Promise Neighborhood Target Setting Guidance

January 8, 2014

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Abstract
Promise Neighborhood implementation grantees are required to set and submit baselines, actual performance data, and targets for each GPRA indicator and for all five years of the grant program. While grantees were required to address targets in their applications, these targets were set before the Guidance Document was released and before complete baseline data was available at each site. This continuing guidance identifies several data sources, considerations, and methods sites may consider when setting targets. While targets are required for each GPRA indicator in each of years 2–5 of the program, the Department of Education acknowledges that target setting will be an iterative process throughout implementation. It expects that sites will analyze and review the established targets each year as more performance data becomes available. The Urban Institute is working with the department to provide this guidance on target setting as well as technical assistance to grantees as they finalize baselines and targets. The submission of final baselines and targets is the first part of the Promise Neighborhood Data Plan required of all implementation grantees.
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Section 1. Introduction

Promise Neighborhood implementation grantees are required to set and submit baselines, actual performance data, and targets for each GPRA indicator and for all five years of the grant program.

A review of 2013 annual performance reports (APRs) suggested that the target setting process has been difficult and unclear for many grantees. Some sites provided a discussion of targets, including best guesses or plans for calculating targets based on future data collection, while other sites did not include any discussion of how targets were set. While grantees were required to address targets in their applications, these targets were set before the Guidance Document and before complete baseline data was available. Therefore, the Department of Education is now requesting that sites revise and resubmit all targets along with a discussion of data sources and calculations used in setting targets.

We understand that target setting often requires previous experience with indicators, and sites will need to rely on many other data sources to inform the target setting process. This guidance document identifies several data sources, considerations, and methods sites may consider when setting targets. Because each GPRA is likely supported by more than one solution, targets will likely be aggregates of expected outcomes for each solution supporting the specific GPRA indicator.

The Urban Institute can provide analysis of each site’s progress on target setting and recommendations for sites based on best practices for target setting, as requested by sites and during review of sites’ data plans. The Urban Institute will provide technical assistance to all sites and will be available for site-specific clarification. However, the work of gathering data, reviewing baselines, and analyzing programs to calculate targets is the responsibility of each site and its evaluation partner. Given this complexity, the department will allow sites to set target ranges for indicators with highly uncertain targets.

While targets are required for each GPRA indicator in each of years 2–5 of the program, the department acknowledges that target setting will be an iterative process throughout implementation. It expects that sites will analyze and review the established targets each year as more performance data becomes available. The Urban Institute is working with the department to provide this guidance on target setting and will be available for technical assistance. Sites should reach out to the Urban Institute and their Program Officer regarding any questions about the target setting process and required data submission timeline.

After reviewing this document, sites should be able to submit complete targets in both the site Data Plan and Ad Hoc report. This document covers the following aspects of target setting:

- Things to Consider When Selecting Targets
- Suggested Steps for Developing Outcome Targets
- Data Sources for Selecting Specific Outcome Targets
- Reporting Final Targets and Reviewing Annual Target Progress
- Sources for GPRA Statistics, Standards, and Other Data
- Appendix: Promise Neighborhoods GPRA Benchmark Statistics and Sources
Section 2. Things to Consider When Selecting GPRA Targets

Target setting is a complicated process. Sites should consider a number of factors to set appropriate targets over the entire grant period.

1. **Consider previous performance**—This should be a major factor in determining targets.
2. **Consider the outcomes achieved in the past for different populations**—For example, use the highest or average outcome achieved for any one demographic category as the target for all categories. If a program indicated successful outcomes for, say, 53 percent of students in one school district and 48 percent of students in another school district, setting a future overall target of 53 percent—for each school district and in the aggregate—would encourage high performance with all districts.
3. **Consider the performance levels achieved by other communities, school districts, or programs**—This is benchmarking against the best programs and means setting targets at or near the best or average outcomes achieved by other organizations.
4. **Consider a standard set by previous research, programs, or professional associations for a given outcome indicator**.
5. **Make sure the targets chosen are feasible, given the program’s budget and staffing plan for the year**—Keeping the same target despite reduced budgets can probably be achieved up to a point, but eventually cutbacks in resources should be reflect in reduced targets.
6. **Identify any new developments—internal and external—that may affect the program’s ability to achieve desired outcomes**—For example, a state department of education may indicate plans to change its school-based assessments between reporting periods.
7. **A target does not have to be a single value**—A range is a reasonable alternative, especially if a substantial amount of uncertainty exists. For example, if the outcome indicator is expressed as a percent, the target might be expressed as the most likely achievable percent, plus or minus 5 percentage points. *(See box on target ranges below.)*

