

Lakeshore CAP Needs Assessment

2017-2020

2017-
2020

A survey of Community Leaders and Low Income Residents of the service area of
Lakeshore CAP

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2017-2020

DOOR, KEWAUNEE, MANITOWOC, SHEBOYGAN COUNTIES

PURPOSE:

A Needs Assessment can be used in two ways. It is a planning document outlining areas in our community that are substandard or failing, and can use attention and programming to improve or repair the condition. Another aspect of the document is to illustrate change. What has changed in the needs of the community over the period since the last assessment? Do the respondents still feel that the community has the same needs, or have the needs changed in response to the work of the previous three years.

Hopefully, we will be able to use this document for both purposes. Comparing answers from one period to another should allow us to measure some progress or show us that concerns remain and we need to redouble, or re-evaluate our efforts. Data from the survey respondents compared with generic data obtained from other sources can show us how our local efforts have worked on the targeted areas and how new needs in the community have emerged to take on urgency, and hence become worthy of our focus. Data available from secondary sources illuminates the responses we have locally. They put local responses into context and allow us to relate a wider range of information to the concerns expressed locally.

We will use the information developed in this process to evaluate existing program and to formulate new programming based on the new needs rising. It may be that similar concerns will span both reports. In that case, we will have to determine if the design of our programs are delivering the results we intended. The difficult question or invest or divest will have to be considered for each program, and they will have to be fully considered in terms of resources expended, results obtained, and continued need.

SCOPE:

This assessment covers the counties of Door, Kewaunee, Manitowoc, and Sheboygan. The qualities assessed are the conditions affecting the low-income population in the four county areas. The information used in the report is gleaned from surveys of low income participants including the elderly, pregnant adolescents, minority populations, the homeless, and single parent households. The details of the data collection address the requirements of the CSBG statutes and provides an opportunity for both the impoverished and civic leaders to participate.

1. The collection of data for the needs assessment addresses the requirement of the CSBG statutes, and provides an opportunity for the impoverished and local civic leaders both to participate. Specifically the information used in this assessment and subsequent planning documents includes information from the following elements:
 - *Client Intake Data*
 - *Census Data (2000 and 2010)*
 - *American Community Surveys*
 - *Domestic Abuse Victims*
 - *Elderly Poor*
 - *Formerly Homeless and Homeless Persons*
 - *Religious and Charitable Groups*
 - *County Human Services*
 - *Surveys*
 - *Low Income People*
 - *Minority Persons*
 - *Business and Civic Leaders*
 - *Local Officials*
 - *Employees*
2. The development of the questions and scales on the survey were determined after the following:
 - *Review of the public information and research relating to low-income people in our areas*
 - *Discussion with Agency Program and Planning Committees*
 - *Consultation with partner Social Service Agencies*
 - *Discussion with Lakeshore CAP Board of Directors*
 - *Roundtable Discussions and Focus Groups with Program Participants*
3. Lakeshore CAP's Low Income Needs Assessment Survey was distributed to the following groups:
 - *Low-Income Persons*
 - *Minority Persons*
 - *Homeless and formerly Homeless Persons*
 - *Elderly Poor*
 - *Victims of Domestic Abuse*
 - *Ex-offenders*
4. Lakeshore CAP's Key Informant Survey is distributed to the following individuals:
 - *Local Elected/Appointed Officials*

- *Law Enforcement Personnel*
 - *Religious Groups*
 - *Other Social Service Agency Officers*
 - *County Human Service Personnel*
 - *Business and Civic Leaders*
5. The information developed from these surveys, along with similar surveys of the area done by other agencies or organizations, is discussed and forms the basis for planning by the Lakeshore CAP staff and Board of Directors. Interpretation of the survey data highlights specific problems impacting the low income population in our communities. This information is used to select those areas of need that are most appropriate and possible for Lakeshore CAP to address. The information becomes the basis of program design decisions and part of the application process for program funding.
6. Given the variety and difficulty of the problems facing low income people in our service area, the selection of programming and funding will be prioritized using the following information:
- *Needs Assessment*
 - *Discussions among the Board of Directors*
 - *Agency Staff Recommendations*
 - *Cost/Benefit Analysis*
 - *State and Local Funds available*
 - *Federal and other private funding available*
 - *Agency capacity to make a meaningful impact*
7. Specific and unusual local conditions that may impact the above discussions are described and considered in separate county discussions later in this report.
8. Low income persons contribute to the deliberations in the following ways:
- *Serve on governing Board*
 - *Serve on Project Committees*
 - *Are employed by the Agency in specific instances*
 - *Serve as Volunteers*

DESCRIPTION OF SERVICE AREA

Lakeshore Community Action Program is the designated Community Action Agency for a four county area in Northeast Wisconsin. In addition to these four counties, Lakeshore CAP also has contact with 9 counties in Eastern Wisconsin through its administration of the TEFAP program, distributing surplus food from the Federal Commodities Program to

food pantries in the area. The counties served by the majority of our programming are Door, Kewaunee, Manitowoc, and Sheboygan.

Door County

Door County occupies the Door Peninsula with the Bay of Green Bay to the west and Lake Michigan to the east. It is 482 sq. miles, and has a population density of 57.6 per sq. mile. It is not in a metropolitan statistical area. The population of Door County is estimated at 27,554 (July 2015). This is a decline of .8% from the census of 2010, and represents a common theme across the region. 27.6 percent of the population are over age 65, considerably higher than the state average. 16.4% of the population is under age 18; a percentage that is down considerably from 2010 (18.3%). Home ownership is 77.9% in Door County, considerably higher than state rates. Median home value is \$192,000. This is over \$30,000 above the state average. Many of the homes are seasonal and vacation and skew values to the high side. Total employment in Door County is 9,714 (2014), a decrease of 6.3% from 2013. Median Household income is \$50,078, slightly below the state average. While the state average has changed very little, the median income represents an increase of \$2,000 per year. However, 11% of the residents in Door County report incomes below the federal poverty level, an increase of 2% since 2012. The largest Employers in Door County are:

- Bay Shipbuilding
- Ministry Door County Medical Center
- Hatco Corporation
- County of Door County Government
- Therma-Tron-X
- N.E.W. Industries
- Sturgeon Bay School District
- Baylake Bank
- Southern Door School District
- Marine Travelift/ExacTech

Non Farm employment remains slightly lower than 2012 (9,829 vs. 9,714), but this reflects the reduction in the workforce that has taken place over the period.

