Codman Square Health Center Earned Income Tax Credit Kiosk

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Abstract

Codman Square Health Center Earned Income Tax Credit Kiosk Liam Seward

I worked with the Codman Square Health Center (CSHC) to develop a community information kiosk to serve the lower and moderate-income residents and households of the Codman Square neighborhood of the Dorchester area of Boston, Massachusetts. Residents who visited the kiosk were able to take part in an earned income tax credit consultation (EITC), see a copy of their credit report, receive credit counseling, and receive information on federal, state and local health programs. Initial funds came from a grant the Codman Square Health Center (CSHC) received to start this pilot initiative.

The health center established a site within one of its buildings and staffed the site on Monday, Wednesday afternoons and evenings and Saturday mornings and afternoons. The director and a site coordinator directed the staff at the site. The success of this project was evaluated by determining the number of kiosk participants, their enrollment in additional services and if the participation in the credit intervention improved participants' credit ratings over the course of a year.

Executive Summary

The information kiosk was an expansion of services offered by the Codman Square Health Center to the patrons of the tax preparation site. This site is part of the Mayor's Earned Income Tax Credit (EITC) Campaign. The expansion hoped to address outstanding financial and health concerns in the community.

The project was hosted by the Codman Square Health Center, located in the Codman Square neighborhood of Dorchester, Massachusetts. The participants were the staff and clients of the health center and the general population of Codman Square. This population is overwhelmingly, but not exclusively, African-American. The challenges faced by this community include a large number of unbanked and underbanked individuals; past and current poor credit; and a lack of access or knowledge of the government benefits they are entitled to including Medicare and Medicaid. One of the most apparent sources of frustration was the fact that community members were aware of services that addressed these conditions but they did not know how or had been unable to access them.

To address this situation the health center acted as a host site and a facilitator to colocate a number of services at its tax preparation site. It was felt that by positioning these expanded services within the facilities of a trusted member of the community, the initiative would best be able to meet the needs of the target community. The hope was to meet the immediate financial and health needs of the community and by doing so address the long-term fiscal and physical health of the community at large. The most important tasks were to outreach to trusted partners in the fields of healthcare, banking, and credit repair and consultation to inform the practices of the expansion and to staff the center and provide needed services.

In the two years since the earliest meetings to discuss this expansion, over a thousand individuals have benefited from one or more of the expanded services. The credit repair and consultation section had a rocky start in the first year pilot but this service was

largely improved the second year. The government benefits section likewise was only offered for a period during the first year and this service was greatly improved in the second year. The banking section has consistently been the most difficult to implement. The planning group may need to re examine the best means for making this very important service available.

The Codman Square EITC kiosk was notable for being the first neighborhood tax center to attempt an expansion of services in Boston. Piloting the project in the first year proved invaluable, as a multi element project involving many autonomous organizations is prone to encounter some hurdles. Open communication between all parties involved is paramount in this instance and it is hoped that the site expansion will continue to improve in the years to come.

I. Community Needs Assessment

For the purpose of municipal planning, Codman Square and Fields Corner are considered part of the "South Dorchester" section of Boston by the Boston Redevelopment Authority (BRA). This larger South Dorchester neighborhood has a poverty rate of 17.3% and a per capita income of \$16,894.00. (Boston Redevelopment Authority, 2005,) compared to the \$23,353 per capita income earned by City of Boston residents as a whole. According to the city of Boston's Department of Neighborhood Development, "The percentage of low and moderate income households for the entire Dorchester area is 61.5%." (City of Boston, 2005) Additionally, 58.4% of the population 16 and over in the 02124 zip code, including the Codman Square and Fields Corner areas, is in the workforce. Additionally, 21.2% of residents in the same zip code are below the poverty line. (US Census Bureau, 2005)

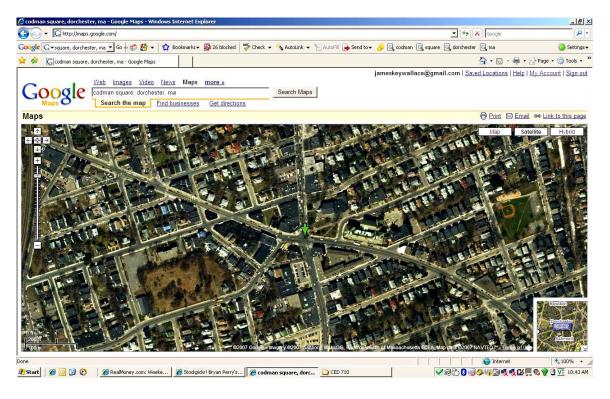
The City of Boston as a whole is undergoing rapid demographic change. According to the New Bostonians Demographic Report, since 1990, the Latino population has increased by 37.3% and the Asian population by 46.7%, (City of Boston, 2005) while the area of South Dorchester has grown by 7.4% in the last 20 years.

Economic Characteristics	Number	Percent	U.S.
Total population	50,781		
White	10,878	21.4	75.1%
Black or African American	30,438	59.9	12.3%
Hispanic or Latino (of any race)	6,378	12.6	12.5%
Asian	2,763	5.4	3.6
Speak a language other than English at home (population 5 years and over)	14,507	30.5	17.9%
In labor force (population 16 years and over)	21,723	58.4	63.9%
Median household income in 1999 (dollars)	36,025	(X)	41,994

Median family income in 1999 (dollars)	38,203	(X)	50,046
Per capita income in 1999 (dollars)	16,154	(X)	21,587
Families below poverty level	2,357	19.5	9.2%
Individuals below poverty level	10,795	21.2	12.4%

Source: U.S. Census Bureau

Geographical Content



Source: Google Maps

II. Problem Identification and Solution

1. Problem statement

There are numerous programs and initiatives targeted at helping provide financial and medical services to lower and moderate-income individuals and families. However many of these services don't have the built in "cultural competency" to be readily used by large segments of the population. Many residents have also voiced frustration in knowing there are programs "out there" but not knowing where to start looking for them or how to access the wide variety of financial and health assistance.