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**For Promise Neighborhoods, ranges are encouraged as a target-setting option** for indicators with little to no previous performance data and highly uncertain future values.

A range of values, rather than one number, is given as the target for the indicator. Here are some examples of target ranges:

1. For 2014, the target chronic absenteeism rate will be in the range of 15 to 21 percent.
2. The student mobility rate during the 2013 performance year will be between 30 and -35 percent.

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Section 3. Suggested Steps for Developing GPRA Targets

Sites should follow these steps to develop and review their targets.

1. Examine the Promise Neighborhood’s continuum of solutions and projected level of effort for each solution.
2. For each solution, estimate the impact of effort on outcomes to provide an initial estimate of targets compatible with the amount of resources for the program’s proposed performance period. That is, sites should consider the level of effort to be made by each solution when setting targets. This is especially important during the phase in period when a solution is “getting to scale.”
3. Consider a range of uncertainties/factors involved in meeting the targets. (See the next section on sources of information for selecting targets.)
4. Consider the range of solutions that align with the GPRA indicators they are designed to affect. (See text box below on setting targets linked with a continuum of solutions.)
5. Consider the level of outcomes achieved by similar organizations or under various conditions. For example, the outcomes achieved by other communities that provide similar services are benchmarks the program may want to emulate.
6. Review the findings and recommendation from any recent program evaluations to identify past performance levels and past problems. Consider their implications for the coming years.

For Promise Neighborhoods, target setting is closely linked to a site’s continuum of solutions through which mixes of multiple interventions support each GPRA indicator. Each solution should have a set of associated implementation and performance measures that help sites decipher whether each solution is effective and whether the continuum of solutions is seamless. Because each GPRA is likely supported by more than one solution, targets will likely be aggregates of expected outcomes for each solution supporting the specific GPRA indicator.

Consider that solutions do not align one-to-one with the GPRA indicators they are designed to affect. One solution may affect multiple indicators, and one indicator may be affected by multiple solutions. For example, an early learning solution may support GPRA 1 (children birth to kindergarten have a medical home), GPRA 2 (children ages 3 to kindergarten demonstrate age-appropriate functioning across multiple domains), and GPRA 3 (children birth to kindergarten participate in center- or home-based learning). Target numbers and percentages served in one solution do not translate directly to movements in numbers and percentages on an overall indicator affected by multiple solutions. When setting targets for GPRA indicators, sites should estimate the aggregate effects of all applicable solutions.

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Section 4. Sources of Information for Selecting GPRA Targets

Sites should consider the following sources of information to help them set appropriate targets.

1. **Past outcome levels (I)**—The most recent outcomes and time trends provide a starting point for setting the outcome targets. For example, recent trends may indicate that the values for a particular outcome indicator have been increasing annually by 10 percent; this would suggest that the next year’s number should increase at a similar or even higher rate.

2. **Past outcome levels (II)**—If the values for an outcome indicator are already high, only small improvements in the outcome level can reasonably be expected. If the values for an outcome indicator are low, larger future improvements can be expected to be larger (i.e., there is more room for improvement).

3. **Amount of dollar and personnel resources expected to be available through the target period**—If staff and funds are being reduced or increased, how will this affect the program’s ability to produce desired outcomes?

4. **Amount of outside resources expected to supplement the program’s resources**—If such resources can play a significant role in producing the outcomes sought by the program, how is this likely to affect the outcomes?