Kewaunee County

Kewaunee County is immediately to the south of Door County, and is bordered by Lake Michigan to the east and Green Bay and the Fox Valley to the west. It consists of 343 sq. miles with a population density of 60.1 people per sq. mile. Kewaunee County is included within the Green Bay Metro statistical area. The population estimate for 2015 is 20,366, a 1% decrease from the 2010 census. Kewaunee County also has an increasing percentage of people aged 65 and over. There is 19.3% of the population over 65 in July 2015 vs. 16.5% in 2010. Median Household income remains above the state average at \$53,023, and the poverty rate is at 8.9%, also below the state average and smallest of the region but increasing from the last assessment. The median home value in Kewaunee is \$145,000. Kewaunee has the highest rate

of high school graduation, but the lowest level of post-secondary education (14.4% with BA's). The ten largest employers in Kewaunee (2014) are:

- WS Packaging
- Kewaunee Fabrications
- NEW Plastics Corp
- Algoma Hardwoods
- Vollrath Company /
- Dominion
- D&S Machine
- Pagels Ponderosa Dairy
- Agropur, Inc
- Floral Plant Growers

Manitowoc County

Manitowoc County is to the south of Kewaunee County. It is bordered on the east by Lake Michigan and to the west by Calumet County with the City of Appleton also to the west. It is 589 sq. miles with a population density of 138 persons per sq. mile. This density reflects the existence of Two Rivers and Manitowoc, two cities within the county border. The population of Manitowoc is 79,806, a drop of 2% since the 2010 census. Household income has declined to \$48,629 from \$50,181 reflecting a loss in higher paying manufacturing jobs and slower recovery from the recession of 2008. The poverty rate in Manitowoc has risen to 10.8% from 9.3%. Manitowoc is an agricultural powerhouse, but employment is concentrated in Healthcare and Manufacturing. The 10 largest employers in Manitowoc County are:

- Manitowoc Public Schools
- Manitowoc Cranes
- Manitowoc County
- Federal-Mogul
- Parker Hannefin
- Manitowoc FSG Operations
- Aurora Medical Group, Inc.
- City of Manitowoc
- Walmart
- Lakeside Foods

Sheboygan County

Sheboygan County is the southernmost county in Lakeshore CAP's area. It is bounded on the east by Lake Michigan and to the west by Fond du Lac city and county. It is also the largest in terms of population with the cities of Sheboygan and

Plymouth included. With a population of 115,507, Sheboygan is the largest of the four counties served by Lakeshore CAP and the only one with a growing population. Median Household income is \$53,029, above the state average. The poverty rate in Sheboygan is 9.1%, again the lowest of the four counties. Sheboygan is slightly more diverse racially. 90% of the population is Caucasian with a larger Hispanic population than the other counties. 70% of the homes are owner occupied. The proportion of residents over the age of 65 is 16.7%, an increase since 2010 of 2.1%. The 10 largest Employers in Sheboygan are:

- Kohler Co
- Bemis Mfg. Co
- Nemak,
- Aurora Medical Group Inc
- Aurora Health Care Central Inc
- Sargento Foods Inc
- Acuity,
- Johnsonville Sausage,
- Rockline Industries Inc
- Fresh Brands Distributing Inc

Survey Methodology

Review of Social Indicators

Data from outside sources have included selections from the American Community Survey – performed by the US Census – statistics gathered from reports to the Department of Children and Families from the state of Wisconsin, and statistics gathered from the Community Health Needs Assessment sponsored by Holy Family Memorial Hospital and Aurora Medical Center of Manitowoc County. The indicators examined included:

- Population Profile
- Employment
- Education
- Housing
- Income
- Nutrition
- Healthcare

We specifically looked at these indicators for institutional information to illuminate the responses to the survey we distributed.

In addition, we have data provided by the Kids Count Website (<http://datacenter.kidscount.org/>) of the Anne E. Casey Foundation that examines similar sources and develops a series of statistics of particular interest to childhood development including numbers and trends of CHIPS orders issued, low or no cost school lunch enrollment, and SNAP usage. The Kids Count website also adds statistics relating to the well- being of children as well as the incidence of risky health behaviors and general economic indicators relating to the well- being of families.

General Survey and Distribution

The **Community Leader survey** was developed after discussions with such leaders, a review of the news stories throughout the year and with input from the Lakeshore CAP staff and Board. The survey design is qualitative in nature. The main body lists of series of community problems with scales along three dimensions for each problem. The scales are simple 1 through 7 rating scales with 7 being generally a high value and 1 a low. The three scales are along the qualities of Community Awareness, Community Action, and the Effectiveness of that Action. Each respondent is also asked to identify the three most serious challenges facing their community.

This year we took advantage of electronic delivery and performed the community leader survey via Survey Monkey on the internet. We were able to duplicate the listing of community problems with the accompanying 7 point scale. 60 survey invitations were sent yielding a response of 12 or 20%. The response rate was disappointing but roughly the same as experienced in previous surveys. We are able to use a similar survey performed by the Community Health Needs Assessment to expand on the results of our survey in matters of population health.

Low Income Survey

The low income survey was distributed through the months of March and April of 2016. Surveys were made available at Lakeshore CAP's facilities for completion during intake, and made available through agencies such as Catholic Charities, the AODA treatment center, WIC program offices, pregnancy counseling offices and other partner locations throughout the county. Survey respondents totaled 168. Following are some of the demographic statistics of the low income respondents:

Household

Single Custodial Parent Female	32	19%
Single Custodial Parent Male	7	4%
Two Parent Household	47	28%
Single Person	62	37%
Multi Generation Family	12	7%
Multi Person non-related HH	5	3%
Joint Custody	8	5%

Marital Status

Single	88	53%
Married	46	28%
Divorced	23	14%
Widowed	12	7%
Separated	8	5%
Cohabitation/not married	10	6%

Education

Still in School	22	13%
Did not complete HS	33	20%
GED	29	17%
High School Graduate	72	43%
Tech College	21	13%
Associates Degree	16	10%
College Graduate	15	9%
Graduate School	7	4%

Race and Ethnicity

African American	17	10%
Asian Pacific Islander	6	4%
Hispanic	14	8%
Native American/ Native Alaskan	7	4%
White	132	79%
Latino	3	2%
2 or more races	9	5%
Other	5	3%

Housing

Rent	105	63%
Own	48	29%
Sharing dwelling with another family	8	5%
Homeless	12	7%
Looking for apt/house rental	48	29%
Looking to own a home	57	34%

Age of home	0	0%
Without Home Insurance	36	22%
Without Housing	21	13%

Income

< 6,000	32	19%
6,000 - 11,999	28	17%
12,000 - 17,999	31	19%
18,000 - 23,999	19	11%
24,000 - 29,999	15	9%
30,000 - 35,999	13	8%
36,000 - 41,999	5	3%
42,000 - 47,999	3	2%
48,000 - 53,999	2	1%
54,000 - 59,999	3	2%
60,000 - 64,999	0	0%
65,000 >	2	1%

Health Insurance

Children - Badger Care	73	44%
Children - Employer provided	10	6%
Children Other coverage	6	4%
Children - No coverage	1	1%
Adults - Badger Care	83	50%
Adults - Employer Coverage	32	19%
Adults - Other Coverage	45	27%
Adults - No Coverage	18	11%

- Percentages frequently exceed 100% due to multiple responses

The numbers reported above reflect the numbers of answers to the questions. Some questions were left blank, but the percentages reflect the number of answers divided by the total number of surveys returned.

Data Presentation

Table 1 is from the community leaders survey and measures their perception of community awareness of a list of problems derived from focus groups, staff discussions and board deliberations.

