

GOALS FOR THE COMMON GOOD

UNITED WAY OF ALLEN COUNTY

FUNDING PLAN 2009 -2011

Throughout our culture cracks exist that the vulnerable often fall through. Whether a child, a single mother, an illiterate man, a homeless family or disabled senior; barriers to opportunity, wellness and independence impact the individual and our society. Because personal and community outcomes are interconnected, all of us have a role in building and maintaining strong social systems of care. Everyone benefits when everyone has access to a quality education, a stable job, sufficient income to provide for one's family through retirement, and good health. When we advance the common good, we create opportunity for others, our collective community and ourselves.

Advancing the common good is less about helping one person at a time and more about changing systems to help everyone. Working with many partners, United Way continually looks for the most effective ways to help people gain access to educational, economic and health-related opportunities. Education, income and basic needs create interdependent building blocks for personal and community prosperity. Remove any one of these building blocks and the other two topple.

Education

Education is the foundation required to earn a livable wage, provide for your family and live a healthy productive life. Changes in our economy are driving the demand for more highly educated workers. Students now need at least two years of postsecondary education to fill jobs that increasingly requires advanced skills (*Education Commission of the States; 2005*). The Bureau of Labor Statistics projects that 60% of jobs created between now and 2010 will require at least some post secondary education. In 2002, 18.6% of Northeast Indiana jobs required an Associates Degree or higher, and by 2012 that number is expected to rise to 33% (*BLS, Indiana DWD, and Workforce Associates*).

Currently, nearly 45% of Allen County residents have a high school diploma or less. A significant portion of this population will be unable to earn livable wages in the emerging economy. A high school drop out, or even a graduate with no further education, will have few opportunities for a career that will support a family or allow saving for retirement, thus placing long term pressure on an already strained social service system.

Population 25 years and over	Total: 221,617	% of Pop.
Less than 9th grade	7,860	3.55%
9th to 12th grade, no diploma	18,347	8.28%
High school graduate (includes GED)	72,898	32.89%
Some college, no degree	47,768	21.55%
Associate's degree	19,284	8.70%
Bachelor's degree	36,500	16.47%
Graduate or professional degree	18,960	8.56%
Percent high school graduate or higher	88.20%	
Percent bachelor's degree or higher	25.00%	
Percent high school diploma or less	44.70%	
Percent with a 2 Year Degree or more	33.70%	

Census; American Community Survey 2006

Gaining higher levels of education is intertwined with a student's socioeconomic status. In Allen County, about 35% of low income students will not graduate (EACS: 34.5%, FWCS: 35.3%, Indiana: 40%, SACS & NACS not measurable). Among higher income students the rates for all districts are comparable (EACS; 84.6%, FWCS: 86.9%, NACS: 93.5%, SACS: 92.3%). Dropping out of school is a pivotal factor in the cycle of poverty. With limited job opportunities, dropouts risk slipping into poverty. Nationally, 4 out of 10 dropouts will receive public assistance (*Bill and Melinda Gates Foundation, 2001*). Ultimately, many become low-income parents themselves, unable to provide the resources or support necessary to break the cycle of poverty for their own children. Failure to intervene and alter the dropout rate is nothing short of a formula for increased poverty and economic despair.

Another factor in achieving success in school is the racial/ethnic disparity that exists in education. As reported in the 2000 Census, an alarming 50.7% of Hispanic males and 34.9% of Hispanic females had not graduated from high school. Moreover, almost twice the percentage of blacks (23.5%) had not graduated from high school as had whites (12.4%). Not only do these numbers impact the economic mobility of minority families, it also has a dramatic impact on worker readiness in our community.

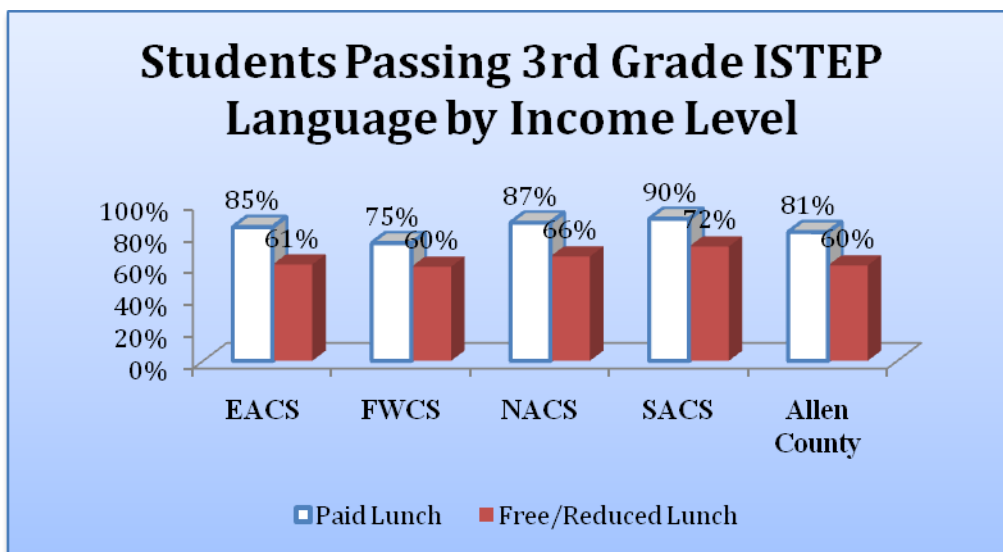
Improving graduation rates begins well before high school. Long before students drop out or adults become impoverished, they were likely children struggling to read. By high school, students at risk of dropping out are already well behind academically. One third of all entering ninth graders need extra help in reading and a fourth of all high school students are reading at "below basic" levels (*Steinberg & Almeida; 2004*). Low income students fare the worst: according to a recent report from the U.S. Department of Education, Office of Vocational and Adult Education, students in high-poverty middle and high schools continue to read two to three years behind grade level.

Unable to read well, many fall further and further behind, ultimately falling through the cracks. They are among the 1 million students who drop out each year, costing our nation over \$240 billion in lost earnings, forgone tax revenue, and increased welfare expenditures. These are costly consequences for communities and individuals. In fact, the most expensive burden we place upon our society is failing to help all students read well (*Fielding, Kerr, Rosier, 1998*). Poor literacy development has lifelong implications for children and for communities. Those who cannot read become the largest identifiable group of those we incarcerate, and to whom we provide public assistance, housing, medical and social services (*Fielding, Kerr, Rosier, 1998*).

The economic consequences of illiteracy are profound. American businesses spend more than \$60 billion annually on employee training, much of that for remedial reading, writing and mathematics. Fifty percent of all adults in correctional institutions cannot read or write at all. Annual health care costs in the US are four times higher for individuals with low literacy skills (*Pro Literacy Worldwide*), and among adults at the lowest level of literacy proficiency, 43% live in poverty (*Fielding, Kerr, Rosier, 1998*). The cost to society is substantial, but the cost of unrealized potential for an individual is immeasurable.

Illiteracy is not born of laziness or disinterest. Its roots are planted early in life, and for illiterate adults, third grade was likely their last hope of catching up. Through third grade children are learning to read, after third grade they are reading to learn. Of students who cannot read by the end of third grade, 74% never catch up. “They are effectively banished to the fringes of our information society by age nine (*Fielding, Kerr, Rosier, 1998; 6*.)” Their social and economic destiny defined by words they cannot read.

In Allen County, 40% of low-income third graders are not passing the language portion of ISTEP, and almost 20% of middle-higher income students are not passing. In total, over 1,100 third graders are missing this important gateway to future learning and opportunity. For each year we allow the literacy door to close on 1,100 children; we are adding thousands to our future welfare rolls, prison populations, and perpetuating a cycle of poverty for thousands of families.