5. **Factors likely to be present in the wider environment through the performance period**—These include factors such as the economy, demographic shifts, and major changes in the community.

6. **Recent or pending changes in legislation and other requirements**—To what extent will new legislation, regulations, or other requirements likely to increase or decrease the ability of the program to produce favorable outcomes?

7. **Changes planned by the program in policies, procedures, technology, and so on**—It is important to consider lead times to implement such changes.

8. **Likely lag times from the time the program is implemented until the outcomes are expected to occur**—For some outcome indicators, effects will be expected in the performance period they occur, but for others, effects will occur primarily in the out years.

Section 5. Reporting GPRA Targets & Reviewing Annual Progress

Both the initial target submissions in the site Data Plans and the final submissions in the annual performance reports should include explanations of how targets were set for each indicator, acknowledging the site’s baseline data, actual performance data in the previous and current years, the continuum of solutions supporting each indicator, and previous data or other evidence (such as benchmarks and standards) used in target setting and revision. The below narrative offers a model for the target setting process both initially and in annual performance reports, as well as an example of how targets will be submitted in a site’s Data Plan.

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A. Initial Target Setting and Submission in the Site Data Plan

Sample Thought Process: Our 2012 baseline data show that only 25 percent of 3-year-olds in the Promise Neighborhood demonstrated age-appropriate functioning. We are implementing the ABC model across our five service partners. When a nearby pre-K program implemented the ABC model, their results showed that 90 percent of children in the program for three years exhibited age-appropriate functioning at three years old. We think we can fully implement this program by September 2013 and enroll 126 3-year-old PN children by then, for a coverage rate of 14 percent. By year 5 we can achieve coverage of 84 percent. Based on this information, we have set the below ranges for age-appropriate functioning among 3-year-olds for the PN population.

We made a number of simplifying assumptions—one of which is that we don’t assume any program attrition. Even then, and with what is probably a very high success rate of 90% for children receiving the full three-year treatment, we only reach 39% age-appropriate functioning by 2016 because we separated the population by the age at which children entered the program and therefore their separate durations of treatment and expected program effects. Not all children reached by the program (and some still won’t be reached by 2016 given our assumed penetration rates) will receive the full three-year treatment required for a 90% success rate.

Note: Setting targets will require sites to make a number of assumptions, and there are several acceptable methods for sites to do that. Sites are expected to articulate the assumptions made based on the data available in their own target setting processes.

Sample Data Plan Submission:

<table>
<thead>
<tr>
<th>Baseline and Target Setting</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>Baseline Data Source and Year</th>
<th>Target Assumptions and Evidence Base</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GPRA 2:</strong> Number and percent of three-year olds and children in kindergarten who demonstrate at the beginning of the program or school year age-appropriate functioning across multiple domains of early learning.</td>
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<tr>
<td><strong>Associated Solutions:</strong></td>
<td><strong>ABC Model:</strong> Service partner #1, Service partner #2, ..., Service partner #5</td>
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<td></td>
<td></td>
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<tr>
<td><strong>Three-Year Olds</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Baseline:</td>
<td>25%</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Baseline Calculation:</td>
<td>Number of 3yos attending target programs/schools with age-appropriate functioning using the 2011 ECSA: 50 (numerator)</td>
<td>2011 Early Childhood State Assessment (ECSA)</td>
<td>Nearby pre-K previous program results (90% after 3 years) and expected</td>
<td></td>
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</tr>
</tbody>
</table>

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4 This is a completely fictitious example for illustrative purposes only.
Baseline and Target Setting

