United Way of Southwestern Indiana Comprehensive Community Assessment

Phase One Assessment Period: September to December 2007 Released June 2008

United Way of Southwestern Indiana (Vanderburgh, Warrick and Spencer Counties)

In partnership with the United Ways of Gibson and Posey Counties



Sponsored by
Alcoa, Bussing-Koch Foundation, Deaconess Hospital,
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Executive Summary

The United Way of Southwestern Indiana partnered with United Ways in Posey County and Gibson County to conduct a Comprehensive Community Assessment within five counties in southwestern Indiana: Gibson, Posey, Spencer, Vanderburgh, and Warrick Counties. The purpose was to identify community needs and strengths, as well as the level of collaboration and potential areas of duplication among social service providers. Study sponsors included: Alcoa, Bussing-Koch Foundation, Deaconess Hospital, St. Mary's Healthcare Services, Vectren, and the Welborn Baptist Foundation.

A community assessment model derived from best practice literature was used to examine the study questions, which involved two distinct phases. While the first phase allowed priority needs and perceived strengths to be identified, the second phase provided insight into the extent to which social service organizations were working collaboratively to address issues. This document presents findings related to the first phase of the study, which answers the question, "What are the priority needs and strengths within the community?"

Needs assessment committees were formed to guide model development and implementation. A Planning Team was created to establish goals for the study and oversee key aspects of the process. Members of the team included: leaders from the United Way of Southwestern Indiana; consultants from Diehl Consulting; representatives from local higher educational institutions, including University of Evansville, University of Southern Indiana, Ivy Tech Community College, and Oakland City University; a representative of social service agencies; and a local researcher. Additionally, an Advisory Committee was formed to generate ideas and provide feedback on selected needs assessment methods. Members of the Advisory Committee were selected from a wide array of community, school, government, and private organizations, and represented a diverse cross-section of demographics.

Similar to past assessments conducted by the United Way, a community-wide needs assessment survey was developed and administered to key stakeholder groups. Both strengths and areas that require additional attention were gleaned from this process. However, the survey expanded on past approaches by not only assessing the importance of community concerns, but also by measuring the degree to which the community believed the issues were currently being addressed. This involved a dual rating of each survey item asking respondents to rate their level of agreement to the following questions: "How important is the issue in our community" and "How well is the issue being addressed in our community?" Further, to better understand findings from the community-wide survey, a thorough review of community statistics was conducted. This involved examining past United Way needs assessments, existing research reports, Census data, and other available sources.

A total of 1,671 surveys were returned across Gibson, Posey, Spencer, Vanderburgh, and Warrick Counties. Four subgroups were represented, including the community-at-large (74.9%), community leaders (2.0%), social service providers (15.0%), and social service clients (8.1%). Findings were presented for all counties and subgroups combined, as well as individual

counties. Due to sample sizes, subgroup breakdowns were provided only for the all-county and Vanderburgh County sample.

Priority needs and strengths were based on a ranking of respondents' ratings on importance and being-addressed-well response combinations. Specifically, the priority needs reflect issues that have the highest rank based on the percentage of participants who fell within the high in importance and low in being- addressed-well response combination quadrant. On the other hand, the strengths reflect issues that have the highest rank based on the percentage of participants who fell within the high in importance and high in being-addressed-well response combination quadrant. In addition to this approach, the average for the importance rating and the being-addressed-well rating were also computed and ranked. To add further meaning, secondary data sources were used to discuss underlying themes and quantitatively ground community perceptions. For ease of presentation, only the five highest issues are summarized. While these issues may have the highest rank relative to other issues, priority issues are not limited to the top five issues, and descending issues found in the full report should also be considered. Moreover, readers are encouraged to triangulate ranked issues with secondary data sources and focus on key themes within higher ranked items.

Priority issues: The five highest percentages of participants across all stakeholder groups falling in the high in importance and low in being-addressed-well quadrant (represents priority needs) were noted for the following community issues: understanding the cycle of poverty that occurs in successive generations; families' understanding of finances, budgeting, and tax credits; affordable and accessible health care for low- to moderate-income individuals; child and adult obesity; and cost of prescription medicine. This means that the highest percentage of participants agreed or strongly agreed that these issues were important to the community, while disagreeing or strongly disagreeing that the issues are being addressed well within the community. A common theme among the highest ranked priority issues is a concern about the affordability of basic needs and services and the impact that poverty or a lower socio-economic status has on one's ability to afford such commodities. Across all counties, the percent of students eligible for free or reduced lunch has increased over the last years (Indiana Department of Education, 2008). Further, a comparison of 2000 to 2005 poverty rates for every county in the study area shows an increase in this rate (US Census, 2000, 2005). Single parents, particularly females, are especially susceptible to poverty (Indiana Prevention Resource Center, PREV-STAT County Profiles Data, 2006). Further, data related to median household income indicates that when adjusted for inflation, many families are actually making less than prior years due to the rising costs of goods and services (US Census, 2000, 2005). Another indicator of the rise in poverty is the number of individuals who receive food stamps. In all five counties and Indiana, the number of food stamp recipients increased from 2003 to 2007 (Indiana FSSA, Division of Family Resources, 2007). The rise in this number was greater than the rise in actual population figures. The statistics related to poverty and social services for individuals at lower socio-economic levels may suggest that people who experience poverty find it particularly challenging to increase their earnings enough not to be classified in poverty status, which may lead to a greater chance of later generations also experiencing poverty.

Strengths: The five highest percentages of participants across all stakeholder groups falling in the high in importance and high in being-addressed-well quadrant (represents strengths) were noted for the following community issues: cooperation of community organizations in effectively addressing needs; school violence; children prepared to enter kindergarten; recruitment and coordination of volunteers; and adult literacy. This mean that the highest percentage of participants agreed or strongly agreed that these issues are important to the community, and also agreed or strongly agreed that these issues are being addressed well within the community. A common theme appears to be stakeholders' positive perception of social service organizations working cooperatively to address community needs, as well as recruiting and coordinating volunteers. While little secondary data exist related to the cooperation of community organizations, phase two of the 2007 United Way Community Assessment examines this issue in depth. Preliminary findings suggest that community organizations in the region are working together to address community issues. The level of collaboration is further explored in the full report. In relation to volunteering, little local data exists, although state-wide data may lend support to this finding. Indiana is approximately in the middle of all states in the percentage of individuals who volunteer, but 13th overall in average volunteer hours and 5th in retention of volunteers (Corporation for National and Community Service, Volunteering in America 2007).

Importance and being-addressed-well mean ratings: While priority issues were identified by examining the ranking of percentages within a response pattern quadrant, ranking of importance and being-addressed-well means also provide insight into stakeholders' perceptions of issues within the region. Specifically, when the top ten ranked issues by the average importance rating are examined, six of these issues involve youth and adult drug and alcohol use. These findings are consistent with those from the 2004-2005 United Way Needs Assessment, suggesting that issues of youth and adult drug and alcohol use continue to be highly important to our community. On the other hand, when the top ten ranked issues by how well the issue is being addressed in the community ratings are examined, six of the lowest ranked issues involve issues of affordability of basic needs and services and the impact of poverty or a lower socio-economic status. Therefore, stakeholders perceive issues of poverty as not being addressed well in our community, which is further supported by the priority need response combinations presented above.

In sum, the 2007 United Way Needs Assessment expanded on past approaches not only by assessing the importance of community concerns, but also by measuring the degree to which the community believed the issues were currently being addressed. A common theme among the highest ranked priority issues is a concern about the affordability of basic needs and services and the impact that poverty or a lower socio-economic status has on one's ability to afford such commodities, while a common theme among the highest ranked strengths appears to be stakeholders' positive perception of social service organizations working cooperatively to address community needs, as well as recruiting and coordinating volunteers. Secondary data sources lend support to these findings. Collectively, this study provides a broad examination of community issues throughout the region and offers important insights into community perceptions. However, subsequent investigations would benefit from a deeper look at particular domains and individual issues. Ultimately, the conversations and additional inquiry that are sparked by these findings will yield further meaning and offer the most benefit to stakeholders residing and working in southwestern Indiana.

Introduction

The United Way of Southwestern Indiana partnered with United Ways in Posey County and Gibson County to conduct a Comprehensive Community Assessment within five counties in southwestern Indiana: Gibson, Posey, Spencer, Vanderburgh, and Warrick Counties. The purpose was to identify community needs and strengths, as well as the level of collaboration and potential areas of duplication among social service providers. The following questions were examined:

Question 1: What are the priority needs and strengths within the community?

Question 2: To what degree are these priority needs being met by community organizations in the region, as indicated by existing gaps, collaboration, and potential service duplication?

Given the project scope, findings are presented as separate reports. This document addresses the first study question, "What are the priority needs and strengths within the community?" The second question is addressed in a separate report. While this document presents findings specific to the first study question, the introduction includes a discussion of the overall community assessment model for both study phases. The introductory section begins with an overview of the community assessment model, followed by a summary of the best practice principles guiding the study process.

Overview of the Community Assessment Model

A community assessment model derived from best practice literature was used to examine the study questions. The study involved two distinct phases. While the first phase allowed priority needs and perceived strengths to be identified, the second phase provided insight into the extent to which social service organizations were working collaboratively to address issues.

Phase One: Assessing Broad Community Concerns and Strengths (April – December 2007)

Phase one employed traditional needs assessment methods similar to past studies by administering a comprehensive community-wide needs assessment survey to various stakeholder groups (community-at-large, social service clients, social service directors and providers, and community leaders), along with an extensive document review of secondary data sources. Key aspects associated with phase one included:

 Needs assessment committees were created to guide model development and implementation. A Planning Team was formed to establish goals for the study and oversee key aspects of the process. An Advisory Committee was formed to generate ideas and provide feedback on selected needs assessment methods.

- A community-wide needs assessment survey was developed and administered to key stakeholder groups. Both strengths and areas that require additional attention were gleaned from this process. The survey expanded on past approaches not only by assessing importance of community concerns, but also by measuring the degree to which the community believed the issues were currently being addressed.
- To better understand findings from the community-wide survey, a thorough review of community statistics was conducted. This involved examining past United Way Needs Assessments, existing research reports, Census data, and other available sources.

Phase Two: Assessing Potential Areas of Duplication and Collaboration (October 2007 – May 2008)

Phase two involved social service providers completing a community organization profile and a collaborative rating scale. As an extension of the needs identified through the community survey process, this phase assessed the extent to which service providers are responding to the needs, the amount of duplication and collaboration that exists in services provided, and how efficiently the community as a whole is addressing priority issues. Provider profiles for social service agencies in the five-county study area were developed and administered. Additionally, a series of social network maps were created that depict the relationships and collaborations that exist among social service providers.

Alignment with Best Practice and Previous United Way Studies

A review of literature related to community assessments was conducted to ensure that the methodology and analysis were grounded in best practice and a firm analytical foundation. The following key practices were identified as contributing to high quality community assessments:

- Use multiple data collection techniques and select techniques based on the type of
 information being sought and the individuals/groups involved; do not use a "one size fits
 all" strategy when collecting information from different segments of the community-face to face interactions may be necessary for some individuals/groups while surveys and
 telephone interviews may be appropriate for others (Butler & Howell, 1996; Carter &
 Beaulieu, 1992)
- Collect feedback from a diverse sample of community members; ensure that those who
 are traditionally underrepresented are provided an opportunity to give input; strongly
 consider targeting those who are traditionally service recipients (Carter & Beaulieu,
 1992; Israel & Ilvento, 1995)
- Involve key informants in the initial stages of the process to get buy-in from leaders in the community and to collect expert knowledge about the needs/concerns faced by the community (Carter & Beaulieu, 1992; Butler & Howell, 1996)

- Survey service providers to collect more detailed information about the services that are being delivered, the populations being served, and the voids that exist in services (2004 City of Denton Community Needs Assessment: A Report on Health, Housing, and Human Services in the City of Denton)
- Gather feedback from the community-at-large through both forums and surveys to include the citizen perspective on needs and gaps in services (Sharma, Lanum, & Suarez-Balcazar, 2000)
- Identify community strengths and determine how those assets may be used in filling the gaps that exist in service delivery; consider the asset mapping process (Kretzman & McKnight, 2005; Community Environmental Health Resource Center, 2007; The Asset-Based Community Development Institute, 2006)
- Develop a steering committee to guide the needs assessment process (Bohse, 2005)
- Blend both secondary analysis and direct data collection techniques to enhance understanding of community issues (Pathways to Progress: Laying the Foundations for a Healthier Marin – 2005 Community Needs Assessment and Plan)
- Ensure the community has knowledge of the needs assessment process and is aware of the results of the study (Laboratory for Community and Economic Development, University of Illinois, 2007; Gessaman, 1993)
- Develop a community survey that is concise, measures community strengths, assesses
 actual needs, solicits opinions regarding importance of issues and satisfaction with
 community efforts, and that is tied to the objectives of the study (Utah State University
 Extension, 2003; Gessaman, 1993)

To ensure alignment with the literature, the following core principles were adopted to guide the study:

- I. Involve Stakeholders in the Process
- 2. Ensure Transparency
- 3. Focus on Community Strengths and Capacities
- 4. Blend Multiple Data Sources

Principle: Involve Stakeholders in the Process

As the first step in the needs assessment process, a Planning Team was formed to guide all aspects of the study. Members of the team included leaders from the United Way of Southwestern Indiana; consultants from Diehl Consulting; representatives from local higher educational institutions, including University of Evansville, University of Southern Indiana, Ivy

Tech Community College, and Oakland City University; a representative of social service agencies; and a local researcher. Names of individuals who served on the Planning Team are included in the Acknowledgements section of this document. Beginning in April 2007, members of the Planning Team met approximately two times each month to discuss pertinent details associated with the needs assessment.

In addition to the Planning Team, an Advisory Committee was formed to provide input into the development of survey instruments and to give feedback regarding communication of survey results. Members of the Advisory Committee were selected from a wide array of community, school, government, and private organizations, and represented a diverse cross-section of demographics. Names of individuals who served on the Advisory Committee are included in the Acknowledgements section of this document. A total of three Advisory Committee meetings were held—one in June 2007 to discuss the community needs assessment survey, one in October 2007 to discuss the provider profiles, and one in April 2008 to review preliminary survey results. Finally, efforts were made to address non-English speaking individuals, and a pilot survey was conducted to assess readability of the survey and ease of completion.

Principle: Ensure Transparency

A transparent, open communication process was established to ensure individuals in the community were kept apprised of the progress of the study. A communications plan was developed with a goal to keep stakeholders informed about important milestones and dates associated with the study. A key aspect of the communications plan was a brief update that was distributed to United Way partners every one to two months, which detailed accomplishments of the study up to the time of the update.

During the course of the study, Diehl Consulting routinely communicated with Planning Team members via email regarding meetings, reviews of draft documents, and other concerns. Likewise, Advisory Committee members were contacted through email to schedule meetings and, on specified dates, to review documents and encourage feedback.

Finally, the Planning Team members strove to achieve a transparent process not only through distribution of study updates but also through responses to Advisory Committee questions and suggestions. For instance, during the June 2007 meeting of the Advisory Committee, members were divided into three separate focus groups and encouraged to provide recommendations regarding the specific issues included on the community needs assessment survey. After feedback from Advisory Committee members was collected, the Planning Team reviewed the feedback and provided a response to each individual comment.

Principle: Focus on Community Strengths and Capacities

Significant efforts were made to demonstrate a level of continuity between past United Way Needs Assessment studies, while at the same time offering ways of building on the methods that already had been utilized. As an indication of the connection with previous studies, this study incorporates not only the needs or problems identified through the community survey process, but the strengths or capacities of the community as well. Specifically, the 1996 study,

based on the work of Kretzman and McKnight (1993), departed from traditional methods for assessing community needs by focusing on areas where the community is thriving. The current study adopted a similar focus.

Principle: Blending of Multiple Data Sources

To enhance understanding of community issues, this study blends both secondary data analysis and direct data collection techniques. Specifically, a need is defined as stakeholders' perception of the importance of an issue and how well the issue is being addressed in our community, as well as the presence of local trend data from internal and external community data sources evidencing disparities when compared to state and national statistics. This approach is not only a best practice employed by studies conducted by the United Way of Southwestern Indiana but also other community surveys across the country. In terms of methodological and analytical techniques, the evaluators strove to achieve representative samples, both related to demographics and response rates, and incorporated random selection of the community-atlarge stakeholder group. Finally, a number of methods for analysis and presentation of needs and strength areas were researched, as well as techniques for measuring service duplication and collaboration.

Study Strengths and Limitations

A key strength of this study is the grounding in best practice research related to conducting high quality community assessments. Considerable effort was made to ensure adherence to the core principles described above. The primary benefit of this approach was the input received from stakeholders related to study development and implementation. Collectively, the multitude of perspectives throughout this process ultimately enhanced reliability and validity.

In addition, this study expanded on past United Way assessments by including a dual rating scale of issues that allowed both the importance of items to be identified, as well as the extent to which issues were being addressed. While past studies yielded a single mean score that represented how important issues were to the community, the inclusion of the dual rating scale allowed both community strengths and areas that require additional attention to be examined. Specifically, this approach resulted in several useful statistics including a mean importance rating for each issue, a mean being-addressed-well rating for each issue, and the importance/being-addressed-well response pattern that represented priority issues and issues that are perceived as strengths.

While this study has a number of significant strengths, it is important to also acknowledge limitations when interpreting findings. These limitations are discussed below.

Community issues included in the assessment. When the list of 119 issues from the 2003 United Way Assessment were reduced to 56 issues through feedback from the Advisory and Planning Teams, considerable efforts were made to capture a comprehensive list of community-wide issues. This process involved a great deal of input from stakeholders, which resulted in the elimination of duplicated items and a focus on core issues rather than services.

In doing so, it is possible that some community issues may not have been included on the survey. Therefore, findings are limited to the issues that were actually in the survey.

Response rate. While the actual number of surveys included in the data analysis was appropriate for estimating small confidence intervals and obtaining representative samples, a large survey distribution was required to achieve these results. This was due to the low response rate by survey participants. A total of three distributions were required for the community-at-large stakeholder group. Future needs assessment studies should focus on methods for obtaining a higher response rate, thus maximizing the resources devoted to the process.

Review of secondary data sources. While the secondary data sources included in this report represent a fairly large number of indicators associated with community issues and are some of the most widely used sources, the evaluators for this study and the Planning Team acknowledge that it is not an exhaustive list. Other indicators and data sources likely exist and may be incorporated. The data that are included in this report provide a strong foundation for further investigation that may be conducted by users of this report.

Ranking of issues and perception of need. Similar to past studies, findings are presented as a ranking of issues relative to other issues based on the community survey. As described in the methodology section, priority issues were determined through a ranking of the priority quadrant (importance/not-being-addressed-well). This is a descriptive approach to examining the data and suggests that a higher percentage of respondents selected a particular issue within this quadrant relative to other issues within the quadrant. While a particular issue may have a higher percentage of individuals who fell within the quadrant, no statistical inferences can be made distinguishing one issue from another. Instead, when interpreting findings from this study, readers are encouraged to triangulate ranked issues with secondary data sources and focus on key themes within higher ranked items. To aid readers, a synthesis of secondary data sources is provided to initiate this discussion.

Broadness of study. The purpose of the first phase of the study was to conduct a broad community assessment of priority needs and strengths in the community. While this study achieved this purpose, future investigations would benefit from a deeper look at particular domains and individual issues.

Overview of the Comprehensive Community Assessment Report

This document contains results from the first phase of the United Way Community Assessment study, while results from the second phase are provided in a separate report. The methods for collecting data are first described followed by a presentation of results. First, data for all counties combined are presented, along with a breakdown by subgroup. Next, data for each county is presented. Finally, the report concludes with a presentation of survey and secondary data for each of the eight content domains (e.g., social service issues, alcohol and drugs, economy and financial well-being, cultural diversity, family life, education and the workforce, violence and crime, and health).

Methodology

This section describes the methodology associated with the first phase of the community assessment process.

Participants

During the planning stages of the needs assessment survey, the Planning Team identified stakeholder groups to which the community assessment survey would be distributed. Four primary stakeholder groups were identified, including: Community Leaders, Social Service Providers, Social Service Provider Clients, and the Community-at-Large. Community Leader, Service Provider, and Community-at-Large Groups were further broken down into subgroups. Leaders included Church Pastors and members of the Regional Economic Advisory Committee. Social Service Providers included Social Service Directors and Social Service Staff. The Community-at-Large included a random sample of individuals in the general public and the members of the Citizen's Advisory Committee. These specific stakeholder groups were selected partially because most had been included in the 2004 survey and partially because they represented populations of individuals who would be in a position to comment on the issues that were of greatest concern in their communities. A summary of stakeholder groups is provided in Table 1. The actual number of respondents is provided within the results section.

Table 1. Stakeholder Groups			
Stakeholder Group	Description		
1. Community Leaders:			
Church Pastors	Church pastors within the five-county area contained within a mailing list maintained by the United Way		
Regional Economic Advisory Committee	Regional Economic Advisory Committee members		
2. Social Service Agencies:			
Social Service Staff	Staff within social service organizations in the five-county area		
Social Service Directors	All directors of social service organizations in the five-county area		
3. Social Service Clients:	Clients of social service organizations in the five-county area		
4. Community-at-Large:			
General Public	Random sample of head of households in each of the five counties was drawn		
Citizen's Advisory Group	Members of the Citizen's Advisory Committee		

2007 Comprehensive Community Assessment Survey

As has been the case in prior needs assessment studies, a central element of the 2007 study is the comprehensive community needs assessment survey, which is designed to collect feedback from members of the community regarding what they think about various issues. To be more specific, the goal of the survey process is to identify the needs and strengths of the community. Prior to developing items for the survey, the Planning Team defined the concept of "need" that would guide not only the survey development process, but also the entire needs assessment process. In the 2004 needs assessment survey, need was defined as the degree to which individuals believe an issue is important in the community. The issues with the highest importance ratings were ranked, as the top priority needs. As in 2004, the current study also involved participants rating the importance of an issue. However, to provide more depth to the opinions expressed by members of the community, the survey also asked respondents to rate how well the community is addressing each issue. Therefore, whether an issue was deemed a "need" or "strength" depended on the responses individuals provided to the following questions:

- 1. How important is this issue in our community? and
- 2. How well is this issue being addressed in our community?

The use of both importance and satisfaction ratings (how well issue is being addressed) has a strong foundation in needs assessment projects and student satisfaction inventories. The dual rating allows a combination of response patterns to emerge that depict priority areas that need to be addressed, as well as areas that are being addressed well.

Selecting Items for Inclusion in the Survey

After defining need, the Planning Team began the process of selecting the issues that would be included in the survey. This involved a review of the 2004 survey to ensure continuity between that measure and the one created for the current study. The goal was to refine rather than drastically modify the last survey.

Prior to beginning the item review process for the needs assessment survey, a set of decision criteria were developed to guide the Planning Team in identifying issues that would be included. Two key goals in the review process were to I) include actual community issues as opposed to services or solutions and 2) reduce the number of issues for ease of survey completion and clarity of content. The review of past surveys showed that some of the items from the past survey were actually services or solutions designed to address community issues. By including issues alone, the Planning Team was able to reduce the total number of items to a level that was acceptable for distribution to potential respondents.

The following decision criteria were utilized to help the Planning Team determine which issues would be included in the survey.

➤ Decide on content domains through examination of United Way State of Caring Index, existing community needs assessments, and key informant input.

- Establish common phrasing for community issues and ensure that items represent issues or concerns rather than services or solutions.
- Items should be easily understood and not interpreted in different ways.
- Examine the specificity of items to ensure consistency in this characteristic.
- Examine items to ensure they represent their respective content areas and to eliminate duplication of items that measure the same issue.
- Use factor analysis and/or correlations on retained items to examine relationships between items and underlying constructs being measured.
- Ensure items are pertinent to the work of the United Way and that United Way can realistically address the issues.

When reviewing the issues from the 2004 survey, Planning Team members selected among three options: I) retain the issue as written, 2) retain the issue with modifications, or 3) delete the issue. From the 119 issues that appeared on the 2004 survey, the team suggested a list of 58 issues for the 2007 survey. To be specific, 63 issues were eliminated, 15 issues were retained with no change, 41 issues were retained with modifications, and 2 issues were added.

To create a sense of organization about the issues and to ensure that important topic areas were addressed, issues were grouped into content domains. These domains were developed from two primary sources: The Welborn Baptist Foundation, Inc. 2006 Leading Community Health Indicators Report and the United Way State of Caring Index.

After developing an initial draft of the survey, a meeting of the Advisory Committee was convened to receive feedback related to study methodology. In this meeting, an overview of the needs assessment process was provided and a draft version of the survey was reviewed. The latter involved committee members breaking into groups and providing responses to the following questions:

- I. What are your general impressions with regards to the survey instrument (length, format, style, etc.)?
- 2. When examining content domains, what items are missing or duplicated?
- 3. What secondary data sources would you recommend?

As mentioned, responses from the Advisory Committee members were compiled and reviewed by Planning Team members. This process resulted in 53 community issues organized within 8 domains. Further review by Planning Team members accounted for three additional issues, which led to the final version of the survey that contained 56 issues organized within 8 domains.

In an effort to assess the reading level of the survey and the time to complete the instrument, the survey was piloted with a group of environmental services staff at St. Mary's Hospital in Evansville. No concerns were expressed by pilot participants when asked whether they failed to understand any aspect of the survey or had problems with completing the form. A visual inspection of the forms showed they were completed in a satisfactory manner. Additionally, pilot participants took approximately 10 to 15 minutes to fill out the surveys. Following the pilot, no further content changes were made to the survey.

Final 2007 Needs Assessment Survey

The final version of the needs assessment survey is located in Appendix A. The following paragraph briefly describes the survey.

As mentioned, a total of 56 community issues are grouped into 8 different domains: social service issues, alcohol and drugs, economy and financial well being, cultural diversity, family life, education and the workforce, violence and crime, and health. For each issue, respondents provide a rating for the following statements: I) This issue is important in our community and 2) This issue is being addressed well in our community. For both statements, respondents use a 5-point scale with the following response options: Strongly Disagree, Disagree, Agree, Strongly Agree, and Don't Know. In addition to the community issues, the survey contains a respondent characteristic section with information such as gender, race, and income level. Beyond rating the issues, respondents are asked to rank the domains based on how important they are to the community. Finally, the survey contains three questions related to respondents' knowledge about 211 First Call For Help, the most disturbing issue they have heard about recently, and where they heard about that issue.

Reliability and Validity

Construct validity was assessed using confirmatory factor analysis procedures. Specifically, a Principal Component Analysis using a Varimax with Kaiser Normalization rotation method was conducted with the importance ratings from the Needs Assessment Survey. Results indicated eight distinct factors, defined as: social service issues, alcohol and drugs, economy and financial well being, cultural diversity, family life, education and the workforce, violence and crime, and health. These factors were consistent with the items selected for each of the domains. Table 2 provides the individual items that loaded on each factor.

Cronbach's alphas were computed for each of the domains to examine the internal consistency of items within the domains. Generally, alphas greater than .70 are a good indication of the internal consistency or reliability of a measure. For the Needs Assessment Survey, alphas ranged from .77 to .96, indicating a high degree of internal consistency among items within each of the domains: social service issues, alcohol and drugs, economy and financial well being, cultural diversity, family life, education and the workforce, violence and crime, and health. Alpha coefficients are provided in Table 2.

Table 2. Summary of Domains and Items

SOCIAL SERVICE ISSUES (alpha = .77)

- 1. Recruitment and coordination of volunteers
- 2. Cooperation of community organizations in effectively addressing needs
- 3. Transitioning of ex-offenders into community and family
- 4. Availability of weekend/evening hours for human services

ALCOHOL & DRUGS (alpha = .93)

- Adult alcohol abuse
- 6. Underage tobacco use
- 7. Drug and alcohol related crimes
- 8. Adult drug use
- 9. Adult tobacco use
- 10. Underage alcohol use
- 11. Underage use of drugs other than alcohol or tobacco
- 12. Driving under alcohol/drug influence

ECONOMY & FINANCIAL WELL BEING (alpha = .94)

- 13. Availability of food and shelter for the homeless
- 14. Affordable child care
- 15. Families' understanding of finances, budgeting, and tax credits
- 16. Affordable and available care for the physically disabled
- 17. Availability of jobs for mentally and physically challenged individuals
- 18. Affordable in-home care for the elderly
- 19. Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)
- 20. Affordable and accessible public transportation

CULTURAL DIVERSITY (alpha = .84)

- 21. Language barriers for non-English speaking individuals
- 22. Race relations
- 23. Integration and appreciation of individuals from different cultures

FAMILY LIFE (alpha = .96)

- 24. Child physical/mental abuse and neglect
- 25. Children with special mental and physical conditions
- 26. Children with behavioral problems
- 27. Lack of child support payments
- 28. Preparation and support for parenthood
- 29. Understanding the cycle of poverty that occurs in successive generations
- 30. Teenage sex, pregnancy, and parenthood
- 31. Support for care givers of the elderly, mentally ill, or physically disabled
- 32. Preparation and support for marriage and marital relations
- 33. Child sexual abuse
- 34. Parent involvement in child's education
- 35. Lack of safe, constructive opportunities for youth
- 36. Elderly abuse and neglect

EDUCATION & THE WORKFORCE (alpha = .92)

- 37. Number of skilled workers to fill available jobs
- 38. Students' completion of high school
- 39. Preparation of the unemployed to enter the workforce
- 40. Children prepared to enter kindergarten

- 41. Adult literacy
- 42. Preparation of young adults to enter the workforce

VIOLENCE & CRIME (alpha = .95)

- 43. School violence
- 44. Domestic violence
- 45. Violent crime
- 46. Gang activity
- 47. Youth violence and crime
- 48. Adult sexual victimization

HEALTH (alpha = .94)

- 49. Child and adult obesity
- 50. Affordable and available care for mental health issues
- 51. Affordable and accessible health care for low- to moderate-income individuals
- 52. Proper nutrition
- 53. Affordable dental care for low- to moderate-income individuals
- 54. Sexually transmitted diseases/infections
- 55. Preventive health care
- 56. Cost of prescription medicine

Data Collection Procedures

The sampling process involved both purposeful and random samples. Table 3 details the sampling process for each of the stakeholder groups.

Table 3. Stakeholder Groups			
Stakeholder Group	Sampling Frame		
1. Community Leaders:			
Church Pastors	Surveys were sent to church pastors in the five-county study area that		
	were contained in a list of area churches maintained by the United Way of		
	Southwestern Indiana.		
Regional Economic Advisory Committee	All members of the REAC.		
2. Social Service Agencies:			
Social Service Staff	Staff within social service organizations in the five-county area.		
Social Service Directors	All directors of social service organizations in the five-county area.		
3. Social Service Clients:	Each social service organization was sent five surveys for staff members. Directors were asked to distribute those surveys to up to five staff members.		
4. Community-at-Large:			
General Public	A random sample of head of households in each of the five counties was drawn. First, the evaluators for the project determined the number of surveys that would be needed to achieve a 95% confidence level with a 5% confidence interval. Next, a 10% response rate was assumed to determine the number of surveys that would need to be distributed to members of the general public. The evaluators coordinated with the Courier & Press in Evansville to identify a list of individuals from which a random sample could be drawn.		
Citizen's Advisory Group	All members of the Citizen's Advisory Committee.		

Survey Distribution

All surveys were printed in a bi-fold format with the first two pages containing the community issues and the third page containing the additional sections previously described. The Courier & Press printed surveys that were sent to the random sample of individuals in the general population. The United Way printed surveys for all other stakeholder groups. Surveys were coded by county and stakeholder group to ensure accurate tracking of survey distribution and return.

The first distribution of the 2007 Comprehensive Community Assessment Survey occurred in September 2007. The deadline for survey returns was September 21, 2007. The Courier & Press coordinated distribution of surveys to the general public, and United Way coordinated distribution to all other stakeholder groups. Table 4 shows the number of surveys distributed to each stakeholder group within each county in the first distribution.

Table 4.	Table 4. Needs Assessment Surveys Distributed to Stakeholder Groups in Each County					County
Stakeholder Group	Gibson	Posey	Spencer	Vanderburgh	Warrick	Total
Church Pastors	58	42	17	374	102	593
Regional Economic Advisory Committee	13	12	3	95	15	138
Social Service Directors	29	29	27	154	30	269
Social Service Staff	145	145	135	770	150	1345
Social Service Clients	290	290	270	1540	300	2690
General Public	3800	3790	3770	7590	3820	22770
Citizen's Advisory Committee	n/a	n/a	n/a	16	n/a	16
Totals	4335	4308	4222	10539	4417	27821

After reviewing the number of surveys returned by each group in the first distribution, the Planning Team decided to conduct a second distribution specifically for the members of the general public in each county. Surveys were sent to the same individuals who received the survey in the first distribution. To encourage individuals to complete the survey, an incentive was added and a postage-paid envelope was included. The second distribution occurred in October 2007, and the deadline for return was November 9, 2007.

Due to the small number of additional surveys that were received during the second distribution period, the Planning Team decided to conduct a third and final mailing to a random sample of individuals in Vanderburgh and Warrick Counties. Gibson, Posey, and Spencer Counties were not included in the third distribution since adequate numbers of surveys had

already been received for those areas. In the third mailing, a total of 3,533 surveys were sent to Warrick County, and 11,520 surveys were sent to Vanderburgh County.

Table 5 indicates the total number of surveys distributed and returned for each stakeholder group in each county, as well as the response rates for all groups.

Table 5. Survey Distribution and Return				
2007				
County	Sent	Returned	Response Rate	
Gibson				
Church Pastors	58	1	1.72%	
Regional Economic Advisory Committee	13	1	7.69%	
Social Service Directors	29	3	10.34%	
Social Service Staff	145	16	11.03%	
Social Service Clients	290	13	4.48%	
General Public	3800	198	5.21%	
Citizen's Advisory Committee				
Total	4335	232	5.35%	
Posey				
Church Pastors	42	3	7.14%	
Regional Economic Advisory Committee	12	4	33.33%	
Social Service Directors	29	5	17.24%	
Social Service Staff	145	13	8.97%	
Social Service Clients	290	13	4.48%	
General Public	3790	156	4.12%	
Citizen's Advisory Committee				
Total	4308	194	4.50%	
Spencer				
Church Pastors	17	1	5.88%	
Regional Economic Advisory Committee	3	0	0.00%	
Social Service Directors	27	2	7.41%	
Social Service Staff	135	5	3.70%	
Social Service Clients	270	7	2.59%	
General Public	3770	88	2.33%	
Citizen's Advisory Committee				
Total	4222	103	2.44%	
Vanderburgh				
Church Pastors	374	9	2.41%	
Regional Economic Advisory Committee	95	9	9.47%	
Social Service Directors	154	35	22.73%	
Social Service Staff	770	155	20.13%	
Social Service Clients	1540	105	6.82%	
General Public	19110	547	2.86%	
Citizen's Advisory Committee	16	3	18.75%	
Total	22059	863	3.91%	
Warrick		1	,	
Church Pastors	102	1	0.98%	
Regional Economic Advisory Committee	15	1	6.67%	
Social Service Directors	30	2	6.67%	
Social Service Staff	150	14	9.33%	
Social Service Clients	300	0	0.00%	
General Public	7353	225	3.06%	
Citizen's Advisory Committee				
Total	7950	243	3.06%	
Grand Total	42874	1635	3.81%	

Sample Size

One way to address the issue of whether we achieved an adequate sample size within each county is to determine our margin of error for measuring the population values (i.e., true scale values in each county). A margin of error was calculated for the 3 top ranked questions overall and within each county. This margin of error was derived by calculating a 95% confidence interval based on the standard deviation of the importance question and the sample size (N) associated with the ranked item. The question numbers, the sample sizes (N) associated with their ranks, the standard deviation (SD) associated with the importance question, and two margin of errors appear in Table 6 below. The first margin of error is the amount of error around the mean (-/+) in terms of the units of the rating scale (I-4). The second margin of error is the percentage of -/+ error around the mean. Overall, we had a large sample size and low variability (i.e., low SD), which leads to a very small margin of error for the entire sample combined. We also had very small margins of error within each of the counties. The county with the highest margin of error is Spencer. But even in Spencer County, our margin of error is relatively small. For example, the mean importance rating for Question 3 was 3.11 and with the -/+ .14 margin of error, we can assume that the true population value falls in between 2.97 and 3.25. Based on the small margin of error, the sample sizes used for this study appear to be more than adequate.

	Table 6. Margin of Error Estimates				
County	N	SD	-/+ Margin of Error (scale units)	-/+ Margin of Error (percentage)	
Total					
Q29	1018	0.78	0.03	1.1%	
Q15	1072	0.74	0.03	1.1%	
Q51	1212	0.76	0.03	1.1%	
Gibson					
Q49	146	0.80	0.09	3.1%	
Q53	139	0.83	0.10	3.3%	
Q56	157	0.83	0.09	3.1%	
Posey					
Q29	107	0.73	0.10	3.3%	
Q11	143	0.61	0.07	2.4%	
Q20	131	0.93	0.11	3.8%	
Spencer					
Q53	65	0.72	0.13	4.2%	
Q29	59	0.72	0.13	4.4%	
Q3	49	0.72	0.14	4.8%	
Vanderburgh					
Q29	590	0.76	0.04	1.5%	
Q15	596	0.71	0.04	1.4%	
Q51	676	0.73	0.04	1.3%	
Warrick					
Q49	160	0.81	0.09	2.9%	
Q15	145	0.79	0.09	3.1%	
Q29	137	0.87	0.10	3.5%	

Survey Collection and Processing

All surveys were returned directly to United Way, where they were opened and logged into a spreadsheet that contained a count of survey returns. Surveys were then provided to Diehl Consulting, who coordinated the data management process. Prior to the first survey distribution in September 2007, members from Diehl Consulting met with Drs. Katherine Draughon and Kevin Valadares from the University of Southern Indiana (USI) to discuss entry of survey data. Dr. Valadares volunteered USI resources for the study, including work-study time of students in the College of Nursing and Health Services. Initially, it was intended that the survey form would be created in a scannable format and that USI would provide scanning services. Due to difficulties in developing an appropriate survey format for scanning purposes, members of Diehl Consulting and the Planning Team agreed to use a web-based data entry system that was created by Dr. Draughon and her staff in the Office of Institutional Research and Assessment. From October 2007 through January 2008, USI students entered surveys into the web-based system. Members from United Way, Diehl Consulting, and the Evansville Vanderburgh School Corporation also entered needs assessment survey data. Upon completion of entry, data were uploaded by Dr. Draughon into the Statistical Package for the Social Sciences (SPSS) and submitted to Diehl Consulting for analysis.

Data Analysis Procedures

Quadrant Analysis

A data analysis strategy employed by Kent State University (1997) was utilized to analyze participant responses to items on the community needs assessment survey. This approach involved an adaptation of the analysis used to examine the Noel-Levitz (2008) Student Satisfaction Inventory (SSI). The SSI is an instrument that incorporates both importance and satisfaction ratings of selected issues or concerns. Results from the SSI are presented in two main formats: I) as gap scores, which are calculated by subtracting satisfaction scores from importance scores and 2) as score combinations that fall into one of four categories, or quadrants. Given the power of the latter in describing response patterns by participants, this study incorporated the quadrant approach to present a ranking of priority needs in the community. This technique is described in more detail below.

When a participant responds to an issue on the needs assessment survey, that individual provides a rating for two separate statements:

- I. This issue is important in our community, and
- 2. This issue is being addressed well in our community.

For each statement, the respondent may agree or disagree, or indicate that he or she does not know about the issue. In terms of importance, if the respondent agrees to the statement, the issue is deemed as high in importance, and if the respondent disagrees, the issue is deemed as low in importance. Likewise, if the respondent agrees to the statement regarding how well the issue is being addressed, the issue is deemed as high in being addressed well, and if the respondent disagrees to the statement, the issue is deemed as low in being addressed well.

The unique combination of responses to the two separate statements may be categorized into one of four quadrants:

- High Importance/High Being Addressed Well (H/H)
- High Importance/Low Being Addressed Well (H/L)
- Low Importance/High Being Addressed Well (L/H)
- Low Importance/Low Being Addressed Well (L/L)

Each one of the four quadrants represents a certain value that is placed on an issue, as indicated below:

- H/H: This category represents <u>strengths</u> of the community.
- H/L: This category represents <u>priority needs</u> of the community and areas where immediate attention is required.
- L/H: This category represents areas where resources may need to be redirected to other areas in greater need or higher in importance.
- L/L: This category represents areas where the community may want to discuss why these issues have low value to individuals.

To help determine priority needs and strengths of the community, participants' unique response combinations are placed in one of the four quadrants as shown in Table 7.

Table 7. Quadrant Analysis				
		Being Addressed Well		
		Low	High	
Importance	High	High/Low	High/High	
	Low	Low/Low	Low/High	

To determine the issues that are recognized as priority needs and those that are identified as strengths, the percentage of individual response combinations that falls into each quadrant for each issue is calculated. Given that the High Importance/Low Being Addressed Well quadrant expresses the top need areas, issues are ranked based on their percentage in this category. For instance, if 80% of respondents' response combinations for Issue A fall in the H/L quadrant, and that represents the largest percentage in that category for any issue, then Issue A would be ranked as the top priority need. On the other hand, if 10% of respondents' response combinations for Issue B fall into the H/L quadrant, and that represents the smallest percentage in that category for any issue, then Issue B would be listed as the lowest priority need area.

Although issues are ranked based on the percentage of response combinations that fall within the H/L category, the results tables presented in this report also show the percentage of

responses that fall within all four quadrants. This allows readers to see all of the response combinations for each issue.

Additionally, the overall mean ratings for importance and how well the issue is being addressed are included in the results tables. While the response pattern ranking takes into account the combination of the importance and being-addressed-well ratings, individual rankings of these ratings allows users to see differences between items in perceived importance and how well the they are being addressed.

Finally, to show the number and percentage of respondents who did not know how well issues were being addressed, the results tables provide a column for these data. Users may take this information into account when assessing the issues deemed as priority needs in the community.

To aid in interpretation of the data tables, a quick reference guide to understanding the tables is provided in Table 8 preceding the results section.

Secondary Data Analysis

As a supplement to the community needs and strengths identified through responses from stakeholder groups, Diehl Consulting conducted a thorough analysis of secondary data sources. The goal of the process was to incorporate information that would help to provide a more complete understanding of the issues included in the needs assessment survey. For instance, members of the community may have rated an issue as a priority need and indicated that the community is not addressing the issue very well. However, secondary data may indicate that rates of indicators associated with the issue have dramatically improved in recent years and that southwestern Indiana actually has much better rates than the state and nation.

To accomplish the task of collecting secondary data, Diehl Consulting reviewed past needs assessment survey reports, as well as other related documents, such as the Welborn Baptist Foundation, Inc. 2006 Leading Community Health Indicators Report, the Indiana Chamber of Commerce Indiana's Adult Education and Workforce Skills Performance Report, and the National Institute for Early Education Research The State of Preschool 2007, just to name a few. Additionally, a comprehensive Internet search was conducted to find sources related to the issues included on the survey. After collection of data from multiple sources, a catalog or index of indicators was produced. This document included the name of the indicator (e.g., number of child physical abuse and neglect cases reported and substantiated), the geographic area from which data are available (e.g., U.S., Indiana, southwestern Indiana), the years for which data are available (e.g., 2001-2007), and the data source (e.g., Indiana Family and Social Services Administration).

Following creation of the catalog, data tables related to each indicator were developed. In most instances where data were available at the county level, separate tables were produced for each county. To present a visual or graphical depiction of data contained in the tables, a number of charts or graphs also were created. As a final step in the secondary data analysis process, text was generated that summarized the information contained in the tables, charts, and graphs. The format used for the secondary data section provides users of this needs assessment report

document with multiple ways of exploring secondary data depending on how they best process such information.

While the secondary data sources included in this report represent a fairly large number of indicators associated with community issues and are some of the most widely used sources, the evaluators for this study and the Planning Team acknowledge that it is not an exhaustive list. Other indicators and data sources likely exist and may be incorporated. The data that are included in this report provide a strong foundation for further investigation that may be conducted by users of this report.

Additionally, all data were extracted from documents generated by the primary sources or by materials produced by secondary sources. Data are assumed to be accurate, and the United Way does not take responsibility for errors that other organizations may have made in reporting data.

Testing for Differences in Respondent Groups

Given the different perspectives among stakeholder groups (e.g., clients versus providers), the Planning Team wanted to examine any subgroup differences that may warrant analyzing the subgroup data separately versus combining all participants together. To examine these differences, Pearson correlations were calculated between the four stakeholder subgroups (community-at-large, clients, providers, and leaders) for the overall rank, the mean importance items and the mean being-addressed-well items.

For the overall item rankings (High/Low response pattern rank), significant positive correlations were noted for all subgroups. The lowest correlation was .53 between clients and leaders, while the others ranged from .70 to .91 (p < .01). For the mean importance items, significant positive correlations were noted for all subgroups (p < .01). The lowest correlation was .42 between clients and leaders and .64 between leaders and community, while the others ranged from .72 to .91. For the mean being-addressed-well items, significant positive correlations were noted for all subgroups (p < .01). The lowest correlation was .58 between clients and leaders and .65 between leaders and providers, while the others ranged from .77 to .88. Collectively, these findings suggest that responses between subgroups are positively related to one another and do not differ significantly.

To further examine potential differences, Kruskal-Wallis analyses were conducted with the stakeholder group as the independent variable and each of the eight domains for the importance ratings and being-addressed-well as dependent variables. Due to small sample sizes, the leader subgroup was excluded from the analyses.

For the importance means, significant effects were noted for only the cultural diversity domain $(X^2 (2, N = 1,247) = 22.87, p <. 01)$. A Mann-Whitney test was conducted for post hoc comparison. The client and social service provider subgroups had significantly higher mean importance ratings on the cultural diversity domain compared to the community-at-large subgroup. For the being addressed well means, significant effects were noted for the social service domain $(X^2 (2, N = 498) = 7.58, p <. 03)$, and the alcohol and drugs domain $(X^2 (2, N = 498) = 7.58, p <. 03)$, and the alcohol and drugs domain $(X^2 (2, N = 498) = 7.58, p <. 03)$.

811) = 10.78, p <. 01). Mann-Whitney tests were once again conducted for post hoc comparisons. The client subgroup had significantly higher mean being-addressed-well ratings on the social service domain compared to the community-at-large. In addition, the client subgroup had significantly higher mean being-addressed-well ratings for the alcohol and drug domain, compared to the providers and community-at-large. Collectively, the absence of significant differences in the majority of subgroups suggests few differences between subgroups.

When juxtaposed, the analyses above are somewhat mixed. The positive correlations between subgroups and the absence of significant differences in the majority of domains suggest that the subgroups are essentially responding in very similar ways. However, on two domains, there were differences in the ways clients perceived issues compared to other subgroups. Further, there appeared to be a lower correlation between the leader subgroup and other subgroups, compared to the moderate to high correlation observed for other subgroups on the overall item, mean importance, and mean being-addressed-well ranking. In light of these findings, the Planning Team decided to present data in this report based on a combination of all subgroups, as well as disaggregated by subgroup. This approach offers the most meaning and utility to the community.

Table 8. Refe	Table 8. Reference Guide for Understanding Data Tables			
Importance-Being Addressed	Description			
Response Pattern				
N	Represents the total number of valid responses to this item. A valid response is defined as a response from 1 (Strongly disagree) to 4 (Strongly agree). Only respondents who had a valid rating for both rating scales are included in this number.			
HL Rank	Items are ranked from highest value to the lowest. A rank of 1			
	corresponds to the highest percentage of individuals who had this response pattern.			
HL	High Importance/Low in Being Addressed Well: This category represents priority needs of the community and areas where immediate attention is required.			
HH Rank	Items are ranked from highest value to the lowest. A rank of 1 corresponds to the highest percentage of individuals who had this response pattern.			
НН	High in Importance/High in Being Addressed Well: This category represents strengths of the community and warrants continued level of current effort.			
LL	Low in Importance/Low in Being Addressed Well: This category represents areas where the community may want to discuss why these issues have low value to individuals.			
LH	Low in Importance/High in Being Addressed Well: This category represents areas where resources may need to be redirected to other areas in greater need or higher in importance.			
Overall Importance Rating				
Importance Mean	Average importance rating for all respondents who gave a valid response to this item.			
Importance Rank	Items are ranked from highest value to the lowest. A rank of 1 corresponds to the highest average importance rating for all individuals.			
Importance N	Represents the total number of valid responses to this item. A valid response is defined as a response from 1 (Strongly disagree) to 4 (Strongly agree).			
Overall Being Addressed Well Rating				
Being Addressed Well Mean	Average being addressed well rating for all respondents who gave a valid response to this item.			
Being Addressed Well Rank	Items are ranked from highest value to the lowest. A rank of 1 corresponds to the highest average being addressed well rating for all individuals.			
Being Addressed Well N	Represents the total number of valid responses to this item. A valid response is defined as a response from 1 (Strongly disagree) to 4 (Strongly agree).			
Do Not Know How the Issue is Being Addressed				
Don't Know N	Represents the total number of individuals who selected 5 (Don't Know) as a response to the being addressed well rating.			
% Don't Know	Percent of individuals who did not know based on the how well the issue is being addressed well scale.			

All Counties Combined: Gibson, Posey, Spencer, Vanderburgh and Warrick

The tables below indicate the demographics of survey respondents. Approximately three quarters of individuals who responded to the needs assessment survey were in the randomly selected community-at-large stakeholder group. Further, approximately half of all respondents were from Vanderburgh County. Females comprised a large portion of respondents, with 70% in that gender group. Distribution of respondents by age group was fairly diverse, with the age groups 45-54, 55-64, and 65 and over containing approximately the same number of survey participants. The majority of respondents were married, and over 60% of individuals have annual household incomes of less than \$60,000. In terms of education level, almost 37% of respondents listed high school as their highest level of education and approximately 29% indicated they were college graduates. These represented the two largest education level groups. In terms of race/ethnicity, 92% of respondents were white, 6% were black/African American, and 0.5% were Hispanic/Latino. Finally, the majority of respondents have no children under 18 living at home. Of those who do have children, most are enrolled in public schools. Frequency statistics are provided in Tables 9 through 18.

Table 9. All Counties: Stakeholder Frequency				
Stakeholder Group	Frequency	Percent		
Leaders	34	2.0%		
Social Service Directors and Staff	250	15.0%		
Social Service Clients	136	8.1%		
Community-at-Large	1251	74.9%		
Total	1671	100.0		

Table 10. All Counties: County Frequency				
County	Frequency	Percent		
Gibson	227	13.6%		
Posey	194	11.6%		
Spencer	105	6.3%		
Vanderburgh	905	54.2%		
Warrick	240	14.4%		
Total	1671	100%		

Table 11. All Counties: Gender			
Gender	Frequency	Percent	
Female	1052	70.4%	
Male	443	29.6%	
Total	1671	100%	
Missing	176	N/A	

Table 12. All Counties: Age				
Age	Frequency	Percent		
18-24	42	2.6%		
25-34	225	13.8%		
35-44	250	15.3%		
45-54	389	23.8%		
55-64	377	23.0%		
65+	353	21.6%		
Total	1636	100%		
Missing	35	N/A		

Table 13. All Counties: Marital Status											
Marital Status	Frequency	Percent									
Married	992	61.6%									
Single	234	14.5%									
Widowed	158	9.8%									
Divorced	227	14.1%									
Total	1611	100%									
Missing	60	N/A									

Table 14. All Counties: Household Income										
Household Income	Frequency	Percent								
Below \$20,000	320	21.1%								
\$20,000 - \$39,999	382	25.2%								
\$40,000 - \$59,999	270	17.8%								
\$60,000 - \$79,999	206	13.6%								
\$80,000 - \$99,999	148	9.7%								
\$100,000 - \$149,999	134	8.8%								
\$150,000 - \$199,999	33	2.2%								
\$200,000 +	25	1.6%								
Total	1518	100%								
Missing	153	N/A								

Table 15. All Counties: Education											
Education	Frequency	Percent									
Grade school	21	1.3%									
Some high school	105	6.4%									
High school grad	600	36.8%									
Vocational school grad	119	7.3%									
College grad	480	29.4%									
Post graduate	305	18.7%									
Total	1631	100%									
Missing	41	N/A									

Table 16. All Counties: Race/Ethnicity										
Race/Ethnicity	Frequency	Percent								
White	1499	92%								
Black/African American	97	6%								
Hispanic/Latino	8	0.5%								
Asian	3	0.2%								
American Indian/Alaskan Native	13	0.8%								
Native Hawaiian/ Pacific Islander	1	0.1%								
Other	9	0.6%								
Total	1630	100%								
Missing	41	N/A								

Table 17. All Counties: Number of Children Under 18 Living at Home											
Number of Children Under 18 Living at Home	Frequency	Percent									
0	1070	66.6%									
1	234	14.6%									
2	196	12.2%									
3	74	4.6%									
4	20	1.2%									
5	9	.6%									
6	2	.1%									
7	2	.1%									
Total	1607	100%									
Missing	64	N/A									

	Table 18. All Counties: Number of Children by Type of School Enrolled														
	Type of School Enrolled														
# of	Public	School	Priv	/ate	Но	me	Pres	chool	Other						
children	n	%	n	%	n	%	n	%	n	%					
enrolled															
0	855	68.9%	953	94.7%	976	98.6%	922	89.5%	978	98.8%					
> 1	201	16.2%	53	5.27%	14	1.4%	108	11.5%	12	1.2%					
Total	1241	100%	1006	100%	990	100%	1030	100%	990	100%					
Missing	430	N/A	665	N/A	681	N/A	641	N/A	681	N/A					

All Counties Combined Stakeholder's Perception of Needs and Strengths

A ranking of all priority needs and strengths is provided in Table 19 for all counties and subgroups combined. The rankings reflect issues that have the highest rank based on the percentages of participants who fell within a response pattern. For priority needs, participants fell within the high in importance and low in being-addressed-well quadrant. For strengths, participants fell within the high in importance and high in being addressed well quadrant. This is a descriptive approach to examining these data. Ranking of the priority needs and strengths suggests that a higher percentage of respondents selected a particular issue compared to other issues within the respective quadrant. While no statistical inferences can be made distinguishing one issue from another, sorting the issues from the highest percentage to the lowest percentage allows readers to visually compare issues. To add further meaning, secondary data sources were used to discuss underlying themes and quantitatively ground community perceptions. For ease of presentation, only the five highest issues are presented.

Priority Needs: The five highest percentages of participants across all stakeholder groups falling in the high in importance and low in being-addressed-well quadrant (represents priority needs) were noted for the following community issues:

- Understanding the cycle of poverty that occurs in successive generations
- Families' understanding of finances, budgeting, and tax credits
- Affordable and accessible health care for low- to moderate-income individuals
- Child and adult obesity
- Cost of prescription medicine

Strengths: The five highest percentages of participants across all stakeholder groups falling in the high in importance and high in being-addressed-well quadrant (represents strengths) were noted for the following community issues:

- Cooperation of community organizations in effectively addressing needs
- School violence
- Children prepared to enter kindergarten
- Recruitment & coordination of volunteers
- Adult literacy

The priority needs reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and low in being-addressed-well quadrant. For example, the highest percentage of participants selected "Understanding the cycle of poverty that occurs in successive generations." This means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, while disagreeing or strongly disagreeing that the issue is being addressed well within the community.

On the other hand, the strengths reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and high in being-addressed-well quadrant. For example, the highest percentage of participants selected "Cooperation of community organizations in effectively addressing needs." This means that the highest percentage of

participants agreed or strongly agreed that this issue is important to the community, and also agreed or strongly agreed that the issue is being addressed well within the community.

Synthesis of Findings with Secondary Data Sources

As a supplement to the community needs and strengths identified through responses from stakeholder groups, secondary data sources were examined. The goal of the process was to incorporate information that would help to provide a more complete understanding of the issues included in the needs assessment survey. A review of secondary data related to most issues contained within the needs assessment survey is provided toward the end of this report. A synthesis of selected data sources specific to the higher ranked issues identified above follow.

A common theme among the highest ranked priority issues is a concern about the affordability of basic needs and services and the impact that poverty or a lower socio-economic status has on one's ability to afford such commodities. The secondary data presented in this report underscore the community's ranking of the top priority needs. Across all counties, the percent of students eligible for free or reduced lunch has increased over the last years (Indiana Department of Education, 2008). Further, a comparison of 2000 to 2005 poverty rates for every county in the study area shows an increase in this rate (US Census, 2000, 2005). Single parents, particularly females, are especially susceptible to poverty (Indiana Prevention Resource Center, PREV-STAT County Profiles Data, 2006). Further, data related to median household income indicates that when adjusted for inflation, many families are actually making less than prior years due to the rising costs of goods and services (US Census, 2000, 2005). Another indicator of the rise in poverty is the number of individuals who receive food stamps. In all five counties and Indiana, the number of food stamp recipients increased from 2003 to 2007 (Indiana FSSA, Division of Family Resources, 2007). The rise in this number was greater than the rise in actual population figures. The statistics related to poverty and social services for individuals at lower socio-economic levels may suggest that people who experience poverty find it particularly challenging to increase their earnings enough not to be classified in poverty status, which may lead to a greater chance of later generations also experiencing poverty.

Regarding the affordability and accessibility to health care for low- to moderate-income individuals, several indicators allow for a deeper understanding of this issue. Nationally, data show that approximately 15-17% of individuals in the United States do not have health insurance coverage (U.S. Census, Current Population Survey, 2006; CDC, Health, United States, 2007). This figure has remained largely unchanged in the past five to ten years. Depending on the source, estimates for Indiana indicate that the statewide rate is very similar to or slightly higher than the national uninsured rate (U.S. Census, Current Population Survey, 2006; CDC, Health, United States, 2007). Overall, health care costs have risen in Indiana and across the nation (The Kaiser Family Foundation and Health Research and Educational Trust, Employer Health Benefits, 2007 Annual Survey). Further, the actual amount individuals must pay for an insurance premium has increased. Additionally, while prescription costs place a burden on lower-income individuals (US Department of Health and Human Services, Medical Expenditure Panel Survey, 2005), Indiana residents do have some relief through the HoosierRx program (Indiana FSSA, Division of Family Resources, 2007). A related health concern is the issue of child and adult obesity. In 2007, approximately 26% of adults in the United States and

approximately 27% of adults in Indiana were classified as obese. Since 2000, rates in both the U.S. and Indiana have increased. Obesity rates for metropolitan areas in Indiana and surrounding states are similar to the national average. As an indicator of the impact of obesity on other health factors, data show that the percentage of adults ever diagnosed with diabetes increased in both the U.S. and Indiana between 2000 and 2007. As of 2007, the Indiana rate was higher than the national rate. Indiana and national statistics have shown an increase over the years (CDC, Behavioral Risk Factor Surveillance Survey, 2007).

Strengths were defined as stakeholder perceptions of issues in the community that are highly important and are perceived as being addressed well. Several key themes related to community strengths emerged. First, stakeholders appear to have a positive perception of social service organizations working cooperatively to address community needs, as well as recruiting and coordinating volunteers. While little secondary data exist related to the cooperation of community organizations, phase two of the 2007 United Way Community Assessment examines this issue in depth. Preliminary findings suggest that community organizations in the region are working together to address community issues. The level of collaboration is further explored in the full report. In terms of volunteering, Indiana is approximately in the middle of all states in the percentage of individuals who volunteer, but 13th overall in average volunteer hours and 5th in retention of volunteers (Corporation for National and Community Service, Volunteering in America 2007).

Another theme appeared to be in the area of education and literacy, such as adult literacy and preparation for kindergarten. National surveys do suggest that adult literacy rates have slightly improved (US Department of Education, Institute of Education Sciences, National Center for Education Statistics, 1992 National Adult Literacy Survey and 2003 National Assessment of Adult Literacy). Locally, the percentage of adults (25 and older) who have less than a high school degree has decreased from 1990 to 2000 in most counties (U.S. Census, 2000). Percentages for all five counties in the study are lower than the national average, and Posey, Vanderburgh, and Warrick are lower than the state average. Gibson and Spencer, however, are higher than the state average.

Regarding preparation for kindergarten, many efforts have been placed toward addressing early school readiness locally. The Welborn Baptist Foundation has invested significant resources in the area of early literacy. Additionally, within the last year, an Early Childhood Development Coalition has emerged to focus on school readiness within Spencer, Vanderburgh, and Warrick Counties. Paths to Quality, which is a voluntary rating system for child care facilities developed by 4C of Southern Indiana recognizes programs that choose to go beyond minimum state licensing requirements through a four-level rating framework. At present, there are almost 130 programs in the area that participate in Paths to Quality, with 39 achieving level 3 and 19 achieving level 4, the highest possible rating in the system (4C of Southern Indiana, 2008). However, on a state level, Indiana does not have a state-sponsored pre-kindergarten program nor devotes state funding to pre-k initiatives (National Institute for Early Education Research (NIEER), 2007). Only twelve states in the country lack such state-level programs. All states that surround Indiana have state pre-k programs. In terms of publicly funded early childhood education, Indiana serves approximately 14,000 children per year through the Head Start Program. This number has increased slightly across the state and has remained stable in the

five-county area over the past three years. With the lack of state funding for early childhood programs (NIEER, The State of Preschool 2007), many families are responsible for paying the full cost of child care for preschool children, which especially creates a burden for many lower-to middle-income families.

Finally, issues identified as strengths were in the domain of violence and crime. While findings indicated that these areas were being addressed well, secondary data indicators related to these areas appear mixed. For school violence, suspensions and expulsions have shown decreases in most counties, and the incident rates are lower than the state in all area school districts except the largest school system (EVSC) in the region (Indiana Department of Education, 2007). A review of violent crime statistics shows a significant difference in all violent crimes per 100,000 population in the United States when comparing 1990 to the years after 2001. While the rate in recent years has been lower than the 1990s, data indicate that violent crime has slightly increased after experiencing a three-year decline between 2002 and 2004. In Indiana, the violent crime rate declined each year between 2002 and 2006. Violent crime rates reported by the Evansville Police Department have fluctuated over the past several years and have shown a three-year climb between 2004 and 2006. The 2006 rate is higher than the state of Indiana and near the U.S. rate. Comparatively, violent crime reported by the Vanderburgh County Sheriff's Department shows a much lower rate in 2006 than the U.S., Indiana, and the city of Evansville (FBI, Uniform Crime Reports, 2006; State of the Cities Data System, 2006).

Table 19. All Counties and Subgroups Combined Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			Importance-Being Addressed Response Patterns								Overall Mean Ratings					
Item from Needs Assessment		N		HL	нн		LL	LH	ı	lmportan	ce	How well issue is being addressed			being addressed	
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
29	Understanding the cycle of poverty that occurs in successive generations	1018	1	61.90	56	27.00	9.10	2.00	36	3.37	1477	56	2.08	1038	489	32.02
15	Families understanding of finances, budgeting, and tax credits	1072	2	59.00	55	30.40	9.10	1.40	34	3.38	1520	51	2.18	1101	447	28.88
51	Affordable and accessible health care for low-to moderate-income individuals	1212	3	58.30	52	32.30	7.90	1.40	17	3.44	1573	55	2.12	1226	320	20.70
49	Child and adult obesity	1167	4	57.80	51	33.10	6.40	2.70	36	3.37	1565	49	2.21	1186	355	23.04
56	Cost of prescription medicine	1203	5	57.00	50	33.60	7.60	1.80	12	3.46	1564	54	2.13	1227	310	20.17
50	Affordable and available care for mental health issues	1062	6	55.70	48	35.70	7.30	1.20	23	3.42	1502	51	2.18	1082	454	29.56
53	Affordable dental care for low- to moderate-income individuals	1126	7	54.50	49	34.90	8.80	1.80	40	3.36	1541	53	2.16	1142	400	25.94
30	Teenage sex, pregnancy, and parenthood	1134	8	54.10	44	38.70	6.30	0.90	12	3.46	1558	46	2.25	1153	383	24.93
18	Affordable in-home care for the elderly	987	9	52.20	47	37.60	8.50	1.70	12	3.46	1484	45	2.26	1020	522	33.85
4	Availability of weekend/evening hours for human services	747	10	52.10	53	31.90	12.70	3.30	50	3.25	1194	48	2.22	769	712	48.08
11	Underage use of drugs other than alcohol or tobacco	1174	11	51.50	36	43.40	4.60	0.40	2	3.60	1558	36	2.38	1201	340	22.06
31	Support for care givers of the elderly, mentally ill, or physically disabled	987	12	51.10	44	38.70	8.90	1.30	27	3.41	1507	47	2.24	1004	514	33.86
26	Children with behavioral problems	1087	13	50.70	41	41.80	5.80	1.70	17	3.44	1537	40	2.34	1097	435	28.39
27	Lack of child support payments	924	14	50.60	43	39.80	6.70	2.80	17	3.44	1387	44	2.28	944	542	36.47

				Tab	le 19 (continue	d)									
			Ir			ng Addres Patterns	ssed			Ov	erall Me	an Ra	atings			ot know w well
	Itam from Norda Assessment			HL		нн	LL	LH	lı	mportai	nce		w well is ng addr			is being ressed
	Item from Needs Assessment	N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
55	Preventative health care	1136	15	48.90	39	42.60	6.80	1.70	30	3.40	1553	42	2.30	1154	384	24.97
3	Transitioning of ex-offenders into community and family	783	16	48.30	54	30.90	17.10	3.70	52	3.15	1258	50	2.20	814	714	46.73
28	Preparation and support for parenthood	1028	17	48.20	40	42.20	7.80	1.80	40	3.36	1477	41	2.33	1045	487	31.79
8	Adult drug use	1171	18	48.00	32	46.40	4.70	0.90	5	3.57	1545	30	2.42	1207	320	20.96
14	Affordable child care	1117	19	47.00	33	44.80	6.40	1.80	12	3.46	1508	36	2.38	1148	382	24.97
33	Child sexual abuse	1021	20	46.90	28	47.40	4.70	1.00	4	3.58	1501	32	2.41	1045	454	30.29
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	1163	20	46.90	37	43.30	7.30	2.60	23	3.42	1553	39	2.35	1189	358	23.14
39	Preparation of the unemployed to enter the workforce	1071	22	46.40	34	44.60	7.30	1.70	30	3.40	1519	32	2.41	1093	450	29.16
10	Underage alcohol use	1173	23	46.30	29	47.20	4.70	1.80	6	3.55	1537	29	2.46	1204	304	20.16
20	Affordable and accessible public transportation	1157	24	45.50	42	41.50	9.80	3.30	48	3.30	1484	43	2.29	1190	298	20.03
35	Lack of safe, constructive opportunities for youth	1146	25	45.10	35	44.20	6.30	4.40	30	3.40	1512	34	2.40	1166	359	23.54
36	Elderly abuse and neglect	883	26	45.00	38	42.90	8.40	3.70	34	3.38	1428	36	2.38	899	627	41.09
34	Parent involvement in child education	1175	27	44.90	24	50.20	4.10	0.80	6	3.55	1568	27	2.49	1190	341	22.27
24	Child physical/mental abuse and neglect	1140	28	44.20	22	51.00	3.40	1.40	6	3.55	1566	25	2.50	1154	393	25.40
7	Drug and alcohol related crimes	1202	29	43.80	20	51.20	3.60	1.30	2	3.60	1577	23	2.51	1226	315	20.44
16	Affordable and available care for the physically disabled	992	30	43.50	26	48.00	7.40	1.10	23	3.42	1479	34	2.40	1015	520	33.88

						continue										
			I			ng Addre Patterns	ssed			Ov	erall Me	an Ra	atings			ot know w well
	16 6 N 1. A			HL		нн	LL	LH	lı	mportai	nce		w well is ng addro			is being ressed
	Item from Needs Assessment	N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
52	Proper nutrition	1128	31	42.20	26	48.00	6.90	2.90	44	3.33	1521	30	2.42	1148	369	24.32
5	Adult alcohol abuse	1198	32	41.50	17	52.50	4.10	1.90	10	3.47	1578	19	2.53	1225	328	21.12
42	Preparation of young adults to enter the workforce	1090	33	40.50	16	52.80	4.80	2.00	27	3.41	1520	17	2.54	1118	414	27.02
6	Underage tobacco use	1134	33	40.50	22	51.00	5.10	3.30	27	3.41	1512	19	2.53	1177	333	22.05
47	Youth violence and crime	1050	35	40.10	21	51.10	5.80	3.00	23	3.42	1517	25	2.50	1075	458	29.88
12	Driving under alcohol/drug influence	1209	36	39.70	11	56.20	2.80	1.30	1	3.61	1499	12	2.57	1243	237	16.01
54	Sexually transmitted diseases/infections	928	37	37.50	19	52.00	7.30	3.10	44	3.33	1464	28	2.48	937	592	38.72
13	Availability of food and shelter for the homeless	1211	38	37.30	14	55.60	4.90	2.20	21	3.43	1549	11	2.59	1235	312	20.17
44	Domestic violence	1100	39	37.20	9	56.70	4.60	1.50	10	3.47	1532	12	2.57	1120	405	26.56
46	Gang activity	910	40	35.50	30	47.10	8.60	8.80	49	3.28	1421	19	2.53	937	591	38.68
48	Adult sexual victimization	864	41	35.30	15	54.10	5.80	4.90	36	3.37	1380	14	2.56	894	612	40.64
32	Preparation and support for marriage and marital relations	1035	42	35.00	17	52.50	7.20	5.30	51	3.23	1480	17	2.54	1056	476	31.07
37	Number of skilled workers to fill available jobs	1082	43	34.90	10	56.60	4.90	3.60	40	3.36	1493	10	2.62	1099	435	28.36
9	Adult tobacco use	1146	44	34.20	31	46.90	10.40	8.60	53	3.14	1543	22	2.52	1178	369	23.85
17	Availability of jobs for mentally and physically challenged individuals	1011	45	34.00	13	55.90	7.80	2.30	43	3.34	1479	16	2.55	1042	504	32.60
38	Students completion of high school	1173	46	33.80	8	61.10	3.40	1.70	9	3.54	1547	7	2.66	1194	336	21.96

				Tab	le 19 (continue	d)									
			lı			ng Addre Patterns	ssed			Ov	erall Me	an Ra	atings			ot know w well
	Item from Needs Assessment			HL		нн	LL	LH	li	mportai	nce		w well is ng addre			is being ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
21	Language barriers for non-English speaking individuals	908	47	33.70	46	37.70	12.60	16.1	56	2.77	1399	23	2.51	933	607	39.42
23	Integration and appreciation of individuals from different cultures	1003	48	32.10	25	48.90	10.00	9.10	55	3.00	1425	14	2.56	1030	510	33.12
25	Children with special mental and physical conditions	1075	49	31.00	7	63.80	3.70	1.50	12	3.46	1522	7	2.66	1088	441	28.84
1	Recruitment & coordination of volunteers	1003	50	29.10	4	66.20	3.30	1.40	33	3.39	1394	4	2.73	1032	517	33.38
45	Violent crime	1142	51	28.90	6	63.90	4.00	3.20	17	3.44	1551	6	2.68	1164	365	23.87
22	Race relations	1029	52	27.10	11	56.20	8.70	8.00	54	3.08	1413	9	2.63	1050	452	30.09
41	Adult literacy	997	53	26.20	5	66.00	5.20	2.60	36	3.37	1477	3	2.74	1019	523	33.92
43	School violence	835	54	25.60	2	66.50	4.10	3.70	21	3.43	1086	1	2.78	854	239	21.87
40	Children prepared to enter kindergarten	1073	55	24.00	3	66.40	4.50	5.10	47	3.31	1471	2	2.77	1104	436	28.31
2	Cooperation of community organization in effectively addressing needs	1065	56	23.80	1	66.70	8.60	0.90	46	3.32	1423	5	2.72	1093	444	28.89

All Counties Ranking by Subgroups

The all-county ranking of needs assessment issues based on the importance/being-addressed-well quadrant is displayed in Table 20. The rankings are provided for all subgroups combined, and individually for the leader, provider, client, and community subgroups. As indicated in the all-county ranking, a number of issues related to poverty and affordability of medical services were identified by community members as priority needs. In general, the individual subgroups also noted many of the same issues as needs. Given that the community-at-large comprised a large portion of all respondents, the priority needs identified by that group were quite similar to those identified by all stakeholders combined. Community strengths were also quite similar for the different stakeholder groups, with cooperation of community organizations and children prepared to enter kindergarten being two of the top strength areas. For a more detailed breakdown of rankings for subgroups, refer to Tables 21 through 24.

	Table 20. All Counties Ranking by Subgroups Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is b</u>	eing ad	dresse	<u>d</u>)		
		Ran	ked by	Import	ance-Bense Pat	
	Item from Needs Assessment	AII	Leader	Provider	Client	Com.
29	Understanding the cycle of poverty that occurs in successive generations	1	2	9	3	1
15	Families understanding of finances, budgeting, and tax credits	2	24	3	8	2
51	Affordable and accessible health care for low- to moderate-income individuals	3	4	1	1	5
49	Child and adult obesity	4	1	8	15	3
56	Cost of prescription medicine	5	17	4	5	4
50	Affordable and available care for mental health issues	6	8	2	9	8
53	Affordable dental care for low- to moderate-income individuals	7	34	11	7	6
30	Teenage sex, pregnancy, and parenthood	8	6	12	6	7
18	Affordable in-home care for the elderly	9	17	21	4	10
4	Availability of weekend/evening hours for human services	10	3	10	2	13
11	Underage use of drugs other than alcohol or tobacco	11	10	15	29	9
31	Support for care givers of the elderly, mentally ill, or physically disabled	12	26	12	14	11
26	Children with behavioral problems	13	19	5	9	16
27	Lack of child support payments	14	16	6	17	14
55	Preventative health care	15	29	16	38	12
3	Transitioning of ex-offenders into community and family	16	5	14	12	19
28	Preparation and support for parenthood	17	9	20	26	16
8	Adult drug use	18	6	23	33	15
14	Affordable child care	19	43	6	22	22
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	20	15	16	11	23
33	Child sexual abuse	20	24	19	20	20

	Table 20 (continued)					
			ked by Iressed			
	Item from Needs Assessment	Η	Leader	Provider	Client	Com.
39	Preparation of the unemployed to enter the workforce	22	13	16	13	25
10	Underage alcohol use	23	11	29	37	18
20	Affordable and accessible public transportation	24	19	22	21	27
35	Lack of safe, constructive opportunities for youth	25	52	31	18	21
36	Elderly abuse and neglect	26	38	28	16	25
34	Parent involvement in child education	27	19	26	24	28
24	Child physical/mental abuse and neglect	28	35	25	18	30
7	Drug and alcohol related crimes	29	33	32	43	23
16	Affordable and available care for the physically disabled	30	49	23	36	29
52	Proper nutrition	31	12	32	49	31
5	Adult alcohol abuse	32	13	38	42	32
6	Underage tobacco use	33	27	39	50	33
42	Preparation of young adults to enter the workforce	33	23	34	41	35
47	Youth violence and crime	35	47	37	25	34
12	Driving under alcohol/drug influence	36	22	29	52	36
54	Sexually transmitted diseases/infections	37	36	47	48	37
13	Availability of food and shelter for the homeless	38	38	36	28	41
44	Domestic violence	39	44	41	45	38
46	Gang activity	40	50	46	43	39
48	Adult sexual victimization	41	41	45	27	43
32	Preparation and support for marriage and marital relations	42	46	50	46	39
37	Number of skilled workers to fill available jobs	43	45	44	35	44
9	Adult tobacco use	44	30	48	55	42
17	Availability of jobs for mentally and physically challenged individuals	45	53	42	33	45
38	Students completion of high school	46	32	27	30	48
21	Language barriers for non-English speaking individuals	47	28	35	23	47
23	Integration and appreciation of individuals from different cultures	48	31	43	30	49
25	Children with special mental and physical conditions	49	55	40	38	50
1	Recruitment & coordination of volunteers	50	54	55	53	46
45	Violent crime	51	51	49	40	51
22	Race relations	52	42	54	32	52
41	Adult literacy	53	48	53	51	53
43	School violence	54	56	51	47	55
40	Children prepared to enter kindergarten	55	37	52	54	56
2	Cooperation of community organization in effectively addressing needs	56	40	56	56	54

Table 21. All Counties: Community At-Large Subgroup Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			Im			g Addres Patterns	sed			Ov	erall Me	an Ra	itings		knov	not v how issue
	Item from Needs Assessment	N		HL		нн	LL	LH	lı	mportar	nce		w well is: ng addre		is b	eing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
29	Understanding the cycle of poverty that occurs in successive generations	710	1	64.10	56	23.90	9.60	2.40	40	3.35	1092	56	2.04	727	408	32.60
15	Families understanding of finances, budgeting, and tax credits	766	2	60.20	55	28.60	9.70	1.60	34	3.38	1128	52	2.16	788	364	29.10
49	Child and adult obesity	847	3	59.10	52	30.80	7.10	3.00	36	3.37	1172	50	2.17	861	294	23.50
56	Cost of prescription medicine	883	4	57.10	49	33.30	7.50	2.20	10	3.47	1170	53	2.14	900	252	20.10
51	Affordable and accessible health care for low-to moderate-income individuals	881	5	56.40	49	33.30	8.60	1.70	21	3.43	1177	53	2.14	891	265	21.20
53	Affordable dental care for low- to moderate-income individuals	803	6	56.20	51	32.50	9.30	2.00	38	3.36	1154	53	2.14	814	337	26.90
30	Teenage sex, pregnancy, and parenthood	813	7	55.00	44	37.80	6.00	1.20	12	3.46	1168	45	2.23	829	316	25.30
50	Affordable and available care for mental health issues	748	8	54.90	47	35.70	8.00	1.30	25	3.41	1116	48	2.19	764	383	30.60
11	Underage use of drugs other than alcohol or tobacco	863	9	53.40	39	41.40	4.80	.50	1	3.61	1167	40	2.35	883	262	20.90
18	Affordable in-home care for the elderly	711	10	53.20	48	35.60	9.10	2.10	15	3.45	1115	45	2.23	736	406	32.50
31	Support for care givers of the elderly, mentally ill, or physically disabled	715	11	52.20	45	37.60	8.70	1.50	21	3.43	1126	45	2.23	731	395	31.60
55	Preventative health care	820	12	50.70	40	41.10	6.70	1.50	29	3.40	1163	43	2.29	831	317	25.30
4	Availability of weekend/evening hours for human services	504	13	50.40	53	30.60	15.50	3.60	51	3.21	853	48	2.19	521	577	46.10
27	Lack of child support payments	659	14	50.10	43	39.20	7.00	3.80	16	3.44	1026	43	2.29	673	425	34.00
8	Adult drug use	849	15	49.40	33	44.40	5.20	1.10	5	3.56	1145	32	2.39	877	255	20.40

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			lm			g Addres Patterns	sed			Ov	erall Me	an Ra	atings			not w how
	Item from Needs Assessment	N		HL		нн	LL	LH	lı	nportai	nce		w well is		is t	issue eing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
26	Children with behavioral problems	782	16	49.20	36	42.80	5.80	2.20	16	3.44	1149	37	2.37	791	351	28.10
28	Preparation and support for parenthood	729	16	49.20	42	40.60	7.80	2.30	40	3.35	1096	41	2.33	744	397	31.70
10	Underage alcohol use	854	18	47.90	30	45.20	4.90	2.00	7	3.55	1141	29	2.43	880	237	18.90
3	Transitioning of ex-offenders into community and family	560	19	47.30	54	29.30	19.50	3.90	53	3.11	933	50	2.17	584	554	44.30
33	Child sexual abuse	720	20	47.20	26	46.80	4.70	1.30	4	3.59	1111	31	2.41	740	370	29.60
35	Lack of safe, constructive opportunities for youth	832	21	46.90	37	42.10	6.30	4.80	25	3.41	1130	38	2.36	845	291	23.30
14	Affordable child care	791	22	46.10	32	45.00	6.70	2.10	16	3.44	1113	32	2.39	813	320	25.60
7	Drug and alcohol related crimes	879	23	45.80	24	48.90	4.00	1.30	3	3.60	1177	26	2.47	898	251	20.10
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	829	23	45.80	34	44.10	7.50	2.50	32	3.39	1156	38	2.36	849	301	24.10
39	Preparation of the unemployed to enter the workforce	779	25	45.60	30	45.20	7.40	1.80	29	3.40	1142	29	2.43	800	358	28.60
36	Elderly abuse and neglect	641	25	45.60	37	42.10	8.40	3.90	32	3.39	1074	34	2.38	651	487	38.90
20	Affordable and accessible public transportation	818	27	45.40	41	41.00	10.10	3.50	49	3.26	1088	42	2.30	845	248	19.80
34	Parent involvement in child education	859	28	45.20	21	49.90	4.00	.90	5	3.56	1176	24	2.49	871	271	21.70
16	Affordable and available care for the physically disabled	707	29	44.60	27	46.30	7.60	1.60	25	3.41	1099	34	2.38	726	413	33.00
24	Child physical/mental abuse and neglect	819	30	44.20	18	50.70	3.70	1.50	7	3.55	1172	20	2.50	831	323	25.80
52	Proper nutrition	813	31	43.50	28	45.90	7.30	3.30	44	3.33	1133	34	2.38	826	305	24.40

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			lm			g Addres Patterns	sed			Ov	erall Me	an Ra	tings			not w how
	Item from Needs Assessment			HL		нн	LL	LH	lr	nportai	nce		w well is		well is b	issue peing ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
5	Adult alcohol abuse	379	32	42.70	17	51.40	4.40	1.60	10	3.47	1180	20	2.50	890	263	21.00
6	Underage tobacco use	818	33	42.30	23	49.00	5.00	3.70	23	3.42	1123	20	2.50	850	265	21.20
47	Youth violence and crime	767	34	40.90	20	50.10	6.00	3.00	23	3.42	1139	25	2.48	787	362	28.90
42	Preparation of young adults to enter the workforce	789	35	40.80	16	52.00	4.80	2.40	25	3.41	1139	17	2.53	809	340	27.20
12	Driving under alcohol/drug influence	876	36	40.00	10	55.60	2.70	1.70	1	3.61	1102	12	2.56	904	181	14.50
54	Sexually transmitted diseases/infections	653	37	39.80	22	49.50	7.40	3.40	43	3.34	1096	28	2.45	658	482	38.50
44	Domestic violence	791	38	38.10	11	55.40	4.90	1.60	12	3.46	1144	14	2.55	806	333	26.60
46	Gang activity	661	39	36.90	29	45.70	8.60	8.80	48	3.28	1062	20	2.50	686	458	36.60
32	Preparation and support for marriage and marital relations	737	39	36.90	18	50.70	6.90	5.40	50	3.24	1101	17	2.53	755	389	31.10
13	Availability of food and shelter for the homeless	861	41	36.80	12	55.20	5.60	2.40	29	3.40	1149	11	2.58	879	272	21.70
9	Adult tobacco use	831	42	35.90	35	43.60	11.10	9.50	52	3.12	1152	26	2.47	857	294	23.50
48	Adult sexual victimization	613	43	35.60	15	52.90	6.70	4.90	38	3.36	1025	14	2.55	639	484	38.70
37	Number of skilled workers to fill available jobs	789	44	35.10	9	55.80	5.20	3.90	40	3.35	1123	9	2.62	803	346	27.70
17	Availability of jobs for mentally and physically challenged individuals	717	45	33.80	13	55.10	8.40	2.80	44	3.33	1105	14	2.55	740	409	32.70
1	Recruitment & coordination of volunteers	709	46	31.50	7	64.00	3.40	1.10	34	3.38	1016	6	2.69	733	421	33.70
21	Language barriers for non-English speaking individuals	639	47	30.80	46	36.00	13.90	19.2	56	2.69	1040	19	2.52	656	486	38.80

				Table	21 (cc	ontinued))									
			lm			g Addres Patterns	sed			Ove	erall Me	an Ra	itings		knov	not v how
	Item from Needs Assessment			HL	ı	нн	LL	LH	lr	nportar	ice		w well is: ng addre		is b	issue eing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
38	Students completion of high school	856	48	30.60	8	63.90	3.50	2.00	9	3.54	1157	4	2.71	875	269	21.50
23	Integration and appreciation of individuals from different cultures	714	49	30.30	25	48.70	11.10	9.90	55	2.95	1060	12	2.56	733	413	33.00
25	Children with special mental and physical conditions	772	50	29.40	3	65.30	3.60	1.70	12	3.46	1140	5	2.70	782	357	28.50
45	Violent crime	844	51	28.00	5	64.70	4.00	3.30	16	3.44	1168	6	2.69	860	283	22.60
22	Race relations	733	52	26.60	13	55.10	9.50	8.70	54	3.06	1045	10	2.61	748	360	28.80
41	Adult literacy	717	53	26.20	4	65.00	5.40	3.30	36	3.37	1104	3	2.73	734	421	33.70
2	Cooperation of community organization in effectively addressing needs	739	54	24.90	6	64.50	9.50	1.10	47	3.29	1037	6	2.69	765	379	30.30
43	School violence	543	55	24.70	1	66.90	5.00	3.50	16	3.44	700	1	2.79	539	168	13.40
40	Children prepared to enter kindergarten	773	56	23.30	2	65.70	5.30	5.70	46	3.30	1099	2	2.78	799	354	28.30

Table 22. All Counties Combined: Client Subgroup Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			Ir			ng Addre Patterns				Ove	erall Me	an Ra	tings		kno	o not w how I issue
	Item from Needs Assessment			HL		нн	LL	LH	lr	mportar	ice		well iss		is I	being ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
51	Affordable and accessible health care for low- to moderate-income individuals	98	1	59.20	56	32.70	7.10	1.00	40	3.37	123	56	2.07	99	26	19.10
4	Availability of weekend/evening hours for human services	75	2	54.70	49	42.70	2.70	.00	33	3.42	106	53	2.27	77	46	33.80
29	Understanding the cycle of poverty that occurs in successive generations	91	3	53.80	54	38.50	6.60	1.10	35	3.40	118	51	2.29	92	36	26.50
18	Affordable in-home care for the elderly	82	4	51.20	46	43.90	4.90	.00	8	3.55	114	47	2.36	86	42	30.90
56	Cost of prescription medicine	101	5	50.50	55	36.60	9.90	3.00	41	3.36	126	55	2.17	102	20	14.70
30	Teenage sex, pregnancy, and parenthood	94	6	50.00	50	42.60	7.40	.00	23	3.47	120	43	2.39	96	32	23.50
53	Affordable dental care for low- to moderate-income individuals	94	7	48.90	52	40.40	9.60	1.10	46	3.33	122	54	2.22	95	30	22.10
15	Families understanding of finances, budgeting, and tax credits	94	8	47.90	50	42.60	7.40	2.10	30	3.43	123	48	2.35	96	31	22.80
26	Children with behavioral problems	90	9	47.80	45	45.60	6.70	.00	29	3.44	120	44	2.38	91	36	26.50
50	Affordable and available care for mental health issues	92	9	47.80	47	43.50	7.60	1.10	38	3.38	123	52	2.28	92	33	24.30
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	106	11	47.20	48	43.40	6.60	2.80	15	3.51	125	49	2.31	107	20	14.70
3	Transitioning of ex-offenders into community and family	64	12	46.90	53	39.10	10.90	3.10	55	3.20	98	49	2.31	68	55	40.40
39	Preparation of the unemployed to enter the workforce	94	13	44.70	42	47.90	7.40	.00	17	3.49	121	39	2.46	95	30	22.10
31	Support for care givers of the elderly, mentally ill, or physically disabled	83	14	42.20	40	50.60	6.00	1.20	25	3.46	119	44	2.38	84	44	32.40
49	Child and adult obesity	95	15	41.10	43	47.40	7.40	4.20	53	3.24	124	40	2.45	98	26	19.10

				Table	22 (cc	ontinued)										
			Ir			ng Addre Patterns				Ove	erall Me	an Rat	tings			o not w how
	Item from Needs Assessment	N		HL		нн	LL	LH	lı	nportar	ice		well iss		is	l issue being ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
36	Elderly abuse and neglect	69	16	40.60	39	50.70	7.20	1.40	27	3.45	113	41	2.44	71	56	41.20
27	Lack of child support payments	84	17	40.50	36	53.60	6.00	.00	27	3.45	113	38	2.47	86	41	30.10
24	Child physical/mental abuse and neglect	92	18	40.20	29	56.50	1.10	2.20	1	3.59	121	20	2.62	94	33	24.30
35	Lack of safe, constructive opportunities for youth	97	18	40.20	41	50.50	6.20	3.10	37	3.39	122	36	2.50	100	28	20.60
33	Child sexual abuse	94	20	39.40	30	56.40	4.30	.00	2	3.57	124	35	2.51	96	31	22.80
20	Affordable and accessible public transportation	105	21	39.00	38	51.40	8.60	1.00	33	3.42	124	44	2.38	107	21	15.40
14	Affordable child care	102	22	38.20	34	54.90	5.90	1.00	12	3.52	126	31	2.56	105	22	16.20
21	Language barriers for non-English speaking individuals	74	23	37.80	44	45.90	8.10	8.10	56	3.08	108	29	2.57	77	48	35.30
34	Parent involvement in child education	96	24	37.50	33	55.20	7.30	.00	21	3.48	123	26	2.59	97	29	21.30
47	Youth violence and crime	87	25	36.80	25	58.60	4.60	.00	12	3.52	122	22	2.61	89	34	25.00
28	Preparation and support for parenthood	96	26	36.50	35	54.20	7.30	2.10	35	3.40	121	33	2.55	97	30	22.10
48	Adult sexual victimization	83	27	36.10	28	56.60	4.80	2.40	16	3.50	114	37	2.49	86	38	27.90
13	Availability of food and shelter for the homeless	109	28	35.80	24	58.70	4.60	.90	9	3.53	130	10	2.67	111	17	12.50
11	Underage use of drugs other than alcohol or tobacco	98	29	35.70	26	58.20	5.10	1.00	5	3.56	124	22	2.61	100	27	19.90
23	Integration and appreciation of individuals from different cultures	82	30	35.40	32	56.10	6.10	2.40	50	3.28	109	26	2.59	86	37	27.20
38	Students completion of high school	99	30	35.40	15	60.60	3.00	1.00	2	3.57	125	13	2.65	100	25	18.40

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			Ir			ng Addre Patterns				Ov	erall Me	an Ra	tings			o not w how
	Item from Needs Assessment			HL		нн	LL	LH	lr	nportar	nce		well iss		is l	l issue being ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
22	Race relations	80	32	35.00	23	58.80	5.00	1.30	46	3.33	107	15	2.63	83	39	28.70
8	Adult drug use	101	33	34.70	16	60.40	4.00	1.00	5	3.56	129	25	2.60	104	24	17.60
17	Availability of jobs for mentally and physically challenged individuals	95	33	34.70	17	60.00	4.20	1.10	21	3.48	121	22	2.61	98	30	22.10
37	Number of skilled workers to fill available jobs	90	35	34.40	17	60.00	3.30	2.20	38	3.38	119	20	2.62	91	33	24.30
16	Affordable and available care for the physically disabled	88	36	34.10	12	61.40	4.50	.00	17	3.49	122	34	2.54	90	37	27.20
10	Underage alcohol use	98	37	33.70	14	61.20	4.10	1.00	9	3.53	126	15	2.63	99	27	19.90
25	Children with special mental and physical conditions	84	38	33.30	11	61.90	2.40	2.40	17	3.49	116	26	2.59	87	39	28.70
55	Preventative health care	96	38	33.30	37	52.10	9.40	5.20	48	3.32	124	42	2.42	96	29	21.30
45	Violent crime	94	40	33.00	21	59.60	6.40	1.10	12	3.52	121	31	2.56	97	27	19.90
42	Preparation of young adults to enter the workforce	92	41	32.60	10	63.00	3.30	1.10	30	3.43	122	15	2.63	95	27	19.90
5	Adult alcohol abuse	105	42	32.40	17	60.00	4.80	2.90	25	3.46	129	12	2.66	107	21	15.40
7	Drug and alcohol related crimes	106	43	32.10	9	63.20	3.80	.90	9	3.53	129	7	2.71	107	21	15.40
46	Gang activity	78	43	32.10	30	56.40	7.70	3.80	30	3.43	115	9	2.68	79	44	32.40
44	Domestic violence	100	45	31.00	8	64.00	4.00	1.00	2	3.57	123	15	2.63	103	21	15.40
32	Preparation and support for marriage and marital relations	86	46	29.10	27	57.00	11.60	2.30	51	3.25	118	29	2.57	87	37	27.20
43	School violence	100	47	29.00	7	65.00	5.00	1.00	17	3.49	124	8	2.69	102	21	15.40