Table 1. Community Awareness of Concern

Concerns: Drug Abuse Awareness	5.27
Concerns: Child Abuse- Awareness	5.00
Concerns: Domestic Violence Awareness	4.91
Concerns: Drug Sales Activities Awareness	4.83
Concerns: Adult Crime: Awareness	4.82
Concerns: Sexual Assault Awareness	4.80
Concerns: Youth Drugs and Alcohol Abuse Awareness	4.70
Concerns:Alcohol Abuse-General Awareness	4.58
Concerns: Teenage Pregnancy Awareness	4.50
Concerns: Lack of Mental Health Services Awareness	4.36
Concerns: Unemployment Awareness:	4.36
Concerns: Youth Gang Activity Awareness	4.33
Concerns: Lack of Evenings/Nights/Weekend Child Care Awareness	4.25
Concerns: Inadequate Food Awareness	4.22
Concerns: Poverty Awareness	4.20
Concerns: Lack of Affordable Quality Child Care Awareness	4.14
Concerns: Racial, sexual, mental health Discrimination Awareness	4.11
Concerns: Lack of skills, training, education Awareness:	4.10
Concerns: Lack of Pre-Natal Care and Support Awareness	4.10
Concerns: Youth Crime: Awareness	4.09
Concerns: Unaffordable Medical Care Awareness	4.00
Concerns: Sexually Transmitted Diseases Awareness	4.00
Concerns: Elder Abuse Awareness	4.00
Concerns: Youth Truancy: Awareness	3.90
Concerns: Parenting Support Awareness	3.90
Concerns: Lack of Affordable Dental Care Awareness	3.90
Concerns: Illiteracy Awareness	3.89
Concerns: Lack of Affordable, Safe, and Sanitary Housing Awareness	3.88
Concerns: Long Mental Health Waiting Lists Awareness	3.78
Concerns: Sexual Harassment Awareness	3.60
Concerns: Gambling Addictions: Awareness	3.36
Concerns: Sexual Orientation Discrimination Awareness	3.30
Concerns: Lack of Support for New Dads, Fatherhood Initiative Awareness	3.25

Problems considered to be the most pressing facing our communities center around substance abuse (Drug and Alcohol use entries are 1,4,7, and 8), family violence (Domestic and Child abuse and Sexual Assault at 2,3, and 6) and a variety of issues that are related such as adult crime, teenage pregnancy and lack of mental health Services.

Table 2 reflects the community leaders' view of the actions being taken within the community to combat the concerns listed in table 1. Not surprisingly, most of the items with a high awareness are also the items with the most efforts to

combat them. Rising toward the top are also programs with success in the area including the efforts of Food Pantries, and efforts to establish pre-natal care among pregnant women.

Table 2. Level of Community Effort

Concerns: Child Abuse Actions	4.78
Concerns: Domestic Violence Actions	4.60
Concerns: Drug Abuse Actions	4.58
Concerns: Teenage Pregnancy Actions	4.50
Concerns: Lack of Pre-Natal Care and Support Actions	4.50
Concerns: Sexual Assault Actions	4.50
Concerns: Inadequate Food Actions	4.50
Concerns: Adult Crime: Actions	4.45
Concerns: Parenting Support Actions	4.44
Concerns: Drug Sales Activities Actions	4.33
Concerns: Youth Crime: Actions	4.30
Concerns: Lack of Affordable Dental Care Actions	4.10
Concerns: Youth Drugs and Alcohol Abuse Actions	4.09
Concern: Unemployment: Actions:	4.09
Concerns: Lack of skills, training, education Actions:	4.00
Concerns: Lack of Evening/Nights/Weekend Child Care Actions	4.00
Concerns: Youth Truancy: Actions	3.92
Concerns: Youth Gang Activity Actions	3.92
Concerns: Elder Abuse Actions	3.90
Concerns: Poverty Actions	3.90
Concerns: Sexually Transmitted Diseases Actions	3.80
Concerns: Sexual Harassment Actions	3.78
Concerns: Unaffordable Medical Care Actions	3.73
Concerns: Alcohol Abuse-General- Actions	3.67
Concerns: Illiteracy Actions	3.67
Concerns: Lack of Affordable Quality Child Care Actions	3.56
Concerns: Racial, sexual, mental health Discrimination Actions	3.56
Concerns : Lack of Mental Health Services: Actions	3.50
Concerns: Lack of Affordable, Safe, and Sanitary Housing Actions	3.33
Concerns Gambling Addictions: Actions	3.18
Concerns: Sexual Orientation Discrimination Actions	3.11
Concerns: Lack of Support for New Dads, Fatherhood Initiative Actions	3.10
Concerns: Long Mental Health Waiting Lists Actions	3.10

The final table presents their idea of how effective these programs have been. These answers reveal areas that need attention either due to lack of results or success. In this latter category are efforts to bring pre-natal care to a larger

segment of the population and efforts to combat child abuse and domestic violence. In the former category are efforts to combat substance abuse in all its forms and in efforts to increase availability of mental health services.

Rising in ranking in the outcome discussion is also Skills training and unemployment, or more properly employment programs.

Table 3. Ability to achieve positive result

Concerns: Child Abuse Outcomes	4.44
Concerns: Teenage Pregnancy Outcomes	4.30
Concerns: Lack of Pre-Natal Care and Support Outcomes	4.30
Concerns: Inadequate Food Outcomes	4.22
Concerns: Sexual Assault Outcomes	4.20
Concerns: Youth Crime: Outcomes	4.10
Concerns: Lack of skills, training, education:	4.10
Concerns: Domestic Violence Outcomes	4.10
Concerns: Unemployment : Outcomes	4.09
Concerns: Parenting Support Outcomes	4.00
Concerns: Lack of Affordable Dental Care Outcomes	3.91
Concerns: Lack of Affordable Quality Child Care Outcomes	3.86
Concerns: Youth Gang Activity Outcomes	3.83
Concerns: Drug Sales Activities Outcomes	3.83
Concerns: Elder Abuse Outcomes	3.80
Concerns: Unaffordable Medical Care Outcomes	3.73
Concerns: Lack of Evening/Nights/Weekend Child Care Outcomes	3.71
Concerns: Sexually Transmitted Diseases Outcomes	3.70
Concerns: Poverty Outcomes	3.70
Concerns: Illiteracy Outcomes	3.67
Concerns: Sexual Harassment Outcomes	3.56
Concerns: Racial, sexual, mental health Discrimination Outcomes	3.44
Concerns: Youth Drugs and Alcohol Abuse Outcomes	3.42
Concerns: Youth: Truancy: Outcomes	3.40
Concerns: Alcohol Abuse-General Outcomes	3.36
Concern Gambling Addiction: Outcomes	3.30
Concerns: Drug Abuse Outcomes	3.25
Concern: Lack of Mental Health Services: Outcomes	3.22
Concerns: Lack of Affordable, Safe, and Sanitary Housing Outcomes	3.22
Concerns: Long Mental Health Waiting Lists Outcomes	3.14
Concerns: Sexual Orientation Discrimination Outcomes	3.13
Concerns: Lack of Support for New Dads, Fatherhood Initiative Outcomes	3.00
Concerns Adult Crime: Outcomes	0.00

Not surprisingly the responses to the request to list the three most pressing community problems also reflect both awareness and action tables by placing Mental Health and Drug Addiction at the top of the list. Housing, Poor Services and Unemployment are also significant with mentions as the most pressing as well as second and third most pressing.

Table 4. Top Ranked Problems areas

	Most pressing	2nd most pressing	3rd Most pressing
Mental Health	2	4	3
Drug Addiction	5	4	1
Housing	1	1	
Poor services	1	1	1
Unemployment	1	1	2
Abuse Neglect			1
Aging			1
Parent Education			1
Domestic Violence			1
Youth Crime			1

The final element of the community leaders survey is an assessment of the barriers to service experienced by those who may need them.

