Community Development
Corporations in Cincinnati:
Capacity Building and the Neighborhood Approach to Developing Communities

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Client: CDC Association of Greater Cincinnati

Department of Urban & Regional Planning
University of Illinois at Urbana-Champaign
Thank you for your participation!

Adams-Brown counties Community Action Partnership (ABCAP)
Brighton Properties, Inc.
Camp Washington Community Board
Clifton Heights Community Urban Redevelopment Corporation
College Hill Community Urban Redevelopment Corporation
Cornerstone Corporation for Shared Equity
Madisonville Community Urban Redevelopment Corporation
Mt. Auburn Community Development Corporation
Mt. Auburn Good Housing Foundation
Mt. Healthy Renaissance Project
NEST/ Cincinnati Northside Community Urban Redevelopment Corporation
Over-the-Rhine Community Housing
Price Hill Will
Sedamsville Community Development Corporation
Walnut Hills Redevelopment Foundation
Westwood Community Urban Redevelopment Corporation
Working In Neighborhoods

Abbreviations

AMI.......... Area Median Income
CAGIS....... Cincinnati Area Geographic Information System
CAP.......... Community Action Partnership
CBD.......... Central Business District
CBO.......... Community-Based Organization
CDC.......... Community Development Corporation
CDP.......... Community Development Partnership
CURC....... Community Urban Redevelopment Corporation
GIS.......... Geographic Information Systems
HUD......... U.S. Department of Housing and Urban Development
NBD.......... Neighborhood Business District
LISC........ Local Initiatives Support Corporation
OTR.......... Over-the-Rhine neighborhood
OTRCH...... Over-the-Rhine Community Housing
WHRF....... Walnut Hills Redevelopment Foundation
WIN......... Working in Neighborhoods
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The challenges our neighborhoods are facing are complex. Civil society plays a primary role in addressing community needs, particularly in neighborhoods that have long been neglected by city governments. One type of organization often formed to face these complex challenges is the Community Development Corporation, or CDC. The community development process seeks to rebuild communities and their assets, working to stop or reverse the effects of urban decay and neighborhood decline that has been seen in cities across the U.S. The CDC model was created nearly fifty years ago, with the first CDC formally established in the Brooklyn neighborhood of Bedford-Stuyvesant in 1967. The CDC model was first utilized in Cincinnati around this same time with the creation of the Mt. Auburn Good Housing Foundation.

Community Development Corporations were defined by the National Congress for Community Economic Development as private, nonprofit entities that: serve a low-income community, are governed by a community-based board, and serve as an ongoing producer in housing, commercial-industrial development, or business development (1995). Other definitions vary slightly, but are broad in nature, and can largely be covered by Randy Stoecker’s three qualifying criteria: IRS 501(c)(3) nonprofit status, a volunteer board, and an emphasis on physical redevelopment (1997). The aim of CDCs is “to rebuild communities devastated by capital disinvestment.” Indeed, all neighborhoods of Cincinnati with current CDC activity have been affected by historical disinvestment.

While the first CDCs focused on job creation, in the 1970s a much larger wave of CDCs was founded to fight against redlining and displacement caused by urban renewal projects. As their focus shifted from economic development to housing, federal funding for CDCs increased. This flow of funding reversed after 1980, as the federal government backed away from programs addressing poverty. Today CDCs and other community-based organizations (CBOs) face new challenges including losing sight of the community and becoming less representative as the CDCs become more professionalized. Additionally, because of funding requirements, the agenda of CBOs may become co-opted by external forces.¹ This paradox and other similar difficulties are trends all CDCs should be aware of and plan to counter.

This report focuses on the current work of CDCs in Cincinnati, Ohio. A proud Midwestern city, Cincinnati has much in common with cities throughout the ‘rust belt.’ Cincinnati is unique in many ways as well. The evolution of the city was shaped by its topography, expanding from the Ohio river basin to the hillsides surrounding the city’s center and beyond. The city continued to grow throughout the 19th and early 20th centuries through annexing smaller surrounding towns. This has led to the unique neighborhood structure that exists in the city, comprising dozens of communities each with a distinct character and identity. Cincinnati is the county seat of Hamilton County, the southwestern-most county in Ohio, neighboring both Indiana and Kentucky, and anchors the Greater Cincinnati Metropolitan Area, known locally as the Tri-State area.

¹ Green & Haines (2012). p. 29-41, 93-100. For more a more detailed explanation of the processes of CDCs in general, see p. 63-87 (Ch. 4 the Community Development Process).
Cincinnati has 52 neighborhoods officially recognized by the local government. These neighborhoods vary significantly in terms of size and income. Some larger neighborhoods are home to individuals with a wide range of incomes, such as Westwood (some low-income, some high-income) and Clifton (high-income, likely offset by a large young population and proximity to the university). Other neighborhoods retain a high concentration of poverty (Fairmount, Millvale, Avondale) or may have very few low-income residents at all (Mt. Adams, Hyde Park, Mt. Lookout). Two of the smaller and poorer neighborhoods - English Woods and the former Fay Apartments, renamed the Villages of Roll Hill - evolved from and were completely composed of public housing projects. These small areas with high concentrations of poverty are considered neighborhoods in the same way that larger areas with active community councils, civic association, and commercial districts are. These neighborhood boundaries can be seen below in Map 1.

Some neighborhoods are gentrifying - redevelopment that increases the market value of property and often leads to the displacement of low-income families. This is particularly true in Over-the-Rhine, a neighborhood that had been long impoverished but with many assets (proximity to downtown, historic architecture, etc.) that investors have taken notice of in the 21st century. Amenities serving low-income families have been slowly disappearing and long-time residents are unable to afford many of the new businesses in the neighborhood. There is growing resistance to new affordable housing and services that cater to low-income residents. For example, the city’s largest homeless shelter was pushed out of the neighborhood, a loss for its clients because of the concentration of social services in the area and the accessibility from different parts of the city, both of which are not the case for the shelter’s new location.
Cincinnati has lost over 40% of its population since its peak in 1950, from over 500,000 residents to under 300,000 today. In the same time, the population of the Cincinnati Metropolitan Area has doubled to 2.2 million people. The core of the metro area has shrunk as the population has sprawled outward. While initially city dwellers moved to nearby suburbs, Hamilton County itself has consistently lost population since the 1970 Census. Most of this growth has been in the newer suburbs of Butler and Warren counties to the north.

In the first half of the 20th century, black Cincinnatians were restricted in where they could live. Henry Louis Taylor, Jr. has done extensive research on the formation of ghettos in early 20th century Cincinnati. “By 1930, although most blacks were concentrated in the Basin², African-Americans could still be found living in every part of the urban metropolis (2000, 9).” In the 1930s and 40s, white Cincinnatians increasingly left the Basin area, while more black Cincinnatians moved in, primarily concentrated in the West End.³ From 1940 to 1970, the black population of Cincinnati increased 226%. This increase was largely incorporated into the West End.⁴

The images shown in Map 2 (p. 4) display the spatial evolution of neighborhoods in Cincinnati occupied by African-American residents from 1940 to 2010. Walnut Hills had long been home to a black community which grew as many black Cincinnatians sought escape from the deteriorating slum conditions of the West End. Over time this community spread north into the neighborhood of Avondale, creating a “second ghetto” in the city. Urban renewal projects and interstate construction displaced thousands of families from the 1930s through the 1950s in low-income neighborhoods.

Slum clearance made way for Lincoln Court and Laurel Homes, two of the earliest federally funded public housing projects in the country. This early public housing project also displaced families throughout the West End. Lincoln Court was initially only open to white families, as were many later public housing developments such as Winton Terrace and English Woods.

Walnut Hills’ black community spread into Avondale and Evanston as displaced residents from the West End settled there and in the neighborhoods of Corryville, Mt. Auburn, and eventually replaced the largely Appalachian population of Over-the-Rhine. The construction of I-75 further decimated the West End. Additionally, the construction of I-71 devastated the communities of Walnut Hills and Evanston. By the 1960s, many more neighborhoods saw major demographic shifts, with real estate practices such as blockbusting and redlining continuing into the 1970s. The pattern of racial segregation that took shape from the 1930s through the 1970s persists to this day (Fairbanks 1988, Casey-Leininger 1989).