In its market research, the Codman Square Community Health Center found that the current needs of their target community included:

<u>Life Style</u>	Needs
Long working hours for little pay	Convenient locations
Little month-to-month savings	Full range of services
Receive bi-weekly employer or	Speed
government check or cash	
	Welcoming environment
	Low cost

- **2. Project target community:** The target community was from the lower and moderate-income residents and households of the Codman Square neighborhood among of the Dorchester area of Boston, Massachusetts. A special effort was made to recruit participants of the earlier Civic Health EITC seminars.
- 3. **Stakeholders**: The project involved a number of stakeholders who provided invaluable input in the form of time and information regarding this project. The Federal Reserve Bank provided training space for the volunteers and expertise in the form of two employees from the Behavioral Center. In return the FRB was able to survey participants for their own research purposes.

The local banks and credit unions that took part provided volunteers who offered banking services to the participants of the kiosk. This provided potential customers for the bank and the activities are able to be documented for Community Reinvestment Act reporting purposes. However, the greatest return for the banks was the goodwill they generated and their increased visibility in this specific community.

The student volunteer for the financial literacy section helped to create an evaluation piece and staffed the kiosk for both years of operation. In return he was able to use the project to complete his masters program. The student volunteers at the health services section received similar benefit through their Masters of Public Health Programs.

Residents of the local community were the most important stakeholders. They hosted the program in their community, provided volunteer staff for every aspect of the program and participated in creating and maintaining the host health center.

4. The Project Goals:

CSHC was acting to address two obstacles to development: the lack of participation in the EITC program and poor credit ratings. The center hoped to widen the participation in the EITC program and to expand the program to include a financial literacy element to enhance participants' credit rating. Finally, the program worked to

make participants aware of the variety of medical and health programs available. CSHS aimed to reduce poverty and promote economic growth through the goals of:

- a. Promoting financial literacy and awareness, asset building, and wealth creation.
- b. Promoting mental and physical health and well being.

5. The Project Objectives

- 1. **Objectives:** Through the information kiosk, Codman Square Health Center sought to extend its operations into the economic sphere among patients and community members. These participants have come to trust the health center through its 25+ years of community service. This project is in line with the organization's commitment to the overall health of the entire community; physical, economic and social. Services offered by the kiosk included
 - **a.** Free Tax Preparation
 - **b.** A Credit Repair Consultation
 - c. A Banking and Investment Consultation
 - **d.** Government Benefits Consultation

The kiosk was to be open on the first of February in both years. For this to happen, stakeholders had to meet in advance and agree upon their roles.

An additional objective of this project was to develop an evaluation instrument for the credit repair consultation objective listed above.

III. Project Design

1. Literature Review:

In examining the development challenges facing the Dorchester area I knew I wanted to work on a project that addressed health issues as well as economic issues. A colleague at the Boston Public Health Commission pointed me in the direction of the Codman Square Health Center (CSHC) and the work of their Civic Health Program. Civic Health is actively working in improving the physical, economic and social conditions of the Codman Square neighborhood.

Initially Doreen Treacy, the director of Civic Health, proposed establishing a credit union under the auspices of the health center. This was partially in response to the large number of unbanked and underbanked at the center. Eventually, the challenges of starting a credit union proved too daunting for the time being and Civic Health looked towards other means of addressing this issue.

For five years CSHC has been a key member in the Boston Earned Income Tax Campaign. "The EITC is a federal and state tax credit available to many low-to-moderate income working families and individuals." Eligible residents can qualify for up to \$4,900 in federal and state money (BRA, 2005). It "has become our nation's largest and most important anti-poverty program, offering an average of \$1,700 per year to each of 20 million low-income working families. As part of the federal tax code, these credits provide a unique financial opportunity for the working poor and they make a substantial

impact on the economies of their communities. EITC campaigns seek to boost the impact of these credits by raising the awareness of eligible families, offering free or low-cost tax preparation services, and encouraging recipients to utilize their credits for saving or building assets" (Annie E. Casey Foundation, 2005). Through the campaign CSHC has managed a free tax preparation site for members of the community. The volunteers at the site work to ensure that eligible individuals are able to claim the EITC.

One of the inspirations for CSHC's work (and a leader in the initiative in general) has been the Baltimore Cash Campaign, which has partnered with credit unions to ensure that participants have access to banking services (Baltimore Cash Campaign, 2006). Last year Civic Health decided to work with private lending institutions to provide a banking consultation element to the EITC program. This year Civic Health is partnering with the Tremont Credit Union, an institution that has expressed interest in working specifically with the unbanked (Boston Globe, 2006). At the request of past clients the program is also partnering with volunteers from the non-profit Healthcare for All. These volunteers will work with clients to determine if the clients qualify for various government programs such as Medicare and Medicaid. In 2006 Civic Health invited the representatives from Boston's Federal Reserve Bank to provide credit reports to clients upon request. For the 2007 campaign the FRB will be working with American Consumer Credit Counseling to ensure participants receive off site credit counseling (American Consumer Credit Counseling, 2006).

In analyzing "Strengths of the Safety Net", a study by the Center on Budget and Policy Priorities, authors Wendell Primus and Kathryn Porter found that the EITC "emerged in 1996 as the single program removing the largest number of children from poverty"... "The EITC, which offsets some or all of federal income and payroll taxes and, in some cases, also provides a wage supplement to low-income working families, lifted 4.6 million people – including 2.4 million children – out of poverty in 1996." (Balkin, 2004). Because the EITC targets the working poor the authors found that "EITC has a larger effect than any other program or category of programs both in reducing the number of poor children and in reducing the severity of poverty among those that remain poor."

In 2004 the total return for Boston residents from the EITC was \$64.3 million. It is hoped that a portion of this money would be converted into assets. The organization MDC maintains that the best use of funds from the EITC would be to use them towards homeownership. It is their belief that this transferable asset would be a route out of poverty for many of the working poor and this would help stabilize neighborhoods and families (MDC, 2006). This finds support in Oliver and Shapiro's seminal work *Black Wealth/White Wealth*: "One asset whose value grew dramatically during the eighties was real estate. Home ownership is central to the average American's wealth portfolio. Housing equity makes up the largest part of wealth held by the middle class..." (Oliver and Shapiro, 1995).