Teaching children to read cannot rest solely on our education system. Learning to read starts well before Kindergarten, and issues related to poverty are far beyond the control of schools. The two most significant, and related, factors in predicting academic success are: a mother's educational attainment and household income; neither of which schools can influence.

In Allen County, 36% of babies are born to single women. A staggering 59% of the households headed by these mothers will live in poverty during the first five years of the children's lives. Born into a life of limited resources, these children already face barriers to literacy development and school success. They were more likely to have been born premature or at a low birth weight. They likely have fewer books in their home, attend poor quality childcare, and have a mother with limited education.

BIRTH OUTCOMES

Improving literacy must start with improving birth outcomes. One in every eight babies in Allen County is born too soon, 50% will require special education upon entering school. This translates into 300 children entering school each year requiring costly special education services. Women with the poorest birth outcomes are often the poorest in our community: single mothers, those with low levels of education, teen mothers, and African American mothers. Only 68% of African American women obtain first trimester prenatal care, compared to 82% of white women. African American women are also twice as likely to have low birth weight babies (*Indiana Department of Health; 2007*).

In the absence of early prenatal care, babies face greater risks due to low birth weight, increased rates of stillborn birth and mortality within the first year of life (U.S. Public Health Service). In addition, serious physical disability, grade repetition, learning disabilities and lower levels of intelligence are more common (*Brooks-Gunn & Duncan, 1997*). Babies born with perinatal complications and into poverty have been found to be at double risk of long-term consequences (*Brooks-Gunn et al, 1999*).

BIRTHS ALLEN COUNTY 2002					
	Births	Teen Births	Births to Unmarried Mothers	Prenatal Care First Trimester	Low Birth Weight Babies
Total	100%	10%	36.3%	83.5%	8.4%
White	83.9%	8.1%	29.4%	86.4%	7.2%
Black	13.6%	22.1%	80.7%	66.2%	15.3%
Hispanic	7.6%	15.4%			

Source: Indiana State Dept Health

HEALTH CARE FOR CHILDREN

As children develop, ongoing health care supports success in school. Children who lack health insurance are more likely to suffer from routine, preventable illnesses, and poor health can affect school achievement. Lack of insurance is the main barrier to routine care. According to the Indiana Covering Kids & Families website over 14% of Indiana residents do not have health insurance, 9% of whom are children. Of those uninsured children, 78% are members of working families. From 1999 to 2005, Indiana had the nation's highest percentage drop in workers who receive employer-sponsored health insurance and the highest per capita rate of individual medical bankruptcies in the nation.

The primary source of access to health care for low-income children is the Children's Health Insurance Program (CHIP). This program provides coverage to children whose families earn less than 150% of poverty and with a premium for families with incomes up to 200% of poverty. Indiana's CHIP is referred to as Hoosier Healthwise (HHW). This program serves children and pregnant women. An essential tool in increasing access to early prenatal care, the pregnancy provisions in HHW are problematic.

Recognizing that prenatal care is the front line in reducing the incidence of poor birth outcomes, the state legislature passed House Enrolled Act 1678 that allowed for pregnant women to be presumed eligible for HHW prenatal services (based on initial information given during the application process). With eligibility determination routinely taking 45 – 90 days, the ability of low-income women to access care during the first trimester of pregnancy is compromised without this provision. However, in April of 2008 the Family and Social Services Administration stated that this legislation would not be implemented.

EARLY CHILDHOOD EDUCATION

Quality early childhood education is also critical to early literacy development and school success. In 2000, there were 29,000 children under the age of six living in Allen County. With 63% of their parents working, child care is essential. Yet, there are only 5,739 slots available through licensed providers. Even when licensed, many programs fail to provide quality early literacy experiences. In fact, over 80% of preschool and after-school programs serving low income children have no age appropriate books (*Neuman; 2001:3*). With the high cost of quality childcare, low-income families are often not able to give their young children this early advantage for future school success.

Early Childhood Providers in Allen County (Indiana Youth Institute; Kids Count)		
	2006	2007
# of Licensed Child Care Homes	154	168
# of Registered Child Care Ministries	34	36
# of slots Available for Children in Licensed Child Care	5,526	5,739
# of Licensed Child Care Slots per 100 Children, Age 0-4	20.9	21.8
# of Children Receiving Child Care Vouchers	4,405	4,592
# of Monthly Average of Children on Waiting List for Child Care Vouchers	399	380

Even at home, many low-income children lack literacy rich environments in which to thrive. A widely cited study of low-income neighborhoods showed the ratio of books was 1 per every 300 children, compared to 13 books per child in middle-high income neighborhoods. The result: upon entering Kindergarten, children from “literacy rich” homes have a 10,000-word vocabulary; children from “literacy poor” homes know only 800 (*Neuman & Dickinson; 2006*).

Not only do low-income families struggle to provide literacy enriching environments for their children, they also struggle to provide the most basic needs for their families. Financial instability causes many children to move multiple times during their formative early years, and many risk hunger and homelessness. In households using food banks in Allen County, 37% are single parents, 27% of whom have one or more children under the age of five. Hunger is not just a symptom of poverty; it is a condition that severely impacts the cognitive and social development of children. It interferes with the learning process, reduces attention span and increases absences due to poor health.

With fewer books in their homes, poor prenatal care, unmet basic needs and parents who may have limited literacy skills themselves, many children in poverty start school already one year behind. These children enter school facing significant social and academic deficits leading to later educational and employment challenges. As students fall further and further behind, their dreams diminish. After years of struggle, many will drop out when catching up seems impossible.

Ensuring that children start school ready to learn and supporting them throughout their academic journey are both vital to improving educational attainment in our community. Keeping kids on track to complete high school and enter college is the responsibility of educators, parents and the community. With 63% of Allen County parents working, children are often without parental supervision during the workday hours. Also, with the pressures of daily living, many parents lack the time and resources to nurture the social, emotional and academic development of their children. High quality youth development opportunities must exist outside of school time.

YOUTH DEVELOPMENT

In 2006, America’s Promise and Gallup Poll surveyed more than 2,000 teenagers (12-17), their parents, and more than 2,000 children (6-11) and their parents. The study was designed by the Search Institute and measured whether America was keeping five basic promises to our kids: Presence of Caring Adults; Safe Places and Constructive Use of Time; a Healthy Start and Healthy Development; Effective Education for Marketable Skills and Lifelong Learning; and Opportunities to Make a Difference through Helping Others. These measures were based on the Search Institute’s widely validated 40 Assets.

An alarming 30% of 12-17 year olds had 0-1 of these promises met in their lives. The America’s Promise research and numerous other studies consistently show that younger children tend to experience more positive developmental influences than older children. As a result, elementary children appear to have more of the required developmental assets than older adolescents (*Eccles & Gootman, 2002; Nat. Academy of Sciences & Inst. of Medicine, 2000; Scales & Leffert, 2004; Scales, Sesma, & Boltrom, 2004*).

Every child deserves safe places in which to grow and thrive. These places include their homes, schools and community sites. These environments must offer safe, supervised, structured activities that promote education and personal development. While most kids reported feeling safe at home, a percentage of children remain vulnerable to abuse and neglect in their own homes. Locally, in 2005, there were 337 substantiated cases of abuse and 467 substantiated cases of neglect. Additionally, there were 1,074 unsubstantiated cases of abuse and an alarming 2,582 unsubstantiated cases of neglect. While substantiated child abuse remained relatively stable over the last three years, unsubstantiated cases have almost doubled during that same period. Even if labeled unsubstantiated, it is not necessarily a false report. Studies have shown that many of these children require protective services in the future and that preventative services should be available to both unsubstantiated and substantiated cases.

Outside of the home, school and after-school sites must be safe and structured. Within the national America’s Promise survey, the lowest safety measure dealt with kids having constructive, safe opportunities for structured activities (42% for teens, 41% for pre-teens). Between 25-33% of students “sometimes” or “never” feel safe in school or in their community.