<table>
<thead>
<tr>
<th>Year</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>Baseline Data Source and Year</th>
<th>Target Assumptions and Evidence Base</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Number of 3yos participating in the PN early childhood programs assessed using the 2011 ECSA: 200 (denominator)</td>
<td>PN program penetration rates: Y2-14% Y3-28% Y4-56% Y5-84%</td>
</tr>
<tr>
<td>Targets:</td>
<td>20-30%</td>
<td>20-30%</td>
<td>22-32%</td>
<td>34-44%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Target Calculation:</td>
<td>We are implementing the ABC model across our five service partners. When a nearby pre-K program implemented the ABC model, their results showed that 90 percent of children in the program for three years exhibited age-appropriate functioning. We think we can fully implement this program by September 2013 and enroll 126 3-year old PN children by then, for a coverage rate of 14 percent. By year 5 we can achieve coverage of 84 percent. Based on those assumptions, we have set the following targets for age-appropriate functioning among 3-year-olds for the PN population.</td>
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</tr>
</tbody>
</table>

B. Annual Target Reviews and Discussion in the APR

Understanding whether the children enrolled in the Promise Neighborhood are meeting age-appropriate targets is important for sites’ own evaluation purposes. Although targets are set for each out-year in advance, sites should review targets against actual performance data on an annual basis, as more data becomes available to provide further understanding of prior performance and future expectations of program outcomes. In addition, sites are expected to discuss their performance relative to their previously specified targets in their APRs for the department. The example below provides a model of how sites can report and discuss their performance relative to targets in the APR.
APR Submission:

<table>
<thead>
<tr>
<th>3.a. Performance Measure</th>
<th>Measure Type</th>
<th>Quantitative Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attendance rate of students in 6th, 7th, 8th, and 9th grade as defined by chronic absenteeism.</td>
<td>GPRA 5</td>
<td>2013 Target</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Raw Number</th>
<th>Ratio</th>
<th>%</th>
<th>Raw Number</th>
<th>Ratio</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>126</td>
<td>126 / 661</td>
<td>19%</td>
<td>96</td>
<td>96 / 661</td>
<td>15%</td>
</tr>
</tbody>
</table>

Explanation of Progress (Include Qualitative Data and Data Collection Information):

Shown above is the aggregated number and percent of 6th, 7th, 8th, and 9th grade students who were chronically absent during school year 2012–13, defined as missing 10 percent or more of enrolled school days. Our 2012 APR reported a baseline attendance rate of students in 6th, 7th, 8th, and 9th grade as defined by chronic absenteeism of 25 percent. For 2013, our target was set at 19 percent based on the average chronic absentee rate over the past three school years and the substantial downward trend shown in that beginning of year data. Our 2013 APR actual performance data reports a chronic absentee rate of just 15 percent, calculated using the recommended data source and formula in the Guidance Document. This means the actual chronic absenteeism rate was 4 percentage points less than our target rate in 2013. Given this data, we will continue to work toward our set targets and actually expect our 2014 chronic absenteeism rate to be between 8-12 percent. This target range takes into account the prior performance data and downward trend, but also recognizes that given this substantial improvement, only smaller improvements in the GPRA indicator can now be reasonably expected.

Section 6. Sources for GPRA Statistics, Standards, & Other Data

As stated before, experience with an indicator is important in setting targets.

The Urban Institute has researched benchmark statistics and sources for specific GPRA indicators and has provided that data in the Promise Neighborhoods GPRA Benchmark Statistics and Sources document in the appendix. For indicators for which the Urban Institute did not find an appropriate national benchmark, sites may find the below data sources helpful for target setting.

As noted earlier, sites will need to estimate the impact of partial coverage and less-than-complete implementation of a solution on the indicators, ideally based on research specific to the solution implemented if available.

Child Trends DataBank: http://www.childtrends.org/databank/
NCES DataLab: http://nces.ed.gov/datalab/
NEA Reference Center: http://www.nea.org/home/32073.htm
ED Data Express: http://www.eddataexpress.ed.gov/
Child Health Data: http://childhealthdata.org/home
Section 7.  GPRA Target Setting Evaluation Criteria

The following criteria will be used by the Urban Institute to evaluate the completeness of final GPRA targets submitted by implementation grantees:

I. Targets should be aligned with a reliable, updatable baseline data source on the GPRA population.
   a. Data and targets aligned with GPRA definition
      i. Appropriate population
      ii. Appropriate data elements
      iii. NOFA definition
      iv. Guidance doc recommendation
   b. Data can be updated every 1-2 years and reliably compared with baseline to measure progress over course of grant.
   c. Targets set relative to established baseline

II. Targets should be based on evidence about solutions being put into place and a realistic assessment of the impact they will have on the GPRA population over the course of the Promise Neighborhoods grant.
   a. Solutions are aligned with GPRA
   b. Evidence of solution impact used to establish targets
   c. Scale of solutions taken into account
   d. Solution overlap addressed
   e. Partners included in target setting process
   f. External efforts or conditions beyond the control of the PN taken into account

III. Promise Neighborhood should provide adequate documentation of target setting process.
   a. UI program results planning worksheet (or equivalent)
      i. Baseline data sources and calculation
      ii. List of solutions aligned with GPRA
         1. Enrollment and performance measures in baseline year
         2. Projected enrollment and performance measures for future grant years
   b. UI target planning worksheet (or equivalent)
      i. Baseline and projected population counts for all grant years
      ii. Expected solution impact on GPRA
      iii. Discussion of other issues affecting target setting
         1. Overlap among different solutions
         2. Program attrition
         3. Time and duration of program effects
         4. External efforts or conditions beyond the control of the PN
   c. Narrative describing target setting process for each GPRA
Section 8. Submission Schedule

Fiscal Year 2011 Implementation Grantees

FY11 grantees are working one-on-one with Urban Institute site liaisons to complete the submission of baselines, along with targets finalized to date, as part of the APR Ad-hoc Report due on January 31st. Subsequently, FY11 grantees will, with Urban Institute assistance, prepare a final submission of all baselines and targets by March 31st, and final submission of the overall Data Plan by April 30th. The intensive TA is being provided to FY11 grantees as these submissions will be final.

For the January APR ad hoc (due 1/31/2014) FY11 sites should submit:

- Complete baselines for all 15 GPRAs
- Final targets for only those GPRAs that have been completed in time for the ad hoc submission. FY11 sites should not include older targets or targets that are not yet final in the APR ad hoc.

For the March final submission deadline (due 3/31/2014) FY11 sites should submit:

- Complete baselines and final targets for all 15 GPRAs

Fiscal Year 2012 Implementation Grantees

For FY12 grantees, all baselines and targets should be submitted in the Ad-hoc Report on January 31st and the full Data Plan should be submitted by April 30th, following the Urban Institute guidance as closely as possible. The Urban Institute will review all FY12 submissions with the Department of Education and the department will communicate with FY12 grantees about follow-up TA in the late spring of 2014 and any required revisions.

FY12 sites should include complete baselines and targets in their January APR ad hoc submission.

For more information on Data Plan requirements, please stream or download the recent Data Plan webinar or contact promisedata@urban.org.
### Section 9. Promise Neighborhoods GPRA Benchmark Statistics & Sources