In previous EITC programs in the City of Boston, volunteers would file taxes for the client through e file and receive their return within 8-10 days. One concern this raises is that the client received no consultation on how best to use these funds. In a study commissioned by the Federal Reserve Bank of New York only "slightly more than 9 percent of the unbanked and 11.7 percent of the banked taxpayers said they would save the greater part of their refund" while vast majority said they would use the refund to

meet immediate needs and/or pay down debt (NYFRB, 2005). The Anne Casey Foundation notes "a crucial element to AECF-supported EITC campaigns is connecting taxpayers to opportunities to use their tax credits and the tax code to build assets, and ultimately wealth (Anne Casey Foundation, 2005). In reviewing this information the partners at Codman decided to add an on-site, financial consultation arm to the kiosk. In 2004, 24% of EITC clients in Boston were unbanked (Conversation with Charlie Sprenger of the FRB). Past programs targeting the unbanked and underbanked have included First Accounts, a grant program administered by the U.S. Treasury. In conducting their research the U.S. Treasury found that one of the main impediments to enrolling individuals into the mainstream banking system the "unbanked are simply not comfortable dealing with banks or letting them know their private financial information". (U.S. Senate, 2003). In response to this the ShoreBank of Chicago established the Extra Credit Savings Program to "leverage the power of the Earned Income Tax Credit". Shorebank allows volunteer tax preparers to use their the bank sites in evenings and when working families come to have their taxes prepared bank representatives help them establish and account and have their tax credit transferred to the account. This in part lead the partners at the Codman site to decide there was a need to have culturally competent banking representatives to work with clients and provide information on possible banking options. Daniel M. Liebsohn has argued "the lack of conventional, lower cost financial services and the existence of harmful financial institutions and programs in low-income neighborhoods work against economic development efforts. Wealth building programs, for example, are less effective when payday lenders charge high fees or predatory mortgage lenders take large amounts of equity out of homes that the owners have worked a lifetime to build." (Liebsohn, 2005) A key difference between the Shorebank model and the Codman Site is at Codman enrolling in a bank account is optional.

"Since 2000, Harvard associate medical professors Steffie Woolhandler and David Himmelstein, along with Harvard law professor Elizabeth Warren and Ohio University sociology and anthropology professor Deborah Thorne, have been compiling data on bankruptcies in the United States. Their study, published on February 2 by the medical policy journal *Health Affairs*, found that between 1981 and 2001, medicalrelated bankruptcies increased by 2,200 percent, an astonishing explosion in a relatively short period of time. This spike far outpaced the 360 percent growth in all personal bankruptcies during roughly the same period." (Nation, 2005). On their website Healthcare for All notes that there are over 460,000 uninsured individuals in Massachusetts, and that "a state survey taken in 2004 found thousands of people eligible for MassHealth are currently uninsured, including some 32,000 children, over 25,500 low-income parents, and 5,000 disabled adults." (Healthcare for All, 2006) One organization that is committed to tackling this issue is Baltimore Healthcare Access. They maintain a call center for individuals who would like to know if they qualify for Medicaid or the Maryland's Children Health Program. In addition they publish a guide to low cost and no cost healthcare in the City of Baltimore (Baltimore Healthcare Access, 2007). The Codman Site innovation is to bring this consultation service to potential customers by joining an established program for the working poor. By providing on site health care consultations, Healthcare for All is trying to eliminate some of the financial hardship faced by uninsured clients who qualify for state sponsored health aid.

In viewing the large numbers of unbanked, underbanked and uninsured participating in the EITC program, Codman decided to contact partners in the non-profit and financial sectors to create this kiosk expansion. It is hoped that the participation of representatives from Tremont Credit Union will help enroll the unbanked and underbanked into a banking program. This would allow the participants to bank some of their EITC with the intention of eventually putting it towards an asset such as homeownership Additionally, the non-profit Healthcare for All hopes to work with clients who may be eligible for such programs as MassHealth and Medicare. It is thought that entry into these programs may help defray health costs and lessen the likelihood of an individual with severe health costs falling into bankruptcy. Finally, the Federal Reserve Bank is coordinating and evaluating the credit repair wing of the kiosk. Credit repair workshops and financial literacy programs in general have been a requirement of many programs targeting individuals in bankruptcy and as an intervention among the poor but data regarding the efficacy of these programs is inconclusive.

To accomplish much of this work the City of Boston and CSHC are relying on volunteers. There are several resources that list best practices for volunteer recruitment. One challenge is recruiting volunteers for shifts that start in the early afternoon. One helpful resource has been the "non profit genie" on the CompassPoint website (CompassPoint, 2006).

- 2. **Program:** I worked with the Codman Square Health Center to develop a community information kiosk to serve the lower and moderate income residents and households of the Codman Square neighborhood of the Dorchester area of Boston, Massachusetts. Residents who visited the kiosk were able to file their taxes and determine if they qualified for the Earned Income Tax Credit (EITC), have access to their credit report, receive financial counseling and receive information on federal, state and local health programs. "The EITC is a federal and state tax credit available to many low and moderate-income working families and individuals. Residents who qualify for the EITC can receive up to \$4,700 back in tax refunds." (BRA, 2005)

 B.) The Codman Square Community Health Center is committed to improving the financial and physical health of all neighborhood residents, particularly the most vulnerable, through the establishment of an information kiosk to aid clients in making important financial and health related decisions.
- 3. Participants: The kiosk was located near the health center, so that any client at the center can use its services. The health center records over 120,000 client contacts annually. In addition, any member of the community who chooses may walk into the site during operational hours and participate. In 2002 they held 20 EITC sessions (Codman, 2006). In 2006 they had an estimated 68 sessions. In 2007, it is projected that over 1,000 individuals will take part in the credit repair element of the kiosk project.
- **4. Community Role:** At previous EITC clinics, participants had expressed an interest in an expansion of the services offered to include financial literacy courses and credit counseling. Separately clients had expressed a desire for an information clearing house that would provide information on the health programs available to clients through local, state and federal agencies. Finally, the Codman Square Health Centers market research

provided information on the lifestyle of their clients and what the most efficient means of providing these services might be.