Without affordable and high quality after-school activities, youth may engage in risky behavior that can derail their future. The tendency toward each risk behavior increases as students have fewer social supports and assets. The 40 Assets serve as the necessary foundation for young people to be healthy, caring, resilient and successful. They address both the internal and external needs of youth.

Developmental Assets and Risk Behavior Patterns, by Asset Level.					
	High Risk Behavior Pattern	Percent Reporting Behavior Patterns			
Behavior Pattern	Definition	Number of Assets			
		0-10	11-20	21-30	31-40
Alcohol	Has used alcohol three or more times in the last thirty days or been drunk once or more in the past two weeks.	45	26	11	3
Tobacco	Smokes one or more cigarettes every day or uses chewing tobacco frequently.	22	9	3	0
Illicit Drugs	Used illicit drugs three or more times in the last 12 months.	38	18	6	1
Sexual Intercourse	Has had sexual intercourse three or more times in lifetime.	34	23	11	3
Depression/Suicide	Is frequently depressed or has attempted suicide.	44	29	15	5
Anti-Social Behavior	Has been involved in three or more incidents of shoplifting, trouble with the police, or vandalism in the last 12 months.	47	22	7	1
Violence	Has engaged in three or more acts of fighting, hitting, injuring a person, carrying or using a weapon, or threatening physical harm in the last 12 months.	62	38	18	6
School Problems	Has skipped school two or more days in the last four weeks or has below a C average.	44	23	10	4
Driving and Alcohol	Has driven after drinking or ridden with a drinking driver three or more times in the last 12 months.	33	19	8	2
Gambling	Has gambled three or more times in the last 12 months.	27	18	10	3

Success in school provides students with an alternative to these high-risk behaviors. Additionally, risk behavior often causes students to fall further behind. Consider the impact of teen pregnancy or incarceration on school success and future economic stability. In the US only one-third of teen mothers obtain a high school diploma (Reading Connections). Poor school performance often places these girls at higher risk of pregnancy to begin with, and pregnancy creates a significant barrier to catching up. In fact, low income girls between the ages of 16 and 19, with below average literacy skills are six times more likely to have out-of-wedlock children than their reading counterparts (*Begin to Read*). The relationship between a teen pregnancy and educational attainment triggers a generational challenge, as a mother's education level is the single most important predictor of a child's academic success.

Likewise, students who fall behind are more likely to engage in criminal behavior. Nationally an alarming 85% percent of juvenile offenders have reading problems, and 50% of all adults in U.S. federal and state correctional institutions cannot read or write at all. The Department of Justice states, "The link between academic failure and delinquency, violence, and crime is *welded to reading failure*." Over 70% of inmates in America's prisons cannot read above a fourth grade level. (*Begin to Read*) When youth do not succeed in school, they are at a much greater risk of making poor choices with lifelong consequences.

Education is the key that unlocks a better, brighter future; its absence has costly implications for individuals and society. Direct and indirect costs of youth violence (e.g., medical, lost productivity, quality of life) exceed \$158 billion every year (*Children's Safety Network Economics & Data Analysis Resource Center 2000*), and over \$9 billion will be spent to deal with social problems resulting from teen births.

<http://www.readingconnections.org/program-literacy-facts.asp>

INCOME AND FAMILY STABILITY

Clearly, education is inextricably linked to financial and family stability. As earnings rise, so does one's ability to provide for themselves and their family, and to save for the future. Just as reading is the foundation for all future learning, adult literacy levels provide strong indicators of earning potential and financial stability. Individuals with higher levels of literacy are more likely to be employed, earn more, and rely less on public assistance. *The National Adult Literacy Survey* found that low literacy skills (level 1 being the lowest) were closely connected to economic and social issues, such as:

- 43% of adults with Level 1 literacy skills live in poverty, compared to 4% of those at Level 5.
- The likelihood of being on welfare went up as literacy skills went down. 75% of Food Stamp recipients had Level 1 or Level 2 literacy skills.
- Adults with Level 1 literacy skills earned a median income that was approximately 35% of those with Level 5 skills, and worked fewer weeks per year (Level 1; 19 weeks, Level 5; 44 weeks)

- Individuals in the lowest level reported median weekly earnings of about \$230 to \$245, compared with about \$350 for individuals performing in Level 3 and \$620 to \$680 for those in Level 5.
- Only 23-27% of the respondents who performed in Level 1 said they received interest from a savings or bank account, compared with 70-85% in Levels 4 or 5.

Those without basic literacy skills have little hope of attaining the higher levels of education required for financial and employment stability. The US Median income for those without a high school education is \$24,721 and rises to \$41,475 for those with an Associates degree. The average annual salary for workers with a high school diploma or GED is at least 76% lower than those with bachelor's degrees (*US Census Bureau, Current Population Surveys, 2007*). Ultimately, less educated workers realize both lower personal earnings and weaken our state's economy. If only 10,000 more students a year earned college degrees, \$250 million would be added to Indiana's economy (*US Census Bureau; 2002*). Increasing personal income is vital to both families and the state's economic stability.

In Allen County, significantly fewer black households have incomes over \$40,000 (blacks 34.6%, whites 56.8%). Conversely, blacks have a higher percentage of households with incomes under \$30,000 (black 52.7%, whites 29.3%) at which level a family with two children is unable to reach self-sufficiency standards.

INCOMES FOR WHITE AND BLACK HOUSEHOLDS IN ALLEN COUNTY		
	White	Black
Less than \$10,000	5.6%	18.5%
\$10,000 to \$19,999	11.3%	16.2%
\$20,000 to \$29,999	12.9%	18.2%
\$30,000 to \$39,999	13.2%	12.5%
\$40,000 to \$49,999	11.9%	9.6%
\$50,000 to \$59,999	10.2%	7.0%
\$60,000 to \$74,999	12.8%	6.9%
\$75,000 to \$99,999	11.0%	5.7%
\$100,000 and more	10.9%	5.4%

DEMOGRAPHIC SHIFTS

This income disparity is further evident in the poverty rates among racial/ethnic groups. Blacks in Allen County experience a poverty rate of almost 20% compared to just 5% for whites. One's income determines where they can live and the opportunity available to them. With a lack of mixed income housing throughout Allen County, lower income minorities are concentrated within the inner city. In 2000, 19 Census tracts in Allen County had over 20% of residents living in poverty, with one exception, clustered in

central and southeast Fort Wayne. Two Census tracts, 17 and 42, have the highest levels of concentrated poverty in Allen County, at over 50% of residents falling below the federal poverty line.

Suburban sprawl has left low-income families behind in aging neighborhoods with few amenities, and isolated them from economic and educational opportunity. As suburbs grow, more jobs are located beyond the reach of the urban poor. Over 60% of business are now located in suburbs, compared with only 25% in 1970 (Peirce, 1993). Many inner city residents have not been able to follow this migration of jobs and economic prosperity.

Likewise, sprawl impacts the demographics of schools and the tax bases needed to support them. Since 1960, Aboite Township has had the second highest number of new residents in Allen County, with the net growth representing 42% of the white population growth in the entire county between 1960 and 2000. Perry Township has grown by 67% between 1990 and 2000; nearly 95% of that growth has been white. By comparison, in 1960, 79% of the white population in Allen County resided in the FWCS area. By 2000, just 63% of whites in Allen County resided within those boundaries. While FWCS gained only 1,375 whites over this forty-year period, the other three districts gained 54,251 white residents. For some, prejudice is the root behind this flight to the suburbs; but income disparity among racial and ethnic groups is the chronic culprit. Not everyone can afford to pursue the great American Dream.