Table 5. Barriers to Service

Lack of Knowledge/Information about available services	5.14
Cost of Service	4.75
Lack of Transportation	4.60
Waiting Times/Lists	4.57
Reluctance to seek help outside of family/friends	4.57
Eligibility Restrictions	4.43
Dislike of Services	4.00
Lack of Child Care	4.00
Inconvenient Service Locations	3.86
Lack of Respectful Treatment	3.83
Inconvenient Hours of Service	3.60
Language Barriers	3.29
Confidentiality Concerns	2.50
Lack of Handicap Access (Accessibility)	2.00

Although the number of respondents to the community leader survey was low, the results directly parallel other community surveys asking similar questions. In the Community Health Needs Assessment performed earlier in the year, the key informant (community leader) survey identified the same two primary problems as well as food and growth and development (family education, child abuse prevention, and pre- natal care) as “top 5” community needs.

One observation we can make is that in the mind of the community leaders, those problems that are perceived and addressed will improve. The homogeneity of the top five measures in each of tables 1, 2, and 3 indicate this with one powerful exception. Drug abuse shows high in awareness and effort, but low in outcome. A similar pattern exists for mental health services. As the two are related in most people’s minds, it is not surprising.

We have to keep in mind that the recent surge in drug related activities including overdose deaths, suicides, and associated crime is a new and growing phenomenon and has its roots outside the area. While efforts to combat it are vigorous, they have not had time to have an effect. Most of the other community concerns are reflected at similar levels in former needs assessments, and the programs put in place to alleviate them have been in place for some time. While the fact that they are still perceived as community problems is worrying, the high ranking in the outcomes table indicates a perception that the programs are working, and that the problem would be worse if unaddressed. These programs are working and should be continued.

Low Income Data

Table 6. Services - Availability and Usefulness

	Available		Useful	
	Score	Rank	Rank	Score
Food Pantry	6.29	1	1	6.00
mental Health counseling	5.72	2	6	4.90
ADOA counseling	5.70	3	9	4.69
Emer Energy assist	5.44	4	2	5.63
Transportation assistance -	5.32	5	5	4.92
Help finding child care	5.29	6	18	3.88
Family Education	5.25	7	8	4.90

Homebuyer Assistance	5.17	8	20	3.38
Energy Conservation ed	5.14	9	22	3.00
Family Planning	5.00	10	4	5.00
Help finding job	4.89	11	11	4.62
major car repair or replac -	4.71	12	12	4.50
assistance with meds	4.67	13	13	4.47
Hsehold budget counseling	4.63	14	7	4.90
Youth Services	4.60	15	21	3.33
Childhood immune	4.56	16	3	5.14
Senior Meals	4.55	17	14	4.46
Hsg Counseling	4.40	18	24	3.88
Home Delivered Meals	4.33	19	19	3.67
Hsg weatherization	4.25	20	16	4.42
Help finding hsg	4.20	21	17	4.13
Emergency Rental Assist	4.18	22	15	4.46
Older Worker Emplmt	4.00	23	23	2.83
Emergency Hsg	4.00	24	10	4.63
Hsg Rehab	2.17	25	25	2.17

Table 6 represents the response to questions about knowledge of availability and the usefulness of particular services. There are a number of artifacts of interest. First of all, the areas of most concern to the community leaders, Drug abuse and Mental Health, are available according to the low income respondents. However as evidenced in the outcomes portion of the Leader survey, the Low income respondents don't find them particularly useful. The items rated most useful to the low income population are those that address and immediate and distinct need – Food, assistance with utility bills, and transportation. One area that low income respondents feels is highly useful, but not readily available is household budgeting or basic household finance. There is a relationship with Catholic Charities to deliver this service, but there is not enough capacity. An area for greater service might be to shift more resources with LCAP to this rather than home buying counseling.

Area Wide Findings

Both survey components – community leader and low income – indicate several areas of community need. While the leaders try to address the root causes of community need, the low income participants are more focused on immediate circumstances.

AODA/Mental Health Services

Alcohol and Drug use show up in several areas. The large number of out of home placements recently is ascribed to the presence of drugs in these homes. Rises in youth and adult crime are also attributed to a desire for drugs. A lack of mental health services is leading

affected individuals to indulge in self-medicating which leads to greater involvement with drugs and eventual entry into the illegal drug culture.

Housing/Affordable Housing

The supply of affordable housing in the NE Wisconsin has fallen dramatically of late. The houses that do exist at an affordable rate are deteriorating and have difficulty passing Housing Quality Standards. The Federal Reserve has reported that there are less than 20 affordable units per 100 eligible families.

Parenting/Childcare/Children's issues

Abuse and neglect show as high awareness, action and outcome. Other parenting issues such as day care, and pre-natal care also register as concerns. Abuse reporting is down, but out of home placements have spiked with increased drug problems. Low income respondents say that assistance is available to find child care but not very useful due to high cost.

Employment/Skills

Although a few high profile plant closings are eliminating some local jobs, the employment market is tight, and people are being recruited from other companies. There is still a skills gap and the jobs with the highest projected growth are the least paid. Families are required to have two wage earners to reach economic stability, and this exacerbates problems with child care and family scheduling. The generally high stress level in families contributes to poor parenting, drug use, and other high risk behaviors.

Lakeshore CAP is in a position to positively impact these community areas. Programming exists in several specific areas, and new programming and activities will be evaluated on their impact in these four areas.

AODA Issues/Mental Health

Both Drug and Mental Health issues have intensified since the last Lakeshore CAP needs assessment. The influx of opiates, overdose deaths and suicides over the last two years has lent urgency to this topic. Overlying this topic is a lack of professional, medical resources for treatment in our area. Existing resources are overwhelmed and unable to meet the need for these type of services.

Our response to this is to tighten the coalitions in the community who are working to alleviate these problems. In conjunction with Healthiest Manitowoc County, we have taken a number of steps including advocating with legislators for the implementation of incentives for mental health professionals to locate in our area.

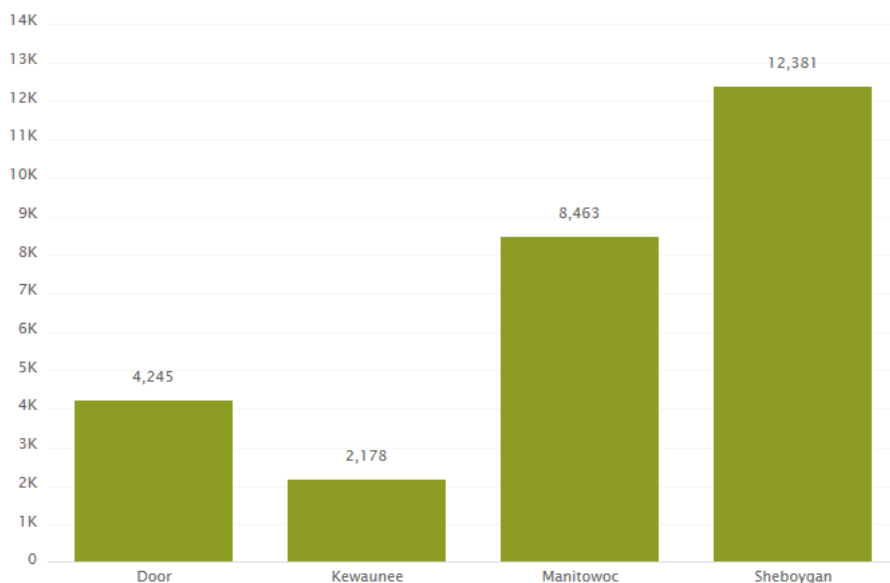
In the shorter term LCAP has acquired the programming of Jak's Place in Sturgeon Bay. This mental health drop in center works with those suffering from mental illness by presenting a number of therapeutic activities presented by trained, but non-medical staff. As this has proven successful in limited circumstances, and is a practice used by multiple locations and organizations through our area, we will seek to bring the administrations of these facilities together to compare notes, and exchange effective procedures, policies, and techniques.