Stakeholder and Community Analysis

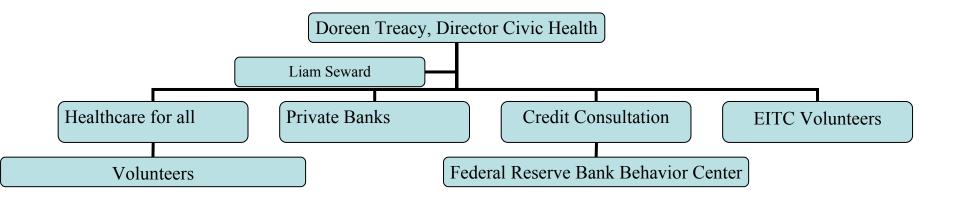
Name of stakeholder group/ organization	Potential benefits/ costs	Project discussed with this group/ organization?	What is their opinion of the project & its goals?	Level of Participation
Codman Square Health Center (CSHC)	+	Group Initiated the project	Positive	Group designed project
Target Community	+	In doing market research CSHC found that the response to a theoretical information kiosk was overwhelmingly positive	Tentatively positive	In 2006 CSHC held 48 EITC sessions and it is hoped these kiosks will be equally popular.
For profit, tax preparation sites	+/-	No	No data	No data
City of Boston	+	Yes	Overwhelmingly Positive	Several City of Boston employees are part of the steering committee of this pilot project. The City of Boston has devoted space on their website to advertise the project.
Tremont Credit Union	+	Yes	Overwhelmingly Positive	Several representatives of this credit union are staffing the banking tables

				of the kiosks.
Healthcare for	+	Yes	Yes	Volunteers from
All				this non profit
				organization are
				staffing tables
				at the kiosks.
				and walking
				participants
				through a
				healthcare
				checklist to see
				if they qualify
				for any
				government
				programs
Federal Reserve	+	Yes	Yes	Will help
Bank of Boston				perform credit
				evaluations of
				participants.
				Will work to
				track and
				evaluate this
				aspect of the
				kiosk.
American	+	Yes	Yes	Will be
Consumer				responsible for
Credit				providing in
Counseling				depth credit
				counseling over
				the phone. Will
				provide one
				volunteer per
				site, per shift to
				over see the
				credit
				evaluation.

The most important factor to the project's success is achieving "buy in" from the participants in previous EITC seminars. Participants from last the last two years have reacted overwhelmingly positively to this expansion.

i. Host Organization: a.) and b.) The Codman Square Health Center is a health center located in the South Dorchester Neighborhood of Boston. It serves as a resource for improving the physical, mental and social well being of the

community (CSHC, 2006). **c.)** CSHC is the initiator of this project and hosted the kiosk. **d.)** I worked as a project coordinator for the site expansion. I worked specifically with those organizations who were conducting the financial literacy aspects of the program to ensure they knew the expectations the host agency has for them and to convey any of their concerns to the project manager. In addition, I helped implement and run the financial literacy project and create an evaluation piece. Over the years, CSHC has never evaluated the EITC seminars and believes information from such an evaluation would help them measure the success of the project and attract additional funding.



- **7. Method:** The kiosk is part of an expansion of the pre existing EITC seminar. The kiosks:
- **a. Provide Free income tax filing and EITC processing:** Staff help participants file their tax return and helped the participant file for the Earned Income Tax Credit (if they qualified).
- **b. Provide credit counseling:** Staff access participants' credit reports, inform them of what their rating means, and offer advice on how to improve their credit rating. The intervention group is also invited to participate in a further two hours of financial literacy training off site.
- **c.** Act as an information clearing house for available health care programs: Staff provide information on programs, including information on local clinics and create a file for the participant on realbenefits.org to see if a candidate qualifies for programs such as MassHealth, Free Care, Center Care, Womens' Health Network, Food Stamps, alcohol and drug treatment, counseling and resources for survivors of domestic abuse.
- **d. Banking Information:** Representative from local private banks and credit unions provide participants with information regarding differing banking and financial packages available.
- **e. Evaluation:** The student volunteer works with the Boston Federal Reserve Bank Behavior Center staff to create an evaluation piece for the credit repair program programs and evaluate its affect over 14 months time.

8. Products and outputs:

- 1. Expansion of participation in EITC seminars
- 2. Creation of information kiosk
- 3. An evaluation piece for the success of the credit repair program

IV. Project Implementation:

On January 2006 Codman Square Health Center sent out e mails and distributed fliers to attract volunteers to the site and Boston Redevelopment Authority put information about the kiosk plan on its website. In addition the student volunteer met with the financial literacy subcommittee and Civic Health director to establish project roles, project bench marks and project objectives. The kiosk was opened in February of 2006 and continued to operate until April 15th.

In July 2006 Codman Square Health Center and the BRA began contacting partner banks, non profits and past volunteers for participation in the 2007 tax season. In October an initial meeting of tentative 2007 partners was held to express the expectations of each partner. In December 2006 a planning and logistics meeting was held. In January 2007 a kick off meeting for the new volunteers was held. The kiosk was opened in late January. The kiosk was in operation from January through mid April. Project reporting was complete in April.

2. Gantt Chart

	January 2006	February 2006	March 2006	April 2006	October 2006	January 2007	February 2007	March 2007	April 2007	April 2008
Volunteer Recruitment										
Put Information on Web Site										
Initial Meeting of Financial Literacy Subcommittee										
Open Kiosk										
Operate Kiosk										
Tax Filing										
Credit Repair										
Government Benefits										
Banking Consultation										
Survey Clients										
Project Reporting										
Review of Credit										

3. Staffing Pattern:

Director of Civic Health Program – Doreen Treacy is the director of this program at the Codman Square Health Center. "Civic Health is a community research and action learning program that jump-starts ideas and ventures for improving community prosperity (CSHC, 2006)." The Director oversees all aspects of the EITC program and the kiosk proposal.