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2 The Basin refers to the downtown area where the original city was located, surrounded by the hills which became the city’s first suburbs. This generally includes the present-day Central Business District, Over-the-Rhine, and the West End.
4 “Between 1940 and 1970 Cincinnati’s black population increased from 55,593 (12 percent of the total) to 125,070 (28 percent)” Casey-Leininger, p. 233.
Map 2: Black Population in Cincinnati, 1940-2010

Legend
- Neighborhood Boundaries
- Cincinnati City Limits

**Census Tracts**
- **Black Population**
  - 25% or less
  - 26.1% - 50%
  - 50.1% - 75%
  - More than 75%

Sources: U.S. Census Data accessed via NHGIS (National Historic Geographic Information System), Minnesota Population Center, University of Minnesota CAGIS (Cincinnati Area Geographic Information Systems)
Author: Erica Horion; Date: 8/9/2016
Working In Neighborhoods (WIN), a local CDC, has documented and mapped foreclosures in Hamilton County since 2001. The project started in response to resident concerns regarding predatory lending. Among other things, WIN's reports illustrate the spatial pattern of foreclosures. For example, most foreclosures occurred within the Cincinnati city limits at the beginning of the housing crisis. By 2013, a majority of foreclosures in Hamilton County were outside Cincinnati.\(^5\) Five Cincinnati neighborhoods have had at least 500 completed foreclosures from 2006 to 2014 (Westwood, West Price Hill, East Price Hill, College Hill, and Madisonville).\(^6\) CDCs are actively working in many of the neighborhoods most severely impacted by foreclosures.

WIN calculated the overall ‘Foreclosure Impact’ by taking the total number of completed foreclosures and dividing by the total number of housing units in the neighborhood. South Fairmount has the highest cumulative foreclosure impact (2006-2014) at 18.45%, while of the 20 neighborhoods with active CDCs, South Cumminssville has a foreclosure impact of 14.22%.\(^7\) However it is important to note that there is a significant range in the number of people and housing units in each neighborhood. Of the 20 neighborhoods mentioned in WIN’s foreclosure reports and with active CDCs, the number of total housing units ranges from 346 in Sedamsville to 15,890 units in Westwood. These neighborhoods and their respective foreclosure impacts are listed below in Table 1.

**Table 1: Foreclosure Impact in Neighborhoods with Active CDCs**

<table>
<thead>
<tr>
<th>Neighborhood</th>
<th>Total Housing Units (2010 Census Data)</th>
<th>Total Completed Foreclosures, 2006-2014</th>
<th>Foreclosure Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sedamsville</td>
<td>346</td>
<td>40</td>
<td>11.6%</td>
</tr>
<tr>
<td>S. Cumminsville</td>
<td>422</td>
<td>60</td>
<td>14.2%</td>
</tr>
<tr>
<td>Lower Price Hill</td>
<td>452</td>
<td>29</td>
<td>6.4%</td>
</tr>
<tr>
<td>Camp Washington</td>
<td>704</td>
<td>27</td>
<td>3.8%</td>
</tr>
<tr>
<td>Spring Grove Village</td>
<td>924</td>
<td>112</td>
<td>12.1%</td>
</tr>
<tr>
<td>Mt. Auburn</td>
<td>3,033</td>
<td>265</td>
<td>8.7%</td>
</tr>
<tr>
<td>Bond Hill</td>
<td>3,546</td>
<td>440</td>
<td>12.4%</td>
</tr>
<tr>
<td>Over-the-Rhine</td>
<td>4,298</td>
<td>90</td>
<td>2.1%</td>
</tr>
<tr>
<td>Pleasant Ridge</td>
<td>4,375</td>
<td>182</td>
<td>4.2%</td>
</tr>
<tr>
<td>Walnut Hills</td>
<td>4,445</td>
<td>186</td>
<td>4.2%</td>
</tr>
<tr>
<td>Northside</td>
<td>4,484</td>
<td>459</td>
<td>10.2%</td>
</tr>
<tr>
<td>Mt. Airy</td>
<td>4,489</td>
<td>276</td>
<td>6.2%</td>
</tr>
<tr>
<td>Madisonville</td>
<td>5,270</td>
<td>129</td>
<td>10.0%</td>
</tr>
<tr>
<td>Mt. Washington</td>
<td>6,435</td>
<td>225</td>
<td>3.5%</td>
</tr>
<tr>
<td>CUF (Clifton Heights)</td>
<td>7,001</td>
<td>199</td>
<td>2.8%</td>
</tr>
<tr>
<td>College Hill</td>
<td>7,102</td>
<td>588</td>
<td>8.3%</td>
</tr>
<tr>
<td>Avondale</td>
<td>7,498</td>
<td>472</td>
<td>6.3%</td>
</tr>
<tr>
<td>East Price Hill</td>
<td>7,690</td>
<td>789</td>
<td>10.3%</td>
</tr>
<tr>
<td>West Price Hill</td>
<td>8,154</td>
<td>1,025</td>
<td>12.6%</td>
</tr>
<tr>
<td>Westwood</td>
<td>15,890</td>
<td>1,166</td>
<td>7.3%</td>
</tr>
</tbody>
</table>

---

5 WIN 2014 Foreclosure Report, p. 3.  
6 WIN 2014 Foreclosure Report, p. 11.  
Research interest in CDCs has waned over the past two decades. The purpose of this research is to gain a deeper understanding of how community development works in the context of Cincinnati. Through research, the administration of a survey among the CDCs, and the subsequent analysis, this report presents an interpretation of how CDCs function internally and what they do on the ground. Through a better understanding of the CDC industry, we can find ways to improve and promote more effective community development in Cincinnati.

This report will outline relevant research and the methodology used to gather information for this project. Academic sources provide background on the topics of measuring CDC capacity and identifying the needs and challenges CDCs face. These sources informed production of a survey distributed to CDC staff and provide a framework for analysis of the findings. I then describe the survey instrument, how it was developed and its implementation. The findings section of this report outlines the results of the survey and other research in the following six categories: organization and structure, geography, programming, resources, partnerships and networking, and vision. Finally, the last section of the report provides an analysis and discussion of the implications of survey findings. Several successful Cincinnati CDCs are profiled and analyzed using the framework established by academic sources. The report concludes with recommendations for the community development industry and CDCs in Cincinnati.
I was first introduced to the CDC Association of Greater Cincinnati through an internship at the Madisonville Community Urban Redevelopment Corporation (MCURC) in the summer of 2015. This experience gave me insight into the daily operations of a CDC. In the fall of 2015, I contacted the CDC Association with an interest in learning more about how these organizations interact on a city-wide level. The CDC Association wanted to gather more information about which CDCs were active, where they were working, and what kind of work was being done. The organization had already been administering an annual survey and was welcome to assistance in administering their survey, allowing more time for staff to concentrate on other work. The CDC Association of Greater Cincinnati provided me with a list of CDC contacts. The survey questions were developed in consultation with the CDC Association as well as previous CDC research documented in academic publications (See Appendix A. Other data sources used for this report include census data and documents obtained about the individual CDCs (brochures, reports, websites, etc.)

### Measuring Capacity

In their work on capacity building in CDCs, Glickman and Servon (1998) define capacity as the ability of an organization to effectively execute its functions. To better understand the nature of CDC capacity, they identify five separate components: organizational, programmatic, resource, networking, and political. CDCs are traditionally measured by the number of housing units they produce, commercial space developed, or other easily quantifiable indicators. They argue that this oversimplifies a much more complex process and distracts from the social process of community building and organizing. Capacity is evaluated through these five separated, but interconnected, components in order to more easily understand and identify the specific needs of CDCs. Table 2 outlines different needs for building capacity in each of the five areas.