This type of intervention has the advantage of occurring early, at a relatively low level, and locally. Utilizing peer support specialists to carry these programs out can expand access and reduce cost.

Drug treatment and recovery are fairly technical subjects. We will continue to collaborate with in-patient centers such as MARCO services in Manitowoc, but we will also develop some capacity in our youth service area, to insure that the message of recovery and consequences of drug involvement are clearly communicated to the youth in our programs.

Community coalitions are active in attempts to change behavior on a population basis by publicizing risks, providing alternative, and assisting family members who are not using. LCAP is continuing involvement at as many levels as we can reach. We see victims on an individual family level through our CR and CST programs, as well as providing institutional support to local Heroin Task Forces.

Housing/Affordable Housing



HOUSEHOLDS WITH HOUSING COSTS OF MORE THAN 30% OF INCOME (NUMBER) - 2010-14

Wisconsin Council on Children and Families
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation

HUD defines housing affordability as requiring no more than 30% of a household income. The chart above illustrates how many of the household in a given county are in excess of that number. Respectively, it is 32% of household s in Door County, 27% in Kewaunee, 25% in Manitowoc, and 27% in Sheboygan. In other words, more than 25% of our residents are housing insecure. The implications are that a financial emergency could force someone out of their housing, or even if no such event should occur, they have insufficient income to maintain their housing and will have a deteriorating asset.

This process has been occurring for some time, and is reflected in the lack of affordable housing that can pass a Housing Quality Inspection and is available to occupancy by a low income person receiving a rent subsidy. These units have been removed from the market, or are marketed to families who are cost burdened (spending greater than 30% of income on housing) for rental without subsidy. The Federal Reserve LMI Housing Survey has found that in District 7 (Illinois, Indiana, Michigan, Wisconsin and Iowa) fewer than 29 housing units exist for every 100 Extremely Low Income potential tenants. Extremely Low Income (ELI) families earn less than 30% of the local median income. For our area, this puts household income at roughly 15,500. Housing costs should then be around \$400 per month. HUD Fair Market rent is nearly twice that.

Final FY 2017 & Final FY 2016 FMRs By Unit Bedrooms

Year	<u>Efficiency</u>	<u>One-Bedroom</u>	<u>Two-Bedroom</u>	<u>Three-Bedroom</u>	<u>Four-Bedroom</u>
Final FY 2017 FMR	\$432	\$512	\$681	\$852	\$1,015
<u>Final FY 2016 FMR</u>	\$442	\$536	\$717	\$890	\$1,011
Percentage Change	-2.3%	-4.5%	-5.0%	-4.3%	0.4%

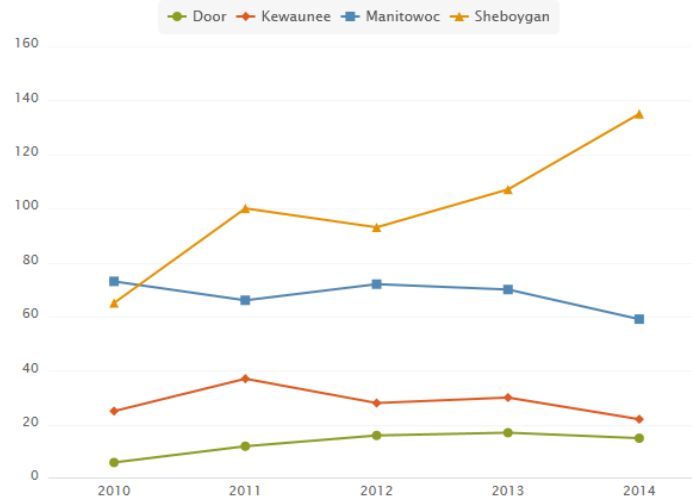
HUD Web site https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn

This means that an ELI family of four is going to require a subsidy of \$200 per month. This subsidy is not sustainable, and will have to be coupled with skills training to enable the adults in the family to qualify for higher paying or full time work, and with the household financial counseling mentioned earlier to increase the efficiency of the money that does flow into the household.

Clearly help for housing problems will come in two areas – Rehabbing old structures to provide affordable housing that can pass a housing quality inspection, and by constructing new housing for LMI families. Neither of these solutions are going to appear overnight. The risk is that the lead time is so long that the demand for housing will diminish before the units come on line. Two factors mitigate this risk. The first is that the stock of rental housing in all four of the counties is old and getting older. These properties are going to need some of the maintenance that landlords have deferred. Once the landlord has made the commitment to rehab, it doesn't take much more money to bring the building to HQS standards. Some buildings won't receive the needed repairs and new LMI housing will have to be built.

Parenting/Childcare/Children's issues

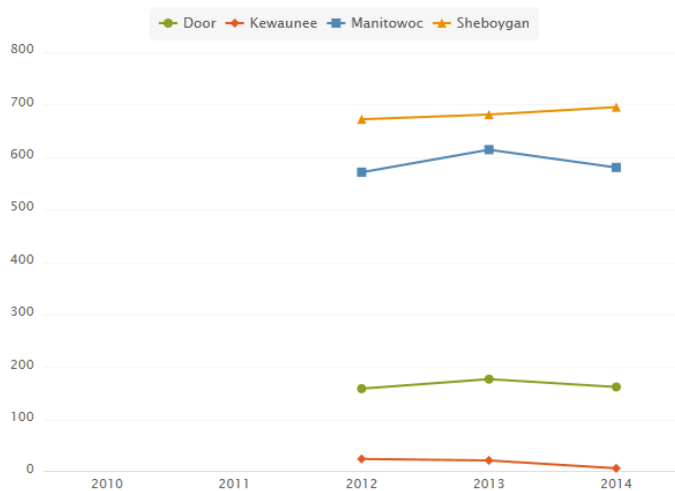
Although this is an area where many resources have flowed, it remains high on the list of public awareness and activity, and also high on the list of positive outcomes. We have areas of success – Home Visiting and Investing Early have had an effect on childhood immunization rates in pre-school children. The screens performed in the home and at public places have identified problems earlier and assistance has been arranged sooner. In fact, Pre-Natal Care is now emerging as an



CHILDREN IN OUT OF HOME PLACEMENTS (NUMBER)

Wisconsin Council on Children and Families
 KIDS COUNT Data Center, datacenter.kidscount.org
 A project of the Annie E. Casey Foundation

area of increased emphasis.

