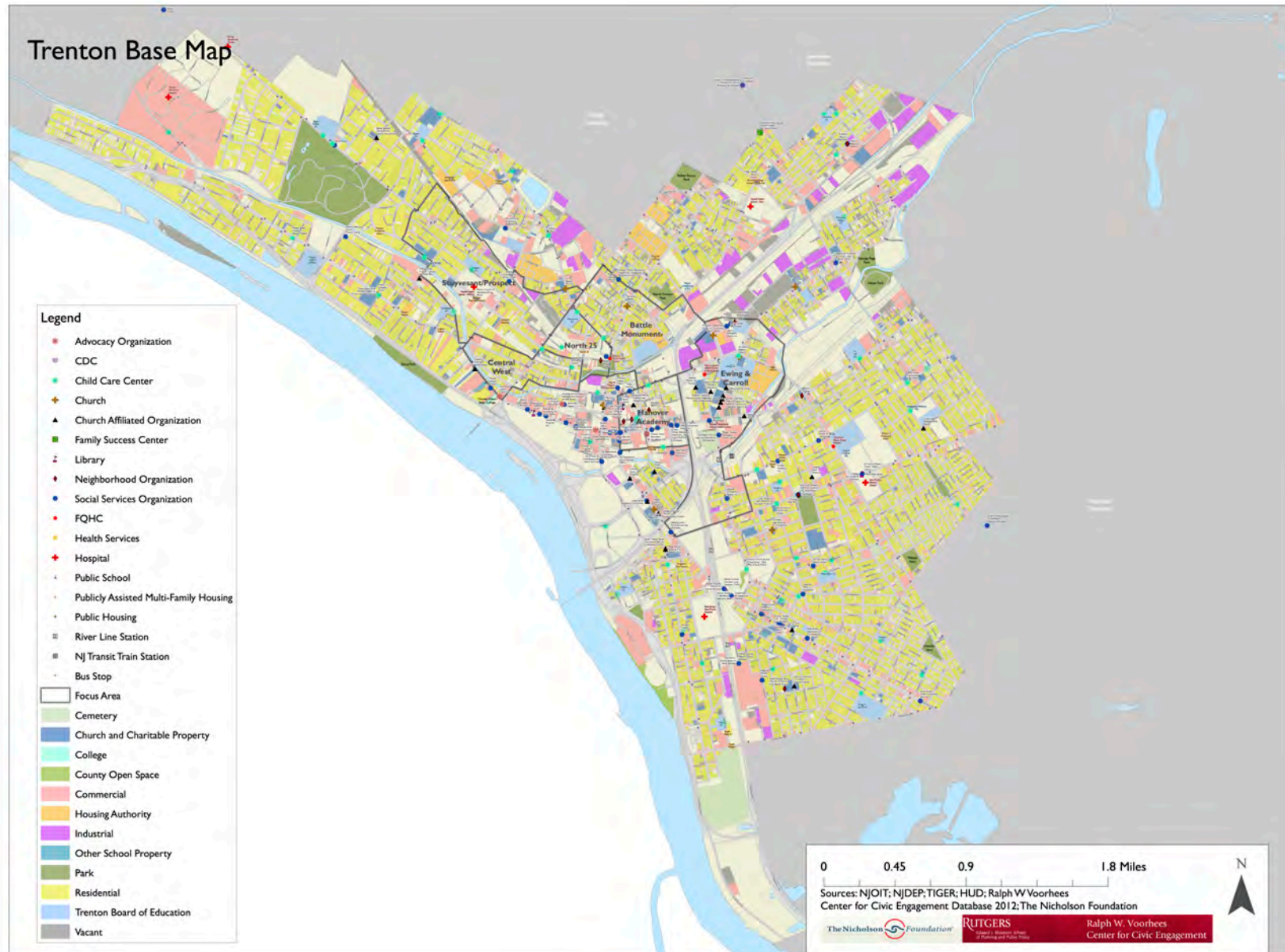
Mary Gaiennie
Theadora Paulucci
Margaret Ricke

with
Ronit Anspach
Pritpal Bamhrah
Anthony Capece
Laura Chamberlain
Mirabel Chen
Katie Davis
Michael D'Orazio
Ryan Good
Gregory Hughes
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2013

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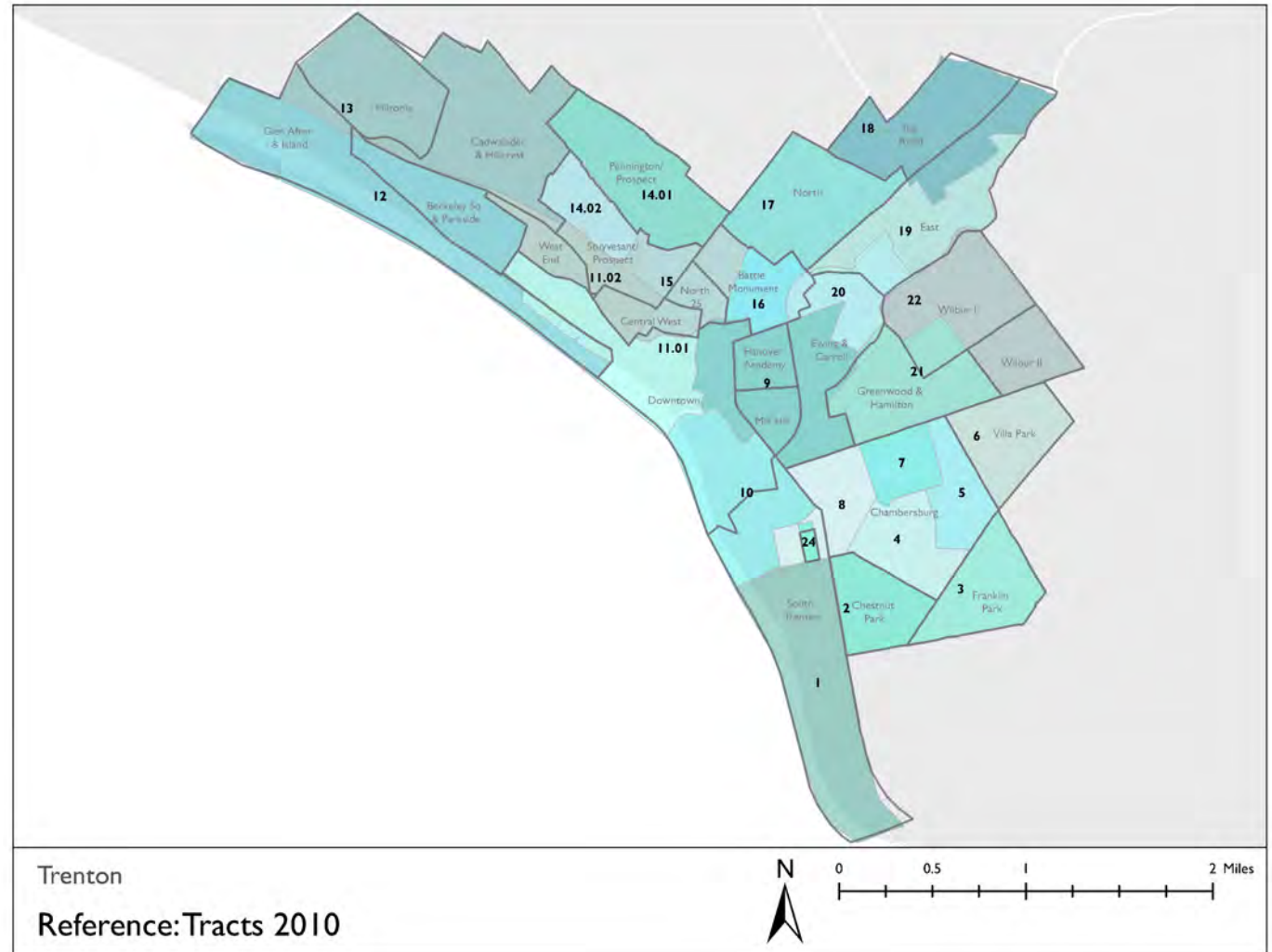


Neighborhoods

Trenton's focus area includes a ring of six neighborhoods surrounding the central business district: Hanover Academy, Ewing & Carroll, Battle Monument, North 25, Central West, and Stuyvesant/Prospect.¹ Census tracts 14.02, 15 and 16 are entirely within the focus area. Tract 9, makes up Hanover Academy, Ewing & Carroll, as well as part of the central business district. Census tract 20 comprises about a third of the Ewing & Carroll neighborhood. Almost none of tract 11.01 is in the focus area but it originally was part of the 2000 census tract 11, which also encompassed current tract 11.02. To allow comparisons of statistics between census years 2000 and 2010 it has been included in the 2010 aggregated statistics.

Ewing & Carroll

Ewing and Carroll is a small neighborhood that covers about six blocks. It is located between US Route 1 and the New Jersey Transit Northeast Corridor line. The intersection of these two transportation facilities cut off the small, primarily residential section of south Ewing & Carroll from the rest of this neighborhood (NJOIT, U.S. Census Bureau, 2010). The neighborhood has more commercial and industrial properties in comparison to other nearby neighborhoods and it includes many vacant and



¹ We use the 2004 neighborhood boundaries because they are more complete.

state-owned parcels. It is home to some large social service, educational, and government buildings interspersed with remaining residential blocks. Two housing projects are located here, as well as several schools. There is little open space with the exception of one cemetery. A large housing project referred to as the Miller Homes, located in the section of Ewing & Carroll in census tract 20, was recently demolished and there are plans to build a series of low-rise apartments in its place (Rosenau, 2012).

Hanover Academy

Hanover Academy receives its name from the neighborhood's Hanover Academy Historic District. Trenton City Planning's Downtown Master Plan (2008) recognized the historic merits of Hanover Academy's townhouses. Given Hanover Academy's proximity to downtown, it is near to many business and government entities. Hanover Academy is primarily zoned for commercial land use, with few areas set aside for residential use. Several large parking lots reinforce the commercial oriented nature of this neighborhood. A number of parcels are owned by the state (NJ Office of Information Technology). The downtown plan suggests infill housing and business development to promote urban growth. Hanover Academy is located within the same census tract as the Ewing & Carroll and Mill Hill neighborhoods.

North 25

North 25, one of the smaller neighborhoods in our focus area, is located several blocks from downtown Trenton and much of the land use is commercial and government. It is located between the other focus neighborhoods. Route 31 borders it to the North. The neighborhood's residential offerings include older town homes and low-rise apartment complexes. There is also a senior center, the Trenton-Reading Senior Center, located on Ringold Street. Though minimal, North 25 hosts a small amount of open space along the D&R Canal Route. North 25 is home to two prominent community organizations, Isles and Henry J. Austin Health Center. Isles is a community organization that has been in operation for over three decades and provides training and self-help assistance for individuals living in social, financial, and environmental hardship. Henry J. Austin is a Federally Qualified Health Center that has been in operation for over four decades, and primarily provides care for individuals who have minimal health care resources.

Battle Monument

Battle Monument is a five block neighborhood situated in north-central Trenton between North 25 and Ewing Carroll. The neighborhood gets its name because it was the primary location of the Battle of Trenton in 1776. It is one of the more residential neighborhoods in our focus area. Battle monument has been the focus of redevelopment efforts for many years, following a long history of disregard for its dilapidated historic buildings. According to a *New York Times* article, the city of Trenton has invested a great deal of money for Battle Monument revitalization projects beginning in the mid to late 1990s (Garbarine, 1997). Much of that investment has gone toward strengthening its residential assets and infill of its vacant parcels. This neighborhood contains three important engaged organizations: the Samaritan Baptist church, the Trenton Housing Authority, and the Greater Trenton Behavioral Healthcare division of Adolescent Rehab Services. Henry J. Austin Health Center is a short drive from Battle Monument, but otherwise accessible healthcare for mobility-challenged residents may be problematic, as Route 1 and some industrial sites cut this neighborhood off from the services in Ewing and Carroll.

Stuyvesant/Prospect

Stuyvesant/Prospect is a large neighborhood in western Trenton that extends from downtown northwest. To the south is the D&R state canal trail, while to the north are three additional parks; West Ward Oakland Street, and Laurel Place. Within Stuyvesant/Prospect are three separate census tracts: 14.02, 15, and 11. The Stuyvesant/Prospect area is primarily residential with the Capital Health System infrastructure in the neighborhood's core. Within the last four years there has been significant residential development on what was the old Magic Marker site on Dunham and Louise streets off of Calhoun Street, which the EPA named a Superfund site (Magic Marker Site Fact Sheet).

Central West

Central West is a very small neighborhood immediately adjacent to downtown. It's bordered to the south by the D&R canal and West State Street. Parts of it are in tracts 11.02 and 15.

Table 1. Summary Characteristics of Focus Neighborhoods

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population	16,864	100%	Families (2010)	3,644	100%
			Female-headed with Children	1,493	41%
Age (2010)			Economic (2007-2011)ⁱ		
Under 5 years	1,276	8%	Median Household Income	\$14,267 - 39,598	
5-19 years	3,516	21%	Persons below Poverty	5,065	30%
20-64 years	10,380	62%	Total Civilian Labor Force	8,010	100%
65-74 years	1,007	6%	Employed	6,400	80%
75+ years	685	4%	Unemployed	1,610	20%
Race (2010)			Housing (2010)		
White	1,840	11%	Total Units	8,144	100%
Black	13,269	79%	Vacant Housing Units	1,408	17%
Asian	140	1%	Owner Occupied	1,991	30%
Hispanic	2,544	15%	Renter Occupied	4,745	70%
Household (2010)	6,736	100%			
Multigenerational	433	6%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Population

The population of the Trenton focus neighborhoods was 16,864 in 2010, having decreased by more than 2,600 residents (13%) during the 2000s. Populations declines were largest in tracts 11 (11.01 and 11.02), 14.02, and 20. Tracts 11 and 14.02 include the West End and portions of Central West, Downtown, and Stuyvesant Prospect; these two tracts lost almost 1,900 residents, nearly 20% of their 2000 population. Tract 20 is divided between Ewing & Carroll and East Trenton and lost 19% of its population between 2000-2010 (U.S. Census Bureau 2000, 2010).

Table 2: Total Population of Focus Neighborhood, 2000 & 2010

Tract	2000	2010	Percent Change
9	4,328	3,990	-7.8%
11 (11.01 & 11.02)	6,754	5,574	-17.5%
14.02	2,702	1,995	-26.2%
15	2,860	2,798	-2.2%
16	1,343	1,302	-3.1%
20	1,493	1,205	-19.3%
Neighborhoods	19,480	16,864	-13.4%
Trenton	85,403	84,913	-0.6%

(US Census 2000, 2010)

Nearly four out of five residents across the focus neighborhoods identified as black in 2010, a far greater percentage than municipality-wide (52%.) Whites comprised 11% of the area's residents (compared to 27% citywide,) while only 15% of the neighborhoods' residents identified as Hispanic that year (compared to 34% across Trenton.) The racial/ethnic composition of Tract 9 (including the neighborhoods of Mill Hill, Hanover Academy, Ewing & Carroll, and east Downtown) was more reflective of the wider city, whereas in the 2010 tracts 11.02, 14.02 and 15, blacks comprised between 88% and 93% of the residential population (U.S. Census Bureau, 2010).

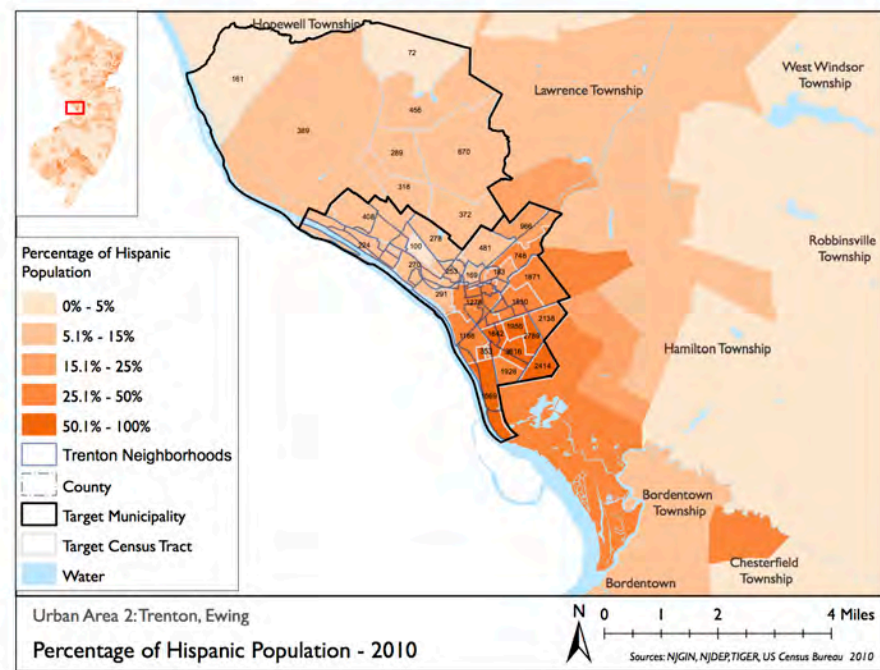
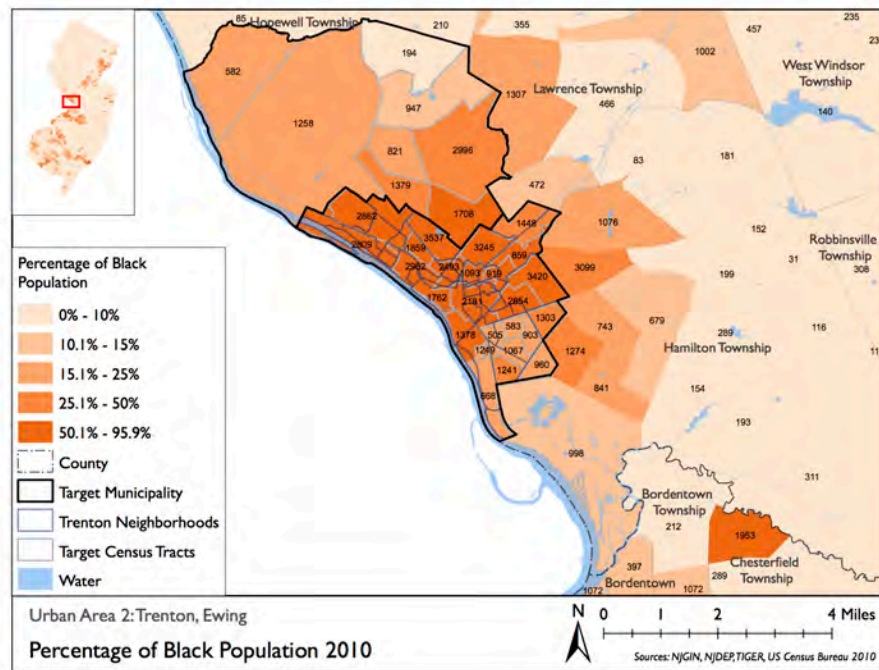


Table 3: Racial & Ethnic Representation in Focus Neighborhoods 2010

Tract	White		Black		Hispanic	
	Count	Percent	Count	Percent	Count	Percent
9	1,024	25.7%	2,181	54.7%	1,278	32.0%
11.01	235	10.7%	1,762	80.4%	291	13.3%
11.02	199	5.9%	2,962	87.6%	270	8.0%
14.02	51	2.6%	1,859	93.2%	100	5.0%
15	96	3.4%	2,493	89.1%	253	9.0%
16	74	5.7%	1,093	83.9%	169	13.0%
20	161	13.4%	919	76.3%	183	15.2%
Neighborhoods	1,840	10.9%	13,269	78.7%	2,544	15.1%
Trenton	22,549	26.6%	44,160	52.0%	28,621	33.7%

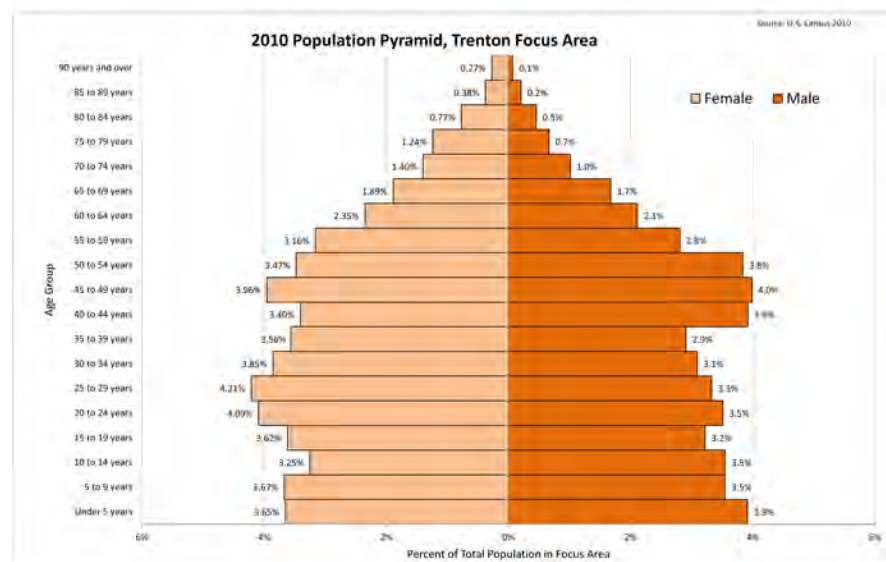
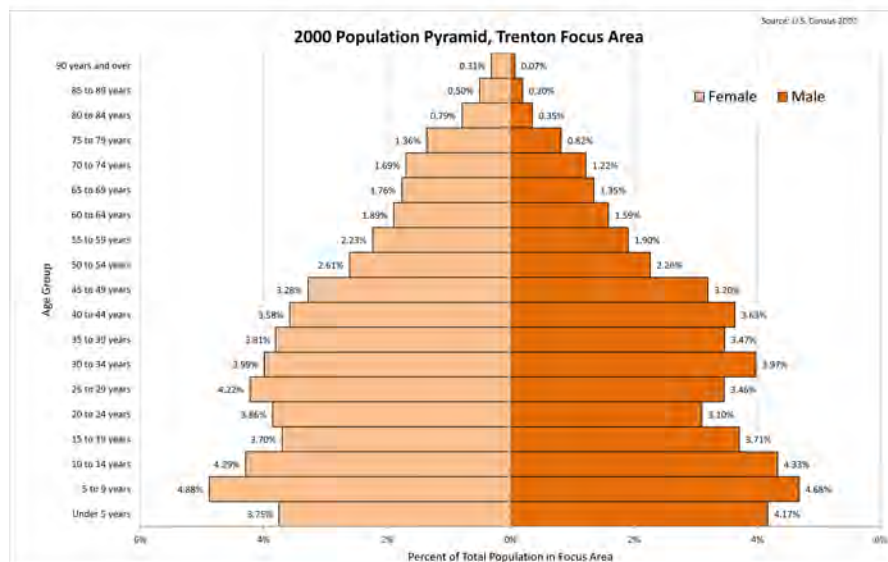
(US Census 2000, 2010)

Table 4: Changes to Neighborhood's Racial & Ethnic Composition, 2000 & 2010

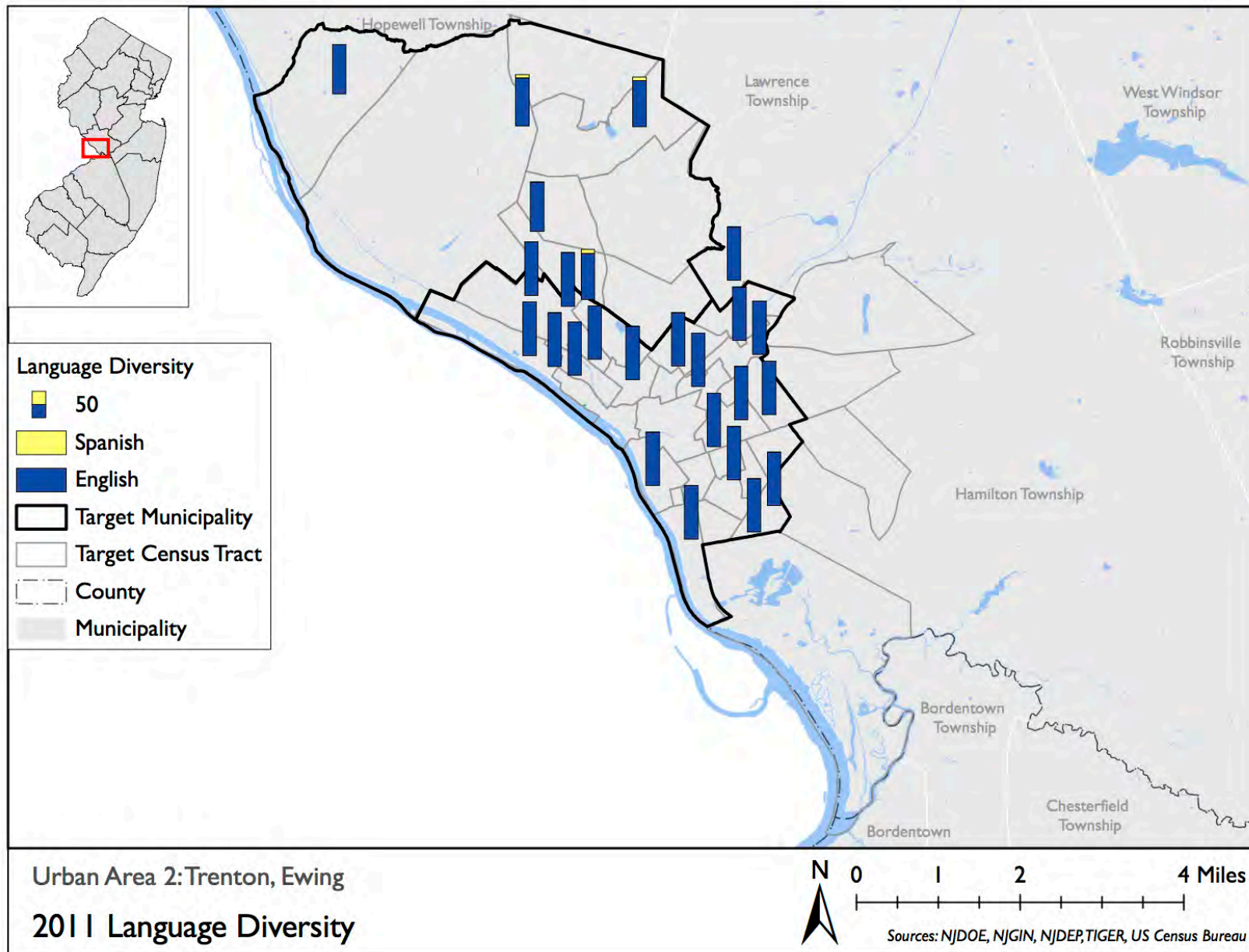
Tract	White		Black		Hispanic	
	2000	2010	2000	2010	2000	2010
9	27.3%	25.7%	48.2%	54.7%	38.4%	32.0%
11 (11.01 & 11.02)	7.8%	7.8%	83.5%	84.8%	9.4%	10.1%
14.02	2.6%	2.6%	92.7%	93.2%	3.2%	5.0%
15	2.4%	3.4%	92.0%	89.1%	5.3%	9.0%
16	6.9%	5.7%	82.9%	83.9%	12.1%	13.0%
20	7.1%	13.4%	88.1%	76.3%	6.6%	15.2%
Neighborhoods	10.5%	10.9%	78.5%	78.7%	14.4%	15.1%
Trenton	32.6%	26.6%	52.1%	52.0%	21.5%	33.7%

(US Census 2000, 2010)

The population in 2000 included many younger people and in 2010, has many more people who fall into the middle age brackets. Presumably, this may drive health demand as people age, especially if they have lacked healthcare in their youth. Young main are noticeably absent more so than in 2000 (U.S. Bureau of the Census, 2000, 2010).

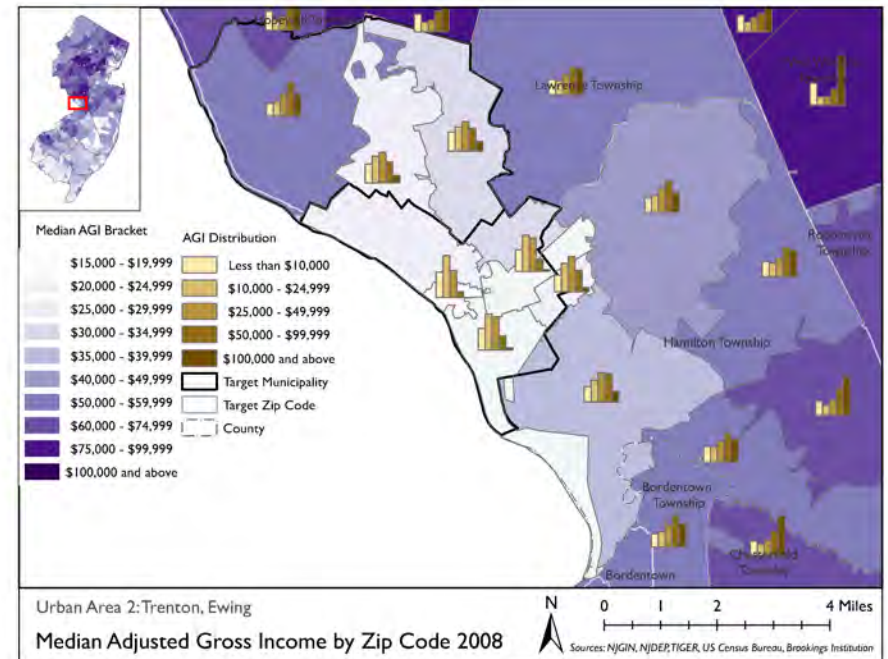
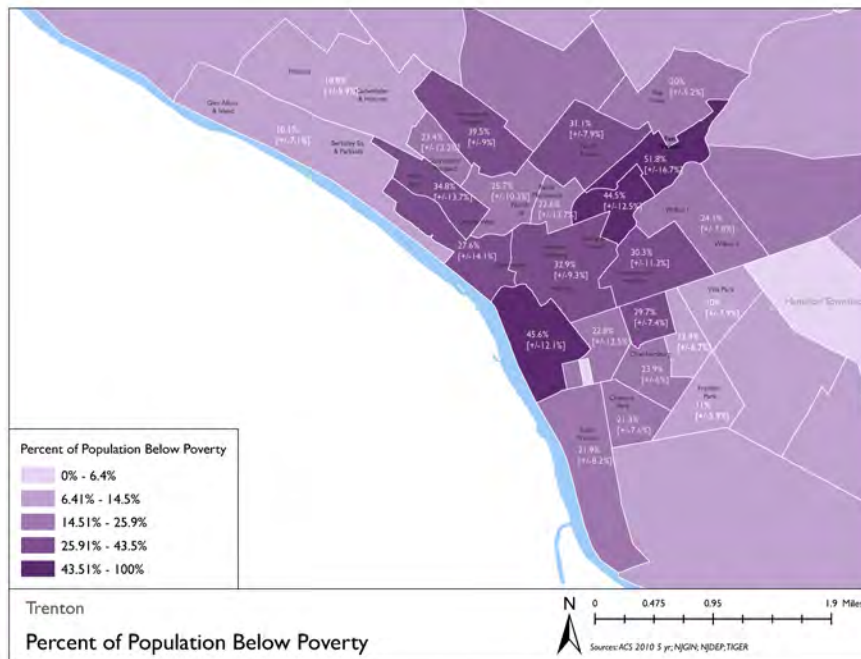


Of all of the study areas, these neighborhoods have the smallest amount of language diversity.



Income

The focus neighborhoods contain some of the highest poverty rates in Trenton. In census tract 20, containing the northeast section of Ewing & Carroll (and noted above for its large population loss during the 2000s), 45% of the population (+/-13%) had incomes below the poverty line in 2010 (ACS, 2010). Tracts 11.02 (West End, Central West, lower Stuyvesant Prospect) and 9 (including parts of Hanover Academy, Ewing & Carroll and the eastern Downtown) had similarly high rates of poverty, at 35% (+/- 14%) and 33% (+/-10%,) respectively. Census data from 2000 show median household incomes ranging from \$18,651 in Tract 20 (Ewing & Carroll) to \$33,650 in Tract 14.02 (Stuyvesant/Prospect). In the majority of tracts associated with the focus neighborhoods, median household incomes were well below the citywide figure of \$31,074.



Using the most recent IRS gross income tax data (2008), the distribution of incomes is positively skewed, with households concentrated in the lower income ranges and peaking in the income range of \$10,000-\$24,999. This is in stark contrast to the surrounding municipalities, where household incomes tend to fall into the higher brackets. Likely related to the high poverty rates found within the focus neighborhoods is the large presence of female-headed families. In 2010, two out of five (41%) families across the neighborhoods-associated census tracts were female-headed with children, well above the citywide figure of 32% (U.S. Census). In tracts 11.02 and 20 (noted above as having high rates of poverty,) 49% and 44% of families were female-headed, respectively.

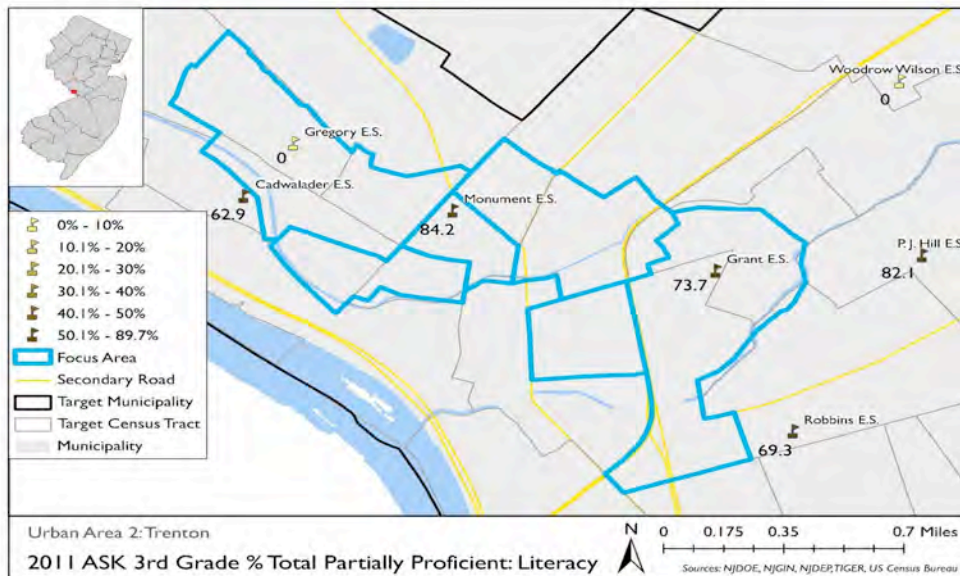
Education

There are three Pre-K through 8 elementary schools in our focus area. Much of the data is missing but we can see that they have among the highest rates of students who score partially proficient on the 3rd grade NJ Literacy exam. Out of New Jersey's major municipalities, Trenton ranks third for the highest number of students as being tested as partially proficient, coming in at 72.4%. The three elementary schools in our focus area are above Trenton's average, but much higher than the state average, which is 37%, and 53% across other urban areas. Currently, none of Trenton's elementary schools have a partially proficient literacy rate less than 50%.

Table 5: School Characteristics 2010-11

School	Grade Levels	Total School Population	% Partially Proficient 3rd Grade NJ Ask	First Language Spoken at Home	Students with Disabilities	Mobility	Limited Eng Prof	Student Suspensions
Grant*	Pre K-8	506	74%					
Gregory*	Pre K-8	379	88% (09/10)					
Monument*	Pre K-8	365	84%					

(NJ Department of Education, 2011) *Much of the data for these Trenton schools is missing or seems inaccurate.



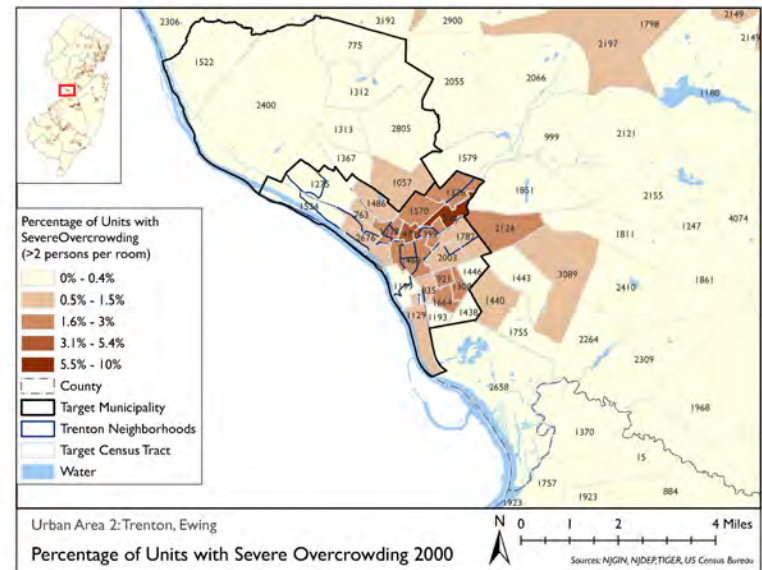
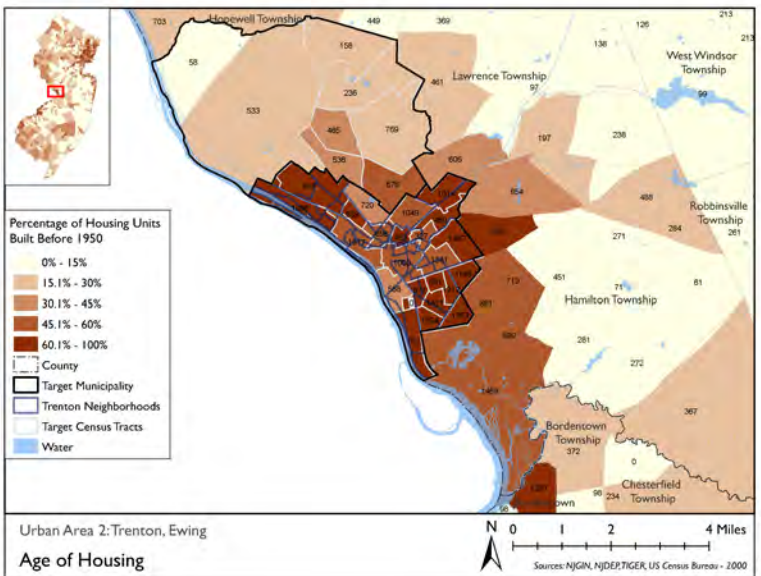
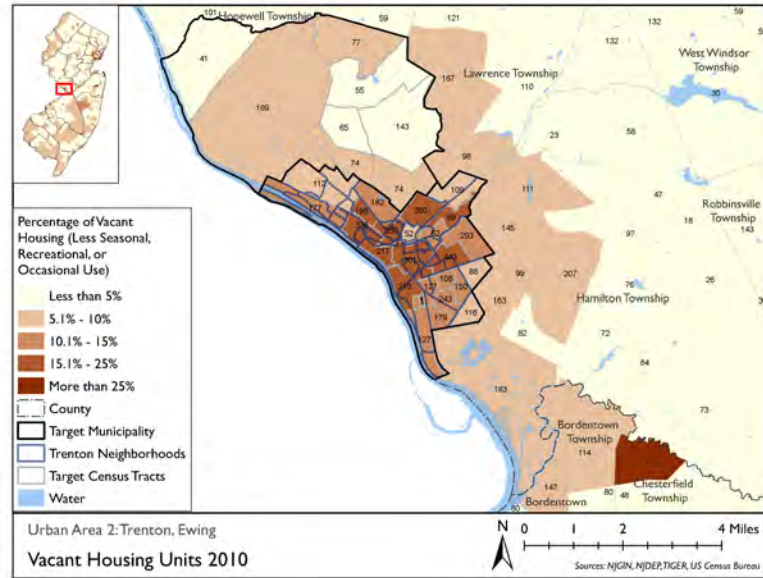
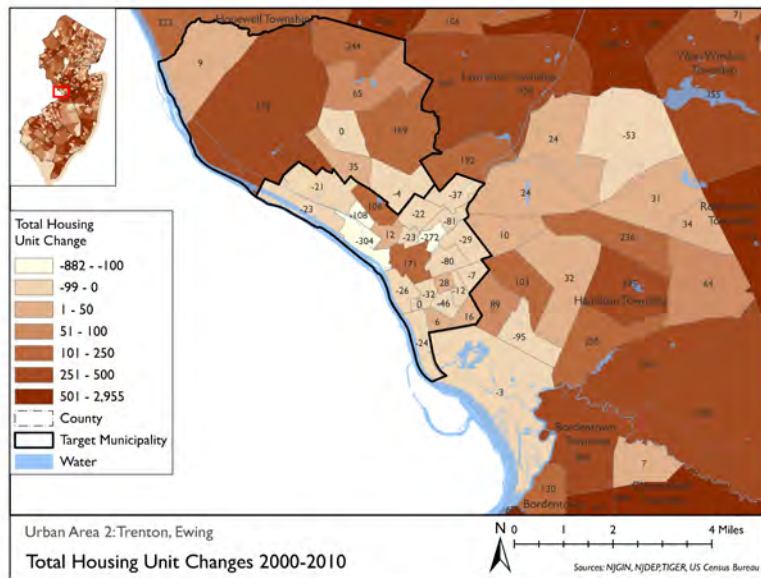
Housing

Between 2000 and 2010, the focus neighborhoods lost 6% of their housing stock (U.S. Census 2000, 2010). The greatest loss was in the northern portion of Ewing & Carroll, which lost 38% of its 2000 stock. In addition to these decreases in housing units, this area suffers from higher vacancy rates than elsewhere in the municipality. In 2010, 17% of housing units across the neighborhoods went vacant, compared to 13% citywide. The highest vacancy rates (19-23%) were found in the contiguous tracts 11.02, 14.02 and 15, associated with the neighborhoods northwest of Trenton's Downtown (West End, Central West, North 25, northwest Battle Monument, and Stuyvesant Prospect). Compared with the surrounding areas, the housing stock in the focus area is older and overcrowding is greater (U.S. Census, 2010).

Table 6: Housing Unit Changes in Focus Neighborhoods, 2000-2010

Tract	Housing Units		
	2000	2010	Percent Change
9	1,794	1966	9.6%
11 (11.01 & 11.02)	3,234	2931	-9.4%
14.02	959	851	-11.3%
15	1,343	1,354	0.8%
16	614	590	-3.9%
20	724	452	-37.6%
Neighborhoods	8,668	8,144	-6.0%
Trenton	33,843	33,035	-2.4%

(US Census 2000, 2010)



These neighborhoods also include four federally assisted and two public housing projects. The Camden Healthcare Coalition found that they had repeat users from one large building in North Camden. Healthcare institutions may develop relationships with tenant associations in these properties to facilitate preventative care and follow-up. The building condition of some based on the physical inspection scores suggests room for improvement but most scores are reasonably good.

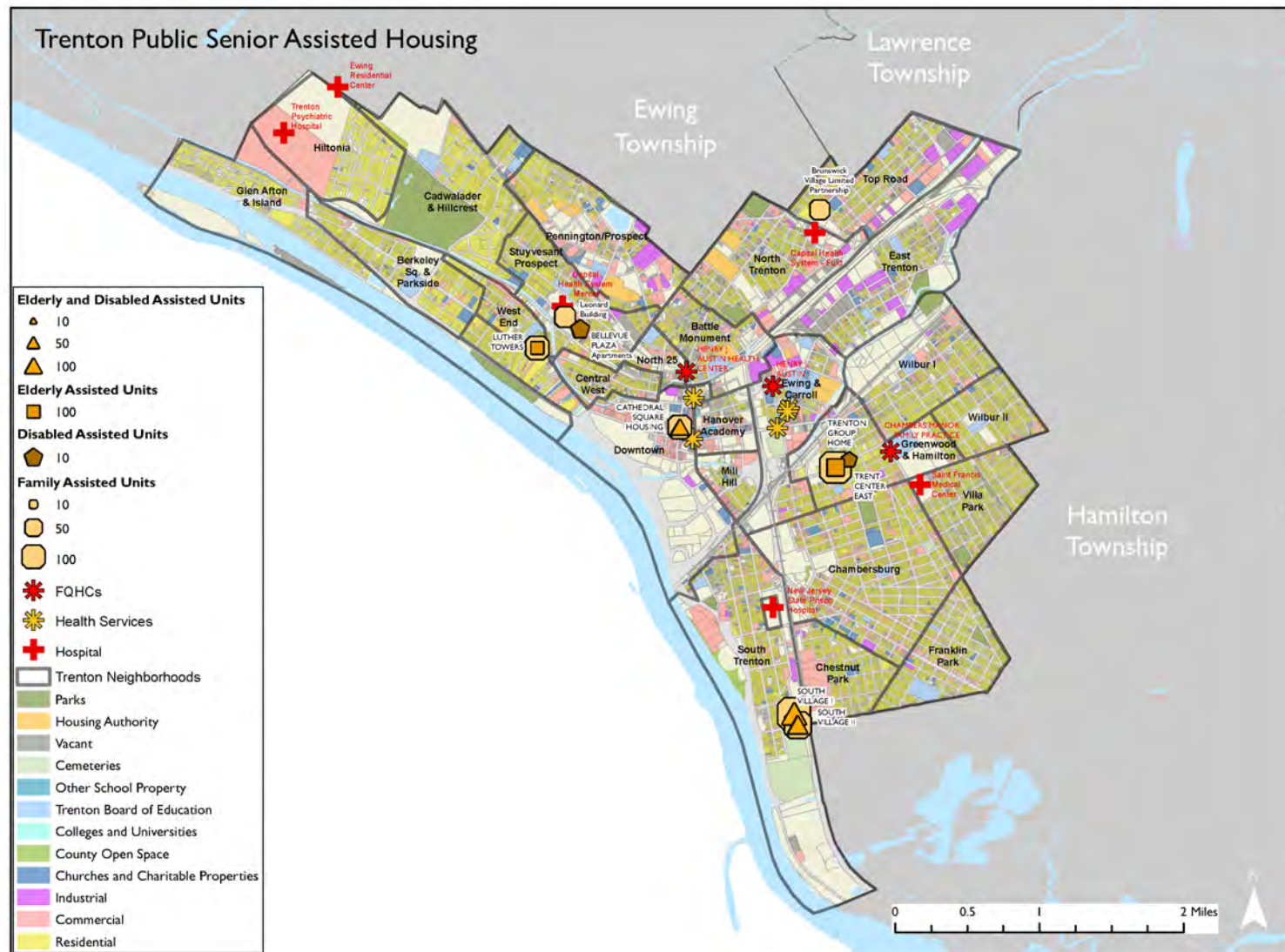


Table 7: Affordable Housing Characteristics in Focus Neighborhood, 2006-2011

Property Name	Publicly or Federally Assisted	Total Units	Total Assisted Units	Elderly Units	Disabled Units	Physical Inspection Scores					
						'06	'07	'08	'09	'10	'11
Architects Housing	Federally Assisted	123	123			70		71		83	
Bellevue Plaza Apartments	Federally Assisted	90	75			70			61	77	
Leonard Building	Federally Assisted	11	11		11		92				
Miller Homes	Public Housing	256								59	
North 25	Federally Assisted	233	233				61	73		90	
Prospect Village	Public Housing	120								65	

(US HUD, 2011, 2012, NJ Department of Community Affairs, 2010)

Crime

The New Jersey Municipal County Offense & Demographic data shows that nonviolent crime and domestic violence incidents have decreased in Trenton between 2009 and 2010. Nonviolent crime incidents per 1,000 have gone down from 33.3 to 31.2, and domestic violence incidents from 15.9 to 14.2 violent crime has increased minimally from 13.9 to 14.1 incidents per 1,000 people. In 2010, the mean of crimes per square mile in New Jersey in was 438.8, while Trenton stood at 513.5. While this is above the mean, Trenton stood underneath other major cities, including 5 of our other target municipalities save for East Orange. According to the New York Times, in 2011, the violent crime rate of Trenton was twice that of New York City per capita, and had a third of its police officers (New York Times, 2011). Trenton's police department has gone through some recent restructuring. As of early 2012, Trenton Mayor Tony Mack was forced to fire a third of his police force (New York Times, 2012). In very recent crime news, eight people were shot in Trenton as new years eve rolled into New Year's Day (Times of Trenton, 2013). Also of recent news in December 2012, Trenton's Police Director Ralph Rivera Junior is in the move to disband Trenton's street crime units, thereby shifting detectives to patrol units. Many community members fear that stripping the police force of these Tactical Anti-Crime units is not a safe move, as they are arranged and implemented specifically to go after criminals and guns (Times of Trenton, 2012).

Health

Health Issues

The residents of our focus communities struggle with many health issues. Some problems came out stronger than others in this research.

Homelessness

Interviewees suggested that homelessness was especially present in Ewing and Carroll because the Rescue Mission is there and they tend to take shelter in the empty buildings on Hanover Ave (Interview, 2012). There are many concerns that a subset of homeless residents uses a disproportionate share of resources. They cycle through jails and emergency rooms and make up much of the chronically homeless who interviewees suggest make up 20% of the homeless population. Many of the chronically homeless have substance abuse and mental illness problems. Organizations like The Mercer Alliance argue that supportive housing with a long term plan for permanent housing will help this population and reduce costs. But it takes resources to provide sufficient services such as job training and healthcare to ensure that this process moves forward successfully (Interview, 2012).

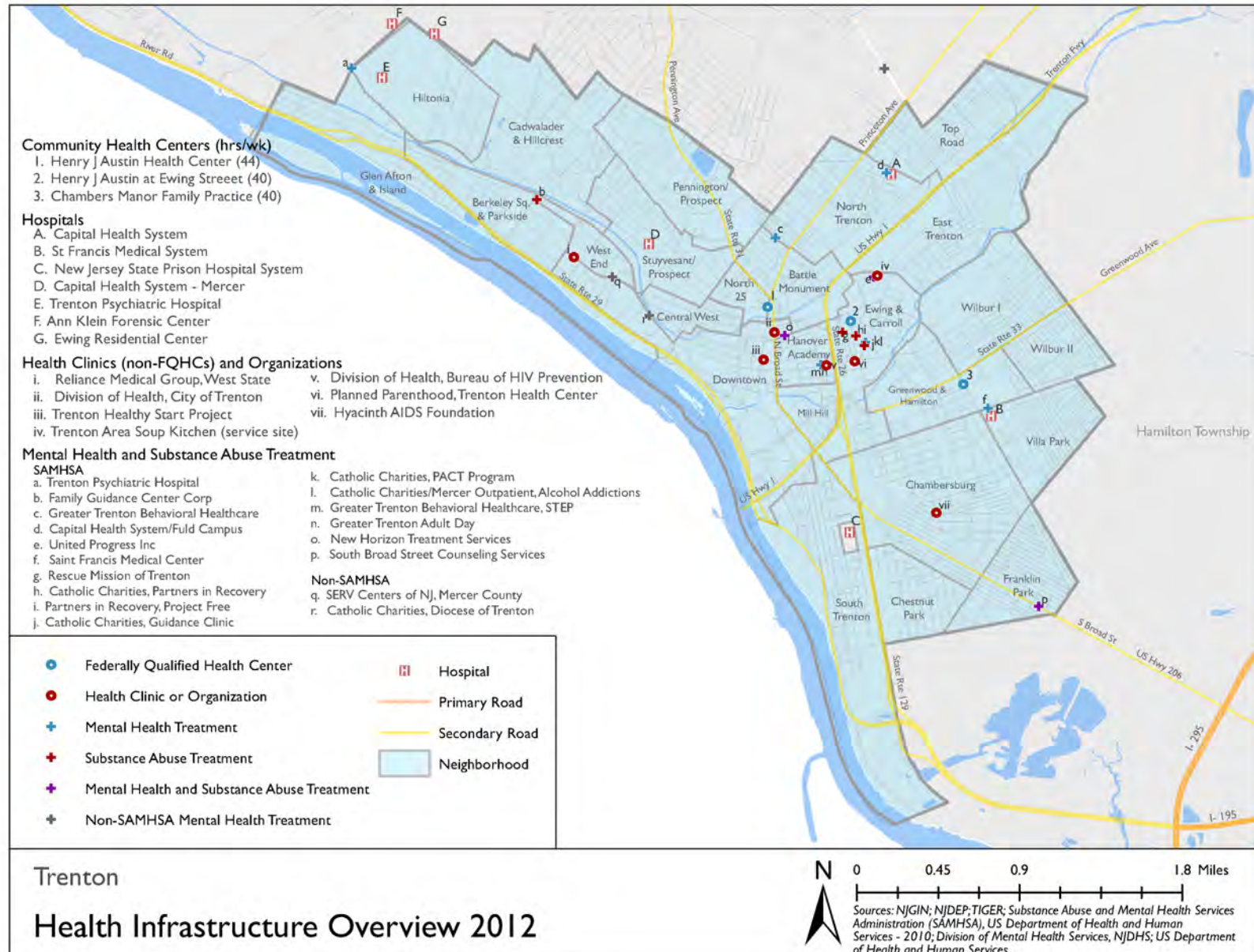
Disabilities

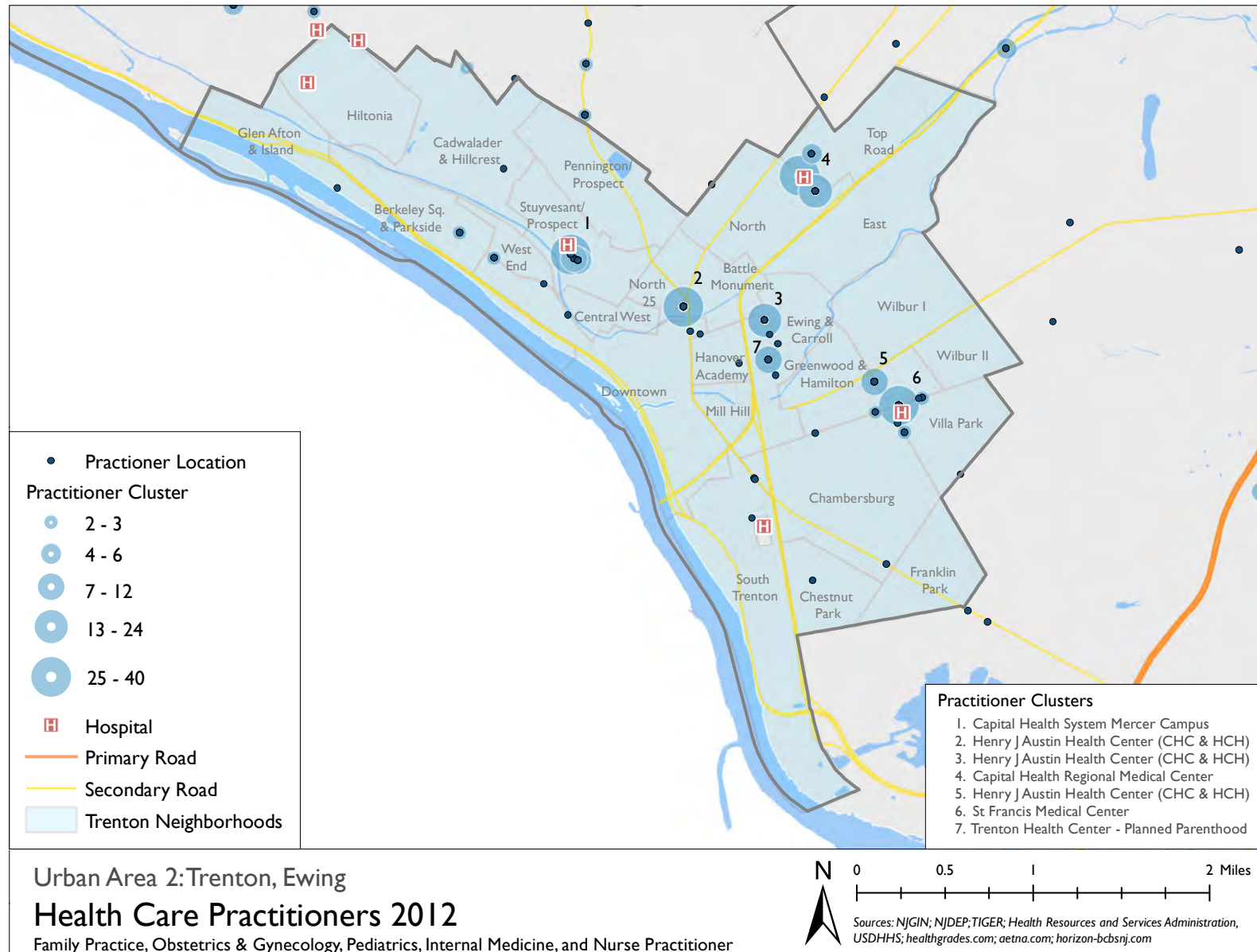
People with disabilities struggle especially with transportation and accessible housing. Project Freedom is developing housing in Trenton but people still struggle to access transportation especially off peak hours such as during the evening, at night and on weekends and holidays. This is rarely available and it's expensive. The Mercer County Office on Disability Services is working to develop a small pilot program to try to provide some transportation services for people with disabilities on weekends and holidays.

Childhood Diabetes

New Jersey Childhood Obesity Survey found that fifty percent of Trenton children are overweight or obese. Few eat fresh fruit and vegetables and generally children do not engage in outside activity (<http://www.njhealthykids.org/communities/trenton/>).

Healthcare Organization Infrastructure





Trenton has one of the better developed healthcare infrastructures in urban areas in the state. It is home to some high capacity individual medical institutions and community organizations but what really sets it apart are the collaborations that have produced actual healthcare improvements and cost reductions. Many of the community, health, and government institutions work together through the Trenton Health Team and or the Mercer County Health Partnership. The Trenton Health Team includes the major hospitals, FQHC, and the city of Trenton which work in partnership with communities to improve public health by working together while also reducing unnecessary costs. They published their own 2012 Community Report which suggests some major advancements with the very things that other communities are citing as major problems. They say they have reduced the time to appointments, they've helped patients work their way through the system, share data, and they collaboratively work to address the needs of "high" users. Complementing these extraordinary advances, they are in the midst of a community collaborative research process to understand community health needs and are doing so in partnership with PICO, a community organizing group. In one of their more interesting efforts, they are teaching community leaders how to be community trainers to address a variety of problems attacking diabetes, obesity, and high blood pressure (<http://www.trentonhealthteam.org/tht/>).

Interviewees were all very positive of the Trenton Health Team and the efforts that they have put forward. One organization mentioned that the THT's process of digitizing patient's records was a great stride, and that it made easier for different healthcare organizations to understand what could be going on with a specific patient. Overall, while these organizations work very hard and achieve great things, they have all stated that fixing something that is wrong is not merely enough, and that it is upkeep and maintenance of these solutions that is the most important support they could gain. Having objectives of outputs and dollar amounts as goals does not necessarily mean that a solution, service, or system is working. Organizations that have effective ideas and philosophies must be supported. Experimentation to find what works for people must be allowed to be carried on, because conditions and situations and people are constantly changing.

Henry J. Austin FQHC and Capital Health Systems Satellite

In our focus areas, the Henry J. Austin Federally Qualified Health Center (FQHC) has two locations. One is on Warren Street on the border between Battle Monument and North 25. They offer Saturday morning hours at this location and provide a wide array of health services including dentistry and podiatry and offer an on-site pharmacy. There's a second location at Ewing Street in Ewing and Carroll. This location is moving in December to a new space so that they can expand their services to include dentistry, pediatrics, and mental and behavioral health services (henryjastin.org). And Capital Health System operates a Satellite Emergency Department at Bellevue Avenue in Stuyvesant/Prospect (7 days a week, 7 am to 11pm). This site had been operating as an "acute care hospital" until November 2011, when the Capital Health Medical Center opened its new hospital in Hopewell (capitalhealth.org).

A few non-federally qualified health clinics provide services in these neighborhoods too, including a Planned Parenthood in Ewing & Carroll. And private medical practitioners are largely clustered at three identified locations (2 Henry J Austin CHCs & Capital Health System ER) in addition to the Planned Parenthood site. There are also a few practitioners with sites outside these practices including some pediatricians located primarily at Henry J Austin Centers and at Capital Health System ER. Finally, there is a cluster of Mental/Behavioral and Substance Abuse Treatment Facilities located in the neighborhoods of Ewing & Carroll and Hanover Academy.

Many other organizations and government agencies that provide education, information and referrals and interviewees point out that people come from all over the city to attain services no matter where they are offered.

Trenton Area Soup Kitchen

The Trenton Area Soup Kitchen operates 6 locations throughout Trenton. In addition to feeding the people of Trenton, TASK also offers adult tutoring, computer training services, provides a lawyer on-site, and has nurses from the Henry J. Austin health center and Robert Wood Johnson Hospital at Hamilton visit regularly. The nurse visits two hours a week and the patrons consistently ask when the nurse will be around. The staff at TASK see these nurse visitations as an incredibly important resource because the nurse maintains relationships with the regular patrons and the patrons feel more comfortable sharing information and opening up to a nurse when they are somewhere that feels more familiar and less institutional. Many other organizations also come to the soup kitchen to do HIV, cancer, blood pressure, and eye screenings, and a nurse practitioner from The Trenton Health Team provide direct treatment for people at the soup kitchen. Additionally, if someone at the soup kitchen happens to have a medical emergency or a health crisis, there are EMTs located nearby who can check them out or bring them to the hospital. Staff at the soup kitchen admit that having health care coverage does not necessarily mean that a person will not receive proper health care within the city of Trenton. While having this asset would no doubt be highly beneficial to all people, if someone seeks a specific treatment, there are organizations in place to make sure that the proper treatments happen. However, people who often are difficult to reach are those that are those who are reluctant to seek out medical coverage (which can exist across the board, even people with means), which often includes people that have severe mental disorders, and those with substance abuse issues (Interview, 2012).

Rescue Mission of Trenton

The Rescue Mission of Trenton runs a number of residential programs for the homeless and formerly incarcerated, as well as addiction services. They also operate a store in which people can buy home goods and clothing that have been donated. Their services are not solely limited to the neighborhood in which they exist, Ewing & Carroll. They have a very wide “catch area,” which they describe as the “Trenton Community.” This organization runs a weekend soup kitchen and an emergency shelter 365 days a year for single men and women. They handle up to 1,300 cases a year and up to 275 a night. The residential treatment facility for substance abuse is for up to 75 adult men from the criminal justice system, or those that are self-referred. There is also an outpatient program for people from the same routes. People will frequently rise up the ranks within their system, becoming more and more independent, obtaining jobs and integrating themselves into mainstream society. Sometimes they wind up as paid employees at the Rescue Mission, working to help others. Within these programs, the Rescue Mission offers job training and work readiness through job skills training and education classes. People from Princeton University will often tutor people for the GED here. Their clients use all the medical services in the city at their disposal—everything from visiting the St. Francis and Capital Health Systems hospitals, to Planned Parenthood, to the IMPACT HIV Van (when it was in service). The employees at the Rescue Mission were apt to point out that their patients do have to travel outside of Trenton for dental services, and that often times people have to go as far as New Brunswick to UMDNJ to get these kinds of services. Mental health, eye care, and behavioral health issues are also not covered well in Trenton; and these services could use some bolstering. Even with the raves for the Trenton Health Team, more is definitely needed, especially in regards to more collaboration between organizations and clinics. The Rescue Mission staff emphasized more case managers that work in between organizations as absolutely crucial. Additional case managers provide consistency in regards to communication between organizations and health care providers. Sometimes a caseworker might spend 8 hours a day attempting to get a client/patient/patron a prescription. While a person may ultimately get said medication, the fact that it takes a person 8 hours to attain necessary medication is simply too long a time. Additionally, while a person can get referred to service after service, if they have mental health problems or substance abuse issues, they may not often seek out the treatments that they need or go to appointments that have been scheduled for them. More case managers can provide the attention needed to assure people are getting the care that is readily available for them. Collaboration within the system, as well as more patience, is necessary. People must be walked

through the system. Many people who face all sorts of problems do not have the type of resources that most people with means do; meaning if one aspect of a person's life becomes unraveled, everything else could just as easily fall apart. Folks at the Rescue Mission noted that community involvement is incredibly important. Many community members liked the Trenton Health Team's programs at Kingsbury Towers. The employees at the Rescue Mission additionally emphasized that these efforts have to be maintained and grown. People should not be locked into a set of goals. It is important to fund a philosophy and an attitude that is backed by an organization, so that the delivery of services can be changed when need be (Interview, 2012).

The Crisis Ministry of Princeton And Trenton

The Crisis Ministry of Princeton and Trenton, has two locations within the city, as well as one in Princeton. Nearby Ewing & Hamilton residents take advantage of their services, so one can assume that most of Trenton will go to either one of the Ministry's locations. Similar to most other organizations within Trenton, people find out about the services offered by the Crisis Ministry mostly by word of mouth, although the local board of social services and other organizations will often send referrals. If people have access to the Internet, they can also find out about the Crisis Ministry via their website. The Crisis Ministry, which has a large program in hunger prevention, partners with the Mercer St. Friends Food Bank, which provides government allocated free food. Capital Health Systems and Rutgers Extension Program also provide nutrition education. Additionally, the food director at Crisis Ministry is a Registered Nurse, which helps to focus food as an important component to maintaining a healthy person. As of recently, doctors have been "prescribing" proper nutrition. As such, people bring their "prescriptions" and shop healthily at the Crisis Ministry. The Crisis Ministry overlaps with other organizations in regards to what benefits they provide with the community and works with these other organizations to help cover gaps. Recently, there has been an increasing focus on fresh produce and chicken, and when patrons shop at the food pantry, they are required to pick foods from different groups to assure that they are maintaining a balanced diet. Produce comes from Mercer St. Friends, as well as from farmers markets, local farms, and donations from Whole Foods. Since the refrigeration is out at the Crisis Ministry due to a fire just about a year ago, they are currently storing things offsite (Interview, 2012).

Through the lens of the Crisis Ministry, those who have the greatest health need are those who cannot secure their most basic needs. Usually this means that they do not have adequate income or job skills. When people do have acute medical health issues and folks at the Ministry are made aware of them, they will refer people to the Henry J. Austin FQHC. The Crisis Ministry does not work directly with the Trenton Health Team, the Trenton Health Team has gotten down on the ground and spoken to community members at the Crisis Ministry, and has researched deeply to understand the needs of the local people within Trenton. When asked if the Crisis Ministry could grow their programs, they noted that they would love to have a commercial kitchen to do meal preparation to teach people how to create healthy meals, like Elijah's Promise in New Brunswick. They would also like to do food service training. Currently, the Crisis Ministry employs people with their TANF benefits to work in the food pantry, which is part of their workforce development program. People in urban neighborhoods have issues getting to big box stores, which often save people fairly large amounts of money, so they someday hope to do bulk retail for the people of Trenton. Additionally, the Crisis Ministry would like to be able to improve coordination with healthcare providers. They are interested in doing case management to improve long-term stability, especially in trying to help people max out their benefits (Interview, 2012).

Mount Carmel Guild

The Mount Carmel Guild provides in-home nursing visits for the elderly. This organization serves all of Mercer County. The Mount Carmel Guild provides in-home care for economically disadvantaged elderly clients, most of whom have outlived Medicare benefits from home health nursing services and are capped out. Their nurses go out to prevent premature institutionalization, and charges their clients nothing. They currently serve between 55 and 65 cases annually, with each visit

costing about \$53 for about an hour of services. This totals to about \$120,000 a year. According to this home nursing organization, it costs \$87,000 annually to keep someone in a nursing home, so their services save local families and state and local governments about \$5M annually. People are apt to do well in these situations because they like to stay and receive treatment in their own homes, echoing sentiments felt at TASK in regards to familiar environments. Their patrons may find that they have neighbors who visit them sometimes, and have a level of comfort around their own surroundings—they like to be around their photographs, televisions, and pets. This sense of familiarity has an overall benefit to people's health and helps them to live longer and to retain a sense of dignity for a longer period of time. The Mount Carmel Guild gets their funding from contributions of individuals, small businesses, parishes, foundation grants, and government grants. The Mount Carmel Guild has a full-time director of nursing who is an RN, PSN. They also have 1 part-time RN, with intentions to add another part-time RN soon.

The Mount Carmel Guild is part of the United Aging Disabilities partnership, which offers mobile meals, case management services, and transportation. They also partner with Home Health Aid to cover gaps that the former cannot provide, since they are limited to providing services such as bathing people and doing some laundry, but nothing medical. Working with the Henry J. Austin Health Center, which runs a program on how to be heart-wise, the Mount Carmel Guild educates their patients to help themselves live longer. Collaborating with LifeCare St. Francis, Mount Carmel Guild patients have access to recreation for the elderly during the day. Their patients are offered free rides by United Way Collaborative, and the Red Cross will often bring people mobile meals and provide "blizzard" (or other natural disaster) bags. They have partnered with other organizations to provide counseling services for those who are depressed. The Mount Carmel Guild has acknowledged that they could grow further, which means that more seniors would have the ability to rest comfortably at home. They'd love to help 100 people instead of just 55. While nobody is ever turned away, more people could be served (Interview, 2012).

Isles

Isles is a community organization that focuses mostly on environmental health. They began about 30 years ago helping neighborhood communities create local gardens through land trusts. These community gardens help promote self-reliance and get families involved. People are responsible for the bulk of the work of creating and maintaining the gardens, and Isles aids in getting the proper access to water, fences, and seeds, as well as tests the soil for chemicals. In congruence with setting up these gardens, classes are taught so that people understand what they are doing, but many people who have come to Trenton in recent years are immigrants with backgrounds in farming. After gardening began, people turned to this organization for help with parks, which also turned into Brownfield redevelopment. In the 90s, the DEP had a lot of money that wasn't going into urban areas. Trenton actually has a very big legacy of contaminated land, because they used to be the 2nd largest pottery exporter in the world, after Trent, England. The pottery industry used lead glazes, which is also very high in cadmium. Rubber and magic markers were also manufactured in high quantities in Trenton, but not quite to the extent of pottery. In the early 90s when environmentalism was coming into social and political consciousness, Isles delved into many questions about what it meant to live near such a contaminated site in Trenton, which had unusually high levels of Cadmium and Lead in its soils. They began to look at environmental health conditions, data, and knowledge. They then surveyed 100 families who lived around the old magic marker site, which was primarily contaminated due to the battery factory that had existed prior. The blocks around the magic marker site were not only the poorest, they were also the most contaminated of all of Trenton. The lead rates in the city were also 3 to 4 times greater than they were in the suburbs, and additionally, not enough children are tested for lead. Currently, Trenton screens about 50% of their students for lead levels, which is the highest for the state (Interview, 2012). Isles believes that this is a very important way to assure a very important aspect of a person's health.