				Table	22 (cd	ontinued)										
			lr			ng Addre Patterns				Ove	erall Me	an Ra	tings		kno	not w how
	Item from Needs Assessment			HL		нн	LL	LH	lr	nportar	nce		well iss		is	l issue being ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
54	Sexually transmitted diseases/infections	89	48	28.10	21	59.60	7.90	4.50	48	3.32	122	14	2.64	90	35	25.70
52	Proper nutrition	97	49	27.80	20	59.80	10.30	2.10	53	3.24	123	15	2.63	99	23	16.90
6	Underage tobacco use	101	50	27.70	12	61.40	7.90	3.00	42	3.35	125	10	2.67	103	23	16.90
41	Adult literacy	88	51	27.30	5	68.20	4.50	.00	23	3.47	120	5	2.79	89	36	26.50
12	Driving under alcohol/drug influence	104	52	26.00	4	68.30	4.80	1.00	5	3.56	127	6	2.76	105	21	15.40
1	Recruitment & coordination of volunteers	84	53	23.80	3	70.20	4.80	1.20	42	3.35	118	4	2.81	86	39	28.70
40	Children prepared to enter kindergarten	93	54	20.40	2	72.00	4.30	3.20	45	3.34	120	1	2.83	94	32	23.50
9	Adult tobacco use	99	55	20.20	6	66.70	7.10	6.10	51	3.25	125	1	2.83	101	27	19.90
2	Cooperation of community organization in effectively addressing needs	95	56	10.50	1	78.90	8.40	2.10	42	3.35	122	3	2.82	96	28	20.60

Table 23. All Counties Combined: Provider Subgroup Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			Im			g Addres Patterns	sed			Ove	erall Me	an Ra	tings		knov	not v how issue
	Item from Needs Assessment			HL		нн	LL	LH	lı	mportar	nce		v well is: ng addre		is b	eing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
51	Affordable and accessible health care for low- to moderate-income individuals	209	1	65.60	56	27.80	6.20	.50	15	3.48	239	56	2.05	212	19	7.60
50	Affordable and available care for mental health issues	196	2	62.20	53	31.10	5.60	1.00	18	3.44	233	54	2.09	200	30	12.00
15	Families understanding of finances, budgeting, and tax credits	189	3	61.40	55	30.70	7.90	.00	31	3.39	236	52	2.15	194	41	16.40
56	Cost of prescription medicine	198	4	60.60	52	32.30	7.10	.00	12	3.49	236	55	2.08	203	28	11.20
26	Children with behavioral problems	193	5	58.00	47	35.80	6.20	.00	16	3.45	236	46	2.19	193	36	14.40
14	Affordable child care	197	6	57.90	49	34.50	6.60	1.00	9	3.51	235	46	2.19	203	34	13.60
27	Lack of child support payments	164	6	57.90	48	34.80	6.70	.60	21	3.43	221	51	2.16	167	61	24.40
49	Child and adult obesity	197	8	56.90	45	38.10	4.10	1.00	24	3.42	236	42	2.26	199	29	11.60
29	Understanding the cycle of poverty that occurs in successive generations	193	9	56.00	50	33.70	9.80	.50	29	3.40	235	52	2.15	194	36	14.40
4	Availability of weekend/evening hours for human services	151	10	55.00	53	31.10	9.30	4.60	49	3.25	206	41	2.28	154	73	29.20
53	Affordable dental care for low- to moderate-income individuals	204	11	52.90	44	38.20	7.40	1.50	28	3.41	234	49	2.18	208	24	9.60
30	Teenage sex, pregnancy, and parenthood	200	12	51.50	40	40.50	8.00	.00	18	3.44	238	44	2.25	201	29	11.60
31	Support for care givers of the elderly, mentally ill, or physically disabled	169	12	51.50	46	36.10	12.40	.00	45	3.32	231	49	2.18	169	61	24.40
3	Transitioning of ex-offenders into community and family	141	14	51.10	51	33.30	12.10	3.50	50	3.24	198	42	2.26	144	89	35.60
11	Underage use of drugs other than alcohol or tobacco	188	15	50.50	32	45.20	4.30	.00	2	3.57	235	32	2.41	192	43	17.20

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			lm			g Addres Patterns	sed			Ov	erall Me	an Ra	itings		_	not w how
	Item from Needs Assessment	N		HL		НН	LL	LH	lr	nportar	nce		w well is		well is b	issue eing essed
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	200	16	50.00	42	39.50	8.00	2.50	16	3.45	238	38	2.30	205	31	12.40
39	Preparation of the unemployed to enter the workforce	172	16	50.00	39	40.70	7.60	1.70	42	3.34	224	35	2.33	172	54	21.60
55	Preventative health care	196	16	50.00	35	43.40	6.10	.50	31	3.39	234	39	2.29	202	30	12.00
33	Child sexual abuse	184	19	49.50	33	44.60	5.40	.50	7	3.53	235	35	2.33	186	42	16.80
28	Preparation and support for parenthood	180	20	48.90	36	42.80	8.30	.00	31	3.39	231	44	2.25	181	50	20.00
18	Affordable in-home care for the elderly	173	21	48.60	38	41.60	8.70	1.20	21	3.43	225	39	2.29	177	61	24.40
20	Affordable and accessible public transportation	202	22	48.50	43	38.60	9.40	3.50	21	3.43	238	46	2.19	206	27	10.80
8	Adult drug use	194	23	47.40	29	48.50	3.60	.50	2	3.57	237	24	2.47	199	34	13.60
16	Affordable and available care for the physically disabled	175	23	47.40	33	44.60	8.00	.00	24	3.42	227	34	2.34	177	59	23.60
24	Child physical/mental abuse and neglect	201	25	47.30	30	47.80	4.00	1.00	2	3.57	241	32	2.41	201	31	12.40
34	Parent involvement in child education	192	26	46.90	27	49.00	3.60	.50	10	3.50	237	27	2.45	193	37	14.80
38	Students completion of high school	187	27	46.50	26	49.20	3.70	.50	10	3.50	232	30	2.43	188	39	15.60
36	Elderly abuse and neglect	155	28	45.80	37	42.60	9.00	2.60	44	3.33	216	35	2.33	159	68	27.20
10	Underage alcohol use	194	29	44.30	25	49.50	4.60	1.50	6	3.56	237	23	2.48	198	34	13.60
12	Driving under alcohol/drug influence	203	29	44.30	18	53.20	2.50	.00	1	3.61	237	18	2.54	207	28	11.20
35	Lack of safe, constructive opportunities for youth	192	31	43.80	27	49.00	5.70	1.60	31	3.39	228	30	2.43	196	32	12.80

						ontinued)									D -	
			ım			g Addres Patterns				Ov	erall Me	an Ra	itings		knov	not w how
	Item from Needs Assessment			HL		нн	LL	LH	lr	nportar	nce		w well is ng addre		is b	issue eing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
7	Drug and alcohol related crimes	190	32	42.10	16	53.70	2.10	2.10	2	3.57	238	16	2.55	194	37	14.80
52	Proper nutrition	197	32	42.10	21	51.30	4.60	2.00	40	3.35	234	24	2.47	199	31	12.40
42	Preparation of young adults to enter the workforce	184	34	41.80	23	51.10	6.00	1.10	31	3.39	228	20	2.51	189	38	15.20
21	Language barriers for non-English speaking individuals	174	35	41.40	41	39.70	9.80	9.20	56	3.01	220	28	2.44	179	60	24.00
13	Availability of food and shelter for the homeless	211	36	40.80	14	55.00	2.80	1.40	8	3.52	238	12	2.57	215	20	8.00
47	Youth violence and crime	174	37	40.20	20	52.30	6.30	1.10	38	3.38	227	22	2.49	176	52	20.80
5	Adult alcohol abuse	195	38	39.50	15	54.40	3.10	3.10	12	3.49	237	10	2.58	202	36	14.40
6	Underage tobacco use	189	39	39.20	17	53.40	4.80	2.60	29	3.40	232	12	2.57	197	38	15.20
25	Children with special mental and physical conditions	193	40	38.90	12	55.40	5.20	.50	18	3.44	234	24	2.47	193	37	14.80
44	Domestic violence	185	41	38.40	10	56.80	4.30	.50	12	3.49	235	10	2.58	187	42	16.80
17	Availability of jobs for mentally and physically challenged individuals	173	42	37.60	18	53.20	8.70	.60	42	3.34	224	28	2.44	178	57	22.80
23	Integration and appreciation of individuals from different cultures	179	43	36.90	31	46.40	7.80	8.90	54	3.08	223	16	2.55	183	54	21.60
37	Number of skilled workers to fill available jobs	174	44	36.20	13	55.20	5.20	3.40	47	3.31	220	9	2.59	176	51	20.40
48	Adult sexual victimization	150	45	34.70	7	60.00	3.30	2.00	38	3.38	215	8	2.62	151	76	30.40
46	Gang activity	148	46	33.80	24	50.70	8.10	7.40	52	3.19	216	14	2.56	149	79	31.60
54	Sexually transmitted diseases/infections	169	47	33.70	9	57.40	7.10	1.80	48	3.29	217	19	2.53	171	61	24.40

				Table	23 (cc	ontinued)										
			lm			g Addres Patterns	sed			Ove	erall Me	an Ra	tings		knov	not w how
	Item from Needs Assessment			HL		НН	LL	LH	lı	nportar	ice		v well is: ng addre		is b	issue peing ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
9	Adult tobacco use	189	48	33.30	21	51.30	10.10	5.30	52	3.19	232	14	2.56	193	41	16.40
45	Violent crime	175	49	33.10	6	61.70	3.40	1.70	24	3.42	230	7	2.68	178	51	20.40
32	Preparation and support for marriage and marital relations	186	50	31.70	11	56.50	7.50	4.30	50	3.24	229	20	2.51	187	43	17.20
43	School violence	183	51	29.50	5	64.50	1.60	4.40	31	3.39	230	3	2.76	185	45	18.00
40	Children prepared to enter kindergarten	178	52	27.00	4	68.00	1.70	3.40	45	3.32	221	6	2.69	182	45	18.00
41	Adult literacy	174	53	25.90	2	69.50	4.00	.60	40	3.35	223	4	2.75	177	51	20.40
22	Race relations	187	54	25.70	8	59.40	7.50	7.50	55	3.07	229	5	2.70	190	48	19.20
1	Recruitment & coordination of volunteers	185	55	24.90	1	69.70	2.70	2.70	24	3.42	230	1	2.82	188	48	19.20
2	Cooperation of community organization in effectively addressing needs	203	56	24.60	3	69.00	6.40	.00	31	3.39	232	2	2.79	204	31	12.40

Table 24. All Counties Combined: Leader Subgroup Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			lm			g Addres Patterns	sed			Ove	erall Me	an Ra	tings		knov	not w how issue
	Item from Needs Assessment			HL		нн	LL	LH	li	nportar	ice		v well is: ng addre		is b	essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
49	Child and adult obesity	28	1	78.60	56	17.90	.00	3.60	21	3.58	33	53	2.18	28	6	17.60
29	Understanding the cycle of poverty that occurs in successive generations	24	2	75.00	55	20.80	.00	4.20	14	3.63	32	56	1.96	25	9	26.50
4	Availability of weekend/evening hours for human services	17	3	64.70	54	29.40	5.90	.00	29	3.48	29	50	2.29	17	16	47.10
51	Affordable and accessible health care for low-to moderate-income individuals	24	4	62.50	50	37.50	.00	.00	11	3.68	34	54	2.13	24	10	29.40
3	Transitioning of ex-offenders into community and family	18	5	61.10	52	33.30	5.60	.00	36	3.41	29	55	2.11	18	16	47.10
8	Adult drug use	27	6	59.30	45	40.70	.00	.00	1	3.82	34	45	2.33	27	7	20.60
30	Teenage sex, pregnancy, and parenthood	27	6	59.30	45	40.70	.00	.00	18	3.59	32	40	2.37	27	6	17.60
50	Affordable and available care for mental health issues	26	8	57.70	42	42.30	.00	.00	12	3.67	30	52	2.19	26	8	23.50
28	Preparation and support for parenthood	23	9	56.50	48	39.10	4.30	.00	26	3.55	29	48	2.30	23	10	29.40
11	Underage use of drugs other than alcohol or tobacco	25	10	56.00	38	44.00	.00	.00	10	3.72	32	36	2.46	26	8	23.50
10	Underage alcohol use	27	11	55.60	35	44.40	.00	.00	4	3.76	33	40	2.37	27	6	17.60
52	Proper nutrition	22	12	54.50	34	45.50	.00	.00	32	3.45	31	50	2.29	24	10	29.40
5	Adult alcohol abuse	26	13	53.80	33	46.20	.00	.00	7	3.75	32	31	2.50	26	8	23.50
39	Preparation of the unemployed to enter the workforce	26	13	53.80	42	42.30	.00	3.80	18	3.59	32	46	2.31	26	8	23.50

				Table	24 (c	ontinued)									
			lm			g Addres Patterns	sed			Ove	erall Me	an Ra	itings		knov	not w how
	Item from Needs Assessment			HL		НН	LL	LH	lr	nportar	ıce		w well is: ng addre		is b	issue eing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	28	15	53.60	39	42.90	.00	3.60	13	3.65	34	42	2.36	28	6	17.60
27	Lack of child support payments	17	16	52.90	31	47.10	.00	.00	23	3.56	27	39	2.39	18	15	44.10
18	Affordable in-home care for the elderly	21	17	52.40	30	47.60	.00	.00	22	3.57	30	26	2.52	21	13	38.20
56	Cost of prescription medicine	21	17	52.40	39	42.90	4.80	.00	27	3.53	32	42	2.36	22	10	29.40
20	Affordable and accessible public transportation	32	19	50.00	47	40.60	6.30	3.10	36	3.41	34	46	2.31	32	2	5.90
26	Children with behavioral problems	22	19	50.00	44	40.90	.00	9.10	41	3.34	32	31	2.50	22	12	35.30
34	Parent involvement in child education	28	19	50.00	26	50.00	.00	.00	7	3.75	32	26	2.52	29	4	11.80
12	Driving under alcohol/drug influence	27	22	48.10	25	51.90	.00	.00	1	3.82	33	26	2.52	27	7	20.60
42	Preparation of young adults to enter the workforce	25	23	48.00	24	52.00	.00	.00	16	3.61	31	34	2.48	25	9	26.50
15	Families understanding of finances, budgeting, and tax credits	23	24	47.80	48	39.10	8.70	4.30	34	3.42	33	48	2.30	23	11	32.40
33	Child sexual abuse	23	24	47.80	23	52.20	.00	.00	9	3.74	31	34	2.48	23	11	32.40
31	Support for care givers of the elderly, mentally ill, or physically disabled	20	26	45.00	26	50.00	.00	5.00	40	3.35	31	38	2.45	20	14	41.20
6	Underage tobacco use	27	27	44.40	21	55.60	.00	.00	28	3.50	32	23	2.59	27	7	20.60
21	Language barriers for non-English speaking individuals	21	28	42.90	39	42.90	9.50	4.80	56	2.90	31	26	2.52	21	13	38.20
55	Preventative health care	24	29	41.70	26	50.00	4.20	4.20	31	3.47	32	42	2.36	25	8	23.50

						ontinued										
			lm			g Addres Patterns	sed			Ov	erall Me	an Ra	atings			not w how
	Item from Needs Assessment	N,		HL		НН	LL	LH	lr	mportar	nce		w well is ng addr		is k	issue peing ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
9	Adult tobacco use	27	30	40.70	35	44.40	3.70	11.1	47	3.18	34	24	2.56	27	7	20.60
23	Integration and appreciation of individuals from different cultures	28	31	39.30	32	46.40	7.10	7.10	47	3.18	33	36	2.46	28	6	17.60
38	Students completion of high school	31	32	38.70	18	58.10	.00	3.20	4	3.76	33	14	2.74	31	3	8.80
7	Drug and alcohol related crimes	27	33	37.00	13	63.00	.00	.00	4	3.76	33	24	2.56	27	6	17.60
53	Affordable dental care for low- to moderate-income individuals	25	34	36.00	12	64.00	.00	.00	29	3.48	31	26	2.52	25	9	26.50
24	Child physical/mental abuse and neglect	28	35	35.70	10	64.30	.00	.00	23	3.56	32	22	2.61	28	6	17.60
54	Sexually transmitted diseases/infections	17	36	35.30	16	58.80	5.90	.00	45	3.24	29	31	2.50	18	14	41.20
40	Children prepared to enter kindergarten	29	37	34.50	17	58.60	.00	6.90	34	3.42	31	19	2.66	29	5	14.70
13	Availability of food and shelter for the homeless	30	38	33.30	15	60.00	.00	6.70	18	3.59	32	9	2.80	30	3	8.80
36	Elderly abuse and neglect	18	38	33.30	35	44.40	5.60	16.7	54	3.08	25	18	2.67	18	16	47.10
2	Cooperation of community organization in effectively addressing needs	28	40	32.10	10	64.30	3.60	.00	14	3.63	32	13	2.75	28	6	17.60
48	Adult sexual victimization	18	41	27.80	52	33.30	.00	38.9	51	3.12	26	16	2.72	18	14	41.20
22	Race relations	29	42	27.60	22	55.20	6.90	10.3	50	3.13	32	21	2.62	29	5	14.70
14	Affordable child care	27	43	25.90	7	74.10	.00	.00	23	3.56	34	8	2.81	27	6	17.60
44	Domestic violence	24	44	25.00	8	70.80	.00	4.20	33	3.43	30	11	2.79	24	9	26.50
37	Number of skilled workers to fill available jobs	29	45	24.10	6	75.90	.00	.00	16	3.61	31	11	2.79	29	5	14.70

				Table	24 (c	ontinued)									
			In			g Addres Patterns	sed			Ove	erall Me	an Ra	itings			not w how
	Item from Needs Assessment			HL		нн	LL	LH	İ	nportar	nce		w well is: ng addre		is k	issue peing ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
32	Preparation and support for marriage and marital relations	26	46	23.10	19	57.70	.00	19.2	52	3.09	32	2	3.04	27	7	20.60
47	Youth violence and crime	22	47	22.70	26	50.00	.00	27.3	49	3.17	29	14	2.74	23	10	29.40
41	Adult literacy	18	48	22.20	14	61.10	11.10	5.60	44	3.30	30	17	2.68	19	15	44.10
16	Affordable and available care for the physically disabled	22	49	18.20	5	77.30	4.50	.00	38	3.39	31	7	2.86	22	11	32.40
46	Gang activity	23	50	17.40	51	34.80	13.00	34.8	55	2.93	28	20	2.65	23	10	29.40
45	Violent crime	29	51	17.20	9	69.00	.00	13.8	43	3.31	32	5	2.90	29	4	11.80
35	Lack of safe, constructive opportunities for youth	25	52	16.00	20	56.00	12.00	16.0	52	3.09	32	9	2.80	25	8	23.50
17	Availability of jobs for mentally and physically challenged individuals	26	53	15.40	3	80.80	.00	3.80	39	3.38	29	6	2.88	26	8	23.50
1	Recruitment & coordination of volunteers	25	54	12.00	2	88.00	.00	.00	3	3.77	30	3	3.00	25	9	26.50
25	Children with special mental and physical conditions	26	55	11.50	1	88.50	.00	.00	41	3.34	32	3	3.00	26	8	23.50
43	School violence	28	56	7.10	4	78.60	.00	14.3	46	3.22	32	1	3.07	28	5	14.70

Gibson County

Recent Census estimates indicate 33,396 residents live within Gibson County (US Census Bureau, Population Estimates Program, 2006). Specific county profile information is provided in Table 25.

Table 25. GIBSON COUNTY COM	NUNITY PROFILE
General Population Chara	
(US Census Bureau, Population Estimates Prog	
Total Population (2006)	33,396
Male	16,423
Female	16,973
Under 5	2,040
5 to 9	2,079
10 to 14	2,293
15 to 19	2,172
20 to 24	2,173
25 to 34	4,322
35 to 44	4,549
45 to 54	5,202
55 to 64	3,667
65 and over	4,899
Median Age	38.8
Race/Ethnicity	
One race	33,131
White	32,138
Black/African American	694
American Indiana/Alaskan	61
Native	
Asian	237
Native Hawaiian/Pacific Islander	1
Two or more races	265
Hispanic	304
Non-Hispanic	33,092
Households (2000)	
Total Households	12,847
Family Households	9,092
Married with Children	3,128
Married without Children	4,334
Single Parents	991
Other	639
Non-Family Households	3,755
Living Alone	3,302
Average Household Size	2.48

Table 25 (continued)	
Average Family Household Size	2.98
Housing Units	2.00
2006 Estimated Housing Units	15,037
2000 Housing Units	14,125
Occupied	12,847
Owner Occupied	10,014
Renter Occupied	2,833
Vacant	1,278
Household Income	1,210
Median Household Income (2005)	\$43,371
Median Household Income (2000 adj. for inflation)	\$44,728
Per capita personal income (2005)	\$29,649
Per capita personal income (1995 adj. for inflation)	\$23,914
Per capita personal income (1985 adj. for inflation)	\$23,124
Poverty Rate	4=0,1=1
Poverty Rate-all persons (2005)	9.2%
Poverty Rate-all persons (2000)	8.0%
Poverty Rate-children under 18 (2005)	11.2%
Poverty Rate-children under 18 (2000)	10.7%
Labor Force	1011 /0
Total Residents in Labor Force (2006)	17,584
Employed	16,802
Unemployed	782
February, 2008 Unemployment Rate	4.6%
Education	,0
School Enrollment (2006/2007)	5,241
Public High School Graduates	345
Continuing to Higher Education	294
4-year	189
2-year	83
Vocational/technical	22
Educational Attainment (2000)	
Total Population 25+	21,694
< 9 th grade	1,297
9 th to 12 th grade, no diploma	2,855
High School Graduate (included	8,892
equivalency)	3,332
Some College/No Degree	4,107
Associate Degree	1,848
Bachelor Degree	1,692
Graduate/Professional Degree	1,003
Household Income Distribution	.,000
Total (2000)	12,838
Below \$20,000	3,079
\$20,000 - \$39,999	3,661
\$40,000 - \$59,999	2,922
\$60,000 - \$74,999	1,391
\$75,000 - \$99,999	1,082
\$100,000 - \$149,999	560
\$150,000 - \$199,999	76
\$200,000 +	67
Ψ200,000 Τ	UI .

Gibson County Needs Assessment Survey Respondent Characteristics

Demographic characteristics of Gibson County survey respondents, as well as a comparison to Census data for the county are provided in Table 26. Of the respondents, over 60% were female, which is higher than the actual percentage of females in the population. In terms of age, the majority of respondents were in the 45 and over age brackets. Over 70% of survey respondents were married, which was somewhat higher than the actual population. The majority of respondents fell in the less than \$60,000 income bracket, and the overall distribution based on income was similar to the population. The vast majority of individuals indicated either high school or college grad as the highest level of education. Overall, college graduates were overrepresented in the sample. Finally, approximately 96% of respondents were white, 2.3% were black/African American, and 0.5% were Hispanic/Latino. Race/ethnicity demographics were similar to actual population figures.

Table 26. Gibson County Survey Demograp Category	Survey Sample	Gibson Census	% Difference
Gender	Cui roy Cumpio	Olipooli Gollogo	70 2 01 01100
Male	36.4%	49.2%	-12.8%
Female	63.6%	50.8%	12.8%
Age	00.070	00.070	12.070
18-24	1.4%	11.5%	-10.1%
25-34	8.2%	16.9%	-8.7%
35-44	15.9%	17.8%	-1.9%
45-54	29.1%	20.3%	8.8%
55-64	22.3%	14.4%	7.9%
65+	23.2%	19.1%	4.1%
Marital Status			
Married	73.9%	61.5%	12.4%
Single	9.0%	20.0%	-11.0%
Widowed	8.1%	8.2%	-0.1%
Divorced	9.0%	10.4%	-1.4%
Household Income			
Below \$20,000	18.2%	23.9%	-5.7%
\$20,000 - \$39,999	25.8%	28.6%	-2.8%
\$40,000 - \$59,999	21.2%	22.8%	-1.6%
\$60,000 - \$79,999	16.7%	9.6%	7.1%
\$80,000 - \$99,999	8.6%	9.6%	-1.0%
\$100,000 - \$149,999	7.1%	4.4%	2.7%
\$150,000 - \$199,999	1.0%	0.6%	0.4%
\$200,000 +	1.5%	0.5%	1.0%
Education			•
Grade school	1.8%	6.0%	-4.2%
Some high school	5.0%	13.2%	-8.2%
High school grad	44.7%	41.0%	3.7%
Vocational school grad	8.2%	27.4%	-19.2%
College grad	29.2%	7.8%	21.4%
Post graduate	11.0%	4.6%	6.4%
Race/Ethnicity			
White	96.4%	96.1%	0.3%
Black/African American	2.3%	2.1%	0.2%
Hispanic/Latino	0.5%	0.9%	-0.4%
Asian	0.0%	0.7%	-0.7%
American Indian/Alaskan Native	0.5%	0.2%	0.3%
Native Hawaiian/ Pacific Islander	0.0%	0.0%	0.0%
Other	0.5%		

Gibson County: All Subgroups Combined

Stakeholders' Perceptions of Needs and Strengths

A ranking of all priority needs and strengths is provided in Table 27 for all subgroups combined in Gibson County. The rankings reflect issues that have the highest rank based on the percentages of participants who fell within a response pattern. For priority needs, participants fell within the high in importance and low in being-addressed-well quadrant. For strengths, participants fell within the high in importance and high in being-addressed-well quadrant. This is a descriptive approach to examining these data. Ranking of the priority needs and strengths suggests that a higher percentage of respondents selected a particular issue compared to other issues within the respective quadrant. While no statistical inferences can be made distinguishing one issue from another, sorting the issues from the highest percentage to the lowest percentage allows readers to visually compare issues. To add further meaning, secondary data sources were used to discuss underlying themes and quantitatively ground community perceptions. For ease of presentation, only the five highest issues are presented.

Priority Needs: The five highest percentages of participants across all stakeholder groups falling in the high in importance and low in being-addressed- well quadrant (represents priority needs) were noted for the following community issues:

- Child and adult obesity
- Affordable dental care for low- to moderate-income individuals
- Cost of prescription medicine
- Understanding the cycle of poverty that occurs in successive generations
- Teenage sex, pregnancy, and parenthood

Strengths: The five highest percentages of participants across all stakeholder groups falling in the high in importance and high in being-addressed-well quadrant (represents strengths) were noted for the following community issues:

- Adult literacy
- Cooperation of community organizations in effectively addressing needs
- Children with special mental and physical conditions
- School violence
- Availability of jobs for mentally and physically challenged individuals

The priority needs reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and low in being-addressed-well quadrant. For example, the highest percentage of participants selected "Child and adult obesity." This means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, while disagreeing or strongly disagreeing that the issue is being-addressed-well within the community.

On the other hand, the strengths reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and high in being addressed well quadrant. For example, the highest percentage of participants selected "Adult literacy." This

means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, and also agreed or strongly agreed that the issue is being addressed well within the community.

Synthesis of Findings with Secondary Data Sources

Secondary data sources were examined as a supplement to the identified community needs and strengths from the stakeholder survey using a similar approach as the overall county analysis. The goal of the process was to incorporate information that would help to provide a more complete understanding of the issues included in the needs assessment survey. A review of secondary data related to most issues contained within the needs assessment survey is provided toward the end of this report. A synthesis of selected data sources specific to the higher ranked issues identified above follow.

Similar to the overall county findings, a common theme among the highest ranked items is poverty. Both poverty rates (US Census, 2000, 2005) and the number of individuals accessing food stamps (Indiana FSSA, Department of Family Resources, 2007) have increased in Gibson County. Poverty rates in Gibson County are higher than the Indiana rates, with approximately one-third of single parent households experiencing poverty (Indiana Prevention Resource Center, PREV-STAT County Profiles Data, 2006). An additional indicator of poverty status is the percentage of students eligible for free and reduced lunch. From 2002/2003 to 2007/2008, Gibson County witnessed an increase in the percentage free and reduced lunch eligibility (Indiana Department of Education, 2007). Overall, health care costs have risen in Indiana and across the nation (The Kaiser Family Foundation and Health Research and Educational Trust, Employer Health Benefits, 2007 Annual Survey). Further, the actual amounts individuals must pay for insurance premiums have increased. Additionally, while prescription costs place a burden on lower-income individuals (US Department of Health and Human Services, Medical Expenditure Panel Survey, 2005), Indiana residents do have some relief through the HoosierRx program (Indiana FSSA, Division of Family Resources, 2007).

As stated in the overall county descriptions, a related health concern is the issue of child and adult obesity. In 2007, approximately 26% of adults in the United States and approximately 27% of adults in Indiana were classified as obese. Since 2000, rates in both the U.S. and Indiana have increased. Obesity rates for metropolitan areas in Indiana and surrounding states are similar to the national average. As an indicator of the impact of obesity on other health factors, data show that the percentage of adults ever diagnosed with diabetes increased in both the U.S. and Indiana between 2000 and 2007. As of 2007, the Indiana rate was higher than the national rate. Indiana and national statistics have shown an increase over the years (CDC, Behavioral Risk Factor Surveillance Survey, 2007).

While issues of affordable dental care for low- to moderate-income individuals and teenage sex, pregnancy and parenthood were high ranked items within the overall county survey, they ranked slightly higher in Gibson County. National and state-wide data offer some insight into this finding. In the United States, the annual mean dental service expense for persons with an expense was \$579 in 2005, which was an increase of \$39 over the rate in 2003. Approximately half of the cost of dental services is paid out of pocket. The 2005 Indiana rate was similar to the

national rate and in the middle when compared to surrounding states. While the mean expense in the U.S. for low-income individuals was lower than the expense for high-income persons, those in lower economic brackets still had mean expenses from \$485 to \$519 each year (U.S. Department of Health and Human Services, Medical Expenditure Panel Survey, 2005). Finally, regarding the issue of teenage sex, pregnancy, and parenthood, data indicate that Gibson County actually experienced a decline in the teen birth rate between 2001 and 2005 (Indiana State Department of Health, 2005). Additionally, the Gibson County rate is lower than the rate for the state of Indiana.

Gibson County stakeholders reported similar strengths compared to all counties combined. Strengths were defined as stakeholder perceptions of issues in the community that are highly important and are perceived as being addressed well. Several key themes related to community strengths emerged. Gibson County stakeholders appear to have a positive perception of social service organizations working cooperatively to address community needs, as well as recruiting and coordinating volunteers. While little secondary data exists related to the cooperation of community organizations, phase two of the 2007 United Way Community Assessment examines this issue in depth. Preliminary findings suggest that community organizations in the region are working together to address community issues. The level of collaboration is further explored in the full report. In terms of volunteering, Indiana is approximately in the middle of all states in the percentage of individuals who volunteer, but 13th overall in average volunteer hours and 5th in retention of volunteers (Corporation for National and Community Service, Volunteering in America 2007).

Another theme appeared to be in the area of education and literacy, such as adult literacy and preparation for kindergarten. National surveys do suggest that adult literacy rates have slightly improved (US Department of Education, Institute of Education Sciences, National Center for Education Statistics, 1992 National Adult Literacy Survey and 2003 National Assessment of Adult Literacy). In Gibson County, the percentage of adults (25 and older) who have less than a high school degree is 19.1% (U.S. Census, 2000). While this percentage is less than the national average, it is still higher than the state average and all surrounding counties. Regarding preparation for kindergarten, significant local efforts have been placed toward addressing early school readiness. The Welborn Baptist Foundation has invested significant resources in the area of early literacy. Paths to Quality, which is a voluntary rating system for child care facilities developed by 4C of Southern Indiana recognizes programs that choose to go beyond minimum state licensing requirements through a four-level rating framework. At present, there are almost 130 programs in the area that participate in Paths to Quality, with 39 achieving level 3 and 19 achieving level 4, the highest possible rating in the system (4C of Southern Indiana, 2008). However, on a state level, Indiana does not have a state-sponsored pre-kindergarten program nor devotes state funding to pre-k initiatives (National Institute for Early Education Research (NIEER), 2007). Only twelve states in the country lack such state-level programs. All states that surround Indiana have state pre-k programs. In terms of publicly funded early childhood education, Indiana serves approximately 14,000 children per year through the Head Start Program. This number has increased slightly across the state and has remained stable in the five-county area over the past three years. With the lack of state funding for early childhood programs (NIEER, The State of Preschool 2007), many families are responsible for paying the full cost of child care for preschool children, which especially creates a burden for

many lower- to middle-income families. Regarding school violence, data show that the number of expulsions and out-of-school suspensions increased between 2003 and 2006, while suspensions overall remained fairly consistent. There is a difference in incident rates for the districts in Gibson County, with South Gibson having a lower rate than the other two public districts and one of the lowest in the five-county study area (Indiana Department of Education, 2007).

Finally, children with special mental and physical conditions and the availability of jobs for mentally and physically challenged individuals ranked slightly higher for Gibson County compared to all counties combined. Between the 2002/2003 and 2006/2007 school years, the percentage of special education students in Indiana public schools increased by 3.5%. All public schools in Gibson County also experienced an increase in special education students, and the percentage of special education students was higher than the statewide average during the 2006/2007 school year. Overall, Gibson County experienced an increase in the number of children served through First Steps (Indiana Family and Social Services Administration, 2006). As compared to the state in general, Gibson County shows a high utilization level of audiology and nursing services. Further, the Indiana FSSA, Vocational Rehabilitation Services reported in 2005 its highest number of job placements in two decades and served over 33,000 individuals across the state in the same year. Almost 6,000 were classified as rehabilitated, or successful in obtaining employment, which was the highest total in two decades. The job area where most positions were obtained included professional and technical, clerical and sales, and service.

Table 27. Gibson County: All Subgroups Combined Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			lm			g Addres Patterns	sed			Ove	erall Me	an Ra	itings		knov	Do not know how well issue	
	Item from Needs Assessment			HL		НН		LL LH		Importance			How well issue is being addressed			is being addressed	
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%	
49	Child and adult obesity	146	1	63.70	55	23.30	9.60	3.40	34	3.30	209	55	2.03	148	61	26.90	
53	Affordable dental care for low- to moderate- income individuals	139	2	61.90	56	23.00	12.20	2.90	34	3.30	205	56	1.96	143	68	30.00	
56	Cost of prescription medicine	157	3	59.20	54	27.40	9.60	3.80	17	3.41	212	54	2.06	161	50	22.00	
29	Understanding the cycle of poverty that occurs in successive generations	125	4	58.40	52	28.00	11.20	2.40	40	3.27	200	53	2.09	128	83	36.60	
30	Teenage sex, pregnancy, and parenthood	145	5	57.90	48	34.50	6.90	.70	10	3.46	211	50	2.19	147	67	29.50	
51	Affordable and accessible health care for low-to moderate-income individuals	154	6	56.50	51	32.50	8.40	2.60	22	3.37	210	52	2.13	155	58	25.60	
35	Lack of safe, constructive opportunities for youth	154	7	52.60	46	36.40	6.50	4.50	21	3.38	210	47	2.28	154	56	24.70	
15	Families understanding of finances, budgeting, and tax credits	143	8	52.40	49	34.30	13.30	.00	40	3.27	201	49	2.24	147	63	27.80	
50	Affordable and available care for mental health issues	136	9	50.70	45	39.00	7.40	2.90	27	3.34	203	46	2.29	139	71	31.30	
11	Underage use of drugs other than alcohol or tobacco	159	10	48.40	30	47.20	4.40	.00	2	3.60	210	36	2.41	164	48	21.10	
27	Lack of child support payments	120	11	48.30	42	40.80	6.70	4.20	17	3.41	192	39	2.37	122	82	36.10	
5	Adult alcohol abuse	157	12	46.50	28	49.00	1.90	2.50	14	3.44	212	27	2.48	161	50	22.00	
39	Preparation of the unemployed to enter the workforce	142	12	46.50	40	42.30	7.70	3.50	20	3.39	209	35	2.42	144	68	30.00	
28	Preparation and support for parenthood	134	14	46.30	38	43.30	9.70	.70	34	3.30	202	43	2.34	134	76	33.50	

				Table	27 (c	ontinued)									
			lm			g Addres Patterns	sed			Ov	erall Me	an Ra	itings			not w how
	Item from Needs Assessment	N.I		HL		нн	LL	LH	lı	mportai	nce		w well is ng addre		is b	issue eing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
55	Preventative health care	149	14	46.30	44	39.60	10.70	3.40	39	3.29	213	44	2.32	151	60	26.40
8	Adult drug use	159	16	45.90	27	49.10	4.40	.60	3	3.59	205	33	2.43	166	45	19.80
52	Proper nutrition	143	17	45.50	41	41.30	8.40	4.90	43	3.26	202	45	2.31	146	61	26.90
36	Elderly abuse and neglect	107	18	44.90	34	44.90	6.50	3.70	25	3.35	195	37	2.40	107	103	45.40
54	Sexually transmitted diseases/infections	116	19	44.80	39	43.10	7.80	4.30	34	3.30	201	39	2.37	117	93	41.00
10	Underage alcohol use	155	20	43.90	25	50.30	3.90	1.90	5	3.55	209	27	2.48	160	44	19.40
20	Affordable and accessible public transportation	146	21	43.80	47	34.90	13.70	7.50	52	3.08	196	50	2.19	148	55	24.20
42	Preparation of young adults to enter the workforce	140	22	43.60	31	47.10	6.40	2.90	25	3.35	211	27	2.48	143	65	28.60
24	Child physical/mental abuse and neglect	149	23	42.30	20	53.00	3.40	1.30	6	3.53	213	18	2.56	153	62	27.30
34	Parent involvement in child education	151	24	41.70	23	51.70	6.00	.70	9	3.48	217	24	2.51	152	59	26.00
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	146	25	40.40	36	44.50	11.60	3.40	46	3.24	201	42	2.35	150	62	27.30
13	Availability of food and shelter for the homeless	149	26	40.30	28	49.00	10.10	.70	43	3.26	206	31	2.45	151	61	26.90
33	Child sexual abuse	131	27	39.70	18	53.40	5.30	1.50	8	3.51	206	30	2.47	133	72	31.70
44	Domestic violence	139	28	39.60	17	54.00	5.80	.70	13	3.45	205	20	2.54	142	68	30.00
7	Drug and alcohol related crimes	162	29	39.50	16	56.20	1.90	2.50	1	3.61	211	18	2.56	169	43	18.90
3	Transitioning of ex-offenders into community and family	109	30	39.40	43	40.40	19.30	.90	52	3.08	172	48	2.25	114	96	42.30

				Table	27 (c	ontinued)									
			lm			g Addres Patterns	sed			Ov	erall Me	an Ra	itings		knov	not w how
	Item from Needs Assessment			HL		НН	LL	LH	lr	nportar	nce		w well is ng addre		is t	issue eing essed
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
18	Affordable in-home care for the elderly	136	31	39.00	34	44.90	11.00	5.10	30	3.33	204	37	2.40	140	72	31.70
6	Underage tobacco use	147	32	38.10	15	56.50	2.00	3.40	17	3.41	206	16	2.59	154	52	22.90
26	Children with behavioral problems	136	33	37.50	21	52.90	6.60	2.90	22	3.37	211	17	2.58	138	73	32.20
31	Support for care givers of the elderly, mentally ill, or physically disabled	133	34	36.80	24	51.10	11.30	.80	30	3.33	206	33	2.43	137	72	31.70
12	Driving under alcohol/drug influence	159	35	36.50	10	59.10	3.10	1.30	4	3.58	206	15	2.60	162	39	17.20
21	Language barriers for non-English speaking individuals	113	36	36.30	50	33.60	19.50	10.6	56	2.69	194	39	2.37	114	96	42.30
4	Availability of weekend/evening hours for human services	92	37	35.90	37	43.50	15.20	5.40	49	3.20	158	32	2.44	96	109	48.00
38	Students completion of high school	158	38	35.40	13	57.60	6.30	.60	7	3.52	214	13	2.64	160	47	20.70
47	Youth violence and crime	129	39	34.90	8	59.70	3.90	1.60	16	3.42	203	12	2.65	132	80	35.20
32	Preparation and support for marriage and marital relations	141	40	34.80	19	53.20	8.50	3.50	47	3.23	207	22	2.52	144	69	30.40
14	Affordable child care	140	41	32.90	22	52.10	10.00	5.00	34	3.30	198	24	2.51	141	67	29.50
48	Adult sexual victimization	105	42	32.40	11	59.00	5.70	2.90	27	3.34	194	10	2.68	111	98	43.20
37	Number of skilled workers to fill available jobs	137	43	32.10	14	56.90	8.00	2.90	33	3.31	207	11	2.67	138	73	32.20
16	Affordable and available care for the physically disabled	134	44	31.30	11	59.00	8.20	1.50	22	3.37	197	14	2.61	137	71	31.30
9	Adult tobacco use	145	45	30.30	26	49.70	12.40	7.60	51	3.10	209	26	2.50	150	63	27.80
22	Race relations	128	46	29.70	32	46.90	12.50	10.9	54	2.93	194	22	2.52	131	77	33.90

				Table	27 (c	ontinued)									
						Being Ad ise Patte				Ove	erall Me	an Ra	itings		knov	not w how
	Item from Needs Assessment	N		HL		НН	LL	LH	li	mportar	ıce		w well is ng addre		is b	issue peing ressed
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
1	Recruitment & coordination of volunteers	122	47	29.50	7	66.40	2.50	1.60	27	3.34	175	8	2.73	130	85	37.40
23	Integration and appreciation of individuals from different cultures	125	48	28.80	33	46.40	16.80	8.00	55	2.84	191	20	2.54	127	82	36.10
45	Violent crime	147	49	27.90	53	27.90	.70	2.70	10	3.46	208	4	2.75	150	63	27.80
46	Gang activity	96	50	26.00	9	59.40	7.30	7.30	49	3.20	183	8	2.73	105	105	46.30
25	Children with special mental and physical conditions	143	51	25.90	3	69.20	4.90	.00	15	3.43	212	4	2.75	146	67	29.50
43	School violence	151	52	24.50	4	68.20	4.60	2.60	10	3.46	204	3	2.81	159	57	25.10
17	Availability of jobs for mentally and physically challenged individuals	137	53	21.90	5	67.90	8.80	1.50	40	3.27	207	6	2.74	142	70	30.80
2	Cooperation of community organization in effectively addressing needs	126	54	20.60	2	70.60	8.70	.00	47	3.23	183	6	2.74	135	78	34.40
40	Children prepared to enter kindergarten	143	55	20.30	6	67.80	6.30	5.60	45	3.25	203	1	2.85	147	64	28.20
41	Adult literacy	142	56	19.00	1	71.10	7.00	2.80	30	3.33	208	2	2.84	146	66	29.10

Posey County

Recent Census estimates indicate 26,765 residents live within Posey County (US Census Bureau, Population Estimates Program, 2006). Specific county profile information is provided in Table 28.

Table 28. POSEY COUNTY COM	
General Population Chara	
(US Census Bureau, Population Estimates Programme (Canada)	
Total Population (2006)	26,765
Male	13,409
Female	13,356
Under 5	1,369
5 to 9	1,648
10 to 14	1,978
15 to 19	2,056
20 to 24	1,829
25 to 34	2,624
35 to 44	3,846
45 to 54	4,779
55 to 64	3,256
65 and over	3,380
Median Age	40.5
Race/Ethnicity	
One race	26.544
White	26,116
Black/African American	271
American Indiana/Alaskan Native	76
Asian	80
Native Hawaiian/Pacific Islander	1
Two or more races	221
Hispanic	159
Non-Hispanic	26,606
Households (2000)	
Total Households	10,205
Family Households	7,613
Married with Children	3,007
Married without Children	3,477
Single Parents	706
Other	423
Non-Family Households	2,592
Living Alone	2,251
Average Household Size	2.63
Average Family Household Size	3.08

Table 28 (continued)						
Housing Units						
2006 Estimated Housing Units	11,628					
2000 Housing Units	11,076					
Occupied	10,205					
Owner Occupied	8,345					
Renter Occupied	1,860					
Vacant	871					
Household Income						
Median Household Income (2005)	\$52,740					
Median Household Income (2000 adj. for inflation)	\$53,137					
Per capita personal income (2005)	\$32,045					
Per capita personal income (1995 adj. for inflation)	\$26,113					
Per capita personal income (1985 adj. for inflation)	\$24,810					
Poverty Rate						
Poverty Rate-all persons (2005)	9.1%					
Poverty Rate-all persons (2000)	6.9%					
Poverty Rate-children under 18 (2005)	11.2%					
Poverty Rate-children under 18 (2000)	8.5%					
Labor Force						
Total Residents in Labor Force (2006)	14,086					
Employed	13,475					
Unemployed	611					
February, 2008 Unemployment Rate	4.7%					
Education						
School Enrollment (2006/2007)	4,217					
Public High School Graduates	337					
Continuing to Higher Education	277					
4-year	192					
2-year	37					
Vocational/technical	48					
Educational Attainment (2000)						
Total Population 25+	17,671					
< 9 th grade	955					
9 th to 12 th grade, no diploma	1,793					
High School Graduate (included	7,393					
equivalency)	2.040					
Some College/No Degree	3,810					
Associate Degree	1,111					
Bachelor Degree	1,611					
Graduate/Professional Degree Household Income Distribution	998					
Total (2000)	10.222					
	10,223 2,044					
Below \$20,000 \$20,000 - \$39,999	2,515					
\$20,000 - \$59,999 \$40,000 - \$59,999	2,515					
\$40,000 - \$59,999 \$60,000 - \$74,999	2,175 1,429					
	1,429					
\$75,000 - \$99,999 \$100,000 - \$149,999	648					
\$100,000 - \$149,999 \$150,000 - \$199,999	85					
\$150,000 - \$199,999 \$200,000 +	72					
φ ∠υυ,υυυ +	12					

Posey County Needs Assessment Survey Respondent Characteristics

Demographic characteristics of Posey County survey respondents, as well as a comparison to Census data for the county are provided in Table 29. Of the respondents, approximately 74% were female, which is higher than the actual percentage of females in the population. In terms of age, the majority of respondents were in the 45 and over age brackets. Almost 70% of survey respondents were married, which was similar to the actual population. The majority of respondents fell in the less than \$60,000 income bracket, although almost 30% were between \$60,000 and \$99,999. The overall distribution based on income was similar to the population. The vast majority of individuals indicated either high school or college grad as the highest level of education. Almost 20% also indicated post graduate as the highest level of education. Overall, college graduates and post grads were overrepresented in the sample. Finally, approximately 97% of respondents were white, 1.1% were black/African American, and 0.0% were Hispanic/Latino. Race/ethnicity demographics were fairly similar to actual population figures.

Category	Survey Sample	Posey Census	mates Program, 200 % Difference		
Gender	our roy ourripro	i cooy comous	70 2 111 0 1 0 1 1 0 1		
Male	26.1%	50.1%	-24.0%		
Female	73.9%	49.9%	24.0%		
Age		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
18-24	1.6%	12.3%	-10.7%		
25-34	15.7%	12.9%	2.8%		
35-44	12.6%	18.8%	-6.2%		
45-54	26.2%	23.4%	2.8%		
55-64	21.5%	16.0%	5.5%		
65+	22.5%	16.6%	5.9%		
Marital Status					
Married	67.9%	65.7%	2.2%		
Single	10.7%	18.3%	-7.6%		
Widowed	8.6%	6.5%	2.1%		
Divorced	12.8%	9.4%	3.4%		
Household Income		•			
Below \$20,000	19.2%	20.0%	-0.8%		
\$20,000 - \$39,999	23.7%	24.7%	-1.0%		
\$40,000 - \$59,999	18.1%	21.3%	-3.2%		
\$60,000 - \$79,999	14.7%	13.2%	1.5%		
\$80,000 - \$99,999	14.7%	13.2%	1.5%		
\$100,000 - \$149,999	6.8%	6.3%	0.5%		
\$150,000 - \$199,999	1.1%	0.8%	0.3%		
\$200,000 +	1.7%	0.7%	1.0%		
Education		·			
Grade school	1.6%	5.4%	-3.8%		
Some high school	7.3%	10.1%	-2.8%		
High school grad	42.9%	41.8%	1.1%		
Vocational school grad	5.2%	27.9%	-22.7%		
College grad	23.0%	9.1%	13.9%		
Post graduate	19.9%	5.6%	14.3%		
Race/Ethnicity					
White	97.4%	97.8%	-0.4%		
Black/African American	1.1%	1.0%	0.1%		
Hispanic/Latino	0.0%	0.6%	-0.6%		
Asian	0.5%	0.3%	0.2%		
American Indian/Alaskan Native	1.1%	0.3%	0.8%		
Native Hawaiian/ Pacific Islander	0.0%	0.0%	0.0%		
Other	0.0%				

Posey County: All Subgroups Combined

Stakeholders' Perceptions of Needs and Strengths

A ranking of all priority needs and strengths is provided in Table 30 for all subgroups combined in Posey County. The rankings reflect issues that have the highest rank based on the percentages of participants who fell within a response pattern. For priority needs, participants fell within the high in importance and low in being-addressed-well quadrant. For strengths, participants fell within the high in importance and high in being-addressed-well quadrant. This is a descriptive approach to examining these data. Ranking of the priority needs and strengths suggests that a higher percentage of respondents selected a particular issue compared to other issues within the respective quadrant. While no statistical inferences can be made distinguishing one issue from another, sorting the issues from the highest percentage to the lowest percentage allows readers to visually compare issues. To add further meaning, secondary data sources were used to discuss underlying themes and quantitatively ground community perceptions. For ease of presentation, only the five highest issues are presented.

Priority Needs: The five highest percentages of participants across all stakeholder groups falling in the high in importance and low in being-addressed- well quadrant (represents priority needs) were noted for the following community issues:

- Understanding the cycle of poverty that occurs in successive generations
- Underage use of drugs other than alcohol or tobacco
- Affordable and accessible public transportation
- Families' understanding of finances, budgeting, and tax credits
- Adult drug use

Strengths: The five highest percentages of participants across all stakeholder groups falling in the high in importance and high in being-addressed-well quadrant (represents strengths) were noted for the following community issues:

- Children with special mental and physical conditions
- School violence
- Cooperation of community organization in effectively addressing needs
- Students' completion of high school
- Children prepared to enter kindergarten

The priority needs reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and low in being-addressed-well quadrant. For example, the highest percentage of participants selected "Understanding the cycle of poverty that occurs in successive generations." This means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, while disagreeing or strongly disagreeing that the issue is being addressed well within the community.

On the other hand, the strengths reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and high in being-addressed-well quadrant. For example, the highest percentage of participants selected "Children with special

mental and physical conditions." This means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, and also agreed or strongly agreed that the issue is being addressed well within the community.

Synthesis of Findings with Secondary Data Sources

Secondary data sources were examined as a supplement to the identified community needs and strengths from the stakeholder survey using a similar approach as the overall county analysis. As a supplement to the community needs and strengths identified through responses from stakeholder groups, secondary data sources were examined. The goal of the process was to incorporate information that would help to provide a more complete understanding of the issues included in the needs assessment survey. A review of secondary data related to most issues contained within the needs assessment survey is provided toward the end of this report. A synthesis of selected data sources specific to the higher ranked issues identified above follow.

Similar to the overall county findings, a common theme among the highest ranked items involved issues of poverty. Both poverty rates (US Census, 2000, 2005) and the number of individuals accessing food stamps (Indiana FSSA, Department of Family Resources, 2007) have increased in Posey County. Poverty rates for single parents in Posey County are higher than the Indiana rates, with approximately one-third of single parent households experiencing poverty (Indiana Prevention Resource Center, PREV-STAT County Profiles Data, 2006). An additional indicator of poverty status is the percentage of students eligible for free and reduced lunch. From 2002/2003 to 2007/2008, the two largest districts in Posey County witnessed an increase in the percentage of students who were eligible for free lunch (Indiana Department of Education, IDOE, 2007). Data from the 2006 American Community Survey of the U.S. Census indicate that the median earnings for individuals who take public transportation to work equals \$9,370 annually and that over 50% of those individuals are below 100% of the poverty level. This would indicate the need for affordable public transportation, which places the least burden on individuals who use these resources (U.S. Census, 2006).

Issues of underage use of drugs other than alcohol and tobacco and adult drug use ranked higher in Posey County compared to the overall county rank. Specific prevalence data for Posey County were not available. However, data from southwestern Indiana point to a decline in youth drug use (Indiana Prevention Resource Center, 2007). In the past five to seven years, marijuana use among youth has decreased in the United States, Indiana, and southwestern Indiana. However, in most grade levels for the period of 1999 to 2007, daily and monthly marijuana use in Indiana was slightly higher overall compared to the national rate. Comparing southwestern Indiana to Indiana as a state, results are mixed. While this region largely mirrors the state, a detailed analysis indicates there are slight differences depending on the grade level and degree of use. When adult drug use was examined, rates in Indiana remained fairly unchanged in the past years (SAMHSA, 2005). However, based on data from the Indiana Division of Mental Health and Addiction (DMHA), of those served by the DMHA, Posey County does have the highest rates of chronically addicted adults compared to area counties.

Posey County stakeholders reported similar strengths compared to all counties combined. Strengths were defined as stakeholder perceptions of issues in the community that are highly

important and are perceived as being addressed well. Several key themes related to community strengths emerged. Posey County stakeholders appear to have a positive perception of social service organizations working cooperatively to address community needs, as well as recruiting and coordinating volunteers. While little secondary data exists related to the cooperation of community organizations, phase two of the 2007 United Way Community Assessment examines this issue in depth. Preliminary findings suggest that community organizations in the region are working together to address community issues. The level of collaboration is further explored in the full report. In terms of volunteering, Indiana is approximately in the middle of all states in the percentage of individuals who volunteer, but 13th overall in average volunteer hours and 5th in retention of volunteers (Corporation for National and Community Service, Volunteering in America 2007).

As an indicator of school violence, overall data show that the number of expulsions and suspensions decreased between 2003 and 2006 (IDOE, 2007). There is some variability in incident rates for the districts in Posey County, with New Harmony having a lower rate than the other two public districts and one of the lowest in the five-county study area. Students' completion of high school also appeared as a strength. Data suggest that high school completion rates for individuals aged 25 and over have increased in Posey County (US Census, 2000). Additionally, the percent of students graduating in four years has increased slightly (IDOE, 2007).

Regarding preparation for kindergarten, significant local efforts have been placed toward addressing early school readiness. The Welborn Baptist Foundation has invested significant resources in the area of early literacy. Paths to Quality, which is a voluntary rating system for child care facilities developed by 4C of Southern Indiana recognizes programs that choose to go beyond minimum state licensing requirements through a four-level rating framework. At present, there are almost 130 programs in the area that participate in Paths to Quality, with 39 achieving level 3 and 19 achieving level 4, the highest possible rating in the system (4C of Southern Indiana). However, on a state level, Indiana does not have a state-sponsored prekindergarten program nor devotes state funding to pre-k initiatives (National Institute for Early Education Research (NIEER), 2007). Only twelve states in the country lack such state-level programs. All states that surround Indiana have state pre-k programs. In terms of publicly funded early childhood education, Indiana serves approximately 14,000 children per year through the Head Start Partnership Program. This number has increased slightly across the state and has remained stable in the five-county area over the past three years. With the lack of state funding for early childhood programs (NIEER, The State of Preschool 2007), many families are responsible for paying the full cost of child care for preschool children, which especially creates a burden for many lower- to middle-income families.

Finally, children with special mental and physical conditions ranked slightly higher for Posey County compared to all counties combined. Between the 2002/2003 and 2006/2007 school years, the percentage of special education students in Indiana public schools increased by 3.5%. All public schools in Posey County also experienced an increase in special education students, and the percentage of special education students was higher than the statewide average in 2006/2007.

Table 30. Posey County: All Subgroups Combined Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			Im			g Addres Patterns	sed			Ove	erall Me	an Ra	tings		knov	not v how
	Item from Needs Assessment	N		HL		нн	LL	LH	lı	mportar	nce		wwell iss		is b	issue eing essed
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
29	Understanding the cycle of poverty that occurs in successive generations	107	1	61.70	55	25.20	12.10	.90	28	3.35	162	54	2.05	109	70	36.10
11	Underage use of drugs other than alcohol or tobacco	143	2	60.10	48	35.70	4.20	.00	2	3.63	184	47	2.24	144	33	17.00
20	Affordable and accessible public transportation	131	3	58.00	56	23.70	14.50	3.80	52	3.11	166	56	1.94	139	36	18.60
15	Families understanding of finances, budgeting, and tax credits	120	4	57.50	51	33.30	7.50	1.70	17	3.38	169	45	2.25	123	56	28.90
8	Adult drug use	143	5	55.90	44	38.50	5.60	.00	3	3.60	184	42	2.28	145	31	16.00
53	Affordable dental care for low- to moderate-income individuals	130	6	53.80	54	28.50	16.90	.80	47	3.22	179	55	2.04	130	50	25.80
12	Driving under alcohol/drug influence	150	7	53.30	33	44.00	2.00	.70	1	3.64	180	34	2.34	151	22	11.30
30	Teenage sex, pregnancy, and parenthood	133	8	52.60	49	34.60	12.80	.00	15	3.40	182	53	2.15	136	43	22.20
51	Affordable and accessible health care for low-to moderate-income individuals	134	9	52.20	50	34.30	11.20	2.20	25	3.36	182	52	2.16	134	47	24.20
10	Underage alcohol use	143	10	51.70	34	43.40	4.20	.70	4	3.59	184	42	2.28	146	35	18.00
35	Lack of safe, constructive opportunities for youth	143	10	51.70	47	36.40	8.40	3.50	17	3.38	175	44	2.27	147	31	16.00
5	Adult alcohol abuse	138	12	50.70	36	42.80	5.10	1.40	8	3.49	187	32	2.37	139	40	20.60
26	Children with behavioral problems	129	13	48.80	37	42.60	7.80	.80	17	3.38	180	41	2.30	132	48	24.70
28	Preparation and support for parenthood	110	14	48.20	41	40.90	10.00	.90	24	3.37	158	47	2.24	115	67	34.50
56	Cost of prescription medicine	140	15	47.90	46	37.10	14.30	.70	31	3.34	181	51	2.17	143	39	20.10
18	Affordable in-home care for the elderly	115	16	47.80	37	42.60	7.80	1.70	9	3.47	169	33	2.36	122	60	30.90

	Table 30 (continued) Importance-Being Addressed Outstand Do not															
			lm	-		g Addres Patterns	sed			Ov	erall Me	an Ra	itings		knov	not w how
	Item from Needs Assessment			HL		НН	LL	LH	lr	mportar	nce		w well is ng addre		is b	issue eing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
39	Preparation of the unemployed to enter the workforce	126	17	47.60	40	41.30	9.50	1.60	35	3.32	178	39	2.33	129	53	27.30
50	Affordable and available care for mental health issues	116	18	47.40	42	39.70	11.20	1.70	35	3.32	169	45	2.25	118	61	31.40
6	Underage tobacco use	139	19	46.80	27	48.20	4.30	.70	9	3.47	184	26	2.43	140	37	19.10
49	Child and adult obesity	141	19	46.80	35	43.30	8.50	1.40	39	3.31	185	34	2.34	145	39	20.10
31	Support for care givers of the elderly, mentally ill, or physically disabled	102	21	45.10	43	39.20	14.70	1.00	25	3.36	172	47	2.24	105	69	35.60
7	Drug and alcohol related crimes	143	22	44.10	21	51.00	4.90	.00	4	3.59	185	23	2.44	145	35	18.00
3	Transitioning of ex-offenders into community and family	91	23	44.00	53	31.90	18.70	5.50	53	3.08	145	50	2.21	92	86	44.30
33	Child sexual abuse	114	24	42.10	26	49.10	7.90	.90	7	3.50	171	26	2.43	119	58	29.90
4	Availability of weekend/evening hours for human services	82	25	41.50	45	37.80	14.60	6.10	49	3.19	134	34	2.34	86	85	43.80
14	Affordable child care	136	26	41.20	23	50.00	6.60	2.20	17	3.38	173	30	2.40	141	40	20.60
16	Affordable and available care for the physically disabled	124	27	41.10	29	47.60	10.50	.80	28	3.35	169	31	2.39	128	53	27.30
27	Lack of child support payments	100	28	41.00	32	45.00	12.00	2.00	25	3.36	152	34	2.34	105	68	35.10
55	Preventative health care	133	29	40.60	31	45.90	13.50	.00	39	3.31	181	34	2.34	135	45	23.20
9	Adult tobacco use	134	30	39.60	39	41.80	9.70	9.00	50	3.18	185	28	2.41	135	46	23.70
42	Preparation of young adults to enter the workforce	132	31	39.40	17	53.00	6.10	1.50	17	3.38	177	20	2.50	136	45	23.20
32	Preparation and support for marriage and marital relations	117	32	38.50	28	47.90	9.40	4.30	47	3.22	169	23	2.44	122	60	30.90

Table 30 (continued) Importance-Being Addressed Outstall Mean Batings Do not																
			lm			g Addres Patterns	sed			Ov	erall Me	an Ra	tings		knov	w how
	Item from Needs Assessment			HL		нн	LL	LH	lı	nportar	ice		w well is ng addre		is b	issue eing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
52	Proper nutrition	132	33	37.90	20	51.50	9.80	.80	39	3.31	177	28	2.41	138	41	21.10
54	Sexually transmitted diseases/infections	104	34	37.50	30	47.10	15.40	.00	45	3.27	169	40	2.31	105	73	37.60
34	Parent involvement in child education	145	35	37.20	14	55.20	6.90	.70	6	3.53	182	13	2.61	151	29	14.90
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	133	36	36.80	18	51.90	7.50	3.80	35	3.32	179	21	2.48	136	44	22.70
24	Child physical/mental abuse and neglect	132	37	36.40	16	53.80	6.80	3.00	14	3.41	180	23	2.44	133	48	24.70
47	Youth violence and crime	139	38	36.00	25	49.60	8.60	5.80	44	3.29	177	18	2.52	142	42	21.60
37	Number of skilled workers to fill available jobs	128	39	35.20	12	58.60	3.90	2.30	39	3.31	171	17	2.56	131	52	26.80
36	Elderly abuse and neglect	92	40	31.50	23	50.00	13.00	5.40	31	3.34	158	21	2.48	94	83	42.80
17	Availability of jobs for mentally and physically challenged individuals	118	41	30.50	11	59.30	8.50	1.70	39	3.31	167	12	2.62	121	60	30.90
1	Recruitment & coordination of volunteers	120	42	29.20	6	66.70	4.20	.00	13	3.42	161	7	2.70	121	60	30.90
41	Adult literacy	117	43	29.10	9	60.70	7.70	2.60	31	3.34	170	13	2.61	120	63	32.50
44	Domestic violence	127	43	29.10	10	60.60	7.90	2.40	12	3.43	180	10	2.64	129	51	26.30
21	Language barriers for non-English speaking individuals	91	45	28.60	52	33.00	15.40	23.1	56	2.46	153	19	2.51	93	87	44.80
22	Race relations	103	46	27.20	22	50.50	8.70	13.6	54	2.96	159	13	2.61	104	69	35.60
13	Availability of food and shelter for the homeless	123	47	26.80	8	64.20	5.70	3.30	34	3.33	169	10	2.64	128	55	28.40
23	Integration and appreciation of individuals from different cultures	99	48	25.30	15	54.50	7.10	13.1	55	2.92	164	8	2.69	101	78	40.20

	Table 30 (continued)															
				-		Being Ad				Ove	erall Me	an Ra	itings		knov	not w how
	Item from Needs Assessment			HL		НН	LL	LH	lr	nportar	ice		w well is ng addre		is b	issue eing essed
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
38	Students completion of high school	144	49	25.00	4	70.10	3.50	1.40	11	3.46	184	2	2.76	146	34	17.50
48	Adult sexual victimization	104	49	25.00	13	55.80	11.50	7.70	46	3.25	152	16	2.60	106	73	37.60
45	Violent crime	147	51	23.10	6	66.70	5.40	4.80	17	3.38	184	5	2.74	149	32	16.50
40	Children prepared to enter kindergarten	144	52	22.20	4	70.10	4.20	3.50	35	3.32	178	3	2.75	147	35	18.00
2	Cooperation of community organization in effectively addressing needs	130	53	21.50	3	70.80	7.70	.00	28	3.35	165	3	2.75	132	49	25.30
46	Gang activity	106	54	20.80	18	51.90	11.30	16.0	51	3.13	158	9	2.65	110	73	37.60
25	Children with special mental and physical conditions	123	55	20.30	1	72.40	4.10	3.30	16	3.39	180	6	2.73	124	55	28.40
43	School violence	144	56	19.40	2	72.20	4.90	3.50	17	3.38	182	1	2.84	146	39	20.10

Spencer County

Recent Census estimates indicate 20,596 residents live within Spencer County (US Census Bureau, Population Estimates Program, 2006). Specific county profile information is provided in Table 31.

Table 31. SPENCER COUNTY COMMUNITY PROFILE									
General Population Characteristics (US Census Bureau, Population Estimates Program, 2006; US Census, 2000)									
Total Population (2006)	2006, US Census, 2000) 20,596								
Male	10,430								
Female	10,166								
Under 5	1,157								
5 to 9	1,137								
10 to 14	1,474								
15 to 19	1,421								
20 to 24	1,307								
25 to 34	2,405								
35 to 44	2,914								
45 to 54	3,227								
55 to 64	2,531								
65 and over	2,861								
	39.8								
Median Age Race/Ethnicity	39.6								
	20.407								
One race	20,487								
White	20,241								
Black/African American	146								
American Indiana/Alaskan Native	48								
Asian	50								
Native Hawaiian/Pacific Islander	2								
Two or more races	109								
Hispanic	461								
Non-Hispanic	20,135								
Households (2000)	= ===								
Total Households	7,569								
Family Households	5,755								
Married with Children	2,217								
Married without Children	2,706								
Single Parents	460								
Other	372								
Non-Family Households	1,814								
Living Alone	1,577								
Average Household Size	2.65								
Average Family Household Size	3.07								
Housing Units									
2006 Estimated Housing Units	9,029								
2000 Housing Units	8,333								
Occupied	7,569								

Table 31 (continued)	
Owner Occupied	6,299
Renter Occupied	1,270
Vacant	764
Household Income	
Median Household Income (2005)	\$45,208
Median Household Income (2000 adj. for inflation)	\$49,681
Per capita personal income (2005)	\$28,778
Per capita personal income (1995 adj. for inflation)	\$22,509
Per capita personal income (1985 adj. for inflation)	\$20,534
Poverty Rate	
Poverty Rate-all persons (2005)	8.4%
Poverty Rate-all persons (2000)	7.1%
Poverty Rate-children under 18 (2005)	10.9%
Poverty Rate-children under 18 (2000)	8.9%
Labor Force	
Total Residents in Labor Force (2006)	10,784
Employed	10,252
Unemployed	532
February, 2008 Unemployment Rate	5.2%
Education	
School Enrollment (2006/2007)	3,732
Public High School Graduates	288
Continuing to Higher Education	243
4-year	174
2-year	42
Vocational/technical	27
Educational Attainment (2000)	
Total Population 25+	13,491
< 9 th grade	740
9 th to 12 th grade, no diploma	1,801
High School Graduate (included	5,769
equivalency)	
Some College/No Degree	2,493
Associate Degree	937
Bachelor Degree	1,034
Graduate/Professional Degree	717
Household Income Distribution	
Total (2000)	7,557
Below \$20,000	1,450
\$20,000 - \$39,999	2,056
\$40,000 - \$59,999	1,877
\$60,000 - \$74,999	883
\$75,000 - \$99,999	798
\$100,000 - \$149,999	414
\$150,000 - \$199,999	34
\$200,000 +	45

Spencer County Needs Assessment Survey Respondent Characteristics

Demographic characteristics of Spencer County survey respondents, as well as a comparison to Census data for the county are provided in Table 32. Of the respondents, approximately 60% were female, which is higher than the actual percentage of females in the population. In terms of age, the largest group was in the 55-64 age bracket. Almost 70% of survey respondents were married, which was similar to the actual population. Single individuals were somewhat underrepresented, however. The majority of respondents fell in the less than \$60,000 income bracket. The overall distribution based on income was similar to the population. The vast majority of individuals indicated either high school, college grad, or post graduate as the highest level of education. Finally, 96% of respondents were white, I.0% were black/African American, and I.0% were Hispanic/Latino. Most race/ethnicity demographics were fairly similar to population figures. Hispanic respondents were slightly underrepresented, which is mentioned given Spencer County's higher percentage of individuals of Hispanic ethnicity.

Table 32. Spencer County Survey Demographics (US Census Bureau, Population Estimates, 2006)											
Category	Survey Sample	Spencer Census	% Difference								
Gender											
Male	41.1%	50.6%	-9.5%								
Female	58.9%	49.4%	9.5%								
Age		<u>'</u>									
18-24	3.0%	11.4%	-8.4%								
25-34	10.9%	15.3%	-4.4%								
35-44	16.8%	18.5%	-1.7%								
45-54	17.8%	20.5%	-2.7%								
55-64	31.7%	16.1%	15.6%								
65+	19.8%	18.2%	1.6%								
Marital Status		<u>'</u>									
Married	69.4%	65.2%	4.2%								
Single	9.2%	19.7%	-10.5%								
Widowed	11.2%	6.7%	4.5%								
Divorced	10.2%	8.4%	1.8%								
Household Income											
Below \$20,000	15.1%	19.1%	-4.0%								
\$20,000 - \$39,999	25.8%	27.2%	-1.4%								
\$40,000 - \$59,999	23.7%	24.8%	-1.1%								
\$60,000 - \$79,999	15.1%	11.2%	3.9%								
\$80,000 - \$99,999	8.6%	11.2%	-2.6%								
\$100,000 - \$149,999	9.7%	5.4%	4.3%								
\$150,000 - \$199,999	0.0%	0.4%	-0.4%								
\$200,000 +	2.2%	0.6%	1.6%								
Education		<u>'</u>									
Grade school	3.0%	5.5%	-2.5%								
Some high school	5.1%	13.3%	-8.2%								
High school grad	40.4%	42.8%	-2.4%								
Vocational school grad	13.1%	25.4%	-12.3%								
College grad	19.2%	7.7%	11.5%								
Post graduate	19.2%	5.3%	13.9%								
Race/Ethnicity											
White	96.0%	96.7%	-0.7%								
Black/African American	1.0%	0.7%	0.3%								
Hispanic/Latino	1.0%	2.2%	-1.2%								
Asian	0.0%	0.2%	-0.2%								
American Indian/Alaskan Native	0.0%	0.2%	-0.2%								
Native Hawaiian/ Pacific Islander	0.0%	0.0%	0.0%								
Other	2.0%										

Spencer County: All Subgroups Combined

Stakeholders' Perceptions of Needs and Strengths

A ranking of all priority needs and strengths is provided in Table 33 for all subgroups combined in Spencer County. The rankings reflect issues that have the highest rank based on the percentages of participants who fell within a response pattern. For priority needs, participants fell within the high in importance and low in being-addressed-well quadrant. For strengths, participants fell within the high in importance and high in being-addressed-well quadrant. This is a descriptive approach to examining these data. Ranking of the priority needs and strengths suggests that a higher percentage of respondents selected a particular issue compared to other issues within the respective quadrant. While no statistical inferences can be made distinguishing one issue from another, sorting the issues from the highest percentage to the lowest percentage allows readers to visually compare issues. To add further meaning, secondary data sources were used to discuss underlying themes and quantitatively ground community perceptions. For ease of presentation, only the five highest issues are presented.

Priority Needs: The five highest percentages of participants across all stakeholder groups falling in the high in importance and low in being-addressed- well quadrant (represents priority needs) were noted for the following community issues:

- Affordable dental care for low- to moderate-income individuals
- Understanding the cycle of poverty that occurs in successive generations
- Transitioning of ex-offenders into community and family
- Child and adult obesity
- Families' understanding of finances, budgeting, and tax credits

Strengths: The five highest percentages of participants across all stakeholder groups falling in the high in importance and high in being-addressed-well quadrant (represents strengths) were noted for the following community issues:

- Adult literacy
- Students' completion of high school
- School violence
- Children prepared to enter kindergarten
- Cooperation of community organizations in effectively addressing needs

The priority needs reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and low in being-addressed-well quadrant. For example, the highest percentage of participants selected "Affordable dental care for low- to moderate-income individuals." This means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, while disagreeing or strongly disagreeing that the issue is being addressed well within the community.

On the other hand, the strengths reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and high in being-addressed-well quadrant. For example, the highest percentage of participants selected "Adult literacy." This

means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, and also agreed or strongly agreed that the issue is being addressed well within the community.

Synthesis of Findings with Secondary Data Sources

Secondary data sources were examined as a supplement to the identified community needs and strengths from the stakeholder survey using a similar approach as the overall county analysis. The goal of the process was to incorporate information that would help to provide a more complete understanding of the issues included in the needs assessment survey. A review of secondary data related to most issues contained within the needs assessment survey is provided toward the end of this report. A synthesis of selected data sources specific to the higher ranked issues identified above follow.

Similar to the overall county findings, a common theme among the highest ranked items is poverty. Both poverty rates (US Census, 2000, 2005) and the number of individuals accessing food stamps (Indiana FSSA) have increased in Spencer County. Poverty rates for single parent households are particularly high, with over 20% of single mother households experiencing poverty (Indiana Prevention Resource Center, 2007). An additional indicator of poverty status is the percent of students eligible for free and reduced lunch. From 2002/2003 to 2007/2008, the two school districts in Spencer County witnessed an increase in the free and reduced lunch eligibility (Indiana Department of Education, 2007).

A secondary theme in the top priority needs in Spencer County is health care and health status. While county-level data are not available regarding affordable dental care, data show that the average low-income individual who has a dental cost has services valued at approximately \$500, with over half of that amount being paid out of pocket (US Department of Health and Human Services, Medical Expenditure Panel Survey, 2005). As stated in the overall county descriptions, a related health concern is the issue of child and adult obesity. In 2007, approximately 26% of adults in the United States and approximately 27% of adults in Indiana were classified as obese. Since 2000, rates in both the U.S. and Indiana have increased. Obesity rates for metropolitan areas in Indiana and surrounding states are similar to the national average. As an indicator of the impact of obesity on other health factors, data show that the percentage of adults ever diagnosed with diabetes increased in both the U.S. and Indiana between 2000 and 2007. As of 2007, the Indiana rate was higher than the national rate. Indiana and national statistics have shown an increase over the years (CDC, Behavioral Risk Factor Surveillance Survey, 2007).

Regarding transitioning of offenders into the community, little county specific data were found. Statewide, the number of inmates participating in the Indiana Department of Correction Community Transition Program increased every year from 2002 to 2007. Overall, 86 of 92 Indiana counties participate in the program. The percentage of offenders who successfully complete the program is approximately 82%. Additionally, over 9,000 offenders participate in Community Corrections Programs annually, a number that grew steadily between 2000 and 2004. Of particular concern to inmates being released into the community is mental illness. Estimates of 6 to 20% of individuals in various forms of incarceration have mental illness concerns (Indiana Department of Correction, Community Transition Program Database, 2007).

Spencer County stakeholders reported similar strengths compared to all counties combined. Strengths were defined as stakeholder perceptions of issues in the community that are highly important and are perceived as being addressed well. Spencer County stakeholders appear to have a positive perception of social service organizations working cooperatively to address community needs, as well as recruiting and coordinating volunteers. While little secondary data exists related to the cooperation of community organizations, phase two of the 2007 United Way Community Assessment examines this issue in depth. Preliminary findings suggest that community organizations in the region are working together to address community issues. The level of collaboration is further explored in the full report.

As an indicator of school violence, overall data show that the number of suspensions decreased between 2003 and 2006 (IDOE, 2007). There is some variability in incident rates for the districts in Spencer County, with North Spencer having a lower rate than the other district and the lowest in the five-county study area. Students' completion of high school also appeared as a strength. Data suggest that high school completion rates for individuals aged 25 and over have increased in Spencer County (US Census, 2000). Additionally, the percent of students graduating in four years has remained fairly consistent (IDOE, 2007). It should be noted that high school graduation rates for Spencer County districts have traditionally been quite high, with North Spencer having higher rates than most other area school corporations.

Another theme appeared to be in the area of education and literacy, such as adult literacy and preparation for kindergarten. National surveys do suggest that adult literacy rates have slightly improved (USDOE, Institute of Education Sciences, National Center for Education Statistics, 1992 National Adult Literacy Survey and 2003 National Assessment of Adult Literacy). In Spencer County, the percentage of adults (25 and older) who have less than a high school degree is 18.8% (U.S. Census, 2000). While this percentage is less than the national average, it is still higher than the state average and most surrounding counties. Regarding preparation for kindergarten, significant local efforts have been placed toward addressing early school readiness. The Welborn Baptist Foundation has invested significant resources in the area of early literacy. Additionally, within the last year, an Early Childhood Development Coalition has emerged to focus on school readiness within Spencer, Vanderburgh, and Warrick Counties. Paths to Quality, which is a voluntary rating system for child care facilities developed by 4C of Southern Indiana recognizes programs that choose to go beyond minimum state licensing requirements through a four-level rating framework. At present, there are almost 130 programs in the area that participate in Paths to Quality, with 39 achieving level 3 and 19 achieving level 4, the highest possible rating in the system (4C of Southern Indiana, 2008). However, on a state level, Indiana does not have a state-sponsored pre-kindergarten program nor devotes state funding to pre-k initiatives (National Institute for Early Education Research (NIEER), 2007). Only twelve states in the country lack such state-level programs. All states that surround Indiana have state pre-k programs. In terms of publicly funded early childhood education, Indiana serves approximately 14,000 children per year through the Head Start Partnership Program. This number has increased slightly across the state and has remained stable in the five-county area over the past three years. With the lack of state funding for early childhood programs (NIEER, The State of Preschool 2007), many families are responsible for paying the full cost of child care for preschool children, which especially creates a burden for many lower- to middle-income families.

Table 33. Spencer: All Subgroups Combined Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

						ing Add				Ove	erall I	Vlean R	atings			know how
	Item from Needs Assessment	N		HL		нн	LL	LH	lm	portan	се		well issi g addres			sue is being dressed
		IN	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
53	Affordable dental care for low- to moderate-income individuals	65	1	70.80	53	18.50	9.20	1.50	33	3.36	92	54	1.94	65	30	28.60
29	Understanding the cycle of poverty that occurs in successive generations	59	2	69.50	55	15.30	10.20	5.10	24	3.40	88	55	1.81	59	33	31.40
3	Transitioning of ex-offenders into community and family	49	3	69.40	54	16.30	10.20	4.10	53	3.11	81	45	2.08	51	42	40.00
49	Child and adult obesity	68	4	69.10	49	22.10	7.40	1.50	28	3.39	95	52	1.97	68	27	25.70
15	Families understanding of finances, budgeting, and tax credits	68	5	66.20	49	22.10	8.80	2.90	33	3.36	94	51	1.99	70	25	23.80
50	Affordable and available care for mental health issues	60	6	65.00	42	30.00	5.00	.00	20	3.41	86	53	1.95	61	32	30.50
51	Affordable and accessible health care for low-to moderate-income individuals	73	7	64.40	48	26.00	9.60	.00	20	3.41	95	48	2.03	73	22	21.00
56	Cost of prescription medicine	76	8	63.20	47	26.30	7.90	2.60	17	3.43	98	49	2.01	76	20	19.00
4	Availability of weekend/evening hours for human services	46	9	63.00	51	21.70	8.70	6.50	49	3.22	77	43	2.12	49	44	41.90
20	Affordable and accessible public transportation	74	10	62.20	56	13.50	23.00	1.40	51	3.16	94	56	1.76	76	17	16.20
8	Adult drug use	79	11	62.00	40	31.60	5.10	1.30	6	3.58	96	39	2.14	80	15	14.30
26	Children with behavioral problems	68	12	61.80	38	32.40	5.90	.00	15	3.45	93	40	2.13	70	24	22.90
11	Underage use of drugs other than alcohol or tobacco	74	13	60.80	34	33.80	5.40	.00	1	3.64	94	38	2.15	75	20	19.00
30	Teenage sex, pregnancy, and parenthood	71	14	60.60	41	31.00	7.00	1.40	10	3.51	97	45	2.08	72	22	21.00
35	Lack of safe, constructive opportunities for youth	70	15	60.00	45	27.10	10.00	2.90	24	3.40	96	49	2.01	70	23	21.90
10	Underage alcohol use	69	16	59.40	39	31.90	4.30	4.30	10	3.51	96	35	2.17	71	18	17.10

	Table 33 (continued) Importance-Being Addressed Outstall Mean Patients															
			lm			ing Add Pattern				Ove	erall I	Mean R	atings		Do no	know how
	Item from Needs Assessment			HL		нн	LL	LH	lm	portan	се		well issi g addres			sue is being dressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
31	Support for care givers of the elderly, mentally ill, or physically disabled	63	17	58.70	44	28.60	9.50	3.20	14	3.47	96	44	2.10	63	29	27.60
27	Lack of child support payments	60	18	58.30	32	35.00	5.00	1.70	8	3.52	86	40	2.13	60	34	32.40
55	Preventative health care	67	19	58.20	43	29.90	9.00	3.00	38	3.34	95	47	2.06	67	28	26.70
16	Affordable and available care for the physically disabled	64	20	57.80	46	26.60	10.90	4.70	20	3.41	95	40	2.13	64	30	28.60
28	Preparation and support for parenthood	61	21	57.40	35	32.80	6.60	3.30	42	3.30	91	34	2.18	62	32	30.50
7	Drug and alcohol related crimes	76	22	55.30	25	39.50	2.60	2.60	4	3.59	95	28	2.26	78	17	16.20
17	Availability of jobs for mentally and physically challenged individuals	55	23	54.50	37	32.70	9.10	3.60	28	3.39	82	36	2.16	57	39	37.10
6	Underage tobacco use	73	24	53.40	33	34.20	8.20	4.10	33	3.36	94	29	2.25	76	17	16.20
9	Adult tobacco use	74	25	52.70	52	18.90	14.90	13.5	50	3.17	93	36	2.16	77	20	19.00
36	Elderly abuse and neglect	49	26	51.00	31	36.70	10.20	2.00	28	3.39	82	31	2.22	49	43	41.00
5	Adult alcohol abuse	79	27	50.60	28	38.00	7.60	3.80	15	3.45	96	27	2.28	80	16	15.20
1	Recruitment & coordination of volunteers	52	28	50.00	27	38.50	7.70	3.80	39	3.33	82	24	2.33	54	40	38.10
52	Proper nutrition	68	28	50.00	30	36.80	10.30	2.90	42	3.30	90	30	2.23	69	26	24.80
54	Sexually transmitted diseases/infections	56	28	50.00	29	37.50	5.40	7.10	39	3.33	85	32	2.20	56	39	37.10
33	Child sexual abuse	55	31	49.10	18	45.50	3.60	1.80	2	3.61	87	26	2.30	57	32	30.50
24	Child physical/mental abuse and neglect	72	32	48.60	17	47.20	4.20	.00	8	3.52	94	22	2.35	72	23	21.90
18	Affordable in-home care for the elderly	62	33	48.40	26	38.70	9.70	3.20	12	3.48	90	33	2.19	62	30	28.60

	Table 33 (continued) Importance-Being Addressed Outstall Mean Betings															
			lm			ing Add				Ove	erall l	Mean R	atings			know how
	Item from Needs Assessment			HL		НН	LL	LH	lm	portan	се		well iss			sue is being dressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
12	Driving under alcohol/drug influence	79	34	48.10	15	48.10	2.50	1.30	3	3.60	95	19	2.41	80	15	14.30
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	71	35	47.90	22	43.70	7.00	1.40	17	3.43	93	24	2.33	72	23	21.90
44	Domestic violence	65	36	46.20	13	50.80	1.50	1.50	12	3.48	92	21	2.36	66	28	26.70
39	Preparation of the unemployed to enter the workforce	69	37	44.90	20	44.90	8.70	1.40	28	3.39	93	20	2.39	70	23	21.90
13	Availability of food and shelter for the homeless	67	38	44.80	23	41.80	9.00	4.50	46	3.28	93	23	2.34	67	28	26.70
14	Affordable child care	79	39	40.50	10	51.90	6.30	1.30	24	3.40	99	14	2.48	79	15	14.30
47	Youth violence and crime	64	40	39.10	19	45.30	9.40	6.30	42	3.30	90	18	2.44	66	28	26.70
34	Parent involvement in child education	75	41	38.70	8	58.70	2.70	.00	4	3.59	98	8	2.58	76	18	17.10
32	Preparation and support for marriage and marital relations	65	42	38.50	16	47.70	10.80	3.10	47	3.27	89	16	2.47	66	26	24.80
48	Adult sexual victimization	51	43	37.30	12	51.00	7.80	3.90	28	3.39	76	17	2.46	54	40	38.10
25	Children with special mental and physical conditions	68	44	36.80	9	55.90	5.90	1.50	24	3.40	93	12	2.51	69	27	25.70
37	Number of skilled workers to fill available jobs	71	45	36.60	14	50.70	7.00	5.60	36	3.35	89	10	2.56	73	21	20.00
23	Integration and appreciation of individuals from different cultures	63	46	34.90	21	44.40	12.70	7.90	55	2.94	89	14	2.48	63	33	31.40
42	Preparation of young adults to enter the workforce	76	47	32.90	6	60.50	2.60	3.90	17	3.43	95	6	2.61	76	18	17.10
46	Gang activity	55	48	32.70	23	41.80	9.10	16.4	52	3.12	84	13	2.50	56	38	36.20
21	Language barriers for non-English speaking individuals	61	49	31.10	35	32.80	13.10	23.0	56	2.68	91	11	2.52	61	34	32.40

	Table 33 (continued)															
				-		Being Ad		d		Ove	erall I	Mean R	atings			know how
	Item from Needs Assessment			HL		нн	LL	LH	lm	portan	се		well issu g addres:			dressed
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
45	Violent crime	64	50	26.60	7	59.40	6.30	7.80	45	3.29	92	7	2.59	66	26	24.80
43	School violence	72	51	26.40	3	66.70	2.80	4.20	36	3.35	92	4	2.67	73	23	21.90
22	Race relations	64	52	25.00	11	51.60	14.10	9.40	54	2.95	86	8	2.58	66	26	24.80
2	Cooperation of community organization in effectively addressing needs	56	53	21.40	5	64.30	12.50	1.80	48	3.26	86	5	2.62	58	34	32.40
38	Students completion of high school	75	54	21.30	2	72.00	5.30	1.30	7	3.53	95	2	2.84	76	16	15.20
40	Children prepared to enter kindergarten	67	55	20.90	4	65.70	9.00	4.50	39	3.33	91	3	2.80	69	24	22.90
41	Adult literacy	69	56	18.80	1	73.90	2.90	4.30	20	3.41	93	1	2.89	70	24	22.90

Vanderburgh County

Recent Census estimates indicate 173,356 residents live within Vanderburgh County (US Census Bureau, Population Estimates Program, 2006). Specific county profile information is provided in Table 34.

Table 34. VANDERBURGH COUNTY COMMUNIT	V DDOEII E
General Population Characteristics	I FROFILE
(US Census Bureau, Population Estimates Program, 2006;	US Census 2000)
Total Population (2006)	173,356
Male	82,697
Female	90,659
Under 5	11,593
5 to 9	10,830
10 to 14	10,775
15 to 19	12,497
20 to 24	13,465
25 to 34	21,754
35 to 44	23,056
45 to 54	25,933
55 to 64	18,109
65 and over	25,344
Median Age	37.6
Race/Ethnicity	07.0
One race	171,102
White	153,702
Black/African American	14,987
American Indiana/Alaskan Native	377
Asian	1,956
Native Hawaiian/Pacific Islander	80
Two or more races	2,254
Hispanic	2,023
Non-Hispanic	171,333
Households (2000)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Total Households	70,623
Family Households	44,442
Married with Children	13,788
Married without Children	19,775
Single Parents	6,456
Other	4,423
Non-Family Households	26,181
Living Alone	21,876
Average Household Size	2.33
Average Family Household Size	2.93

Table 34 (continued)	
Housing Units	
2006 Estimated Housing Units	81,088
2000 Housing Units	76,300
Occupied	70,623
Owner Occupied	47,184
Renter Occupied	23,439
Vacant	5,677
Household Income	
Median Household Income (2005)	\$41,464
Median Household Income (2000 adj. for inflation)	\$43,881
Per capita personal income (2005)	\$34,194
Per capita personal income (1995 adj. for inflation)	\$28,748
Per capita personal income (1985 adj. for inflation)	\$26,209
Poverty Rate	
Poverty Rate-all persons (2005)	13.4%
Poverty Rate-all persons (2000)	10.6%
Poverty Rate-children under 18 (2005)	18.4%
Poverty Rate-children under 18 (2000)	14.5%
Labor Force	
Total Residents in Labor Force (2006)	92,920
Employed	88,517
Unemployed	4,403
February, 2008 Unemployment Rate	4.8%
Education	
School Enrollment (2006/2007)	30,939
Public High School Graduates	1,776
Continuing to Higher Education	1,562
4-year	1,175
2-year	300
Vocational/technical	87
Educational Attainment (2000)	
Total Population 25+	112,178
< 9 th grade	5,998
9 th to 12 th grade, no diploma	12,937
High School Graduate (included equivalency)	40,026
Some College/No Degree	24,370
Associate Degree	7,173
Bachelor Degree	13,968
Graduate/Professional Degree	7,706
Household Income Distribution	,
Total (2000)	70,549
Below \$20,000	18,046
\$20,000 - \$39,999	19,931
\$40,000 - \$59,999	14,404
\$60,000 - \$74,999	6,970
\$75,000 - \$99,999	5,756
\$100,000 - \$149,999	3,392
\$150,000 - \$199,999	847
\$200,000 +	1,203

Vanderburgh County Needs Assessment Survey Respondent Characteristics

Demographic characteristics of Vanderburgh County survey respondents, as well as a comparison to Census data for the county are provided in Table 35. Of the respondents, approximately 71% were female, which is higher than the actual percentage of females in the population. In terms of age, the majority of respondents were in the 45 and over age brackets. Overall, marital status was fairly similar to the population. The majority of respondents fell in the less than \$60,000 income bracket. The overall distribution based on income was similar to the population. The vast majority of individuals indicated high school, college grad, or post grad as the highest level of education. College graduates and post grads represented over 50% of the sample. Finally, approximately 88% of respondents were white, 10% were black/African American, and 0.6% were Hispanic/Latino. Race/ethnicity demographics were fairly similar to population figures.