<table>
<thead>
<tr>
<th>Capacity</th>
<th>Capacity-building needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizational</td>
<td>Effective executive director, competent and stable staff, effective fiscal management, board development and leadership, managed growth, project management, evaluation</td>
</tr>
<tr>
<td>Programmatic</td>
<td>Skills related to housing, skills related to commercial development, skills related to economic development, skills related to organizing, responsiveness to changing community concerns</td>
</tr>
<tr>
<td>Networking</td>
<td>Strong relationships with other organizations and institutions, promotion of CDCs’ agendas externally, access to non-financial resources, mutually supportive programs</td>
</tr>
<tr>
<td>Political</td>
<td>Community participation, political leverage, educated constituents and partners, conflict management</td>
</tr>
<tr>
<td>Resource</td>
<td>Long-term operating support, resources for stabilization and expansion, development capital, access to funders, balanced portfolio risk</td>
</tr>
</tbody>
</table>

Adapted from Tables in “Bricks and Sticks” by Glickman and Servon
Identifying Needs

CDC research also highlights the importance of Community Development Partnerships (CDPs). CDPs provide financial support, technical assistance, and provide credibility for CDCs seeking funding elsewhere. For example, Local Initiatives Support Coalition (LISC) is an important financial intermediary for community development work at the local level. Additionally, the CDC Association of Greater Cincinnati provides many CDP supports to local CDCs. Nye & Glickman (2000) document the relationship between CDCs, CDPs, and funders based on interviews with CDC senior staff across the country. They found that CDPs help CDCs with the following needs (169):

- Stable core operating support
- Assistance locating new sources of funding for projects
- Assistance with strategic planning
- Training and technical assistance
- Advocacy for a neighborhood agenda with city governments and other “downtown” actors
- Help publicizing community development and CDC activities to corporate and philanthropic communities

Evolving Challenges

Through an in-depth study of CDCs that have failed, downsized, or merged, Rohe et. al. (2003) identified contextual and organizational factors leading to CDC decline. These factors are outlined below in Table 3. This study determined several negative effects of CDC failures and downsizings, while reporting positive effects of CDC mergers, particularly in terms of increased capacity.

Individual CDCs themselves have little to no control over contextual factors, but can shield themselves against vulnerability to these factors by focusing on what they can control. The following organizational factors may make the difference between success and failure for CDCs and therefore must be paid particular attention. These factors, along with the recommendations of the study, will be revisited in the analysis of survey findings.

Table 3: Factors in CDC Downsizing, Failures, and Mergers

<table>
<thead>
<tr>
<th>Contextual Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changes in local housing markets</td>
</tr>
<tr>
<td>An increase in the number of CDCs leads to increased competition for resources</td>
</tr>
<tr>
<td>Changes in local city policies, such as funding cuts and shifting priorities</td>
</tr>
<tr>
<td>Intermediaries and funders pressure CDCs into certain actions</td>
</tr>
<tr>
<td>Lack of local support groups and limited communication</td>
</tr>
<tr>
<td>Level of trust among key actors</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Organizational Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breadth of mission – a narrow mission leaves CDCs vulnerable</td>
</tr>
<tr>
<td>Dependence on a single funding source</td>
</tr>
<tr>
<td>Internal management problems</td>
</tr>
<tr>
<td>Lack of staff or board capacity</td>
</tr>
<tr>
<td>Communication problems</td>
</tr>
<tr>
<td>Lack of community support</td>
</tr>
</tbody>
</table>

Source: Rohe et. al. 2003
The primary method of gathering information was an expansion of the CDC Association’s Annual Survey. The survey was broken down into six components based on Glickman and Servon’s study.

With the five components of capacity as a guide, and consultation with the CDC Association, a 33-question survey was developed. The five-capacities model was adapted for the purpose of structuring the survey and the final survey was divided into the following categories:

Organization & Structure: How are the CDCs organizationally structured? This section requested basic information, such as address and contact information, 501(c)(3) nonprofit tax status, composition of the staff and board of directors, and methods of communication with the community.

Geography: Where are the CDCs and their projects? These questions were aimed at understanding the spatial dynamics of community development activities in Cincinnati. Respondents were asked how they defined the geographic boundaries of their target area.

Programming: What are the CDCs doing? CDCs are primarily known for their work in housing, yet there is much more variety to what CDCs do. This section will reveal the assortment of operation these organizations undertake. Respondents were asked to select as many as applicable from a list of common CDC activities. Housing was broken down into three categories – production, rehabilitation, and management. Other common CDC operations include economic and commercial development, advocacy, and to a lesser extent, social services, workforce development, and job training. Respondents were also given the option to add additional activities in which they participate.

Resources: Where are the resources coming from? Glickman and Servon regard resource capacity as fundamental in building other components of capacity. CDCs must find resources for operational support and for projects they undertake. Respondents were asked to list entities from which they receive funding. A separate question addressed sources of funding for development projects completed in 2015.

Partnerships & Networking: Who’s working with whom? These questions reflected aspects of networking and political capacity. Are the CDCs working together? Are they working with other groups in their neighborhood? Who else are they partnering with?

Vision: Where do the CDCs want to be? CDCs and other nonprofits are often constrained by a shortage of funding and/or staff. But what if they weren’t? What would the CDCs like to work on if these obstacles were not in place? What do the CDCs see for themselves in the future? This question is complemented by information revealed from survey results to answer the follow-up question: Can they get there?
The online survey was sent out to organizations associated with the CDC Association, by the CDC Association itself. While the CDC Association operates on a regional level, for the purposes of this project the scope was limited to the city limits of Cincinnati. The CDC Association wanted to have survey data for as many CDCs as possible, regardless of geography. For this reason, the survey was sent to all CDCs in the Greater Cincinnati area, however, additional follow up was only conducted with CDCs in Cincinnati proper.

An initial email was sent to contacts at 51 different organizations, not all of them formally CDCs but engaged in CDC work. Forty-three (43) of the 51 are located within the Cincinnati city limits. Follow up phone calls were made to 15 organizations that had not yet filled out the survey after the initial and a follow-up email. In the end, seventeen (17) organizations responded to the survey, all of them CDCs, and fourteen of those were located in the City of Cincinnati. The response rate was very high given that only 23 of the CDCs are currently active in the city limits. The surveys were completed by either a staff or board member of the organization, in most cases the Executive Director.

Mapping Neighborhoods and CDCs

Spatial Analysis was conducted with ArcGIS and data from both CAGIS (Cincinnati Area Geographic Information Systems) and the U.S. Census Bureau. The two main questions guiding this analysis were: where are the low-income communities, and where are the CDCs working?

CDC Documents

The CDCs themselves publish literature promoting their accomplishments. Effective marketing can build capacity by increasing the visibility of the organization, solidifying its credibility, and appealing to funders. Materials reviewed included annual reports, brochures, and other promotional materials the CDCs use to market themselves.

These resources came from Madisonville CURC, OTR Community Housing, Walnut Hills Redevelopment Foundation, Clifton Heights CURC, College Hill CURC, and Camp Washington Community Board.
**Organization & Structure**

Most CDCs in Cincinnati are small organizations. Fifty percent or 7 of CDCs surveyed have a staff of 5 persons or less, 29% or 4 of CDCs have between 6 and 11 people, and 21% or 3 of CDCs have more than 12 staff members. Additionally, 56% of CDCs surveyed had at least one full-time staff and 19% of CDCs did not have any paid staff (See Charts 1 & 2).

Survey respondents were asked questions about the composition of their Board of Directors. The size of the Boards ranged from five to twenty members, with an average of eleven. Sixty-five percent (65%) of the Boards met monthly, while others met between 4-6 times a year, typically every other month (See Chart 3). Most organizations had Boards that, at least on a surface level, represent the communities in which they work. Almost half of the CDCs surveyed reported that 75% of more of their Board was composed of residents of their target area. Over 70% of these organizations reported that at least half of their Board included residents of the neighborhood(s) in which they serve. While living in an area does not necessarily make one representative of that particular community, it shows that there are residents involved in the leadership of the CDCs.

The median age of CDCs in Cincinnati is 34 years. Nearly half of the organizations represented in the survey date back to the 1960s/70s. The Adams Brown Community Action Partnership (ABCAP) was founded in 1965 as part of the War on Poverty programs. ABCAP serves a rural area encompassing two counties, and is a social service program of which community development is one component.
Several survey questions addressed methods of communication, particularly between the CDC and the community which they serve. CDCs are overwhelmingly using the internet to communicate with neighborhood residents, 82% of CDCs reported using their website and/or Facebook as a means of communication. Sixty-five percent (65%) of respondents are using email and/or flyering to communicate; 59% have newsletters; and over half, 53%, reported door-knocking as a communication strategy. CDCs are also regularly meeting with residents in person, through neighborhood Community Councils⁸ and other types of community meetings. Almost all organizations hold or participate in monthly meetings and many indicate strong relationships with Community Councils.