Asthma was also becoming visible as an epidemic around the same time, and Isles began to recognize this health issue as something very closely related to a person's living environment. Since the early 90s, Isles has begun to train people in searching for asthma triggers in a person's home. This can range from mold, cockroaches, high levels of bleach, and dust. Isles has also since worked in training people how to keep their homes healthy, as well as identifying specific products that can have negative effects on one's health. Isles attempts to implement home health visits to see how people are maintaining their homes and assure that people are living without mold (often times people don't understand that they should throw away a moldy carpet), or are cleaning their home using healthy cleaning products. Planned Parenthood has expressed interest in doing healthy homes screenings (Interview, 2012).

Overall, Isles's goals are to ensure that people live in good homes. This sentiment was echoed by both TASK and the Mount Carmel Guild as home and community environments are incredibly important to a person's well-being. Isles was also apt to mention that HUD, the EPA, and the DOE meet together and are supportive of the New Jersey Strategic Plan for Healthy Homes, several key elements of which are integration of services, a shared definition of healthy homes, and updating codes and regulations so that this type of work and evaluation of what makes a healthy home can be easier. Pest management is also something that Isles is beginning to look into, as bedbugs, rodents, and cockroaches are also a health issue. Most importantly, doctors are often not aware of what goes on inside a person's home, and Isles believes that it is important that a home environmental conditions are brought to light. The last health-related program that Isles runs is on childhood obesity. This is tied into having appropriate food choices to make at corner stores in the neighborhood, as well as having safe places to play. They were also apt to point out that by providing children with a safe environment in which to play can cut seriously down on ER visits for kids if they have less ways to get injured. Because of all the work they do with environmental health, Isles sits on the board with the Trenton Health Team to advise on any environmental issues related to a person's health (Interview, 2012; Tarng, 2012).

The Mercer Alliance

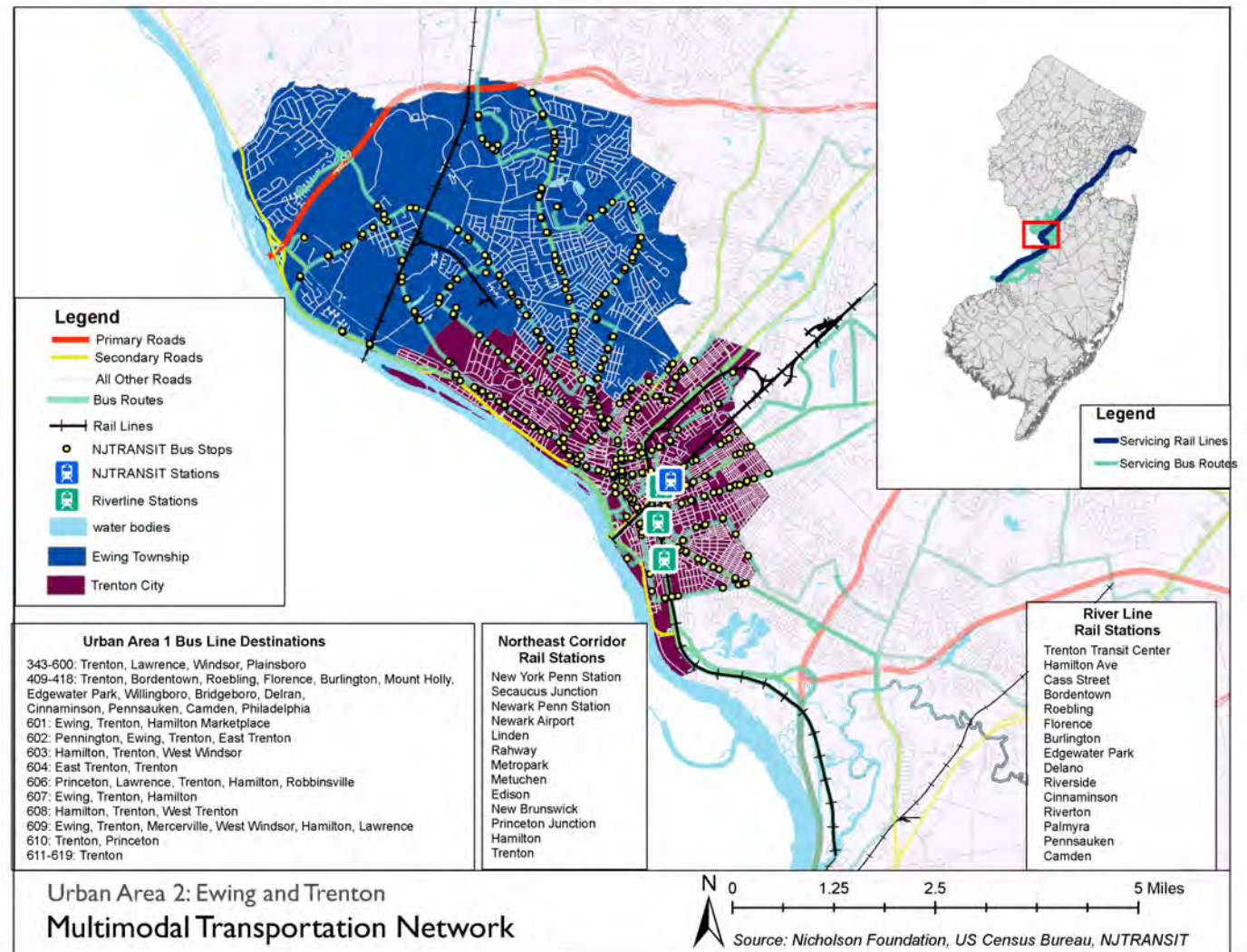
The Mercer Alliance has set up a county wide coalition for people applying for social security disability. They have created a quality assurance group to get quick approval of SSI (Social Security Supplemental Income) applications. The qualified applicant receives \$705/ month (compared to \$140-\$210 before) and pays 30% of income towards housing. The income is received 100 days after qualifying. For people with mental illness who qualify, the stipend goes directly to a local agency that pays their bills. The person receives the remainder of the balance once bills are paid. Family homelessness is another major issue, composing 25-30% of the total homeless population. Eighty percent of homeless families are homeless due to economic problems. The old approach put homeless families in transitional housing where they would wait up to two years to, hopefully, receive an affordable housing voucher. This approach was not very successful in retaining people in permanent housing. The element of ownership achieved in the affordable unit is missing from government transitional housing. The new strategy shifted the approach to ending family homelessness, which shifted outcomes. Agencies helped families find an affordable unit from the start, negotiate rents, and families were typically off assistance in six months. There was a 5% return to homelessness with the new program versus 20% with the old approach. Catholic Charities provides short-term case managers to assess people on an individual needs basis. Because homelessness is largely an economic problem, the main objective is employment counseling and services (Interview, 2012). A new area for the Mercer Alliance is rapid re-housing for singles. The program will have an employment focus and will create networks for formerly incarcerated people and others who are typically discriminated against in the job market. They have housed 140 chronically homeless people, and there are about another 100 that could be housed (Interview, 2012).

Transportation

As the state capital, Trenton has been built as a very accessible city from a regional perspective. Trenton is one of several major transportation hubs in New Jersey (in the sense that it is a destination for many multi-modal transit lines). The Trenton Transit Center is a very busy New Jersey Transit station that services commuters working in Trenton, Philadelphia (SEPTA operates Trenton-Philadelphia routes), New York City, and areas in between. New York Penn Station is about a ninety minute ride on the Northeast Corridor line, and a 45 minute trip to Philadelphia 30th Street Station. Trenton also has a light rail option. The River Line light rail service takes passengers from Trenton to a number of cities in south Jersey.

As of March, 2012, Trenton has been a Complete Streets city, putting it under the guidance of a policy which requires that local roadway projects accommodate diverse modes of transportation. Since the adoption of the Complete Streets Policy, several small-scale projects have been executed to improve the safety of local cyclists and pedestrians, including road repaving and line striping (Fatton, 2012).

In the focus neighborhoods public transportation is limited almost entirely to the bus. Ewing & Carroll is the only neighborhood in close proximity to rail, both the NJ Transit Train Station and the River Line light rail station. Bus stops are located throughout the six



neighborhoods with concentrations on Route 206, Perry Street, Calhoun Street, and Stuyvesant Avenue. A majority of the health services are located nearby bus stops.

Community Organizations

Overview Discussion

Although Trenton may seem like a fairly large city in comparison to some of our other smaller focus municipalities, the community organization landscape within Trenton is relatively small. Many organizations that we spoke with were openly expressive of the communication between organizations within the city. It is also evident that these organizations rely on one another, even if there is some overlap between their goals and what they work to achieve. When researching online, we were able to find a map of a few community block organizations, but their contact information was outdated. One recent interesting gain that Trenton made towards community efforts was In 2010, when the city began to allow illegal immigrants to carry community identification cards. By having official identification, illegal immigrants can cash checks, pick up mail packages, borrow books from libraries, and get treatment at more medical centers. These cards have no currency outside the city of Trenton (New York Times, 2010). Additionally, as of April 2012, the City Council unanimously voted to protect nonprofit organizations using government buildings from being evicted (The Times of Trenton, 20 April 2012). This happened after a food pantry and a teen boxing program were locked out of city buildings in the weeks prior to the article.

The city has struggled of late to find the resources for its non-profit sector. In 2012, Trenton faced a \$4 million deficit. They city is planning an operational budget of \$186.4 Million and an increase of taxes of 19% (Times of Trenton, 17 October 2012). On top of Trenton's financial struggles also lies certain discrepancies within its administration. This year, Trenton failed to receive Community Development Block Grant money because they failed to put together a work force that included at least 30% of local, low-income residents. This is a part of Section III rules as per the Federal Government. \$4.6 Million was supposed to be committed to 10 recreation projects over the last several years, none of which comply with Section III in their plan (Times of Trenton, 6 April 2012).

List of Community Organizations and Short Descriptions

Battle Monument Organizations

Greater Trenton Behavioral Health Care-Adolescent Rehabilitative Services (<http://www.gtbhc.org/programs.htm>)

Works with youth ages 12-17 who have emotional/behavioral problems, as well as with their families. Treatment modalities include group and individual services, as well as family therapy. The program provides up to 5 hours of group-based services daily.

Samaritan Baptist Church (<http://samaritanbaptistministries.org/>)

Food pantry

Stuyvesant/Prospect Organizations

Capital Health System – Mercer (<http://www.capitalhealth.org/>)

Mercer Council on Alcoholism/Drug Abuse (<http://www.mercercouncil.org/>)

Provides alcohol, tobacco and other drug abuse prevention and early intervention programs and services in partnership with individuals, families, schools, communities, businesses and professionals throughout Mercer County

Jennye W Stubblefield Senior Center

Senior center

Union Baptist Church (<http://www.ubctrenton.com/>)

Food pantry

Central West Organizations

Carver Youth and Family Center (<http://www.princetonol.com/yo/data/cyfc.html>)

Remedial education program, summer cultural and enrichment program, Carver Hi Y (Basketball, tutoring, and life skills for teenage boys)

Community Justice Center, Inc. (<http://www.nj-communityjusticecenter.org/>)

Legal support and guidance for community organizations and individuals in the community

Young Scholars' Institute (<http://www.youngscholarsoftrenton.org/index.asp>)

Provides programs for approximately 1,200 school children annually. These programs and services include one-to-one tutoring, SAT preparatory courses, enrichment classes, college tours and college admissions workshops, reading and writing workshops

North 25 Organizations

Henry J. Austin Health Center (<http://henryjaustin.org/>)

Federally Qualified Health Center providing primary health care services to the medically underserved at three Trenton locations, including one in the neighborhood of North 25, located at 321 North Warren Street.

Isles YouthBuild Institute (<http://isles.org/services/youth-build-institute>)

Alternative school and training center for individuals, 16 to 24 years old, who have dropped out of school or have been incarcerated.

Reading Senior Center

Senior center

Hanover Academy Organizations

Bureau of HIV Prevention/IMPACT Van

(<http://www.trentonnj.org/Cit-e-Access/webpage.cfm?TID=55&TPID=12327>)

The Project Impact Mobile Health Van provides HIV counseling and testing. Offers referrals to care and treatment, and social service agencies.

Community Health Law Project (<http://www.chlp.org/>)

Provide legal and advocacy services, training, education, and related activities to persons with disabilities and to organizations representing their interests, with an emphasis on those most vulnerable and needy.

The Crisis Ministry of Mercer County, Inc. – Office and Homelessness Prevention (<http://www.thecrisisministry.org>)

Rent, Security Deposit, and Mortgage Assistance, Utilities Assistance, Free Farmers Market, Client Choice pantries, Workforce training

Greater Trenton Behavioral HealthCare – Adult Crisis Prevention and Outreach (<http://www.gtbhc.org/programs.htm>)

Three teams of case managers provide in-vivo and hospital based support for consumers who have serious and persistent mental illnesses. Services include assessment, psychoeducation and support, crisis intervention, systems advocacy.

Isles – Main Office (<http://isles.org/>)

Nonprofit community development and environmental organization

New Horizon (<http://nhhs.net/>)

NHTS helps create useful, effective forms of collaboration with drug regulation, research, service delivery, and management.

People and Stories – Gente y Cuentos, Inc. (<http://www.peopleandstories.net/>)

Offer literature reading and discussion programs in English or Spanish that invite participants to read, challenge, and question literary short stories through discussion. Programs reach individuals in diverse settings including residential treatment facilities, prisons, homeless shelters, adult education programs, libraries, and senior centers.

Trenton Head Start (<http://trentonheadstart.org/>)

Head Start program

Trenton Council of Civic Association (<http://www.tccatrenton.org/index.html>)

Serves as a central organization for the exchange of ideas for the member Civic Associations.

Trenton Public Library (<http://www.trentonlib.org/>)

Classes in computer literacy are taught on an ongoing basis, including for Spanish speakers. The library also provides targeted PC training to social services agencies like the Salvation Army Rehabilitation Program. Programs in resume preparation and income tax assistance are also provided.

Trenton YWCA – Dunham Hill Residence (<http://www.ywcatrenton.org/dunhamhall.html>)

Residence that provides transitional and permanent housing to low-income and homeless women.

Trenton Public Education Foundation, Inc.

Broker, foster and leverage resources that enhance and promote educational opportunities for the students in the Trenton School District

Trenton Mayor's Office/Community Concerns

(<http://www.trentonnj.org/Cit-e-Access/webpage.cfm?TID=55&TPID=5575>)

Turning Point Methodist Church (<http://www.turningpointumc.net/>)

Food pantry

UIH Family Partners (<http://www.uihfamilypartners.org/>)

Serves men, the majority of those who participate in its programs are unemployed, non-custodial fathers who face multiple systemic barriers to self-sufficiency. Through a comprehensive array of free programs and services, UIH equips men to play a more active and positive role in the lives of their children and families, physically, emotionally and financially.

YWCA Trenton/Latina Unidas (<http://www.ywcatrenton.org/latinasunidas.html>)

Ewing & Carroll Organizations

Henry J. Austin at Ewing Street (<http://henryjaustin.org/>)

Federally Qualified Health Center providing primary health care services to the medically underserved at three Trenton locations, including one

Catholic Charities – Partners in Recovery

(<http://www.catholiccharitiestrenton.org/cc3/index.php?page=mental-health-recovery>)

A partial-care program which provides the behavioral, emotional, psychiatric, psychosocial, and substance abuse treatment of adults.

Catholic Charities – Family Growth Program

(<http://www.catholiccharitiestrenton.org/cc3/index.php?page=mental-health-recovery>)

Offers specialized treatment services for family violence, child abuse and neglect for children and families under child protection supervision due to abuse or neglect.

Catholic Charities – PACT (Program of Assertive Community Treatment)

(<http://www.catholiccharitiestrenton.org/cc3/index.php?page=mental-health-recovery>)

Community-based intensive mental health and recovery service for the most seriously and chronically disabled adults experiencing a mental illness.

Catholic Charities – In-Home Foster Care

(<http://www.catholiccharitiestrenton.org/cc3/index.php?page=mental-health-recovery>)

Ensures safety and enhances permanency for at risk children under child protection supervision due to abuse or neglect.

Catholic Charities – The Guidance Clinic

(<http://www.catholiccharitiestrenton.org/cc3/index.php?page=mental-health-recovery>)

Provides psychotherapy and counseling for people with behavioral, emotional, psychiatric, and substance abuse concerns.

Jerusalem Baptist Church (<http://www.jerusalemmbc-nj.org/>)

Food pantry - provides a monthly meal program for the community, free clothing and Thanksgiving baskets.

LifeLine Emergency Shelter, Inc. (2 Different Locations)

Emergency shelter

Lutheran Social Ministries (<http://www.lsmnj.org/>)

Affordable family housing, affordable senior housing, community outreach programs, immigration and refugee program, etc.

Mercer County One-Stop Career Center

(<http://www.state.nj.us/counties/mercerc/departments/oscc/index.html>)

Employment assistance, job training

Mount Carmel Guild (<http://www.mcgtrenton.org/>)

The Emergency Assistance program provides emergency food to families. Clients include homeless, disabled and/or aged persons living on fixed incomes. Home Health Nursing program staff provides in-home nursing services to seniors whose Medicare insurance has been exhausted and have no alternative care.

NJ Department of Labor and Workforce Development (<http://lwd.dol.state.nj.us/>)

Employment assistance, job training

Planned Parenthood

(<http://www.plannedparenthood.org/health-center/centerDetails.asp?f=3304&a=90960&v=details>)

Pregnancy testing, prescription contraceptive (birth control) supply pick-up, Depo-Provera ("The Shot") injections, and sexually transmitted infection (STI/STD) testing & treatment (gonorrhea and chlamydia only), and rapid HIV testing.

Princeton Deliverance Center, Inc. – Community Food Program (www.princetondeliverance.org/)

Securing donations of surplus unmarketable, but wholesome, foods and grocery products for distribution through a network of charitable organizations dedicated to feeding the hungry throughout the City of Trenton.

Rescue Mission of Trenton (<http://www.rescuemissionoftrenton.org/>)

Emergency shelter, addiction services, permanent supportive housing, job placement program, GED preparation, basic literacy tutoring, parenting classes, and computer/word processing skills, outpatient clinic

Salvation Army (<http://www.salvationarmy.org/>)

Adult Program Services - Community Recreation & Education Programs, Food & Nutrition, Military Personnel Assistance, Missing Persons, Correctional Services - Bible Study - Correspondence, Aid to Families, Disaster Services - Disaster Services, Emergency Assistance - Food & Nutrition Programs, Seasonal Services, Family Counseling Services - Casework Services, Older Adult Services - Camping Activities, Visitation Services, Worship Center - Worship Services - Children's / Teen, Christian Education, Church, Men's Ministries, Music & Arts Programs, Sunday School, Women's Ministries, Youth Services - Character Building Programs, Residential Camping Activities

Trenton Treatment Center (Part of United Progress, Inc.)

Substance abuse treatment services

Trenton Area Soup Kitchen (TASK) (<http://www.trentonsoupkitchen.org/>)

Feeds those who are hungry in the Trenton area and offers programs to encourage self-sufficiency and improve the quality of life of its patrons.

Documentary video from YouTube about TASK (uploaded Feb. 2008) : <http://www.youtube.com/watch?v=jMGPxILluUs&feature=related>

Works Cited

- Duffy, Erin. 2012. "Trenton Mayor Tony Mack is Grilled By City Council In First Appearance Since FBI Arrest." *Times of Trenton*. October 17. http://www.nj.com/mercer/index.ssf/2012/10/trenton_mayor_tony_mack_answer.html.
- Fair, Matt. 2012. "Eviction Shield for Nonprofits Gets First Approval." *Times of Trenton*. April 20. http://www.nj.com/mercer/index.ssf/2012/04/eviction_shield_for_nonprofits.html.
- Fair, Matt. 2012. "Trenton Failed to Follow Federal Rules: Council Kills Contract Extensions; Work Wasn't Going to Companies." *Times of Trenton*. April 6. http://www.nj.com/mercer/index.ssf/2012/04/trenton_failed_to_follow_feder.html.
- Fatton, Daniel. 2012. "Thankful in Trenton." *Trenton Cycling Revolution*. November 26. <http://www.trentoncycling.org/author/dan-fatton/>.
- Garbarine, Rachel. 1997. "Revitalizing Trenton's Battle Monument Area." *The New York Times*. January 19. <http://www.nytimes.com/1997/01/19/realestate/revitalizing-trenton-s-battle-monument-area.html>.
- Gladney, Mary A. 2012. Executive Director, Mt. Carmel Guild. December.
- Levine, Herb. 2012. Mercer Alliance. Phone Interview. December.
- "Magic Marker Site Fact Sheet." 2010. U.S. Environmental Protection Agency. October 5. <http://www.epa.gov/region2/superfund/brownfields/mmark.htm>.
- Micai, Dennis. 2012. Executive Director, Trenton Area Soup Kitchen. Phone Interview. December.
- Pivnick, Elyse. 2012. Vice President Environment and Community Health. Isles, Inc. December
- Powell, Michael. 2011. "Evidence of Christie's Unfinished Business? Visit at New Jersey City." *New York Times*. October 5. http://www.nytimes.com/2011/10/05/nyregion/evidence-of-christies-unfinished-business-visit-a-new-jersey-city.html?_r=0.
- Rosenau, Joshua. 2012. "Trenton Miller Homes Project Set for Completion." *The Times of Trenton*. June 30. http://www.nj.com/mercer/index.ssf/2012/06/trenton_miller_homes_project_s.html.
- Semple, Kirke. 2010. "Trenton Issues ID Cards for Illegal Immigrants" *New York Times*. May 16. <http://www.nytimes.com/2010/05/17/nyregion/17idcard.html?pagewanted=all>.

United States Census 2000. *American Factfinder*. 2000. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

United States Census 2010. *American Factfinder*. 2010. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

Zdan, Alex. 2012. "Move to disband Trenton's street crime units amid surge in gun violence draws criticism from police union." *Times Of Trenton*. December 26. http://www.nj.com/mercer/index.ssf/2012/12/move_to_disband_trenton_street.html.

Zdan, Alex. 2013. "Eight people shot in Trenton through New Year's Eve into New Year's Day." *The Times of Trenton*. January 3. http://www.nj.com/mercer/index.ssf/2013/01/eight_people_shot_in_trenton_o.html.

Zernike, Kate. 2012. "Woeful Trenton Sees Mayor Add Insult to Injury." *The New York Times*. July 20. <http://www.nytimes.com/2012/07/21/nyregion/woeful-trenton-sees-mayor-add-insult-to-injury.html?pagewanted=all>.

Newark

Upper Clinton Hill and Weequahic

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with
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2013

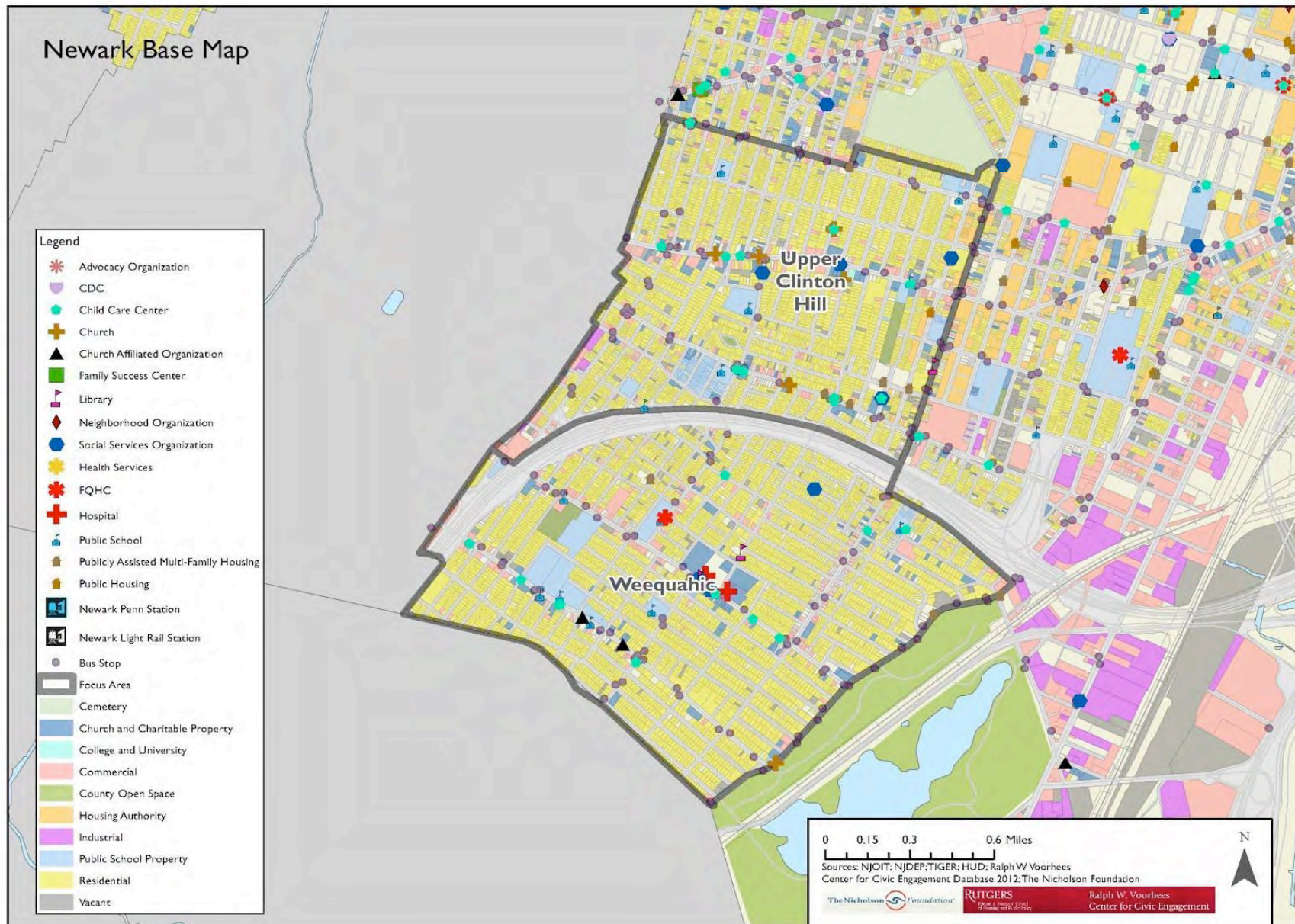


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Neighborhoods

Upper Clinton Hill and Weequahic

The Upper Clinton Hill and Weequahic neighborhoods are located in Newark's South Ward along its western border with Irvington. The two neighborhoods are adjacent, separated by Interstate 78, which was constructed in the 1970s despite fierce resident opposition. The Upper Clinton Hill neighborhood is bordered to the north by Avon Avenue and Woodland Cemetery and to the east by Bergen Street, a commercial corridor. Across I-78, and directly south of Upper Clinton Hill, Weequahic is bordered by Weequahic Park to the east and by Hillside Township to the south.

Upper Clinton Hill and Weequahic are primarily residential neighborhoods, with many historic single-family homes built by Jewish residents who populated the South Ward in the early 20th Century. There are also many religious institutions, including the former B'nai Abraham synagogue, now Deliverance Evangelistic Center, on Clinton Avenue, which has been declared a historical landmark (DEC Ministries). In 2003, a 28-block Historic District was designated in the southeast corner of the Weequahic neighborhood. In addition to the residential blocks in census tract 47, the Historic District includes the 311-acre Weequahic Park, designed by the Olmsted brothers at the turn of the century (Newark Master Plan, 2012). Commercial uses are clustered along a few main arteries, including Clinton, Hawthorne, and Bergen Avenues, with some additional commercial properties on Lyons and Chancellor Avenues. In Upper Clinton Hill, next to the train tracks that separate Newark from a predominantly industrial area in Irvington, a few parcels remain dedicated to light industrial uses. Together, the two neighborhoods encompass 13 census tracts. Tracts 41, 42, and 54 are located entirely in Upper Clinton Hill; tracts 44, 45, 46, 47, 48.01, and 49 are located entirely in Weequahic; and tracts 43, 51, 52, and 53 are shared between the two neighborhoods.

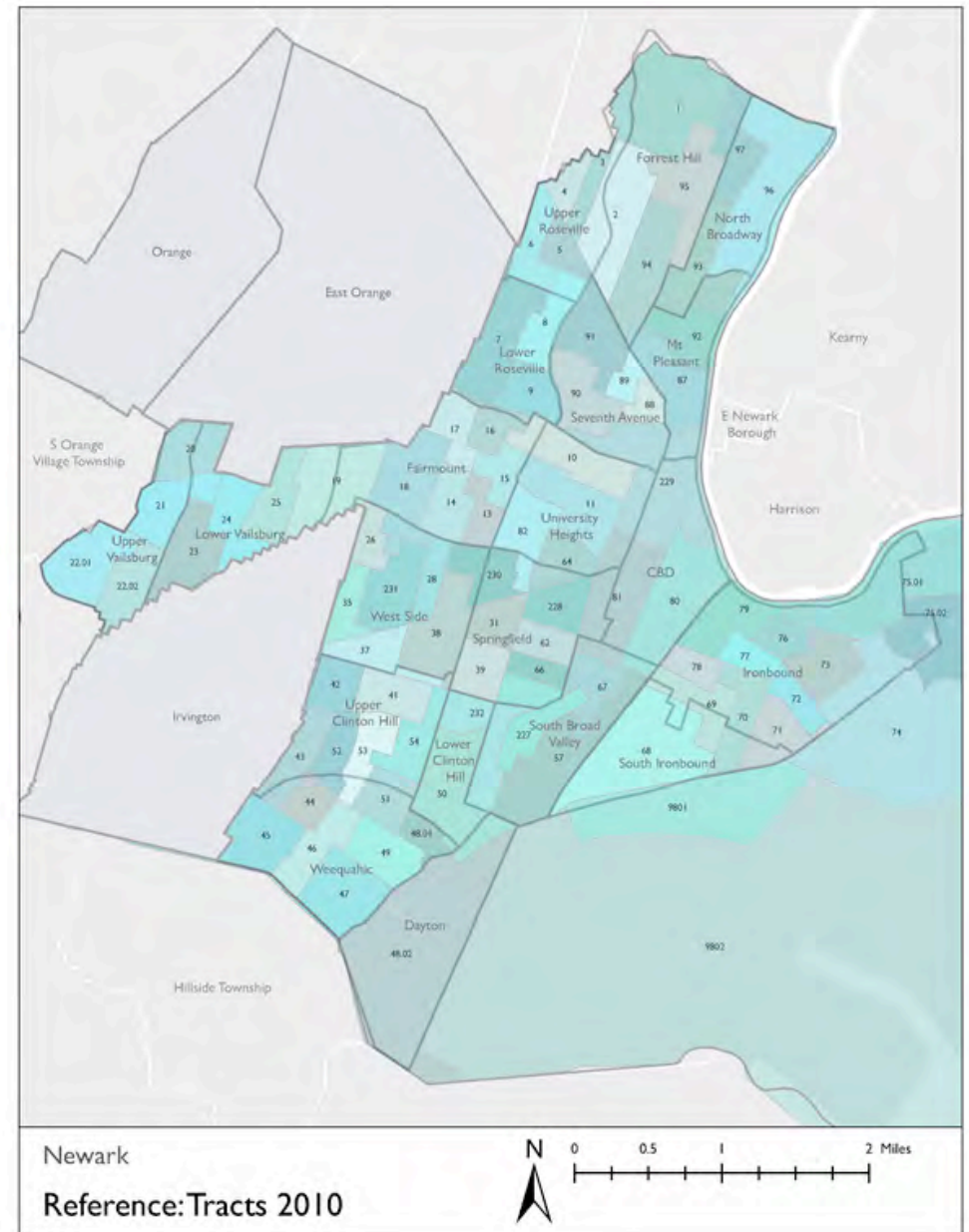


Table 1a. Characteristics of Upper Clinton Hill

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population	18,617	100%	Families (2010)	4,306	100%
			Female-headed with Children	1,760	41%
Age (2010)			Economic (2007-2011)ⁱ		
Under 5 years	1,449	8%	Median Household Income	\$21,615 - 59,563	
5-19 years	4,692	25%	Persons below Poverty	4,548	27%
20-64 years	10,859	58%	Total Civilian Labor Force	8,349	100%
65-74 years	917	5%	Employed	6,604	79%
75+ years	700	4%	Unemployed	1,745	21%
Race (2010)			Housing (2010)		
White	643	4%	Total Units	7,913	100%
Black	17,010	91%	Vacant Housing Units	1,701	22%
Asian	63	0%	Owner Occupied	1,607	26%
Hispanic	1,371	7%	Renter Occupied	4,605	74%
Households (2010)	6,212	100%			
Multigenerational	610	10%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Table 1b. Characteristics of Weequahic

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population	24,831	100%	Families (2010)	5,935	100%
Age (2010)			Female-headed with Children	2,120	36%
Under 5 years	1,766	7%	Economic (2007-2011)ⁱ		
5-19 years	5,600	23%	Median Household Income	\$20,721 - 59,563	
20-64 years	14,783	60%	Persons below Poverty	4,827	20%
65-74 years	1,609	6%	Total Civilian Labor Force	12,711	100%
75+ years	1,073	4%	Employed	10,305	81%
Race (2010)			Unemployed	2,406	19%
White	558	2%	Housing (2010)		
Black	23,213	94%	Total Units	10,922	100%
Asian	56	0%	Vacant Housing Units	1,642	15%
Hispanic	1,330	5%	Owner Occupied	2,617	28%
Households (2010)	9,280	100%	Renter Occupied	6,663	72%
Multigenerational	853	9%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Population

As of 2010, Upper Clinton Hill was home to 18,617 residents and Weequahic was home to 24,831.¹ Some tracts in Upper Clinton Hill gained population while others between 2000 and 2010. Tract 43 gained 30% and tract 53 gained 21%. Weequahic tract 49, just northeast of Beth Israel, lost 15% of its population between 2000 and 2010 (U.S. Census Bureau, 2000 and 2010).

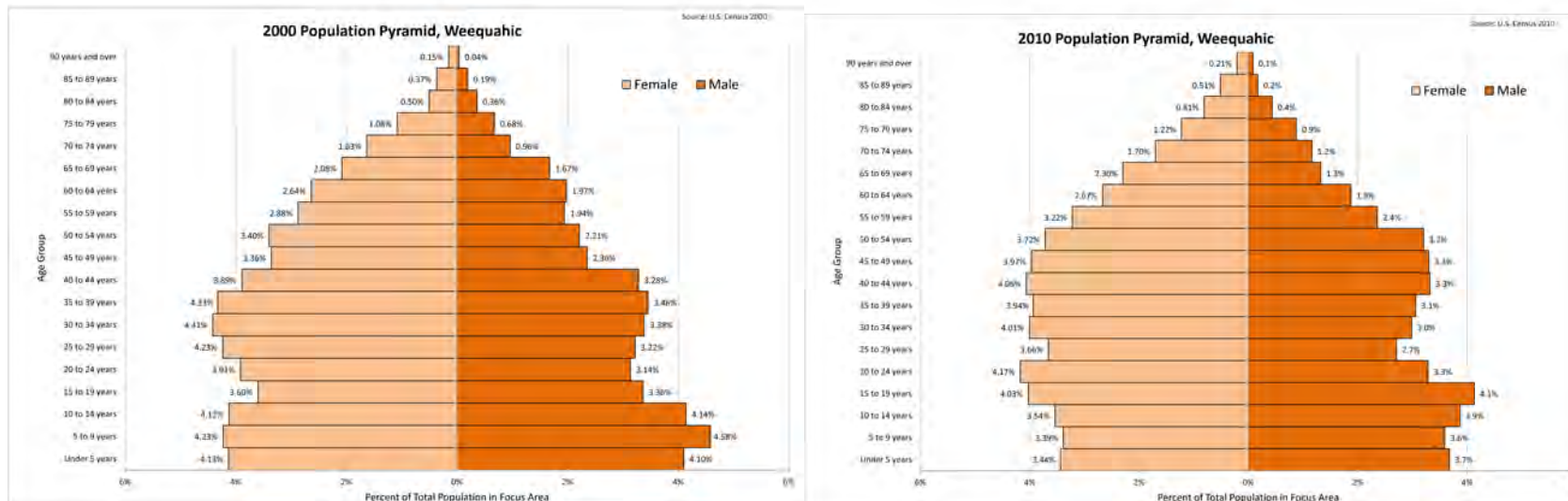
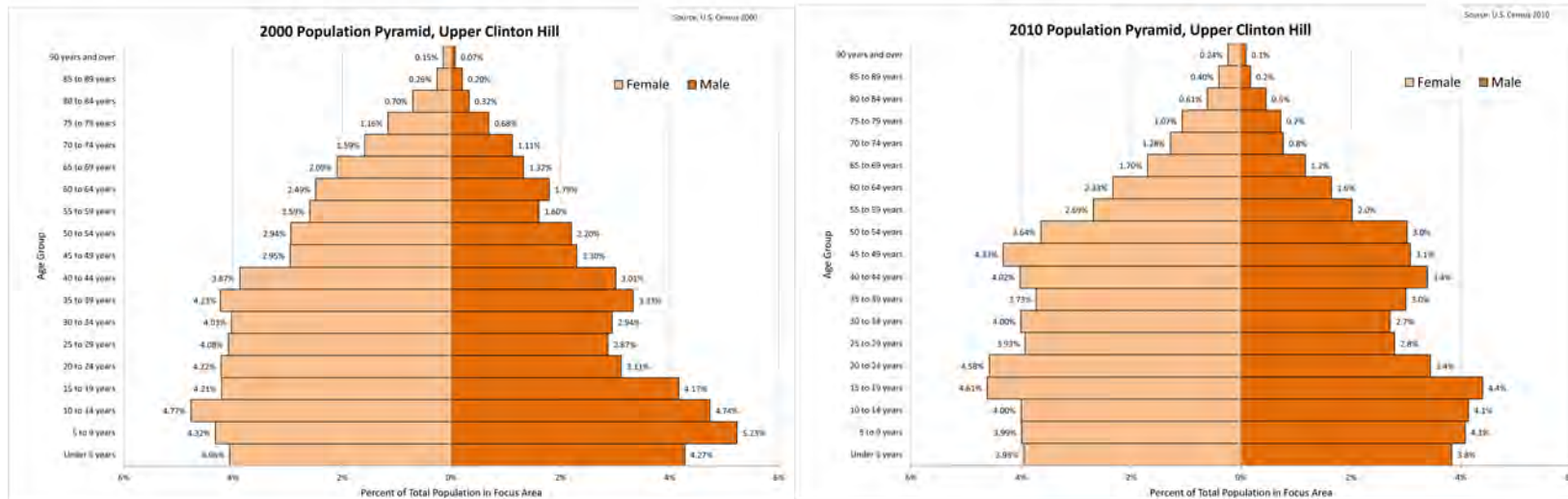
Table 2: Total Population of Upper Clinton Hill and Weequahic, 2000 & 2010

Upper Clinton Hill				Weequahic			
Tract	2000	2010	Percent Change	Tract	2000	2010	Percent Change
41	3,293	3,411	3.6%	44	1,754	1,708	-2.6%
42	3,263	2,831	-13.2%	45	3,576	3,282	-8.2%
43	1,977	2,560	29.5%	46	3,091	3,198	3.5%
51	2,372	2,214	-6.7%	47	4,945	4,624	-6.5%
52	1,467	1,294	-11.8%	48.01	2,300	2,236	-2.8%
53	2,175	2,623	20.6%	49	4,302	3,652	-15.1%
54	4,035	3,684	-8.7%	51	2,372	2,214	-6.7%
				52	1,467	1,294	-11.8%
				53	2,175	2,623	20.6%
Upper Clinton Hill	18,582	18,617	0.2%	Weequahic	25,982	24,831	-4.4%
Newark	273,546	277,140	1.3%	Newark	273,546	277,140	1.3%

(US Census 2000, 2010)

¹ Since the borders of the census tracts do not perfectly line up with the focus area boundaries, these totals are approximations.

As with many of the other neighborhoods we've looked at, men seem to disappear from the neighborhood once they become teenagers. The pattern is visible in 2000 and 2010 in both of these focus neighborhoods (U.S. Bureau of the Census, 2000, 2010).



The population in Weequahic and Upper Clinton Hill is 85-96% black, as compared with 52% in Newark as a whole. The Hispanic presence increased in all census tracts between 2000 and 2010. In particular, there are higher concentrations of Hispanic residents in tracts 54 (12%) and 48.01 (10%) (U.S. Census Bureau, 2000 and 2010). There is little language diversity among the families with children in elementary schools which supports the census data.

Table 3a: Racial & Ethnic Representation in Upper Clinton Hill 2010

Tract	White		Black		Hispanic	
	Count	Percent	Count	Percent	Count	Percent
41	170	5.0%	3,086	90.5%	246	7.2%
42	61	2.2%	2,646	93.5%	199	7.0%
43	56	2.2%	2,350	91.8%	159	6.2%
51	26	1.2%	2,124	95.9%	89	4.0%
52	48	3.7%	1,192	92.1%	87	6.7%
53	62	2.4%	2,479	94.5%	135	5.1%
54	220	6.0%	3,133	85.0%	456	12.4%
Upper Clinton Hill	643	3.5%	17,010	91.4%	1,371	7.4%
Newark	72,914	26.3%	145,085	52.4%	93,746	33.8%

(US Census 2000, 2010)

Table 3b: Racial & Ethnic Representation in Weequahic 2010

Tract	White		Black		Hispanic	
	Count	Percent	Count	Percent	Count	Percent
44	15	0.9%	1,633	95.6%	68	4.0%
45	51	1.6%	3,103	94.5%	165	5.0%
46	41	1.3%	3,035	94.9%	145	4.5%
47	119	2.6%	4,285	92.7%	256	5.5%
48.01	77	3.4%	1,995	89.2%	215	9.6%
49	119	3.3%	3,367	92.2%	170	4.7%
51	26	1.2%	2,124	95.9%	89	4.0%
52	48	3.7%	1,192	92.1%	87	6.7%
53	62	2.4%	2,479	94.5%	135	5.1%
Weequahic	558	2.2%	23,213	93.5%	1,330	5.4%
Newark	72,914	26.3%	145,085	52.4%	93,746	33.8%

(US Census 2000, 2010)

Table 4a: Changes to Upper Clinton Hill's Racial & Ethnic Composition, 2000 & 2010

Tract	White		Black		Hispanic	
	2000	2010	2000	2010	2000	2010
41	1.3%	5.0%	94.3%	90.5%	4.8%	7.2%
42	1.6%	2.2%	95.6%	93.5%	2.8%	7.0%
43	1.3%	2.2%	95.2%	91.8%	3.9%	6.2%
51	0.5%	1.2%	96.8%	95.9%	3.1%	4.0%
52	2.0%	3.7%	93.1%	92.1%	6.5%	6.7%
53	1.2%	2.4%	96.2%	94.5%	1.6%	5.1%
54	1.6%	6.0%	91.9%	85.0%	7.4%	12.4%
Upper Clinton Hill	1.4%	3.5%	94.6%	91.4%	4.5%	7.4%
Newark	26.5%	26.3%	53.5%	52.4%	29.5%	33.8%

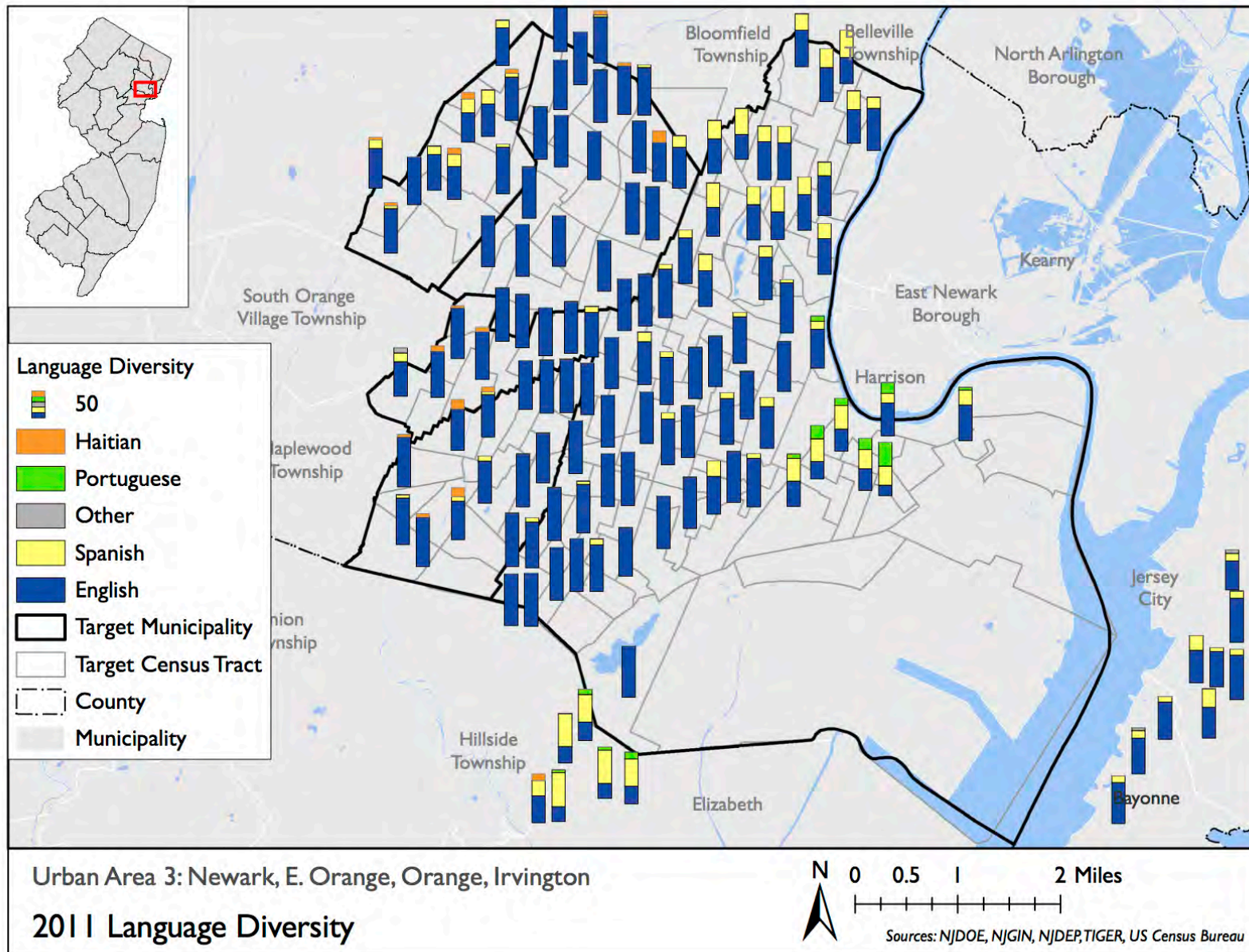
(US Census 2000, 2010)

Table 4b: Changes to Weequahic's Racial & Ethnic Composition, 2000 & 2010

Tract	White		Black		Hispanic	
	2000	2010	2000	2010	2000	2010
44	1.2%	0.9%	96.3%	95.6%	3.0%	4.0%
45	0.6%	1.6%	96.2%	94.5%	2.0%	5.0%
46	0.9%	1.3%	94.1%	94.9%	2.0%	4.5%
47	1.3%	2.6%	94.9%	92.7%	2.8%	5.5%
48.01	2.8%	3.4%	89.6%	89.2%	8.7%	9.6%
49	1.2%	3.3%	93.9%	92.2%	4.0%	4.7%
51	0.5%	1.2%	96.8%	95.9%	3.1%	4.0%
52	2.0%	3.7%	93.1%	92.1%	6.5%	6.7%
53	1.2%	2.4%	96.2%	94.5%	1.6%	5.1%
Weequahic	1.2%	2.2%	94.6%	93.5%	3.5%	5.4%
Newark	26.5%	26.3%	53.5%	52.4%	29.5%	33.8%

(US Census 2000, 2010)

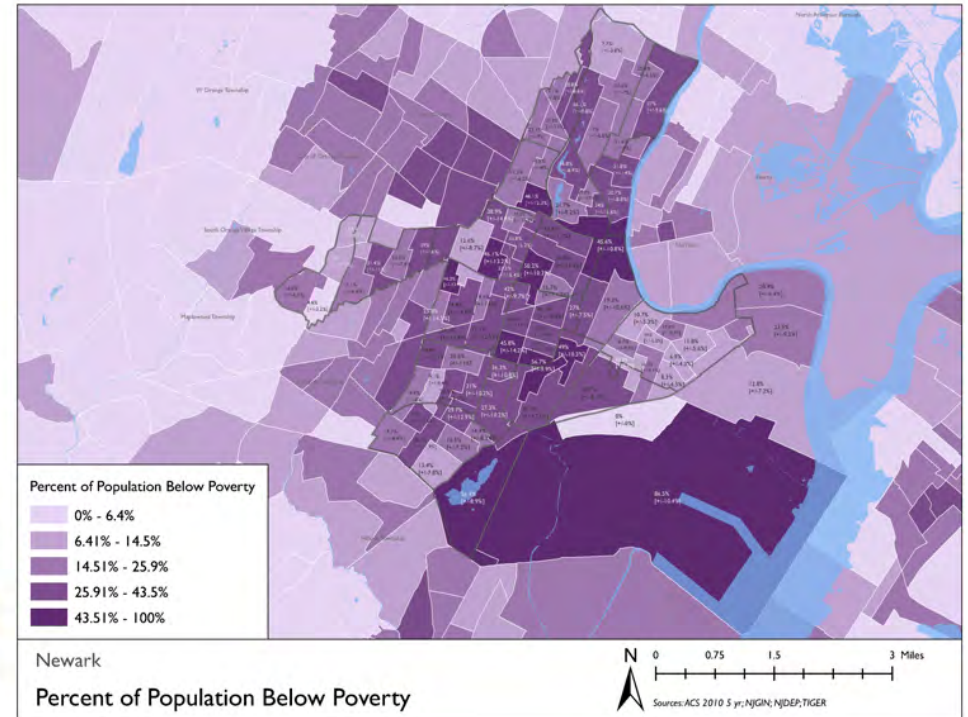
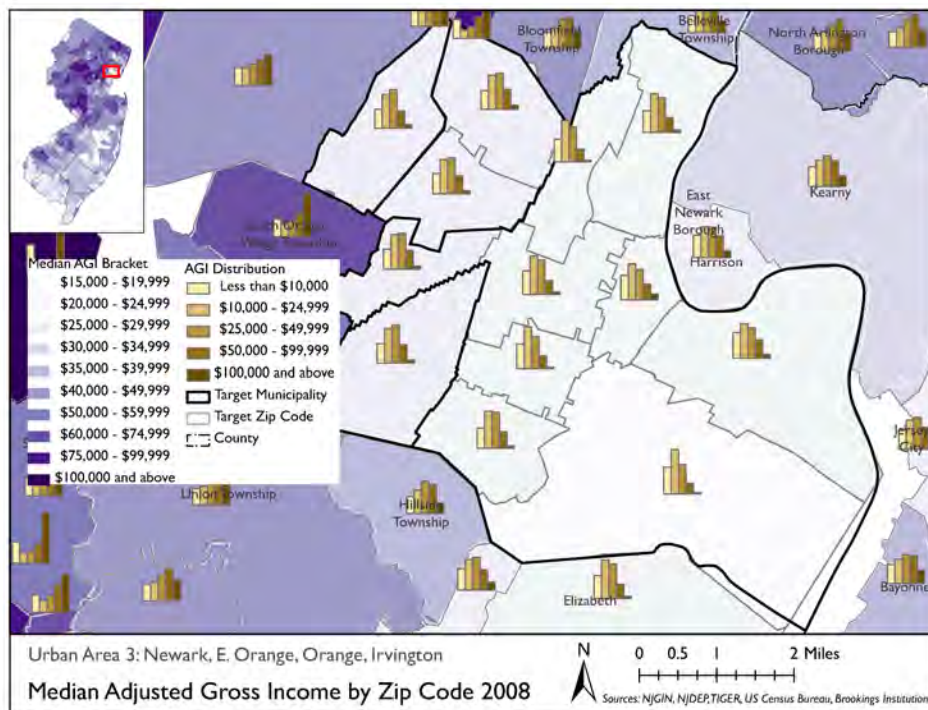
Female headed families with children are common in Upper Clinton Hill and Weequahic. Across the two neighborhoods, female headed households make up between 30-51% of families. With the exception of census tract 47, percentages of female-headed families with children are higher in these two neighborhoods than the citywide average of 31%, and much higher than the New Jersey average of 11%. The highest concentration of female-headed families with children are in census tracts 54 (51%), 44 (46%), and 48.01 (45%).



Income

In 2000, median incomes in Clinton Hill ranged from \$20,153 to \$37,581. The lowest median income was in census tract 54, at \$20,153, while the highest was in census tract 52, at \$37,581. Census tract 52 also had the lowest percentage of residents living in poverty in 2010, with 9% living below the poverty line as compared to 39% in tract 44, 31% in tract 54, and 27% in tract 53 (U.S. Census Bureau, ACS 2010).

The highest concentrations of poverty in Weequahic were located along the northern boundary with I-78 in census tracts 44, 51, and 48.01, and 46. Twenty-seven to 30% of the population in these tracts lives below the poverty line. Census tracts 47 and 49, in the eastern half of the neighborhood bordering Weequahic Park, had lower poverty rates of 13% and 17%, respectively. Tract 47 also had the highest median income in the neighborhood at \$36,797 for 2000 (U.S. Census 2000).



The 2008 gross income tax data for Clinton Hill's zip code suggests a similar distribution of incomes to Newark's Mt. Pleasant neighborhood. There are many low and moderate income households and few households at the top end. Since this is gross income rather than wage income, it also suggests the possibility that people have little additional income to fall back on in times of crisis. The income distribution in Weequahic Park suggests that there are slightly more moderate income residents than in Clinton Hill.

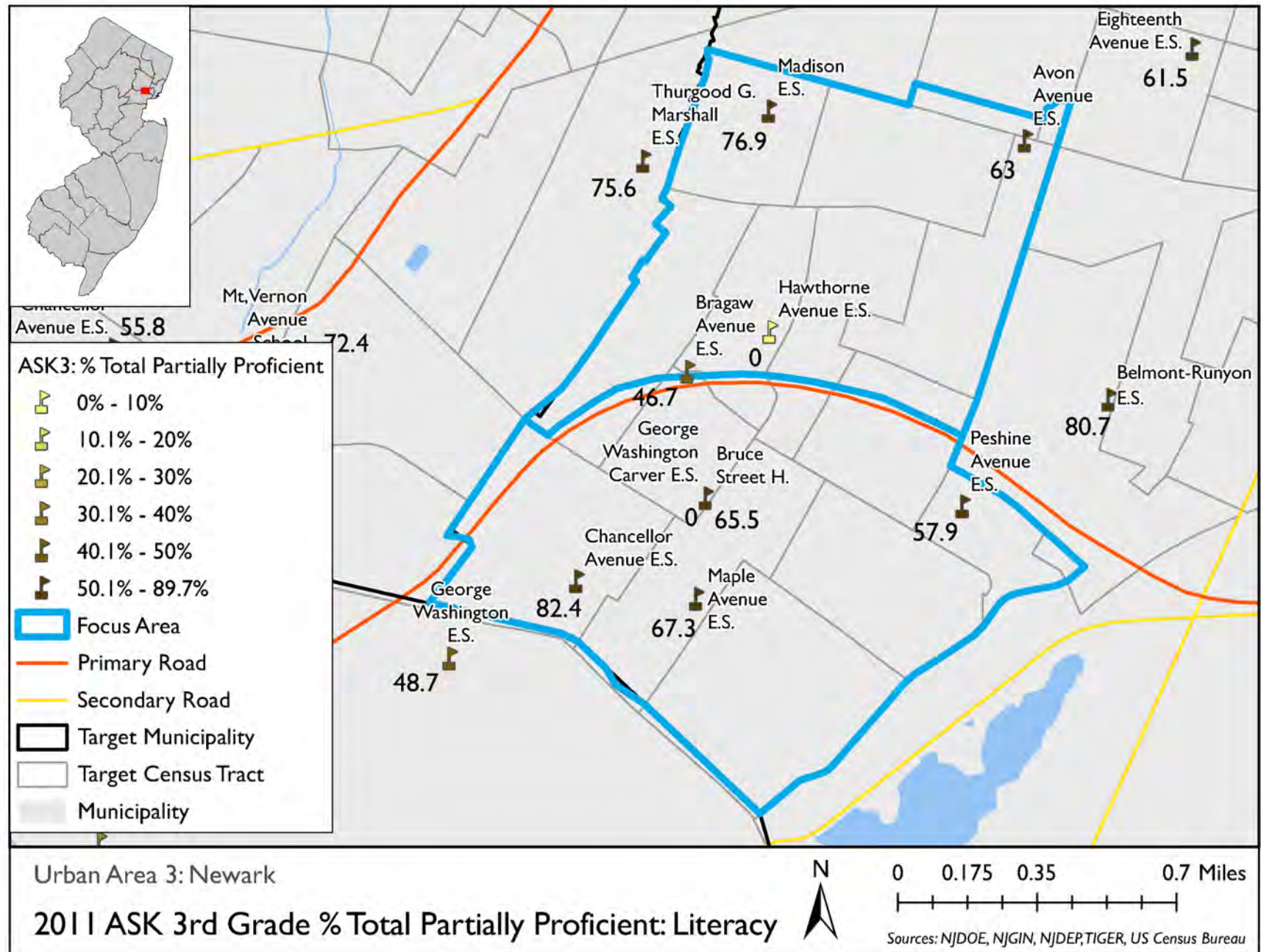
Education

The percent of students who scored partially proficient on the 3rd grade NJASK literacy exam ranged from 47% at Bragaw Avenue to 82% at Chancellor Avenue, which also has a disabled student population of 26%. The students in Upper Clinton Hill and Weequahic have high mobility rates, ranging from 22% at Maple Avenue Elementary to 43% at Hawthorne Avenue Elementary. Nearly a quarter of students were suspended at Avon Avenue Elementary and 16% at Hawthorne.

Table 5: Upper Clinton Hill and Weequahic School Characteristics 2010-11

School	Grade Levels	Total School Population	% Partially Proficient 3rd Grade NJ Ask	First Language Spoken at Home	Students with Disabilities	Mobility	Limited English Proficiency	Student Suspensions
Avon Avenue	K-8	556	63%	English - 99.4% Spanish - .6%	14%	31%		23%
Bragaw Avenue	K-8	274	47%	English - 99% Spanish - 1%	8%	28%		2%
Clinton Avenue	Pre-K	67		English - 100%	6%	39%		0%
Hawthorne Avenue	K-8	295	78% (2009/10)	English - 99% Spanish - .9%	15%	43%		16%
Madison	Pre K - 5	343	77%	English - 99.5% Spanish - .5%	16%	33%		6%
Chancellor Ave	8-Mar	323	82%	English - 99.4% French - .3% Spanish - .3%	26%	25%		0%
Maple Ave	Pre K - 8	444	67%	English - 99% Spanish - .6% Haitian - .2% Portuguese - .2%	11%	22%		10%
Peshine Ave	Pre K - 8	436	58%	English - 91% Spanish - 3% Twi - 2.6% French - 1.2% Haitian - 1% Ga - .8% Panjab - .4%	11%	30%	6%	3%

(NJ Department of Education, 2011)



Housing

Most homes were built as single-family residences before 1950 and there are apartment buildings along Clinton and Chadwick Avenues (Newark Master Plan, 2012). From 2000-2010, Weequahic and Upper Clinton Hill saw increases in the number of housing units. Upper Clinton Hill was home to 16% more units at the end of the decade and Weequahic saw an increase of 6 percent (U.S. Census Bureau, 2000 & 2010).

Table 6a: Housing Unit Changes in Upper Clinton Hill, 2000-2010

Tract	Housing Units		Percent Change
	2000	2010	
41	1,209	1,264	4.5%
42	1,210	1,324	9.4%
43	711	1,094	53.9%
51	929	1,010	8.7%
52	487	524	7.6%
53	815	1,021	25.3%
54	1,455	1,676	15.2%
Upper Clinton Hill	6,816	7,913	16.1%

(US Census 2000, 2010)

Table 6b: Housing Unit Changes in Weequahic, 2000-2010

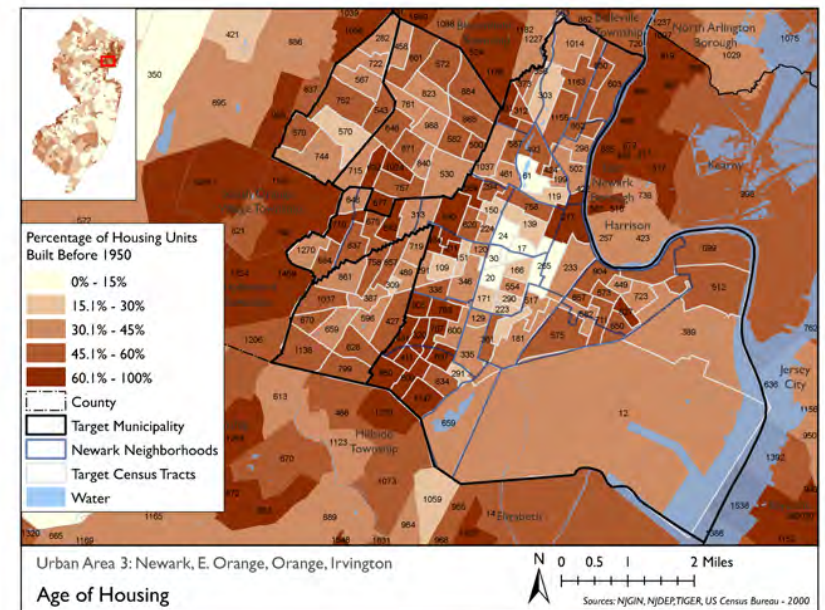
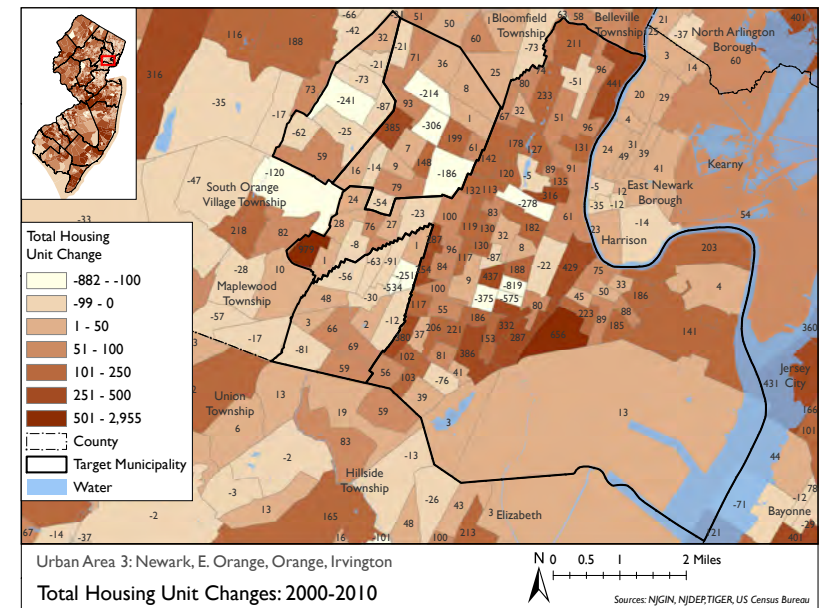
Tract	Housing Units		Percent Change
	2000	2010	
44	651	753	15.7%
45	1,374	1,430	4.1%
46	1,305	1,408	7.9%
47	1,970	2,009	2.0%
48.01	984	1,025	4.2%
49	1,818	1,742	-4.2%
51	929	1,010	8.7%
52	487	524	7.6%
53	815	1,021	25.3%
Weequahic	10,333	10,922	5.7%
Newark	100,141	109,520	9.4%

(US Census 2000, 2010)

Despite these trends, there are many vacant lots in the two neighborhoods, particularly along main streets like Clinton, Avon, Bergen, and Chancellor Avenues. Hawthorne Avenue Elementary School, immediately south of Clinton Avenue, is surrounded by wide expanses of cleared land that belongs to the school district. There are also many abandoned properties in the wake of the foreclosure crisis, which hit both neighborhoods hard. Streets like Seymour Avenue, which once had one of the highest homeownership rates in Newark, saw a wave of foreclosures that left behind many vacant and poorly maintained buildings (New York Times, May 17, 2009). In 2010, there were a total of 2,830 vacant units in Upper Clinton Hill and Weequahic combined (U.S. Census Bureau, 2010). In six of the 13 census tracts, over one-fifth of units were vacant, with a staggering 25% of units vacant in tract 42. In 2011 Community Workshops for Upper Clinton Hill and Weequahic, residents expressed concern about the vacant units and asked that they be demolished (Community Workshop Notes, Newark Master Plan, 2011).

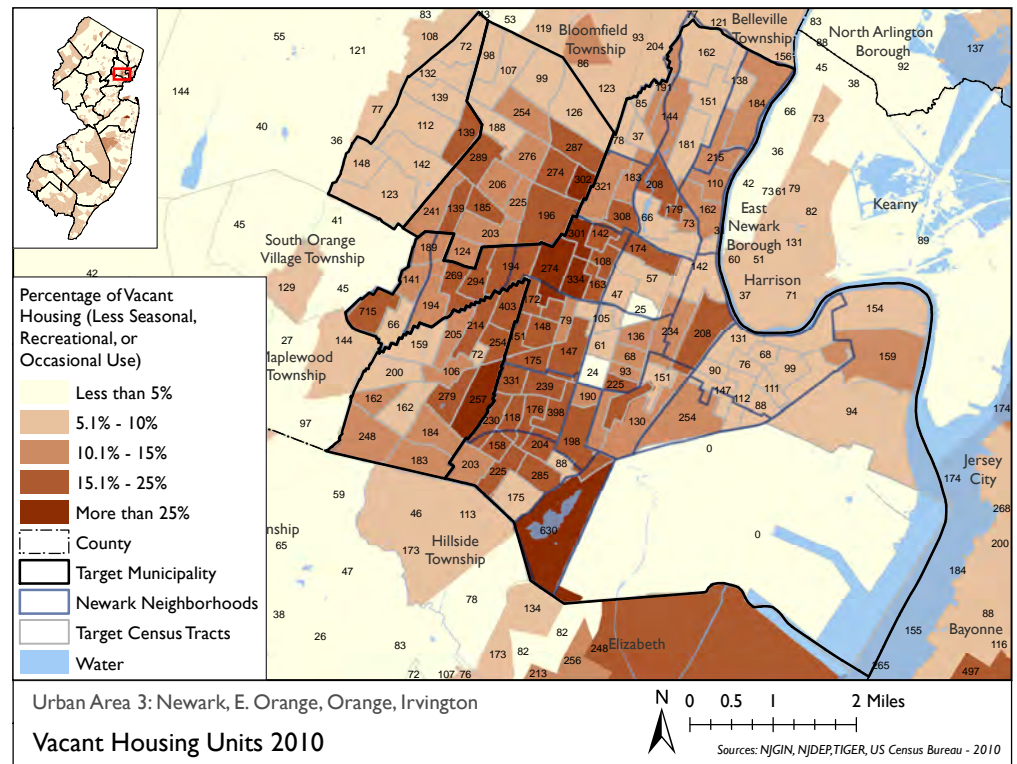
The Rutgers Community Development Studio and The Foreclosure Project (of the RWV Center) have been working closely with organizations in Upper Clinton Hill to understand the foreclosure problems. This neighborhood has struggled with the foreclosure crisis. For residents this has meant borrowers and local investors who have struggled to keep their homes and investment properties. It has also meant that renters have been shuffled around and families who remain have to walk by vacant boarded up buildings and fear fire. Families that lack adequate housing live in poor quality housing, sometimes boarded up buildings, share housing with others, and / or become homeless. The literature on barriers to healthcare would suggest that all of these are barriers to retaining a connection with a primary care doctor and to having access to healthcare services (even before addressing issues related to insurance). The effects of this crisis on children are presumably significant but there have been no studies to explore this. Our observations of the housing data and anecdotal conversations suggest that people move around the neighborhoods seeking housing which may mean that children cannot easily access their elementary schools and/or shift around schools. A few blocks north, a high school graduation went on a summer ago while the entire block, save for one house, was vacant and boarded up.

Weequahic also has some of the highest concentrations of housing built before 1950 when the first of the lead paint laws were put into effect.



Public and Federally Assisted Housing

There are several Project Based Section 8 buildings and public housing projects in these neighborhoods. In Upper Clinton Hill, these include the 88-unit Aspen Temple apartment building, the 21-unit Amity Village #1, and the 115-unit Mt. Calvary Homes. At the northeast corner of Weequahic, in tract 48.01, are two huge high-rise housing projects, the 268-unit Zion Towers (the tallest residential building in Newark) and the 216-unit Carmel Towers, both built at the beginning of the 1970s as Project Based Section 8 housing. Carmel Towers made the news in October 2011, when HUD ended its contract to subsidize the building, dislocating many of its tenants (New York Times, Oct. 26, 2011; Newark Master Plan, 2012). The building, once a hub for drug dealing and violent crime (Star-Ledger, Aug. 2, 2009), had also dismally failed its physical inspections, with a score of 18 out of 100 (The Real Deal New York, Oct. 25, 2011). Zion Towers is also in poor condition, and its owner is working with the city to rehabilitate the building before its HUD contract expires in 2013 (Newark Master Plan, 2012). Another Section 8 Housing location in Weequahic is the much smaller 42-unit Willow Court Towers, which consists of two multi-family buildings. In the Community Workshop, Upper Clinton Hill residents cited a need for more affordable housing (Community Workshop Notes, Newark Master Plan, 2011). Throughout Newark, the wait list for Section 8 housing vouchers is long and wait times can be up to three years, while the cost of rental housing is rising citywide (Community Themes and Strength Assessment, Department of Health and Human Services, 2006). The most recent physical inspections scores suggest that all but one of the federally assisted housing projects are doing better as is the housing authority property. However, the Weequahic properties appear to all be struggling.