Ultimately, suburban sprawl has contributed to and exacerbated the related effects of segregation and concentrated poverty in Allen County. Fort Wayne ranks as the 26th most segregated metro U.S. city between blacks and whites, almost 80% of whites in Fort Wayne MSA would need to move to another neighborhood for a more even distribution across all neighborhoods (*Social Science Data Analysis Network (SSDAN) at the University of Michigan*). Concentrated poverty has social implications for families, children and communities. Along with high rates of unemployment and high drop out rates, deteriorating and/or abandoned properties discourage investment and lead to a downward spiral from which it is costly and difficult to recover. Not only do poor residents suffer, but entire communities ultimately bare the social and economic cost.

Hanna-Creighton Area Demographics (Census Tracts 17, 18, 27, 29) 2000 Census	<u>Hanna-Creighton</u>	<u>Allen County</u>
Average Household Size	2.95	2.53
Owner Occupied Households	51.0%	71.0%
African American Headed Households	72.0%	10.0%
Children Present in the Home	48.0%	37.0%
Single Female Headed Households	59.0%	23.0%
Median Income – All Households	\$25,839	\$42,671
Median Income – Households with Children	\$19,061	\$50,993
Per Capita Income	\$11,642	\$21,544
Households Below Poverty with Children	47.0%	12.5%

HOUSING

The uncertainty of poverty has significant implications for families and children. Unable to afford stable housing, impoverished families move more frequently. A job loss, unexpected illness, or loss of transportation can immediately destabilize a family living on the financial edge. The persistent gap between what hard working individuals earn and what they must spend in order to provide for their families continues to expand. Housing is the foundation for financial stability. Stable, affordable housing makes it easier for individuals to find and maintain employment, take better care of their health, and improve educational outcomes for their children.

According to HUD, a household should pay no more than 30% of its annual income on housing. Families who pay more than 30% are considered cost burdened and may have difficulty paying for essentials like food, clothing, child care, transportation and medical care. It is even worse to recognize that the higher the housing burden for a household, the greater the risk of homelessness. In Allen County, 41% of renters are housing burdened compared to less than 22% of households with mortgages (*Source: U.S. Census Bureau, 2006 American Community Survey*)

HOUSING AS A PERCENTAGE OF HOUSEHOLD INCOME

Allen County Renters		40,243		Housing Units with a Mortgage		68,100	
Less than 15.0 percent	5,130	13%		Less than 20.0 percent	32,701	48.02%	
15.0 to 19.9 percent	7,126	18%		20.0 to 24.9 percent	12,885	18.92%	
20.0 to 24.9 percent	5,333	13%		25.0 to 29.9 percent	7,432	10.91%	
25.0 to 29.9 percent	4,240	11%		30.0 to 34.9 percent	4,326	6.35%	
30.0 to 34.9 percent	3,310	8%		35.0 percent or more	10,391	15.26%	
35.0 percent or more	13,106	33%		Not computed	365	0.54%	
Not computed	1,998	5%					
Housing Burdened Renters (30% or more of Income)	16,416	41%		Housing Burdened Mortgages (30% or more of Income)	14,717	21.61%	

For housing burdened families in Allen County, the issue is more about income than the cost of housing. In 2007, the International Housing Affordability Survey ranked Fort Wayne as the most affordable urban market among cities in Australia, Canada, Ireland, New Zealand, United Kingdom, and United States, and third most affordable in 2008. HUD estimates the Fair Market Rent (FMR) for a 2-bedroom unit in Fort Wayne/Allen as \$636, and \$793 for a 3-bedroom unit. Although housing in Fort Wayne/Allen County is considered affordable, it remains a challenge for low-wage workers due to low paying jobs. It is estimated that 42% of Allen County renters are unable to afford a 2-bedroom unit at the FMR level. For those making minimum wage, a renter will need to work 84 hours weekly just to afford a 2-bedroom unit.

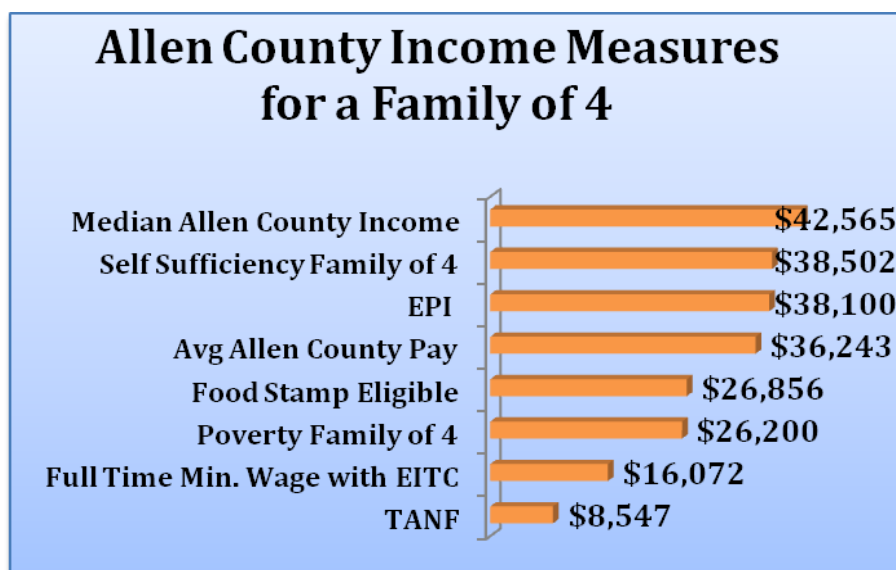
Median Income for Renters	\$29,667	Estimated Mean Renter Wage	\$11.33
Median Allen County Income	\$59,100	Rent Affordable at Mean Wage	\$589
Minimum Wage	\$5.85	Rent Affordable at Minimum Wage	\$304

Source: National Low Income Housing Coalition (*Note: this data does not reflect the increase in the minimum wage that went into effect July 2008. Minimum wage is scheduled to increase to \$7.25 in July 2009.*)

These low wage workers with proportionally high housing costs are at great risk for homelessness. In the US, 1 in 10 poor people face homelessness at some time during an average year. It is estimated that 61% are men, 15% are women with no children, 15% are households with children, and 9% are people with another adult but not with children. Community and government programs place some of these groups in more vulnerable positions. Locally, shelter providers have noted that single women with no children have few emergency shelter options. Additionally, households with children are more likely to qualify for public assistance programs; they are less likely than individuals to be homeless, or to be homeless for long. “Unattached adults are not eligible for most safety net programs, so they are more likely to be homeless and to experience long or repeated spells of homelessness.”

Improving housing stability requires increasing income for low wage households. Nearly 17% of Allen County families earn less than \$25,000 and 27% earn less than \$35,000. Among all families, 9% live in poverty, and families with young children are more likely to live in poverty. For single mothers with children under the age of 5, a staggering 49% of single mother households with children under the age of 5 live in poverty. These low-income levels make it nearly impossible to meet a household’s needs.