Table 35. Vanderburgh County Su Category	Survey Sample	Vanderburgh Census	% Difference
Gender	ourrey campie	variable daily in Contour	70 21110101100
Male	29.4%	47.7%	-18.3%
Female	70.6%	52.3%	18.3%
Age	7 0.0 70	02.070	10.070
18-24	3.2%	14.4%	-11.2%
25-34	15.2%	16.3%	-1.1%
35-44	15.9%	17.3%	-1.4%
45-54	22.9%	19.4%	3.5%
55-64	22.3%	13.6%	8.7%
65+	20.5%	19.0%	1.5%
Marital Status	20.070	10.070	1.070
Married	55.8%	53.9%	1.9%
Single	17.8%	25.5%	-7.7%
Widowed	9.9%	7.4%	2.5%
Divorced	16.5%	13.0%	3.5%
Household Income		19191	
Below \$20,000	23.2%	25.5%	-2.3%
\$20,000 - \$39,999	24.5%	28.3%	-3.8%
\$40,000 - \$59,999	16.2%	20.4%	-4.2%
\$60,000 - \$79,999	12.9%	9.1%	3.8%
\$80,000 - \$99,999	9.4%	9.1%	0.3%
\$100,000 - \$149,999	9.3%	4.8%	4.5%
\$150,000 - \$199,999	2.8%	1.2%	1.6%
\$200,000 +	1.8%	1.7%	0.1%
Education		1 11 11	******
Grade school	0.9%	5.3%	-4.4%
Some high school	7.4%	11.5%	-4.1%
High school grad	31.9%	35.7%	-3.8%
Vocational school grad	6.0%	28.1%	-22.15
College grad	32.7%	12.5%	20.2%
Post graduate	21.2%	6.9%	14.3%
Race/Ethnicity			
White	87.9%	88.8%	-0.9%
Black/African American	9.9%	8.8%	1.1%
Hispanic/Latino	0.6%	1.2%	-0.6%
Asian	0.1%	1.1%	-1.0%
American Indian/Alaskan Native	0.9%	0.2%	0.7%
Native Hawaiian/ Pacific Islander	0.1%	0.0%	0.1%
Other	0.6%		

Vanderburgh County: All Subgroups Combined

Stakeholders' Perceptions of Needs and Strengths

A ranking of all priority needs and strengths is provided in Table 36 for all subgroups combined in Vanderburgh County. The rankings reflect issues that have the highest rank based on the percentages of participants who fell within a response pattern. For priority needs, participants fell within the high in importance and low in being-addressed-well quadrant. For strengths, participants fell within the high in importance and high in being-addressed-well quadrant. This is a descriptive approach to examining these data. Ranking of the priority needs and strengths suggests that a higher percentage of respondents selected a particular issue compared to other issues within the respective quadrant. While no statistical inferences can be made distinguishing one issue from another, sorting the issues from the highest percentage to the lowest percentage allows readers to visually compare issues. To add further meaning, secondary data sources were used to discuss underlying themes and quantitatively ground community perceptions. For ease of presentation, only the five highest issues are presented.

Priority Needs: The five highest percentages of participants across all stakeholder groups falling in the high in importance and low in being-addressed- well quadrant (represents priority needs) were noted for the following community issues:

- Understanding the cycle of poverty that occurs in successive generations
- Families' understanding of finances, budgeting, and tax credits
- Affordable and accessible health care for low- to moderate-income individuals
- Cost of prescription medicine
- Affordable and available care for mental health issues

Strengths: The five highest percentages of participants across all stakeholder groups falling in the high in importance and high in being-addressed-well quadrant (represents strengths) were noted for the following community issues:

- Recruitment and coordination of volunteers
- Cooperation of community organizations in effectively addressing needs
- Adult literacy
- School violence
- Children prepared to enter kindergarten

The priority needs reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and low in being-addressed-well quadrant. For example, the highest percentage of participants selected "Understanding the cycle of poverty that occurs in successive generations." This means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, while disagreeing or strongly disagreeing that the issue is being addressed well within the community.

On the other hand, the strengths reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and high in being-addressed-well quadrant. For example, the highest percentage of participants selected "Recruitment and"

coordination of volunteers." This means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, and also agreed or strongly agreed that the issue is being addressed well within the community.

Synthesis of Findings with Secondary Data Sources

Secondary data sources were examined as a supplement to the identified community needs and strengths from the stakeholder survey using a similar approach as the overall county analysis. The goal of the process was to incorporate information that would help to provide a more complete understanding of the issues included in the needs assessment survey. A review of secondary data related to most issues contained within the needs assessment survey is provided toward the end of this report. A synthesis of selected data sources specific to the higher ranked issues identified above follow.

Similar to the overall county findings, a common theme among the highest ranked items is poverty and the lack of affordability of basic services. Both poverty rates (US Census, 2000, 2005) and the number of individuals accessing food stamps (Indiana FSSA, Division of Family Resources, 2007) have increased in Vanderburgh County. Poverty rates are higher than Indiana overall, with approximately one-third of single parent households experiencing poverty (Indiana Prevention Resource Center, PREV-STAT County Profiles Data, 2006). An additional indicator of poverty status is the percent of students eligible for free or reduced lunch. From 2002/2003 to 2007/2008, the public school corporation in Vanderburgh County (EVSC) witnessed an increase in the percentage of free or reduced lunch eligibility (Indiana Department of Education, 2007). A secondary theme in the top priority needs in Vanderburgh County is the affordability of health care. While county-level data are not available for specific health care services, data show that health care insurance premium costs have increased in the Midwestern states and the nation (The Kaiser Family Foundation and Health Research and Educational Trust, Employer Health Benefits, 2007 Annual Survey). Additionally, a larger percentage of individuals in Indiana failed to receive health care or prescription drugs due to cost (CDC, National Health Interview Survey, 2005).

Strengths were defined as stakeholder perceptions of issues in the community that are highly important and are perceived as being addressed well. The strengths reported by Vanderburgh County were identical to those reported in the overall county rank. Several key themes emerged. First, stakeholders appear to have a positive perception of social service organizations working cooperatively to address community needs, as well as recruiting and coordinating volunteers. While little secondary data exists related to the cooperation of community organizations, phase two of the 2007 United Way Community Assessment examines this issue in depth. Preliminary findings suggest that community organizations in the region are working together to address community issues. The level of collaboration is further explored in the full report. In terms of volunteering, Indiana is approximately in the middle of all states in the percentage of individuals who volunteer, but 13th overall in average volunteer hours and 5th in retention of volunteers (Corporation for National and Community Service, Volunteering in America 2007).

Another theme appeared to be in the area of education and literacy, such as adult literacy and preparation for kindergarten. National surveys do suggest that adult literacy rates have slightly improved (US Department of Education, Institute of Education Sciences, National Center for Education Statistics, 1992 National Adult Literacy Survey and 2003 National Assessment of Adult Literacy). For Vanderburgh County, the percentage of adults (25 and older) who have less than a high school degree has decreased from 1990 to 2000 (U.S. Census, 2000). The percentage in 2000, 16.9%, is less than the national and state average and in the middle of surrounding counties. Regarding preparation for kindergarten, significant efforts have been placed toward addressing early school readiness locally. The Welborn Baptist Foundation has invested significant resources in the area of early literacy. Additionally, within the last year, an Early Childhood Development Coalition has emerged to focus on school readiness within Spencer, Vanderburgh, and Warrick Counties. Paths to Quality, which is a voluntary rating system for child care facilities developed by 4C of Southern Indiana recognizes programs that choose to go beyond minimum state licensing requirements through a four-level rating framework. At present, there are almost 130 programs in the area that participate in Paths to Quality, with 39 achieving level 3 and 19 achieving level 4, the highest possible rating in the system (4C of Southern Indiana). However, on a state level, Indiana does not have a statesponsored pre-kindergarten program nor devotes state funding to pre-k initiatives (National Institute for Early Education Research (NIEER), 2007). Only twelve states in the country lack such state-level programs. All states that surround Indiana have state pre-k programs. In terms of publicly funded early childhood education, Indiana serves approximately 14,000 children per year through the Head Start Partnership Program. This number has increased slightly across the state and has remained stable in the five-county area over the past three years. With the lack of state funding for early childhood programs (NIEER, The State of Preschool 2007), many families are responsible for paying the full cost of child care for preschool children, which especially creates a burden for many lower- to middle-income families.

Finally, issues identified as strengths were in the domain of violence and crime. While findings indicated that these areas were being addressed well, secondary data indicators related to these areas appear mixed. For school violence, the incident rates are higher than the state for the largest school system (EVSC) in the county (Indiana Department of Education, 2007). A review of violent crime statistics shows a significant difference in all violent crimes per 100,000 population in the United States when comparing 1990 to the years after 2001. While the rate in recent years has been lower than the 1990s, data indicate that violent crime has slightly increased after experiencing a three-year decline between 2002 and 2004. In Indiana, the violent crime rate declined each year between 2002 and 2006. Violent crime rates reported by the Evansville Police Department have fluctuated over the past several years and have shown a three-year climb between 2004 and 2006. The 2006 rate is higher than the state of Indiana and near the U.S. rate. Comparatively, violent crime reported by the Vanderburgh County Sheriff's Department shows a much lower rate in 2006 than the U.S., Indiana, and the city of Evansville (FBI, Uniform Crime Reports, 2006; State of the Cities Data System, 2006).

Table 36. Vanderburgh County: All Subgroups Combined Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			In			g Addres Patterns	sed			Ove	erall Me	an Ra	tings		knov	not v how
	Item from Needs Assessment	N		HL		НН	LL	LH	h	mportar	nce		well is		is b	issue eing essed
			Rank	%	Rank	%	%	%	Rank	Mea	N	Rank	Mea	N	N	%
29	Understanding the cycle of poverty that occurs in successive generations	590	1	62.40	56	28.10	7.80	1.70	34	3.42	816	56	2.10	601	231	25.50
15	Families understanding of finances, budgeting, and tax credits	596	2	59.60	53	30.50	8.60	1.30	32	3.43	839	50	2.19	612	231	25.50
51	Affordable and accessible health care for low-to moderate-income individuals	676	3	59.20	52	33.10	6.50	1.20	18	3.48	857	55	2.13	688	150	16.60
56	Cost of prescription medicine	657	4	57.10	51	35.80	5.60	1.50	12	3.51	847	54	2.16	669	160	17.70
50	Affordable and available care for mental health issues	597	5	57.00	49	36.00	6.20	.80	23	3.47	825	52	2.17	611	224	24.80
4	Availability of weekend/evening hours for human services	422	6	56.40	54	29.90	11.40	2.40	50	3.29	649	52	2.17	430	369	40.80
18	Affordable in-home care for the elderly	540	7	56.30	50	35.90	6.90	.90	13	3.50	808	48	2.24	554	282	31.20
49	Child and adult obesity	652	8	56.10	48	36.20	5.10	2.60	37	3.41	853	47	2.26	664	172	19.00
31	Support for care givers of the elderly, mentally ill, or physically disabled	550	9	54.50	47	38.00	6.40	1.10	25	3.46	818	48	2.24	557	275	30.40
30	Teenage sex, pregnancy, and parenthood	621	10	53.90	43	40.60	4.80	.60	16	3.49	843	44	2.29	631	200	22.10
27	Lack of child support payments	517	11	53.60	46	38.50	5.40	2.50	18	3.48	763	46	2.27	527	279	30.80
26	Children with behavioral problems	601	12	53.40	45	39.80	5.20	1.70	18	3.48	830	43	2.32	603	228	25.20
3	Transitioning of ex-offenders into community and family	431	13	50.80	55	28.30	16.70	4.20	52	3.21	677	50	2.19	449	381	42.10
53	Affordable dental care for low- to moderate-income individuals	627	14	50.20	40	42.40	5.40	1.90	32	3.43	838	44	2.29	639	198	21.90
14	Affordable child care	607	15	50.10	38	43.80	4.90	1.20	9	3.54	818	38	2.37	627	205	22.70

						ontinued										
			lr	-		ng Addres Patterns	ssed			Ov	erall Me	an Ra	itings			not w how
	Item from Needs Assessment	N		HL		нн	LL	LH	lr	mportar	nce		w well is		is t	issue peing ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
33	Child sexual abuse	581	16	49.90	34	45.40	4.00	.70	1	3.63	823	36	2.41	592	224	24.80
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	649	17	49.80	40	42.40	6.20	1.70	18	3.48	855	41	2.34	662	177	19.60
55	Preventative health care	635	18	49.40	37	45.00	4.30	1.30	25	3.46	841	42	2.33	649	186	20.60
11	Underage use of drugs other than alcohol or tobacco	634	19	48.70	33	45.70	4.70	.80	5	3.59	844	34	2.44	648	196	21.70
34	Parent involvement in child education	641	20	48.50	32	47.40	3.40	.60	7	3.57	845	32	2.45	647	182	20.10
28	Preparation and support for parenthood	576	21	48.30	38	43.80	6.10	1.90	37	3.41	817	40	2.36	584	245	27.10
36	Elderly abuse and neglect	506	22	48.20	42	41.70	7.30	2.80	34	3.42	792	38	2.37	517	314	34.70
39	Preparation of the unemployed to enter the workforce	588	23	47.60	34	45.40	5.80	1.20	30	3.44	814	35	2.42	600	239	26.40
24	Child physical/mental abuse and neglect	631	24	45.30	24	50.90	2.50	1.30	2	3.62	853	25	2.52	639	200	22.10
8	Adult drug use	631	25	45.00	28	49.60	4.10	1.30	7	3.57	833	30	2.48	649	179	19.80
10	Underage alcohol use	643	26	44.20	31	49.10	4.80	1.90	9	3.54	830	26	2.51	657	169	18.70
16	Affordable and available care for the physically disabled	532	26	44.20	30	49.20	5.80	.80	28	3.45	803	36	2.41	544	289	31.90
7	Drug and alcohol related crimes	660	28	43.20	22	52.00	3.30	1.50	4	3.61	856	21	2.54	667	172	19.00
47	Youth violence and crime	576	29	42.90	26	50.50	5.00	1.60	23	3.47	829	31	2.46	591	235	26.00
46	Gang activity	519	30	41.80	36	45.10	7.10	6.00	48	3.35	786	32	2.45	530	292	32.30
42	Preparation of young adults to enter the workforce	597	31	41.70	20	52.80	4.00	1.50	28	3.45	819	23	2.53	615	217	24.00

						ontinued										
			Ir			ng Addres Patterns	ssed			Ov	erall Me	an Ra	itings			not w how
	Item from Needs Assessment			HL		НН	LL	LH	lr	nportar	nce		w well is ng addre		is b	issue peing ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
52	Proper nutrition	629	31	41.70	27	50.10	5.60	2.70	45	3.36	832	27	2.49	636	186	20.60
35	Lack of safe, constructive opportunities for youth	624	33	40.70	29	49.50	5.60	4.20	34	3.42	813	27	2.49	639	191	21.10
20	Affordable and accessible public transportation	646	34	39.50	21	52.50	5.90	2.20	30	3.44	813	27	2.49	661	146	16.10
38	Students completion of high school	635	35	38.70	13	57.00	2.50	1.70	6	3.58	828	14	2.59	649	186	20.60
37	Number of skilled workers to fill available jobs	606	36	37.10	15	55.90	3.60	3.30	43	3.39	811	14	2.59	614	216	23.90
6	Underage tobacco use	619	37	36.80	19	53.20	6.10	3.90	41	3.40	816	17	2.58	640	182	20.10
48	Adult sexual victimization	486	37	36.80	17	55.10	3.90	4.10	37	3.41	761	20	2.56	505	304	33.60
5	Adult alcohol abuse	665	39	36.70	12	57.10	4.40	1.80	18	3.48	860	11	2.61	679	171	18.90
44	Domestic violence	611	40	36.50	11	58.30	3.80	1.50	13	3.50	832	12	2.60	624	198	21.90
13	Availability of food and shelter for the homeless	706	41	36.40	10	59.10	3.10	1.40	11	3.53	859	7	2.66	720	116	12.80
12	Driving under alcohol/drug influence	660	42	35.80	9	59.70	3.00	1.50	2	3.62	802	9	2.65	679	127	14.00
21	Language barriers for non-English speaking individuals	525	43	35.20	44	40.40	9.90	14.5	56	2.89	768	23	2.53	541	297	32.80
17	Availability of jobs for mentally and physically challenged individuals	560	44	35.00	16	55.40	7.00	2.70	44	3.37	809	21	2.54	578	261	28.80
54	Sexually transmitted diseases/infections	532	45	34.60	14	56.80	5.50	3.20	45	3.36	804	14	2.59	539	292	32.30
23	Integration and appreciation of individuals from different cultures	587	46	33.40	25	50.80	8.30	7.50	55	3.10	786	19	2.57	604	232	25.60
32	Preparation and support for marriage and marital relations	576	47	33.20	18	54.00	6.60	6.30	51	3.24	808	17	2.58	585	244	27.00

				Table	36 (c	ontinued))									
						Being Ad ise Pattei				Ove	erall Me	an Ra	tings		knov	not v how
	Item from Needs Assessment	N		HL		НН	LL	LH	lr	nportar	ice		wwell is		is b	issue eing essed
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
25	Children with special mental and physical conditions	588	48	32.70	7	62.80	3.10	1.50	13	3.50	816	9	2.65	596	229	25.30
9	Adult tobacco use	640	49	30.80	23	51.70	9.80	7.70	54	3.15	839	12	2.60	652	185	20.40
45	Violent crime	619	50	30.40	6	64.10	3.60	1.90	16	3.49	838	6	2.67	634	191	21.10
43	School violence	387	51	28.70	4	65.40	3.40	2.60	25	3.46	486	2	2.76	381	91	10.10
41	Adult literacy	539	52	28.60	3	65.50	4.30	1.70	41	3.40	797	4	2.72	550	286	31.60
22	Race relations	601	53	27.60	8	60.10	7.20	5.20	53	3.19	776	7	2.66	611	204	22.50
40	Children prepared to enter kindergarten	570	54	27.00	5	64.20	3.50	5.30	48	3.35	784	4	2.72	590	247	27.30
1	Recruitment & coordination of volunteers	567	55	25.00	1	71.10	2.10	1.80	37	3.41	770	1	2.82	584	257	28.40
2	Cooperation of community organization in effectively addressing needs	610	56	23.10	2	67.90	7.90	1.10	45	3.36	783	3	2.75	621	210	23.20

Vanderburgh County Ranking Comparisons by Respondent Group

Table 37 shows the Vanderburgh ranking of needs assessment issues based on the importance/being-addressed-well response patterns. The rankings are provided for all subgroups combined, and individually for the leader, provider, client, and community subgroups. As indicated in the all-county ranking, a number of issues related to poverty and affordability of medical services were identified by community members, as priority needs. In general, the individual subgroups also noted many of the same issues as needs. Given that the community-at-large comprised a large portion of all respondents, the priority needs identified by that group were quite similar to those identified by all stakeholders combined. The top community strengths were also quite similar for the different stakeholder groups, with cooperation of community organizations and recruitment/coordination of volunteers rising to the top of the strength areas. For a detailed breakdown of rankings by subgroup, refer to Tables 38 through 40.

	Table 37. Vanderburgh County Ranking Comparisons by Respondent Gro Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is</u> *Rankings are not provided for the leader subgroup due to small sample size	being	address	<u>ed</u>)		
	, , , , , , , , , , , , , , , , , , , ,	Rar	nked by I dressed F			
	Item from Needs Assessment	ΗΑ	*Leader	Provider	Client	Com.
29	Understanding the cycle of poverty that occurs in successive generations	1	N/A	14	2	1
15	Families understanding of finances, budgeting, and tax credits	2	N/A	4	11	2
51	Affordable and accessible health care for low- to moderate-income individuals	3	N/A	1	1	7
56	Cost of prescription medicine	4	N/A	3	10	6
50	Affordable and available care for mental health issues	5	N/A	2	8	11
4	Availability of weekend/evening hours for human services	6	N/A	8	5	8
18	Affordable in-home care for the elderly	7	N/A	15	3	3
49	Child and adult obesity	8	N/A	9	21	4
31	Support for care givers of the elderly, mentally ill, or physically disabled	9	N/A	10	14	5
30	Teenage sex, pregnancy, and parenthood	10	N/A	17	7	9
27	Lack of child support payments	11	N/A	6	20	10
26	Children with behavioral problems	12	N/A	6	8	16
3	Transitioning of ex-offenders into community and family	13	N/A	10	4	21
53	Affordable dental care for low- to moderate-income individuals	14	N/A	21	12	12
14	Affordable child care	15	N/A	5	16	20
33	Child sexual abuse	16	N/A	24	14	13
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate	17	N/A	12	6	23
	clothing, food, housing, and legal services)					
55	Preventative health care	18	N/A	15	39	14

	Table 37 (continued)					
		All	*Lead	Prov	Client	Com
11	Underage use of drugs other than alcohol or tobacco	19	N/A	25	19	17
34	Parent involvement in child education	20	N/A	22	23	19
28	Preparation and support for parenthood	21	N/A	19	37	18
36	Elderly abuse and neglect	22	N/A	26	30	15
39	Preparation of the unemployed to enter the workforce	23	N/A	20	13	24
24	Child physical/mental abuse and neglect	24	N/A	27	17	25
8	Adult drug use	25	N/A	27	25	26
10	Underage alcohol use	26	N/A	30	29	27
16	Affordable and available care for the physically disabled	26	N/A	12	33	33
7	Drug and alcohol related crimes	28	N/A	35	24	27
47	Youth violence and crime	29	N/A	36	22	27
46	Gang activity	30	N/A	46	38	22
42	Preparation of young adults to enter the workforce	31	N/A	32	42	32
52	Proper nutrition	31	N/A	29	53	31
35	Lack of safe, constructive opportunities for youth	33	N/A	36	41	30
20	Affordable and accessible public transportation	34	N/A	22	30	41
38	Students completion of high school	35	N/A	18	35	43
37	Number of skilled workers to fill available jobs	36	N/A	44	36	34
6	Underage tobacco use	37	N/A	41	48	36
48	Adult sexual victimization	37	N/A	45	40	36
5	Adult alcohol abuse	39	N/A	39	47	39
44	Domestic violence	40	N/A	43	42	35
13	Availability of food and shelter for the homeless	41	N/A	33	26	43
12	Driving under alcohol/drug influence	42	N/A	38	49	42
21	Language barriers for non-English speaking individuals	43	N/A	31	44	46
17	Availability of jobs for mentally and physically challenged individuals	44	N/A	34	18	45
54	Sexually transmitted diseases/infections	45	N/A	47	50	38
23	Integration and appreciation of individuals from different cultures	46	N/A	42	28	49
32	Preparation and support for marriage and marital relations	47	N/A	51	45	40
25	Children with special mental and physical conditions	48	N/A	39	33	50
9	Adult tobacco use	49	N/A	48	54	47
45	Violent crime	50	N/A	49	30	51
43	School violence	51	N/A	52	46	52
41	Adult literacy	52	N/A	55	51	48
22	Race relations	53	N/A	56	27	54
40	Children prepared to enter kindergarten	54	N/A	50	55	53
1	Recruitment & coordination of volunteers	55	N/A	54	52	55
2	Cooperation of community organization in effectively addressing needs	56	N/A	53	56	56

Table 38. Vanderburgh County: Community At-Large Subgroup Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			lm			g Addres Patterns	sed			Ove	erall Me	an Ra	tings		knov	not w how issue
	Item from Needs Assessment			HL		НН	LL	LH	lı	nportar	ice		v well is: ng addre			essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
29	Understanding the cycle of poverty that occurs in successive generations	350	1	64.90	56	24.30	8.60	2.30	38	3.40	523	56	2.05	359	182	30.70
15	Families understanding of finances, budgeting, and tax credits	371	2	59.80	54	29.10	9.40	1.60	31	3.43	548	54	2.18	382	171	28.90
18	Affordable in-home care for the elderly	339	3	56.60	52	35.10	6.80	1.50	13	3.51	534	47	2.25	347	195	32.90
49	Child and adult obesity	411	4	56.40	51	35.30	5.80	2.40	34	3.42	557	50	2.22	419	130	22.00
31	Support for care givers of the elderly, mentally ill, or physically disabled	346	5	55.50	50	36.70	6.10	1.70	16	3.49	533	48	2.24	352	188	31.80
56	Cost of prescription medicine	419	6	55.10	48	37.50	5.50	1.90	11	3.52	551	51	2.20	426	118	19.90
51	Affordable and accessible health care for low-to moderate-income individuals	425	7	54.40	49	36.90	7.10	1.60	21	3.48	557	51	2.20	433	115	19.40
4	Availability of weekend/evening hours for human services	232	8	53.90	53	29.70	14.70	1.70	50	3.26	390	55	2.16	237	280	47.30
30	Teenage sex, pregnancy, and parenthood	380	9	53.70	43	40.50	4.70	1.10	16	3.49	550	46	2.28	387	154	26.00
27	Lack of child support payments	316	10	52.20	47	38.30	5.70	3.80	16	3.49	492	44	2.30	322	197	33.30
50	Affordable and available care for mental health issues	357	11	52.10	44	39.80	7.30	.80	24	3.47	530	49	2.23	368	178	30.10
53	Affordable dental care for low- to moderate- income individuals	383	12	51.20	42	41.00	5.70	2.10	34	3.42	547	44	2.30	391	156	26.40
33	Child sexual abuse	351	13	50.70	38	44.20	4.00	1.10	1	3.66	529	35	2.42	359	169	28.50
55	Preventative health care	399	14	50.40	36	45.10	3.80	.80	21	3.48	546	43	2.34	407	139	23.50
36	Elderly abuse and neglect	324	15	50.00	45	38.90	8.30	2.80	31	3.43	524	41	2.36	329	214	36.10

				Table	38 (c	ontinued)									
			lm			g Addres Patterns	sed			Ov	erall Me	an Ra	atings			not w how
	Item from Needs Assessment			HL		НН	LL	LH	lı	mportar	nce		w well is ng addre		is t	issue peing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
26	Children with behavioral problems	372	16	49.70	40	41.70	5.90	2.70	16	3.49	540	40	2.37	373	168	28.40
11	Underage use of drugs other than alcohol or tobacco	406	17	49.30	37	44.30	5.40	1.00	5	3.60	552	35	2.42	415	137	23.10
28	Preparation and support for parenthood	347	18	48.70	39	42.70	6.10	2.60	38	3.40	528	41	2.36	353	186	31.40
34	Parent involvement in child education	403	19	48.40	31	47.40	3.50	.70	5	3.60	551	30	2.45	407	133	22.50
14	Affordable child care	372	20	47.30	33	46.50	4.80	1.30	9	3.53	527	38	2.41	383	157	26.50
3	Transitioning of ex-offenders into community and family	272	21	47.10	55	28.30	19.90	4.80	53	3.17	439	51	2.20	283	261	44.10
46	Gang activity	333	22	46.20	41	41.40	6.30	6.00	43	3.39	513	39	2.38	343	195	32.90
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	404	23	45.50	35	46.00	6.20	2.20	27	3.45	560	35	2.42	412	136	23.00
39	Preparation of the unemployed to enter the workforce	371	24	45.30	31	47.40	5.90	1.30	27	3.45	534	30	2.45	382	173	29.20
24	Child physical/mental abuse and neglect	390	25	45.10	24	50.50	2.80	1.50	2	3.63	556	24	2.53	396	151	25.50
8	Adult drug use	394	26	44.20	27	49.20	5.10	1.50	8	3.55	534	28	2.47	406	130	22.00
7	Drug and alcohol related crimes	425	27	44.00	25	50.10	4.20	1.60	2	3.63	559	26	2.52	428	122	20.60
10	Underage alcohol use	407	27	44.00	30	48.20	5.90	2.00	9	3.53	534	27	2.50	418	121	20.40
47	Youth violence and crime	368	27	44.00	29	48.60	5.70	1.60	24	3.47	544	34	2.43	378	164	27.70
35	Lack of safe, constructive opportunities for youth	389	30	42.70	34	46.30	6.20	4.90	31	3.43	528	30	2.45	398	143	24.20

						ontinued										
			lm			g Addres Patterns	sed			Ove	erall Me	an Ra	tings		knov	not w how
	Item from Needs Assessment			HL		НН	LL	LH	lı	mportar	nce		wwell is		is t	issue peing ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
52	Proper nutrition	393	31	42.00	28	48.90	6.40	2.80	45	3.38	538	29	2.46	395	140	23.60
42	Preparation of young adults to enter the workforce	373	32	41.80	20	52.00	4.60	1.60	27	3.45	535	24	2.53	384	166	28.00
16	Affordable and available care for the physically disabled	327	33	41.60	23	51.10	6.10	1.20	27	3.45	522	30	2.45	335	207	35.00
37	Number of skilled workers to fill available jobs	386	34	37.60	16	54.70	3.90	3.90	38	3.40	535	16	2.58	392	154	26.00
44	Domestic violence	377	35	36.60	13	57.80	4.00	1.60	21	3.48	538	14	2.60	385	151	25.50
6	Underage tobacco use	389	36	36.50	19	52.40	6.70	4.40	37	3.41	527	16	2.58	401	128	21.60
48	Adult sexual victimization	299	36	36.50	18	53.50	5.40	4.70	43	3.39	492	19	2.57	315	211	35.60
54	Sexually transmitted diseases/infections	329	38	36.20	17	54.40	5.80	3.60	46	3.37	526	19	2.57	333	210	35.50
5	Adult alcohol abuse	427	39	35.60	12	58.30	4.70	1.40	24	3.47	564	14	2.60	432	122	20.60
32	Preparation and support for marriage and marital relations	354	40	35.30	20	52.00	6.20	6.50	51	3.24	524	16	2.58	360	182	30.70
20	Affordable and accessible public transportation	397	41	34.80	15	57.20	5.50	2.50	38	3.40	519	12	2.62	408	109	18.40
12	Driving under alcohol/drug influence	415	42	34.20	10	60.50	3.10	2.20	2	3.63	506	10	2.66	429	85	14.40
13	Availability of food and shelter for the homeless	447	43	33.10	9	62.00	3.40	1.60	11	3.52	559	6	2.70	456	89	15.00
38	Students completion of high school	399	43	33.10	8	62.20	2.50	2.30	7	3.58	536	9	2.67	412	138	23.30
17	Availability of jobs for mentally and physically challenged individuals	346	45	31.80	14	57.50	7.20	3.50	47	3.35	531	13	2.61	356	191	32.30
21	Language barriers for non-English speaking individuals	320	46	31.30	46	38.40	12.50	17.8	56	2.79	500	23	2.54	330	216	36.50

				Table	38 (c	ontinued)									
						Being Ad ise Patte				Ove	erall Me	an Ra	itings		knov	not v how
	Item from Needs Assessment	N		HL		нн	LL	LH	lr	mportar	nce		w well is ng addre		is b	issue eing essed
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
9	Adult tobacco use	407	47	31.20	26	49.40	11.10	8.40	54	3.12	546	22	2.56	416	131	22.10
41	Adult literacy	330	48	30.00	6	63.90	3.90	2.10	34	3.42	517	6	2.70	338	212	35.80
23	Integration and appreciation of individuals from different cultures	366	49	29.80	22	51.90	10.70	7.70	55	3.04	512	19	2.57	376	171	28.90
25	Children with special mental and physical conditions	364	50	29.40	3	65.40	3.00	2.20	13	3.51	533	3	2.73	369	167	28.20
45	Violent crime	395	51	29.10	4	64.80	3.50	2.50	16	3.49	547	8	2.69	405	134	22.60
43	School violence	153	52	28.80	5	64.70	4.60	2.00	13	3.51	194	2	2.79	144	43	7.30
40	Children prepared to enter kindergarten	350	53	26.60	7	62.90	4.60	6.00	47	3.35	509	5	2.72	365	186	31.40
22	Race relations	376	54	26.30	11	58.80	8.80	6.10	52	3.18	499	11	2.64	381	145	24.50
1	Recruitment & coordination of volunteers	349	55	24.90	1	71.30	2.30	1.40	38	3.40	487	1	2.80	362	190	32.10
2	Cooperation of community organization in effectively addressing needs	368	56	23.10	2	66.30	9.20	1.40	49	3.33	494	3	2.73	377	166	28.00

Table 39. Vanderburgh County: Client Subgroup Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			Im			g Addres Patterns	sed		Ove	Do not know how well issue						
	Item from Needs Assessment		HL		НН		LL LH		Importance			How well issue is being addressed			is being addressed	
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
51	Affordable and accessible health care for low-to moderate-income individuals	78	1	56.40	56	33.30	9.00	1.30	45	3.34	96	56	2.08	79	16	15.40
29	Understanding the cycle of poverty that occurs in successive generations	73	2	56.20	54	38.40	4.10	1.40	25	3.46	90	48	2.31	74	23	22.10
18	Affordable in-home care for the elderly	63	3	54.00	51	41.30	4.80	.00	8	3.55	87	49	2.30	66	30	28.80
3	Transitioning of ex-offenders into community and family	45	4	53.30	55	35.60	8.90	2.20	51	3.30	71	52	2.27	49	43	41.30
4	Availability of weekend/evening hours for human services	59	5	52.50	49	44.10	3.40	.00	36	3.42	81	54	2.22	59	33	31.70
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	81	6	50.60	52	40.70	6.20	2.50	15	3.53	95	52	2.27	82	13	12.50
30	Teenage sex, pregnancy, and parenthood	72	7	50.00	47	44.40	5.60	.00	21	3.49	91	43	2.43	74	23	22.10
26	Children with behavioral problems	71	8	49.30	45	46.50	4.20	.00	25	3.46	92	45	2.38	72	24	23.10
50	Affordable and available care for mental health issues	75	8	49.30	50	42.70	6.70	1.30	38	3.39	96	51	2.28	75	20	19.20
56	Cost of prescription medicine	80	10	47.50	53	40.00	10.00	2.50	39	3.38	97	55	2.19	81	12	11.50
15	Families understanding of finances, budgeting, and tax credits	72	11	45.80	47	44.40	8.30	1.40	30	3.44	93	46	2.36	74	21	20.20
53	Affordable dental care for low- to moderate-income individuals	74	12	44.60	46	44.60	9.50	1.40	45	3.34	94	50	2.29	75	20	19.20
39	Preparation of the unemployed to enter the workforce	72	13	44.40	44	47.20	8.30	.00	16	3.51	91	38	2.49	73	21	20.20
31	Support for care givers of the elderly, mentally ill, or physically disabled	64	14	43.80	41	51.60	4.70	.00	22	3.48	90	47	2.35	65	32	30.80

	Table 39 (continued) Importance-Being Addressed Overall Mean Ratings Importance Retterns															
			ım			g Addres Patterns		Do not know how								
	Item from Needs Assessment		HL		НН		LL	LH	lı	nportar	nce	How well issue is being addressed			well issue is being addressed	
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
33	Child sexual abuse	73	14	43.80	38	52.10	4.10	.00	3	3.57	95	39	2.47	75	21	20.20
14	Affordable child care	74	16	41.90	42	51.40	5.40	1.40	11	3.54	95	26	2.58	77	18	17.30
24	Child physical/mental abuse and neglect	73	17	41.10	27	56.20	1.40	1.40	1	3.60	94	17	2.63	75	21	20.20
17	Availability of jobs for mentally and physically challenged individuals	71	18	40.80	38	52.10	5.60	1.40	28	3.45	92	35	2.50	74	23	22.10
11	Underage use of drugs other than alcohol or tobacco	73	19	39.70	37	53.40	5.50	1.40	5	3.56	94	30	2.55	75	21	20.20
27	Lack of child support payments	66	20	39.40	22	57.60	3.00	.00	16	3.51	86	35	2.50	68	28	26.90
49	Child and adult obesity	74	21	39.20	43	50.00	5.40	5.40	53	3.26	95	32	2.52	77	17	16.30
47	Youth violence and crime	67	22	38.80	17	58.20	3.00	.00	11	3.54	95	26	2.58	69	24	23.10
34	Parent involvement in child education	75	23	38.70	29	56.00	5.30	.00	20	3.50	94	21	2.61	76	20	19.20
7	Drug and alcohol related crimes	78	24	38.50	20	57.70	2.60	1.30	8	3.55	98	13	2.66	79	17	16.30
8	Adult drug use	76	25	38.20	18	57.90	2.60	1.30	3	3.57	98	31	2.54	79	18	17.30
13	Availability of food and shelter for the homeless	84	26	38.10	29	56.00	4.80	1.20	5	3.56	99	13	2.66	86	10	9.60
22	Race relations	61	27	37.70	15	59.00	1.60	1.60	43	3.36	83	12	2.67	63	28	26.90
23	Integration and appreciation of individuals from different cultures	64	28	37.50	19	57.80	3.10	1.60	49	3.32	85	21	2.61	67	24	23.10
10	Underage alcohol use	75	29	37.30	24	57.30	4.00	1.30	11	3.54	96	29	2.57	76	19	18.30
20	Affordable and accessible public transportation	81	30	37.00	31	55.60	6.20	1.20	30	3.44	94	42	2.44	82	14	13.50

	Table 39 (continued)																
			Im			g Addres Patterns	sed			Do not know how							
Item from Needs Assessment		N	HL		нн		LL	LH	Importan		nce		How well issue is being addressed			well issue is being addressed	
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%	
36	Elderly abuse and neglect	54	30	37.00	31	55.60	5.60	1.90	25	3.46	87	35	2.50	56	40	38.50	
45	Violent crime	73	30	37.00	23	57.50	5.50	.00	11	3.54	94	33	2.51	76	18	17.30	
16	Affordable and available care for the physically disabled	65	33	36.90	26	56.90	6.20	.00	22	3.48	91	40	2.46	67	28	26.90	
25	Children with special mental and physical conditions	65	33	36.90	16	58.50	3.10	1.50	16	3.51	87	33	2.51	68	27	26.00	
38	Students completion of high school	76	35	36.80	14	59.20	2.60	1.30	5	3.56	96	17	2.63	76	18	17.30	
37	Number of skilled workers to fill available jobs	71	36	36.60	20	57.70	4.20	1.40	41	3.37	91	25	2.59	71	22	21.20	
46	Gang activity	63	38	34.90	31	55.60	6.30	3.20	33	3.43	90	10	2.69	64	29	27.90	
55	Preventative health care	75	39	34.70	40	52.00	8.00	5.30	44	3.35	95	43	2.43	75	20	19.20	
48	Adult sexual victimization	66	40	34.60	35	54.50	3.00	3.00	16	3.51	90	41	2.45	69	25	24.00	
35	Lack of safe, constructive opportunities for youth	75	41	33.30	13	60.00	4.00	2.70	33	3.43	92	20	2.62	78	19	18.30	
42	Preparation of young adults to enter the workforce	70	42	32.90	9	62.90	2.90	1.40	36	3.42	92	13	2.66	73	18	17.30	
44	Domestic violence	79	42	32.90	11	62.00	3.80	1.30	2	3.58	96	23	2.60	82	12	11.50	
21	Language barriers for non-English speaking individuals	58	44	32.80	34	55.20	3.40	8.60	56	3.12	82	9	2.70	60	33	31.70	
32	Preparation and support for marriage and marital relations	68	45	32.40	36	54.40	10.30	2.90	52	3.28	90	26	2.58	69	24	23.10	
43	School violence	78	46	32.10	10	62.80	5.10	.00	24	3.47	97	13	2.66	80	13	12.50	
5	Adult alcohol abuse	78	47	30.80	12	60.30	6.40	2.60	33	3.43	99	10	2.69	80	16	15.40	

	Table 39 (continued)															
	Item from Needs Assessment					Being Ad ise Patte				Ove	Do not know how					
			HL		нн		LL	LH	Importance				v well is: ng addre	well issue is being addressed		
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
6	Underage tobacco use	73	48	30.10	27	56.20	9.60	4.10	50	3.31	94	23	2.60	75	20	19.20
12	Driving under alcohol/drug influence	78	49	28.20	5	65.40	5.10	1.30	8	3.55	97	6	2.72	79	16	15.40
54	Sexually transmitted diseases/infections	68	50	27.90	8	63.20	5.90	2.90	41	3.37	93	7	2.71	69	26	25.00
41	Adult literacy	67	51	26.90	4	70.10	3.00	.00	28	3.45	91	3	2.84	68	26	25.00
1	Recruitment & coordination of volunteers	63	52	25.40	3	71.40	1.60	1.60	39	3.38	91	2	2.86	65	28	26.90
52	Proper nutrition	75	53	25.30	7	64.00	8.00	2.70	54	3.23	95	7	2.71	77	15	14.40
9	Adult tobacco use	74	54	20.30	6	64.90	6.80	8.10	55	3.22	95	3	2.84	76	20	19.20
40	Children prepared to enter kindergarten	69	55	17.40	2	75.40	2.90	4.30	48	3.33	90	1	2.90	70	25	24.00
2	Cooperation of community organization in effectively addressing needs	71	56	11.30	1	78.90	7.00	2.80	45	3.34	94	5	2.82	72	21	20.20

Table 40. Vanderburgh County: Provider Subgroup Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			Im			g Addres Patterns	sed			Ov	erall Me	an Ra	itings		knov	not w how issue
	Item from Needs Assessment	N		HL		нн	LL	LH	lı	mportar	nce		w well is: ng addre		is b	eing ressed
		IN	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
51	Affordable and accessible health care for low-to moderate-income individuals	158	1	71.50	55	24.10	4.40	.00	10	3.54	182	54	2.00	161	12	6.40
50	Affordable and available care for mental health issues	150	2	70.70	53	24.70	4.00	.70	15	3.52	181	55	1.99	153	19	10.20
56	Cost of prescription medicine	144	3	68.10	51	28.50	3.50	.00	9	3.56	177	55	1.99	148	24	12.80
15	Families understanding of finances, budgeting, and tax credits	138	4	65.90	52	27.50	6.50	.00	32	3.43	176	52	2.10	141	32	17.10
14	Affordable child care	146	5	64.40	50	29.50	5.50	.70	7	3.57	174	51	2.11	152	24	12.80
26	Children with behavioral problems	144	6	63.20	48	32.60	4.20	.00	19	3.49	177	48	2.15	144	28	15.00
27	Lack of child support payments	125	6	63.20	49	29.60	6.40	.80	26	3.44	168	53	2.07	127	43	23.00
4	Availability of weekend/evening hours for human services	120	8	62.50	56	23.30	9.20	5.00	49	3.30	159	44	2.18	123	46	24.60
49	Child and adult obesity	148	9	60.10	45	35.10	3.40	1.40	26	3.44	180	37	2.26	149	22	11.80
3	Transitioning of ex-offenders into community and family	103	10	58.30	54	24.30	13.60	3.90	50	3.26	150	49	2.14	106	66	35.30
31	Support for care givers of the elderly, mentally ill, or physically disabled	127	10	58.30	46	33.10	8.70	.00	42	3.37	175	50	2.13	127	46	24.60
16	Affordable and available care for the physically disabled	128	12	57.80	42	36.70	5.50	.00	24	3.45	170	40	2.23	130	45	24.10
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	147	12	57.80	44	35.40	6.80	.00	12	3.53	178	43	2.21	151	23	12.30
29	Understanding the cycle of poverty that occurs in successive generations	151	14	57.60	46	33.10	8.60	.70	34	3.42	182	46	2.16	151	21	11.20

	Table 40 (continued)															
			Im			g Addres Patterns	sed			Ov	erall Me	an Ra	itings			not w how
	Item from Needs Assessment			HL		нн	LL	LH	lı	nportar	nce		w well is ng addre		is t	issue eing essed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
18	Affordable in-home care for the elderly	124	15	55.60	43	35.50	8.90	.00	20	3.48	166	45	2.17	127	49	26.20
55	Preventative health care	144	15	55.60	37	40.30	3.50	.70	26	3.44	178	38	2.25	150	23	12.30
30	Teenage sex, pregnancy, and parenthood	152	17	55.30	39	39.50	5.30	.00	20	3.48	181	39	2.24	153	19	10.20
38	Students completion of high school	139	18	54.00	34	43.20	2.90	.00	12	3.53	174	33	2.34	140	29	15.50
28	Preparation and support for parenthood	139	19	53.20	38	39.60	7.20	.00	34	3.42	177	42	2.22	140	33	17.60
39	Preparation of the unemployed to enter the workforce	128	20	53.10	36	40.60	4.70	1.60	42	3.37	168	33	2.34	128	40	21.40
53	Affordable dental care for low- to moderate-income individuals	153	21	52.90	35	41.80	3.30	2.00	22	3.47	177	40	2.23	156	17	9.10
20	Affordable and accessible public transportation	147	22	52.40	40	38.80	6.80	2.00	15	3.52	178	46	2.16	150	22	11.80
34	Parent involvement in child education	145	22	52.40	32	44.10	2.80	.70	17	3.51	179	31	2.38	146	26	13.90
33	Child sexual abuse	142	24	51.40	31	44.40	4.20	.00	4	3.58	179	33	2.34	143	27	14.40
11	Underage use of drugs other than alcohol or tobacco	138	25	50.70	29	46.40	2.90	.00	4	3.58	176	27	2.46	141	33	17.60
36	Elderly abuse and neglect	117	26	49.60	33	43.60	5.10	1.70	40	3.40	166	36	2.31	121	49	26.20
8	Adult drug use	145	27	48.30	25	48.30	2.80	.70	4	3.58	179	22	2.51	148	25	13.40
24	Child physical/mental abuse and neglect	151	27	48.30	25	48.30	2.60	.70	1	3.62	183	29	2.43	151	23	12.30
52	Proper nutrition	147	29	46.30	25	48.30	2.70	2.70	42	3.37	179	27	2.46	149	24	12.80
10	Underage alcohol use	142	30	45.80	24	49.30	2.80	2.10	7	3.57	178	21	2.52	144	26	13.90

Table 40 (continued)																
			lm			g Addres Patterns	sed			Ov	erall Me	an Ra	tings		_	not w how
	Item from Needs Assessment			HL		нн	LL	LH	lı	nportai	nce		w well is ng addr		is k	issue peing ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
21	Language barriers for non-English speaking individuals	133	31	44.40	41	37.60	7.50	10.5	56	3.05	166	29	2.43	137	40	21.40
42	Preparation of young adults to enter the workforce	136	32	44.10	23	50.70	3.70	1.50	34	3.42	172	22	2.51	140	29	15.50
13	Availability of food and shelter for the homeless	155	33	43.90	15	54.20	1.90	.00	10	3.54	180	19	2.54	158	16	8.60
17	Availability of jobs for mentally and physically challenged individuals	126	34	43.70	28	47.60	7.90	.80	41	3.38	167	32	2.35	131	42	22.50
7	Drug and alcohol related crimes	139	35	43.20	16	54.00	1.40	1.40	3	3.59	177	16	2.56	142	29	15.50
35	Lack of safe, constructive opportunities for youth	144	36	43.10	22	51.40	3.50	2.10	34	3.42	172	24	2.49	147	23	12.30
47	Youth violence and crime	130	36	43.10	20	52.30	4.60	.00	26	3.44	173	26	2.47	132	38	20.30
12	Driving under alcohol/drug influence	149	38	42.30	14	55.70	2.00	.00	1	3.62	177	12	2.59	153	22	11.80
5	Adult alcohol abuse	143	39	40.60	17	53.80	2.80	2.80	17	3.51	176	12	2.59	150	28	15.00
25	Children with special mental and physical conditions	143	39	40.60	12	55.90	3.50	.00	22	3.47	176	25	2.48	143	29	15.50
6	Underage tobacco use	139	41	40.30	18	53.20	3.60	2.90	39	3.41	174	14	2.57	146	30	16.00
23	Integration and appreciation of individuals from different cultures	138	42	39.10	30	45.70	5.80	9.40	55	3.11	168	17	2.55	142	34	18.20
44	Domestic violence	141	43	38.30	11	57.40	3.50	.70	12	3.53	180	8	2.62	143	28	15.00
37	Number of skilled workers to fill available jobs	129	44	38.00	13	55.80	3.10	3.10	45	3.35	164	10	2.60	131	38	20.30
48	Adult sexual victimization	111	45	36.00	8	62.20	.90	.90	32	3.43	164	10	2.60	111	58	31.00
46	Gang activity	109	46	34.90	20	52.30	8.30	4.60	52	3.23	166	20	2.53	109	61	32.60
54	Sexually transmitted diseases/infections	124	47	33.90	9	59.70	4.00	2.40	46	3.34	166	14	2.57	126	47	25.10

	Table 40 (continued)															
						Being Ad ise Pattei				Ove	erall Me	an Ra	tings		knov	not w how
	Item from Needs Assessment	N		HL		НН	LL	LH	lr	nportar	ice		wwell is:		is b	issue peing ressed
	Adult tobacco uso		Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
9	Adult tobacco use	141	48	32.60	19	52.50	9.20	5.70	53	3.18	176	9	2.61	142	30	16.00
45	Violent crime	133	49	31.60	6	64.70	3.00	.80	24	3.45	177	6	2.70	135	36	19.30
40	Children prepared to enter kindergarten	133	50	30.80	7	63.90	1.50	3.80	46	3.34	166	7	2.66	137	32	17.10
32	Preparation and support for marriage and marital relations	138	51	29.70	10	58.00	6.50	5.80	51	3.24	174	17	2.55	139	33	17.60
43	School violence	138	52	29.00	4	65.90	1.40	3.60	34	3.42	174	2	2.76	139	32	17.10
2	Cooperation of community organization in effectively addressing needs	153	53	28.10	3	66.70	5.20	.00	26	3.44	175	3	2.75	154	19	10.20
1	Recruitment & coordination of volunteers	139	54	27.30	2	67.60	2.20	2.90	26	3.44	174	1	2.80	141	33	17.60
41	Adult literacy	130	55	26.20	1	68.50	4.60	.80	46	3.34	170	5	2.72	131	39	20.90
22	Race relations	145	56	25.50	5	64.80	6.20	3.40	54	3.14	174	4	2.73	148	28	15.00

Warrick County

Recent Census estimates indicate 57,090 residents live within Warrick County (US Census Bureau, Population Estimates Program, 2006). Specific county profile information is provided in Table 41.

Table 41. WARRICK COUNTY COMMUNITY PROF	ILE
General Population Characteristics	
(US Census Bureau, Population Estimates Program, 2006; US	
Total Population (2006)	57,090
Male	28,238
Female	28,852
Under 5	3,410
5 to 9	3,603
10 to 14	4,107
15 to 19	3,985
20 to 24	3,609
25 to 34	7,108
35 to 44	8,190
45 to 54	9,382
55 to 64	7,081
65 and over	6,615
Median Age	38.6
Race/Ethnicity	
One race	56,737
White	55,345
Black/African American	723
American Indiana/Alaskan Native	90
Asian	545
Native Hawaiian/Pacific Islander	34
Two or more races	353
Hispanic	656
Non-Hispanic	56,434
Households (2000)	
Total Households	19,438
Family Households	15,176
Married with Children	6,005
Married without Children	7,000
Single Parents	1,316
Other	855
Non-Family Households	4,262
Living Alone	3,621
Average Household Size	2.66
Average Family Household Size	3.03

Table 41 (continued)	
Housing Units	
2006 Estimated Housing Units	23,783
2000 Housing Units	20,546
Occupied	19,438
Owner Occupied	16,192
Renter Occupied	3,246
Vacant	1,108
Household Income	
Median Household Income (2005)	\$54,475
Median Household Income (2000 adj. for inflation)	\$58,126
Per capita personal income (2005)	\$33,586
Per capita personal income (1995 adj. for inflation)	\$28,033
Per capita personal income (1985 adj. for inflation)	\$25,217
Poverty Rate	
Poverty Rate-all persons (2005)	6.3%
Poverty Rate-all persons (2000)	5.7%
Poverty Rate-children under 18 (2005)	8.7%
Poverty Rate-children under 18 (2000)	7.5%
Labor Force	
Total Residents in Labor Force (2006)	31,097
Employed	29,798
Unemployed	1,299
February, 2008 Unemployment Rate	4.4%
Education	
School Enrollment (2006/2007)	9,590
Public High School Graduates	634
Continuing to Higher Education	538
4-year	409
2-year	82
Vocational/technical	47
Educational Attainment (2000)	
Total Population 25+	34,571
< 9 th grade	1,283
9 th to 12 th grade, no diploma	3,445
High School Graduate (included equivalency)	11,628
Some College/No Degree	7,729
Associate Degree	2,952
Bachelor Degree	4,843
Graduate/Professional Degree	2,691
Household Income Distribution	
Total (2000)	19,466
Below \$20,000	2,985
\$20,000 - \$39,999	4,639
\$40,000 - \$59,999	4,379
\$60,000 - \$74,999	2,694
\$75,000 - \$99,999	2,500
\$100,000 - \$149,999	1,637
\$150,000 - \$199,999	295
\$200,000 +	337

Warrick County Needs Assessment Survey Respondent Characteristics

Demographic characteristics of Warrick County survey respondents, as well as a comparison to Census data for the county are provided in Table 42. Of the respondents, approximately 78% were female, which is higher than the actual percentage of females in the population. In terms of age, the majority of respondents were in the 45 and over age brackets. Almost 63% of survey respondents were married, which was similar to the actual population. Overall, marital status was fairly similar to the population. The majority of respondents fell in the less than \$60,000 income bracket. The overall distribution based on income was similar to the population. The vast majority of individuals indicated high school and college graduate as the highest level of education. College graduates were overrepresented in the sample. Finally, approximately 97% of respondents were white, 0.8% were black/African American, and 0.4% were Hispanic/Latino. Race/ethnicity demographics were fairly similar to population figures.

Category	Survey Sample	Warrick Census	% Difference
Gender	, , , , , , , , , , , , , , , , , , ,		
Male	22.2%	49.5%	-27.3%
Female	77.8%	50.5%	27.3%
Age			
18-24	2.1%	11.5%	-9.4%
25-34	13.1%	16.4%	-3.3%
35-44	13.9%	18.9%	-5.0%
45-54	22.8%	21.6%	1.2%
55-64	24.1%	16.4%	7.7%
65+	24.1%	15.3%	8.8%
Marital Status			
Married	62.9%	66.3%	-3.4%
Single	12.9%	18.8%	-5.9%
Widowed	11.6%	6.5%	5.1%
Divorced	12.5%	8.5%	4.0%
Household Income		•	
Below \$20,000	19.9%	15.3%	4.6%
\$20,000 - \$39,999	28.1%	23.8%	4.3%
\$40,000 - \$59,999	18.1%	22.5%	-4.4%
\$60,000 - \$79,999	11.8%	13.3%	-1.5%
\$80,000 - \$99,999	8.6%	13.3%	-4.7%
\$100,000 - \$149,999	10.0%	8.4%	1.6%
\$150,000 - \$199,999	2.7%	1.5%	1.2%
\$200,000 +	0.9%	1.7%	-0.8%
Education			
Grade school	1.3%	3.7%	-2.4%
Some high school	4.2%	10.0%	-5.8%
High school grad	41.4%	33.6%	7.8%
Vocational school grad	10.5%	30.9%	-20.4%
College grad	27.0%	14.0%	13.0%
Post graduate	15.6%	7.8%	7.8%
Race/Ethnicity			
White	97.0%	96.4%	0.6%
Black/African American	0.8%	1.3%	-0.5%
Hispanic/Latino	0.4%	1.1%	-0.7%
Asian	0.4%	1.0%	-0.6%
American Indian/Alaskan Native	0.8%	0.2%	0.6%
Native Hawaiian/ Pacific Islander	0.0%	0.0%	0.0%
Other	0.4%		

Warrick County: All Subgroups Combined

Stakeholders' Perceptions of Needs and Strengths

A ranking of all priority needs and strengths is provided in Table 43 for all subgroups combined in Warrick County. The rankings reflect issues that have the highest rank based on the percentages of participants who fell within a response pattern. For priority needs, participants fell within the high in importance and low in being-addressed-well quadrant. For strengths, participants fell within the high in importance and high in being-addressed-well quadrant. This is a descriptive approach to examining these data. Ranking of the priority needs and strengths suggests that a higher percentage of respondents selected a particular issue compared to other issues within the respective quadrant. While no statistical inferences can be made distinguishing one issue from another, sorting the issues from the highest percentage to the lowest percentage allows readers to visually compare issues. To add further meaning, secondary data sources were used to discuss underlying themes and quantitatively ground community perceptions. For ease of presentation, only the five highest issues are presented.

Priority Needs: The five highest percentages of participants across all stakeholder groups falling in the high in importance and low in being-addressed- well quadrant (represents priority needs) were noted for the following community issues:

- Child and adult obesity
- · Families' understanding of finances, budgeting, and tax credits
- Understanding the cycle of poverty that occurs in successive generations
- Cost of prescription medicine
- Affordable and accessible health care for low- to moderate-income individuals

Strengths: The five highest percentages of participants across all stakeholder groups falling in the high in importance and high in being-addressed-well quadrant (represents strengths) were noted for the following community issues:

- Children prepared to enter kindergarten
- Students' completion of high school
- Adult literacy
- Number of skilled workers to fill available jobs
- School violence

The priority needs reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and low in being-addressed-well quadrant. For example, the highest percentage of participants selected "Child and adult obesity." This means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, while disagreeing or strongly disagreeing that the issue is being-addressed-well within the community.

On the other hand, the strengths reflect issues that have the highest rank based on the percentages of participants who fell within the high in importance and high in being-addressed-well quadrant. For example, the highest percentage of participants selected "Children prepared to

enter kindergarten." This means that the highest percentage of participants agreed or strongly agreed that this issue is important to the community, and also agreed or strongly agreed that the issue is being addressed well within the community.

Synthesis of Findings with Secondary Data Sources

Secondary data sources were examined as a supplement to the identified community needs and strengths from the stakeholder survey using a similar approach as the overall county analysis. The goal of the process was to incorporate information that would help to provide a more complete understanding of the issues included in the needs assessment survey. A review of secondary data related to most issues contained within the needs assessment survey is provided toward the end of this report. A synthesis of selected data sources specific to the higher ranked issues identified above follow.

Similar to the overall county findings, a common theme among the highest ranked items is poverty. Both poverty rates (US Census, 2000, 2005) and the number of individuals accessing food stamps (Indiana FSSA, Division of Family Resources, 2007) have increased in Warrick County. While poverty rates in Warrick County are lower than Indiana and surrounding counties, almost one-fifth of single parent households are in poverty status (Indiana Prevention Resource Center, PREV-STAT County Profiles Data, 2006). An additional indicator of poverty status is the percentage of students eligible for free and reduced lunch. From 2002/2003 to 2007/2008, Warrick County witnessed an increase in the percentage free and reduced lunch eligibility (Indiana Department of Education, 2007). Overall, health care costs have risen in Indiana and across the nation (The Kaiser Family Foundation and Health Research and Educational Trust, Employer Health Benefits, 2007 Annual Survey). Further, the actual amounts individuals must pay for insurance premiums have increased. Additionally, while prescription costs place a burden on lower-income individuals (US Department of Health and Human Services, Medical Expenditure Panel Survey, 2005), Indiana residents do have some relief through the HoosierRx program (Indiana FSSA, Department of Family Resources, 2007).

As stated in the overall county descriptions, a related health concern is the issue of child and adult obesity. While this report does not present county-level obesity data, statistics available for Indiana indicate that adult obesity has risen in the past several years and that youth obesity, although fairly high, has experience somewhat of a plateau (Centers for Disease Control, CDC, Behavioral Risk Factor Surveillance Survey, 2007). In 2007, approximately 26% of adults in the United States and approximately 27% of adults in Indiana were classified as obese. Since 2000, rates in both the U.S. and Indiana have increased. Obesity rates for metropolitan areas in Indiana and surrounding states are similar to the national average. As an indicator of the impact of obesity on other health factors, data show that the percentage of adults ever diagnosed with diabetes increased in both the U.S. and Indiana between 2000 and 2007. As of 2007, the Indiana rate was higher than the national rate. Indiana and national statistics have shown an increase over the years (CDC, Behavioral Risk Factor Surveillance Survey, 2007).

In terms of community strengths, two issues rated as the greatest strengths in Warrick County have specific county-level data that shed light on the prevalence of these concerns. In terms of school violence, Warrick County had one of the lowest rates of suspension and expulsion in

the five-county area and has actually experienced a decrease in suspensions in the past several years (Indiana Department of Education, 2007). As for completion of high school, data show that the percentage of individuals 25 and over in Warrick County who have completed high school increased slightly between 1990 and 2000 (US Census, 2000). Data also indicate that the graduation rates reported for Warrick County by the Indiana Department of Education (2007) have shown small decreases over the past several years and that the percentage of freshmen graduating in four years has remained largely unchanged.

Another theme appeared to be in the area of education and literacy, such as adult literacy and preparation for kindergarten. National surveys do suggest that adult literacy rates have slightly improved (US Department of Education, Institute of Education Sciences, National Center for Education Statistics, 1992 National Adult Literacy Survey and 2003 National Assessment of Adult Literacy). For Warrick County, the percentage of adults (25 and older) who have less than a high school degree has decreased from 1990 to 2000 (U.S. Census, 2000). The percentage in 2000, 13.7% is less than the national and state average, and is the lowest of all surrounding counties. Regarding preparation for kindergarten, significant efforts have been placed toward addressing early school readiness locally. The Welborn Baptist Foundation has invested significant resources in the area of early literacy. Additionally, within the last year, an Early Childhood Development Coalition has emerged to focus on school readiness within Spencer, Vanderburgh, and Warrick Counties. Paths to Quality, which is a voluntary rating system for child care facilities developed by 4C of Southern Indiana recognizes programs that choose to go beyond minimum state licensing requirements through a four-level rating framework. At present, there are almost 130 programs in the area that participate in Paths to Quality, with 39 achieving level 3 and 19 achieving level 4, the highest possible rating in the system (4C of Southern Indiana). However, on a state level, Indiana does not have a statesponsored pre-kindergarten program nor devotes state funding to pre-k initiatives (National Institute for Early Education Research (NIEER), 2007). Only twelve states in the country lack such state-level programs. All states that surround Indiana have state pre-k programs. In terms of publicly funded early childhood education, Indiana serves approximately 14,000 children per year through the Head Start Program. This number has increased slightly across the state and has remained stable in the five-county area over the past three years. With the lack of state funding for early childhood programs (NIEER, The State of Preschool 2007), many families are responsible for paying the full cost of child care for preschool children, which especially creates a burden for many lower- to middle-income families.

Finally, Warrick County stakeholders identified the number of skilled workers to fill available jobs as a community strength. An assessment of the major employers in the five-county study area shows that different types of industry are present in the different counties, which indicates a need for varied skill sets depending on location. Employers in the five-county survey area used the Indiana Department of Workforce Development Customer Self-Service System to indicate the top skills in demand in their organizations. In Warrick County, the top three skills sets included: work as a team member, maintaining a safe work environment, and move heavy objects (Indiana Department of Workforce Development, Customer Self Service System, 2008). Assemblers (factory work) and production laborers were the top two jobs being sought by job applicants in Warrick County, which are congruent with the skill sets required by employers.

Table 43. Warrick County: All Subgroups Combined Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

			In			g Addres Patterns	sed			Ove	erall Me	an Ra	tings		knov	not v how
	Item from Needs Assessment	N		HL		НН	LL	LH	li	mportar	ice		v well is: ng addre		is b	issue eing essed
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
49	Child and adult obesity	160	1	63.80	56	25.00	6.90	4.40	38	3.31	223	52	2.11	161	56	23.30
15	Families understanding of finances, budgeting, and tax credits	145	2	61.40	55	27.60	9.00	2.10	36	3.32	217	51	2.12	149	72	30.00
29	Understanding the cycle of poverty that occurs in successive generations	137	3	59.90	54	27.70	10.20	2.20	44	3.27	211	52	2.11	141	72	30.00
56	Cost of prescription medicine	173	4	59.50	48	31.20	7.50	1.70	11	3.44	226	47	2.15	178	41	17.10
51	Affordable and accessible health care for low-to moderate-income individuals	175	5	58.90	51	30.30	9.70	1.10	12	3.43	229	55	2.06	176	43	17.90
53	Affordable dental care for low- to moderate-income individuals	165	6	58.80	53	27.90	12.10	1.20	39	3.30	227	56	2.04	165	54	22.50
50	Affordable and available care for mental health issues	153	7	58.20	49	30.70	9.80	1.30	26	3.36	219	46	2.16	153	66	27.50
14	Affordable child care	155	8	56.10	46	33.50	9.00	1.30	19	3.38	220	43	2.24	160	55	22.90
18	Affordable in-home care for the elderly	134	9	54.50	47	32.10	12.70	.70	17	3.39	213	50	2.13	142	78	32.50
11	Underage use of drugs other than alcohol or tobacco	164	10	53.70	36	42.10	4.30	.00	1	3.60	226	37	2.35	170	43	17.90
20	Affordable and accessible public transportation	160	11	53.10	50	30.60	11.90	4.40	49	3.20	215	54	2.10	166	44	18.30
55	Preventative health care	152	12	52.60	42	38.20	6.60	2.60	22	3.37	223	44	2.23	152	65	27.10
4	Availability of weekend/evening hours for human services	105	13	52.40	52	29.50	16.20	1.90	51	3.16	176	47	2.15	108	105	43.80
31	Support for care givers of the elderly, mentally ill, or physically disabled	139	14	51.80	45	33.80	12.20	2.20	33	3.33	215	49	2.14	142	69	28.80
30	Teenage sex, pregnancy, and parenthood	164	15	49.40	36	42.10	6.10	2.40	29	3.35	225	41	2.28	167	51	21.30

	Table 43 (continued) Importance-Being Addressed Ougset Many Betimes Do not															
			Im			g Addres Patterns	sed			Ov	erall Me	an Ra	atings			not w how
	Item from Needs Assessment			HL		НН	LL	LH	lr	nportai	nce		w well is ng addr		is k	issue peing ressed
		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
19	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)	164	16	48.80	41	38.40	7.90	4.90	19	3.38	225	42	2.27	169	52	21.70
16	Affordable and available care for the physically disabled	138	17	48.60	34	42.80	8.00	.70	14	3.40	215	40	2.29	142	77	32.10
26	Children with behavioral problems	153	18	48.40	33	43.10	5.90	2.60	17	3.39	223	35	2.37	154	62	25.80
8	Adult drug use	159	19	47.80	29	45.30	6.30	.60	5	3.52	227	31	2.41	167	50	20.80
10	Underage alcohol use	163	20	46.60	25	46.60	5.50	1.20	1	3.60	218	20	2.50	170	38	15.80
24	Child physical/mental abuse and neglect	156	21	46.20	22	48.70	3.80	1.30	10	3.46	226	28	2.45	157	60	25.00
6	Underage tobacco use	157	22	45.90	23	47.80	3.20	3.20	13	3.42	212	19	2.51	167	45	18.80
28	Preparation and support for parenthood	147	23	45.60	40	40.10	11.60	2.70	44	3.27	209	36	2.36	150	67	27.90
7	Drug and alcohol related crimes	161	24	45.30	21	49.10	5.60	.00	4	3.53	230	23	2.49	167	48	20.00
27	Lack of child support payments	127	25	44.90	35	42.50	8.70	3.90	22	3.37	194	39	2.31	130	79	32.90
33	Child sexual abuse	140	26	44.30	20	49.30	5.00	1.40	6	3.50	214	34	2.38	144	68	28.30
5	Adult alcohol abuse	159	27	44.00	15	52.20	2.50	1.30	8	3.49	223	13	2.54	166	51	21.30
34	Parent involvement in child education	163	28	43.60	16	51.50	3.10	1.80	8	3.49	226	17	2.52	164	53	22.10
13	Availability of food and shelter for the homeless	166	29	43.40	27	45.80	5.40	5.40	22	3.37	222	20	2.50	169	52	21.70
35	Lack of safe, constructive opportunities for youth	155	30	42.60	27	45.80	5.20	6.50	29	3.35	218	30	2.42	156	58	24.20
12	Driving under alcohol/drug influence	162	31	42.00	10	54.30	2.50	1.20	3	3.59	216	13	2.54	171	34	14.20

Table 43 (continued) Importance-Being Addressed Occupations Decisions Do not																
			lm			g Addres Patterns	sed			Ov	erall Me	an Ra	itings			not w how
	Item from Needs Assessment	N		HL		нн	LL	LH	lr	mportar	nce		w well is		is t	issue eing essed
		IN	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
52	Proper nutrition	157	32	41.40	23	47.80	7.00	3.80	43	3.28	220	38	2.33	159	55	22.90
39	Preparation of the unemployed to enter the workforce	146	33	41.10	25	46.60	10.30	2.10	32	3.34	225	27	2.46	150	67	27.90
3	Transitioning of ex-offenders into community and family	103	34	40.80	43	37.90	18.40	2.90	53	3.04	183	45	2.22	108	109	45.40
44	Domestic violence	158	35	40.50	13	52.50	5.70	1.30	14	3.40	223	20	2.50	159	60	25.00
48	Adult sexual victimization	118	36	39.80	30	44.90	7.60	7.60	29	3.35	197	29	2.43	118	97	40.40
36	Elderly abuse and neglect	129	37	39.50	32	43.40	10.10	7.00	41	3.29	201	33	2.39	132	84	35.00
9	Adult tobacco use	153	38	38.60	38	41.80	9.20	10.5	52	3.12	217	25	2.48	164	55	22.90
47	Youth violence and crime	142	40	38.00	19	50.00	6.30	5.60	26	3.36	218	15	2.53	144	73	30.40
54	Sexually transmitted diseases/infections	120	41	37.50	18	50.80	9.20	2.50	39	3.30	205	32	2.40	120	95	39.60
1	Recruitment & coordination of volunteers	142	42	37.30	8	56.30	6.30	.00	33	3.33	206	12	2.57	143	75	31.30
42	Preparation of young adults to enter the workforce	145	43	37.20	12	53.80	6.20	2.80	26	3.36	218	8	2.60	148	69	28.80
17	Availability of jobs for mentally and physically challenged individuals	141	44	36.90	13	52.50	9.20	1.40	33	3.33	214	26	2.47	144	74	30.80
25	Children with special mental and physical conditions	153	45	35.30	6	59.50	3.90	1.30	14	3.40	221	8	2.60	153	63	26.30
23	Integration and appreciation of individuals from different cultures	129	46	33.30	39	40.30	11.60	14.7	55	2.89	195	23	2.49	135	85	35.40
2	Cooperation of community organization in effectively addressing needs	143	47	32.20	9	55.20	11.20	1.40	46	3.24	206	10	2.59	147	73	30.40
46	Gang activity	134	48	30.60	31	44.80	12.70	11.9	47	3.22	210	11	2.58	136	83	34.60

	Table 43 (continued)															
						Being Ad ise Patte				Ove	erall Me	an Ra	itings		knov	not w how
	Item from Needs Assessment	N		HL		НН	LL	LH	lı	nportar	ice		w well is ng addre		is b	issue peing ressed
			Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
45	Violent crime	165	49	30.30	7	58.20	6.70	4.80	19	3.38	229	6	2.65	165	53	22.10
21	Language barriers for non-English speaking individuals	118	50	29.70	44	35.60	15.30	19.5	56	2.69	193	17	2.52	124	93	38.80
37	Number of skilled workers to fill available jobs	140	51	27.10	4	60.00	7.10	5.70	41	3.29	215	5	2.73	143	73	30.40
38	Students completion of high school	161	52	26.10	2	67.70	3.10	3.10	6	3.50	226	2	2.81	163	53	22.10
41	Adult literacy	130	53	25.40	3	63.10	6.20	5.40	36	3.32	209	4	2.74	133	84	35.00
43	School violence	100	54	24.00	4	60.00	6.00	10.0	22	3.37	122	3	2.80	95	29	12.10
22	Race relations	133	55	23.30	11	54.10	9.80	12.8	54	2.98	198	7	2.64	138	76	31.70
40	Children prepared to enter kindergarten	149	56	18.80	1	70.50	4.70	6.00	48	3.21	215	1	2.87	151	66	27.50

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Secondary Data Analysis: Disaggregated by Domain

This section presents the secondary data analysis conducted for the needs assessment study. To collect these data, a comprehensive review of data sources applicable to issues that appear on the needs assessment survey was performed. Sources include a wide array of statistics collected through surveys and routine reporting by various government, social service, and private organizations.

The user of this report should note specific limitations related to the secondary data analysis. First, while this is a fairly extensive compilation of data related to community issues, the author recognizes that additional sources may be available that provide data pertaining to issues and that may present alternative perspectives on the prevalence of certain concerns. The absence of data in a particular domain does not reflect on the importance of issues in that domain, nor does it indicate whether issues are viewed as needs or strengths by members of the community. Further, more recent data, which do not appear in this report, may be available. While the data presented here are extensive, they are not exhaustive. Additionally, the author assumes that data collected from various sources are accurate and does not bear responsibility for errors other individuals or organizations have made in reporting these data. Every effort was made to carefully extract data from original and secondary sources to present data tables that are intended to be consistent in form and easily interpreted. Finally, while the summaries included within each community issue grouping are descriptive in nature, meaning they simply describe trends and current levels of prevalence, the author acknowledges that individuals more familiar with the data sources are better equipped to interpret the information and develop a deeper understanding of how the data apply to community issues. The summaries are not intended to misinterpret information but to provide one way of presenting key facts and figures related to the issues.

Domain I: Social Service Issues

The following section presents secondary data sources applicable to Domain I: Social Service Issues. As shown in Table I.I, availability of weekend and evening hours for human services is the top ranked priority need in this domain and tenth overall in all counties combined. Transitioning of ex-offenders into the community and family also was rated as a fairly high priority need in the community. The other two issues in this domain, recruitment and coordination of volunteers and cooperation of community organizations in effectively addressing needs were rated as strengths in the social service domain and among all issues. In fact, the latter was ranked in the all counties combined analysis as the greatest strength of the community. Secondary data for this domain are presented in Tables 1.2 to 1.21. Note that data are presented in the order in which issues within the domain were listed on the needs assessment survey.

Table 1.1 All Counties: Social Service Domain Note: Issues are sorted by the HL Rank (High in importance and Low in how the issue is being addressed) Do not Importance-Being Addressed **Overall Mean Ratings** know how Response Patterns well issue Overall How well issue is Rank based is being HL ΗН LH LL Importance being addressed **Item from Needs Assessment** addressed on Response Ν Rank Rank Rank Mean Rank Mean Pattern % % % % N Ν Ν % 10 Availability of weekend/evening hours 2.22 747 1 52.10 31.90 12.70 3.30 3.25 1194 3 769 712 48.08 for human services 16 Transitioning of ex-offenders into 783 2 48.30 3 30.90 17.10 3.70 4 3.15 1258 4 2.20 814 714 46.73 community and family 50 Recruitment & coordination of 1003 3 29.10 2 66.20 3.30 1.40 3.39 1394 2.73 1032 517 1 33.38 volunteers 56 Cooperation of community 28.89 1065 4 23.80 1 66.70 8.60 .90 2 3.32 1423 2 2.72 1093 444 organization in effectively addressing needs

ISSUE 1: RECRUITMENT AND COORDINATION OF VOLUNTEERS

In 2007, approximately 27% of adults engaged in volunteer activities in the United States. This rate has increased from the 1970s and 1980s, but experienced little change since 2002. Volunteer rates are highest for the following groups: females, mid-life adults, Caucasians, individuals with a bachelor's degree or higher, and employed individuals.

In Indiana, approximately 30% of adults engaged in volunteer activities in 2006. Nationally, this rate ranks 26th among all states. As with the U.S. volunteer rate, the rate for Indiana has remained largely unchanged since 2002. In terms of volunteer hours, Indiana volunteers averaged 44.2 hours annually, which ranks 13th nationally. Indiana stands out most in the area of volunteer retention rate. Approximately 73% of individuals who volunteered in 2005 also volunteered in 2006. This represents a national rank of 5th

In terms of how individuals become involved in volunteer activities, the majority of people are asked by an individual or organization to volunteer. The three types of organizations that represent the largest amount of volunteer activities include: religious, educational or youth service, and social or community service. Main volunteer activities reported by individuals include: fundraising or selling items to raise money, tutoring or teaching, and collecting/preparing/distributing/serving food.

Table 1.2 Number and percent of individuals in the U.S. who have done volunteer activities for an														
organization in the past year (for periods 9/05 to 9/06 and 9/06 to 9/07)														
Have you volunteered? 2006 2007														
	N % N %													
Yes	24883	27.1%	25638	26.7%										
No	66956	72.9%	70430	73.3%										
Total	91839	100%	96068	100%										

Source: U.S. Census, Current Population Survey, September 2006 and 2007 Volunteer Supplements

Table 1.3 Method of contact with organization for individuals who have volunteered in the past year (for periods 9/05 to 9/06 and 9/06 to 9/07)						
Method						
	N % N %					
Approached the organization	10895	40.1%	10784	40.5%		
Was asked 12335 45.5% 12267 46.1%						
Some other way 3906 14.4% 3565 13.4%						
Total 27136 100% 26616 100%						
Source: U.S. Census, Current Population Survey, September 2006 and 2007 Volunteer Supplements						

Table 1.4 Number and percent of individuals whose volunteer activities involved collecting,							
preparing, distributing, or serving food (for periods 9/05 to 9/06 and 9/06 to 9/07)							
Involved food?	2006 2007						
	N	%	N	%			
Yes	7020	25.7%	6464	24.1%			
No	20296	74.3%	20338	75.9%			
Total	27316	100%	26802	100%			

Source: U.S. Census, Current Population Survey, September 2006 and 2007 Volunteer Supplements

Table 1.5 National adult volunteer rate, 1974 to present (% of adults 16 and older who have						
volunteered	volunteered in past year)					
Year	Volunteer Rate					
1974	23.6%					
1989	20.4%					
2002	27.4%					
2003	28.8%					
2004	28.8%					
2005	28.8%					
2006	26.7%					

Source: Corporation for National and Community Service, Volunteering in America 2007

Table 1.6 National volunteer rates for young adults (16-19), mid-life adults (45-64), and older adults (65 and older), 1974 to present						
Year		Volunteer Rate				
	Young Adult Mid-life Adult Older Adult					
1974	20.9%	23.2%	14.3%			
1989	13.4%	22.0%	16.9%			
2002	26.9%	29.8%	22.7%			
2003	29.5%	31.3%	23.7%			
2004	29.4%	31.7%	24.6%			
2005	30.4%	31.6%	24.8%			
2006	26.4%	29.8%	23.8%			

Source: Corporation for National and Community Service, Volunteering in America 2007

Table 1.7 Volunteer rates by state, 2006						
State	Volunteer Rate	National Rank				
Indiana	29.6%	26 th				
Michigan	32.2%	17 th				
Ohio	30.3%	23 rd				
Kentucky	29.7%	25 th				
Illinois	29.0%	29 th				
Wisconsin	36.5%	11 th				
Missouri	31.8%	20 th				
United States	26.7%	n/a				

Source: Corporation for National and Community Service, Volunteering in America 2007

Table 1.8 Volunteer rate changes by state, 1989 to 2006 and 2002 to 2006						
State	1989 t	o 2006	2002 to 2006			
	Rate Change	National Rank	Rate Change	National Rank		
Indiana	+6.9%	27 th	+0.3%	23 rd		
Michigan	+10.7%	8 th	+0.6%	13 th		
Ohio	+10.1%	12 th	-0.1%	30 th		
Kentucky	+10.1%	12 th	+0.9%	8 th		
Illinois	+9.4%	17 th	+0.1%	25 th		
Wisconsin	+6.5%	32 nd	+0.6%	13 th		
Missouri	+11.8%	5 th	-0.1%	30 th		
United States	+6.3%	n/a	-0.7%	n/a		

Source: Corporation for National and Community Service, Volunteering in America 2007

Table 1.9 Average annual volunteer hours by state, 2006					
State	Average Volunteer Hours	National Rank			
Indiana	44.2	13 th			
Michigan	36.8	31 st			
Ohio	33.8	37 th			
Kentucky	33.9	36 th			
Illinois	32.8	39 th			
Wisconsin	36.4	33 ^{ra}			
Missouri	43.5	15 th			
United States	36.5	n/a			

Source: Corporation for National and Community Service, Volunteering in America 2007

Table 1.10 Total hours volunteered per year in Indiana, 2002-2006					
Year Total Hours (in millions)					
2002	157.89				
2003	178.05				
2004	208.44				
2005	181.79				
2006 242.80					
% change 2002-2006	+53.78%				

Source: Corporation for National and Community Service, Volunteering in America 2007

Table 1.11 Volunteer retention rates by state, 2006 (% of volunteers who continue their service							
	for more than one year)						
State	State Retention Rate National Rank						
Indiana	73.0%	5 th					
Michigan	72.9%	6 th					
Ohio	68.7%	22 nd					
Kentucky	68.8%	21 st					
Illinois	68.0%	23 rd					
Wisconsin	70.6%	16 th					
Missouri	66.7%	27 th					
United States	68.1%	n/a					

Source: Corporation for National and Community Service, Volunteering in America 2007

Table 1.12 Volu	Table 1.12 Volunteer rates for young adults (16-24), college students, baby boomers (b. 1946-1964), and older adults (65 and older) by state, 2006							
State	You	ing Adult	Colleg	ge Students	Baby	Boomers	Old	er Adults
	Rate	Nat. Rank	Rate	Nat. Rank	Rate	Nat. Rank	Rate	Nat. Rank
Indiana	25.6%	25 th	35.1%	15 th	33.8%	26 th	26.3%	20 th
Michigan	29.6%	11 th	38.1%	10 th	38.1%	16 th	23.1%	36 th
Ohio	25.7%	24 th	33.2%	18 th	32.6%	31 st	26.3%	20 th
Kentucky	26.5%	18 th	35.4%	14 th	33.2%	29 th	24.7%	30 th
Illinois	23.1%	32 nd	30.2%	33 rd	35.9%	21 st	23.5%	34 th
Wisconsin	32.5%	6 th	38.2%	9 th	41.1%	12 th	32.7%	10 th
Missouri	26.0%	21 st	34.8%	16 th	36.2%	20 th	26.8%	17 th
United States	23.4%	n/a	29.6%	n/a	32.2%	n/a	24.4%	n/a

Source: Corporation for National and Community Service, Volunteering in America 2007

Table 1.13 Where do people in Indiana volunteer? (% breakdown by type of organization, 1989 and 2006)							
Type of organization	1989	2006					
Civic, political, professional, or international	11.4%	5.9%					
Educational or youth service	13.3%	24.1%					
Hospital or other health	12.3%	7.8%					
Religious	41.5%	38.5%					
Social or community service	6.9%	13.3%					
Sport, hobby, cultural, or arts	6.2%	2.4%					
Other	8.4%	7.9%					

Source: Corporation for National and Community Service, Volunteering in America 2007

Table 1.14 Volunteers by selected characteristics, U.S. (9/2003 vs. 9/2007)					
Characteristic	Septen	nber 2003	Septer	nber 2007	
	Number (in	% of population	Number (in	% of population	
	thousands)		thousands)		
Total	63791	28.8%	60838	26.2%	
Sex					
Men	26805	25.1%	25724	22.9%	
Women	36987	32.2%	35114	29.3%	
Age					
16 to 24	8671	24.1%	7798	20.8%	
25 to 34	10337	26.5%	9019	22.6%	
35 to 44	15165	34.7%	12902	30.5%	
45 to 54	13302	32.7%	13136	30.1%	
55 to 64	8170	29.2%	9316	28.4%	
65 and over	8146	23.7%	8667	23.8%	
Race/ethnicity					
White	55572	30.6%	52586	27.9%	
Black or African American	5145	20.0%	5010	18.2%	
Asian	1735	18.7%	1887	17.7%	
Hispanic	4364	15.7%	4279	13.5%	
Educational Attainment					
Less than HS diploma	2793	9.9%	2394	9.0%	
HS grad, no college	12882	21.7%	11379	18.6%	
Some college or AA degree	15966	34.1%	15468	30.7%	
Bachelor's degree or higher	23481	45.6%	23799	41.8%	
Employment Status					
Employed	43138	31.2%	41708	28.3%	
Unemployed	2361	26.7%	1697	23.2%	
Not in labor force	18293	24.6%	17433	22.3%	

Source: U.S. Census, September 2007 Supplement to Current Population Survey; sponsored by Corporation for National and Community Service

Table 1.15 Percent of total volunteers by number of organizations for which volunteer activities were performed, U.S. (September 2007)						
Total volunteers (in thousands)	Number of organizations					
	One Two Three Four Five or more Not reporting					
60838	68.8%	19.7%	7.3%	2.5%	1.4%	0.3%

Source: U.S. Census, September 2007 Supplement to Current Population Survey; sponsored by Corporation for National and Community Service

Table 1.16 What do people do when they volunteer? (Main volunteer activity for main organization for which activities were performed, U.S., September 2007)					
Type of Volunteer Activity	Percent Distribution				
Coach, referee, or supervise sports teams	5.8%				
Tutor or teach	10.8%				
Mentor youth	5.8%				
Be an usher, greeter, or minister	4.2%				
Collect, prepare, distribute, or serve food	9.2%				
Collect, make, or distribute clothing, crafts, or goods other than food	3.2%				
Fundraise or sell items to raise money	10.9%				
Provide counseling, medical care, fire/EMS, or protective services	3.1%				
Provide general office services	4.7%				
Provide professional or management assistance, including serving on a board or committee	7.6%				
Engage in music, performance, or other artistic activities	4.4%				
Engage in general labor; supply transportation to people	8.3%				
Other	14.3%				
Equal time among all	7.7%				

Source: U.S. Census, September 2007 Supplement to Current Population Survey; sponsored by Corporation for National and Community Service

Table 1.17 How do people get involved in volunteering? (Volunteers by how they became involved with main organization for which activities were performed, U.S., September 2007)					
How Became Involved Percent Distribution					
Approached the organization	40.1%				
Asked by boss or employer	1.3%				
Asked by relative, friend, or co-worker	14.8%				
Asked by someone in the organization/school	27.2%				
Asked by someone else	1.2%				
Other 12.7%					
Not reporting	2.6%				

Source: U.S. Census, September 2007 Supplement to Current Population Survey; sponsored by Corporation for National and Community Service

ISSUE 3: TRANSITIONING OF EX-OFFENDERS INTO COMMUNITY AND FAMILY

The number of inmates participating in the Indiana Department of Correction Community Transition Program increased every year from 2002 to 2007. Overall, 86 of 92 Indiana counties participate in the program. The percentage of offenders who successfully complete the program is approximately 82%. Additionally, over 9,000 offenders participate in Community Corrections Programs annually, a number that grew steadily between 2000 and 2004. Of particular concern to inmates being released into the community is mental illness. Estimates of 6 to 20% of individuals in various forms of incarceration have mental illness concerns.

Table 1.18 Estimates of inmates with mental disorders

Estimate of 16.2% of state inmates had a mental illness (source: Bureau of Justice Statistics, 1997) 9.0% of men and 18.5% of women entering local jails have a history of serious mental illness; 6.1% of men and 15% of women in local jails had current symptoms of serious mental disorders (Teplin and colleagues, 1994, 1996, 1997)

At least 20% of youth in the juvenile justice system have serious mental illness, and up to 75% have some mental, emotional, or behavioral health problems (Goldstrom, Jaiquan, Henderson, Male & Manderscheid, 2000). In a study by Teplin and colleagues (2002), nearly two thirds of males and nearly three quarters of females met diagnostic criteria for one or more psychiatric disorders.

Table 1.19 Indiana	Department of	Correction C	ommunity Tra	nsition Progran	n Average Daily	/ Populations
Month	2002	2003	2004	2005	2006	2007
January	168	298	328	408	398	424
February	175	298	300	401	383	415
March	179	297	323	391	367	424
April	194	294	312	384	392	405
May	205	308	324	369	388	416
June	204	315	311	376	392	444
July	196	311	304	379	384	470
August	199	309	324	385	386	441
September	206	299	343	398	386	426
October	231	296	349	410	419	436
November	231	288	384	415	450	461
December	271	305	418	402	430	466
Yearly Average	205	301	337	393	398	436

Source: Indiana Department of Correction, Community Transition Program Database

Table 1.20 Number of offenders in Community Corrections Programs (Indiana)					
Year	Year Quarter				
	1 st	2 nd	3 rd	4 th	
2000-2001	1652	1177	1414	1916	6159
2001-2002	1913	1814	2073	2026	7826
2002-2003	2215	2140	2322	2387	9064
2003-2004	2306	2183	2462	2322	9273

Source: Indiana Department of Correction

Table 1.21 Facts about Indiana Community Transition Program				
Total no. of offenders released to CTP since inception	4909			
No. of counties to accept offenders into CTP	86			
Percentage of eligible offenders released in 2004	32.4%			
Average length of stay in program	76.3 days			
Percentage of offenders who successfully complete CTP	81.9%			
Total number of bed nights reduced by CTP	354,423			

Source: Indiana Department of Correction

Domain II: Alcohol and Drugs

The following section presents secondary data sources applicable to Domain II: Alcohol and Drugs. As shown in Table 2.1, underage use of drugs other than alcohol or tobacco is the top ranked priority need in this domain and eleventh overall in all counties combined. Adult drug use, the second highest need in this domain, was viewed as a priority by 48% of respondents. A number of other issues in the alcohol and drugs domain were rated very similarly by respondents, both in the high/low and high/high quadrants. In this domain, driving under alcohol/drug influence use was seen as the greatest strength area, with 56.2% rating it in the high/high quadrant. Three other issues, adult alcohol abuse, drug and alcohol and related crimes, and underage tobacco use, were all rated in the high/high quadrant by over 50% of respondents. Secondary data for this domain are presented in Tables 2.2 to 2.62. Note that data are presented in the order in which issues within the domain were listed on the needs assessment survey.

Table 2.1 All Counties: Alcohol and Drugs Domain Note: Issues are sorted by the HL Rank (High in importance and Low in how the issue is being addressed) Do not Importance-Being Addressed **Overall Mean Ratings** know how **Response Patterns** well issue Overall How well issue is Rank based is being HL нн LH LL **Importance Item from Needs Assessment** being addressed addressed on Response Ν Rank Rank Rank Mean Rank Mean Pattern % % % % Ν Ν Ν % 11 Underage use of drugs other than 1174 51.50 43.40 4.60 .40 2 3.60 1558 8 2.38 1201 340 22.06 alcohol or tobacco 18 Adult drug use 1171 2 48.00 7 46.40 4.70 .90 4 3.57 1545 7 2.42 1207 320 20.96 23 1173 46.30 5 47.20 4.70 3.55 1537 Underage alcohol use 3 1.80 5 6 2.46 1204 304 20.16 29 Drug and alcohol related crimes 1202 4 43.80 3 51.20 3.60 1.30 2 3.60 1577 5 2.51 1226 315 20.44 32 Adult alcohol abuse 1198 5 41.50 2 52.50 4.10 1.90 6 3.47 1578 2 2.53 1225 328 21.12 33 22.05 Underage tobacco use 1134 6 40.50 51.00 5.10 3.30 3.41 1512 2 2.53 1177 333 4 Driving under alcohol/drug influence 1499 36 1209 39.70 1 56.20 2.80 1.30 3.61 1 2.57 1243 237 16.01 44 34.20 1543 Adult tobacco use 1146 8 6 46.90 10.40 8.60 8 3.14 4 2.52 1178 369 23.85

ISSUE 5: ADULT ALCOHOL ABUSE

The percentage of binge drinkers in Indiana was approximately 16% in 2007. This represents a slight increase in binge drinking since 2001, although the rate has shown small fluctuations in the past seven years. Overall, males represent a higher percentage of binge drinkers than females. However, the rate for males has decreased slightly, whereas the rate for females has increased by over four percentage points over the same seven-year period.

The percentage of heavy drinkers in Indiana was 4.6% in 2007, which represents very little change since 2001. Overall, males are more likely to be heavy drinkers than females.

On the whole, the spending on alcohol for consumption outside and inside the home in Indiana is greater than the amount for the United States. However, the total spending per household as a percent of median household income is lower for Indiana than the United States average. This figure is typically lower for counties in the study, with the exception being Vanderburgh, which is 7th of all Indiana counties in spending on alcohol as a percentage of household income.