In Upper Clinton Hill, Episcopal Community Development (ECD) has been a key player in affordable housing development and community planning efforts. In 2006, it prepared the Upper Clinton Hill Neighborhood Plan, which laid out a variety of redevelopment goals. The 2012 Newark Master Plan has adopted some of these goals, including developing better retail spaces on Clinton and Hawthorn avenues, and reusing vacant lots as community gardens and urban farms (Newark Master Plan, 2012). Neighborhood stabilization and housing rehabilitation also remain priorities for Upper Clinton Hill in the wake of the foreclosure crisis. ECD Properties has been instrumental in rehabilitating and reclaiming foreclosed housing in the area, partnering with the City of Newark and relying in part on funding from the federal Neighborhood Stabilization Program. ECD's target NSP area is located primarily in the blocks north of Clinton Avenue, in census tracts 41, 42, and 54, and along the Irvington border (www.ecdhomes.blogspot.com). Even so, the neighborhood is struggling with the foreclosure crisis as

borrowers continue to struggle, homes are vacant and boarded up, and neighborhood residents and the community organizations that work with them wear thin after what is now five years of extreme effort to make things better.

Table 7a: Upper Clinton Hill: Affordable Housing Characteristics in Focus Neighborhood, 2006-2011

Property Name	Publicly or Federally Assisted	Total Units	Total Assisted Units	Elderly Units	Disabled Units	Physical Inspection Scores					
						'06	'07	'08	'09	'10	'11
Amity Village #1	Federally Assisted	21	21			66	79	81			
Aspen Temple	Federally Assisted	88	87			60	65	82			
Avon Hills Apartments	Federally Assisted	33				69	78	91			
Clinton Hill Community Gardens	Federally Assisted	151	90							27	
Clinton Hill Villa	Federally Assisted										
Mount Calvary I	Federally Assisted	115	114			38	91				
Mount Calvary II	Federally Assisted	115	112				75	89			
Newark Housing Authority	Public Housing	34							76	87	

(US HUD, 2011, 2012, NJ Department of Community Affairs, 2010)

Table 7b: Weequahic: Affordable Housing Characteristics in Focus Neighborhood, 2006-2011

Property Name	Publicly or Federally Assisted	Total Units	Total Assisted Units	Elderly Units	Disabled Units	Physical Inspection Scores					
						'06	'07	'08	'09	'10	'11
Carmel Towers*	Federally Assisted	216				38				18	
Willow Court Apartments	Federally Assisted	42	42				74		38	63	39
Zion Towers	Federally Assisted	268	242							58	

(US HUD, 2011, 2012, NJ Department of Community Affairs, 2010)

*No longer covered by HUD

The Urban Institute was doing a panel study of HOPE VI housing residents and learned that many of them suffered from health problems and that is why they struggle to keep jobs and live in assisted housing. These public and federally assisted housing projects may be a place where health institutions, healthcare collaborations, and nonprofit organizations can go to learn about the specific healthcare problems and the barriers to accessing healthcare. Addressing just this population may improve community health. The Healthcare Collaborative in Camden found that residents in a building like this were cycling through the hospitals. They've since increased access for residents to primary care.

Crime

Since it was named most dangerous city in the US by *Time Magazine* in 1996, crime rates have fallen significantly in Newark (Luxenberg, National Real Estate Investor, May 2011). Between 2000 and 2010, the citywide rates for robbery, assault, auto theft, burglary, and arson decreased. However, Newark violent crime indices remain higher than US averages (city-data.com). In particular, violent crime continues to be a serious problem in Upper Clinton Hill, where the streets north of Clinton Avenue, near the border with Irvington, have historically been a hot spot for gunshot wounds (Stout, 2005). The 5th Precinct, which serves the South Ward, is housed in a new building in Upper Clinton Hill at the intersection of Clinton and Bergen avenues (Star-Ledger, Nov. 14, 2011). Community organizations, residents, the city and The Trust for Public Land have transformed a long park off of Seymour Avenue behind a public school twice to ensure that the space was safe and available for public recreation.

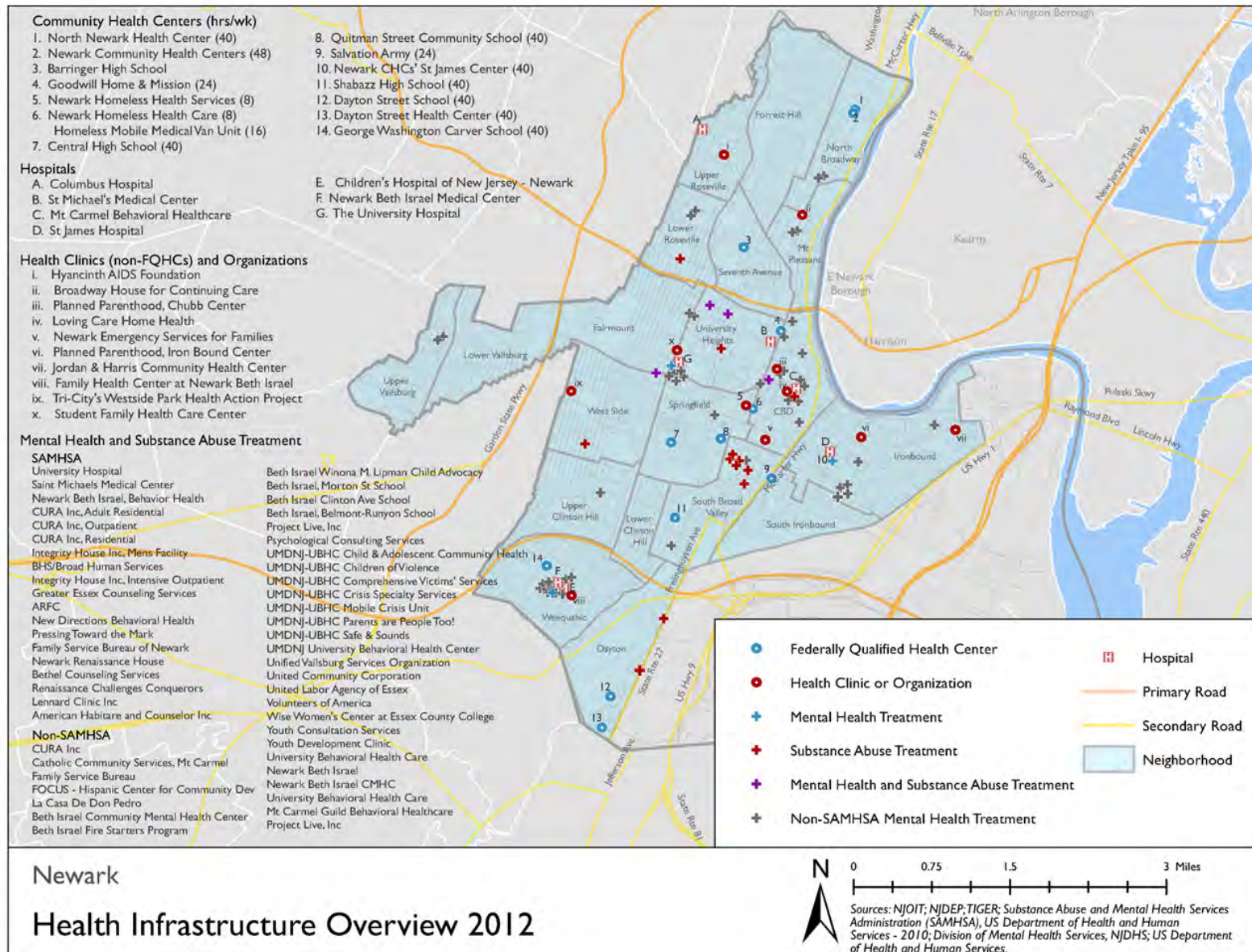
The Community Themes and Strength Assessment from Newark's 2007 City Health Plan cited gang violence among youth as a major problem contributing to health issues in the South Ward. The threat of gang violence makes it more difficult for providers to offer services in neighborhoods and discourages residents from leaving their houses to exercise or seek medical help (*Community Themes and Strength Assessment*, Department of Health and Human Services, 2006). Residents in Community Workshops, particularly in Weequahic, expressed an urgent need for constructive youth development programs and activities to prevent gang membership and violence (Community Workshop Notes, 2011). Weequahic lacks the deep organizational infrastructure that is present in some other Newark neighborhoods. While there has been, from time to time, a real grassroots presence of individuals in the neighborhood who work to engage youth and others, the neighborhood lacks the organizational capacity that is present in a Mt. Pleasant with La Casa.

Health

The City of Newark's 2007 Health Plan listed some key barriers to healthcare in the South Ward, such as high cost of prescription medications and long wait times at the nearby hospitals, including Beth Israel Medical Center in Weequahic, and University Hospital and Saint Michael's Medical Center in the Central Ward (Community Themes and Strength Assessment, Department of Health and Human Services, 2006). Childhood rates of obesity and being overweight are some of the highest in the country. For children 3 -5 years old, 45% are either overweight or obese. 47% of children 6 -11 years old are also either obese or overweight. 48% of children between 3 - 18 do not eat enough fruits and vegetables as recommended. Additionally, as children, they eat less and less fruits and vegetables. 36% of parents say the their food store does not carry a wide selection of quality produce. Only 30% of Newark children meet the requirement of being physically active for 60 minutes a-day. One fifth of children do not even have a park nearby to play in. Also, because of the high rates of violence and crime in Newark, children may not always play outside, or are highly restricted to time spent outside (NJ Health Kids).

Another barrier to health care throughout the South Ward is access to nutritious food (Community Themes and Strength Assessment, Department of Health and Human Services, 2006). The Reinvestment Fund's 2011 map (<http://www.trfund.com/TRF-LSA-widget.html>) shows Upper Clinton Hill as a Limited Supermarket Access area, defined as a location "where the residents must travel significantly farther to reach a supermarket than the 'comparatively acceptable' distance traveled by residents in well-served areas" (The Reinvestment Fund, Searching For Markets, 2012). The Rutgers Community Development Studio (2010) concluded much the same thing a few years earlier.

Organizational Infrastructure



Hospitals in Newark have long been overcrowded, and they lack sufficient funding to treat the many uninsured patients who flood their Emergency Rooms (Community Themes and Strength Assessment, Department of Health and Human Services, 2006). In 2008, the Catholic-run Saint James' and Columbus hospitals closed, placing additional pressure on the remaining hospitals to accommodate more patients. Both Saint James and Columbus Hospitals have since reopened as satellite campuses of Saint Michael's, providing specialized services (Star-Ledger, Feb. 11, 2010 and Oct. 5, 2010).

Greater Newark Health Care Coalition

Spearheading the city's efforts to address health care delivery issues, the Greater Newark Health Care Coalition grew out of a group formed in 2008 to facilitate inter-hospital collaboration, modeled after the Camden Coalition of Health Care Providers. Funded in part by The Nicholson Foundation, its members include the city of Newark, local hospitals, the state health department, and the Community Health Centers. It aims to target vulnerable populations such as addicts, the chronically ill, the homeless, and the uninsured through proactive outreach to decrease their reliance on ER visits (*Star-Ledger*, Nov. 13, 2011).

Beth Israel Medical Center

Weequahic is home to Beth Israel Medical Center and the Children's Hospital of NJ on Lyons Avenue. In addition to providing healthcare services, they are important employers for the South Ward. The hospitals offer direct care, emergency services, and a variety of outreach programs. There is no one easy access point to identify all of the ways the hospitals reach into communities and it takes a bit of digging to find all of their resources. Outreach programs include occasional health fairs and free health screenings scheduled in partnership with city schools and other organizations. Newark Beth provides a wealth of services including a community mental health center and very specific services like the Newark Beth Israel Fire Starters program which provides mental health services to children who start fires, the Winona M. Lipman Child Advocacy Center. The Beth provides mental health counseling and conflict resolution for individuals and children in the Morton St. School, Clinton Avenue School and Belmont/Runyon school.

Most recently, they have been working on a well publicized program to improve health through diet, nutrition education, and improving access to fresh produce. With the help of Shaping NJ, Beth Israel partnered with Lorraine Gibbons at Garden State Urban Farms to create a year-round farmers market on Thursdays to bring food to the hospital for employees and community members. Barbara Mintz, the Vice President for Wellness at the Beth, runs programs there to reduce obesity. The market accepts WIC and Seniors Farmers Market Nutrition Program coupons. Given the success of this program, the partners created a community garden/urban farm on Beth-owned property in 2011. Dietitians from Beth Israel offer a nutrition education, anti-obesity, and fitness curriculum through the Merck-funded KidsFit program at neighboring George Washington Carver School and Maple Avenue Elementary School (www.barnabashealth.org and www.gardenstateurbanfarms.com; www.barnabashealth.org; Shaping NJ, 2012). The program objectives are to improve overall health and reduce obesity. "Wellness and Fitness Specialist Kerry Orssi teaches the students to read food labels, identify fruits and vegetables and taste new foods. "With the farm next door to the school we have the opportunity not only to teach the kids about the foods but also to experience growing food. The students are learning to start seeds in the classroom and then transplant them outside at the farm... we create food art, teach kids how to cook and eat" (Shaping NJ). It also provides job training opportunities for people with disabilities and for ex-offenders. And the farm is contributing to community building as older community members share their experiences and what they like to eat at the farm (Shaping NJ).

Federally Qualified Health Center at George Washington Carver School

Also in Weequahic, there is a Federally Qualified Health Center at George Washington Carver School, run by Jewish Renaissance Medical Center. The center provides dental care, physical exams for children, sports physicals, immunizations, gynecological visits, behavioral health care, and youth counseling. However, it requires all patients to have immigration papers or insurance (<http://www.nps.k12.nj.us/2286107115523247/site/default.asp>). It helps families apply for insurance programs and for those who lack insurance (including Medicaid), the Center absorbs the cost or uses charity care dollars. It strives to be the primary care facility for children through adulthood. Their funding is strong, so their ability to serve children on a regular basis and maintain a medical relationship with them is also strong. Although the FQHC is offered to all children and is going to expand to adults, and even faculty, the one located at George Washington Carver School struggles to have parents make regular appointments, check-ups, and follow-ups for medical and dental care. They think that families may not yet trust the organization that has come into their community. Administrators and other organizations have not always helped to spur trust. At some schools, the administrators are very supportive and help to connect families to the services. At other schools, school nurses may feel like their jobs are threatened. Non-profits may not be eager to send people to the center because it means lost income if they provide a similar service. They also struggle to hire doctors willing to work in these urban schools, especially with the widespread violence of Newark (Interview, 2012).

Clinic at James C. White Manor

Just outside of the focus area boundaries for Upper Clinton Hill is the neighborhood's only clinic, a branch of Newark Community Health Centers FQHC. This clinic is located on Bergen Avenue at the northeast corner of the neighborhood in James C. White Manor, a 206-unit public housing development for seniors. There are also private medical practices on Clinton Avenue and Madison Avenue, including two pediatricians and a few internists (Interview, 2012).

Samuel L. Beliner School of Personal Growth and Academic Development

The Samuel L Beliner School of Personal Growth and Academic Development located on Montgomery Ave, is a district-wide special needs school for children K - 8. The school has created a partnership with UMDNJ's University Behavioral Healthcare program to offer a partial hospitalization program. For children who need more care than the school can provide, but it is unnecessary for them to be hospitalized full time, this program comes into play. As of now they have one classroom in the school that provides a classroom aide for the student during the school part of the day. The classroom aide follows the child to the therapeutic sessions in the afternoon. Newark provides transportation services. They would like to expand this program to other schools, but there is a barrier caused by Newark, they have been unwilling to support this kind of programming as being part of the school day.

AD House Family Resource Center (<http://www.adhouse.org/mission/>)

AD House provides a variety of services to "at-risk" youth and families, focusing on literacy, violence prevention, and health education. Its health programs have included prenatal care initiatives for pregnant teenagers. AD House is primarily an after-school program serving at-risk teens. They currently serve 25 students referred by the Division of Youth and Family Services. They connect with the families of these students only by phone. However, apart from the after-school program, they have an outreach person on staff, and they work with pregnant mothers in the neighborhood. About 25% of their programming is health-related. They do monthly workshops in which Planned Parenthood teaches sessions on sexual health, HIV/AIDS prevention, and other health issues. They offer the Immunization Plus program for mothers with children 0-36 months. They send mothers to the WIC office (supplemental nutrition program) to make sure they are getting milk and other necessities. They hold a quarterly workshop for the mothers, where they bring in facilitators from various health agencies (Blue Cross Blue Shield, Health Department), and also offer free health screenings. The primary goal is to make sure mothers are getting their children immunized. The Immunization Plus program was born from their prenatal care program, which they had for 12 years before the state funding was terminated. The prenatal care

program offered counseling, appointments with nurses/doctors, and WIC on-site (and child care so pregnant women could receive health services without having to worry about where to leave their kids). The prenatal care program was important for the neighborhood and they wish they could still offer it. Often mothers who come in for prenatal care would present other health issues, sometimes untreated, particularly high blood pressure (often undiagnosed), and diabetes (sometimes related to obesity). Some were seeing doctors regularly, but some were not, and used ER visits as their only source of care. Barriers to care include lack of insurance, complicated insurance procedures so that even people who have it don't know how to use it, lack of health facilities nearby and difficulty with transportation to Beth Israel or UMDNJ, unfriendly staff at hospitals who treat patients badly because of their appearance, long wait times, and too many other problems in women's lives such that getting health care is low priority for them. Most important potential health improvements would be a clinic nearby that's easily accessible, and more places that serve uninsured patients (Interview, 2012).

Beth Israel Family Success Center (http://www.barnabashealth.org/hospitals/newark_beth_israel/press/2012/family-success-center.html)

Run by Newark Now, this Family Success Center relocated to Beth Israel Medical Center in 2012, becoming the first hospital-based Family Success Center in New Jersey. Like other FSCs, it offers a range of services including help with Medicaid and NJ Family Care insurance applications, Legal Services Referrals, online SNAP (Food Stamp) applications, financial literacy workshops, food pantry resources, parenting workshops, referrals for HIV, employment assistance, and senior citizen services (Interview, 2012).

Greater Life Community Outreach Center (<http://www.greaterlifenewark.org/main/programs>)

Greater Life Community Outreach Center is a faith-based nonprofit organization offering after-school enrichment programming, mentoring, and a drop-in center for youth. It runs a "Family Institute" program offering crisis intervention, financial literacy, and health & wellness education. In addition, the Outreach Center participates in community organizing efforts, providing a meeting space for local block associations and the Weequahic Homeowners Coalition.

Sisters Network Newark (www.sistersnetworkinc.org)

The Sisters Network is a breast cancer survivorship organization for African American women. It provides support groups, free mammograms, health fairs, and advocacy.

Outstanding Health Needs

These communities have many outstanding health needs. They lack primary healthcare, dental care, and mental health care. They need better linkages between communities and healthcare services and efforts that bring these services to community residents.

Transportation

Both Upper Clinton Hill and Weequahic are not accessible by rail. However there is public transportation in the form of buses. In Weequahic there are bus stops along Elizabeth Avenue, Maple Avenue, Lyons Avenue, Bergen Street and Clinton Place. Several bus stops are located near Newark Beth Israel Medical Center. In Upper Clinton Hill there are routes along Clinton Avenue, Fabian Place. There is north south access as well as east west access which means that residents can take a bus to the medical centers but they may have a long walk to make that possible.

Community Organizations

In addition to these formal social service organizations, block associations and other community groups have made efforts to improve their South Ward neighborhoods. For example, in May 2012 the Chadwick Avenue Block Association in Weequahic inaugurated a community garden that residents had planted in a vacant lot near I-78 (Newark NJ Patch, May 20, 2012).

Upper Clinton Hill Community Organizations

AD House Family Resource Center (<http://www.adhouse.org/mission/>)

AD House provides a variety of services to “at-risk” youth and families, focusing on literacy, violence prevention, and health education. Its health programs have included prenatal care initiatives for pregnant teenagers.

Blessed Sacrament (www.bssc.org)

This church offers a food pantry, and a monthly hot meals program. Their website shares tips on how to deal with medical issues such as asthma, arthritis, and nutrition.

ChildSight New Jersey (<http://www.hki.org/working-worldwide/united-states/new-jersey/>)

Partners with Newark schools to provide free eye screenings and eyeglasses for students.

Clinton Branch Library (<http://www.npl.org/Pages/Branches/Clinton/Clinton.html>)

For children and young adults, the library offers help finding materials for homework assignments, picture books for early readers, career resource materials, testing materials for jobs, computers for word processing, internet, and access to electronic resources.

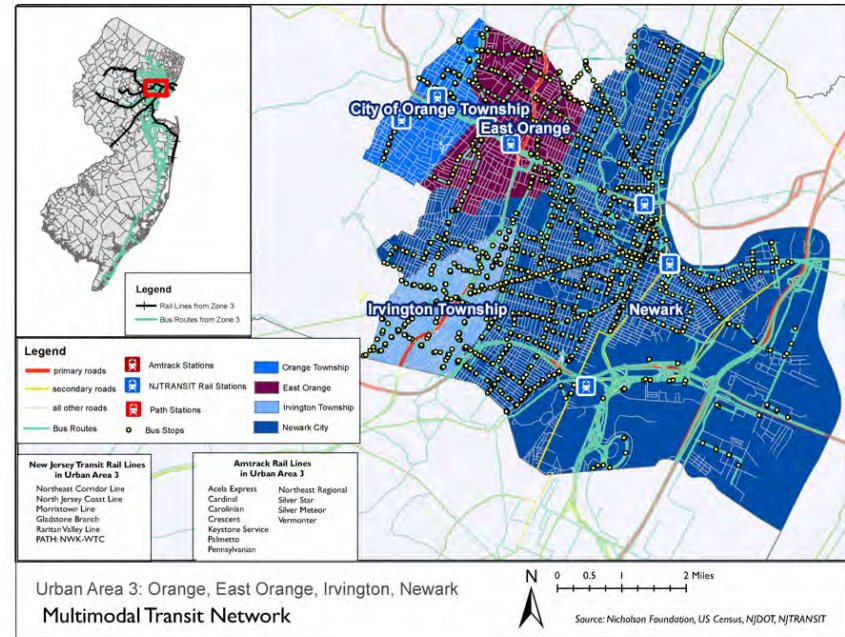
Clinton Ave. Presbyterian Church

Houses a homeless shelter.

Community Hope United Freewill Baptist

Community Church that provides social services (includes housing).

Deliverance Evangelistic Center (<http://www.decministries.net/nehemiah.htm>)



This Baptist church is located in a distinctive 85-year-old building, formerly the B'nai Abraham synagogue, which has been declared a historical landmark. With a grant from the New Jersey Historic Trust, DEC has been restoring the building, and sees this effort as closely linked to the neighborhood's revitalization process.

Episcopal Community Development Corporation (ECD) (<http://www.chcrconline.org/services.html>)

This is the largest CDC working in Upper Clinton Hill. In addition to its neighborhood planning and redevelopment efforts, ECD has been an important advocate for tenant's rights during the foreclosure crisis; it continues to offer foreclosure mitigation counseling and pre- and post-purchase counseling for homebuyers. ECD also houses the Clinton Hill Community Resource Center, which provides social services including youth programs, employment assistance, social service assistance and referrals, and monthly health screenings for adults.

Mt. Calvary Missionary Baptist Church (<http://www.facebook.com/MCMBNEWARK>)

Houses a homeless shelter.

Mt. Vernon Missionary Baptist Church Community Development Corporation (<http://www.yahhouse.com/index.html>)

Focused on aiding disadvantaged families in Newark. It created the Youth Achievement House as a community center to be used through other churches and organizations to unite community. They offer counseling, business space, cultural, educational, health and recreational services.

North Porch Women and Infant Center (<http://www.northporch.org/index.html>)

Also affiliated with the Episcopal Diocese of Newark, North Porch provides seven-day emergency supplies for women and babies, including formula, baby food, diapers, clothing, and bed linens.

Weequahic Community Organizations

Beth Israel Family Success Center (http://www.barnabashealth.org/hospitals/newark_beth_israel/press/2012/family-success-center.html)

Run by Newark Now, this Family Success Center relocated to Beth Israel Medical Center in 2012, becoming the first hospital-based Family Success Center in New Jersey. Like other FSCs, it offers a range of services including help with Medicaid and NJ Family Care insurance applications, legal Service Referrals, online SNAP (Food Stamp) applications, financial literacy workshops, food pantry resources, parenting workshops, referrals for HIV, employment assistance, and senior citizen services.

Elizabeth Ave. Weequahic Presbyterian Church

Houses a homeless shelter and a food pantry

First Timothy Baptist Church (<http://www.facebook.com/pages/First-Timothy-Baptist-Church/116066075075118>)

Houses a homeless shelter.

Greater Life Community Outreach Center (<http://www.greaterlifenewark.org/main/programs>)

Greater Life Community Outreach Center is a faith-based nonprofit organization offering after-school enrichment programming, mentoring, and a drop-in center for youth. It also runs a “Family Institute” program offering crisis intervention, financial literacy, and health & wellness education. In addition, the Outreach Center participates in community organizing efforts, providing a meeting space for local block associations and the Weequahic Homeowners Coalition.

Sisters Network Newark (www.sistersnetworkinc.org)

The Sisters Network is a breast cancer survivorship organization for African American women. It provides support groups, free mammograms, health fairs, and advocacy. (www.sistersnetworkinc.org)

Weequahic Branch Library (<http://www.npl.org/Pages/Branches/Weequahic/Weequahic.html>)

This public library provides some after-school youth activities.

Works Cited

- Augenstein, Seth. 2011. "Newark Coalition Strives to Treat the Weak and Uninsured outside the ER." *The Star-Ledger*. November 13. http://www.nj.com/news/index.ssf/2011/11/newark_coalition_strives_to_tr.html.
- Beckley, Kindal. 2012. New Jersey Director. Childsight NJ. Phone interview. December.
- Beth Israel Medical Center. 2012. "Wellness Programs: The Beth Garden." Barnabas Health, n.d. http://www.barnabashealth.org/hospitals/newark_beth_israel/mservices/wellness/beth-garden.html.
- Beth Israel Medical Center. 2012. "KidsFit Newark: A Comprehensive Wellness Program for Kids and Those Who Love Them." Barnabas Health, n.d. http://www.barnabashealth.org/hospitals/childrens_hospital/medical_specialties/kidsfit.html.
- City of Newark. 2012. *Newark Master Plan: Our City, Our Future*. Newark, NJ. September 14. <http://www.newarkmasterplan.com/>.
- "Clinton Hill Community Resource Center: Services." *Clinton Hill Community Resource Center*. <http://www.chcrconline.org/services.html>.
- DEC Ministries. <http://www.decministries.net/nehemiah.htm>
- Episcopal Community Development. 2010. "ECD Target Area." *ECD Homes*. N.p., March 28. <http://ecdhomes.blogspot.com/>.
- Garden State Urban Farms. "Garden State Urban Farms: About Us." N.p., n.d. <http://www.gardenstateurbanfarms.com/about-us/>.
- "Greater Life Community Outreach Center: Programs." *Welcome to Greater Life!* N.p., n.d. <http://www.greaterlifenewark.org/main/programs>.
- "Jewish Renaissance Medical Center: Newark School Based Health Centers." *The Newark Public Schools District*. N.p., n.d. <http://www.nps.k12.nj.us/2286107115523247/site/default.asp>.
- Jackson, Khalilah. 2012. Site Coordinator. Newark Now Family Success Center at Beth Israel Medical Center. Phone interview. December.
- Livio, Susan K. 2010. "Former Saint James Hospital in Newark to Reopen as Health Clinic." *The Star-Ledger*. February 11. http://www.nj.com/news/index.ssf/2010/02/former_saint_james_hospital_in.html.

- Luxenberg, Stan. 2011. "Developers Rediscover Newark." *National Real Estate Investor*. May 18. http://nreionline.com/finance/news/developers_rediscover_newark_0518/.
- Mahon, Robert. 2002. "Prenatal Care Helps At-Risk Pregnant Adolescents Deliver Healthy Babies." *Grant Results Reports*. Robert Wood Johnson Foundation. January. <http://pweb1.rwjf.org/reports/grr/020966.htm>.
- Mays, Jeffery C. 2009. "Boarded-Up and Foreclosed, Houses Await Action by Newark and Partners." *The New York Times*. May 14. http://www.nytimes.com/2009/05/17/nyregion/new-jersey/17newarknj.html?_r=0.
- McCormack, Stacy. 2012. Ag-in-the-City. Phone interview.
- Mcgeehan, Patrick. 2011. "As Newark High-Rise Loses Aid, Fear Sweeps Through Its Tenants." *The New York Times*. October 25. <http://www.nytimes.com/2011/10/26/nyregion/as-newark-tower-loses-us-aid-tenants-fear-eviction.html>.
- Mintz, Barbara. 2012. Assistant Vice President, Wellness. Beth Israel Medical Center. Phone interview. December.
- "Mission: AD House Resource Center." *AD House Resource Center*. <http://www.adhouse.org/mission/>.
- "The Nehemiah Project." *DEC Ministries: Deliverance Evangelistic Center*. N.p., n.d. <http://www.decministries.net/nehemiah.htm>.
- Newark Beth Israel Medical Center. 2012. "Newark Now – Family Success Center (FSC) Program Now Located at Newark Beth Israel Medical Center." *Barnabas Health, Press Releases*. July 23. http://www.barnabashealth.org/hospitals/newark_beth_israel/press/2012/family-success-center.html.
- Pastor, Cristina DC. 2012. "Rebuilding Homes, Lives at Clinton Hill." *LISC & Our Community: Neighborhood News*. LISC Greater Newark. July. http://www.lisc.org/greaternewark/lisc_our_community/neighborhood_news/index.php.
- Peet, Judy. 2009. "A Block in Newark Known for Drugs and Gangs Is Safe, for Now." *The Star-Ledger*. August 2. http://www.nj.com/news/index.ssf/2009/08/a_block_in_newark_known_for_dr.html.
- Read, Philip. 2010. "Newark's Columbus Hospital Reopens as Specialty Hospital for Critical Care." *The Star-Ledger*. October 5. http://www.nj.com/news/index.ssf/2010/10/columbus_hospital_in_newark_is.html.
- Rutgers Community Development Studio. 2010. "Home, Health, Food: Rethinking Community Development in Upper Clinton Hill." Edward J. Bloustein School of Planning and Policy Development.

Shaping NJ. 2012. How a Major Medical Center Helped Its Own Neighborhood Growth Healthy. June. <http://www.state.nj.us/health/fhs/shapingnj/work/publications/Beth%20Israel%20-%20Garden%20State%20Urban%20Farms%20Story.pdf>

Stout, Bruce D. 2005. "Violence in the Greater Newark, New Jersey Area: A Public Health Problem." The Joseph C. Cornwall Center for Metropolitan Studies, Rutgers-Newark. June 22. www.umdnj.edu/vinjweb/webresources/cornwall/cornwall.pdf.

"Tenants Scramble as HUD Abandons Newark Residential Tower" 2011. *The Real Deal New York*. October 25. <http://therealdeal.com/blog/2011/10/25/tenants-scramble-as-the-department-of-housing-and-urban-development-cancels-contract-with-carmel-towers-in-newark/>.

The Associated Press. 2011. "Newark to Unveil New Police Headquarters." *The Star-Ledger*. November 14. http://www.nj.com/news/index.ssf/2011/11/newark_to_unveil_new_police_he.html.

Newark Department of Health and Human Services. 2006. *The Newark Health Plan, Summary: Community Themes and Strengths Assessment*. December 20. http://www.ci.newark.nj.us/userimages/downloads/Community%20Theme%20and%20Strength4_0.pdf.

NJ HealthyKids <http://www.njhealthykids.org/communities/newark/>

The Reinvestment Fund. 2012. *A Summary of Searching for Markets: The Geography of Inequitable Access to Healthy & Affordable Food in the United States*. Rep., 2012. <http://www.trfund.com/resource/downloads/policypubs/SearchingForMarketsSummary.pdf>.

United States Census 2000. *American Factfinder*. 2000. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

United States Census 2010. *American Factfinder*. 2010. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

"Welcome to North Porch!" *North Porch Women and Infants' Centers*. N.p., n.d. <http://www.northporch.org/>.

West, Sandra L. 2012. "From Boxing Gloves to Garden Gloves: Block Association Dedicates Neighborhood Garden." *Newark, NJ Patch*. May 20. <http://newarknj.patch.com/events/from-boxing-gloves-to-garden-gloves-block-association-dedicates-neighborhood-garden>.

Newark

Mount Pleasant

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with
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Funded by The Nicholson Foundation
2013

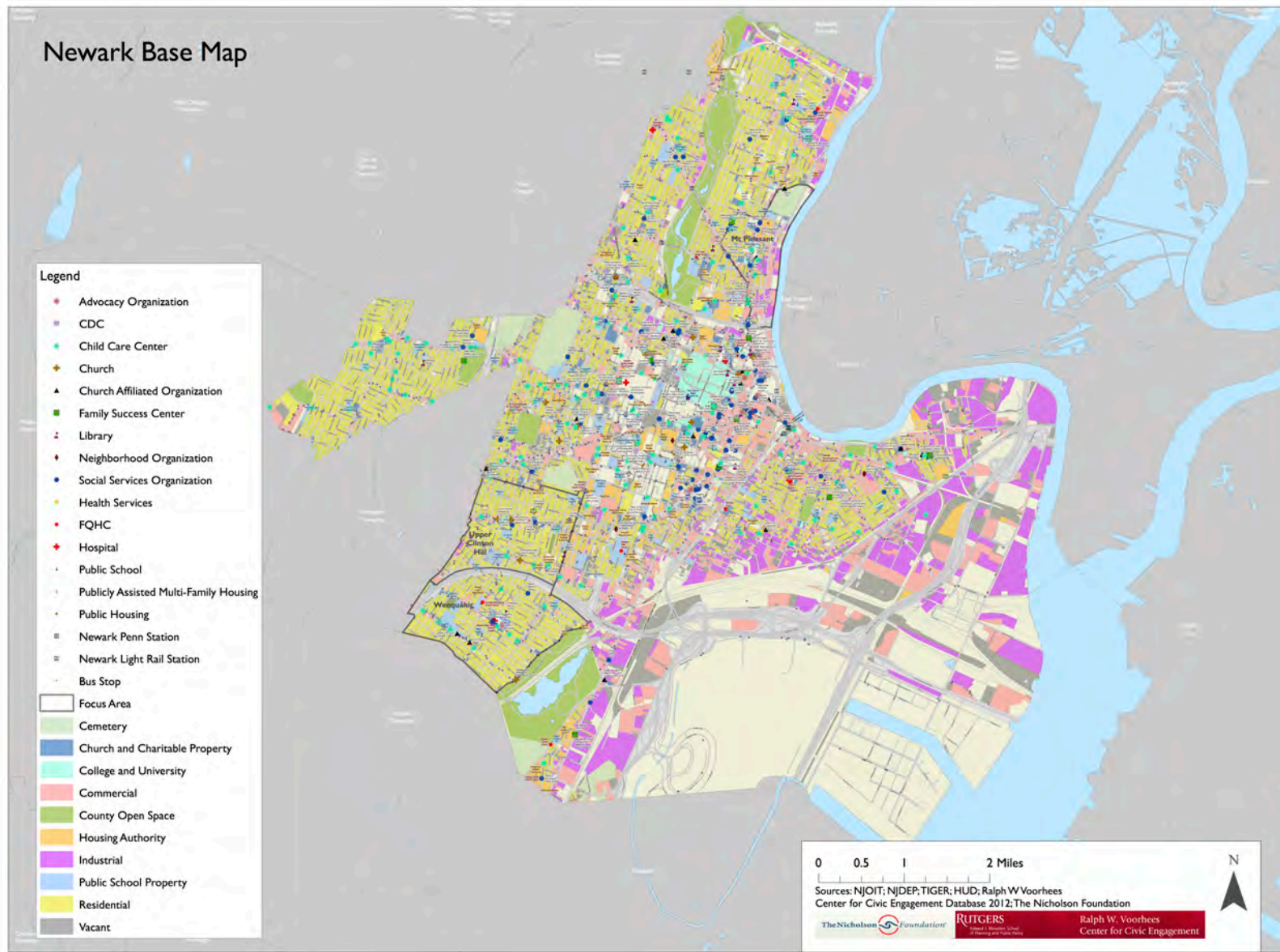


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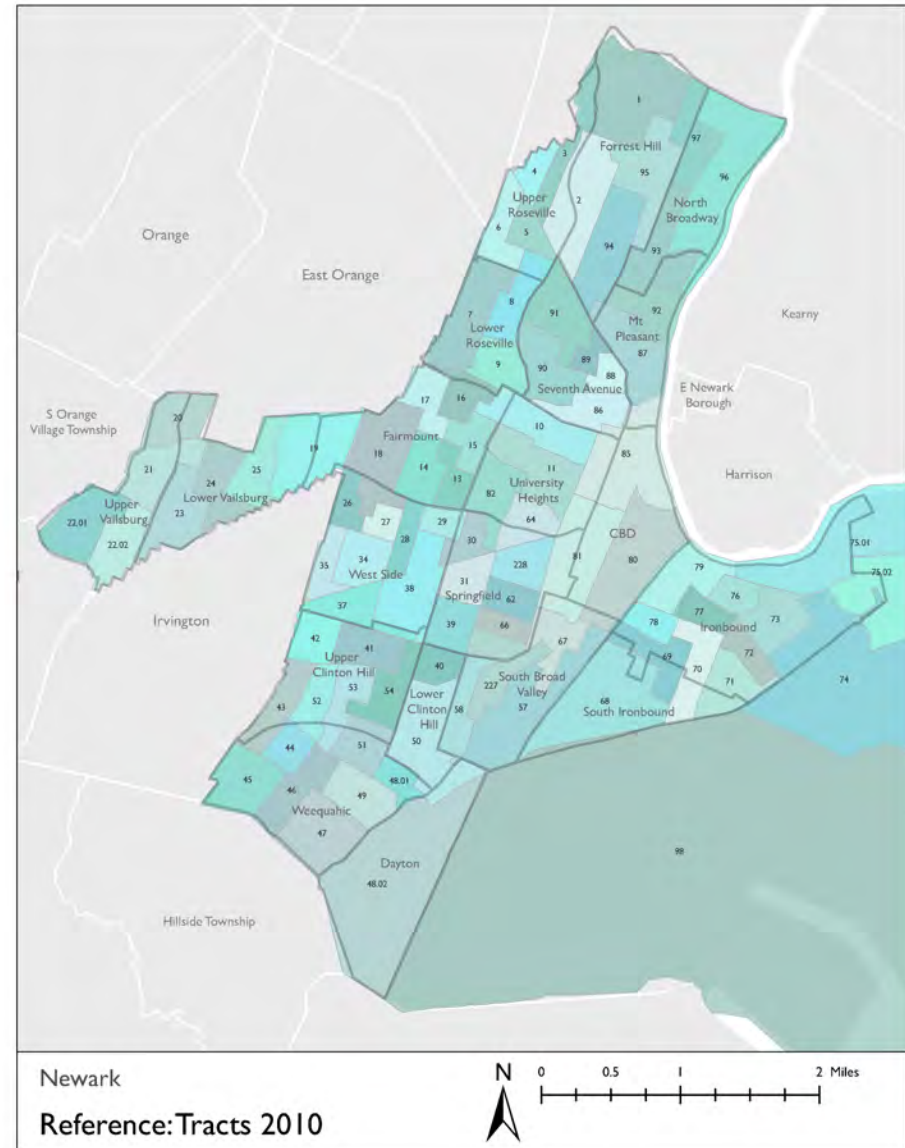
Neighborhood

Mt. Pleasant

Mount Pleasant is a predominantly Latino neighborhood located in North Newark just north of the downtown business district, the thriving Lower Broadway Corridor, east of Branch Brook Park, and just north of an historic train station that provides commuter rail service into Manhattan.

The city's official neighborhood map shows the boundaries as the Passaic River to the east, North Broadway to the north, and Forest Hill and Seventh Avenue to the west. The eastern section around McCarter Highway (Route 21) is commercial and industrial; the western section is primarily residential. Residents describe the residential portion of the area as Mt. Pleasant.

The research team gathered data for census tracts 87 and 92.¹ Part of tract 92 is industrial. The area includes new homes and some Newark Housing Authority redevelopment. The southern end of tract 87 is more industrial. The northernmost portion of Mount Pleasant consists of a 40-acre cemetery, Mount Pleasant's only large open space. The City of Newark announced its Broad Street Station District Redevelopment Plan in 2008 which considers a small section of southern Mount Pleasant for redevelopment (this section is separated from the remainder of the redevelopment zone by Interstate 280). The Broad Street Station District was targeted for its potential to become a vibrant transit-oriented development hub with the hopes that it would lead to further redevelopment (City of Newark, 2008). Today, the community is home to the Studebaker lofts and is described as "a walker's paradise." The lofts are advertised as "adjacent to the Financial District" (Studebakerlofts.com).



¹ Portions of tracts 93 and 229 are located within the official neighborhood boundaries but the Mount Pleasant section of tract 93 encompasses a cemetery, and tract 229 contains industrial and commercial land uses.

Table 1. Characteristics of Mt. Pleasant

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population	7,335	100%	Families (2010)	1,549	100%
Age (2010)			Female-headed with Children	504	33%
Under 5 years	611	8%	Economic (2007-2011)ⁱ		
5-19 years	1,591	22%	Median Household Income	\$29,386 - 34,792	
20-64 years	4,559	62%	Persons below Poverty	2,119	31%
65-74 years	352	5%	Total Civilian Labor Force	3,209	100%
75+ years	222	3%	Employed	2,599	81%
Race (2010)			Unemployed	610	19%
White	2,482	34%	Housing (2010)		
Black	2,025	28%	Total Units	2,358	100%
Asian	56	1%	Vacant Housing Units	277	12%
Hispanic	5,073	69%	Owner Occupied	430	21%
Households (2010)	2,081	100%	Renter Occupied	1,651	79%
Multigenerational	196	9%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Population

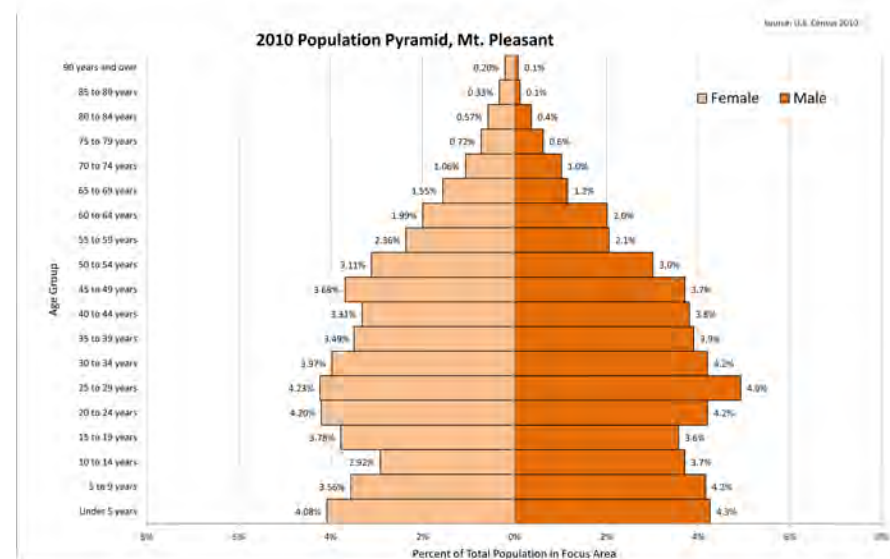
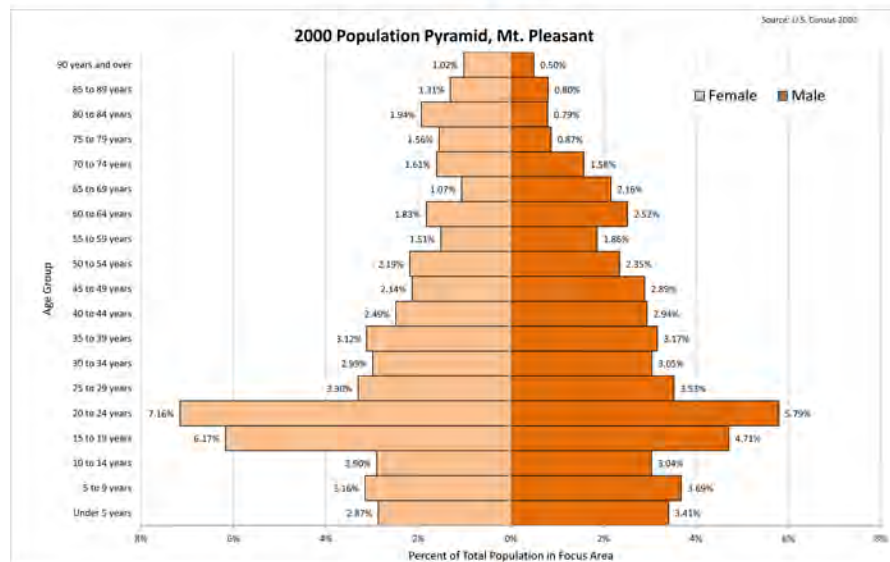
Mount Pleasant was home to 7,335 residents in 2010. It lost 22% (2,100) residents between 2000 and 2010. Census tract 92 lost 40% of its population during this ten year period. Nearly all of that loss appears to have been white and black residents (89%).

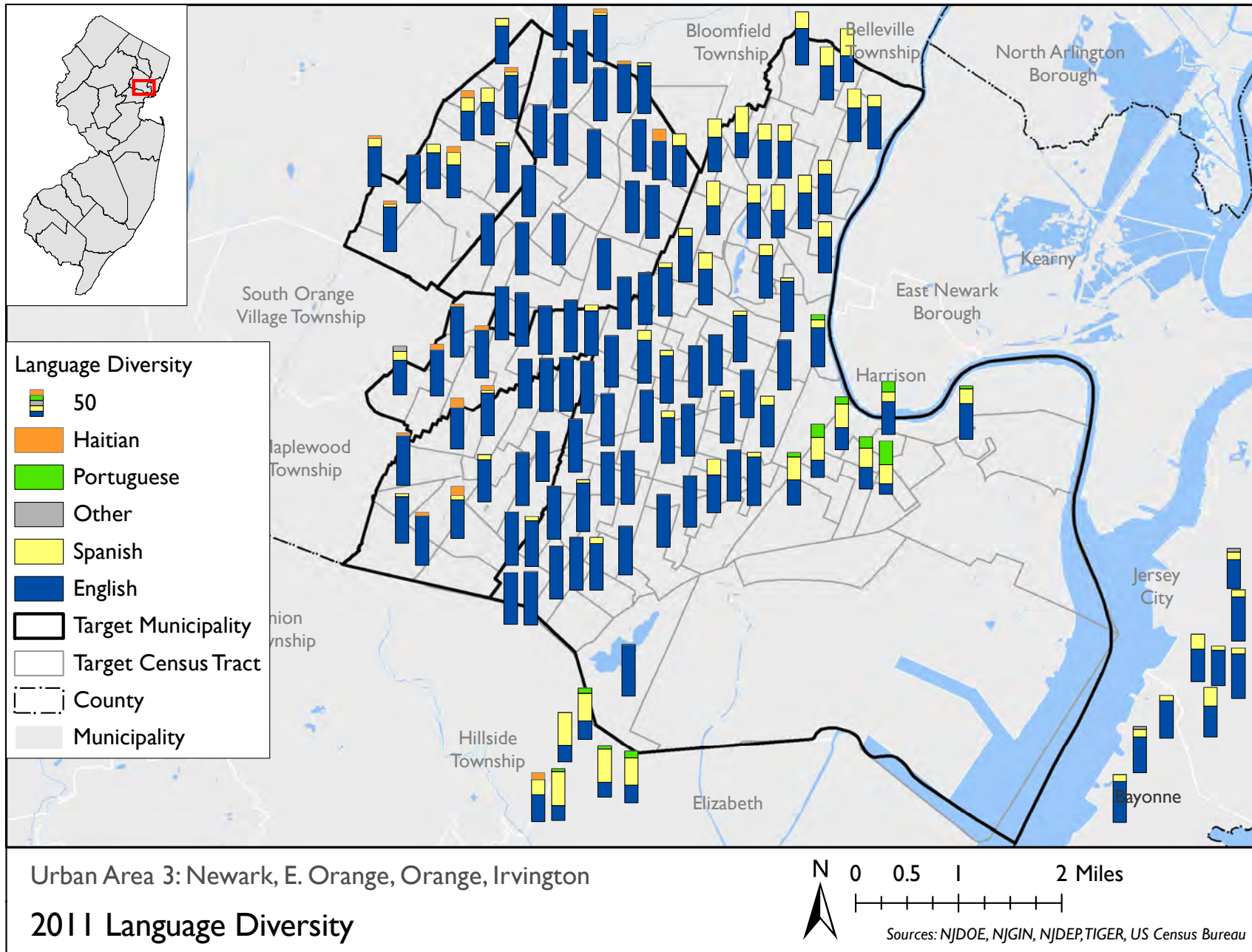
Table 2: Total Population of Focus Neighborhood, 2000 & 2010

Tract	2000	2010	Percent Change
87	4,091	4,107	0.4%
92	5,352	3,228	-39.7%
Mount Pleasant	9,443	7,335	-22.3%
Newark	273,546	277,140	1.3%

(US Census 2000, 2010)

The population is older in 2010 than in 2000 perhaps related to the loss of the public housing units. Compared with other neighborhoods in this study, there is a better representation of teenage males.





As of 2010, Mount Pleasant's population was predominantly Hispanic, with 79% of residents in tract 87 and 56% of residents in tract 92 identifying as Hispanic. Compared to Newark, a smaller share of the population was black (28% compared to 52% citywide.)

Table 3: Racial & Ethnic Representation in Focus Neighborhoods 2010

Tract	White		Black		Hispanic	
	Count	Percent	Count	Percent	Count	Percent
87	1,525	37.1%	739	18.0%	3,259	79.4%
92	957	29.6%	1,286	39.8%	1,814	56.2%
Mt Pleasant	2,482	33.8%	2,025	27.6%	5,073	69.2%
Newark	72,914	26.3%	145,085	52.4%	93,746	33.8%

(US Census 2000, 2010)

Table 4: Changes to Neighborhood's Racial & Ethnic Composition 2000 & 2010

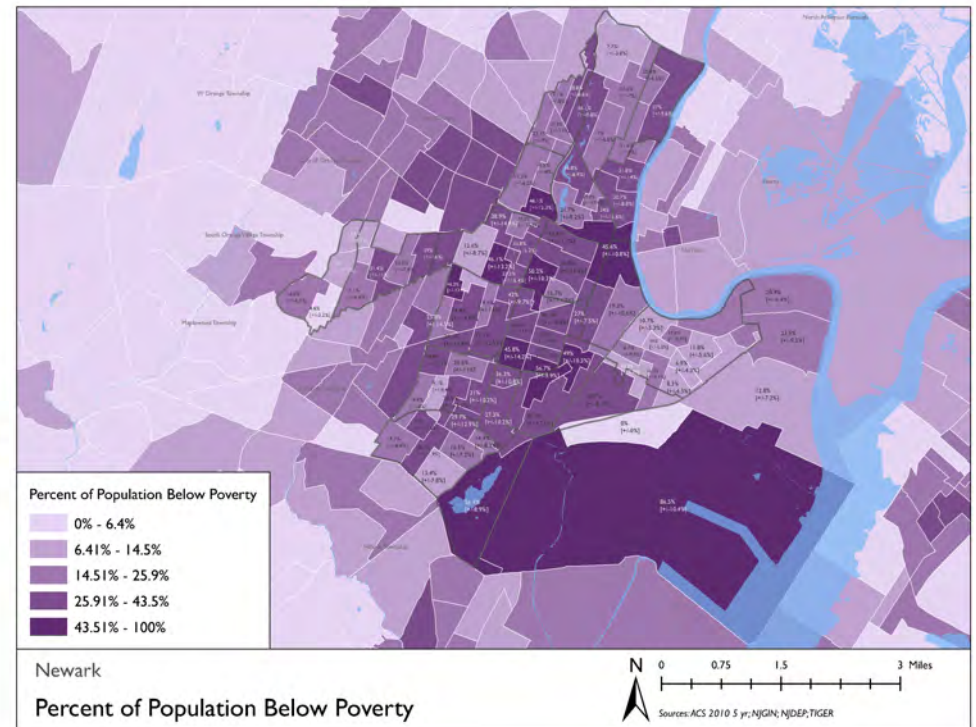
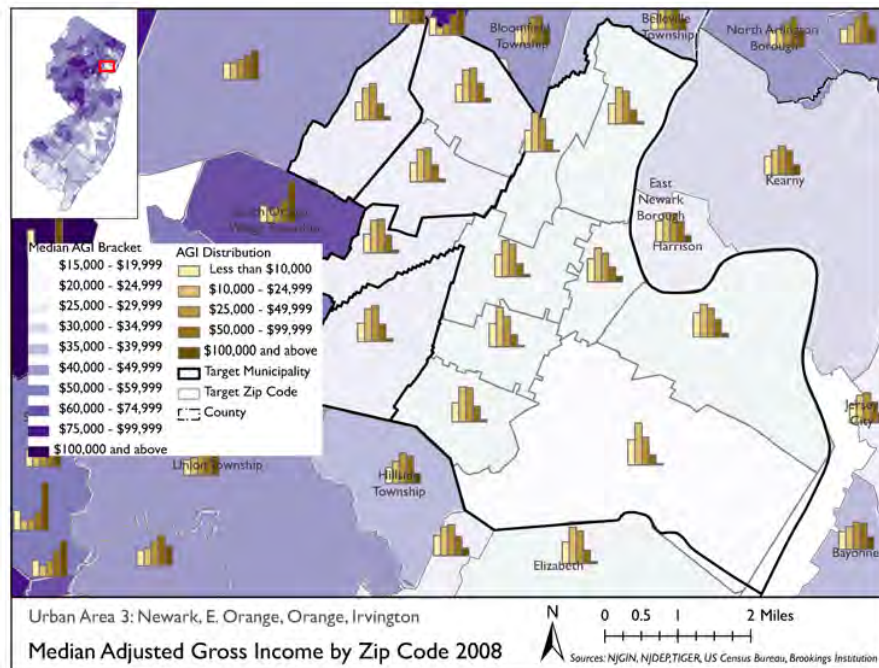
Tract	White		Black		Hispanic	
	2000	2010	2000	2010	2000	2010
87	43.2%	37.1%	13.2%	18.0%	83.3%	79.4%
92	34.9%	29.6%	41.0%	39.8%	35.2%	56.2%
Mt Pleasant	38.5%	33.8%	29.0%	27.6%	56.0%	69.2%
Newark	26.5%	26.3%	53.5%	52.4%	29.5%	33.8%

(US Census 2000, 2010)

Mt. Pleasant is part of a heavily Spanish speaking North Newark. Puerto Ricans moved to the area in the middle of the 20th Century and were later joined by Spanish speaking immigrants from other places. Most recently, Mexican immigrants have moved to the area around Broad Street and Broadway (Interview with La Casa de Don Pedro, 2012). The map above shows the languages families with children in the elementary schools speak at home. The blue part of the bars represents the families who speak English; the yellow shows families who speak Spanish. Nearly 70% of these families speak English as the first language at home but the neighborhood has families who speak other languages too (NJ DOE, 2012).

Income

In 2000, 28% of families in Mount Pleasant were living in poverty, with considerable economic differences between the neighborhood's two census tracts. In tract 92, where substantial Housing Authority properties exist, nearly 38% of families were living below the poverty line, and median household income was a scant \$16,250. Meanwhile, in tract 87, where median household income was \$30,790 (higher than the citywide figure of \$26,913 that year), a far smaller percentage of families were living in poverty, at 21% (U.S. Census 2000). By 2010, 32% (+/- 14%) of people in tract 92 and 31% (+/-9%) in tract 87 were



living below the poverty line (ACS 2010, 5 year).² The 2008 gross income suggests that there are a few high earners but there is a substantial portion of residents in the \$10,000-49,000 range and a considerable number with gross income below \$10,000. A peek at the western suburbs shows very different patterns with many who have gross incomes exceeding \$100,000 (IRS via Brookings, 2008).

² Given the challenges associated with the confidence levels in the ACS 5-year data it's a little difficult to know whether poverty increased in tract 87 or the difference is due to statistical error.

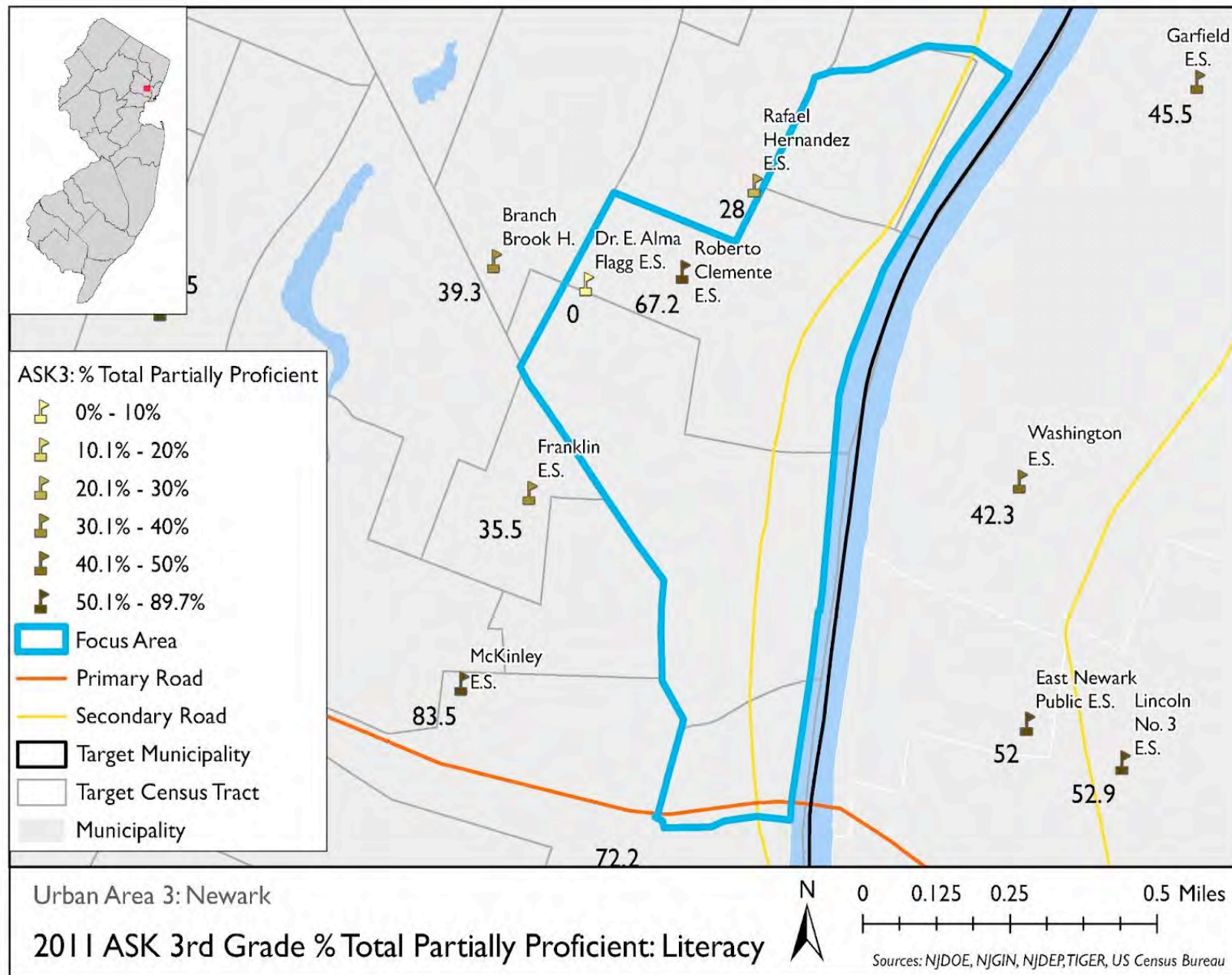
Education

The elementary schools in and around Mt. Pleasant present a mix with two schools - Franklin and Rafael Hernandez - doing fairly well on the 3rd grade literacy exam. Only 36% of students at Franklin and 28% at Rafael Hernandez scored partially proficient. Dr. E. Alma Flagg had 85% of children score as partially proficient. The schools suggest that there is a heavily Spanish speaking population that is relatively mobile which means that they move in and out of schools over the course of the academic year. More than a quarter of students came in and out of Roberto Clemente during the course of the year. Many students in these schools, 19% at Rafael Hernandez, are classified as having disabilities.

Table 5: School Characteristics 2010-11

School	Grade Levels	Total School Population	% Partially Proficient 3rd Grade NJ Ask	First Language Spoken at Home	Students with Disabilities	Mobility	Limited English Proficiency	Student Suspensions
Dr. E. Alma Flagg	K-8	485	85% (09/10)	English - 69% Spanish - 31% Creole - .2% French - .2%	11%	19%	11%	6%
Franklin	Pre K -4	498	36%	English - 52% Spanish - 47% Chinese - .2% French - .2% Fulah - .2%	17%	17%	33%	9%
Rafael Hernandez	Pre K - 8	599	28%	English - 74.9% Spanish - 25.1%	19%	19%	6%	1%
Roberto Clemente	Pre K-4	551	67%	English - 66.2% Spanish - 33% Portuguese - .3% Chinese - .2% Pashto - .2%	8%	26%	19%	0%

(NJ Department of Education, 2011)



Housing

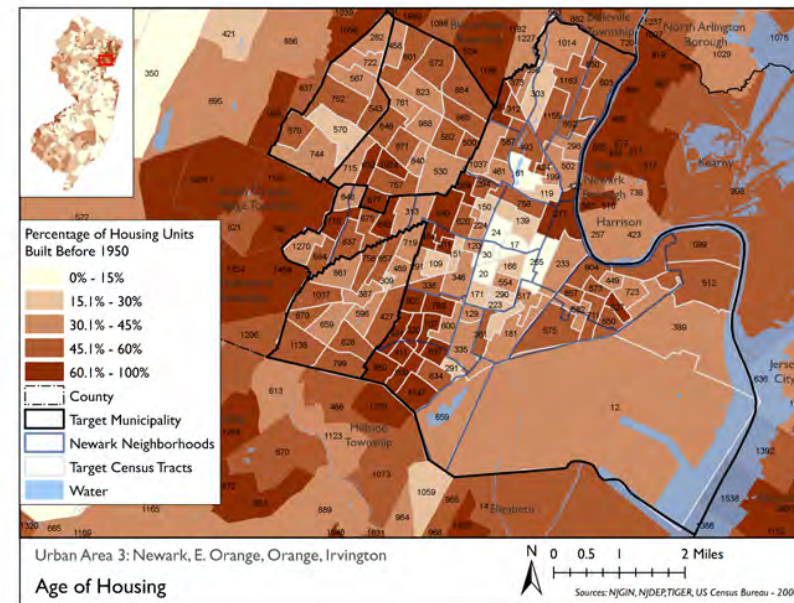
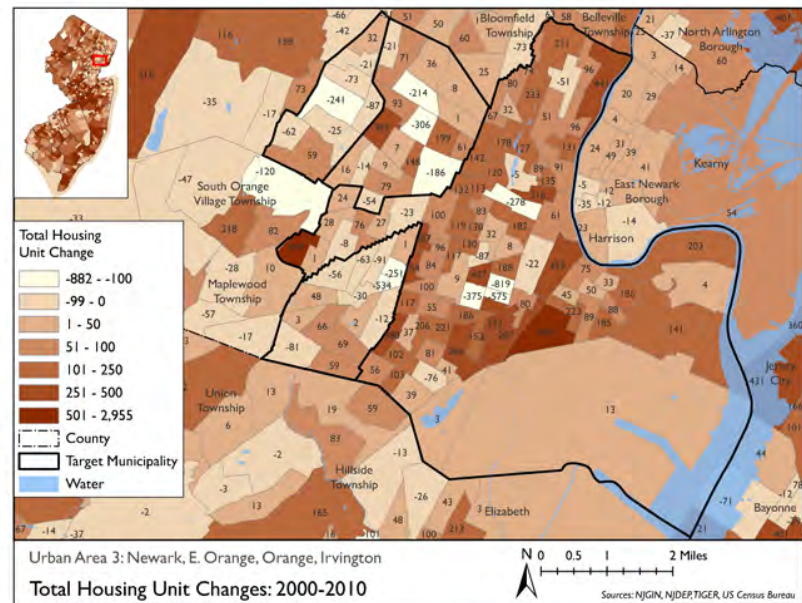
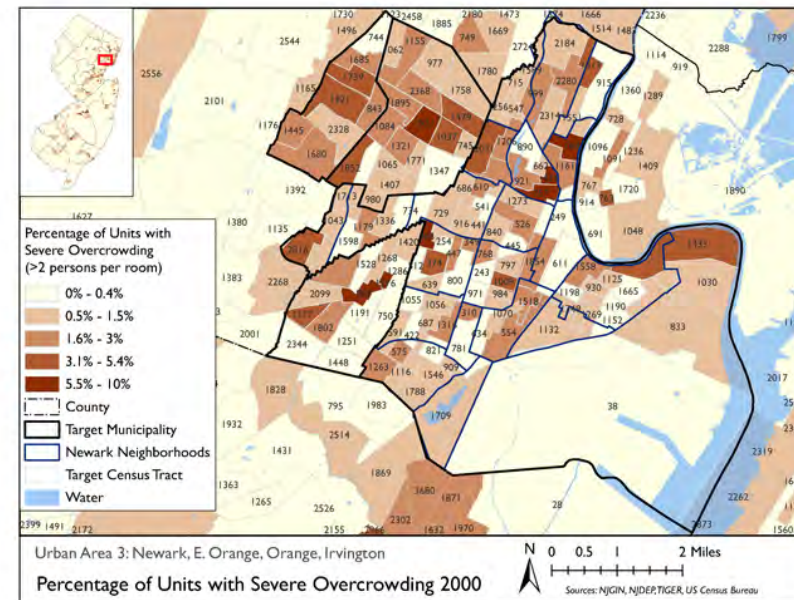
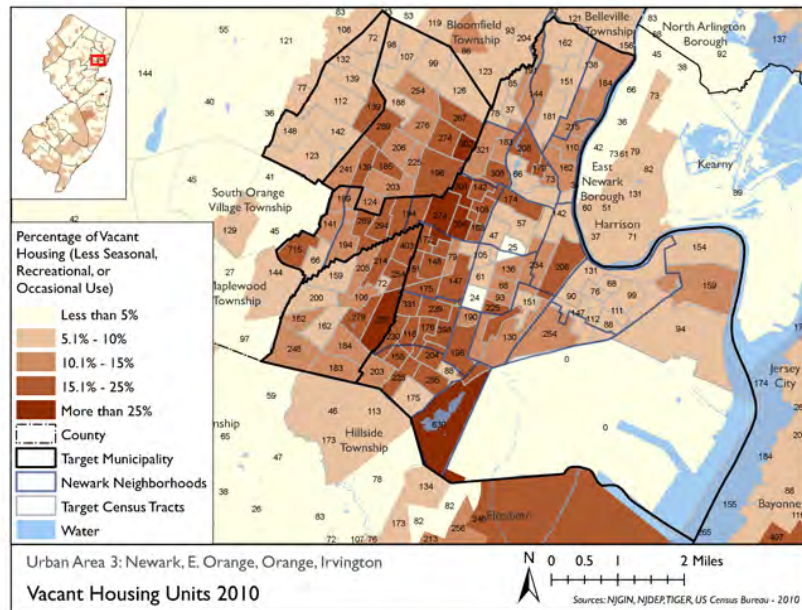
Much of Mount Pleasant's housing stock is located west of Broadway, with the exception of a substantial stock of Housing Authority properties located northeast of the intersection of Broadway and Third Avenue. Tract 92 saw a 15% increase in housing units between 2000 and 2010 related to the redevelopment of an old public housing site. Tract 87 also saw an increase of 7% over that time period (U.S. Bureau of the Census, 2010). As of the first quarter 2012, few housing units in the neighborhood have been vacant. Only 12 in the northern tract and 9 in the southern tract but, on average, they have been vacant for two to three years. About 30-45% of housing was built before 1950 and residents have raised concerns about lead paint and aging housing.

Table 6: Housing Unit Changes in Focus Neighborhoods, 2000-2010

Tract	Housing Units		Percent Change
	2000	2010	
87	1,271	1,362	7.2%
92	865	996	15.1%
Mt Pleasant	2,136	2,358	10.4%
Newark	100,141	109,520	9.4%

(US Census 2000, 2010)

When residents struggle to pay for housing and preserve their homes, they may be unable to afford necessary medical care. While not experiencing the worst of the subprime lending during the peak 2005-2006 years, Mt. Pleasant was the location for many high cost loans. More than 50% of the mortgage originations during the peak 2005-2006 period were high cost. The 2010 US Census shows 10% of the units vacant (U.S. Bureau of the Census, 2010). The median housing value in Mt Pleasant decreased over the last few years as the housing bubble deflated. Trulia (2012) shows prices that dipped as low as \$30,000, which is not uncommon in other Newark neighborhoods. The average listing price of housing in Mt Pleasant is \$151,000. The low average income in this neighborhood and the comparably high housing prices, may help to explain, why the neighborhood has one of the highest shares of overcrowding of any of our focus areas. More than 5% of the units are considered to be overcrowded (U.S. Bureau of the Census, 2010).