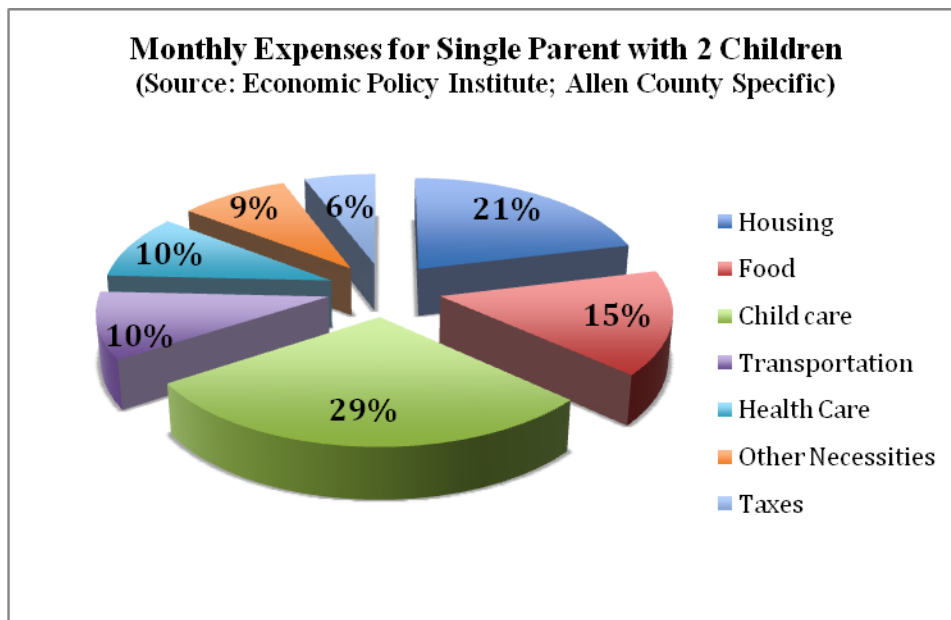
Even official poverty measures overlook the many families who do not meet that dire threshold, but still struggle to make ends meet. Even the Census Bureau itself recognizes the limitations of poverty guidelines. In a 2002 report, the Bureau affirmed, “the official poverty measure should be interpreted as a statistical yardstick rather than as a complete description of what people and families need to live (Proctor, B. & Dalaker, J. 2003).” Family budgets, individualized for communities nationwide and for family composition (e.g., one parent/one child, two parents/two children), offer a more realistic measure of the income required to have a safe and decent standard of living.



The Economic Policy Institute (EPI), a nonprofit, nonpartisan organization, calculates that a family of 4 required a minimum of \$38,100 to sustain themselves in the Fort Wayne MSA in 2005.

The Indiana Coalition on Housing and Homelessness Issues (ICCHI), a statewide association dedicated to the right of all Indiana citizens to safe, decent, and affordable housing and necessary supportive services appropriate to building self-sufficiency, calculates that the family of 4 required an income of between \$24,073 to \$45,081 depending

More importantly, segmenting monthly costs helps identify financial pressures and informs program and policy decisions for our community. All of these expenditures are critical to family financial stability. Without child care, parents cannot maintain stable employment, without sufficient wages families cannot afford decent housing, without food children cannot develop properly.



Child care is typically the most costly expense for families.

Low income families often cannot afford high quality child care, placing their children at a disadvantage upon entering school

UWAC defines low-income as 200% of poverty or \$26,200 per year for a family of four.

SPECIAL POPULATIONS

These measures help illustrate the financial pressures on households and reinforce that families require multiple services to move toward greater stability. Specialized services are also needed for vulnerable populations; including the elderly, disabled, immigrants and refugees.

There are nearly 40,000 residents in Allen County over the age of 65, almost 60% are women and 79% own their own home. Still, 6.4% of Allen County seniors live below the poverty line. For these seniors, home-based care, home repair programs, and utility assistance programs help stabilize these low-income households and maintain homeownership. Making seniors aware of community resources is a critical piece of caring for seniors. A 2008 survey of seniors in our region (Adams, Allen, De Kalb, Huntington, Lagrange, Noble, Steuben, Wells, & Whitley Counties) showed that 21% did not know whom to call to access community resources. Those who did not know how to access resources were more likely in fair/poor health (28%) or had less than a high school diploma (27%). Among community services, 43% of seniors did not know how to access home repair services, 42% had no knowledge of respite services and 22% did not know where to find congregate meals. Conversely, 86% knew how to access special transportation, 84% knew of visiting nurse programs and 83% knew about “meals-on-wheels” programs.

For some seniors, accessing community resources like child care, parenting programs and youth programs is becoming increasingly important as more grandparents become caregivers for their own grandchildren. According to US Census estimates, about 6% of seniors in Allen County are responsible for their grandchildren, and tend to care for them for five or more years. Supporting these seniors is critical to the social and academic success of their grandchildren.

GRANDPARENTS AS CAREGIVERS			
Number of grandparents living with own grandchildren under 18 years			5,187
Responsible for grandchildren			2,359
Percent of Senior Population Responsible for Grandchildren			6%
Years responsible for grandchildren	Less than 1 year		406
	1 or 2 years		397
	3 or 4 years		158
	5 or more years		1,398

Access to community resources is also vital to helping those with disabilities remain independent. Those with disabilities have a right to direct their own lives and actively participate in our community. Supportive services that help those with disabilities achieve or maintain independence include transportation, orientation and mobility, adaptive technology programs, youth services, Braille services, peer support, living skills, public education, home chore programs and others.

DISABILITY BY AGE		# w/ a Disability	% of population with a disability
Population 5 years and over	314,858	42,503	13.50%
Population 5 to 15 years	57,443	4,023	7.00%
Population 16 to 64 years	221,711	24,981	11.27%
Population 65 years and over	35,704	13,499	37.81%

Employment services are also an important component of achieving and maintaining independence for those with disabilities. The disabled population has an essential role in our labor force. Approximately 62% of individuals with disabilities between the ages of 21 to 64 are employed, according to the League for the Blind and Disabled. For disabled workers, programs are needed to transform individuals from dependent to independent. Services are needed to assist individuals with disabilities and other barriers to employment to become competitively employed in the community at the highest job level they can achieve and maintain.

IMMIGRANTS & REFUGEES

Allen County continues to become more diverse. Not only do we have a sizable Immigrant population, we are a major refugee resettlement community. The American Population Survey conducted by the Census Bureau projects that our foreign born population has increased from 4% (13,394) in 2000 to 4.7% (16,293) in 2007. One indicator of this diversity is provided by a look at our local school systems. The 2007 – 2008 public school enrollments of “Limited English” students are 2,618 - almost three times the number (992) enrolled during the 2000-2001 school year. The students currently enrolled in Fort Wayne Community Schools have 85 different home languages.

Another indication of the growing need for language services is the experience of the Multicultural Information Exchange (MIX). During FY2008 MIX staff and volunteers translated 1,547 documents, a 36% increase from the previous year. These documents were translated into 19 different languages. During that same period the MIX provided interpretation services 483 times in eleven languages.

In addition to our large Hispanic immigrant population (estimated at 2% in 2007), the pace of refugee resettlement has increased dramatically over the past two years. During 2007 Catholic Charities resettled 632 individuals and report a projected 900 resettlements for 2008. Of the individuals resettled last year 613 were Burmese. These families bring with them rich cultures and unique social needs. Local human service and educational institutions are challenged to meet the needs of these new residents. [Note: a refugee is an individual brought to our country by the State Department. Refugee status is granted to people whose health & safety is threatened, most often, by conflict in their home country.]

In response to a number of issues of concern, the local Multicultural Council was convened three years ago. Currently functioning with support from the Knight Foundation, the Council has organized work groups to address issues of common concern to all immigrant and refugee populations. These groups are working to effect improvement in the following areas: 1) The ability of individuals to secure driver’s licenses and identification cards from the Bureau of Motor Vehicles; 2) The ability of first responders to access language services in emergencies; 3) improved safety for non-English speakers in the workplace and 4) the availability of medical interpretation services

FINANCIAL STABILITY

In order to move people from poverty or prevent others from falling into poverty, efforts must be made to strengthen family financial stability. By providing households with access to financial literacy programs, families can increase income, build savings and gain and sustain assets.

Increasing household income requires better jobs and better educated workers in Allen County. In addition, improving financial stability includes helping families access and use their Earned Income Tax Credit (EITC). United Way, and other community partners, helped file 1,362 tax returns, resulting in over \$1.4 million realized through

EITC in 2008. It is estimated that \$6 million goes unclaimed by Allen County residents who are eligible but not using the tax credit.