Table 2.2 Per household spending or	ars)	
Туре	Indiana	United States
Spending on alcohol for consumption outside the home	\$664.9	\$621.7
Spending on alcohol for consumption in the home	\$367.2	\$343.4
Total spending on alcohol	\$1032.1	\$965.1
Median household income	\$54272	\$48277
Total spending per household as % of median	1.90%	2.00%
household income		

Source: Indiana Prevention Resource Center, PREV-STAT

Table 2.3 Per household spending on alcohol, Gibson County, 2006 est. (in dollars)						
Type	Gibson	Indiana	United States			
Spending on alcohol for consumption outside the home	\$513.6	\$664.9	\$621.7			
Spending on alcohol for consumption in the	\$284.2	\$367.2	\$343.4			
home	<u> </u>	<u> </u>				
Total spending on alcohol	\$797.8	\$1032.1	\$965.1			
Median household income	\$42339	\$54272	\$48277			
Total spending per household as % of	1.88% (35 th out of 92	1.90%	2.00%			
median household income	counties)					

Source: Indiana Prevention Resource Center, PREV-STAT

Table 2.4 Per household spending on alcohol, Posey County, 2006 est. (in dollars)					
Type	Posey	Indiana	United States		
Spending on alcohol for consumption outside the home	\$568.8	\$664.9	\$621.7		
Spending on alcohol for consumption in the home	\$315.1	\$367.2	\$343.4		
Total spending on alcohol	\$883.9	\$1032.1	\$965.1		
Median household income	\$50862	\$54272	\$48277		
Total spending per household as % of median household income	1.74% (83 rd out of 92 counties)	1.90%	2.00%		

Source: Indiana Prevention Resource Center, PREV-STAT

Table 2.5 Per household spending on alcohol, Spencer County, 2006 est. (in dollars)					
Туре	Spencer	Indiana	United States		
Spending on alcohol for consumption outside	\$540.4	\$664.9	\$621.7		
the home					
Spending on alcohol for consumption in the	\$299.5	\$367.2	\$343.4		
home					
Total spending on alcohol	\$839.9	\$1032.1	\$965.1		
Median household income	\$48595	\$54272	\$48277		
Total spending per household as % of	1.73% (85 th out of 92	1.90%	2.00%		
median household income	counties)				

Source: Indiana Prevention Resource Center, PREV-STAT

Table 2.6 Per household spending on alcohol, Vanderburgh County, 2006 est. (in dollars)					
Туре	Vanderburgh	Indiana	United States		
Spending on alcohol for consumption outside	\$556.0	\$664.9	\$621.7		
the home					
Spending on alcohol for consumption in the	\$306.9	\$367.2	\$343.4		
home					
Total spending on alcohol	\$862.9	\$1032.1	\$965.1		
Median household income	\$42050	\$54272	\$48277		
Total spending per household as % of	2.05% (7 th out of 92	1.90%	2.00%		
median household income	counties)				

Source: Indiana Prevention Resource Center, PREV-STAT

Table 2.7 Per household spending on alcohol, Warrick County, 2006 est. (in dollars)					
Туре	Warrick	Indiana	United States		
Spending on alcohol for consumption outside the home	\$629.5	\$664.9	\$621.7		
Spending on alcohol for consumption in the home	\$349.0	\$367.2	\$343.4		
Total spending on alcohol	\$978.5	\$1032.1	\$965.1		
Median household income	\$56199	\$54272	\$48277		
Total spending per household as % of median household income	1.74% (81 st out of 92 counties)	1.90%	2.00%		

Source: Indiana Prevention Resource Center, PREV-STAT

Table 2.8 Percent of adults who are binge drinkers* by gender, Indiana, 2001-2007			
Year		% Binge Drinkers	
	All	Male	Female
2001	13.8%	22.1%	6.2%
2002	15.9%	24.0%	8.6%
2003	15.1%	22.8%	8.0%
2004	14.5%	22.3%	7.3%
2005	14.3%	21.6%	7.6%
2006	16.0%	22.4%	10.1%
2007	15.6%	21.1%	10.5%
% Rate Change 2001-2007	+1.8%	-1.0%	+4.3%

*Binge drinking: males having five or more drinks on one occasion; females having four or more drinks Source: CDC, Behavioral Risk Factor Surveillance System

Table 2.9 Percent of adults who are heavy drinkers* by gender, Indiana, 2001-2007			
Year		% Heavy Drinkers	
	All	Male	Female
2001	4.4%	6.0%	3.0%
2002	5.4%	7.0%	3.9%
2003	5.7%	7.2%	4.2%
2004	4.9%	5.9%	3.9%
2005	4.1%	5.0%	3.2%
2006	5.0%	6.0%	4.1%
2007	4.6%	6.4%	2.9%
% Rate Change 2001-2007	+0.2%	+0.4%	-0.1%

^{*}Heavy drinking: adult men having more than two drinks per day and adult women having more than one drink per day

Source: CDC, Behavioral Risk Factor Surveillance System

Table 2.10 Percent of adults who reported current drinking* by gender, Indiana, 2001-2007			
Year		% Current Drinkers	
	All	Male	Female
2001	50.1%	59.6%	41.5%
2002	52.5%	61.2%	44.4%
2003	52.1%	60.3%	44.3%
2004	50.0%	58.5%	42.0%
2005	50.1%	57.8%	42.9%
2006	48.0%	55.4%	41.0%
2007	50.4%	58.7%	42.6%
% Rate Change 2001-2007	-2.1%	-4.2%	-0.5%

^{*}Current drinking: adults who have had at least one drink of alcohol in the past 30 days Source: CDC, Behavioral Risk Factor Surveillance System

Percent of adults who reported current drinking by gender, Indiana, 2001-2007

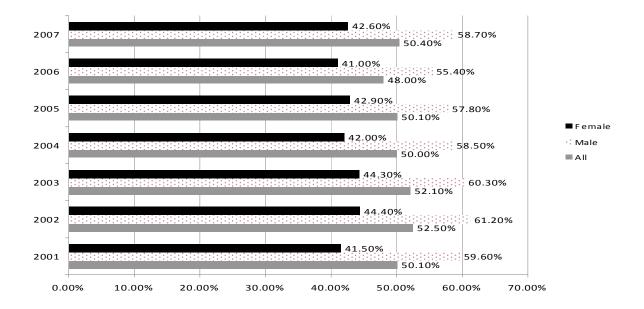


Figure 2.10

ISSUE 6: UNDERAGE TOBACCO USE

The percentage of youth in the United States, Indiana, and southwestern Indiana who use cigarettes on a daily and monthly basis decreased between 1999 and 2007. This decrease was particularly evident around the turn of the century, and rates of cigarette use have decreased somewhat less in the past four to six years.

The rate of smokeless tobacco use in the U.S. decreased between 1995 and 2005. The greatest decrease was witnessed in the mid 1990s, with the rate remaining somewhat steady since that time. For Indiana, the most recent CDC Youth Risk Behavior Survey data indicates the rate of smokeless tobacco increased slightly between 2003 and 2005.

Table 2.11 Percent of students using cigarettes on daily basis by grade, Southwestern Indiana, 1999-2007			
Grade/Year	Southwestern IN	State	National
8 th Grade			
1999	8.2%	10.6%	8.1%
2003	5.2%	7.2%	4.5%
2005	6.5%	6.7%	4.4%
2007	4.3%	5.5%	4.0%
% Change 1999-2007	-47.6%	-48.1%	-50.6%
10 th Grade			
1999	17.3%	20.6%	15.9%
2003	14.0%	13.7%	8.9%
2005	11.8%	12.5%	8.3%
2007	11.2%	11.4%	7.6%
% Change 1999-2007	-35.3%	-44.7%	-52.2%
12 th Grade			
1999	27.3%	27.6%	23.1%
2003	18.8%	18.7%	15.8%
2005	17.3%	16.4%	15.6%
2007	12.2%	14.7%	12.2%
% Change 1999-2007	-55.3%	-46.7%	-47.2%

Source: Indiana Prevention Resource Center, Survey of Alcohol, Tobacco, and Other Drug Use by Indiana Children and Adolescents

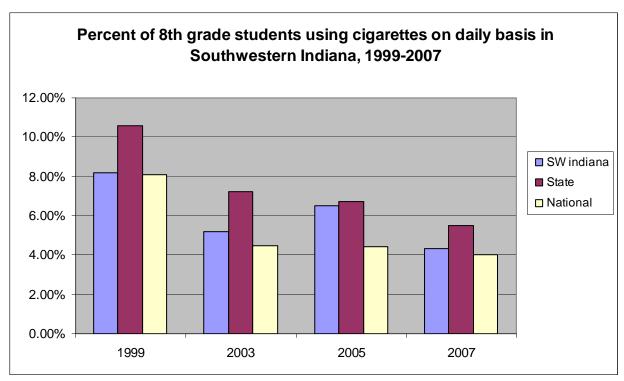


Figure 2.11a

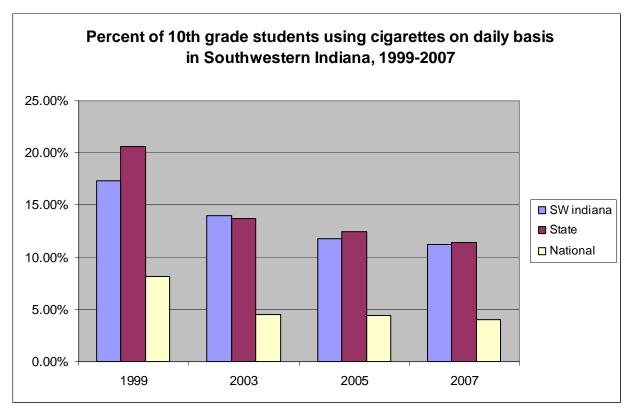


Figure 2.11b

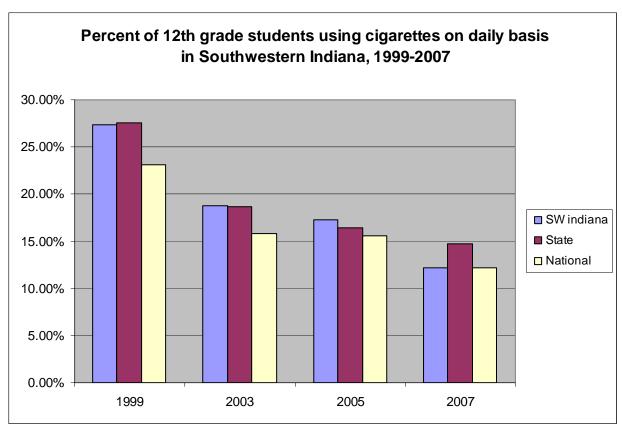


Figure 2.11c

Table 2.12 Percent of students using cigarettes on monthly basis by grade, Southwestern Indiana, 1999-2007			
Grade/Year	Southwestern IN	State	National
8 th Grade			
1999	17.6%	19.7%	17.5%
2003	11.0%	14.0%	10.2%
2005	12.3%	12.5%	9.2%
2007	9.0%	10.8%	8.7%
% Change 1999-2007	-48.9%	-45.2%	-50.3%
10 th Grade			
1999	30.4%	31.5%	25.7%
2003	22.4%	22.2%	16.7%
2005	20.5%	20.8%	16.0%
2007	19.7%	19.3%	14.5%
% Change 1999-2007	-35.2%	-38.7%	-43.6%
12 th Grade			
1999	40.5%	40.5%	34.6%
2003	29.6%	28.8%	24.4%
2005	28.0%	26.5%	25.0%
2007	22.5%	24.3%	21.6%
% Change 1999-2007	-44.4%	-40.0%	-37.6%

Source: Indiana Prevention Resource Center, Survey of Alcohol, Tobacco, and Other Drug Use by Indiana Children and Adolescents

Table 2.13 Percent of youth (9 th – 12 th grade) reporting current cigarette use*, U.S., 1991-2005		
Percent of Students		
27.5%		
30.5%		
34.8%		
36.4%		
34.8%		
28.5%		
21.9%		
23.0%		
-16.4%		

^{*}Current cigarette use: smoked cigarettes on > or = of the 30 days preceding the survey Source: CDC, National Youth Risk Behavior Survey

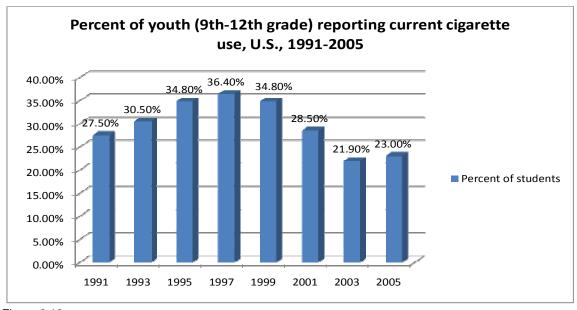


Figure 2.13

Table 2.14 Percent of youth (9 th – 12 th grade) reporting current smokeless tobacco use*, U.S., 1995-2005		
Year	U.S.	Indiana
1995	11.4%	not reported
1997	9.3%	not reported
1999	7.8%	not reported
2001	8.2%	not reported
2003	6.7%	7.2%
2005	8.0%	8.6%
% Change 1995-2005	-29.8%	+19.4%**

^{*}Current smokeless tobacco use: used chewing tobacco, snuff, or dip on > or = 1 of the 30 days preceding the survey
**% change for 2003-2005

Source: CDC, National Youth Risk Behavior Survey

ISSUE 7: DRUG AND ALCOHOL RELATED CRIMES

Between 2001 and 2004, the number of meth lab seizures in Indiana increased considerably. However, since 2004, that number has decreased. Data provided by the Indiana Prevention Resource Center and the Indiana State Police indicate that between 2001 and 2006, there were 401 meth lab seizures in Posey County, which was the largest total of the five-county study area. Vanderburgh County had 382 seizures, followed by Gibson County with 257. Additionally, between 2003 and 2007, the number of drug violation arrest in Indiana that were reported by the Drug Enforcement Agency fluctuated between a low of 327 and a high of 422.

Table 2.15 Number of meth lab seizures, Indiana, 2001-2006		
Year	No. of Seizures	
2001	542	
2002	988	
2003	1278	
2004	1549	
2005	1303	
2006	993	

Source: Indiana Prevention Resource Center, PREV-STAT; Indiana State Police

Table 2.16 Number of meth lab seizures, Gibson County, 2001-2006		
Year	No. of Seizures	
2001	15	
2002	41	
2003	21	
2004	52	
2005	72	
2006	56	

Source: Indiana Prevention Resource Center, PREV-STAT; Indiana State Police

Table 2.17 Number of meth lab seizures, Posey County, 2001-2006		
Year	No. of Seizures	
2001	7	
2002	72	
2003	99	
2004	91	
2005	78	
2006	54	

Source: Indiana Prevention Resource Center, PREV-STAT; Indiana State Police

Table 2.18 Number of meth lab seizures, Spencer County, 2001-2006		
Year	No. of Seizures	
2001	5	
2002	12	
2003	9	
2004	15	
2005	9	
2006	13	

Source: Indiana Prevention Resource Center, PREV-STAT; Indiana State Police

Table 2.19 Number of meth lab seizures, Vanderburgh County, 2002-2006		
Year	No. of Seizures	
2002	133	
2003	99	
2004	69	
2005	46	
2006	35	

Source: Indiana Prevention Resource Center, PREV-STAT; Indiana State Police

Table 2.20 Number of meth lab seizures, Warrick County, 2001-2006	
Year	No. of Seizures
2001	4
2002	8
2003	6
2004	6
2005	4
2006	6

Source: Indiana Prevention Resource Center, PREV-STAT; Indiana State Police

Table 2.21 Number of drug violation arrests as reported by the DEA, Indiana, 2003-2007	
Year	No. of Arrests
2003	385
2004	391
2005	333
2006	422
2007	327

Source: U.S. Drug Enforcement Administration

ISSUE 8: ADULT DRUG USE

In the United States, illicit drug and marijuana use remained largely unchanged between 2002 and 2005. In Indiana, illicit drug and marijuana use fluctuated between 2002 and 2005, with decreases from 2002 to 2004 and an increase in 2005. This pattern was consistent for the 18-25 and 26 and older age groups. Compared to surrounding states, Indiana was higher than the majority in terms of illicit drug use and in the middle to bottom half when comparing rates of marijuana use.

In Indiana, 41% of the eligible population that is served by the Division of Mental Health and Addiction are classified as chronically addicted. This percentage is higher in all five of the counties included in the needs assessment study than the state, with Posey and Spencer counties having the highest rates.

On the national level, the total expenditures for substance abuse treatment remained consistent between 1986 and 2003. However, a noticeable shift was seen in the use of two primary types of treatment; there was decrease in expenditures related to specialty hospitals and an increase in expenditures related to specialty substance abuse centers. All other areas remained consistent.

Table 2.22 Percentage of eligible population that is served by Indiana DMHA that are classified as chronically addicted adults, July 1, 2004-June 30, 2005				
Location	% Chronically Addicted Adults			
Indiana	41.0%			
Gibson County	46.1%			
Posey County	78.5%			
Spencer County	75.3%			
Vanderburgh County	54.9%			
Warrick County	61.1%			

Source: Indiana Family and Social Services Administration, Division of Mental Health and Addiction

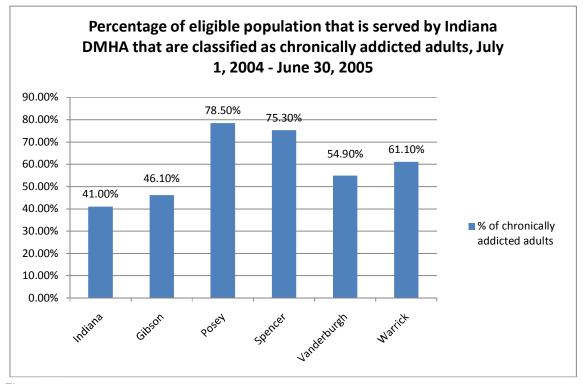


Figure 2.22

Table 2.23 National health expenditures for substance abuse treatment by type of expenditure and percent of total						
expendi	ture, United Sta	ates, selected	years 1986-20	003 (amounts in	n millions)	
Type of expenditure	1986	1990	1995	2000	2002	2003
Total expenditures	\$9302	\$12075	\$15561	\$17545	\$19867	\$20740
	(94.4%)	(94.2%)	(93.8%)	(93.9%)	(93.4%)	(93.2%)
General non-specialty	\$2995	\$3167	\$3764	\$3649	\$4132	\$4359
hospitals	(32.2%)	(26.2%)	(24.2%)	(20.8%)	(20.8%)	(21.0%)
Specialty hospitals	\$1453	\$1346	\$1315	\$736	\$738	\$676
	(15.6%)	(11.1%)	(8.5%)	(4.2%)	(3.7%)	(3.3%)
Pyschiatrists	\$237	\$328	\$410	\$510	\$428	\$540
	(2.6%)	(2.7%)	(2.6%)	(2.9%)	(2.2%)	(2.6%)
Non-psychiatric	\$448	\$577	\$638	\$902	\$1127	\$1131
physicians	(4.8%)	(4.8%)	(4.1%)	(5.1%)	(5.7%)	(5.5%)
Other professionals	\$1451	\$1685	\$1652	\$2076	\$2372	\$2636
	(15.6%)	(14.0%)	(4.1%)	(11.8%)	(11.9%)	(12.7%)
Freestanding nursing	\$106	\$126	\$179	\$254	\$292	\$301
homes	(1.1%)	(1.0%)	(1.1%)	(1.4%)	(1.5%)	(1.5%)
Freestanding home health	\$2	\$3	\$16	\$10	\$3	\$4
_	(0.0%)	(0.0%)	(0.1%)	(0.1%)	(0.0%)	(0.0%)
Multi-service mental	\$325	\$657	\$1012	\$1492	\$1312	\$1246
health organizations	(3.5%)	(5.4%)	(6.5%)	(8.5%)	(6.6%)	(6.0%)
Specialty substance	\$1761	\$3490	\$5605	\$6845	\$8156	\$8441
abuse centers	(18.9%)	(28.9%)	(36.0%)	(39.0%)	(41.1%)	(40.7%)
Retail prescription drug	\$14	\$19	\$33	\$67	\$89	\$98
	(0.1%)	(0.2%)	(0.2%)	(0.4%)	(0.4%)	(0.5%)
Insurance administration	\$512	\$679	\$937	\$1005	\$1220	\$1307
	(5.5%)	(5.6%)	(6.0%)	(5.7%)	(6.1%)	(6.3%)

Source: Mark, T.L. et al., Substance Abuse and Mental Health Services Administration

Table 2.24 Illio	Table 2.24 Illicit drug use in past month for age groups 18-25 and 26+, Indiana and surrounding states, 2002-2005							
Location		Ages	18-25			Ages 26	and older	
	2002-	2003-	2004-	2005-	2002-	2003-	2004-	2005-
	2003	2004	2005	2006	2003	2004	2005	2006
Indiana	20.67%	18.36%	18.52%	20.14%	5.45%	4.99%	4.98%	5.68%
Michigan	21.22%	21.79%	22.03%	21.06%	6.42%	6.29%	6.11%	6.39%
Ohio	20.64%	19.76%	19.48%	19.62%	5.42%	5.42%	5.47%	5.65%
Kentucky	18.43%	19.76%	18.21%	17.22%	6.15%	6.24%	6.35%	4.91%
Illinois	20.22%	19.46%	18.65%	18.48%	4.80%	5.30%	5.23%	5.01%
Wisconsin	18.85%	19.16%	19.18%	18.74%	4.98%	5.19%	4.97%	4.83%
Missouri	21.37%	18.87%	18.28%	19.02%	6.90%	5.81%	5.32%	5.78%

Source: SAMHSA, Office of Applied Studies, *National Survey on Drug Use and Health*, 2002, 2003, 2004, 2005

Table 2.25	Table 2.25 Marijuana use in past month for age groups 18-25 and 26+, Indiana and surrounding states, 2002-2005							
Location		Ages	18-25		Ages 26 and older			
	2002-2003	2003-2004	2004-2005	2005-2006	2002-2003	2003-2004	2004-2005	2005-2006
Indiana	17.19%	14.70%	14.37%	15.60%	3.91%	3.63%	3.24%	3.63%
Michigan	18.49%	18.99%	18.57%	16.99%	4.95%	4.95%	4.51%	4.47%
Ohio	18.22%	16.62%	16.00%	16.59%	4.17%	3.99%	4.07%	4.23%
Kentucky	14.15%	15.47%	14.68%	13.96%	3.82%	4.58%	4.45%	3.24%
Illinois	17.43%	16.64%	15.94%	15.36%	3.23%	3.72%	3.63%	3.38%
Wisconsin	15.98%	15.89%	16.45%	15.77%	3.18%	3.55%	3.85%	3.65%
Missouri	18.55%	16.47%	14.90%	14.35%	4.59%	4.33%	3.60%	3.70%

Source: SAMHSA, Office of Applied Studies, *National Survey on Drug Use and Health*, 2002, 2003, 2004, 2005

Table	Table 2.26 Marijuana use in past year for age groups 18-25 and 26+, Indiana and surrounding, 2002-2005							
Location		Ages 1	8-25		Ages 26 and older			
	2002-2003	2003-2004	2004-2005	2005-2006	2002-2003	2003-2004	2004-2005	2005-2006
Indiana	28.44%	28.64%	27.60%	26.60%	6.48%	6.52%	5.81%	5.85%
Michigan	32.38%	32.08%	32.41%	32.59%	8.55%	8.68%	8.04%	8.07%
Ohio	30.34%	27.81%	27.31%	28.26%	6.96%	6.47%	6.65%	7.21%
Kentucky	26.21%	24.57%	24.20%	24.56%	6.78%	7.48%	6.96%	5.72%
Illinois	29.61%	28.04%	27.11%	26.46%	5.90%	6.88%	6.47%	5.88%
Wisconsin	30.00%	29.26%	29.91%	29.61%	5.61%	6.54%	6.80%	6.35%
Missouri	31.48%	29.97%	27.00%	24.90%	7.87%	8.04%	7.07%	7.01%

Source: SAMHSA, Office of Applied Studies, *National Survey on Drug Use and Health*, 2002, 2003, 2004, 2005

Table 2.27	Table 2.27 Use of illicit drugs and marijuana in past month by age group, U.S. (2002, 2004,					
			2005)			
Age Group		Any Illicit Drug Marijuana				
	2002	2004	2005	2002	2004	2005
18-25	20.2%	19.4%	20.1%	17.3%	16.1%	16.6%
26-34	10.5%	11.1%	11.0%	7.7%	8.3%	8.6%
35 and older	4.6%	4.2%	4.5%	3.1%	3.1%	3.0%

Source: CDC, Health, United States, 2007

ISSUE 9: ADULT TOBACCO USE

Overall, the percentage of adults who are current smokers is higher in Indiana than the national median. This is consistent for all adult age groups. In 2007, Indiana had the 6th highest adult smoking rate in the nation. Compared to the seven-state surrounding area, Indiana ranks 3rd, behind Kentucky (ranked 1st nationally) and Missouri (ranked 4th nationally). Indiana's smoking rate is highest for individuals with less than a high school education, which has an approximately 40% rate. In comparison, 10.5% of college graduates reported smoking in 2007. In terms of race, the latest figures show similar smoking rates for various race/ethnic groups, although the rate for African Americans has historically been higher than other populations. While the adult smoking rate in Indiana is quite high, trend data do show an overall decrease in smoking in the past six to eight years.

Table 2.28 Percent of adults reporting current smoking, Indiana and surrounding metropolitan areas, 2006				
Location Percent Current Smokers				
United States	20.1%			
Indiana	24.1%			
Chicago-Naperville-Joliet IL, IN, WI	19.1%			
Cincinnati-Middletown, OH, KY, IN	25.6%			
Indianapolis-Carmel, IN	22.5%			
Louisville, KY, IN	27.4%			

Source: CDC, Behavioral Risk Factor Surveillance System

Table 2.29 Percent of adults	Table 2.29 Percent of adults who are current smokers, U.S. median and Indiana, 2000-2007						
Year	Indiana	National Median					
2000	26.9%	23.2%					
2001	27.4%	23.2%					
2002	27.6%	23.2%					
2003	26.1%	22.0%					
2004	24.9%	20.9%					
2005	27.3%	20.6%					
2006	24.1%	20.0%					
2007	24.1%	19.7%					
% Change 2000-2007	-10.4%	-15.1%					

Source: CDC, Behavioral Risk Factor Surveillance System

Percent of adults who are current smokers, U.S. median and Indiana, 2000-2007

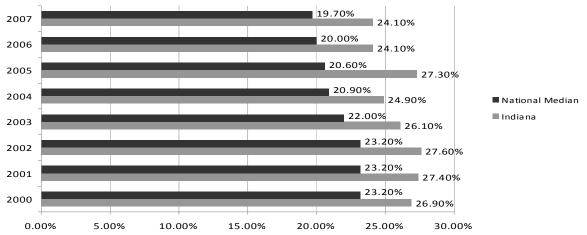


Figure 2.29

Table 2.30 Four-level smoking status, Indiana, 2004-2007						
Year	Smoke every day	Smoke some	Former smoker	Never smoked		
		days				
2004	19.5%	5.3%	22.6%	52.5%		
2005	20.8%	6.4%	22.9%	49.8%		
2006	18.6%	5.5%	23.3%	52.7%		
2007	18.2%	5.9%	22.8%	53.0%		

Source: CDC, Behavioral Risk Factor Surveillance System

Table 2.31 Adult smoking rates by age group, U.S. and Indiana, 2007					
Age Group	Indiana	U.S.			
18-24	29.8%	24.0%			
25-34	30.7%	23.9%			
35-44	25.8%	20.3%			
45-54	27.2%	22.2%			
55-64	21.7%	17.8%			
65+	9.5%	9.0%			

Source: CDC, Behavioral Risk Factor Surveillance System

Table 2.32 Smoking rates for 18-24 age group, Indiana, 2002-2007					
Year	Smoking Rate				
2002	37.6%				
2003	32.0%				
2004	28.2%				
2005	39.0%				
2006	34.6%				
2007	29.8%				
% Change 2002-2007	-20.7%				

Source: CDC, Behavioral Risk Factor Surveillance System; Indiana Tobacco Prevention and Cessation

Table 2.33 Smoking rates for adults with less than a high school education level, Indiana, 2002-2007				
Year	Smoking Rate			
2002	42.7%			
2003	37.9%			
2004	41.7%			
2005	49.3%			
2006	44.5%			
2007	39.9%			
% Change 2002-2006	-6.6%			

Source: CDC, Behavioral Risk Factor Surveillance System; Indiana Tobacco Prevention and Cessation

Table 2.34 Adult smoking rates by education level, Indiana, 2007		
Education Level	Smoking Rate	
Less than high school education	39.9%	
High school or GED	28.8%	
Some post high school	25.3%	
College graduate	10.5%	

Source: CDC, Behavioral Risk Factor Surveillance System

	Table 2.35 Adult smoking rates by race/ethnicity, Indiana, 2002-2007						
Race/ethnicity	2002	2003	2004	2005	2006	2007	% Change
							2002-2007
White	27.3%	25.3%	24.4%	26.1%	23.9%	24.0%	-12.1%
African-American	27.6%	31.8%	27.4%	36.8%	27.0%	22.9%	-17.0%
Hispanic	24.5%	27.1%	22.9%	33.3%	23.1%	25.1%	+2.4%

Source: CDC, Behavioral Risk Factor Surveillance System; Indiana Tobacco Prevention and Cessation

Table 2.36 Indiana adult smoking rates compared to surrounding states, 2007			
Location	Smoking Rate	National Rank	
U.S.	19.7%	n/a	
Indiana	24.1%	6 th	
Michigan	21.1%	17 th	
Ohio	23.1%	8 th	
Kentucky	28.2%	1 st	
Illinois	20.1%	22 ^{na}	
Wisconsin	19.6%	27 th	
Missouri	24.5%	4 th	

Source: CDC, Behavioral Risk Factor Surveillance System

ISSUE 10: UNDERAGE ALCOHOL USE

In assessing alcohol consumption among 8th, 10th, and 12th graders, the 2007 rate in Indiana was generally higher than the national rate. When comparing southwestern Indiana with the state at large, youth alcohol consumption rates are generally slightly lower for 8th graders in this part of the state than in the state of Indiana overall. However, the rates for 10th and 12th graders in southwestern Indiana are slightly higher than those in Indiana in general. Data provided by the Indiana Prevention Resource Center and Youth First, Inc., as well as the CDC Youth Risk Behavior Survey, suggest that alcohol consumption among youth in Indiana and the United States has declined over the past several years. This includes daily/monthly use and binge drinking. It should be noted, though, that the National Institute on Alcohol Abuse and Alcoholism reports an increase in binge drinking among youth in the United States, which would warrant a more in-depth investigation of the data.

Table 2.37 Percent of students using alcohol on daily basis by grade, Southwestern Indiana, 1999-2007			
Grade/Year	Southwestern IN	State	National
8 th Grade	Codinwesterning	Otato	rational
1999	1.5%	2.1%	1.0%
2003	1.7%	2.1%	0.8%
2005	1.7%	1.8%	0.6%
2007	0.9%	1.8%	0.5%
% Change 1999-2007	-40.0%	-14.3%	-50.0%
10 th Grade			
1999	4.4%	4.5%	1.9%
2003	3.6%	4.0%	1.5%
2005	4.0%	3.6%	1.3%
2007	3.2%	3.4%	1.4%
% Change 1999-2007	-27.3%	-24.4%	-26.3%
12 th Grade			
1999	7.5%	7.1%	3.4%
2003	7.3%	6.0%	3.2%
2005	6.7%	5.4%	2.8%
2007	4.2%	4.6%	3.0%
% Change 1999-2007	-44.0%	-35.2%	-11.8%

Source: Indiana Prevention Resource Center, Survey of Alcohol, Tobacco, and Other Drug Use by Indiana Children and Adolescents

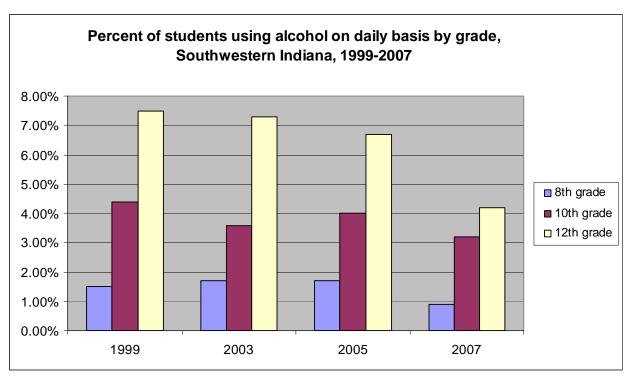


Figure 2.37

Table 2.38 Percent of students using alcohol on monthly basis by grade,					
	Southwestern Indiana, 1999-2007				
Grade/Year	Southwestern IN	State	National		
8 th Grade					
1999	29.1%	27.7%	24.0%		
2003	23.2%	24.3%	19.7%		
2005	22.6%	21.1%	18.6%		
2007	17.1%	19.9%	17.2%		
% Change 1999-2007	-41.2%	-28.2%	-28.3%		
10 th Grade					
1999	44.0%	41.6%	40.0%		
2003	39.2%	36.9%	35.4%		
2005	37.2%	33.0%	35.2%		
2007	34.4%	31.1%	33.8%		
% Change 1999-2007	-21.8%	-25.2%	-15.5%		
12 th Grade					
1999	50.8%	51.7%	51.0%		
2003	50.8%	46.1%	47.5%		
2005	51.7%	41.8%	48.0%		
2007	42.3%	39.7%	45.3%		
% Change 1999-2007	-16.7%	-23.2%	-11.2%		

Source: Indiana Prevention Resource Center, Survey of Alcohol, Tobacco, and Other Drug Use by Indiana Children and Adolescents

Table 2.39 Percent of s	students reporting binge of		nwestern Indiana, 1999-
Grade/Year	Southwestern IN	State	National
8 th Grade			•
1999	18.4%	19.5%	15.2%
2003	12.2%	13.4%	11.9%
2005	12.2%	11.6%	11.4%
2007	10.3%	13.2%	10.9%
% Change 1999-2007	-44.0%	-32.3%	-28.3%
10 th Grade			
1999	28.2%	28.8%	25.6%
2003	22.4%	21.8%	22.2%
2005	19.9%	19.3%	22.0%
2007	23.0%	21.7%	21.9%
% Change 1999-2007	-18.4%	-24.7%	-14.5%
12 th Grade			
1999	36.8%	36.3%	30.8%
2003	32.3%	29.3%	27.9%
2005	32.7%	25.9%	29.2%
2007	31.5%	28.6%	26.5%
% Change 1999-2007	-14.4%	-21.2%	-14.0%

^{*}Binge drinking: five or more drinks in one sitting within two weeks of the taking the survey Source: Indiana Prevention Resource Center, Survey of Alcohol, Tobacco, and Other Drug Use by Indiana Children and Adolescents

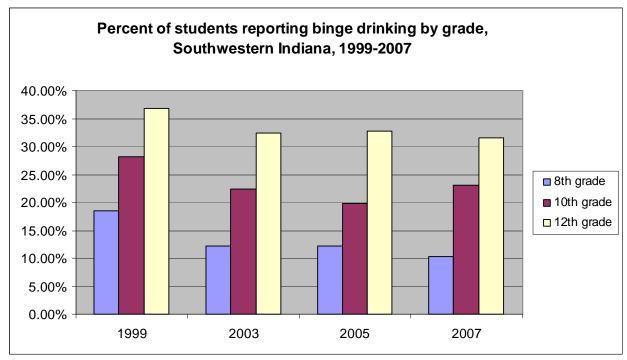


Figure 2.39

Table 2.40 Percent of youth (9 th through 12 th	grade) currently using alcohol*, U.S., 1991-2005
Year	Current Alcohol Use
1991	50.8%
1993	48.0%
1995	51.6%
1997	50.8%
1999	50.0%
2001	47.1%
2003	44.9%
2005	43.3%
% Change 1991-2005	-14.8%

^{*}Current alcohol use: had at least one drink of alcohol on > or = 1 of the 30 days preceding the survey Source: CDC, *National Youth Risk Behavior Survey*

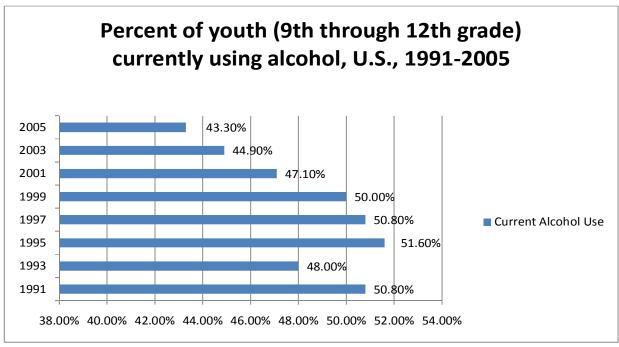


Figure 2.40

Table 2.41 Prevalence of drinking in the past 30 days, U.S., 1991-2005				
			Age	
Year	12-20	12-14	15-17	18-20
1991	33.4%	10.5%	29.95	57.0%
1993	28.6%	7.5%	28.9%	49.9%
1995	30.7%	12.1%	30.4%	52.1%
1997	31.3%	10.6%	30.3%	53.4%
1999	27.7%	6.8%	26.3%	49.2%
2001	28.5%	7.0%	27.5%	50.6%
2003	29.3%	7.7%	28.0%	52.4%
2005	28.3%	6.4%	26.3%	51.5%
% Change 1991-2005	-15.3%	-39.0%	-12.0%	-9.6%

Source: Alcohol Epidemiologic Data System-Surveillance Report #81-Trends in Underage Drinking, National Institute on Alcohol Abuse and Alcoholism

Table 2.42 Prevalence of binge drinking in the past 30 days, U.S., 1991-2005				
			Age	
Year	12-20	12-14	15-17	18-20
1991	15.2%		12.7%	30.0%
1993	12.1%		10.9%	24.8%
1995	13.9%	3.3%	12.6%	27.6%
1997	14.8%	2.4%	14.1%	28.3%
1999	17.8%	2.8%	16.2%	33.9%
2001	18.6%	2.8%	17.4%	35.4%
2003	18.9%	3.3%	17.1%	36.5%
2005	18.6%	2.7%	16.5%	36.3%
% Change 1991-2005	+22.4%	-18.2%	+29.9%	+21.0%

Source: Alcohol Epidemiologic Data System-Surveillance Report #81-Trends in Underage Drinking, National Institute on Alcohol Abuse and Alcoholism

ISSUE 11: UNDERAGE USE OF DRUGS OTHER THAN ALCOHOL OR TOBACCO

In terms of marijuana use, trend data show that rates rose substantially in the mid 1990s but began a slight decline at the turn of the century. In the past five to seven years, marijuana use among youth has decreased in the United States, Indiana, and southwestern Indiana. In most grade levels for the period of 1999 to 2007, daily and monthly marijuana use in Indiana was slightly higher overall compared to the national rate. Comparing southwestern Indiana to Indiana as a state, results are mixed. While this region largely mirrors the state, a detailed analysis indicates there are slight differences depending on the grade level and degree of use.

As for other drug use, 2007 results indicate that monthly use rates in southwestern Indiana rae similar to those in Indiana overall. Lifetime use is also similar, with a small number of drugs and grade levels showing differences that are deemed statistically significantly different by Indiana Prevention Resource Center. Among the other drugs used by 8th, 10th, and 12th graders, inhalants, Ritalin, tranquilizers, narcotics, and over-the-counter drugs are most prevalent. Finally, it is apparent that there is access to drugs across many schools in the United States, with nearly 30% of students indicating in 2005 that they were offered, sold, or given an illegal drug on school property by someone in the past 12 months.

Table 2.43 Percent of students reporting daily marijuana use by grade, Southwestern Indiana, 1999-2007			
Grade/Year	Southwestern IN	State	National
8 th Grade			
1999	2.0%	2.3%	1.4%
2003	2.3%	2.6%	1.0%
2005	2.4%	2.4%	0.8%
2007	1.3%	2.0%	1.0%
% Change 1999-2007	-35.0%	-13.0%	-28.6%
10 th Grade			
1999	5.1%	6.5%	3.8%
2003	6.4%	5.6%	3.6%
2005	5.4%	5.0%	3.2%
2007	5.1%	4.6%	2.8%
% Change 1999-2007	0.0%	-29.2%	-26.3%
12 th Grade			
1999	8.0%	8.2%	6.0%
2003	7.8%	7.4%	6.0%
2005	7.1%	6.3%	5.6%
2007	5.3%	5.3%	5.0%
% Change 1999-2007	-33.8%	-35.4%	-16.7%

Source: Indiana Prevention Resource Center, Survey of Alcohol, Tobacco, and Other Drug Use by Indiana Children and Adolescents

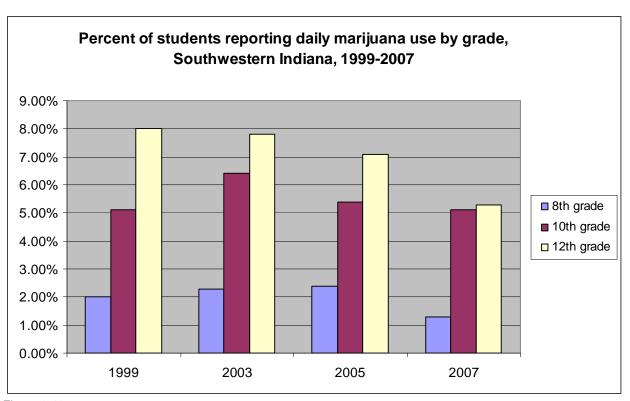


Figure 2.43

Table 2.44 Percent of stu	dents reporting monthly	marijuana use by grade,	Southwestern Indiana, 1999-2007
Grade/Year	Southwestern IN	State	National
8 th Grade			
1999	10.9%	11.3%	9.7%
2003	8.8%	10.6%	7.5%
2005	10.3%	9.3%	6.4%
2007	7.3%	8.3%	6.5%
% Change 1999-2007	-33.0%	-26.5%	-33.0%
10 th Grade			
1999	20.4%	21.1%	19.4%
2003	20.2%	18.2%	17.0%
2005	20.1%	16.0%	15.9%
2007	17.1%	14.4%	14.2%
% Change 1999-2007	-16.2%	-31.8%	-26.8%
12 th Grade			
1999	25.7%	23.5%	23.1%
2003	19.6%	19.8%	21.2%
2005	21.4%	17.8%	19.9%
2007	16.2%	15.8%	18.3%
% Change 1999-2007	-37.0%	-32.8%	-20.8%

Source: Indiana Prevention Resource Center, Survey of Alcohol, Tobacco, and Other Drug Use by Indiana Children and Adolescents

Table 2.45 Percent of youth (9 th through 12 th grade) currently using marijuana*, U.S., 1991-2005		
1991	14.7%	
1993	17.7%	
1995	25.3%	
1997	26.2%	
1999	26.7%	
2001	23.9%	
2003	22.4%	
2005	20.25%	
Percent Change 1991-2005	+37.4%	

Current marijuana use: used marijuana one or more of the 30 days preceding the survey Source: CDC, *National Youth Risk Behavior Survey*

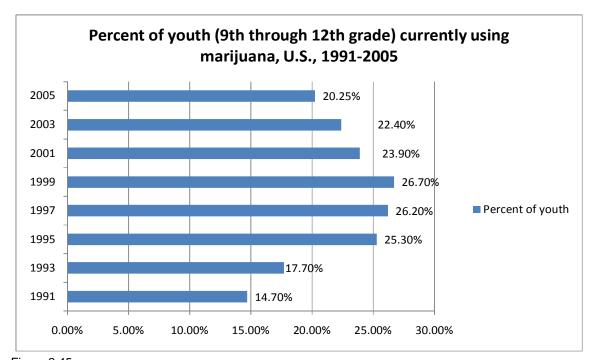


Figure 2.45

Table 2.46 Percent of youth (Qth through)	12 th grade) currently using cocaine*, U.S., 1991-2005
rable 2.40 refeelt of youth (9 through	12 grade) currently using cocame, 0.5., 1991-2005
1991	1.7%
1993	1.9%
1995	3.1%
1997	3.3%
1999	4.0%
2001	4.2%
2003	4.1%
2005	3.4%
Percent Change 1991-2005	+100%

Current cocaine use: used any form of cocaine one or more times during the 30 days preceding the survey.

Source: CDC, National Youth Risk Behavior Survey

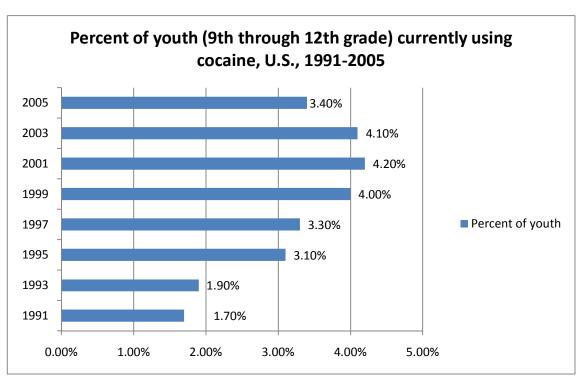


Figure 2.46

Table 2.47 Percentage of 8 th , 10 th , and 12 th grade students reporting monthly use of selected drugs,									
Indiana and Southwest Indiana, 2007									
Drug	8 th C	Grade	10 th	Grade	12 ^{tt}	[↑] Grade			
	IN	SWIN	IN	SWIN	IN	SWIN			
Cocaine	1.1%	0.8%	1.9%	1.5%	2.4%	1.4%			
Inhalants	3.7%	4.4%	2.5%	2.4%	1.5%	1.4%			
Amphetamines	1.4%	1.2%	2.9%	3.0%	2.5%	2.1%			
Methamphetamines	0.7%	0.7%	1.0%	0.9%	1.0%	0.9%			
Ritalin	1.9%	1.9%	3.7%	3.9%	2.9%	3.2%			
Tranquilizers	3.9%	3.7%	5.0%	5.2%	4.0%	3.3%			
Narcotics	2.1%	1.6%	3.9%	3.3%	3.8%	3.3%			
Over the Counter Drugs	5.2%	4.8%	5.9%	6.3%	4.3%	3.8%			

Source: Indiana Prevention Resource Center, Survey of Alcohol, Tobacco, and Other Drug Use by Indiana Children and Adolescents

Table 2.48 Percentage of 8 th , 10 th , and 12 th grade students reporting lifetime use of selected drugs, Indiana and Southwest Indiana, 2007									
Drug		Grade		Grade	1	12 th Grade			
	IN	SWIN	IN	SWIN	IN	SWIN			
Cocaine	2.4%	1.7%	5.8%	5.1%	7.8%	7.1%			
Inhalants	10.5%	11.4%	10.6%	12.2%	8.5%	9.4%			
Amphetamines	3.0%	2.8%	8.2%	8.2%	9.0%	8.8%			
Methamphetamines	1.6%	1.2%	3.0%	3.2%	3.4%	4.1%			
Ritalin	4.5%	4.7%	10.6%	12.0%	11.3%	12.2%			
Tranquilizers	9.1%	8.5%	13.6%	14.1%	12.9%	12.3%			
Narcotics	5.0%	4.1%	10.9%	10.2%	12.1%	10.9%			
Over the Counter Drugs	10.2%	9.2%	14.4%	14.8%	13.5%	13.4%			

Source: Indiana Prevention Resource Center, Survey of Alcohol, Tobacco, and Other Drug Use by Indiana Children and Adolescents

Table 2.49 Percentage of students who were offered, sold, or given an illegal drug on school property by someone during the past 12 months, U.S., 2003 and 2005						
Year Percent						
2003	28.3%					
2005	28.9%					
% Change 2003-2005	+2.1%					

Source: CDC, National Youth Risk Behavior Survey

ISSUE 12: DRIVING UNDER ALCOHOL/DRUG INFLUENCE

The percentage of youth in the United States who reported driving a vehicle under the influence of alcohol in the past 30 days decreased between 1991 and 2005, with the rate dropping below 10% for the first time in 14 years. Males have substantially higher drinking and driving rates than females. The rate for Indiana declined slightly between 2003 and 2005. However, the overall 2005 rate was still higher than the nation rate.

The percentage of adults in Indiana who reported drinking and driving decreased slightly overall when comparing the 1999 rates to those in 2006.

The percentage of youth who indicated they had ridden with someone who had been drinking has decreased since 1991. As indicated by data from 2006, citation rates for young drivers in Indiana who were operating a vehicle while intoxicated was almost twice as high as the national rate for drivers over 21.

In Indiana in 2006, approximately 11% of youth driver fatalities involved alcohol, and 3% of all collisions involved young drivers who had been drinking. Nationally, the percentage of all traffic crash fatalities between 1995 and 2004 that were alcohol related remain largely unchanged, with approximately 40% involving a driver under the influence.

Table 2.50 Number of citations for all drivers and young drivers that involved operating vehicle							
while intoxicated, Indiana, 2006							
Age Level No. of Citations							
All drivers	7772						
Young drivers (<21)	843						
Older drivers (21+)	6896						

Source: Indiana State Police, Vehicle Crash Records System; Indiana Bureau of Motor Vehicles

Table 2.51 Citation rates for all drivers and young drivers that involved operating vehicle while intoxicated, Indiana, 2006 (rates per 100,000 licensed drivers)						
Age Level Citation Rates						
All drivers	146					
Young drivers (<21)	271					
Older drivers (21+)	138					

Source: Indiana State Police, Vehicle Crash Records System; Indiana Bureau of Motor Vehicles

Table 2.52 Young drivers and alcohol use, Indiana, 2006									
Type	All young	Н	ad been drinking		Intoxicated				
	drivers	Count	% of all young drivers	Count	% of 'had been drinking'				
All collisions	51887	1539	3.0%	530	34.4%				
Male	27739	1090	3.9%	408	37.4%				
Female	23934	412	1.7%	117	28.4%				
Driver fatalities	89	10	11.2%	9	90.0%				
Restrained	29	1	3.4%	1	11.1%				
Not restrained	51	8	15.7%	7	77.8%				
Curfew hour collisions	895	105	11.7%	39	37.1%				

Source: Indiana State Police, Vehicle Crash Records System; Indiana Bureau of Motor Vehicles

Table 2.53 Alcohol-related fatalities, alcohol testing, and BAC results (g/dL), Indiana, 2006 and 2003 to								
2006 average								
	2006 2003 to 2006 Average							
	Alcohol-related % No. of Fatalities			atalities	% Fatals	% Fatalities Tested		
	Fatalities		Fatalities			Alcohol-		
Total Fatalities	Count	Percent	Tested	> .00	.08+	related		
				BAC	BAC			
Mean=10	3	29.3%	48.8%	2	2	26.9%	54.0%	

Source: Indiana State Police

Table 2.54 Alcohol-related fatalities, alcohol testing, and BAC results (g/dL), Gibson County, 2006 and 2003 to 2006 average									
2006 2003 to 2006 Average									
		l-related alities	% Fatalities	No. of Fatalities		% Fatals Alcohol-	% Fatalities Tested		
Total Fatalities	Count	Percent	Tested	> .00 BAC	.08+ BAC	related			
10	1	10.0%	70.0%	1	1	10.3%	58.3%		

Source: Indiana State Police

Table 2.55 Alcohol-related fatalities, alcohol testing, and BAC results (g/dL), Posey County, 2006 and 2003 to 2006 average									
2006 2003 to 2006 Average									
		l-related alities	% Fatalities	No. of Fatalities		% Fatals Alcohol-	% Fatalities Tested		
Total Fatalities	Count	Percent	Tested	> .00 BAC	.08+ BAC	related			
4	1	25.0%	25.0%	0	0	63.2%	66.7%		

Source: Indiana State Police

Table 2.56 Alcohol-related fatalities, alcohol testing, and BAC results (g/dL), Spencer County, 2006 and 2003 to 2006 average									
	2006 2003 to 2006 Average								
		l-related alities	% Fatalities	No. of F	-atalities	% Fatals Alcohol-	% Fatalities Tested		
Total Fatalities	Count	Percent	Tested	> .00 BAC	.08+ BAC	related			
9	3	33.3%	44.4%	2	2	34.4%	39.8%		

Source: Indiana State Police

Table 2.57 Alcohol-related fatalities, alcohol testing, and BAC results (g/dL), Warrick County, 2006 and 2003 to 2006 average									
2006 2003 to 2006 Average									
		l-related alities	% Fatalities	No. of Fatalities		% Fatals Alcohol-	% Fatalities Tested		
Total Fatalities	Count	Percent	Tested	> .00 BAC	.08+ BAC	related			
3	1	33.3%	33.3%	1	0	28.8%	66.2%		

Source: Indiana State Police

Table 2.58 Alcohol-related fatalities, alcohol testing, and BAC results (g/dL), Vanderburgh County, 2006								
and 2003 to 2006 average								
2006						2003 to 20	006 Average	
	Alcoho	l-related	%	% No. of Fatalities			% Fatalities	
	Fata	alities	Fatalities	Fatalities			Tested	
Total Fatalities	Count	Percent	Tested	> .00	.08+	related		
			BAC BAC					
24	5	20.8%	54.2%	3	2	34.0%	42.3%	

Source: Indiana State Police

Table 2.59 Percent of youth (9 th through 12 th grade) who rode with a driver who had been drinking alcohol*, U.S., 1991-2005					
Year	U.S.	Indiana			
1991	39.9%	no data			
1993	35.3%	no data			
1995	38.8%	no data			
1997	36.6%	no data			
1999	33.1%	no data			
2001	30.7%	no data			
2003	30.2%	28.3%			
2005	28.5%	24.6%			
% Change 1991-2005	-28.6%	-13.1%**			

^{*}In a car or other vehicle one or more times during the 30 days preceding the survey
**% change for 2003-2005
Source: CDC, National Youth Risk Behavior Survey

Table 2.60 Traffi	Table 2.60 Traffic crash fatalities and alcohol-related traffic crash fatalities, U.S., 1995-2004							
Year	Traffic Crash	Alcohol-related traffic	% of all Traffic Crash					
	Fatalities	crash fatalities	Fatalities					
2004	42836	16919	39.5%					
2003	42884	17105	39.9%					
2002	43005	17524	40.7%					
2001	42196	17400	41.2%					
2000	41945	17380	41.4%					
1999	41717	16572	39.7%					
1998	41501	16673	40.2%					
1997	42013	16711	39.8%					
1996	42065	17749	42.2%					
1995	41817	17732	42.4%					

Source: National Traffic Highway Safety Administration, Fatality Analysis Reporting System (FARS)

Table 2.61 Percentage of students who during the past 30 days drove a vehicle 1 or more times when they had been drinking alcohol, U.S. and Indiana, 1991-2005						
Location/Year	Total	Female	Male			
U.S.						
1991	16.7%	11.7%	21.5%			
1993	13.5%	9.1%	17.6%			
1995	15.4%	11.9%	18.5%			
1997	16.9%	12.0%	21.0%			
1999	13.1%	8.7%	17.4%			
2001	13.3%	9.5%	17.2%			
2003	12.1%	8.9%	17.2%			
2005	9.9%	8.1%	11.7%			
% Change 1991-2005	-40.7%	-30.8%	-45.6%			
Indiana*						
2003	12.4%	10.8%	14.1%			
2005	11.2%	7.3%	15.0%			
% Change 2003-2005	-10.0%	-32.4%	+6.4%			

^{*}Data for Indiana only available for 2003 and 2005 Source: CDC, *National Youth Risk Behavior Survey*

Table 2.62 Percentage of adults who reported drinking and driving by gender, Indiana, 1999, 2002, 2004, 2006							
Year	Total	Men	Women				
1999	3.2%	5.3%	1.3%				
2002	2.4%	3.7%	1.2%				
2004	2.3%	3.6%	1.2%				
2006	2.8%	4.2%	1.5%				
% Change 1999-2006	-40.0%	-20.8%	+15.4%				

Source: CDC, Behavioral Risk Factor Surveillance Survey

Domain III: Economy and Financial Well Being

The following section presents secondary data sources applicable to Domain III: Economy and Financial Well Being. As shown in Table 3.1, families' understanding of finances, budgeting, and tax credits is the top ranked priority need in this domain and second overall in all counties combined. Affordable in-home care for the elderly also is viewed as a need, ranking ninth overall and seen as a priority by 52% of respondents. The issues that ranked third through sixth in this domain were rated very similarly by respondents in the high/low quadrant. In this domain, two issues stand out as strengths of the community: availability of jobs for physically and mentally challenged individuals and availability of food and shelter for the homeless. Over 55% of respondents rated these issues as strengths. Secondary data for this domain are presented in Tables 3.2 to 3.138. Note that data are presented in the order in which issues within the domain were listed on the needs assessment survey.

Table 3.1 All Counties: Economy and Financial Well Being Domain Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)

Overall			Importance-Being Addressed Response Patterns					Overall Mean Ratings				Do not know how well issue				
Rank based on	Item from Needs Assessment		HL		НН		LL	LH	Importance		nce	How well issue is being addressed			is being addressed	
Response Pattern		N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
2	Families understanding of finances, budgeting, and tax credits	1072	1	59.00	8	30.40	9.10	1.40	6	3.38	1520	8	2.18	1101	447	28.88
9	Affordable in-home care for the elderly	987	2	52.20	7	37.60	8.50	1.70	1	3.46	1484	7	2.26	1020	522	33.85
19	Affordable child care	1117	3	47.00	4	44.80	6.40	1.80	1	3.46	1508	4	2.38	1148	382	24.97
20	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food,	1163	4	46.90	5	43.30	7.30	2.60	4	3.42	1553	5	2.35	1189	358	23.14
24	Affordable and accessible public transportation	1157	5	45.50	6	41.50	9.80	3.30	8	3.30	1484	6	2.29	1190	298	20.03
30	Affordable and available care for the physically disabled	992	6	43.50	3	48.00	7.40	1.10	4	3.42	1479	3	2.40	1015	520	33.88
38	Availability of food and shelter for the homeless	1211	7	37.30	2	55.60	4.90	2.20	3	3.43	1549	1	2.59	1235	312	20.17
45	Availability of jobs for mentally and physically challenged individuals	1011	8	34.00	1	55.90	7.80	2.30	7	3.34	1479	2	2.55	1042	504	32.60

ISSUE 13: AVAILABILITY OF FOOD AND SHELTER FOR THE HOMELESS

United States homeless statistics from 2005 show a disproportionate percentage of the sheltered homeless population is female. Approximately 34% of the sheltered households have children. In terms of race/ethnicity, a larger proportion of Hispanics and African Americans than exist in the population are identified as homeless. While difficult to measure the extent of homelessness, count from 2005 indicate that anywhere from approximately 314,000 to 415,000 individuals were in homeless shelters on a single day in the United States.

In terms of the nation's capacity to house homeless persons, the total number of programs increased by 23% between 1996 and 2005, and the total bed capacity increased by 6%. These increases were evident in permanent and transitional housing, while emergency shelter programs and beds actually experienced decreases. In 2005, there were over 31,000 emergency, transitional, and permanent housing beds under development nationwide, with over half of the total being permanent supportive housing.

Youth homelessness is a particular concern, with anywhere from 5 to 7.7% of youth experiencing homelessness each year in the United States. Almost one-third of the homeless population in the Evansville area are children.

Indiana homeless statistics show that almost 10,000 individuals were classified as homeless in 2005. Of those, over 2,000 were chronically homeless, which involves extended homelessness throughout the year. Compared to the seven-state surrounding area, Indiana had the second highest total homeless-aspercent-of-total-population rate. This rate of 0.16% was lower than the national rate of 0.30%, however.

For the period of October 1, 2006 to September 30, 2007, there were 1478 unduplicated individuals identified as homeless in the Evansville area. Of those, 955 were head of household, 467 were children, and 56 were spouses or significant others. As mentioned, over 30% of homeless individuals are children. On an average night, there were 215 persons in emergency shelters and 132 persons in temporary housing in 2006/2007. In terms of utilization rates of existing beds, the following were the percentage of beds utilized in the different types of housing programs on an average night in 2006/2007: emergency shelter family = 45%; emergency shelter individual = 90%; temporary housing family = 61%; and temporary housing individual = 84%. The median number of nights in shelters for adult females was between 35 and 28 for emergency shelters and 141 for temporary housing.

In addition to basic lack of housing, many homeless individuals in the Evansville area display a number of specific risk factors. A survey on January 25, 2005 showed that over 30% had alcohol and/or drug problems, over 13% were domestic violence victims, and over 40% were disabled.

Table 3.2 Number of sheltered homeless persons in the U.S. on a single day in 2005						
How many sheltered homeless persons were there	Total Number					
on April 30, 2005?	313722					
on an average day between February1, 2005 and April 30, 2005?	334744					
on a single January day in 2005?	415366					

Source: HUD, Annual Homeless Assessment Report to Congress, February 2007

Table 3.3 Number of sheltered homeless persons and households between February 1 and April 30, 2005, U.S. Total Number Situation % of Sheltered Homeless Population Number of Sheltered Persons 704146 100% 65.7% Individuals and Persons in Households 462381 with No Children Persons in Households with Children 241765 34.3% Number of Sheltered Households with 72754 Children

Source: HUD, Annual Homeless Assessment Report to Congress, February 2007

Table 3.4 Demographic characteristics of s	sheltered homeless persons I to U.S. and poverty popula		30, 2005 period
Characteristic	% of Sheltered Homeless Population	% U.S. Poverty Population	% of U.S. Population
Gender of Adults	•	'	'
Female	34.7%	59.6%	51.7%
Male	65.3%	40.4%	48.3%
Gender of Children			•
Female	51.9%	49.2%	48.7%
Male	48.1%	50.8%	51.3%
Ethnicity			
Non-Hispanic/non-Latino	77.9%	77.0%	87.5%
Hispanic/Latino	22.1%	23.0%	12.5%
Race			
White, Non-Hispanic/non-Latino	41.1%	45.5%	69.1%
White, Hispanic/Latino	5.7%	10.1%	6.0%
Black or Áfrican-American	45.0%	24.0%	12.3%
Asian	1.2%	3.7%	3.6%
American Indiana or Alaska Native	1.7%	1.8%	0.9%
Native Hawaiian or Other Pacific Islander	0.2%	0.2%	0.1%
Some other race (alone)	0.0%	10.9%	5.5%
Multiple races	5.1%	3.8%	2.4%
Age			
Under 1	2.4%	2.2%	1.4%
1 to 5	8.7%	10.5%	6.9%
6 to 12	7.5%	14.8%	10.3%
13 to 17	4.0%	8.5%	7.1%
18 to 30	21.3%	22.9%	18.1%
31 to 50	41.3%	22.5%	30.3%
51 to 61	10.3%	7.3%	11.3%
62 and older	1.8%	11.3%	14.6%
Unknown	2.9%		
Persons by Household Size			
1 person	66.2%	37.1%	43.6%
2 people	10.6%	4.3%	2.0%
3 people	10.3%	12.1%	12.3%
4 people	6.8%	15.5%	19.3%
5 or more people	6.1%	31.0%	22.8%
Veteran (adults)	18.7%	8.9%	12.6%
Disabled (adults)	25.0%	31.9%	19.3%

Source: HUD, Annual Homeless Assessment Report to Congress, February 2007

Table 3.5 Indiana homeless statistics, 2005								
Emergency Shelter	Transitional Housing	Unsheltered	Total Homeless					
Population	Population	Population	Population					
3230	3849	2798	9877					

Source: 2005 HUD Continuum of Care Applications for Indiana

Table 3.5a Evansville/Knox, Vanderburgh Counties homeless statistics, 2005							
	Emergency Shelter	Transitional Housing	Unsheltered	Total Homeless			
	Population	Population	Population	Population			
	333	155	7	495			

Source: 2005 HUD Continuum of Care Applications for Evansville/Knox, Vanderburgh Counties CoC

Table 3.6 Indiana chronically homeless population*, 2005							
	Sheltered Population	Unsheltered Population	Total Population				
	1680	592	2272				

^{*}Chronically homeless: unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more, or has had at least four episodes of homelessness in the past three years

Source: 2005 HUD Continuum of Care Applications for Indiana

Table 3.7 Indiana emergency shelter numbers, 2005							
	Family Units	Family Beds	Individual	Total Year	Seasonal	Over-	
	-	-		Round		flow/Voucher	
	558	1965	2136	4152	71	1000	

Source: 2005 HUD Continuum of Care Applications for Indiana

Table 3.8 Indiana transitional housing numbers, 2005								
Family Units Family Beds Individual Total Year-Round								
-	-		Beds					
672	2032	2766	4925					

Source: 2005 HUD Continuum of Care Applications for Indiana

Table 3.9 Indiana permanent supportive housing							
Family Units Family Beds Individual Beds CH Beds Total Year-							
				Round Beds			
223	577	1823	304	2489			

Source: 2005 HUD Continuum of Care Applications for Indiana

Table 3.10 All agency housing programs, Evansville geographic area, 10/1/06 – 9/30/07								
Current Implementation Status, Evansville (10/1/07):	Including DV	Excluding DV						
Number of Beds Currently on the Housing Inventory Chart	551	505						
Current Data Entered in HMIS	401	401						
Current Percentage of Beds Entered in HMIS	73%	79%						
Number of Beds Needed for 75% Benchmark	414	379						

Source: Indiana Coalition on Housing and Homeless Issues, Hoosier Management Information System

3.10a HOMELESS STATUS All Agency Housing Programs Unduplicated Count, Head of Households, Evansville geographic area, 10/1/06 – 9/30/07 HOMELESS STATUS COUNT PERCENT Homeless (HUD Defined) Head of Household 100%

Source: Indiana Coalition on Housing and Homeless Issues, Hoosier Management Information System

3.10b INDIVIDUAL FAMILY TYPE All Agency Housing Programs Unduplicated Count, Evansville geographic area, 10/1/06 – 9/30/07								
INDIVIDUAL FAMILY TYPE	Count	Percent						
-No Data-	19	2.0%						
Adult Couple without Children	13	1.4%						
Individual Female	248	26.0%						
Individual Female Youth (< 18)	4	0.4%						
Individual Male	441	46.2%						
Single Parent Family - Female Head	175	18.3%						
Single Parent Family - Male Head	12	1.3%						
Two Parent Family - Adult	43	4.5%						
TOTAL HOUSEHOLDS WITH SPOUSE	56	6.0%						

Source: Indiana Coalition on Housing and Homeless Issues, Hoosier Management Information System

3.10c NUMBER OF CHILDREN IN HOUSEHOLD All Agency Housing Programs Unduplicated Count, Evansville geographic area, 10/1/06 – 9/30/07									
NUMBER OF CHILDREN HOUSEHOLD TOTAL PERCENT HOUSEHOLDS									
0	725	0	72.8%						
1	95	95	10.9%						
2	66	132	8.4%						
3	50	150	5.7%						
4	11	44	1.1%						
5	4	20	0.4%						
6	2	12	0.3%						
7 2 14 0									
TOTAL CHILDREN IN HOUSEHOLD	1148	467	100%						

Source: Indiana Coalition on Housing and Homeless Issues, Hoosier Management Information System

3.10d TOTAL HOMELESS HUD-DEFINED All Agency Housing Programs Unduplicated Count, Evansville geographic area, 10/1/06 – 9/30/07					
HOMELESS STATUS	COUNT	PERCENT			
Homeless (HUD Defined), Head of Household	955	65%			
Homeless (HUD Defined), Spouse, Significant Other	56	4%			
Homeless (HUD Defined), Children	467	31%			
TOTAL HOMELESS HUD-DEFINED	1478	100%			

Source: Indiana Coalition on Housing and Homeless Issues, Hoosier Management Information System

3.10e TOTAL HOMELESS HUD-DEFINED All Agency Housing Programs Unduplicated Count, Evansville geographic area, 10/1/06 – 9/30/07								
HOMELESS STATUS UNDUPLICATED COUNT DUPLICATED UNDUPLICATED UNDUPLICATED COUNT COUNT PROJECTED UNDUPLICATED COUNT COUNT COUNT								
Homeless (HUD Defined), Head of Household	955	2122	1308	2907				
Homeless (HUD Defined), Spouse, Significant Other	56	106	77	145				
Homeless (HUD Defined), Children	467	767	640	1051				
TOTAL INDIVIDUALS	1478	2995	2025	4103				

FOTAL INDIVIDUALS 1478 2995 2025 4
Source: Indiana Coalition on Housing and Homeless Issues, Hoosier Management Information System

Table 3.11a Number of persons in emergency shelters and temporary housing, Evansville geographic									
	area, selected time periods								
Time Period	I	Number of Persons (unduplicated counts)							
	Emergency	Emergency	Temp. Housing	Temp. Housing					
	Shelter Family	Shelter Individual	Family	Individual					
1 year count (Oct. 1 2006-	611	1267	237	94					
Sept. 30 2007)									
6-month count (Jan. 1-	350	738	182	63					
June 30 2007)									
On an average night	63	152	94	38					
Point-in-time Counts									
October 25, 2006	102	148	89	40					
January 31, 2007	70	136	104	41					
April 25, 2007	53	138	103	36					
July 25, 2007	47	154	88	34					

Source: Hoosier Management Information System, AHAR local data

Table 3.11b Number of families in emergency shelters and temporary housing, Evansville geographic area, selected time periods Temp. Housing Family Time Period **Emergency Shelter Family** 1 year count (Oct. 1 2006-Sept. 30 2007) 218 70 Point-in-time Counts October 25, 2006 26 30 January 31, 2007 21 28 April 25, 2007 48 0 July 25, 2007 46 0

Source: Hoosier Management Information System, AHAR local data

Table 3.12 Bed and family utilization rates, Evansville geographic area, selected time periods									
Time period		% of Beds Utilized							
	Emergency	Emergency Emergency Shelter Temp. Housing Temp. Housing							
	Shelter Family Individual Family Individual								
On an average night	45%	90%	61%	84%					
October 25, 2006	72%	88%	57%	89%					
January 31, 2007	50%	80%	67%	91%					
April 25, 2007	38% 81% 66% 80%								
July 25, 2007	34%	91%	57%	76%					

Source: Hoosier Management Information System, AHAR local data

Table 3.13 Percent of Family Units Utilized, Evansville geographic area, selected points in time Point in time Emergency Shelter Family Temp. Housing Family							
Point in time	Temp. Housing Family						
October 25, 2006	60%	81%					
January 31, 2007	42%	88%					
April 25, 2007	95%	0%					
July 25, 2007	91%	0%					

Source: Hoosier Management Information System, AHAR local data

Table 3.14 Length of stay in emergency shelters and temporary housing, Evansville geographic area, 2006-2007								
Category	Emergency Shelter Family	Emergency Shelter Individual	Temp. Housing Family	Temp. Housing Individual				
Median no. of nights in shelter for adult females	38	35	141	141				
Annual turnover (average no. of persons served per bed) in year	4.34	7.95	1.53	2.09				
% of persons who stayed over 180 nights in emergency shelter	6	29	n/a	n/a				

Source: Hoosier Management Information System, AHAR local data

	Table 3.15 Homeless Survey for January 25, 2005											
Average per day of:		rgency ers (10)	Transi Shelte		Emer Housi	gency ng (2)	Total h	oused	Non-h	oused		tal eless
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total Persons	333	67.3*	155	31.3*	0	0*	488	98.6*	7	1.4*	495	100
Families	39	55.7	31	44.3	0	0	70	100	0	0	70	100
Singles	218	65.5	40	25.8	0	0	258	52.9	7	100	265	53.5
Children < 18	70	21.0	82	52.9	0	0	152	31.1	0	0	152	30.7
Minorities	127	38.1	45	29.0	0	0	172	35.2	1	14.3	173	34.9
Severe mental	15	4.5	2	1.3	0	0	17	3.5	3	42.9	20	4.0
Illness												
Alcohol/drug	106	31.8	43	27.7	0	0	149	30.5	2	28.6	151	30.5
problems												
Dually diagnose*	10	3.0	5	3.2	0	0	15	3.1	0	0	11	22.2
Elderly	11	3.3	0	0	0	0	11	2.3	0	0	11	22.2
Domestic violence victims	36	10.8	30	19.4	0	0	66	13.5	0	0	66	13.3
AIDS & other related diseases	0	0	0	0	0	0	0	0	0	0	0	0
Disabled	15	4.5	6	3.9	0	0	21	4.3	0	0	21	42.4
Veterans	36	10.8	6	3.9	0	0	42	8.6	0	0	42	8.5
Chronically homeless**	79	23.7	4	2.6	0	0	83	17.0	0	0	83	16.8

Source: Department of Metropolitan Development, Summer 2006 Homeless Survey

	Ta	ble 3.16 Ho	omeless Su	rvey for the	week of	August 20	0 – 26, 20	06, Evans	ville area	1		
Average per day of:		ergency ers (10)	Transi Shelte			gency ng (2)	Total h	noused	Non-h	oused	Total Ho	meless
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total Persons	229	100	128	100	0	0	357	100	6	100	363	100
Families / % of households*	36	22	24	37	0	0	60	26	0	0	60	25
Adults in families	39	17	31	24	0	0	70	20	0	0	70	19
Children < 18	62	27	52	41	0	0	114	32	0	0	114	31
Singles	128	56	45	35	0	0	173	48	6	100	179	50
Minorities	72	31	53	41	0	0	125	35	0	0	125	34
Severe mental Illness	5	2	5	4	0	0	10	3	1	17	11	3
Alcohol/drug problems	27	12	42	33	0	0	69	19	4	67	73	20
Dually diagnose	2	1	3	2	0	0	5	1	0	0	5	1
Elderly	4	2	0	0	0	0	4	1	0	0	4	1
Domestic violence victims	38	17	17	13	0	0	55	15	0	0	55	15
AIDS & other related diseases	1	0	0	0	0	0	1	0	0	0	1	0
Disabled	15	7	3	2	0	0	18	5	0	0	18	5
Veterans	11	5	2	2	0	0	13	4	0	0	13	4
Chronically homeless	17	7	9	7	0	0	26	7	4	67	30	8

Source: Department of Metropolitan Development, Summer 2006 Homeless Survey

Table 3.17 Prior Living Situation of Persons Usin	g Homeless Residential Services in Februa	ary 1 to April 30, 2005 Period,
<u> </u>	U.S.	, , , , , , , , , , , , , , , , , , , ,
	% of Unaccompanied Individuals and	% of Adults in Households
	Adults in Families with No Children	with Children
Living arrangement the night before program		
entry		
Place not meant for human habitation	10.3%	2.3%
Emergency shelter or transitional housing	34.1%	36.7%
Permanent supportive housing	0.3%	0.3%
Psychiatric facility	1.3%	0.0%
Substance abuse treatment center or detox	3.4%	2.0%
Hospital (non-psychiatric)	1.1%	0.2%
Jail, prison, or juvenile detention	6.3%	0.9%
Rented housing unit	12.6%	16.7%
Owned housing unit	2.4%	3.1%
Staying with family	13.2%	19.4%
Staying with friends	9.4%	10.0%
Hotel or motel (no voucher)	1.5%	5.2%
Foster care home	0.3%	0.0%
Other living arrangement	3.8%	2.8%
Stability of previous night's living arrangement.		
Stayed there		
One week or less	15.0%	8.1%
More than one week, but less than a month	15.6%	12.4%
One to three months	21.8%	30.6%
More than three months, but less than a year	22.6%	29.8%
One year or longer	24.9%	19.1%
Number of Homeless Persons	462381	91329

Source: HUD, Annual Homeless Assessment Report to Congress, February 2007

Table 3.18 Change in nation's capacity to house homeless persons, 1996-2005						
	1996	2005	Change	% Change		
Total Number of Programs	15900	19500	3600	+23%		
Emergency Shelters	9600	6200	-3400	-35%		
Transitional Housing	4400	7400	3000	+68%		
Permanent Housing	1900	5900	4000	+211%		
Total Bed Capacity	607700	647000	39300	+6%		
Emergency Shelters	333500	217900	-115600	-35%		
Transitional Housing	160200	220400	60200	+38%		
Permanent Housing	114000	208700	94700	+83%		

Source: HUD, Annual Homeless Assessment Report to Congress, February 2007

Table 3.19 Number of emergency, transitional, and permanent supportive housing beds in homeless assistance system nationwide, 2005						
	Year-Round Units/Beds Other Beds					
	Family	Family	Individual	Total Year-	Seasonal	Overflow/
	Units	Beds	Beds	Round Beds	Beds	Voucher
Emergency Shelters-	30593	100730	117217	217947	24923	48622
Current Inventory						
Transitional Housing-	33580	115225	105140	220365		
Current Inventory						
Permanent Supportive	32159	84051	124602	208653		
Housing-Current						
Inventory						

Source: HUD, Annual Homeless Assessment Report to Congress, February 2007

Table 3.20 Number of emergency, transitional, and permanent supportive housing beds under development, U.S., 2005							
	Individual Beds Family Beds Total under Dvpt.						
Program Type	Under	% Beds	Under	% Beds	Under	% Beds	
	Dvpt.	Under Dvpt.	Dvpt.	Under Dvpt.	Dvpt.	Under Dvpt.	
Emergency Shelter	2442	15%	2180	15%	4622	15%	
Transitional Housing	3445	21%	4945	33%	8390	26%	
Permanent Supportive	10892	65%	7713	52%	18605	59%	
Housing							
Total Beds	16779	100%	14838	100%	31617	100%	

Source: HUD, Annual Homeless Assessment Report to Congress, February 2007

	Table 3.21 Evansville Homelessness Statistics, 2004
•	Average number of individuals in shelter or transitional housing on any given night in Evansville = 429
•	One-third of the 429 are children
•	At least 30-40 individuals are homeless and are living in places not meant for habitation or are doubled-up

Source: Summer 2004 Department of Metropolitan Development Point-in-Time Survey

Table 3.22 Homeless youth/family statistics, U.S.

- Although difficult to measure, it is estimated that between 5.0 and 7.7% of youth experience homelessness each year, with at least 1 million on the streets or in shelters (National Alliance to End Homelessness, 2007)
- The Congressional Research Service (2007) provides estimates of 52,000 to 1 + million homeless youth; runaway youth are estimated between 1 and 1.7 million
- It is estimated that between 17 to 35% of youth who become homeless do so after experiencing sexual abuse at home (1998 National Symposium on Homelessness Research, HUD, U.S. Department of Health and Human Services)
- Likewise, approximately 13% of homeless families said they left last place of residence because of abuse or violence (1999 Interagency Council on the Homeless, National Survey of Homeless Assistance Providers and Clients)

Table 3.23 Homelessness counts as % of total population, Indiana and surrounding states, 2005						
State	Total Homeless	% of Population				
Indiana	9857	0.16%				
Ohio	16165	0.14%				
Kentucky	4934	0.12%				
Illinois	16599	0.13%				
Michigan	26124	0.26%				
Wisconsin	6773	0.12%				
Missouri	7135	0.12%				
United States	744313	0.30%				

Source: National Alliance to End Homelessness, Homelessness Counts, January 2007

ISSUE 14: AFFORDABLE CHILD CARE

The total number of licensed child care centers and licensed child care homes in Indiana decreased between 2003 and 2007. The number of registered child care ministries increased during the same period. Totals for these three types of child care facilities show a net decrease of almost 600 individual programs between 2003 and 2007. This change was reflected in the decrease of total slots for children in licensed child care. Between 2003 and 2006, there was an almost 8,000-slot decrease. Per 100 children statewide, this represents a 7.4 negative percent change. Also during the same four-year period, there was a 22% decrease in the number of children in Indiana who received child care vouchers. Further, the number of monthly average of children on the waiting list for child care vouchers increased between 2003 and 2004, but decreased in the years thereafter.

In terms of child care costs, on average, the annual fees paid for full-time center care for an infant in Indiana in 2007 equaled \$9,005. The rate for a four-year-old child was \$7,001. The infant rate represents a 28.9% increase from 2004, and the four-year-old rate represents a 29.5% increase. The 2007 rate for an infant is 13% of the median income for married-couple families and 42% of the median income for a single parent. The married-couple percent-of-income figure is higher than 2004, when it was 10.9%. The single parent figure also is higher than 2004, when it was 33%.

Table 3.24 Number of Licensed Child Care Centers, Indiana, 2003-2007				
Year	No. of Licensed Centers			
2003	640			
2004	636			
2005	603			
2006	604			
2007	606			
Change 2003-2007	-34			

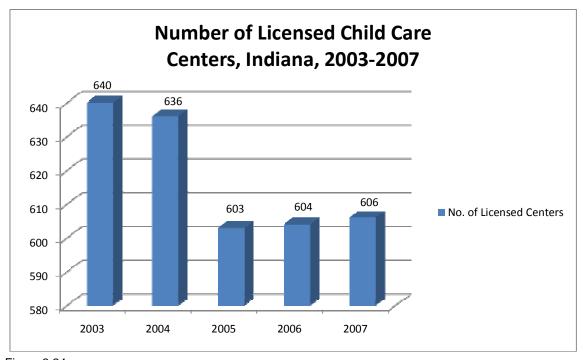


Figure 3.24

Table 3.25 Number of Licensed Child Care Centers, Gibson County and Indiana, 2003-2007					
Year	No. of Licensed Centers				
	Gibson County	Indiana			
2003	4	640			
2004	4	636			
2005	4	603			
2006	4	604			
2007	4	606			
Change 2003-2007	0	-34			

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.26 Number of Licensed Child Care Centers, Posey County and Indiana, 2003-2007					
Year	No. of Licensed Centers				
	Posey County	Indiana			
2003	3	640			
2004	3	636			
2005	3	603			
2006	3	604			
2007	3	606			
Change 2003-2007	0	-34			

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.27 Number of Licensed Child Care Centers, Spencer County and Indiana, 2003-2007					
Year	No. of Licensed Centers				
	Spencer County	Indiana			
2003	3	640			
2004	3	636			
2005	3	603			
2006	3	604			
2007	3	606			
Change 2003-2007	0	-34			

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.28 Number of Licensed Child Care Centers, Warrick County and Indiana, 2003-2007					
Year	No. of Licensed Centers				
	Warrick County	Indiana			
2003	5	640			
2004	5	636			
2005	5	603			
2006	4	604			
2007	5	606			
Change 2003-2007	0	-34			

Table 3.29 Number of Licensed Child Care Centers, Vanderburgh County and Indiana, 2003-2007		
Year	No. of Licensed Centers	
	Vanderburgh County	Indiana
2003	23	640
2004	23	636
2005	23	603
2006	22	604
2007	21	606
Change 2003-2007	-2	-34

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.30 Number of Licensed Child Care Homes, Indiana, 2003-2007	
Year	No. of Licensed Homes
2003	3608
2004	3168
2005	3020
2006	2958
2007	2992
Change 2003-2007	-616

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.31 Number of Licensed Child Care Homes, Gibson County and Indiana, 2003-2007		
No. of Licensed Homes		
Gibson County	Indiana	
36	3608	
28	3168	
26	3020	
28	2958	
29	2992	
-7	-616	
	No. of Licer Gibson County 36 28 26 28	

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.32 Number of Licensed Child Care Homes, Posey County and Indiana, 2003-2007		
Year	No. of Licensed Homes	
	Posey County	Indiana
2003	16	3608
2004	14	3168
2005	13	3020
2006	12	2958
2007	13	2992
Change 2003-2007	-3	-616

Table 3.33 Number of Licensed Child Care Homes, Spencer County and Indiana, 2003-2007		
Year	No. of Licensed Homes	
	Spencer County	Indiana
2003	12	3608
2004	12	3168
2005	12	3020
2006	12	2958
2007	9	2992
Change 2003-2007	-3	-616

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.34 Number of Licensed Child Care Homes, Vanderburgh County and Indiana, 2003-2007		
Year	No. of Licensed Homes	
	Vanderburgh County	Indiana
2003	154	3608
2004	142	3168
2005	134	3020
2006	137	2958
2007	128	2992
Change 2003-2007	-26	-616

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.35 Number of Licensed Child Care Homes, Warrick County and Indiana, 2003-2007		
Year	No. of Licensed Homes	
	Warrick County	Indiana
2003	44	3608
2004	39	3168
2005	38	3020
2006	40	2958
2007	42	2992
Change 2003-2007	-2	-616

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.36 Number of Registered Child Care Ministries, Indiana, 2003-2007	
Year	No. of Registered Ministries
2003	582
2004	644
2005	652
2006	622
2007	645
Change 2003-2007	+63

Table 3.37 Number of Registered Child Care Ministries, Gibson County and Indiana, 2003-2007		
Year	No. of Registered Ministries	
	Gibson County	Indiana
2003	2	582
2004	2	644
2005	3	652
2006	3	622
2007	3	645
Change 2003-2007	+1	+63

Table 3.38 Number of Registered Child Care Ministries, Posey County and Indiana, 2003-2007		
Year	No. of Registered Ministries	
	Posey County	Indiana
2003	0	582
2004	0	644
2005	0	652
2006	1	622
2007	1	645
Change 2003-2007	+1	+63

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.39 Number of Registered Child Care Ministries, Spencer County and Indiana, 2003-2007		
Year	No. of Registered Ministries	
	Spencer County	Indiana
2003	3	582
2004	3	644
2005	3	652
2006	4	622
2007	4	645
Change 2003-2007	+1	+63

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.40 Number of Registered Child Care Ministries, Vanderburgh County and Indiana, 2003-2007			
Year	No. of Re	No. of Registered Ministries	
	Vanderburgh County	Indiana	
2003	20	582	
2004	19	644	
2005	19	652	
2006	18	622	
2007	20	645	
Change 2003-2007	0	+63	

Table 3.41 Number of Registered Child Care Ministries, Warrick County and Indiana, 2003-2007		
No. of Registered Ministries		
Warrick County	Indiana	
2	582	
2	644	
3	652	
3	622	
3	645	
+1	+63	
	No. of Registe	

Table 3.42 Number of slots available for children in licensed child care, Indiana, 2003-2006 (total capacity)	
Year	No. of Available Slots
2003	104858
2004	100078
2005	96815
2006	97126
Change 2003-2006	-7737

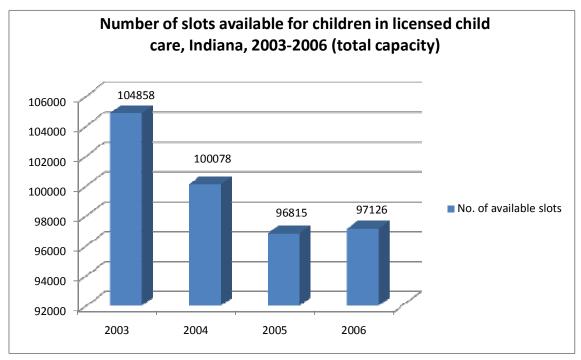


Figure 3.42

Table 3.43 Number of slots available for children in licensed child care, Gibson County and Indiana, 2003-		
	2006 (total capacity)	
Year	No. of Available Slots	
	Gibson County	Indiana
2003	819	104858
2004	723	100078
2005	703	96815
2006	716	97126
Change 2003-2006	-103	-7737

Table 3.44 Number of slots available for children in licensed child care, Posey County and Indiana, 2003-2006 (total capacity)		
Year No. of Available Slots		of Available Slots
	Posey County	Indiana
2003	459	104858
2004	437	100078
2005	426	96815
2006	416	97126
Change 2003-2006	-43	-7737

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.45 Number of slots available for children in licensed child care, Spencer County and Indiana, 2003-2006 (total capacity)		
Year No. of Available Slots		of Available Slots
	Spencer County	Indiana
2003	251	104858
2004	255	100078
2005	255	96815
2006	253	97126
Change 2003-2006	+2	-7737

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.46 Number of slots available for children in licensed child care, Vanderburgh County and Indiana, 2003-2006 (total capacity)		
Year No. of Available Slots		of Available Slots
	Vanderburgh County	Indiana
2003	4440	104858
2004	4419	100078
2005	4388	96815
2006	4397	97126
Change 2003-2006	-43	-7737

Table 3.47 Number of slots available for children in licensed child care, Warrick County and Indiana, 2003-2006		
	(total capacity)	
Year No. of Available Slots		of Available Slots
	Warrick County	Indiana
2003	757	104858
2004	711	100078
2005	707	96815
2006	693	97126
Change 2003-2006	-64	-7737

Table 3.48 Number of licensed child care slots per 100 children, Indiana, 2003-2006 (capacity per 100 children)	
Year	No. of Slots per 100 Children
2003	24.4
2004	23.3
2005	22.5
2006	22.6
% Change 2003-2006	-7.4%

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation (calculated by Indiana Youth Institute)

Table 3.49 Number of licensed child care slots per 100 children, Posey County and Indiana, 2003-2006		
	(capacity per 100 children)
Year	No. of Slots per 100 Children	
	Gibson County	Indiana
2003	42.9	24.4
2004	35.0	23.3
2005	35.2	22.5
2006	34.4	22.6
% Change 2003-2006	-19.8%	-7.4%

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation (calculated by Indiana Youth Institute)

Table 3.50 Number of licensed child care slots per 100 children, Posey County and Indiana, 2003-2006 (capacity per 100 children)		
Year	No. of Slots per 100 Children	
	Posey County	Indiana
2003	30.5	24.4
2004	29.2	23.3
2005	30.2	22.5
2006	32.1	22.6
% Change 2003-2006	+5.2%	-7.4%

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation (calculated by Indiana Youth Institute)

Table 3.51 Number of licensed child care slots per 100 children, Spencer County and Indiana, 2003-2006 (capacity per 100 children)		
Year	No. of Slots per 100 Children	
	Spencer County	Indiana
2003	20.1	24.4
2004	20.4	23.3
2005	22.1	22.5
2006	21.1	22.6
% Change 2003-2006	+5.0%	-7.4%

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation (calculated by Indiana Youth Institute)

Table 3.52 Number of licensed child care slots per 100 children, Vanderburgh County and Indiana, 2003-2006 (capacity per 100 children)		
Year No. of Slots per 100 Children		ots per 100 Children
	Vanderburgh County	Indiana
2003	39.8	24.4
2004	38.8	23.3
2005	37.8	22.5
2006	37.5	22.6
% Change 2003-2006	-5.8%	-7.4%

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation (calculated by Indiana Youth Institute)

Table 3.53 Number of licensed child care slots per 100 children, Warrick County and Indiana, 2003-2006		
	(capacity per 100 children)
Year	No. of Slots per 100 Children	
	Warrick County	Indiana
2003	22.4	24.4
2004	21.1	23.3
2005	21.5	22.5
2006	21.0	22.6
% Change 2003-2006	-6.3%	-7.4%

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation (calculated by Indiana Youth Institute)

Table 3.54 Number of children receiving child care vouchers, Indiana, 2003-2006	
Year	No. of Children Receiving Vouchers
2003	71592
2004	57964
2005	53616
2006	55844
% Change 2003-2006	-22.0%

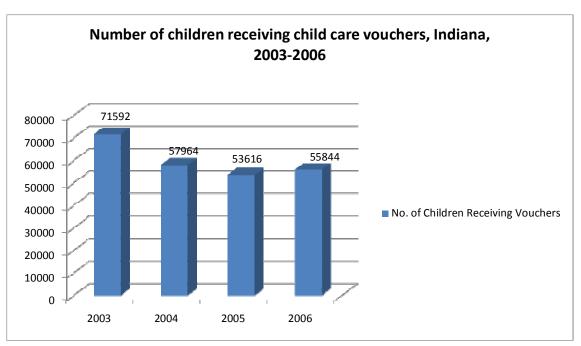


Figure 3.54

Table 3.55 Number of children receiving child care vouchers, Gibson County and Indiana, 2003-2006		
Year	No. of Children Receiving Vouchers	
	Gibson County	Indiana
2003	246	71592
2004	209	57964
2005	172	53616
2006	176	55844
% Change 2003-2006	-28.5%	-22.0%

Table 3.56 Number of children receiving child care vouchers, Posey County and Indiana, 2003-2006		
Year	No. of Children Receiving Vouchers	
	Posey County	Indiana
2003	279	71592
2004	218	57964
2005	221	53616
2006	214	55844
% Change 2003-2006	-23.2%	-22.0%

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.57 Number of children receiving child care vouchers, Spencer County and Indiana, 2003-2006		
Year	No. of Children Receiving Vouchers	
	Spencer County	Indiana
2003	144	71592
2004	139	57964
2005	138	53616
2006	138	55844
% Change 2003-2006	-4.2%	-22.0%

Table 3.58 Number of children receiving child care vouchers, Vanderburgh County and Indiana, 2003-2006		
Year	No. of Children Receiving Vouchers	
	Vanderburgh County	Indiana
2003	2792	71592
2004	2480	57964
2005	2463	53616
2006	2578	55844
% Change 2003-2006	-7.7%	-22.0%

Table 3.59 Number of children receiving child care vouchers, Warrick County and Indiana, 2003-2006		
Year	No. of Children Receiving Vouchers	
	Warrick County Indiana	
2003	364	71592
2004	225	57964
2005	167	53616
2006	182	55844
% Change 2003-2006	-50.0%	-22.0%

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.60 Number of monthly average of children on waiting list for child care vouchers, Indiana, 2003- 2006	
Year	No. of Monthly Avg. of Children
2003	5529
2004	8524
2005	7603
2006	4317
% Change 2003-2006	-21.9%

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.61 Number of monthly average of children on waiting list for child care vouchers, Gibson County and Indiana, 2003-2006						
Year	Year No. of Children Receiving Vouchers					
	Gibson County Indiana					
2003	0	5529				
2004	3 8524					
2005	7 7603					
2006	24 4317					
% Change 2003-2006	e 2003-200621.9%					

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.62 Number of monthly average of children on waiting list for child care vouchers, Posey County and						
	Indiana, 2003-2006					
Year	No. of Children Receiving Vouchers					
	Posey County Indiana					
2003	9 5529					
2004	31 8524					
2005	2 7603					
2006	11 4317					
% Change 2003-2006	Change 2003-2006 +22.2% -21.9%					

Table 3.63 Number of monthly average of children on waiting list for child care vouchers, Spencer County and Indiana, 2003-2006						
Year	Year No. of Children Receiving Vouchers					
	Spencer County Indiana					
2003	1 5529					
2004	35 8524					
2005	25 7603					
2006	8 4317					
% Change 2003-2006	Change 2003-2006 +700% -21.9%					

Table 3.64 Number of monthly average of children on waiting list for child care vouchers, Vanderburgh County and Indiana, 2003-2006							
Year	Year No. of Children Receiving Vouchers						
	Vanderburgh County Indiana						
2003	301 5529						
2004	750 8524						
2005	483 7603						
2006	204 4317						
% Change 2003-2006							

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

Table 3.65 Number of monthly	average of children on waiting list fo Indiana, 2003-2006	or child care vouchers, Warrick County and		
Year				
	Warrick County	Indiana		
2003	40	5529		
2004	137	8524		
2005	158	7603		
2006	33	4317		
% Change 2003-2006	-17.5%	-21.9%		

Source: Indiana FSSA, Bureau of Child Care; Kids Count, Annie E. Casey Foundation

	Table 3.66 The cost of child care, Indiana, 2004-2007				
Year	Annual Cost for Infant	Infant % of Income		Annual Cost for 4-year-old	
		Married- Couple Single Parent			
		Parents			
2004	\$6985	10.9%	33.0%	\$5408	
2005	\$7825			\$6018	
2006	\$8485			\$6373	
2007	\$9005	13.0%	42.0%	\$7001	
% Change 2004-	+28.9%			+29.5%	
2007					

Source: Child Care Resource and Referral State Networks, compiled by the National Association of Child Care Resource and Referral Agencies

ISSUE 16: AFFORDABLE AND AVAILABLE CARE FOR THE PHYSICALLY DISABLED

Data for the United States from 2006 show that approximately 15% of all individuals five years and over have a disability. In terms of disability types, physical disabilities are most prevalent, with over 9% representing this category. The percentage of people in Indiana with a disability (15.5%) is slightly higher than the national average, but lower than Michigan, Ohio, Kentucky, and Missouri, four of the states in the seven-state comparison area. Compared to Indiana, the disability rate for Vanderburgh County (16.1%) is marginally higher. As data show, there are a substantial number of individuals below the poverty level who have a disability, which highlights the financial burden for many people in obtaining care. In several groups, the proportion of individuals with a disability who are in poverty is higher than the percentage of people in the general population who fall into the poverty category.