Chart 4:

[Image of a bar chart showing the modes of communication with percentages.]

8 Community Councils are neighborhood groups that represent the interest of residents. The City’s Neighborhood Support Program provides funding, there are currently 51 community councils recognized by the city and eligible for funding.
The target population of the CDC may be demographic or geographic. In most cases, the CDC is neighborhood based and focuses on the overall community and all residents. CDCs targeting a particular demographic usually focus their work on the needs of low-income residents. CDC activity in Cincinnati is concentrated on the west side and uptown, with evident gaps. Three Cincinnati CDCs reported prioritizing low-income residents, or those below 80% Area Median Income (AMI). Many neighborhoods want to attract more affluent residents and families and increase the overall homeownership rate.

In addition to historical disinvestment, such as the City’s focus on downtown revitalization at the expense of neighborhood business districts, these neighborhoods have been hit hard in recent years by the foreclosure crisis. Along with focusing on the residents of a neighborhood, many CDCs are prioritizing business district revitalization and therefore target their efforts towards businesses and potential visitors. This CDC activity tends to be concentrated on the west side and uptown where many low-income residents currently live (See Map 3 below).

Informal neighborhood boundaries, such as streets and highways, are commonly used to demarcate one neighborhood from another. These boundaries may differ slightly depending on who you ask. Some neighborhoods have boundaries that are clearer and more agreed upon. Some respondents did describe the neighborhood boundaries.
Map 4: CDC Office Locations

Map 5: 2015 Development Projects
Survey respondents were asked to characterize the main activities of their organization (See Chart 5 below). Most, but not all, included housing as a main activity. Economic development and community engagement were primary activities of CDCs. After those two came business district revitalization, housing rehabilitation, and housing production as the most reported activities. If all housing related activities were combined (production, rehabilitation, and management) then housing would be first on the list of main activities of CDCs. More than half of CDCs also reported advocacy as a main activity. Other activities included housing management, workforce development, social services, and job training. A few CDCs also reported being involved in other activities (such as health and wellness initiatives and beautification) however none of these activities were included by more than one CDC.

The CDCs were at different stages of the development process. Ten of the CDCs surveyed (59%) completed development projects in 2015. Most of the remaining CDCs were either involved in development projects that were not completed in the past year or obtained funding in 2015 for projects to be completed at a later date. Newer CDCs must focus on obtaining funding to launch not only projects, but to build the organization. Many of the organizations that did not complete development projects in 2015 were securing funding for future development projects and/or building their capacity. Sources of funding for these projects include banks, government (City of Cincinnati, Federal block grants, tax credits), foundations and others. All development projects had multiple sources of funding. Three (17%) are not currently involved in any development projects. It is worth noting that these three CDCs also function without paid staff.

CDCs completed the production or rehabilitation of over 150 housing units in Cincinnati in 2015 (See Table 5, p. 16). Over 20% of this housing was market rate housing. But that is not all that they did. CDCs brought small businesses into their neighborhoods, hosted place-making events and fostered a sense of community identity, connected residents with social services and job opportunities, obtained façade grants and initiated plans for vacant parcels, and advocated for community and economic development throughout the city.
<table>
<thead>
<tr>
<th>CDC</th>
<th>Project</th>
<th>Funders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Camp Washington Community Board</td>
<td>3088 Henshaw</td>
<td>City and private funds</td>
</tr>
<tr>
<td></td>
<td>1373 Avon</td>
<td>Private funds</td>
</tr>
<tr>
<td></td>
<td>3017 Massachusetts</td>
<td>$14 million. Crossroads has private fundraising, conventional financing, and New Market Tax Credits</td>
</tr>
<tr>
<td>Clifton Heights CURC</td>
<td>sold Old St. George to Crossroads</td>
<td>City of Cincinnati, Duke Energy, HCDC, private donations, PNC Bank</td>
</tr>
<tr>
<td>College Hill CURC</td>
<td>2014 CiTiRama single family project completed</td>
<td>City of Cincinnati, Duke Energy, HCDC, private donations, PNC Bank</td>
</tr>
<tr>
<td>Cornerstone Corporation for Shared Equity</td>
<td>1629 Vine Street, predevelopment of 8 affordable residential units</td>
<td>City of Cincinnati, Duke Energy, HCDC, private donations, PNC Bank</td>
</tr>
<tr>
<td>NEST/ Cincinnati Northside CURC</td>
<td>4118 Lakeman, Single family house, sold to veteran</td>
<td>HOME funded</td>
</tr>
<tr>
<td></td>
<td>1726 Hanfield, Single family house</td>
<td>NSP and HOME funded</td>
</tr>
<tr>
<td></td>
<td>4100 Fergus, 2 Market Rate rental units</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Block of Fergus Street acquired, demolished, and packaged for redevelopment by D-Has</td>
<td></td>
</tr>
<tr>
<td>Over-the-Rhine Community Housing</td>
<td>Beasley Place, 1405-1407 Republic St, 13 units affordable family housing - completed June 2015, renovation of 2 historic building</td>
<td>State and federal historic tax credits, housing development gap funding from Ohio Housing Finance Agency, HOME (City), First Financial Bank, local foundation funding, equity from OTRCH</td>
</tr>
<tr>
<td></td>
<td>Anna Louise Inn, 85 units permanent supportive housing for women coming out of homelessness</td>
<td>City HOME funding, AHP Funds from FHLB, low-income housing tax credits</td>
</tr>
<tr>
<td></td>
<td>Picnic and Pantry, 1400 Republic Street - rehab of a commercial storefront, first new commercial development in neighborhood people of all incomes can afford</td>
<td>Finance Fund economic development grant, OTR Chamber of Commerce, Miami University, OTRCH</td>
</tr>
<tr>
<td>Price Hill Will</td>
<td>St. Lawrence Public Square, 6 rehabbed housing units, 2 started</td>
<td>SC Ministries, LISC, Place Matters, HOME, CBDG, City, CDC Association, grants, donors</td>
</tr>
<tr>
<td>----------------</td>
<td>---------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Walnut Hills Redevelopment Foundation</td>
<td>Trevarren Flats</td>
<td>City, Cincinnati Development Fund, State and Federal historic credits, Fifth Third Bank</td>
</tr>
<tr>
<td>Westwood CURC</td>
<td>Demolition of 3127 Bracken Woods, long term blight/nuisance</td>
<td>City of Cincinnati</td>
</tr>
<tr>
<td></td>
<td>(not completed as of Jan. 2016) Town Hall Area Improvements</td>
<td>City of Cincinnati award for design and streetscaping plans</td>
</tr>
<tr>
<td></td>
<td>pre-development of historic firehouse</td>
<td>BB&amp;T Technical Assistance grant</td>
</tr>
<tr>
<td></td>
<td>planning and development of Historic Business District</td>
<td>HCDC Technical grant</td>
</tr>
<tr>
<td>Working In Neighborhoods</td>
<td>3731 Borden; 3763 Borden; 1549 Ambrose</td>
<td>City of Cincinnati, Cincinnati Development Fund, Social Investment Funds, Private Grants, Lead Grant, Duke Energy</td>
</tr>
</tbody>
</table>
Private donations were the most reported source of funding (94% of CDCs). Next, the City of Cincinnati was an important source of funding (82%). While the CDC Association is not a direct funder, it helps to leverage resources for local CDCs. Other sources of funding, in descending order of prevalence, include financial institutions/banks, neighborhood events, foundations, LISC, the federal government, and the state of Ohio.

Almost half of respondents received at least 50% of their funding from grants. These grants were provided by government (City of Cincinnati, HUD), banks, corporations, and foundations.