Public and Federally Assisted Housing

To the northeast is the highest concentration of public housing projects. Two of the major housing projects are Oriental Village, a multi-family townhouse development built in 1987 located along Broadway at Oriental St., and Newark Genesis Apartments which includes 51 units of affordable rental housing (City of Newark, 2011: 29). HUD's inspections of the townhomes show a low score in 2009 which was improved the following year in 2010 (U.S. Department of Housing and Urban Development PIS, 2012). Although there is no housing counselor located in the community, there are four housing community organizations to help residents with housing needs and questions and nearby La Casa de Don Pedro is a high capacity resource. There is only one group that provides family assisted living, offering 100 units located at Broadway Manor in the southern region. There are concerns about a need for senior housing and about old houses and lead paint.

Table 6: Affordable Housing Characteristics in Focus Neighborhood, 2006-2011

Property Name	Publicly or Federally Assisted	Total Units	Total Assisted Units	Elderly Units	Disabled Units	Physical Inspection Scores					
						'06	'07	'08	'09	'10	'11
Townhouses - Oriental Street	Public Housing	95							53	82	

(US HUD, 2011, 2012)

Crime

Newark's North Precinct is located on Lincoln Avenue near Broadway in Mt. Pleasant. In the past 6 months there has been one homicide, about 20 robberies, fewer than 20 breaking and entering incidents, and 7 assaults. Most of the activity occurred in the western region on the border and in the south near Route 280.

Health

Health Issues

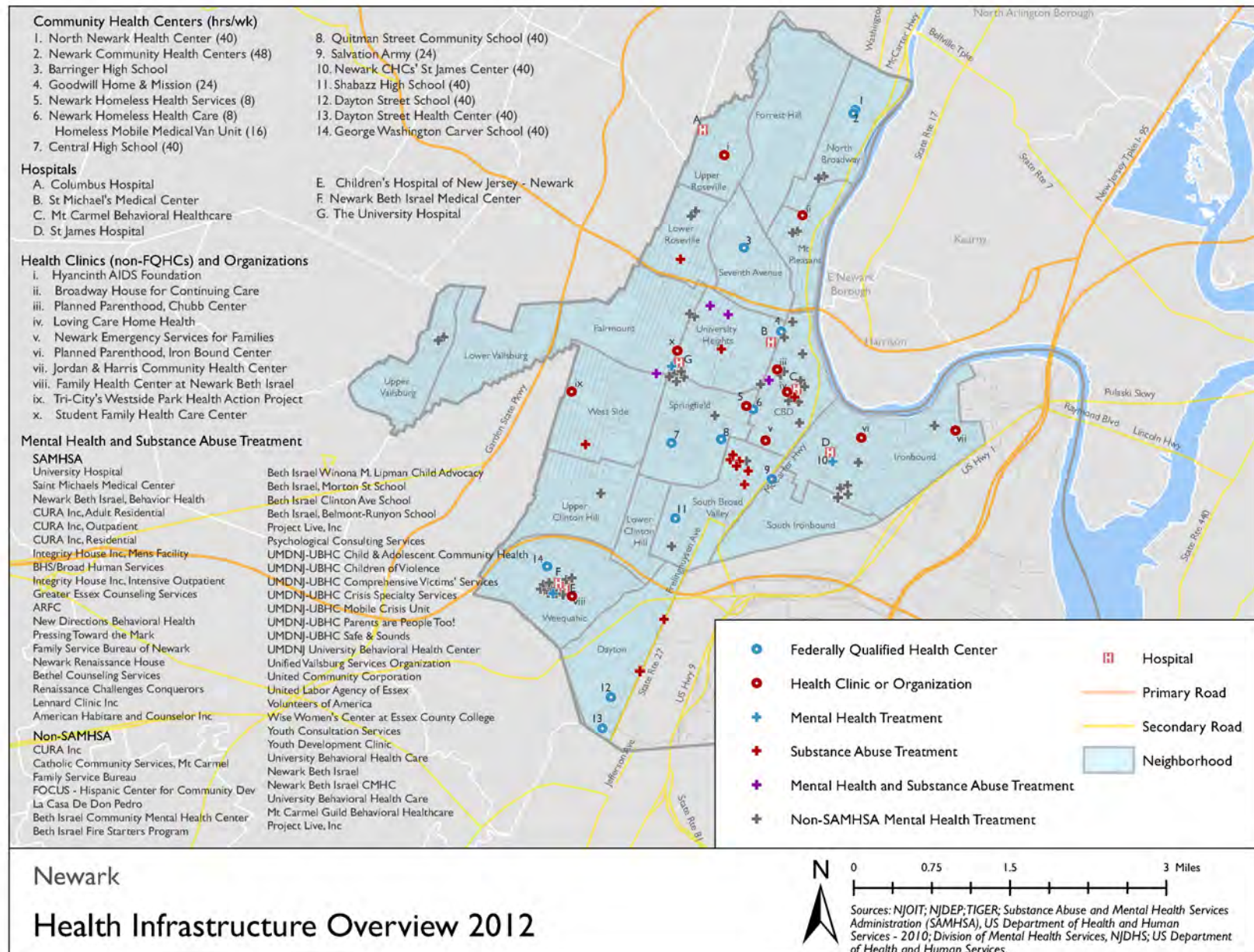
Community members and leaders are concerned about a variety of health issues including diabetes, high blood pressure, obesity (adults and children), lead poisoning (some suggest this is a problem and others haven't seen it as often), and crime (Interviews, 2012). The City of Newark's 2007 Health Plan identified barriers to accessing care which suggest that many of the factors in play a decade ago when we looked at this in the Central Ward, were still in play a few years

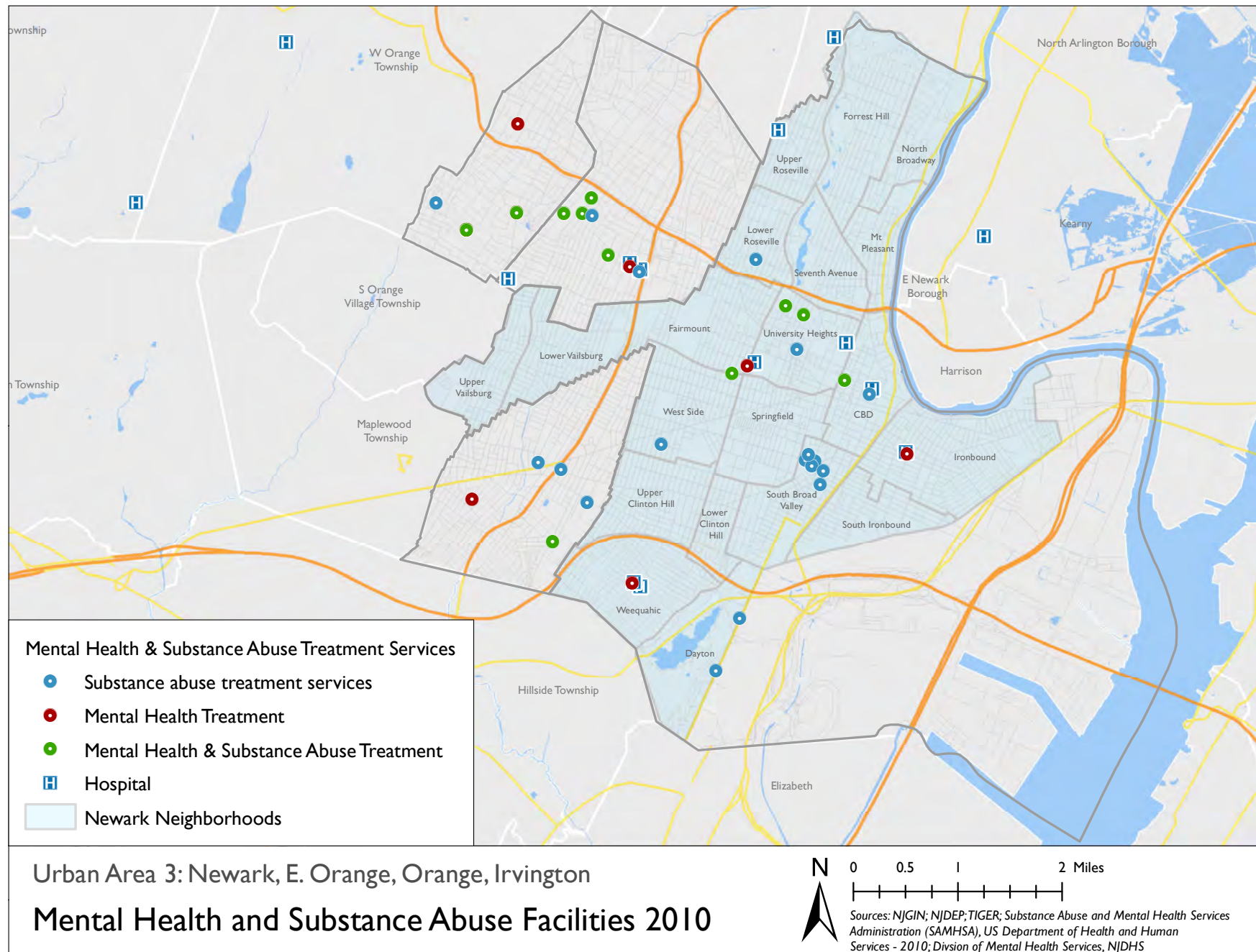
ago in the North Ward (Newark Department of Health and Human Services 2006: 73-74, 91). There are few health care providers near the neighborhood which we confirmed in our healthcare infrastructure map. The neighborhood is without a community health center, federally-qualified or otherwise, and has no mental/behavioral health or substance abuse facilities. We found fewer than ten health practitioners with offices in the neighborhood. There is the New Vista Nursing and Rehabilitation Center and Broadway House for Continuing Care for people with HIV/AIDS. The Newark 2007 study noted that the lack of doctors results in waits of up to three months to see a doctor (City of Newark, 2007).

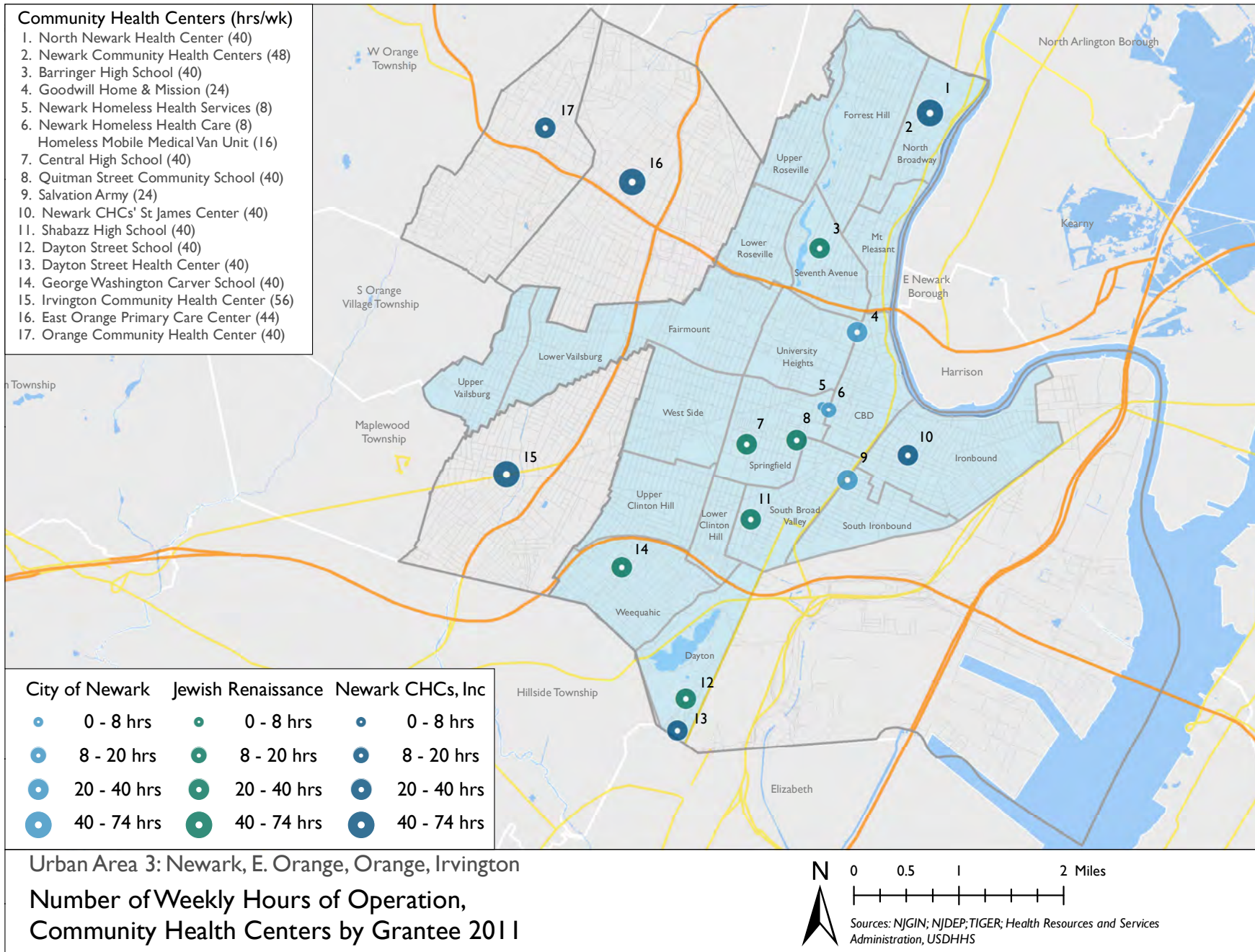
Community organization staff members emphasize that the lack of primary and specialty care doctors is a significant continuing problem in the neighborhood. They observed that there are very energetic partnerships between community groups and local hospitals to provide screenings but it is often difficult for people to see primary or specialty care doctors for follow up. Interviewees provided a few explanations for this. First, there just aren't many providers in the community. Second, many people lack documentation which makes many services unavailable or seemingly unavailable like the charity care programs at some hospitals. Third, even if people have documentation, they may not know about the charity care programs, how to apply, or how to navigate the process. If you've ever had to deal with illness, having to navigate this on top of being frightened and ill could very well explain why some people do not avail themselves of services. Fourth, they may lack the money to pay for follow-up services. Fifth, they may lack access to transportation or money to pay for it. Because of these challenges, community leaders say that many people don't get screened and don't seek help until they have little choice and wind up in the hospital. Even the dental screenings produce the same problem in that people can get screened but the services are too expensive making follow-up difficult. Community leaders suggested that further integrating the hospitals and direct providers into the community would greatly facilitate access to these providers for local residents (Interview, 2012). Another interviewee explained that they provide services but many people do not understand how important eye care is. NJKidcare provides vision care but providers thought that families are not making use of the services or getting the eyeglasses. Some children don't like wearing them and feel stigmatized. Although, there also may not be a sufficient number of providers in the community (Interview, 2012). The 2007 health study noted how difficult it was for residents with complex cases to coordinate healthcare among such an array of medical and community based organization service providers. All of these challenges together produce a situation in which people avoid going to the doctor and wind up in the ER when they can't avoid it any longer. Finally, the 2007 report noted that culture and language created barriers to care. Our interviews confirmed that these concerns are still present (City of Newark, 2007).

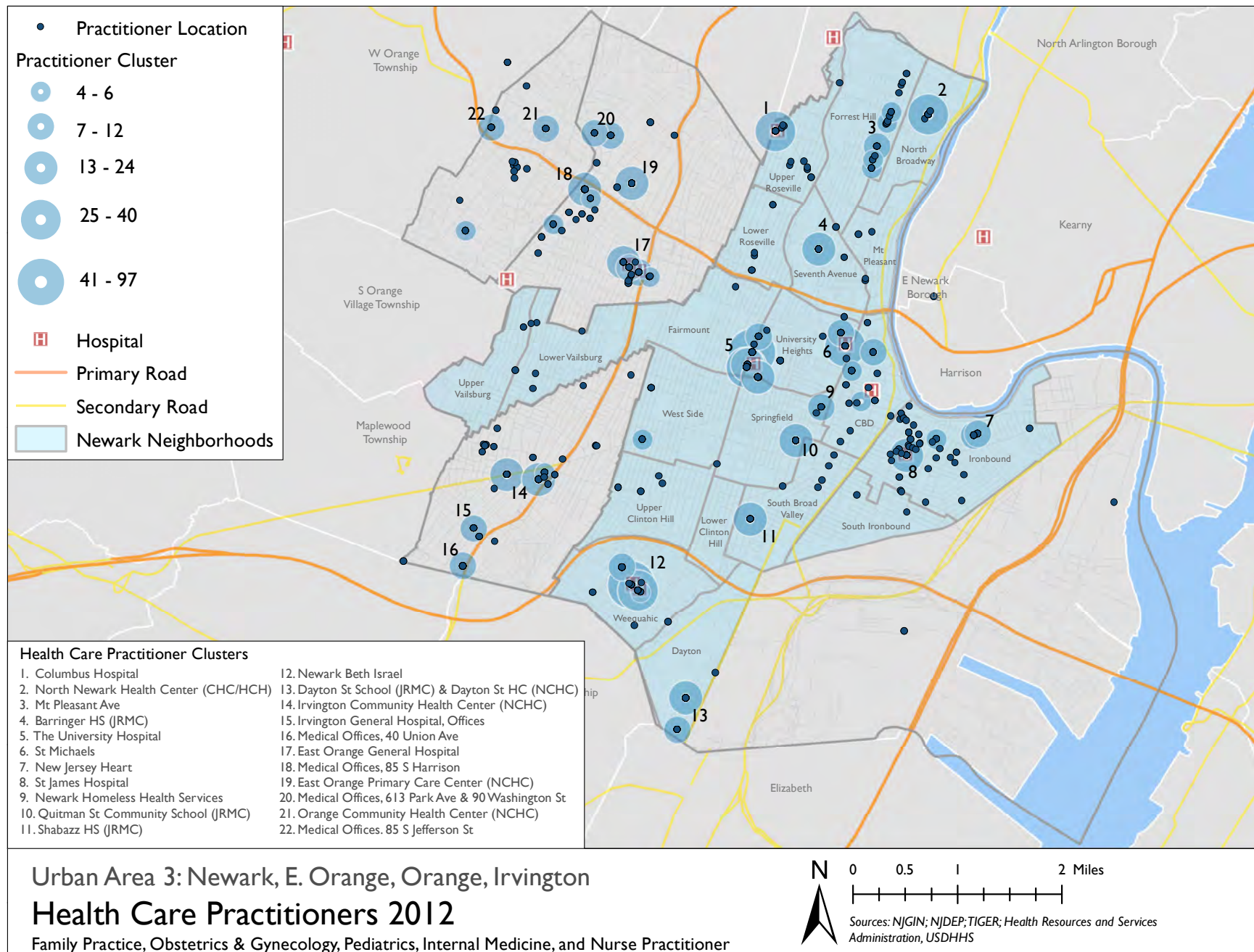
Newark has some of the highest rates of childhood obesity and children who are overweight in the country. For children 3 -5 years old, 45% are either overweight or obese. 47% of children 6 -11 years old are also either obese or overweight. 48% of children between 3 - 18 do not eat enough fruits and vegetables as recommended. Additionally, as children, they eat less and less fruits and vegetables. 36% of parents say the their food store does not carry a wide selection of quality produce. Only 30% of Newark children meet the requirement of being physically active for 60 minutes a-day. One fifth of children do not even have a park nearby to play in. Also to note, because of the high rates of violence and crime in Newark, children are often not allowed to play outside, or are highly restricted to time spent outside (NJ HealthyKids).

Health Organizational Infrastructure









Community organizations near Mt. Pleasant offer some direct health services along with referrals and what might be best described as health programs for particular problems and or populations. They also work collaboratively with UMDNJ, University Hospital, and other providers to offer biweekly mobile screenings. Nursing faculty and students from UMDNJ, for example, provide screenings such as blood pressure checks and workshops at La Casa at least monthly. There is an increasing focus on improving diet and access to healthy food to address some of the health problems in the neighborhood. Community groups are working on programs to make it easier to eat well (Interviews, 2012). The surrounding neighborhoods house various health facilities. To Mount Pleasant's north, Newark Community Health Centers (a Federally Qualified Health Center) operates a facility within the North Broadway neighborhood that works closely with community residents and organizations. West of Mount Pleasant, Jewish Renaissance Medical Centers runs a clinic, five days a week, out of Barringer High School in the Seventh Avenue neighborhood. In the neighborhoods south of Mount Pleasant (University Heights, CBD, and Springfield,) a mixture of health centers (federally-qualified and otherwise), hospitals (including Saint Michael's, Saint James', and University Hospital), and substance abuse as well as mental/behavioral health facilities provide a variety of health services to the area's residents. Community leaders suggest that residents, since the closure of their local hospital a few years ago, are more likely to go to UMDNJ or to Clara Maas, a hospital in Belleville (Interview, 2012). Even while it looks like there are nearby organizations, some of these can be quite far away from any particular resident. And, even though the neighborhood is well served by public transit (see below), using it to get to doctor appointments may mean transferring from one bus to another and timing may be very difficult. While there are some door-to-door services available, as of 2007, these were hard to arrange on a short notice.

UMDNJ

UMDNJ-University Behavioral Healthcare runs a bunch of programs for ONLY uninsured residents of Newark on the main UMDNJ campus. (They no longer accept patients with commercial insurance). Child & Adolescent Community Mental Health provides services for youth 2-18 as well as family therapy and day services for children with severe problems. Newark Children and Adolescent Outpatient Services are home-based services to help with the transition back to daily life for recently discharged patients. UMDNJ-UBHC Comprehensive Victims' Services provides services for victims. Essex County Advanced Practice Nurse provides at home follow up for children who are discharged from the CCUS unit at Newark Beth Israel when providers are concerned that they might be readmitted. UMDNJ - Children's Mobile Response and Stabilization System is a temporary program to create action plans for a school or home crisis for children 5-18 who have mental health issues, but are not in need of hospitalization.

North Ward Center

The North Ward Center, a community development organization located just outside Mount Pleasant, provides specialized health care. The center operates Casa Israel Adult Medical Day Care Center, providing direct and preventive care to clients (including those with Medicaid and private insurance) in addition to social and ancillary services (northwardcenter.org). They provide services to 700 children and 600 of those have a nurse available for them, usually three days a week for before and after care. They provide food for adults and children, including breakfast lunch and a healthy snack that are developed by a dietician and prepared by a caterer and delivered. The income guidelines for the program are strict requiring incomes below \$18,000 a year (Interview, 2012).

La Casa de Don Pedro

La Casa de Don Pedro offers the Healthy Living Initiative. They offer workshops about health issues, prevention, and community awareness. They also help residents access help including NJ Family Care insurance and referrals. They work with UMDNJ's Children's Health Project every other Tuesday to provide free health prevention services for people without health insurance through their mobile van in the Burger King parking lot across from the office. Their HIV Prevention Program and HIV/AIDS Intervention Services are focused on care for those suffering from HIV and AIDS. They offer nursing services, financial assistance, psychiatric care, ophthalmology, podiatry, dental, occupational therapy, speech therapy and physical therapy (Interview, 2012; La Casa de Don Pedro website).

Youth Consultation Services

Youth Consultation Services, located in multiple counties within New Jersey, has its headquarters in Mount Pleasant on Broadway. They serve about 1,500 children, providing mental and developmental care. The infant Institute focuses on providing training, consultation and clinical services related to youth children and their families. Their programs are as follows: Infant and Infant-Parent Relationship Assessments, Child Psychiatric Evaluation & Medication Assessments, Child Play Psychotherapy, Infant-Parent Group Psychotherapy, Parent Individual Psychotherapy, Services for Mothers and Children Affected by Substance Abuse, and Developmental and Parental Guidance. All programs are run by licensed clinicians and medical students. Another program offered is the Nurse Family Partnership, a free program that connects a nurse to visit and assist first-time mothers at home throughout their pregnancy and until the child is two years old. The nurse helps answer questions, guide, refer and advise in all areas dealing with pregnancy and infancy. In addition they provide a clinical program in the homes of children 5-17 living with mental health issues. They provide support for the families and referred by CMOs, YCMs, UCMs, and Value Options.

Bridge Program

The Bridge Program is a pre-adoption program to help connect family members to children needing adoption partnered with the Department of Children and Family. Because some of the children have experienced so many negative experiences at a young age, the Bridge Program hopes to give them confidence and supports them in the first 10 months to a year of adoption. They also provide services for the children. They have family sessions and a clinician works with 8 families. One of their challenges is that families sometimes do not want to fully adopt or they want to be a kinship legal guardian. It is a hard commitment and some feel that they will no longer receive assistance (money they receive as foster parents) and cannot afford it.

City of Newark

The city of Newark offers three different programs to lower the cost of prescription medicines. Brick City Rx provides low cost generic versions of many medicines for Newark residents at three pharmacies. One of those, Liss Pharmacy is located in Mt Pleasant. Newark Rx provides low cost medical prescriptions for low income residents who participate in programs like Medicaid and is available at other locations including the Forest Hill Family Health Associates located north of Mt. Pleasant. Finally, the city of Newark Discount RX card reduces prescription costs at pharmacies nationally for Newark residents (http://www.ci.newark.nj.us/press/moving_newark_forward/newarkhealthplus_and_newarkrx.php).

ChildSight NJ

ChildSight NJ works with the local board of education and health department to connect them to middle school nurses for screening. Each child receives a vision screening, the next day an eye doctor comes to see what type of eyeglasses are needed for the child, and on the third day, the child receives glasses. They serve

about five to six thousand 10 -14 year old students in the area. At this age is when growth spurts happen and, on average, 25% of any population will have “refractive error” and require glasses. They are funded through the Helen Keller Foundation which does a lot of its own fundraising from all different areas, and through the Community Foundation of NJ (Interview, 2012).

Outstanding Health Needs

There is an ongoing need for direct care, for increased dental services, for resources to get to doctors, fresh produce, and efforts to build trust between organizations and residents to increase program usage. We understand that Jewish Renaissance Center just received a grant to expand in Roberto Clemente Elementary School.

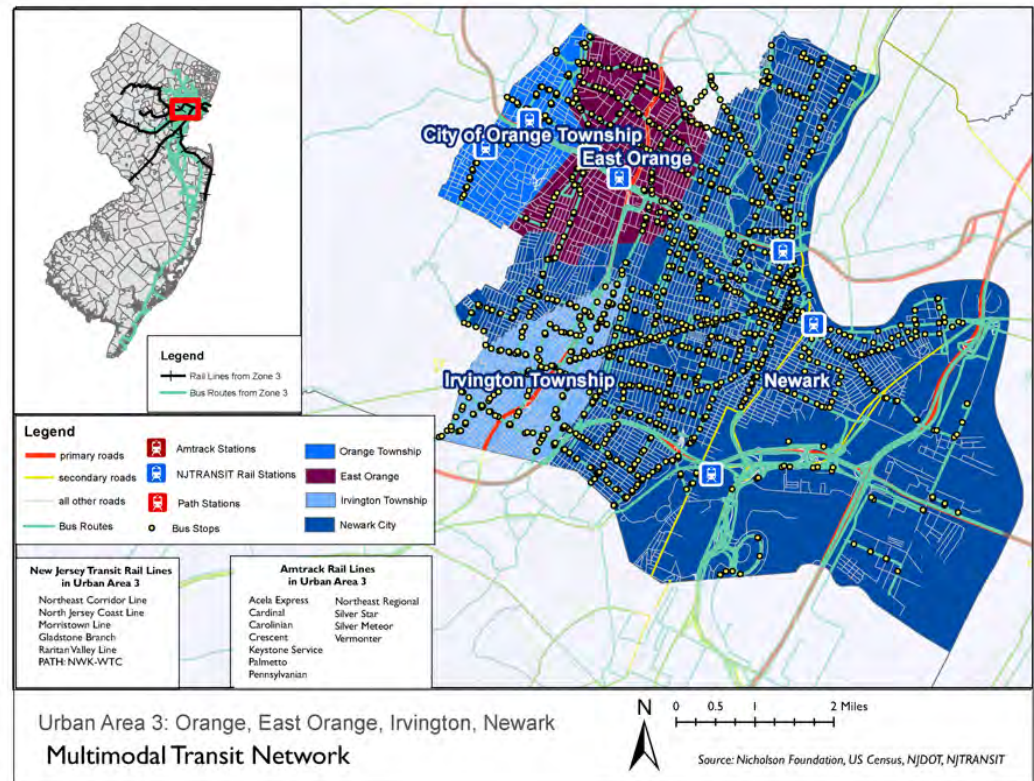
Transportation

The transportation issue is complex. It involves getting access to the transportation. The Mt. Pleasant neighborhood has a variety of transit options from bus service to a major commuter rail station and Newark’s Go Bus which runs throughout the city. While there is reasonably good access to transit within the neighborhood, whether this transit goes where people need it to is a different matter. But using public transit to get to medical appointments is often difficult. While it is presumably relatively easy to get downtown, it may be far more difficult to reach healthcare locations. The timing may not work out. And the cost may be prohibitive. The cost and convenience issues also arise with arranged cars as they may not show up when they are supposed to.

Community Organizations

Overview Discussion

Although there are very few community institutions and organizations within the boundaries of Mt Pleasant, the organizations present offer a variety of services. Many offer bilingual, childcare, and healthcare services including drug/alcohol support, etc. The North Ward Center and La Casa De Don Pedro Inc. are the primary organizations both of which are comprehensive high capacity organizations with long histories in the neighborhood. The North Ward Center, a non-profit community development organization, was founded in 1970 in Newark’s Mt. Pleasant Neighborhood. La Casa Don Pedro is a



community development corporation that focuses their social services programs toward helping the Latino community within Mt. Pleasant. There are six child care centers located within the boundaries of Mt. Pleasant. Four are located in the southern region, while the other two are located on the border of Forest Hill. Two other facilities that border the Seventh Avenue neighborhood are La Casa de Don Pedro Inc.'s Early Childhood Development Center and the Family Success Center. Both centers are bilingual early childhood programs certified by The National Association for the Education of Young Children.

North Ward Center

The North Ward Center offers many services that were otherwise not available. Their Northward Child Development Center serves 4,000 preschoolers. They have four sites within the boundaries of the neighborhood and work in partnership with Newark Public Schools, legitimizing their ability to guarantee preparedness of their students for kindergarten and beyond. The program is free for residents who can prove residency. Children receive breakfast, lunch and a snack. The North Ward also operates the Forest Hill Child Development Center which comes at a cost and is looking for applicants. The North Ward also runs The Robert Treat Academy, a charter school located on Clifton Avenue. The school offers education to students, kindergarten through eighth grade. It has received the Blue Ribbon School award as a "high poverty, high achieving" model school.

La Casa de Don Pedro

La Casa de Don Pedro is a comprehensive well established community development organization with strong community roots. It offers housing, economic development, social services, referrals, and children, youth and families programs. They work with two block clubs that are located in the Broad Street and Mt. Pleasant area (Interview, 2012). La Casa provides a broad range of youth programs for children through teens. Their programs include sports, arts, crafts and education and they actively link neighborhood children to professionals to provide engaging activities. They have offices in a few parts of the neighborhood at 23 Broadway and at some public schools. They provide transportation. They also run a summer enrichment program in July and August and provide breakfast and lunch prepared by their own kitchen, La Olla, and academic enrichment, mixed in with field trips and activities. All services are paid for and financial assistance is available for those who qualify.

For middle school and high school students, La Casa provides support, job training, and seeks to develop leadership skills through the Newark Youth Leadership Program, Youth Empowerment Services, and Community Mentoring Program. The leadership program provides an outlet for teens to discuss issues and to engage in civic activities. The empowerment services offer one-on-one counseling with at-risk youth. Schools, parents, social service programs, and hospitals refer children to these programs. Families create an action plan and the organization provides individualized support and intervention. Their mentoring program provides mentors for adjudicated youth and is assigned by the court system. Teens and families are offered counseling and youth are required to attend program-sponsored activities. Youth-in-Motion provides GED support and job readiness classes for youth ages 16 and 21 who are looking for work or post-secondary education opportunities. Newark residents can participate for free and possibly receive a monthly stipend.

For families, La Casa offers the Parent-Child Academy which is a nine-month program that teaches parenting lessons. While helping parents, staff monitor children's progress and provide development interventions if necessary. People can also access assistance with taxes, school enrollment and medical care. La Casa offers a referral service. The center also acts a community space where residents can interact, participate in a variety of classes, and share issues with local councils.

La Casa also offers housing counseling and other assistance. They are a U.S Department of Housing and Urban Development certified housing counseling agency with a fully trained staff to combat foreclosure. They have a first time buyer education workshop to teach individuals about the buying process, mortgage readiness, and counseling on responsibilities of homeownership. This workshop is required if you would like to purchase a home that has been rebuilt by La Casa. They have multiple properties around the area for sale. Most of the housing available offers a rental space to offset the mortgages. The City of Newark

offers \$10,000 down payment assistance and the program partners with NeighborWorks. There is an Emergency Housing Assistance program, which helps to retain and find housing for families. They provide education on tenants' rights, foreclosure, financial planning, and management. As of now, their funding has been cut and they can only offer limited resources with rent and down payments. Lastly, they offer a foreclosure prevention program that helps to evaluate, and prevent loss of a home. Counselors work with clients, lenders and agencies (Interview, 2012; La Casa website and written materials).

List and Short Description of Other Organizations

Apostle's House (www.apostleshouse.org)

Apostle's House provides emergency family shelter and other support for homeless families and men. They provide "health management." They run one shelter nearby at 16-24 Grant Street.

Babyland Shelter(www.babylandfamilyservices.org)

Established in 1969, Babyland Shelter offers various services for children and families. Services include early childhood development, infant child care, a family visitation program and domestic violence services. The Shelter also provides an after school program, a foster care shelter, women's shelter, an infant care program, a parent education program and helps operate a family success center.

Broadway Elementary School Family Success Center, Aspira

Works to prevent child abuse and neglect and strengthen families. Provides referrals to other services, such as food pantry referrals or job training referrals.

Broadway Mini Mall Head Start

Head start program.

The Broadway House for Continuing Care (<http://www.broadwayhouse.org/index.html>)

Located in Mt. Pleasant, Broadway House provides healthcare and services for people with HIV/AIDS. They offer a variety of programs including nursing services, housing, financial assistance, psychiatric care, ophthalmology, podiatry, dental, occupational therapy, speech therapy and physical therapy. They work in partnership with major medical institutions and receive support from a variety of funders. They accept Medicaid as well as other insurance programs.

Gateway Northwest Maternal and Child Health Network (<http://www.gatewaymch.org>)

Gateway Northwest, located north of Mt. Pleasant, partners with Newark Beth Israel Medical Center and UMDNJ-University hospital and provides education programming and support that especially supports expecting mothers and families. They provide considerable support for expecting mothers including a baby class, breastfeeding support, and addiction, seek to improve immunization rates. With Morristown Memorial Hospital, they support families and parenting. With the NJ EPA they work to reduce the presence of lead in housing and provide education on lead poisoning for children and adults.

Help and Reconciliation Ministry

Connect to Walk and Play (tackling childhood obesity.) Sponsor Nutrition and Wellness fairs. They also work to combat adult illiteracy and help offender reentry.

Helping the Homeless Inc.

Provide an emergency shelter for the homeless.

Hogar Crea

Drug rehabilitation center. They offer housing for addicted men and health services related to drug addiction

Maternal Child Health Consortium (<http://www.maternalchildhealth.org>)

The consortium gathers public health data and supports planning. It provides help for new fathers.

Mt. Pleasant Missionary Baptist Church (<http://www.facebook.com/pages/Mt-Pleasant-Missionary-Baptist-Church-Newark/202349659775227>)

Provides a shelter for the homeless.

Newark Now, Financial Empowerment Center (<http://035e9d4.netsolhost.com/WordPress/>)

Provides direct financial and legal counseling (EITC, other tax preparation and benefits/credits) and Individual Development Accounts and provides referrals to food stamps, health screening and the Brick City Rx program, college financial aid counseling.

New Community (<http://www.newcommunity.org>)

Makes referrals and hosts service providers who make presentations on subjects such financial literacy, budgeting, banking, food stamps, health care, employment, energy conservation, rental assistance, homeless services, inpatient substance abuse services, prescription assistance etc.

Peace House Inc. (<http://www.facebook.com/pages/Peace-House-Inc/157323720994904>)

Peace House is a temporary emergency shelter for women exiting from the justice system or substance abuse programs.

Remar USA (www.remarusa.org/newark.php)

A Christian organization focused on housing men and helping to rehabilitate them back into society post life on the streets and or drug use.

Mount Zion Head Start

The Head Start child care center serves up to 30 children and offers care for children 2 ½ to 6 years of age.

Mt. Zion Baptist Church (www.mtzionbaptistnewarknj.org)

They run a Head Start nursery program through the facilities.

The Perpetual Help Day Nursery (<http://www.saintmichaelparish.com/Nursery.htm>)

Serves up to 189 children and offers care for children 2 ½ to 5 years of age.

Sharp James I, II, III, IV

Does not offer subsidized child care, but offers care for up to 80 children ages 2 ½ to 6.

St. Michael's (www.stmichaelnwkpenguins.com/)

Church and school which participate in events like food drives that help support the community.

Youth Consultation Services (<http://www.ycs.org>)

Provides residential or in-home behavior supports for children 5 - 25, and their families, with developmental and intellectual disabilities that have affected their home life. The staff works to create intervention and behavioral plans to create a positive home environment.

Works Cited

- Cipriani, Elsa. 2012. Health Services Unit Manager, Youth Family and Health Services Division. La Casa de Don Pedro. In-person interview.
- City of Newark. Newark Master Plan. Draft. May 25. Neighborhood Element. 2011.
- City of Newark. The Broad Street Station District Redevelopment Plan. 2008.
- City of Newark Department of Health and Human Services. "Summary: Community Themes and Strengths Assessment." *City of Newark*. 2006.
- "Casa Israel Adult Medical Day Care." The North Ward Center, Inc. 2012. Northward Center.
- Dreonde, Alex. 2012. Coordinator. North Porch Women and Infant Center: Episcopal Community Development Corporation. Phone interview.
- Goldsmith, Alan. 2013. President. Jewish Renaissance Medical Center. In-person interview with Alan Goldsmith.
- Hernandez, Edward. 2012. Director Family and Health Services Division. La Casa de Don Pedro. In-person interview.
- Jessala. 2012. Perinatal Specialist. Perinatal Addiction Prevention Project: Partnership Maternal and Child Health of Northern New Jersey. Phone interview.
- El-Sadek, Kimberly. 2012. Real Estate Development Manager. La Casa de Don Pedro. Email interview.
- Flores, Katherine. 2012. Director. Casa Israel Adult Medical Day Care. Phone interview.
- Osemwegie, Stella. 2012. Director of In-Community Services. Youth Consultation Services. Phone interview.
- Ries, Alle. 2012. Director of Community and Economic Development. La Casa de Don Pedro. Newark. Phone Interview.
- Sceppaguerio, Michelle. 2012. Director of North Ward Child Development Center. Phone interview with Michelle Sceppaguerio.
- United States Census 2000. *American Factfinder*. 2000. Bureau of the U.S. Census.
- United States Census 2010. *American Factfinder*. 2010. Bureau of the U.S. Census.
- Waksberg, Debra. 2013. Program Coordinator Partial Hospitalization Program Collaboration. UMDNJ - University Behavioral Healthcare. Phone interview.

East Orange

4th Ward

Maggie Dobbs
Michael D'Orazio
Margaret Ricke
Katie Vail

with
Ronit Anspach
Pritpal Bamhrah
Anthony Capece
Laura Chamberlain
Mirabel Chen
Katie Davis
Michael D'Orazio
Ryan Good
Gregory Hughes
Margaret Ricke
Matt Sarsycki
Timothy Shek
Ben Teresa
Richard Trent
Michael Yaffe
Xunjing Wu

Kathe Newman, Associate Professor and Director
Ralph W. Voorhees Center for Civic Engagement
Funded by The Nicholson Foundation
2013

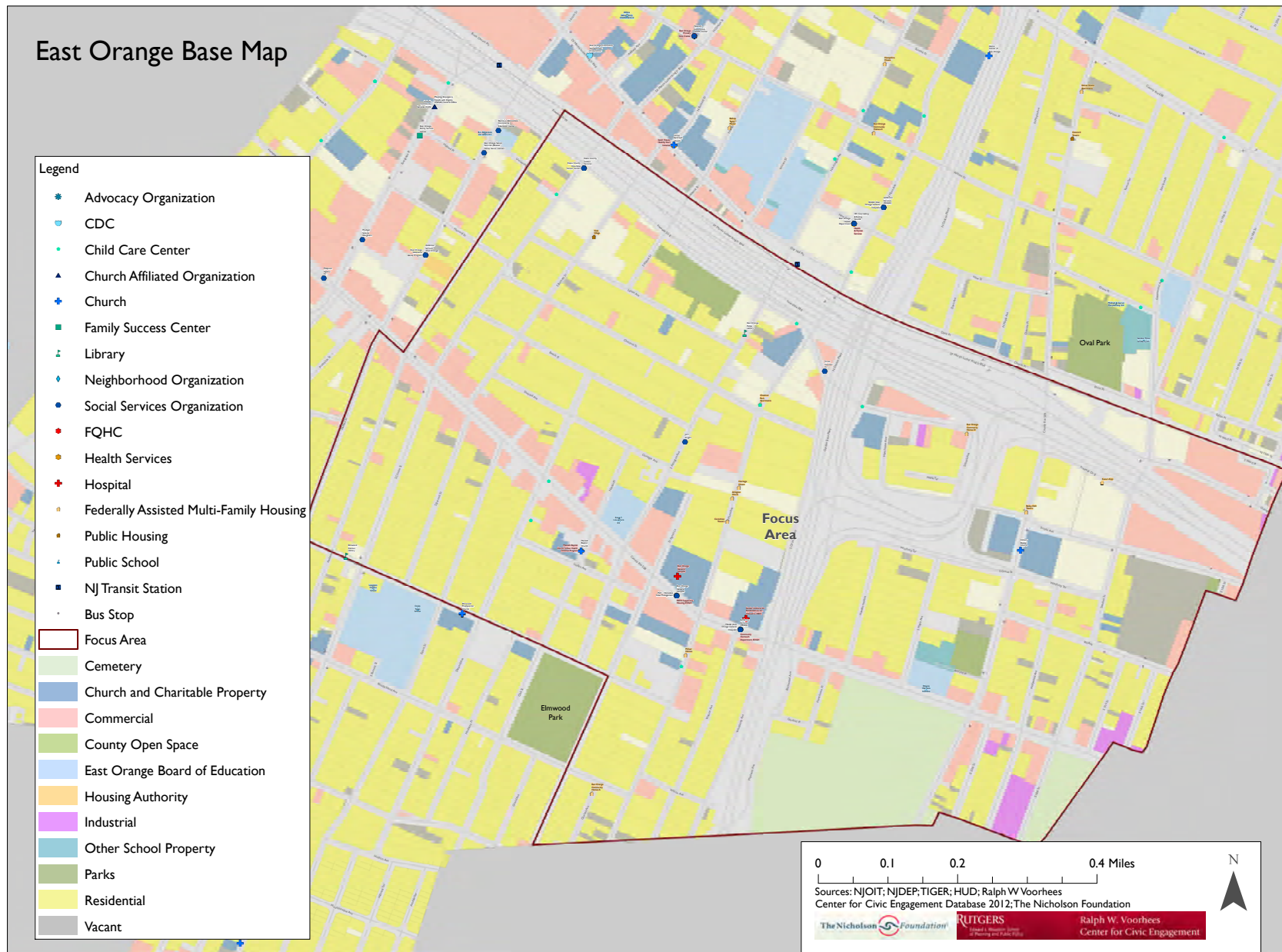


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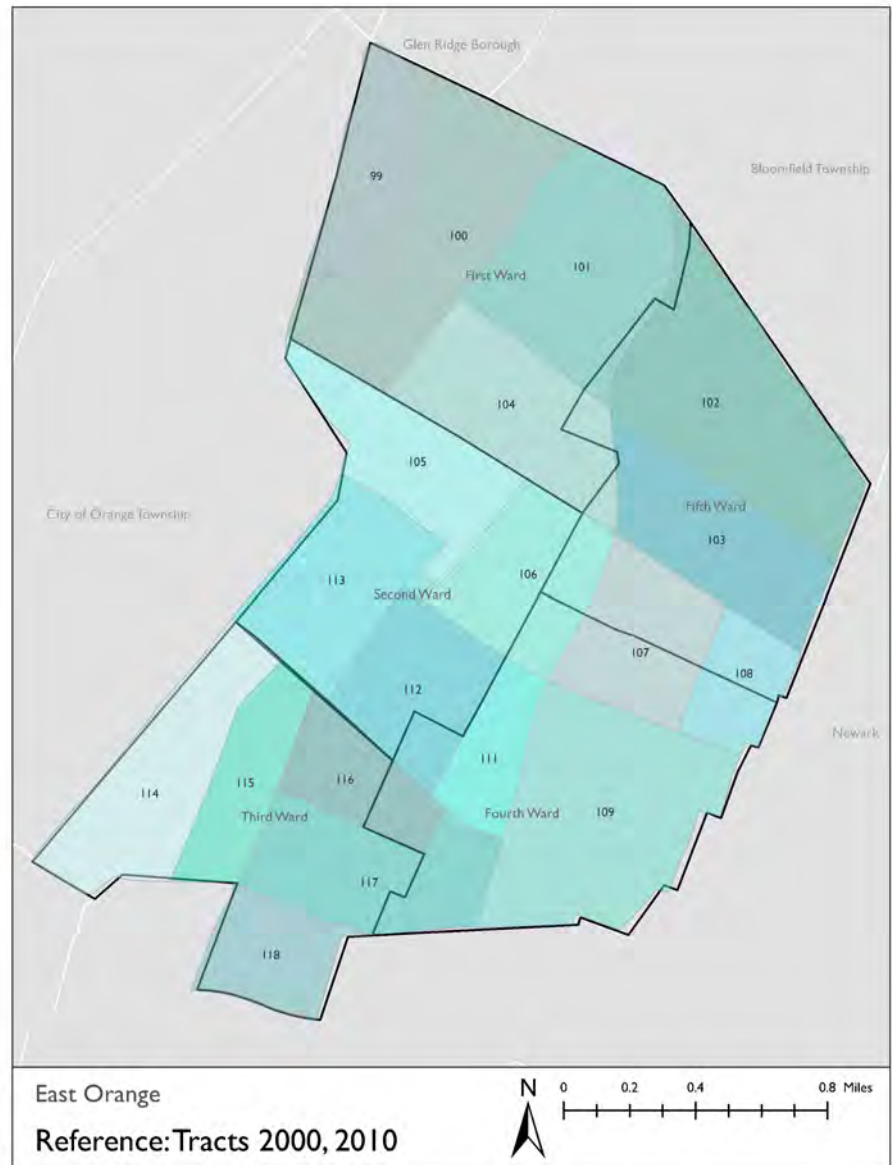
Neighborhood

4th Ward

Situated in the southeastern portion of the city, East Orange's 4th Ward is adjacent to Newark's Lower Vailsburg and Fairmount neighborhoods to the south and east, respectively. The western border of the focus area extends beyond the official ward limits to Halsted and Amherst Streets. The focus area is bounded on the north by Interstate 280 (and the adjacent MLK Boulevard and NJ Transit line) and it is bisected by the north-south Garden State Parkway and its adjacent local parkways. The construction of these two major traffic arteries in the 1950s and 1960s required the demolition of homes and businesses (particularly along the Main Street corridor, for I-280) and divided East Orange in four. Collectively, they present a physical barrier between the focus area and the northern part of the city, and limit connectivity between the eastern and western sides of the neighborhood.

Central Avenue, one of the city's few major commercial thoroughfares, runs roughly east-west through the center of the Fourth Ward. East Orange's civic center sits partially in the focus area (straddling the I-280 artery, where it meets the Garden State Parkway), and includes City Hall, the main branch of the public library, the police department, and East Orange NJ Transit train station (one of the city's two stops on the NJ Transit Morris & Essex Line). East Orange has identified its Fourth Ward as a primary target area for revitalization (DePalma). The focus area encompasses four complete census tracts (109, 111, 112, and 116) and a portion of a fifth (117.) Because Tract 117 is not included in its entirety (geographically, between a third and a half of this district falls within the focus area boundaries), data from 117 is included as appropriate.

While the Fourth Ward is primarily residential, it is more densely developed than the rest of East Orange, and contains significant community assets,



including East Orange General Hospital, the East Orange Police Department, courthouse, and the main branch of the public library. Central Avenue, the east-west commercial thoroughfare, is identified as the city's central business district in the 2006 East Orange Comprehensive Master Plan (DePalma). There is very little park/open space in the focus area (aside from cemeteries in the southeast, Elmwood Park in the adjacent Third Ward, Oval Park across I-280, and several large vacant lots, including the nine acre site of the demolished Arcadian Gardens).

Table 1. 4th Ward Characteristics

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population	16,013	100%	Families (2010)	3,548	100%
			Female-headed with Children	1,308	37%
Age (2010)			Economic (2007-2011)ⁱ		
Under 5 years	1,165	7%	Median Household Income	\$23,962 - 44,527	
5-19 years	3,512	22%	Persons below Poverty	4,100	25%
20-64 years	9,564	60%	Total Civilian Labor Force	8,333	100%
65-74 years	993	6%	Employed	6,751	81%
75+ years	779	5%	Unemployed	1,582	19%
Race (2010)			Housing (2010)		
White	566	4%	Total Units	7,483	100%
Black	14,265	89%	Vacant Housing Units	1,031	14%
Asian	99	1%	Owner Occupied	1,336	21%
Hispanic	1,348	8%	Renter Occupied	5,116	79%
Household (2010)	6,452	100%			
Multigenerational	458	7%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Population

There were 12,610 persons in the four complete tracts in 2010; the total is 16,013 if the 117 population is included. (East Orange had a total population of 64,270 in the 2010 US Census). All five tracts experienced population loss from 2000 to 2010. For three of the tracts, this loss ranged between 1 and 9 percent. Tract 109 lost 26 percent (975 residents) (US Census Bureau 2000 and 2010). As in the rest of East Orange, the racial composition of the Fourth Ward focus area is largely black (between 83 and 94 percent, depending on the tract) (2010 US Census). However, the percentage of black residents decreased slightly throughout the focus area from 2000 to 2010. The share of white, Asian, and Hispanic populations increased. Most of these shifts were subtle and mirrored citywide shifts; however, there was a significant increase in Hispanic residents on the east side of the focus area (11 percent in 109 and 14 percent in 111, according to the 2010 US Census). From 1995 to 2005, Hispanics, and particularly residents of Barbadian, British West Indian, Haitian, and Jamaican ancestry, increased (DePalma).

Table 2: Total Population of Focus Neighborhood, 2000 & 2010

Tract	2000	2010	Percent Change
109	3,801	2,826	-25.7%
111	3,765	3,646	-1.3%
112	3,555	3,270	-7.5%
116	3,140	2,868	-8.7%
117	3,612	3,403	-5.8%
Fourth Ward	17,873	16,013	-9.9%
East Orange	69,824	64,270	-8.0%

(US Census 2000, 2010)

Table 3: Racial & Ethnic Representation in Focus Neighborhoods 2010

Tract	White		Black		Hispanic	
	Count	Percent	Count	Percent	Count	Percent
109	124	4.4%	2,492	88.2%	303	10.7%
111	200	5.5%	3,017	82.7%	506	13.9%
112	100	3.1%	2,926	89.5%	241	7.4%
116	52	1.8%	2,702	94.2%	107	3.7%
117	90	2.6%	3,128	91.9%	191	5.6%
Fourth Ward	566	3.5%	14,265	89.1%	1,348	8.4%
East Orange	2,657	4.1%	56,887	88.5%	5,095	7.9%

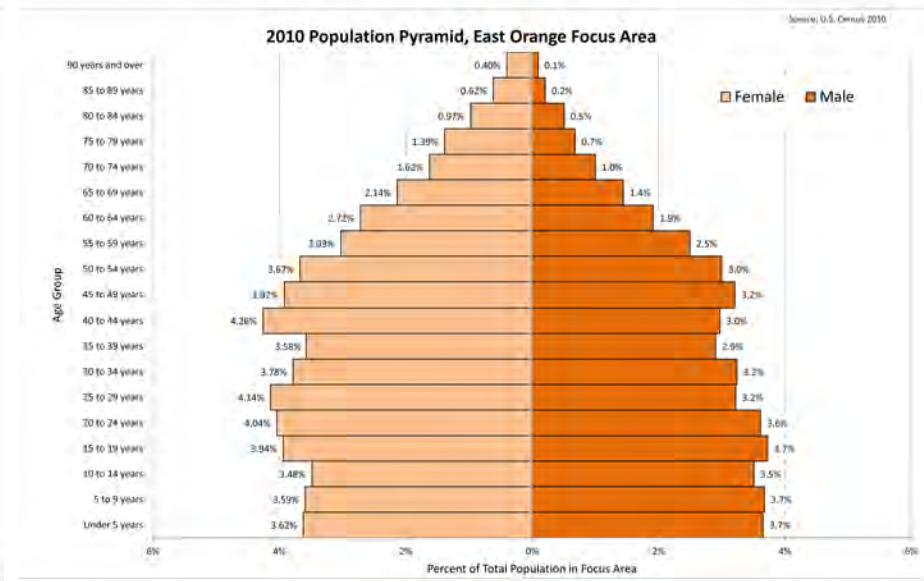
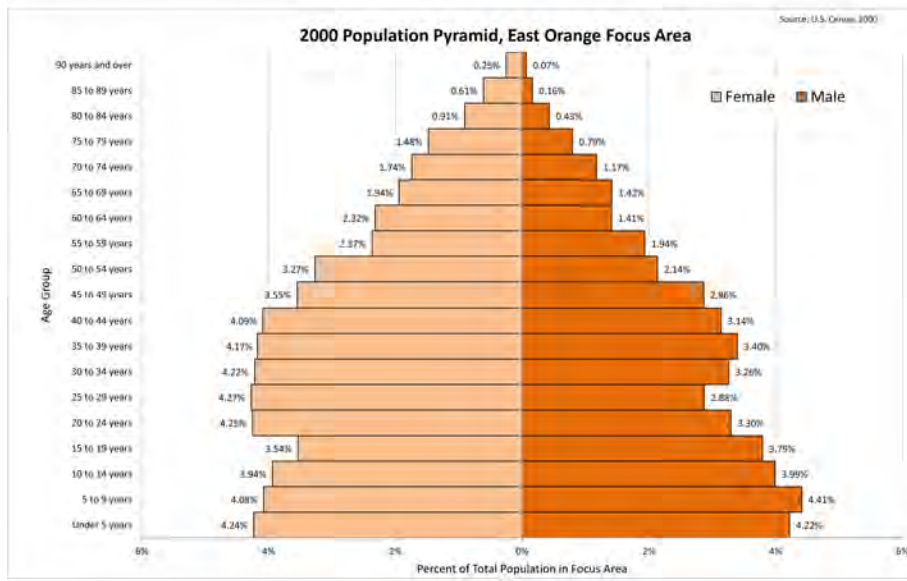
(US Census 2000, 2010)

Table 4: Changes to Neighborhood's Racial & Ethnic Composition, 2000 & 2010

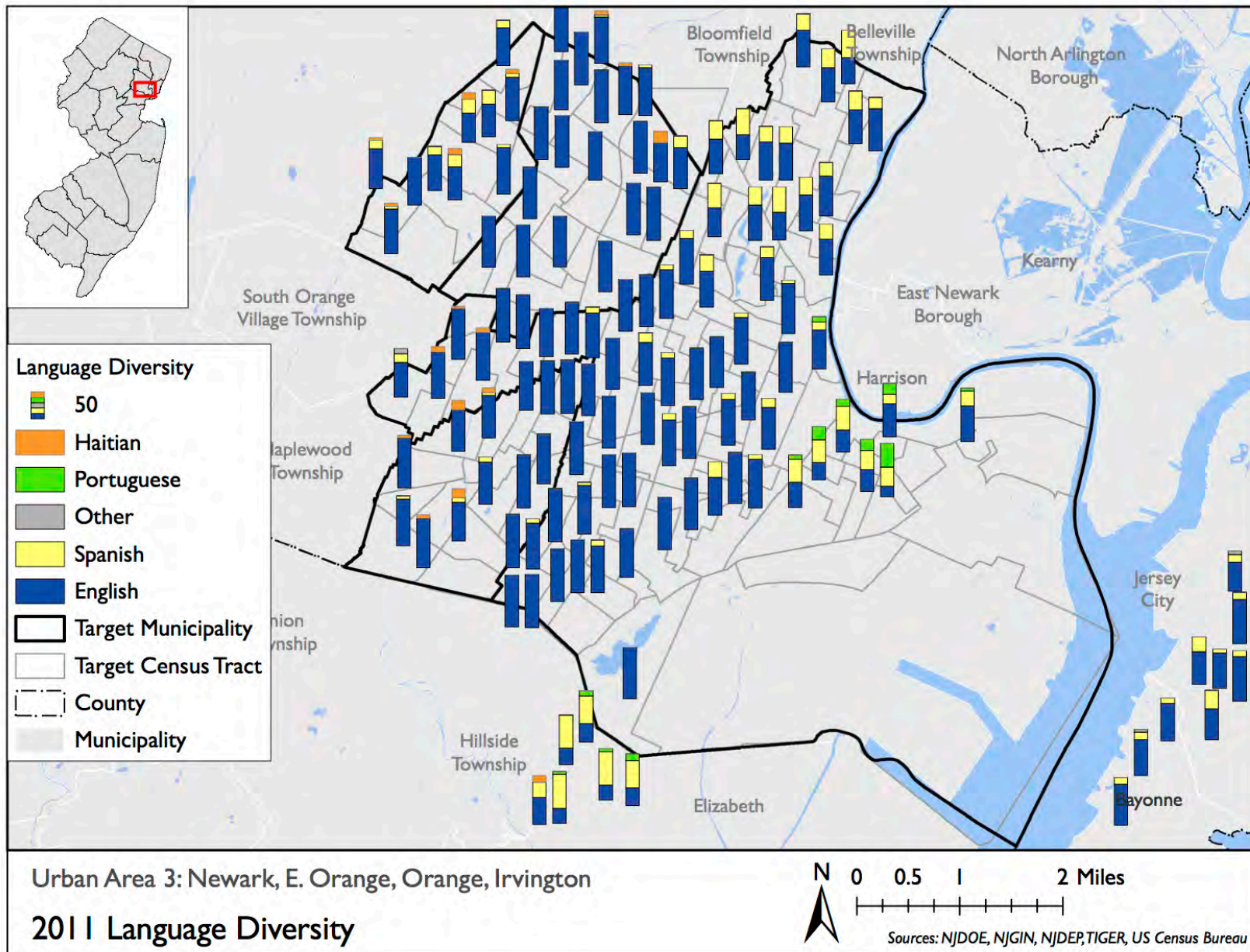
Tract	White		Black		Hispanic	
	2000	2010	2000	2010	2000	2010
109	1.7%	4.4%	93.8%	88.2%	5.4%	10.7%
111	4.0%	5.5%	87.3%	82.7%	5.7%	13.9%
112	1.2%	3.1%	92.0%	89.5%	3.7%	7.4%
116	1.1%	1.8%	93.9%	94.2%	2.7%	3.7%
117	2.4%	2.6%	92.9%	91.9%	3.9%	5.6%
Fourth Ward	2.1%	3.5%	91.9%	89.1%	4.3%	8.4%
East Orange	3.8%	4.1%	89.5%	88.5%	4.7%	7.9%

(US Census 2000, 2010)

As with the other focus neighborhoods, there are disproportionately fewer young men in the neighborhood than women.

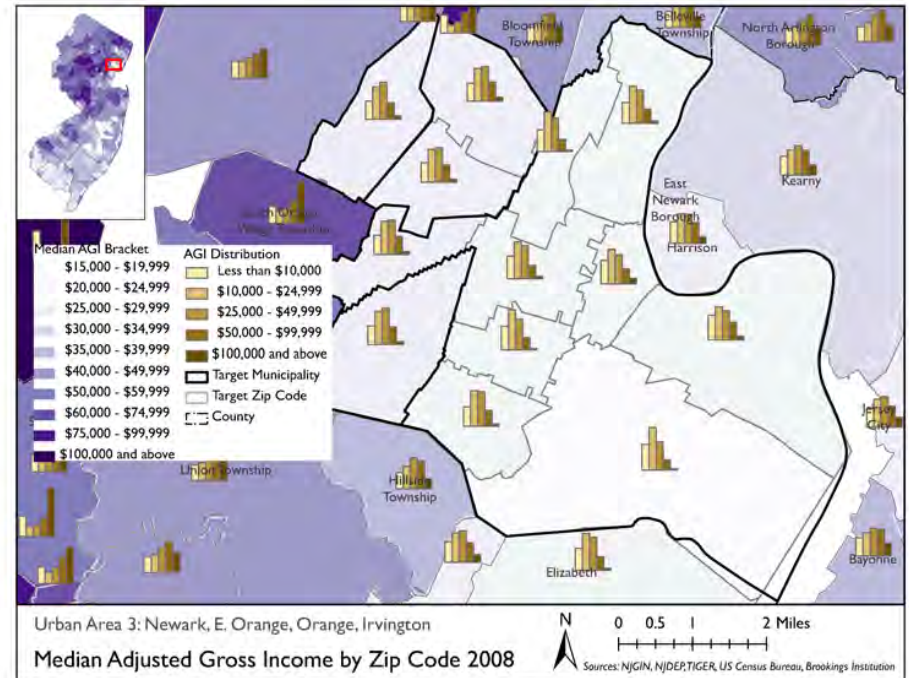
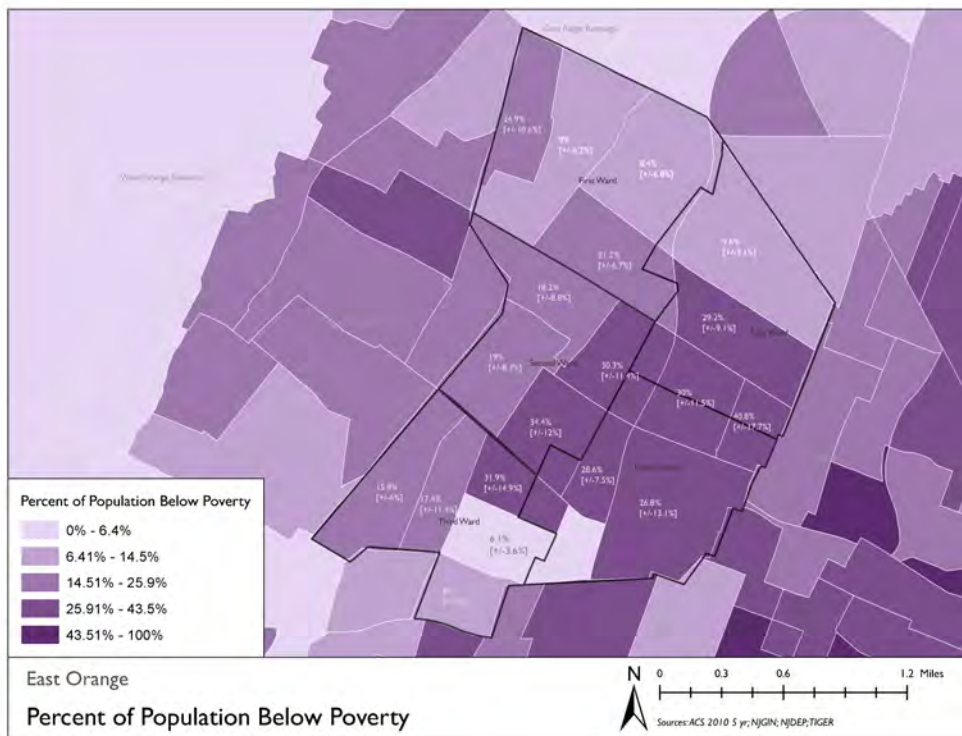


The languages spoken in homes with children in the elementary schools suggest it's mostly English with a bit of Spanish.



Income

Median household income ranged considerably across census tracts in 2000, from \$16,555 in 111 to \$34,804 in 117. However, three of the four complete tracts had median income figures below \$26,000, considerably lower than the \$32,436 figure in East Orange and \$55,146 in New Jersey. The focus area's unemployment rate ranged between 7 and 15 percent in the 2000 US Census, with three of the four complete tracts at 11 percent unemployment or higher. While the citywide poverty rate was 16 percent in 2000 (and 6 percent statewide), the complete tracts in the Fourth Ward ranged from 17 to 25 percent (US Census Bureau 2010). In 2010, the core census tracts in the 4th Ward show about 27% of the population in poverty. The census tracts along the ward's northern border have higher rates with 41% of people. In 2010,



there is a high rate of female-headed families with children: nearly 40 percent in each of the five tracts, compared with 34 percent across East Orange and 11 percent statewide (US Census Bureau 2010). The 2008 gross income IRS data for the zip code that includes the 4th Ward suggests a slightly more balanced income distribution than in some of the poorer neighborhoods elsewhere but it also suggests a high concentration of low and moderate income residents (IRS, 2008).

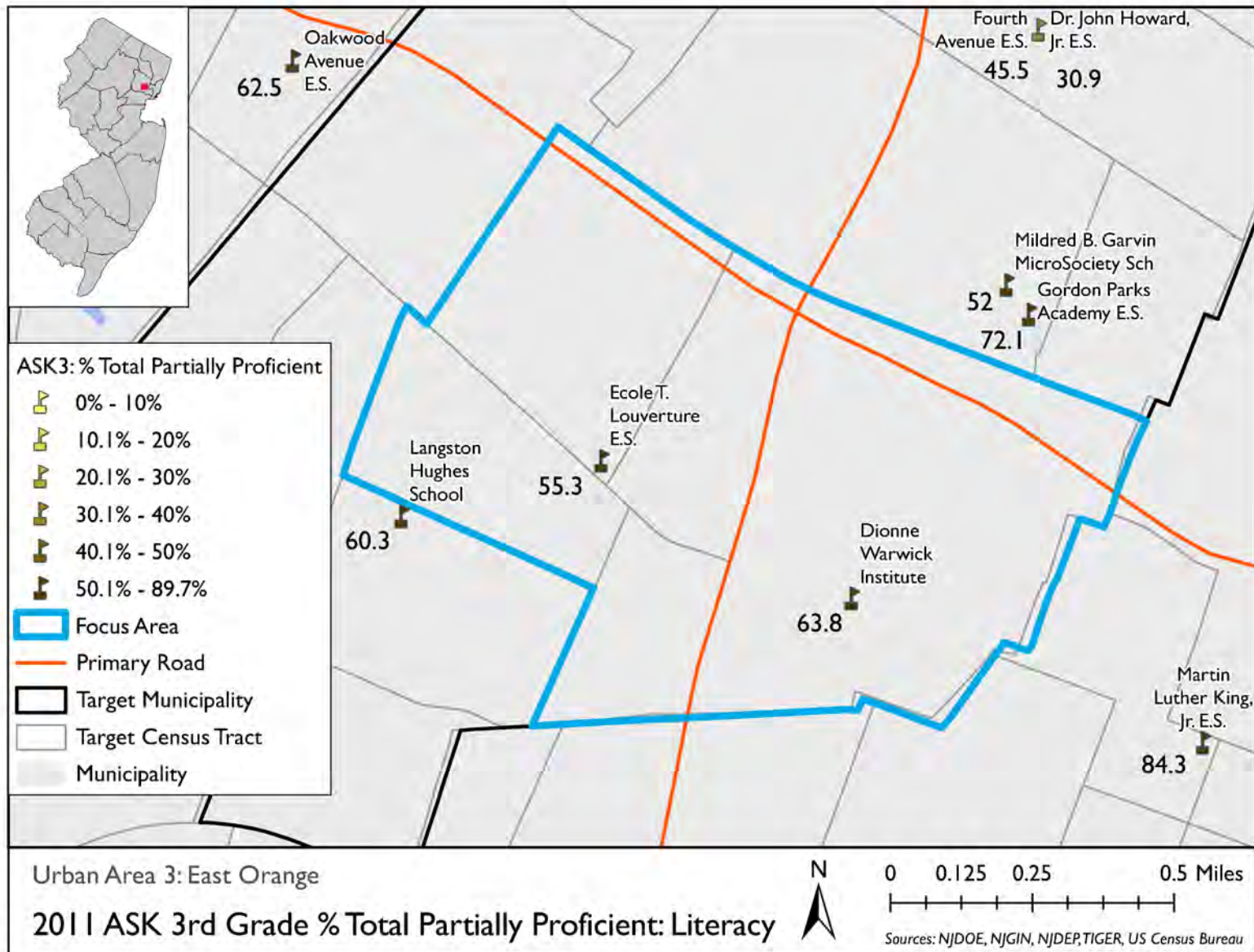
Education

Both of the focus area elementary schools have more than 95% of families who speak English at home as the first language. The schools have generally better scores on the 3rd grade literacy NJ exam compared with the elementary schools in most of the other focus areas although the scores are still lower than those in most of the state. Nine percent of students at Ecole Louverture were suspended during the 2010/11 academic year and a third of students moved in and out of the school within that academic year. There is far less student mobility at Langston Hughes elementary.

Table 4: School Characteristics 2010-11

School	Grade Levels	Total School Population	% Partially Proficient 3rd Grade NJ Ask	First Language Spoken at Home	Students with Disabilities	Mobility	Limited English Proficiency	Student Suspensions
Dionne Warwick Institute								
Ecole Louverture	Pre K - 5	324	55%	English - 95% Haitian - 1.9% Spanish - 1.6% Ewe .6% French - .6% Mandarin - .3%	15%	33%	0.60%	9%
Langston Hughes	Pre K - 5	548	60%	English - 97.6% Haitian - 1.7% Spanish - .6% French - .2%	12%	13%	NA	2%

(NJ Department of Education, 2011)



Housing

Housing in the focus area consists primarily of two- and three-family homes and of low- and mid-rise apartment buildings (concentrated largely in the center of the focus area, in tract 111 and in the northern part of tract 109 along Route 280). Most residents are renters. The percentage of households with mortgages in 2000 ranged from zero to 10 percent in the complete census tracts (US Census Bureau, 2000). Vista Village, one of the two public housing complexes, sits just south of I-280 at Lenox and Burnett Streets and contains 180 efficiency and 1-bedroom units (“Housing Authority Services”). Additionally, many of the city’s project-based Section 8 apartment complexes (approximately ten buildings) are located in the focus area, most of which are concentrated in tract 111 (along Arlington and Munn Avenues, between I-280 and Central Ave) and in tract 109 (running along the south side of I-280, east of the Parkway). Many units in this affordable housing stock are dedicated to low-income elderly residents (“Low Income Housing: East Orange, NJ”).