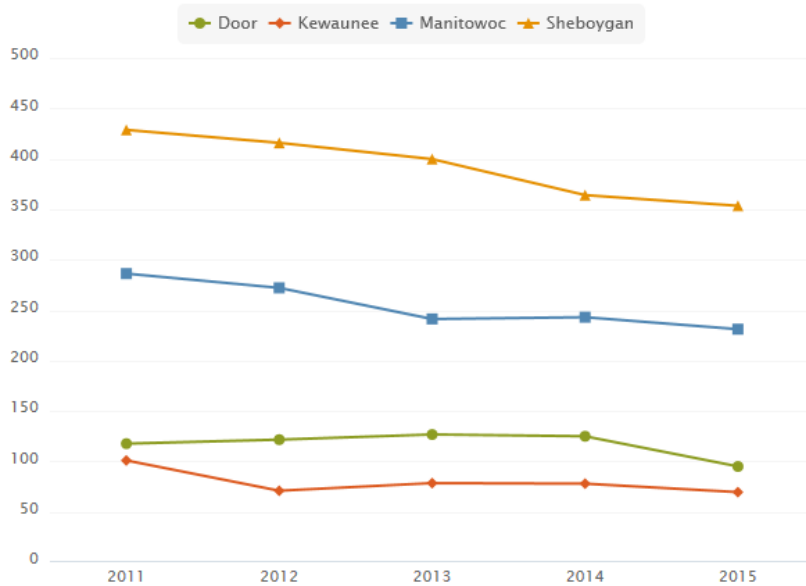


CHILD ABUSE AND NEGLECT REPORTS (NUMBER)

Wisconsin Council on Children and Families
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation

Out of home placement rates have reversed the downward trend illustrated above. Rate in all four counties now have increases that resemble Sheboygan County. The increase in out of home placement rates are attributed to increased prevalence of drugs. Children are being removed from homes at record rates and this is straining the underpinnings of the entire foster system. Programming such as the Coordinated Service Teams could be expanded to coordinate services for families both with the intent of delaying removal of the child and with the intent of delivering services needed by the foster family. Community Response's expansion to Sheboygan County should aid in this process.

Youth crime and truancy have been two subjects that show concern. Programs have been tested to provide services to the most at-risk families and results have been good. Steady contact with LCAP staff have had positive results in class attendance and in reduced reoffending rates. Expansions of programs in this area are needed. The ability of a caring adult relationship to engage young families and teenagers with the community is demonstrated time and time again. Expansion of programming for youth and young adults should revolve around creating a mentoring relationship that can act as a guide to and through other community resources. As a greater understanding of Trauma Informed Care and building resiliency in families and individuals, more organizations will make this type of relationship the centerpiece of their case management regime. Partnering with the United Way, UW-extension, LCAP has developed substantial training capacity in this area. We are striving to make this training widely available to meet the need.



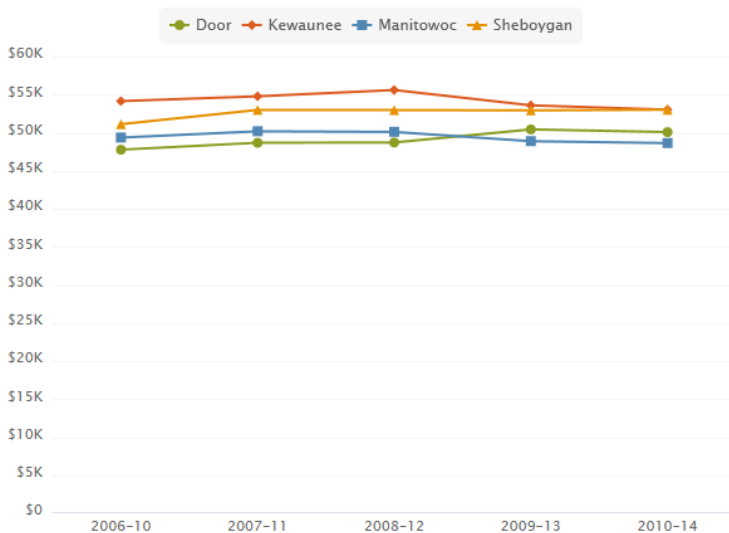
CHILDREN RECEIVING WISCONSIN SHARES CHILDCARE SUBSIDIES (NUMBER)

Wisconsin Council on Children and Families
 KIDS COUNT Data Center, datacenter.kidscount.org
 A project of the Annie E. Casey Foundation

Affordable child care is both a means to better childhood development and to a greater income for the household. Assistance in finding childcare is an item in the survey that has a high ranking for availability and a low rating for effectiveness. We can presume that the childcare found is unaffordable, but conversations indicate that licensed facilities are full and have substantial waiting lists. As the subsidy above is available only for licensed centers, we might the decline in those using it is due to space availability rather than a lack of knowledge of the program. Offering day care for those low income families who could qualify might be the correct move. LCAP has the facilities to open a site on our location in Manitowoc that could be licensed and thus qualify to offer the subsidy. Should this option be pursued, we will strive to provide 2nd shift day care which surveys indicate is a need in the county.

Income, Employability, Skills and Job Training

Northeast Wisconsin is in the paradoxical position of having increased job opportunities available at steadily decreasing wages. At this point, the fastest growing job categories for Wisconsin are also those that pay the lowest wages. The chart below is the median household income for the 4 counties.



MEDIAN HOUSEHOLD INCOME (CURRENCY)

Wisconsin Council on Children and Families
 KIDS COUNT Data Center, datacenter.kidscount.org
 A project of the Annie E. Casey Foundation

Although the trend looks flat, small changes have a large impact and the median incomes are converging at lower levels. Trends at the bottom of the income distribution are more worrying. In Door County the poverty rate has risen by 4% between 2010 and 2014, 1.8% in Kewaunee County and 1% in Manitowoc and Sheboygan Counties. This increase has taken place during a period of general economic recovery. It speaks of the difficulty in emerging from poverty once caught in its grip.

This year's survey included questions about the financial activities and institutions used by low income respondents. Most have conventional banking relationships. Less than 4% of respondents indicate they use check cashing services in lieu of banks. The percentage of the population taking advantage of the Earned Income Tax credit is slightly higher than the number of people at the poverty level as one might expect. Nearly 90% of the population has access to some form of health insurance and 95% of all children are covered. With these important mainstream benefits in place, the difficulty families face are the prevalence of part-time, flexible schedule work. The flexibility in schedule benefits the employers, not the employees. The lack of certainty in schedule complicates life at the low end of the income schedule.

Child care and transportation are major barriers to employment. The labor market depends upon the availability of employment options. At low skill levels these options are constrained by location and hours of operation. Programs to increase skills and provide training are readily available, but the associated costs of acquiring the training are often disqualifying factors.

Areas of opportunity exist in child care and in transportation programs. Work N Wheels, a low or no interest auto program can ease transportation problems in rural areas. An increased in licensed day care slots will allow more families to take advantage of child care subsidies which are expanding, but without an increase in available slots.

The firms in NE Wisconsin are gaining business from their ability to produce with flexibility and precision. The workforce that is delivering those goods are aging and leaving behind a void that will be difficult to fill without a commitment from employers that equals the commitment they are asking of their workers. In order to develop the workforce of the future, the commercial sector is going to have to move into a more family friendly stance. Whether this takes the form of commercially owned and operated housing, care, and transportation, or a change in stance supporting the public financing of these items remains to be seen. As working age parents are called upon to care for their children and for their parents, their ability to command a wage that will support these activities will depend upon their access to training and job openings. Even with the advent of automation and robotics, firms will need people who can adapt to new jobs and can be trained to new requirements.