<table>
<thead>
<tr>
<th>GPRA Indicator</th>
<th>National benchmark</th>
<th>Source</th>
<th>Notes on comparability with GPRA</th>
</tr>
</thead>
<tbody>
<tr>
<td>GPRA Measure 1. Number and percent of children, from birth to kindergarten entry, who have a place where they usually go, other than an emergency room, when they are sick or in need of advice about their health.</td>
<td>58 percent of children ages 0 to 5 nationally had a medical home, estimated for 2011–2012.</td>
<td>2011–2012 National Survey of Children’s Health: <a href="http://www.childhealthdata.org/browse/survey/results?q=2507&amp;r=1&amp;g=448">www.childhealthdata.org/browse/survey/results?q=2507&amp;r=1&amp;g=448</a></td>
<td>To qualify as having a Medical Home in the NSCH survey children must meet the criteria for adequate care on three components: personal doctor or nurse, usual source for care, and family-centered care. The family-centered care component is not in the GPRA.</td>
</tr>
<tr>
<td>GPRA Measure 2: Number and percent of three-year-olds and children in kindergarten who demonstrate at the beginning of the program or school year age-appropriate functioning</td>
<td><em>UI did find not appropriate national benchmarks for this measure.</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- 13 -
<table>
<thead>
<tr>
<th><strong>GPRA Indicator</strong></th>
<th><strong>National benchmark</strong></th>
<th><strong>Source</strong></th>
<th><strong>Notes on comparability with GPRA</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GPRA Measure 3</strong>: Number and percent of children from birth to kindergarten participating in center-based or formal home-based early learning settings or programs</td>
<td>Approximately 60 percent of children nationally 5 and younger not enrolled in kindergarten were in at least one weekly nonparental care arrangement. Among children in a weekly nonparental care arrangement, 56 percent were attending a day care center, preschool, or prekindergarten (center-based care); 42 percent were cared for by a relative (relative care); and 24 percent were cared for in a private home by someone not related to them (nonrelative care).</td>
<td>2012 National Household Education Surveys Program (NHES 2012): <a href="http://nces.ed.gov/pubssearch/pubsearchinfo.asp?pubid=2013029">http://nces.ed.gov/pubssearch/pubsearchinfo.asp?pubid=2013029</a></td>
<td>The national statistic of 60 percent should be read as &quot;60 percent attend either center-based or formal home-based childcare&quot;. Therefore the national comparison does not conform to the exact GPRA definitions because it does not give break outs for center-based and home-based childcare separately nor does it report children who attend both center and home-based.</td>
</tr>
<tr>
<td><strong>GPRA Measure 4</strong>: Number and percentage of students at or above grade level according to state mathematics and English language arts assessments in at least the grades required</td>
<td><em>Grantees should compare their measures to state level benchmarks as standards differ across states</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>GPRA Measure 5</strong>: Attendance rates of students in 6th, 7th, 8th, and 9th grades</td>
<td><strong>ADA</strong>: 96 percent in 2011–2012.</td>
<td><strong>ADA</strong> from the 2011–2012 estimates by the National Education Association: <a href="http://www.nea.org/assets/img/content/NEA_Rankings_And_Estimates-2013_(2).pdf">www.nea.org/assets/img/content/NEA_Rankings_And_Estimates-2013_(2).pdf</a></td>
<td><strong>ADA</strong> estimated by NEA includes all elementary and secondary students. <strong>GPRA</strong> only asks for 6th, 7th, 8th and 9th graders</td>
</tr>
<tr>
<td><strong>GPRA Indicator</strong></td>
<td><strong>National benchmark</strong></td>
<td><strong>Source</strong></td>
<td><strong>Notes on comparability with GPRA</strong></td>
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<tr>
<td>Chronic absenteeism: a study published in 2012 estimates that 10 to 15 percent of students were chronically absent nationally.</td>
<td>Chronic absenteeism: <a href="http://new.every1graduates.org/wp-content/uploads/2012/05/FINALChronicAbsenteismReport_May16.pdf">http://new.every1graduates.org/wp-content/uploads/2012/05/FINALChronicAbsenteismReport_May16.pdf</a></td>
<td>Chronic absenteeism national data is difficult to come by and may be unreliable.</td>
<td></td>
</tr>
<tr>
<td><strong>GPRA Measure 6: Four-year adjusted cohort graduation rate</strong></td>
<td>Among the 50 states, the state-level adjusted cohort graduate rates for the 2010–2011 academic year ranged from 59 percent to 88 percent, with a median of 80 percent.</td>
<td>[ED Data Express](<a href="http://eddataexpress.ed.gov/data-element-explorer.cfm/tab/data/d">http://eddataexpress.ed.gov/data-element-explorer.cfm/tab/data/d</a> eid/127/sort/idown/)</td>