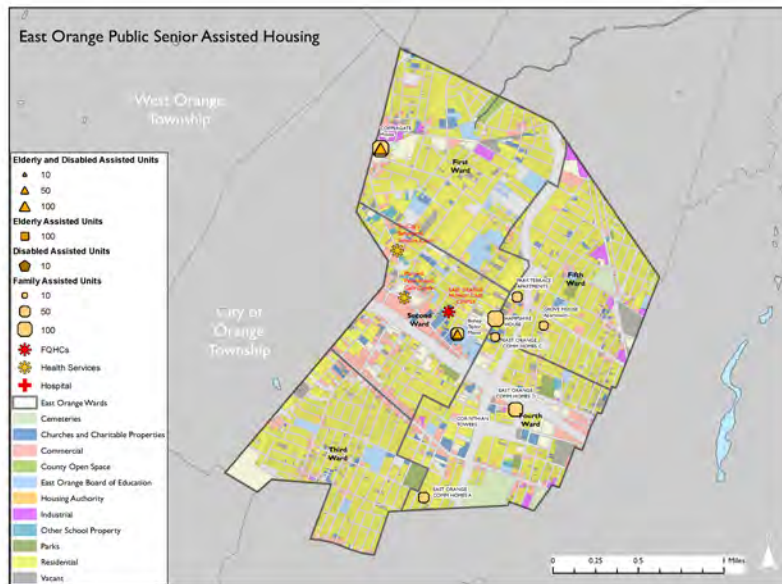
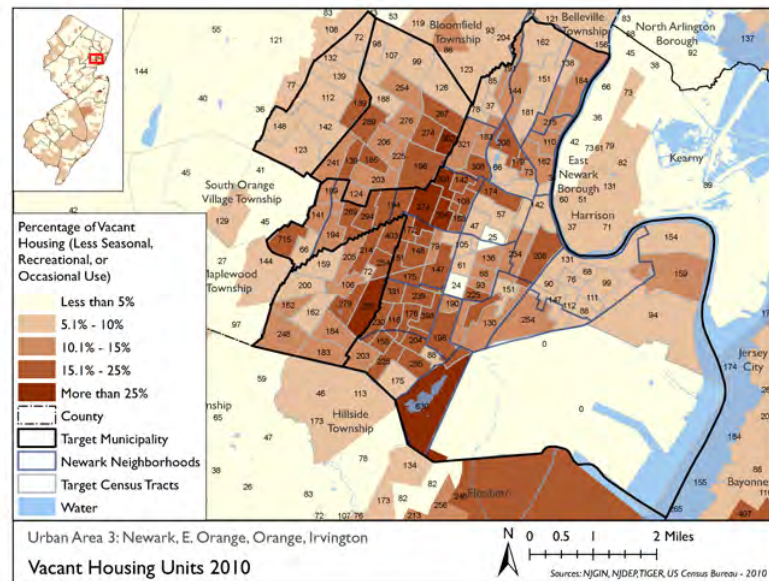
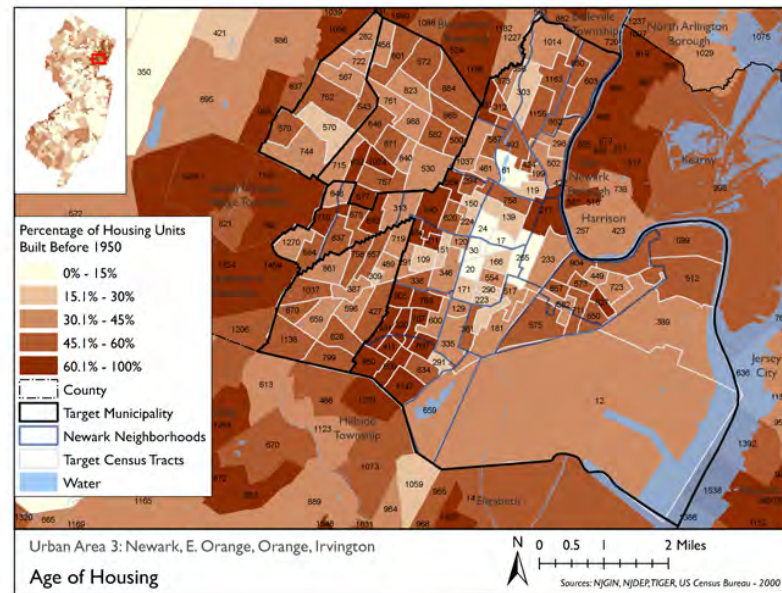
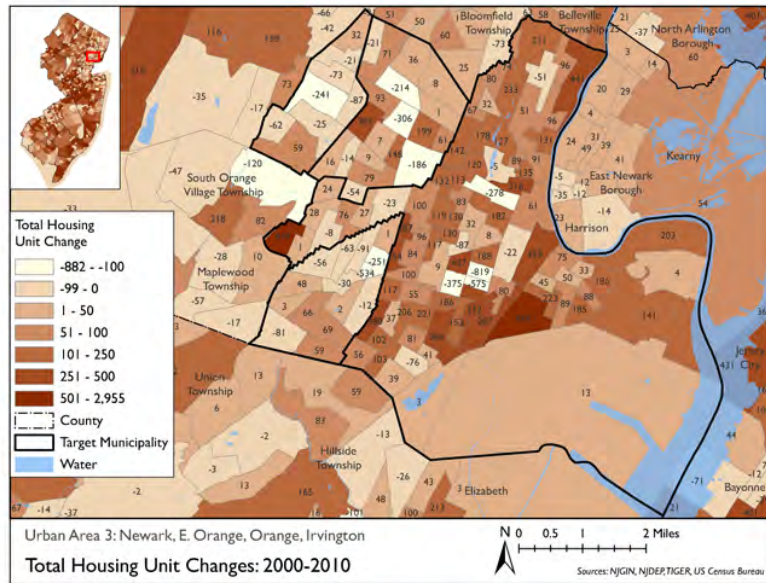
Four of the five tracts saw minor gains in housing stock between the 2000 and 2010 US Census, but 109 experienced a significant loss of 186 housing units (13 percent). This decrease mirrors the notable population loss in 109, which sits in the eastern half of the focus area, between the Garden State Parkway and Newark, south of I-280. Both losses can be primarily attributed to the East Orange Housing Authority’s 2004 demolition of the Arcadian Gardens public housing complex and relocation of its residents.

Table 5: Housing Unit Changes in Focus Neighborhoods, 2000-2010

Tract	Housing Units		
	2000	2010	Percent Change
109	1,457	1,271	-12.8%
111	1,897	2,045	7.8%
112	1,446	1,453	0.5%
116	1,148	1,157	0.8%
117	1,478	1,557	5.3%
Fourth Ward	7,426	7,483	0.8%
East Orange	28,485	28,803	1.1%

(US Census 2000, 2010)

In addition to this decrease in housing units, tract 109 had one of the highest vacancy percentages in the neighborhood in 2010 (15 percent, according to the US Census Bureau). This neighborhood was also hit hard by the foreclosure crisis (The Foreclosure Project).



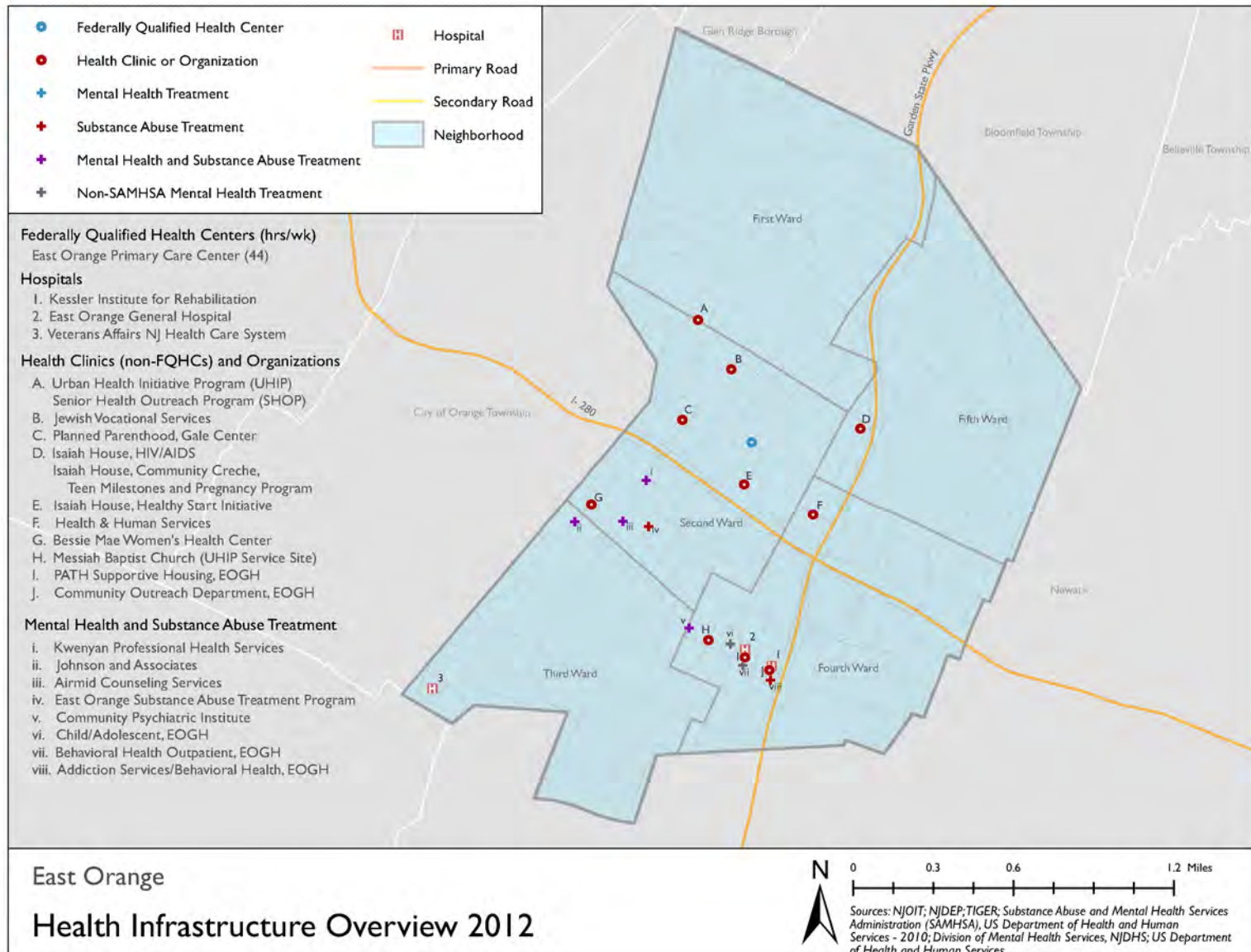
Arcadian Gardens

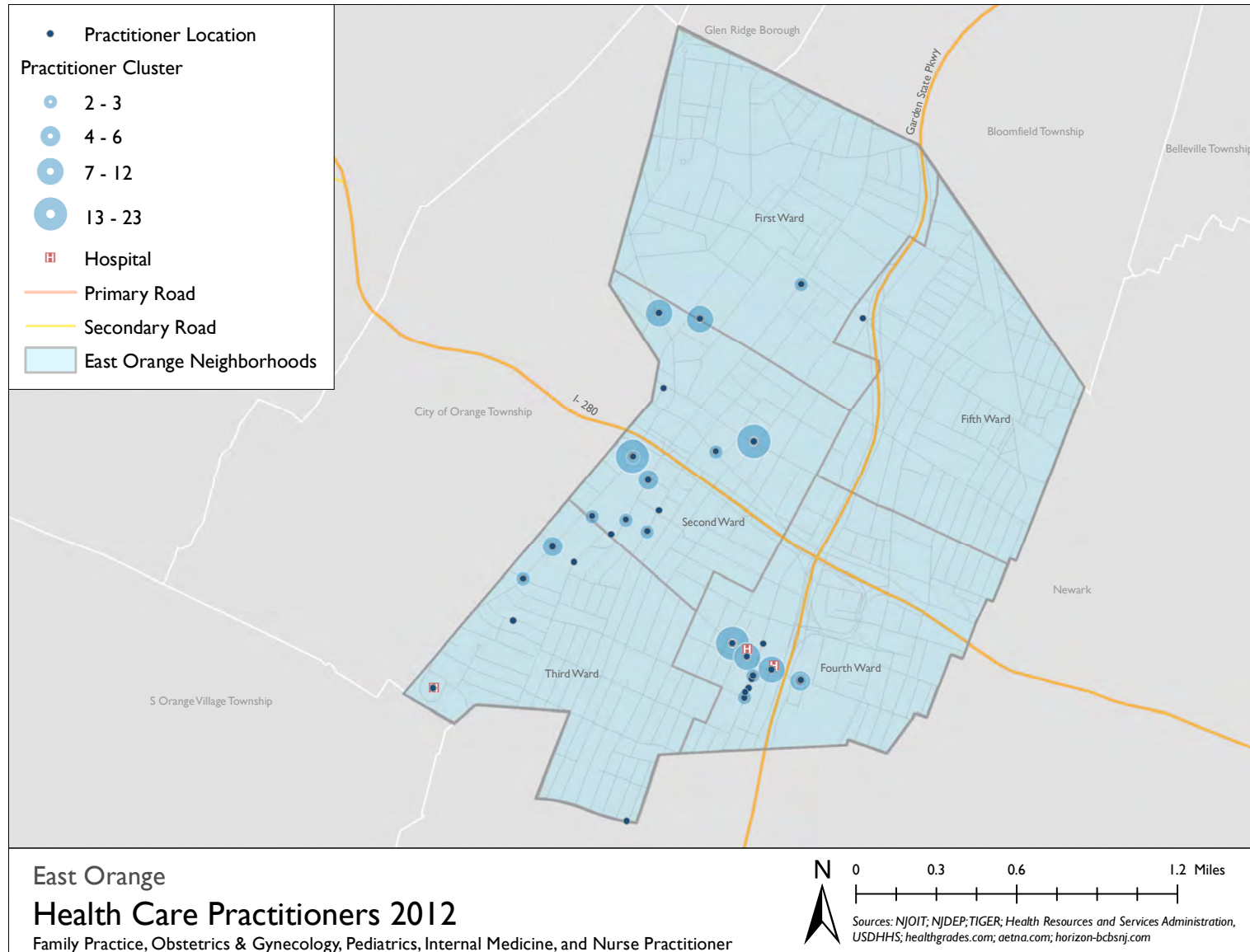
East Orange saw an influx of residents from Newark following that city's 1967 riots, many of whom settled just over the border in East Orange's Fourth Ward. The East Orange Housing Authority opened its Arcadian Gardens housing complex in 1969, just in time to accommodate many of the new residents. Consisting of 212 apartments in 23 connected low-rise buildings, the development, which provided primarily low-income units as well as some elderly housing, was overwhelmingly viewed as a welcome revival of the city's southeast side (Roberts). Unfortunately, the community's poor design made it difficult to navigate and isolated its residents from the surrounding neighborhood (so much so that it became known as its own "Little City," or "Bity"). Arcadian Gardens grew increasingly dangerous and unhealthy as facility maintenance dwindled, and in time, this combination of isolation and disrepair fostered extensive crime and gang activity (Roberts). The community ultimately became an epicenter of Bloods gang operations in the region (Sterling). Citing the deteriorating physical condition of the complex, the Housing Authority demolished it with HOPE VI funds in 2004 and relocated all of its residents ("East Orange Housing Authority Demolished Arcadian Gardens").

Table 6: Affordable Housing Characteristics in Focus Neighborhood, 2006-2011

Property Name	Publicly or Federally Assisted	Total Units	Total Assisted Units	Elderly Units	Disabled Units	Physical Inspection Scores					
						'06	'07	'08	'09	'10	'11
Arlington House	Federally Assisted	178	178			97				81	
Bailey-Holt Towers	Federally Assisted	127	127				73	77	84		
Chestnut Park Apartments	Federally Assisted	59	59			86			82		
Corinthian Towers	Federally Assisted	221	220		10					82	
East Orange Community Homes A	Federally Assisted	46	46				51	46		91	
East Orange Community Homes D	Federally Assisted	95	93				75	90			
Heritage House	Federally Assisted	204	204			77	76		79		
Kuzuri-Kijiji	Federally Assisted	246	136				85				36
Mclver Homes	Federally Assisted	35	35			59	64		80		
Vista Village	Public Housing	180						50			68

(US HUD, 2011, 2012, NJ Department of Community Affairs, 2010)





Health

Healthcare Organizational Infrastructure

Within the Fourth Ward focus area, there are relatively few community-based organizations. Of note are Joi's Angels and Cross Counter, both of which provide shelter, meals, and counseling for the homeless. JVS provides home health care and case management services. Essex County's Citizen Services division is housed within a large county facility in the northwest of the neighborhood, and offers job training services and assistance with applying for benefits. Faith-based supportive services are extremely limited in the focus area and there is only one large church in the focus area (Messiah Baptist). There are several community-based and civic institutions outside of the focus area. Isaiah House, which provides services related to homelessness, HIV/AIDS, single parent support, maternity education, and service provider training, is one significant organization in central East Orange. East Orange Family Success Center is also located nearby, as are satellite program sites for Family Connections, which provides youth development and adult mental health services.

While East Orange General Hospital (EOGH) has struggled financially over the past decade (Livio) and taken on additional patients with the closure of Newark hospitals (Augenstein), it has been making important strides in preventive and comprehensive care for the poor and uninsured. According to Kevin Slavin, EOGH President & CEO, "the hospital has ... [a] reputation of not having the best patient relations from years ago," (Augenstein) but has significantly improved its patient communications and community outreach. In late 2010, EOGH hired a new chief medical officer, Dr. Valentine Burroughs, whose background is in healthcare for underserved communities. Dr. Burroughs has placed an emphasis on expanding the hospital's preventative care programs and obesity/diabetes awareness efforts (Local Talk, Dec 2010). In 2011, EOGH was included in *Inside Jersey* magazine's list of Top Hospitals for coronary care and patient communication (Local Talk, Sept 2012). Like other urban "safety-net" hospitals that have become the primary source of health services for poor and uninsured patients, EOGH has instituted several programs to provide neighborhood residents with more comprehensive care, particularly related to issues of housing and substance abuse. On-site, the hospital's new Supportive Housing Program offers temporary housing for homeless, mentally ill individuals and provides "necessary services so they can achieve independence and reduce the cycle of evictions, hospitalizations and homelessness" (Slavin). Off-site, the hospital offers health screenings at local soup kitchens and food pantries through programs such as Screenings & Outreach Unified Program, aka "Project S.O.U.P." (EOGH website). EOGH is also part of the Greater Newark Healthcare Coalition, which, like the Trenton Health Team and Camden Coalition of Healthcare Providers, seeks to decrease the number of emergency room "frequent fliers" (uninsured and often poor individuals who use the ER as their sole source of care). The alliance, which includes Newark hospitals, the Visiting Nurses of Central Jersey, and foundation partners, among others, has established innovative outreach and comprehensive care programs such as expanded regular home care visits (O'Dowd; Augenstein).

Urban Healthcare Initiative (UHIP) is run by Dr. Alexander Salerno. The organization works with churches and communities to provide free health education and screening. The program started at Messiah Baptist Church just south of Central Avenue about three blocks from East Orange General. The organization also provides health screenings and other patient resources. Reverend Dana Owens, the pastor at Messiah Baptist has been critical in working out this partnership. This approach seems to be working well with immigrants too. They attribute it to trust with the doctor and his ability to communicate well and talk with people in a non-hospital setting (Interview, 2013).

The city has a number of health activities and has worked with Jewish Vocational Services. They collaboratively provide health education, HIV testing, other screenings, and dental care (Interview, 2012).

Healthcare and social assistance institutions comprise one of the three largest industries in East Orange (E. Orange Master Plan Overview, 2006). East Orange General Hospital (EOGH), a critical component of the city's health infrastructure and the only major healthcare provider in the focus area, sits at the center of the Fourth Ward. Located just west of the Garden State Parkway on Central Ave, EOGH is the only independent, fully accredited, acute care community hospital in Essex County (Local Talk, Sept 2012). It is also a substantial employer in the area. Health-related organizations elsewhere in East Orange, but outside of the focus area, include the VA hospital campus in the southwest of the city, and East Orange Primary Care Center (EOPCC) just northwest of the Fourth Ward. EOPCC is a federally qualified health center in the Newark Community Health Center (NCHC) network. In addition to standard non-emergency medical care (free of charge for qualified patients), NCHC facilities provide a variety of programs addressing prenatal and post-partum care, STD/HIV prevention and management, drug and alcohol abuse, and healthcare for refugees (NCHC website). The Center for Civic Engagement identified several private senior nursing facilities, clinics, and rehabilitation centers in the city, including a few senior facilities and a dialysis center within the focus area.

Urban Healthcare Initiative (UHIP)

Established in 2010 by Dr. Alexander Salerno, UHIP is a community outreach program to increase access to healthcare for residents in East Orange and the surrounding areas. The educational program rests on the core health pillars of the program, including diabetes, cardiovascular/hypertension diseases, COPD, HIV/infectious diseases, cancer screenings, chronic kidney disease, and aging/dementia/depression/dying. There are multiple entry points for community members to access these services. At Dr. Salerno's medical practice, there is a stationary clinic that is open seven days a week. To reach a broader audience, Dr. Salerno and his team collaborate with three different church ministries to provide educational programming and free clinics. Two of the churches, Messiah Baptist Church and Mt. Olive Baptist Church are located in East Orange and the third is located in Newark. Clinics are set up at each church once per month. As part of the educational outreach, a nurse practitioner presents a health topic during church services on Sundays and the health clinic is set up on site later in the week. Additional educational programs are held at the church during weeknights and provide a dinner/discussion format. While the outreach is focused on church congregations, anyone is welcome at the clinics regardless of religious affiliation.

The clinics provide 360 degree healthcare, offering all basic services found at a regular doctor's office, including full blood work and screenings. An integrated team of nurse practitioners and social workers coordinate care tailored to specific patient's needs and help them navigate the healthcare system if they have medical insurance or not. Those who are uninsured are referred to charity care. At the first visit, a patient will have all his/her blood work done, and all of the results are fully explained on the patient's second visit. This is to make sure the patient is fully educated on what is important, what might be a risk factor for them, and what they can do at home to maintain preventative care. At this point, the patient may decide to continue their medical care through UHIP or through a private practitioner. Follow-up care is done by a social worker who verifies appointments.

UHIP has a close relationship with St. Michael's Hospital, and is always looking for other hospital collaborations. They currently have an electronic medical record in place, and provide each patient with their medical records on a USB that the patient is responsible to take with them to each appointment for updates. With

proper patient release consent, medical records are shared with other private practices and hospitals for continued patient care. UMDNJ provides social workers, physicians, and nurse practitioners for the staff. UHIP also has a collaboration with Seton Hall School of Nursing for a “first responders” class that teaches local community members of the warning signs of health problems and how they can direct individuals to the proper avenue of care before a major health problem occurs. Recently, UHIP partnered with the Mental Health Association of Essex County and will have a trained person on staff to help deal with mental health issues. The program is funded mainly by the Health Foundation of New Jersey and other corporate medical and pharmaceutical donors and foundations. Working within the same smaller congregations has proven to be limiting in the two years since the organization's founding and to increase their exposure to a more mobile population, they are seeking to strike up a collaboration with the New Hope Church in Newark, which has a larger congregation and strong pre-existing social services like a soup kitchen. Since a larger church is generally so busy with other events, it makes it difficult to organize a regular clinic and educational services.

Messiah Baptist Church

Messiah Baptist Church is the leading church collaborator that works with UHIP to provide health education and medical care to its congregation in East Orange. Reverend Dana Owens began a collaborative relationship with Dr. Salerno about five years back that began with the introduction of a once a month clinic held at the church as an extension of Dr. Salerno’s SHOP program. A number of members of the congregation already took advantage of the services provided by SHOP and Rev. Owens wanted to bring it to the church to provide an easy access point to those members, and to make it more available for those who did not already participate in SHOP. From that, Dr. Salerno wished to provide an extension program that would target not just seniors, but people of all ages who were underserved and uninsured. Dr. Salerno began the UHIP program at Messiah almost two years ago, and the program has been a big success. Rev. Owens has seen the effectiveness of the program and believes that it has made a large impact on the members of his congregation in terms of bringing better health information to them, encouraging them to be more proactive about their healthcare, and improving their overall quality of life. Currently, UHIP runs its clinics once a month and serves members of the congregation and members of the community at large. The educational component of the program is presented during religious services on the Sunday of the week the clinic comes to the church. Advertising for the program is limited to these pulpit talks and church programming but word of mouth is powerful and has increased the number of participating members. There is some concern of increasing any advertising efforts, however, since Rev. Owens feels his congregation is currently adequately served by the once a month clinics and that increasing demand will put a strain on the staffing and resource availability of UHIP. The main goal, however, is being achieved, and Reverend Owens is pleased to be able to provide better information to his congregation about leading healthier, more active lifestyles (Interview, 2013).

East Orange Family Success Center

The goal of the East Orange Family Success Center is to provide access to health information to underinsured and uninsured residents. For uninsured individuals, the staff work with them to fill out the application for NJ Family Care. They have ties with the local health department and WIC. Depending on current community needs, EOFSC will host health information workshops to address those pressing topics. One of the main outreach methods they employ is through schools, especially through PTA/PTO meetings. By targeting school events and groups, they are able to reach the parents through their children. EOFSC encourages families to attend events even if they don’t have immediate health needs so if something were to come up, they have the information already to better manage their health through the proper channels. The services provided by EOFSC are free of charge and they often offer a meal during the workshop.

The topics of the workshops are mostly education-based but they will occasionally invite in outside groups to facilitate health services. One of the things that EOFSC prides itself on is their friendly and supportive environment. Rather than tell families what kinds of services they should use, they work with families to help them make the right decisions. They believe this approach encourages community empowerment by highlighting the strengths of the family rather than the problems. Community members of all kinds utilize the services provided by EOFSC. The most common user is a family unit of single or dual parent households, but they also serve a number of single individuals and multi-generational families.

One of the barriers to access rests in the community's approach to healthcare. Many people are not proactive about their needs so if a family has no need for a particular service at the moment, they often won't seek out preventative care or information. Although the center is located in an accessible area to public transportation, many families still struggle with paying for transportation either from a financial perspective or a logistic one. The center itself has a large conference room where sessions are held, but it does not comfortably fit many people and if there is a large crowd, then the program has to be divided to accommodate the demand. Some of the key issues that the center focuses on are breast cancer awareness, NJ Family Care program, and illiteracy. Continuing with their connection with the schools, EOFSC operates a summer tutoring program. Teachers volunteer to ensure that students do not fall behind. Parent support is a vital aspect of the center and the programs serve to help parents develop leadership skills they can apply in their own personal or professional development.

Health Services, City of East Orange

The city's health department offers clinics on site at the health department building including dental, STD/HIV testing, immunizations, well baby, environmental services (including the lead program), and TB. Some of the main community health concerns are heart disease (especially hypertension), respiratory disease (including lung disease), asthma, lead poisoning, diabetes, and mental health. Asthma is one of the leading health concerns in the area, followed by prenatal care. In addition to medical care, the department offers a series of educational programs. These are listed on city hall's website and distributed at community meetings and available in the lobby of the health department itself. For referrals, patients are often networked into department programs or sent to partner programs. The public school system is a strong partner and offers outreach projects in schools about topics like STD/HIV. Public libraries are also a source of educational distribution especially on the topic of mental health. Library workers reached out to the health department for programming directed toward the increasing numbers of homeless individuals who use the library as a safe place to be during the day; many of whom suffer from mental health issues or behavioral health problems. To target this population, clinics and meetings are also held at the libraries.

Some of the biggest barriers to service are related to budget cuts. The projects were better staffed, funded, and implemented before the budget cuts. Most notably missing are the halfway houses that used to exist for mental health patients that, while arguably not the most effective, were more effective than current services because now many mental health patients are out on the streets and the homeless population has swelled, consisting of many people with mental or behavioral health problems. While there is a strong WIC program, other childcare services for prenatal and early infancy needs are sorely lacking. There are few pre-natal doctors and education programs for young mothers, and there is no longer a local hospital that handles births. In the region, only UMDNJ, Barnabus, and St. Michaels deal with deliveries. Most of the work done for prenatal care is handled by the Healthy Start Initiative at the FQHC. Additionally, with the changing guidelines of the healthcare industry as a whole, it becomes difficult for individuals to even access care because they have to be

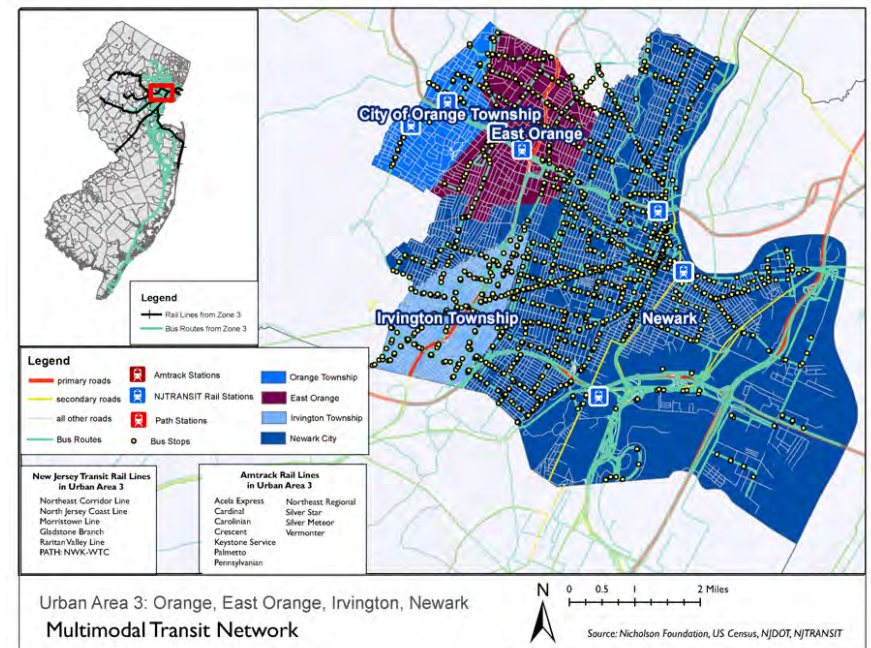
specifically qualified for it due to income, access to insurance, or other social factors. One of the big problems with the healthcare system is that it is city-specific, and that each locality has their own channels of navigation and that often leads to frustration and disinvestment in the system. Many people will have a negative experience with some facet of the healthcare industry and it will turn them off from using services or seeking information with the result being people who choose the wrong service for their needs without realizing it. In working within other community collaborations, the high turnover rate in those organizations leads to delays and duplication of data. Fewer people are interested in engaging in their healthcare and require increased incentives to attend workshops (interview, 2013).

Partners for Health

While Partners for Health does not work specifically in East Orange, they have an interesting approach to their services that would work within the existing community structure. Many organizations feel working with others will only slow them down or detract from their overall mission as well as provide competition for limited grant dollars. This constant push forward leaves little time for reflection and assessment of programs as they work within the broader community. Partners for Health has decided to take a less direct and more regional approach. Modeled on the idea of “collective impact” pioneered by the Cincinnati Foundation, Partners for Health works to bring together stakeholders to build community partnerships that coordinate efforts towards a shared goal. The programs implemented to achieve this goal are evidence-based and serve to empower the community by integrating individuals into the process. Partners for Health works as the backbone for other foundations and organizations to bring them together, provide funding, technical support, and assess effectiveness of programs (interview, 2013).

Transportation

New Jersey Transit operates two rail stations in East Orange, both in the central region of the city, and provides service for the Morris & Essex rail line. A train ride to New York Penn Station is approximately 30 minutes. East Orange is well-served by the NJ Transit bus system, transporting passengers to most neighboring towns and cities. The availability of local bus and rail service has enabled East Orange residents to commute without cars, and nearly a quarter of residents (23%) reported that they did not own a vehicle in the 2010 Census. In the focus area, public transportation is limited. Bus routes are located largely along the eastern portion of the area. NJ Transit train stations are also difficult to reach with Route 280 and the Garden State Parkway acting as barriers. East Orange General Hospital



is accessible through walking for the majority of the area however. Although a portion of the focus area, the northeastern section, is impeded by Route 280 and the Garden State Parkway and may make it hard for some residents to navigate.

Community Organizations

List and Short Description of Other Organizations

Joi's Angels (http://www.joisangels.com/our_services.php)

Faith-based organization providing supportive services to individuals challenged by displacement, homelessness or other difficulties, including: safe housing, food assistance, transportation, referrals, rehabilitation placements, program placements, life skills counseling, group activities, spiritual counseling, and NA/AA meetings.

Cross Counter (<http://www.ccinj.org/>)

Non-profit organization providing residential facilities for at-risk youth ages 13 to 18. The East Orange location is Tillmes House, providing temporary housing for adolescent girls for up to 90 days. In addition to shelter, services include: life skills training and education, vocational counseling, and enrichment activities.

JVS MetroWest – Health Care Case Mgmt. Program (<http://www.jvsnj.org/health-care-case-management>)

JVS is a nonprofit, community-based health and human services organization providing health care case management services for adults younger than 55 with severe disabilities, physical, developmental, or psychological health issues. In addition to case management, services include: basic health screenings and on-site educational trainings for clients.

Social service providers that serve 4th Ward residents but located outside of the focus area (selected from broader findings)

East Orange Senior Services - Bowser Family Senior Center

(<http://www.eastorange-nj.gov/Departments/HealthHumanServices/SeniorServices/index.html>)

Advocate organization for East Orange's senior and disabled populations. Services include: enrollment assistance for benefits and entitlements, education on benefits and entitlements, transportation services, recreational and cultural trip sponsorship, nutritional assistance, identification cards, pre-screening for Food Stamps, energy assistance, prescription and health benefits, and basic living assistance - cleaning, laundry, meal preparation, and errands - for those in need.

East Orange Family Success Center (Operated by Independence: A Family of Services, Inc.)

(<http://www.ifsny.org/for-our-families/east-orange-family-success-center/>)

A family success center, operated by Independence: A Family of Services, Inc., intended to serve as a gathering place within the East Orange community with the aim of benefiting the area's children by strengthening families and neighborhoods. The Center's services and programs include: family success plan

development and implementation support, information and referral services, classes on effective parenting, parent-child activities, health screenings, grandparent support activities, summer literacy program, children's book clubs, and activities for adolescents.

East Orange / Orange Community Development Corporation (EO/OCDC) (<http://mysite.verizon.net/bizsscjb/>)

Nonprofit social service agency offering support services to those undergoing economic crisis, including: emergency services, including assistance with food, clothing, shelter, rental, mortgage, and utilities, a summer enrichment program for children, holiday programs (Thanksgiving baskets and Christmas toys), employment assistance, referrals, and case management.

Family Connections (based in Orange, but operates programming in East Orange)

(<http://familyconnectionsny.org/about.html>)

Agency whose aim is to strengthen parents and families as well as to promote early childhood development using a school- and community- based prevention approach. FAMILY Connections offers more than 30 programs under the following service areas: early childhood development, school-based youth services, domestic violence services, at-risk youth programs, family support and reunification, and mental health and addiction services.

Isaiah House (<http://www.isaiahhouse.org/>)

A non-profit agency and East Orange's only shelter, in operation since 1988, providing temporary lodging to families in addition to ancillary services, including: life skills training, household financial management counseling, job search assistance, tutoring, medical referrals, and a support group for substance abuse.

Tri-City Peoples Corporation (<http://www.tri-citypeoples.org/home.htm>)

Non-profit community development corporation providing a wide range of services to the area's low-income and disadvantaged individuals. Services areas include: education, employment and technological training, social services, health and mental health care, and housing.

Works Cited

- Applebaum, Aliza. 2010. "East Orange Hospital's New Chief Hopes to Expand Preventative Care." *The Star-Ledger*. December 10. http://www.nj.com/news/local/index.ssf/2010/12/east_orange_hospitals_new_chie.html.
- Augenstein, Seth. 2011. "Newark Coalition Strives to Treat the Weak and Uninsured outside the ER." *The Star-Ledger*. November 13. http://www.nj.com/news/index.ssf/2011/11/newark_coalition_strives_to_tr.html.
- Campbell, Naeema. 2013. Grants Assistant, Partners for Health. Phone Interview.
- DePalma, Schoor, preparer. 2006. *2006 City of East Orange Comprehensive Master Plan*. Adopted 5 April 2006, East Orange, NJ. *Dept. of Policy, Planning & Development: Master Plan*. City of East Orange. <http://www.eastorange-nj.gov/Departments/Planning/PEOPpdfs/MASTER%20PLAN/Acknowledgements.pdf>.
- Dilworth, Kevin C. 2007. "East Orange seeks developers for a vital project." *The Star-Ledger*. March 16. EAST, ESSEX: 027. *NewsBank*. <http://infoweb.newsbank.com/>.
- Dilworth, Kevin C. 2008. "E. Orange to hire housing consultant - Mission is to jump-start redevelopment of \$40 million community." *The Star-Ledger*. January 31. ESSEX, ESSEX: 29. *NewsBank*. <http://infoweb.newsbank.com/>.
- Elliott, Walter. "East Orange General Hospital Holds Fourth Annual Public Meeting." *Local Talk* [Essex County, NJ] September 20. *EOGH Press*. <http://www.evh.org/Press/Local%20Talk-EOGH%20Holds%20Fourth%20Annual%20Public%20Meeting-September%2020,2012.pdf>.
- Felsenfeld, Marcy. 2012. Program Officer, The Healthcare Foundation of New Jersey. Phone Interview.
- Jordan, Frank. 2013. Social Worker, UHIP. Phone Interview.
- Housing Authority of the City of East Orange. 2012. "East Orange Housing Authority Demolished Arcadian Gardens." <http://www.eoha.org/AboutUs/tabid/4143/Default.aspx>.
- Housing Authority of the City of East Orange. 2012. "Housing Authority Services." <http://www.eoha.org/>.
- Kaiser, Kierre. 2013. Volunteer and Community Partner Coordinator, East Orange Family Success Center. Phone Interview.
- LaRussa, Karen. 2013. Health Educator, City of East Orange Health Services. Phone Interview.
- Livio, Susan K. 2012. "\$30M in grants awarded to 8 troubled hospitals." *The Star-Ledger*. April 21. http://www.nj.com/news/index.ssf/2012/04/financially_troubled_nj_hospit.html.

LowIncome Housing.US. "East Orange, NJ Low Income Housing." http://www.lowincomehousing.us/NJ/east_orange.html.

O'Dowd, Mary E. 2012. "Increasing Access Through Establishing Successful Community Health Center and Hospital Collaborations." Speech. NJPCA & Hospital Alliance Conference: Establishing Successful Community Health Center and Hospital Collaborations. RWJ Hamilton Center for Health & Wellness, Mercerville, NJ. June 7. *NJ Dept. of Health: Commissioner's Speeches*. State of New Jersey Department of Health. http://www.state.nj.us/health/commiss/documents/speech/june7_2012.pdf.

Owens, Dana. 2013. Pastor, Messiah Baptist Church. Phone Interview.

Roberts, Reginald. 1999. "Grant would provide a way out of 'Little City' - Townhouses in plan for East Orange site." *The Star-Ledger*. June 2. WEST, ESSEX: 31. *NewsBank*. <http://infoweb.newsbank.com/>.

Slavin, Kevin, and Suzanne Ianni. 2011. "For Many New Jerseyans, Urban Hospitals Are Safety Net." *The Star-Ledger*. January 18. http://blog.nj.com/njv_guest_blog/2011/01/for_many_new_jerseyans_urban_h.html.

Sterling, Guy. 2002. "Move against Bloods groups called new use of state racketeering statute." *The Star-Ledger*. July 19. *NewsBank*. <http://infoweb.newsbank.com/>.

United States. Census Bureau. *American Community Survey*. Washington: US Census Bureau. <http://factfinder2.census.gov/>.

United States. Census Bureau. *United States Census 2000*. Washington: US Census Bureau. <http://factfinder2.census.gov/>.

United States. Census Bureau. *United States Census 2010*. Washington: US Census Bureau. <http://factfinder2.census.gov/>.

Irvington East Ward

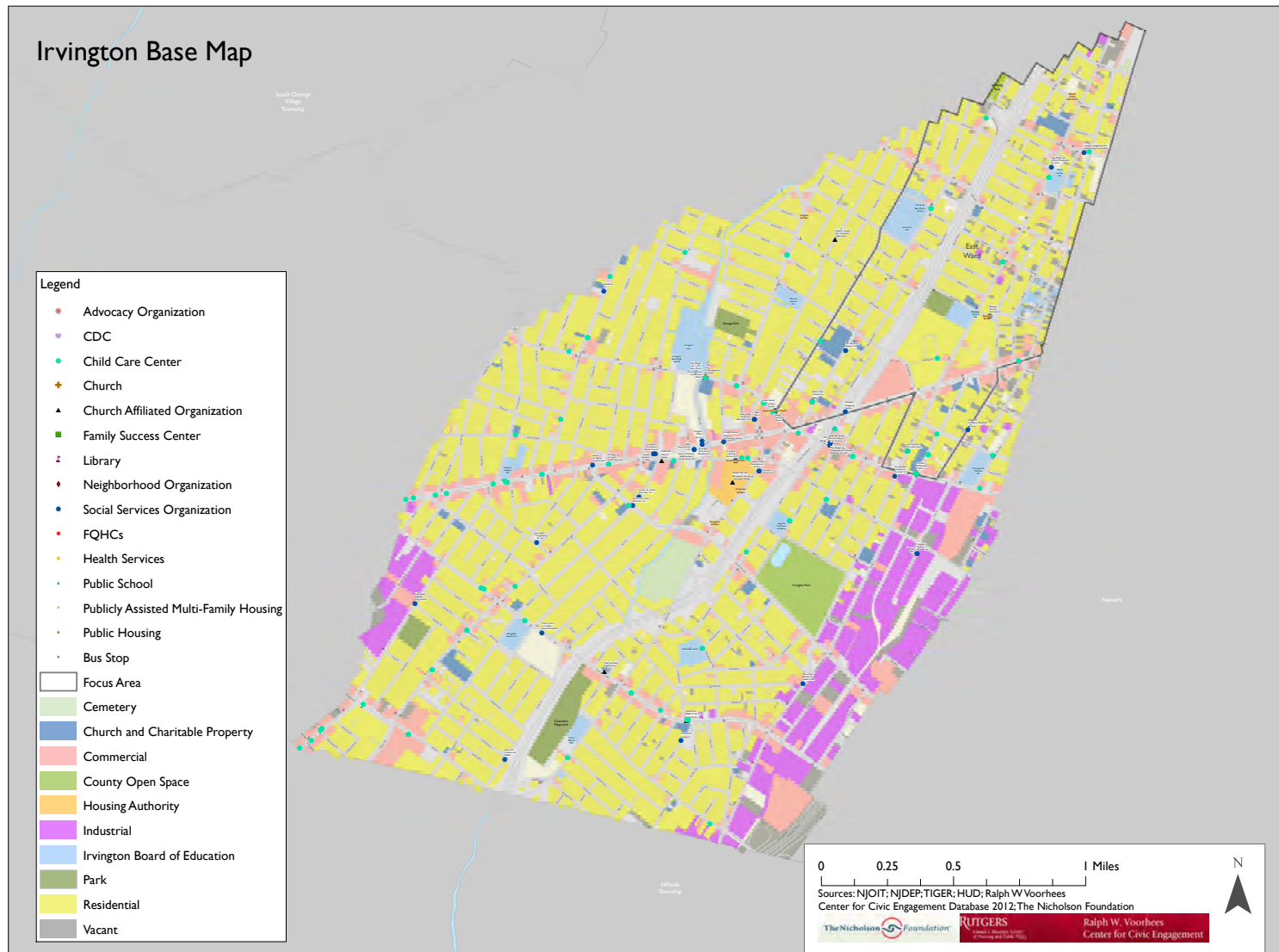
Medha Dixit
Margaret Ricke

with
Ronit Anspach
Pritpal Bamhrah
Anthony Capece
Laura Chamberlain
Mirabel Chen
Katie Davis
Michael D'Orazio
Ryan Good
Gregory Hughes
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2013

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Neighborhood

East Ward

Irvington's East Ward is located in the northeastern section of the municipality, bordered on the north by Newark's Lower Vailsburg and Fairmount neighborhoods and to the east by Newark's West Side Neighborhood. Linden Avenue bounds the ward on the west, and Springfield Avenue forms the majority of the ward's southern boundary (with the exception of a five-block section that juts south of this avenue.) Springfield Avenue also comprises the wider municipality's major commercial corridor, spanning the width of the city and converging with Linden Avenue at Irvington's downtown. The Garden State Parkway bisects the East Ward which, during its construction post-World War II, caused much destruction in the area's "previously tranquil neighborhoods" and contributed to population flight (Irvington Planning Board, 2002). Today, the Parkway limits connectivity between the ward's eastern and western sections. The East Ward encompasses four complete census tracts (126, 130, 132, and 133) and portions of two additional tracts (119 and 131.) For the purpose of this study, tracts 119 and 131 are treated as if they were fully contained within the ward's boundaries.

Like much of Irvington, the East Ward is primarily residential. In addition to the two- and three-story row houses that hint at Irvington's streetcar suburb past, there are garden apartments and high-rise apartments of up to fifteen stories, giving it a higher residential density than elsewhere in the municipality. The ward is home to three elementary schools and one middle school. There are a handful of religiously-owned properties. In addition to the primary commercial corridor along Springfield Avenue, commercial properties are clustered along a few of the East Ward's main arteries (Grove Street, 16th Avenue and 18th Avenue) though these secondary corridors struggle with inactivity and suffer from high vacancy rates (Irvington Planning Board, 2002). Brand New Day completed a neighborhood plan for part of the East Ward (Crandall, 2012).



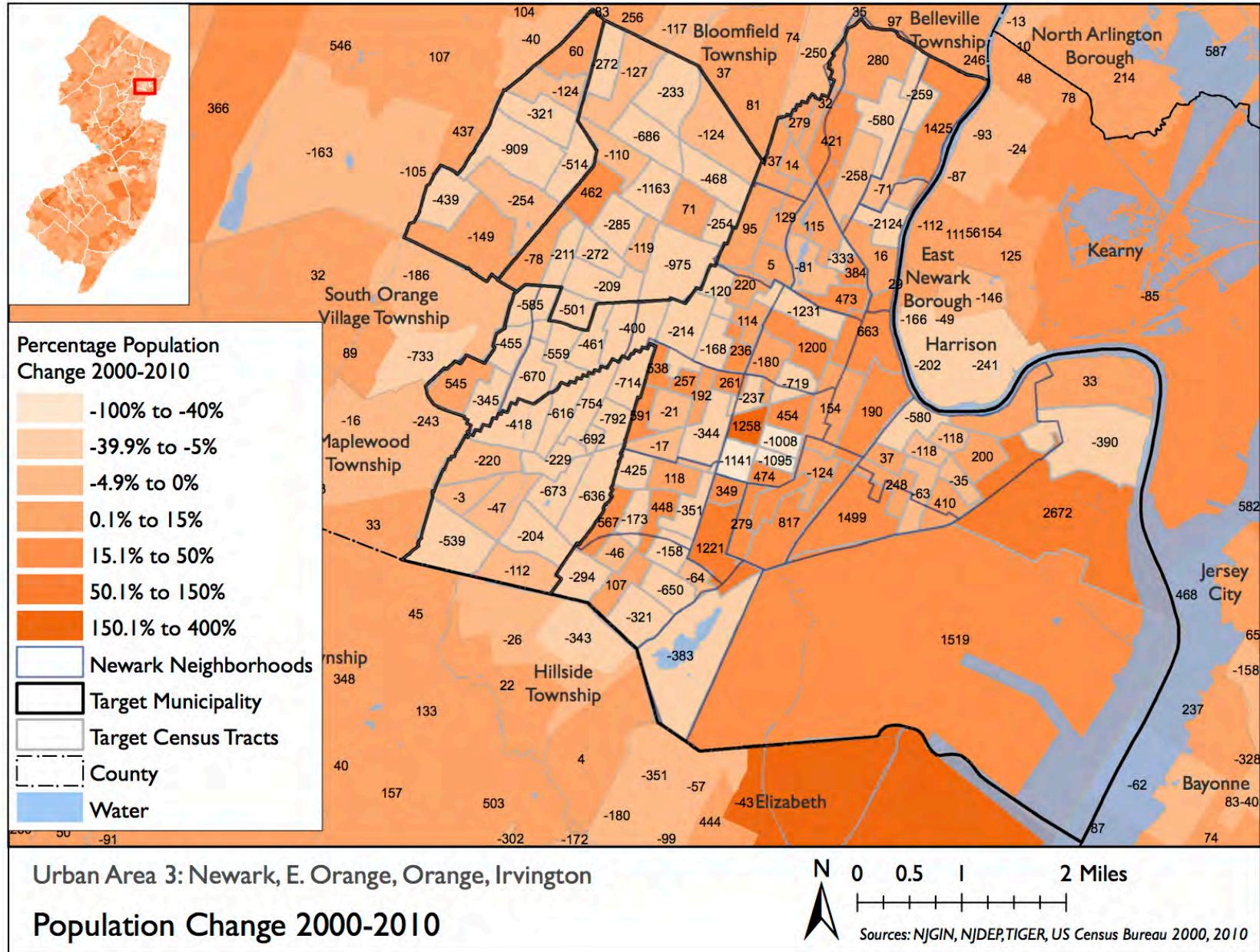
Table 1. East Ward Characteristics

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population	14,293	100%	Families (2010)	3,289	100%
			Female-headed with Children	1,127	34%
Age (2010)			Economic (2007-2011)ⁱ		
Under 5 years	1,177	8%	Median Household Income	\$23,708 - 50,694	
5-19 years	2,941	21%	Persons below Poverty	3,119	20%
20-64 years	8,964	63%	Total Civilian Labor Force	8,019	100%
65-74 years	790	6%	Employed	6,358	79%
75+ years	421	3%	Unemployed	1,661	21%
Race (2010)			Housing (2010)		
White	538	4%	Total Units	7,171	100%
Black	12,496	87%	Vacant Housing Units	1,313	18%
Asian	102	1%	Owner Occupied	996	17%
Hispanic	1,314	9%	Renter Occupied	4,862	83%
Household (2010)	5,858	100%			
Multigenerational	367	6%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Population

As of 2010, there were 14,293 East Ward residents, comprising nearly 27% of the municipality's total population. During the decade prior, this section of Irvington experienced a population decline that far outstripped that of the wider municipality, losing over one-fifth of the ward's 2000 population (compared to the still considerable 11% population loss experienced citywide.) In 2002, the Irvington Planning Board, noting the particularly rapid turnover of housing units in the East Ward, suggested that the presence of "crime and abandonment" in the area motivated residents to move elsewhere within the Township, a phenomenon likely only exacerbated by the subsequent foreclosure and economic crises (Irvington Planning Board, 46). Even so, the East Ward is home to many middle class residents who are retired teachers. These residents provide strong community leadership, attend community meetings, run organizations, and lead efforts.



The two age pyramids below show the population changes between 2000 and 2010. It looks like some of the younger people left between 2000 and 2010. As with the other study areas, there are fewer men than women but the pattern seems a bit different than in some of the other communities.

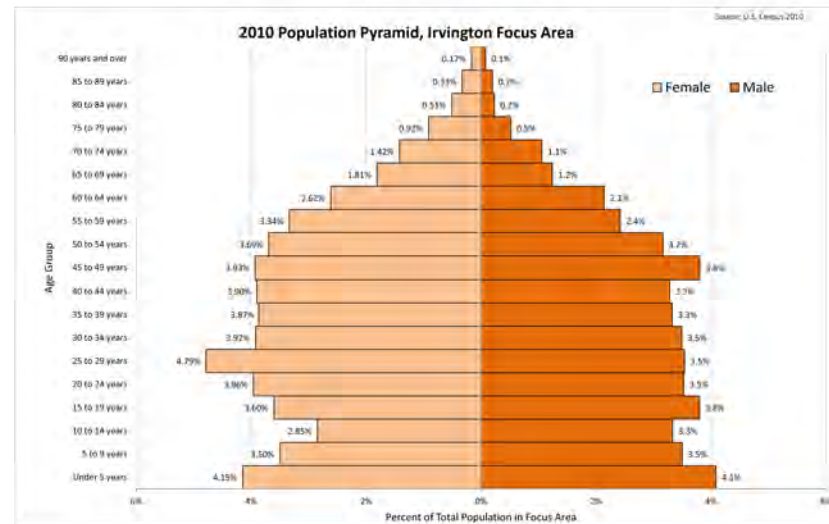
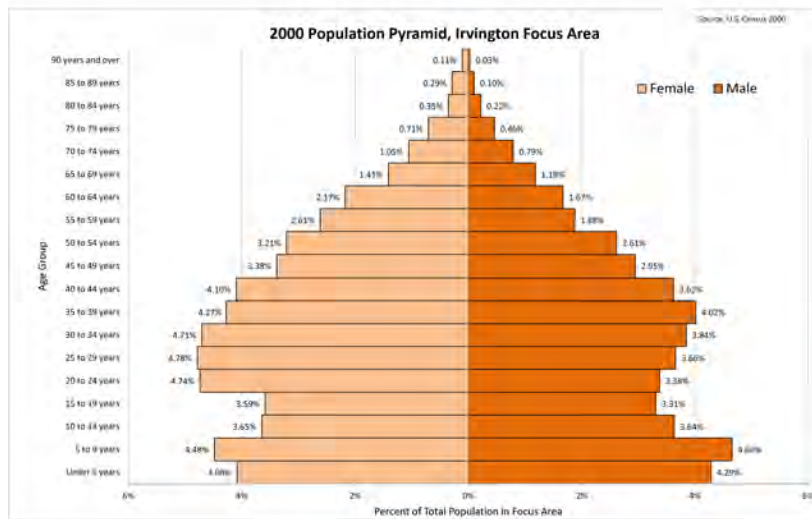


Table 2: Total Population of Focus Neighborhood, 2000 & 2010

Tract	2000	2010	Percent Change
126	3,731	2,964	-20.6%
130	2,646	1,954	-26.2%
132	3,450	2,658	-23.0%
133	4,053	3,333	-17.8%
119	1,930	1,701	-11.9%
131	2,319	1,683	-27.4%
East Ward	18,129	14,293	-21.2%
Irvington	60,695	53,926	-11.2%

(US Census 2000, 2010)

In 2010, black residents formed the overwhelming majority of the ward's population, comprising 87% of all residents. Non-Hispanic whites made up 4% of the ward's residents, while 9% of all residents identified as Hispanic (U.S. Census Bureau 2010).

Table 3: Racial & Ethnic Representation in Focus Neighborhoods 2010

Tract	White		Black		Hispanic	
	Count	Percent	Count	Percent	Count	Percent
126	101	3.4%	2,676	90.3%	173	5.8%
130	78	4.0%	1,705	87.3%	156	8.0%
132	90	3.4%	2,319	87.2%	272	10.2%
133	126	3.8%	2,888	86.6%	356	10.7%
119	111	6.5%	1,423	83.7%	172	10.1%
131	32	1.9%	1,485	88.2%	185	11.0%
East Ward	538	3.8%	12,496	87.4%	1,314	9.2%
Irvington	3,042	5.6%	46,058	85.4%	5,716	10.6%

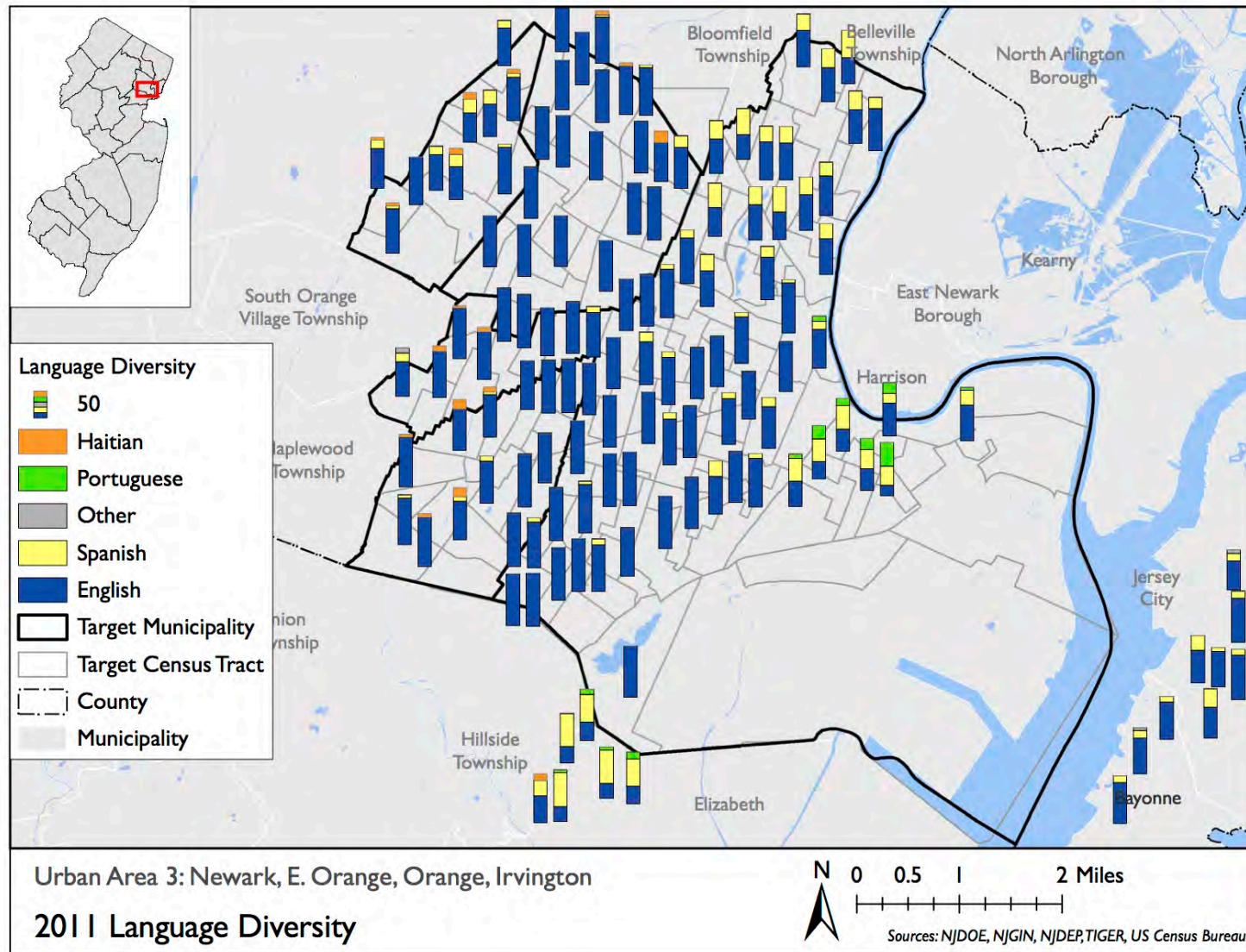
(US Census 2000, 2010)

Table 4: Changes to Neighborhood's Racial & Ethnic Composition, 2000 & 2010

Tract	White		Black		Hispanic	
	2000	2010	2000	2010	2000	2010
126	4.0%	3.4%	87.2%	90.3%	6.5%	5.8%
130	7.0%	4.0%	83.7%	87.3%	9.0%	8.0%
132	3.7%	3.4%	90.0%	87.2%	7.6%	10.2%
133	5.0%	3.8%	86.7%	86.6%	9.5%	10.7%
119	10.5%	6.5%	77.5%	83.7%	9.6%	10.1%
131	3.5%	1.9%	88.8%	88.2%	7.9%	11.0%
East Ward	5.2%	3.8%	86.3%	87.4%	8.3%	9.2%
Irvington	9.0%	5.6%	81.7%	85.4%	8.4%	10.6%

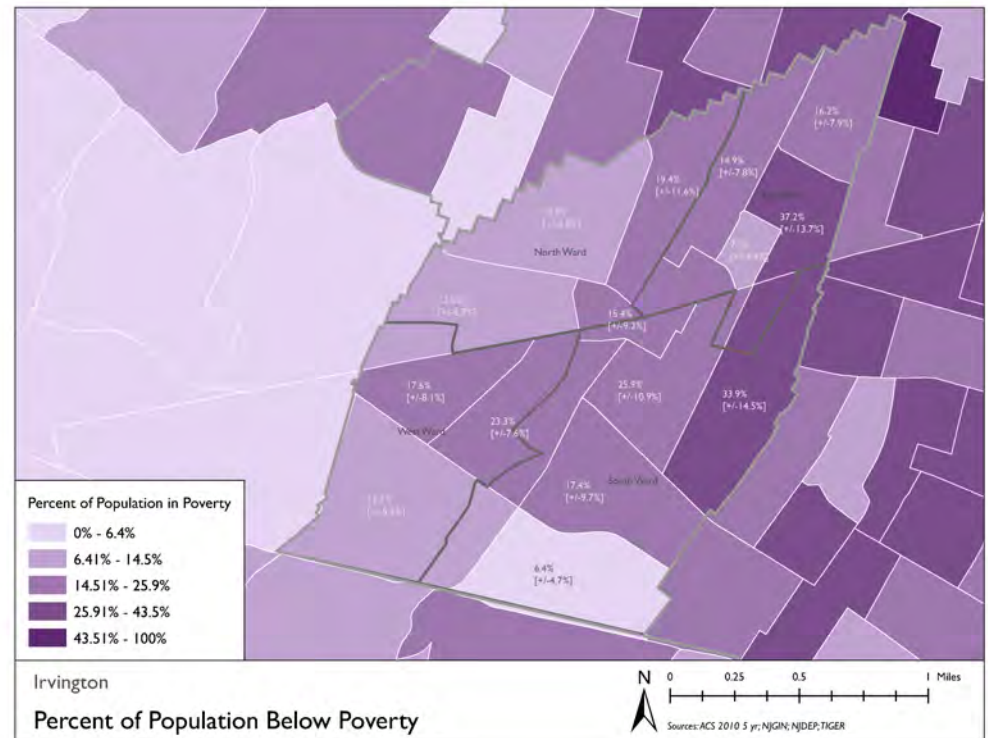
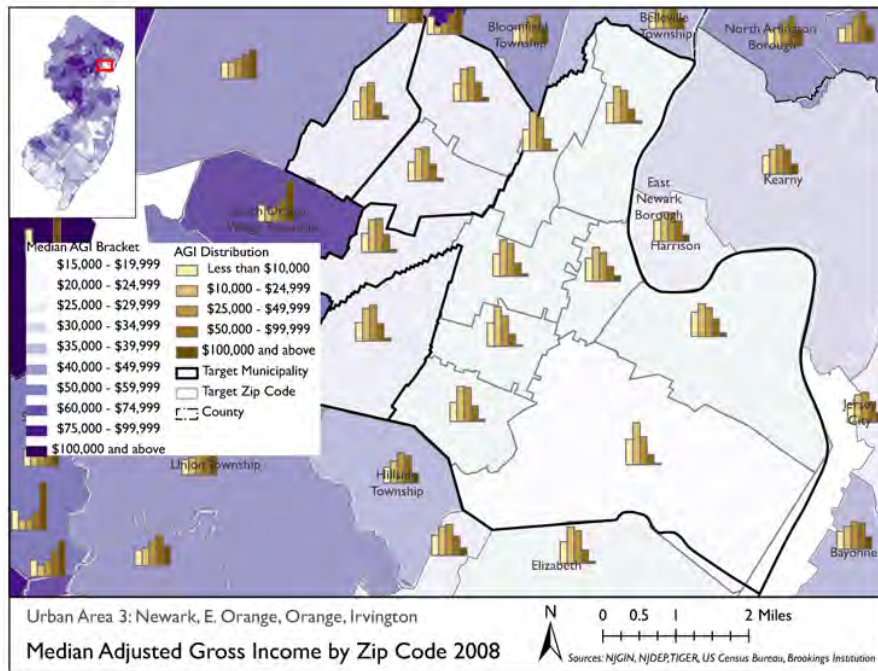
(US Census 2000, 2010)

The languages spoken by families with children in the East Ward's elementary schools suggest that most residents speak English.



Income

Irvington's East Ward has a mixture of incomes. Most of the census tracts in the East Ward have below 16% of the population in poverty. But the census tract that forms the border with Newark's West Side Park neighborhood and Springfield Avenue has a poverty rate of 37% in 2010 (U.S. Bureau of the Census, 2010). The 2008 adjusted gross income for the city suggests an income mix similar to that of Newark's Weequahic. While the neighborhood has many lower income residents, it is also home to many middle income residents.



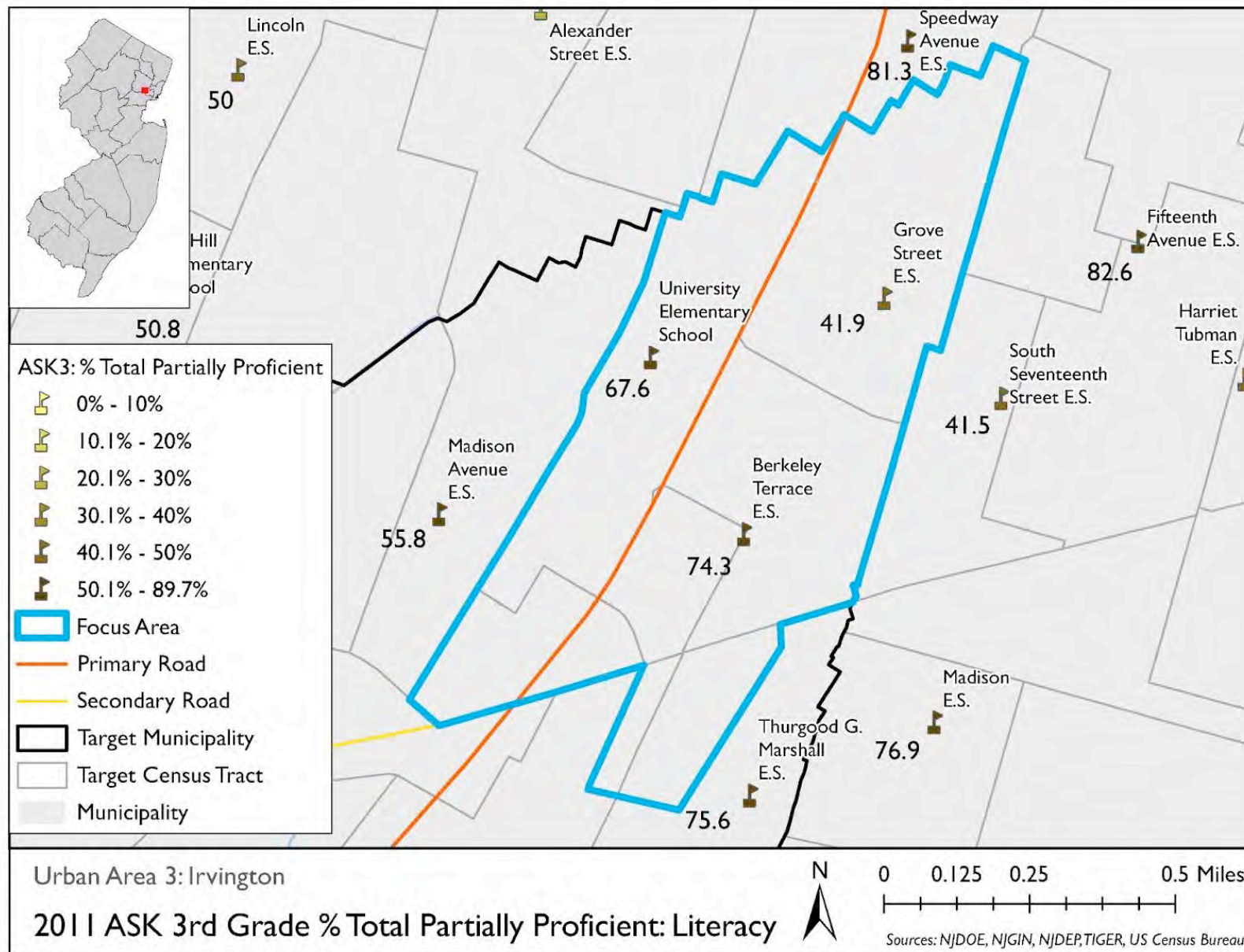
Education

Elementary schools suggest a small but diverse immigration population of people who speak Spanish, English and French Creole, Haitian, and Igbo (Nigerians). Elementary schools in Irvington share a common low student suspension rate, which may or may not be a new trend. It was lowered rather sharply between '09-'10 and '10-'11. On average, 66% of Irvington students were found to be partially proficient on the NJ ASK 3rd grade literacy test, as compared with the state average of 36.9%. Berkeley Terrace Elementary, which had the highest percent of partially proficient 3rd graders in our focus area--74%--also counts 20% of their students as disabled. University Elementary also had a high number of partially proficient 3rd graders, at 68%, and 23% of their students are disabled. Grove Street Elementary, which has 100% of their student population speaking English as their first language at home, had a fairly low score of partially proficient 3rd graders, at 45%.