Financial stability programs serve as entry points for residents to build relationships with financial institutions. In the US, 10-23% of lower-income households do not have a bank account and are without access to mainstream financial institutions and services. *(Source: Federal Reserve Survey of Consumer Finances, 2001, and the General Accounting Office's "Electronic Transfers," Report to the Subcommittee on Oversight and Investigations, House of Representatives, September 2002)* The average American also has \$9000 in credit card debt and 1 in 3 households use credit cards to cover basic living expenses; including rent, mortgage payments, groceries, utilities and insurance. *(Source: The Plastic Safety Net: The Reality behind Debt in America, Demos and the Center for Responsible Lending, October 2005)*

Developing financial literacy skills and relationships with banks can prevent financial distress in families. The current foreclosure crisis exemplifies this need for financial education. A recent state report indicated that 12.5% of Allen County mortgages were subprime loans, thus, more likely to end in foreclosure (13.4% Statewide). It was also determined that subprime lenders were serving a disproportionate number of the State's minority borrowers.

- 2.98% of all mortgages in Indiana are in foreclosure, compared to a national foreclosure rate of 1.28%
- Indiana ranks 2nd in the US (behind Ohio) in foreclosure rates.
- In Indiana, it is estimated that between 5% and 13% of foreclosures involve mortgage fraud.
- Primary causes of Indiana's foreclosure crisis: job losses in Indiana; high number of first-time homebuyers; loans with high LTV ratios; the state's slow rate of home price appreciation; and certain lending practices.
- Mortgages applications by African American in Indiana were 1.53 times more likely to be denied than white borrowers.
- Of applications denied; 34% were for poor credit history. There was little difference between the reasons for denial among minorities and whites.
- Mortgages applied for by African American borrowers in Indiana were 1.39 times more likely be subprime than those of white applicants.

When it comes to financial literacy, the saying "an ounce of prevention is worth a pound of cure" could not be truer for individuals and communities. According to Realtytrac.com, 1 in every 376 Allen County housing units is in foreclosure, as of August 2008. On average, communities spend \$85,000 for each foreclosed property (ACORN). In addition to the money lost by communities, it is estimated that Indiana loses around \$33 million in taxes. Total loss for homeowners and lenders in the state is around \$77 million. Helping stabilize families is critical for their well-being and the health of our community and our state.

BASIC NEEDS

As families face economic challenges many are unable to provide for their most basic needs. In 2005, 11.8% of the total Allen County population, and 13% of families with children under 18 live in poverty. When families cannot meet their basic needs (i.e. food, shelter and health care) it makes it difficult to retain or advance at a job or succeed in school.

One consistent measure of economic distress is Food Stamp enrollment. A program of the U.S. Department of Agriculture, Food Stamps is an entitlement program that serves all eligible families and provides a measure of the extent of economic hardship. The number of households in Allen County enrolled in the Food Stamp program has risen from 10,375 in 2003 to 15,050 in July of 2008, or approximately 11% of our population

Even when families use food stamps, they often find it difficult to subsist on that support alone. Community Action of Northeast Indiana, an agency which serves about a third of Allen County's food stamp recipients, released a report in 2001 indicating that over 40% of families who receive food stamps also use food banks at least once a month. Similarly, 36% of households served by Community Harvest Food Bank (CHFB) are receiving food stamp benefits, and 62% of households with children ages 0-3 are enrolled in WIC (Supplemental Nutrition Program for Women, Infants and Children). The survey of CHFB clients concluded that, on average, food stamps lasted only 2.6 weeks, with almost 50% reporting their stamps lasted two weeks or less.

- The average stamp amount per household per month is \$249.
- 60.6% of all food bank clients surveyed reported **applying** for assistance, indicating many were deemed ineligible for earning more than the federal eligibility guidelines, but clearly not enough to provide food for their families without the support of local food banks.

With food stamps not lasting a full month, families risk hunger and food insecurity. In fact, 41% of CHFB client households, enrolled in the food stamp program, were classified as "Food Insecure without Hunger", while 42.1% were identified as "Food Insecure with Hunger." (**Definitions:** *Food Insecurity* is USDA's measure of lack of access, at all times, to enough food for an active, healthy life for all household members; limited or uncertain availability of nutritionally adequate foods. *Food Insecurity w/ Hunger* – involuntary hunger that results from not being able to afford enough food.)

However, the use of food banks by households is not limited to those enrolled in welfare programs. In 2006, America's Second Harvest (A2H) conducted a national study of emergency food clients. With 80% of all emergency food providers participating in the Second Harvest Network, A2H is uniquely positioned to conduct such a study. The chart below compares these national findings to local results from Community Harvest Food Bank. Based on these results, the face of hunger in Allen County is too often a child or a working family struggling to make ends meet.

Profile of Food Bank Recipients	Allen County	A2H (National)
% households with children under 18	39%	36.4%
% elderly	11%	10%
% homeless	0%	12%
% food insecure	72%	70%
% food insecure with kids	81%	73%
% hunger with kids	33%	31%
% receive food stamps	36%	35%
% households with at least 1 employed adult	44%	36%

In the A2H Hunger Study, nationwide 36% of households who utilized food bank programs had at least one adult working, compared to 44% in Allen County. Locally, their median monthly income was just \$900, with 52.5% reporting a median monthly income of less than \$999. Among households with children under the age of 18, 36.9% are single parent households and 26.5% have one or more children ages 0-5. Moreover, 42.6% of clients are over the age of 50, and more specifically 20.1% of clients are over the age of 65. This indicates that food insecurity and hunger has a disproportionate impact on the most vulnerable in our community.

Additionally, with limited incomes, many clients report choosing between food and other basic necessities like shelter, health care and utilities. Twenty percent of households reported having to choose from all three of these critical needs. Such choices prevent families from maintaining safe and stable housing.

Profile of Food Bank Recipients	Allen County	A2H (National)
% who made a choice between food and utilities	42%	42%
% who made a choice between food and housing	37%	35%
% who made a choice between food and health care	38%	32%

These dire choices are reflected in the calls received by 2-1-1 Information and Referral Services. 2-1-1 receives more than 1,200 calls from homeless individuals/families and nearly 2,000 calls for rent assistance each year. Emergency shelters are the first response to families by offering temporary housing. According to 2-1-1, the average cost to place a family in emergency shelter, such as a hotel is \$40 per night. After several days, the family is moved to a local shelter or placed on a waiting list for temporary housing. To establish permanent housing, a family may need help with deposits, first month's rent, and utility service. Local agencies provide assistance for these needs in order to stabilize families or avoid eviction and subsequent homelessness.

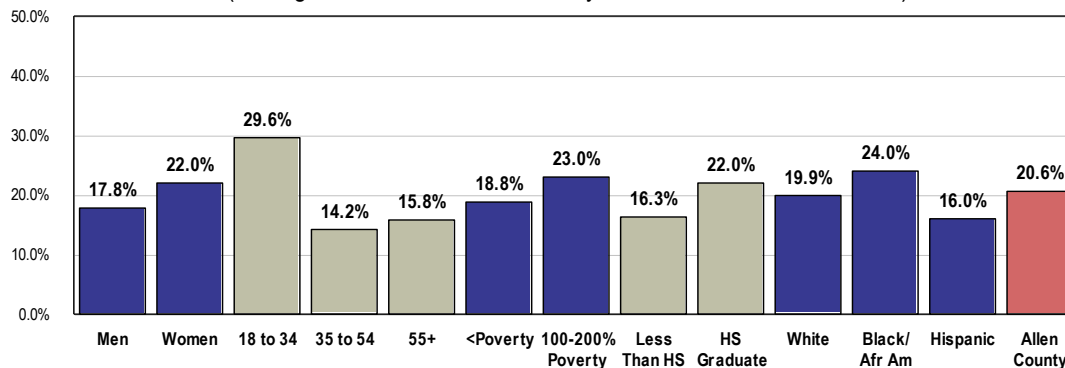
2-1-1 Call Requests - First three quarters				
	Deposit-Rent & Rent/Mortgage	Deposit-Utility & Utility Assistance	Food	Shelter
2007 (1/1/07 – 9/30/07)	1,532	2,729	1,920	898
2008 (1/1/08 to 9/31/08)	1,943	4,247	2,166	617

HEALTH CARE

As evidenced by the hunger study, health care becomes a luxury when families are trying to keep food on their table and a roof over their head. In Allen County, a 2006 health study estimates that 19.3% of Allen County residents were uninsured, a figure that increases to 30.4% for low income residents. Even among the insured, 21.2% of respondents reported being without coverage at some point in the past year, particularly younger adults. Younger adults also reported the highest levels of financial distress when insurance did not fully cover their health care needs.