Data from the Indiana FSSA show that approximately 30,000 individuals receive services through the Division of Disability and Rehabilitation Services. While this number represents assistance for a large number of Indiana residents, almost the same number of people are place on waiting lists for various disability services, which demonstrates continued need for affordable care.

Table 3.67 County-level disability data by age categor	ory, Gibson County (source da	ta from 2000 U.S. Census)
Age Group	%	Total Number
Age 5-15		324
% of County People with Disabilities	5.1%	
% of County Population	1.1%	
% of County Age Cohort	6.3%	
Age 16-20		304
% of County People with Disabilities	4.7%	
% of County Population	1.0%	
% of County Age Cohort	14.2%	
Age 21-64		3808
% of County People with Disabilities	59.3%	
% of County Population	12.7%	
% of County Age Cohort	21.2%	
Age 65-74		802
% of County People with Disabilities	12.5%	
% of County Population	2.7%	
% of County Age Cohort	31.3%	
Age 75+		1174
% of County People with Disabilities	18.3%	
% of County Population	3.9%	
% of County Age Cohort	53.2%	
Total county no. with a disability, in the civilian		6412
noninstitutionalized population, age 5 and over		

Source: The University of Montana Rural Institute: Center for Excellence in Disability Education, Research and Services, Disability Counts Database; U.S. Census 2000

Table 3.68 County-level disability data by age cated	gory, Posey County (source da	ta from 2000 U.S. Census)
Age Group	%	Total Number
Age 5-15		251
% of County People with Disabilities	5.6%	
% of County Population	1.0%	
% of County Age Cohort	5.3%	
Age 16-20		227
% of County People with Disabilities	5.1%	
% of County Population	0.9%	
% of County Age Cohort	12.3%	
Age 21-64		2713
% of County People with Disabilities	60.5%	
% of County Population	10.8%	
% of County Age Cohort	17.8%	
Age 65-74		539
% of County People with Disabilities	12.0%	
% of County Population	2.2%	
% of County Age Cohort	28.7%	
Age 75+		753
% of County People with Disabilities	16.7%	
% of County Population	3.0%	
% of County Age Cohort	55.1%	
Total county no. with a disability, in the civilian		4483
noninstitutionalized population, age 5 and over		

Source: The University of Montana Rural Institute: Center for Excellence in Disability Education, Research and Services, Disability Counts Database; U.S. Census 2000

Table 3.69 County-level disability data by age category	, Spencer County (source	data from 2000 U.S. Census)
Age Group	%	Total Number
Age 5-15		177
% of County People with Disabilities	5.2%	
% of County Population	0.9%	
% of County Age Cohort	5.0%	
Age 16-20		223
% of County People with Disabilities	6.6%	
% of County Population	1.2%	
% of County Age Cohort	16.3%	
Age 21-64		1970
% of County People with Disabilities	58.1%	
% of County Population	10.4%	
% of County Age Cohort	17.0%	
Age 65-74		458
% of County People with Disabilities	13.5%	
% of County Population	2.4%	
% of County Age Cohort	31.1%	
Age 75+		562
% of County People with Disabilities	16.5%	
% of County Population	3.0%	
% of County Age Cohort	54.7%	
Total county no. with a disability, in the civilian		3390
noninstitutionalized population, age 5 and over		

Source: The University of Montana Rural Institute: Center for Excellence in Disability Education, Research and Services, Disability Counts Database; U.S. Census 2000

Table 3.70 County-level disability data by age category	ory, Vanderburgh County (nsus)	source data from 2000 U.S.
Age Group	%	Total Number
Age 5-15	•	2255
% of County People with Disabilities	6.9%	
% of County Population	1.4%	
% of County Age Cohort	9.2%	
Age 16-20		2064
% of County People with Disabilities	6.3%	
% of County Population	1.3%	
% of County Age Cohort	14.6%	
Age 21-64		18263
% of County People with Disabilities	55.6%	
% of County Population	11.5%	
% of County Age Cohort	19.1%	
Age 65-74		4290
% of County People with Disabilities	13.0%	
% of County Population	2.7%	
% of County Age Cohort	33.5%	
Age 75+		5950
% of County People with Disabilities	18.1%	
% of County Population	3.8%	
% of County Age Cohort	51.6%	
Total county no. with a disability, in the civilian noninstitutionalized population, age 5 and over		32822

Source: The University of Montana Rural Institute: Center for Excellence in Disability Education, Research and Services, Disability Counts Database; U.S. Census 2000

Table 3.71 County-level disability data by age categ	ory, Warrick County (source da	ata from 2000 U.S. Census)
Age Group	%	Total Number
Age 5-15		740
% of County People with Disabilities	8.7%	
% of County Population	1.5%	
% of County Age Cohort	8.3%	
Age 16-20		458
% of County People with Disabilities	5.4%	
% of County Population	0.9%	
% of County Age Cohort	13.4%	
Age 21-64		5071
% of County People with Disabilities	59.4%	
% of County Population	10.5%	
% of County Age Cohort	16.4%	
Age 65-74		954
% of County People with Disabilities	11.1%	
% of County Population	2.0%	
% of County Age Cohort	32.2%	
Age 75+		1306
% of County People with Disabilities	15.3%	
% of County Population	2.7%	
% of County Age Cohort	59.1%	
Total county no. with a disability, in the civilian		8529
noninstitutionalized population, age 5 and over		

Source: The University of Montana Rural Institute: Center for Excellence in Disability Education, Research and Services, Disability Counts Database; U.S. Census 2000

Table 3.72 Number of individuals receiving services through Indiana FSSA, Division of Disability and						
	Rehabilitation Services, SFY 2004-2006 SFY SFY 2005 (Cumulative) SFY 2006 (Cumulative)					
	SFY					SFY 2006 (Cumulative)
	2004	1 st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr	1 st Qtr
No. of people receiving services	29064	24111	25627	27392	28453	24332
Home and community based						
waivers						
1.) Aged and disabled	4637	3321	3500	3639	3822	3339
2.) Assisted Living	106	78	88	121	171	180
3.) Autism	346	339	341	336	337	334
4.) Developmental Disabilities	5303	5269	5361	5362	5400	5304
5.) Medically Fragile Children	131	101	103	105	106	94
6.) Support Services	3658	3567	3625	3681	3548	3514
7.) Traumatic Brain Injury	176	145	147	148	147	136
State Line Item-Supportive Living	765	774	790	795	816	808
Group Homes	3442	3433	3414	3457	3459	3492
Large private ICFMR	319	319	317	323	321	324
CHOICE	10491	6765	7941	9425	10326	6807
Waiting Lists	25966	27550	28368	29095	29796	29497
1.) Aged and disabled	1740	2463	2389	2164	2105	3019
2.) Assisted Living	45	50	51	42	35	34
3.) Autism	2430	2523	2601	2756	2853	2861
4.) Developmental Disabilities	12569	12970	13346	13795	14137	13935
5.) Medically Fragile Children	892	848	854	847	851	860
6.) Support Services	7996	8416	8781	9149	9479	9454
7.) Traumatic Brain Injury	294	280	346	342	336	334

Source: Indiana FSSA, Division of Disability and Rehabilitative Services

Table 3.73 Prevalence of Disability by age and type for the total, civilian noninstitutionalized and household populations 5 year and over in the U.S., 2006				
Category	Civilian Noninstitutionalized Population (Publishing Universe)		Household Population	Total Population
	No. (in thousands)	%	%	%
Age 5 and over	273835	100%	100%	100%
With a disability	41260	15.1%	14.9%	15.7%
Sensory disability	11830	4.3%	4.3%	4.6%
Physical disability	25781	9.4%	9.4%	9.9%
Mental disability	15927	5.8%	5.6%	6.3%
Self-care disability	8295	3.0%	2.9%	3.5%
Age 16 and over	229139	100%	100%	100%
Go-outside-home disability	12517	5.5%	5.3%	6.1%
Age 16 to 64	193568	100%	100%	100%
Employment disability	13667	7.1%	6.9%	7.2%
Age 5 to 15	44697	100%	100%	100%
With a disability	2830	6.3%	6.3%	6.4%
Age 16 to 64	193568	100%	100%	100%
With a disability	23863	12.3%	12.2%	12.6%
Age 65 and over	35570	100%	100%	100%
With a disability	14567	41.0%	40.7%	43.4%

Table 3.74 Prevalence of Disability for the civilian noninstitutionalized, household, and total populations 5 years and over for Indiana and surrounding states, 2006 Category Civilian Noninstitutionalized Population Household Total (Publishing Universe) Population Population No. with a disability (in % with a disability % with a % with a disability thousands) disability **United States** 41260 15.1% 14.9% 15.7% 896 15.5% 16.3% Indiana 15.5% Michigan 1487 16.0% 15.7% 16.5% Ohio 1699 16.1% 16.0% 16.9% Kentucky 21.3% 21.3% 21.9% 820 Illinois 1509 12.8% 12.7% 13.6% Wisconsin 687 13.4% 13.2% 14.2% Missouri 911 17.1% 17.0% 17.9%

Table 3.75 Percent of people in civilian noninstitutionalized population with a disability by age group, Indiana						
	and surrounding states, 2006					
State	Age 5 to 20	National	Age 21 to 64	National	Age 65 +	National
	%	Rank	%	Rank	%	Rank
Indiana	7.3%	17	13.4%	23	41.8%	18
Michigan	7.7%	12	14.1%	20	40.2%	25
Ohio	7.5%	14	14.2%	19	39.8%	28
Kentucky	9.0%	4	20.2%	3	47.9%	6
Illinois	5.6%	44	10.4%	49	39.6%	29
Wisconsin	6.8%	27	11.2%	38	35.7%	50
Missouri	7.3%	17	15.0%	13	43.3%	14

Table 3.76 Sex by age by number of disabilities for the civilian non-institutionalized population 5 years and		
over, Indiana, 2006		
Category	Estimate	
Total Population	5782926	
Male Population	2832249	
5 to 15 years	489973	
Without any disability	443567	
With one type of disability	36329	
With two or more types of disability	10077	
16 to 20 years	237211	
Without any disability	218827	
With one type of disability	11955	
With two or more types of disability	6429	
21 to 64 years	1794943	
Without any disability	1562167	
With one type of disability	97916	
With two or more types of disability	134860	
65 to 74 years	178566	
Without any disability	122059	
With one type of disability	33257	
With two or more types of disability	23250	
75 years and over	131556	
Without any disability	64400	
With one type of disability	29544	
With two or more types of disability	37612	

Female Population	2950677
5 to 15 years	469969
Without any disability	445667
With one type of disability	18385
With two or more types of disability	5917
16 to 20 years	225634
Without any disability	211456
With one type of disability	8369
With two or more types of disability	5809
21 to 64 years	1829865
Without any disability	1577220
With one type of disability	96058
With two or more types of disability	156587
65 to 74 years	211625
Without any disability	145506
With one type of disability	35784
With two or more types of disability	30335
75 years and over	213594
Without any disability	95967
With one type of disability	44392
With two or more types of disability	73225

Table 3.77 Sex by age by number of disabilities for the civilian non-institutionalized population 5 years and over, Vanderburgh County, 2006		
Category	Estimate	
Total Population	159078	
Male Population	75692	
5 to 15 years	12081	
Without any disability	11016	
With one type of disability	720	
With two or more types of disability	345	
16 to 20 years	7051	
Without any disability	6689	
With one type of disability	192	
With two or more types of disability	170	
21 to 64 years	47328	
Without any disability	40586	
With one type of disability	3619	
With two or more types of disability	3123	
65 to 74 years	4910	
Without any disability	3852	
With one type of disability	466	
With two or more types of disability	592	
75 years and over	4322	
Without any disability	2064	
With one type of disability	1311	
With two or more types of disability	947	
Female Population	83386	
5 to 15 years	12027	
Without any disability	10953	
With one type of disability	978	
With two or more types of disability	96	
16 to 20 years	7305	

7152
81
72
50504
42812
2806
4886
6499
5055
533
911
7051
3287
1965
1799

Table 3.78 Disability status by school enrollment and educational attainment for the civilian noninstitutionalized population 18 to 34 year, Indiana, 2006			
Category	Estimate		
Total Population	1434263		
With a disability	109311		
Enrolled in school	20949		
Below college	6981		
College or graduate school	13968		
Not enrolled in school	88362		
Less than high school graduate	27849		
High school graduate (includes equiv.)	36427		
Some college or associate's degree	18878		
Bachelor's degree or higher	5208		
No disability	1324952		
Enrolled in school	382587		
Below college	62294		
College or graduate school	320293		
Not enrolled in school	942365		
Less than high school graduate	142918		
High school graduate (includes equiv.)	339273		
Some college or associate's degree	264053		
Bachelor's degree or higher	196121		

Table 3.79 Disability status by school enrollment and educational attainment for the civilian noninstitutionalized population 18 to 34 year, Vanderburgh County, 2006		
Category	Estimate	
Total Population	41365	
With a disability	3285	
Enrolled in school	537	
Below college	243	
College or graduate school	294	
Not enrolled in school	2748	
Less than high school graduate	874	
High school graduate (includes equiv.)	610	
Some college or associate's degree	1087	
Bachelor's degree or higher	177	
No disability	38080	
Enrolled in school	13211	
Below college	1792	
College or graduate school	11419	
Not enrolled in school	24869	
Less than high school graduate	2553	
High school graduate (includes equiv.)	7400	
Some college or associate's degree	9349	
Bachelor's degree or higher	5567	

Table 3.80 Disability status by sex by age by poverty status f	
years and over, Indian	
Category	Estimate
Total Population	5693818
With a disability	890050
Male	416945
5 to 15 years	43634
Income in the past 12 months below the poverty level	11449
Income in the past 12 months at or above the poverty level	32185
16 to 20 years	17150
Income in the past 12 months below the poverty level	4563
Income in the past 12 months at or above the poverty level	12587
21 to 64 years	232498
Income in the past 12 months below the poverty level	48331
Income in the past 12 months at or above the poverty level	184167
65 years and over	123663
Income in the past 12 months below the poverty level	7156
Income in the past 12 months at or above the poverty level	116507
Female	473105
5 to 15 years	23617
Income in the past 12 months below the poverty level	7128
Income in the past 12 months at or above the poverty level	16489
16 to 20 years	13292
Income in the past 12 months below the poverty level	4577
Income in the past 12 months at or above the poverty level	8715
21 to 64 years	252460
Income in the past 12 months below the poverty level	73267
Income in the past 12 months at or above the poverty level	179193

65 years and over	183736
Income in the past 12 months below the poverty level	26331
Income in the past 12 months at or above the poverty level	157405
No disability	4803768
Male	2371715
5 to 15 years	435674
Income in the past 12 months below the poverty level	65613
Income in the past 12 months at or above the poverty level	370061
16 to 20 years	194331
Income in the past 12 months below the poverty level	32263
Income in the past 12 months at or above the poverty level	162068
21 to 64 years	1555251
Income in the past 12 months below the poverty level	108297
Income in the past 12 months at or above the poverty level	1446954
65 years and over	186459
Income in the past 12 months below the poverty level	7731
Income in the past 12 months at or above the poverty level	178728
Female	2432053
5 to 15 years	437072
Income in the past 12 months below the poverty level	73744
Income in the past 12 months at or above the poverty level	363328
16 to 20 years	182084
Income in the past 12 months below the poverty level	36837
Income in the past 12 months at or above the poverty level	145247
21 to 64 years	1571424
Income in the past 12 months below the poverty level	161720
Income in the past 12 months at or above the poverty level	1409704
65 years and over	241473
Income in the past 12 months below the poverty level	16174
Income in the past 12 months at or above the poverty level	225299

Table 3.81 Disability status by sex by age by poverty status for the years and over, Vanderburgh Cou	
Category	Estimate
Total Population	154904
With a disability	25476
Male	11398
5 to 15 years	978
Income in the past 12 months below the poverty level	502
Income in the past 12 months at or above the poverty level	476
16 to 20 years	362
Income in the past 12 months below the poverty level	189
Income in the past 12 months at or above the poverty level	173
21 to 64 years	6742
Income in the past 12 months below the poverty level	1761
Income in the past 12 months at or above the poverty level	4981
65 years and over	3316
Income in the past 12 months below the poverty level	171
Income in the past 12 months at or above the poverty level	3145
Female	14078
5 to 15 years	1025
Income in the past 12 months below the poverty level	348
Income in the past 12 months at or above the poverty level	677

16 to 20 years	153
Income in the past 12 months below the poverty level	72
Income in the past 12 months at or above the poverty level	81
21 to 64 years	7692
Income in the past 12 months below the poverty level	3797
Income in the past 12 months at or above the poverty level	3895
65 years and over	5208
Income in the past 12 months below the poverty level	989
Income in the past 12 months at or above the poverty level	4219
No disability	129428
Male	63486
5 to 15 years	10832
Income in the past 12 months below the poverty level	1329
Income in the past 12 months at or above the poverty level	9503
16 to 20 years	6301
Income in the past 12 months below the poverty level	1183
Income in the past 12 months at or above the poverty level	5118
21 to 64 years	40437
Income in the past 12 months below the poverty level	3063
Income in the past 12 months at or above the poverty level	37374
65 years and over	5916
Income in the past 12 months below the poverty level	256
Income in the past 12 months at or above the poverty level	5660
Female	65942
5 to 15 years	10541
Income in the past 12 months below the poverty level	2296
Income in the past 12 months at or above the poverty level	8245
16 to 20 years	4940
Income in the past 12 months below the poverty level	1405
Income in the past 12 months at or above the poverty level	3535
21 to 64 years	42119
Income in the past 12 months below the poverty level	3977
Income in the past 12 months at or above the poverty level	38142
65 years and over	8342
Income in the past 12 months below the poverty level	332
Income in the past 12 months at or above the poverty level	8010

Table 3.82 Disability characteristics, Vanderburgh County, 2006						
Subject	Total	Male	Female			
Population 5 and over	159078	75692	83386			
Without any disability	83.9%	84.8%	83.1%			
With one type of disability	8.0%	8.3%	7.6%			
With two or more types of disability	8.1%	6.8%	9.3%			
Population 5 to 15 years	24108	12081	12027			
With any disability	8.9%	8.8%	8.9%			
With a sensory disability	1.9%	1.6%	2.2%			
With a physical disability	0.4%	0.0%	0.8%			
With a mental disability	7.5%	8.4%	6.7%			
With a self-care disability	1.7%	2.9%	0.5%			
Population 16 to 64 years	112188	54379	57809			
With any disability	13.3%	13.1%	13.6%			
With a sensory disability	3.1%	3.3%	2.8%			
With a physical disability	7.4%	6.5%	8.1%			
With a mental disability	5.0%	4.0%	6.1%			
With a self-care disability	1.9%	0.9%	2.8%			
With a go-outside-home disability	3.5%	1.5%	5.3%			
With an employment disability	7.6%	6.4%	8.6%			
Population 65 years and over	22782	9232	13550			
With any disability	37.4%	35.9%	38.4%			
With a sensory disability	15.0%	13.9%	15.8%			
With a physical disability	26.6%	25.3%	27.4%			
With a mental disability	9.1%	8.7%	9.3%			
With a self-care disability	8.2%	9.3%	7.5%			
With a go-outside-home disability	15.9%	11.9%	18.6%			

ISSUE 17: AVAILABILITY OF JOBS FOR MENTALLY AND PHYSICALLY CHALLENGED INDIVIDUALS

Census data indicate that approximately 39% of disabled individuals in Indiana were employed in 2006. This number of slightly lower in Vanderburgh County, where 32% of disabled individuals were employed. Statewide, there were over 33,000 individuals who received services through the Indiana FSSA Vocational Rehabilitation Services in 2005. Almost 6,000 were classified as rehabilitated, or successful in obtaining employment, which was the highest total in two decades. The job area where most positions were obtained included professional and technical, clerical and sales, and service.

Table 3.83 Type of employment obtained by individuals after receiving Vocational Rehabilitation Services, Indiana, FFY 2005					
Employment Type	No. Employed				
Professional & Technical	1315				
Clerical and Sales	1216				
Service	1549				
Farming, Fishing, and Forestry	114				
Bench, Machining, and Products	953				
Other Competitive Labor Market Jobs	563				
Homemaker, Unpaid Family Worker	251				
Total	5961*				

^{*}Highest total in last two decades

Source: Indiana FSSA, Division of Disability and Rehabilitative Services

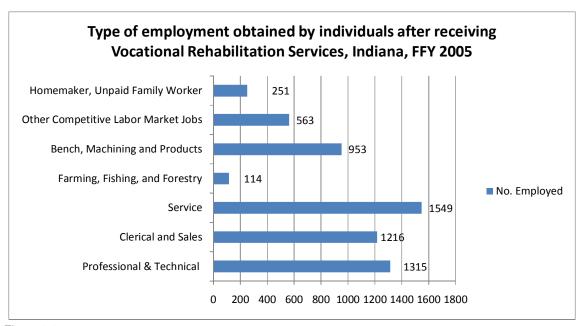


Figure 3.83

Table 3.84 Vocational Rehabilitation Services Statewide Highlights, FFY 2005					
Category	Served	Rehabilitated			
Sensory/Communicative Impairments					
Blindness	928	198			
Other Visual Impairments	1173	217			
Deafness, Primary Communication Visual	528	90			
Deafness, Primary Communication Auditory	235	84			
Hearing Loss, Primary Communication Visual	503	212			
Hearing Loss, Primary Communication Auditory	3933	1895			
Other Hearing Impairments (Tinnitus, Meniere's Disease, etc.)	111	42			
Deaf-Blindness	19	2			
Communicative Impairments (expressive and receptive)	205	43			
Physical Impairments					
Mobility Orthopedic/Neurological Impairments	2651	321			
Manipulation/Dexterity Orthopedic/Neurological Impairments	1095	126			
Both Mobility and Manipulation/Dexterity Orthopedic/Neurological	1659	194			
Impairments					
Other Orthopedic Impairments (e.g., limited range of motion)	1934	223			
Respiratory Impairments	322	30			
General Physical Debilitation (fatigue, weakness, pain, etc.)	948	74			
Other Physical Impairments (not listed above)	1637	189			
Mental Impairments					
Cognitive Impairments (impairments involving learning, thinking, processing	8052	1258			
information, and concentration)					
Psychosocial Impairments (interpersonal and behavioral impairments,	5458	560			
difficulty coping)					
Other Mental Impairments	1634	203			
Totals	33025	5961			

Source: Indiana FSSA, Division of Disability and Rehabilitative Services

Table 3.85 Disability status by sex by age by employment status for the civilian noninstitutionalized					
population 16 to 64 years, Indiana, 2006					
Category	Estimate				
Total	4087653				
With any disability	517983				
Male	251160				
16 to 34 years	66570				
Employed	32488				
Not employed	34082				
35 to 64 years	184590				
Employed	76416				
Not employed	108174				
Female	266823				
16 to 34 years	56474				
Employed	22981				
Not employed	33493				
35 to 64 years	210349				
Employed	68428				
Not employed	141921				
No disability	3569670				
Male	1780994				
16 to 34 years	751543				

Employed	543035
Not employed	208508
35 to 64 years	1029451
Employed	904821
Not employed	124630
Female	1788676
16 to 34 years	742487
Employed	475990
Not employed	266497
35 to 64 years	1046189
Employed	797692
Not employed	248497

	mployment status for the civilian noninstitutionalized
	s, Vanderburgh County, 2006
Category	Estimate
Total	112188
With any disability	14949
Male	7104
16 to 34 years	1599
Employed	796
Not employed	803
35 to 64 years	5505
Employed	2274
Not employed	3231
Female	7845
16 to 34 years	1823
Employed	447
Not employed	1376
35 to 64 years	6022
Employed	1311
Not employed	4711
No disability	97239
Male	47275
16 to 34 years	20478
Employed	15921
Not employed	4557
35 to 64 years	26797
Employed	24176
Not employed	2621
Female	49964
16 to 34 years	21718
Employed	14948
Not employed	6770
35 to 64 years	28246
Employed	22090
Not employed	6156

Table 3.87 Data regarding people served through Goodwill Industries International, Inc., 2006					
Category	Figure				
People served through employment and training programs	930775				
Job placement services provided	362584				
People placed in competitive employment	131783				
Salaries and wages earned by people served who are placed in competitive	\$1.9 billion				
employment					
Revenue generated by Goodwill Industries organizations	\$2.9 billion				
Total revenues spent directly on programs	83%				
Total number of donors (figure includes repeat donors)	62 million				
Total number of retail stores	2145				

Source: Goodwill Industries International, Inc.

ISSUE 19: LOW- TO MODERATE-INCOME INDIVIDUALS NOT HAVING FUNDS FOR BASIC NEEDS (E.G., ADEQUATE CLOTHING, FOOD, HOUSING, AND LEGAL SERVICES)

As indicators of the financial hardships faced by many families, the percentage of students in Indiana and area public school corporations who qualify for free lunch, reduced lunch, and free textbook status increased from the 2002/2003 to the 2006/2007 (or 2007/2008) school years. The majority of districts experienced increases each year in the five- to six-year period.

Additionally, the annual average number of persons issued food stamps in Indiana and the five-county study area increased between 2003 and 2007. While food stamp distribution increased, the number of families receiving TANF grants actually decreased statewide and in all counties except Spencer. In Indiana and three of the area counties, the number of WIC participants increased. Overall, per capita persona income increased for residents of Indiana and the study's five counties. The year-over-year change for each county was comparable with or greater than the percent change for Indiana in most years. While this appears to be a positive trend, further analysis regarding inflation and the costs of goods and services should be conducted to determine whether incomes have kept pace with the rising cost of living. For example, a review of median household income shows that in actual dollars, there was an increase in this figure for all area counties between 2000 and 2005. However, when these figures are adjusted for inflation, there was actually a decrease in household income, which indicates that the money earned by families did not keep pace with costs.

An assessment of average hourly earnings in manufacturing shows that while individuals may have increased their average weekly earnings as of December 2007, they also worked more hours, which reveals a lower hourly pay rate. Average weekly earnings for individuals in the retail trade were actually lower in December 2007 than December 2006 or November 2007. These data are further indication of the need to analyze the complexities of earnings as they relate to various economic conditions.

Poverty rates determined for various groups indicate that the percentage of individuals in poverty has actually increased in the United States, Indiana, and all five counties in the study over the past several years. Children under 18 and single-parent families, especially those headed by females, are particularly at risk. While rates have risen in Indiana, they are still not as high as national averages and are lower than some of the surrounding states. However, an assessment of the actual percent change in poverty rates indicates that those figures are increasing at a faster pace in Indiana than the U.S. and surrounding states, which is not a positive sign for future years. A comparison of area counties to Indiana shows that all except Vanderburgh are below the poverty rates for Indiana, both for all individuals and children under 18.

In the United States, there are approximately 15.8 million households that are paying over 50% of their incomes on housing. Additionally, approximately 5.2 million are in worst case housing, which indicates they spend at least 50% of their incomes on housing and earn only 50% of the area median income or live in severely substandard housing. Data presented by HUD and the National Low Income Housing Coalition provide the fair market rent for various sized apartments and the income necessary to afford those dwellings. As a key indicator of the difficulty many individuals have in affording housing, the sources specify the percent of renters who are unable to afford a two-bedroom apartment at fair market rent. In Indiana, that figure is 45%. Vanderburgh County is equivalent to the state on this indicator, and Gibson, Posey, and Spencer are slightly lower but still at least 40%. Warrick County has the lowest rate of the five counties, with 34% of renters unable to afford a two-bedroom apartment at the fair market rent rate.

Data from the 2006 Hunger in America study show that over 86,000 clients were served through the Tri-State Food Bank in its coverage area, which extends outside the five-county study area. To highlight the difficulties that many individuals face in obtaining basic necessities such as food, 42% of individuals who respond to the survey indicated they had made a choice between food and utilities, 31% had chosen between food and housing, and 37% had chosen between food and health care. Further, a total of 63% were classified as "food insecure," and 33% were "food insecure with hunger."

Overall, these data show that there has been an increase in individuals in the state and the study's five-county area who are in difficult financial situations and likely in need of the services offered by social service organizations in southwestern Indiana.

Table 3.88 Percent of students in area school districts with free lunch/textbook status, 2002/2003 – 2006/2007							
School Corporation	2002/2003	2003/2004	2004/2005	2005/2006	2006/2007	% Change	
	%	%	%	%	%	2002/2003 -	
						2006/2007	
Gibson County							
East Gibson	19%	20%	21%	26%	27%	+42.1%	
North Gibson	not reported	40%	40%	39%	40%	0.0%	
South Gibson	15%	15%	16%	17%	17%	+13.3%	
Posey County							
Mount Vernon	not reported	24%	25%	26%	24%	0.0%	
New Harmony	20%	23%	25%	31%	30%	+50.0%	
North Posey	19%	18%	17%	18%	20%	+5.3%	
Spencer County							
North Spencer	18%	18%	18%	20%	22%	+22.2%	
South Spencer	29%	29%	31%	33%	36%	+24.1%	
Vanderburgh County							
Evansville-Vanderburgh	46%	47%	50%	51%	52%	+13.0%	
Warrick County							
Warrick	19%	19%	20%	22%	23%	+21.1%	
State Average	34%	35%	37%	38%	40%	+17.6%	

Source: Indiana Department of Education

Table 3.89 Percent of free and reduced lunch in public school corporations, Indiana, 2002/2003 – 2006/2007							
Year	Free Lunch	Reduced Lunch					
2002/2003	25.1%	7.6%					
2003/2004	27.1%	7.7%					
2004/2005	28.2%	7.9%					
2005/2006	28.1%	7.9%					
2006/2007	29.4%	8.1%					
% Change 2002/2003 – 2006/2007	+17.1%	+6.6%					

Source: Indiana Department of Education

Table 3.90 Percent of students in area school districts with free and reduced lunch, 2002/2003 – 2006/2007														
School Corporation		/2003 %		/2004 %		/2005 %		/2006 %		/2007 %		/2008 %	% Ch 2002/	ange
Corporation	,	70	,	0	,	0	,	0	,	70	,	70	2007/	
	Free	Red.	Free	Red.										
Gibson County														
East Gibson	13.1	4.6	15.7	5.1	17.1	4.4	18.3	6.7	18.1	7.5	17.9	8.4	+36.6%	+82.6%
North Gibson	22.7	9.2	24.6	9.2	27.0	9.2	28.0	9.6	28.9	10.6	32.2	10.3	+41.9%	+12.0%
South Gibson	9.2	5.2	9.2	5.7	9.7	6.0	11.8	4.7	10.4	6.7	10.9	6.9	+18.5%	+32.7%
Posey County														
Mount Vernon	18.0	3.5	18.8	4.6	20.9	4.4	20.3	4.4	22.1	6.0	23.2	4.2	+28.9%	+20.0%
New Harmony	10.5	9.2	11.5	13.5	13.0	10.3	22.5	12.3	18.9	14.6	20.7	6.9	+97.1%	-25.0%
North Posey	9.5	8.4	9.9	7.9	11.0	5.6	11.5	6.8	11.1	6.7	15.6	5.1	+64.2%	-39.3%
Spencer County														
North Spencer	11.3	6.2	10.7	7.1	10.9	7.4	13.3	7.0	14.5	7.1	14.4	6.6	+27.4%	+6.5%
South Spencer	20.3	6.1	21.9	6.7	22.1	8.3	25.1	8.0	26.7	8.1	26.8	8.5	+32.0%	+39.3%
Vanderburgh														
County														
Evansville-	35.1	9.5	36.3	9.3	38.3	9.7	38.4	10.4	39.5	10.6	40.7	10.0	+16.0%	+5.3%
Vanderburgh														
Warrick County														
Warrick	12.3	5.9	12.5	5.9	13.3	6.1	15.7	6.7	15.2	7.2	16.2	6.7	+31.7%	+13.6%

Source: Indiana Department of Education

Table 3.91 Annual average of persons issued food stamps, Indiana, 2003-2007					
Year	Monthly Average of Persons				
2003	487433				
2004	535199				
2005	561860				
2006	577970				
2007	593011				
% Change 2003-2007	+21.7%				

Source: Indiana FSSA, Division of Family Resources

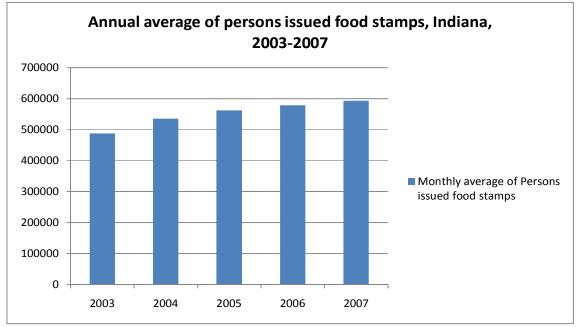


Figure 3.91

Table 3.92 Annual average of persons issued food stamps, Gibson County, 2003-2007							
Year	Gibson County	Indiana					
2003	1674	487433					
2004	1790	535199					
2005	1954	561860					
2006	2068	577970					
2007	2270	593011					
% Change 2003-2007	+35.6%	+21.7%					

Source: Indiana FSSA, Division of Family Resources

Table 3.93 Annual average of persons issued food stamps, Posey County, 2003-2007		
Year	Posey County	Indiana
2003	1484	487433
2004	1585	535199
2005	1687	561860
2006	1759	577970
2007	1774	593011
% Change 2003-2007	+19.5%	+21.7%

Source: Indiana FSSA, Division of Family Resources

Table 3.94 Annual average of persons issued food stamps, Spencer County, 2003-2007		
Year	Spencer County	Indiana
2003	1000	487433
2004	1037	535199
2005	1173	561860
2006	1297	577970
2007	1361	593011
% Change 2003-2007	+36.1%	+21.7%

Source: Indiana FSSA, Division of Family Resources

Table 3.95 Annual average of persons issued food stamps, Vanderburgh County, 2003-2007		
Year	Vanderburgh County	Indiana
2003	16935	487433
2004	18424	535199
2005	19367	561860
2006	19277	577970
2007	19077	593011
% Change 2003-2007	+12.6%	+21.7%

Source: Indiana FSSA, Division of Family Resources

Table 3.96 Annual average of persons issued food stamps, Warrick County, 2003-2007		
Year	Warrick County	Indiana
2003	2016	487433
2004	2204	535199
2005	2266	561860
2006	2244	577970
2007	2407	593011
% Change 2003-2007	+19.4%	+21.7%

Source: Indiana FSSA, Division of Family Resources

Table 3.97 Annual average of families receiving TANF grants, Indiana, 2003-2007		
Year	Monthly Average of Families	
2003	47033	
2004	44705	
2005	43458	
2006	41498	
207	39367	
% Change 2003-2007	-16.3%	

Source: Indiana FSSA, Division of Family Resources

Table 3.98 Annual average of families receiving TANF grants, Gibson County and Indiana, 2003-2007		
Year	Gibson County	Indiana
2003	102	47033
2004	106	44705
2005	102	43458
2006	94	41498
2007	86	39367
% Change 2003-2007	-15.7%	-16.3%

Source: Indiana FSSA, Division of Family Resources

Table 3.99 Annual average of families receiving TANF grants, Posey County and Indiana, 2003-2007		
Year	Posey County	Indiana
2003	153	47033
2004	152	44705
2005	138	43458
2006	127	41498
2007	119	39367
% Change 2003-2007	-22.2%	-16.3%

Source: Indiana FSSA, Division of Family Resources

Table 3.100 Annual average of families receiving TANF grants, Spencer County and Indiana, 2003-2007		
Year	Spencer County	Indiana
2003	75	47033
2004	69	44705
2005	68	43458
2006	73	41498
2007	81	39367
% Change 2003-2007	+8.0%	-16.3%

Source: Indiana FSSA, Division of Family Resources

Table 3.101 Annual average of families receiving TANF grants, Vanderburgh County and Indiana, 2003-2007		
Year	Vanderburgh County	Indiana
2003	1679	47033
2004	1533	44705
2005	1541	43458
2006	1493	41498
2007	1352	39367
% Change 2003-2007	-19.5%	-16.3%

Source: Indiana FSSA, Division of Family Resources

Table 3.102 Annual average of families receiving TANF grants, Warrick County and Indiana, 2003-2007		
Year	Warrick County	Indiana
2003	113	47033
2004	95	44705
2005	76	43458
2006	72	41498
2007	90	39367
% Change 2003-2007	-20.4%	-16.3%

Source: Indiana FSSA, Division of Family Resources

Table 3.103 Number of WIC participants, Indiana, 2003-2006		
Year	No. of Participants	
2003	227713	
2004	236767	
2005	224140	
2006	246668	
% Change 2003-2006	+8.3%	

Source: Indiana State Department of Health, IN WIC Program; Kids Count, Annie E. Casey Foundation

Table 3.104 Number of WIC participants, Gibson County and Indiana, 2003-2006		
Year	Gibson County	Indiana
2003	1083	227713
2004	1121	236767
2005	1055	224140
2006	1081	246668
% Change 2003-2006	-0.2%	+8.3%

Source: Indiana State Department of Health, IN WIC Program; Kids Count, Annie E. Casey Foundation

Table 3.105 Number of WIC participants, Posey County and Indiana, 2003-2006						
Year	Posey County	Indiana				
2003	579	227713				
2004	586	236767				
2005	546	224140				
2006	532	246668				
% Change 2003-2006	-8.1%	+8.3%				

Source: Indiana State Department of Health, IN WIC Program; Kids Count, Annie E. Casey Foundation

Table 3.106 Number of WIC participants, Spencer County and Indiana, 2003-2006						
Year	Spencer County	Indiana				
2003	580	227713				
2004	657	236767				
2005	652	224140				
2006	672	246668				
% Change 2003-2006	+15.9%	+8.3%				

Source: Indiana State Department of Health, IN WIC Program; Kids Count, Annie E. Casey Foundation

Table 3.107 Number of WIC participants, Vanderburgh County and Indiana, 2003-2006						
Year	Vanderburgh County	Indiana				
2003	5808	227713				
2004	5955	236767				
2005	5977	224140				
2006	6079	246668				
% Change 2003-2006	+4.7%	+8.3%				

Source: Indiana State Department of Health, IN WIC Program; Kids Count, Annie E. Casey Foundation

Table 3.108 Number of WIC participants, Warrick County and Indiana, 2003-2006						
Year	Warrick County	Indiana				
2003	1217	227713				
2004	1435	236767				
2005	1378	224140				
2006	1318	246668				
% Change 2003-2006	+8.3%	+8.3%				

Source: Indiana State Department of Health, IN WIC Program; Kids Count, Annie E. Casey Foundation

	Table 3.109 Per capita personal income, Indiana, 2001-2006							
Year	Income	% U.S. (U.S. = 100)						
2001	\$27403	\$271	1.0%	89.7%				
2002	\$28023	\$620	2.3%	91.0%				
2003	\$28857	\$834	3.0%	91.7%				
2004	\$29923	\$1066	3.7%	90.5%				
2005	\$30883	\$960	3.2%	89.0%				
2006	\$32226	\$1343	4.3%	88.0%				

Source: Indiana Department of Workforce Development; U.S. Bureau of Economic Analysis

	Table 3.110 Per capita personal income, Gibson County, 2001-2005								
Year	ar Income Change from Previous % Change from Indiana % Change 9								
		Year	Previous Year	from Previous Year	100)				
2001	\$24160	\$569	2.4%	1.0%	79.1%				
2002	\$25395	\$1235	5.1%	2.3%	82.5%				
2003	\$27248	\$1853	7.3%	3.0%	86.6%				
2004	\$28857	\$1609	5.9%	3.7%	83.2%				
2005	\$29649	\$792	2.7%	3.2%	85.5%				

Source: Indiana Department of Workforce Development; U.S. Bureau of Economic Analysis

	Table 3.111 Per capita personal income, Posey County, 2001-2005							
Year	Income	Change from Previous	% Change from	Indiana % Change	% U.S. (U.S. = 100)			
		Year	Previous Year	from Previous Year				
2001	\$27870	\$306	1.1%	1.0%	91.2%			
2002	\$28283	\$413	1.5%	2.3%	91.8%			
2003	\$29605	\$1322	4.7%	3.0%	94.1%			
2004	\$30894	\$1289	4.4%	3.7%	89.1%			
2005	\$32045	\$1151	3.7%	3.2%	92.4%			

Source: Indiana Department of Workforce Development; U.S. Bureau of Economic Analysis

	Table 3.112 Per capita personal income, Spencer County, 2001-2005						
Year	Income	Change from Previous	% Change from	Indiana % Change	% U.S. (U.S. = 100)		
		Year	Previous Year	from Previous Year			
2001	\$24061	\$116	0.5%	1.0%	78.7%		
2002	\$24298	\$237	1.0%	2.3%	78.9%		
2003	\$26033	\$1735	7.1%	3.0%	82.7%		
2004	2004 \$27984 \$1951		7.5%	3.7%	80.7%		
2005	\$28778	\$794	2.8%	3.2%	83.0%		

Source: Indiana Department of Workforce Development; U.S. Bureau of Economic Analysis

	Table 3.113 Per capita personal income, Vanderburgh County, 2001-2005 Year Income Change from Previous % Change from Indiana % Change % U.S. (U.S. = 100)						
Year	Income	Change from Previous	Indiana % Change	% U.S. (U.S. = 100)			
		Year	Previous Year	from Previous Year			
2001	\$29504	\$1224	4.3%	1.0%	96.5%		
2002	\$30826	\$1322	4.5%	2.3%	100.1%		
2003	\$31609	\$783	2.5%	3.0%	100.5%		
2004	\$32670	\$1061	3.4%	3.7%	94.2%		
2005	\$34194	\$1524	4.7%	3.2%	98.6%		

Source: Indiana Department of Workforce Development; U.S. Bureau of Economic Analysis

	Table 3.114 Per capita personal income, Warrick County, 2001-2005 Year Income Change from Previous % Change from Indiana % Change % U.S. (U.S. = 100)							
Year	Income	Change from Previous	Indiana % Change	% U.S. (U.S. = 100)				
		from Previous Year						
2001	\$29220	\$742	2.6%	1.0%	95.6%			
2002	\$30175	\$955	3.3%	2.3%	98.0%			
2003	\$30793	\$618	2.0%	3.0%	97.9%			
2004	\$32524	\$1731	5.6%	3.7%	93.8%			
2005	\$33586	\$1062	3.3%	3.2%	96.8%			

Source: Indiana Department of Workforce Development; U.S. Bureau of Economic Analysis

Table 3.115 Evansville, IN-KY MSA hours and earnings, 12/06, 11/07, 12/07									
Business Avg. Weekly Earnings Avg. Weekly Hours Avg. Hourly Earnings						arnings			
	12/07	11/07	12/06	12/07	11/07	12/06	12/07	11/07	12/06
Manufacturing	\$924	\$900	\$906	43.6	42.2	40.8	\$21.20	\$21.35	\$22.21
Retail Trade	\$380	\$401	\$381	33.3	34.5	32.9	\$11.42	\$11.63	\$11.57

Source: Indiana Department of Workforce Development, Research and Analysis Department

Table 3.116 Families in poverty, Indiana, 2006					
Category	Indiana	U.S.			
Families with own child under 18 in poverty as % of all families with own children under 18	10.2%				
Married couple families with child in poverty, % of married couple families with children	3.9%	6.6%			
Single dads in poverty, % of single dads	14.1%	17.7%			
Single moms in poverty, % of single moms	30.4%	34.3%			
Single parents in poverty, % of all single parents	26.4%	30.5%			

Source: Indiana Prevention Resource Center, PREV-STAT County Profiles Data

Table 3.117 Families in poverty, Gibson County, 2006				
Category	Gibson County	Indiana	U.S.	
Families with own child under 18 in poverty as % of all families with own children under 18	10.5%	10.2%		
Married couple families with child in poverty, % of married couple families with children	3.9%	3.9%	6.6%	
Single dads in poverty, % of single dads	22.5%	14.1%	17.7%	
Single moms in poverty, % of single moms	36.6%	30.4%	34.3%	
Single parents in poverty, % of all single parents	33.6%	26.4%	30.5%	

Source: Indiana Prevention Resource Center, PREV-STAT County Profiles Data

Table 3.118 Families in poverty, Posey County, 2006				
Category	Posey	Indiana	U.S.	
	County			
Families with own child under 18 in poverty as % of all families with own children under 18	9.3%	10.2%		
Married couple families with child in poverty, % of married couple families with children	3.4%	3.9%	6.6%	
Single dads in poverty, % of single dads	27.4%	14.1%	17.7%	
Single moms in poverty, % of single moms	38.1%	30.4%	34.3%	
Single parents in poverty, % of all single parents	35.0%	26.4%	30.5%	

Source: Indiana Prevention Resource Center, PREV-STAT County Profiles Data

Table 3.119 Families in poverty, Spencer County, 2006				
Category	Spencer County	Indiana	U.S.	
Families with own child under 18 in poverty as % of all families with own children under 18	6.6%	10.2%		
Married couple families with child in poverty, % of married couple families with children	4.5%	3.9%	6.6%	
Single dads in poverty, % of single dads	5.5%	14.1%	17.7%	
Single moms in poverty, % of single moms	24.0%	30.4%	34.3%	
Single parents in poverty, % of all single parents	16.3%	26.4%	30.5%	

Source: Indiana Prevention Resource Center, PREV-STAT County Profiles Data

Table 3.120 Families in poverty, Vanderburgh County, 2006				
Category	Vanderburg	Indiana	U.S.	
	h County			
Families with own child under 18 in poverty as % of all families with own children under 18	12.9%	10.2%		
Married couple families with child in poverty, % of married couple families with children	3.7%	3.9%	6.6%	
Single dads in poverty, % of single dads	18.1%	14.1%	17.7%	
Single moms in poverty, % of single moms	36.3%	30.4%	34.3%	
Single parents in poverty, % of all single parents	32.5%	26.4%	30.5%	

Source: Indiana Prevention Resource Center, PREV-STAT County Profiles Data

Table 3.121 Families in poverty, Warrick County, 2006				
Category	Warrick	Indiana	U.S.	
	County			
Families with own child under 18 in poverty as % of all families with own children under 18	5.5%	10.2%		
Married couple families with child in poverty, % of married couple families with children	2.7%	3.9%	6.6%	
Single dads in poverty, % of single dads	14.0%	14.1%	17.7%	
Single moms in poverty, % of single moms	20.5%	30.4%	34.3%	
Single parents in poverty, % of all single parents	18.9%	26.4%	30.5%	

Source: Indiana Prevention Resource Center, PREV-STAT County Profiles Data

% Change 2004-
2006
+20.9%
+4.0% +2.2%
-8.8%
+1.8%
+6.4%
+14.8%

*Higher rank indicates higher percent of poverty Source: U.S. Census, 2006 American Community Survey

Table 3.123 Percent of people below poverty level in the past 12 months (for whom poverty status is					
determined)	determined), Indiana and surrounding states, 2006				
Location	%	National Rank			
Indiana	12.7%	25			
Michigan	13.5%	20			
Ohio	13.3%	21			
Kentucky	17.0%	7			
Illinois	12.3%	29			
Wisconsin	11.0%	37			
Missouri	13.6%	17			
United States	13.3%				

Table 3.124 Poverty	status in the past 12 mo	nths, Vanderburgh County	/, 2006
Subject	Total Population	No. Below Poverty	Percent Below Poverty
_	-	Level	Level
AGE			
Under 18 years	38919	7952	20.4%
18 to 64 years	104638	14333	13.7%
65 years and over	22782	1748	7.7%
SEX			
Male	80435	9486	11.8%
Female	85904	14547	16.9%
RACE/ETHNICITY			
White	146572	17288	11.8%
Black or African American	14582	5691	39.0%
EDUCATIONAL ATTAINMENT			
Less than high school graduate	13982	3747	26.8%
High school graduate (includes	37455	3646	9.7%
equivalency)			
Some college, associate's degree	36072	4502	12.5%
Bachelor's degree or higher	23303	479	2.1%
EMPLOYMENT STATUS			
Employed	84606	5583	6.6%
Unemployed	5900	1831	31.0%
WORK EXPERIENCE			
Worked full-time, year-round in the	56760	1230	2.2%
past 12 months			
Worked part-time or part-year in the	38445	7171	18.7%
past 12 months			
Did not work	36468	8794	24.1%

Source: U.S. Census, 2006 American Community Survey

Table 3.125 Percent of working families below 200% of poverty, Indiana and surrounding states, 2004			
State % of Families			
Indiana	27%		
Michigan	25%		
Ohio	27%		
Illinois	25%		
Wisconsin	23%		

Table 3.126 Poverty rates-Gibson County, Indiana, U.S., 2000 vs. 2005				
Category	2000	2005	% Change 2000-2005	
All Ages				
Gibson County	8.0%	9.2%	+15.0%	
Indiana	8.8%	12.2%	+38.6%	
U.S.	11.3%	13.3%	+17.7%	
Ages 18 and under				
Gibson County	10.7%	11.2%	+4.7%	
Indiana	12.1%	16.6%	+37.2%	
U.S.	16.2%	18.5%	+14.2%	

Source: U.S. Census, American Community Survey and Current Population Survey

Table 3.127 Poverty rates-Posey County, Indiana, U.S., 2000 vs. 2005				
Category	2000	2005	% Change 2000-2005	
All Ages				
Posey County	6.9%	9.1%	+31.9%	
Indiana	8.8%	12.2%	+38.6%	
U.S.	11.3%	13.3%	+17.7%	
Ages 18 and under				
Posey County	8.5%	11.2%	+31.8%	
Indiana	12.1%	16.6%	+37.2%	
U.S.	16.2%	18.5%	+14.2%	

Source: U.S. Census, American Community Survey and Current Population Survey

Table 3.128 Poverty rates-Spencer County, Indiana, U.S., 2000 vs. 2005				
Category	2000	2005	% Change 2000-2005	
All Ages				
Spencer County	7.1%	8.4%	+18.3%	
Indiana	8.8%	12.2%	+38.6%	
U.S.	11.3%	13.3%	+17.7%	
Ages 18 and under				
Spencer County	8.9%	10.9%	+22.5%	
Indiana	12.1%	16.6%	+37.2%	
U.S.	16.2%	18.5%	+14.2%	

Source: U.S. Census, American Community Survey and Current Population Survey

Table 3.129 Poverty rates-Vanderburgh County, Indiana, U.S., 2000 vs. 2005						
Category	2000	2005	% Change 2000-2005			
All Ages						
Vanderburgh County	10.6%	13.4%	+26.4%			
Indiana	8.8%	12.2%	+38.6%			
U.S.	11.3%	13.3%	+17.7%			
Ages 18 and under						
Vanderburgh County	14.5%	18.4%	+26.9%			
Indiana	12.1%	16.6%	+37.2%			
U.S.	16.2%	18.5%	+14.2%			

Source: U.S. Census, American Community Survey and Current Population Survey

Table 3.130 Poverty rates-Warrick County, Indiana, U.S., 2000 vs. 2005						
Category	2000	2005	% Change 2000-2005			
All Ages						
Warrick County	5.7%	6.3%	+10.5%			
Indiana	8.8%	12.2%	+38.6%			
U.S.	11.3%	13.3%	+17.7%			
Ages 18 and under						
Warrick County	7.5%	8.7%	+16.0%			
Indiana	12.1%	16.6%	+37.2%			
U.S.	16.2%	18.5%	+14.2%			

Source: U.S. Census, American Community Survey and Current Population Survey

Table 3.131 Children in poverty, state ranking of counties in five-county study area, 2005				
County	2005 Poverty Rate	State Rank*		
Gibson	11.2%	76		
Posey	11.2%	76		
Spencer	10.9%	78		
Vanderburgh	18.4%	26		
Warrick	8.7%	87		
Indiana	16.6%			
U.S.	18.5%			

^{*}Lower rank equals lower poverty rate

Source: U.S. Census, Housing and Household Economic Statistics Division, Small Area Estimates Branch

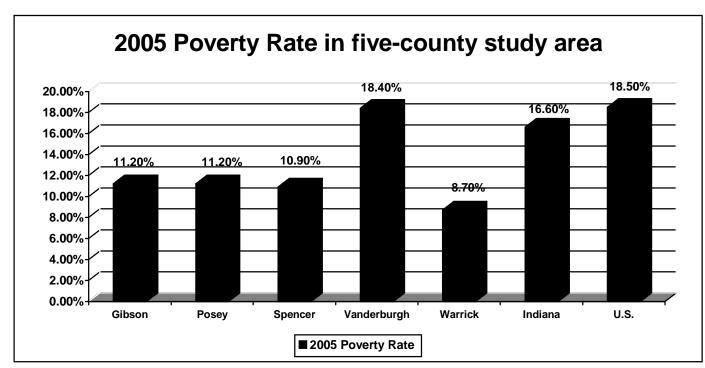


Figure 3.131

Table 3.132 2008 Housing Affordability Data,	Gibson County and Indiana	
Category	Indiana	Gibson County
Number of Households (2000)		
Total	2336306	12847
Renter	667223	2837
% Renter	29%	22%
2008 Area Median Income		
Annual	\$58695	\$55000
Monthly	\$4891	\$4583
30% of AMI	\$17609	\$16500
Maximum Affordable Monthly Housing Cost by % of Family AMI		
30%	\$440	\$413
50%	\$734	\$688
80%	\$1174	\$1100
100%	\$1467	\$1375
2008 Fair Market Rent (FMR)	\$1.10 1	\$465
Zero-Bedroom	\$487	\$466
One-Bedroom	\$553	\$558
Two-Bedroom	\$674	4714
Three-Bedroom	\$863	\$982
Four-Bedroom	\$921	φσυΖ
% Change from 2000 Base Rent to 2008 FMR	φ3∠1	
Zero-Bedroom	25%	26%
One-Bedroom	25%	26%
Two-Bedroom	25%	26%
Three-Bedroom	25%	26%
Four-Bedroom	25%	26%
Annual Income Needed to Afford FMR		
Zero-Bedroom	\$19487	\$18600
One-Bedroom	\$22123	\$18640
Two-Bedroom	\$26942	\$22320
Three-Bedroom	\$34523	\$28560
Four-Bedroom	\$36842	\$39280
Percent of Family AMI Needed to Afford FMR		
Zero-Bedroom	33%	34%
One-Bedroom	38%	34%
Two-Bedroom	46%	41%
Three-Bedroom	59%	52%
Four-Bedroom	63%	71%
2008 Renter Household Income		
Estimated Median	\$29817	\$26667
Percent Needed to Afford 2 BR FMR	90%	84%
Rent Affordable at Median	\$745	\$667
% of Renters Unable to Afford 2 BR FMR	45%	42%
2008 Renter Wage	13,0	1.2,0
Estimated Mean Renter Wage	\$11.53	\$13.15
Rent Affordable at Mean Wage	\$600	\$684
2008 Minimum Wage	+300	430 i
Minimum Wage	\$5.85	\$5.85
Rent Affordable at Minimum Wage	\$304	\$304
2008 Supplemental Security Income	 	ΨΟΟΤ
Monthly SSI Payment	\$637	\$637
Rent Affordable at SSI	\$191	\$191
	φισι	काञा
Housing Wage	¢0.27	CO O 4
Zero-Bedroom	\$9.37	\$8.94
One-Bedroom	\$10.64	\$8.96
Two-Bedroom	\$12.95	\$10.73
Three-Bedroom	\$16.60	\$13.73

Four-Bedroom	\$17.71	\$18.88
Housing Wage as % of Minimum Wage		
Zero-Bedroom	160%	153%
One-Bedroom	182%	153%
Two-Bedroom	221%	183%
Three-Bedroom	284%	235%
Four-Bedroom	303%	323%
Housing Wage as % of Mean Renter Wage		
Zero-Bedroom	81%	68%
One-Bedroom	92%	685
Two-Bedroom	112%	82%
Three-Bedroom	144%	104%
Four-Bedroom	154%	144%
Work Hours/Week at Minimum Wage Needed to Afford FMR		
Zero-Bedroom	64	61
One-Bedroom	73	61
Two-Bedroom	89	73
Three-Bedroom	113	94
Four-Bedroom	121	129
Work Hours/Week at Mean Renter Wage Needed to Afford FMR		
Zero-Bedroom	32	27
One-Bedroom	37	27
Two-Bedroom	45	33
Three-Bedroom	58	42
Four-Bedroom	61	57
Full-time Jobs at Minimum Wage Needed to Afford FMR		
Zero-Bedroom	1.6	1.5
One-Bedroom	1.8	1.5
Two-Bedroom	2.2	1.8
Three-Bedroom	2.8	2.3
Four-Bedroom	3.0	3.2
Full-time Jobs at Mean Renter Wage Needed to Afford FMR		
Zero-Bedroom	0.8	0.7
One-Bedroom	0.9	0.7
Two-Bedroom	1.1	0.8
Three-Bedroom	1.4	1.0
Four-Bedroom	1.5	1.4

Table 3.133 2008 Housing Affordability Data	Posey County and India	ina
Category	Indiana	Posey County
Number of Households (2000)		
Total	2336306	10205
Renter	667223	1848
% Renter	29%	18%
2008 Area Median Income		
Annual	\$58695	\$59800
Monthly	\$4891	\$4983
30% of AMI	\$17609	\$17940
Maximum Affordable Monthly Housing Cost by % of Family AMI		
30%	\$440	\$449
50%	\$734	\$748
80%	\$1174	\$1196
100%	\$1467	\$1495
2008 Fair Market Rent (FMR)		
Zero-Bedroom	\$487	\$415
One-Bedroom	\$553	4484
Two-Bedroom	\$674	\$602
Three-Bedroom	\$863	\$743

Four-Bedroom	\$921	\$807
% Change from 2000 Base Rent to 2008 FMR	·	
Zero-Bedroom	25%	26%
One-Bedroom	25%	27%
Two-Bedroom	25%	26%
Three-Bedroom	25%	26%
Four-Bedroom	25%	26%
Annual Income Needed to Afford FMR		
Zero-Bedroom	\$19487	\$16600
One-Bedroom	\$22123	\$19360
Two-Bedroom	\$26942	\$24080
Three-Bedroom	434523	\$29720
Four-Bedroom	\$36842	\$32280
Percent of Family AMI Needed to Afford FMR	·	·
Zero-Bedroom	33%	28%
One-Bedroom	38%	32%
Two-Bedroom	46%	40%
Three-Bedroom	59%	50%
Four-Bedroom	63%	545
2008 Renter Household Income		-
Estimated Median	\$29817	\$27003
Percent Needed to Afford 2 BR FMR	90%	89%
Rent Affordable at Median	\$745	\$675
% of Renters Unable to Afford 2 BR FMR	45%	44%
2008 Renter Wage	.070	1170
Estimated Mean Renter Wage	\$11.53	\$11.92
Table 3.133 continued	ψσσ	V2
Rent Affordable at Mean Wage	\$600	\$620
2008 Minimum Wage	Ψ000	Ψ020
Minimum Wage	\$5.85	\$5.85
Rent Affordable at Minimum Wage	\$304	\$304
2008 Supplemental Security Income	ψου.	φοσι
Monthly SSI Payment	\$637	\$637
Rent Affordable at SSI	\$191	\$191
Housing Wage	ψ.σ.	Ψισι
Zero-Bedroom	\$9.37	\$7.98
One-Bedroom	\$10.64	\$9.31
Two-Bedroom	\$12.95	\$11.58
Three-Bedroom	\$16.60	\$14.29
Four-Bedroom	\$17.71	\$15.52
Housing Wage as % of Minimum Wage	4	V.0.02
Zero-Bedroom	160%	136%
One-Bedroom	182%	159%
Two-Bedroom	221%	198%
Three-Bedroom	284%	244%
Four-Bedroom	303%	265%
Housing Wage as % of Mean Renter Wage	00070	200,0
Zero-Bedroom	81%	67%
One-Bedroom	92%	78%
Two-Bedroom	112%	97%
Three-Bedroom	144%	120%
Four-Bedroom	154%	130%
Work Hours/Week at Minimum Wage Needed to Afford FMR	10 170	13070
Zero-Bedroom	64	55
One-Bedroom	73	64
Two-Bedroom	89	79
Three-Bedroom	113	98
Four-Bedroom	121	106
Work Hours/Week at Mean Renter Wage Needed to Afford FMR	141	100
TYOR HOUSE TO COR AL MICAN NOTICE TY Age 140000 TO AHOID TIME		

Zero-Bedroom	32	27
One-Bedroom	37	31
Two-Bedroom	45	39
Three-Bedroom	58	48
Four-Bedroom	61	52
Full-time Jobs at Minimum Wage Needed to Afford FMR		
Zero-Bedroom	1.6	1.4
One-Bedroom	1.8	1.6
Two-Bedroom	2.2	2.0
Three-Bedroom	2.8	2.4
Four-Bedroom	3.0	2.7
Full-time Jobs at Mean Renter Wage Needed to Afford FMR		
Zero-Bedroom	0.8	0.7
One-Bedroom	0.9	0.8
Two-Bedroom	1.1	1.0
Three-Bedroom	1.4	1.2
Four-Bedroom	1.5	1.3

Table 3.134 2008 Housing Affordability Data,	Spencer County and Inc	diana
Category	Indiana	Spencer County
Number of Households (2000)		
Total	2336306	7569
Renter	667223	1253
% Renter	29%	17%
2008 Area Median Income		
Annual	\$58695	\$56500
Monthly	\$4891	\$4708
30% of AMI	\$17609	\$16950
Maximum Affordable Monthly Housing Cost by % of Family AMI	•	·
30%	\$440	\$424
50%	\$734	\$706
80%	\$1174	\$1130
100%	\$1467	\$1413
2008 Fair Market Rent (FMR)	•	·
Zero-Bedroom	\$487	\$360
One-Bedroom	\$553	\$426
Two-Bedroom	\$674	\$555
Three-Bedroom	\$863	\$718
Four-Bedroom	\$921	\$741
% Change from 2000 Base Rent to 2008 FMR	'	
Zero-Bedroom	25%	25%
One-Bedroom	25%	26%
Two-Bedroom	25%	26%
Three-Bedroom	25%	26%
Four-Bedroom	25%	26%
Annual Income Needed to Afford FMR		
Zero-Bedroom	\$19487	\$14400
One-Bedroom	\$22123	\$17040
Two-Bedroom	\$26942	\$22200
Three-Bedroom	434523	\$28720
Four-Bedroom	\$36842	\$29640
Percent of Family AMI Needed to Afford FMR	•	
Zero-Bedroom	33%	25%
One-Bedroom	38%	30%
Two-Bedroom	46%	39%
Table 3.134 continued		
Three-Bedroom	59%	51%
Four-Bedroom	63%	52%

2008 Renter Household Income		
Estimated Median	\$29817	\$26869
Percent Needed to Afford 2 BR FMR	90%	83%
Rent Affordable at Median	\$745	\$672
% of Renters Unable to Afford 2 BR FMR	45%	41%
2008 Renter Wage	43 /6	4170
Estimated Mean Renter Wage	\$11.53	\$8.91
	\$600	\$463
Rent Affordable at Mean Wage 2008 Minimum Wage	\$600	\$403
	¢e oe	ŮE OE
Minimum Wage	\$5.85 \$304	\$5.85 \$304
Rent Affordable at Minimum Wage	\$304	\$304
2008 Supplemental Security Income	0007	0007
Monthly SSI Payment	\$637	\$637
Rent Affordable at SSI	\$191	4191
Housing Wage	<u> </u>	
Zero-Bedroom	\$9.37	\$6.92
One-Bedroom	\$10.64	\$8.19
Two-Bedroom	\$12.95	\$10.67
Three-Bedroom	\$16.60	\$13.81
Four-Bedroom	\$17.71	\$14.25
Housing Wage as % of Minimum Wage		
Zero-Bedroom	160%	118%
One-Bedroom	182%	140%
Two-Bedroom	221%	182%
Three-Bedroom	284%	236%
Four-Bedroom	303%	244%
Housing Wage as % of Mean Renter Wage		
Zero-Bedroom	81%	78%
One-Bedroom	92%	92%
Two-Bedroom	112%	120%
Three-Bedroom	144%	155%
Four-Bedroom	154%	160%
Work Hours/Week at Minimum Wage Needed to Afford FMR	10 170	10070
Zero-Bedroom	64	47
One-Bedroom	73	56
Two-Bedroom	89	73
Three-Bedroom	113	94
Four-Bedroom	121	97
Work Hours/Week at Mean Renter Wage Needed to Afford	121	91
FMR		
	33	24
Zero-Bedroom	32	31
One-Bedroom	37	37
Two-Bedroom	45	48
Three-Bedroom	58	62
Four-Bedroom	61	64
Full-time Jobs at Minimum Wage Needed to Afford FMR		
Zero-Bedroom	1.6	1.2
One-Bedroom	1.8	1.4
Two-Bedroom	2.2	1.8
Three-Bedroom	2.8	2.4
Four-Bedroom	3.0	2.4
Full-time Jobs at Mean Renter Wage Needed to Afford FMR		
Zero-Bedroom	0.8	0.8
One-Bedroom	0.9	0.9
Two-Bedroom	1.1	1.2
Three-Bedroom	1.4	1.5
Four-Bedroom	1.5	1.6
Source: National Law Income Housing Coalition, Out of Peach 200		· · · ·

Table 3.135. 2008 Housing Affordability Data, V	anderburgh County a	nd Indiana
Category	Indiana	Vanderburgh County
Number of Households (2000)		<u> </u>
Total	2336306	70623
Renter	667223	23438
% Renter	29%	33%
2008 Area Median Income		
Annual	\$58695	\$59800
Monthly	\$4891	\$4983
30% of AMI	\$17609	\$17940
Maximum Affordable Monthly Housing Cost by % of Family AMI	V.1.000	4.1.0.10
30%	\$440	\$449
50%	\$734	\$748
80%	\$1174	\$1196
100%	\$1467	\$1495
2008 Fair Market Rent (FMR)	ΨΙΨΟΙ	Ψ1433
Zero-Bedroom	\$487	\$415
One-Bedroom	\$553	\$484
Two-Bedroom	\$674	\$484 \$602
Three-Bedroom	\$674 \$863	\$602 \$743

Four-Bedroom	\$921	\$807
% Change from 2000 Base Rent to 2008 FMR	050/	000/
Zero-Bedroom	25%	26%
One-Bedroom	25%	27%
Two-Bedroom	25%	26%
Three-Bedroom	25%	26%
Four-Bedroom	25%	26%
Annual Income Needed to Afford FMR		
Zero-Bedroom	\$19487	\$16600
One-Bedroom	\$22123	\$19360
Two-Bedroom	\$26942	\$24080
Three-Bedroom	434523	\$29720
Four-Bedroom	\$36842	\$32280
Percent of Family AMI Needed to Afford FMR		
Zero-Bedroom	33%	28%
One-Bedroom	38%	32%
Two-Bedroom	46%	40%
Three-Bedroom	59%	50%
Four-Bedroom	63%	54%
2008 Renter Household Income		
Estimated Median	\$29817	\$26840
Percent Needed to Afford 2 BR FMR	90%	90%
Rent Affordable at Median	\$745	\$671
% of Renters Unable to Afford 2 BR FMR	45%	45%
2008 Renter Wage		
Estimated Mean Renter Wage	\$11.53	\$10.77
Rent Affordable at Mean Wage	\$600	\$560
2008 Minimum Wage	7-00	+200
Minimum Wage	\$5.85	\$5.85
Rent Affordable at Minimum Wage	\$304	\$304
2008 Supplemental Security Income	400 .	400 .
Monthly SSI Payment	\$637	\$637
Rent Affordable at SSI	\$191	\$191
Housing Wage	ΨΙΟΙ	ψισι
Zero-Bedroom	\$9.37	\$7.98
	\$10.64	\$9.31
One-Bedroom Two Pedroom		
Two-Bedroom	\$12.95	\$11.58 \$14.20
Three-Bedroom	\$16.60	\$14.29

Four-Bedroom	\$17.71	\$15.52
Housing Wage as % of Minimum Wage		
Zero-Bedroom	160%	136%
One-Bedroom	182%	159%
Two-Bedroom	221%	198%
Three-Bedroom	284%	244%
Four-Bedroom	303%	265%
Housing Wage as % of Mean Renter Wage		
Zero-Bedroom	81%	74%
One-Bedroom	92%	86%
Two-Bedroom	112%	107%
Three-Bedroom	144%	133%
Four-Bedroom	154%	144%
Work Hours/Week at Minimum		
Wage Needed to Afford FMR		
Zero-Bedroom	64	55
One-Bedroom	73	64
Two-Bedroom	89	79
Three-Bedroom	113	98
Four-Bedroom	121	106
Work Hours/Week at Mean Renter Wage Needed to Afford		
FMR		
Zero-Bedroom	32	30
One-Bedroom	37	35
Two-Bedroom	45	43
Three-Bedroom	58	53
Four-Bedroom	61	58
Full-time Jobs at Minimum Wage Needed to Afford FMR		
Zero-Bedroom	1.6	1.4
One-Bedroom	1.8	1.6
Two-Bedroom	2.2	2.0
Three-Bedroom	2.8	2.4
Four-Bedroom	3.0	2.7
Full-time Jobs at Mean Renter Wage Needed to Afford FMR		
Zero-Bedroom	0.8	0.7
One-Bedroom	0.9	0.9
Two-Bedroom	1.1	1.1
Three-Bedroom	1.4	1.3
Four-Bedroom	1.5	1.4

Table 3.136 2008 Housing Affordability Data,	Warrick County and	Indiana
Category	Indiana	Warrick County
Number of Households (2000)		
Total	2336306	19438
Renter	667223	3252
% Renter	29%	17%
2008 Area Median Income		
Annual	\$58695	\$59800
Monthly	\$4891	\$4983
30% of AMI	\$17609	\$17940
Maximum Affordable Monthly Housing Cost by % of Family AMI		
30%	\$440	\$449
50%	\$734	\$748
80%	\$1174	\$1196
100%	\$1467	\$1495
2008 Fair Market Rent (FMR)		
Zero-Bedroom	\$487	\$415

One-Bedroom	\$553	\$484
Two-Bedroom	\$674	\$602
Three-Bedroom	\$863	\$743
Four-Bedroom	\$921	\$807
% Change from 2000 Base Rent to 2008 FMR	* -	-
Zero-Bedroom	25%	26%
One-Bedroom	25%	27%
Two-Bedroom	25%	26%
Three-Bedroom	25%	26%
Four-Bedroom	25%	26%
Annual Income Needed to Afford FMR	2070	2070
Zero-Bedroom	\$19487	\$16600
One-Bedroom	\$22123	\$19360
Two-Bedroom	\$26942	\$24080
Three-Bedroom	\$34523	\$29720
Four-Bedroom	\$36842	\$32280
Percent of Family AMI Needed to Afford FMR	φοσο 12	\$62266
Zero-Bedroom	33%	28%
One-Bedroom	38%	32%
Two-Bedroom	46%	40%
Three-Bedroom	59%	50%
Four-Bedroom	63%	54%
2008 Renter Household Income	0070	0170
Estimated Median	\$29817	\$34716
Percent Needed to Afford 2 BR FMR	90%	69%
Rent Affordable at Median	\$745	\$868
% of Renters Unable to Afford 2 BR FMR	45%	34%
2008 Renter Wage	4570	34 /0
Estimated Mean Renter Wage	\$11.53	\$10.53
Rent Affordable at Mean Wage	\$600	\$548
2008 Minimum Wage	φ000	φ346
Minimum Wage	\$5.85	\$5.85
Rent Affordable at Minimum Wage	\$304	\$3.65
2008 Supplemental Security Income	φ304	φ304
Monthly SSI Payment	\$637	\$637
Rent Affordable at SSI	\$191	\$191
Housing Wage	φ191	\$191
Zero-Bedroom	\$9.37	\$7.98
One-Bedroom	\$10.64	\$9.31
Two-Bedroom	\$12.95	\$11.58
Three-Bedroom	\$16.60	\$14.29
Four-Bedroom	\$17.71	\$15.52
Housing Wage as % of Minimum Wage	φ17.71	ψ13.32
Zero-Bedroom	160%	136%
One-Bedroom	182%	159%
Two-Bedroom	221%	198%
Three-Bedroom	284%	244%
Four-Bedroom	303%	265%
Housing Wage as % of Mean Renter Wage	30370	20070
Zero-Bedroom	81%	76%
One-Bedroom	92%	88%
Two-Bedroom	112%	1105
Three-Bedroom	144%	136%
Four-Bedroom	154%	147%
Work Hours/Week at Minimum Wage Needed to Afford FMR	10470	14770
Zero-Bedroom	64	55
One-Bedroom		
Two-Bedroom	73 89	64 79
Three-Bedroom	113	98
THICE-DEGIOOH	113	90

Four-Bedroom	121	106
Work Hours/Week at Mean Renter Wage Needed to Afford FMR		
Zero-Bedroom	32	30
One-Bedroom	37	35
Two-Bedroom	45	44
Three-Bedroom	58	54
Four-Bedroom	61	59
Full-time Jobs at Minimum Wage Needed to Afford FMR		
Zero-Bedroom	1.6	1.4
One-Bedroom	1.8	1.6
Two-Bedroom	2.2	2.0
Three-Bedroom	2.8	2.4
Four-Bedroom	3.0	2.7
Full-time Jobs at Mean Renter Wage Needed to Afford FMR		
Zero-Bedroom	0.8	0.8
One-Bedroom	0.9	0.9
Two-Bedroom	1.1	1.1
Three-Bedroom	1.4	1.4
Four-Bedroom	1.5	1.5

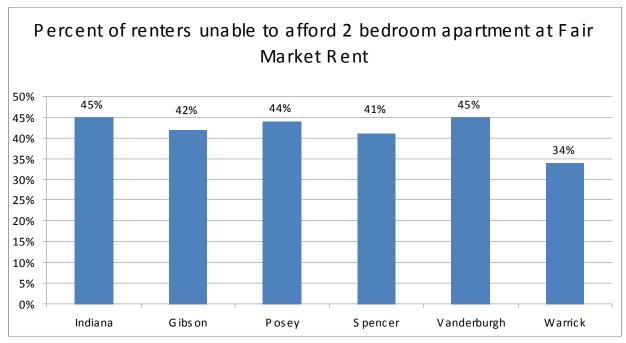


Figure 3.136

Table 3.136a Housing Hardship, United State	es es
No. of households paying over 50% of income toward housing ¹	17 million
No. of households in worst-case housing*2	5.2 million

Source: Joint Center for Housing Studies, Harvard, *The State of the Nation's Housing 2007*; ²HUD 2003 data from *Affordable Housing Needs: A Report to Congress on the Significant Need for Housing, December 2005*

^{*} Worst-case housing: spend 50% of income on rent and earn only 50% of the area median income or live in severely substandard housing

Table 3.137 Data from 2006 America's Second Harvest Network "Hunger in America" Study, Tri-State Food Bank coverage area					
Category	Rate				
Annual estimated no. of clients	86500				
% <18	35%				
% elderly	7%				
% food insecure	63%				
% food insecure with kids	64%				
% food insecure with hunger	33%				
% with hunger with kids	24%				
% who received food stamps	44%				
Choices					
% who made choice between food and utilities	42%				
% who made choice between food and housing	31%				
% who made choice between food and health care	37%				

Source: America's Second Harvest Network, *Hunger in America 2006*; Tri-State Food Bank, Evansville, IN

ISSUE 20: AFFORDABLE AND ACCESSIBLE PUBLIC TRANSPORTATION

Data from the 2006 American Community Survey of the U.S. Census indicate that the median earnings for individuals who take public transportation to work equals \$9,370 annually and that over 50% of those individuals are below 100% of the poverty level. This would indicate the need for affordable public transportation, which places the least burden on individuals who use these resources.

Table 3.138 Means of transport				
Subject	Total	Car, Truck, or Van— Drove Alone	Car, Truck, or Van—Carpooled	Public Transportation (excluding taxicab)
Workers 16 years and over	83693	69721	7224	1367
Age				
16 to 19 years	5.9%	4.8%	12.4%	13.3%
20 to 24 years	11.1%	10.4%	16.2%	0.0%
25 to 44 years	41.5%	41.6%	36.3%	71.3%
45 to 54 years	23.3%	24.6%	20.4%	8.0%
55 to 59 years	9.3%	9.4%	11.0%	3.9%
60 years and over	8.9%	9.2%	3.6%	3.6%
Median age (years)	41.7	42.5	33.1	31.7
Sex				0
Male	52.3%	52.0%	50.1%	68.5%
Female	47.7%	48.0%	49.9%	31.5%
Race and Hispanic or Latino Origin	/0	.5.070	.5.576	571070
One race				
White	89.6%	91.7%	83.8%	43.2%
Black or African American	7.2%	5.5%	8.3%	54.7%
American Indian and Alaska Native				
Asian				
Native Hawaiian and Other Pacific Islander				
Some other race				
Two or more races				
Hispanic or Latino origin (of any race)				
White alone, not Hispanic or Latino	89.3%	91.4%	82.2%	43.2%
Language spoken at home and ability to	00.070	31.470	02.270	40.270
speak English				
Speak language other than English	4.3%	3.6%	11.3%	2.0%
Speak English very well	2.7%	2.7%	2.9%	0.0%
Speak English less than very well	1.6%	1.0%	8.3%	2.0%
Earnings in the past 12 months (in 2006	1.070	1.070	0.070	2.070
inflation-adjusted dollars) for workers				
Workers 16 years and over with earnings	83693	69721	7224	1367
\$1 to \$9999 or loss	17.3%	14.2%	19.4%	59.4%
\$10000 to \$14999	8.5%	8.2%	10.7%	11.9%
\$15000 to \$24999	19.3%	18.8%	26.3%	28.7%
\$25000 to \$24939	19.1%	20.2%	21.0%	0.0%
\$35000 to \$49999	15.0%	16.6%	6.6%	0.0%
\$5000 to \$4999 \$5000 to \$64999	10.2%	10.7%	8.4%	0.0%
\$50000 to \$64999 \$65000 to \$74999	3.6%	3.9%	3.3%	0.0%
\$75000 to \$74999 \$75000 or more	7.0%	7.3%	4.5%	0.0%
Median earnings (dollars)	27186	28943	21302	9370
Poverty status in the past 12 months	21100	20343	Z 100Z	3310
Workers 16 years and over for whom	82357	69307	7113	1367
poverty status is determined	02331	09307	1113	1301
Below 100 percent of the poverty level	6.5%	4.2%	9.0%	55.8%
100 to 149 percent of the poverty level	7.7%	6.1%	9.0% 18.4%	13.5%
				30.7%
At or above 150 percent of the poverty level	85.9%	89.6%	72.6%	30.7%

Source: U.S. Census, 2006 American Community Survey

Domain IV: Cultural Diversity

The following section presents secondary data sources applicable to Domain IV: Cultural Diversity. As shown in Table 4.1, all three issues in this domain were rated low in the priority need quadrant (high/low). Further, only one, race relations, was rated in the top ten strength areas, with 56.2% of respondents indicating that the issue is important and being addressed well. As noted by the mean importance ratings and the percentage of individuals who fell into the low/high and low/low quadrants, the other two issues in this domain were viewed as lower in importance than other issues in the survey. In fact, the three issues in the cultural diversity domain were rated as the three lowest in importance in the all counties combined analysis. Secondary data for this domain are presented in Tables 4.2 and 4.3. Note that data are presented in the order in which issues within the domain were listed on the needs assessment survey.

	Table 4.1 All Counties: Cultural Diversity Domain Note: Issues are sorted by the HL Rank (<u>High in importance</u> and <u>Low in how the issue is being addressed</u>)															
Overall	Importance-Being Addressed Response Patterns						Overall Mean Ratings				Do not know how well issue					
Rank based on	Item from Needs Assessment			HL		нн	LL	LH	Importance How well issue is			is being addressed				
Response Pattern	•	N	Rank	%	Rank	%	%	%	Rank	Mean	N	Rank	Mean	N	N	%
47	Language barriers for non-English speaking individuals	908	1	33.70	3	37.70	12.60	16.1	3	2.77	1399	1	2.51	933	607	39.42
48	Integration and appreciation of individuals from different cultures	1003	2	32.10	2	48.90	10.00	9.10	2	3.00	1425	2	2.56	1030	510	33.12
52	Race relations	1029	3	27.10	1	56.20	8.70	8.00	1	3.08	1413	3	2.63	1050	452	30.09

ISSUE 21: LANGUAGE BARRIERS FOR NON-ENGLISH SPEAKING INDIVIDUALS

In Indiana, the percentage of Limited English Students (LES) in public schools has increased each year since 2002/2003. As of the 2006/2007 school year, approximately 4% of students in the state were classified as LES. All area public school corporations also have witnessed an increase in Limited English Students. Those percentages, however, are still below the state average. Based on data from the 2006 American Community Survey, 4.8% of households in the U.S. are classified as linguistically isolated, which means that no member 14 years and over either speaks only English or speaks a non-English language and speaks English very well. The percentage of linguistically isolated individuals in Indiana (1.8%) is lower than the national average, and the percentage in Vanderburgh County (.07%) is even lower.

	Table 4.2	Limited	l English Stude	ents (LE	S), area public	school o	corporations, 2	2002/20	03 – 2006/200	7	
School	2002/20		2003/200		2004/20		2005/20		2006/20		%
Corporation	No. LES/	%	No. LES/	%	No. LES/	%	No. LES/	%	No. LES/	%	Difference
	Enrollment	LES	Enrollment	LES	Enrollment	LES	Enrollment	LES	Enrollment	LES	LES
											2002/2003
											_
0.11											2006/2007
Gibson											
County East	0/1051	0.00/	0/1042	0.00/	0/1040	0.00/	2/4042	0.20/	2/1024	0.20/	.0.20/
Gibson	0/1051	0.0%	0/1042	0.0%	0/1040	0.0%	2/1042	0.2%	2/1024	0.2%	+0.2%
North	3/2042	0.1%	4/2105	0.2%	5/2149	0.2%	7/2159	0.3%	18/2125	0.8%	+0.7%
Gibson	3/2042	0.176	4/2103	0.276	5/2149	0.276	1/2139	0.576	10/2123	0.076	+ 0.7 /0
South	1/1868	0.0%	1/1857	0.0%	2/1865	0.1%	1/1903	0.0%	5/1971	0.3%	+0.3%
Gibson	17 1000	0.070	17 1007	0.070	2/1000	0.170	17 1000	0.070	0,1071	0.070	10.070
Posey County		<u> </u>				1		l	l		
Mount	1/2817	0.0%	1/2725	0.0%	1/2662	0.0%	10/2615	0.4%	17/2546	0.7%	+0.7%
Vernon	.,			010,0		0.070			,		
New	0/229	0.0%	0/208	0.0%	not		not		not		
Harmony					reported		reported		reported		
North	1/1571	0.1%	2/1499	0.1%	2/1514	0.1%	2/1500	0.1%	5/1465	0.3%	+0.2%
Posey											
Spencer											
County				1							
North	59/2372	2.5%	61/2307	2.6%	66/2238	2.9%	75/2199	3.4%	60/2259	2.7%	+0.2%
Spencer		2 121	2/1-2/	2 22/	2// 1=/	2.20/	2/1.1=2	2 101	2// /=2	2 =2/	2 42/
South	2/1525	0.1%	3/1501	0.2%	9/1471	0.6%	6/1453	0.4%	8/1473	0.5%	+0.4%
Spencer											
Vanderburgh											
County Evansville-	142/	0.6%	229/ 22408	1.0%	272/ 22139	1.2%	301/	1.4%	283/ 22190	1.3%	+0.7%
Vanderburgh	22825	0.076	229/ 22400	1.076	212/22139	1.2/0	22110	1.4/0	203/ 22 190	1.370	+ 0.7 /0
Warrick	22020					<u> </u>	22110	<u> </u>	<u> </u>		
County											
Warrick	45/9144	0.5%	59/9269	0.6%	87/9268	0.9%	67/9354	0.7%	121/9590	1.3%	+0.8%
Indiana	22589/	2.3%	28741/	2.8%	31965/	3.1%	35817/	3.5%	42727/	4.1%	+1.8%
	1001937		1010659		1021197		1034727		1045702		

Source: Indiana Department of Education

Table 4.3 Linguistic Isolation*, Vanderburgh County, Indiana, and U.S., 2006						
Subject	% Linguistically Isolated					
	Vanderburgh	Indiana	U.S.			
All Households	0.7%	1.8%	4.8%			
Households speaking						
Spanish	16.6%	23.8%	27.6%			
Other Indo-European languages	10.6%	10.7%	16.5%			
Asian and Pacific Island languages	0.0%	24.3%	27.4%			
Other languages	19.4%	20.9%	16.0%			
Percent Imputed						
Language status	3.0%	1.8%	2.0%			
Language status (speak a language other than	2.4%	1.7%	1.9%			
English)						
Ability to speak English	6.0%	3.7%	2.8%			

^{*}Linguistic isolation: household in which no member 14 years and over (1) speaks only English or (2) speaks a non-English language and speaks English "very well." All members of the household 14 years and over have at least some difficulty with English.

Source: U.S. Census, 2006 American Community Survey

Domain V: Family Life

The following section presents secondary data sources applicable to Domain V: Family Life. As shown in Table 5.1, understanding the cycle of poverty that occurs in successive generations is the top ranked priority need in this domain and in all counties combined. As discussed in the synthesis section of the all counties combined analysis, several data sources, including rising poverty rates and greater numbers of students on free/reduced lunch, lend credence to this issue as the top priority need in the community. Four additional issues were rated in the high/low quadrant by over 50% of respondents. These include: teenage sex, pregnancy, and parenthood; support for caregivers of the elderly, mentally ill, and physically disabled; children with behavioral problems; and lack of child support payments. The issues rated sixth through eleventh in the high/low quadrant for this domain were all very similar in the percentage of respondents who placed these issues in this particular category. One issue in this category stood out as being a strength in this domain: children with special mental and physical conditions. Over 63% of respondents indicated that this issue was important and being addressed well. Secondary data for this domain are presented in Tables 5.2 to 5.138. Note that data are presented in the order in which issues within the domain were listed on the needs assessment survey.

Table 5.1 All Counties: Family Life Domain Note: Issues are sorted by the HL Rank (High in importance and Low in how the issue is being addressed) Do not Importance-Being Addressed **Overall Mean Ratings** know how **Response Patterns** Overall well issue How well issue is Rank based is being HL HH LL LH Importance being addressed Item from Needs Assessment addressed on N Response Rank Mean Rank Mean Rank Rank Pattern % % % % Ν Ν Ν % Understanding the cycle of poverty 1018 61.90 13 27.00 9.10 2.00 11 3.37 1477 13 2.08 1038 489 32.02 that occurs in successive generations 8 Teenage sex, pregnancy, and 24.93 1134 2 54.10 11 38.70 6.30 .90 3.46 1558 11 2.25 1153 383 4 parenthood 12 Support for care givers of the elderly, 987 3 51.10 11 38.70 8.90 1.30 3.41 1507 12 2.24 1004 514 33.86 mentally ill, or physically disabled 13 Children with behavioral problems 1087 4 50.70 9 41.80 5.80 1.70 3.44 1537 2.34 1097 435 28.39 6 8 14 Lack of child support payments 924 5 50.60 10 39.80 6.70 2.80 3.44 1387 10 2.28 944 542 36.47 6 6 17 Preparation and support for 1028 48.20 8 42.20 7.80 1.80 12 3.36 1477 9 2.33 1045 487 31.79 parenthood 20 Child sexual abuse 1021 7 46.90 5 47.40 4.70 1.00 3.58 1501 5 2.41 1045 454 30.29 25 Lack of safe, constructive 8 6 44.20 6.30 4.40 1512 6 2.40 359 23.54 1146 45.10 9 3.40 1166 opportunities for youth 26 Elderly abuse and neglect 883 9 45.00 7 42.90 8.40 3.70 10 3.38 1428 7 2.38 899 627 41.09 Parent involvement in child education 27 1175 10 44.90 4 50.20 4.10 .80 2 3.55 1568 4 2.49 1190 341 22.27 28 Child physical/mental abuse and 1140 11 44.20 3 51.00 3.40 1.40 3.55 1566 3 2.50 1154 393 25.40 neglect Preparation and support for marriage 42 1035 12 35.00 52.50 7.20 3.23 1480 2.54 476 31.07 2 5.30 13 2 1056 and marital relations

Children with special mental and

physical conditions

49

1075

13

31.00

1

63.80

3.70

1.50

4

3.46

441

28.84

1522

2.66

1088

ISSUE 24: CHILD PHYSICAL/MENTAL ABUSE AND NEGLECT

In all counties in the five-county study area, the number of juvenile CHINS (Children in Need of Services) case filings increased between 1997 and 2006. In terms of child physical abuse and neglect, the number of cases that were opened increased between 2003 and 2005. The percentage of physical abuse and neglect cases that were substantiated showed an overall decrease during the three-year period. Individual counties in the study area experienced varying changes, with some increasing in substantiated cases and others decreasing.