Table 5: School Characteristics 2010-11

School	Grade Levels	Total School Population	% Partially Proficient 3rd Grade NJ Ask	First Language Spoken at Home	Students with Disabilities	Mobility	Limited English Proficiency	Student Suspensions
Berkeley Terrace	K-5	465	74%	English - 90.4% Spanish - 4.3% Creole - 3.5% Twi .6% Haitian - .4% Igbo - .2% Other - .6%	20%	30%	11%	3%
Grove Street	Pre K - 5	377	45%	English - 100%	15%	36%	0.30%	4% (09/10 - 59%)
University Elementary	K-5	553	68%	English - 91.5% Spanish - 4.1% Haitian - 3.4% French - .5% Creole - .2% Indo-Eu - .2% Twi - .2%	2%	23%	9%	5%

(NJ Department of Education, 2011)



Housing

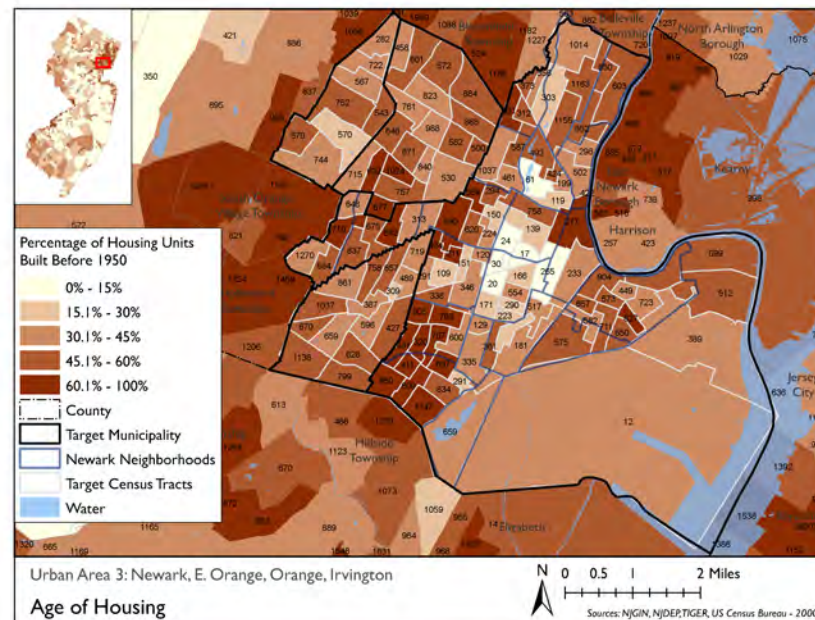
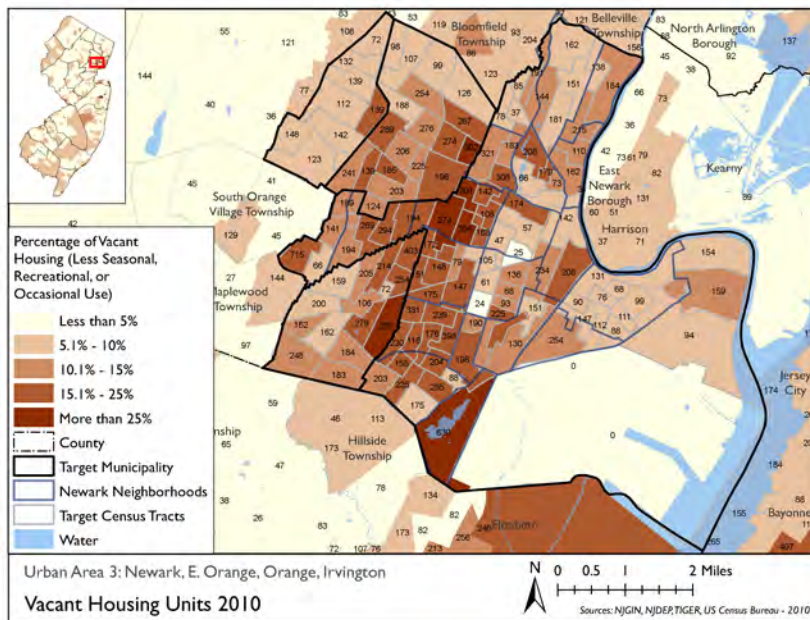
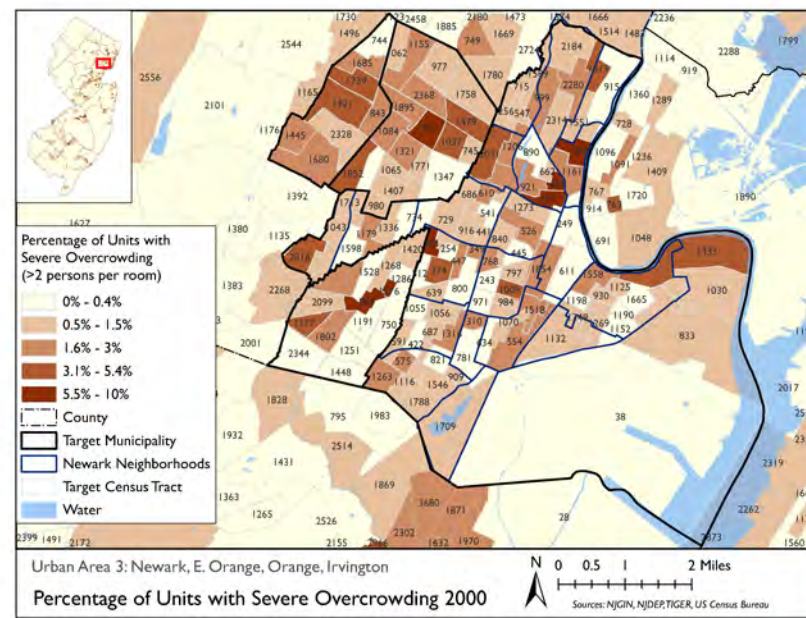
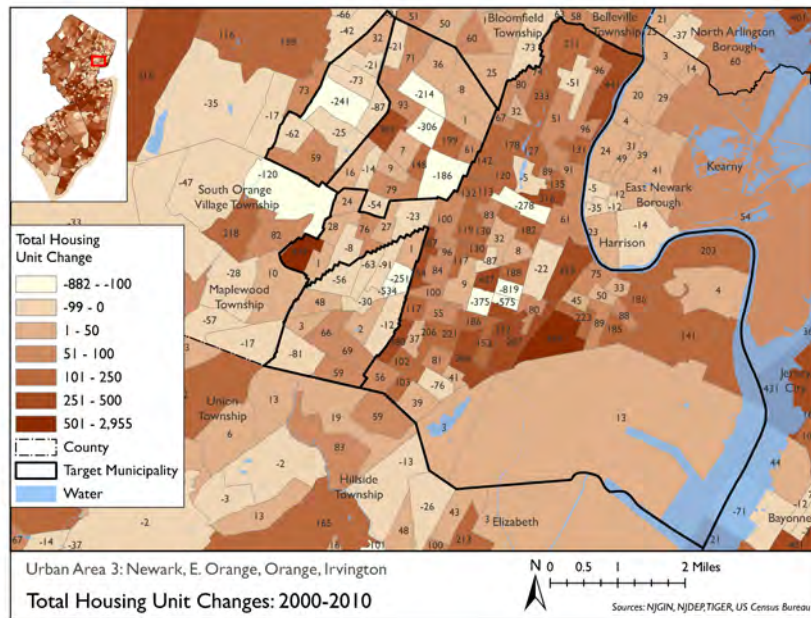
In its 2002 Proposed Master Plan, the Irvington Planning Board described the East Ward as a location of “extreme abandonment and disinvestment resulting in severely dilapidated housing [...] so badly deteriorated that they are fire hazards” (45). The extent of housing deterioration in parts of the East Ward presented such a threat to the health and safety of the area’s residents that, at the time of the Master Plan’s drafting, the Township was working with haste to demolish these structures. The neighborhood was subsequently caught in the foreclosure crisis and many homes and families have been cycling through the foreclosure process.

Between 2000 and 2010, the East Ward lost 12% (929 units) of its housing stock. Tract 130 lost 31% (534) housing units when the housing there was transformed into Maple Gardens, a development of four high-rise apartment complexes. The loss of units occurred in the absence of any apparent demolition; during the 2000s, the complexes underwent foreclosure and subsequent redevelopment during which time they were transformed into a “vertical gated community” (ABC Channel 7 Eyewitness News, 2008). In adjacent tract 132, housing declined 16% (251 units) during this decade. The block between Standard Place and 22nd Street, between 19th and 20th Avenues was slated for a new school which was not built (U.S. Census Bureau 2000, 2010).

Table 6: Housing Unit Changes in Focus Neighborhoods, 2000-2010

Tract	Housing Units		
	2000	2010	Percent Change
126	1,401	1,302	-7.1%
130	1,749	1,215	-30.5%
132	1,537	1,286	-16.3%
133	1,677	1,673	-0.2%
119	878	848	-3.4%
131	858	847	-1.3%
East Ward	8,100	7,171	-11.5%
Irvington	24,116	23,196	-3.8%

(US Census 2000, 2010)



There are two federally assisted project-based Section 8 buildings in Irvington's East Ward. Located on 15th Avenue in census tract 133, the 128-unit Edward F. Gray Apartments provide housing for Irvington's low-income elderly. The 153-unit Berkeley Terrace complex is located at Berkeley Terrace and Grove Street, in tract 132. The most recent physical inspection scores are good.

Table 7: Affordable Housing Characteristics in Focus Neighborhood, 2006-2011

Property Name	Publicly or Federally Assisted	Total Units	Total Assisted Units	Elderly Units	Disabled Units	Physical Inspection Scores					
						'06	'07	'08	'09	'10	'11
Berkeley Terrace	Federally Assisted	153	152		8			77	64	88	
Edward F. Gray Apartments	Federally Assisted	128	128			80		96			
Jewish Federation Towers	Federally Assisted	134	133	133		86		65		93	

(US HUD, 2011, 2012)

Crime

Irvington's crime statistics are among the worst in the state. Among the municipalities included in this study, Irvington had the highest violent crime rate per square mile in 2010, at 321.8. To put this figure into perspective, the next highest value was 229.3 in Asbury Park; in neighboring Newark, the rate that year was 123.2 (New Jersey State Police, Uniform Crime Report, 2010). In fact, as the New York Times reported in 2000, the gains made in combating crime within Newark in the late 1990s only served to exacerbate criminal activity in Irvington, and particularly along the Irvington-Newark border (Jacobs, 11 Sep 2000). In the East Ward, with its plentiful stock of abandoned houses and an overstretched police force to patrol the streets, criminals found an ideal operating base.

Health

Health Issues

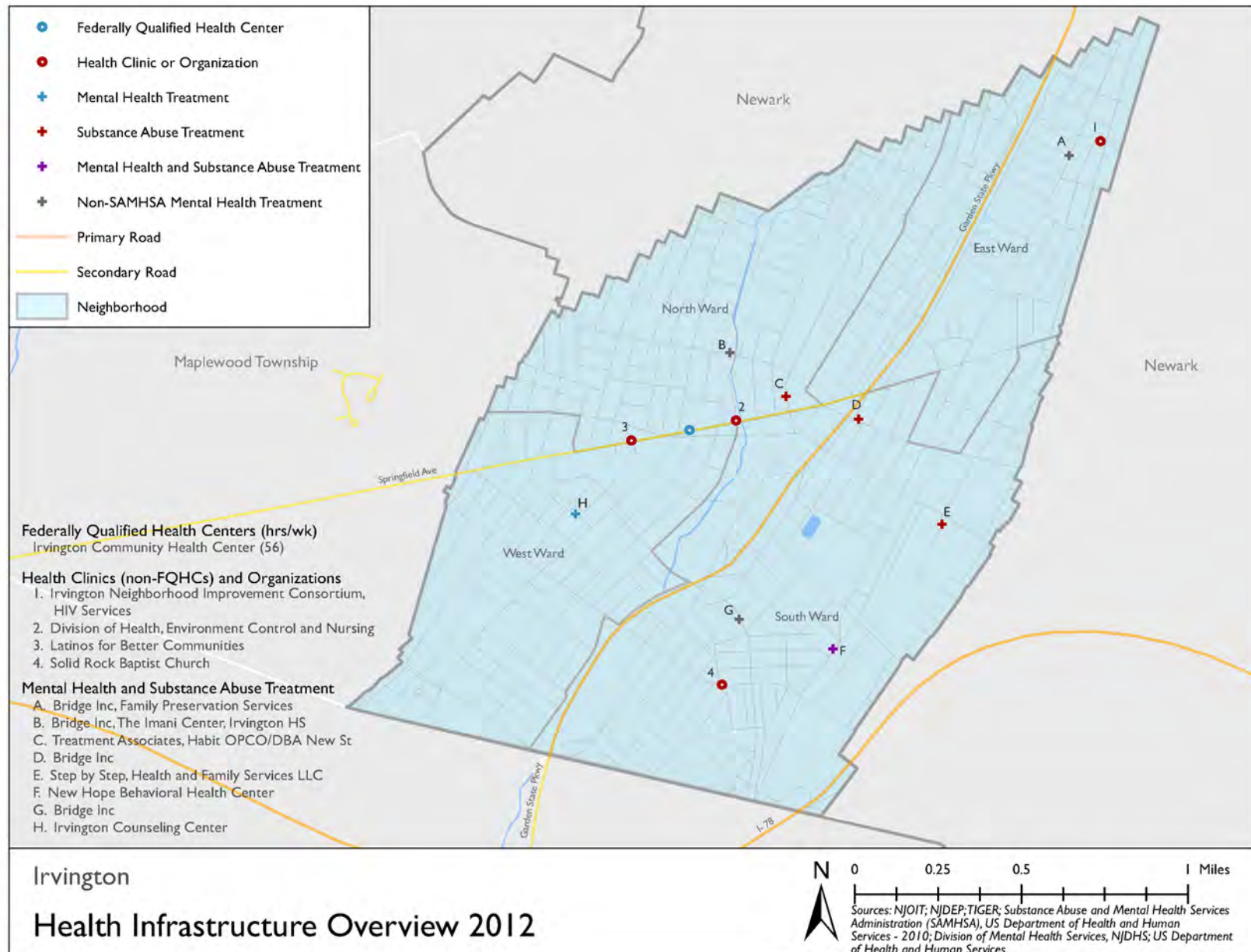
Irvington's population suffers from poor health and premature mortality. The average age of death in Irvington during the five-year period 2004-2008 was 62 years; among Irvington's black population, the average decedent had lived only 58 years. An incredible 57% of deaths that occurred within Irvington's black population were among people younger than 65 years old; 22% of deaths among Irvington's black residents were accounted for by persons below the age of 45 years (New Jersey State Health Assessment Data). Readily identifiable is the link between violent crime and poor health; among male decedents age 15 to 54, homicide was the leading cause of death during the years 2004-2008.

In 1995, the low-income population of much of Irvington, including the entire East Ward, was designated as a Medically Underserved Population (“Low Income - Irvington”) after receiving a score of 39.7 on the U.S. Department of Health and Human Service’s Index of Medical Underservice. To put this value into perspective, to qualify as underserved, a geography or community must score below a 62.0 on the IMU index, in which 0 represents a completely underserved population/area and 100 represents a best served population/area (Health Resources and Services Administration). Access to health care in Irvington decreased in recent years, following the closure of Irvington General Hospital in 2006 (Essex County, 17). Irvington works closely Newark Beth Israel and many residents go to the “Beth” because it used to own Irvington General and residents are connected through those networks. One interviewee suggested that Irvington’s East Ward is within Beth Israel’s service area. Besides providing hospital and emergency care, residents who do not receive services by Bride Inc or other organizations, go to the “Beth” to receive counseling, address health issues, and even deal with things like anger management (Interview, 2012). In its Community Health Improvement Plan, Essex County health officers explained the closure (and the termination of associated ambulance service) hits low-income individuals and communities, who are often largely reliant on public transportation to get to medical appointments, particularly hard. Interviewees emphasized the challenges for residents who lack cars. For those who must rely on public transportation, getting to the FQHC or another health provider, especially in Newark, may involve multiple busses which, interviewees emphasized, is inconvenient and can be a barrier to accessing health services. The East Ward lacks health infrastructure and organizations. Interviewees emphasized the lack of health care facilities. They noted that there are some private doctors’ offices but they felt that the number was insufficient.

But there are other barriers to access. Many residents also lack health insurance. Many children in school lack insurance, may not be treated and may lack immunizations. There is a community of relatively recent Haitians in Irvington who lack full documents and find it difficult to use health providers because of an insufficient ability to prove who they are. In addition, Haitians struggle with the language and it appears there is a lack of resources on the health provider side to address this (Interview, 2012). Gender plays a role in accessing screening. Women turn out for cancer screening but it’s much harder to draw in men who aren’t keen to participate in precautionary screening. City staff have launched efforts to engage taxi drivers and they work in collaboration with churches to get the message to residents about early screening (Interview, 2012).

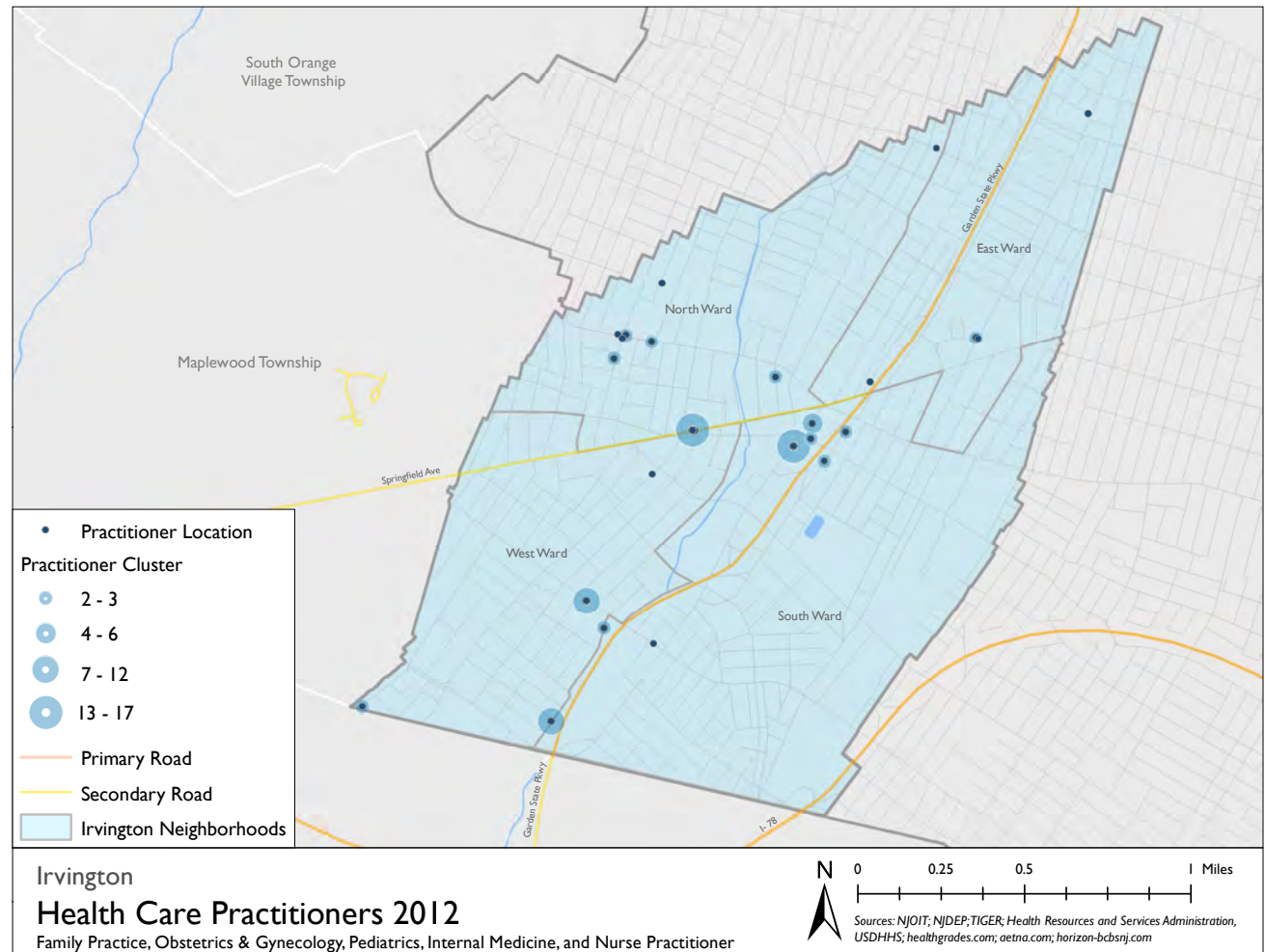
Health Organizational Infrastructure

The RWV Center identified health practitioners in Irvington (including family practitioners, internists, OB/GYNs, pediatricians, and nurse practitioners), with health professionals clustering largely in city’s three other wards. Many of these practitioners operate out of Irvington Community Health Center, a Federally Qualified Health Center located on Springfield Avenue in the West Ward. Irvington CHC is part of the wider Newark Community Health Centers (NCHC) network (nchcfqhc.org). NCHC has been operational in the Newark area since 1986, providing comprehensive services to the uninsured and medically underserved with the aim of preventing and ameliorating health disparities in the region. Irvington CHC is open on weekdays 9am to 7pm and on Saturdays 9am to 5pm, and includes basic services (adult medicine, pediatrics, OB/GYN, and dental) in addition to limited hours of specialty care (behavioral health, podiatry, and HIV testing).



City of Irvington

The Irvington health department is doing some engaged creative community work. They have pulled together resources including people, money, and partnerships to create an ambitious health program with very little money. The leadership shines through these initiatives. The Irvington health department provides breast and prostate cancer screening in the summer and hosts monthly TB and HIV tests at town hall. They offer flu shots in the winter in short clinics at the recreation center, Irvington senior citizen center, Irvington Housing Authority, and the community group INIC. The city wants to expand these efforts and bring them into neighborhoods. They lack funds to do more. They run kiosks at summer block parties and other community celebrations and encourage private providers to join them (Interview, 2002). As the city lost its health educator in budget cutbacks, the city built a relationship with Newark Beth Israel and East Orange General Hospital which come to Irvington monthly to provide health education and outreach services. The city's health officer leads a Community Walking Club and residents walk together from May through October. They have more than 200 members. The city gave them t-shirts and provides water during the walks. The mayor even joins them from time to time. They get the seniors to walk too and they have their own club. The effort is designed to get people moving and to raise awareness of the diseases people get from a lack of exercise. The city has even built relationships with big insurers to address issues like protection against sunburns (Interview, 2012).



Mayor Smith seems to have made the improvement of health among Irvington's citizens one of his top causes, and has a holistic vision of how to pursue this goal: "We need to find a way to help families weave together a social fabric that can support them effectively through a variety of life challenges" (Essex County, 18). Irvington is a participant in the New Jersey Mayors Wellness Campaign, which promotes "active living and healthier lifestyles" in participant communities (mayorswellnesscampaign.org). And the positive impacts of this campaign can be witnessed on the ground in the East Ward. The city received a Let's Move grant from the federal government and used it to support community gardens in the East Ward. They worked with Rutgers Agriculture folks to develop the gardens and build a nursery program which allows the seniors to grow all year. There is a garden at University Middle School that the science teacher runs to teach children about fresh food and provide access to it. There is another garden at a senior citizen Irvington Housing Authority building. Community residents have organized gardens too. Wells Fargo helped fund Ms. Rosie Gregg's garden on 19th Avenue on a previously vacant lot in foreclosure which they transformed into a 30-bed community garden over the past two years. It's an initiative of the East Ward Joint Block Association with the city's support (Lee, 5 Aug 2012). Mayor Smith lauded the garden's ability to "get everybody physically engaged in doing some labor," while the block association's president, Rosie Greggs is excited about the garden's potential to both bring the community together and to transform families' eating habits (Lee, 2012). The city worked out a scheduled visit with a chef from a food bank who will create a street kitchen by one of the community gardens over the summer for some garden-side cooking. They have received lots of positive feedback and interest related to the gardens (Interview, 2012).

The city's health department is working on a bunch of ideas for the future. One of them sounds like NYC's police athletic league efforts where people take over the streets for recreation. Irvington's version does that and they hope it will also reduce crime. The health department also managed to get a bunch of Irvington seniors to participate in the Woodbridge Township senior olympics and they did quite well winning five gold medals! Irvington used to provide more direct services such as lead and TB testing but due to funding constraints, they have discontinued these (Interview, 2012).

Irvington Neighborhood Improvement Consortium

The Irvington Neighborhood Improvement Consortium provides many social services, free lunch daily, and houses people who are HIV positive. They provide other assistance with housing, health, and utility bills and help move families (not individuals) into transitional homes (Interview, 2012).

Tri-City

Tri-City's West Side Park Health Action Project (located just east of the Irvington-Newark border) offers a more limited array of services for low-income residents. It targets its services to women and children (tri-citypeoples.org).

The Bridge

Established in Essex County in 1971, The Bridge, Inc. is a private nonprofit community agency accredited to provide drug and alcohol treatment services by the New Jersey Department of Human Services (thebridgenj.org). The Bridge, Inc. operates a location in the East Ward providing mental/behavioral health and substance abuse counseling services for low-income clients. The Bridge often deals with DYFUS situations. It provides family counseling, marriage counseling

and substance abuse assistance. They work with children seven and up and adults. There is a branch behind Irvington High School that specializes in substance abuse counseling and teenage pregnancy (Interview, 2012).

Irvington Family Day Center

Irvington Family Day Center is located in Newark's central ward and provides referral services and food stamps for all of Irvington.

Irvington's Counseling Center

Irvington's Counseling Center provides a doctor on site and works with the Irvington health department. Before the financial crisis, this organization handled 200-250 cases. Now they handle 500 and most clients address drug and smoking issues. This organization doesn't have sufficient funding.

Dental Smile

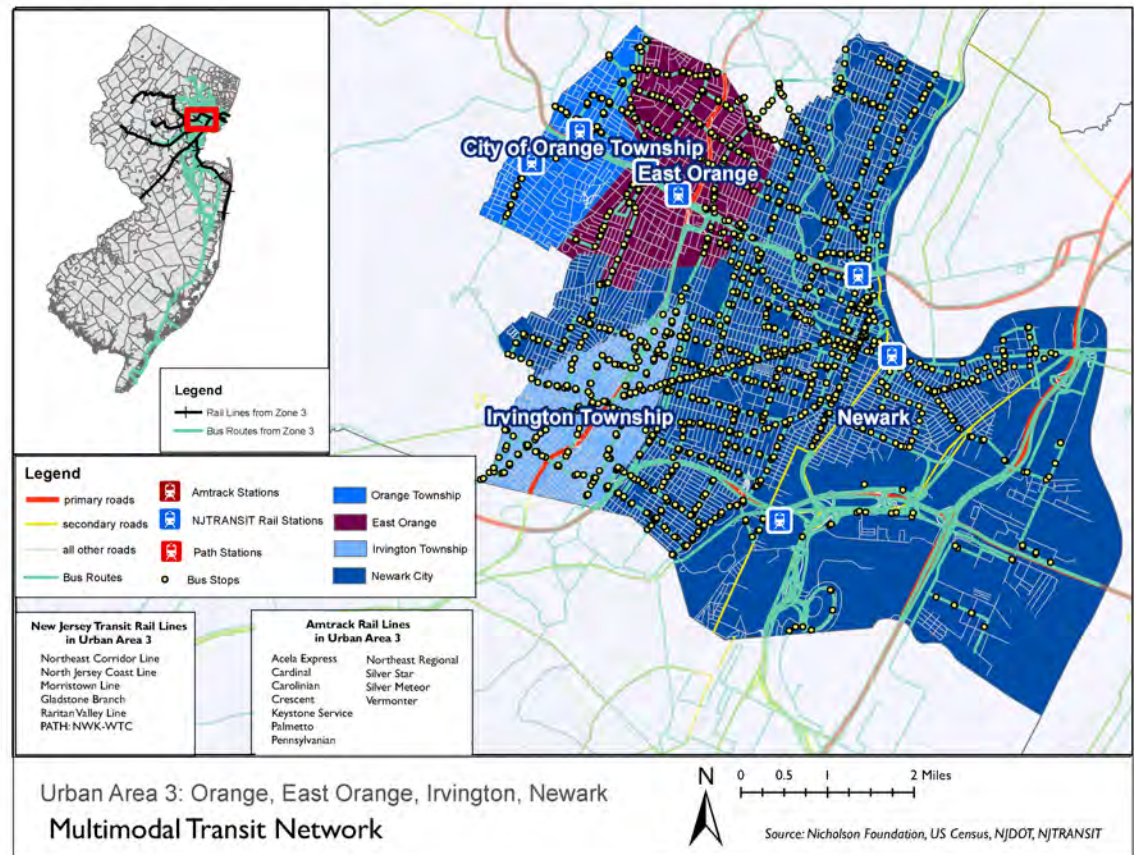
Dental smile program goes to daycare programs and to schools and provides a mobile van for schools (Interview, 2012).

Transportation

Irvington is not directly accessible by rail; residents wishing to travel by train must go to neighboring Newark, which is a major regional rail hub. The city does, however, have a widely used bus station. From the Irvington bus terminal, travel to the Port Authority bus terminal in New York City is just over a half hour (traffic permitting).

Vehicle travel appears to be a more popular option for Irvington residents; 15% of Irvington residents are without a vehicle (2010 Census). Several highways pass through Irvington, including the Garden State Parkway and I-78.

Bus stops are located throughout the East Ward, although a large portion of these are located on Springfield Avenue and Grove Street. In terms of access to health care through public transportation, the Tri-



City's Westside Park Health Action Project is the closest and is accessible via 16th Street bus routes.

Community Organizations

Overview Discussion

Irvington was largely a bedroom suburb of Newark and never built up the organizational infrastructure that is present in many cities. The city provides social service programs directly at the Neighborhood Improvement Consortium located in the East Ward on 16th Avenue between 21st and 22nd Streets. There the city, using Social Services Block Grant dollars and other resources, provides transitional housing, provides food for people who are homeless, and works with a truck that addresses people with HIV/AIDS. The East Ward Joint Block Association, under the leadership of long-time resident Rosie Greggs, is very active in the community and works closely with the Township's government. One of the block association's most recent undertakings was the establishment of a community garden, located on a 19th Avenue foreclosed lot. Irvington's Mayor Wayne Smith has promoted the garden as part of his wellness campaign encouraging health diet and exercise, and in July 2012 presented Greggs with a \$10,000 grant from the Wells Fargo Foundation (Lee, 5 Aug 2012). Brand New Day, based in Elizabethport, has been working in the East Ward. They received a Wachovia (now Wells Fargo) planning grant and have been gathering information about the East Ward and working in those communities. It is building new housing in the East Ward to stabilize the neighborhood.

List and Short Description of Other Organizations

Irvington Neighborhood Improvement Corporation

Services include: emergency shelter and rental assistance, case management, utility assistance, emergency food pantry, clothing, holiday food and toy basket, substance abuse treatment, educational services, medical treatment, food pantry, legal aid, counseling, job training.

Village for Humanity Homeless Services

Nonprofit organization providing supportive, transitional housing for young adult males. (Phone: 973-399-1393.)

Christian Pentecostal Church

Operates a food pantry and child care center.

Turning Point Community Services, Inc. (<http://www.tpcsinc.org/>)

Turning Point is a community based organization that provides transitional housing and offers other services. They provide food stamps, handle domestic violence cases, provide transportation services and referrals, and provide breast and prostate cancer screening in partnership with Irvington's health department (Interview, 2012).

Gospel Services Benevolent Society, Inc.

Emergency shelter for men and women age 18-plus. 70 beds with double/triple room occupancy, handicap accessible (Phone: 973-375-8900.)

Gateway Pregnancy Center (<http://gateway.org/>)

Provides Christian-inspired services to women of childbearing ages, including: free pregnancy tests, peer counseling, post-abortion counseling, chastity counseling, husband/boyfriend counseling, limited ultrasounds for pregnancy verification, and practical assistance (e.g. education,, emotional and spiritual support.)

Our Brother's Keeper

Services undetermined as of December 2012

West Indies Community Affairs

Services undetermined as of December 2012

Works Cited

- Essex County. 2006. "Community Health Improvement Plan." December 2006. <http://www.essexregional.org/CHIP%20final%202.pdf>.
- Health Resources and Services Administration. "Medically Underserved Areas & Populations (MUA/Ps)." U.S. Department of Health and Human Services. <http://bhpr.hrsa.gov/shortage/muaps/>.
- Jacobs, Andrew. 2000. "The Town That Prosperity Forgot; Blighted, Broke and Crime-Ridden, Irvington Seems Helpless to Help Itself." *The New York Times*. September 11. <http://www.nytimes.com/2000/09/11/nyregion/town-that-prosperity-forgot-blighted-broke-crime-ridden-irvington-seems-helpless.html?pagewanted=all&src=pm>.
- Lee, Eunice. 2012. "Community Gardens Sprout in Irvington Thanks to Residents' Hard Work." *The Star-Ledger*. August 5. http://www.nj.com/news/index.ssf/2012/08/community_gardens_sprout_in_ir.html.
- Mayors Wellness Campaign. www.mayorswellnesscampaign.org/.
- Nazir, Atif. Interview with Atif Nazir, Irvington Health Officer and Director, Irvington Health Department. December 2012.
- New Jersey State Health Assessment Data. "Average Age at Death." Retrieved 30 June, 2012 from New Jersey Department of Health, Center for Health Statistics. <http://www4.state.nj.us/dhss-shad/home>.
- New Jersey State Health Assessment Data. "Deaths Due to Any Cause." Retrieved 30 June, 2012 from New Jersey Department of Health, Center for Health Statistics. <http://www4.state.nj.us/dhss-shad/home>.
- New Jersey State Police. 2010. "Uniform Crime Report." State of New Jersey. <http://www.njsp.org/info/ucr2010/index.html>.
- The Irvington Planning Board. 2002. "Proposed Township of Irvington Master Plan." <http://www.irvington.net/usr/Redevelopment/IrvingMasterPlan2002.pdf>.
- Smith, Mayor Wayne. 2012. Irvington Mayor. October. Phone Interview.
- Township of Irvington. 2003. "East Ward/East Springfield Avenue Redevelopment Plan." http://www.irvington.net/usr/Redevelopment/EastWardRedevPlan_CleanDraft3_.pdf.
- Township of Irvington. 2009. "Master Plan 2009 Re-Examination Report." <http://www.irvington.net/usr/Planning%20and%20Zoning/Irvinton%20Reexam%202008%20Final%20Board%20Adoption.pdf>.
- United States Census 2000. *American Factfinder*. 2000. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.
- United States Census 2010. *American Factfinder*. 2010. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

Jersey City

Greenville and Bergen Lafayette

Cailiean Carr
Medha Dixit
Margaret Ricke

with
Ronit Anspach
Pritpal Bamhrah
Anthony Capece
Laura Chamberlain
Mirabel Chen
Katie Davis
Michael D'Orazio
Ryan Good
Gregory Hughes
Margaret Ricke
Matt Sarsycki
Timothy Shek
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Funded by The Nicholson Foundation
2013

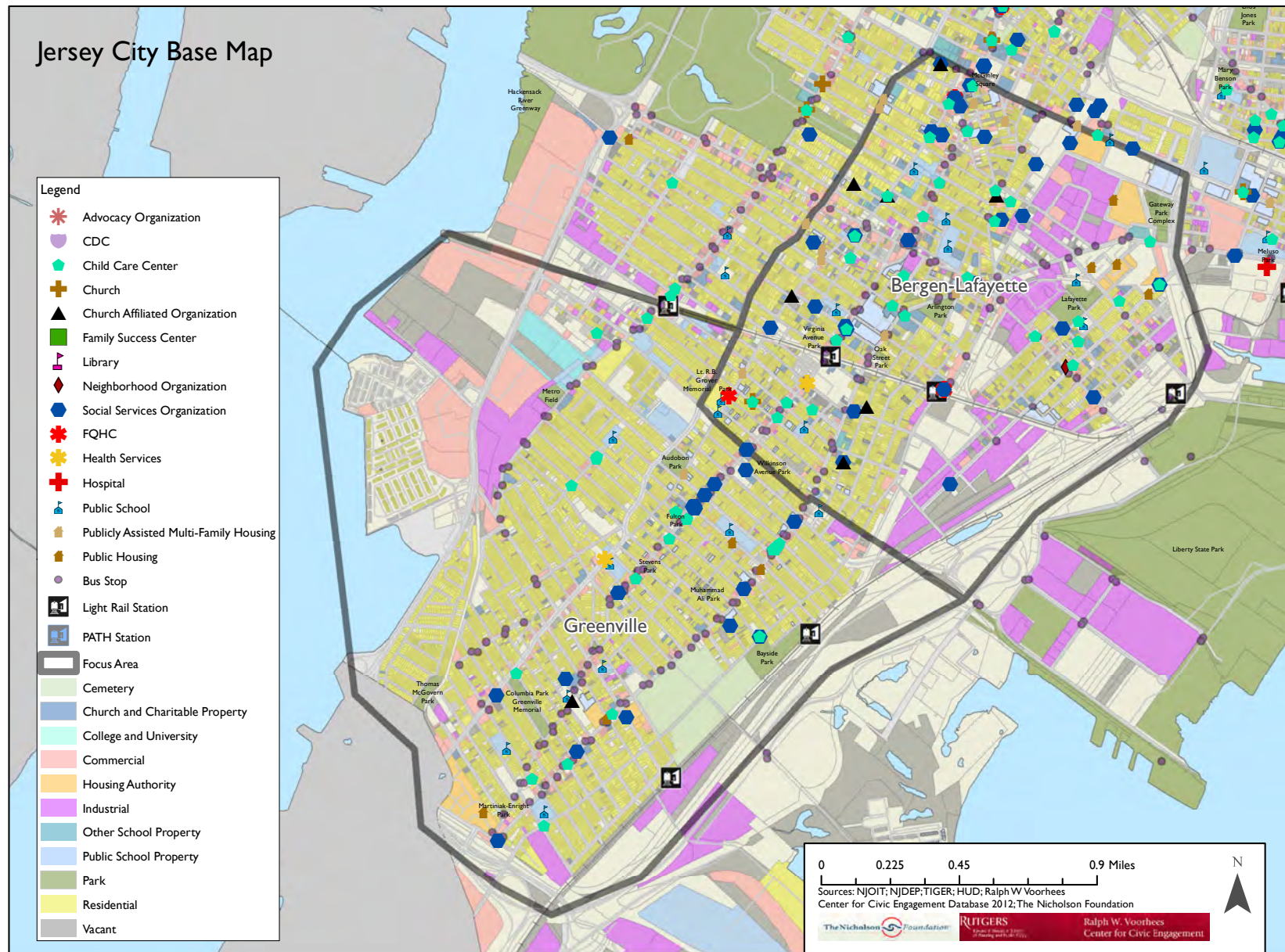


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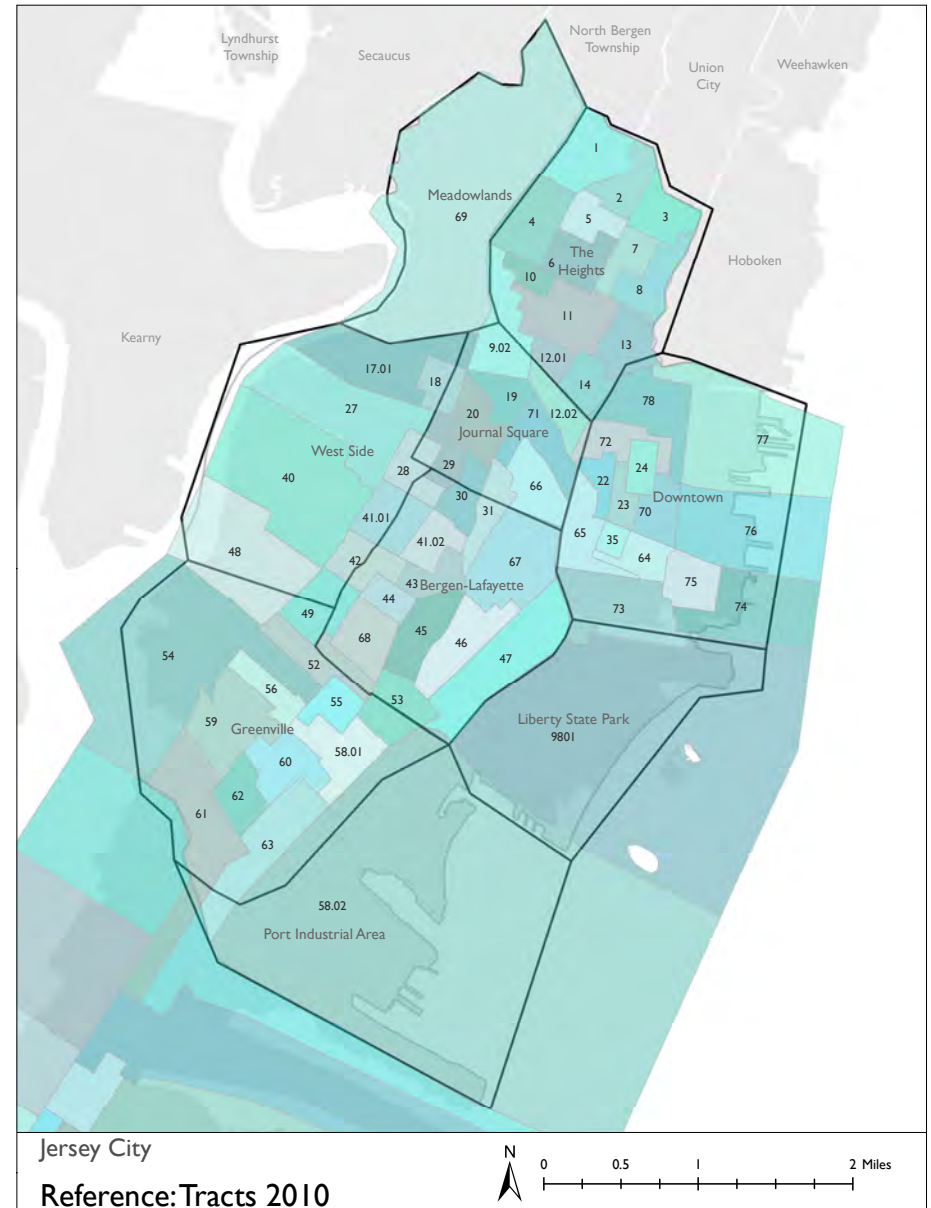
Neighborhoods

The focus area includes the Bergen-Lafayette and Greenville neighborhoods. These neighborhoods show many signs of poverty but also include robust community organization infrastructures and a promising health care infrastructure.

Bergen Lafayette

Bergen-Lafayette is located centrally in Jersey City and includes 8 whole census tracts and 9 partial census tracts. It comprises five different neighborhoods: Bergen Hill, Lafayette, Communipaw, Lafayette Industrial and Canal Crossing. Greenville is located to the south of Bergen-Lafayette. Liberty State Park lies to its east and Journal Square lies to the north. Bergen-Lafayette's major thoroughfares include: JFK Boulevard, Bergen Avenue and Monticello Avenue/Martin Luther King Jr. Driver. Bergen-Lafayette contains a mix of land uses with industrial uses to the east near the New Jersey Turnpike Extension. The Turnpike creates a boundary between the neighborhood and the Liberty Science Center and Liberty State Park. A majority of residential land uses are on the western portion in The Hill and Bergen Hill areas. However the Lafayette area, on the eastern side, is also residential. Proximity to Liberty State Park and public transit makes it a desirable neighborhood. The neighborhood is characterized by an artsy character with 19th century row houses, Victorian mansions and art deco apartment buildings. The focus area has some historically important popular parks like Arlington and Lafayette Park. The neighborhood is well served by the NJ Transit operated Hudson-Bergen Light rail, NJ Transit bus routes and the Bergen Avenue Bus.

Martin Luther King Drive (formerly Jackson Avenue) houses the principal retail center, which was the high end shopping center in 1940s and 1950s (Jersey City Economic Development Corporation). Parts of this commercial block have been vacant over last two decades. There's a relatively new development on Martin Luther King just south of Virginia Avenue. The city's



Economic Development Corporation helped develop this and it includes a supermarket (Jersey City).

The two neighborhoods are home to energetic community development organizations that are working to redevelop the area. Morris Canal CDC is doing development projects in Lafayette. They finished Pacific Landing in the last couple of years (Morris Canal CDC). The groups are working on developing a greenway that will cross the neighborhood in the path of the old Morris Canal (Hortillosa, 2012). And the city used a HOPE VI grant to transform Lafayette Gardens (Jersey City Housing Authority). Morris Canal CDC opened a community garden in 2001, the Lafayette Community Garden at 312-314 Pacific Avenue (Musat, 2012). And Women Rising has an approved neighborhood plan for Bergen Hill (NJ DCA, 2012). Currently there are proposals to redevelop the Canal Crossing section in the southeast area of Bergen-Lafayette with mixed-use residential buildings. "Housing developed within the Canal Crossing neighborhood will include market rate housing, work-force housing and housing affordable to persons of low and moderate income. Both rental and for-sale housing will be constructed" (Canal Crossings). Non-profit developers like Garden State Episcopal Community Development Corporation have also been redeveloping foreclosed properties into affordable housing.

Greenville

Greenville, which emerged as a suburb of New York City, is the southernmost neighborhood in Jersey City. Located north of Bayonne, it includes 8 whole census tracts and 6 partial census tracts. Bayside, Society Hill, State College, Our Lady of Mercy, Country Village, St. Paul's and The Hill are found in Greenville. More recently the neighborhood has become home to the Society Hill and Port Liberte developments. JFK Boulevard and Martin Luther King Jr. Drive are the main thoroughfares. Greenville is largely residential with the exception of retail corridors along Ocean Avenue and John F. Kennedy Boulevard, as well as industrial uses along the eastern and western borders. The retail and principal shopping corridor of the neighborhood is located around Danforth Avenue, Old Bergen Road and Cator Avenue. This neighborhood is served by light rail adjacent to Bergen-Lafayette and along its eastern boundary. Most of the residential area, which is the central part of Bergen-Lafayette, is served by NJ Transit bus routes. Large open spaces like Mohammad Ali Park in Greenville are mostly unused. There is a nascent arts community trying to build community capacity at Project Greenville (<http://projectgreenville.webs.com/>)

There are a number of redevelopment proposals for Greenville. Grants have been given through federal funds and Wells Fargo to regenerate housing as well as retail. The "I Love Greenville Community Plan" is a planning initiative facilitated by Garden State CDC to improve quality of life and generate investment for projects identified by the residents. The plan includes strategies on a range of issues including education, health, public safety, transportation, business corridor improvements and community development. In terms of health and human services, the plan has called for an enhancement of access to health foods and leisure gardening, a greater access to health services and institutional and land use investment to expand health and wellness services (Garden State Episcopal Community Development Corporation). One specific strategy, for example, is to develop a directory of health care services and distribute it to the residents of the Greenville neighborhood.

Table 1a. Characteristics of Bergen Lafayette

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population	58,653	100%	Families (2010)	13,710	100%
			Female-headed with Children	4,196	31%
Age (2010)			Economic (2007-2011)ⁱ		
Under 5 years	4,313	7%	Median Household Income	\$22,052 - 52,161	
5-19 years	12,388	21%	Persons below Poverty	13,418	24%
20-64 years	36,222	62%	Total Civilian Labor Force	28,779	100%
65-74 years	3,486	6%	Employed	24,606	85%
75+ years	2,244	4%	Unemployed	4,173	15%
Race (2010)			Housing (2010)		
White	12,498	21%	Total Units	24,592	100%
Black	29,436	50%	Vacant Housing Units	2,989	12%
Asian	5,800	10%	Owner Occupied	5,477	25%
Hispanic	16,381	28%	Renter Occupied	16,126	75%
Household (2010)	21,603	100%			
Multigenerational	1,595	7%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Table 1b. Characteristics of Greenville

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population	59,059	100%	Families (2010)	14,675	100%
Age (2010)			Female-headed with Children	3,759	26%
Under 5 years	4,214	7%	Economic (2007-2011)ⁱ		
5-19 years	12,291	21%	Median Household Income	\$30,855 - 100,257	
20-64 years	36,109	61%	Persons below Poverty	10,129	17%
65-74 years	3,858	7%	Total Civilian Labor Force	30,498	100%
75+ years	2,587	4%	Employed	26,236	86%
Race (2010)			Unemployed	4,262	14%
White	11,453	19%	Housing (2010)		
Black	27,907	47%	Total Units	23,610	100%
Asian	10,382	18%	Vacant Housing Units	2,476	11%
Hispanic	12,858	22%	Owner Occupied	8,315	39%
Household (2010)	21,134	100%	Renter Occupied	12,819	61%
Multigenerational	1,743	8%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Population

Between 2000 and 2010, Jersey City experienced a population gain of 3% (7,670), with a 2010 total population of 247,597. During this time, the proportionate share of the Asian population increased by 5%, while the proportionate share of the White, Black, and Hispanic population experienced small losses. In 2010, the racial and ethnic composition of Jersey City was balanced between White (32%), Black (25%), Asian (24%), and Hispanic (28%). In 2010, the total population of the Greenville neighborhood was 59,059, having increased 1% (or by 775 residents) from 2000. During this time, census tracts 48 and 53 experienced the greatest percentage population gains, each exceeding 15%. The population of Greenville is predominantly Black; at 47%, the percentage of Black residents in Greenville is nearly double the citywide share. Whites (19%) and Asians (18%) constitute smaller, yet substantial, portions of Greenville's population. Hispanics or Latinos of any race make up 22% of the neighborhood's population. Between 2000 and 2010, Greenville's White population decreased by one-fifth while the neighborhood's Asian and Hispanic populations grew by 26% and 20%, respectively, resulting in a decrease in the share of White residents and a greater representation of Asians and Hispanics. As of 2010, Bergen-Lafayette is home to 58,653 residents, the majority of whom are Black (50%). Whites comprise 21% of the neighborhood's population, while Asians account for only 10% of all residents. Nearly three out of ten (28%) of the neighborhood's residents are

Hispanic or Latino (of any race.) Unlike the wider municipality, Bergen-Lafayette experienced a population loss during the period 2000-2010, decreasing in numbers by 2,477 (4%). This population loss is fully accounted for by a decrease in the number of Black residents, which shrunk by 10%. The smaller White and Hispanic populations each grew by more than 10% during these years, resulting in an increase in their proportionate shares by 3-4%.

Table 2a: Bergen-Lafayette: Total Population of Focus Neighborhood, 2000 & 2010

Tract	2000	2010	Percent Change
41.02	2,763	2,874	4.0%
43	2,310	2,214	-4.2%
44	2,232	2,406	7.8%
45	3,637	3,922	7.8%
46	2,304	2,229	-3.3%
47	2,325	2,591	11.4%
68 (50 & 51)	3,196	3,343	4.6%
28	6,225	5,671	-8.9%
30	3,255	3,165	-2.8%
31	4,294	4,094	-4.7%
41.01	7,129	6,576	-7.8%
42	4,673	4,632	-0.9%
49	3,968	3,995	0.7%
52	4,288	4,369	1.9%
53	2,651	3,053	15.2%
67 (~32 & 33)	5,880	3,519	-40.2%
Bergen-Lafayette	61,130	58,653	-4.1%
Jersey City	239,927	247,597	3.2%

(US Census 2000, 2010)

Table 2b: Greenville: Total Population of Focus Neighborhood, 2000 & 2010

Tract	2000	2010	Percent Change
52	4,288	4,369	1.9%
54	5,693	6,161	8.2%
55	2,551	2,484	-2.6%
56	3,794	3,704	-2.4%
58.01	4,908	4,833	-1.5%
59	7,192	7,257	0.9%
60	4,412	4,308	-2.4%
61	6,903	6,745	-2.3%
62	3,677	3,649	-0.8%
63	4,621	4,293	-7.1%
48	3,626	4,208	16.1%
49	3,968	3,995	0.7%
53	2,651	3,053	15.2%
Greenville	58,284	59,059	1.3%
Jersey City	239,927	247,597	3.2%

(US Census 2000, 2010)

Table 3a: Bergen-Lafayette: Racial & Ethnic Representation in Focus Neighborhoods 2010

Tract	White		Black		Asian		Hispanic	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent
41.02	565	19.7%	1,602	55.7%	201	7.0%	909	31.6%
43	266	12.0%	1,617	73.0%	36	1.6%	344	15.5%
44	125	5.2%	1,976	82.1%	6	0.2%	373	15.5%
45	410	10.5%	2,817	71.8%	64	1.6%	857	21.9%
46	529	23.7%	971	43.6%	16	0.7%	1,140	51.1%
47	774	29.9%	968	37.4%	113	4.4%	1,195	46.1%
67	420	11.9%	2,281	64.8%	58	1.6%	1,227	34.9%
68	196	5.9%	2,762	82.6%	12	0.4%	545	16.3%
28	2,501	44.1%	1,119	19.7%	983	17.3%	1,738	30.6%
30	986	31.2%	797	25.2%	645	20.4%	1,182	37.3%
31	1,351	33.0%	697	17.0%	1,190	29.1%	1,270	31.0%
41.01	2,005	30.5%	2,215	33.7%	854	13.0%	2,147	32.6%
42	814	17.6%	2,343	50.6%	548	11.8%	1,371	29.6%
49	513	12.8%	2,075	51.9%	748	18.7%	807	20.2%
52	810	18.5%	2,817	64.5%	286	6.5%	682	15.6%
53	233	7.6%	2,379	77.9%	40	1.3%	594	19.5%
Bergen-Lafayette	12,498	21.3%	29,436	50.2%	5,800	9.9%	16,381	27.9%
Jersey City	80,885	32.7%	64,002	25.8%	58,595	23.7%	68,256	27.6%

(US Census 2000, 2010)

Table 3b: Greenville: Racial & Ethnic Representation in Focus Neighborhoods 2010

Tract	White		Black		Asian		Hispanic	
	Count	Percent	Count	Percent	Count	Percent	Count	Percent
52	810	18.5%	2,817	64.5%	286	6.5%	682	15.6%
54	1,421	23.1%	2,039	33.1%	1,999	32.4%	922	15.0%
55	121	4.9%	2,104	84.7%	15	0.6%	390	15.7%
56	605	16.3%	1,569	42.4%	777	21.0%	811	21.9%
58.01	249	5.2%	3,917	81.0%	66	1.4%	776	16.1%
59	1,988	27.4%	1,562	21.5%	2,407	33.2%	1,625	22.4%
60	550	12.8%	2,836	65.8%	161	3.7%	1,121	26.0%
61	1,885	27.9%	2,036	30.2%	1,768	26.2%	1,565	23.2%
62	904	24.8%	1,617	44.3%	374	10.2%	1,180	32.3%
63	1,184	27.6%	1,833	42.7%	350	8.2%	1,477	34.4%
48	990	23.5%	1,123	26.7%	1,391	33.1%	908	21.6%
49	513	12.8%	2,075	51.9%	748	18.7%	807	20.2%
53	233	7.6%	2,379	77.9%	40	1.3%	594	19.5%
Greenville	11,453	19.4%	27,907	47.3%	10,382	17.6%	12,858	21.8%
Jersey City	80,885	32.7%	64,002	25.8%	58,595	23.7%	68,256	27.6%

(US Census 2000, 2010)

Table 4a: Bergen-Lafayette: Changes to Neighborhood's Racial & Ethnic Composition, 2000 & 2010

Tract	White		Black		Asian		Hispanic	
	2000	2010	2000	2010	2000	2010	2000	2010
41.02	11.8%	19.7%	66.5%	55.7%	3.3%	7.0%	23.1%	31.6%
43	7.3%	12.0%	81.5%	73.0%	0.2%	1.6%	13.4%	15.5%
44	3.2%	5.2%	90.5%	82.1%	0.8%	0.2%	7.6%	15.5%
45	5.5%	10.5%	83.8%	71.8%	0.8%	1.6%	13.4%	21.9%
46	19.8%	23.7%	46.8%	43.6%	1.0%	0.7%	45.1%	51.1%
47	22.2%	29.9%	40.9%	37.4%	1.8%	4.4%	48.5%	46.1%
68 (50 & 51)	2.8%	5.9%	90.6%	82.6%	0.6%	0.4%	7.2%	16.3%
28	39.2%	44.1%	20.1%	19.7%	14.3%	17.3%	31.7%	30.6%
30	28.0%	31.2%	24.4%	25.2%	19.2%	20.4%	37.2%	37.3%
31	29.5%	33.0%	18.7%	17.0%	22.0%	29.1%	35.0%	31.0%
41.01	28.8%	30.5%	36.0%	33.7%	9.7%	13.0%	29.5%	32.6%
42	17.0%	17.6%	53.5%	50.6%	9.1%	11.8%	26.5%	29.6%
49	13.9%	12.8%	57.1%	51.9%	11.8%	18.7%	18.3%	20.2%
52	18.4%	18.5%	69.7%	64.5%	5.9%	6.5%	7.4%	15.6%
53	4.4%	7.6%	90.7%	77.9%	0.0%	1.3%	6.9%	19.5%
67 (~32 & 33)	7.1%	11.9%	58.4%	64.8%	19.1%	1.6%	19.2%	34.9%
Bergen-Lafayette	18.3%	21.3%	53.5%	50.2%	9.2%	9.9%	23.5%	27.9%
Jersey City	34.0%	32.7%	28.3%	25.8%	16.2%	23.7%	28.3%	27.6%

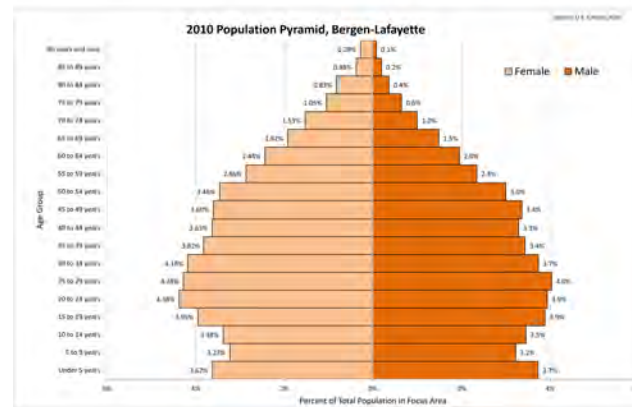
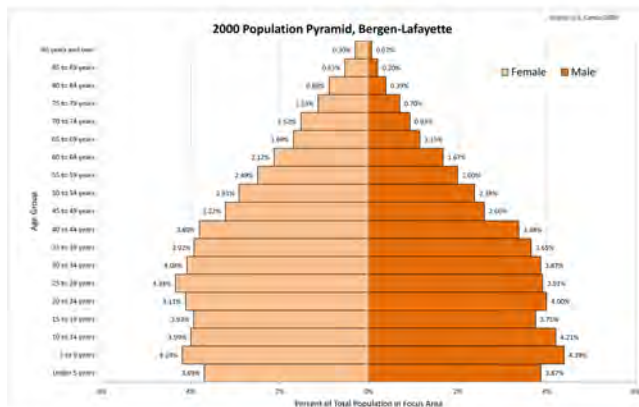
(US Census 2000, 2010)

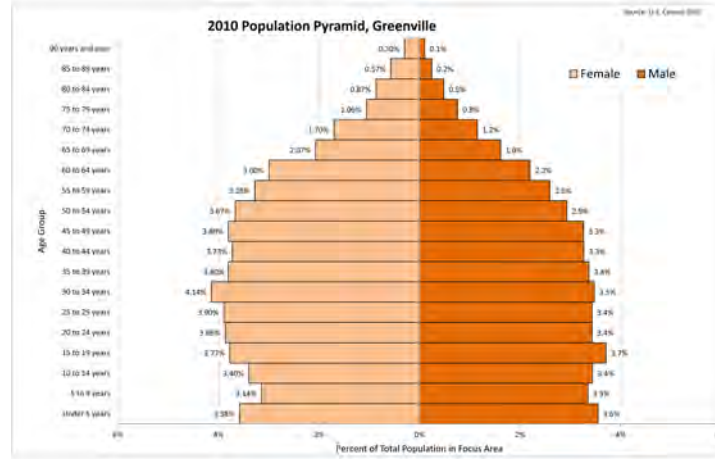
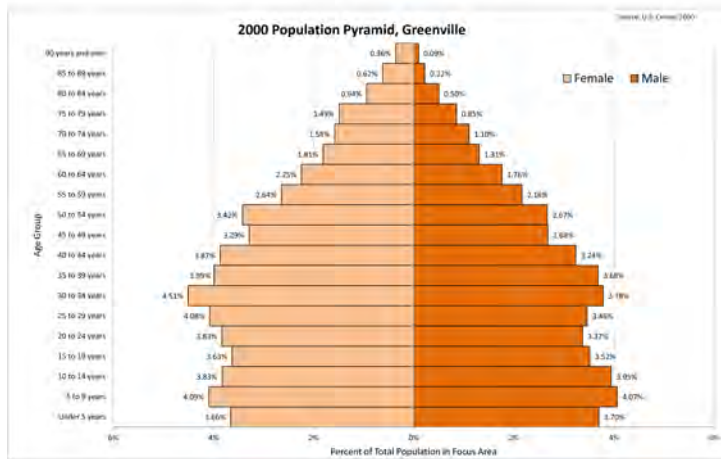
Table 4b: Greenville: Changes to Neighborhood's Racial & Ethnic Composition, 2000 & 2010

Tract	White		Black		Asian		Hispanic	
	2000	2010	2000	2010	2000	2010	2000	2010
52	18.4%	18.5%	69.7%	64.5%	5.9%	6.5%	7.4%	15.6%
54	27.4%	23.1%	36.2%	33.1%	26.4%	32.4%	13.8%	15.0%
55	3.1%	4.9%	89.5%	84.7%	0.0%	0.6%	9.1%	15.7%
56	24.4%	16.3%	37.3%	42.4%	20.9%	21.0%	20.6%	21.9%
58.01	5.7%	5.2%	86.3%	81.0%	0.5%	1.4%	10.7%	16.1%
59	38.0%	27.4%	16.7%	21.5%	27.8%	33.2%	17.2%	22.4%
60	15.4%	12.8%	62.8%	65.8%	4.4%	3.7%	24.1%	26.0%
61	38.5%	27.9%	29.3%	30.2%	18.7%	26.2%	21.8%	23.2%
62	35.6%	24.8%	37.2%	44.3%	7.9%	10.2%	28.3%	32.3%
63	31.0%	27.6%	36.5%	42.7%	7.3%	8.2%	35.1%	34.4%
48	33.6%	23.5%	20.8%	26.7%	29.7%	33.1%	19.2%	21.6%
49	13.9%	12.8%	57.1%	51.9%	11.8%	18.7%	18.3%	20.2%
53	4.4%	7.6%	90.7%	77.9%	0.0%	1.3%	6.9%	19.5%
Greenville	24.6%	19.4%	47.1%	47.3%	14.1%	17.6%	18.4%	21.8%
Jersey City	34.0%	32.7%	28.3%	25.8%	16.2%	23.7%	28.3%	27.6%

(US Census 2000, 2010)

The population is aging and as with the urban focus areas, men are underrepresented.





Income

Greenville is a mixed-income community, with median household incomes ranging considerably across the neighborhood's census tracts, from \$30,900 in tract 62 to \$100,300 in tract 54 (ACS 5-Year Estimates, 2007-2011). The percentage of Greenville's population living in poverty varies by census tract, from 3% in tract 54 to 30% in tracts 60 and 62. To Greenville's northeast, nearly one out of four residents of Bergen-Lafayette live below the poverty line, with these percentages also varying widely by census tract, from 12% in tract 53 (which straddles the two neighborhoods) to nearly half (47%) of the population in tract 67. Median household incomes within Bergen-Lafayette are also lower than in Greenville, ranging from \$22,100 in tract 67 to \$52,200 in neighboring tract 47, which runs along Bergen-Lafayette's boundary with Liberty State Park.

Education

There are 10 elementary schools in our focus area. These schools have an incredible range of language diversity, with many students speaking not Spanish, Arabic, Tagalog, Igbo, Swahili, Hindi, and Urdu, to name a few. More than half (52%) of Jersey City 3rd graders scored as partially proficient on the literacy exam. The school with the highest partially proficient score was E.S. 14 (76%). The school with the lowest partially proficient score was E.S. 20, which counted 43% of its students as partially proficient. Both E.S. 34 and Julia A Barnes have relatively high numbers of student suspensions, at 14% and 38%, respectively. Both also have shares of students whose first language spoken at home is English, at 82% and 80%, respectively.

Table 5: School Characteristics 2010-11

School	Grade Levels	Total School Population	% Partially Proficient 3rd Grade NJ Ask	First Language Spoken at Home	Students with Disabilities	Mobility	Limited English Proficiency	Student Suspensions
12 Julia A Barnes	Pre K-8	417	51%	English - 79.5% Spanish - 14% Arabic - 1.9% Igbo .8% Vietnamese - .8% French - .6% Haitian - .6% Other - 1.5%	16%	42%	3%	38%
14	Pre K-5	417	76%	English - 87.5% Spanish - 11.1% Tagalog - .5% Arabic - .2% Bengali - .2% Italian - .2%	15%	29%	2%	9%
17 Joseph Brensinger	Pre K-8	1,157	48%	English - 48.8% Spanish - 25% Arabic - 12% Urdu - 3.4% Biet - 2.9% French - 1.3% Haitian - .9% Other - 5.1%	9%	22%	17%	6%
22	Pre K-5	635	62%	English - 68% Spanish - 26% Hindi - 1.2% Urdu - .9% Tagalog - .8% Arabic - .6% French - .5%	15%	25%	12%	3%

Other - 1.7%

29	Pre K-5	496	60%	English - 86%	8%	33%	10%	0
				Spanish - 8.7%				
				Arabic - 1.7%				
				Haitian - .6%				
				Tagalog - .6%				
				Hindi - .4%				
				Afrikaans - .2%				
				Other - 1.7%				

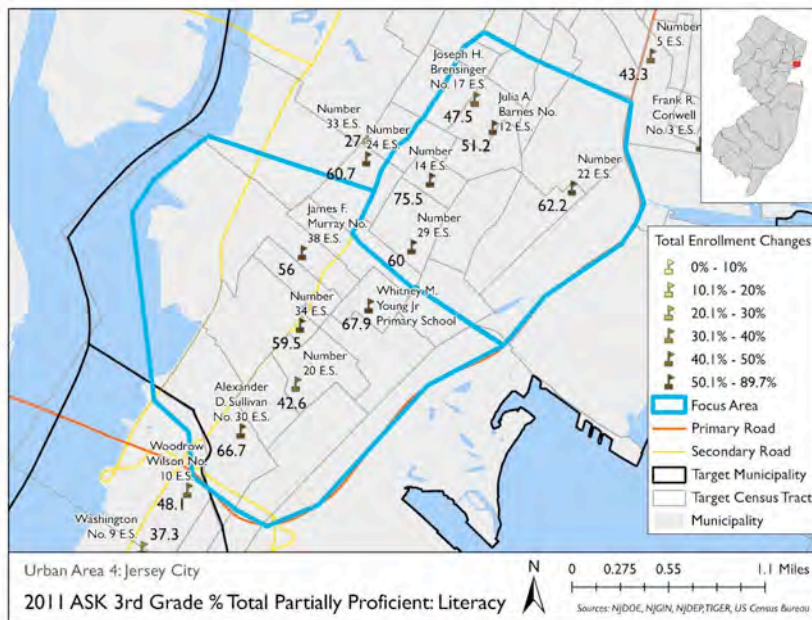
20	Pre K-5	598	43%	English - 83%	8%	19%	3%	5%
				Spanish - 11%				
				Arabic - 1.5%				
				Tagalog - 1%				
				Swahili - .7%				
				French - .5%				
				Portuguese - .355				
				Other - 1.9%				

30 Alexander Sullivan	Pre K-5	828	67%	English - 61.2%	7%	25%	22%	6%
				Spanish - 27.3%				
				Tagalog - 3.5%				
				Arabic - 1.7%				
				Urdu - 1.4%				
				Haitian - 1.1%				
				French - .8%				
				Other - 2.9%				

34	Pre K-8	579	60%	English - 82%	12%	33%	0.2	14%
				Spanish - 13.5%				
				Tagalog - 2%				
				Hindi - .5%				
				Arabic - .3%				
				Haitian - .3%				
				Swahili - .3%				
				Other - 1%				

38 James Murray	Pre K-8	936	56%	English - 54%	9%	14%	7%	9%
				Tagalog - 15%				
				Spanish - 14%				
				Arabic - 4%				
				Swahili - 2.6%				
				Vietnamese - 1.6%				
				Haitian - 1.3%				
				Other - 7.2%				
Whitney < Young Jr	Pre K-5	652	68%	English - 92%	13%	27%	2%	8%
				Spanish - 6.7%				
				Tagalog - .7%				
				Haitian - .3%				
				Vietnamese - .3%				
				Arabic - .1%				

(NJ Department of Education, 2011)



Housing

Between 2000 and 2010, Jersey City had a 16% (15,072 units) increase in housing units. Much of this growth has come in the form of high-rise apartment complexes. Both the Greenville and Bergen-Lafayette neighborhoods experienced this growth, with Greenville increasing its housing stock by 12% (2,606 units) and Bergen-Lafayette by 10% (2,292 units). The only substantial loss in housing units between the two neighborhoods occurred within Bergen-Lafayette at census tract 67, which incurred a 20% (400 units) loss. Census tracts with especially active rates of development were tracts 48 and 53 in Greenville and Tracts 31, 47, and 53 in Bergen-Lafayette, each experiencing an increase over 25% in new housing stock in the last decade. Greenville's single family homes are concentrated mainly along its eastern edge. Over the last few years, the neighborhood has been attracting a number of young professionals. One of the many reasons is that housing prices in Greenville are much lower than in the historic downtown. Also located in Greenville is Curries Woods "Community of Opportunity." Formerly an agglomeration of high-rise public housing complexes, the redeveloped site includes a mixture of townhouses and a rehabilitated high rise which provides housing for seniors and persons with disabilities (Jersey City Housing Authority).