Experienced Financial Distress or Lack of Care Because Insurance Did Not Fully Take Care of Needs

(Among Insured Adults; Allen County Low-Income Residents, 2006)

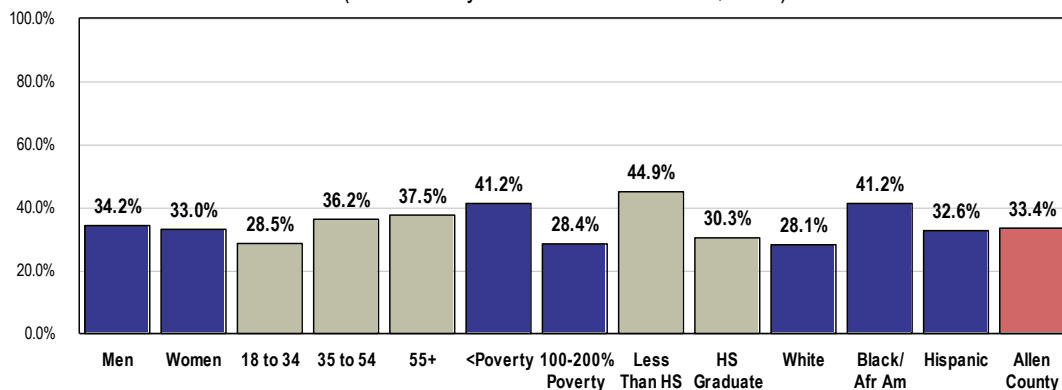


Source: • 2006 PRC Low-Income Health Survey, Professional Research Consultants. © PRC 2006 [Item91]
 Note: • Reflects adults with health care insurance coverage.
 • "White" and "Black/Afr Am" reflect non-Hispanic race categorizations; "Hispanic" can be of any race.

There are numerous individual and economic consequences to being uninsured in Indiana. The uninsured, or underinsured, typically do not seek routine health care or delay receiving necessary health care services. With delay, health conditions often become more complex and expensive to treat. Therefore, the lack of health insurance not only results in poor overall health care, it also results in inappropriate use of local hospital emergency rooms for preventative and non-emergency care.

Experience "Fair" or "Poor" Overall Health

(Allen County Low-Income Residents, 2006)



Source: • 2006 PRC Low-Income Health Survey, Professional Research Consultants. © PRC 2006 [Item9]

Note: • Asked of all respondents.

• "White" and "Black/Afr Am" reflect non-Hispanic race categorizations; "Hispanic" can be of any race.

• Percentages represent combined "fair" and "poor" responses.

The cost of prescriptions created a health care barrier for 37.7% of low income residents, and 23.7% of residents overall. The second greatest barrier was the cost of a doctor's visit (26% for low income, 18.8% overall). For low income residents in Allen County, 34.8% pay for prescriptions themselves, having no insurance coverage. Another 5% pay high co-payments. As was the case in the hunger study, these costs necessitate choices that can impact health, safety and well-being.

While cost is the primary barrier to accessing medical care, 14.2% of low income residents identify transportation as a key barrier to meeting their health needs. Within that group, 56.8% had no private means of transportation for medical appointments (4.2% walked, 26.4% used public transportation and 20% relied on a family member). Finding a physician was also a barrier for 15.2% of low income residents.

In addition to the basic gaps in health care insurance and accessibility, there is the need for culturally appropriate care, mental health services, and substance abuse treatment. Many non-English speaking residents are unable to access traditional medical care services. Interpretation services are necessary to provide competent medical care to the numerous language groups in Allen County.

Services to individuals with mental health disorders are key components to building a healthy community. Without programs that address populations that experience barriers to emotional development and strong mental health, problems may develop into escalating situations for families and the community.

FUNDING PRIORITIES & THE FUNDING FRAMEWORK

To this point, the information presented is intended to paint a picture of the community conditions United Way of Allen County believes our community must come together to address. By focusing upon the challenges faced by children and families we hope to establish that critical link between those who struggle for stability in life and the well-being of our entire community.

Over the past two years we have worked with our network of volunteers to determine the most effective way to support efforts that will result in a lasting change in community conditions. In the following declaration of priorities and funding framework, you will find a balance between providing for critical basic and emergent needs; and support for the provision of services that strengthen families, foster success in our youngest citizens and offer dignity to those facing great challenges.

UWAC FUNDING PRIORITIES

IMPROVING SUCCESS IN SCHOOL

Being born healthy is the first step toward success in school. Children born too soon experience disabling conditions and later require special education more frequently than babies born full term. One variable in birth outcomes is prenatal care. Women in Allen County, especially low-income women, too often do not receive prenatal care until the second or third trimester of pregnancy – if they receive care at all. One barrier to early trimester care is lack of medical insurance. To counter this trend, UWAC is working with medical providers and the media to promote the importance of early care. There is also a plan under development to expand the availability of early care to low-income women.

Quality early learning experiences are critical to the development of the skills necessary to succeed in school. Over the past 10 years, UWAC has invested in quality child care programs to assure that low-income children have access to high caliber care. Currently, all child care programs funded by UWAC are nationally accredited. This will continue to be a priority for funding in the future.

Recognizing that many of our poorest children receive care in unregulated child care settings, UWAC is in the process of developing an initiative to provide training and support to these providers. By actively reaching out to providers, offering services in their neighborhood and engaging the children being served, providers will be supported as they work to provide enriching environments for children.

As indicated by the America's Promise survey, many older children lack safe and productive places and caring adults in their lives. Allen County is fortunate to have a variety of programs designed to provide these out-of school opportunities to our youth. UWAC supports a network of programs that provide academic support and that bring mentors and other caring adults into the lives of children.

In order to assure that all children are able to be successful, programs that provide intervention services to struggling youth must be available. Therefore, UWAC provides

funding to programs that provide supportive services to young people. Examples of these include mental health, advocacy and delinquency prevention programs.

PROMOTING FAMILY STABILITY

Many families live in a precarious balance on the edge of stability. Living paycheck to paycheck, families often find themselves struggling to stay afloat after an interruption in income or an unanticipated expense. Disruptive events tend to compound themselves, often leaving families in crisis.

Understanding that many families require multiple services to move toward greater stability, UWAC has worked for the past ten years to build a systematic approach to the delivery of case management services for low-income families. [UWAC defines low-income as 200% of poverty or \$26,200 per year for a family of four.] Case managers not only provide direct support to individuals in their efforts to achieve their goals, they act as brokers, assuring that individuals receive necessary services and that those services are coordinated and complimentary.

Along with some of our partner agencies, UWAC has developed the Case Coordination System (CCS). There are three primary features of this system of care.

1) Common training: The case managers involved in this system all participate in the *Family Development Specialist Training* program. Inherent in this training is the adoption of a common set of values & principles regarding the conduct of case management services.