When asked if the organization's budget is increasing, staying the same, or decreasing, only one CDC reported that its budget is decreasing. Over half of CDCs reported their budgets increasing. A similar question was asked regarding opportunities for funding; the most common response was that opportunities for funding are decreasing. It is unclear where the funding to cover this gap is coming from. CDCs may be relying more on grants, private funds may be increasing, or CDCs may be falling short of the funding needed to carry out their full budgets.
Table 5: List of Reported Funders

<table>
<thead>
<tr>
<th>Banks</th>
<th>Government</th>
<th>Foundations</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>PNC</td>
<td>City of Cincinnati</td>
<td>LISC (local &amp; national)</td>
<td>Duke Energy</td>
</tr>
<tr>
<td>Wells Fargo</td>
<td>HUD (HOME, CBDG, NSP) *</td>
<td>Reilly Trust</td>
<td>MetLife</td>
</tr>
<tr>
<td>First Financial</td>
<td>Low-Income Housing tax credits</td>
<td>Hubert Foundation</td>
<td>Toyota</td>
</tr>
<tr>
<td>BB&amp;T</td>
<td>State and Federal historic tax credits</td>
<td>Haile Foundation</td>
<td>Place Matters</td>
</tr>
<tr>
<td>US Bank</td>
<td>Ohio Housing Finance Agency</td>
<td>Schott Foundation</td>
<td>Interact for Health</td>
</tr>
<tr>
<td>Fifth Third</td>
<td></td>
<td>Schroth Family Trust</td>
<td>HCDC</td>
</tr>
<tr>
<td>Union Savings</td>
<td></td>
<td>Greater Cincinnati Foundation</td>
<td>Social Investment Funds</td>
</tr>
<tr>
<td>AHP **</td>
<td></td>
<td>Cincinnati Development Fund</td>
<td>OTR Chamber of Commerce</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SC Ministries</td>
<td>Finance Fund</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Miami University</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Private Donations</td>
</tr>
</tbody>
</table>

*HUD Federal Block Grants distributed to state and local governments
**Affordable Housing Program, funds from Federal Home Loan Banks

Chart 7:

Percentage of Funding from Grants

- 90-100%
- 75-80%
- 40-50%
- 5-25%
- NONE
- NO RESPONSE

Number of CDCs
Partnership within Neighborhoods

CDCs in Cincinnati have some geographic overlap with each other. The fourteen CDCs surveyed represent fourteen of Cincinnati’s 52 neighborhoods. Two CDCs represent multiple neighborhoods - Price Hill Will works in the technically separate neighborhoods of East Price Hill, West Price Hill, and Lower Price Hill and Working In Neighborhoods (WIN) currently works in South Cumminsville, Northside, and College Hill.\(^9\)

Two CDCs work in the neighborhoods of Mt. Auburn, College Hill, and Over-the-Rhine. How this plays out is quite different in each of these neighborhoods. The College Hill Community Urban Redevelopment Corporation (CHCURC) and Working In Neighborhoods (WIN) both work in the College Hill neighborhood and maintain a relationship with one another. CHCURC focuses on the business district along Hamilton Avenue and WIN’s works in College Hill on housing development. Each organization mentioned the other among their partners. Communication between the organizations allows them to complement one another and increase their impact in the neighborhood. WIN is not the typical CDC because it offers housing counseling services and energy education throughout the Tri-State area, as well as other programs and services throughout Hamilton County. WIN has been working in housing development since 1981 in targeted neighborhoods. In the past they have also built housing in Winton Place and Elmwood Place.

Mt. Auburn was the first Cincinnati neighborhood with a CDC; today there are two in the neighborhood - the Mt. Auburn Community Development Corporation and the Mt. Auburn Good Housing Foundation. Despite working in the same relatively compact geographic area, the two organizations do not appear to be working together. The Mt. Auburn CDC is a new organization that was created this past fall with a focus on establishing a neighborhood business district. The main activities of the organization are economic development, neighborhood business district revitalization, and community engagement. They are one of the few CDCs that do not (or do not yet) work on housing. The Mt. Auburn Good Housing Foundation selected all programming options to describe the activities of the organization. In their responses regarding communication with the community, both groups report a relationship with the Mt. Auburn Chamber of Commerce.

Four CDCs are currently active in the Over-the-Rhine neighborhood; Over-the-Rhine Community Housing (OTRCH) and Cornerstone Corporation for Shared Equity participated in the survey, the other CDCs did not respond. Both of these CDCs focus on affordable housing and serving low-income residents. There is enough need in the neighborhood and both CDCs have the institutional capacity to produce and manage more housing units than other Cincinnati CDCs. OTRCH and Cornerstone co-manage two developments with a total of 34 units through the Renter Equity program, which allows renters to build wealth and fosters a sense of ownership for residents.

\(^9\) WIN has other programs that extend to other areas of Cincinnati and Hamilton County.
Partnerships between Neighborhoods

There are several examples provided of CDCs from different neighborhood that work together. When the Sedamsville CDC began, the Camp Washington Community Board served as its fiscal agent. Now the College Hill CURC serves as fiscal agent for both Sedamsville and the newly-established Mt. Airy CURE. Additionally, since Mt. Airy CURE is focused on business district development, it made more sense for another CDC with the same focus to play this role.

These types of partnerships have been encouraged as a way to increase capacity. Paul Rudemiller, President of the Camp Washington Community Board, spoke at a RoundTable hosted by the CDC Association on CDC Partnerships. When discussing the initial role his organization played in helping the Sedamsville CDC launch, he argued for partnerships that are mutually beneficial, but also that may shift when appropriate.

At this same event, Sara Sheets of MCURC spoke about how internships can be mutually beneficial for different organizations, using the example of being approached by the Mt. Washington Community Council regarding supervision of an economic development intern. MCURC received a fee for supervising the intern and Mt. Washington was able to take advantage of the valuable resource that interns can be.

Other CDCs offer resources to help CDCs start-up. Clifton Heights received assistance from Northside and Camp Washington to begin a new homeownership initiative. They also consulted Walnut Hills and College Hill concerning different for-profit developers.

Themes recurrent in survey responses with respect to CDC partnerships were open communication and participation in networking events, for example those hosted by the CDC Association and LISC.

Other Partnerships

CDCs listed numerous partners including neighborhood community councils, business associations and chambers of commerce, churches and other faith-based organizations, and schools, from elementary to university. Typically, CDCs have relationships with other non-profits also working in their target area. Other partners included groups promoting urban gardens and health initiatives, city departments, police, developers, recreation centers, and businesses. Several organizations, such as Cornerstone, Madisonville, OTRCH, WIN, and Walnut Hills, partnered with social service providers and groups providing job training and workforce development. These are activities sometimes undertaken by CDCs, but many CDCs instead may defer to other service providers nearby.
Generally, the organizations were most commonly founded to address a lack of affordable housing, blight and neighborhood decline, and for business development. The Camp Washington Community Board was first established in 1975 by residents and local business owners who mobilized to establish a Neighborhood Center. It later evolved into a development corporation to address other identified needs. A few CDCs were created to implement a specific plan or to facilitate a particular development. Two organizations referred to community control of housing and input on the redevelopment process as the main reason for their creation. Over-the-Rhine Community Housing was created as a merger between two organizations (ReStoc founded in 1977 and the OTR Housing Network founded in 1988) with the guiding principle that housing is the solution to homelessness. Specifically citing the environment of the 1970s and its impact on low- and moderate-income families, WIN formed as a way to give residents more of a voice in local issues including utility reform, affordable housing, and quality-of-life issues such as crime.

The Mission Statements of CDCs ranged from short and simple to comprehensive and detailed. Recurrent themes emerged from an analysis of these statements. Housing was a prominent theme, including specifically creating and maintaining quality affordable housing, the promotion of homeownership, and increasing property values. Other frequent concepts were improving the quality of life for residents, emphasizing physical development, and prioritizing low-income residents. Ideas most commonly repeated were empowerment, revitalization, and stabilization, thriving, sustainable, and vibrant.

The following were reported in the survey as the most pressing problems in the CDC target areas:

- Neighborhood business district in need of revitalization
- Need for more investment
- Shortage of affordable housing
- Lack of homeownership
- Vacant properties & blight
- Gap between the cost and value of redevelopment
- Maintaining an inclusive and diverse neighborhood
- Unemployment
- Need for effective asset building

With more resources CDCs would do bigger projects, more development, and more types of development. They want to do things on a larger scale, increase their production, expand certain programs. CDCs would also like to expand their focus, both spatially and programmatically. Cornerstone Corporation for Shared Equity would like to expand the Renter Equity program. Camp Washington Community Board has their eye on a specific city block, 75% of which is currently vacant land. Mt. Auburn CDC is working to raise funding for a comprehensive study of neighborhood needs. Education was a common theme, including being able to offer quality-of-living classes, job training and placement, and homeownership classes. Cincinnati CDCs would also undertake marketing campaigns, host place-making events, create community parks, tackle strategic planning, coordinate social services, and grow projects that had to be scaled down from their original vision.
Competent and qualified professional staff is a key component of the organizational capacity of CDCs. Without any full-time staff, or any paid staff, CDCs are extremely limited in what they are capable of accomplishing. Cincinnati CDCs with no paid staff were unable to complete any development projects in 2015. Unsurprisingly, the most housing units were produced by the CDCs with the most staff members. This suggests that the organizational capacity of these CDCs is very strong in regards to effective and competent staff, effective fiscal operation, and project management.