When viewing child abuse (physical and sexual) and neglect rates per 1,000 children, data show that the rate of substantiated cases in Indiana increased by 2.4%. The year 2006 rates for Gibson and Vanderburgh counties were higher than the statewide rate, Posey County was equivalent to Indiana (although rates have historically been much lower in Posey), and rates for Spencer and Warrick are lower than the Indiana rate. Between 2002 and 2006, abuse and neglect rates increased in Gibson, Posey, and Vanderburgh counties, and decreased in Spencer and Warrick counties.

Overall, deaths in Indiana due to child abuse and neglect decreased between 2003 and 2007. During this time period, a total of seven child deaths due to abuse or neglect occurred in the five-county area, with Vanderburgh County experiencing the most at five deaths.

Table 5.2 Number of juvenile (Children in Need	of Services) CHINS case filings, Gibson County, 1997-2006
Year	No. of Case Filings
1997	21
1998	28
1999	29
2000	41
2001	21
2002	30
2003	39
2004	75
2005	65
2006	67
% Change 1997-2006	+219%

Source: Indiana Supreme Court, Division of State Court Administration; Kids Count, Annie E. Casey Foundation

Table 5.3 Number of juvenile (Children in Need	of Services) CHINS case filings, Posey County, 1997-2006
Year	No. of Case Filings
1997	8
1998	3
1999	10
2000	7
2001	9
2002	6
2003	5
2004	15
2005	12
2006	16
% Change 1997-2006	+100%

Source: Indiana Supreme Court, Division of State Court Administration; Kids Count, Annie E. Casey Foundation

Table 5.4 Number of juvenile (Children in Need of S	Services) CHINS case filings, Spencer County, 1997-2006
Year	No. of Case Filings
1997	5
1998	2
1999	10
2000	4
2001	4
2002	3
2003	3
2004	3
2005	7
2006	9
% Change 1997-2006	+80%

Source: Indiana Supreme Court, Division of State Court Administration; Kids Count, Annie E. Casey Foundation

Table 5.5 Number of juvenile (Children in Need of Se	ervices) CHINS case filings, Vanderburgh County, 1997-2006
Year	No. of Case Filings
1997	185
1998	221
1999	255
2000	255
2001	345
2002	277
2003	270
2004	304
2005	363
2006	316
% Change 1997-2006	+71%

Source: Indiana Supreme Court, Division of State Court Administration; Kids Count, Annie E. Casey Foundation

Table 5.6 Number of juvenile (Children in Need of Services) CHINS case filings, Warrick County, 1997-2006						
Year	No. of Case Filings					
1997	25					
1998	24					
1999	20					
2000	13					
2001	21					
2002	13					
2003	42					
2004	28					
2005	58					
2006	28					
% Change 1997-2006	+12%					

Source: Indiana Supreme Court, Division of State Court Administration; Kids Count, Annie E. Casey Foundation

Table 5.7 Child physical abuse and neglect cases, Indiana, 2003-2005							
Category	2003	2004	2005				
Physical Abuse	12383	13684	13841				
Substantiated	3620	3583	2862				
Unsubstantiated	8763	10101	10685				
Indicated*			294				
% Substantiated	29.2%	26.2%	20.7%				
Neglect	38437	44262	49204				
Substantiated	12308	13128	12820				
Unsubstantiated	26129	31134	35502				
Indicated*			882				
% Substantiated	32.0%	29.7%	26.1%				

^{*}Indicated status returned July 1, 2004 per statue change Source: Indiana Department of Child Services

Table 5.8 Child physical abuse and neglect cases, Gibson County, 2003- 2005						
Category	2003	2004	2005			
Physical Abuse	44	61	52			
Substantiated	12	17	17			
Unsubstantiated	32	44	35			
Indicated*			0			
% Substantiated	27.3%	27.9%	32.7%			
% Substantiated in Indiana	29.2%	26.2%	20.7%			
Neglect	229	249	250			
Substantiated	110	99	100			
Unsubstantiated	119	150	148			
Indicated*			2			
% Substantiated	48.0%	39.8%	40.0%			
% Substantiated in Indiana	32.0%	29.7%	26.1%			

^{*}Indicated status returned July 1, 2004 per statue change Source: Indiana Department of Child Services

Table 5.9 Child physical abuse and neglect cases, Posey County, 2003- 2005					
Category	2003	2004	2005		
Physical Abuse	58	48	40		
Substantiated	20	13	16		
Unsubstantiated	38	35	24		
Indicated*			0		
% Substantiated	34.5%	27.1%	40.0%		
% Substantiated in Indiana	29.2%	26.2%	20.7%		
Neglect	91	175	169		
Substantiated	18	34	59		
Unsubstantiated	73	141	110		
Indicated*			1		
% Substantiated	19.8%	19.4%	34.9%		
% Substantiated in Indiana 32.0% 29.7% 26.1%					

^{*}Indicated status returned July 1, 2004 per statue change Source: Indiana Department of Child Services

Table 5.10 Child physical abuse and neglect cases, Spencer County, 2003-2005				
Category	2003	2004	2005	
Physical Abuse	19	23	28	
Substantiated	7	6	7	
Unsubstantiated	12	17	21	
Indicated*			0	
% Substantiated	36.8%	26.1%	25.0%	
% Substantiated in Indiana	29.2%	26.2%	20.7%	
Neglect	103	106	93	
Substantiated	29	37	25	
Unsubstantiated	74	69	64	
Indicated*			4	
% Substantiated	28.2%	34.9%	26.9%	
% Substantiated in Indiana	32.0%	29.7%	26.1%	

*Indicated status returned July 1, 2004 per statue change Source: Indiana Department of Child Services

Table 5.11 Child physical abuse and neglect cases, Vanderburgh County, 2003-2005				
Category	2003	2004	2005	
Physical Abuse	459	494	535	
Substantiated	160	130	117	
Unsubstantiated	299	364	418	
Indicated*			9	
% Substantiated	34.9%	26.3%	21.9%	
% Substantiated in Indiana	29.2%	26.2%	20.7%	
Neglect	1356	1854	2046	
Substantiated	547	581	567	
Unsubstantiated	809	1273	1479	
Indicated*			35	
% Substantiated	40.3%	31.3%	27.7%	
% Substantiated in Indiana	32.0%	29.7%	26.1%	

*Indicated status returned July 1, 2004 per statue change

Source: Indiana Department of Child Services

Table 5.12 Child physical abuse and neglect cases, Warrick County, 2003-2005				
Category	2003	2004	2005	
Physical Abuse	118	166	125	
Substantiated	30	27	31	
Unsubstantiated	88	139	91	
Indicated*			3	
% Substantiated	25.4%	16.3%	24.8%	
% Substantiated in Indiana	29.2%	26.2%	20.7%	
Neglect	326	463	405	
Substantiated	100	143	109	
Unsubstantiated	226	320	296	
Indicated*			6	
% Substantiated	30.7%	30.9%	26.9%	
% Substantiated in Indiana	32.0%	29.7%	26.1%	

*Indicated status returned July 1, 2004 per statue change

Source: Indiana Department of Child Services

Table 5.13 Child abuse and neglect rates per 1000 children*, Indiana, 2002-2006			
Year	Rate per 1000 children		
2002	12.7		
2003	12.9		
2004	13.5		
2005	12.9		
2006 13.0			
% Change 2002-2006	+2.4%		

^{*}The rate of substantiated cases of child abuse (physical and sexual) and neglect per 1000 children younger than age 18

Source: Indiana Department of Child Services; Kids Count, Annie E. Casey Foundation

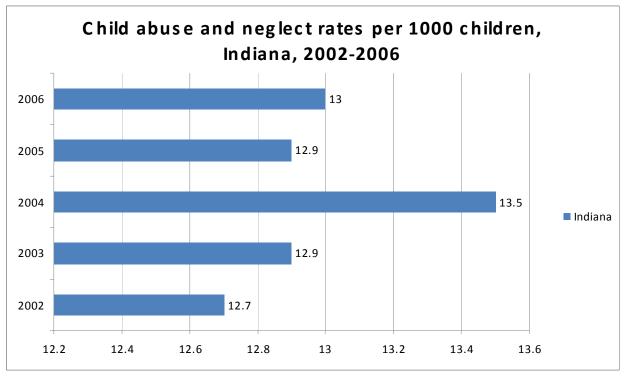


Figure 5.13

Table 5.14 Child abuse and neglect rates per 1000 children*, Gibson County and Indiana, 2002-2006				
Year Gibson County		Indiana		
2002	13.9	12.7		
2003	17.5	12.9		
2004	16.3	13.5		
2005	17.5	12.9		
2006	18.9	13.0		
% Change 2002-2006	+36.0%	+2.4%		

^{*}The rate of substantiated cases of child abuse (physical and sexual) and neglect per 1000 children younger than age 18

Source: Indiana Department of Child Services; Kids Count, Annie E. Casey Foundation

Table 5.15 Child abuse and neglect rates per 1000 children*, Posey County and Indiana, 2002-2006			
Year	Posey County	Indiana	
2002	6.4	12.7	
2003	7.2	12.9	
2004	7.6	13.5	
2005	7.2	12.9	
2006	13.0	13.0	
% Change 2002-2006	+103%	+2.4%	

^{*}The rate of substantiated cases of child abuse (physical and sexual) and neglect per 1000 children younger than age 18

Source: Indiana Department of Child Services; Kids Count, Annie E. Casey Foundation

Table 5.16 Child abuse and neglect rates per 1000 children*, Spencer County and Indiana, 2002-2006			
Year	Spencer County	Indiana	
2002	11.7	12.7	
2003	9.1	12.9	
2004	9.6	13.5	
2005	9.1	12.9	
2006	10.7	13.0	
% Change 2002-2006	-8.5%	+2.4%	

^{*}The rate of substantiated cases of child abuse (physical and sexual) and neglect per 1000 children younger than age 18

Source: Indiana Department of Child Services; Kids Count, Annie E. Casey Foundation

Table 5.17 Child abuse and neglect rates per 1000 children*, Vanderburgh County and Indiana, 2002- 2006				
Year	Vanderburgh County	Indiana		
2002	20.0	12.7		
2003	22.5	12.9		
2004	21.2	13.5		
2005	22.5	12.9		
2006 21.3 13.0				
% Change 2002-2006	+6.5%	+2.4%		

^{*}The rate of substantiated cases of child abuse (physical and sexual) and neglect per 1000 children younger than age 18

Source: Indiana Department of Child Services; Kids Count, Annie E. Casey Foundation

Table 5.18 Child abuse and neglect rates per 1000 children*, Warrick County and Indiana, 2002-2006			
Year	Warrick County Indiana		
2002	10.4	12.7	
2003	10.7	12.9	
2004	14.1	13.5	
2005	10.7	12.9	
2006	7.7	13.0	
% Change 2002-2006	-26.0%	+2.4%	

^{*}The rate of substantiated cases of child abuse (physical and sexual) and neglect per 1000 children younger than age 18

Source: Indiana Department of Child Services; Kids Count, Annie E. Casey Foundation

Table 5.19 Child abuse* and neglect deaths, Indiana, 2003-2007					
Year	Year Total Deaths Deaths Due to Abuse Deaths Due to Neglect				
2003	51	34	17		
2004	57	22	35		
2005	54	24	30		
2006	53	30	23		
2007	36	17	19		
% Change 2003-2007	-29.4%	-50.0%	+11.8%		

*Abuse includes physical and sexual abuse Source: Indiana Department of Child Services

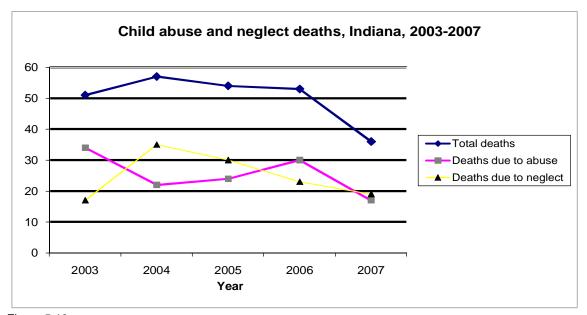


Figure 5.19

	Table 5.20 Child abuse and neglect deaths, Gibson County, 2003-2007				
Year	Year Total Deaths Gibson Deaths Due to Abuse Deaths Due to Neglect Total Indiana Dea				
2003	0	0	0	51	
2004	0	0	0	57	
2005	0	0	0	54	
2006	0	0	0	53	
2007	1	1	0	36	

*Abuse includes physical and sexual abuse Source: Indiana Department of Child Services

	Table 5.21 Child abuse and neglect deaths, Posey County, 2003-2007					
Year	Total Deaths Posey	Deaths Due to Abuse	Deaths Due to Neglect	Total Indiana Deaths		
2003	0	0	0	51		
2004	0	0	0	57		
2005	1	0	1	54		
2006	0	0	0	53		
2007	0	0	0	36		

*Abuse includes physical and sexual abuse Source: Indiana Department of Child Services

	Table 5.22 Child abuse and neglect deaths, Spencer County, 2003-2007						
Year	Total Deaths Spencer Deaths Due to Abuse Deaths Due to Neglect Total Indiana Deaths						
2003	0	0	0	51			
2004	0	0	0	57			
2005	0	0	0	54			
2006	0	0	0	53			
2007	0	0	0	36			

*Abuse includes physical and sexual abuse Source: Indiana Department of Child Services

	Table 5.23 Child abuse and neglect deaths, Vanderburgh County, 2003-2007						
Year	Total Deaths Vanderburgh	Deaths Due to Abuse	Deaths Due to Neglect	Total Indiana Deaths			
2003	0	0	0	51			
2004	2	*	*	57			
2005	2	1	1	54			
2006	0	0	0	53			
2007	1	0	1	36			

^{*}Abuse and neglect deaths not reported separately by state
Source: Indiana Department of Child Services

	Table 5.24 Child abuse and neglect deaths, Warrick County, 2003-2007					
Year	Total Deaths Warrick	Deaths Due to Abuse	Deaths Due to Neglect	Total Indiana Deaths		
2003	0	0	0	51		
2004	0	0	0	57		
2005	0	0	0	54		
2006	0	0	0	53		
2007	0	0	0	36		

Source: Indiana Department of Child Services

ISSUE 25: CHILDREN WITH SPECIAL MENTAL AND PHYSICAL CONDITIONS

Between the 2002/2003 and 2006/2007 school years, the percentage of special education students in Indiana public schools increased by 3.5%. Every public school corporation in the five-county study area also experienced an increase in special education students. The percentage of special education students in all area school corporations except those in Spencer County was higher than the statewide average during the 2006/2007 school year.

From 2002 to 2006, the number of children served by the First Steps Early Intervention Program decreased. It should be noted, however, that this number had shown an increase each year up through 2005. Overall, all counties except Posey experienced an increase in the number of children served through First Steps. In terms of specific services performed through First Steps in Indiana, the largest percentage of children are in speech therapy, developmental therapy, physical therapy, and occupational therapy. As compared to the state in general, the counties in the study area also show high utilization levels of audiology services and Gibson, Posey, and Vanderburgh counties have higher utilization rates of nursing services.

Table 5.25 Percent of special education students in area school corporations, 2002/2003 – 2006/2007						
School Corporation	2002/2003	2003/2004	2004/2005	2005/2006	2006/2007	% Change 2002/2003
						- 2006/2007
Gibson County						
East Gibson	15.9%	16.4%	18.6%	20.5%	19.9%	+25.2%
North Gibson	19.6%	20.1%	20.8%	20.8%	23.0%	+17.3%
South Gibson	16.4%	17.4%	17.3%	18.0%	18.7%	+14.0%
Posey County						
Mount Vernon	21.7%	21.1%	27.0%	27.1%	27.0%	+24.4%
New Harmony	21.4%	22.8%	23.4%	26.7%	24.4%	+14.0%
North Posey	18.7%	21.6%	22.2%	21.5%	20.7%	+10.7%
Spencer County						
North Spencer	13.4%	13.1%	13.2%	13.7%	14.0%	+4.5%
South Spencer	13.2%	14.4%	14.1%	13.7%	14.3%	+8.3%
Vanderburgh County						
Evansville-Vanderburgh	20.5%	21.1%	21.8%	22.3%	22.6%	+10.2%
Warrick County						
Warrick	18.6%	19.7%	20.3%	20.6%	20.7%	+11.3%
State Average	17.2%	17.5%	17.7%	17.9%	17.8%	+3.5%

Source: Indiana Department of Education

Table 5.26 Number of children served by the First Steps Early Intervention Program, Indiana, 2002-2006				
Year	Number Served			
2002	18120			
2003	18817			
2004	19104			
2005	19261			
2006	16229			
% Change 2002-2006	-10.4%			

*2002-2005 based on period of Oct. 1 to Sept. 30; 2006 based on period from July 1 to June 30 Source: Indiana Family and Social Services Administration, First Steps

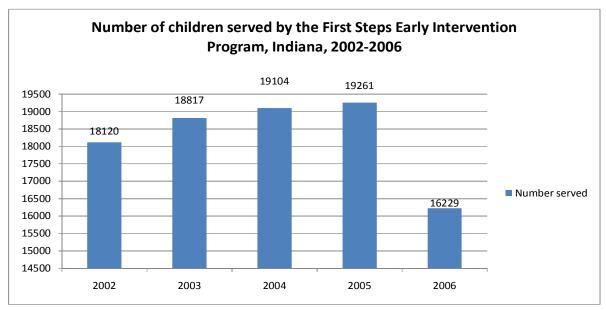


Figure 5.26

Table 5.27 Number of children served by the First Steps Early Intervention Program, Gibson County and Indiana, 2002-2006*						
Year	Gibson County	Indiana				
2002	97	18120				
2003	2003 92 18817					
2004	2004 91 19104					
2005	2005 132 19261					
2006 118 16229						
% Change 2002-2006	+21.6%	-10.4%				

*2002-2005 based on period of Oct. 1 to Sept. 30; 2006 based on period from July 1 to June 30 Source: Indiana Family and Social Services Administration, First Steps

Table 5.28 Number of children served by the First Steps Early Intervention Program, Posey County and Indiana, 2002-2006					
Year	Posey County	Indiana			
2002	87	18120			
2003 86 18817					
2004	76	19104			
2005	74	19261			
2006 54 16229					
% Change 2002-2006	-37.9%	-10.4%			

*2002-2005 based on period of Oct. 1 to Sept. 30; 2006 based on period from July 1 to June 30 Source: Indiana Family and Social Services Administration, First Steps

Table 5.29 Number of children served by the First Steps Early Intervention Program, Spencer County and Indiana, 2002-2006						
Year	Spencer County	Indiana				
2002	40	18120				
2003	37	18817				
2004	46	19104				
2005 40 19261						
2006 44 16229						
% Change 2002-2006	+10.0%%	-10.4%				

*2002-2005 based on period of Oct. 1 to Sept. 30; 2006 based on period from July 1 to June 30 Source: Indiana Family and Social Services Administration, First Steps

Table 5.30 Number of children served by the First Steps Early Intervention Program, Vanderburgh County and Indiana, 2002-2006							
Year							
2002	439	18120					
2003	474	18817					
2004	523	19104					
2005	522	19261					
2006 497 16229							
% Change 2002-2006	+13.2%	-10.4%					

*2002-2005 based on period of Oct. 1 to Sept. 30; 2006 based on period from July 1 to June 30 Source: Indiana Family and Social Services Administration, First Steps

Table 5.31 Number of children served by the First Steps Early Intervention Program, Warrick County and Indiana, 2002-2006						
Year	Warrick County	Indiana				
2002 161 18120						
2003	2003 157 18817					
2004 172 19104						
2005 170 19261						
2006 168 16229						
% Change 2002-2006	+4.3%%	-10.4%				

*2002-2005 based on period of Oct. 1 to Sept. 30; 2006 based on period from July 1 to June 30 Source: Indiana Family and Social Services Administration, First Steps

Table 5.32 Types of services performed through First Steps in five-county study area and Indiana, period 7/1/06 to 6/30/07						
Service Type	Gibson	Posey	Spencer	Vanderburgh	Warrick	Indiana
Assistive Technology	1.69%	3.70%	2.27%	4.02%	1.79%	5.56%
Audiology	30.51%	37.04%	29.55%	36.82%	36.31%	14.21%
Developmental Therapy	38.14%	48.15%	43.18%	37.63%	38.10%	52.44%
Health Services	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Interpreter Services	0.00%	0.00%	0.00%	0.00%	0.00%	0.60%
Medical	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Nursing	21.19%	25.93%	0.00%	19.52%	4.17%	1.19%
Nutrition	0.00%	1.85%	0.00%	0.00%	0.00%	2.83%
Occupational Therapy	22.03%	18.52%	25.00%	28.77%	32.14%	31.76%
Other Services	0.00%	0.00%	0.00%	0.00%	0.00%	0.37%
Physical Therapy	21.19%	57.78%	25.00%	26.96%	31.55%	33.42%
Psychology	0.00%	0.00%	0.00%	0.00%	0.00%	1.65%
Service Coordination	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Social Work	0.00%	0.00%	0.00%	0.60%	0.60%	0.87%
Speech Therapy	68.64%	79.63%	61.36%	63.98%	64.88%	52.79%
Transportation	0.00%	0.00%	0.00%	0.00%	0.00%	0.01%
Vision	0.85%	5.56%	0.00%	2.01%	2.38%	0.30%

Source: Indiana Family and Social Services Administration, First Steps

ISSUE 26: CHILDREN WITH BEHAVIORAL PROBLEMS

Data from the latest National Health Interview Survey on Disability indicate that approximately 8% of youth ages 5 to 17 have mental or emotional problems or behavioral functional limitations. Males are twice as likely as females to have such conditions. Further, older youth are more likely to have emotional or behavioral problems than younger children. Results from the Youth Risk Behavior Survey indicate that over 27% of youth in Indiana felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities. Additionally, 18% of youth considered attempting suicide, almost 15% made a plan to attempt suicide, and almost 10% actually attempted suicide. Finally, approximately 83% of the eligible population of seriously emotionally disturbed children in Indiana were served by the Indiana DMHA. The percentage was higher than the state in four of the five counties in the study area.

Table 5.33 Children (ages 5-17) with mental or emotion problems or behavioral functional limitations, United States, 1994-1996		
Group	No.	%
No disabilities limitations	44574000	89.5%
With disabilities	4106000	8.2%
Туре		
Mental or emotional problems only	529000*	12.9%
Functional limitations only	2200000*	54.3%
Mental or emotional problems and functional limitations	1300000*	32.8%
Gender		
Male	2763000	67.3%
Female	1343000	32.7%

^{*}Estimates

Note: an additional 2.3% of children listed in "unknown" category since disability status was not determined

Source: National Health Interview Survey on Disability, 1994-1996

Table 5.34 Rates of emotional disturbance in children (ages 6-17) with disabilities by age group, United States, 1995-1996		
Age Group	% with Emotional Disturbance	
6-7 years	3.5%	
8-9 years	5.6%	
10-11 years	7.3%	
12-13 years	10.2%	
14-15 years	13.1%	
16-17 years	13.0%	

Source: U.S. Department of Education, OSERS (1998), Section II: Students with Emotional Disturbance, and Table AA13, p. A-40

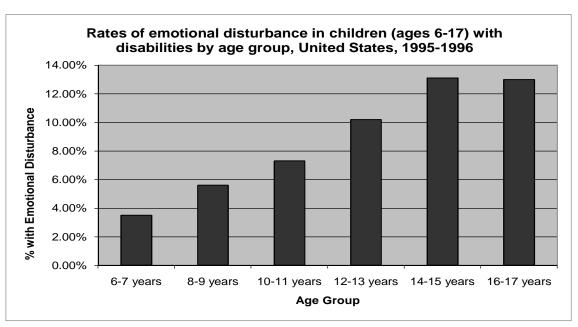


Figure 5.34

Table 5.35 Youth behavior risk factors, Indiana, 2003 and 2005			
Risk Factor	2003	2005	% Difference
			2003 vs. 2005
% of students who felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months	25.5%	27.3%	+1.8%
% of students who seriously considered attempting suicide during the past 12 months	16.0%	18.0%	+2.0%
% of students who made a plan about how they would attempt suicide during the past 12 months	12.6%	14.8%	+2.2%
% of students who actually attempted suicide one or more times during the past 12 months	6.6%	9.6%	+3.0%
% of students whose suicide attempt resulted in an injury, poisoning, or overdose that had to be treated by a doctor or nurse during the past 12 months	1.6%	3.5%	+1.9%

Source: CDC, Youth Risk Behavior Survey

Table 5.36 Percentage of eligible population that is served by Indiana DMHA-Seriously Emotionally		
Disturbed Children (SED), Indiana and five-county area, 2004		
Location % Served		
Indiana 83.1%		
Gibson County	67.9%	
Posey County 133.7%		
Spencer County 102.6%		
Vanderburgh County 93.4%		
Warrick County	164.4%	

Source: Indiana Family and Social Services Administration (FSSA), Division of Mental Health and Addiction (DMHA)

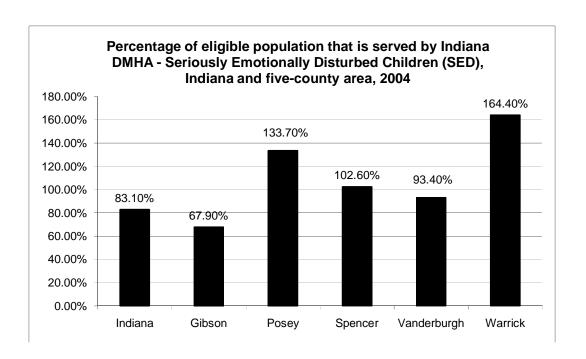


Figure 5.36

ISSUE 27: LACK OF CHILD SUPPORT PAYMENTS

Between 1996 and 2005, there was an increase in the dollar amount of the disbursement of collected child support payments, meaning that more children benefited from child support over the course of that time period. While the amount collected has increased, the percent of eligible dollars collected is lower for Indiana than the U.S. average. Comparing the five counties in the study area to Indiana and the U.S., all except Vanderburgh are higher than the state average, and Gibson and Spencer area higher than the U.S. average. Tables below also provide data on other child support performance measures, including order establishment, paternity establishment, and cases paying on arrears.

Table 5.37 Child support (IV-D) distributed collections, Indiana and five-county area, SFY 2005			
Location	TANF Total Amt.	Non TANF Total Amt.	State Fiscal Year
Indiana	\$31474266	\$450742035	\$482216301
Gibson County	\$214793	\$2552661	\$2767454
Posey County	\$115937	\$1235592	\$1351528
Spencer County	\$74566	\$1263342	\$1337908
Vanderburgh County	\$1347074	\$12359694	\$13706768
Warrick County	\$198139	\$2382380	\$2580519

Source: Indiana Department of Child Services

Table 5.38 Disbursement of child support collected, Indiana, 1996-2005		
Year	\$ Amount Disbursed (in millions)	
1996	\$209	
1997	\$227	
1998	\$227	
1999	\$262	
2000	\$357	
2001	\$387	
2002	\$420	
2003	\$431	
2004	\$455	
2005	\$482	

Source: Indiana Department of Child Services

Table 5.39 Child support performance measure: child support collected, U.S., Indiana, and five- county area, Sept. 2005		
Location	% Collected	
United States	59.0%	
Indiana	53.0%	
Gibson County	59.9%	
Posey County	57.6%	
Spencer County	62.3%	
Vanderburgh County	42.5%	
Warrick County	57.5%	

Source: Indiana Department of Child Services

Table 5.40 Child support performance measure: order established, U.S., Indiana, and five-county area, Sept. 2005		
Location	% Order Established	
United States	74.0%	
Indiana	69.0%	
Gibson County	90.2%	
Posey County	83.8%	
Spencer County	76.8%	
Vanderburgh County	72.7%	
Warrick County	87.0%	

Source: Indiana Department of Child Services

Table 5.41 Child support performance measure: paternity establishment, U.S., Indiana, and five-county area, Sept. 2005		
Location	% Paternity Established	
United States	78.0%	
Indiana	82.0%	
Gibson County	107.0%	
Posey County	85.9%	
Spencer County	97.7%	
Vanderburgh County	86.2%	
Warrick County	90.9%	

Source: Indiana Department of Child Services

Table 5.42 Child support performance measure: cases paying on arrears, U.S., Indiana, and five-county		
area, Sept. 2005		
Location	% Cases Paying on Arrears	
United States	60.0%	
Indiana	58.0%	
Gibson County	69.7%	
Posey County	63.8%	
Spencer County	72.4%	
Vanderburgh County	46.9%	
Warrick County	62.3%	

Source: Indiana Department of Child Services

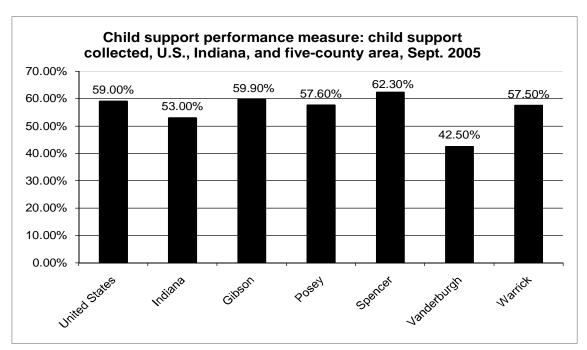


Figure 5.42

ISSUE 28: PREPARATION AND SUPPORT FOR PARENTHOOD

Between 2001 and 2005, non-marital births as a percentage of all births increased from 35.6% to 40.1%. This rate also increased in all counties in the study area except Warrick. Compared to the Indiana rate, all counties except Vanderburgh were lower in non-marital births than the state.

Table 5.43 Non-marital births as % of all births, Indiana, 2001-2005		
Year	Non-marital Births %	
2001	35.6%	
2002	36.5%	
2003	37.1%	
2004	38.8%	
2005	40.1%	
% Change 2001-2005	+12.6%	

Source: Indiana State Department of Health

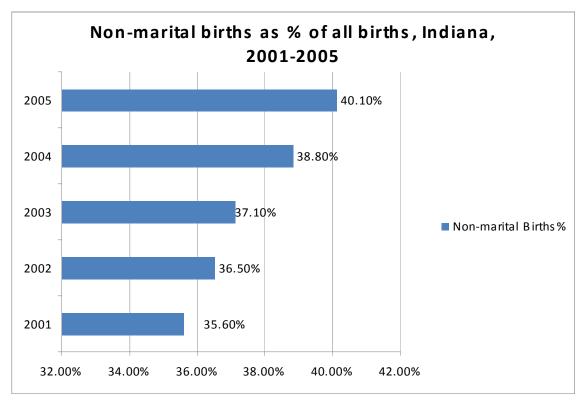


Figure 5.43

Table 5.44 Non-marital births as % of all births, Gibson County and Indiana, 2001-2005			
Year	Gibson County	Indiana	
2001	32.2%	35.6%	
2002	31.0%	36.5%	
2003	29.8%	37.1%	
2004	33.9%	38.8%	
2005	33.3%	40.1%	
% Change 2001-2005	+3.4%	+12.6%	
2005 Gibson State Rank	63 of 92*		

*Lower rank is better

Source: Indiana State Department of Health

Table 5.45 Non-marital births as % of all births, Posey County and Indiana, 2001-2005				
Year	Posey County	Indiana		
2001	26.0%	35.6%		
2002	27.9%	36.5%		
2003	29.3%	37.1%		
2004	31.2%	38.8%		
2005	29.5%	40.1%		
% Change 2001-2005	+13.5%	+12.6%		
2005 Posey State Rank	74 of 92*			

*Lower rank is better

Source: Indiana State Department of Health

Table 5.46 Non-marital births as % of all births, Spencer County and Indiana, 2001-2005				
Year	Spencer County	Indiana		
2001	23.9%	35.6%		
2002	30.7%	36.5%		
2003	22.8%	37.1%		
2004	31.9%	38.8%		
2005	27.5%	40.1%		
% Change 2001-2005	+15.1%	+12.6%		
2005 Spencer State Rank	81 of 92*	1		

*Lower rank is better

Source: Indiana State Department of Health

Table 5.47 Non-marital births as % of all births, Vanderburgh County and Indiana, 2001-2005				
Year	Vanderburgh County	Indiana		
2001	41.3%	35.6%		
2002	40.9%	36.5%		
2003	41.5%	37.1%		
2004	43.6%	38.8%		
2005	44.5%	40.1%		
% Change 2001-2005	+7.7%	+12.6%		
2005 Vanderburgh State Rank	15 of 92*			

*Lower rank is better

Source: Indiana State Department of Health

Table 5.48 Non-marital births as % of all births, Warrick County and Indiana, 2001-2005				
Year	Warrick County	Indiana		
2001	24.6%	35.6%		
2002	20.3%	36.5%		
2003	25.0%	37.1%		
2004	25.3%	38.8%		
2005	23.3%	40.1%		
% Change 2001-2005	-5.3%	+12.6%		
2005 Warrick State Rank	87 of 92*			

*Lower rank is better

Source: Indiana State Department of Health

ISSUE 30: TEENAGE SEX, PREGNANCY, AND PARENTHOOD

Between 2001 and 2005, the number of babies born to single mothers under the age of 20 without a high school diploma decreased. This number represented as a percent of total live births also decreased. Additionally, these rates showed a decrease in Posey, Vanderburgh, and Warrick counties, but increased in Gibson and Spencer counties. As a percent of total live births, the births of babies born to single mothers under 20 without a high school diploma was lower than the Indiana rate in 2005 in all counties except Spencer.

Between 2001 and 2005, the teen birth rate per 1,000 females in Indiana decreased by almost 9%. Nationally, the Indiana teen birth rate ranks 16th highest and is higher than all surrounding states except Kentucky. All counties except Spencer showed a decrease in teen birth rates during the time period noted in the tables below. In 2005, all counties except Vanderburgh had a lower teen birth rate than the state average.

Between 1997 and 2005, the percentage of 9th through 12th grade students who had ever had sexual intercourse decreased by 3.3%. Data for Indiana shows a decrease of almost 9% between 2003 and 2005. The rate for Indiana was slightly lower than the national rate in 2005. Also between 1997 and 2005, the percentage of students who had sexual intercourse in the past three months decreased slightly. The Indiana rate decreased between 2003 and 2005, but was higher than the national rate in 2005.

Among students who had sexual intercourse in the past three months, the percentage of students in the U.S. who indicated using a condom increased between 1997 and 2005. The Indiana rate increased between 2003 and 2005 and was almost equivalent to the national rate in 2005. However, it should be noted that less than two-thirds of students used a condom.

Finally, the percentage of students in the U.S. who drank alcohol or used drugs before sexual intercourse decreased slightly between 1997 and 2005. While this may seem to be a positive trend, there were still nearly a quarter of sexually active teens who had consumed alcohol or drugs before sexual intercourse.

Table 5.49 Babies born to single mothers under the age of 20 without high school diploma, Indiana, 2001-2005			
	· · · · · · · · · · · · · · · · · · ·		
Year	No. of Births	% of Total Live Births	
2001	5292	6.1%	
2002	5126	6.0%	
2003	5052	5.8%	
2004	5080	5.8%	
2005 5111 5.9%			
% Change 2001-2005	-3.4%	-3.3%	

Source: Indiana State Department of Health (live birth data from DOH Epidemiology Resource Center, Data Analysis Team)

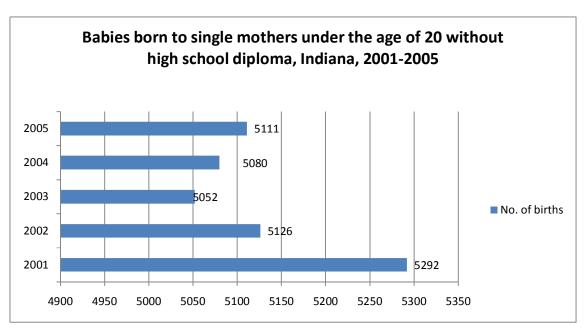


Figure 5.49

Table 5.50 Babies born to single mothers under the age of 20 without high school diploma, Gibson County and Indiana, 2001-2005				
Year	Gi	bson County		ndiana
	No. of Births	% of Total Live Births	No. of Births	% of Total Live Births
2001	16	3.8%	5292	6.1%
2002	20	5.2%	5126	6.0%
2003	10	2.3%	5052	5.8%
2004	16	3.8%	5080	5.8%
2005	22	5.2%	5111	5.9%
% Change 2001- 2005	+37.5%	+36.8%	-3.4%	-3.3%

Source: Indiana State Department of Health (live birth data from DOH Epidemiology Resource Center, Data Analysis Team)

Table 5.51 Babies born to single mothers under the age of 20 without high school diploma, Posey County and Indiana, 2001-2005				
Year	F	Posey County	Inc	diana
	No. of Births	% of Total Live Births	No. of Births	% of Total Live Births
2001	9	3.3%	5292	6.1%
2002	11	4.1%	5126	6.0%
2003	8	3.3%	5052	5.8%
2004	8	2.7%	5080	5.8%
2005	7	3.1%	5111	5.9%
% Change 2001- 2005	-22.2%	-6.1%	-3.4%	-3.3%

Source: Indiana State Department of Health (live birth data from DOH Epidemiology Resource Center, Data Analysis Team)

Table 5.52 Babies born to single mothers under the age of 20 without high school diploma, Spencer County and Indiana, 2001-2005				
Year	S	pencer County	Inc	diana
	No. of Births	% of Total Live Births	No. of Births	% of Total Live Births
2001	10	3.9%	5292	6.1%
2002	7	3.3%	5126	6.0%
2003	6	2.6%	5052	5.8%
2004	12	5.1%	5080	5.8%
2005	14	6.0%	5111	5.9%
% Change 2001-2005	+40.0%	+53.8%	-3.4%	-3.3%

Source: Indiana State Department of Health (live birth data from DOH Epidemiology Resource Center, Data Analysis Team)

Table 5.53 Babies born to single mothers under the age of 20 without high school diploma, Vanderburgh County and Indiana, 2001-2005				
Year	Van	derburgh County	Inc	diana
	No. of Births	% of Total Live Births	No. of Births	% of Total Live Births
2001	134	5.8%	5292	6.1%
2002	141	6.1%	5126	6.0%
2003	135	5.7%	5052	5.8%
2004	144	6.1%	5080	5.8%
2005	132	5.4%	5111	5.9%
% Change 2001-2005	-1.5%	-6.9%	-3.4%	-3.3%

Source: Indiana State Department of Health (live birth data from DOH Epidemiology Resource Center, Data Analysis Team)

Table 5.54 Babies born to single mothers under the age of 20 without high school diploma, Warrick County and Indiana, 2001-2005				
Year	V	Varrick County	Inc	diana
	No. of Births	% of Total Live Births	No. of Births	% of Total Live Births
2001	25	3.7%	5292	6.1%
2002	24	3.9%	5126	6.0%
2003	24	3.7%	5052	5.8%
2004	26	3.7%	5080	5.8%
2005	19	3.0%	5111	5.9%
% Change 2001-2005	-24.0%	-18.9%	-3.4%	-3.3%

Source: Indiana State Department of Health (live birth data from DOH Epidemiology Resource Center, Data Analysis Team)

Table 5.55 Teen birth rate per 1000 females age 15-17*, Indiana, 2001-2005		
Year	Birth Rate	
2001	35.6	
2002	22.5	
2003	21.5	
2004	20.9	
2005	20.5	
% Change 2002-2005**	-8.9%	

^{*}No. of births to mothers age 15 through 17 per 1000 females in this age group

^{**%} change calculated using 2002-2005 since 2001 data significantly higher than subsequent years Source: Indiana State Department of Health

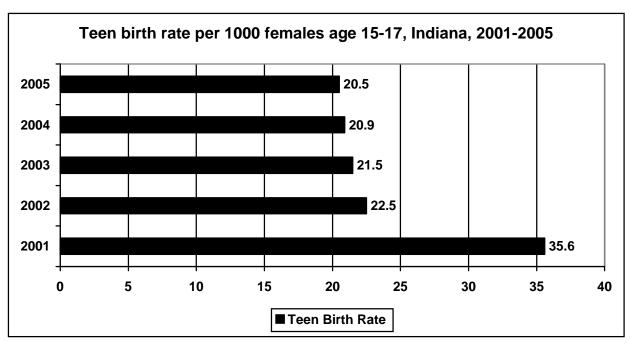


Figure 5.55

Table 5.56 Births to teen mothers (ages 15-19) per 1000 teen girls, Indiana and surrounding states, 2005			
State	Birth Rate	National Rank*	
Indiana	43	16 th	
Michigan	32	37 th	
Ohio	39	23 rd	
Kentucky	49	12 th	
Illinois	39	23 rd	
Wisconsin	30	40 th	
Missouri	42	20 th	

^{*}Higher rank equals higher birth rate

Source: The Annie E. Casey Foundation, KIDS COUNT Data Center

Table 5.57 Teen birth rate per 1000 females age 15-17*, Gibson County and Indiana, 2001-2005			
Year	Gibson County	Indiana	
2001	32.2	35.6	
2002	20.0	22.5	
2003	9.2	21.5	
2004	15.4	20.9	
2005	12.5	20.5	
% Change 2002-2005**	-37.5%	-42.4%	
2005 Gibson State Rank	72 of 92***		

^{*}No. of births to mothers age 15 through 17 per 1000 females in this age group

Source: Indiana State Department of Health

^{**%} change calculated using 2002-2005 since 2001 data significantly higher than subsequent years

^{***}Lower rank is better

Table 5.58 Teen birth rate per 1000 females age 15-17*, Posey County and Indiana, 2001-2005			
Year	Posey County	Indiana	
2001	26.0	35.6	
2002	13.2	22.5	
2003	13.0	21.5	
2004	12.9	20.9	
2005	11.0	20.5	
% Change 2002-2005**	-16.7%	-42.4%	
2005 Posey State Rank	75 of 92***		

^{*}No. of births to mothers age 15 through 17 per 1000 females in this age group

Source: Indiana State Department of Health

Table 5.59 Teen birth rate per 1000 females age 15-17*, Spencer County and Indiana, 2001-2005			
Year	Spencer County	Indiana	
2001	23.9	35.6	
2002	6.8	22.5	
2003	10.9	21.5	
2004	13.2	20.9	
2005	17.9	20.5	
% Change 2002-2005**	+163.2%	-42.4%	
2005 Spencer State Rank	43 of 92***		

^{*}No. of births to mothers age 15 through 17 per 1000 females in this age group

Source: Indiana State Department of Health

Table 5.60 Teen birth rate per 1000 females age 15-17*, Vanderburgh County and Indiana, 2001-2005			
Year	Vanderburgh County	Indiana	
2001	41.3	35.6	
2002	22.2	22.5	
2003	24.2	21.5	
2004	24.5	20.9	
2005	21.6	20.5	
% Change 2002-2005**	-2.7%	-42.4%	
2005 Vanderburgh State Rank	33 of 92***		

^{*}No. of births to mothers age 15 through 17 per 1000 females in this age group

Source: Indiana State Department of Health

^{**%} change calculated using 2002-2005 since 2001 data significantly higher than subsequent years

^{***}Lower rank is better

^{**%} change calculated using 2002-2005 since 2001 data significantly higher than subsequent years

^{***}Lower rank is better

^{**%} change calculated using 2002-2005 since 2001 data significantly higher than subsequent years

^{***}Lower rank is better

Table 5.61 Teen birth rate per 1000 females age 15-17*, Warrick County and Indiana, 2001-2005			
Year	Warrick County	Indiana	
2001	24.6	35.6	
2002	12.0	22.5	
2003	12.7	21.5	
2004	20.0	20.9	
2005	7.6	20.5	
% Change 2002-2005**	-36.7%	-42.4%	
2005 Warrick State Rank	86 of 92***		

^{*}No. of births to mothers age 15 through 17 per 1000 females in this age group

Source: Indiana State Department of Health

Table 5.62 Percentage of students (9 th through 12 th grade) who ever had sexual intercourse, United States and Indiana, 1997 – 2005			
Year U.S. Indiana*			
1997	48.4		
1999	49.9		
2001	45.6		
2003	46.7	48.8	
2005	46.8	44.5	
% Change 1997-2005	-3.3%	-8.8%	

^{*}Data for Indiana only available 2003 and 2005 Source: CDC, Youth Risk Behavior Survey

Table 5.63 Percentage of students (9 th through 12 th grade) who had sexual intercourse with one or more people during the past three months, United States and Indiana, 1997 – 2005				
Year	Year U.S. Indiana*			
1997	34.8			
1999	36.3			
2001	33.4			
2003	34.3	38.0		
2005	33.9	34.6		
% Change 1997-2005	-2.6%	-8.9%		

^{*}Data for Indiana only available 2003 and 2005 Source: CDC, Youth Risk Behavior Survey

Table 5.64 Among students (9th through 12th grade) who had sexual intercourse during the past three months, the percentage who used a condom during the last sexual intercourse, United States and Indiana, 1997 - 2005 Year U.S. Indiana* 1997 56.8 --1999 58.0 2001 57.9 2003 63.0 55.4 2005 62.8 62.6 % Change 1997-2005 +10.6% +13.0%

^{**%} change calculated using 2002-2005 since 2001 data significantly higher than subsequent years

^{***}Lower rank is better

^{*}Data for Indiana only available 2003 and 2005 Source: CDC, Youth Risk Behavior Survey

Table 5.65 Among students (9 th through 12 th grade) who had sexual intercourse during the past three months, the percentage who drank alcohol or used drugs before last sexual intercourse, United States, 1997 – 2005		
Year	% of Students	
1997	24.7	
1999	24.8	
2001	25.6	
2003	25.4	
2005	23.3	
% Change 1997 - 2005	-5.7%	

*Data for Indiana only available 2003 and 2005 Source: CDC, Youth Risk Behavior Survey

ISSUE 31: SUPPORT FOR CARE GIVERS OF THE ELDERLY, MENTALLY ILL, OR PHYSICALLY DISABLED

Table 5.66 Informal Caregiver Statistics, Indiana and United States, 2004			
Category	Indiana	U.S.	
No. of caregivers	606,759	28,827,766	
Caregiving hours (millions)	650	30,880	
Value of caregiving (millions)	\$6448	\$306,333	

Source: National Family Caregivers Association & Family Caregiver Alliance (2006). Prevalence, Hours and Economic Value of Family Caregiving, Updated State-by-State Analysis of 2004 National Estimates by Peter S. Arno, PhD. Kensington, MD: NFCA & San Francisco, CA: FCA.

Table 5.67 Family Caregiver Support Services in Indiana			
Program Details	Family Caregiver Support Program	CHOICE	Aged/Disabled Medicaid
			Waiver
State Administrative	FSSA's Bureau of Aging and In-Home	FSSA's Bureau of	FSSA's Bureau of Aging
Responsibility	Services	Aging and In-Home	and In-Home Services
		Services	
Funding Source	Older Americans Act, Title III-E	State general funds	Medicaid 1915 (c) waiver
Expenditures FY 2001	\$2.3 million	\$38.8 million	\$23.9 million
Client Population	Family and informal caregiver	Care recipient	Care recipient
Services Provided to	Information; Assistance; Counseling,	Respite, home	Respite, home
Family Caregivers	support groups, training, respite care,	modifications	modifications, adaptive aids
	Supplemental services (e.g., consumable		and devices
	supplies)		

Source: Feinberg, L.F. et al., Family Caregiver Support: *Policies, Perceptions and Practices in 10 States Since Passage of the National Family Caregiver Support Program,* November 2002

T	1 E 11 O 1 O 1 E
Table 5.68 Number of individuals served th	nrough Family Caregiver Support Program services,
Indiana, July 1	, 2004 – June 30, 2005
Program	Number Served
Information	33210
Assistance	5393
Counseling, support groups, training	2122
Respite care	3128
Supplemental services	2921

Source: Indiana FSSA, Bureau of Aging and In-Home Services

ISSUE 32: PREPARATION AND SUPPORT FOR MARRIAGE AND MARITAL RELATIONS

In Vanderburgh County, the number of divorce filings decreased by 13% between 1996 and 2006. These numbers also decreased in Gibson, Posey, and Warrick counties between 2001 and 2007.

Table 5.69 Divorce filing and marriage license statistics, Gibson County, 2001-2007		
Year	Divorce Filings	Marriage Licenses Issued
2001	249	191
2002	262	196
2003	262	233
2004	254	215
2005	274	223
2006	230	250
2007	242	252
% Change 2001-2007	-2.8%	+31.9%

Source: County Clerk's Office

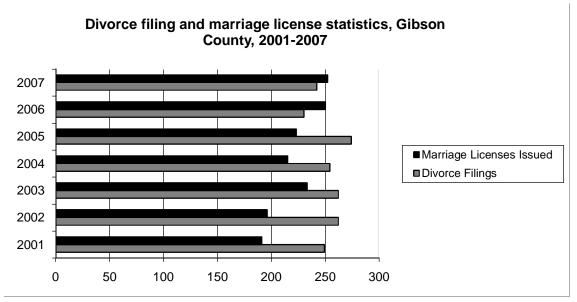


Figure 5.69

Table 5.70 Divorce filing and marriage license statistics, Posey County, 2001-2007			
Year	Divorce Filings	Marriage Licenses Issued	
2001	161	147	
2002	150	166	
2003	153	136	
2004	144	151	
2005	155	174	
2006	133	165	
2007	130	142	
% Change 2001-2007	-19.3%	-3.4%	

Source: County Clerk's Office

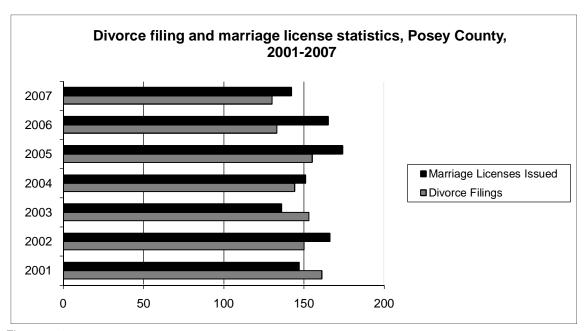


Figure 5.70

Table 5.71 Divord	ce filing and marriage lic	ense statistics, Vanderburgh County, 1996-2007
Year	Divorce Filings	Marriage Licenses Issued
1996	1479	1049
1997	1466	1117
1998	1420	1161
1999	1340	1223
2000	1408	1132
2001	1345	1125
2002	1343	1135
2003	1297	1105
2004	1296	1417
2005	1290	1230
2006	1287	1247
2007*	829	1099
% Change 1996-2006	-13.0%	+18.9%

^{*}Represents divorces granted, not divorces filed Source: County Clerk's Office

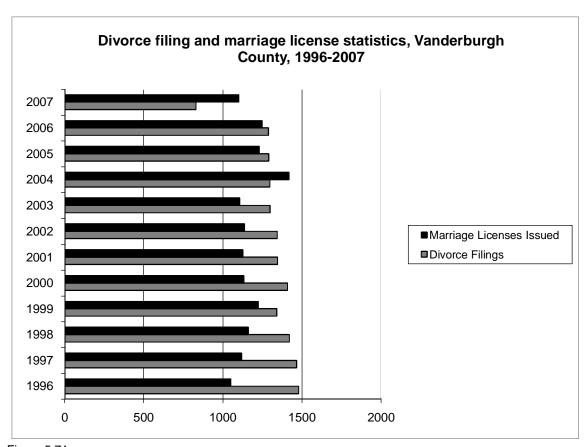


Figure 5.71

Table 5.72 Divorce filing and marriage license statistics, Warrick County, 2001-2007			
Year	Divorce Filings	Marriage Licenses Issued	
2001	330	308	
2002	330	291	
2003	319	300	
2004	300	300	
2005	286	372	
2006	301	316	
2007	297	315	
% Change 2001-2007	-10.0%	+2.3%	

Source: County Clerk's Office

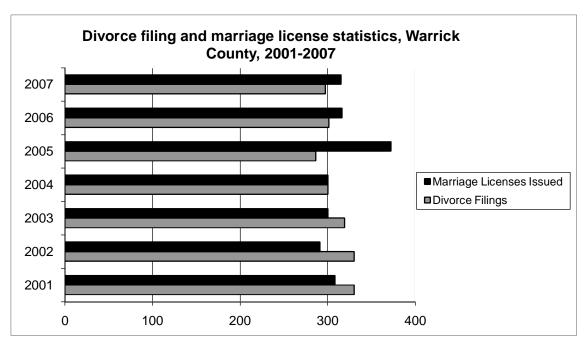


Figure 5.72

ISSUE 33: CHILD SEXUAL ABUSE

The percentage of substantiated child sexual abuse cases in Indiana decreased between 2003 and 2005. All counties in the study area also showed an overall decrease during this three-year time period. In 2005, substantiated rates for Gibson, Posey, and Spencer were higher than the state average, and rates and Vanderburgh and Warrick were lower than the state average.

Table 5.73 Child sexual abuse cases, Indiana, 2003-2005				
Category	2003	2004	2005	
Substantiated	4440	4539	4381	
Unsubstantiated	6232	6772	7379	
Indicated*			358	
Total Cases	10672	11311	12118	
% Substantiated	41.6%	40.1%	36.2%	

Source: Indiana Department of Child Services

Table 5.74 Child sexual ab	Table 5.74 Child sexual abuse cases, Gibson County, 2003-2005				
Category	2003	2004	2005		
Substantiated	19	15	22		
Unsubstantiated	21	18	33		
Indicated*			0		
Total Cases	40	33	55		
% Substantiated	47.5%	45.5%	40.0%		
% Substantiated in Indiana	41.6%	40.1%	36.2%		

Source: Indiana Department of Child Services

Table 5.75 Child sexual at	Table 5.75 Child sexual abuse cases, Posey County, 2003-2005				
Category 2003 2004 2005					
Substantiated	15	9	22		
Unsubstantiated	11	30	23		
Indicated*			0		
Total Cases	26	39	45		
% Substantiated	57.7%	23.1%	48.9%		
% Substantiated in Indiana	41.6%	40.1%	36.2%		

Source: Indiana Department of Child Services

Table 5.76 Child sexual abuse cases, Spencer County, 2003-2005				
Category 2003 2004 2005				
Substantiated	13	9	12	
Unsubstantiated	13	10	15	
Indicated*	-		5	
Total Cases	26	19	32	
% Substantiated	50.0%	47.4%	37.5%	
% Substantiated in Indiana	41.6%	40.1%	36.2%	

Source: Indiana Department of Child Services

Table 5.77 Child sexual abuse cases, Vanderburgh County, 2003- 2005			
Category	2003	2004	2005
Substantiated	187	131	113
Unsubstantiated	207	259	237
Indicated*			15
Total Cases	394	390	365
% Substantiated	47.5%	33.6%	31.0%
% Substantiated in Indiana	41.6%	40.1%	36.2%

Source: Indiana Department of Child Services

Table 5.78 Child sexual abuse cases, Warrick County, 2003-2005				
Category	Category 2003 2004			
Substantiated	21	28	20	
Unsubstantiated	44	61	44	
Indicated*			3	
Total Cases	65	89	67	
% Substantiated	32.3%	31.5%	29.9%	
% Substantiated in Indiana	41.6%	40.1%	36.2%	

Source: Indiana Department of Child Services

ISSUE 34: PARENT INVOLVEMENT IN CHILD'S EDUCATION

In 2006, the Early Childhood Development Coalition was created to address issues related to the pre-kindergarten children and their families, specifically readiness for entry into school. A survey of parents regarding their understanding of the importance of early childhood issues revealed that approximately 82% of parents who responded routinely read to their child. Approximately 14% indicated they were "in the middle" with regard to reading to their child, and approximately 4% indicated they do not routinely read to their child. In response to the item "I often take my child to places where they can learn new things, such as a museum or the zoo," 72% agreed or strongly agreed, 18.5% were in the middle, and 9.5% disagreed or strongly disagreed.

Table 5.79 Parents indicating involvement with children in selected activities, five-county survey area*, February-March, 2008					
Survey Item	Strongly Disagree	Disagree	In the Middle	Agree	Strongly Agree
I routinely read to my child.	N=6	N=3	N=29	N=55	N=120
	2.8%	1.4%	13.6%	25.8%	56.3%
I often take my child to places	N=13	N=7	N=39	N=83	N=69
where they can learn new	6.2%	3.3%	18.5%	39.3%	32.7%
things, such as a museum or					
the zoo.					

^{*}Survey responses include parents from Gibson, Posey, Spencer, Vanderburgh, and Warrick counties Source: Early Childhood Development Coalition, Early Childhood Development Stakeholder Survey-Parent Form

ISSUE 36: ELDERLY ABUSE AND NEGLECT

Table 5.80 Results from the 2004 Survey of State Adult Protective Services (APS), United States

- Findings show a 19.7% increase in the combined total of reports of elder and vulnerable adult abuse and neglect and a 15.6% increase in substantiated cases in the four years since the last survey was conducted in 2000.
- Overall, in 2003, APS agencies received 565,747 reports of suspected elder and vulnerable adult abuse, as compared with 482,913 reports four years ago.
- Of the states that were able to separate out incidents of elder abuse and vulnerable adult abuse, there were 253,426 incidents involving elder abuse, ranging from a low of 85 in Guam to a high of 66,805 in California. This represents 8.3 reports of abuse for every 1000 older Americans.
- In 2003, 192,243 cases of alleged elder abuse were investigated by the APS in 29 states.
- In 24 of the states, nearly half (46.7%) of the investigations were substantiated, ranging from a low of 7.2% in Arkansas to a high of 72.4% in Texas.
- In the overwhelming majority of cases (89.3%), the alleged abuse was reported to have occurred in a domestic setting.
- Older women are far more likely than men to suffer from abuse or neglect. In 2003, two out of every three (65.7%) elder abuse victims were women (15 states reporting).
- In 20 of the states, more than two in five victims (42.8%) were age 80 or older.
- The majority (77.1%) of victims, according to reports from 13 states, were Caucasian.
- Most alleged perpetrators in 2003 were adult children (32.6%) or other family members (21.5%). Spouses/intimate partners accounted for 11.3% of the total (11 states responding).
- Twenty-one of the states (40.4%) maintain an abuse registry or database of alleged perpetrators, while 31 (59.6%) do not.
- As reported by 19 states, types of maltreatment substantiated included:
 - Self neglect (37.2%)
 - Financial exploitation (20.4%)
 - o Emotional/psychological/verbal abuse (14.8%)
 - o Physical abuse (10.7%)
 - Sexual abuse (1%)
 - o Other (1.2%)

Source: National Center on Elder Abuse, 2004 Survey of State Adult Protective Services (APS)

Table 5.81 Elder abuse prevalence and incidence, United States

- According to best available estimates, between 1 and 2 million Americans age 65 or older have been injured, exploited, or otherwise mistreated by someone on whom they depended for care or protection.¹
- Estimates of the frequency of elder abuse range from 2% to 10% based on various sampling, survey methods, and case definitions.²
- Data on elder abuse in domestic settings suggest that 1 in 14 incidents, excluding incidents of selfneglect, come to the attention of authorities.³
- Current estimates put the overall reporting of financial exploitation at only 1 in 25 cases, suggesting that there may be at least 5 million financial abuse victims each year.⁴
- It is estimated that for every one case of elder abuse, neglect, exploitation, or self-neglect reported to authorities, about five go unreported.⁵
- In 1996, nearly 450,000 adults aged 60 and over were abused and/or neglected in domestic settings. Factoring in self-neglect, the total number of incidents was approximately 551,000.
- A University of lowa study based on 1999 data found 190,005 domestic elder abuse reports from 17 states; 242,430 domestic elder abuse investigations from 47 states; and 102,879 substantiations from 35 states. Significantly higher investigation rates were found for states that require mandatory reporting and tracking of reports.⁷
- In 2000, states were asked to indicate the number of elder/adult reports received in the most recent year for which data were available. Based on figures from 54 states, the total number of reports was 472,813.8
- In 2003, state Long Term Care Ombudsman programs nationally investigated 20,673 complaints of abuse, gross neglect, and exploitation on behalf of nursing home and board and care residents.
 Among seven types of abuse categories, physical abuse was the most common type reported.⁹

Source: National Center on Elder Abuse; Primary Sources: ¹National Research Council Panel to Review Risk and Prevalence of Elder Abuse and Neglect, ²Lachs & Pillemer, ³Pillemer & Finkelhor, ⁴Wasik, ⁵⁶⁸National Center on Elder Abuse, ⁷Jogerst et al, ⁹U.S. Administration on Aging

Domain VI: Education and the Workforce

The following section presents secondary data sources applicable to Domain VI: Education and the Workforce. As shown in Table 6.1, compared to all other issues in this domain, preparation of the unemployed to enter the workforce had the largest percentage of respondents that fell into the priority need quadrant (high/low). The next highest rated issue in this domain, preparation of young adults to enter the workforce, also relates to training for job attainment. While these issues are rated as the highest in this domain in the high/low category, it should be noted that they were not among the top priority needs when taking into account all items on the needs assessment survey. Two issues, children prepared to enter kindergarten and adult literacy, were rated as the two greatest strength areas in this domain. Over 66% of respondents rated these issues as strengths, which not only designated them as strengths in the education and workforce domain but also among all issues on the needs assessment survey. Secondary data for this domain are presented in Tables 6.2 to 6.81. Note that data are presented in the order in which issues within the domain were listed on the needs assessment survey.

Table 6.1 All Counties: Education and the Workforce Domain Note: Issues are sorted by the HL Rank (High in importance and Low in how the issue is being addressed) Do not Importance-Being Addressed **Overall Mean Ratings** know how **Response Patterns** well issue Overall How well issue is is being Rank based HL нн LH LL **Importance** being addressed **Item from Needs Assessment** addressed on Response Ν Rank Rank Rank Mean Rank Mean Pattern % % % % Ν Ν Ν % 22 Preparation of the unemployed to 46.40 1071 1 6 44.60 7.30 1.70 3.40 1519 6 2.41 1093 450 29.16 enter the workforce Preparation of young adults to enter 33 1090 2 40.50 5 52.80 4.80 2.00 2 3.41 1520 5 2.54 1118 414 27.02 the workforce 2.62 43 Number of skilled workers to fill 1082 3 34.90 56.60 1493 1099 435 4 4.90 3.60 5 3.36 4 28.36 available jobs Students completion of high school 46 1173 4 33.80 3 61.10 3.40 1.70 3.54 1547 3 2.66 1194 336 21.96 53 Adult literacy 997 5 26.20 2 66.00 5.20 2.60 4 3.37 1477 2 2.74 1019 523 33.92 55 1471 Children prepared to enter 1073 6 24.00 66.40 4.50 5.10 3.31 2.77 1104 436 28.31 1 6 kindergarten

ISSUE 37: NUMBER OF SKILLED WORKERS TO FILL AVAILABLE JOBS

In February, 2008, employers in the five-county survey area used the Indiana Department of Workforce Development Customer Self-Service System to indicate the top skills in demand in their organizations. All five counties ranked "work as a team member" as the top skill in demand. Other tops skills included managing time effectively, maintaining a safe work environment, and adhering to safety procedures. Additional skill sets varied by county, which may be viewed in the table below.

An assessment of the major employers in the five-county study area shows that different types of industry are present in the different counties, which indicates a need for varied skill sets depending on location. Medical facilities are major employers in Vanderburgh and Warrick counties, education institutions have a significant presence in Vanderburgh County, family entertainment parks provide a great deal of employment in Spencer County, and major manufacturing/warehousing facilities exist in all counties.

Long-terms projections related to occupational growth in Region 11 (southwestern Indiana) show that the greatest increase in jobs between 2004 and 2014 was expected to occur in the following occupations: registered nurses, janitors and cleaners except maids and housekeeping cleaners, team assemblers, truck drivers (heavy and tractor-trailer), and home health aides. Other health-related aides and customer service jobs ranked in the top ten.

In terms of the fastest growing high-wage jobs in the entire state between 2002 and 2012, projections from the Indiana Department of Workforce Development show that the following jobs rank in the top ten: registered nurses; postsecondary teachers; teachers, elementary & kindergarten; first-line supervisor-construction & extraction; computer systems analysts; social workers; computer software engineers, applications; management analysts, dental hygienists; and medical & health services managers. A table with expected growth in job numbers, wage, and education/training required is presented below.

In terms of the job sectors where individuals are employed, a comparison of December 2006 to December 2007 showed the greatest percent increases in the information field, federal government, and educational and health services. The greatest percent decreases occurred in financial activities, retail trade, and transportation, warehousing, and utilities.

Finally, the Indiana Department of Workforce Development Customer Self-Service System maintains a count of the types of jobs being sough by applicants. In all counties in the five-county area, assemblers and production laborers were the top two jobs being sought. Other industrial jobs ranked in the top ten in each county. Clerical jobs were particularly popular in Gibson County and also ranked in the top ten in Vanderburgh and Warrick counties.

Table 6.2 Top work skills in demand as indicated	by employe	rs, five-cou	nty survey a	area, February,	2008
Skill	Rank in	Rank in	Rank in	Rank in	Rank in
	Gibson	Posey	Spencer	Vanderburgh	Warrick
Work as a team member	1	1	1	1	1
Maintain safe work environment	2	4		8	3
Manage time effectively	3	8	7	3	4
Meet deadlines	4				
Maintain consistent quality	5				
Adhere to safety procedures	6	4	18	6	4
Acquire and evaluate information	7	9		5	7
Follow detailed instructions	8	14			
Operate precision measuring tools and equipment in	9				14
industrial production, manufacturing					
Read and apply information	10	20		17	
Perform more than one task at the same time	11		13	9	
Apply industry terms and concepts	12	15		10	
Receive payments and make change	13				

Use basic math	Apply good listening skills	14	6	20	2	6
Follow government regulations			_	ł		
Follow emergency procedures						
Follow and give instructions			_	_	1	_
Follow customer instructions						
Apply health/sanitation standards 19 11 Move heavy objects 2 2 Load and unload 3 12 Use computer 7 7 11 20 Use computer sto enter, access and retrieve client data 7 7 11 20 Use computer keyboard 10 2 13 17 Use computer keyboard 13 7 16 16 Organize and work with detailed office or warehouse records 16 12 Prepare reports 16 12 Prepare reports 17 13 <						
Move heavy objects		_				_
Load and unload	117	1				
Use computer						
Use computers to enter, access and retrieve client data Use computer keyboard Organize and work with detailed office or warehouse records Prepare reports Serve customers or clients Use electrical and electronic test devices Read repair work orders Read/apply service/repair manuals Apply alternating current (Ac) theory Keep records and maintain files Organize and maintain information Interpret and communicate information Perform general clerical duties Prepare meals 10 2 13 17 16 16 17 11 7 9 11 7 9 11 7 9 11 7 9 11 7 9 11 7 9 11 7 9 11 7 9 11 7 9 11 7 9 11 7 9 11 7 9 11 7 9 11 7 11 7 9 11 7 9 11 7 11 7 9 11 7 12						
Use computer keyboard						
Use computer keyboard			10	2	13	17
Organize and work with detailed office or warehouse records Prepare reports			40	7	10	10
records						
Prepare reports 17 13 Serve customers or clients 17 11 7 9 Use electrical and electronic test devices 17 11 7 9 Read repair work orders	•		16		12	
Serve customers or clients 17 11 7 9 Use electrical and electronic test devices 2 Read repair work orders 4 Read/apply service/repair manuals 4 Apply alternating current (Ac) theory 4 Keep records and maintain files 7 15 Organize and maintain information 16 19 Interpret and communicate information 16 Perform general clerical duties 18 Use Excel spreadsheet software 10 Understand government health, hotel and food service regulations			47	40		
Use electrical and electronic test devices 2 Read repair work orders 4						
Read repair work orders 4 Read/apply service/repair manuals 4 Apply alternating current (Ac) theory 4 Keep records and maintain files 7 15 Organize and maintain information 16 19 Interpret and communicate information 16 Perform general clerical duties 18 Use Excel spreadsheet software 10 Understand government health, hotel and food service regulations 12 Prepare meals 17			+			
Read/apply service/repair manuals 4 Apply alternating current (Ac) theory 4 Keep records and maintain files 7 15						
Apply alternating current (Ac) theory 4 Keep records and maintain files 7 15 Organize and maintain information 16 19 Interpret and communicate information 16 Perform general clerical duties 18 Use Excel spreadsheet software 20 Apply nutritional practices 10 Understand government health, hotel and food service regulations 12 Prepare meals 17						
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Use Excel spreadsheet software 20 Apply nutritional practices 10 Understand government health, hotel and food service 12 regulations 17	Interpret and communicate information			16		
Apply nutritional practices 10 Understand government health, hotel and food service regulations Prepare meals 17	Perform general clerical duties				18	
Understand government health, hotel and food service regulations 12 Prepare meals 17	Use Excel spreadsheet software				20	
Understand government health, hotel and food service regulations 12 Prepare meals 17	Apply nutritional practices					10
regulations 17						12
Prepare meals 17						
						17
	Apply food handling rules					17

Source: Indiana Department of Workforce Development, Customer Self Service System

Table 6.3 Top ten jobs being sought by job applicants, Gibson County, April, 2008		
Job Title	No. of Applicants	
Assemblers (factory work)	245	
Production laborers	174	
Forklift/industrial truck operators	116	
All other machine operators	110	
All other hand workers	109	
Production inspectors, testers, graders	94	
General office clerks	76	
Receptionists/information clerks	67	
Hand packers and packagers	67	
All other metals and plastic machine operators	66	

Source: Indiana Department of Workforce Development, Customer Self Service System

Table 6.4 Top ten jobs being sought by job applicants, Posey County, April, 2008		
Job Title	No. of Applicants	
Assemblers (factory work)	249	
Production laborers	212	
All other machine operators	185	
Forklift/industrial truck operators	170	
All other hand workers	157	
All other metal and plastic machine operators	148	
Plastic molding and casting machine operators	137	
Hand packers and packagers	132	
All other machine setters and set-up operators	108	
All other precision assemblers	101	

Source: Indiana Department of Workforce Development, Customer Self Service System

Table 6.5 Top ten jobs being sought by job applicants, Spencer County, April, 2008			
Job Title	No. of Applicants		
Assemblers (factory work)	109		
Production laborers	91		
Forklift/industrial truck operators	71		
All other machine operators	64		
All other hand workers	64		
Hand packers and packagers	53		
Production inspectors, testers, graders	41		
All other metal and plastic machine operators	41		
Shipping and receiving clerks	37		
All other precision assemblers	36		

Source: Indiana Department of Workforce Development, Customer Self Service System

Table 6.6 Top ten jobs being sought by job applicants, Vanderburgh County, April, 2008		
Job Title	No. of Applicants	
Assemblers (factory work)	2049	
Production laborers	1711	
All other machine operators	1232	
Forklift/industrial truck operators	1163	
All other hand workers	1116	
Hand packers and packagers	1016	
All other metal and plastic machine operators	854	
Plastic molding and casting machine operators	848	
General office clerks	754	
Production inspectors, testers, graders	739	

Source: Indiana Department of Workforce Development, Customer Self Service System

Table 6.7 Top ten jobs being sought by job applicants, Warrick County, April, 2008		
Job Title No. of Applicants		
Assemblers (factory work)	386	
Production laborers	335	
Forklift/industrial truck operators	229	
All other machine operators	205	
All other hand workers	202	
Hand packers and packagers	155	
Plastic molding and casting machine operators	153	
Production inspectors, testers, graders	145	
All other metal and plastic machine operators	142	
General office clerks	130	

Source: Indiana Department of Workforce Development, Customer Self Service System

Table 6.8 Data from OES Employment and Wage Survey, Evansville MSA, 2006			
Occupation	Est. Employment	Annual Mean Wage	
All Occupations	175270	\$34230	
Management	6150	\$81780	
Business and financial operations	4820	\$48160	
Computer and mathematical	1590	\$52200	
Architecture and engineering	2320	\$56930	
Life, physical, and social science	1140	\$47230	
Legal	680	\$58030	
Education, training, and library	7880	\$38130	
Arts, design, entertainment, sports,	1800	\$31220	
and media			
Healthcare practitioners and	9740	\$54480	
technical			
Healthcare support	4300	\$23630	
Protective service	2560	\$31680	
Food preparation and serving	14520	\$16270	
Building and grounds cleaning and	5290	\$21310	
maintenance			
Sales and related occupations	16300	\$29950	
Office and administrative support	26280	\$26610	
Farming, fishing, and forestry	190	\$30230	
Construction and extraction	11890	\$41280	
Installation, maintenance, and repair	9240	\$37540	
Production	27900	\$33620	
Transportation and material moving	15440	\$27870	

Source: Indiana Department of Workforce Development, OES Employment and Wage Survey Report, Evansville MSA, 2006

Table 6.9 Major employers-Warrick County, 2008		
Employer	City	
Alcoa Warrick Operations	Newburgh	
Women's Hospital	Newburgh	
Wal-Mart Supercenter	Boonville	
St. Mary's Warrick Hospital	Boonville	
St. Mary's Warrick Senior Partners	Boonville	
St. Mary's Warrick	Boonville	
Charitable Resource Foundation	Newburgh	
Welborn Clinic Vision Center	Newburgh	
Electronics Research Inc.	Chandler	
Lowe's	Newburgh	

Source: Indiana Department of Workforce Development; infoUSA database

Table 6.10 Major employers-Posey County, 2008		
Employer	City	
SABIC Innovative Plastics (formerly GE)	Mount Vernon	
CountryMark Co-op	Mount Vernon	
Metropolitan School District	Poseyville	
Warehouse Services Inc.	Mount Vernon	
CountryMark Refinery	Mount Vernon	
BWX Technologies Inc.	Mount Vernon	
Red Geranium Restaurant	New Harmony	
Industrial Contractors	Mount Vernon	
New Harmony Inn	New Harmony	
Westech Fence	Mount Vernon	

Source: Indiana Department of Workforce Development; infoUSA database

Table 6.11 Major employers-Spencer County, 2008		
Employer	City	
Holiday World and Splashin' Safari	Santa Claus	
Holiday World	Santa Claus	
St. Meinrad Archabbey School Saint Meinrad		
Spencer Industries Inc.	Dale	
Kimball International	Santa Claus	
Abbey Press	Saint Meinrad	
American Electric Power Co.	Rockport	
Flexcell-Santa Claus	Santa Claus	
MPW Industrial Services Inc.	Rockport	
Thermwood Corporation	Dale	

Source: Indiana Department of Workforce Development; infoUSA database

Table 6.12 Major employers-Vanderburgh County, 2008		
Employer	City	
Whirlpool Corporation	Evansville	
St. Mary's Hospital	Evansville	
St. Mary's Medical Center	Evansville	
Mead Johnson Nutritionals	Evansville	
Bristol-Myers Squibb Co.	Evansville	
Deaconess Diet and Nutritional	Evansville	
Deaconess Health System	Evansville	

University of Southern Indiana	Evansville
TJ Maxx Distribution Center	Evansville
Aztar Indiana Gaming LLC	Evansville

Source: Indiana Department of Workforce Development; infoUSA database

Table 6.13 Major employers-Gibson County, 2008		
Employer	City	
Toyota Motor Manufacturing	Princeton	
Hansen Corporation	Princeton	
PSI Energy Generating Station	Princeton	
Gibson General Hospital	Princeton	
Wal-Mart	Princeton	
Black Beauty Coal Co.	Francisco/Oakland City	
Orion America Inc.	Princeton	
Gibson County Area Rehab Center	Princeton	

Source: Indiana Department of Workforce Development; infoUSA database

Table 6.14 Region 11 (Southwestern Indiana) top 10 occupations by growth - 2004-2014 long-term projections		
Rank	Occupation	
1	Registered nurses	
2	Janitors and cleaners, except maids and housekeeping cleaners	
3	Team assemblers	
4	Truck drivers, heavy and tractor-trailer	
5	Home health aides	
6	Nursing aides, orderlies, and attendants	
7	Retail salespersons	
8	Personal and home care aides	
9	Customer service representatives	
10	Combine food preparation and serving workers, including fast food	

Source: U.S. Bureau of Labor Statistics; Indiana Department of Workforce Development

Table 6.15 Fastest growing high-wage jobs from 2002 to 2012, Indiana			
Occupation	Growth	Wage (\$)	Education and Training Required
Registered Nurses	15400	49067	Associate degree
Postsecondary Teachers	9150	45890	Doctoral degree
Teachers, Elementary and Kindergarten	5420	44544	Bachelor's degree
First-line Supervisors-Construction and Extraction	2660	51047	Work experience in a related occupation
Computer Systems Analysts	2250	59976	Bachelor's degree
Social Workers	2090	32625	Bachelor's degree
Computer Software Engineers, Applications	1750	65549	Bachelor's degree
Management Analysts	1750	56394	Bachelor's or higher degree, plus work experience
Dental Hygienists	1660	59055	Associate degree
Medical and Health Services Managers	1580	62163	Bachelor's or higher degree, plus work experience

Source: Indiana Chamber of Commerce, *Indiana's Adult Education and Workforce Skills Performance Report*; Indiana Department of Workforce Development

Table 6.16 No. of employees in non-farm positions, Evansville MSA, 12/2006 and 12/2007					
Occupation	Dec. 2006	Dec. 2007	% Change 2006 – 2007		
Total nonfarm	182000	184100	+1.2%		
Goods producing	47600	47700	+0.2%		
Mining & construction	13700	14100	+2.9%		
Manufacturing	33900	33600	-0.9%		
Durable goods	19100	19100	0.0%		
Service providing	134400	136400	+1.5%		
Trade, transportation, & utilities	37400	37200	-0.5%		
Wholesale trade	7700	7800	+1.3%		
Retail trade	19700	19500	-1.0%		
General merchandise stores	4200	4200	0.0%		
Trans., warehousing, & utilities	10000	9900	-1.0%		
Information	2900	3500	+20.7%		
Financial activities	6300	6200	-1.6%		
Professional & business services	17800	18000	+1.1%		
Educational & health services	27800	28700	+3.2%		
Health care & social assistance	23200	23400	+0.9%		
Hospitals	9200	9300	+1.1%		
Leisure & hospitality	16800	17200	+2.4%		
Food services & drinking places	12300	12300	0.0%		
Other services	7400	7500	+1.4%		
Government	18000	18100	+0.6%		
Federal government	1300	1400	+7.7%		
State government	3800	3900	+2.6%		
Local government	12900	12800	-0.8%		
Local government education	7300	7300	0.0%		

Source: Indiana Department of Workforce Development, Research and Analysis, Current Employment Statistics Program in cooperation with the U.S. Department of Labor, Bureau of Labor Statistics

Table 6.17 Quarterly workforce indicators (QWI) quick facts Indiana, economic growth Region 11-top 10				
industries ranked on greatest growth in hiring				
NAICS Code	Industries	Hiring Growth, 4 th Q 2005 – 4 Q 2006		
493	Warehousing & Storage	206		
611	Educational Services	144		
522	Credit Intermediation & Related Activities	114		
722	Food Services & Drinking Places	98		
621	Ambulatory Health Care Services	72		
311	Food Manufacturing	59		
622	Hospitals	42		
331	Primary Metal Manufacturing	28		
531	Real Estate	27		
813	Religious, Grantwriting, Civic, Professional, & Similar Organizations	25		

Source: U.S. Bureau of Census, Local Employer-Household Dynamics (LEHD), Local Employment Dynamics (LED), 4th Quarter 2006

Table 6.18 State-administered Adult Education Program, 2001/2002 through 2005/2006						
Measure	2001/2002	2002/2003	2003/2004	2004/2005	2005/2006	
Annual Dropouts in 7 th to 12 th Grades	6714	6787	8045	8076	9967	
Enrolled in Adult Basic Education	11598	20953	21660	24181	24066	
Enrolled in Adult Secondary Education	12883	11809	11173	11120	9871	
Enrolled in English as a Second	9011	8635	8315	8197	8556	
Language						
Total Enrollment	44492	41397	41148	43498	42493	
Percent Completing an Educational Level	38.5%	39.9%	43.1%	47.2%	50.0%	
Percent Advancing within Adult Education	21.9%	24.6%	30.1%	34.1%	37.6%	
Percent Placed in Postsecondary/	3.8%	4.0%	4.0%	4.5%	3.4%	
Training						
Total Percent Continuing Education	25.75	28.6%	34.1%	38.5%	40.9%	
Percent Earning a GED	14.0%	13.5%	14.5%	13.7%	14.7%	
Percent Obtaining or Improving	19.2%	20.5%	15.5%	13.7%	12.9%	
Employment						
Federal Appropriations (\$)	\$9,928,243	\$10,667,843	\$9,919,574	\$10,094,826	\$10,042,747	
State Appropriations (\$)	\$14,000,000	\$14,000,000	\$14,000,000	\$14,000,000	\$14,000,000	
Appropriations per Student (\$)	\$538	\$596	\$581	\$554	\$566	
Appropriations per Completion (\$)	\$1398	\$1495	\$1348	\$1174	\$1131	

Source: Indiana Chamber of Commerce, *Indiana's Adult Education and Workforce Skills Performance Report*; Indiana Department of Education

Table 6.19 Indiana Department of Workforce Development Basic Skills and Literacy Training, 2001/2002					
	through 200	5/2006			
Measure	2001/2002	2002/2003	2003/2004	2004/2005	2005/2006
Enrollment	653	1269	1606	2403	2124
Percent Completing	70.0%	66.0%	86.9%	79.7%	89.4%
Percent Measuring Skill Gain	24.7%	25.3%	34.9%	15.6%	5.8%
Percent Completing and Continuing Education	1.2%	0.6%	3.0%	0.7%	0.2%
Percent Obtaining or Improving Employment	22.7%	21.0%	17.7%	27.5%	34.5%
Change in Weekly Earnings (\$)	\$132	\$182	\$188	\$175	\$130

Source: Indiana Chamber of Commerce, *Indiana's Adult Education and Workforce Skills Performance Report*; Indiana Department of Workforce Development

Table 6.20 Training Acceleration Grant Program (previously Incumbent Worker Training Program), 2001/2002 through 2005/2006					
Measure	2001/2002	2002/2003	2003/2004	2004/2005	2005/2006
Number of Projects	55	92	144	148	158
Award Amount (\$)	\$6,752,464	\$12,521,334	\$19,305,912	\$20,858,938	\$17,504,599
Number of Planned Trainees	6941	10915	15492	26330	15223
Number of Enrolled Trainees	6675	9643	11287	13750	8239
Earning Replacement Rates (ERR)*	103%	107%	105%	107%	110%
Retention Rate**	91%	95%	91%	90%	86%
Award Amount per Enrolled Trainee (\$)	\$1012	\$1298	\$1710	\$1517	\$2125

^{*}ERR: a measurement of wage gain; calculated by dividing the average quarterly wage for the fourth quarter after the training by the average quarterly wage when enrolled in training; an ERR above 100% indicates a wage gain

Source: Indiana Chamber of Commerce, *Indiana's Adult Education and Workforce Skills Performance Report*; Indiana Department of Workforce Development

^{**}Retention rate: determined by dividing the number of trainees with wages one year after the training is over by the number enrolled in training

Table 6.21 Indiana Workforce Training Program, 2001-2006						
Measure	2001	2002	2003	2004	2005	2006
Skills Enhancement Fund (SEF)					
Worker Training Commitment	ts					
Existing Employees	45200	34471	36642	36429	30510	41679
New Employees	6243	5138	8953	7422	8242	16428
Total Employees	51443	39609	45595	43851	38752	58107
Training	\$6,863,964	\$9,921,935	\$9,151,091	\$7,228,843	\$12,016,868	\$12,439,871
Expenditures						

Source: Indiana Chamber of Commerce, *Indiana's Adult Education and Workforce Skills Performance Report*; Indiana Economic Development Corporation

ISSUE 38: STUDENTS' COMPLETION OF HIGH SCHOOL

Between the 2001/2002 and 2006/2007 school years, graduation rates for Indiana and most area school corporations showed a decrease. However, it should be noted that the graduation rate calculation changed in 2005/2006, which somewhat skews this amount of change over time. If the change between 2001/2002 and 2004/2005 is analyzed, data show that the Indiana graduation rate decreased slightly from 91.1% to 89.8%. Changes in graduation rates for area school corporations between 2001/2002 and 2004/2005 varied, with six districts experiencing a decrease, two experiencing an increase, and two experiencing no change.

From 2004 to 2006, the percentage of individuals who did not have a diploma decreased slightly in the United States and Indiana. The most positive changes occurred with the 18 to 24 age group, where both U.S. and Indiana populations decreased in the percentage of people with less than a high school diploma. Based on Census data, the percentage of individuals 25 and over who have completed high school increased in every county in the study's five-county area between 1990 and 2000. While the number of individuals with diplomas has increased, data from the Indiana Department of Education show that the number of dropouts as a percentage of enrollment actually increased between 2003 and 2006 in Indiana and two of the counties included in the needs assessment, Spencer and Warrick. During this time, Posey County showed no change, while Vanderburgh and Gibson counties decreased in dropout rate.

As another measure of school completion, data show that the percentage of freshmen graduating in four years increased slightly in Indiana and between 2003 and 2006. This rate also increased in all counties except Spencer.

Table 6.22 P	Table 6.22 Percent of individuals with less than high school diploma, United States and Indiana, 2004-2006							
Category	2004 % c	of Total	2005 % of Total		2006 % of Total		% Change 2004-2006	
	US	Indiana	US	Indiana	US	Indiana	US	Indiana
Population 18 to 24	26233020	559876	26295690	543633	29700518	623169	+13.2%	+11.3%
Less than high school	20.2%	27.6%	19.6%	21.5%	18.0%	19.6%	-10.9%	-29.0%
graduate (18-24)								
Population 25 and	186534177	3899357	188950759	3956723	19593282	4110754	+5.0%	+5.4
over					4			
<9 th grade	6.3%	5.2%	6.4%	4.3%	6.5%	4.6%	+3.2%	-11.5%
Some high school, no	9.8%	10.5%	9.5%	10.2%	9.4%	10.2%	-4.1%	-2.9%
diploma								
No diploma total	16.1%	15.7%	15.9%	14.5%	15.9%	14.8%	-1.2%	-5.7%

Source: U.S. Census, American Community Survey (2004-2006)

Table 6	.23 Attendan	ce rates for a	rea school co	rporations, 20	02/2003 – 200	06/2007
School	2002/2003	2003/2004	2004/2005	2005/2006	2006/2007	% Change
Corporation						2002/2003 -
						2006/2007
Gibson County						
East Gibson	95.7%	96.2%	95.9%	95.9%	96.3%	+0.6%
North Gibson	95.4%	95.8%	96.1%	95.5%	95.3%	-0.1%
South Gibson	96.7%	97.0%	96.8%	97.2%	99.9%	+3.3%
Posey County						
Mount Vernon	96.9%	96.8%	96.9%	96.9%	97.1%	+2.1%
New Harmony	96.5%	96.6%	96.6%	95.9%	97.1%	+0.6%
North Posey	97.3%	97.4%	97.4%	97.1%	97.4%	+0.1%
Spencer County						
North Spencer	96.8%	96.9%	97.3%	97.1%	96.8%	0.0%
South Spencer	95.9%	95.7%	95.9%	95.7%	96.3%	+0.4%
Vanderburgh County						
Evansville-	96.7%	96.8%	96.8%	96.7%	96.5%	-0.2%
Vanderburgh						
Warrick County						
Warrick	96.4%	96.5%	96.1%	96.2%	96.1%	-0.3%
State Average	95.7%	95.9%	95.8%	95.9%	95.8%	+0.1%

Source: Indiana Department of Education

Table 6.24 Graduation rates for area school corporations (old definition), 2001/2002 – 2006/2007						
School Corporation	2001/2002	2002/2003	2003/2004	2004/2005	2005/2006*	2006/2007
Gibson County						
East Gibson	87.1%	86.6%	92.5%	84.9%	84.0%	89.2%
North Gibson	86.3%	83.7%	85.9%	81.9%	75.9%	72.3%
South Gibson	90.4%	97.5%	95.6%	92.9%	90.2%	88.5%
Posey County						
Mount Vernon	89.6%	91.4%	88.6%	89.6%	87.1%	80.6%
New Harmony	100%	100%	100%	100%	100%	85.7%
North Posey	92.2%	93.5%	96.4%	95.2%	90.0%	93.0%
Spencer County						
North Spencer	98.6%	99.0%	98.3%	97.7%	85.1%	89.8%
South Spencer	94.9%	95.5%	89.8%	90.6%	86.7%	84.8%
Vanderburgh County						
Evansville-Vanderburgh	94.8%	95.1%	88.9%	92.3%	76.0%	84.0%
Warrick County						
Warrick	95.4%	91.3%	91.8%	87.2%	83.0%	83.3%
State Average	91.1%	91.1%	89.8%	89.8%	76.0%	76.5%

^{*}New definition of graduation rate began in 2005/2006

Table 6.25 Percent of individuals 25+ who have completed high school, Gibson County, 1990 vs. 2000			
Year	% Completed High School		
1990	72.8%		
2000	80.8%		
% Change 1990 – 2000	+11.0%		

Source: U.S. Census

Table 6.26 Percent of individuals 25+ who have completed high school, Posey County, 1990 vs. 2000		
Year	% Completed High School	
1990	76.3%	
2000	84.5%	
% Change 1990 – 2000	+10.7%	

Source: U.S. Census

Table 6.27 Percent of individuals 25+ who have completed high school, Spencer County, 1990 vs. 2000		
Year % Completed High School		
1990	72.0	
2000	81.2	
% Change 1990 – 2000	+12.8%	

Source: U.S. Census

Table 6.28 Percent of individuals 25+ who have completed high school, Vanderburgh County, 1990 vs. 2000		
Year	% Completed High School	
1990	75.2%	
2000	83.2%	
% Change 1990 – 2000	+10.6%	

Source: U.S. Census

Table 6.29 Percent of individuals 25+ who have completed high school, Warrick County, 1990 vs. 2000		
Year % Completed High School		
1990	80.2	
2000	86.3	
% Change 1990 – 2000	+7.6%	

Source: U.S. Census

Table 6.29a Percentage of individuals 25 and over who have not completed high school, United States, Indiana, and five-county area, 2000		
Location	% Not Completing High School	
Gibson County	19.1%	
Posey County	15.5%	
Spencer County 18.8%		
Vanderburgh County 16.9%		
Warrick County 13.7%		
Indiana 17.9%		
United States	19.6%	

Source: U.S. Census, 2000

Table 6.30 Number of public school dropouts, Indiana, 2003-2006			
Year	No. of Dropouts	Total Enrollment	Dropouts as % of Enrollment
2003	6769	996057	0.68%
2004	8034	1004949	0.80%
2005	7984	1012824	0.79%
2006	9821	1023937	0.96%
% Change 2003-2006	+45.1%	+2.8%	+41.2%

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

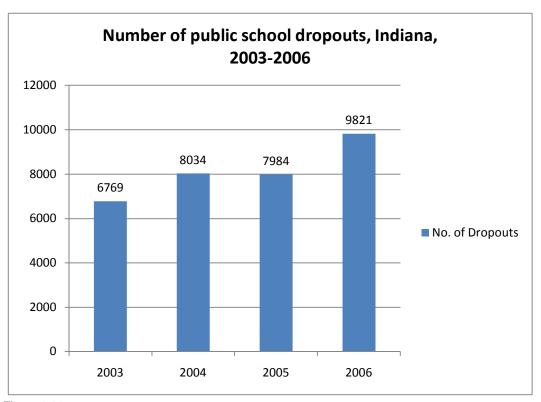


Figure 6.30

Table 6.31 Number of public school dropouts, Gibson County, 2003-2006				
Year	No. of Dropouts	Total	Dropouts as % of	Dropouts as % of Enrollment
		Enrollment	Enrollment Gibson	Indiana
2003	45	4953	0.90	0.68%
2004	35	4979	0.70	0.80%
2005	51	5016	1.02	0.79%
2006	37	5060	0.73	0.96%
% Change 2003-2006	-17.8%	+2.2%	-18.9%	+41.2%

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

Table 6.32 Number of public school dropouts, Posey County, 2003-2006				
Year	No. of	Total Enrollment	Dropouts as % of	Dropouts as % of Enrollment
	Dropouts		Enrollment Posey	Indiana
2003	28	4568	0.61%	0.68%
2004	31	4397	0.71%	0.80%
2005	29	4340	0.67%	0.79%
2006	26	4252	0.61%	0.96%
% Change 2003-2006	-7.1%	-6.9%	0.00%	+41.2%

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

Table 6.33 Number of public school dropouts, Spencer County, 2003-2006				
Year	No. of	Total Enrollment	Dropouts as % of	Dropouts as % of
	Dropouts		Enrollment Spencer	Enrollment Indiana
2003	7	3875	0.18%	0.68%
2004	16	3756	0.43%	0.80%
2005	15	3671	0.41%	0.79%
2006	27	3637	0.74%	0.96%
% Change 2003-2006	+286%	-6.1%	+311%	+41.2%

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

Table 6.34 Number of public school dropouts, Vanderburgh County, 2003-2006				
Year	No. of	Total Enrollment	Dropouts as % of	Dropouts as % of
	Dropouts		Enrollment Vanderburgh	Enrollment Indiana
2003	83	22902	0.36%	0.68%
2004	198	22480	0.88%	0.80%
2005	139	22444	0.62%	0.79%
2006	11	22440	0.00%	0.96%
% Change 2003-2006	-86.7%	-2.0%	-100%	+41.2%

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

Table 6	Table 6.35 Number of public school dropouts, Warrick County, 2003-2006			
Year	No. of	Total Enrollment	Dropouts as % of	Dropouts as % of
	Dropouts		Enrollment Warrick	Enrollment Indiana
2003	62	9144	0.68%	0.68%
2004	60	9269	0.65%	0.80%
2005	99	9268	1.07%	0.79%
2006	74	9354	0.79%	0.96%
% Change 2003-2006	+19.4%	+2.3%	+16.2%	+41.2%

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

Table 6.36 Percent of freshmen class graduating in 4 years, Indiana, 2003-2006		
Year	% Graduating	
2003	69.4%	
2004	69.5%	
2005	70.3%	
2006	71.6%	
% Change 2003-2006	+3.2%	

Source: Indiana Department of Education (calculations by Indiana Youth Institute); Kids Count, Annie E. Casey Foundation

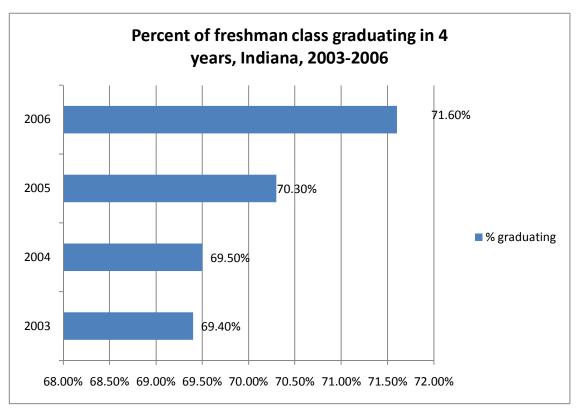


Figure 6.36

Table 6.37a Percent of freshmen class graduating in 4 years, Gibson County and Indiana, 2003-2004		
Year	Gibson %	Indiana %
2003	75.4%	69.4%
2004	81.8%	69.5%
2005	82.5%	70.3%
2006	84.4%	71.6%
% Change 2003-2006	+11.9%	+3.2%

Source: Indiana Department of Education (calculations by Indiana Youth Institute); Kids Count, Annie E. Casey Foundation

Table 6.37b Percent of freshmen class graduating in 4 years, Posey County and Indiana, 2003-2004		
Year	Posey %	Indiana %
2003	77.9%	69.4%
2004	74.6%	69.5%
2005	82.0%	70.3%
2006	87.8%	71.6%
% Change 2003-2006	+12.7%	+3.2%

Source: Indiana Department of Education (calculations by Indiana Youth Institute); Kids Count, Annie E. Casey Foundation

Table 6.38 Percent of freshmen class graduating in 4 years, Spencer County and Indiana, 2003-2004		
Year	Spencer %	Indiana %
2003	89.3%	69.4%
2004	85.4%	69.5%
2005	86.5%	70.3%
2006	87.3%	71.6%
% Change 2003-2006	-2.2%	+3.2%

Source: Indiana Department of Education (calculations by Indiana Youth Institute); Kids Count, Annie E. Casey Foundation

Table 6.39 Percent of freshmen class graduating in 4 years, Vanderburgh County and Indiana, 2003-2004			
Year	Vanderburgh %	Indiana %	
2003	71.2%	69.4%	
2004	77.4%	69.5%	
2005	75.5%	70.3%	
2006	75.2%	71.6%	
% Change 2003-2006	+5.6%	+3.2%	

Source: Indiana Department of Education (calculations by Indiana Youth Institute); Kids Count, Annie E. Casey Foundation

Table 6.40 Percent of freshmen class graduating in 4 years, Warrick County and Indiana, 2003-2004				
Year	Warrick %	Indiana %		
2003	78.5	69.4%		
2004	79.1	69.5%		
2005	79.3	70.3%		
2006	79.7	71.6%		
% Change 2003-2006	+1.5%	+3.2%		

Source: Indiana Department of Education (calculations by Indiana Youth Institute); Kids Count, Annie E. Casey Foundation

ISSUE 39: PREPARATION FOR THE UNEMPLOYED TO ENTER THE WORKFORCE

Unemployment data show that rates across Indiana have fluctuated somewhat over the past two years. Specifically, rates decreased between February, 2006 and December, 2007, but have increased since the beginning of the year. This trend is noticeable in all counties in the study area. While rates have increased in recent months, unemployment is still lower in southwestern Indiana than it is statewide.