Conclusion

The key word describing the low income population is “stressed”. They are stressed through the competing demands of employment and family. They are stressed by the existence of opportunity confounded by seeming intractable barriers before them. As the economy continues its recovery more jobs are available. The fastest growing jobs are those that don’t pay well. In fact these jobs don’t pay enough to support the investment in them a family might have to make. If two adults are in the household, both can work and raise the standard of living for the family. However, therein lies the challenge.

Removal of the barriers to employment has to be the emphasis for those in poverty. Training is available, if they can get there. Work is available, if they can get child care during those hours. Our survey indicates people know where to look for jobs, and that those services are effective in getting them there. Where they fall short is insuring they have dependable transportation, affordable high quality child care, and services for those unable to work.

The four areas of focus do not fault the economy. They are conditions to be met so that the economy can be exploited. Depression, addiction, and other mental illness respond to a wide variety of approaches. We need some creative approaches in making those available. Affordable and secure housing at price that one of the growing occupations can support at the entry level will provide a launching pad for the family. There are available units in our service area. They are just not affordable or secure. Increasing the supply of affordable housing is a long term prospect and is underway. We need a way to influence the owners of existing units to rehabilitate their units so that they may be that sanitary housing that people deserve.

Area Statistical Abstract

Population % aged 25+ with no high school diploma

Door	6.04%
Kewaunee	8.61%
Sheboygan	9.28%
Manitowoc	9.72%
Wisconsin	9.25%

2015 annual unemployment rates %

Door	6.8%
Kewaunee	4.1%
Sheboygan	3.8%
Manitowoc	5.1%
Wisconsin	4.6%

Households with Public Assistance

Door	1.88%
Kewaunee	1.9%
Sheboygan	2.16%
Manitowoc	1.52%
Wisconsin	2.24%

Population % receiving SNAP Benefits

Door	9.73%
Kewaunee	8.44%
Sheboygan	11.96%
Manitowoc	9.39%
Wisconsin	12.67%

Per capita Income by county

Door \$30,216

Kewaunee \$25,621

Sheboygan \$26,580

Manitowoc \$26,084

Wisconsin \$27,906

Appendix B – Low Income Survey

Lakeshore CAP, Inc. is conducting a survey of Door, Kewaunee, Manitowoc and Sheboygan counties. The purpose of the survey is to identify the needs of individuals and families within the service area, and your opinion is really important to us. Your responses are private and anonymous, and are not in any way tied to you or your specific household. Your answers will not affect your eligibility for any of our programs in any way.

The survey asks questions about the people in your home and difficulties that may have been experienced because of economic problems or a lack of available services. Having information about the problems people have experienced will permit better planning for programs and services to assist people in meeting their needs.

Please take a few minutes to complete this survey and return it in the envelope provided. That we may complete our work. Your assistance will help us to learn more about issues affecting people in these communities at this particular time. Thank you.

I reside in the (complete one):

City of:
Town of:
Village of:

I reside in: Door County Kewaunee County (circle one) Manitowoc County Sheboygan County
--

1. Number of people living in your household by age:

AGES	FEMALE	MALE
0-5		
6-11		
12-17		
18-21		
22-24		
25-54		
55-69		
70 + YEARS		

2. Check the ONE line that best describes your household:

Single Custodial Parent/Female	
Single Custodial Parent/Male	
Two Parent Household	

Single Person	
Multi-Generational Family	
Multi-Person household (Not Related)	
Joint custody household (children spend time at two different households equally.)	

3. Number of adults (18+ years) in your household who are:

Single	
Married	
Divorced	
Widowed	
Separated	
Cohabitation relationship/not married	

4. Please identify the education level completed for the people in your household over the age of 18:

Level	Male	Female
Still in High School or enrolled in GED/HSED		
Did not complete High School		
Completed GED / HSED		
High School Graduate		
Technical College		
College Associate Degree (2 yr)		
College Graduate		
Graduate School		

5. Number of people in your household with any of the following racial / ethnic background?

African American	
------------------	--

Asian/Pacific Islander	
Hispanic	
Native American/Native Alaskan	
White/Caucasian	
Latino	
2 or more races	
Other	

6. What is your current housing status Check all that apply

Rent	
Own	
Share dwelling with another family	
Homeless	

7. What are your housing goals?

Looking for apartment/house rental	
Looking to own a home	

8. How old is your home? _____ Years

9. Check any of the following which you or a member of your household experienced during the past 12 months:

Went without home insurance	
Went without housing	
Went without adequate home heating	

Went without home upkeep or repairs	
Lacked affordable housing	
Victim of a natural disaster	
Unable to pay rent or mortgage	
Pay more than 30% of <u>household</u> income for rent	
Eviction from your dwelling	
Foreclosure or forced sale of home	

10. Are you experiencing any of the following problems with your home? Check all that apply:

Lacks indoor plumbing	
Faulty plumbing	
Failing septic system	
Unsafe water	
Poor electrical wiring	
Inefficient or defective heating system	
Little or no insulation	
Loose or inadequate siding	
Weak foundation or structural problems	
Peeling paint on the exterior	
Lead-based paint on windows or walls	
Peeling paint in the interior	
Roof in need of repair or recovering	
Faulty chimney	
Moisture or other water infiltration problems	
House is subject to seasonal flooding	
Loose fitting windows and/or doors	
Mold or Mildew	
Lead bases water pipes	
Asbestos in home or basement	

- 11.** List the **number** of children and adults in your household with medical insurance coverage list what insurance each has:

MEDICAL COVERAGE	CHILDREN	ADULTS
Badger Care		
Employer provided		
Other coverage		
No coverage		

- 12.** Check any of the following which you or a member of your household had to go without due to lack of money during the past 12 months:

Medical insurance	
Medical care	
Dental care	
Medicine	
Alcohol or other drug abuse counseling	
Other mental health counseling	
Vision Care	
Appropriate clothing	

- 13.** Please indicate the **number** of people in your household who have any of the following problems during the last 12 months:

Lack of medical insurance	
Suffered from depression or anxiety	
Breaking the law (non-traffic related)	
Experienced a serious illness	

Sexually transmitted disease	
Had a drug or alcohol problem	
Use of tobacco	
Experienced Child abuse	
Experienced Spouse abuse	
Experienced Family break-up	
Experienced homelessness	
Youth run away from home	
Moving in with family(doubling up)	
Extreme emotional conflict within the family	
Unplanned pregnancy	
Need for sex education	
Gender discrimination	
Age discrimination	
Racial, ethnic or class prejudices	
Victim of a crime	
Sexual Orientation Discrimination	

14. How many people in your home over the age of 18 are (write a **number in every category that applies)?**

	Primary job	Second job
Employed full-time		
Employed full-time / seasonal		
Employed part-time		
Employed part-time / seasonal		
Full-time student		
Part-time student		
Retired, not seeking work		
Retired, seeking employment		
Disabled, not seeking work		
Disabled, seeking work		
Temporarily unemployed		

15. List the **number** of people in your household who are not employed for any of the following reasons. **Circle** the one that you believe is the largest problem.