Six CDCs that were founded between 1975-1978, in addition to their lengthy history and established reputations, have the institutional capacity that comes with having paid staff and are currently active in development projects in their respective target area. These six organizations are the Camp Washington Community Board, College Hill CURC, Madisonville CURC, Walnut Hills Redevelopment Foundation, Westwood CURC, Working in Neighborhoods. The life cycle of nonprofits often includes periods of inactivity for a variety of reasons. While this research did not delve into the history of individual organizations or the state of community development in the past, whether or not these CDCs were dormant at one time or another over the past forty years, these can be considered the First Wave of CDCs in Cincinnati that remain active today. This indicates a well-established community development industry in Cincinnati with a long history of accomplishments and an institutional memory that can benefit newer organizations.

Defining the boundaries of an area may be less relevant when one considers that an individual CDC often does not have the capacity to address all neighborhood issues. The major exception to this is non-physical development, such as community engagement. Madisonville is an example of a neighborhood with a CDC actively working to promote a shared identity among residents. One could interpret this question in either a spatial sense, reasonable due to the focus of the CDC model being on physical redevelopment and the built environment, or in a personal sense, considering the persons the CDC aims to reach and where they live. Some CDCs described their target area much more narrowly, giving the boundaries of a neighborhood business district, for example. A revived business district has impact upon much more than just a segment of the main street; it makes the neighborhood as a whole more attractive to visitors and investors.

While most CDCs participated in some form of housing production or management, this is not the priority for all Cincinnati CDCs. There are several ways one could categorize these different organizations by their activities, most of the CDCs maintain a focus on either housing or on Neighborhood Business District revitalization.

Not all CDCs completed development projects this past year, however, most development tends to be a multi-year process. CDCs are at different stages with different projects. Newer CDCs must focus on obtaining funding to launch not only projects, but their organization. Many of the organizations that did not complete development projects in 2015 were securing funding for future development projects and/or building their capacity.
How CDCs are building capacity

While the capacities of Cincinnati CDCs are growing, many opportunities for funding are decreasing, particularly government funding. Either there just isn’t enough money to go around or the money is not being given to community development. Several CDCs are working with the CDC Association to create a sustainable method for providing operating support to CDCs. CDCs are also conscious of the possibility of increased competition for decreasing resources and are working to avoid this pitfall. Leaders in Cincinnati’s community development industry are fighting for collaboration over competition.

CDC Association Executive Director Patricia Garry discussed the struggle for resources, particularly the dwindling funds of the locally administered federal Community Development Block Grant (CBDG) in a recent feature article on the strengths of Cincinnati CDCs. “One of the newer and fastest-growing programs at the CDC Association of Greater Cincinnati is simultaneously a response to both dwindling resources and the need to build capacity to attract new sources of capital and funds for community development: a Back Office Program.”

The Back Office Program both helps CDCs to build capacity and saves them money by connecting them with professional services such as strategic planning, website development, and accounting at a considerable discount. Due partly to the efforts of the CDC Association, which has been connecting area CDCs for almost four decades, many CDCs in Cincinnati have strong networking capacity.

Historically CDCs are known for housing production, most CDCs in Cincinnati are currently focusing on Neighborhood Business District (NBD) revitalization. While all of the following CDCs do work in housing production, rehabilitation, and/or management, the first four currently focus on business and commercial development. The remaining two CDCs emphasize housing as their top priority.

Only one Cincinnati CDC perceives the quality of life in their neighborhood to have decreased over the last five years. This is also a newly established CDC - it may be worth revisiting this question in five years. While a question regarding one person’s perception of the quality of life in an area is highly subjective, it is telling that almost all respondents consider the quality of life to be improving in their neighborhoods.

CHCURC is currently focused on a rebirth of the Hamilton Avenue corridor NBD in the College Hill neighborhood. This work has included acquiring and demolishing properties, selecting developers for specific projects, façade improvements, and planning redevelopment. Working with the city, CHCURC has secured 7.5 acres of land at the intersection of Hamilton Avenue and North Bend Road, which will be home to a mixed-use development known as College Hill Station. It is currently in the planning and design stage. Since 2009, CHCURC and the City have acquired nine properties for redevelopment along Hamilton Avenue. The future Marlowe Court will house retail space and senior affordable housing and is scheduled for completion in June 2017. While not the only projects the organization is currently working on, these two projects alone cover over 10 acres at the core of the business district in the neighborhood.

How College Hill CURC is building capacity...

In early 2016, CHCURC was able to hire a full-time Executive Director, significantly increasing its organizational capacity. With only part-time staff, CHCURC was able to secure funding and acquire the properties necessary for a complete redevelopment of the neighborhood’s core business corridor. This boost in organizational capacity will likely expand the organization’s programmatic capacity as well, enabling them to widen the scope of their work and effectively implement their plan for NBD revitalization. Strong relationships with the CDC Association, numerous neighborhood civic organizations, and other nonprofits working in College Hill indicate solid networking capacity. Having hired a Director of Marketing and Communication, CHCURC will enhance their political capacity. This CDCs strengths and undeniable potential will positively impact their resource capacity.
Walnut Hills Redevelopment Foundation

WHRF has completed and upcoming development projects centered in the NBD along East McMillan Street, which the organization succeeded in recently transforming to a two-way street. They have been busy restoring historic buildings, three of which make up the development Trevarren Flats - 30 market rate apartments and five commercial spaces. In addition to attracting new business, WHRF also emphasizes community engagement and placemaking, through pocket parks, a community garden, and dozens of neighborhood events throughout the year.

How WHRF is building capacity...

In Walnut Hills, this CDC is growing its networking capacity through building public/private partnerships. An emphasis on community building allows the organization to respond to community concerns, a strength in its programmatic capacity. Political capacity is enhanced through community participation. This has taken place through community organizing, survey collection, and listening sessions. Currently this participation has been expanding through the organization’s placemaking efforts. This CDC is growing and bringing vibrancy to Walnut Hills.

Madisonville Community Urban Redevelopment Corporation

Madisonville has two historically commercial areas: the intersection of Bramble Ave. and Whetsel Ave. and the intersection of Whetsel Ave. and Madison Rd. MCURC is prioritizing the development of the latter but has plans for more comprehensive community development in the neighborhood. While making piecemeal progress on the redevelopment of Madison and Whetsel, MCURC is actively engaging the community through hosting events, promoting health and wellness, education, and the arts. Residents came together in 2012 for a community planning process that resulted in the Madisonville Quality-of-Life Plan. This process and a social capital survey showed that residents’ top priority was the revitalization of the NBD. MCURC continues to promote affordable housing, rehab properties, address vacant lots, and bolster homeownership. Most recently they have been successful in attracting new businesses to the NBD, while continuing to work with existing business owners.

How MCURC is building capacity...

For 35 years MCURC was a volunteer organization and began hiring professional staff in 2013. The organization continues to grow through adding staff and responding to the needs of the community. One of MCURC’s biggest strengths is its range of partnerships, from social service agencies that serve Madisonville’s residents to organizations that promote health and wellness city-wide and more. MCURC’s mission is to advance comprehensive community development in the neighborhood and their programmatic capacity reflects this. Responding to community concerns, MCURC is able to shift priorities, while continuing to promote different aspects of development, a capability enhanced by its successful partnerships.
Clifton Heights Community Urban Redevelopment Corporation

The Clifton Heights CURC was established to implement the Clifton Heights/University of Cincinnati Joint Urban Renewal Plan. The focus area of this plan is the NBD directly south of the University, along Calhoun and West McMillan Streets. Since 2001 this corridor has been completely transformed. Hundreds of apartments, thousands of square feet of retail space, and more efficient parking are just a few of the results of this process. CHCURC has leveraged both public and private resources for streetscape and façade improvements. The organization is currently in the pre-development stage of the last vacant parcel remaining in its target area. As the original plan creating this CDC approaches completion, CHCURC is gradually shifting its focus to homeownership. Combating perceptions regarding safety and the challenges that accompany a high concentration of student housing (such as ‘party streets,’ inflated property values, neglect due to ability to profit regardless of condition, etc.), CHCURC highlights the neighborhoods many assets, including proximity to uptown and downtown (the main job centers of the city), walkability, and an affordable, historic housing stock.