Financial Literacy Advisory Board – Work to determine a set of indicators to measure the success and impact of the EITC expansion and the information kiosks.

Student Volunteer – Liam Seward works as a volunteer on the credit repair portion of the kiosk. He also worked with the Federal Reserve Behavior Center to create an evaluation piece for this project under the guidance of the Advisory Board.

Kiosk Staff:

- A. Private Banks and Credit Unions: Citizens Bank, Sovereign Bank, Mt. Washington Bank and Tremont Credit Union provide volunteers to consult participants on any banking concerns they may have.
- B. Earned Income Tax Credit Volunteers: Volunteers file income tax returns for participants and see if participants qualified for the Earned Income Tax Credit.
- C. Health Care Consultation: Healthcare for All (a non profit healthcare advocacy group) staff the health care portion of the kiosk.
- D. Federal Reserve Bank Behavior Center: the Bank's Behavior Center staff the credit repair portion of the kiosk with the student volunteer.
- E. Credit Repair Volunteers: In the second year of the project a group of volunteers were trained to staff the credit repair section.
- 4. **Budget:** Staff is all volunteer. All materials used during consultation are provided by volunteers. Host site is owned by host agency.

Item	Units	Costs	Total
Maintenance	Three times a	\$55	\$1650
and cleaning of	week X 10		
site	weeks = 30		
Snacks	Three times a	\$50	\$1,500
	week X 10		
	weeks = 30		
Supplies			\$300
(stationary,			
copies, etc.)			
Use of Site	Three times a	\$400	\$12,000 (In
	week X 10		kind)

7	
rrraple = 20	
weeks = 30	

Project Implementation Report:

Project Goal:

CSHS aimed to reduce poverty and promote economic growth through the goals of:

- a. Promoting financial literacy and awareness, asset building, and wealth creation.
- b. Promoting mental and physical health and well being.

Outcome: The kiosk project was designed and implemented.

Objective 1: A kiosk with free tax preparation, credit repair consultation banking and investment consultation and government benefits consultation will be operating at the Codman Square Community Health Center from the First of February through the fifteenth of April in 2006 and 2007.

Outcome: In the first year the credit repair consultation didn't start until March. Additional off site credit consultations never occurred that year. This was due to problems with licensing the right to pull credit reports on site. In the first year the banking and investment consultation was sporadic. The government benefits consultation was only piloted in February of the first year.

In the second year all of the elements were fully implemented throughout the tax season starting in February.

Objective 2: An evaluation piece for the off site credit repair section of the kiosk would be developed and the repair section for 2006 would be evaluated by the end of the 2007

Outcome: As there was no off site credit repair in 2006 there was no evaluation of this part of the kiosk. An evaluation of the off site credit repair for the 2007 tax season is being planned for the spring of 2008.

$\label{eq:V.Monitoring/Evaluation} V \mbox{.} \quad \mbox{Monitoring/Evaluation}.$

Situation	Inputs	Outputs	Short term	Intermediate	Long Term
	_		Outcomes	Outcomes	Outcomes
	Staff	Conduct Workshops,	File for cash from	Alter banking	Residents of Codman
		Kiosk Product	EITC, Awareness	behavior, Some	Square experience
	Volunteers,	Development,	of importance of	Cash from EITC	heightened levels of
		Volunteer Training,	Financial	deposited in	financial and physical
	Time	Meetings,	Decisions,	savings,	health, Codman
		Recruitment/	Awareness of	Altering credit	Square neighborhood
	Materials	Outreach,	Banking	behavior/	experiences
		Provide Counseling:	Alternatives,	increased credit	heightened prosperity
	Technology	(Credit Reporting,	Awareness of	rating, increased	
		Bank Consultation,	Government	enrollment in	
	Research	Filing Taxes/Earned	Programs,	government	
		Income Tax Credit	Participant	programs (food	
	Funds	(EITC), Government	awareness of	stamps,	
		Programs	individual credit	Medicaid,	
		Consultation),	scores,	MassHealth)	
		Monitoring,	Determination to		
		Evaluation	alter some		
			financial behavior		

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	Environment (influential factors)	

Evaluation Design: Kiosk Program

Hypothesis	Variables	Indicators	Data-Gathering
If participants take part in the	IV: Participation	IV: Amount of people taking	Surveys
products offered by the		part, length and frequency of	
information kiosk, then they	DV: Levels of financial and	their visits to the kiosk, number	
will experience heightened	physical health	of services requested	
levels of financial and physical		DV: Increase in financial and	
health		physical health indicators	
		(credit rating, increase in	
		savings, bank enrollment,	
		access to health care)	
If participants are aware of	IV: Awareness	IV: Number of individual visits	Surveys
financial and banking	DV: Behavior	to kiosk banking and financial	
programs, then they will alter		consultant	
financial and banking behavior		DV: Increase in number of	
		bank accounts, improved	
If participants are aware of		financial literacy	
their eligibility for government	IV: Awareness		
programs, then their enrollment	DV: Behavior	IV: Number of individual visits	
in those programs will increase		to kiosk government benefits	
		consultant	
If participants take part in the		DV: Enrollment	
EITC program, then they will	IV: Participation		
deposit some of the return in a	DV: Savings	IV: Number of individual visits	
savings account		to kiosk EITC consultant	
		DV: Increase in savings	

counseling, then awareness of financial and banking alternatives, the EITC and government programs will increase TV: Number of volunteers who participate and when DV: Number of participants who request materials Time Sheets Focus groups to discuss program	financial and banking alternatives, the EITC and government programs will	IV Counseling DV: Awareness	DV: Number of participants	Focus groups to discuss
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- 1. Performance Indicators: Staff tracked the number of clients that visited the kiosk and the type of information they requested. The student volunteers have tracked the number of participants for the EITC seminars in 2006 and 2007 so we were able to determine if there was an increase in the number of participants. They also worked with the Federal Reserve Bank to determine whether there was an improvement in credit ratings over the course of one year among the participants.
- **2. Management Information System:** The student volunteer discussed data management, information gathering and progress benchmarks with the staff of the Behavior Center at their February meeting. The student volunteer worked with the Behavior Center in creating an evaluation piece for this project as part of his requirements for the C.E.D. Program.