Table 6a: Bergen Lafayette: Housing Unit Changes in Focus Neighborhoods, 2000-2010

Tract	Housing Units		
	2000	2010	Percent Change
41.02	1,057	1,230	16.4%
43	944	1,083	14.7%
44	954	1,103	15.6%
45	1,302	1,588	22.0%
46	803	888	10.6%
47	821	1,125	37.0%
68 (50 & 51)	1,217	1,427	17.3%
28	2,410	2,401	-0.4%
30	1,223	1,341	9.6%
31	1,409	1,813	28.7%
41.01	2,733	2,774	1.5%
42	1,566	1,745	11.4%
49	1,333	1,476	10.7%
52	1,662	1,863	12.1%
53	918	1,188	29.4%
67 (~32 & 33)	1,948	1,547	-20.6%
Bergen-Lafayette	22,300	24,592	10.3%
Jersey City	93,648	108,720	16.1%

(US Census 2000, 2010)

Table 6b: Greenville: Housing Unit Changes in Focus Neighborhoods, 2000-2010

Tract	Housing Units		
	2000	2010	Percent Change
52	1,662	1,863	12.1%
54	2,135	2,566	20.2%
55	841	972	15.6%
56	1,303	1,399	7.4%
58.01	1,705	2,029	19.0%
59	2,667	2,833	6.2%
60	1,513	1,705	12.7%
61	2,470	2,571	4.1%
62	1,428	1,541	7.9%
63	1,750	1,828	4.5%
48	1,279	1,639	28.1%
49	1,333	1,476	10.7%
53	918	1,188	29.4%
Greenville	21,004	23,610	12.4%
Jersey City	93,648	108,720	16.1%

(US Census 2000, 2010)

Both Bergen-Lafayette and Greenville include many federally assisted housing projects including Arlington Arms, Kennedy Manor, New Hope Baptist I and II, and Bergen Manor Apartments in Bergen-Lafayette and Audubon Park Apartments and Harborville Apartments in Greenville. Harborview includes senior housing. Another public housing project that includes senior housing is the newly built Ocean Pointe East and West buildings. Built in 2010, the buildings are part of the phasing out of the former Lafayette Gardens public housing and include onsite assisted living services (Jersey City Housing Authority, 2010). Low-income housing in Bergen-Lafayette is primarily located around Martin Luther King Drive.

Table 7a: Affordable Housing Characteristics in Focus Neighborhood, 2006-2011

Property Name	Publicly or Federally Assisted	Total Units	Total Assisted Units	Elderly Units	Disabled Units	Physical Inspection Scores					
						'06	'07	'08	'09	'10	'11
Arlington Arms	Federally Assisted	51	50							69	46
Bergen Manor Apartments	Federally Assisted	40	39				99		99		
Booker T Washington Apartments	Public Housing	319							82		
Boyd McGuiness	Federally Assisted	211	211					89		95	
Jones Hall	Federally Assisted	109	109			60	67	84			
Kennedy Boulevard Rehab	Federally Assisted	146	145				63	67	96		
Kennedy Manor	Federally Assisted	25	24			97			92		
Lafayette II	Public Housing	124							70		
Lafayette Senior Living Center	Public Housing	82							99		
Montgomery Gardens	Public Housing	544							59		
New Community Hudson Senior Housing	Federally Assisted	80	80				70		72		79
New Hope Baptist I	Federally Assisted	36	36			76	80				53
New Hope Baptist II	Federally Assisted	60	60						58	14	74
Pacific Court	Public Housing	72							99		
Salem Lafayette Apartments	Federally Assisted	74	74				75		54	74	
Storms Avenue Elderly Apartments	Federally Assisted	78	78								93
Woodward Terrace	Public Housing	70							97		

(US HUD, 2011, 2012, NJ Department of Community Affairs, 2010)

Table 7b: Affordable Housing Characteristics in Focus Neighborhood, 2006-2011

Property Name	Publicly or Federally Assisted	Total Units	Total Assisted Units	Elderly Units	Disabled Units	Physical Inspection Scores					
						'06	'07	'08	'09	'10	'11
Audobon Park Apartments	Federally Assisted	169	167		7				69	78	
Berry Gardens	Public Housing	227							94		
Curries Woods	Public Housing	91							93		
Dwight Street Homes	Public Housing	54							73		
Harborview Apartments	Federally Assisted	100	99					84			
Ocean Pointe East and West	Public Housing	59									
Ocean Towers	Federally Assisted	99	99			82		93			

(US HUD, 2011, 2012, NJ Department of Community Affairs, 2010)

As a desirable location, Jersey City has a lot of pressure and increasing housing requirements. Affordability and availability both are major concerns for residents (Interview, 2013). According to majority of our interviewees there is not a lot of hope when it comes to housing in Jersey City. Even though the living conditions are not the best in Greenville and Bergen-Lafayette, the rents are on the higher side. Paying rent is the most common concern of families and individuals being served by Horizon Family Success Center and Women Rising (Interview, 2013). Hudson county at present does not offer any assistance for families on the basis of income; the assistance programs are only for elderly or disabled population. The county has a waiting list of about 10 years to assist people with special housing needs (Interview, 2013).

Crime

Crime statistics from the New Jersey State Police show an overall decline in violent and nonviolent crime in Jersey City over the past decade, with the total crime index decreasing from 12,657 in 2001 to 7,768 in 2011 (New Jersey State Police). Despite these trends, there is a strong perception among many of the city's residents that the city is "plagued by crime" (McDonald, 2012). In response to residents' concerns, last Spring the Jersey City Police Department announced in a town hall meeting that it was increasing its presence, particularly in Ward F (which includes Bergen-Lafayette), the site of much of the city's violent crime and drug dealing (Musat, 2012). In addition to increasing foot patrols in the area, the City has located its new mobile surveillance unit (a 30-foot surveillance tower called "Eye in the Sky") at the MLK HUB in Bergen-Lafayette (Hunger, 2012).

Environment

Jersey City was a major producer of chromate, resulting in the production of considerable amounts of the byproduct hexavalent chromium, a human carcinogen. For some time people didn't understand what it was or how bad it was. Stern, Gochfeld, and Lioy (2013) explain that the hexavalent chromium was in land that was used as landfill in development projects around the city. And as development pressures increased, new developments were built in these places and land was again moved around the city. More than 200 sites were identified by community actors, state environmental officials and others. A map of the locations shows most are in the Greenville neighborhood (Stern, Gochfeld, Lioy, 2103). Various toxins including arsenic, chromium, lead, zinc, and vanadium were also found in soil and trees at Liberty State Park (Gallagher et al, 2008).



Kathe Newman. 2004. Former Honeywell and later grocery store site between Route 440 and the Hackensack River. Concerns about hexavalent chromium at site and movement from site into river and adjacent properties.

Health

Health Issues

Many of the actors we read about and interviewed had the the same list of healthcare issues: access to healthcare (insurance and non-insurance barriers), lack of information, hypertension/heart disease, women's health, substance abuse, mental health, diabetes and lead poisoning (Hudson County Community Health Improvement Plan, 2007; Interviews 2012/2013). Easy access to drugs and alcohol in the focus areas is a major concern for community organizations working in these neighborhoods (Interview, 2013). With the presence of liquor stores and availability of drugs in these areas, it becomes difficult for organizations to modify behavior of individuals. Speciality care services like mental health and dental care are also lacking in Greenville and Bergen-Lafayette and these services are almost inaccessible for individuals without insurance and the homeless. However, most of the interviewees suggested that prenatal care and post pregnancy care is covered under temporary Medicaid and is well served by Department of Health and FQHC's. Jersey City has a number of programs and organizations addressing the health needs of the elderly and children but there are fewer programs catering towards non-elderly adults (Interview, 2012). The Department of Health provides extensive free services for children up to 5 and the mothers irrespective of their immigration or insurance status; however there is no such formal provision for adults or homeless by the department of health (Interview, 2012). Medicaid does not always covers everything individuals need, which is a major issue in Greenville and Bergen-Lafayette. There seems to be many restrictions in terms of receiving aid through Medicaid and charity organizations due to grant specifications and eligibility criteria.

Many people lack information about the availability of free services, health fairs and community outreach initiatives. Not all the organizations have funding and resources to advertise. Jersey City Medical Center uses newspapers, advertisements and the Internet (Interview, 2013). However, the Department of Health does not have a comprehensive web based information available. They usually advertise their services and fairs through schools, faith based institutions and other social services organizations (Interview, 2012). Organizations like the Horizon Family Success Center and the Metropolitan Family Network lack sufficient funds, resources and infrastructure to advertise or print flyers and handouts (Interview, 2013).

HIV/AIDS and STDs

The number of HIV/AIDS cases in Jersey City is second to Newark with 6,700 in 2010 (Thorbourne, 2012). The biggest health issues are HIV coupled with other issues such as mental health, substance abuse, and other illnesses. The biggest barrier to treatment is lack of information and poverty since people with low incomes cannot afford insurance or the co-pays for HIV/AIDS medicine. For this population, navigating the health system is very difficult (Interview, 2012). While some interviewees argued that they were sufficiently resourced. Others said that they have an insufficient ability to perform a detailed HIV testing procedure that involves pre and post test counseling, and they can only perform quick testing for HIV due to lack of funding (Interview, 2012). Other than the Department of Health's screening center for STD at Christopher Columbus Drive, organizations like MASSH provide screening for STDs and other diseases like TB.

Mental Health

Mental health care in Jersey City is almost non-existent without private insurance or emergency need. There is a wait time of 2-3 months to access mental health care (Interview, 2013). Horizon Healthcare does not have a psychiatrist and mental health specialist at their Bergen Avenue facility at all times. Like a lot of other health care services, children and elderly have some access to mental health care, but the in between adults lack access to mental healthcare services. The

number of people reporting mental health concerns has increased during the recession. Interviewees also reported a general lack of mental healthcare practitioners in Greenville and Bergen-Lafayette.

Lead Poisoning

Lead poisoning is a big concern in both of these neighborhoods because of the old age of buildings and ongoing construction. Once there is a lead poisoning case then the dwelling units are inspected for contamination. Children who are identified as having lead contamination due to a contaminated dwelling unit have to be moved to a temporary shelter and the house has to be lead-abated before they can return (Interview, 2012). Interviewees report insufficient resources to address the problems related to lead poisoning and to abate homes where children have shown elevated lead levels.

Homelessness

Homelessness is a major concern in Bergen-Lafayette and Greenville. There is a visible overlap between mental illness and homelessness. “The homeless are everywhere. They are not just concentrated in Greenville and Bergen-Lafayette” (Interview, 2013). Other than the federally qualified health centers and some social service organizations, Jersey City Medical Center also has medical and social services for the homeless (Interview, 2013).

Lack Health Insurance And/Or Funds to Use Health Insurance

A lack of insurance is a major problem in many cases to accessing healthcare. Interviewees identified a gap in terms of children, adults, and seniors who do not qualify for public support programs and who do not receive insurance through their families or jobs. Immigrants face a harder time since they often do not have access through work and do not qualify for governmental programs. Even if people have government assistance such as Medicare/Medicaid, they may not be able to afford supplements and often have gaps in care related to vision and dental. Without direct services, community organizations and social service providers try to make up the difference but, with little funding, they too struggle. Health insurance and access to care for adults who fall between work-based healthcare and public assistance is a major health concern especially in our focus areas. Even though a handful of faith based organizations conduct monthly checkups, affording prescription medicine and follow up visits is difficult (Interview, 2012). This is especially important with conditions like diabetes that require close supervision.

Supportive Care/Education/Follow-Through

Periodic/bi-weekly clinics and facilities for check-ups, vision and nutrition are needed. Most of the interviewees suggested that there is a lack of nutritional information for the residents of distressed neighborhoods like Greenville and Bergen-Lafayette. Health education as preventative medicine is very necessary and could be very beneficial (Interview, 2013). The city’s health department does health outreach and education through schools and faith based institutions annually (Interview, 2012). But there is a greater need for coordinated information about health services in the city especially for low-income residents and the poor. Organizations like Horizon Family Success Center and Women Rising often conduct educational events like child raising, parenting workshops, and nutrition information sessions. But there is a difference between referrals and actual services. Any sort of guidance should include clear direction as to where people can receive services. Within the medical system, patients could use a liaison to help them navigate. Transitional housing and arrangements for homeless to stay after receiving a treatment is another facility that is lacking in the Greenville and Bergen-lafayette neighborhoods (Interview, 2013).

Compared with our other study cities, Jersey City has a much denser array of healthcare organizations and an especially well developed organizational infrastructure to address HIV/AIDS. While many of these services are available within our focus neighborhoods, especially within Bergen/Lafayette, Jersey City is a relatively small place and many services are available downtown and in other city neighborhoods.

Jersey City Department of Health

The Jersey City Health Department is located in centers around the city to target different populations in different places. For example, they focus on children's health care at the Bergen Lafayette Center. The city runs an annual health fair and it provides health education in schools, churches, and at community centers. It's during this annual fair that the private hospitals and other healthcare organizations are encouraged to volunteer for free check-ups for residents. The department also conducts annual free flu clinics in November at various locations including senior residences and faith based institutions (Interview, 2012). Lead poisoning prevention program for kids, is another important initiative of department of health. If children have elevated blood lead levels, the health department looks for the source of contamination in their homes or elsewhere. Some of the other programs initiated by the department of health are: food vouchers and stamps for children, nutrition counseling and hemoglobin tests for mothers.

Jersey City Medical Center (Liberty Health System)

There are 5 major hospitals in Jersey City. Liberty Health System's Jersey City Medical Center is the largest. JCMC is innovative. They frequently reassess what they are doing and modify their services - what they offer and where they offer them - to meet unmet needs. As a recent assessment and needs out come LHS re-opened Garfield hospital for urgent care which had been closed about four years ago (Representative, JCMC, 2012). One of their eye-catching innovations is the ability to schedule an ER appointment an online and only head to the hospital at the time of an appointment (<https://libertyhealth.inquicker.com>). The hospital provides a free transportation shuttle that runs from 9AM to 5pm along a route for people living in the Greenville Section. The hospital runs a child injury prevention program in Greenville. The hospital has mobile center to do psychiatric screening at the courts and County Youth House. They run a mobile van with doctors and nurses to provide screening for HIV, Cholera, and gamma testing. The van is often parked in front of 360 Martin Luther King Drive. JCMC got a grant for \$648,00 from Hyacinth AIDS Foundation in 2012 to address HIV/AIDS. The hospital runs a center for comprehensive care that provides care related to STDs. They provide free screening and diagnosis. The hospital runs community outreach events every 2 to 3 weeks with the director and medical or paramedic students to provide health services (Representative, JCMC, 2012). The organization is currently applying to receive Malcolm Baldrige award in February for their social services and community outreach efforts. LHS uses varied modes to advertise and let people know about the services they offer. Most commonly they advertise at strategic locations for example along the light rail corridor especially in Greenville and Bergen Lafayette, on newspapers, and on advertisements around the transportation stops like PATH.

Along with an array of health and social services, LHS runs a mental health department, which is one of the biggest, providing a number of services for children and homeless. The hospital receives a good number of elderly people with alzheimers (Representative, JCMC, 2012). Mental health services are highly important in Jersey City and neighboring areas. During the interview representative informed that their current analysis and assessment suggests that they need more resources in terms of staff and physicians in this area and there is also a need for additional services in Bergen-Lafayette, Greenville and along the waterfront.

Another important need highlighted in research and interviews is out-patient facilities and housing. Outpatient residences is another major area that Jersey City Medical center is in the process of addressing in 2013 (Interview, 2013)

MASSH: JCMC has a department to provide services specifically for the homeless called Medical and Social Services for the Homeless (MASSH). MASSH, initiated in 1988, is a medical and social service program that is 100% funded through grants and charity. MASSH provides a 24/7 phone line, HIV testing and primary care programs for homeless or at-risk homeless in Hudson County, as well as other programs. MASSH provides many services for the Greenville and Bergen-Lafayette communities, which include: a Thanksgiving meal; help acquiring Medicare, Medicaid, and other assistance; immediate health care services and assistance in acquiring further assistance through private, public, or charity routes, and medication vouchers. MASSH is a part of a larger system/ program catering to homeless and mentally ill (Interview, 2013). The usual system at MASSH includes providing primary care to homeless and then connecting them to private, public, or charity organizations based on the individual case. MASSH works with a group of volunteers and outreach workers who go out periodically to shelters, food pantries and locations like PATH stations where they are likely to find homeless. They interact with the homeless population with incentives like hygiene kits and encourage them to come to MASSH for health check-ups and primary care.

Metropolitan Health Network

Metropolitan Family Health Network is an FQHC with three locations. Garfield Avenue in Jersey City and Bergenline Avenue Clinic are the two main clinics that offer most of the health services including pediatrics, OBGYN, lavatory, dental care, psychiatrist, social/outreach worker and a nutritionist. The Bergen Avenue clinic is the the most recent addition; this center caters to the homeless and to individuals who lack insurance. Specialty cases like HIV and prostate cancer are often referred to places like Christ Hospital. The Bergen Avenue location functions as a clinic and provides referrals to other centers and hospitals. It accepts walk-in patients and usually there is not a very long wait. MFHN conducts assessments at homeless shelters to identify the needs and reasons that people are homeless. Metropolitan Health Network organizes community events like Thanksgiving dinner, it reaches out to the homeless at shelters, food pantries and other locations. MFHN organizes a homeless BBQ in August, an event for the homeless in May and they distribute hot dogs to homeless on the 4th of July Weekend (Interview, 2013). MFHN owns a van to move patients, including domestic violence victims and the elderly and disabled, from where they live to health services (Interview, 2013). Their van goes out in the city every Tuesday with a doctor to provide health care needs at shelters, food pantries and other locations (Interview, 2013). They collaborate with private organizations like Walmart and Target to support patients with prescription drugs at a cost of 4 dollars.

Jersey City Preventative Medical Clinic

This clinic is now part of Horizon Health Center and operates as an STD screening and testing location.

Bergen Lafayette

Horizon Health Center (http://www.horizonhealth.org/family_success_center.html)

Two African American women started Horizon Health Care in 1963 in a church to provide family planning assistance for women. Today they have three locations, two in Jersey City and one in Bayonne. They also operate a school-based health clinic eight hours a week out of Snyder High School in Bergen-Lafayette. They provide free diabetes testing. Hyacinth AIDS Foundation recently gave them a grant to provide HIV/AIDS services. Horizon also runs a family success center at Bergen Avenue, near its health center. Their family success center provides services from all communities including African-American, Indian,

and from the Philippines who reach out to them concerns including kids schooling, food, landlords, rent, housing, and employment. Many families from Greenville and Bergen Lafayette find it difficult to keep up with the living expenses in Jersey City. Horizon's Family Success Center provides resources and preventive care.

Khaleidoscope Health Care Inc.

There are two centers, one on Lafayette street and one on Harrison Avenue. They don't take charity cases but they do refer people without resources to other charitable organizations. They charge patients and try to work around lower rates depending on individuals. They offer a number of services including internal medicine, EKG, blood sample collection on site and they provide outside referrals. Some of the most common cases they address are sick visits, diabetes, hypertension and asthma. The center at Harrison Avenue caters to mental health and substance abuse. They also participate in free clinics in the neighborhood occasionally and the city's annual health fair (Interview, 2013).

Transportation

Jersey City has one of the most active multi-modal public transportation networks in New Jersey. It receives a substantial amount of use from area residents; 2010 Census data indicated that nearly one out of two Jersey City residents use public transportation to travel to work (47%), and two fifths of all residents (40%) do not own a car. For NJTRANSIT rail commuters traveling into Jersey City, rail service stops at Newark Penn Station and the Hoboken Terminal, and they can transfer to the PATH rapid transit system. Both the PATH and the Hudson-Bergen light rail system transport passengers in and out of Jersey City and throughout the New York City metro region. Both the Journal Square and downtown neighborhoods of Jersey City are particularly well-served by public transit. In addition to public transportation, non-motorized options are available for pedestrians and cyclists alike in Jersey City. Throughout the city, roadway markings for bicycle safety are visible on various streets determined to be popular local cycling routes (RBA Group, 2010).

In the focus neighborhoods, there are a wide range of options for public transportation. Multiple light rail stops are located in Bergen-Lafayette and Greenville. Three stops run along the eastern border of the neighborhoods; one in Bergen-Lafayette near Lafayette and two in Greenville near Bayside Park and New York Bay Cemetery. An additional three stops are located almost on the border of the two neighborhoods with one stop located near the Metropolitan Family Health Network, Inc. and one near the Children's Health Clinic. The light rail also allows for easy access to the Jersey City Medical Center, located outside of the focus neighborhoods. Bus stops are primarily located along three major roads in Bergen-Lafayette and Greenville: Ocean Avenue, Martin Luther King Jr. Drive and West Side Avenue. Bus stops are also clustered around Communipaw Avenue in central Bergen-Lafayette and Romar Avenue in the southwestern section of Greenville. Every health service identified in the neighborhoods is located within a block of a light rail or bus stop. However, the convenience of the stops is dependent on the frequency of service and reliability.

Community Organizations

Overview Discussion

Bergen-Lafayette has a wide array of community organizations. The Urban League of Hudson County, AIDS Hyacinth, and C-line Community Outreach are some of the major community service non-profit organizations. "Let's Celebrate, Inc. provides financial assistance to those at risk of becoming homeless and living in

Jersey City” (Interview, 2009). Greenville has a number of community and social services organizations to provide affordable housing, senior homes, health services, employment support and family services. NJ Community Capital and Jersey City Episcopal Community Development Corporation have partnered to provide affordable housing in Greenville and parts of Bergen. Officials from the Garden State Episcopal Community Development Corporation held a ribbon cutting last week, one of nine buildings in Greenville, Bergen/Lafayette and McGinley Square that have been renovated since going through foreclosure proceedings. The program converts vacant ‘crime havens’ into family homes that boost the local real estate market (McDonald).

List and Short Description of Other Organizations

Bergen-Lafayette Community Organizations

AIDS Resource Foundation for Children (<http://aidsresource.org/>)

The AIDS Resource Foundation for Children assists children and families that are impacted by HIV/AIDS or who have other serious medical condition to be resilient and build healthier futures. The AIDS Resource for Children was created by Faye Zealand, the Executive Director and her husband in 1985, after the loss of a close friend to AIDS. When first addressing the problem, Zealand realized that often children with AIDS were unable to be discharged because they had nowhere to go. Their parents may have died and grandparents may fear that taking in children with AIDS would cause others to be effected. The organization started with a playgroup in an unused examination room in a Newark hospital for children. They wanted to create a home for children affected with AIDS who could be discharged but had nowhere to go. The organization now has three transitional pediatric care homes for children affected with AIDS/HIV, which are referred to as St. Clare’s Homes for Children. Jersey City’s St. Clare’s Home opened in 1990. At the Jersey City location, they added an outreach component to assist the families of children cope and learn how to care for those with AIDS. The Jersey City location added a Respite program to assist parents in receiving the care they needed. The AIDS Resource Foundation for Children provides direct, supportive, and advocacy services that include: transitional care, supportive housing, enrichment programs, case management and supportive services, and funding related advocacy. One of the greatest challenges is in connecting the different community organizations to each other. In order to have the most effective care, programs, and services, there needs to be consistent coordination. The greatest struggle for the organization for its Jersey City location is that it has been unable to establish the type of relationship with local hospitals that they would like. They have tried to locate their facilities as close to a medical facility as possible, and in Jersey City they originally did, but the new medical center moved. The other locations have much stronger relationships, which has resulted in stronger support from the local community and in hospital administrators sitting on the organizations’ boards. The lack of a relationship between the hospitals and the organization in Jersey City has resulted in difficulty in getting the organization’s name into the community. Further, the majority of the children going to the organization’s facility in Jersey City are coming from elsewhere- from places as far as Paterson, NJ (Interview, 2013).

Catholic Charities of The Archdiocese of Newark – Canaan House (http://www.ccannj.com/canaan_house.php)

Canaan House is a full-service, permanent, supported, independent living facility designed to meet the special needs of homeless people living with HIV/AIDS and a severe and persistent mental illness and/or chemical addiction. Canaan House services include: 24/7 crisis intervention and emergency services, group and individual mental health and substance abuse counseling, home healthcare, benefits management, nutrition education, food preparation and housekeeping, vocational rehabilitation, life skills and personal education, family support, and case management and referral.

Children's Health Clinic (<http://www.cityofjerseycity.com/hhs.aspx?id=1632>)

The Children's Health Clinic provides immunization services to children in Jersey City, from birth to age 18, who are uninsured or underinsured. It offers a limited well baby clinic for children from birth to age 5. The Children's Health Clinic offers flu vaccines for senior citizens and Jersey City Employee's during flu season. The Children's Health Clinic keeps a database of immunizations given to children residing in Jersey City and audits all day care centers in Jersey City for compliance with the immunization schedule.

C-Line Community Outreach Services (<http://www.hudsonservicenetwork.org/main.asp?uri=1044&ei=1&li=260>)

C-Line Community Outreach Services provides: substance abuse, drop-in counseling, women's support groups, transportation, referral services, mentor support, case management, and outreach services.

Church of the Incarnation (<http://www.visitincarnation.com/>)

Church of the Incarnation is a Jersey City church with extensive outreach ministries, largely focused around the needs of children, the hungry, and the homeless. The ministry runs a summer day camp and an after-school music enrichment program for youth. Incarnation and Jersey City Episcopal Community Development Corporation co-sponsor a drop-in center for frail homeless people. The ministry plans to expand its community feeding program called Welcome Table, which currently includes fresh food and vegetables one Saturday a month, and a hot and nutritious meal one Monday each month.

Division of Senior Affairs at Lafayette Living Center (<http://www.jcha-gov.us/Sites/LafayetteSeniorLivingCenter.aspx>)

The Division of Senior Affairs at Lafayette Living Center enables low-income senior citizens to live independently and age in place. The Division offers Nutrition Grant programs and operates an additional seven Senior Citizen Nutrition sites from 9:00 a.m. to 2:00 p.m. on weekdays.

Elizabeth Seton House (<http://www.hudsonservicenetwork.org/main.asp?uri=1044&ei=1&li=93>)

The Elizabeth Seton House provides transitional housing to young pregnant women (15-21 years) living in homelessness.

Garden State Episcopal Community Development Corporation/Corpus Christi Ministries Inc. (<http://www.jcecdc.org/aboutus.html> and <http://www.jcecdc.org/socialservices/>)

Garden State Episcopal Community Development Corporation (GSECDC) is committed to meeting the housing and social service needs of the impoverished and marginalized population of Northern and Northwestern portions of New Jersey. Corpus Christi Ministries Housing is one GSECDC's Division of Supportive Housing and social Services programs, which promotes self-sufficiency and a better quality of life through addressing poverty by providing permanent supportive housing, as well as social services and economic development.

Habitat for Humanity of Hudson County (<http://habitahudsoncounty.org>)

Habitat for Humanity International works to eliminate poverty housing. Habitat for Humanity of Hudson County promotes home ownership with Hudson County residents who have inadequate housing. Habitat for Humanities brings families and communities in need together with volunteers and resources to build affordable houses.

Hogar Crea

Hogar Crea provides long-term inpatient residential care for substance abusers and community follow-up.

Horizon Health Center (<http://www.horizonhealth.org/>)

Horizon Health Center is a Federally Qualified Health Center that provides comprehensive healthcare services and education to Hudson County's medically underserved population. The Horizon Health Center offers the following services in Jersey City at its Christopher Columbus Drive location: reproductive health services, pediatric and adult primary care services, dentistry, and specialty services (podiatry and pulmonology).

Hudson CASA Recovery Support Project (<http://www.jcecdc.org/socialservices/ourprograms.html>)

The Hudson CASA Recovery Support Project is one of the Garden State Episcopal Community Development Corporation's (GSECDC) projects, which was developed to address the problem of homelessness. The Hudson CASA Recovery Support Project includes: specialized case management, employment counseling and job placement, substance counseling, education, peer support, HIV testing, health screenings, mental health services, and substance treatment centers.

Hudson County Workforce Investment Board (<http://www.hcstonline.org/homesite/Default.aspx?tabid=131>)

The Hudson County Workforce Investment Board (WIB) operates a One Stop Career Center in Jersey City which provides job seekers and employers with career and educational information, counseling, job search assistance, and referral to training resources.

Hudson Hospice, Volunteer Inc. (<http://www.hudsonhospice.org/>)

Hudson Hospice works with other agencies and health facilities in Jersey City to provide volunteer services and supportive financial assistance. Hudson Hospice volunteers provide home healthcare, volunteer services, and bereavement support for survivors (children and adults).

Hyacinth AIDS Foundation (<http://www.hyacinth.org/hyacinth/home/index.jsp>)

The Hyacinth AIDS Foundation is a non-profit AIDS service organization that provides services to ensure that people do not get HIV and those who are positive live a high quality life. Hyacinth AIDS Foundation provides: individual client counseling, hotline counseling for prevention, HIV testing, care and treatment, service referrals, professional and community education workshops, housing assistance, emergency financial assistance, legal services, and public policy advocacy. The Hyacinth AIDS Foundation's main office is located at the Journal Square transportation hub. Hyacinth AIDS Foundation does community outreach using a prevention team, health education workshops, outreach navigators, canvassers, and through their mobile unit. Hyacinth AIDS Foundation works collaboratively with other local organizations who provide HIV/AIDS services including hospitals, clinics, and medical case managers.

Jersey City Employment and Training Program (<http://www.jcetonline.org/home>)

The Jersey City Employment and Training Program (JCETP) is a nonprofit agency mandated by the Workforce Investment Act that provides a range of services provides a range of services to both job seekers and employers. Services oriented towards job seekers include those tailored towards both adults (including resume writing, skills assessment and more intensive services) and youths (including training and support services.)

Kaleidoscope Health Care Inc. (<http://www.khcpmc.org/>)

Kaleidoscope Health Center is a non-profit 501(c)(3) corporation and a New Jersey licensed ambulatory health care provider that provides quality, affordable, community-based healthcare and educates the community about healthcare problems and the importance of preventive care. Kaleidoscope Health Center offers a wide range of medical services: general medicine, internal medicine, OB/GYN, pediatrics, immunizations, family counseling, pregnancy testing, lab work, physicals and exams, nutritional counseling, WIC certification, and workmen's comp exams. Kaleidoscope Health Center also offers substance abuse treatment and behavioral and clinical counseling.

Let's Celebrate (2 Locations)

Services include Meals on Wheels, the Soup Kitchen, food pantries, financial planning and education and affordable housing, Emergency food assistance- Pantry and Soup Kitchen, Counseling and Referrals for social services, mental health and substance abuse

The Maureen Collier Senior Center

Offers lunch, recreational, educational, and cultural activities to Jersey City senior residents (60+ years of age)

Metropolitan Family Health Network (<http://www.metrofhn.com/>)

The Metropolitan Family Health Network is a federally qualified health center that provides a wide range of health services, which include: adult primary care, healthcare for the homeless, immunizations for children, women's healthcare, dental services, and nutritional services. The staff are in more than eight different languages.

Morris Canal Community Development Corporation (<http://www.morriscanalcdc.com/>)

The Morris Canal Community Development Corporation (MC CDC) is a non-profit organization that aims to stimulate the cultural and economic revitalization of the Morris Canal/Lafayette and surrounding areas in Jersey City. MC CDC's mission is to create rent-to-own housing opportunities, while simultaneously addressing affordable homeownership. MC CDC focuses on: quality affordable housing, commercial and economic development, and employment and training.

New Jersey Community Capital (<http://www.newjerseycommunitycapital.org/>)

New Jersey Community Capital (NJCC) is a non-profit, community development financial institution that has funded projects in New Jersey since 1987. It provides financing and technical support to community organizations that support housing and sustainable development projects that increase jobs, improve education, and strengthen communities (<http://www.newjerseycommunitycapital.org/about/>). Most of the community development initiatives NJCC has been involved with in Jersey City concern affordable housing. NJCC has funded projects with over 100 non-profits. NJCC has funded various affordable housing projects with the Garden State Episcopal Community Development Corporation and the Urban League. With the U.S. Department of Housing and Urban Development's Neighborhood Stabilization Program Grant, NJCC initiated the renovation of a 13 unit rental project on Bostwick Avenue and an 8 unit rental project with 5 retail units at 151-155 MLK Drive; both in Jersey City. The Urban League's CDC handles the management of these 2 properties. NJCC has also started construction on All Saints School conversion project, where 25 units will be market rate in the Bergen Lafayette section. In addition to funding affordable housing projects, NJCC

has been involved in the funding of other community development projects. One of these is the funding of the Dr. Lena Edwards Academic Charter School in the Bergen section (Interview, 2013).

Our Lady of Sorrows (<http://www.olsnj.org/>)

This church runs an emergency food pantry and provides clothing and household goods. The church's outreach activities include working with their affiliates: Hudson Hospice, Benincasa Project, Magnificat Home (for low-income women,) the Jersey City Food Coop, and Narcotics Anonymous.

Parkside Medical Center – Khaleidoscope (<http://www.khcpmc.org/>)

Khaleidoscope Health Center is a non-profit organization and a New Jersey licensed ambulatory health care provider that provides quality, affordable, community-based healthcare and educates the community about healthcare problems and the importance of preventive care. Khaleidoscope's Parkside Medical Center location offers affordable primary healthcare.

Remarkable Mossi Youth Council (<https://sites.google.com/site/remarkablemossiyoungcouncil/home>)

The Remarkable Mossi Youth Council provides before and after school academic programs and mentoring for at risk youth and their families. RMYC offers family support services to empower families to become advocates for their children and to increase self sufficiency by reducing unemployment, substance abuse, and illiteracy.

Sickle Cell Disease Association of America (<http://www.sicklecelldisease.org/>)

The Sickle Cell Disease Association of America is an organization that works primarily through advocacy toward the improvement of health, life and services for those impacted by sickle cell disease and related conditions.

Snyder HS Health Clinic (<http://www.horizonhealth.org/>)

Horizon Health Center, Inc., a Federally Qualified Health Center, operates a school-based health clinic (8 hours per week) out of Snyder High School which is located in the southwest corner of Bergen-Lafayette near Greenville.

Spectrum Health Care Inc. (<http://www.spectruminc.org/>)

Spectrum Health Care is a private, non-profit organization that provides a range of coordinated Opioid or substance abuse treatment services in a professional outpatient care setting. Spectrum Health Care Center addresses medical, mental health care, housing, vocational, educational, legal aid, family and social support needs.

Women Rising Project Home (http://www.womenrising.org/WomenRising_com.htm)

Women Rising is a community based organization that does economic development and provides social services and advocacy for women and their families in Jersey City. Women Rising's Project Home provides 12 months of transitional housing and support services to homeless women and children who are recovering from substance abuse and trauma caused by domestic abuse. The services include: safe and sober housing, substance abuse treatment, parent training, domestic violence counseling and services, life and job skills classes, and case management. Women rising also provides the following the services: community

partnership in hotel employment, family advocacy program, family microloan program, family support services, job bank, neighborhood revitalization, project career path, project home, strong foundations, supervised visitation for reunification of the family, and workforce initiatives

Women rising youth and family division receives a large number of domestic violence cases followed by employment, stable housing and rental assistance. People-walk into women rising for issues like re-gaining social support and trust. They are not just restricted to Jersey City, but cater to entire hudson county and often get individuals from other counties. A lot of issues addressed at women rising are behavioral. They run workshops and programs both for men and women, however there are some programs like shelter that is specific to women (Representative, 2013). Many individuals who reach out to Women Rising are undocumented (Hispanic, African-American, philippines).

Women rising is a part of coalition for battered women and works with a number of organizations and often refer individuals and victims to organizations like HOrizon Health Center, Metropolitan Family Health Network, NHCAC (NOrth Hudson Community Action Corporation), Christ Hospital etc.

Like most of the other organizations women rising doesn't have a structured system of advertising their services, mostly it word of mouth and monthly meetings where they inform other organizations and communities about their services and programs.

List of Greenville Community Organizations

Community Outreach Team, Inc. (<http://www.communityoutreachteam.org/>)

Community Outreach Team is a non-profit organization founded to contribute to the revitalization of the Greenville area. Community Outreach Team's mission is to improve the quality of life and increase life chances by supporting self-sufficiency for individuals and families and building sustainable communities. Their services include: strengthening parenting skills, after school and summer camp programs, computer training, job training and placement, and ABS/GED preparatory classes. The Community Outreach Team has completed two affordable housing projects: the Albert A. Lewis Apartment Building and Bay Bay Senior Housing Program.

Division of Senior Affairs at Berry Gardens (<http://www.cityofjerseycity.com/hhs.aspx?id=1438>)

The Division of Senior Affairs provides services and programs for senior citizens of Jersey City. The Division of Senior Affairs provides the following services: information and assistance, free movies, transportation for shopping trips, Farmers' Market Vouchers for low income senior citizens, healthcare services, senior citizen centers, home delivered meals, and nutrition sites. Berry Gardens is one of seven Senior Citizen Nutrition sites that operate on weekdays from 9am to 2pm.

Division of Senior Affairs at Ocean Towers (<http://www.cityofjerseycity.com/hhs.aspx?id=1438>)

The Division of Senior Affairs provides services and programs for senior citizens including: information and assistance, free movies, transportation for shopping trips, Farmers' Market Vouchers for low income senior citizens, healthcare services, senior citizen centers, home delivered meals, and nutrition sites. Ocean Towers is one of seven Senior Citizen Nutrition sites that operate on weekdays from 9am to 2pm.

Friends of Lifers Youth Corporation (<http://www.friendsofthelifers.com/>)

Friends of Lifers Youth Corporation is a nonprofit organization that supports the prisoner re-entry by building positive relationships, supporting employment opportunities, and providing social support. It provides programs on life skills, workforce development and training, legal assistance, and youth engagement and enrichment programs.

Garden State Episcopal Community Development Corporation (<http://www.jcecdc.org/aboutus.html>)

Garden State Episcopal Community Development Corporation (GSECDC) is committed to meeting the housing and social service needs of the impoverished and marginalized population of Northern and Northwestern New Jersey. GSECDC engages in housing and community development, supportive housing, social services, and employment services. GSECDC's Employment Services recruits, trains, and places clients in careers.

Real Life Community School

Real Life Community School recruits adults and provides them with an array of career training and basic educational skills. The Program is designed for those who need to improve their reading comprehension and basic math concepts before taking GED Prep courses.

Saint Ann's Home (<http://www.saintannshome.com/>)

Saint Ann's Home is a Catholic Nursing Home that has cared for the elderly in Jersey City since 1911. Saint Ann's Home offers: adult medical day care, physical therapy and short- and long-term stays. They provide transportation to and from Saint Ann's Home and to appointments, nutritional meals and snacks, dietary consulting, nursing care, social services, therapeutic programs, counseling, and a range of activities that are based on client interests, special events and outings, peer support, and individualized plans of care.

Urban League of Hudson County (<http://www.ulohc.org/>)

The Urban League of Hudson County is a non-profit community based organization that works in partnership with community groups, government and corporations to empower residents and improve the quality of life in urban communities. The Urban League of Hudson County's wide range of programs and services include: education and youth development, affordable housing and economic development, childcare services and workshops, employment and training, a youth enrichment program, and Journey to Womanhood-guidance for female adolescents.

Volunteers of America – Greater New York (<http://www.voa-gny.org/>)

Volunteers of America is a human services organization that aims to help the most vulnerable men, women, and children lead safe, healthy, independent, and productive lives. Volunteers of America-Greater New York is the largest affiliate of the national Volunteers of America organization. Volunteers of America-Greater New York's wide range of services includes: transitional housing, schools for young children with developmental delays, permanency planning for children orphaned by parents who have died of AIDS, "age in place" support, services for youth in foster care, assistance for adults with developmental disabilities, supportive housing for formerly homeless adults and adults living with mental illness or addiction, halfway houses and other re-entry support for man returning to their communities from prison, and group homes for adults with severe and persistent mental illness.

Helps older adults "age in place" with a network of caregivers and other community support that keeps them engaged, and not isolated.

Works Cited

Garbarine, Rachelle. 1989. "New Jersey; From Minor Leagues to Major." *New York Times*. May 14. p11.

Garden State Episcopal Community Development and TRIAD Associates. 2012. I Love Greenville Plan. <http://www.scribd.com/doc/108589570/DRAFT-I-Love-Greenville-Community-Plan>.

Gallagher, FJ, Pechmann, I, Bogden, JD, Grabosky, J, Weis, P. 2008. "Soil Metal Concentrations and Vegetative Assemblage Structure in an Urban Brownfield." *Environmental Pollution* 153 2:351-361. May.

Hack, Charles. 2012. "Jersey City Medical Center Will Reopen Greenville Hospital." *The Jersey Journal*. August 1. http://www.nj.com/jjournal-news/index.ssf/2012/08/jersey_city_medical_center_wil_1.html.

Hack, Chris. 2012. "Jersey City non-profit turning foreclosed vacant houses into affordable homes." *The Jersey Journal*. March 5. http://www.nj.com/jjournal-news/index.ssf/2012/03/jersey_city_non-profit_turning.html.

Hudson County. "Homeless Prevention and Rapid Re-Housing (HPRP) Program Information." Hudson County Homeless Prevention Rapid Re-Housing Program. November 2. <http://www.hudsoncountynj.org/Data/Sites/1/dept/planning/documents/hprpinforelease.pdf>.

Hortillosa, Summer Dawn. 2012. "Meeting Today Discussing Plans for Morris Canal Greenway for Bicyclists, Pedestrians." *Jersey City Independent*. October 3. <http://www.jerseycityindependent.com/2012/10/03/meeting-today-discussing-plans-for-morris-canal-greenway-for-bicyclists-pedestrians/>

Hudson Perinatal Consortium. 2010. 2009 Data Report. <http://www.hudsonperinatal.org/images/2009%20Data%20Report.pdf>.

Hudson Regional Health Commission. 2007. "Hudson County Community Health Improvement Plan." February. <http://www.hudsonregional.org/wnew/20070424-Hudson%20County%20CHIP.pdf>.

Hunger, Matt. 2012. "Jersey City Police Department Unveils New Crime-Fighting Tool: A Mobile Surveillance Unit." December 12. *Jersey City Independent*. <http://www.jerseycityindependent.com/2012/12/12/jersey-city-police-department-unveils-new-crime-fighting-tool-a-mobile-surveillance-unit/>

The RBA Group. 2010. "Jersey City Bikeway System."

Jersey City Economic Development Corporation. "Jersey City Neighborhoods." n.d. <http://www.jcedc.org/Pages/01-24neighborhoods.pdf>.

Jersey City Housing Authority. "Curries Woods Hope VI Programs." <http://www.jcha-gov.us/Hope-VI-Programs/Curries-Woods-Hope-VI-Programs.aspx>.

Jersey City Housing Authority. "Lafayette Gardens and Morris Canal." http://www.jcha-gov.us/Hope-VI-Programs/laf_gdns_intro.aspx

Jersey City Housing Authority. "Ocean Pointe East and West." <http://www.jcha-gov.us/Sites/Ocean%20Pointe%20East%20and%20West.aspx>

Jersey City Redevelopment Agency. "Redevelopment Projects." <http://www.thejcra.org/index.php?p=projects>.

McDonald, Terrance T. 2012. "Jersey City Activists Accuse City Council of Not Facing Crime Problem." The Jersey Journal. February 9. http://www.nj.com/jjournal-news/index.ssf/2012/02/jersey_city_activists_accuse.html.

McDonald, Terrence T. 2012. "Wells Fargo donates \$50K to Jersey City group seeking to revitalize Greenville section." The Jersey Journal. August 29. http://www.nj.com/hudson/index.ssf/2012/08/jersey_city_group_receives_500.html.

Morris Canal Community Development Corporation. Web. <http://www.morriscanalcddc.com/news/default.html>.

Musat, Stephanie. 2012. "Jersey City Police Chief Addresses Crime Concerns at Town Hall Meeting." The Jersey Journal. March 23. http://www.nj.com/hudson/index.ssf/2012/03/jersey_city_police_chief_addre.html?mobRedir=false.

Musat, Stephanie. 2012. "Morris Canal in Jersey City Opens Community Garden." The Jersey Journal. April 14. http://www.nj.com/hudson/index.ssf/2012/04/morris_canal_in_jersey_city_op.html

New Jersey Community Capital. 2010. "New Jersey Community Capital and Jersey City Episcopal Community Development Corporation Partner to Provide Affordable Housing Options in Jersey City. April. <http://www.newjerseycommunitycapital.org/pdf/article1.pdf>.

NJ Department of Community Affairs. NRTCP Clearinghouse. <http://www.state.nj.us/dca/divisions/dhcr/offices/docs/nrtc/clearinghouse.pdf>

New Jersey State Police. 2000-2011. "Uniform Crime Report." State of New Jersey, Department of Law & Public Safety, Office of the Attorney General. Web. <http://www.njsp.org/info/stats.html>.

Stern, Alan, Gochfeld, Michael, and Liroy, Paul. 2013. "Two Decades of Exposure Assessment Studies on Chromate Production Waste in Jersey City, New Jersey - what We have Learned About Exposure Characterization and its Value to Public Health and Remediation." Journal of Exposure Science and Environmental Epidemiology. Feb 1 v23 N1.

Thorbourne, Ken. 2012. "Jersey City Medical Center and Horizon Health Center Receive State Money to Combat HIV/AIDS." October 24. http://www.nj.com/hudson/index.ssf/2012/10/jersey_city_medical_center_rec_3.html

United States Census 2000. American Factfinder. 2000. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

United States Census 2010. American Factfinder. 2010. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

Asbury Park

South West Side

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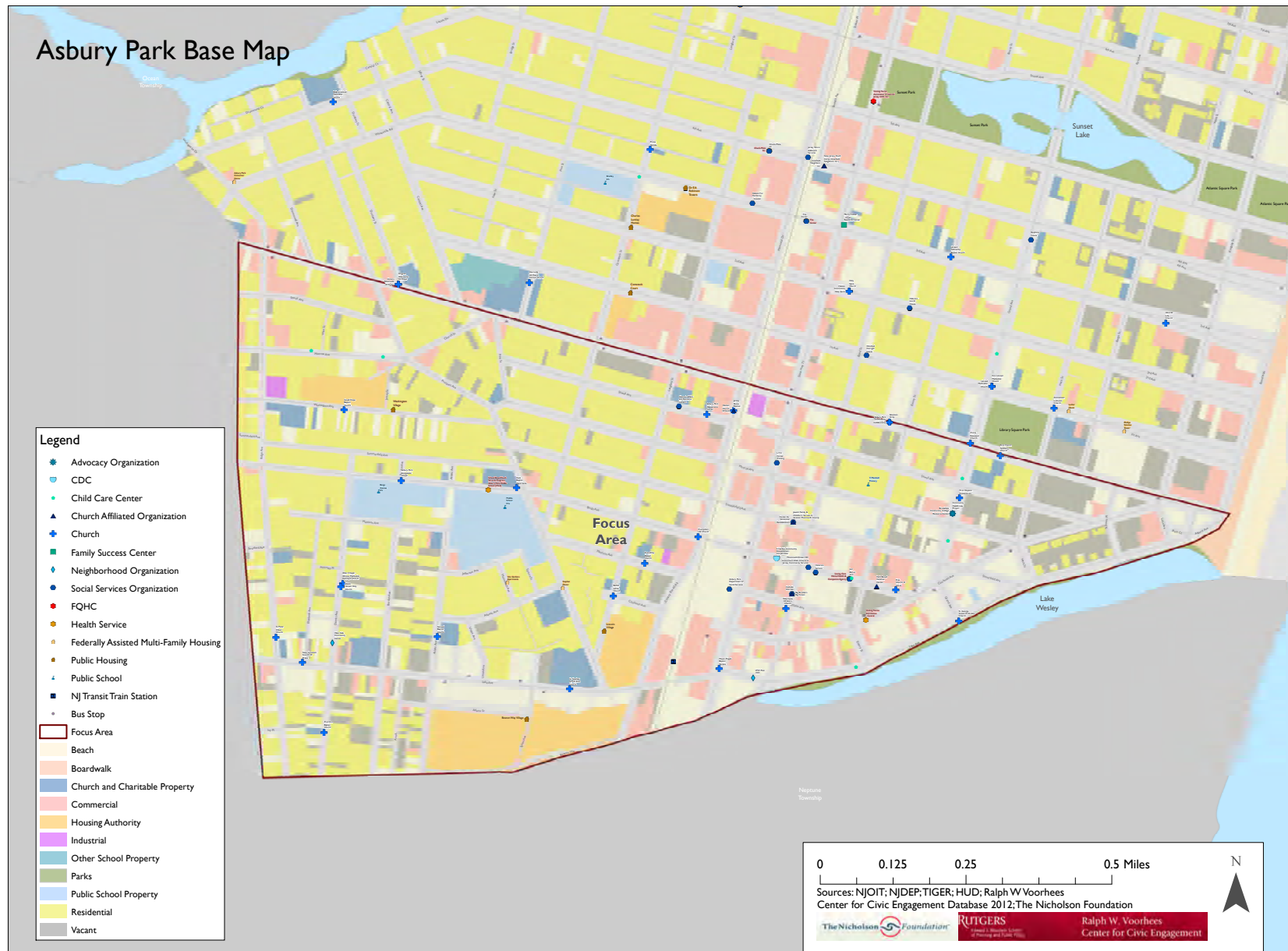


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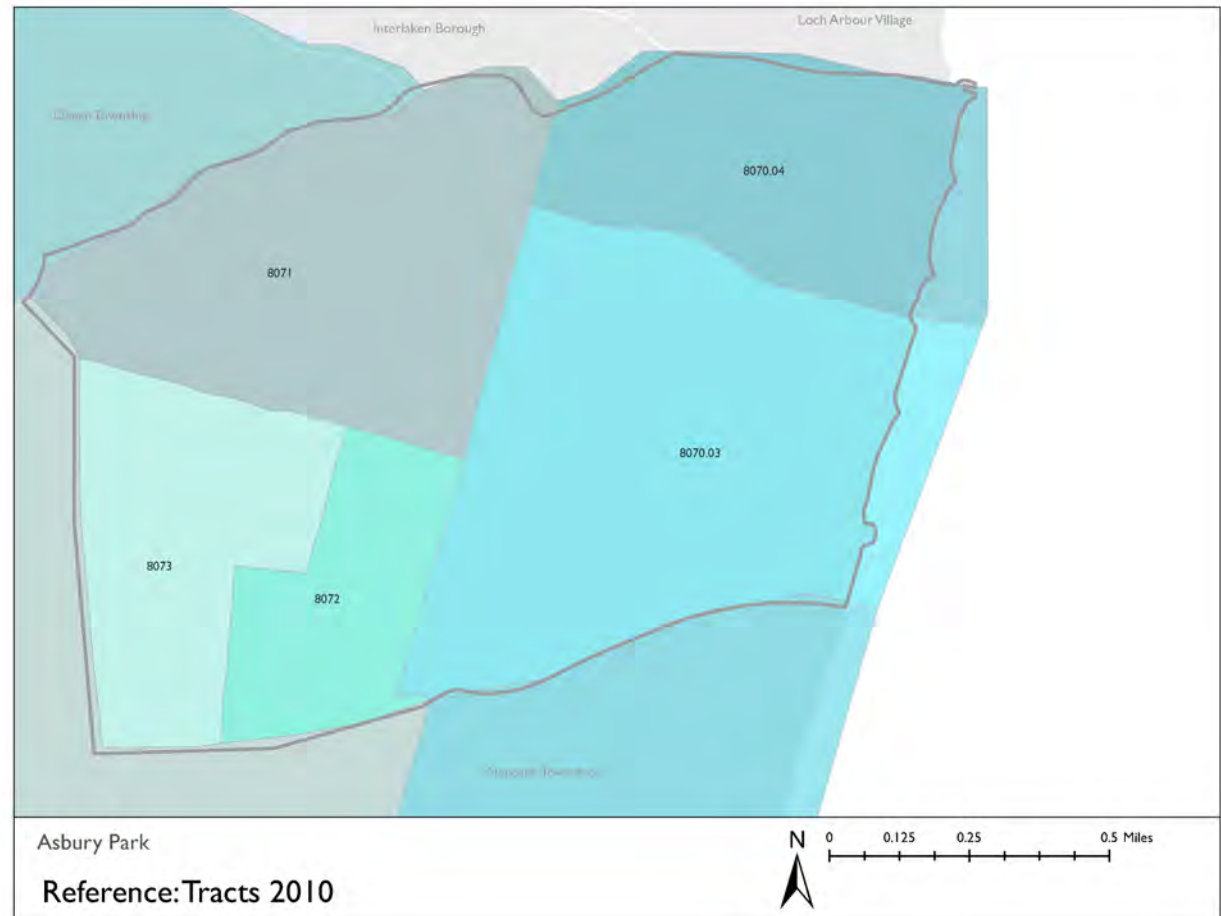
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Neighborhood

South West Side

“just an hour from both New York City and Philadelphia, Asbury Park is quickly distinguishing itself as “The Place to Be” along the Jersey Shore in this city by the sea, where urban, progressive minded attitude meets the ocean” (theloftsatasburypark.com).

Bangs Avenue on the East Side thrives with Cafe Volan, Blue Hawaii, the Colonel’s Kissing Booth, and Sweet Joey’s and locals celebrate its “peculiar quirkiness” (Washburn, 2012; Chin, 2012; Teng, 2012). Downtown, the music scene is re-emerging with Bamboozle and All Tomorrow’s Parties; even the vendors from the Brooklyn Flea are crossing the river (McKinley, 2011; Ratliff, 2011). And “The New Lofts at Asbury Park”, a new residential development, is advertised as located on the “tree lined” West Side, blocks from the beach and an hour from either of the major cities - NYC or Philadelphia (the lofts).



The South West Side has its own quirkiness, though of a less peculiar type, that it shares with so many urban communities that have struggled with decades of disinvestment. South West Side residents long for jobs and better education and cope daily with gangs, drugs, and crime (Ackerman, 2012). The South West Side has long been home to people who worked in the resort area in the least desirable jobs. First it was new Italian and Armenian immigrants and later it was African Americans. The West Side was home to its own thriving music scene and performing houses that got little outside attention (Horne, 2012; Murphy, 2012). Lower income African American residents lacked access to suburban communities and lower income housing was available on the South West Side which has a concentration of federally assisted and public housing projects. Springwood Avenue was the major commercial corridor until the riots. The division

between the neighborhoods was and is stark. Schools remained segregated until 1947. As unemployment rose and people lacked housing opportunities and access to the political system, the neighborhood became overcrowded and erupted in riots in July 1970 around Springwood Avenue. The core challenges, at the time, involved access to jobs, decent housing, and participation in the decisions that affected peoples lives (Fraser, 1970). A few years later in 1972, the West Side was described as “a vista of gray, lifeless buildings bunched together, pockmarked with broken windows, obscene graffiti announcing black militant slogans, empty lots packed with garbage and broken wine bottles, and small groups of men standing in the shadows with red, glazed eyes, waiting for a little action” (Scene of Asbury’s, 1972). While that describes the physical environment, it doesn’t do justice to the people who continued to live their lives, watched their children grow, and hoped and dreamed of a brighter future.

We opted to focus on the South West Side. It extends to the Neptune border on the south, Atkins Avenue on the west, and Asbury Avenue to the north. The portion of census tract 8070.03 is mostly made up of commercial buildings, includes the central business district, and contains little residential land uses but does include many service organizations. Nearly all of the population lives in census tracts 8073 and 8072, the two tracts south of Asbury Avenue and west of the railroad (U.S. Census Bureau, New Jersey Office of Information Technology, MODIV; ACS, 2010 5-Year Estimate). Today the South West Side is largely an African American neighborhood with Latino and Haitian immigrants. The problems of the 1970s are pretty similar to the problems residents face today - inadequate housing and rising housing costs, crime, and not enough jobs.

Asbury Park has struggled with fits and starts of redevelopment for at least two decades. While the waterfront developments haven’t done as well as many had hoped, a variety of people, including a large gay community, have made Asbury Park their home. Commercial corridors have improved and neighborhood networks are strong enough that residents report that they seemingly know everyone in the city (Asbury Park Central Business District Redevelopment Plan). City government and neighborhood groups have sought to redevelop the South West Side bringing revitalization to a part of the city that has experienced disinvestment for nearly a half century. The 2000 Strategic Target Area Rebuilding Spirit (S.T.A.R.S) Redevelopment Plan covers about 12 blocks in tract 8073. The plan identified six dozen vacant properties and another 24 that were vacant or in poor condition (S.T.A.R.S. Redevelopment Plan). The Springwood Avenue Redevelopment Area lies just east of the S.T.A.R.S redevelopment area. This area, mostly located in the southern portion of tract 8072, has a long history of urban renewal. Although the Housing Authority developed many of the properties, activity along Springwood Avenue was limited to two groupings of townhouse style residential developments approved in 1990. Some are on the southern side of Springwood Avenue across from Union Avenue and a second group is on the eastern side of Union Avenue (Amended Springwood Avenue Redevelopment Plan).

Interfaith Neighbors, a community development organization, developed a ten-year broad-based neighborhood plan for the South West Side in partnership with other organizations including Coastal Habitat for Humanity. They organized a large community planning effort and later received \$500,000 in Neighborhood Revitalization Tax Credit (NRTC) dollars to implement in 2006. The effort includes affordable housing, economic development, new community spaces, safety, and “social conditions” (Interfaith Neighbors). A new senior center formed the cornerstone of the new Springwood Community Center on Springwood Boulevard and a collaboration with the Asbury Park Department of Social Services ensures the availability of services such as a nutrition program. The Center will soon include a real police substation, Interfaith Neighbors’ Business Development Center and Business Incubator, Kula Cafe which incorporates a paid youth and adult job training program, and 8 affordable senior housing units. As part of Asbury Park’s redevelopment plan, they noted the need to focus on job placement and training. Because of the lack of an industrial core to spur job creation, the community turned its attention to its over 60 restaurants. Restaurants do not hire from the area because many residents lack training and experience in the food service industry. Interfaith hopes its soon-to-open Kula Cafe will provide food

related training and employment opportunities (Interview, 2013). The Center's small business center with incubator space, they hope, will spur other redevelopment on the Boulevard heading towards downtown. A park is planned for across the street from the center (Mulshine, 2012. Dec 4; Crandall, 2012; "Habitat slated to put for affordable homes"; interview, 2013; Spring 2012 Interfaith Neighbors Newsletter). In addition to the Springwood Community Center, other smaller projects include a restored swimming pool at the Boys and Girls Club, a Police Athletic League boxing center, improved lighting for the Little League, and surveillance cameras in higher crime areas (Shields, 2008). Located farther west along West Lake Boulevard (formerly Springwood) is the Midtown Commons, developed by CityWorks and the Midtown Urban Renaissance Corporation, and the site of Jersey Shore Medical Center's Family Health Center (Grim, 2010).

Table 1. South West Side Characteristics

Characteristic	Total	% of Total	Characteristic	Total	% of Total
Population (2010)	5,291	100%	Families (2010)	1,219	100%
			Female-headed with Children	616	51%
Age (2010)			Economic (2007-2011)ⁱ		
Under 5 years	540	10%	Median Household Income	\$25,774 - 30,350	
5-19 years	1,476	28%	Persons below Poverty	2,124	35%
20-64 years	2,970	56%	Total Civilian Labor Force	2,593	100%
65-74 years	187	4%	Employed	2,123	82%
75+ years	118	2%	Unemployed	470	18%
Race (2010)			Housing (2010)		
White	736	14%	Total Units	2,055	100%
Black	3,985	75%	Vacant Housing Units	309	15%
Asian	13	0%	Owner Occupied	264	15%
Hispanic	1,033	20%	Renter Occupied	1,482	85%
Household (2010)	1,746	100%			
Multigenerational	160	9%			

ⁱ 2007-2011 American Community Survey 5-year estimates have large margins of error.

Population

In 2000, census tract 8073 included 2,836 people. The tract grew 5% adding 139 people between 2000 and 2010. The adjacent census tract 8072 grew 26% adding 484 people (U.S. Census Bureau, 2000 and 2010). The population of these two tracts is majority black, though the share of black residents decreased from 86% to 75% over the past decade. Meanwhile, the white and Hispanic (of any race) populations grew during this period, both groups more than doubling

their share of the population between 2000 and 2010. Similar changes were taking place in the wider Asbury Park, with the city's black population decreasing in numbers (by 21%) while both white and Hispanic populations grew considerably in size. Nowhere was this more apparent than in tract 8070.03 along the waterfront, where, over the course of the decade, the share of the population comprised of black residents decreased from 57% to 39%, while white residents increased their presence from 25% to 46% and Hispanics from 21% to 35%. The Hispanic population also doubled during that period. Some people suggest that some African American residents are moving to the South and immigrants are moving in (Interview, 2013).

Table 2: Total Population of Focus Neighborhood, 2000 & 2010

Tract	2000	2010	Percent Change
8072	1,832	2,316	26.4%
8073	2,836	2,975	4.9%
Neighborhood	4,668	5,291	13.3%
Asbury Park	16,930	16,116	-4.8%

(US Census 2000, 2010)

Table 3: Racial & Ethnic Representation in Focus Neighborhoods 2010

Tract	White		Black		Hispanic	
	Count	Percent	Count	Percent	Count	Percent
8072	315	13.6%	1,753	75.7%	478	20.6%
8073	421	14.2%	2,232	75.0%	555	18.7%
Neighborhood	736	13.9%	3,985	75.3%	1,033	19.5%
Asbury Park	5,875	36.5%	8,275	51.3%	4,115	25.5%

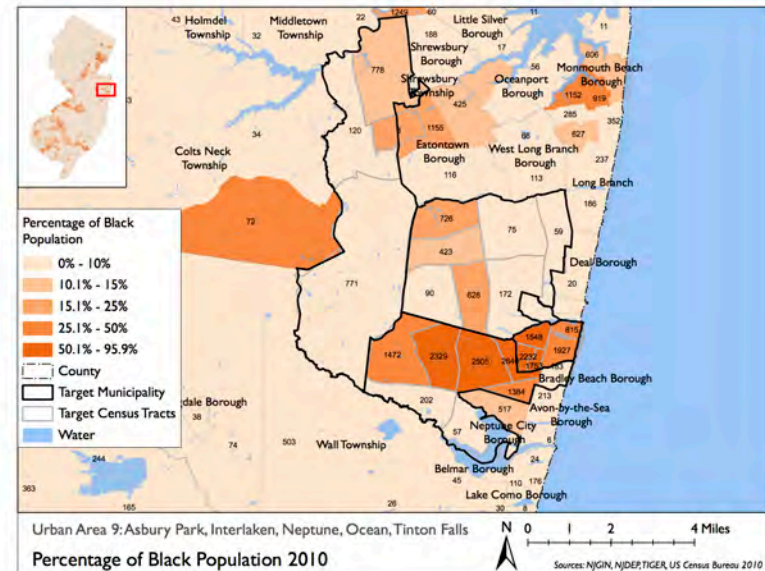
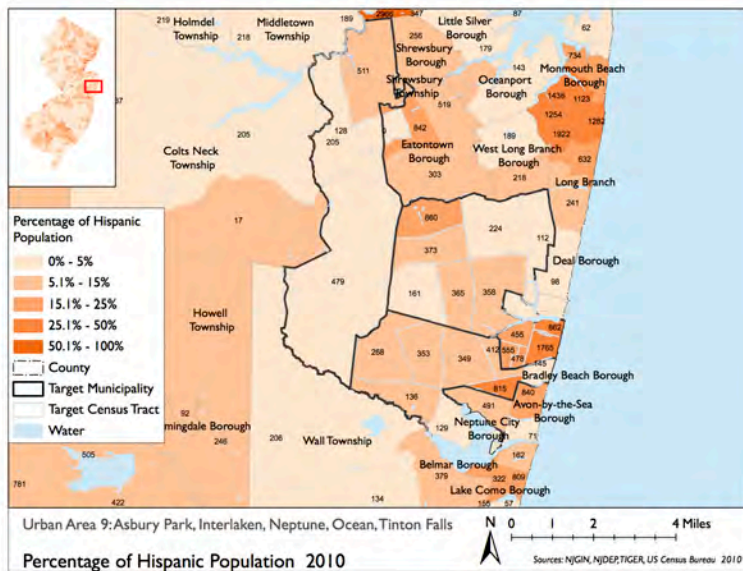
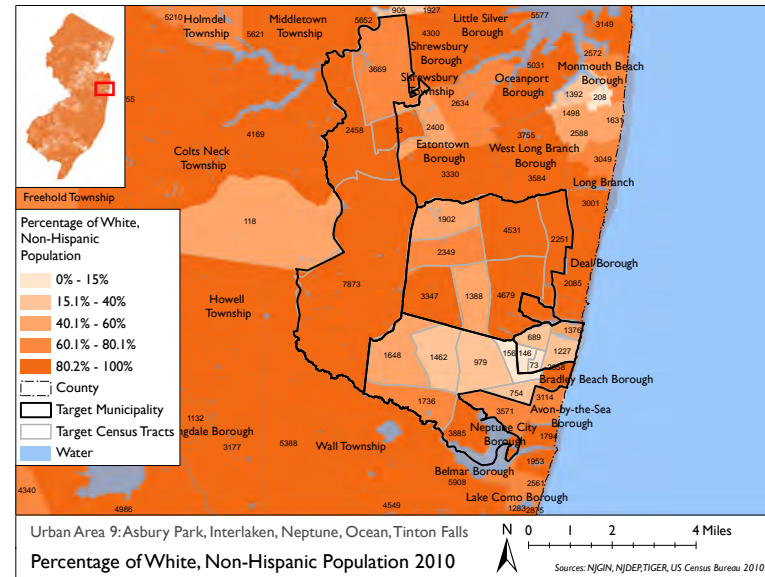
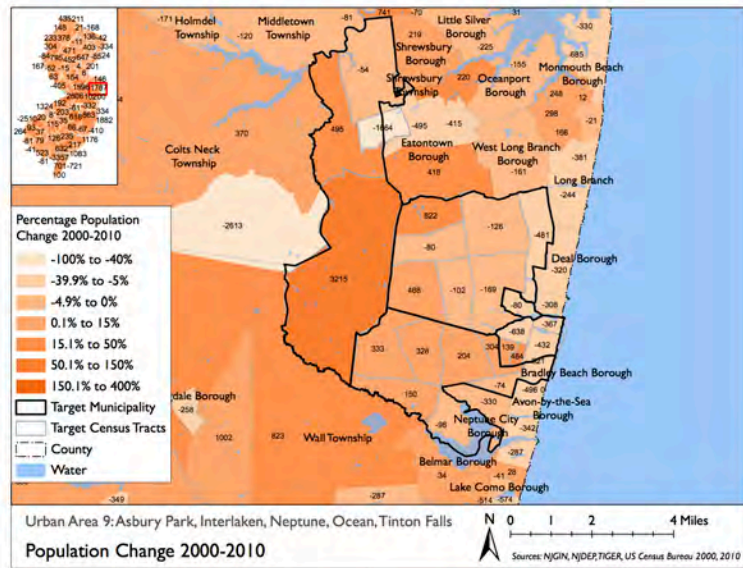
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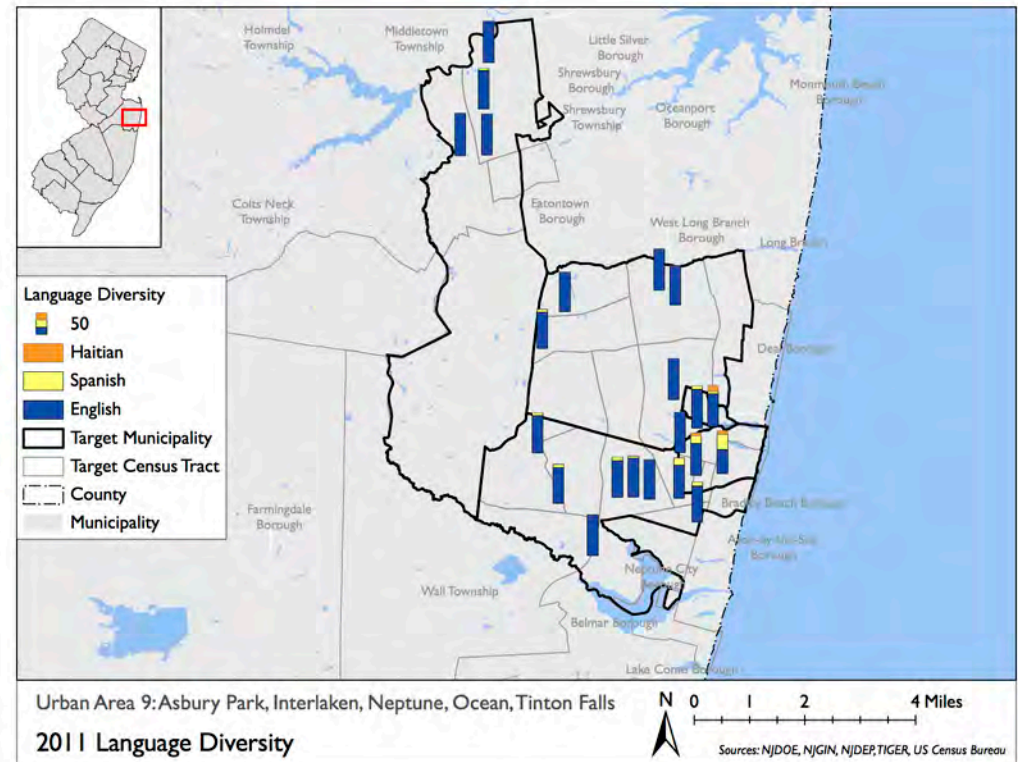
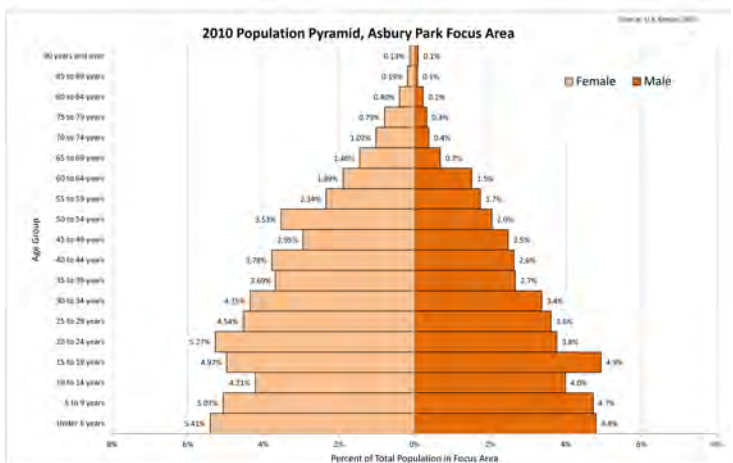
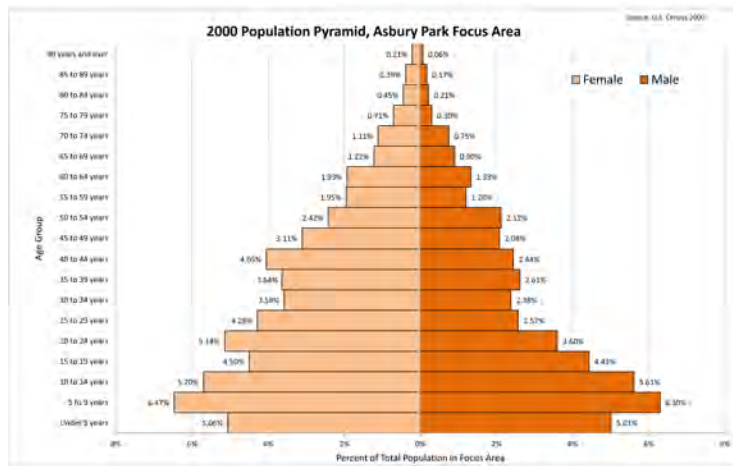
Table 4: Changes to Neighborhood's Racial & Ethnic Composition, 2000 & 2010

Tract	White		Black		Hispanic	
	2000	2010	2000	2010	2000	2010
8072	4.3%	13.6%	87.2%	75.7%	10.3%	20.6%
8073	6.5%	14.2%	85.9%	75.0%	9.3%	18.7%
Neighborhood	5.6%	13.9%	86.4%	75.3%	9.7%	19.5%
Asbury Park	24.8%	36.5%	62.1%	51.3%	15.6%	21.8%

(US Census 2000, 2010)

The racial segregation in and around Asbury Park and nearby Neptune is fairly dramatic. In the below map, showing the percentage of the population that is White, non-Hispanic, the darkest areas in orange show the census tracts where the share of the white population exceeded 80% in 2010.