How Clifton Heights CURC is building capacity...

Because the University of Cincinnati provides all operating support for CHCURC, the organization is able to focus on securing funding for development. This is an advantage in terms of both organizational and resource capacity. By shifting the focus to promoting homeownership, CHCURC is expanding its programmatic capacity and adapting to changing contextual factors.

Working In Neighborhoods

WIN breaks down its 2015 accomplishments into the categories of Community Building, Home Ownership, and Economic Learning. The organization currently trains community leaders, connects residents to job training and employment assistance, offers homebuyer classes and homeownership counseling, and provides financial literacy workshops, among other services. Housing construction and rehabilitation currently takes place in three neighborhoods, with previous housing development in three other local communities. Energy efficiency is a key component of these developments, advancing both environmental and financial sustainability. Having originated to promote the interests of low- and moderate-income Hamilton County residents, WIN goes beyond physical development with budget and credit counseling, accessible to Cincinnatians outside WIN’s target area.

How WIN is building capacity...

WIN’s high capacity comes from the diversity of its programming efforts and its adaptability to a changing context. The services WIN provides reach individuals in a variety of geographies, from the neighborhood level, to the tri-state regional level. From their base in the neighborhood of S. Cumminsville, they are able to garner strong community support. In other neighborhoods where they work, such as College Hill, they maintain open communication with other CDCs and community organizations in order for their efforts to be complementary, rather than competitive.
Over-the-Rhine Community Housing

OTR Community Housing is fighting to keep affordable housing in a neighborhood despite real estate market pressures. The organization owns over 90 buildings and manages over 400 housing units in this rapidly-changing neighborhood.

How OTRCH is building capacity...

OTRCH benefits from strong community support and participation. Their roots are deep in the neighborhood and they are the product of a successful merger between ReStoc (founded in 1977) and the OTR Housing Network (founded in 1988) in 2006. OTRCH has a larger staff than all other Cincinnati CDCs surveyed, and therefore has the capacity to produce and manage housing at a much larger scale.

Image Source: http://otrch.org/press-room/resources/
Addressing CDC Challenges

The CDC Association plays a critical role in addressing the needs identified at the beginning of this report. CDCs that fail to build capacity will eventually be forced to either downsize or dissolve. This is damaging to the CDC industry in general and detracts from the credibility of CDCs in the eyes of funders and local governments. Though CDCs themselves have little control over contextual factors, such as changes in markets and city policies, strategic planning can prepare individual CDCs for what may come. The CDC Association and others advocate for CDCs in Cincinnati and for policies that will help them to strengthen their capacity, increase local support, and insulate them from market fluctuations.

From their study of failed, downsized, and merged CDCs nationwide, Rohe et al. (2000) identify six organizational factors that played a role in the decline of individual CDC capacity and led many CDCs to close their doors.

**Breadth of mission:**
Overall, the stated missions of CDCs were either general enough to be flexible or encompassed many different aspects of neighborhood community development. Few, if any, Cincinnati CDCs appear to have a mission narrow enough to be cause for concern. CDCs with a highly specific focus often were able to shift that focus in light of a changing environment. One example of this is the Clifton Heights CURC, which is currently transitioning to an emphasis on homeownership, as the revitalization of the Calhoun/McMillan corridor nears completion.

**Dependence on a single funding source:**
All CDCs surveyed reported a number of different funding sources, typically including government, foundations, financial institutions, and private donations. One concern here, however, is a possible overreliance on grant funding. Typically, newer CDCs are more reliant on funding from grants and as they become more established, they find more sustainable sources of funding.

**Internal management problems:**
While management is an important factor in CDC success, any internal management problems that may be cause for concern were not revealed in the results of this survey.

**Lack of staff or board capacity:**
The effectiveness of CDC boards was not addressed in this survey. The problem of a lack of staff, however, was apparent in the survey results. None of the CDCs without paid staff were able to complete development projects in 2015. Competent and qualified staff is crucial to the success of CDCs.

**Communication problems:**
Nonprofits are accustomed to selling themselves to funders, justifying the potential investment they are seeking. This blurs the accuracy of some responses - an organization reporting what they would like to do as opposed to what they are actually doing. In one Cincinnati neighborhood there are two groups working with a relatively low capacity in terms of developments completed, networking capacity, and operational capacity. With better communication, these organizations can find a way to complement each other's work, or perhaps, to maximize efficiency and combine capacity, the two could possibly merge.

**Lack of community support:**
Survey results did not reveal which CDCs may struggle with maintaining the support of the community. Certainly, this would affect the CDCs ability to carry out their functions and has the potential to damage the organizations' credibility.

11Stable core operating support, assistance locating new sources of funding for projects, assistance with strategic planning, training and technical assistance, advocacy for a neighborhood agenda, help publicizing community development and CDC activities to corporate and philanthropic communities (Nye & Glickman, 2000).
A spatial analysis of the poverty rates in 2010 Census Tracts throughout Cincinnati indicated three areas that meet the following criteria:

1. High-poverty rates
2. No community development activity discovered throughout research period.

To address the gap in community development in Cincinnati, these are the areas proposed for further research and analysis:

- Mill Creek Valley: North and South Fairmount, Millvale, English Woods, East Westwood, the Villages of Roll Hill (formerly Fay Apartments)
- Winton Hills & Carthage
- Linwood & East End

Poverty Data from the U.S. Census Bureau, American Community Survey, 2009-2014
Recommendations

For building capacity and increasing the impact of community development in Cincinnati:

**Expand the capacity of CDC Association**
The CDC Association is the greatest asset the CDCs in Cincinnati have. Expanding the capacity of the CDC Association - through increased financial resources, staff, and other supports - will in turn increase the capacity of the CDCs with which it works.

**Encourage multi-neighborhood CDCs**
Not every neighborhood needs their own CDC. Some work well to foster a sense of neighborhood identity, yet many others cannot sustain themselves. “Large CDCs have more capital capacity, more political capacity, and more collective talent to conduct physical redevelopment that can outpace community deterioration (Stoecker 1997).” Due to the importance of having a capable paid staff, it is not feasible for every neighborhood to have their own individual CDC.

**Strategic planning on a regional basis**
The Cincinnati metropolitan area is an interconnected region where the city and suburbs have significant influence over one another. In Hamilton County, Northern Kentucky, and beyond, the regional economy is not dominated by one specific anchor. Regional planning will allow collaboration to take place over competition for resources, as well as foresee and mitigate arising challenges.

**Need for a significant jump in financial investment**
CDCs invest in communities that need investment - and they are succeeding. However, before CDCs can make these investments, they spend years acquiring the resources to begin each individual project. Cincinnati CDCs have the organizational capacity and the experience to undergo bigger development projects. What they don’t have is enough money.

**More staff: to compete must offer benefits and advancement opportunity**
It is not enough to just have paid employees. Staff must be competent, efficient, and have skills related to housing, development, and organizing. In order to compete with the public sector, private sector, and other non-profits, CDCs need to be able to offer benefits to employees. Additionally, CDC growth will allow for further career advancement.

**Where there are gaps, utilize community councils through community organizing**
Not all low-income areas in Cincinnati are served by CDCs. Whether CDCs are appropriate for all neighborhoods is unclear. Each neighborhood in Cincinnati has a city-approved community council, whether currently active or not. This pre-existing structure could provide a base for community organizers to network with both residents and other community efforts within the neighborhood. By strengthening the neighborhood community councils, the question of whether or not there is resident support for a new CDC or nearby CDC expansion can be addressed.
References


Appendix A - SURVEY: COMMUNITY DEVELOPMENT IN CINCINNATI

Basic Information

1. What is the name of your organization?
2. What is your name and position within the organization?
3. Please provide the address, phone number, an email, and the website for your organization.