Table 6.41 Unemployment rates, Indiana, 2/06, 2/07, 12/07, 1/08, 2/08				
Month/Year	Unemployment Rate*			
February, 2006	5.7%			
February, 2007	5.3%			
December, 2007	4.5%			
January, 2008	5.1%			
February, 2008	5.3%			
% Diff February 2006-February 2007	-0.4%			
% Diff February 2007-February 2008	0.0%			
% Diff February 2006-February 2008	-0.4%			

*Not seasonally adjusted

Source: Bureau of Labor Statistics

Table 6.42 Unemployment rates, Gibson County and Indiana, 2/06, 2/07, 12/07, 1/08, 2/08				
Month/Year	Gibson County*	Indiana*		
February, 2006	4.9%	5.7%		
February, 2007	5.0%	5.3%		
December, 2007	3.8%	4.5%		
January, 2008	4.2%	5.1%		
February, 2008	4.6%	5.3%		
% Diff February 2006-February 2007	+0.1%	-0.4%		
% Diff February 2007-February 2008	-0.4%	0.0%		
% Diff February 2006-February 2008	-0.3%	-0.4%		

*Not seasonally adjusted

Source: Bureau of Labor Statistics

Table 6.43 Unemployment rates, Posey County and Indiana, 2/06, 2/07, 12/07, 1/08, 2/08				
Month/Year	Posey County*	Indiana*		
February, 2006	5.0%	5.7%		
February, 2007	4.9%	5.3%		
December, 2007	3.6%	4.5%		
January, 2008	4.3%	5.1%		
February, 2008	4.7%	5.3%		
% Diff February 2006-February 2007	-0.1%	-0.4%		
% Diff February 2007-February 2008	-0.2%	0.0%		
% Diff February 2006-February 2008	-0.3%	-0.4%		

*Not seasonally adjusted

Source: Bureau of Labor Statistics

Table 6.44 Unemployment rates, Spencer County and Indiana, 2/06, 2/07, 12/07, 1/08, 2/08				
Month/Year	Spencer County*	Indiana*		
February, 2006	6.3%	5.7%		
February, 2007	5.4%	5.3%		
December, 2007	4.1%	4.5%		
January, 2008	4.9%	5.1%		
February, 2008	5.2%	5.3%		
% Diff February 2006-February 2007	-0.9%	-0.4%		
% Diff February 2007-February 2008	-0.2%	0.0%		
% Diff February 2006-February 2008	-1.1%	-0.4%		

*Not seasonally adjusted Source: Bureau of Labor Statistics

Table 6.45 Unemployment rates, Vanderburgh County and Indiana, 2/06, 2/07, 12/07, 1/08, 2/08			
Month/Year	Vanderburgh County*	Indiana*	
February, 2006	5.3%	5.7%	
February, 2007	5.4%	5.3%	
December, 2007	4.2%	4.5%	
January, 2008	4.7%	5.1%	
February, 2008	4.8%	5.3%	
% Diff February 2006-February 2007	+0.1%	-0.4%	
% Diff February 2007-February 2008	-0.6%	0.0%	
% Diff February 2006-February 2008	-0.5%	-0.4%	

*Not seasonally adjusted Source: Bureau of Labor Statistics

Table 6.46 Unemployment rates, Warrick County and Indiana, 2/06, 2/07, 12/07, 1/08, 2/08			
Month/Year	Warrick County*	Indiana*	
February, 2006	4.8%	5.7%	
February, 2007	4.6%	5.3%	
December, 2007	3.7%	4.5%	
January, 2008	4.2%	5.1%	
February, 2008	4.4%	5.3%	
% Diff February 2006-February 2007	-0.2%	-0.4%	
% Diff February 2007-February 2008	-0.2%	0.0%	
% Diff February 2006-February 2008	-0.4%	-0.4%	

*Not seasonally adjusted Source: Bureau of Labor Statistics

ISSUE 40: CHILDREN PREPARED TO ENTER KINDERGARTEN

As noted in the National Institute for Early Education Research (NIEER) "The State of Preschool 2007," Indiana does not have a state-sponsored pre-kindergarten program nor devotes state funding to pre-k initiatives. Only twelve states in the country lack such state-level programs. All states that surround Indiana have state pre-k programs. In terms of publically funded early childhood education, Indiana serves approximately 14,000 children per year through Head Start. This number has increased slightly across the state and has remained stable in the five-county area over the past three years. As an indicator of the quality of early childhood programs offered to families, data show that approximately 33% of child care centers in Indiana are accredited. This number is higher than the national average of 9%. Approximately 1.3% of child care homes in Indiana are accredited, compared to 0.86% in the U.S.

Indiana has recently implemented Paths to Quality, which is a voluntary rating system for child care facilities. This program, which had already been offered through 4C of Southern Indiana, recognizes programs that choose to go beyond minimum state licensing requirements through a four-level rating framework. At present, there are almost 130 programs in the area that participate in Paths to Quality, with 39 achieving level 3 and 19 achieving level 4, the highest possible rating in the system.

The average earnings of child care workers in Indiana is \$9.05 per hour, and the average for preschool teachers is \$12.45 per hour. To address the issue of kindergarten readiness, the Early Childhood Development Coalition has initiated several programs for children and families that are designed to help them develop crucial sills for school entry. MORE

Table 6.47 Number of Head Start participants, Indiana, 2004-2006		
Year No. of Participants		
2004	13566	
2005	13638	
2006	13918	

Source: U.S. Dept. of HHS, Head Start; Kids Count, Annie E. Casey Foundation

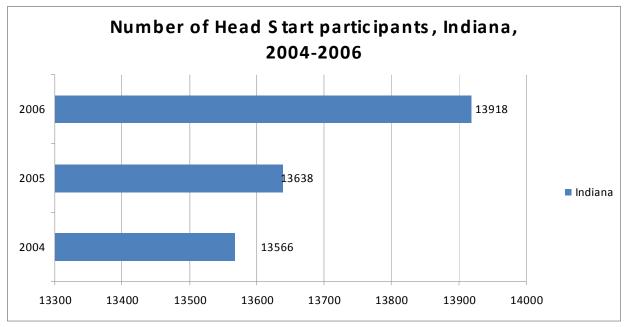


Figure 6.47

Table 6.48 Number of Head Start participants, Gibson County, 2004-2006		
Year No. of Participants		
2004	80	
2005 80		
2006	80	

Source: U.S. Dept. of HHS, Head Start; Kids Count, Annie E. Casey Foundation

Table 6.49 Number of Head Start participants, Posey County, 2004-2006		
Year No. of Participants		
2004	50	
2005 50		
2006 50		

Source: U.S. Dept. of HHS, Head Start; Kids Count, Annie E. Casey Foundation

Table 6.50 Number of Head Start participants, Spencer County, 2004-2006		
Year No. of Participants		
2004	72	
2005 72		
2006 72		

Source: U.S. Dept. of HHS, Head Start; Kids Count, Annie E. Casey Foundation

Table 6.51 Number of Head Start participants, Vanderburgh County, 2004-2006		
Year No. of Participants		
2004	454	
2005 454		
2006	454	

Source: U.S. Dept. of HHS, Head Start; Kids Count, Annie E. Casey Foundation

Table 6.52 Number of Head Start participants, Warrick County, 2004-2006		
Year No. of Participants		
2004	90	
2005 90		
2006 90		

Source: U.S. Dept. of HHS, Head Start; Kids Count, Annie E. Casey Foundation

Table 6.56 Rankings of state pre-k resources per child enrolled, Indiana and surrounding states, 2007			
National Rank	State	State \$ per Child Enrolled	
14	Michigan	\$4167	
19	Kentucky	\$3474	
22	Illinois	\$3322	
24	Wisconsin	\$3178	
31	Missouri	\$2540	
32	Ohio	\$2515	
No Program	Indiana	\$0	

Source: National Institute for Early Education Research (NIEER), The State of Preschool 2007

Table 6.57 State rankings by pre-k access for 4-year-olds, Indiana and surrounding states, 2007				
Access for 4-year-	State	Percent of Children Enrolled in Pre-K (2006/2007)		
olds National Rank		4-year-olds	3-year-olds	Total 3- and 4-year-olds
8	Wisconsin	36.1%	0.8%	18.4%
11	Kentucky	29.3%	10.7%	19.9%
12	Illinois	26.7%	18.5%	22.6%
16	Michigan	16.9%	0.0%	8.5%
32	Missouri	4.3%	2.2%	3.3%
35	Ohio	3.4%	1.3%	2.3%
No Program	Indiana	0.0%	0.0%	0.0%

Source: National Institute for Early Education Research (NIEER), The State of Preschool 2007

Table 6.58 Rankings of all reported resources per child enrolled, Indiana and surrounding states, 2007			
National Rank	State	State \$ per Child Enrolled	
19	Wisconsin	\$4665	
20	Kentucky	\$4637	
21	Michigan	\$4167	
27	Illinois	\$3322	
35	Missouri	\$2540	
36	Ohio	\$2515	
No Program	Indiana	\$0	

Source: National Institute for Early Education Research (NIEER), The State of Preschool 2007

Table 6.59 Data regarding child care for young children, United States and Indiana		
No. of states that require training in early childhood education before	12	
someone can lead a classroom in a child care center		
No. of states that require unannounced inspections for child care	10	
centers		
Percent of child care centers in the U.S. that are accredited	9%	
Percent of child care centers in Indiana that are accredited	32.7%	
Percent of family child care homes in the U.S. that are accredited	0.86%	
Percent of family child care homes in Indiana that are accredited	1.34%	
Average earnings of child care workers	\$9.05 per hour (\$18,820 annually)	
Average earnings of preschool teachers	\$12.45 per hour (\$25,900)	

Source: National Association of Child Care Resource & Referral Agencies; Indiana Association for Child Care Resource & Referral

ISSUE 41: ADULT LITERACY

Comparison of results from the 1992 and 2003 national surveys of adult literacy indicate very similar results in prose and document literacy, but significantly higher performance on quantitative literacy. Improvements in any literacy category were primarily evident in changes in the below basic and intermediate levels. Overall, fewer adults fell into the below basic level in 2003, and more adults fell into the intermediate level. Further, estimates in 2003 indicate that approximately 11 million adults were nonliterate in English, with 7 million unable to answer simple test questions and 4 million who could not take the test because of language barriers.

Table 6.60 Average prose, document, and quantitative literacy scores from National Adult Literacy Survey					
(1992) and N	(1992) and National Assessment of Adult Literacy (2003), United States				
Literacy Category 1992 2003					
Prose 276 275					
Document 271 271					
Quantitative 275		283*			

^{*}Statistically significantly different from 1992

Source: U.S. Department of Education, Institute of Education Sciences, National Center for Education Statistics, 1992 National Adult Literacy Survey and 2003 National Assessment of Adult Literacy

Table 6.61 Percentage of adults in each prose, document, and quantitative literacy level, United States, 1992				
		and 2003		
Literacy Scale and Year	Below Basic	Basic	Intermediate	Proficient
Prose				
1992	14%	28%	43%	15%
2003	14%	29%	44%	13%*
Document				
1992	14%	22%	49%	15%
2003	12%*	22%	53%*	13%*
Quantitative				
1992	26%	32%	30%	13%
2003	22%*	33%	33%*	13%

^{*}Statistically significantly different from 1992

Source: U.S. Department of Education, Institute of Education Sciences, National Center for Education Statistics, 1992 National Adult Literacy Survey and 2003 National Assessment of Adult Literacy

ISSUE 42: PREPARATION OF YOUNG ADULTS TO ENTER THE WORKFORCE

Data from the U.S. Census and the Indiana Prevention Resource Center indicate that in 2006, approximately 15-16% of individuals in the U.S. aged 18 and over had not obtained a high school diploma. Depending on the source, the rate in Indiana is equivalent or slightly higher than the national rate. In terms of southwestern Indiana, Gibson and Spencer appear to have a higher percentage of individuals who have not obtained a diploma as compared to state and national data. The rates for Vanderburgh and Posey are similar to Indiana and the U.S., and the rate for Warrick is lower than the state and national averages.

Based on data from the Indiana Department of Education, the percentage of graduates pursuing college education increased in Indiana and most of the school corporations in the five-county study area. Half of the corporations had lower rates than the state average in 2006/2007 and half had higher rates.

Overall, more students in Indiana were enrolled in vocational education in 2006/2007 than in 2002/2003. This upward trend was apparent in all but two of the ten area school corporations. Further, seven of ten corporations had a higher rate of vocational education attendance in 2006/2007 than the state, with South Spencer and East Gibson having the highest percentages. In terms of continuation of vocational/tech school education after high school, there was a slight increase between 2003 and 2006 in the percentage of Indiana students who intended to pursue this educational avenue. In 2006, almost 8% of students planned to pursue vocational/tech school. Over the four-year period, all counties except Vanderburgh also experienced an increase in this rate.

An assessment of ISTEP English/language arts scores for area school corporations shows that six of ten experienced an increase in proficiency between 2003/2004 and 2007/2008. The state average also shown an increase. Further, nine of the ten school districts had a higher proficiency rate than the state average of 72.0% in 2007/2008.

In terms of math ISTEP, seven of ten corporations increased proficiency scores between 2003/2004 and 2007/2008. The state average also increased during this period. Comparatively, nine of ten corporations had higher rates than the state average of 74.6% in 2007/2008.

Overall, seven of ten corporations demonstrated an increase between 2003/2004 and 2007/2008 in the percentage of students who passed both ISTEP English and math. The state average increased by 4% during this time period. In 2007/2008, eight of ten corporations surpassed the state average of 64.7%.

While promising gains overall were made by school systems, 10th grade ISTEP proficiency scores did not show the same positive trend in several schools. Nine of ten corporations experienced a decrease in 10th grade ISTEP math scores between 2003/2004 and 2007/2008. The state average also showed a decrease during this time period. Although many schools in southwestern Indiana had decreases, seven of ten were still above the state average of 67.2% in 2007/2008.

In terms of 10th grade English/language arts scores, six of ten school systems showed a decrease in proficiency from 2003/2004 to 2007/2008. The state average also decreased during this time. In 2007/2008, six of ten area school corporations had a higher score than the state average of 68.3%.

The importance of completing school and achieving proficiency in ISTEP content areas is highlighted by a recent statistic quoted by the Indiana Department of Workforce Development. According to the IDWD, by 2014, there will be an additional 222,410 high-wage, high-demand jobs that require at least a postsecondary degree. As mentioned, there are a number of adults in Indiana who have not obtained at least a high school diploma. The following numbers identify how great the need is in providing adult education and training to individuals in order to make them viable resources in the state's workforce. As of 2006:

- 524,370 adults did not have a high school diploma
- 651.609 adults did not have a college education and were earning less than a living wage
- 63,450 adults did not have a college education and spoke little or no English

Table 6.62 Percei	Table 6.62 Percent of graduates from area school corporations pursuing college education, 2002/2003 –					
			2006/2007			
School	2002/2003	2003/2004	2004/2005	2005/2006	2006/2007	% Change
Corporation						2002/2003 –
						2006/2007
Gibson County						
East Gibson	74.1%	76.4%	77.2%	74.4%	79.7%	+7.6%
North Gibson	63.6%	77.7%	75.8%	70.5%	68.8%	+8.2%
South Gibson	83.9%	82.9%	86.1%	89.1%	86.4%	+3.0%
Posey County						
Mount Vernon	79.6%	68.0%	66.3%	60.6%	75.0%	-5.8%
New Harmony	76.5%	80.0%	83.3%	84.6%	83.3%	+8.9%
North Posey	77.0%	60.8%	80.5%	78.5%	74.4%	-3.4%
Spencer County						
North Spencer	67.9%	64.2%	75.9%	68.4%	69.2%	+1.9%
South Spencer	79.5%	76.5%	74.1%	85.6%	78.7%	-1.0%
Vanderburgh						
County						
Evansville-	76.2%	71.5%	76.7%	79.6%	78.5%	+3.0%
Vanderburgh						
Warrick County						
Warrick	80.1%	79.1%	75.2%	77.4%	72.2%	-9.9%
State Average	71.1%	71.9%	74.2%	74.9%	75.2%	+5.8%

Source: Indiana Department of Education

Table 6.63 Perd	Table 6.63 Percent of graduates from area school corporations in vocational education, 2002/2003 – 2006/2007					
School Corporation	2002/2003	2003/2004	2004/2005	2005/2006	2006/2007	% Change 2002/2003 – 2006/2007
Gibson County						
East Gibson	3.4%	5.6%	6.6%	6.9%	6.4%	+88.2%
North Gibson	3.9%	3.8%	3.5%	3.4%	4.4%	+12.8%
South Gibson	2.0%	2.5%	2.8%	2.7%	2.6%	+30.0%
Posey County						
Mount Vernon	3.4%	2.9%	3.3%	3.4%	4.6%	+35.3%
New Harmony	1.0%	1.4%	0.9%	0.7%	0.8%	-20.0%
North Posey	3.2%	4.9%	4.7%	5.0%	5.4%	+68.8%
Spencer County						
North Spencer	4.6%	4.5%	5.5%	5.3%	4.6%	0.00%
South Spencer	5.5%	5.6%	7.7%	7.2%	6.9%	+25.5%
Vanderburgh County						
Evansville- Vanderburgh	4.4%	4.5%	4.3%	4.5%	5.0%	+13.6%
Warrick County						
Warrick	2.4%	2.3%	2.7%	2.6%	2.6%	+8.3%
State Average	3.7%	3.8%	4.1%	4.3%	4.3%	+16.2%

Table 6.64 Exper	nditures per pur	oil (all funds) for	area school corpo	orations, 2002/200	03 – 2006/2007
School Corporation	2002/2003	2003/2004	2004/2005	2005/2006	2006/2007
Gibson County					
East Gibson	\$8420	\$8658	\$10161	\$9615	\$9454
North Gibson	\$8281	\$8394	\$8611	\$9054	\$9008
South Gibson	\$7739	\$7849	\$10017	\$8929	\$8339
Posey County					
Mount Vernon	\$10185	\$14516	\$11114	\$12191	\$12681
New Harmony	\$9634	\$10767	\$10244	\$12596	\$11980
North Posey	\$7714	\$8058	\$10539	\$8876	\$9275
Spencer County					
North Spencer	\$7479	\$8983	\$9108	\$9299	\$9154
South Spencer	\$8763	\$9130	\$13808	\$10302	\$10030
Vanderburgh County					
Evansville- Vanderburgh	\$8907	\$9054	\$10053	\$11231	\$10400
Warrick County					
Warrick	\$7771	\$9227	\$8266	\$8428	\$8621

Source: Indiana Department of Education

Table 6.65 Percent of high school graduates intending vocational/tech school, Indiana, 2003-2006		
Year	Percent	
2003	7.5%	
2004	8.0%	
2005	7.5%	
2006	7.8%	
% Change 2003-2006	+4.0%	

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation (Analysis of data by the Indiana Business Research Center)

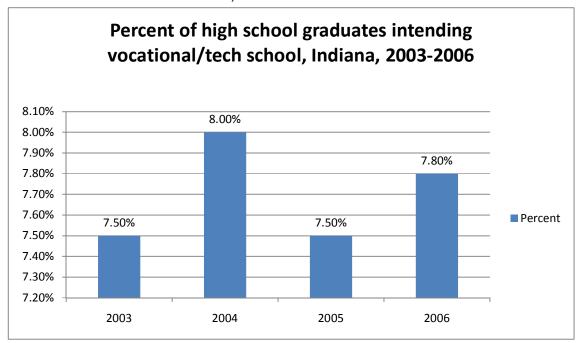


Figure 6.65

Table 6.66 Percent of high school graduates intending vocational/tech school, Gibson County and Indiana, 2003-2006			
Year	Gibson County	Indiana	
2003	1.2%	7.5%	
2004	6.6%	8.0%	
2005	7.4%	7.5%	
2006	6.4%	7.8%	
% Change 2003-2006	+433%	+4.0%	

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation (Analysis of data by the Indiana Business Research Center)

Table 6.67 Percent of high school graduates intending vocational/tech school, Posey County and Indiana, 2003-2006			
Year	Posey County	Indiana	
2003	3.4%	7.5%	
2004	12.8%	8.0%	
2005	5.9%	7.5%	
2006	14.2%	7.8%	
% Change 2003-2006	+318%	+4.0%	

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation (Analysis of data by the Indiana Business Research Center)

Table 6.68 Percent of high school	Table 6.68 Percent of high school graduates intending vocational/tech school, Spencer County and Indiana, 2003-2006			
Year	Spencer County	Indiana		
2003	8.0%	7.5%		
2004	10.3%	8.0%		
2005	9.6%	7.5%		
2006	9.4%	7.8%		
% Change 2003-2006	+17.5%	+4.0%		

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation (Analysis of data by the Indiana Business Research Center)

Table 6.69 Percent of high school graduates intending vocational/tech school, Vanderburgh County and Indiana, 2003-2006			
Year	Vanderburgh County	Indiana	
2003	6.4%	7.5%	
2004	10.3%	8.0%	
2005	7.6%	7.5%	
2006	5.5%	7.8%	
% Change 2003-2006	-14.1%	+4.0%	

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation (Analysis of data by the Indiana Business Research Center)

Table 6.70 Percent of high school graduates intending vocational/tech school, Warrick County and Indiana, 2003-2006			
Year	Warrick County	Indiana	
2003	2.5	7.5%	
2004	9.3	8.0%	
2005	8.2	7.5%	
2006	7.4	7.8%	
% Change 2003-2006	+196%	+4.0%	

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation (Analysis of data by the Indiana Business Research Center)

Table 6.71 Educational attainment, United States and Indiana, 2006 est. (AGS, 2007)						
Education Level	Indiana	U.S.				
Less than 9 th grade	5.0%	5.8%				
9 th to 12 th grade, no diploma	9.7%	8.9%				
Total, less than 9 th or less than high school diploma	14.6%	14.7%				
High school graduate	36.5%	29.8%				
Some college, no degree	19.7%	19.9%				
Associate degree	6.7%	7.4%				
Bachelor's degree	14.2%	17.9%				
Graduate or professional degree	8.2%	10.3%				

Source: Indiana Prevention Resource Center

Table 6.72 Educational attainment, United States, Indiana, and Gibson County, 2006 est. (AGS, 2007)							
Education Level	Gibson County	Indiana	U.S.				
Less than 9 th grade	6.5%	5.0%	5.8%				
9 th to 12 th grade, no diploma	11.0%	9.7%	8.9%				
Total, less than 9 th or less than high school diploma	17.5%	14.6%	14.7%				
High school graduate	39.7%	36.5%	29.8%				
Some college, no degree	19.3%	19.7%	19.9%				
Associate degree	9.2%	6.7%	7.4%				
Bachelor's degree	9.1%	14.2%	17.9%				
Graduate or professional degree	5.2%	8.2%	10.3%				

Source: Indiana Prevention Resource Center

Table 6.73 Educational attainment, United States, Indiana, and Posey County, 2006 est. (AGS, 2007)							
Education Level	Posey County	Indiana	U.S.				
Less than 9 th grade	5.9%	5.0%	5.8%				
9 th to 12 th grade, no diploma	8.4%	9.7%	8.9%				
Total, less than 9 th or less than high school diploma	14.3%	14.6%	14.7%				
High school graduate	40.3%	36.5%	29.8%				
Some college, no degree	21.8%	19.7%	19.9%				
Associate degree	6.8%	6.7%	7.4%				
Bachelor's degree	10.5%	14.2%	17.9%				
Graduate or professional degree	6.3%	8.2%	10.3%				

Source: Indiana Prevention Resource Center

Table 6.74 Educational attainment, United States, Indiana, and Spencer County, 2006 est. (AGS, 2007)							
Education Level	Spencer County	Indiana	U.S.				
Less than 9 th grade	5.9%	5.0%	5.8%				
9 th to 12 th grade, no diploma	11.2%	9.7%	8.9%				
Total, less than 9 th or less than high school diploma	17.1%	14.6%	14.7%				
High school graduate	41.5%	36.5%	29.8%				
Some college, no degree	18.9%	19.7%	19.9%				
Associate degree	7.5%	6.7%	7.4%				
Bachelor's degree	9.0%	14.2%	17.9%				
Graduate or professional degree	6.1%	8.2%	10.3%				

Source: Indiana Prevention Resource Center

Table 6.75 Educational attainment, United States, Indiana, and Vanderburgh County, 2006 est. (AGS, 2007)						
Education Level	Vanderburgh County	Indiana	U.S.			
Less than 9 th grade	5.7%	5.0%	5.8%			
9 th to 12 th grade, no diploma	9.5%	9.7%	8.9%			
Total, less than 9 th or less than high school diploma	15.3%	14.6%	14.7%			
High school graduate	34.2%	36.5%	29.8%			
Some college, no degree	21.8%	19.7%	19.9%			
Associate degree	6.8%	6.7%	7.4%			
Bachelor's degree	14.2%	14.2%	17.9%			
Graduate or professional degree	7.7%	8.2%	10.3%			

Source: Indiana Prevention Resource Center

Table 6.76 Educational attainment, United States, Indiana, and Warrick County, 2006 est. (AGS, 2007)						
Education Level	Warrick County	Indiana	U.S.			
Less than 9 th grade	3.9%	5.0%	5.8%			
9 th to 12 th grade, no diploma	8.2%	9.7%	8.9%			
Total, less than 9 th or less than high school diploma	12.1%	14.6%	14.7%			
High school graduate	31.9%	36.5%	29.8%			
Some college, no degree	22.4%	19.7%	19.9%			
Associate degree	9.1%	6.7%	7.4%			
Bachelor's degree	15.9%	14.2%	17.9%			
Graduate or professional degree	8.7%	8.2%	10.3%			

Source: Indiana Prevention Resource Center

Table 6.77 Percent passing ISTEP English/language arts assessment in area school corporations, 2003/2004 – 2007/2008						
School Corporation	2003/2004	2004/2005	2005/2006	2006/2007	2007/2008	% Change 2003/2004 – 2007/2008
Gibson County						
East Gibson	73.8%	71.5%	72.4%	71.3%	74.0%	+2.7%
North Gibson	66.6%	69.8%	72.4%	71.1%	72.6%	+9.0%
South Gibson	82.9%	77.0%	78.8%	80.5%	80.8%	-2.5%
Posey County						
Mount Vernon	75.8%	76.2%	77.3%	75.4%	75.2%	-0.8%
New Harmony	72.6%	77.8%	75.4%	78.2%	78.2%	+7.7%
North Posey	80.4%	80.7%	78.4%	80.1%	79.8%	-0.7%
Spencer County						
North Spencer	78.6%	82.8%	82.4%	84.5%	84.7%	+7.8%
South Spencer	74.9%	71.8%	74.0%	74.0%	75.5%	+0.8%
Vanderburgh County						
Evansville-Vanderburgh	66.3%	64.8%	65.7%	63.9%	65.2%	-1.7%
Warrick County						
Warrick	75.4%	78.9%	78.6%	78.9%	80.1%	+6.2%
State Average	70.6%	71.2%	71.7%	71.4%	72.0%	+2.0%

Table 6.78 Percent passing ISTEP math assessment in area school corporations, 2003/2004 – 2007/2008						
School Corporation	2003/2004	2004/2005	2005/2006	2006/2007	2007/2008	% Change
						2003/2004 –
						2007/2008
Gibson County						
East Gibson	73.2%	68.9%	75.5%	72.1%	77.2%	+5.5%
North Gibson	60.9%	69.0%	74.7%	74.0%	75.0%	+23.2%
South Gibson	81.9%	77.1%	79.3%	79.9%	81.1%	-1.0%
Posey County						
Mount Vernon	76.8%	78.0%	82.1%	80.1%	80.8%	+5.2%
New Harmony	67.7%	67.4%	69.3%	78.2%	77.3%	+14.2%
North Posey	84.2%	82.4%	82.9%	81.8%	82.6%	-1.9%
Spencer County						
North Spencer	83.8%	85.1%	85.8%	89.5%	88.7%	+5.8%
South Spencer	80.0%	75.6%	78.5%	77.1%	78.6%	-1.8%
Vanderburgh County						
Evansville-Vanderburgh	64.3%	62.8%	64.9%	62.8%	65.1%	+1.2%
Warrick County						
Warrick	76.9%	79.8%	81.9%	81.6%	82.4%	+7.2%
State	71.4%	72.2%	74.0%	73.7%	74.6%	+4.5%

Source: Indiana Department of Education

Table 6.79 Percent passing both ISTEP English and math in area school corporations, 2003/2004 – 2007/2008						
School Corporation	2003/2004	2004/2005	2005/2006	2006/2007	2007/2008	% Change
						2003/2004 -
						2007/2008
Gibson County						
East Gibson	65.5%	60.6%	65.4%	61.9%	66.0%	+0.8%
North Gibson	52.2%	59.4%	64.0%	62.5%	64.1%	+22.8%
South Gibson	75.4%	68.0%	70.3%	71.7%	72.3%	-4.1%
Posey County						
Mount Vernon	69.3%	69.1%	71.5%	69.6%	69.8%	+0.7%
New Harmony	58.1%	62.2%	64.0%	67.2%	68.9%	+18.6%
North Posey	76.0%	74.3%	73.0%	74.1%	73.6%	-3.2%
Spencer County						
North Spencer	73.8%	77.7%	77.4%	81.0%	80.4%	+8.9%
South Spencer	68.6%	65.4%	68.1%	66.7%	69.2%	+0.9%
Vanderburgh County						
Evansville-Vanderburgh	56.6%	54.1%	56.3%	53.7%	56.2%	-0.7%
Warrick County						
Warrick	67.5%	71.8%	72.3%	72.1%	73.4%	+8.7%
State	62.2%	62.9%	64.2%	63.8%	64.7%	+4.0%

Table 6.80 Percent of 10 th students passing ISTEP math in area school corporations, 2003/2004 – 2007/2008						
School Corporation	2003/2004	2004/2005	2005/2006	2006/2007	2007/2008	% Change
						2003/2004 -
						2007/2008
Gibson County						
East Gibson	64.9%	55.4%	69.8%	69.7%	60.7%	-6.5%
North Gibson	67.8%	55.8%	54.2%	65.5%	55.1%	-18.7%
South Gibson	85.0%	72.9%	74.6%	72.1%	79.5%	-6.5%
Posey County						
Mount Vernon	75.2%	78.9%	72.4%	75.0%	71.4%	-5.1%
New Harmony	75.0%	53.8%	75.0%	71.4%	72.7%	-3.1%
North Posey	79.1%	80.5%	71.6%	74.1%	72.1%	-8.8%
Spencer County						
North Spencer	84.8%	84.3%	75.5%	86.4%	89.0%	+5.0%
South Spencer	84.7%	70.2%	73.8%	68.2%	77.0%	-9.1%
Vanderburgh County						
Evansville-Vanderburgh	63.1%	53.4%	56.5%	53.0%	57.2%	-9.4%
Warrick County						
Warrick	73.4%	75.2%	73.7%	71.8%	72.7%	-1.0%
State	68.3%	65.1%	65.5%	65.9%	67.2%	-1.6%

Source: Indiana Department of Education

Table 6.81 Percent of 10 th students passing ISTEP English/language arts in area school corporations, 2003/2004						
	- 2007/2008					
School Corporation	2003/2004	2004/2005	2005/2006	2006/2007	2007/2008	% Change
						2003/2004 – 2007/2008
Gibson County		•		•		
East Gibson	66.0%	56.6%	69.8%	71.1%	59.5%	-9.8%
North Gibson	71.1%	71.0%	71.6%	72.7%	63.5%	-10.7%
South Gibson	82.4%	73.6%	76.9%	77.0%	81.8%	-0.7%
Posey County						
Mount Vernon	73.5%	70.9%	74.7%	72.8%	66.5%	-9.5%
New Harmony	83.3%	61.5%	65.0%	85.7%	90.9%	+9.1%
North Posey	77.7%	84.4%	70.9%	71.9%	80.1%	+3.1%
Spencer County						
North Spencer	73.0%	78.7%	78.1%	79.9%	87.2%	+19.5%
South Spencer	82.4%	64.4%	73.1%	70.0%	69.0%	-16.3%
Vanderburgh County						
Evansville-Vanderburgh	65.1%	61.3%	65.7%	58.9%	60.6%	-6.9%
Warrick County		•	·	·	·	
Warrick	74.9%	78.8%	74.0%	75.2%	78.4%	+4.7%
State	70.4%	68.9%	69.2%	67.5%	68.3%	-3.0%

Domain VII: Violence and Crime

The following section presents secondary data sources applicable to Domain VII: Violence and Crime. As shown in Table 7.1, the issues in this domain were more likely to be rated as strengths of the community instead of priority needs. In fact, over 50% of respondents placed all but one issue, gang activity, in the high/high quadrant, which indicates that issues are important and being addressed well. Two issues, school violence and violent crime, stood out as important areas that the community believes are being addressed well. These issues also were among the top strength areas when analyzing all issues from the needs assessment survey. Secondary data for this domain are presented in Tables 7.2 to 7.28. Note that data are presented in the order in which issues within the domain were listed on the needs assessment survey.

Table 7.1 All Counties: Violence and Crime Domain Note: Issues are sorted by the HL Rank (High in importance and Low in how the issue is being addressed) Do not Importance-Being Addressed **Overall Mean Ratings** know how Response Patterns well issue Overall How well issue is Rank based is being HL ΗН LH LL **Importance** being addressed **Item from Needs Assessment** addressed on Response N Rank Rank Rank Mean Rank Mean **Pattern** % % % % N Ν Ν % 35 Youth violence and crime 1050 40.10 51.10 5.80 3.00 3.42 1517 6 2.50 1075 458 29.88 39 Domestic violence 1100 2 37.20 3 56.70 4.60 1.50 3.47 1532 3 2.57 1120 405 26.56 40 Gang activity 910 3 35.50 6 47.10 8.60 8.80 3.28 1421 4 2.53 937 591 38.68 6 41 Adult sexual victimization 864 4 35.30 4 54.10 5.80 4.90 5 3.37 1380 5 2.56 894 612 40.64 51 Violent crime 1142 5 28.90 2 63.90 4.00 3.20 2 3.44 1551 2 2.68 1164 365 23.87 835 6 25.60 66.50 4.10 3.70 3.43 1086 2.78 854 239 21.87 54 School violence 1 3 1

ISSUE 43: SCHOOL VIOLENCE

In 2006/2007, there were 16.2 suspension or expulsion incidents per 100 students in the state of Indiana. Among the school corporations in the study area, the incident rate varied considerably. Evansville Vanderburgh School Corporation had the highest rate at 22.7, ranking 25th highest in the state, and North Spencer had the lowest rate at 3.3, which ranked 247th. Between 2003 and 2006, the number of suspensions in each county decreased. Further, out-of-school suspensions decreased in every county except Gibson. Data regarding expulsions show that there was a decrease in incidents between 2003 and 2006 for Vanderburgh and Posey counties, but an increase for Gibson, Spencer, and Warrick. Note that suspensions/expulsions are just one indicator of school violence. Documentation of other types of incidents may shed light on the issue. Also, suspensions/expulsions are not only due to violence, but may be a result of other student offenses. Therefore, these rates should not be used as the only measure of school violence.

While violence involving students alone is the focus of many data sources, other sources have attempted to measure the degree of school violence that affects teachers. According to the U.S. Department of Justice, on average, in each year from 1995 to 1999, approximately 3 out of every 1000 teachers were victims of serious violent crime at school. Further, in the 1993/1994 school year, 12 percent of all teachers were threatened with injury by a student, and 4 percent were physically attacked by a student. Further investigation should be conducted to uncover recent incidents of school violence involving teachers.

Table 7.2 Suspensions or expulsions (incidents per 100 students), area school corporations, 2006/2007					
School Corporation	Incidents Per 100 Students	State Rank*			
Gibson County					
East Gibson	14.5	61			
North Gibson	13.2	75			
South Gibson	3.8	237			
Posey County					
Mount Vernon	11.9	94			
New Harmony	5.3	218			
North Posey	10.0	120			
Spencer County					
North Spencer	3.3	247			
South Spencer	7.4	172			
Vanderburgh County					
Evansville-Vanderburgh	22.7	25			
Warrick County					
Warrick	7.0	181			
State	16.2				

^{*}Higher rank indicates higher incidents per 100 students

Source: Indiana Department of Education

Table 7.3 No. of expulsions, suspensions, and out-of-school suspensions, Gibson County, 2003-2006					
Year	Expulsions	Suspensions	Out-of-School Suspensions	Enrollment	
2003	24	644	310	4953	
2004	28	604	380	4979	
2005	23	520	394	5016	
2006	30	633	349	5060	
% Change 2003-2006	+25.0%	-1.7%	+12.6%	+2.2%	

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

Table 7.4 No. of expulsions, suspensions, and out-of-school suspensions, Posey County, 2003-2006					
Year	Expulsions	Expulsions Suspensions Out-of-School Suspensions Enrol			
2003	17	945	563	4568	
2004	9	632	447	4397	
2005	15	621	410	4340	
2006	14	767	421	4252	
% Change 2003-2006	-17.6%	-18.8%	-25.2%	-6.9%	

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

Table 7.5 No. of expulsions, suspensions, and out-of-school suspensions, Spencer County, 2003-2006					
Year	Expulsions	Suspensions	Out-of-School Suspensions	Enrollment	
2003	8	501	222	3875	
2004	4	288	146	3756	
2005	17	403	165	3671	
2006	10	419	148	3637	
% Change 2003-2006	+25.0%	-16.4%	-33.3%	-6.1%	

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

Table 7.6 No. of expulsions, suspensions, and out-of-school suspensions, Vanderburgh County, 2003-2006					
Year	Expulsions	Suspensions	Out-of-School Suspensions	Enrollment	
2003	155	6157	4674	22902	
2004	145	5197	5197	22480	
2005	76	4681	4681	22444	
2006	105	4654	4616	22440	
% Change 2003-2006	-32.3%	-24.4%	-1.2%	-2.0%	

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

Table 7.7 No. of expulsions, suspensions, and out-of-school suspensions, Warrick County, 2003-2006						
Year	Expulsions	Expulsions Suspensions Out-of-School Suspensions Enrollm				
2003	54	791	777	9144		
2004	42	622	597	9269		
2005	43	713	584	9268		
2006	58	684	522	9354		
% Change 2003-2006	+7.4%	-13.5%	-32.8%	+2.3%		

Source: Indiana Department of Education; Kids Count, Annie E. Casey Foundation

ISSUE 44: DOMESTIC VIOLENCE

Table 7.8 Indiana Domestic Violence Facts

- In 2003 (July 2003 to June 2004), there were 60 domestic violence related deaths.
- During that time, there were 93,618 calls to Indiana's crisis hotline.
- In 2003, Indiana provided emergency shelter to 4414 adults and 4365 children.
- Of those adult victims in domestic violence shelters, 30% were the spouse of the perpetrator and 5% were the separated spouse of the perpetrator. Thirty-two percent were in a dating relationship with the perpetrator.
- Thirty-four percent of the adult victims in domestic violence shelters were between the ages of 26-35. Twenty-seven percent were between the ages of 36-45, and 26% were between the ages of 18-25.
- In 2003, domestic violence shelters were unable to house 1,471 domestic violence victims.
- In addition to domestic violence shelters, member programs of the Indiana Coalition Against Domestic Violence provide nonresidential services to survivors and their children. From July 2003 to June 2004, 40,649 domestic violence victims were served in nonresidential programs which included 32,982 adults and 7,667 children.

Source: Indiana Coalition Against Domestic Violence

ISSUE 45: VIOLENT CRIME

A review of violent crime statistics shows a significant difference in all violent crimes per 100,000 population in the United States when comparing 1990 to the years after 2001. In 1990, the U.S. violent crime rate was 729.6, compared to 473.5 in 2006. While the rate in recent years has been lower than the 1990s, data indicate that violent crime has slightly increased after experiencing a three-year decline between 2002 and 2004. In Indiana, the violent crime rate declined each year between 2002 and 2006, where it was 314.6. Violent crime rates reported by the Evansville Police Department have fluctuated over the past several years and have shown a three-year climb between 2004 and 2006. The 2006 rate of 462.8 is higher than the state of Indiana and near the U.S. rate. Comparatively, violent crime reported by the Vanderburgh County Sheriff's Department shows a much lower rate in 2006 than the U.S., Indiana, and the city of Evansville. The tables below provide data related to recent crime indices, which may be analyzed for various comparisons. It should be noted that except for murder and non-negligent manslaughter, the city of Evansville is higher than Indiana in every category and higher than the national rate in forcible rape and robbery. Vanderburgh County rates are considerably lower than the national, state, or city of Evansville indices.

Table 7.9 Violent crime rates per 100,000 population, Indiana, Evansville PD, Vanderburgh Co. Sheriff Department (1990, 2002-2006)						
Crime/Location	1990	2002	2003	2004	2005	2006
Violent crime	1000	2002	2000	2001	2000	2000
United States	729.6	494.4	475.8	463.2	469.2	473.5
Indiana	473.9	357.3	352.3	325.9	323.7	314.8
Evansville PD	734.1	537.5	1162.9	387.6	405.8	462.8
Vand. Sheriff Dept.	38.7	311.8	362.4	80.9	104.8	85.0
Murder & Non-negligent manslaughter						
United States	9.4	5.6	5.7	5.5	5.6	5.7
Indiana	6.2	5.9	5.5	5.1	5.7	5.8
Evansville PD	4.8	1.6	10.0	0.0	6.8	5.1
Vand. Sheriff Dept.	2.6	0.0	0.0	1.8	1.8	0.0
Forcible rape						
United States	41.1	33.1	32.3	32.4	31.7	30.9
Indiana	37.9	29.9	27.7	29.0	29.6	29.1
Evansville PD	39.6	43.0	33.4	28.6	50.1	52.3
Vand. Sheriff Dept.	5.2	11.8	11.3	9.2	8.9	8.7
Robbery						
United States	256.3	146.1	142.5	136.7	140.7	149.4
Indiana	101.3	107.4	103.2	102.4	108.6	114.7
Evansville PD	125.1	108.8	121.0	144.9	149.4	158.5
Vand. Sheriff Dept.	0.00	13.7	13.2	9.2	8.9	13.9
Aggravated assault						
United States	422.9	309.5	295.4	288.6	291.1	287.5
Indiana	328.4	214.1	215.9	189.5	179.9	165.2
Evansville PD	564.7	384.1	998.4	214.0	199.5	246.8
Vand. Sheriff Dept.	30.9	286.3	337.9	60.7	85.2	62.4

Source: FBI, Uniform Crime Reports

Table 7.10 Violent crime rates per 100,000 population, Indiana and Mount Vernon, 2003-2005				
Crime/Location	2003	2004	2005	
Murder				
Indiana	5.5	5.1	5.7	
Mount Vernon	0.0	0.0	0.0	
Rape				
Indiana	103.2	102.4	108.6	
Mount Vernon	13.5	13.6	0.0	
Robbery				
Indiana	103.2	102.4	108.6	
Mount Vernon	53.8	13.6	0.0	
Aggravated Assault				
Indiana	215.9	189.5	179.9	
Mount Vernon	13.5	0.0	0.0	

Source: FBI, Uniform Crime Reports; State of the Cities Data System

Table 7.11 Violent crime	Table 7.11 Violent crime rates per 100,000 population, Indiana and Princeton, 2003-2005				
Crime/Location	2003	2004	2005		
Murder					
Indiana	5.5	5.1	5.7		
Princeton	3.5	3.5	0.0		
Rape					
Indiana	103.2	102.4	108.6		
Princeton	27.0	33.0	57.4		
Robbery					
Indiana	103.2	102.4	108.6		
Princeton	84.2	90.6	23.0		
Aggravated Assault					
Indiana	215.9	189.5	179.9		
Princeton	194.5	215.7	34.5		

Source: FBI, Uniform Crime Reports; State of the Cities Data System

Table 7.12 Violent crime rates per 100,000 population, Indiana and Boonville, 2003-2005				
Crime/Location	2003	2004	2005	
Murder				
Indiana	5.5	5.1	5.7	
Boonville	0.0	0.0	0.0	
Rape				
Indiana	103.2	102.4	108.6	
Boonville	0.0	0.0	0.0	
Robbery				
Indiana	103.2	102.4	108.6	
Boonville	0.0	0.0	0.0	
Aggravated Assault				
Indiana	215.9	189.5	179.9	
Boonville	14.5	0.0	0.0	

Source: FBI, Uniform Crime Reports; State of the Cities Data System

Table 7.13 Indiana Department of Correction-facility population on the first day of each month (excludes county jail "back-ups" & contracted beds)					
Month/Year	Adult Male	Adult Female	Juvenile Male	Juvenile Female	Total
2007					
January	22072	1974	845	151	25042
February	22091	1981	831	162	25065
March	22165	1997	859	164	25185
April	22352	2035	879	171	25437
May	22240	2020	897	181	25338
June	22332	2005	917	183	25437
July	22385	2006	911	183	25485
August	22399	2021	866	182	25468
September	23123	2016	846	172	26157
October	23105	2077	846	178	26206
November	23172	2084	854	185	26295
December	23059	2056	846	183	26144
2008					
January	23006	2054	834	180	26074

Source: Indiana Department of Correction, Planning Division Facility Body Count Report & Juvenile Daily Count Report

Category Number Number of juvenile facilities 7 Total population 1014 Average per diem (FY07) \$148.69 Offenders by offense level I (Violent) III (Serious) 7.6% III (Less Serious) 57.0% IV (Minor) 10.8% Sex Male 82.3% Female 17.7% Race/Ethnicity White 58.5% Black 31.7% Hispanic 6.6% Average age at intake 16.0 Average age at intake 16.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) 1 (Violent) 15.3 III (Less Serious) 10.2 11.4 III (Less Serious) 10.2 11.4 Person 34.4% 9 Person 34.4% 9 Person 34.4% 9 Public Administration 8.7% 6.1% Controlled Substances 6.1% 6.1% Public Order	Table 7.14 Indiana Department of Correct Fact Card-Juve	eniles, January 1, 2008
Total population		
Average per diem (FY07) \$148.69	Number of juvenile facilities	-
Offenders by offense level I (Violent) 24.5% III (Serious) 7.6% IIII (Less Serious) 57.0% IV (Minor) 10.8% Sex Male 82.3% Female 17.7% Race/Ethnicity White 58.5% Black 31.7% Hispanic 6.6% Other 3.2% Average age at intake 16.0 Average current age 16.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) I (Violent) 15.3 III (Serious) 10.2 III (Less Serious) 11.4 IV (Minor) 8.9 17.9 Type of offense Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% 6.1% Public Order 6.8% 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%		
Offenders by offense level I (Violent) 24.5% II (Serious) 7.6% III (Less Serious) 57.0% IV (Minor) 10.8% Sex Male 82.3% Female 17.7% Race/Ethnicity White 58.5% Black 31.7% Hispanic 6.6% Other 3.2% Average age at intake 16.0 Average current age 16.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) I (Violent) 15.3 II (Serious) 10.2 11.4 IV (Minor) 8.9 17.7% Type of offense Property 38.6% Person 34.4% 94.1% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Average per diem (FY07)	\$148.69
II (Serious) 7.6% III (Less Serious) 57.0% IV (Minor) 10.8% Sex	Offenders by offense level	
III (Less Serious) 57.0% IV (Minor) 10.8% Sex	I (Violent)	
IV (Minor) 10.8%	II (Serious)	7.6%
Male 82.3% Female 17.7% Race/Ethnicity White 58.5% Black 31.7% Hispanic 6.6% Other 3.2% Average age at intake 16.0 Average current age 16.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) I (Violent) 15.3 II (Serious) 10.2 III (Less Serious) 11.4 IV (Minor) 8.9 Type of offense Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	III (Less Serious)	57.0%
Male R2.3% Female 17.7% Race/Ethnicity White 58.5% Black 31.7% Hispanic 6.6% Other 3.2% Average age at intake 16.0 Average current age 16.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) I (Violent) 15.3 II (Serious) 10.2 III (Less Serious) 11.4 IV (Minor) 8.9 Type of offense Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1% Exercises 1.1% Exercises Exercises Exercises Exercises 1.1% Exercises IV (Minor)	10.8%	
Race/Ethnicity White 58.5%	Sex	
Race/Ethnicity White 58.5% Black 31.7% Hispanic 6.6% Other 3.2% Average age at intake 16.0 Average current age 16.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) I (Violent) 15.3 II (Serious) 10.2 III (Less Serious) 11.4 Type of offense Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%		82.3%
White 58.5% Black 31.7% Hispanic 6.6% Other 3.2% Average age at intake 16.0 Average current age 16.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) I (Violent) 15.3 II (Serious) 10.2 III (Less Serious) 11.4 IV (Minor) 8.9 Type of offense Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Female	17.7%
Black 31.7% Hispanic 6.6% Other 3.2% Average age at intake 16.0 Average current age 16.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) I (Violent) 15.3 II (Serious) 10.2 III (Less Serious) 11.4 IV (Minor) 8.9 Type of offense Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Race/Ethnicity	
Hispanic G.6% Other G.2% Average age at intake G.0 Average current age G.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) I (Violent) G.3 I (Serious) G.2 III (Less Serious) G.2 III (Less Serious) G.2 III (Destious) G.2 III (Destious) G.2 III (Destious) G.3 III (Destious) G.3	White	58.5%
Other 3.2%	Black	31.7%
Average age at intake 16.0 Average current age 16.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) I (Violent) I (Serious) 10.2 III (Less Serious) 11.4 IV (Minor) 8.9 Type of offense Person Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Hispanic	6.6%
Average current age 16.9 Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) I (Violent) 15.3 II (Serious) 10.2 III (Less Serious) 11.4 IV (Minor) 8.9 Type of offense Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Other	3.2%
Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194)) 1 (Violent) 15.3 II (Serious) 10.2 III (Less Serious) 11.4 IV (Minor) 8.9 Type of offense Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Average age at intake	16.0
in months (N=1194)) I (Violent) 15.3 II (Serious) 10.2 III (Less Serious) 11.4 IV (Minor) 8.9 Type of offense Property Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Average current age	16.9
II (Serious) 10.2 III (Less Serious) 11.4 IV (Minor) 8.9 Type of offense Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Length of stay by most serious offense level (based on CY 2007 releases – in months (N=1194))	
III (Less Serious)	I (Violent)	15.3
III (Less Serious)		10.2
Type of offense Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	III (Less Serious)	11.4
Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	IV (Minor)	8.9
Property 38.6% Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Type of offense	
Person 34.4% Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%		38.6%
Public Administration 8.7% Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%		
Controlled Substances 6.1% Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Public Administration	
Public Order 6.8% Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Controlled Substances	
Status 1.8% Other (Alcohol, Violations) 2.6% Weapons 1.1%	Public Order	
Other (Alcohol, Violations) 2.6% Weapons 1.1%	Status	
Weapons 1.1%	Other (Alcohol, Violations)	
		1.1%
		0.0%

Obscenity/Pornography	0.0%
% of juvenile population with 1 or more drug offense	11.2%
Juveniles on parole	
Male	466
Female	85

Source: Indiana Department of Correction

Table 7.15 Indiana Department of Correction Fact Card-A	dults, January 1, 2008
Category	Number
Total department active personnel	7531
Total department funded positions	7835
Number of adult institutions	21
Total population	26249
Average per diem (FY07)	\$52.61
Offenders by classification level	
Minimum	17.0%
Medium	61.9%
Maximum	21.1%
Sex	
Male	91.6%
Female	8.4%
Race/Ethnicity	
White	56.9%
Black	38.2%
Hispanic	4.1%
Undetermined	0.5%
American Indian/Alaskan Native	0.2%
Asian/Pacific Islander	0.2%
Average age at intake	32.4
Average current age	36.1
Sentence length	
<1 year	2.5%
1-2 years	6.2%
>2-5 years	20.0%
>5-10 years	22.7%
>10-15 years	10.9%
>15-20 years	10.7%
>20 years	25.9%
Active Indiana Death Sentence	0.1%
Indeterminate Life/Life without Parole	1.0%
Type of offense	
Person	37.4%
Controlled Substances	23.3%
Property	20.1%
Non IC 35 Offenses	6.5%
Substantive Criminal Provisions	6.2%
Weapons	2.4%
Public Administration	1.6%
Miscellaneous Criminal	1.6%
Public Order	0.9%
Unsentenced (Safekeepers, Predispositions)	0.1%
Sentencing (Habitual)	0.1%
% of adult population has 1 or more drug offenses	27.6%
Offenders on parole (excludes Indiana parolees on parole in other states;	
includes other states' parolees supervised by Indiana)	
Male	9505
Female	1289

Source: Indiana Department of Correction

ISSUE 46: GANG ACTIVITY

Data indicate that between 1996 and 2004, there was an overall decrease in the percentage of jurisdictions that reported gang problems. This difference was primarily evident in rural counties and suburban counties. Little change has occurred in larger cities, which consistently report the highest rate of gang problems. In 2004, 82% of larger cities reported gang problems. Further, while approximately half of jurisdictions indicated in 2004 that gang problems were getting better or staying the same, approximately half also indicated that problems were getting worse.

Table 7.16 Law Enforcement Agency Reports of Gang Problems, United States, 1996-2004							
Area Type	Average Perc	Average Percentage of Respondents Reporting Gang Problems					
1996-1998* 1999-2001* 2002-2004* 2004*							
Rural counties	24.3%	13.5%	12.3%	14.0%			
Smaller cities (pop. 2500 to 49999)	36.5%	25.9%	28.4%	27.0%			
Suburban counties	56.0%	40.8%	40.0%	42.0%			
Larger cities (pop. 50000 or more)	85.6%	77.6%	79.8%	82.0%			

^{*}To account for regular year-to-year fluctuations, 3-year averages are shown

Source: National Youth Gang Center, National Youth Gang Survey; Office of Juvenile Justice and Delinquency Prevention

Table 7.17 Highlights from the 2004 National Youth Gang Survey, United States						
Category	Figure					
No. of active gang members in U.S.	760,000					
No. of active gangs in the U.S.	24,000					
No. of agencies reporting gang problems getting better or staying the same	53%					
No. of agencies reporting gang problems getting worse	47%					

Source: National Youth Gang Center, 2004 National Youth Gang Survey; Office of Juvenile Justice and Delinquency Prevention

^{**}Results from the 2004 survey

ISSUE 47: YOUTH VIOLENCE AND CRIME

While the number of juveniles committed to the Department of Correction in Indiana declined between 2002 and 2006, the juvenile incarceration rate in the state is the 4th highest in the nation. At 415.4 per 100,000 juveniles, Indiana far exceeds all surrounding states, with Ohio being the closest at 317.8 per 100,000 and ranking 18th nationally. One example of the efforts to reduce the incarceration or reincarceration rate of juveniles is the Aftercare for Indiana through Mentoring (AIM) program. Over time, the program has shown success in reducing reincarceration of juveniles released from detention facilities. After 36 months, 60% of juveniles not in AIM returned to a correctional facility, compared to 24% who completed the AIM program. A survey conducted by the Indiana Juvenile Justice Task Force highlights some of the risk factors intertwined with juvenile criminal activity. Specifically, 82% of surveyed juveniles, all of whom were currently serving in a detention facility, indicated they had used alcohol or other illegal drugs. Further, almost half indicated being under the influence of a substance while committing a crime, and almost one-third said they had carried a gun while drunk or under the influence of drugs. Other survey results are presented in the table below.

Finally, the Youth Risk Behavior Survey provides data on various youth violence risk factors. Specifically in Indiana, over 19% of youth reported they had carried a weapon in the past 30 days and 6% had done so on school property. Further, over 29% of youth indicated they had been in a fight in the same time period. Additional data related to the Youth Risk Behavior Survey are presented below.

Table 7.18 Juvenile delinquency and status case data, Indiana, 2002-2006									
Category	2002	2003	2004	2005	2006				
No. of juvenile delinquency case filings	26101	25961	25024	26926	27835				
No. of juvenile delinquency status case filings	6314	6832	7376	6661	7448				
No. of juveniles committed to the Department of Correction	1813	1571	1269	1033	1050				
Male	1380	1237	1031	842	876				
Female	433	334	238	191	174				

Source: Indiana Supreme Court, Division of State Court Administration; Indiana Department of Correction; Kids Count, Annie E. Casey Foundation

Table 7.19 J	Table 7.19 Juvenile incarceration rate per 100,000, Indiana and surrounding states, 2006							
State	Custody rate per 100,000 juveniles ages 10-upper age	National Rank*						
Indiana	415.4	4 th						
Michigan	256.6	33 ^{ra}						
Ohio	317.8	18 th						
Kentucky	184.9	43 rd						
Illinois	212.1	40 th						
Wisconsin	273.6	26 th						
Missouri	246.0	34 th						

^{*}Higher rank equals higher incarceration rate

Source: Every Child Matters Education Fund, *Child Well-Being in the States*, April 2008; Snyder, Howard N. and Sickmund, Melissa. 2006. Juvenile Offenders and Victims: 2006 National Report. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention. Chapter 7, Juvenile Offenders in Correctional Facilities.

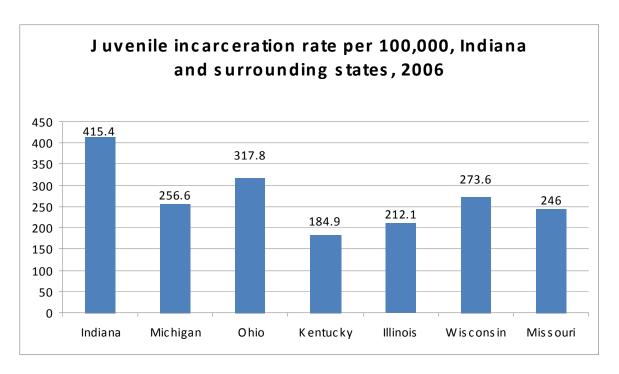


Table 7	Table 7.20 Juvenile delinquency and status case data, Gibson County and Indiana, 2002-2006									
Category	200)2	200)3	200)4	200)5	20	06
	Gibson	IN	Gibson	IN	Gibson	IN	Gibson	IN	Gibson	IN
No. of juvenile delinquency case filings	50	26101	21	25961	45	25024	32	26926	48	27835
No. of juvenile delinquency status case filings	0	6314	0	6832	0	7376	0	6661	6	7448
No. of juveniles committed to the Department of Correction	8	1813	5	1571	0	1269	3	1033	4	1050
Male	7	1380	2	1237	0	1031	3	842	4	876
Female	1	433	3	334	0	238	0	191	0	174

Source: Indiana Supreme Court, Division of State Court Administration; Indiana Department of Correction; Kids Count, Annie E. Casey Foundation

Table 7.2	Table 7.21 Juvenile delinquency and status case data, Posey County and Indiana, 2002-2006									
Category	200)2	200	03	200	04	200)5	200	96
	Posey	IN	Posey	IN	Posey	IN	Posey	IN	Posey	IN
No. of juvenile delinquency case filings	47	26101	47	25961	33	25024	36	26926	23	27835
No. of juvenile delinquency status case filings	9	6314	7	6832	6	7376	4	6661	5	7448
No. of juveniles committed to the Department of Correction	1	1813	4	1571	1	1269	2	1033	3	1050
Male	1	1380	3	1237	1	1031	2	842	3	876
Female	0	433	1	334	0	238	0	191	0	174

Source: Indiana Supreme Court, Division of State Court Administration; Indiana Department of Correction; Kids Count, Annie E. Casey Foundation

Table	Table 7.22 Juvenile delinquency and status case data, Spencer County and Indiana, 2002-2006									
Category	200	2	200	3	200	4	200)5	200	16
	Spencer	IN	Spencer	IN	Spencer	IN	Spencer	IN	Spencer	IN
No. of juvenile delinquency case filings	3	26101	12	25961	10	25024	24	26926	18	27835
No. of juvenile delinquency status case filings	0	6314	0	6832	0	7376	0	6661	0	7448
No. of juveniles committed to the Department of Correction	0	1813	2	1571	0	1269	0	1033	0	1050
Male	0	1380	2	1237	0	1031	0	842	0	876
Female	0	433	0	334	0	238	0	191	0	174

Source: Indiana Supreme Court, Division of State Court Administration; Indiana Department of Correction; Kids Count, Annie E. Casey Foundation

Table 7	Table 7.23 Juvenile delinquency and status case data, Warrick County and Indiana, 2002-2006									
Category	200)2	200)3	200)4	200)5	200)6
	Warrick	IN	Warrick	IN	Warrick	IN	Warrick	IN	Warrick	IN
No. of juvenile delinquency case filings	100	26101	72	25961	110	25024	121	26926	97	27835
No. of juvenile delinquency status case filings	11	6314	5	6832	8	7376	68	6661	72	7448
No. of juveniles committed to the Department of Correction	18	1813	10	1571	2	1269	3	1033	4	1050
Male	14	1380	10	1237	1	1031	2	842	3	876
Female	4	433	0	334	1	238	1	191	1	174

Source: Indiana Supreme Court, Division of State Court Administration; Indiana Department of Correction; Kids Count, Annie E. Casey Foundation

Table 7.24	Table 7.24 Juvenile delinquency and status case data, Vanderburgh County and Indiana, 2002-2006									
Category	200	2	200	03	200	04	200	05	20	006
	Vand.	IN	Vand.	IN	Vand.	IN	Vand.	IN	Vand.	IN
No. of	449	2610	539	25961	455	25024	500	26926	523	27835
juvenile		1								
delinquency										
case filings										
No. of	92	6314	103	6832	126	7376	123	6661	127	7448
juvenile										
delinquency										
status case										
filings										
No. of	44	1813	82	1571	55	1269	47	1033	37	1050
juveniles										
committed to the										
Department of Correction										
	29	1380	68	1237	45	1031	40	0.40	20	876
Male							40	842	30	
Female	15	433	14	334	10	238	7	191	7	174

Source: Indiana Supreme Court, Division of State Court Administration; Indiana Department of Correction; Kids Count, Annie E. Casey Foundation

Table 7.25 Reincarceration rates for youth participating in the Aftercare for Indiana through Mentoring (AIM)						
program, January 2004 progress report*						
Category	Category After 12 months After 24 months After 36 months					
Full AIM program 13% 18% 24%						
Not in AIM	39%	49%	60%			

^{*}Results from study conducted for the AIM program; all youths leaving Plainfield facility randomly assigned to one of two groups and followed over course of six years to determine percent reincarcerated

Table 7.26 Findings from Indiana Juvenile Justice Task Force, Inc. Mental Health and Substance Use Assessment Project Survey*							
Survey Item	Response						
Q3. Have you ever used alcohol or other illegal drugs?	82% answered Yes						
Q6. In the 30 days before you came into the detention center, about how many days did you drink alcohol?	48% denied drinking, 31% drank 1-5 days, 15% drank 6 or more days, 5% drank daily						
Q7. In the 30 days before you came into the detention center, how many days did you use illegal or illicit drugs?	42% denied drug use, 22% used drugs 1-5 days, 11% used drugs 6 or more days, 25% used drugs daily						
Q8. Have you ever been drunk or under the influence of drugs while committing a crime?	48% answered Yes						
Q9. Have you ever been drunk or under the influence of drugs while at school?	57% answered Yes						
Q11. Have you ever carried a gun while you were drunk or under the influence of drugs?	27% answered Yes						
Q32. What is your lifetime frequency of marijuana use?	16% denied ever using, 23% used up to 20 times, 6% used from 20 up to 50 times, 23% used more than 50 times; 30% reported daily use for any three-month period before coming into detention						
Q36. What is your lifetime experience with cocaine?	66% denied ever using, 9% used 1-2 times, 9% used 3-10 times, 5% used 10-20 times, 3% used 21-50 times, 5% used more than 50 times						
Q44. What is your lifetime experience with amphetamines or methamphetamines?	70% denied ever using, 9% used 1-2 times, 7% used 3-10 times, 5% used 10-20 times, 3% used 21-50 times, 4% used more than 50 times						

^{*}Respondents ranged in age from 8 to 19 years old; all respondents serving in a juvenile detention center in one of 13 Indiana counties; survey date not specified

Source: Indiana Juvenile Justice Task Force, Inc., Mental Health and Substance Use Assessment Project Survey

Table 7.27 Youth violence risk factors, Indiana, 2003 and 2005					
Risk Factor	2003	2005	% Difference 2003 vs. 2005		
% of students who carried a gun on one or more of the past 30 days	5.7%	5.8%	+0.1%		
% of students who carried a weapon such as a gun, knife, or club on one or more of the past 30 days	17.8%	19.2%	+1.4%		
% of students who carried a weapon such as a gun, knife, or club on school property on one or more of the past 30 days	6.2%	5.8%	-0.4%		
% of students who did not go to school because they felt unsafe at school or on their way to or from school on one or more of the past 30 days	3.8%	4.3%	+0.5%		
% of students who had been threatened or injured with a weapon such as a gun, knife, or club on school property one or more times during the past 12 months	6.7%	8.8%	+2.1%		
% of students who were in a physical fight one or more times during the past 12 months	30.6%	29.3%	-1.3%		
% of students who were in a physical fight on school property one or more times during the past 12 months	10.9%	11.2%	+0.3%		
% of students who were hit, slapped, or physically hurt on purpose by their boyfriend or girlfriend during the past 12 months	11.7%	12.5%	+0.8%		

Source: CDC, Youth Risk Behavior Survey

ISSUE 48: ADULT SEXUAL VICTIMIZATION

Since 1990, and between 2002 and 2006, the rate of forcible rape per 100,000 population has decreased across the United States, albeit slightly in the past few years. The Indiana rate experienced an increase between 2003 and 2005 and has gotten closer to the national rate in recent years. In 2006, the city of Evansville rate was considerably higher than Indiana or the U.S. In terms of surrounding counties, the forcible rape rates reported in Princeton have been quite comparable to the state and nation, and was actually higher in 2006 than Indiana, the U.S., or Evansville.

Table 7.28 Forcible rape rates per 100,000 population, Indiana and Southwestern Indiana jurisdictions (1990, 2002-2006)							
Forcible rape	1990	2002	2003	2004	2005	2006	
United States	41.1	33.1	32.3	32.4	31.7	30.9	
Indiana	37.9	29.9	27.7	29.0	29.6	29.1	
Evansville PD	39.6	43.0	33.4	28.6	50.1	52.3	
Vand. Sheriff Dept.	5.2	11.8	11.3	9.2	8.9	8.7	
Mount Vernon				13.5	13.6	0.0	
Princeton				27.0	33.0	57.4	
Boonville				0.0	0.0	0.0	

Source: FBI, Uniform Crime Reports

Domain VIII: Health

The following section presents secondary data sources applicable to Domain VIII: Health. As shown in Table 8.1, the top five issues in this domain were rated very similarly by respondents. These issues include: affordable and accessible health care for low- to moderate-income individuals; child and adult obesity; cost of prescription medicine; affordable and available care for mental health issues; and affordable dental care for low- to moderate-income individuals. As noted in the all counties combined analysis, the affordability of health services was one of the common themes among top rated priority areas. Based on the percentage of respondents who rated health issues in the high/low quadrant, it is obvious that many members of the community believe that these issues are important and not being addressed well. Among issues in the health domain, one was rated by over 50% of respondents in the high/high quadrant—sexually transmitted diseases/infections. Fifty-two percent of individuals believe that this issue is important and is being addressed well by the community. Secondary data for this domain are presented in Tables 8.2 to 8.109. Note that data are presented in the order in which issues within the domain were listed on the needs assessment survey.

Table 8.1 All Counties: Health Domain Note: Issues are sorted by the HL Rank (High in importance and Low in how the issue is being addressed) Do not Importance-Being Addressed **Overall Mean Ratings** know how Response Patterns Overall well issue How well issue is Rank based is being HL НН LL LH Importance **Item from Needs Assessment** being addressed addressed on N Response Rank Rank Mean Rank Mean Rank Pattern % % % % Ν Ν Ν % 3 Affordable and accessible health care 1212 58.30 8 32.30 7.90 1.40 3.44 1573 8 2.12 1226 320 20.70 for low- to moderate-income individuals 4 Child and adult obesity 1167 2 57.80 7 33.10 6.40 2.70 3.37 1565 4 2.21 1186 355 23.04 5 Cost of prescription medicine 1203 3 57.00 6 33.60 7.60 3.46 1564 7 2.13 1227 310 20.17 1.80 6 Affordable and available care for 1062 4 55.70 4 35.70 7.30 1.20 5 2.18 1082 454 29.56 3 3.42 1502 mental health issues Affordable dental care for low- to 7 1126 5 54.50 5 34.90 8.80 1.80 6 3.36 1541 6 2.16 1142 400 25.94 moderate-income individuals 15 Preventative health care 1136 48.90 42.60 6.80 3.40 1553 2.30 1154 384 24.97 6 3 1.70 4 3 31 7 42.20 2 48.00 6.90 2.90 3.33 369 **Proper nutrition** 1128 1521 2 2.42 1148 24.32 37 Sexually transmitted 928 8 37.50 1 52.00 7.30 3.10 3.33 1464 2.48 937 592 38.72 diseases/infections

ISSUE 49: CHILD AND ADULT OBESITY

In 2007, approximately 26% of adults in the United States and approximately 27% of adults in Indiana were classified as obese. Since 2000, rates in both the U.S. and Indiana have increased. Obesity rates for metropolitan areas in Indiana and surrounding states are similar to the national average. As an indicator of the impact of obesity on other health factors, data show that the percentage of adults ever diagnosed with diabetes increased in both the U.S. and Indiana between 2000 and 2007. As of 2007, the Indiana rate was higher than the national rate.

Although obesity rates have climbed in recent years, one positive trend is the percentage of adults who report engaging in physical activity. Between 2001 and 2007, the percentage of adults in Indiana who do thirty or more minutes of moderate physical activity five or more days a week or vigorous physical activity for twenty or more minutes three or more days a week increased by 3.5%. Positive trends in physical activity also have been shown in the United States.

In terms of Indiana youth, the percentage of students who were overweight increase from 2003 to 2005. While over 60% of students in Indiana reported vigorous physical activity in 2005, this percentage was actually a slight decrease from the rate in 2003.

Table 8.2a Percentage of adults reporting selected health risks (health status, exercise, and obesity)- selected Indiana areas, 2006								
Location Health Status* Exercise** Obesity***								
U.S.	14.7%	22.6%	25.1%					
Indiana	16.5%	25.3%	27.8%					
Chicago-Naperville-Joliet, IL-IN-WI	15.8%	22.6%	24.2%					
Cincinnati-Middletown, OH-KY-IN	13.6%	24.0%	26.3%					
Indianapolis-Carmel, IN 14.4% 25.1% 26.0%								
Louisville, KY-IN	17.8%	27.1%	24.8%					

^{*%} reported as fair or poor

Source: CDC, Behavioral Risk Factor Surveillance System

Table 8.2b Prevalence of overweight and obesity adults, Indiana, 2004-2007						
Weight Classification	2004	2005	2006	2007	% Change 2004- 2007	
Neither overweight nor obese (BMI <	37.8%	37.6%	37.2%	36.8%	-2.6%	
24.9)						
Overweight (BMI 25.0 – 29.9)	36.7%	35.1%	35.0%	35.8%	-2.5%	
Obese (BMI 30.0+)	25.5%	27.2%	27.8%	27.4%	+7.5%	

Source: CDC, Behavioral Risk Factor Surveillance System

Table 8.2c Percent of adults classified as obese based on BMI, Indiana and national median, 2000-2007						
Year	Indiana	U.S.				
2000	21.8%	20.0%				
2001	24.5%	20.9%				
2002	24.1%	21.9%				
2003	26.0%	22.9%				
2004	25.5%	23.2%				
2005	27.2%	24.4%				
2006	27.8%	25.1%				
2007	27.4%	26.3%				
% Change 2000-2007	+25.7%	+31.5%				

Source: CDC, Behavioral Risk Factor Surveillance System

^{**%} reporting no exercise in past 30 days

^{***%} reporting BMI > or = 30.0

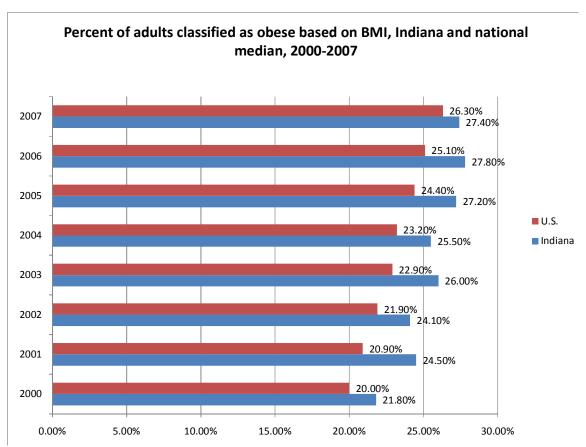


Figure 8.1

Table 8.3a Percent of adults reporting no leisure time physical activity in past month, Indiana and national median, 2000-2006							
Year	Indiana	U.S.					
2000	25.4%	26.7%					
2001	26.2%	25.4%					
2002	27.5%	24.1%					
2003	26.2%	22.7%					
2004	25.3%	22.5%					
2005	26.9%	23.8%					
2006	25.3%	22.6%					
% Change 2000-2006	-0.4%	-15.4%					

Source: CDC, Behavioral Risk Factor Surveillance System

Table 8.3b Percent of adults with 30+ minutes of moderate physical activity five or more days per week, or vigorous physical activity for 20+ minutes three or more days per week, Indiana, 2001-2007					
Year	%				
2001	46.0%				
2003	46.9%				
2005	47.7%				
2007 47.6%					
% Change 2001-2007	+3.5%				

Source: CDC, Behavioral Risk Factor Surveillance System

Table 8.4 Percent of adults ever diagnosed with diabetes, Indiana and national median, 2000-2007					
Year	Indiana	U.S.			
2000	6.0%	6.1%			
2001	6.5%	6.5%			
2002	7.4%	6.5%			
2003	7.8%	7.1%			
2004	7.7%	7.0%			
2005	8.3%	7.3%			
2006	8.1%	7.5%			
2007	8.5%	8.1%			
% Change 2000-2007	+41.7%	+32.8%			

Source: CDC, Behavioral Risk Factor Surveillance System

Table 8.5 Youth physical activity risk factors, Indiana, 2003 and 2005						
Risk Factor	2003	2005	% Difference			
			2003 vs. 2005			
% of students who exercised or participated in physical activity that made them sweat and breathe hard for 20 minutes or more on three or more of the past seven days	62.3%	60.2%	-2.1%			
% of students who participated in physical activity that did not make them sweat or breathe hard for 30 minutes or more on five or more of the past seven days	26.5%	22.7%	-3.8%			
% of students who had participated in at least 20 minutes of vigorous physical activity on three or more of the past seven days and/or at least 30 minutes of moderate physical activity on five or more of the past seven days	68.1%	65.9%	-2.2%			
% of students who had not participated in any vigorous or moderate physical activity during the past seven days	8.6%	10.5%	+1.9			
% of students who attended physical education classes on one or more days in an average week when they were in school	37.1%	38.7%	+1.6%			
Among students enrolled in physical education class, the percentage who actually exercised or played sports more than 20 minutes during an average PE class	86.0%	86.5%	+0.5%			

Source: CDC, Youth Risk Behavior Survey

Table 8.6 Youth weight risk factors, Indiana, 2003 and 2005						
Risk Factor	2003	2005	% Difference			
			2003 vs. 2005			
% of students who were at risk for becoming overweight (i.e., at or above the 85 th percentile but below the 95 th percentile for BMI, by age and sex)	14.2%	14.3%	+0.1%			
% of students who were overweight (i.e., at or above the 95 th percentile for BMI, by age and sex)	11.5%	15.0%	+3.5%			
% of students who described themselves as slightly or very overweight	32.2%	31.9%	-0.3%			
% of students who were trying to lose weight	46.7%	46.5%	-0.2%			
% of students who exercised to lose weight or to keep from gaining weight during the past 30 days	62.4%	62.3%	-0.1%			
% of students who ate less food, fewer calories, or foods low in fat to lose weight or to keep from gaining weight during the past 30 days	43.3%	41.8%	-1.5%			

Source: CDC, Youth Risk Behavior Survey

ISSUE 50: AFFORDABLE AND AVAILABLE CARE FOR MENTAL HEALTH ISSUES

Data show that between 1990 and 2003, there was an increase in the expenditures for mental health services in the United States. This increase also is apparent when dollar figures are adjusted for inflation.

In terms of admissions to mental health organizations, there was an increase in the number per 100,000 civilian population between 1990 and 2004 and between 2002 and 2004. These increases were witnessed in almost all types of mental health organizations. As with expenditures for all mental health services in the U.S., there was an increase in the state mental health per capita expenditures for mental health services in Indiana and surrounding states. In 2004, the Indiana per capita rate was lower than the national rate but higher than four of the surrounding states.

While spending has increased for mental health services, the number of mental health organizations, and consequently the number of beds, for 24-hour and residential treatment have decreased over the past two decades. In the United States, there were 71.2 beds per 100,000 civilian population in 2004, compared to 74.8 in 2002 and 128.5 in 1990.

Finally, a study published in the American Journal of Public Health in 2002 indicated that approximately 15% of individuals in the U.S. with a serious mental illness received minimally adequate treatment and that 60% did not receive treatment at all. Given the number of individuals in this country with some type of mental disorder or disability, these percentages indicate that a significant number of individuals do not receive necessary treatment.

Table 8.7 Percentage of eligible population that is served by Indiana DMHA that are classified as seriously mentally ill adults, July 1, 2004-June 30, 2005					
Location	% Chronically Addicted Adults				
Indiana	71.7%				
Gibson County	103.7%				
Posey County	118.9%				
Spencer County	71.0%				
Vanderburgh County	113.5%				
Warrick County	134.1%				

Source: Indiana Family and Social Services Administration, Division of Mental Health and Addiction

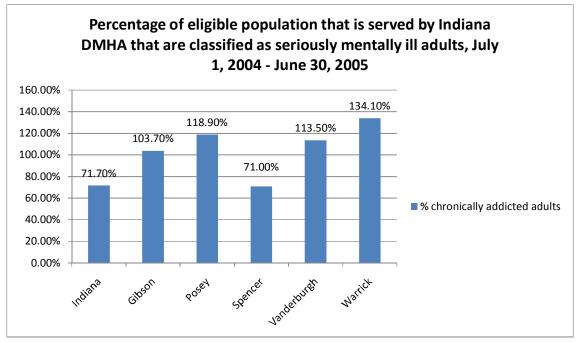


Figure 8.7

Table 8.8 National health expenditures for mental health services and percent distribution, by type of expenditure, United States, 1990, 2000, 2002-2003									
Type of Expenditure	, ,	1990 2000 2002					2003		
,	\$	%	\$	%	\$	%	\$	%	
Total expenditures	46456	100	79203	100	93135	100	100321	100	
Total expenditures, inflation-adjusted dollars	56938		79203		89392		94284		
Total all service providers	40636	87.5	57740	72.9	65790	70.6	69918	69.7	
General non-specialty hospitals	7613	16.4	12069	15.2	14729	15.8	15927	15.9	
General hospital specialty units	5729	12.3	6445	8.1	6455	6.9	6568	6.5	
General hospital non-specialty units	1885	4.1	5624	7.1	8274	8.9	9359	9.3	
Specialty hospitals	11069	23.8	11005	13.9	11328	12.2	11673	11.6	
All physicians	5827	12.5	10445	13.2	12541	13.5	13748	13.7	
Psychiatrists	4276	9.2	7569	9.6	8678	9.3	9802	9.8	
Non-psychiatric physicians	1551	3.3	2876	3.6	3863	4.1	3946	3.9	
Other professionals	4261	9.2	6251	7.9	7567	8.1	8370	8.3	
Freestanding nursing homes	5496	11.8	5310	6.7	5964	6.4	6234	6.2	
Freestanding home health	221	0.5	612	0.8	749	0.8	823	8.0	
Multi-service mental health organizations	6148	13.2	12048	15.2	12913	13.9	13143	13.1	
Retail prescription drug	3340	7.2	16417	20.7	20949	22.5	23259	23.2	
Insurance administration	2480	5.3	5046	6.4	6395	6.9	7145	7.1	

Source: Substance Abuse and Mental Health Services Administration

Table 8.9 Admissions to mental health organizations, by type of service and organization, United						
States, 1990, 2002, 2004						
Service & Organization	Admissions in thousands			Admissions per 100,000 civilian		
				population		
	1990	2002	2004	1990	2002	2004
24-hour hospital and residential						
treatment						
All organizations	2110	2158	2713	833.0	738.9	910.5
State and county mental hospitals	283	234	266	111.6	80.1	89.1
Private psychiatric hospitals	411	477	599	162.4	163.3	200.9
Nonfederal general hospital psych	962	1087	1533	379.9	372.2	514.6
services						
Dept. of Vet Affairs medical centers	203	158		80.3	54.1	
Residential treatment centers for	50	63	61	19.8	21.6	20.3
emotionally disturbed children						
All other organizations	200	139	255	79.0	47.6	85.5
Less than 24-hour care						
All organizations	3377	4099	4667	1333.3	1403.2	1566.6
State and county mental hospitals	50	62	130	19.7	21.2	43.6
Private psychiatric hospitals	163	598	447	64.5	204.7	150.1
Nonfederal general hospital psych	661	681	900	260.8	233.0	302.2
services						
Dept. of Vet Affairs medical centers	235	99		92.8	33.9	
Residential treatment centers for	100	222	194	39.3	75.8	65.2
emotionally disturbed children						
All other organizations	2168	2438	2995	856.2	834.3	1005.4

Source: Substance Abuse and Mental Health Services Administration, Center for Mental Health Services

Table 8.10 Mental health organizations and beds for 24-hour hospital and residential treatment, by type				
of organization, United States, 1990, 2000, 2002, 2004				
Type of organization	1990	2000	2002	2004
Number of mental health	organization	ıs		
All organizations	3942	3211	3044	2891
State and county mental hospitals	278	229	227	237
Private psychiatric hospitals	464	271	255	264
Nonfederal general hospital psych services	1577	1325	1231	1230
Dept. of Vet Affairs medical centers	131	134	132	
Residential treatment centers for emotionally disturbed children	501	476	510	458
All other organizations	991	776	689	702
Number of be	ds			
All organizations	325529	214186	211040	212231
State and county mental hospitals	102307	61833	57314	57034
Private psychiatric hospitals	45952	26402	24996	28422
Nonfederal general hospital psych services	53576	40410	40520	41403
Dept. of Vet Affairs medical centers	24779	8989	9581	
Residential treatment centers for emotionally disturbed children	35170	33508	39407	33835
All other organizations	63745	43044	39222	51536
Beds per 100,000 civilia	n population			
All organizations	128.5	74.8	72.2	71.2
State and county mental hospitals	40.4	21.6	19.6	19.1
Private psychiatric hospitals	18.1	9.2	8.6	9.5
Nonfederal general hospital psych services	21.2	14.1	13.9	13.9
Dept. of Vet Affairs medical centers	9.9	3.1	3.3	
Residential treatment centers for emotionally disturbed children	13.9	11.7	13.5	11.4
All other organizations	25.2	15.0	13.4	17.3

Source: Substance Abuse and Mental Health Services Administration, Center for Mental Health Services (CMHS), Survey of Mental Health Organizations

	Table 8.11 State mental health agency per capita expenditures for mental health services and average annual					
percen	t change, Unite	ed States, India	ana, and surro	unding states-	1990, 2001, 20	03, 2004
Location		Amount p	per capita		Average and	nual percent change
	1990	2001	2003	2004	1990-2001	2001-2004
U.S.	\$48	\$81	\$92	\$98	+4.9%	+6.6%
Indiana	\$47	\$65	\$72	\$81	+3.0%	+7.6%
Michigan	\$74	\$90	\$98	\$91	+1.8%	+0.4%
Ohio	\$41	\$61	\$62	\$64	+3.7%	+1.6%
Kentucky	\$23	\$49	\$51	\$50	+7.1%	+0.7%
Illinois	\$34	\$64	\$66	\$69	+5.9%	+2.5%
Wisconsin	\$37	\$72	\$91	\$95	+6.2%	+9.7%
Missouri	\$35	\$60	\$67	\$69	+5.0%	+4.8%

Source: CDC: Health, United States, 2007

Table 8.12 Percent of people with serious mental illness who receive minimally adequate treatment,		
United States, 2002		
Treatment Percent		
Received minimally adequate treatment	15.3%	
Treatment not minimally adequate	24.7%	
Did not receive treatment	60.0%	

Source: Wang, P.S., Demler, O., Kessler, R.C. (2002). Adequacy of treatment for serious mental illness in the United States. *American Journal of Public Health*, *92* (1), 92-98.; 2004 Chartbook on Mental Health and Disability

Table 8.13 Number and percent of U.S. civilian non-institutionalized population, 18 years and older, with			
mental, phy	mental, physical and no disability		
Status No. %			
Mental Health Disability 6695000 3.5%			
Physical Health Disability 29262000 15.4%			
No Disability Reported	154457000	81.1%	

Source: LaPlante, M.P. (2002). The prevalence of mental health disability in adults. Disability Statistics Center.; 2004 Chartbook on Mental Health

Table 8.14 Surgeon General's best estimates of 1-year prevalence rates of mental disorder, United		
States, 1999		
Age Group	Percent with Mental Disorder*	
Youth (9-17 years)	18.9%	
Adults (18-54 years)	21.0%	
Adults (55 years +)	19.8%	

*Represents approximately 44 million people Source: U.S. Department of Health and Human Services, Surgeon General Report

ISSUE 51: AFFORDABLE AND ACCESSIBLE HEALTH CARE FOR LOW- TO MODERATE-INCOME INDIVIDUALS

Data show that approximately 15-17% of individuals in the United States do not health insurance coverage. This figure has remained largely unchanged in the past five to ten years. Depending on the source, estimates for Indiana indicate that the state-wide rate is very similar to or slightly higher than the national uninsured rate. The Indiana rate appears to have increased somewhat over the past five to ten years. Overall, the Midwestern states have lower rates of uninsured individuals than other sections of the country. Compared to the entire state of Indiana, individuals in the southwestern part of the state are less likely to be without health insurance coverage. In the U.S., Indiana, and the five-county study area, the percentage of children who are uninsured is lower than the rate for other age groups. Increases in SCHIP expenditures and Hoosier Healthwise enrollment likely have contributed to the lower uninsured rate for children. In fact, the state of Indiana announced in May, 2008 that additional funding had been approved for SCHIP, which means that approximately 10,000 more children would receive health insurance coverage statewide.

In terms of the issue of availability of medical care services, data show somewhat of an inverse relationship between the growth in available services and the access people have to those services. In the past 30 years, there has been a fairly significant increase in the number of physicians per 100,000 population in the U.S., Indiana, and surrounding states. Additionally, there has been a decrease in the occupancy rates in community hospitals, meaning fewer of the staffed beds were occupied. This difference is particularly evident when comparing data from the 1960s, 1970s, and 1980s to current data. However, as the CDC has shown, there has been a reduced level of access to medical care in the U.S., Indiana, and surrounding states. This includes individuals who either did not get medical care, had a delay in care, or did not get prescription drugs.