Sustainability Plan

- 1. **Sustainability Elements:** Codman Square Community Health Center has conducted the EITC seminar for a number of years. The Center itself has been in operation for almost three decades and is on solid financial ground. The EITC program and this proposed expansion has the full support of the City of Boston. Codman was only one of two locations chosen for this pilot program. Key stakeholders (including Codman, the City of Boston, Healthcare for All and the Behavior Center) have all committed to returning to the program in the next tax season.
- 2. **Sustainability Plan:** In 2007 over twenty volunteers were trained for the expansion. Unfortunately, the credit counseling non profit that was involved early in 2007 pulled out of the Codman Site as did the Federal Reserve Bank. In response to this Codman square trained a number of its tax preparation volunteers to perform the credit analysis piece. The Boston University School of Public Health has committed a number of students to work on the government benefits section. The Banking section has been improved through the recruitment of Tremont Credit Union to perform these services.
- 3. **Institutional Plan:** Codman Square Health Center has hosted a tax preparation site for over seven years. In the past years they have attracted a number of volunteers from Boston Cares. These volunteers have been trained to perform the credit analysis piece in addition to the tax preparation. Furthermore, Codman Square Health Center has provided credit counseling as part of their financial literacy program for a number of years. It is hoped that this program will replace the off site credit counseling that failed to materialize in the first year of the program.

VI. Conclusions and Recommendations:

Results: In the pilot year nearly one thousand individuals had their tax prepared and the total amount of returned to filers was over \$1,500,000 including over \$600,000 in EITC credits. One hundred and fifty-six had their credit reports pulled and explained to them and over fifty individuals received a government benefits consultation. The expansion was deemed a success and the parties agreed to maintain the expansion for a second year. The second year, 919 individuals had their taxes prepared for a total federal refund of \$1,499,000 and a EITC total of \$585,000; 39 individuals had their credit ratings pulled and 0 received a government benefits consultation as of April 4, 2007.

In the first year the banking section of the expansion was staffed by representatives from a number of for profit private banking entities. Their presence at the site was sporadic and no information was recorded on the number of individuals they enrolled for banking accounts. In the first year there was no off site credit consultation, therefore the evaluation piece that was to measure the efficacy of credit consultation was never implemented. In the same year, Healthcare for All only piloted their government benefits section in the month of February.

In the second year Codman Square Health Center partnered with Tremont Credit Union and Mt. Washington Bank and was offering individuals the opportunity to establish bank accounts. No records were kept of the number of banking consultations. In the last month of February the Federal Reserve Bank and American Consumer Credit Counseling abruptly ended their partnership with Codman Square and the volunteers that they trained for credit counseling failed to show after that point. Additionally the government benefits site managed by Healthcare for All wasn't staffed for most of the second year.

Recommendations: In reviewing the project and its progress over the course of the two tax seasons there are a number of lessons learned. Piloting the project at one site proved invaluable. During the first year a number of areas proved to be problematic and needed to be re examined. Staffing the site was difficult using only the employees of participating agencies. Furthermore, many of these employees lacked expertise in credit counseling. It was thought that they would benefit through on the job training, however it became apparent during the first year that this was insufficient. In addition, there was little agreement between parties concerning what their commitment to staffing their various wings would be. There was also confusion regarding what information was to be recorded by the various parties at their stations. It was hoped that in the second year one individual would work to provide oversight of the entire project. That individual would establish regular lines of communication between the different organizations and the organizations, in turn, would establish agreed upon commitments.

Any organization that attempts a similar project is advised to establish the expectations of all parties at the initial planning meeting. This will allow any participant that believes they cannot meet these expectations to voice their concern early on. Alternatively, the group might consider the objection reasonable and alter their expectations.

A target community analysis is invaluable. Fully understanding the needs of the community you plan to work with will greatly diminish the possibility of offering a service that is not needed or not desired. In the case of the Codman Square site, the vast majority of individuals who were familiar with the health center had health insurance. This lead too few individuals needed the services offered by Healthcare for all.

In the second year training volunteers ahead of time proved invaluable. Many of the individuals who volunteered their time had many questions that were able to be answered at an off site training. The training left them feeling competent when they entered the kiosk site. In addition this training was performed by content experts in the fields of credit repair and taxes. The value of their expertise cannot be minimized.

This project had many elements staffed by individuals from numerous organizations with different expectations. Therefore it was absolutely necessary to have one individual coordinating the efforts and acting as a spokesperson for the host organization. This individual maintained a visible presence, maintained contact with the volunteers and participating organizations and tried to ensure all the data was carefully maintained. An organization attempting a similar project would be well served to have an extremely energetic and competent person serve this function.

4. Appendices

Financial Matters Survey: Enclosed

2006 BOSTON EARNED INCOME TAX CREDIT CAMPAIGN: CREDIT REPAIR KIOSK

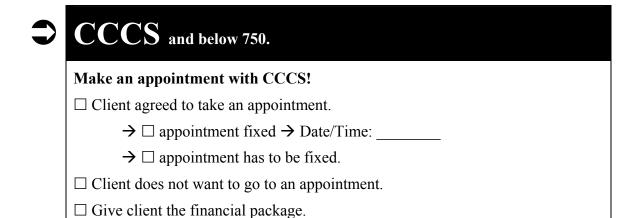
con	e following personal information is strictly affidential and will never be shared with any ganization or its representatives.	SURVEY NUMBER: ——— Volunteer's Initials: ———
any	Ve are offering people a chance to access their credit y credit concerns they may have. Please let me ask y t your credit report and look over it."	
1.	Do you understand what credit is and how if affinancial assistance (e.g. a car or home loan)? ☐ Yes → provide "Your Credit and You". ☐ No → provide "Your Credit and You", walk the	·
2.	How comfortable do you feel when dealing with particular? Not very comfortable ① ② ③ ④ ⑤ ⑥ ⑦ Very	
3.	Was there any time in the past five years that ye thought of applying for credit but changed your might be turned down? □ Yes □ No	
4.	Have you used any of these types of credit in th interest rate unknown)	e past months? (please note if