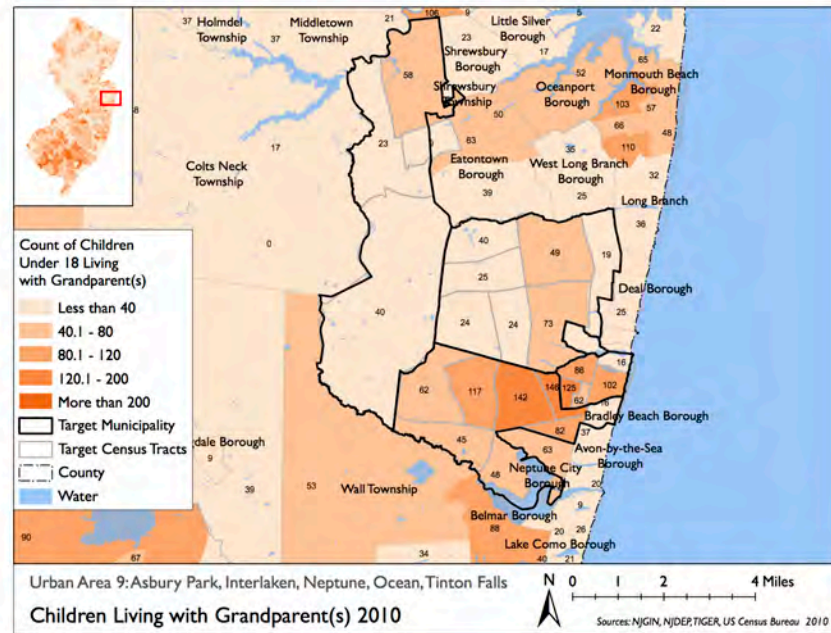
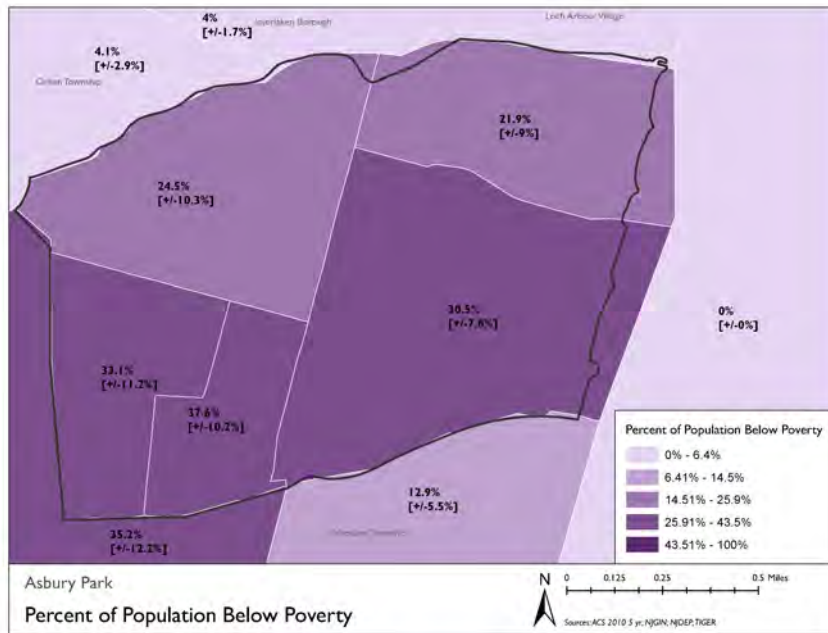


The population pyramids for 2000 and 2010 highlight a glaring public health issue. Men are underrepresented in Asbury Park after they reach their 20s.

The presence of relatively new immigrants is clear. Elementary schools on the South West Side show a presence of families who speak Spanish and smaller population who speak Haitian Creole.

Income

In 2011, Asbury Park's unemployment rate reached 20% and more than a third of people in both of the focus area census tracts were below poverty (+/- about 10%) (U.S. Department of Labor, 2012; ACS 2010, 5 year). Median 2000 income in tract 8072 was \$14,798 and \$21,281 in 8073 (U.S. Bureau of the Census, 2000). The neighborhood has the highest share of single women household families. These concentrations are also higher in the adjacent census tracts in Neptune suggesting that demand for services and a need for organization infrastructures expands beyond municipal boundaries.



Education

The South West Side is home to Bangs Elementary School and Thurgood Marshall Elementary School. Most of the students at Bradley speak English at home, although Bradley has the highest percentage of students, 87%, who scored as partially proficient on the 3rd grade assessment. About a third of students at this school were suspended during the 2010-11 academic year (NJ DOE, 2012). At Thurgood Marshall, which has a larger student population, almost half speak English at home, while over a third speak Spanish. Only 2% of students were suspended and their partially proficient literacy scores were below that of Bangs. Asbury Park Middle School is the site of a state effort to improve education. Students can get school credit for work experience and they can take classes online. They also have a parent partners program in the works (Ackerman, 2012). Some West Side youth attend Hope Academy Charter School at 601 Grand Avenue on the East Side. And some high school students go to Academy Charter High School in Lake Cuomo (Interview, 2012). The Sisters of Mercy run the Sisters

Academy, an all-girls school for low-income children from 5th to 8th grade. On Bangs Avenue, the Barack Obama Building houses the Asbury Park Alternative School, The Dorothy L. McNish Parent Center, and the Early Childhood Department and the Child Study Center.

Table 5: School Characteristics 2010-11

School	Grade Levels	Total School Population	% Partially Proficient 3rd Grade NJ Ask	First Language Spoken at Home	Students with Disabilities	Mobility	Limited English Proficiency	Student Suspensions
Bangs Avenue	K-5	378	87%	English - 94.4% Spanish - 4% Haitian - .8% Portuguese - .5% Creole - .3%	13%	19%	7%	32%
T. Marshall	K-5	426	77%	English - 56% Spanish - 36% Haitian - 8%	17%	13%	15%	2%

(NJ Department of Education, 2011)

Housing

Between 2000 and 2010, Asbury saw an increase in housing units. Tract 8073 lost 17 units but tract 8072 saw a 34% increase adding 240 units. Residential vacancy rates in 2010 reached 19% in tract 8073, 9% in tract 8072 and 16% in nearby 8070.03. The data from USPS (2012) shows 46 houses in 8072 and 12 in 8073 that, on average, have been vacant one to two years (more than 75% of households rent in the two tracts). Housing is older compared with the surrounding suburbs. The 2010 census shows 37 homeowners in tract 8072 and more than 60% spend more than 40% of their incomes on their mortgages and 22% in 8073 (U.S. Census Bureau, 2000 and 2010).

Table 6: Housing Unit Changes in Focus Neighborhoods, 2000-2010

Tract	Housing Units		
	2000	2010	Percent Change
8072	702	942	34.2%
8073	1,130	1,113	-1.5%
Neighborhood	1,832	2,055	12.2%
Asbury Park	7,744	8,076	4.3%

(US Census 2000, 2010)

Tracts 8072 and 8073 witnessed a surge in high cost lending in 2006 in comparison with 2004. During this time, the underwriting on high cost loans was loose and many of these loans have gone to foreclosure. Meanwhile, there are concerns on the West Side that the east side has gotten too expensive which has created displacement and frustration/tension (Ackerman, 2012). Some older housing stock has been demolished and replaced with larger and upscale forms of housing, again creating more displacement.

Federally Assisted and Public Housing

Multiple federally assisted and public housing projects are located on the South West Side. Much of the southern part of tract 8072 is owned by the public housing authority as is a large parcel in the northwestern part of 8073. Washington Village public housing is located in the northwestern section of the focus area and Vita Gardens, Stephen Manor, Lincoln Village and Boston Way Village are located in the south central section. All of these properties except Washington Village received low physical inspection scores since 2007. In 2012 Vita Gardens (now Asbury Park Village), which opened in 1941 with 126 units was purchased along with Stephen Manor. Vitus Group is in the process of refurbishing the complexes (without anyone being displaced) with a \$6.7 million grant from the New Jersey Housing and Mortgage Finance Agency (Mullen, 2012; Mulshine; Phalon, 1974; Ackerman, 2012).

Table 7: Affordable Housing Characteristics in Focus Neighborhood, 2006-2011

Property Name	Publicly or Federally Assisted	Total Units	Total Assisted Units	Elderly Units	Disabled Units	Physical Inspection Scores					
						'06	'07	'08	'09	'10	'11
Boston Way Village	Public Housing	123							43	30	
Lincoln Village	Public Housing	63							53	54	
Stephen Manor	Federally Assisted	90	90					86		70	42
Vita Gardens Apartments	Federally Assisted	79	76						30		39
Washington Village	Public Housing	59							83	91	

(US HUD, 2011, 2012)

Coastal Habitat for Humanity has been developing housing in the city and has been building housing as part of the Westside Redevelopment Plan. They are completing four homes near Springwood Avenue on Borden and Dewitt Avenues. With the Affordable Housing Alliance and Interfaith Neighbors, they are working on 35 affordable units in the city (Coastal Habitat for Humanity; Interview, 2013; Mullen, 2012). Community organizations like Interfaith Neighbors are seeing increased demand for affordable housing. People who have never needed assistance are seeking it (Interviews, 2013). This puts more pressure on the organizations to find ways to provide more affordable housing options and for the Affordable Housing Alliance, Asbury Park's only accredited homeowner housing counselor, to provide more services.

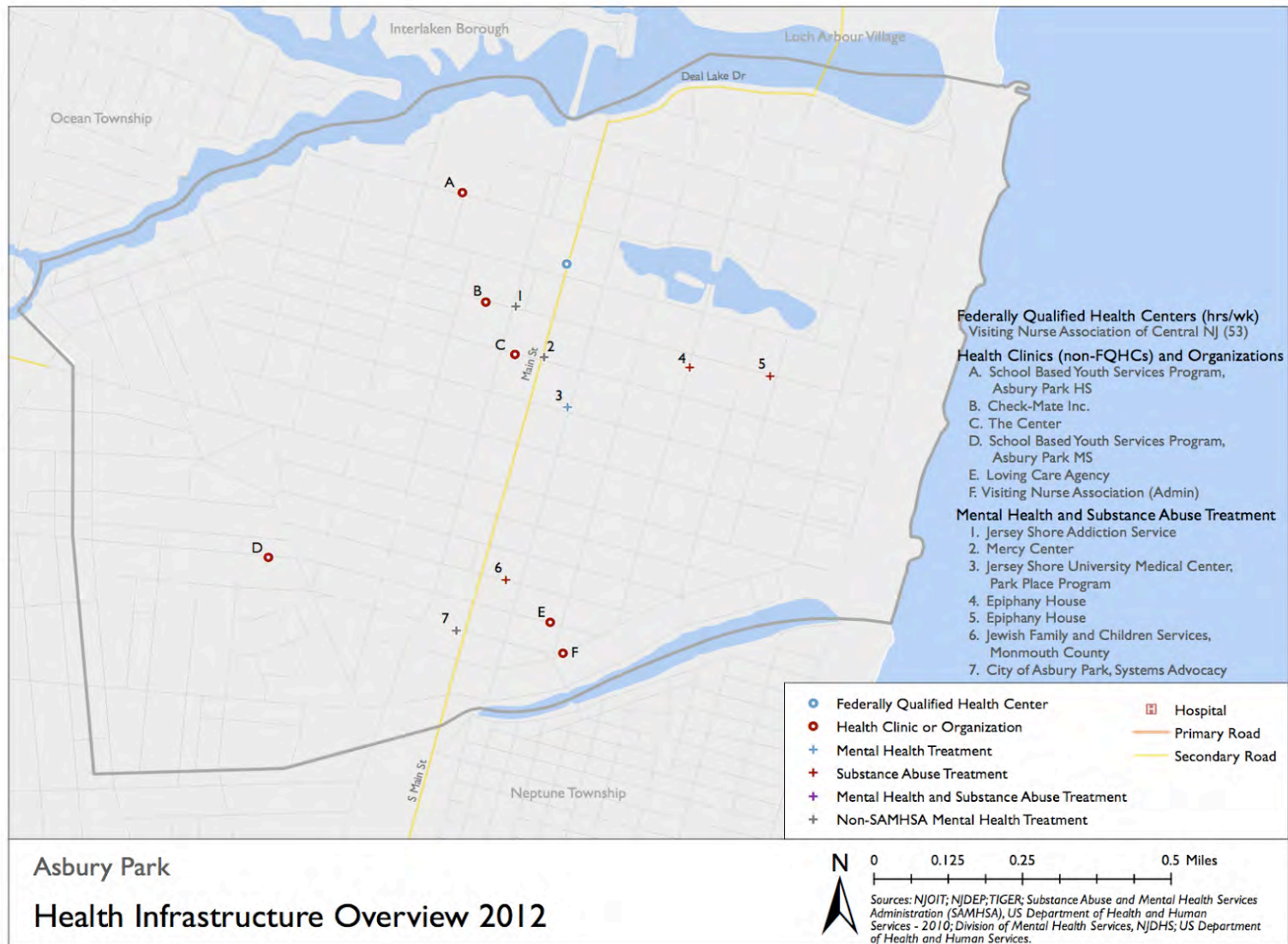
In general, it is hard to find affordable housing in Asbury Park. Interfaith provides rental assistance with county and grant funds and 250 families are helped each year through a one-time direct payment to landlords. Some people do not qualify because funding is dependent on people being in the eviction process. Others make too much money and do not meet the income requirements. This shuts out those who want to prevent eviction before it starts, or those who just lost a job or have serious medical bills, and still exceed the income requirements. In a smaller number of cases, Interfaith can offer short-term housing subsidies. These cases are often associated with job loss, health care issues, or individuals who need help to finish higher education. Each case is reviewed by a team of caseworkers who can approve some assistance for 3 to 6 months (Interviews, 2013).

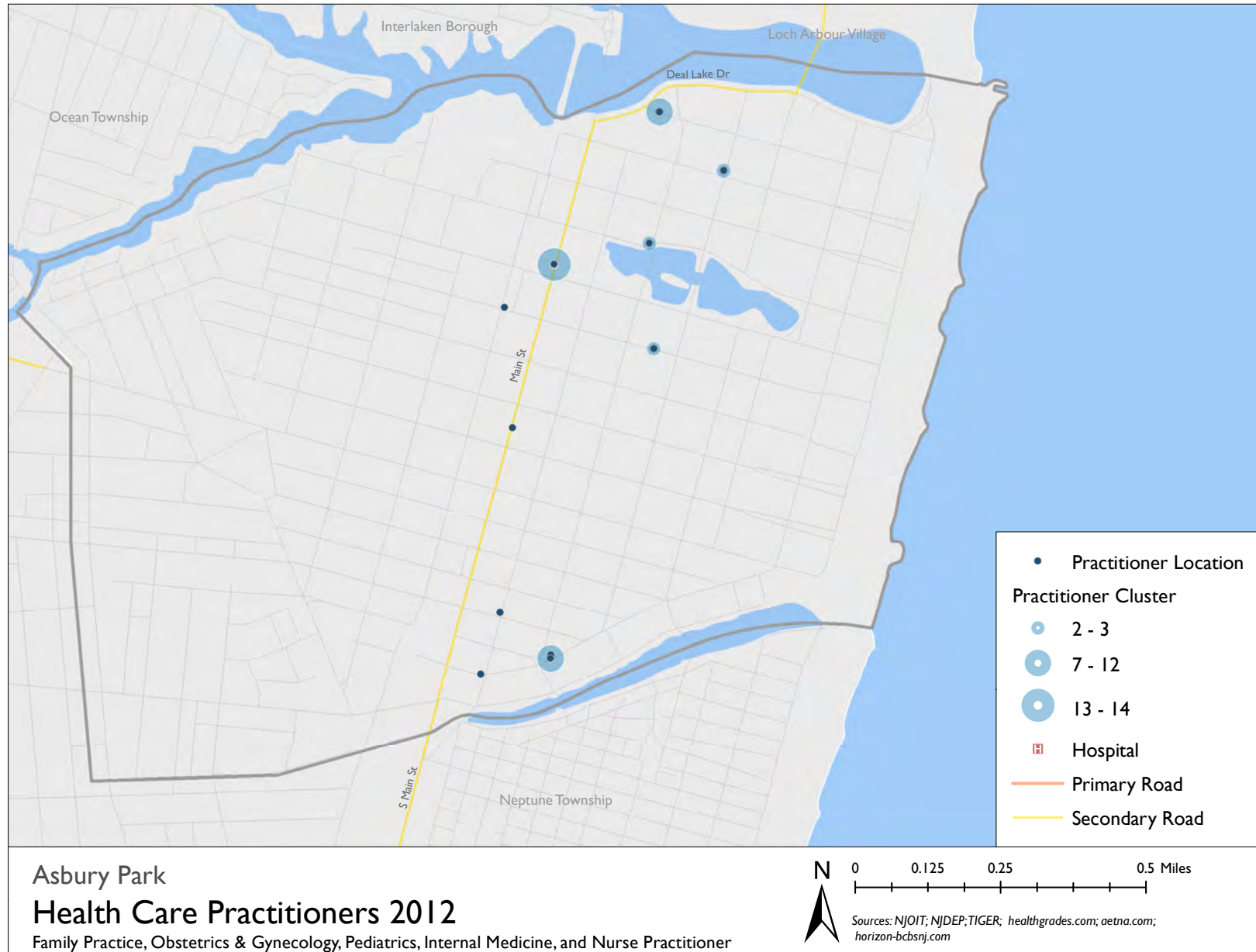
Crime

Guns, shootings, robberies, drug dealing, and gangs are centered on the city's South West Side. As of September 2012, there were 43 shootings and 29 deaths. Only 7 of those shootings occurred somewhere other than the South West Side. It's a small community and many people know multiple people who have been murdered. "In the small, crowded corner stores sit jugs filled with dollars and spare change, community collections to help the families pay for the funerals of young victims" (Ackerman, 2012). The same *Asbury Park Press* article identifies heroine, cocaine, and marijuana as the major drugs in the neighborhood. The Asbury Park Civic Media Collaborative, a community project to engage people in discussions about crime and violence (Civic Media Arts Project), interviewed residents about gangs and violence. Most identified gang violence as the root cause of the violence (Civic Media Arts Project). "Some residents of the west side say feelings of exclusion from the east side's growth, a dearth of jobs and recreation, an inadequate police presence and struggling schools to the west have exacerbated already strained living conditions, heightened tensions and culminated in the violence" (Ackerman, 2012). Ackerman (2012) reports that people on the South West Side want better police response to shootings. And the police are now doing foot patrols on the West Side. Additionally, Interfaith Neighbors provides a car to Citizens On Patrol (COP), a volunteer group started in 2003 that patrols communities and helps with extra eyes at school events (Mulshine, 2012 Dec 19). And there is a new police substation at Interfaith's Springwood Center. Interfaith Neighbors is not alone in their efforts to reduce crime. During the aftermath of Hurricane Sandy, the Ministerial Alliance also helped with neighborhood watches to prevent looting (Mulshine, 2012. Nov 1).

Health

Health Organizational Infrastructure





A Federally Qualified Health Center (FQHC), the Visiting Nurse Association of Central Jersey (VNACJ) Community Health Center, is located to the north of the South West Side near Sunset Park. The VNACJ is the main provider of comprehensive healthcare for Asbury residents. The VNA provides primary and preventative care to about 5,000 patients, but there is a serious lack of specialty care services (Interview, 2013). Primary care is also offered at Asbury Park Middle School, High School Youth Services, and the newly constructed Jane H Book Family Health Center on the border of Neptune. No hospitals are located in Asbury Park. On the border of Asbury Park, in Neptune, is the Jersey Shore University Medical Center, which is the region's only Trauma Center. The Jersey Shore University Medical Center also has a care center in Asbury Park, known as Park Place, but this center only treats individuals suffering from severe mental illness.

There are many programs offered for those living with HIV/AIDS such as: The Center and Check-Mate Inc. The Center provides support services for people and families affected by HIV/AIDS through a housing program, nutrition programs, referral services, transportation services, and outreach (Interview with George Lowe of The Center, 2013). Check-Mate Inc. offers HIV/AIDS mobile health services through a Community Health Mobile unit, which makes stops throughout the Asbury Park and the region.

There are many mental health and substance abuse programs offered in Asbury Park. These include programs such as the Jersey Shore Addiction Services, Epiphany House, Park Place, Jewish Family and Children Services and the Mercy Center. Many other community organizations including churches, schools, the local VFW, and community centers host support groups and individual counseling for those recovering from substance abuse. Mental Health services are in demand in Asbury Park and some organizations have noted their desire to increase their funding to expand the mental health services and capabilities. The Boys and Girls Club is looking for funding to employ someone accredited with a MSW and a counseling background to provide youth mental health counseling services. The VNA is also looking for funding to expand their mental health services (Interviews, 2013).

Asbury Park has a strong, tight-knit network of organizations. Many organizations work side-by-side to provide the best care and services possible. Referrals to and from other organizations is highly encouraged. Because of this network, they have become a visible and trusted group but many organizations are at capacity and need more funding (Interview, 2013).

Community Coalitions and Organizations that Provide Health Services

Loving Care Agency

The Loving Care Agency is a fully accredited and certified home care agency for pediatric, adult, and geriatric patients. Its home health aides support each patient with daily activities and work in collaboration with the patient, families, and physician.

Check-Mate Inc.

Check-Mate Inc. is a non-profit that assists community residents in becoming self-sufficient through programs including an emergency food and service program, housing and home energy assistance, HIV mobile counseling and testing, and job placement. Check-Mate has three regional offices in Monmouth County, with its Region II-Coastal Monmouth office located in Asbury Park on Fourth Avenue. The hours of operation for the Asbury Park office are from 9am to 4:30pm daily. Check-Mate is actively engaged with the community and participates in annual events including an HIV/AIDS Candlelight vigil and a Community Day. The HIV/AIDS Candlelight Walk is a remembrance to honor those who are struggling or who have passed from HIV/AIDS (Check-Mate Inc., online). Check-Mate offers

activities, community outreach, and health screenings through the annual Community Day at Sunset Park. Check-Mate runs a Community Health Mobile unit for HIV Testing and medical support throughout Monmouth County for individuals who do not have the capability to access conventional health services. The clients of the Mobile Health Units use these services because they may not be able to take time off of work, cannot travel or pay for services, or there is a language barrier between them and other healthcare providers (Check-Mate Inc. Annual Report, 2009). The HIV testing services are rapid, free, confidential and are performed by a Certified HIV Counselor. Each test takes only 20 minutes and if a client tests positive for HIV, an additional Test is performed to confirm the results on the spot (Check-Mate Inc. Annual Report, 2009). Additional screenings include Diabetes, Hypertension, Cholesterol, Pregnancy, Syphilis, and Hepatitis (Check-Mate Inc., online). Individuals who are screened and test positive are enrolled in medical support or referred to medical support services for additional treatment. They are also given literature on preventative measures, treatment, and general information. Check-Mate Inc. provides HUD certified counseling services to Monmouth County residents to prevent housing foreclosure, and they provide housing and weatherization assistance. Check-Mate's weatherization crews perform health and safety tests to detect any health or safety concerns involving heating units, moisture damage, gas leaks, carbon monoxide, or electrical systems (Check-Mate Inc., online).

Epiphany House

New Hope runs Epiphany House, a transitional and outpatient facility for people with drug abuse and dependency. The facilities at the Epiphany House are especially designed for women and women with children and offer supportive and individualized assistance for women recovering from substance abuse with the objective of having them make smooth transitions back into the community. The Epiphany House staff helps women with medical, psychiatric, vocational, parenting, or educational needs (New Hope, online).

Interfaith Neighbors

Interfaith Neighbors, organized in 1988, is a network of 90 multi-denominational religious congregations in Monmouth County. A newly renovated space on Fourth Street houses a commercial kitchen for their meal program and classroom and training space for their Youth Corp Program. They offer Meals on Wheels, rental assistance, affordable housing support, neighborhood revitalization support, the NJ Youth Corp of Monmouth, and the Business Development Center. The Meals on Wheels program. In 1996 they launched their affordable housing program in partnership with New Jersey Natural Gas Company to help bring homeownership to working-poor families in Asbury Park and neighboring Neptune. The NJ Youth Corp of Monmouth, through funding from the state, is for youth who have not completed high school from 16-25 years of age, living in Monmouth county but 90% are from Asbury Park and Neptune. Along with job training and guidance, the program helps students improve their education including earning a GED. Many students have low educational achievement, educational disabilities, and/or motivation so Youth Corp strives to provide life skills and hands-on work experience to to ensure their graduates' success. There is an excess of grants for construction and green job training, but there are no real job opportunities in those fields when youth graduate the program. Lastly the Need To Feed program offers sandwiches and drinks to community members on Springwood Ave. During the colder months they offer clothing, when possible (Interview, 2013, Interfaith Neighbors, online).

Jane H. Booker Family Health Center

The Jane H. Booker Family Health Center, in Neptune, provides comprehensive services for medicine and surgery, pediatrics, OB/GYN, infectious disease, dentistry, and a variety of other services and referrals. This center was built within Midtown Urban Renaissance Organization's Midtown neighborhood development immediately on Asbury's West side. The Jersey Shore Medical Center runs these facilities and services. Other services provided at this center

include blood pressure monitoring, blood tests, nutritional counseling, and prenatal education courses. Since the center's development, it has received lots of traffic and has since held health fairs in the adjacent park (Jersey Shore University Medical Center, online; Interview, 2013).

Jersey Shore Addiction Services

Located in Neptune, the Jersey Shore Addiction Services is a non-profit that provides substance abuse treatment and counseling. The staff is composed of a multidisciplinary team of health professionals who provide HIV/AIDS services, individual and group counseling, outpatient counseling services, substance abuse treatment services, and specialized services for pregnant and post-partum women with substance abuse issues (Jersey Shore Addiction Services, online).

Jersey Shore University Medical Center

Located in Neptune, the Jersey Shore University Medical Center is the region's only Trauma Center. The medical center offers services in all major medical disciplines and a full range of cardiology, pediatrics, orthopedics, and cancer care specialties. The Medical Center has care locations in Neptune, Asbury Park, and Shrewsbury. The Asbury Park location, Park Place, is an Adult Partial Hospital Program that offers mental health counseling and treatment for adults with severe mental illnesses, medication monitoring, individual, group, and family therapy, and MICA (Mentally Ill Chemically Addicted) services (Jersey Shore University Medical Center, online).

Jewish Family and Children's Service of Greater Monmouth County

The Jewish Family and Children's Service of Greater Monmouth County located on Summerfield Avenue in Asbury Park provides mental health and social services which include intensive outpatient treatment for drug & alcohol addiction, personal and family counseling, psychotherapy, parent education, emergency financial service, and referrals. For patients in need flexible payment, they offer self-pay with a sliding scale. They also operate a thrift shop for used furniture, a food pantry, and a Kosher Meals on Wheels program. The food pantry was established in 2007 and, in 2009, it joined the Ocean/Monmouth County Food Bank which made it possible to receive federal and state donated foods (Jewish Family and Children's Service, online).

Mayors Health Initiative

The Mayors Health Initiative, based on the statewide Mayors Wellness Campaigns, hosts the Asbury Park Field Day to get people moving, prevent disease, and encourage healthy living. They held their second annual field day in May 2012 (Mulshine, 2012. May 3). Asbury Park builds on the statewide program and has developed a more expanded vision (Asbury Park Mayor's Ball Foundation).

Mercy Center - Family Resource Center

The Mercy Center, founded by the Sisters of Mercy, offers a one-stop Family Resource Center providing emergency services to prevent homelessness including a food pantry, programs for youth, substance abuse, family outreach, assistance for parents, and a women's group. The Family Resource Center, established in 1997, is located on Main Street and serves the community through its mission of providing people with the resources necessary to overcome life's burdens. The Family Resource Center provides an Adolescent Social Skills Program, Adult Substance Abuse Prevention Program, Adult Anger Management Group, Counseling for Children, Family Outreach Program, Individual and Family Counseling, Internet Access, Parent Aide Program, Parenting Education, Teen Anger Management Program, Teen Male Substance Abuse Program, and a Women's Support Group (Mercy Center, online). The Family Outreach Program supervises and supports the Family Workers of the Asbury Park and Neptune preschool centers by strengthening their relationship with the preschool centers and assisting parents.

Family Workers are fully credentialed through the Rutgers Center for Families. In-home services are provided for families through Mercy's Parent Aid Program (Mercy Center, online). The food pantry at Mercy Center was established in 1986 and serves over 5,000 people every year providing food to families based on size, age, and cooking facilities. The Emergency Services at the Mercy Center serve offer homeless prevention and screening and referral programs. The Homeless Prevention program at the Mercy Center works with the Monmouth County Board of Social Serves to provide rental, mortgage, and utility assistance (Mercy Center, online).

Monmouth County Cancer Coalition

The Monmouth Cancer Coalition is a volunteer organization and its mission is to increase awareness, education and access to cancer screening and care. The Monmouth Cancer Coalition sponsors annual oral cancer screening events to raise awareness about oral cancer and its risks ("*Monmouth Cancer Coalition Presents*," 2012). Screenings are held at a variety of venues including senior centers, hospitals, clinics and family practices. The Coalition is funded by the New Jersey Department of Health and Senior Services Office with the VNA of Central Jersey acting as grant recipient (Monmouth County Cancer Coalition, online).

Monmouth County Health Department

The Monmouth County Health Department runs a variety of programs to promote better health. Their Health Education Reaching Others (HERO) program makes speakers available on a variety of health care topics from bed bugs to family disaster planning. The department offers free lead testing and immunizations for children and adults, free chest x-rays, \$10.00 mantoux testing, tuberculosis case management, and, at the Neptune branch (about a 20-minute bus ride away), free pap smears and breast exams and an STD clinic with examination, treatment, and education services. At the Freehold location, they provide eye screenings (about an hour away including a bus transfer). With the Monmouth County Cancer Coalition, they provide education and awareness of cancer along with screenings and services (Monmouth County Cancer Coalition, online; "Monmouth County Cancer Fact Sheet," 2008). The Department provides referrals if additional services are needed. MCHD also offers physician services, a lead poisoning prevention program, child health home visits program, and hypertension screenings.

Monmouth Medical Center

Located in Long Branch, Monmouth Medical Center is one of New Jersey's largest academic medical centers. It is a Barnabas Health facility that provides comprehensive services for medicine and surgery, as well as community services. These community services include offering support groups in behavioral health, living with cancer, weight loss, diabetes, parental and adolescent needs, Alzheimer's caregiver support, celiac, pediatric diseases, stroke survivors, and tobacco dependence. Other community services include referral programs and community outreach and education through a speaker's bureau (Monmouth Medical Center, online).

School Based Youth Services Program at Asbury Middle and High Schools

The Visiting Nurse Association's School Based Youth Services Program at Asbury High School, called The Spot, provides primary and mental health care and a broad array of services for students. The Spot provides programming that supports and guides students through successful high school careers. Nearly 300 students are enrolled in the program and about 60 students are seen daily. The services are primarily for high school students, but they provide services to those in charter and alternative schools. Some of the most popular services include weekly lunch talks, teenage outreach services which runs a club four days a

week based off a curriculum from the Central New Jersey Perinatal Consortium, and the Teen Pregnancy Prevention Program. Recently they teamed up with JAG, Jobs for America's Graduates (also within the school's walls) to better coordinate job trainings and help with summer employment (Interview, 2013).

The Center - AIDS Hospice

The Center, an AIDS Hospice, is located on Third Avenue and serves homeless individuals living with HIV/AIDS. Its facilities were expanded in 2005 to support and house twenty-five single adults in fully furnished studio apartments. To qualify for residency, individuals must meet the U.S. Department of Housing and Urban Development criteria which includes 4 requirements: (1) Homelessness; (2) Income eligibility for Monmouth County Section 8; (3) Living with HIV/AIDS; and, (4) disabled. Once qualified, an individual has access to The Center's facilities. The facilities advertised on their website include 24-hour security, secure parking lots, courtyards, communal dining, library with 4 computers, free laundry on-site, 3 meals a day Monday through Friday, and dinner on Saturday and Sunday. The supportive services include individual and group counseling and case management. The Center also helps people access services at other organizations, such as treatment adherence, home health attendants, medical transportation, life skills courses, and outpatient or partial day treatment programs. There are four HIV/AIDS comprehensive programs in Asbury Park and they provide services for people across Monmouth County but transportation to the services is a problem. (Interview, 2013, The Center, online).

Visiting Nurse Association (VNA), Community Health Center of Asbury Park (FQHC)

The Visiting Nurse Association of Central Jersey Community Health Center is a nurse-managed center that opened in 1994 to provide comprehensive accessible healthcare for Asbury residents. It operates in partnership with Jersey Shore Medical Center and the County Health Department. The Center offers primary and preventative care to about 5,000 patients. Many patients use Medicaid or are uninsured and use a sliding pay scale to pay out of pocket. The center provides a comprehensive suite of services and provides language translation. They strive to be their patients primary care facility and offer: adult and family medicine, women's health care, prenatal care, flu shots, cancer screenings, weekly weight classes, men's health care, dental care, pediatric care, podiatry, pharmaceutical program, and mental health. The VNA and the health center sponsor community programs for their uninsured or underinsured patients such as health screenings like the Cancer Education and Early Detection, prostate exams, pap smears, pelvic exams and mammogram screenings. The health center offers a Pharmaceutical Program which helps patients access affordable medication programs through programs such as 3040B. A case manager helps fill out the application and monitors services. VNACJ Health Center does outreach at the Asbury Park Annual Night Out, health fairs, radio shows, and newspaper ads. Residents also hear about the center through word-of-mouth and referrals from other organizations. The city's community organizations work together to increase trust and build a network of services. They have created relationships with the Mercy Center, Interfaith Neighbors, The Center, The Chamber of Commerce, Pastoral Alliance, Gateway, The Tiffany House and many more (VNACJ Facebook; Interviews, 2012).

Their Healthy Families program links 180 pregnant women to resources. A trained Family Support Worker visits weekly to monthly with pregnant women before and up to 3 months after birth, for up to three years, to provide parenting education and support childhood development. Monmouth County supplements these services through its TIP program to offer assistance to mothers with more than one child who receive public assistance (Visiting Nurse Association of Central Jersey; Interview, 2013). The Nurse-Family Partnership, provided through the VNA pairs a nurse with a first-time mother. Each partnership is individualized to help improve infant health outcomes. Services include everything from basic education, to assistance for welfare and taxes. Through the Ryan White Program, they provide primary care, testing, case and medication management, and counseling for those living with HIV or AIDS.

The CHC provides healthcare for many but there are challenges in reaching specialty providers. After identifying a major medical issue, it is very hard to find specialists to treat Medicaid or uninsured patients. Case management is important but they are not reimbursed for those services. Even though they have had electronic medical records for many years, it is still difficult to coordinate referrals and test results with other offices and testing sites. It is often a long process getting back information about clients because the systems are not universal. Finally, even patients who have and use prescription financial assistance struggle to pay for often-times expensive prescriptions. For example, even reduced diabetes medication can cost more than fifty dollars for one prescription, causing many needy patients to slowly cut back on the medication. The patients wind up back in hospitals for diabetic shock, because they cannot afford the medicine that can keep them healthy. This center is busy and has wait lists for primary and dental services. They believe this is a sign that they need to expand their services but they also know that they are still missing members of the community suggesting the unmet need is even greater (Linington, 2013).

Outstanding Health Needs

Interviews identified some barriers to healthcare including high cost, a lack of local specialty providers, long waits for services, and insufficient transportation. Health services and organizational infrastructures are hard to navigate especially for certain groups such as: non-English speaking immigrants, older residents, and single mothers. The lack of transportation is an especially challenging issue given that most of the specialty providers are located outside of Asbury Park. People complained that the transportation services were sometimes late. And people with small children may not be able to bring them on these transportation services making it very difficult for women with small children to attend medical appointments. Undocumented immigrants have increased the demand for services at the city's health clinics and also need bilingual services (MAPP Focus Group Report, 2006).

Transportation

Lack of transportation services to primary and specialty care health services throughout Monmouth County is a barrier to receiving health care. For those in the city, connections to Neptune and Freehold are particularly important, as these are the locations for some of the major regional healthcare providers. For those outside, transportation into the city would improve access to Asbury Park's comprehensive HIV/AIDS programs (Interviews, 2013). Check-Mate Inc. offers a Mobile Health Unit for HIV/AIDS patients in Asbury Park and Monmouth County who cannot take time off from work, travel, pay for services, or have other barriers such as language issues (Check-Mate Inc. Annual Report, 2009). Although VNA's Healthy Families and TIP program's services are provided in the home, they also connect mothers to community services. Revel's noted that mothers might need a ride to a doctor's appointment or to run errands, but their staff are not allowed to provide transportation (Revels, 2013). Transportation and access to primary care, specialty care, free clinics, and other health care services offered in Asbury Park and Monmouth County would help residents achieve healthy outcomes for the same reasons why the Check-Mate Inc.'s Mobile Health Unit has been successful. It allows broader access to health services to underserved populations who otherwise go untreated.

Crime

Crime in Asbury Park is a barrier to accessing health care. Access to certain streets on the West Side is limited because people are afraid to be subjected to gang violence (Civic Media Arts Project). While the city is walkable, it may difficult to gain access to services outside of the neighborhood. Living in an area with gang violence also can induce stress, anxiety and depression. Often these residents fear for their own safety and the safety of their children. Some community organizations, such as Interfaith Neighbors, work on crime issues and help by providing a car to Citizens On Patrol which runs community police patrols and has a presence at the city's new police substation at the Springwood Center. The Asbury Park Community Development Initiative, a network of public and private organizations, whose mission is to provide youth employment opportunities and mentors for at-risk youth, also works to reduce crime and gang violence.

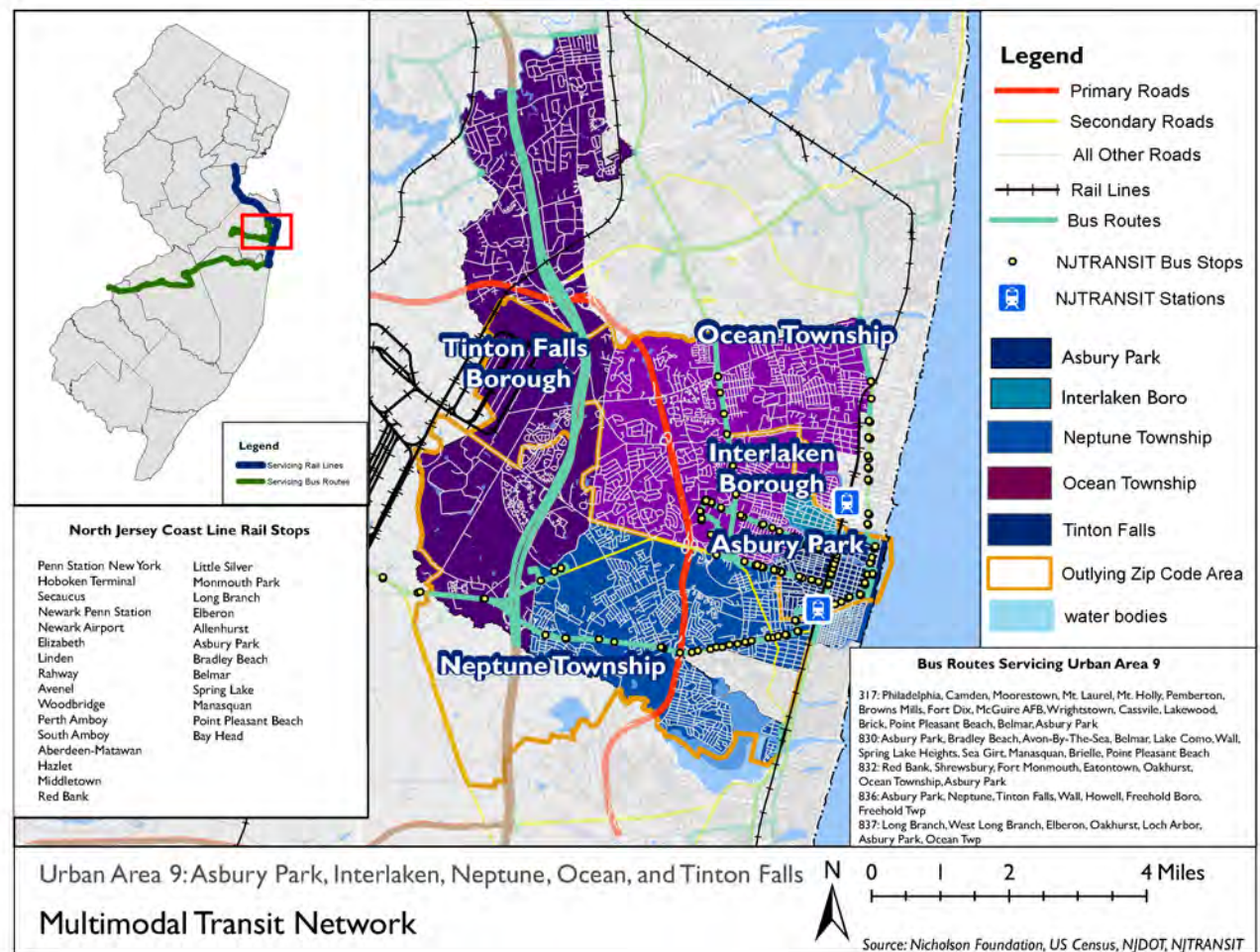
Although this initiative is relatively new, it has a lot of support from community organizations. Mentoring at-risk youth and providing job opportunities offers supervision, a positive influence, and helps youths overcome peer pressure (Interview, 2013).

Mental Health Services

While there are great referral programs and a partial hospitalization facility for severe mental illness in Asbury Park, many organizations have noted there is a need for additional funding to support and expand current mental health services. The Boys and Girls Club is currently looking for funding to employ someone accredited with a MSW and a counseling background to provide youth mental health counseling services. The VNA is also looking for funding to expand their mental health services (interview, 2013). One of the difficulties for the VNA is providing case management for their mental health services. These organizations will likely be competing for the same funding pool to provide these resources.

Transportation

The North Jersey line of the New Jersey Transit rail service makes a stop in Asbury Park and, with a transfer at the Long Branch station, can reach New York City, a trip of about an hour and forty minutes. The area is served by several local bus routes (the 832 and 837 were reintroduced to the area in 2009 after thirty years with no service) as well as the 317 NJTRANSIT bus line to Philadelphia. Asbury Park uses public transportation availability as a stimulus for tourism. According to officials from NJTRANSIT, the restoration of local bus routes to Asbury Park was primarily intended to generate more customer revenue for the businesses located in the historic boardwalk and downtown beach district (NJTRANSIT, 2009). In the focus area, there some public transportation options. The NJ Transit station is located near the center of the focus area and offers easy access, especially because of Asbury Park's size, to those wishing to



travel outside of Asbury Park. Bus stops are primarily located along First Avenue, Springwood Avenue, Main Street and Cookman Avenue. Again, due to its physical size, only roughly 1.5 square miles, Asbury Park is walkable (NJOIT).

Community Organizations

Overview Discussion

The organizations are located mostly in the central business district; only three are in the focus area west of the railroad. Many of the organizations support and collaborate by sharing resources and providing referrals. There have been efforts to compile lists of the organizations and to share the lists with residents. The organizations range from food pantries to a community development corporation to organizations that offer job training and placement services. Several, such as the Asbury Park Department of Social Services and Monmouth/Ocean HIV Consortium of Central Jersey Community Services, provide direct health services.

List and Short Description of Other Organizations

Abunda Life Church (<http://www.abundalife.com/>)

Abunda Life Church provides medical nutrition testing, retreat, and clinic for a fee. Services are specialized in naturopathic detoxification.

Affordable Housing Alliance, formerly “Monmouth Housing Alliance” (<http://www.housingall.com/>)

The Affordable Housing Alliance was founded with an RWJ grant to produce housing for people with disabilities and others who lacked it.

Allen Chapel A.M. E. (African Methodist Episcopal Church) (<http://www.facebook.com/pages/Allen-Chapel-AME-Church-Asbury-Park/159237330805662>)

The Allen Chapel hosts a women’s group, Narcotics Anonymous meetings, and provides domestic violence counseling. It also shares information on health screenings and issues via Facebook.

Asbury Park Chamber of Commerce (<http://www.asburyparkchamber.com/>)

The Asbury Park Chamber of Commerce works with the Monmouth County Workforce Development Board to provide training and job access for youth (Ackerman, 2012).

Asbury Park Community Development Initiative(<https://www.facebook.com/AsburyParkCDI>)

The Community Development Initiative is a network of public and private organizations whose mission is to provide youth employment opportunities and mentors for at risk youth.

Asbury Park Deliverance Center

Asbury Park Department of Social Services (www.cityofasburypark.com)

The Asbury Park City Department of Social Services provides a broad spectrum of services include: mental health crisis intervention, assessment for medical and psychiatric crisis, referral services, and senior citizen services ("Community Resource Guide", 2008).

Asbury Park Evangelistic Chapel

Asbury Park High School/School Based Youth Services Program

(<http://www.vnahg.org/School-Based-Youth-Services.aspx>)

Located at Asbury Park High School, the school based youth services program helps high school students acquire job skills and employment and works to prevent adolescent suicide, drug use and teen pregnancy.

Asbury Park Homeowners Association (<http://aphomeowners.org/>)

The Asbury Park Homeowners Association provides homeowners with a means to develop programs and special projects to enhance the quality of life in the city. Some achievements of the association include the organization of a "Quality of Life" campaign to help improve the school system and the creation of a historic trust fund.

Asbury Park Multi-Purpose Senior Center and Nutrition Program

Services of the senior center include health information and referrals, general assessment of health, meals in cooperation with Interfaith Neighbors Inc., transportation, and recreational activities to promote well-being of older persons ("Community Resource Guide", 2008).

Asbury Park/Neptune Ministers' Alliance

(<http://www.facebook.com/pages/Asbury-Park-Neptune-Ministers-Alliance/414906575204504>)

Organizes a "Stop the Violence Summer Program" and is a participant in the Asbury Park Community Development Initiative ("Asbury Park CDI Participant Roster", 2011).

Asbury Park/Neptune NAACP (<http://www.asburyparkneptunenaacp.com>)

Unit 2076 of the NAACP works to fight for the political, educational, social, and economic equality of rights of all persons. Most regular meetings are conducted in the Neptune Library.

Atonement Lutheran Church (<http://www.atonementlutheranchurch.com/>)

Provides a food pantry to supplement the diets of low income and elderly persons.

Ballard United Methodist Church (<http://ballardumc.webs.com/>)

Operates a thrift shop for clothing, accessories, and household items and is a participant in the Asbury Park Community Development Initiative ("Asbury Park CDI Participant Roster", 2011).

Bethel A.M.E. Church (<http://www.ame-church.com/directory/results.php?ChurchID=01040401>)

Big Brothers Big Sisters (www.bgcmonmouth.org)

Provides professionally supported 1-to-1 relationships for children facing adversity.

Boys and Girls Club (<http://www.bgcmonmouth.org/>)

Provides a free afterschool program and is a participant in the Asbury Park Community Development Initiative ("Asbury Park CDI Participant Roster", 2011).

Brookdale Community College - Learning Center (<http://www.brookdalecc.edu>)

Community College Resource Center provides public access to a computer featuring New Jersey's One-Stop Career Center ("Community Resource Guide", 2008).

Cathedral Assembly by the Shore

Catholic Charities (<http://www.catholiccharitiesusa.org/>)

Catholic Charities provides child and family therapy, out patient counseling, addiction treatment, case management, transportation, and babysitting ("Community Resource Guide", 2008).

CDF Freedom Schools Program (<http://www.childrensdefense.org/programs-campaigns/freedom-schools/>)

Center for Vocational Rehabilitation (<http://www.cvrus.org/>)

Provides employment programs for people with disabilities such as job placement, coaching, and training. It offers mental health programs including an adult partial care program, individual and group counseling, medication monitoring, and psychiatric evaluation and assessment.

Check-Mate, Inc. (<http://www.check-mateinc.org>)

Assists community residents in becoming self-sufficient through programs including a shelter for the homeless, housing and home energy assistance, HIV mobile counseling and testing, emergency services, and job placement.

Coastal Habitat for Humanity (<http://www.coastalhabitat.org>)

Coastal Habitat for Humanity builds affordable housing with the mission to eliminate poverty and homelessness ("Coastal Habitat for Humanity", 2012).

Community Affairs and Resource Center, formerly "Hispanic Affairs and Resource Center" (<http://carcnj.org/>)

Community Affairs and Resource Center is a social service agency that provides job training and placement, community advocacy, and community development activities. Some of their services include teaching English as a second language, orientation and referral services for victims of domestic violence, support groups, home health aide training, and energy assistance.

Community Health Law Project (<http://www.chlp.org/>)

An advocacy group that provides legal and non-legal services for persons affected by disabilities.

Community YMCA Family Services (<http://www.cymca.org/>)

Family services has two locations in Matawan and Neptune City that provide outpatient mental health, substance abuse treatment, AIDS counseling and education, and in home treatment for families and children.

Epiphany House (www.epiphanyhouse.org)

New Hope runs Epiphany House, a transitional and outpatient facility for women with dependent children, who are dealing with drug abuse and dependency.

Faith Baptist Tabernacle Church

Faith Baptist Church is a participant in the Asbury Park Community Development Initiative ("Asbury Park CDI Participant Roster", 2011).

Faith Based Initiative Human Development Group (<http://www.fbihdg.com>)

A non-profit agency that provides resource and referral services for residents in the areas of social services, education, housing, training, work development and health. It offers job readiness training, placement, and counseling.

First Church of Christ

First French Speaking Church

First Hispanic Presbyterian

First Methodist United Church

Church provides a food pantry, hot dinners for individuals and families, and free clothes for adults and children.

Friendship Baptist Church

Good Hope Baptist Church

Habcore Laurel House (www.habcore.org)

A boarding home that provides housing for low-income and homeless adults.

Haitian Church Of God

Narcotics Anonymous and Alcoholics Anonymous meetings are conducted at this church ("Community Resource Guide", 2008).

Haitian Community Holy Spirit

Holy Spirit Church

This church provides a food collection program.

Interfaith Neighbors (<http://www.interfaithneighbors.org/>)

Community development organization that does neighborhood planning, housing development, and provides mid-day meals for senior citizen center and meals-on-wheels for seniors, as well as rental assistance for Monmouth County residents ("Community Resource Guide", 2008).

Jane H. Booker Family Health Center (<http://www.jerseyshoreuniversitymedicalcenter.com/JSUMC/services/FamilyHealthCenter.cfm>)

The Jane H. Booker Family Health Center, located in Neptune, provides comprehensive services for medicine and surgery, pediatrics, OB/GYN, infectious disease, dentistry, and a variety of other services and referrals.

Jersey Shore Addiction Services (www.jsashc.org)

Jersey Shore Addiction Services is a non-profit that provides substance abuse treatment and counseling.

Jersey Shore University Medical Center (<http://www.jerseyshoreuniversitymedicalcenter.com>)

Jersey Shore Rescue (<http://www.jsrescue.org/>)

Provides a homeless shelter emergency program to fulfill basic needs including food, shelter, clothing, charitable items, and referrals.

Jewish Family and Children's Service of Greater Monmouth County (<http://www.jfcsmonmouth.org>)

Operates a thrift shop for used furniture, a food pantry, and a Kosher Meals on Wheels program. It also provides intensive outpatient treatment For Drug & Alcohol Addiction, personal and family counseling, psychotherapy, parent education, emergency financial service, and referrals.

Just Becuz, LLC

Provides emergency food and clothing, life and job skills for middle and high school youth, and programs to increase self-respect and respect of others.

Loving Care Agency (<http://lovingcareagency.com/>)

The Loving Care Agency is a fully accredited and certified home care agency for pediatric, adult, and geriatric patients. Its home health aides support each patient with daily activities and work in collaboration with the patient, families, and physician.

L.T.C. Career Training (<http://www.ltccareertraining.com/nj/>)

A private vocational school that provides medical training to become a certified nursing assistant or certified home health aide.

Mercy Center - Family Resource Center (FRC) (<http://www.mercycenternj.org>)

A one stop family resource center providing emergency services to prevent homelessness , a food pantry, programs for youth, substance abuse, family outreach, assistance for parents, and a women's group. The Mercy Center is also associated with the Sisters Academy Middle School ("Community Resource Guide", 2008).

Monmouth County Cancer Coalition (<http://www.monmouthcancercoalition.org>)

The Monmouth Cancer Coalition is a volunteer organization with a mission to increase awareness, education and access to cancer screening and care. The Monmouth Cancer Coalition sponsors annual oral cancer screening events to raise awareness about oral cancer and its risks ("*Monmouth Cancer Coalition Presents*," 2012).

Monmouth County Workforce Development Board (<http://www.co.monmouth.nj.us/page.aspx?Id=2712>)

Works with the Asbury Park Chamber of Commerce to provide job training for local youth (Ackerman, 2012).

Monmouth/Ocean HIV Consortium of Central Jersey Community Services

Provides advocacy, outreach, referrals, and case management services for those infected with HIV ("Community Resource Guide", 2008).

Monmouth Medical Center

Located in Long Branch, the Monmouth Medical Center is one of New Jersey's largest academic medical centers. It is a Barnabas Health facility that provides comprehensive services for medicine and surgery, as well as community services in the Monmouth County area.

Mount Pisgah Baptist Temple

Narcotics Anonymous and Alcoholics Anonymous meetings are conducted at this church ("Community Resource Guide", 2008).

Nation of Gods and Earth (<http://www.allahsnation.net/>)

Nation of Islam (<http://www.noi.org>)

New Covenant Sounds of Praise

New Jersey Youth Corps (Interfaith Neighbors, Inc.) (http://www.interfaithneighbors.org/nj_youth_corp_of_monmouth_county.asp)

Part of Interfaith Neighbors, Inc., this program provides GED preparation and job training for youth (ages 16-25). This program is sponsored by Department of Labor and Workforce Training ("Community Resource Guide", 2008).

Original Tabernacle Of Prayer

Our Lady Of Mount Carmel Church (<http://olmcapnj.org/>)

Police-Chaplain Ministry

Collaboration of Monmouth County Prosecutor's Office, police and clergy. The church volunteers ride with the police and work with young people rather than arresting them. The youth do community service and the minister keeps track of them. The effort is intended to build trust with the community (Ackerman, 2012).

Praise Temple

Prevention First (<http://www.preventionfirst.net>)

A non-profit agency dedicated to empowering children and families to successfully overcome challenges such as violence and substance abuse. Programs include advocacy, coalition-building, research, prevention education, information and referral, and professional certification training.

Purpose at Heart

Salvation Army (www.salvationarmyusa.org)

Provides emergency food assistance, referral services, thrift shop, seasonal assistance, disaster services, worship services, and senior citizen activities ("Community Resource Guide", 2008).

Second Baptist Church (<http://www.sbcapnj.org/>)

Provides a food pantry to supplement food and clothing needs for residents of Asbury Park West Side community and is a participant in the Asbury Park Community Development Initiative ("Asbury Park CDI Participant Roster", 2011).

Shiloh United Holy Church

The Shiloh Community Fellowship of the Shiloh United Holy Church is a participant in the Asbury Park Community Development Initiative ("Asbury Park CDI Participant Roster", 2011).

S.T.A.R.S. Community Development Corporation of Asbury Park

Provides workforce development training and community advocacy and education ("Community Resource Guide", 2008).

St. Augustine Episcopal Church (<http://www.staugapnj.org/>)

Narcotics Anonymous and Alcoholics Anonymous meetings are conducted at this church.

St. George Greek Orthodox Church (<http://www.stgeorgeap.org/>)

Provides a soup kitchen for the homeless.

St. Peter Claver Church

St. Stephen A.M.E. Zion Church

Tabernacle Of Glory Church (<http://www.tabofglory.org/>)

The Center (www.thecenterinap.com)

Provides support services for people and families affected by HIV/AIDS through housing programs, nutrition programs, referral services, transportation services, and outreach.

The New Black Panther Party

Trinity Episcopal Church (<http://www.trinitynj.com/>)

Provides a food pantry and soup kitchen. Soup Kitchen can serve up to 220 guests each Saturday. Narcotics Anonymous Or Alcoholics Anonymous meetings are conducted at this church.

Triumphant Life Church

Church is a participant in the Asbury Park Community Development Initiative ("Asbury Park CDI Participant Roster", 2011).

True Vine Baptist Church (<http://www.truevinebaptist.com/>)

United Fellowship Baptist Church (<http://www.unitedfellowshipchurch.org>)

United Methodist Church

Narcotics Anonymous and Alcoholics Anonymous meetings are conducted at this church ("Community Resource Guide", 2008).

Veterans Service (<http://www.nj.gov/military/veterans/njguide>)

Administers a variety of benefits and services for veterans including health care entitlements, home ownership benefits, employment benefits, and homeless veterans programs.

VFW POST 1333 (<http://www.vfwwebcom.org/nj/post1333>)

Hosts Alcoholics Anonymous meetings.

Victory Tabernacle of Prayer

Visiting Nurse Association (VNA), Community Health Center of Asbury Park (FQHC) (<http://www.vnachc.org/>)

A federally qualified health center with multilingual health care professionals providing services in adult and family medicine, women's health care, men's health care, pediatric care from newborns to teens, podiatry, mental health, HIV/AIDS services, nutritional counseling, and dentistry.

West Side Community Center

Community center provides mostly recreational services and hosts Narcotics Anonymous meetings. Center is a participant in the Asbury Park Community Development Initiative ("Asbury Park CDI Participant Roster", 2011).

Winifred Camright House (<http://www.njaconline.org/16.html>)

Provides transitional housing, healthcare and supportive services to the homeless and holds Narcotics Anonymous meetings.

Wizewordz Ent.

Organizes a Community Performing Arts Group and is a participant in the Asbury Park Community Development Initiative ("Wizewordz Entertainment Presents," 2010).

Works Cited

- Ackerman, Peter. 2012. "Gripped By Violence: Asbury Park's West Side is Plagued by Gangs, Shootings." October 25. Asbury Park Press. http://www.app.com/article/20121021/NJNEWS2003/310210012/Asbury-shootings?nclick_check=1
- Asbury Park Alternative School. <http://www.asburypark.k12.nj.us/ams/site/default.asp>
- "Asbury Park Best Again by Violence in Spite of Curfew." 1970. July 7. *The New York Times*.
- "Asbury Park CDI Participant Roster." 2011. June 3. *Asbury Park Homeowners Association*. http://aphomeowners.org/docs/ap_community_development_participant_roster.pdf
- Asbury Park Civic Media Arts Project. <http://andromeda.rutgers.edu/~cmedia/apcmap/media/Sl.mpg>
- Asbury Park High School, School Based Youth Services Program. <http://www.asburypark.k12.nj.us/1858203308419613/site/default.asp>
- Asbury Park Mayor's Ball Foundation. Mayor's Wellness Initiative. <http://www.asburyparkmayorsball.org/wellnessinitiative.html>
- Asbury Park Middle School. <http://www.asburypark.k12.nj.us/apms/site/default.asp>
- Bradley Elementary School. <http://www.asburypark.k12.nj.us/bradley/site/default.asp>
- Chin, Alan. 2012. "On Assignment: Asbury Park, N.J." *New York Times*. July 5. <http://www.nytimes.com/2012/07/08/travel/on-assignment-asbury-park-nj.html>
- Check-Mate Inc. <http://www.check-mateinc.org/>
- Check-Mate Inc. 2009. "Check-Mate Inc. 2009 Annual Report." <http://www.check-mateinc.org/Sections-read-19.html>
- City of Asbury Park. 2007. "Amended Springwood Avenue Redevelopment Plan." December 19. http://www.cityofasburypark.com/images/pdfs/SpringRFP_ExhibitA_Springwood%20Plan%20Dec_19_2007.pdf
- Coastal Habitat for Humanity. 2012. "Coastal Habitat for Humanity, Inc. - Completed Home Builds." http://www.coastalhabitat.org/projects/home_builds_completed.html
- Colford, Paul. D. 1975. "No Change in Store for Asbury's Boardwalk." *The New York Times*. October 12.

Collins, Ed. 2000. "Strategic Target Area Rebuilding Spirit (S.T.A.R.S.) Redevelopment Plan." City of Asbury Park. June 19.

Crandall, Kristin. 2012. *Transforming New Jersey Communities through Planning, Investment, and Community Engagement*. Housing and Community Development Network of New Jersey and New Jersey Community Capital. December. <http://www.hcdnnj.org/assets/documents/nrtc%20final%20report.pdf>

Fraser, Gerald. 1970. "Blacks on Patrol at Asbury Park: Seek to Keep Bitter Negroes Off the Riot-Torn Streets During Curfew Hours." *The New York Times*. July 9.

Grim, Jarrod. 2010. City Works: Community Development Case Study. Edward J. Bloustein School of Planning and Public Policy. Rutgers. Fall. <http://policy.rutgers.edu/rwv/capacity/CityWorks.pdf>

"Habitat Slated to Putt for Affordable Homes." 2012. *The Asbury Park Press NJ*. N.p., n.d.

Heyer, Gruel and Associates. 2006. "Asbury Park Master Plan." City of Asbury Park, May.

_____. 2012. "Asbury Park Central Business District Redevelopment Plan." City of Asbury Park. June 2003.

Holleran Consulting. 2005. Monmouth County, New Jersey: *Secondary Data Profile*. October. <http://co.monmouth.nj.us/documents/120/Secondarydatapofile.pdf>

_____. 2006. Monmouth County, New Jersey: *MAPP Focus Group Report*. June. <http://co.monmouth.nj.us/documents/120/FocusGroupReportMonmouthCo.pdf>

_____. 2007. Monmouth County, New Jersey: *Urban Profile, Asbury Park, Freehold Borough, Long Branch City, Neptune City Borough, Neptune Township, and Red Bank Borough*. March.

Horner, Charlie. 2012. Asbury Park's West Side Vocal Groups. Part I (1948-1958). Reprinted from *Echoes of the Past Magazine*, Issue 99. <http://www.classicurbanharmony.net/Asbury%20Park%20West%20Side%20Vocal%20Groups%20pt%201.pdf>

Jersey Shore Addiction Services. <http://prosities-jsashc.homestead.com/welcome.html>

Jersey Shore Medical Center. <http://www.jerseyshoreuniversitymedicalcenter.com/JSUMC/services/FamilyHealthCenter.cfm>

Jersey Shore University Medical Center. <http://www.jerseyshoreuniversitymedicalcenter.com/JSUMC/services/behavioralhealth/AdultPartialHospitalization.cfm>

Jewish Family and Children's Service of Greater Monmouth County. (<http://www.jfcsmonmouth.org>)

Jones, Isiah. 2013. Unit Director. Boys and Girls Club of Monroe Ave. Phone interview with Isiah Jones.

Lowe, George. 2013. Director of Client Services. The Center. Phone interview with George Lowe.

McKinely, James. 2011. "Bamboozle Festival Returning to Asbury Park." *New York Times*. December 13. <http://artsbeat.blogs.nytimes.com/2011/12/13/bamboozle-festival-returning-to-asbury-park/>

Mercy Center - Family Resource Center (FRC). <http://www.mercycenternj.org/>

Mercy Center, Family Resource Center. 2008. "Community Resource Guide: A Guide to Asbury Park Social Service Agencies and Organizations." http://www.mercycenternj.org/assets/documents/resource_guide_3292007.pdf.

Monmouth County Cancer Coalition. <http://www.monmouthcancercoalition.org>

Monmouth Cancer Coalition. 2012. "Monmouth Cancer Coalition Presents Oral Cancer Screening Initiative." *Greater Media Newspapers*. April 4. http://health.gmnews.com/news/2012-04-04/Health/Monmouth_Cancer_Coalition_presents_oral_cancer_scr.html>

Monmouth County Health Department website. <http://co.monmouth.nj.us/page.aspx?ID=1932>

Monmouth Medical Center. http://www.barnabashealth.org/hospitals/monmouth_medical/

Mullen, Shannon. 2012. "Then and now - A Look at the 1940 Census: Life on Asbury Park's West Side: Segregation, Decline, and Then Hope." Asbury Park Press. September 21. <http://www.app.com/article/20120917/NJNEWS/309170001/1940-census>

Meddis, Michael A. 2009. "Monmouth County Health Department Annual Report." Monmouth County Health Department. http://co.monmouth.nj.us/documents/121/MC_AnnualReport09.pdf

Mulshine, Molly. 2012. "Vita Gardens, Stephen Manor to be Refurbished." *Asbury Park Sun*. 14 June.

Mulshine, Molly. 2012. "City, Interfaith Ink Property Tax Deal for Springwood Center." *Asbury Park Sun*. Dec 4. <http://asburyparksun.com/city-interfaith-ink-property-tax-deal-for-springwood-center/>

Mulshine, Molly. 2012. "Volunteers Sought, Mayor Johnson Says." *Asbury Park Sun*. November 1. <http://asburyparksun.com/volunteers-sought-mayor-johnson-says/>.

Mulshine, Molly. 2012. "Asbury Starts Small Business Loan Program." *Asbury Park Sun*. November 29. <http://asburyparksun.com/city-starts-small-business-loan-program/>

Murphy, Jennifer. 2012. New Jersey Community Capital. Phone Interview With.

New Hope. "Halfway House Services - Women." <http://www.newhopefoundation.org/addiction-recovery-services/rehabilitation-treatment-settings/halfway-house-services-women/>

New Jersey Department of Health & Senior Services. 2008. "Monmouth County Cancer Fact Sheet." <http://www.state.nj.us/health/ccp/documents/factsheet/monmouth.pdf>

New Jersey Healthcare Quality Institute. 2012. Mayors Wellness Campaign. <http://www.njhcqi.org/mayorswellnesscampaign.php>

New Jersey Transit. 2009. "After Thirty Year Absence, Bus Service Returns to Asbury Park." New Releases. June 25. http://www.njtransit.com/tm/tm_servlet.srv?hdnPageAction=PressReleaseTo&PRESS_RELEASE_ID=2525

Palazzolo, Joseph. 2012. New Jersey Community Capital. In-person Interview with.

Phalon, Richard. 1975. "Asbury Park Still Rundown 5 Years After Major Rioting." *New York Times*. August 11.

Ratliff, Ben. 2011. "A Free-Form Festival, Wide Open to Outsiders." *New York Times*. October 3. <http://www.nytimes.com/2011/10/04/arts/music/all-tomorrows-parties-festival-at-asbury-park-nj.html?pagewanted=all>

Revels, Lisa. 2013. VNA Federally Qualified Health Center. Healthy Families/TIP Program Supervisor. Phone Interview with Lisa Revels.

Phalon, Richard. 1972. "Scene of Asbury's '70 Riot Still Festers." *New York Times*. October 1.

Shields, Nancy. 2008. "Interfaith Neighbors Getting Things Done In Asbury Park." *Coastal Monmouth Bureau*. February 2. http://www.interfaithneighbors.org/published_articles_020208_01.asp.

Teng, Poh Si. 2012. "Asbury Park Memories." *New York Times*. December 13. <http://www.nytimes.com/video/2012/12/13/nyregion/10000001952688/asbury-park-memories.html>

The Center. www.thecenterinap.com

The Lofts at Asbury Park. <http://www.theloftsatasburypark.com>

Thurgood Marshall Elementary School. <http://www.asburypark.k12.nj.us/tmes/site/default.asp>

Toth, Erin. 2005. "Mobilization for Action through Planning and Partnership: Community Themes and Strengths Assessment in Monmouth County, New Jersey." December 15. <http://co.monmouth.nj.us/documents/120/MonmouthCTSAReport.pdf>

United States Census 2000. *American Factfinder*. 2000. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

United States Census 2010. *American Factfinder*. 2010. Bureau of the U.S. Census. <http://factfinder2.census.gov/>.

Visiting Nurse Association of Central Jersey Community Health Center. <http://www.vnachc.org/>

Visiting Nurse Association of Central Jersey Community Health Center Facebook Page. <https://www.facebook.com/VNACJCHC>

Washburn, Michael. 2012. "A Jersey Shore Rebound." *The New York Times*. June 15. <http://travel.nytimes.com/2012/06/17/travel/a-jersey-shore-rebound.html>

"Wizewordz Entertainment Presents The Community Performing Arts Group." 2010. *Nixle*. http://s3.amazonaws.com/nixle/uploads/pub_media/user4585-1262889437-media1

Wolff, Daniel. 2012. "The Debt We Owe Katrina." *The New York Times*. November 9. <http://www.nytimes.com/2012/11/10/opinion/the-debt-we-owe-katrina.html>