<td>Given the range of graduation rates nationally, Promise Neighborhoods should consider benchmarking progress against their state's rates.</td>
</tr>
<tr>
<td><strong>GPRA Measure 7: Number and percent of Promise Neighborhood students who graduate with a regular high school diploma and obtain postsecondary degrees, vocational certificates, or other industry-recognized certifications or credentials without the need for remediation</strong></td>
<td>UI did find not appropriate national benchmarks for this measure.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>GPRA Indicator</strong></td>
<td><strong>National benchmark</strong></td>
<td><strong>Source</strong></td>
<td><strong>Notes on comparability with GPRA</strong></td>
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<tr>
<td><strong>GPRA Measure 8:</strong> Number and percent of children who participate in at least 60 minutes of moderate to vigorous physical activity daily</td>
<td>A 2011 nationally representative sample found 29 percent of students in grades 9 to 12 reported participating in at least 60 minutes of moderate or vigorous physical activity daily.</td>
<td>2011 Youth Risk Behavior Survey: <a href="http://www.cdc.gov/mmwr/pdf/ss/ss6104.pdf">www.cdc.gov/mmwr/pdf/ss/ss6104.pdf</a></td>
<td><strong>GPRA definition is for Middle and High School students while the national statistic is for only High School students.</strong></td>
</tr>
<tr>
<td><strong>GPRA Measure 9:</strong> Number and percent of children who consume five or more servings of fruits and vegetables daily</td>
<td>23 percent of students in grades 9 to 12 consumed five or more servings of fruits and vegetables daily in 2011.</td>
<td>2011 Youth Risk Behavior Survey – data tabulated by UI: <a href="http://www.cdc.gov/healthyyouth/yrbs/index.htm">www.cdc.gov/healthyyouth/yrbs/index.htm</a></td>
<td><strong>GPRA definition is for Middle and High School students while the national statistic is for only High School students.</strong></td>
</tr>
<tr>
<td><strong>GPRA Measure 10:</strong> Number and percent of students who feel safe at school and traveling to and from school</td>
<td>96 percent of students ages 12 to 18 in 2009 reported not being afraid of attack or harm during the school year.</td>
<td>NCES Indicator of School and Crime Safety: <a href="http://www.bjs.gov/content/pub/pdf/iscs11.pdf">www.bjs.gov/content/pub/pdf/iscs11.pdf</a> (See page 73, Figure 17.1.)</td>
<td><strong>GPRA definition is not exact match to question used for national number</strong></td>
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<td><strong>GPRA Measure 11:</strong> Student mobility rate</td>
<td><em>UI did find not appropriate national benchmarks for this measure.</em></td>
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<td><strong>GPRA Measure 12:</strong> Number and percent of parents of children birth to kindergarten who report that they read to their children three or more times a week</td>
<td>55 percent estimated in 2005.</td>
<td>2005 Early Childhood Longitudinal Study, Birth Cohort: <a href="http://nces.ed.gov/dasol/tables/index.asp">http://nces.ed.gov/dasol/tables/index.asp</a></td>
<td><strong>National data is from 2005</strong></td>
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<tr>
<td><strong>GPRA Indicator</strong></td>
<td><strong>National benchmark</strong></td>
<td><strong>Source</strong></td>
<td><strong>Notes on comparability with GPRA</strong></td>
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<td><strong>GPRA Measure 14:</strong> For children in the 9th through 12th grades, number and percent of parents who report talking with their child about the importance of college and career</td>
<td><strong>Talk about careers:</strong> 79.29% estimated in 2002.</td>
<td>NCES Educational Longitudinal Survey 2002 – data tabulated by UI: <a href="http://nces.ed.gov/surveys/els2002/avail_data.asp">http://nces.ed.gov/surveys/els2002/avail_data.asp</a></td>
<td>ELS 2002 population is 10th graders, while the GPRA population is for all high school students.</td>
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<td><strong>Talk about college:</strong> 74.94% estimated in 2002.</td>
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<td><strong>Talk about both college and careers:</strong> 64.93% estimated in 2002.</td>
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<tr>
<td><strong>GPRA Measure 15:</strong> Number and percent of students who have school and home access to broadband internet and a connected computing device</td>
<td><em>UI did find not appropriate national benchmarks for this measure.</em></td>
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</tbody>
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