	Туре	Amount	Mo Payment	Rate	Special offer rate
	☐ Credit cards			%	□ Yes; □ No
	☐ Personal loans from a bank			%	□ Yes; □ No
	☐ Personal loans from an alternative provider (pawn broker, check casher, etc.)			%	□ Yes; □ No
	☐ Automobile loan			%	□ Yes; □ No
	☐ Payday loan			%	□ Yes; □ No
	☐ Mortgages			%	□ Yes; □ No
	☐ Friends or Family			%	□ Yes; □ No
	□ Other			%	□ Yes; □ No
5.	Did you have any large health e 2005?	expenditures	s for yourself	or a fami	ly member in
	□ NO; □ YES → Amount:		Outstanding I	Balance:	
6.	Do you have a credit card?				
	\square YES; \square NO \rightarrow if NO, go to q	uestion 6.			
	If YES, how do you most regula	arly pay?			
	☐ The full amount of the bill. payment.			☐ The mi	nimum
	☐ Between the full amount and the minimum payment.	he minimum	payment.		Less than the

7.	Do you own any of the	following?			
	□TV	☐ Mobile Phone		□ Compute	er
	☐ Car; Value:	☐ Insurance Plan; Value:		☐ Jewelry; Value:	
	☐ Home; Value:	☐ Retirement Plan (401k, Roth IRA, etc) ☐ Stock in Company; Value:			
		Value:			
8.	Have you missed paymo	ents to any of your cred	litors	or services	providers in the
	Туре		Amount		No. of Days Late
	☐ Yes, for my Credit ca	ards bill			
	☐ Yes, for Loan Repayments ☐ Yes, for my Mortgages / Landlord				
	☐ Yes, for Services (Gas/Electricity/Telephone/Cable)				
	☐ Yes, for Others				
9. If you have any late payments, how much do you think will be the late fees all together?					
	☐ Below \$25; ☐ Between \$25 and \$100; ☐ Above \$100; ☐ Don't know; ☐ No late payments		□ Don't know;		
10.	How many people do	you know who			
10.	have filed for bankruptcy?				
	have substantial debts ?				
11.	Have you ever exceede (w/o overdraft)?	ed your credit limit in a	give	n month or	bounced a check
	☐ Yes;☐ No.				

	When you are short of cash, what do you typically do? Who do you borrow mon		
3.	How many friends do you know who would loan you	\$100 if you a	sked for it?
14.	Do you hold a savings account?		
	\square YES; \square NO \Rightarrow if NO and client wants one, refer to question 13.	bank kiosk an	d go to
	If YES, how much is currently in your account? \$		
	Is this: \square More than normal; \square Less than normal	ıl; □ The sar	me as normal.
	If yes, do you have overdraft protection on your bank	x account?	□ Yes;
	If yes, have you utilized the overdraft on your b	ank account	? □ Yes;
	□ No	ank account.	. — Tes,
.5.	□ No	ank account	. — TCS,
5.	□ No Who is responsible for your household finances?	My parents	. — TCS,
	Who is responsible for your household finances? ☐ Myself; ☐ My spouse/partner; ☐ M		. — TCS,
	Who is responsible for your household finances? ☐ Myself; ☐ My spouse/partner; ☐ M		□ No
	Who is responsible for your household finances? ☐ Myself; ☐ My spouse/partner; ☐ N Planning and Budgeting	My parents	
15.	Who is responsible for your household finances? ☐ Myself; ☐ My spouse/partner; ☐ M Planning and Budgeting Do you track your expenses?	My parents □ Yes	□ No

			How likely are you to do it?	
		□ YES ; □ NO	Likely ①②③④⑤⑥⑦ Unlikely	
		□ YES ; □ NO	Likely Q34567 Unlikely	
	1 1	□ YES ; □ NO	Likely QQQQ©	
	1 1	□ YES ; □ NO	Likely ①②③④⑤⑥⑦ Unlikely	
18.	Would you be willing to restrict you how you spend) in order to stick to NO			
19.	When you get paid at the end of the month, what do you do? (Choose the most appropriate)			
	☐ Pay back money borrowed from friends	☐ Pay back money borrowed on credit card		
	☐ Buy something new	□ Save		
	☐ Send money to family members	☐ Buy regul	ar items like groceries	
20.	In the past, have you attended any o	of the followin	ng:	
	☐ Financial literacy class; when:	□ Credi	t Counseling Program; when:	
	☐ Budgeting class; when:	☐ Home	buying 101; when:	
	-			
	Getting the Credit Report			
	Do you know your credit score? ☐ YES ☐ NO			



2007 BOSTON EARNED INCOME TAX CREDIT CAMPAIGN CREDIT SUMMARY

Below is your credit summary, providing some of the information from your credit report. Please keep this form for your records. Information contained within this credit summary is not guaranteed to be accurate.

If you and your advisor came across any errors in your credit report, see the reverse side for guidance.

Your credit score might be the most important number in your life but the vast majority of Americans don't know this number -- or even how to find out what it is. Higher credit scores help you get credit at lower interest rates and credit scores can legally be used for employment and housing applications.

Credit scores give points for factors that are related to high rates of repayment. Having a history of paying on time and not owing too much money are the most important factors for credit scores. Six months of positive credit activity can raise your score as much as 20 to 50 points.

FICO scores range from 300 to 850.

Why is my score that way? The primary reasons provided we Each FICO score is calculated with three or four reasons for See the "Guide to FICO Reason Codes" on the reverse side.	r the score being the way it is.
CREDIT CARDS AND REVOLVING ACCOUNTS:	INSTALLMENT ACCOUNTS:
Your total number of revolving accounts:	Your total number of installment accounts:
	Your total balance across these accounts:
Your total balance across these accounts:	Your monthly payment across these accounts:
Your revolving credit limit:	Your past due balances across these accounts:
You're using of your available credit. Your past due balances across these accounts:	

Hint: Past due balances are a red flag for credit companies. Paying your bills on time is a great way to improve your credit score.