The cost of health care services has shown an increase in the United States, Indiana, and other surrounding states. Specifically in the U.S., mean annual expense per person with a health care expense rose from \$3,600 to \$4,082 between 2003 and 2005. The expense for Indiana also increased during this time period. In particular, office-based medical provider services increased from 2003 to 2005. In 2003, the mean expense per person with an expense was \$860, compared to \$1,071 in 2005. Indiana witnessed a dramatic increase, from \$649 in 2003 to \$1,286 in 2005. While the 2005 amount is higher than the national average, it should be noted that the percent of total expense paid out of pocket for Indiana was significantly lower in 2005 than other locations, which may offset the costs for many individuals.

In terms of health insurance premium costs, the average monthly worker premium contributions paid by workers in the United States increased each year between 2000 and 2007. In fact, the amount for single and family coverage doubled during this time period. In the Midwest, the rate for single individuals was slightly higher in 2007 than the national average and was lower for family coverage than the U.S. rate. An analysis of the year-over-year increases shows that they were larger than the inflation rate each year and the annual increases in workers' earnings. In other words, the increases in health insurance premiums have outpaced growths made in other areas.

Table 8.15 Health insurance coverage of children, Indiana and United States, 2005-2006				
	Νι	ımber	Percent of population	
Category	Indiana	U.S.	Indiana	U.S.
Children with Medicaid	407936	20792401	24	27
Poor Children (Below 100% FPL)	232209	10420697	69	60
Near Poor (100-199% FPL)	117682	6465428	35	41
Uninsured Children	152887	9442071	9	12
Poor Children	NSD	3862523	NSD	22
Near Poor	NSD	2634936	NSD	17
Uninsured that are children	152887	9442071	20	20
Children with Employer	1042786	43426934	62	56
Sponsored Insurance				

Source: Kaiser Commission on Medicaid and Uninsured

Table 8.16 Medicaid enrollment-children, Indiana and United States, June and December, 2006			
Date	Indiana	U.S.	
June, 2006	462490	21576024	
December, 2006	459695	21339191	

Source: Kaiser Commission on Medicaid and Uninsured

Table 8.17 Medicaid enrollment-adults, Indiana and United States, June and December, 2006			
Date	Indiana	U.S.	
June, 2006	316779	19711094	
December, 2006	321402	19598305	

Source: Kaiser Commission on Medicaid and Uninsured

Table 8.18 SCHIP enrollment, Indiana and United States, 2002-2007				
Year	Indiana	U.S.		
2002	48342	3649131		
2003	56880	3993508		
2004	64403	3941608		
2005	68939	4043863		
2006	69787	4112845		
2007	68394	4411890		
% Change 2002-2007	+41.5%	+20.9%		

Source: Kaiser Commission on Medicaid and Uninsured

Table 8.19 SCHIP expenditures (in millions), Indiana and United States, 2002-2007				
Year	\$ Indiana	\$ U.S.		
2002	60	3776		
2003	62	4276		
2004	65	4644		
2005	76	5089		
2006	79	5454		
2007	92	6039		
% Change 2002-2007	+53.3%	+59.9%		

Source: Kaiser Commission on Medicaid and Uninsured

Table 8.20 Dist	Table 8.20 Distribution of Medicaid payments by enrollment group (in millions), Indiana and United States, FY 2005			
Group	Indiana %	Indiana \$	U.S. %	U.S. \$
Children	19	913	17	47508
Adults	9	430	12	31975
Elderly	26	1261	26	71674
Disabled	44	2101	41	111994
Unknown	2	73	4	11564
Total	100	4777	100	274715

Source: Kaiser Commission on Medicaid and Uninsured

T. 1. 0.04 M. P. 1.1				
Table 8.21 Medicaid payments per enrollee, Indiana and United States, FY 2005				
Group	Group Indiana \$ U.S. \$			
Children	1516	1617		
Adults	2291	2102		
Elderly	15527	11839		
Disabled	14110	13524		
Total	4685	4662		

Source: Kaiser Commission on Medicaid and Uninsured

Table 8.22 Number of children enrolled in Hoosier Healthwise, Indiana, 2003-2006		
Year	Number of children	
2003 344797		
2004 359901		
2005 376465		
2006 584274		
% Change 2003-2006 +69.5%		

Source: Indiana Family and Social Services Administration; Kids Count, Annie E. Casey Foundation

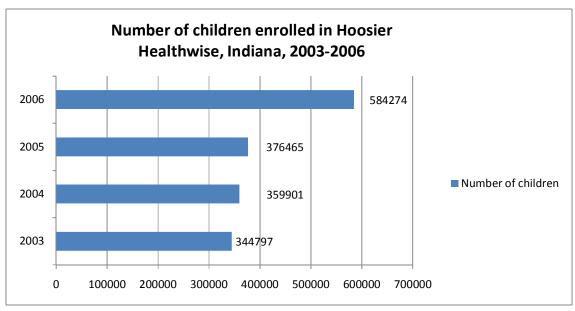


Figure 8.22

Table 8.23 Number of children enrolled in Hoosier Healthwise, Gibson County and Indiana, 2003-2006			
Year	Gibson	Indiana	
2003	1337	344797	
2004 1456 35990		359901	
2005	1568	376465	
2006	2410	584274	
% Change 2003-2006	+80.3%	+69.5%	

Source: Indiana Family and Social Services Administration; Kids Count, Annie E. Casey Foundation

Table 8.24 Number of children enrolled in Hoosier Healthwise, Posey County and Indiana, 2003-2006			
Year	Posey	Indiana	
2003	993	344797	
2004	1073	359901	
2005	1099	376465	
2006	1643	584274	
% Change 2003-2006	+65.5%	+69.5%	

Source: Indiana Family and Social Services Administration; Kids Count, Annie E. Casey Foundation

Table 8.25 Number of children enrolled in Hoosier Healthwise, Spencer County and Indiana, 2003-200			
Year	Spencer	Indiana	
2003	744	344797	
2004	800	359901	
2005	870	376465	
2006	1522	584274	
% Change 2003-2006	+104.6%	+69.5%	

Source: Indiana Family and Social Services Administration; Kids Count, Annie E. Casey Foundation

Table 8.26 Number of children enrolled in Hoosier Healthwise, Vanderburgh County and Indiana, 2003-2006			
Year	Vanderburgh	Indiana	
2003	10303	344797	
2004	2004 10587 359901		
2005	11279	376465	
2006	16957	584274	
% Change 2003-2006	+64.6%	+69.5%	

Source: Indiana Family and Social Services Administration; Kids Count, Annie E. Casey Foundation

Table 8.27 Number of children enrolled in Hoosier Healthwise, Warrick County and Indiana, 2003-2006				
Year	Year Warrick			
2003	1768	344797		
2004	1768 359901			
2005	1859	376465		
2006	3215	584274		
% Change 2003-2006	+81.8%	+69.5%		

Source: Indiana Family and Social Services Administration; Kids Count, Annie E. Casey Foundation

Table 8.28 Medicaid statistics highlights, Gibson County, June 2007		
Category	Figure	
Enrollment by Service Delivery System and Total Expenditure		
Total Medicaid Enrollment	3851	
Medicaid Enrollment as % of Population	11.8%	
Risk-Based Managed Care (RBMC) Enrollment	2313	
Traditional Medicaid Enrollment	1217	
Medicaid Select Enrollment	321	
Total Medicaid Expenditure	1638162	
Enrollment by Aid Category Grouping		
Aged (including Partials)	476	
Blind & Disabled (including Dual/Non-Dual and Partials)	609	
Adult	355	
Child	2010	
CHIP	291	
Pregnant Women	110	
Nursing Facility Information		
No. of Nursing Facilities	5	
No. of Nursing Facility Recipients	203	
Nursing Facility Payments	579903	
Average Payment Per Recipient	2857	
Hoosier Rx Participants for June 2007	20	

Source: Indiana Family & Social Services Administration (FSSA)

Table 8.29 Medicaid statistics highlights, Posey County, June 2007		
Category	Figure	
Enrollment by Service Delivery System and Total Expenditure		
Total Medicaid Enrollment	2557	
Medicaid Enrollment as % of Population	9.4	
Risk-Based Managed Care (RBMC) Enrollment	1593	
Traditional Medicaid Enrollment	738	
Medicaid Select Enrollment	226	
Total Medicaid Expenditure	975368	
Enrollment by Aid Category Grouping		
Aged (including Partials)	244	
Blind & Disabled (including Dual/Non-Dual and Partials)	407	
Adult	339	
Child	1326	
CHIP	179	
Pregnant Women	62	
Nursing Facility Information		
No. of Nursing Facilities	3	
No. of Nursing Facility Recipients	102	
Nursing Facility Payments	290929	
Average Payment Per Recipient	2852	
Hoosier Rx Participants for June 2007	13	

Source: Indiana Family & Social Services Administration (FSSA)

Table 8.30 Medicaid statistics highlights, Spencer County, June 2007		
Category	Figure	
Enrollment by Service Delivery System and Total Expenditure		
Total Medicaid Enrollment	2220	
Medicaid Enrollment as % of Population	10.9	
Risk-Based Managed Care (RBMC) Enrollment	1388	
Traditional Medicaid Enrollment	585	
Medicaid Select Enrollment	247	
Total Medicaid Expenditure	773475	
Enrollment by Aid Category Grouping		
Aged (including Partials)	266	
Blind & Disabled (including Dual/Non-Dual and Partials)	318	
Adult	267	
Child	1091	
CHIP	215	
Pregnant Women	63	
Nursing Facility Information		
No. of Nursing Facilities	2	
No. of Nursing Facility Recipients	77	
Nursing Facility Payments	252738	
Average Payment Per Recipient	3282	
Hoosier Rx Participants for June 2007	21	

Source: Indiana Family & Social Services Administration (FSSA)

Table 8.31 Medicaid statistics highlights, Vanderburgh County, June 2007		
Category	Figure	
Enrollment by Service Delivery System and Total Expenditure		
Total Medicaid Enrollment	25330	
Medicaid Enrollment as % of Population	14.8	
Risk-Based Managed Care (RBMC) Enrollment	15353	
Traditional Medicaid Enrollment	7442	
Medicaid Select Enrollment	2535	
Total Medicaid Expenditure	10827004	
Enrollment by Aid Category Grouping		
Aged (including Partials)	2215	
Blind & Disabled (including Dual/Non-Dual and Partials)	4087	
Adult	3076	
Child	13556	
CHIP	1709	
Pregnant Women	687	
Nursing Facility Information		
No. of Nursing Facilities	13	
No. of Nursing Facility Recipients	849	
Nursing Facility Payments	2683490	
Average Payment Per Recipient	3161	
Hoosier Rx Participants for June 2007	126	

Source: Indiana Family & Social Services Administration (FSSA)

Table 8.32 Medicaid statistics highlights, Warrick County, June 2007		
Category	Figure	
Enrollment by Service Delivery System and Total Expenditure	-	
Total Medicaid Enrollment	4821	
Medicaid Enrollment as % of Population	9.1	
Risk-Based Managed Care (RBMC) Enrollment	2770	
Traditional Medicaid Enrollment	1648	
Medicaid Select Enrollment	403	
Total Medicaid Expenditure	2371068	
Enrollment by Aid Category Grouping		
Aged (including Partials)	663	
Blind & Disabled (including Dual/Non-Dual and Partials)	784	
Adult	359	
Child	2311	
CHIP	569	
Pregnant Women	135	
Nursing Facility Information		
No. of Nursing Facilities	7	
No. of Nursing Facility Recipients	366	
Nursing Facility Payments	1025001	
Average Payment Per Recipient	2801	
Hoosier Rx Participants for June 2007	19	

Source: Indiana Family & Social Services Administration (FSSA)

Table 8.33 Persons without health insurance coverage, United States, Indiana, and surrounding					
	stat	es, average an	nual 1995-199	7 through 2003	-2005
Location	1995-1997	1998-2000	2001-2003	2003-2005	% Change 95/97 – 03/05
U.S.	15.7%	14.4%	15.1%	15.7%	0.0%
Indiana	11.5%	11.3%	12.9%	14.2%	+23.5%
Michigan	10.1%	10.6%	11.0%	11.3%	+11.9%
Ohio	11.6%	10.2%	11.7%	12.0%	+3.4%
Kentucky	15.0%	13.1%	13.3%	13.6%	-9.3%
Illinois	11.6%	13.3%	14.0%	14.2%	+22.4%
Wisconsin	7.9%	9.3%	9.5%	10.3%	+30.4%
Missouri	13.5%	9.0%	10.9%	11.9%	-11.9%

Source: U.S. Census, Current Population Survey, CDC, Health, United States, 2007

Table 8.34 (Table 8.34 Occupancy rates in community hospitals, United States, Indiana, and surrounding states, 1960-2005							
Location			Occupai	ncy Rate*				
	1960	1970	1980	1990	2000	2005	% Change 1960-2005	
U.S.	75	77	75	67	64	67	-10.7%	
Indiana	80	80	78	61	56	58	-27.5%	
Michigan	81	81	78	66	65	67	-17.3%	
Ohio	81	82	79	65	61	64	-21.0%	
Kentucky	73	80	77	62	62	62	-15.1%	
Illinois	76	79	75	66	60	66	-13.2%	
Wisconsin	74	73	74	65	60	63	-14.9%	
Missouri	76	79	75	62	58	63	-17.1%	

^{*}Occupancy rate: estimated percent of staffed beds that are occupied; calculated as the average daily census (inpatient days divided by 365) divided by the number of hospital beds; data include hospital and nursing home units

Source: American Hospital Association; CDC, Health, United States, 2007

Table 8.35	Table 8.35 Active physicians per 10,000 civilian population, United States, Indiana, and surrounding states, 1975-2005							
Location	1975 1985 1995 2005 % Change 1975-							
					2005			
U.S.	15.3	20.7	24.2	26.9	+75.8%			
Indiana	10.6	14.7	18.4	21.9	+106.6%			
Michigan	15.4	20.8	24.8	27.4	+77.9%			
Ohio	14.1	19.9	23.8	27.7	+96.5%			
Kentucky	10.9	15.1	19.2	22.9	+110.1%			
Illinois	14.5	20.5	24.8	27.5	+89.7%			
Wisconsin	12.5	17.7	21.5	25.7	+105.6%			
Missouri	15.0	20.5	23.9	25.9	+72.7%			

Source: American Medical Association; American Osteopathic Association; CDC, *Health, United States*, 2007

Table 8.36 Doctors of medicine in patient care per 10,000 civilian population, United States, Indiana, and surrounding states, 1975-2005							
Location	1975 1985 1995 2005 % Change 1975-						
					2005		
U.S.	13.5	18.0	21.3	23.8	+76.3%		
Indiana	9.6	13.2	16.6	19.8	+106.3%		
Michigan	12.0	16.0	19.0	21.5	+79.2%		
Ohio	12.2	16.8	20.0	23.4	+91.8%		
Kentucky	10.1	13.9	18.0	21.1	+108.9%		
Illinois	13.1	18.2	22.1	24.4	+86.3%		
Wisconsin	11.4	15.9	19.6	23.4	+105.3%		
Missouri	11.6	16.3	19.7	21.5	+85.3%		

Source: American Medical Association; American Osteopathic Association; CDC, *Health, United States*, 2007

Table 8.37 Reduced access to medical care during the past 12 months due to cost—percent who did not get medical care, United States, Indiana, and surrounding states, 1997/1998 – 2004/2005							
Location 97-98 00-01 04-05 % Change 97-98 to 04-05							
U.S.	4.4%	4.6%	5.4%	+22.7%			
Indiana	5.2%	5.6%	6.7%	+28.8%			
Michigan	3.8%	4.3%	4.7%	+23.7%			
Ohio	4.6%	3.8%	4.6%	0.0%			
Kentucky	6.5%	6.8%	8.5%	+30.8%			
Illinois	3.0%	3.4%	3.5%	+16.7%			
Wisconsin	2.8%	3.1%	3.0%	+7.1%			
Missouri	4.0%	4.5%	5.1%	+27.5%			

Source: CDC, National Center for Health Statistics, National Health Interview Survey; *Health, United States, 2007*

Table 8.38 Reduced access to medical care during the past 12 months due to cost—percent who								
had delayed r	had delayed medical care, United States, Indiana, and surrounding states, 1997/1998 – 2004/2005							
Location	97-98	00-01	04-05	% Change 97-98 to 04-05				
U.S.	6.9%	6.5%	7.6%	+10.1%				
Indiana	7.8%	8.0%	9.9%	+26.9%				
Michigan	6.3%	6.0%	7.6%	+20.6%				
Ohio	8.2%	6.7%	8.2%	0.0%				
Kentucky	10.1%	8.4%	10.6%	+5.0%				
Illinois	5.3%	5.7%	6.1%	+15.1%				
Wisconsin	5.9%	5.1%	5.6%	-5.1%				
Missouri	6.5%	5.5%	7.4%	+13.8%				

Source: CDC, National Center for Health Statistics, National Health Interview Survey; Health, United States, 2007

Table 8.39 Reduced access to medical care during the past 12 months due to cost—percent who did								
not get presci	not get prescription drugs, United States, Indiana, and surrounding states, 1997/1998 – 2004/2005							
Location	97-98	00-01	04-05	% Change 97-98 to 04-05				
U.S.	4.5%	5.3%	7.1%	+57.8%				
Indiana	5.1%	6.8%	8.5%	+66.7%				
Michigan	3.8%	5.1%	6.4%	+68.4%				
Ohio	5.0%	5.1%	7.8%	+56.0%				
Kentucky	6.3%	8.2%	11.6%	+84.1%				
Illinois	3.0%	4.2%	5.8%	+93.3%				
Wisconsin	3.0%*	4.0%	4.0%	+33.3%				
Missouri	4.3%	5.2%	6.8%	+58.1%				

*Data may be unreliable due to high relative standard error Source: CDC, National Center for Health Statistics, National Health Interview Survey; *Health, United States, 2007*

Table 8.40 Percent of adults aged 18-64 with and without any kind of health insurance coverage,						
	Indiana and n	ational median, 2003	3-2007			
Year	Inc	diana	U.S.			
	Yes	No	Yes	No		
2003	83.8%	16.2%	85.5%	14.5%		
2004	82.6%	17.4%	85.1%	14.9%		
2005	81.8%	18.2%	85.5%	14.5%		
2006	81.6%	18.4%	85.5%	14.5%		
2007	83.4%	16.6%	85.6%	14.5%		
% Change 2003-2007	-0.5%	+2.5%	+0.1%	0.0%		

Source: CDC, Behavioral Risk Factor Surveillance System

Table 8.50 Health insurance co				
of coverage and selecte		teristics, Unite		
Population Characteristic	Total Population	Delasta	Percent Distribution	
Tatal	(in thousands)	Private	Public only	Uninsured
Total	292947	63.0	19.8	17.2
Total under age 65	257443	65.0	15.6	19.4
Age in years	12122			
Under 4	16100	53.5	39.9	6.5
4-6	11914	57.1	32.5	10.4
7-12	24380	58.5	29.8	11.8
13-17	21483	59.8	26.4	13.8
Total under 18	73878	57.6	31.4	11.0
18	3837	59.8	20.7	19.5
19-24	24205	53.8	11.4	34.9
25-29	19826	60.6	9.3	30.0
30-34	18916	65.9	6.9	27.2
35-54	85727	72.4	8.1	19.5
55-64	31054	73.4	10.5	16.0
18-64 years	183565	67.9	9.2	22.8
65 and over	35505	49.2	49.9	0.9
Employment status				
Employed	144998	75.1	5.7	19.2
Not employed	81908	47.1	34.6	18.3
Sex				
Male	143393	63.4	17.4	19.2
Female	149555	62.7	22.0	15.3
Race/ethnicity				
Total Hispanic or Latino	43077	37.7	28.1	34.3
Total black, single race	35540	49.3	30.9	19.9
Total white, single race	193917	71.3	15.9	12.8
Total Asian/Pacific Islander,	13477	67.3	15.4	17.3
single race				
Total other races/multiple	6937	51.5	27.8	20.7
races				
Marital status				
Married	120847	74.0	11.8	14.3
Widowed	14509	44.7	49.5	5.7
Divorced	24574	57.6	18.7	23.8
Separated	4782	44.7	24.5	30.8
Never married	63292	56.1	15.2	28.7
Census region				
Northeast	54178	68.6	17.6	13.8
Midwest	64867	71.2	16.5	12.3
South	106015	58.6	21.1	20.3
West	67886	57.7	22.5	19.8

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2006

Table 8.51 Health insurance coverage of the civilian noninstitutionalized population-percent by type of coverage and perceived health status, United States, first half of 2006						
Population Characteristic						
·	(in thousands)	Private	Public Only	Uninsured		
Total under age 65	257443	65.0%	15.6%	19.4%		
Total age 65 and over	35505	49.2%	49.9%	0.9%		
Perceived health status, under age 65						
Excellent	87667	69.4%	14.5%	16.1%		
Very good	81785	69.0%	12.2%	18.8%		
Good	62326	60.9%	16.3%	22.8%		
Fair	19199	48.9%	25.3%	25.7%		
Poor	6130	39.8%	38.9%	21.4%		
Perceived health status, age 65 and over						
Excellent	5947	60.2%	39.1%	0.7%*		
Very good	9764	54.1%	44.8%	1.1%		
Good	10754	49.5%	49.7%	0.8%*		
Fair	6124	37.2%	61.5%	1.4%*		
Poor	2642	34.5%	64.8%	0.7%*		

^{*}Relative standard error is greater than or equal to 30 percent

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component, 2006

Table	Table 8.52 Health insurance coverage for Gibson County: experimental estimates, 2000*							
Age Group	No. Insured	No. Insured No. Uninsured 90% Confidence % 90% Confidence						
			Interval	Uninsured	Interval			
All Ages	29075	3128	700	9.7	2.2			
Under 18	6897	659	209	8.7	2.8			

^{*}Final release date for these estimates: July 2005 Source: U.S. Census, Current Population Survey

Table 8.53 Health insurance coverage for Posey County: experimental estimates, 2000*								
Age Group	Age Group No. Insured No. Uninsured 90% Confidence % 90% Confidence							
			Interval	Uninsured	Interval			
All Ages	24961	1917	591	7.1	2.2			
Under 18	6425	438	192	6.4	2.8			

^{*}Final release date for these estimates: July 2005 Source: U.S. Census, Current Population Survey

Table 8	Table 8.54 Health insurance coverage for Spencer County: experimental estimates, 2000*								
Age Group	Group No. Insured No. Uninsured 90% Confidence % 90% Conf								
			Interval	Uninsured	Interval				
All Ages	18158	2131	451	10.5	2.2				
Under 18	4639	410	149	8.1	2.9				

^{*}Final release date for these estimates: July 2005 Source: U.S. Census, Current Population Survey

Table 8.55 Health insurance coverage for Vanderburgh County: experimental estimates, 2000*								
Age Group	No. Insured	%	90% Confidence					
			Interval	Uninsured	Interval			
All Ages	150109	16380	3360	9.8	2.0			
Under 18	34927	3101	1002	8.2	2.6			

*Final release date for these estimates: July 2005 Source: U.S. Census, Current Population Survey

Table 8.56 Health insurance coverage for Warrick County: experimental estimates, 2000*								
Age Group	No. Insured	%	90% Confidence					
			Interval	Uninsured	Interval			
All Ages	48404	4204	1124	8.0	2.1			
Under 18	12414	909	371	6.8	2.8			

*Final release date for these estimates: July 2005 Source: U.S. Census, Current Population Survey

Table 8.57 Indiana health professionals, Gibson County and Indiana, 2005							
Job Title*	Gibson No.	Gibson % of all	Indiana No.	Indiana % of all			
		professionals		professionals			
Audiologist	1	0.1%	313	0.2%			
Chiropractor	3	0.4%	950	0.6%			
Clinical Social Worker	8	1.0%	3126	2.1%			
Certified Nurse/Midwife	0	0.0%	75	0.1%			
Clinical Nurse Specialist	1	0.1%	133	0.1%			
Dental Hygienist	19	2.4%	3472	2.3%			
Dentist	13	1.6%	3133	2.1%			
Dietician	2	0.2%	899	0.6%			
LPN	127	15.8%	23232	15.5%			
Marriage & Family Therapist	4	0.5%	911	0.6%			
Mental Health Counselor	2	0.2%	1295	0.9%			
Nurse/Midwife	0	0.0%	57	0.0%			
Nurse Practitioner	2	0.2%	1590	1.1%			
Occupational Therapist	9	1.1%	1939	1.3%			
Occupational Therapy Asst.	5	0.6%	572	0.4%			
Optometrist	6	0.7%	1078	0.7%			
Pharmacist	25	3.1%	6114	4.1%			
Physical Therapist	20	2.5%	3210	2.1%			
Physical Therapy Asst.	29	3.6%	1499	1.0%			
Physician	22	2.7%	13275	8.9%			
Physician Asst.	1	0.1%	430	0.3%			
Psychologist	2	0.2%	1101	0.7%			
RN	435	54.2%	67950	45.4%			
Respiratory Care Practitioner	22	2.7%	3473	2.3%			
Social Worker	7	0.9%	2083	1.4%			
Speech Pathologist	6	0.7%	1610	1.1%			
Total Health Professionals*	803		149810				

*While not all health professionals are shown in this table, the "Total Health Professionals" row does contain the total number of professionals in the county and state Source: Indiana Professional Licensing Agency

Table 8.58 Indiana health professionals, Posey County and Indiana, 2005							
Job Title*	Posey No.	Posey % of all	Indiana	Indiana % of all			
		professionals	No.	professionals			
Audiologist	0	0.0%	313	0.2%			
Chiropractor	3	0.6%	950	0.6%			
Clinical Social Worker	8	1.6%	3126	2.1%			
Certified Nurse/Midwife	0	0.0%	75	0.1%			
Clinical Nurse Specialist	0	0.0%	133	0.1%			
Dental Hygienist	13	2.7%	3472	2.3%			
Dentist	7	1.4%	3133	2.1%			
Dietician	4	0.8%	899	0.6%			
LPN	84	17.2%	23232	15.5%			
Marriage & Family Therapist	2	0.4%	911	0.6%			
Mental Health Counselor	2	0.4%	1295	0.9%			
Nurse/Midwife	0	0.0%	57	0.0%			
Nurse Practitioner	2	0.4%	1590	1.1%			
Occupational Therapist	14	2.9%	1939	1.3%			
Occupational Therapy Asst.	0	0.0%	572	0.4%			
Optometrist	3	0.6%	1078	0.7%			
Pharmacist	25	5.15	6114	4.1%			
Physical Therapist	9	1.8%	3210	2.1%			
Physical Therapy Asst.	13	2.7%	1499	1.0%			
Physician	7	1.4%	13275	8.9%			
Physician Asst.	1	0.2%	430	0.3%			
Psychologist	0	0.0%	1101	0.7%			
RN	244	49.9%	67950	45.4%			
Respiratory Care	14	2.9%	3473	2.3%			
Practitioner							
Social Worker	9	1.8%	2083	1.4%			
Speech Pathologist	6	1.2%	1610	1.1%			
Total Health Professionals*	489		149810				

^{*}While not all health professionals are shown in this table, the "Total Health Professionals" row does contain the total number of professionals in the county and state Source: Indiana Professional Licensing Agency

Table 8.59 Indiana health professionals, Spencer County and Indiana, 2005							
Job Title*	Spencer No.	Spencer % of all	Indiana No.	Indiana % of all			
	-	professionals		professionals			
Audiologist	0	0.0%	313	0.2%			
Chiropractor	2	0.5%	950	0.6%			
Clinical Social Worker	7	1.7%	3126	2.1%			
Certified Nurse/Midwife	0	0.0%	75	0.1%			
Clinical Nurse Specialist	1	0.2%	133	0.1%			
Dental Hygienist	11	2.6%	3472	2.3%			
Dentist	6	1.4%	3133	2.1%			
Dietician	1	0.2%	899	0.6%			
LPN	71	16.9%	23232	15.5%			
Marriage & Family Therapist	2	0.5%	911	0.6%			
Mental Health Counselor	4	1.0%	1295	0.9%			
Nurse/Midwife	0	0.0%	57	0.0%			
Nurse Practitioner	3	0.7%	1590	1.1%			
Occupational Therapist	4	1.0%	1939	1.3%			
Occupational Therapy Asst.	4	1.0%	572	0.4%			
Optometrist	1	0.2%	1078	0.7%			
Pharmacist	10	2.4%	6114	4.1%			
Physical Therapist	4	1.0%	3210	2.1%			
Physical Therapy Asst.	7	1.7%	1499	1.0%			
Physician	9	2.1%	13275	8.9%			
Physician Asst.	0	0.0%	430	0.3%			
Psychologist	3	0.7%	1101	0.7%			
RN	236	56.2%	67950	45.4%			
Respiratory Care Practitioner	12	2.9%	3473	2.3%			
Social Worker	10	2.4%	2083	1.4%			
Speech Pathologist	2	0.5%	1610	1.1%			
Total Health Professionals*	420	0.5%	149810	1.170			
Total Health Floressionals	420		149010				

^{*}While not all health professionals are shown in this table, the "Total Health Professionals" row does contain the total number of professionals in the county and state
Source: Indiana Professional Licensing Agency

Table 8.60 Indiana health professionals, Vanderburgh County and Indiana, 2005							
Job Title*	Vanderburgh	Vanderburgh % of	Indiana	Indiana % of all			
	No.	all professionals	No.	professionals			
Audiologist	11	0.2%	313	0.2%			
Chiropractor	34	0.7%	950	0.6%			
Clinical Social Worker	155	3.2%	3126	2.1%			
Certified Nurse/Midwife	1	0.0%	75	0.1%			
Clinical Nurse Specialist	4	0.1%	133	0.1%			
Dental Hygienist	113	2.3%	3472	2.3%			
Dentist	101	2.1%	3133	2.1%			
Dietician	30	0.6%	899	0.6%			
LPN	567	11.7%	23232	15.5%			
Marriage & Family Therapist	45	0.9%	911	0.6%			
Mental Health Counselor	25	0.5%	1295	0.9%			
Nurse/Midwife	0	0.0%	57	0.0%			
Nurse Practitioner	59	1.2%	1590	1.1%			
Occupational Therapist	110	2.3%	1939	1.3%			
Occupational Therapy Asst.	28	0.6%	572	0.4%			
Optometrist	43	0.9%	1078	0.7%			
Pharmacist	173	3.6%	6114	4.1%			
Physical Therapist	127	2.6%	3210	2.1%			
Physical Therapy Asst.	72	1.5%	1499	1.0%			
Physician	591	12.2%	13275	8.9%			
Physician Asst.	17	0.4%	430	0.3%			
Psychologist	34	0.7%	1101	0.7%			
RN	2091	43.1%	67950	45.4%			
Respiratory Care Practitioner	92	1.9%	3473	2.3%			
Social Worker	107	2.25	2083	1.4%			
Speech Pathologist	47	1.0%	1610	1.1%			
Total Health Professionals*	4849		149810				

*While not all health professionals are shown in this table, the "Total Health Professionals" row does contain the total number of professionals in the county and state Source: Indiana Professional Licensing Agency

Table 8.61 Indiana health professionals, Warrick County and Indiana, 2005							
Job Title*	Warrick No.	Warrick % of all	Indiana No.	Indiana % of all			
		professionals		professionals			
Audiologist	2	0.1%	313	0.2%			
Chiropractor	14	0.8%	950	0.6%			
Clinical Social Worker	38	2.1%	3126	2.1%			
Certified Nurse/Midwife	0	0.0%	75	0.1%			
Clinical Nurse Specialist	4	0.2%	133	0.1%			
Dental Hygienist	48	2.6%	3472	2.3%			
Dentist	23	1.3%	3133	2.1%			
Dietician	12	0.7%	899	0.6%			
LPN	232	12.8%	23232	15.5%			
Marriage & Family Therapist	15	0.8%	911	0.6%			
Mental Health Counselor	11	0.6%	1295	0.9%			
Nurse/Midwife	1	0.1%	57	0.0%			
Nurse Practitioner	19	1.0%	1590	1.1%			
Occupational Therapist	33	1.8%	1939	1.3%			
Occupational Therapy Asst.	3	0.2%	572	0.4%			
Optometrist	9	0.5%	1078	0.7%			
Pharmacist	81	4.5%	6114	4.1%			
Physical Therapist	48	2.6%	3210	2.1%			
Physical Therapy Asst.	31	1.7%	1499	1.0%			
Physician	155	8.5%	13275	8.9%			
Physician Asst.	4	0.2%	430	0.3%			
Psychologist	9	0.5%	1101	0.7%			
RN	880	48.4%	67950	45.4%			
Respiratory Care Practitioner	33	1.8%	3473	2.3%			
Social Worker	34	1.9%	2083	1.4%			
Speech Pathologist	21	1.2%	1610	1.1%			
Total Health Professionals*	1819		149810				

*While not all health professionals are shown in this table, the "Total Health Professionals" row does contain the total number of professionals in the county and state
Source: Indiana Professional Licensing Agency

Table 8.62 Indiana Long Term Care Insurance Program-quarterly summary report, quarter 4 of 2007						
Category	Quarter 4 2007	To Date				
Applications Received	1242	50163				
Applications Denied	160	7696				
Applications Pending and Withdrawn	n/a	229				
Policies Purchased	813	42696				
Policies Dropped (voluntarily and for unknown reasons)	123	4436				
Policies Not Take Up (dropped within 30 day free look period)	17	2360				
Total Policies In Force (active)	n/a	34825				
Policyholders Who Received Service Payments	192	535				

Source: Indiana Long Term Care Insurance Program

Table 8.63 Indiana Long Term Care Insurance Program-age distribution of policyholders (policies in force), quarter 4 of 2007					
Age Category	Percentage of Policyholders				
85+	1.41%				
81-85	3.24%				
76-80	8.35%				
71-75	15.25%				
66-70	20.80%				
61-65	21.89%				
56-60	16.86%				
0-55	12.20%				

Source: Indiana Long Term Care Insurance Program

			Source C	л рауппеі	nt, United St	aies, 200	5			
Population	Population	% with	Per pers		Total		nt distribution	of total expe	nses by sour	ce of
Characteristic	(in thous)	expense	an exp	ense	Expenses			payment	-	
	,		Median	Mean	(in mill.)	Out of pocket	Private insurance	Medicare	Medicaid	Other
Total	296185	84.7	1166	4082	1023763	18.8	41.6	21.1	11.2	7.2
Age in years										
Under 65	258708	82.9	912	3239	695048	19.6	53.0	5.9	14.2	7.3
Under 5	19793	88.9	444	1638	28822	10.2	45.3	7.3	29.6	7.6
5-17	53770	83.4	467	1598	71692	20.5	52.6	0.2	21.9	4.8
18-44	111067	77.1	824	2880	246619	19.6	52.4	3.6	17.2	7.1
45-64	74078	89.7	2025	5233	347915	20.2	54.1	8.5	9.2	8.0
65 and over	37477	96.7	4085	9074	328715	17.1	17.6	53.4	5.0	6.8
Sex										
Male	145116	79.5	941	3715	428757	17.7	42.2	21.9	7.7	10.5
Female	151069	89.6	1375	4395	595006	19.6	41.2	20.6	13.8	4.8
Race/ethnicity										
Hispanic	43576	70.6	559	2611	80304	18.7	31.8	13.3	26.1	10.1
White, Non- Hispanic	196514	78.0	793	4101	114734	13.0	32.9	24.6	8.4	6.4
Black, Non- Hispanic	35880	89.3	1390	4416	805019	19.6	43.6	21.6	19.8	9.7
Health insurance status										
< 65, Any private	183033	88.0	1032	3290	529727	19.5	69.6	3.5	3.6	3.9
<65, Public only	39230	83.7	645	3863	126917	11.1	0.0	17.6	62.6	8.7
<65, uninsured	36445	56.8	490	1856	38404	49.2	0.0	0.0	0.0	50.8
65+, Medicare only	10371	96.0	3840	8527	84864	22.8	0.0	61.9	0.0	15.3
65+, Medicare and private	22232	97.7	4105	8827	191769	17.0	30.2	48.9	0.4	3.6
65+, Medicare and other public	4691	95.5	4902	11521	51597	8.3	0.0	56.7	30.6	4.4
Poverty status										
Negative or poor	37915	77.1	890	4430	129472	13.8	13.7	24.3	37.0	11.1
Near-poor	13165	78.6	985	5127	53070	13.0	13.0	43.3	21.5	9.2
Low income	40868	79.9	1012	4550	148633	16.5	26.9	31.2	16.2	9.2
Middle income	92693	83.8	1056	3928	305048	18.8	46.8	18.7	9.4	6.3
High income	111543	90.4	1367	3841	387540	22.1	56.5	15.0	0.8	5.5
Region										
Northeast	54614	87.5	1233	3992	190694	17.8	44.0	20.1	10.9	7.2
Midwest	65761	87.6	1338	4448	256165	17.8	46.1	21.3	8.8	6.1
South	107124	83.2	1116	3966	353679	20.3	37.2	24.3	10.0	8.1
West	68686	81.9	1035	3968	223225	18.5	41.5	16.7	16.3	6.9
Perceived health status										
Excellent	90878	81.5	622	1783	132143	25.5	52.3	9.1	7.7	5.4
Very Good	97448	84.3	1052	2787	228819	23.7	50.4	13.7	6.7	5.5
Good	75707	85.1	1636	4706	303040	19.0	43.3	17.9	11.7	8.2
Fair	23118	93.0	3605	9191	197677	15.5	30.3	32.1	13.8	8.3
Poor	8553	96.7	9150	18577	153608	10.6	30.8	33.1	17.3	8.1

Source: U.S. Department of Health and Human Services, Medical Expenditure Panel Survey

distribution of expenses,							
Location	Population	% with an		Mean per Percent distribution of total exp			by source of
	(1000s)	expense	person with an	0.4.5		ment	Madiasid
			expense	Out of	Private	Medicare	Medicaid
United States			expense	pocket	insurance		
2003	290604	85.6	3600	19.6	42.4	19.9	9.2
2003	293527	84.7	3879	19.0	42.4	20.9	10.6
2004	296185	84.7	4082	18.8	41.6	21.1	11.2
Indiana	290100	04.7	4002	10.0	41.0	21.1	11.2
2003	6179	87.6	3032	25.9	32.9	13.9	17.9
2003	6176	87.2	3794	17.3	33.1	38.5	5.0
2004	6188	81.6	4736	13.8	45.4	24.1	11.6
	0100	01.0	4/30	13.0	40.4	24.1	11.0
Michigan 2003	10009	89.1	3977	15.5	49.0	21.2	9.3
2003	10009	88.2	4606	14.6	54.9	19.7	6.7
2004	101087	89.5	4354	14.0	49.5	24.5	7.2
Ohio	10100	09.5	4334	14.1	49.5	24.5	1.2
2003	11399	87.2	4184	14.2	54.7	17.5	4.4
2003	11342	86.6	4265	17.7	52.1	16.9	6.7
2005	11480	88.2	4761	16.4	42.9	25.1	12.4
Kentucky	11400	00.2	4701	10.4	42.3	25.1	12.4
2003	4158	88.5	4065	20.8	33.4	27.5	9.0
2003	4145	83.7	4178	23.0	34.2	22.8	13.1
2005	4113	87.9	4089	20.3	34.2	22.4	16.0
Illinois	7110	07.5	+003	20.0	J4.2	22.7	10.0
2003	12779	83.3	4175	18.4	40.7	27.3	3.9
2003	12700	85.9	4004	18.5	50.7	17.3	5.4
2005	12725	83.0	4402	22.6	49.5	17.3	6.2
Wisconsin	12720	00.0	7702	22.0	40.0	17.0	0.2
2003	5549	89.8	3925	16.7	48.9	16.3	4.2
2003	5465	91.6	4004	15.8	50.9	15.1	6.6
2005	5562	89.3	4690	17.7	45.9	19.1	7.2
Missouri	0002	00.0	1000	11.1	10.0	10.1	1.2
2003	5692	86.9	4237	18.5	41.8	27.9	7.9
2004	5710	88.0	3042	22.4	38.7	17.2	14.1
2005	5756	87.4	4291	21.0	31.1	26.2	13.2

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component

			ercent of persons with I percent of total paid of	
·	States, India	na, and surrounding	states, 2003-2005	
Location	Population	Percent with an	Mean per person	Percent of total
	(1,000s)	expense	with an expense	paid out of pocket
United States				
2003	290604	72.3	860	17.3
2004	293527	71.3	1046	15.9
2005	296185	71.3	1071	16.7
Indiana				
2003	6179	75.1	649	19.7
2004	6176	74.2	858	20.0
2005	6188	64.7	1286	10.3
Michigan				
2003	10009	74.7	1043	11.6
2004	10067	73.9	1251	12.4
2005	10108	76.4	1142	13.3
Ohio				
2003	11399	75.8	734	16.1
2004	11342	72.8	863	16.4
2005	11480	73.8	956	15.7
Kentucky				
2003	4158	72.7	797	11.5
2004	4145	72.5	931	15.5
2005	4113	77.6	1008	16.4
Illinois				
2003	12779	68.9	809	18.9
2004	12700	71.1	1050	15.1
2005	12725	71.1	1012	18.6
Wisconsin				
2003	5549	77.3	1086	13.1
2004	5465	79.2	1291	9.8
2005	5562	75.0	1522	17.0
Missouri				
2003	5692	73.3	920	13.0
2004	5710	73.6	871	17.8
2005	5756	74.6	1231	17.9

2005575674.6123117.9Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality:Medical Expenditure Panel Survey Household Component

Table 8.67 Hospita	al inpatient ser	rvices-media			s per person v ted States, 20		es and distribu	ution of exper	nses by sourc	ce of
Population	Population	% with	Per pers	on with	Total	Percei	nt distribution of	of total expen	ses by sourc	e of
Characteristic	(in thous.)	expense	an exp	ense	Expenses			payment		
			Median	Mean	(in mill.)	Out of pocket	Private insurance	Medicare	Medicaid	Other
Total	296185	7.5	7306	14240	316271	3.8	41.1	37.7	10.6	6.9
Age in years										
Under 65	258708	5.8	6147	12827	193964	5.2	59.4	11.9	15.9	7.6
Under 5	19793	5.7	3448	10720	12163	4.5	36.2	15.3	37.3	6.7
5-17	53770	1.6	5970	17626	14692	3.1	57.9	0.1	31.5	7.5
18-44	111067	6.8	5907	10108	76239	7.8	62.0	6.6	16.9	6.7
45-64	74078	7.6	7884	16195	90871	3.6	60.5	17.8	9.8	8.4
65 and over	37477	18.9	10914	17254	122307	1.5	12.0	78.7	2.1	5.8
Sex										
Male	145116	5.7	8656	17079	141253	3.6	43.5	37.4	6.3	9.1
Female	151069	9.2	6618	12555	175018	3.9	39.1	37.9	14.0	5.1
Race/ethnicity										
Hispanic	43576	5.6	5550	10877	26748	5.8	35.1	19.0	30.4	9.7
White, Non-Hispanic	196514	8.0	8151	14841	232478	4.0	42.4	40.4	7.2	6.0
Black, Non-Hispanic	35880	8.6	5998	14827	45698	1.7	35.1	37.8	16.3	9.0
Health insurance										
status										
< 65, Any private	183033	5.5	6811	13621	137020	3.4	84.0	8.4	1.8	2.4
<65, Public only	39230	10.0	4984	11626	45527	7.5	0.0	25.4	62.4	4.7
<65, uninsured	36445	3.1	3916	9959	11417	18.5	0.0	0.0	0.0	81.5
65+, Medicare only	10371	18.5	11026	18825	36087	2.6	0.0	84.9	0.0	12.5
65+, Medicare and	22232	17.5	10739	16558	64241	1.2	22.9	73.2	0.1	2.5
private										
65+, Medicare and	4691	26.7	10780	17369	21721	0.4	0.0	85.5	11.2	3.0
other public										
Poverty status										
Negative or poor	37915	10.8	5550	11305	46126	2.5	16.2	34.9	33.4	13.0
Near-poor	13165	9.7	8610	17834	22673	1.6	8.2	70.4	14.9	4.8
Low income	40868	8.6	7634	15552	54659	4.5	25.0	45.6	16.7	8.2
Middle income	92693	7.1	7080	13305	87853	4.3	51.6	33.3	5.4	5.4
High income	111543	6.0	8305	15569	104961	4.0	58.7	31.5	0.6	5.2
Region										
Northeast	54614	7.4	6653	13762	55310	3.1	45.8	35.1	11.3	4.7
Midwest	65761	8.1	8576	14978	79299	4.1	47.4	34.9	8.2	5.4
South	107124	7.9	6687	14054	118597	4.5	32.9	44.0	9.9	8.7
West	68686	6.5	7561	14144	63065	2.7	44.2	31.7	14.2	7.2
Perceived health status										
Excellent	90878	3.4	5329	8233	25336	6.1	51.4	19.8	15.1	7.6
Very Good	97448	5.3	6275	10039	51587	4.0	55.8	27.5	9.5	3.1
Good	75707	8.4	7441	13670	87243	3.2	47.7	34.1	6.3	8.7
Fair	23118	18.6	8170	17429	74811	4.1	29.4	50.0	9.9	6.7
Poor	8553	35.6	11476	22813	69543	3.6	30.4	41.7	16.4	7.8

Source: U.S. Department of Health and Human Services, Medical Expenditure Panel Survey

Table 8.68 Emerg	ency room se	rvices-medi			es per person ited States, 2		ses and distrib	oution of expe	enses by sou	irce of
Population	Population	% with	Per pers	on with	Total	Perce	nt distribution	of total exper	nses by sour	ce of
Characteristic	(in thous.)	expense	an exp		Expenses			payment		
			Median	Mean	(in mill.)	Out of pocket	Private insurance	Medicare	Medicaid	Other
Total	296185	12.9	445	871	33349	11.4	53.2	14.6	11.0	10.0
Age in years										
Under 65	258708	12.0	457	898	27895	12.5	60.4	3.9	12.7	10.5
Under 5	19793	17.5	308	583	2021	10.6	53.5	1.4	27.4	7.2
5-17	53770	10.1	347	622	3392	10.1	65.2	0.0	17.7	7.0
18-44	111067	12.0	500	964	12878	12.4	59.5	3.2	12.6	12.3
45-64	74078	11.9	535	1091	9603	13.9	61.4	6.7	8.0	10.0
65 and over	37477	19.2	420	758	758	5.5	16.0	69.1	2.1	7.3
Sex										
Male	145116	11.9	449	858	858	14.3	52.5	13.7	8.0	11.4
Female	151069	13.9	444	882	882	9.0	53.7	15.2	13.4	8.8
Race/ethnicity										
Hispanic	43576	11.1	348	752	752	13.5	40.2	10.3	24.0	12.0
White, Non-Hispanic	196514	13.1	471	882	882	10.5	55.5	16.3	8.0	9.7
Black, Non-Hispanic	35880	15.8	400	907	907	14.3	47.6	11.7	16.2	10.2
Health insurance										
status										
< 65, Any private	183033	11.1	544	1021	1021	8.7	81.3	1.7	1.5	6.8
<65, Public only	39230	19.3	285	618	618	5.3	0.0	15.7	68.9	10.1
<65, uninsured	36445	8.8	322	778	778	58.1	0.0	0.0	0.0	41.9
65+, Medicare only	10371	21.2	362	829	829	6.2	0.0	76.9	0.0	16.9
65+, Medicare and	22232	17.2	441	727	727	3.5	31.4	63.0	0.8	1.3
private										
65+, Medicare and	4691	24.6	428	720	720	10.5	0.0	74.1	10.8	4.5
other public										
Poverty status										
Negative or poor	37915	18.2	324	756	756	18.6	15.1	20.3	36.6	9.4
Near-poor	13165	16.5	359	632	632	10.0	23.8	23.1	24.7	18.3
Low income	40868	15.9	430	807	807	11.3	36.8	24.8	14.0	13.1
Middle income	92693	11.9	444	927	927	10.2	64.7	11.1	4.7	9.3
High income	111543	10.4	562	968	968	9.2	71.5	9.3	1.7	8.3
Region										
Northeast	54614	13.0	407	750	750	8.9	51.9	15.8	9.3	14.1
Midwest	65761	14.6	471	931	931	12.3	55.0	14.5	10.6	7.7
South	107124	13.4	427	822	822	12.9	48.3	17.0	12.8	9.0
West	68686	10.5	503	1009	1009	9.5	59.6	9.8	9.6	11.4
Perceived health										
status										
Excellent	90878	9.0	420	799	799	13.8	62.2	4.8	10.1	9.0
Very Good	97448	10.6	416	782	782	11.6	57.3	8.4	10.8	12.0
Good	75707	14.5	464	938	938	12.4	56.4	13.2	8.5	9.6
Fair	23118	23.3	507	989	989	8.8	39.3	27.8	15.3	8.9
Poor	8553	37.1	495	928	928	6.1	36.2	33.1	14.8	9.9

Source: U.S. Department of Health and Human Services, Medical Expenditure Panel Survey

Table 8.69 Percent of firms offering health benefits, United States, 1999-2007							
Year	Percent of Firms						
1999	66%						
2000	69%						
2001	68%						
2002	66%						
2003	66%						
2004	63%						
2005	60%						
2006	61%						
2007	60%						
% Change 1999-2007	-9.1%						

Source: The Kaiser Family Foundation and Health Research and Educational Trust, Employer Health Benefits, 2007 Annual Survey

Table 8.70 Avera	Table 8.70 Average percent increase in health insurance premiums compared to other indicators, United States, 2000-2007								
Year	Premiums	Inflation	Workers' Earnings						
2000	8.2%	3.1%	4.0%						
2001	10.9%	3.3%	4.0%						
2002	12.9%	1.6%	2.6%						
2003	13.9%	2.2%	3.0%						
2004	11.2%	2.3%	2.1%						
2005	9.2%	3.5%	2.7%						
2006	7.7%	3.5%	3.8%						
2007	6.1%	2.6%	3.7%						

Source: The Kaiser Family Foundation and Health Research and Educational Trust, Employer Health Benefits, 2007 Annual Survey

Table 8.71 Average monthly and annual premiums for covered workers, all plan types, Midwest and all regions, 2007							
Location Monthly Annual							
	Single	Family Single Family					
Midwest	\$376	\$1018 \$4511 \$12222					
All Regions	\$373	\$1009	\$4479	\$12106			

Source: The Kaiser Family Foundation and Health Research and Educational Trust, Employer Health Benefits, 2007 Annual Survey

Table 8.72 Average monthly and annual worker premium contributions paid by covered workers,								
all plan types, Midwest and all regions, 2007								
Location	Mor	Monthly Annual						
	Single	Family	Single	Family				
Midwest	\$62	\$237 \$739 \$2845						
All Regions	\$58	\$273	\$694	\$3281				

Source: The Kaiser Family Foundation and Health Research and Educational Trust, Employer Health Benefits, 2007 Annual Survey

Table 8.73 Average monthly wo	rker premium contributions paid by coregions, 2000-2007	overed workers, all plan types, all
Year	Single	Family
2000	\$28	\$135
2001	\$30	\$149
2002	\$39	\$178
2003	\$42	\$201
2004	\$47	\$222
2005	\$51	\$226
2006	\$52	\$248
2007	\$58	\$273

Source: The Kaiser Family Foundation and Health Research and Educational Trust, Employer Health Benefits, 2007 Annual Survey

ISSUE 52: PROPER NUTRITION

As one indicator of adult behavior related to nutrition, the CDC Behavioral Risk Factor Surveillance System Survey reports on the percentage of individuals who consume at least five servings of fruits and vegetables on a daily basis. In the United States, only 23.2% consume this amount of fruits and vegetables. The Indiana rate of 22.0% is even lower than the national rate. Between 2000 and 2005, these numbers made little progress, with no overall change in the U.S. and minimal increases in Indiana.

In terms of youth dietary behaviors, the follow are selected results from the Indiana sample of the 2005 CDC Youth Risk Behavior Survey:

- 84.3% of students ate fruit one or more times during the past seven days
- 82.3% ate other vegetables one or more times during the past seven days
- 15.5% of students ate five or more servings per day of fruits and vegetables during the past seven days

The table below provided expanded results from the Youth Risk Behavior Survey.

Table 8.74 Percent of adults	Table 8.74 Percent of adults consuming at least five servings of fruits/vegetables daily, Indiana								
	and national median, 2000-2005								
Year	Indiana U.S. median								
2000	20.0	23.2							
2002	21.7	22.6							
2003	22.0	22.6							
2005	22.0	23.2							
% Change 2000-2005	+10.0%	0.00%							

Source: CDC, Behavioral Risk Factor Surveillance System Survey

Table 8.75 Youth dietary behaviors, Indiana, 2003 and 2005								
Risk Factor	2003	2005	% Difference 2003					
			vs. 2005					
% of students who drank 100% fruit juices one or more	80.6%	78.3%	-2.3%					
times during the past seven days								
% of students who ate fruit one or more times during the	84.1%	84.3%	+0.2%					
past seven days								
% of students who ate green salad one or more times	64.6%	65.3%	+0.7%					
during the past seven days								
% of students who ate potatoes one or more times	77.0%	72.0%	-5.0%					
during the past seven days								
% of students who ate carrots one or more times during	46.1%	48.2%	+2.1%					
the past seven days								
% of students who ate other vegetables one or more	84.6%	82.3%	-2.3%					
times during the past seven days								
% of students who ate five or more servings per day of	20.3%	15.5%	-4.8%					
fruits and vegetables during the past seven days								
% of students who drank three or more glasses per day	21.1%	16.2%	-4.9%					
of milk during the past seven days								

Source: CDC, Youth Risk Behavior Survey

ISSUE 53: AFFORDABLE DENTAL CARE FOR LOW- TO MODERATE-INCOME INDIVIDUALS

In the United States, the annual mean dental service expense for persons with an expense was \$579 in 2005, which was an increase of \$39 over the rate in 2003. Approximately half of the cost of dental services is paid out of pocket. The 2005 Indiana rate was similar to the national rate and in the middle when compared to surrounding states. While the mean expense in the U.S. for low-income individuals was lower than the expense for high-income persons, those in lower economic brackets still had mean expenses from \$485 to \$519 each year. Overall, approximately 68% of adults in Indiana have annual dental appointments, which is slightly lower than the national rate of 70%.

Table 8.76	Dental services	s-median and			er person wit nited States,		s and distribu	tion of expens	ses by source	e of
Population Characteristic	Population (in thous.)	% with expense	Per person		Total Expenses	Perce	nt distribution	•	nses by sour	ce of
Characteristic	(III tilous.)	expense	Median	Mean	(in mill.)	Out of pocket	Priivate insurance	payment Medicare	Medicaid	Other
Total	296185	42.3	214	579	72476	49.2	42.5	0.4	4.5	3.4
Age in years	250100	72.0	217	0/0	72470	70.2	72.0	0.4	7.0	0.4
Under 65	258708	42.1	206	562	61124	44.2	47.4	0.0	5.0	3.4
Under 5	19793	17.2	110	222	753	18.0	49.5	0.0	31.3	1.3
5-17	53770	54.3	188	598	17461	43.1	45.5	0.0	8.7	2.7
18-44	111067	37.1	208	497	20489	41.6	50.0	0.0	4.5	3.8
45-64	74078	47.1	245	642	22419	48.3	46.5	0.0	1.6	3.6
65 and over	37477	43.9	272	690	11353	75.9	16.1	2.6	2.1	3.2
Sex	U.					. 0.0				0
Male	145116	39.0	210	553	31309	45.9	45.3	0.3	4.2	4.3
Female	151069	45.4	217	600	41167	51.7	40.4	0.5	4.8	2.7
Race/ethnicity		_			-	_			-	
Hispanic or Latino	43576	26.8	164	489	5701	52.2	36.8	0.9	6.3	3.9
Black-single race/not Hispanic	35880	29.3	150	508	5334	37.5	43.8	0.1	3.6	2.8
White, other, 2 or more races/not Hispanic	204139	48.0	225	594	58215	50.4	42.5	0.3	9.5	9.1
Health insurance status										
< 65, Any private	183033	49.8	220	593	53988	43.3	53.7	0.0	0.6	2.4
<65, Public only	39230	29.9	115	358	4199	39.6	0.0	0.1	64.1	6.3
<65, uninsured	36445	16.4	219	491	2937	81.7	0.0	0.0	0.0	18.3
65+, Medicare only	10371	35.6	310	832	3072	85.1	0.0	6.3	0.0	8.6
65+, Medicare and private	22232	52.3	264	651	7568	73.7	24.2	1.1	0.0	0.9
65+, Medicare and other public	4691	24.0	235	631	710	59.4	0.0	1.8	33.8	5.0
Poverty status										
Negative or poor	37915	26.5	160	485	4867	45.0	18.1	0.3	31.9	4.5
Near-poor	13165	25.5	175	547	1838	54.9	15.0	0.2	17.5	12.3
Low income	40868	29.8	173	519	6333	56.0	28.6	0.5	10.6	4.2
Middle income	92693	40.6	213	602	22616	48.3	45.4	0.7	2.7	3.0
High income	111543	55.6	233	593	36823	48.8	47.8	0.2	0.4	2.8

Region										
Northeast	54614	46.7	205	626	15948	50.2	39.4	0.2	5.2	4.9
Midwest	65761	47.0	210	545	16835	47.1	46.7	0.1	3.9	2.3
South	107124	37.2	193	521	20737	54.2	38.8	0.5	3.4	3.2
West	68686	42.3	257	652	18958	44.7	45.6	0.7	5.8	3.2
Perceived health status										
Excellent	90878	45.6	202	535	22177	46.8	46.8	0.1	3.6	2.7
Very Good	97448	45.5	217	582	25804	48.9	43.6	0.6	3.3	3.5
Good	75707	39.2	219	612	18184	51.3	40.4	0.2	5.2	2.9
Fair	23118	31.8	237	664	4884	51.7	30.3	1.1	9.7	7.2
Poor	8553	27.2	249	607	1412	54.6	26.0	1.6	13.8	3.9

Source: U.S. Department of Health and Human Services, Medical Expenditure Panel Survey

Table 8.77 Dental service				
expense, and percent of				
Location	Population	Percent with an	Mean per person	Percent of total
	(1,000s)	expense	with an expense	paid out of pocket
United States				
2003	290604	42.7	540	48.2
2004	293527	42.5	575	48.0
2005	296185	42.3	579	49.2
Indiana				
2003	6179	46.8	435	48.7
2004	6176	38.3	459	54.1
2005	6188	40.5	570	41.9
Michigan				
2003	10009	52.5	571	39.4
2004	10067	53.8	522	43.2
2005	10108	47.2	514	43.5
Ohio				
2003	11399	44.0	365	42.4
2004	11342	45.7	490	49.7
2005	11480	46.6	546	46.6
Kentucky				
2003	4158	40.6	503	47.3
2004	4145	32.1	657	58.7
2005	4113	35.7	572	50.2
Illinois				
2003	12779	41.4	480	48.9
2004	12700	45.1	501	51.4
2005	12725	39.0	592	51.4
Wisconsin				
2003	5549	56.7	436	42.2
2004	5465	57.3	560	38.3
2005	5562	58.9	623	46.3
Missouri				
2003	5692	35.3	532	45.5
2004	5710	44.0	496	41.8
2005	5756	41.7	476	46.5

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component

Table 8.78 Percent of adults with a dental visit within the past year, Indiana and national median,				
	1999-2006			
Year	Indiana	U.S. median		
1999	68.3	69.8		
2002 68.9 70.9				
2004 66.6 70.8				
2006 68.0 70.3				
% Change 1999-2006 -0.4% +0.7%				

Source: CDC, Behavioral Risk Factor Surveillance System Survey

ISSUE 54: SEXUALLY TRANSMITTED DISEASES/INFECTIONS

Trend data for U.S. and Indiana rates of sexually transmitted diseases/infections show varying results depending on the specific medical conditions. In Indiana, the number of reported Hepatitis C cases decreased by almost 63% between 2001 and 2006. Hepatitis B cases also showed a decrease between the time period of 1996 and 2005. Chlamydia rates in Indiana and the U.S. increased between 2000 and 2005. In 2005, the rate per 100,000 population was 321.6 in Indiana and 332.5 in the U.S.

Gonorrhea rates in Indiana have fluctuated but have shown an overall increase between 2000 and 2005. On the other hand, the U.S. rate per 100,000 population has decreased during that time period. As of 2005, the Indiana gonorrhea rate of 129.8 was higher than the national rate of 115.6.

The primary and secondary syphilis rates have slightly increased over the past several years. In 2005, there were 3.0 cases per 100,000 population in the U.S., compared to 1.0 per 100,000 in Indiana.

In 2005, the rate of newly reported AIDS cases was 6.5 per 100,000 population in Indiana, compared to 5.5 in 2006. The 2006 rate for the U.S. was 12.7 per 100,000 population. As of 2006, there had been 8,295 AIDS cases reported in Indiana since the beginning of the epidemic. Over 960,000 had been reported in the United States as of 2006.

Table 8.79 Number of reported Hepatitis C cases, Indiana, 2001-2006		
Year	Number of Cases	
2001	5682	
2002	6314	
2003	5130	
2004	6041	
2005	5370	
2006	5110	
% Change 2001-2006	-62.9%	

Source: Indiana State Department of Health, 2005 Indiana Report of Infectious Disease and HIV/STD Quarterly Report for December 2006

Table 8.80 Chlamydia rates per 100,000 population, Indiana and United States, 2000-2005				
Year	Indiana	U.S.		
2000	230.8	251.4		
2001	249.0	274.5		
2002	277.6	289.4		
2003	275.6	301.7		
2004	295.6	316.5		
2005	321.6	332.5		
% Change 2000-2005	+39.3%	+32.3%		

Source: Indiana State Department of Health, Epidemiology Resource Center

Table 8.81 Gonorrhea rates per 100,000 population, Indiana and United States, 2000-2005			
Year	Indiana	U.S.	
2000	107.1	128.7	
2001	113.8	126.8	
2002	120.1	122.0	
2003	107.8	115.2	
2004	109.8	112.4	
2005	129.8	115.6	
% Change 2000-2005	+21.2%	-10.2%	

Source: Indiana State Department of Health, Epidemiology Resource Center

Table 8.82 Primary and secondary syphilis rates per 100,000 population, Indiana and United States, 2000-2005			
Year	Indiana	U.S.	
2000	5.9	2.1	
2001	2.5	2.1	
2002	1.0	2.4	
2003	0.8	2.5	
2004	1.0	2.7	
2005	1.0	3.0	
% Change 2000-2005	-83.1%	+42.9%	

Source: Indiana State Department of Health, Epidemiology Resource Center

Table 8.83 Rates of total HIV-positive, alive, and without AIDS & total AIDS cases alive, Indiana 2002-2006, point prevalence*			
Year	Total HIV+, Alive, & w/out AIDS	Total AIDS Cases Alive	
2002	60.44	52.58	
2003	61.56 58.82		
2004	59.33	59.06	
2005 59.13 62.12			
2006	63.46 74.08		
% Change 2002-2006	+5.0%	+40.9%	

Source: Indiana State Department of Health, December Epidemiology Newsletters

Table 8.84	Table 8.84 Reported AIDS cases and annual rates (per 100,000 population), Indiana and surrounding states, 2005, 2006, and cumulative						surrounding
1 1'	1 00	0.5	,		and cumulative	Out and Indiana	
Location	20	05	20	06		Cumulative*	
	No.	Rate	No.	Rate	Adults or	Children (<13	Total
					adolescents	years)	
Indiana	407	6.5	346	5.5	8239	56	8295
Michigan	821	8.1	672	6.7	14941	113	15054
Ohio	753	6.6	767	6.7	14957	138	15095
Kentucky	249	6.0	207	4.9	4600	32	4632
Illinois	1886	14.8	1382	10.8	33620	282	33902
Wisconsin	122	2.2	217	3.9	4513	33	4546
Missouri	385	6.6	469	8.0	11016	61	11077
U.S.	40123	13.5	37911	12.7	952221	9094	961315

*From the beginning of the epidemic through 2006 Source: CDC, HIV/AIDS Surveillance Report

Table 8.85 Number of reported cases of Hepatitis B, Indiana, 1996-2005		
Year	No. of Cases	
1996	148	
1997	89	
1998	101	
1999	77	
2000	92	
2001	77	
2002	85	
2003	71	
2004	80	
2005	57	
% Change 1996-2005	-61.5%	

Source: IN State Dept. of Health, Epidemiology Newsletters & Annual Reports of Infectious Diseases

ISSUE 55: PREVENTIVE HEALTH CARE

The CDC and Indiana Department of Health provide data on indicators that shed light on the level of preventive health care that occurs in the state and nation. In terms of prenatal care, the percentage of mothers in Indiana who received 1st trimester prenatal care between 2001 and 2005 remained consistent during that time period. Approximately 79% of mothers received 1st trimester prenatal care in 2005. Individual county percentages also showed little change over the five-year period. In 2005, all five counties in the study had higher rates than Indiana.

Smoking during pregnancy is another indicator of the steps mothers take to ensure healthy development of their unborn children and for the early childhood years. In 2005, almost 18% of mothers reported smoking during pregnancy. This rate showed an overall decrease between 2001 and 2005. Rates for 2005 varied by county, with Spencer having the highest rate at 24% and Warrick having the lowest at 13.9%.

An examination of the Kotelchuck Index for Indiana, which measures the adequacy of prenatal care utilization, shows that there was a minimal increase between 1996 and 2005 in the percentage of individuals who fell in the Adequate Plus category. This category represents the best level of care utilization. Similarly, the percentage of individuals in the inadequate category also has shown a small overall increase. In general, there was little change in the adequacy ratings for prenatal care utilization in Indiana.

In terms of low birthweight infants, the percentage for 2005 is slightly higher than the previous ten years. The rate of 8.3% signifies the second straight year the rate has risen over 8%. During the same time period, the percentage of very low birthweight infants remained unchanged. One note of concern is that African American infants are twice as likely as other groups to be low or very low birthweight. Rates for African American infants have been consistent for the past ten or more years.

Between 1996 and 2005, the percentage of 2-year-old children in Indiana who received the combined series 4:3:1:3:3 increased from 56.7% to 78.1%. Likewise, a larger percentage of children received the combined series 4:3:1:3:3:1 in 2005, as compared to previous years.

Three individual indicators signify somewhat downward trends overall. First, as a primary form of health care for women, the percentage of women age 40 or older without a mammogram in the past two years has fluctuated recently. While a comparison of 1999 to 2006 data indicates a decrease in the number without a mammogram, a closer inspection of the data for Indiana shows a changing rate that hovers around 30%. In the U.S., the rate has been consistently around 24-25% since 2000.

Next, in 2005, 38% of adults in Indiana and 35.6% of adults in the U.S. reported being told that their blood cholesterol was high. Both rates represent an overall increase between 1999 and 2005.

Further, 26.2% of adults in Indiana reported being told in 2005 that their blood pressure was high, which was slightly higher than the national rate of 25.5%. While these rates have not dramatically increased over the past several years, they also have not decreased. Over a quarter of all adults have consistently indicated they were informed of high blood pressure problems. It should be noted that the cholesterol and blood pressure figures are only for individuals who were aware of such readings and not for those who had not recently had basic, routine medical screenings.

Table 8.86 Percent of mothers who reported smoking during pregnancy, Indiana, 2001-2005				
Year	Percent of Mothers			
	Total	White	Black	
2001	20.2	21.0	15.6	
2002	19.1	19.9	15.2	
2003	18.5	19.1	15.2	
2004	18.0	18.8	14.4	
2005	17.9	18.7	14.0	
% Change 2001-2005	-11.4%	-11.0%	-10.3%	

Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids Count, Annie E. Casey Foundation

Table 8.87 Percent of mothers who reported smoking during pregnancy, Gibson County and Indiana, 2001-2005			
Year	Gibson	Indiana	
2001	26.0%	20.2%	
2002	24.0%	19.1%	
2003	23.5%	18.5%	
2004	22.1%	18.0%	
2005	19.7%	17.9%	
% Change 2001-2005	-24.2%	-11.4%	
2005 State Rank*	63 rd		

^{*}Higher rank equals higher percent of mothers who smoked during pregnancy
Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids
Count, Annie E. Casey Foundation

Table 8.88 Percent of mothers who reported smoking during pregnancy, Posey County and Indiana, 2001-2005			
Year	Posey	Indiana	
2001	19.3%	20.2%	
2002	22.7%	19.1%	
2003	22.3%	18.5%	
2004	20.9%	18.0%	
2005	15.9%	17.9%	
% Change 2001-2005	-17.6%	-11.4%	
2005 State Rank*	74 th		

^{*}Higher rank equals higher percent of mothers who smoked during pregnancy
Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids
Count, Annie E. Casey Foundation

Table 8.90 Percent of mothers who reported smoking during pregnancy, Spencer County and			
	Indiana, 2001-2005		
Year	Spencer	Indiana	
2001	21.6%	20.2%	
2002	19.8%	19.1%	
2003	17.2%	18.5%	
2004	20.9%	18.0%	
2005	24.0%	17.9%	
% Change 2001-2005	+11.1%	-11.4%	
2005 State Rank*	42 nd		

^{*}Higher rank equals higher percent of mothers who smoked during pregnancy
Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids
Count, Annie E. Casey Foundation

Table 8.91 Percent of mothers who reported smoking during pregnancy, Vanderburgh County and Indiana, 2001-2005		
Year	Vanderburgh	Indiana
2001	23.7%	20.2%
2002	22.8%	19.1%
2003	21.3%	18.5%
2004	21.1%	18.0%
2005	21.5%	17.9%
% Change 2001-2005	-9.3%	-11.4%
2005 State Rank*	54 th	

^{*}Higher rank equals higher percent of mothers who smoked during pregnancy

Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids Count, Annie E. Casey Foundation

Table 8.92 Percent of mothers who reported smoking during pregnancy, Warrick County and Indiana, 2001-2005		
Year	Warrick	Indiana
2001	16.3	20.2%
2002	16.1	19.1%
2003	15.1	18.5%
2004	15.4	18.0%
2005	13.9	17.9%
% Change 2001-2005	-14.7%	-11.4%
2005 State Rank*	82 nd	

^{*}Higher rank equals higher percent of mothers who smoked during pregnancy

Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids Count, Annie E. Casey Foundation

Table 8.93 Percent of mothers who received	1 st trimester prenatal care, Indiana, 2001-2005
Year	Percent of Mothers
2001	78.8%
2002	80.5%
2003	80.6%
2004	79.3%
2005	78.9%
% Change 2001-2005	+0.1%

Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids Count, Annie E. Casey Foundation

Table 8.94 Percent of mothers who received 1 st trimester prenatal care, Gibson County and Indiana, 2001-2005		
Year	Gibson	Indiana
2001	83.8%	78.8%
2002	82.4%	80.5%
2003	86.3%	80.6%
2004	86.8%	79.3%
2005	86.5%	78.9%
% Change 2001-2005	+3.2%	+0.1%
2005 State Rank*	14 th	

^{*}Higher rank equals higher percentage of mothers

Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids Count, Annie E. Casey Foundation

Table 8.95 Percent of mothers who received 1 st trimester prenatal care, Posey County and Indiana, 2001-2005		
Year	Posey	Indiana
2001	88.1%	78.8%
2002	85.9%	80.5%
2003	86.4%	80.6%
2004	87.0%	79.3%
2005	87.7%	78.9%
% Change 2001-2005	-0.5%	+0.1%
2005 State Rank*	9 th	

^{*}Higher rank equals higher percentage of mothers

Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids Count, Annie E. Casey Foundation

Table 8.96 Percent of mothers who received 1 st trimester prenatal care, Spencer County and Indiana, 2001-2005		
Year	Spencer	Indiana
2001	81.5%	78.8%
2002	85.8%	80.5%
2003	87.5%	80.6%
2004	80.4%	79.3%
2005	83.7%	78.9%
% Change 2001-2005	+2.7%	+0.1%
2005 State Rank*	37 th	

^{*}Higher rank equals higher percentage of mothers

Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids Count, Annie E. Casey Foundation

Table 8.97 Percent of mothers who received 1 st trimester prenatal care, Vanderburgh County and Indiana, 2001-2005		
Year	Vanderburgh	Indiana
2001	85.2%	78.8%
2002	85.1%	80.5%
2003	86.2%	80.6%
2004	85.8%	79.3%
2005	82.6%	78.9%
% Change 2001-2005	-3.1%	+0.1%
2005 State Rank*	43 rd	

^{*}Higher rank equals higher percentage of mothers

Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team; Kids Count, Annie E. Casey Foundation

Table 8.98 Percent of mothers who received 1 st trimester prenatal care, Warrick County and Indiana, 2001-2005							
Year	Warrick	Indiana					
2001	88.9%	78.8%					
2002	88.1%	80.5%					
2003	87.7%	80.6%					
2004	90.0%	79.3%					
2005	87.6%	78.9%					
% Change 2001-2005	-1.5%	+0.1%					
2005 State Rank*	10 th						

^{*}Higher rank equals higher percentage of mothers

Source: IN State Depart. of Health, Epidemiology Resource Center, Data Analysis Team; Kids Count, Annie E. Casey Foundation

Table 8.99 Percent of immunize	d 2-year-old children in India 4:3:1:3:3 or 4:3:1:3:3:1, 1996-	
Year	4:3:1:3:3	4:3:1:3:3:1
1996	56.7%	n/a
1997	62.7%	n/a
1998	68.8%	n/a
1999	65.3%	n/a
2000	72.0%	n/a
2001	71.1%	n/a
2002	76.0%	59.4%
2003	79.0%	62.3%
2004	79.0%	68.2%
2005	78.1%	69.9%
% Change 1996-2005	+37.7%	+17.7%*

*% change for 2002-2005

Source: U.S. Department of Health & Human Services, CDC, National Immunization Surveys

Table 8.100 Percent of females ≥ age 40 without mammogram in past two years, Indiana and national median, 1999-2006						
Year	Indiana	U.S.				
1999	32.5%	27.2%				
2000	27.0%	23.9%				
2002	26.5%	23.9%				
2004	30.8%	25.2%				
2006	28.4%	23.5%				
% Change 1999-2006	-12.6%	-13.6%				

Source: CDC, Behavioral Risk Factor Surveillance System Survey

Table 8.101 Percent of adults ever told blood cholesterol high, Indiana and national median, 1999-2005						
Year	Indiana	U.S.				
1999	31.6%	30.1%				
2001	30.1%	30.2%				
2003	35.1%	33.2%				
2005	38.0%	35.6%				
% Change 1999-2005	+20.3%	+18.3%				

Source: CDC, Behavioral Risk Factor Surveillance System Survey

Table 8.102 Percent of adults ever told blood pressure high, Indiana and national median, 1999- 2005						
Year	Indiana	U.S.				
1999	25.7	23.9				
2001	25.8	25.6				
2003	27.0	24.8				
2005	26.2	25.5				
% Change 1999-2005	+1.9%	+6.7%				

Source: CDC, Behavioral Risk Factor Surveillance System Survey

Table 8.103 Percent of infants born to mothers receiving prenatal care in the first trimester by race								
	and ethnicity, Indiana, 1996-2005							
Year			Percent of Infa	ınts				
	Total	White	Black	Hispanic	Non-Hispanic			
1996	78.5%	80.6%	61.6%	64.4%	79.0%			
1997	78.5%	80.3%	64.0%	64.7%	79.1%			
1998	78.7%	80.6%	63.9%	63.1%	79.4%			
1999	79.5%	81.3%	65.5%	62.9%	80.4%			
2000	80.0%	81.6%	67.1%	60.2%	81.3%			
2001	79.8%	81.4%	67.6%	61.9%	81.1%			
2002	80.5%	82.1%	68.6%	63.9%	81.9%			
2003	80.6%	82.1%	68.2%	64.6%	82.0%			
2004	79.3%	80.8%	67.1%	61.2%	80.9%			
2005	78.9%	80.8%	64.8%	62.5%	80.6%			
% Change 1996-2005	+0.5%	+0.2%	+5.2%	-3.0%	+2.0%			

Source: Indiana State Department of Health, PHSDD, Data Analysis Team, 2007

Table 8.104 Adequacy of prenatal care utilization (Kotelchuck Index)-all races/ethnicities, Indiana, 1996-								
2005								
Year		l	evel of Adequacy					
	Adequate Plus	Adequate	Intermediate	Inadequate	No Care			
1996	27.1%	46.5%	13.8%	11.7%	0.9%			
1997	28.9%	45.3%	13.1%	11.9%	0.9%			
1998	31.2%	43.5%	12.4%	12.0%	0.9%			
1999	31.1%	44.2%	12.4%	11.7%	0.8%			
2000	30.8%	43.7%	12.9%	11.8%	0.8%			
2001	31.0%	43.4%	13.0%	11.9%	0.8%			
2002	31.8%	43.6%	12.5%	11.4%	0.7%			
2003	31.8%	42.9%	13.2%	11.5%	0.6%			
2004	31.0%	42.4%	13.6%	12.3%	0.8%			
2005	32.4%	41.0%	13.6%	12.3%	0.7%			
% Change 1996-2005	+19.6%	-11.8%	-1.4%	+5.1%	-22.2%			

Source: Indiana State Department of Health, Maternal and Child Health (MCH), 2007

Table 8.105 Percent of	low birthweight* infants b	y birth year and race of m	nother, Indiana, 1995-2005				
Year	P	Percent Low Birthweight Infants					
	Total White Black						
1995	7.5%	6.8%	13.0%				
1996	7.6%	6.8%	13.8%				
1997	7.7%	7.0%	13.6%				
1998	7.9%	7.2%	13.5%				
1999	7.8%	7.2%	12.9%				
2000	7.3%	6.7%	12.7%				

2001	7.6%	7.0%	12.9%
2002	7.6%	6.9%	12.9%
2003	7.9%	7.2%	13.3%
2004	8.1%	7.4%	13.7%
2005	8.3%	7.6%	13.4%
% Change 1995-2005	+10.7%	+11.8%	+3.1%

*Low birthweight: under 2500 grams
Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team

Table 8.106 Percent of very low birthweight* infants by birth year and race/ethnicity of mother, Indiana,								
	1996-2005							
Year		Perce	ent of Very Low	Birthweight Infai	nts			
	Total	White	Black	Hispanic	Non-Hispanic			
1996	1.4%	1.2%	3.1%	1.7%	1.4%			
1997	1.4%	1.2%	2.8%	1.3%	1.3%			
1998	1.4%	1.2%	3.0%	1.3%	1.4%			
1999	1.5%	1.3%	3.1%	1.4%	1.5%			
2000	1.4%	1.2%	2.9%	1.0%	1.4%			
2001	1.4%	1.2%	2.9%	1.4%	1.4%			
2002	1.4%	1.2%	2.6%	1.2%	1.4%			
2003	1.4%	1.2%	3.3%	0.9%	1.5%			
2004	1.5%	1.3%	3.0%	1.3%	1.5%			
2005	1.5%	1.3%	3.3%	1.3%	1.6%			
% Change 1996-2005	+7.1%	+8.3%	+6.5%	-23.5%	+14.3%			

Source: Indiana State Department of Health, PHSDD, Data Analysis Team, 2007

Table	Table 8.107 Percent of live births by age of mother-all races/ethnicities, Indiana, 1995-2005								
Year		Age of Mother							
	10-14	15-17	18-19	20-24	25-29	30-34	35-39	40-44	45+
1995	0.3	5.3	9.2	28.3	28.2	20.2	7.4	1.2	0.0
1996	0.2	5.0	9.2	27.9	28.4	20.2	7.8	1.3	0.0
1997	0.2	5.0	8.9	27.7	28.9	19.9	8.0	1.2	0.1
1998	0.2	4.4	9.2	28.2	29.1	19.5	7.9	1.4	0.1
1999	0.2	4.1	8.9	28.4	29.0	19.6	8.2	1.4	0.1
2000	0.1	3.8	8.5	29.0	28.6	19.8	8.4	1.6	0.1
2001	0.2	3.5	8.2	29.0	28.5	20.7	8.4	1.5	0.1
2002	0.2	3.5	7.8	29.2	28.4	20.8	8.5	1.6	0.1
2003	0.2	3.3	7.6	29.0	28.8	21.1	8.4	1.7	0.1
2004	0.1	3.2	7.7	28.6	29.0	20.9	8.5	1.8	0.1
2005	0.1	3.2	7.7	28.6	29.6	20.4	8.5	1.8	0.1

Source: Indiana State Department of Health, Epidemiology Resource Center, Data Analysis Team

ISSUE 56: COST OF PRESCRIPTION MEDICINE

An analysis of the data related to prescription medicine costs shows that approximately 60% of Indiana residents had a prescription expense in 2005. This represents a notable decrease from 2003, when approximately 70% had an expense. Additionally, the mean expense per person in 2005 was \$1,126, and 35.6% of the total was paid out of pocket. Indiana's percent-with-an-expense figure is lower than the U.S. and all surrounding states. The out-of-pocket percentage also is lower than surrounding areas and the nation. These rates may be reflective of the efforts made by the state of Indiana to increase the affordability of prescription medicines through its HoosierRx program. By the end of 2005, over 33,000 individuals had enrolled in the program, with almost 28,000 actually receiving prescription benefits.

Table 8.108 Pres	cription medic	cines-mediar			s per person v		ses and distri	bution of expe	enses by sou	rce of
Population	Population	% with	Per pers		Total	Percent distribution of total expenses by source of				
Characteristic	(1,000s)	expense	an exp		Expenses			payment	,	
		·	Median	Mean	(in mill.)	Out of pocket	Private insurance	Medicare	Medicaid	Other
Total	296185	63.1	371	1140	213166	38.8	38.9	2.8	13.8	5.7
Age in years										
Under 65	258708	59.1	255	933	142592	35.2	44.4	0.6	16.0	3.9
Under 5	19793	54.1	56	195	2087	29.8	30.7	0.0	38.8	0.7
5-17	53770	47.9	91	471	12125	20.5	50.8	0.0	27.6	1.0
18-44	111067	54.9	203	667	40656	34.6	43.8	0.2	18.0	3.4
45-64	74078	74.8	761	1583	87724	37.7	44.1	0.8	12.8	4.5
65 and over	37477	91.1	1336	2066	70574	46.0	27.8	7.2	9.5	9.4
Sex										
Male	145116	56.2	332	1040	84840	36.6	37.8	2.5	12.5	10.7
Female	151069	69.8	403	1217	128326	40.3	39.7	2.9	14.7	2.4
Race/ethnicity										
Hispanic	43576	46.5	154	753	15256	38.5	24.6	3.5	27.9	5.5
White, Non-Hisp.	196514	69.5	444	1220	166676	39.8	42.0	2.7	10.0	5.6
Black, Non-Hisp.	35880	54.5	288	1066	20859	34.2	25.9	2.0	31.6	6.2
Health insurance										
status	402022	60.4	070	000	400000	24.0	C4 F	0.2	4.7	4.7
< 65, Any private	183033	63.4	279	886	102866	34.8	61.5	0.3	1.7	1.7
<65, Public only	39230	59.0	186	1364	31568	23.8	0.0	1.7	66.6	7.8
<65, uninsured	36445 10371	37.3 90.0	158 1245	600 1853	8158 17290	84.3 66.4	0.0	0.0 13.3	0.0	15.7
65+, Medicare only							0.0		0.0	20.3
65+, Medicare and private	22232	92.4	1316	2085	42847	42.5	45.8	4.8	0.8	6.1
65+, Medicare and other public	4691	90.0	1727	2465	10402	26.9	0.0	7.0	61.6	4.5
Poverty status										
Negative or poor	37915	57.1	297	1285	27818	30.6	10.9	2.3	49.5	6.7
Near-poor	13165	58.7	397	1323	10235	37.2	13.9	3.7	36.7	8.4
Low income	40868	59.8	357	1355	33122	38.7	30.9	4.4	18.8	7.3
Middle income	92693	61.7	329	1086	62144	39.8	44.2	2.9	7.9	5.2
High income	111543	68.1	416	1051	79847	41.1	51.1	2.0	1.0	4.7
Region										
Northeast	54614	62.8	383	1335	45763	32.6	45.0	3.9	13.2	5.3
Midwest	65761	66.0	398	1154	50099	38.9	39.7	2.3	14.0	5.2
South	107124	64.5	408	1130	78141	41.9	36.8	1.8	13.1	6.5
West	68686	58.5	283	975	39163	39.9	35.1	4.1	16.0	4.9
Perceived health status										
	90878	F0.6	1.10	487	22417	38.2	40.4	2.1	6.9	4.4
Excellent Very Good	90878	50.6	142 299	808	48586	41.8	48.4 45.4	2.7	6.6	4.4 3.5
Very Good Good		61.7	535	1284			39.2	3.0	12.4	5.9
G000	75707	69.8	つづり	1284	67850	39.6	39. Z	3.0	12.4	5.9

Fair	23118	86.2	1205	2169	43211	40.5	28.2	3.0	21.3	7.0
Poor	8553	92.2	2180	3932	31007	30.5	36.3	2.6	23.0	7.6

Source: U.S. Department of Health and Human Services, Medical Expenditure Panel Survey

Table 8.109	Prescription medici	nes-percent of persor	ns with an Rx expense	e, mean expense per		
person with		percent of total paid o surrounding states, 2		tates, Indiana, and		
Location	Population	Percent with an	Mean per person	Percent of total paid		
(1,000s)		expense	with an expense	out of pocket		
United States	, ,	,	•	•		
2003	290604	64.4	950	44.9		
2004	293527	62.7	1037	42.2		
2005	296185	63.1	1140	38.8		
Indiana						
2003	6179	69.8	1198	41.6		
2004	6176	61.8	873	42.1		
2005	6188	60.1	1126	35.6		
Michigan						
2003	10009	69.4	972	35.8		
2004	10067	65.9	987	38.8		
2005	10108	67.8	1041	35.3		
Ohio						
2003	11399	69.3	1115	35.1		
2004			1182	41.7		
2005	11480	69.7	1317	36.1		
Kentucky						
2003	4158	73.2	1320	50.4		
2004	4145	70.1	1395	45.3		
2005	4113	75.3	1276	39.2		
Illinois						
2003	12779	60.0	982	54.7		
2004	12700	58.4	1103	45.1		
2005	12725	61.1	1241	41.8		
Wisconsin						
2003	5549	64.5	919	46.5		
2004 5465 67.7 971		41.4				
2005	5562	67.2	1025	34.6		
Missouri						
2003	5692	68.0	976	55.0		
2004	5710	66.4	1029	41.5		
2005	5756	66.8	1336	45.4		

Source: Center for Financing, Access, and Cost Trends, Agency for Healthcare Research and Quality: Medical Expenditure Panel Survey Household Component

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Appendix A
2007 Community Needs Assessment Survey

2007 Comprehensive Community Assessment Survey

Based on everything you know or have heard, please tell us how much you <u>agree</u> or <u>disagree</u> with both statements: "This issue is important in our community" and "This issue is being addressed well in our community."

Check the box that corresponds to what you think about the issues at this point in time. If you do <u>not</u> know what you think about an issue, please select the box under "Don't Know." Use the following scale when responding to the questions: **Strongly Disagree, Disagree, Agree, Strongly Agree, Don't Know.**

	Issue	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know
SO	CIAL SERVICE ISSUES		This issu	ue is im commu			This		eing add	dressed we	·II
1.	Recruitment and coordination of volunteers										
2.	Cooperation of community organizations in effectively addressing needs										
3.	Transitioning of ex-offenders into community and family										
4.	Availability of weekend/evening hours for human services										
AL	COHOL & DRUGS		This issuin our	ue is im commu			This		eing add commu	dressed we nity.	://
5.	Adult alcohol abuse										
6.	Underage tobacco use										
7.	Drug and alcohol related crimes										
8.	Adult drug use										
9.	Adult tobacco use										
10.	Underage alcohol use										
11.	Underage use of drugs other than alcohol or tobacco										
	Driving under alcohol/drug influence										
EC	ONOMY & FINANCIAL WELL BEING		This issu	ue is im commu			This	ssue is be in our (dressed we nity.	·II
13.	Availability of food and shelter for the homeless										
14.	Affordable child care										
15.	Families' understanding of finances, budgeting, and tax credits										
	Affordable and available care for the physically disabled										
17.	Availability of jobs for mentally and physically challenged individuals										
	Affordable in-home care for the elderly										
19.	Low- to moderate-income individuals not having funds for basic needs (e.g., adequate clothing, food, housing, and legal services)										
20.	Affordable and accessible public transportation										
CU	LTURAL DIVERSITY		This issu	ue is im commu			This		eing add	dressed we	ell ell
21.	Language barriers for non-English speaking individuals										
22.	Race relations										
23.	Integration and appreciation of individuals from different cultures										

	Issue	Strongly	Disagree	Agree	Strongly	Don't	Strongly	Disagree	Agree	Strongly	Don't		
		Disagree			Agree	Know	Disagree			Agree	Know		
FA	FAMILY LIFE		This issue is important in our community.					This issue is being addressed well in our community.					
24.	Child physical/mental abuse and neglect												
25.	Children with special mental and physical conditions												
26.	Children with behavioral problems												
27.	Lack of child support payments												
	Preparation and support for parenthood												
29.	Understanding the cycle of poverty that occurs in successive generations												
	Teenage sex, pregnancy, and parenthood												
	Support for care givers of the elderly, mentally ill, or physically disabled												
32.	Preparation and support for marriage and marital relations												
33.	Child sexual abuse												
34.	Parent involvement in child's education												
	Lack of safe, constructive opportunities for youth												
	Elderly abuse and neglect												
ED	UCATION & THE WORKFORCE		This issu in our	ie is imį commu			This		eing add commu	dressed we nity.	ell .		
37.	Number of skilled workers to fill available jobs												
38.	Students' completion of high school												
39.	Preparation of the unemployed to enter the workforce												
40.	Children prepared to enter kindergarten												
41.	Adult literacy												
42.	Preparation of young adults to enter the workforce												
VIC	DLENCE & CRIME		This issu in our	ie is imį commu			This		eing add commu	dressed we nity.	ell		
43.	School violence												
44.	Domestic violence												
45.	Violent crime												
46.	Gang activity												
47.	Youth violence and crime												
	Adult sexual victimization												
HE	ALTH		This issu in our	ie is imį commu			This		eing add commu	dressed we nity.	ell .		
49.	Child and adult obesity												
50.	Affordable and available care for mental health issues												
51.	Affordable and accessible health care for low- to moderate-income individuals												
52.	Proper nutrition												
53.	Affordable dental care for low- to moderate-income individuals												
54.	Sexually transmitted diseases/infections												
	Preventive health care												
56.	Cost of prescription medicine												

Respondent Characteristics

Zip code of residence: Geno	ler: □ Male □ Female							
<i>Age:</i> □ 18-24 □ 25-34 □ 35-44 □ 45-54 □ 55-64	□ 65+							
Marital Status: □ Married □ Single □ Widowed □ [Divorced							
Household Income: □ Below \$20,000 □ \$20,000-□ \$80,000-\$99,999 □ \$100,000								
Race/Ethnic Classification: □ White □ Black/African American □ Hispanic/Latino □ Asian □ American Indian/Alaska Native □ Native Hawaiian/Pacific Islander □ Other (please specify:)								
Education: □ Grade school □ Some high school □ High school grad □ Vocational school grad □ College grad □ Post graduate								
Number of children under the age of 18 living in hom	ne:							
Number of children under the age of 18 enrolled in:	Public school Private school Home school Preschool/daycare Other (please specify:)							
you think they a 1 = most important Social S Alcohol of Econom Cultural Family L	y & Financial Well Being Diversity ife on & the Workforce							
<u>Addition</u>	al Questions							
1. Are you aware of 2-1-1 First Call for Help? Y	es □ No							
2. What is the most disturbing issue you have hea	ard about recently?							
3. Where did you hear about the issue indicated a	above? Newspaper TV Radio Internet Family/friend Other:							