Organization and Structure

These questions are targeted at understanding the basic structure of community development organizations in Cincinnati.

4. When was your organization founded?
5. Why was the organization established? Was there a particular event or issue that led to the creation of your organization?
6. Do you have a Mission Statement? If so, what is it?
7. Is your organization a registered 501(c)(3)?
8. Do you have paid staff? If so, how many full-time and/or part-time?
9. How many members are on your Board of Directors?
10. How often does the Board meet?
11. How many members of the Board are residents of your target area (i.e. neighborhood)?
12. How do you communicate with the community? (Select all that apply)
   - Newsletter
   - Website
   - Facebook
   - Twitter
   - Email
   - Flyering
   - Door-knocking
   - Other
13. Do you have regular community meetings? When and how often?
14. Are there other meetings you regularly attend to interact with community members? Please describe.

CDC Geography

These questions are aimed at understanding the spatial dynamics of community development activities in Cincinnati. We will use your responses to create a map of CDC activity in Cincinnati.

15. Is your work focused on a particular neighborhood? Which one(s)?
16. What are the geographic boundaries of your organization's target area? For example: "We serve the area south of Main Street between Maple Ave and Elm Road, north of State Street." Please feel free to share anything else about your organization's boundaries.
17. How would you describe your target population(s)?
Programming

These questions are aimed at understanding the types of activities performed by CDCs.

Feel free to elaborate in the space marked ‘Other’

18. How would you characterize the main activities of your organization? Check all that apply.
   - Housing Production
   - Housing Rehabilitation
   - Housing Management
   - Economic Development
   - Neighborhood Business District Revitalization
   - Workforce Development
   - Job Training
   - Social Services
   - Community Engagement
   - Advocacy
   - Other

19. What do you see as the most pressing problems in your target area?
20. Please list all development projects completed in 2015. What are the sources of funding for your projects?

Resource Distribution

The following questions are aimed at understanding the sources of funding and resources available to CDCs in Cincinnati.

21. From whom do you receive funding?
   - City of Cincinnati or other local municipality
   - State of Ohio
   - Federal government
   - LISC
   - Foundations
   - CDC Association
   - Private Donations
   - Neighborhood Events
   - Financial Institutions/Banks
   - Other

22. What percentage of your funding comes from grants?
23. What organizations have provided grants?
24. You would characterize your budget as: Increasing/Staying the Same/Decreasing
25. Opportunities for funding are: Increasing/Staying the Same/Decreasing
Partnerships and Networking

The purpose of these questions is to learn about the relationships between different organizations and other entities. Ultimately, the goal is to be able to map out networks, strengthen current partnerships, and facilitate new relationships.

26. Do you partner with other CDCs in Cincinnati? If so, which one(s)? How do you collaborate?
27. Do you partner with other local community organizations and/or non-profits? If so, which one(s)?
   This could include social service agencies, churches, neighborhood groups, etc.
28. Do you have other partners that weren’t included in the previous two questions? (i.e. public, private groups)

Vision

These final questions are aimed at understanding where CDCs envision themselves in the future, their broader vision, and providing a space for you to include any information that you find important and would like to share.

29. If funding and/or staffing were not an obstacle, what programs or activities would your organization like to take on?
30. Compared with five years ago, quality of life in your target area has: Improved significantly/Improved slightly/Stayed the same/Decreased slightly/Decreased significantly
31. What is the vision for your organization in the next five years? What are your long-term goals?
32. Is there anything else you would like to share about your organization, its work, or community development in Cincinnati?
Appendix B - UNIVERSITY OF ILLINOIS
MASTERS CANDIDATES POSTER PRESENTATION

understanding how cdcs work: community development corporations in Cincinnati

what are cdcs?
Community development corporations are nonprofit organizations that emphasize physical redevelopment.

- They typically serve a low-income community.
- They are governed by a community-based board.
- They serve as an ongoing producer in housing, commercial-industrial, or business development.

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what are cdcs doing?

CDCs typically focus on housing and/or neighborhood business district revitalization.

how do they communicate with the community?

Community councils serve as resident voice.

the state of community development is constricted

-Patricia Garvey, Executive Director of the CDC Association

where are the low-income communities?

The state of community development is constrained.

CDCs are primarily funded by government, foundations, and banks.

the CDC Association of Greater Cincinnati leverages expertise and resources, mobilizes collaboration to increase impact, provides operating support and technical assistance, facilitates partnerships, and advocates for the entire community development industry.

what are the sources of funding?

The CDC Association of Greater Cincinnati leverages expertise and resources, mobilizes collaboration to increase impact, provides operating support and technical assistance, facilitates partnerships, and advocates for the entire community development industry.

recommendations for building capacity and increasing the impact of community development in Cincinnati

- Expand the capacity of CDC Association.
- Encourage multi-neighborhood CDCs.
- Strategic planning on a regional basis.
- Need for a significant jump in financial investment.
- More staff to compete must offer benefits and advancement opportunity.
- Where there are gaps, utilize community councils through community organizing.

Erica Horton | Master of Urban Planning 2016 | University of Illinois at Urbana-Champaign | Advisor: Dr. Stacy Harwood | Client: CDC Association of Greater Cincinnati

Presented May 5, 2016
Appendix C - LIST OF ACTIVE CDCs IN CINCINNATI

<table>
<thead>
<tr>
<th>CDC Name</th>
<th>Website</th>
<th>Year est.</th>
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<tbody>
<tr>
<td>Avondale Comprehensive Development Corporation</td>
<td>a-cdc.org</td>
<td></td>
</tr>
<tr>
<td>Bond Hill Community Urban Redevelopment Corp.</td>
<td>bondhillcurc.org</td>
<td>1974</td>
</tr>
<tr>
<td>Brewery District Community Urban Development Corp.</td>
<td>otrbrewerydistrict.org</td>
<td>2005</td>
</tr>
<tr>
<td>Camp Washington Community Board</td>
<td>camp-washington.org</td>
<td>1975</td>
</tr>
<tr>
<td>Clifton Heights Community Urban Redevelopment Corp.</td>
<td>chcurc.org</td>
<td>1999</td>
</tr>
<tr>
<td>College Hill Community Urban Redevelopment Corp.</td>
<td>chcurc.com</td>
<td>1975</td>
</tr>
<tr>
<td>Community Land Cooperative of Cincinnati</td>
<td>communitylandco-op.org</td>
<td>1980</td>
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<tr>
<td>Cornerstone Corporation for Shared Equity</td>
<td>csequity.org</td>
<td>1986</td>
</tr>
<tr>
<td>Corporation for Findlay Market</td>
<td>findlaymarket.org</td>
<td>2000</td>
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<tr>
<td>Madisonville Community Urban Redevelopment Corp.</td>
<td>mcurc.org</td>
<td>1975</td>
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<tr>
<td>Mt. Airy Community Urban Redevelopment Enterprise</td>
<td>mtairy-cinci.org/cure/</td>
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<td>Mt. Auburn Community Development Corporation</td>
<td></td>
<td>2015</td>
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<td>Mt. Auburn Good Housing Foundation</td>
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<td>NEST/ Cincinnati Northside CURC</td>
<td>cncurc.org</td>
<td>2005</td>
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<tr>
<td>Over-the-Rhine Community Housing</td>
<td>otrch.org</td>
<td>2006</td>
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<tr>
<td>Pleasant Ridge Development Corporation</td>
<td>pleasantridge.org/development-corp/</td>
<td>1981</td>
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<tr>
<td>Price Hill Will</td>
<td>pricehillwill.org</td>
<td>2004</td>
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<tr>
<td>Roselawn Community Urban Redevelopment Corp.</td>
<td>sedamsvillecdc.com</td>
<td>1981</td>
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<td>Sedamsville Community Development Corporation</td>
<td>sedamsvillecdc.com</td>
<td>2013</td>
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<td>Village Development Corporation</td>
<td>villagedevcorp.org</td>
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<tr>
<td>Walnut Hills Redevelopment Foundation</td>
<td>walnuthillsrf.org</td>
<td>1977</td>
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<tr>
<td>Westwood Community Urban Redevelopment Corp.</td>
<td></td>
<td>1978</td>
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<tr>
<td>Working In Neighborhoods</td>
<td>wincincy.org</td>
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