FACTORS NEGATIVELY AFFECTING YOUR SCORE: Number of accounts with negative records:	Factors on the left can lower your scored ramatically. You should make sure that the amounts and records are correct. Make sure to dispute anything that is incorrect.
Number of late payments:	If possible, you may wish to contact the creditors in question as they may be willing to help you establish a repayment plan that fits your budget.
Number of accounts closed with balances:	
Your total balances across these accounts:	
Collections / Public records:	
ACTION PLAN: With your credit advisor, discuss one or t	wo easy steps you can take to improve your credit score.
1	
2	

Minimum Payments and Interest

Making the minimum payment may see m like a sim ple way to keep up with your finances, but that's almost all you do: keep up. It's difficult to pay down your debt if you just make the minimum payment. For example: if you have \$2,500 in credit card d ebt on a card with a 20% APR and make only the minimum payment (3%), it will take you 16 years, 8 months to pay off your debt. Your first payment will be \$75 and decline after that. You will wind up making a total of \$5,375 in payments.

BUT: if you can make a fixed payment of say \$100 per month that same debt could be paid off in 2 years 9 months. Your total payments will be \$3,261.

 $For a \ helpful\ credit\ card\ payment\ calculator,\ see: \underline{http://www.bankrate.com/brm/calc/MinPayment.asp}$

How Can I Dispute Something on My Credit Score?

Disputing incorrect items on your credit score has become easier in recent years. The packet provided to you includes a request for investigation from Transunion Corporation. Dispute investigation can also be started by phone at 1-800-916-8800 or at

http://www.transunion.com/corporate/personal/creditDisputes.page. You should have all dispute information ready before you begin:

Transunion File Number:

Company Name:

Account Number:

Nature of Dispute:

Code ReasonCode ReasonCode Reason1Amount owed on accounts is too high11Amount owed on revolving accounts is too high20Length of time since derogatory public record or collection is too short2Level of delinquency on accounts12Length of time revolving accounts have been established21Amount past due on accounts3Proportion of loan balances to loan amounts is too high13Time since delinquency is too recent or unknown22Serious delinquency, derogatory public record or collection filed4Lack of recent installment loan information14Length of time accounts have been established24No recent revolving balances5Too many accounts with balances15Lack of recent bank revolving information27Too few accounts currently paid as agreed6Too many consumer finance company accounts 16Lack of recent revolving account information 28 Number of established accounts 7 Account payment history is too new to rate 17No recent non-mortgage balance information 29No recent bankcard balances8Too many recent inquiries last 12 months18Number of accounts with delinquency30Time since most recent account opening too short9Too many accounts recently opened 19Date of last inquiry too recent31Amount owed on delinquent accounts10Proportion of balances to credit limits is too high on bank revolving or other revolving accounts 20 Length of time since derogatory public record or collection is too short38Serious delinquency and public record or collection filed39Serious delinquency40Derogatory public record or collection filedGuide to FICO Reason Codes

2007 BOSTON EARNED INCOME TAX CREDIT CAMPAIGN: CREDIT ADVICE FORM

The following personal information is strictly confidential and will never be shared with any organization or its	SURVEY NUMBER:
representatives.	Volunteer's Initials:
GENERAL QUESTIONS:	
Do you understand what credit is and how it affects your	personal finances? —Yes
□No	-
How comfortable do you feel when dealing with financia	l matters and credit in
particular?	
	y comfortable
How satisfied are you with your current debt level?	
1	satisfied
Over the next two years, will your debt increase, decreas	e or stay about the same?
☐ Increase ☐ Decrease ☐ Stay about the same	
Over the next two years, do you think you will be able to	manage your debt?
□Yes □No □I don't know	
	l l

QUESTIONS ON CREDIT CARDS

Do you have any credit cards? □ Yes □ No
Do you use your credit cards to borrow or do you pay off the bill completely each month?
☐ Pay it all ☐ Borrow
Do you know the interest rate on your primary card? — Yes — No
What is it? \square Less than 10% \square $10-15\%$ \square $15-20\%$ \square More than 20%
Was this the original rate offered or has it increased? ☐ Yes, original rate ☐ No,
increased rate
Have you ever transferred any credit card balances to a lower rate card? □Yes □No
Have you ever missed any credit card payments? Yes No
Have you ever exceeded your credit limit? □Yes □No
Was there any time in the last five years that you wanted to apply for more credit but did not do
so because you thought you'd be denied? Yes No
QUESTIONS ON INSTALLMENT ACCOUNTS
Do you have any installment accounts such as car loans, student loans or rent-to-own plans?
□Education Loans □Car Loans □Mortgage □Rent-to-Own □Other
How much of your monthly income is dedicated to paying these accounts?
□0 □<10% □10% - 25% □5-50% □>50%
Have you ever missed any installment account payments? □Yes □No
Was there any time in the last five years that you wanted to apply for installment credit but did
not do so because you thought you'd be denied? □Yes □No

QUESTIONS ON BUDGETING

Who is responsible for financial matters in your household? Myself Spouse/Partner
□Parent/Guardian
Over the next two years do you expect your income to increase, decrease or stay about the
same
☐Increase ☐Decrease ☐Stay about the same
Do you track your expenses? □Yes □No
Do you have a monthly budget? □Yes □No
Do you think you have a spending problem? □Yes □No
Does your budget include an amount for savings? □Yes □No
Do you have a bank or other account dedicated only to savings? □Yes □No
How much of your monthly income would you like to save ideally?
□0 □<10% □10% - 25% □25-50% □>50%
Do you think you will have enough savings at retirement (age 65)?
☐Yes ☐No ☐Don't Know ☐Haven't Thought about it
If you aren't saving for retirement, why not?
□I'm too young □I can't save right now
□ I probably won't be able to retire ever □ The government will provide for my retirement
☐Free Credit Summary
Referred to ACCC write down contact details!
Client is not interested
Client agreed to call ACCC
I — CHEHL AZI ECU LU CAH ACCC

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