Extended illness	
Lack of Transportation	
Lack of child care	
Lack of Education	
Lack of Experience	
Lack of Available Jobs	
Disability-Physical	
Disability-Mental Health	

16. Check the sources of income or support for your household. Then **Circle** the largest source of income.

Wages		Unemployment	
Social Security		Child Support	
SSI		Food Stamps	
Pension		Self-Employment	
W-2		Other – List Below	
Worker's Comp			

17. Do you have any of the following?

Checking Account	
Savings Account	
Student Loans	
Pay Day Loans	
Car Title Loans	
Bank Loans	
Other loans not listed	

If you have these loans, have you had any issues with paying them on time/paying off? On a scale of 1-10, how easy (1) or hard (10) has it been to make on time payments? 1 2 3 4 5 6 7 8 9 10. (Please circle one.)

18. Do you use any of the following?

Check Cashing Services at places such as:

Wal-Mart	
Payday Loan Stores	
Other:	

Money Wiring/Receiving from:

Wal-Mart	
Pay Day Loan Stores	

Other:	
--------	--

Do you use money order's/travelers checks? Yes _____ No _____

From where:

Wal-Mart	
Post Office	
Kwik Trip/Convenience Stores	
Banks/Credit Unions	

19. Do you file taxes? Yes _____ No _____

How do you file your taxes?

File on your own	
Paper copy	
Electronically	
Tax Service (H&R Block/Other)	
Family or Friend Prepared	

Have you ever accepted a loan against your taxes? Yes _____ No _____

20. What is your total gross household income? **Circle** the correct range:

Less than \$6,000 \$6,000 - \$11,999 \$12,000 - \$17,999 \$18,000 - \$23,999
 \$24,000 - \$29,999 \$30,000 - \$35,999 \$36,000 - \$41,999 \$42,000 - \$47,999
 \$48,000 - \$53,999 \$54,000 - \$59,999 \$60,000 - \$64,999 \$65,000+

21. Indicate the **number** of people in your household who experienced any of the following during the past 12 months:

Went without life insurance due to lack of money	
Went without auto insurance due to money	
Went without auto transportation due to money	

Went without school or work clothes due to lack of money	
Could not afford food or meals	
Lacked employment opportunities	
Lost a job or business	
Experienced unemployment	
Full-time wages do not meet living expenses	
Lack of job training	
Inability to read or write	
Lack of child support	
Inability to collect child support	
Lack of quality childcare	
Lack of affordable child care	
Lack of evening/night/weekend childcare	

22. Have you or another household member experienced any of the following problems in the last 12 months? **Check** all that apply:

Homelessness	
Fallen behind on utility bills	
Utility disconnection	
Fallen behind on telephone bills	
Telephone disconnection	
Heating fuel shut-off	
Water shut-off	
Fallen behind on payments for appliance or other major purchases	
Fallen behind on payments for automobile	
Had major car repair or replacement needed	
Foreclosure or forced sale of home or farm	
Unable to pay child support	
Fallen behind on taxes	
Fallen behind on medical or dental bills	
Garnishment of wages due to non-payment	
Fallen behind on other debts	

Lakeshore CAP Needs Assessment

**2017-
2020**

23. Please complete the following questions concerning services you or a member of your household have utilized in the last 12 months. Please circle the number which best represents your belief, with 7 representing the highest score.

SERVICE	USEFULNESS OF SERVICES							SERVICE AVAILABILITY						
	Not Very		Somewhat			Very		Unavailable				Available/Good		
Transportation Assistance	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Older Worker Employment Program	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Senior Meals	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Home Delivered Meals	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Food Pantry	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Homebuyer Assistance	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Energy Conservation Education	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Help Finding Adequate Housing	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Housing Rehabilitation	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Housing Weatherization	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Housing Counseling	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Emergency Rental Assistance	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Emergency Housing	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Emergency Energy Assistance	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Household Budget Counseling	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Help Finding a Job	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Help Finding Child Care	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Family Education Classes	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Family Planning	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Childhood Immunization Program	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Alcohol or Drug Counseling	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Mental Health Counseling	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Youth Services Programs	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Assistance with Medications	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Major Car Repair or Replacement	1	2	3	4	5	6	7	1	2	3	4	5	6	7
Other: (specify)	1	2	3	4	5	6	7	1	2	3	4	5	6	7

24. Please complete the following questions concerning services you have needed in the last 12 months, but did not/could not use:

SERVICE	SERVICE AVAILABILITY						
	Unavailable				Available/Good		
	1	2	3	4	5	6	7
Transportation Assistance	1	2	3	4	5	6	7
Older Worker Employment Program	1	2	3	4	5	6	7
Senior Meals	1	2	3	4	5	6	7
Home Delivered Meals	1	2	3	4	5	6	7
Food Pantry	1	2	3	4	5	6	7
Homebuyer Assistance	1	2	3	4	5	6	7
Energy Conservation Education	1	2	3	4	5	6	7
Help Finding Adequate Housing	1	2	3	4	5	6	7
Housing Rehabilitation	1	2	3	4	5	6	7
Housing Weatherization	1	2	3	4	5	6	7
Housing Counseling	1	2	3	4	5	6	7
Emergency Rental Assistance	1	2	3	4	5	6	7
Emergency Housing	1	2	3	4	5	6	7
Emergency Energy Assistance	1	2	3	4	5	6	7
Household Budget Counseling	1	2	3	4	5	6	7
Help Finding a Job	1	2	3	4	5	6	7
Help Finding Child Care	1	2	3	4	5	6	7
Family Education Classes	1	2	3	4	5	6	7
Family Planning	1	2	3	4	5	6	7
Childhood Immunization Program	1	2	3	4	5	6	7
Alcohol or Drug Counseling	1	2	3	4	5	6	7
Mental Health Counseling	1	2	3	4	5	6	7
Youth Services Programs	1	2	3	4	5	6	7
Assistance with Medications	1	2	3	4	5	6	7
Major Car Repair or Replacement	1	2	3	4	5	6	7
Other: (specify)	1	2	3	4	5	6	7

25. How deep is your need for overnight childcare with state assistance for those who work overnights? Please circle one:

1 Not too concerned 2-3 mildly concerned 4-6 needed, but I have managed to find other resources 7 moderately concerned

8-9 very concerned 10-need action NOW

26. Has lack of appropriate childcare ever put your job at risk? Yes_____ No_____

27. Have you ever lost a job because of lack of childcare? Yes_____ No_____

28. If you go to do job searches , ex., at the job center, do you often find need to bring your children along?
Yes_____ No_____

If yes, has this hindered you from your full potential of job seeking? Yes _____ No _____

29. If onsite child care was provided at the job center for your use while job searching would you take advantage of it? Yes_____ No_____

30. Please list any other services which you or a household member needed, but were unable to locate during the past 12 months:

31. If you could choose to have one service provided which you cannot currently find, what would it be?

32. Do you feel you know about all services that may be available to you?

33. What is the most important service which could be provided to improve the quality of life in your home community at this time?

34. What is the most important service improvement you would like to see provided in any service you have needed in the last 12 months?

35. Do you have a cellular phone? Yes _____ No _____

36. Do you have a landline telephone? Yes _____ No _____

37. Do you communicate most often through? Voice _____ Text _____ E-mail _____ Other _____

38. Do you have regular access to the Internet? Yes _____ No _____

39. Have you ever utilized the Internet for a transaction of any type? Yes _____
No _____

Comments / Suggestions / Concerns:

*Thank
you*

Your participation and thoughtful insights are very much appreciated!