2) Database utilization: Enabling a more efficient and seamless delivery of service, CCS partners use a common database that allows the sharing of information and of resources among member organizations.

3) The use of the Family Development Matrix (FDM): The FDM is an assessment tool that measures a family's standing within 12 life domains. This tool is not only used with families to develop and measure progress upon a plan of action, it facilitates the process of program evaluation by providing a uniform measure of progress that can be aggregated within and among participating organizations.

By holistically addressing the state of a family, services that support and strengthen families can be brought to bear. Working with other community organizations that provide essential services, case managers help individuals navigate an often complex and confusing system of care.

Identifying the essential needs of families to intervene in a crisis is the first step in the journey toward stability. This assessment begins with the completion of the Family Development Matrix, identifying and prioritizing causes of distress.

DOMAINS:

- Income
- Adult Education
- Employment
- Housing
- Food
- Child Care
- Health Care
- Transportation
- Utilities
- Support Systems
- Family Interaction
- Addictions

ASSESSMENT:

- Thriving
- Self Sufficiency
- Stable
- Vulnerable
- Crisis

Through this process of assessment, the need for specific services is identified for each family. There is an array of services that must be available if individuals and families are to succeed. One role that UWAC plays in our community is to assure that certain key services are available.

In recent years, there has been a shift in funding available for emergency and transitional shelters for homeless people. Federal funding through HUD has declared a “housing first” priority – meaning that government funding must be used to support families gaining access to permanent shelter as soon as possible. Federal funds can no longer be used to provide supportive or case management services to help families achieve and maintain stability as they move through the continuum of care services for homeless people. Other local funds have also reduced the funding available for supportive services.

In response, UWAC is placing a funding priority on those shelter organizations that are also providing strong supportive services and case management to help families achieve and maintain stability.

The ability of families to provide a nurturing home environment for all family members is the ultimate measure of family stability and success. Not only do families need to be able to provide for the material needs of all members, it is also critically important that there are positive and nurturing relationships within families.

Parents must have the skills necessary to support the development of their children. All family members must live free from violence within their own homes, and be equipped to address their safety concerns in the community.

Employment is a key to family stability and though UWAC does not typically fund job training and placement activities, we do fund services that support an individual’s ability to become and remain employed. Services that promote literacy and mental health are examples of these services.

Financial stability is more complicated than simply having a job. Understanding and avoiding the pitfalls inherent in financial decision-making is crucial for low-income families. Awareness of services and benefits available for low-income individuals and families is also an important factor in this equation.

To that end, UWAC is participating in a financial literacy initiative. The Financial Stability Partnership is comprised of local businesses and human service organizations whose mission is to provide education and services to families to increase financial literacy and help them build assets. Beginning in 2007 with an effort to maximize the number of families tapping the Earned Income Tax Credit (EITC), this effort is being expanded in 2008 to include financial literacy efforts. Working with families to establish relationships with banks, to build savings and to work toward home ownership, this initiative is seen as the gateway out of poverty for many.

SENIORS AND PEOPLE WITH DISABILITIES

While looking for the coordination of services that lead families to greater productivity and stability, UWAC remains committed to providing services that help maintain independence for seniors and people with disabilities. When age or disability deprives

an individual of the abilities necessary for wholly independent living, rehabilitation and in-home services support the ability of these individuals to maintain active lives in their own homes.

ACCESS TO SERVICES

The ability of individuals to participate in services is an obvious key to the effectiveness of those services. There are two specific accessibility issues of priority concern to UWAC: transportation and language.

Transportation has long been cited as a major barrier to independence for seniors and individuals with disabilities. Historically, many have been forced to enter institutional care in order to access essential medical and rehabilitation services. By providing transportation services, the costly and inappropriate use of institutional care is minimized and quality of life is maximized.

Allen County is rich in language diversity. One local high school has students with over 70 “home languages”. As a major refugee resettlement community, we often struggle to provide even the most basic services to those finding refuge in our country.

In addition to working with the human service providing network to strengthen and coordinate services, UWAC supports the provision of language interpretation and translation services. These services allow individuals to more fully participate in our community and provide basic access to essential medical, legal and human services.

BASIC NEEDS

Calls placed to the 2-1-1 Call Center reveal much about the struggles of local families. The three most common calls are for assistance with utilities, housing and food.

Poverty is the most commonly cited indicator of economic distress. As more families fall into poverty and struggle to make ends meet, the safety net of services is strained. Much of the funding available to provide for basic needs comes from the public sector (e.g. food stamps, utility assistance, etc.). However, as indicated in other sections of this document, these resources are often not sufficient to sustain a family’s ability to be housed and fed. There are also regulatory barriers to the effective delivery of service (e.g. a prohibition of using public funds to pay deposits). UWAC provides funding to organizations to enable them to fill the gaps in this system, assuring that people’s most basic needs can be met.

UWAC FUNDING FRAMEWORK FOR 2009 THROUGH 2011

The following tables present the primary issues, program strategies and results United Way of Allen County desires to target in the next funding cycle; from July 1, 2009 through June 30, 2011.

Improving Success in School

UWAC Goal: *Children and youth in Allen County will have quality opportunities for healthy social and academic growth.*

UWAC Target Issues	Recommended Strategies	Desired Outcomes	SAMPLE Indicators of Success
Children enter Kindergarten ready to learn	Enhance the ability of adults to create literacy-rich home environments that foster early childhood development and education	<ul style="list-style-type: none"> • Adults gain improved understanding of children’s needs and abilities with regard to pre-literacy skill development • Adults utilize developmentally appropriate literacy skill development activities • Adults demonstrate increased positive, interaction with children that supports social-emotional development • Immigrants & refugee families gain the skills necessary to support their child’s literacy skill development 	<ul style="list-style-type: none"> • Percentage of adults spending increased time engaged with children in literacy skill-building activities
	Provide children with quality environments in early education settings	Children achieve developmental milestones in one or more of the following areas: <ul style="list-style-type: none"> • Emergent literacy skills • Social skills • Physical motor skills • Cognitive skills • Emotional development • Teachability traits 	<ul style="list-style-type: none"> • Percentage of children demonstrating appropriate developmental gains as measured by a standardized measure such as the Child Observation Record or Pre-K Success • Percentage of 3-5 year olds demonstrating school readiness skills

Improving Success in School (cont.)

UWAC Target Issues	Recommended Strategies	Desired Outcomes	SAMPLE Indicators of Success
Children enter Kindergarten ready to learn (cont.)	Improve the ability of adults to foster child health	<ul style="list-style-type: none"> • Adults gain new knowledge, skills & techniques that foster child health • Adults demonstrate behaviors that support improved physical care • Eligible children are covered by health insurance • More pregnant women access first trimester prenatal care; especially low-income women 	<ul style="list-style-type: none"> • Percentage of preterm births (before 37 completed weeks) • Percentage of babies who are born low birth weight (5 pounds, 8 ounces or less) • Percentage of women who deliver healthy babies • Percentage of children who receive wellness care • Percentage of children under the age of 18 who are not covered by health care insurance
Children read at grade level by the end of 3rd grade	Provide struggling readers with additional support in school and community settings	<ul style="list-style-type: none"> • School-aged children gain the basic literacy skills necessary to support reading • Increase in self-esteem and self-confidence for struggling readers • Community volunteers gain improved understanding of the needs and abilities of struggling readers • School-aged children apply basic literacy skills and demonstrate improvement in reading ability • Increase in the quality of support for reading skill development • Community volunteers engage in programs to support struggling readers 	<ul style="list-style-type: none"> • Percentage of children demonstrating improved reading assessment and test scores • Percentage of children reading at grade level by the end of 3rd grade as measured by ISTEP

Improving Success in School (cont.)

UWAC Target Issues	Recommended Strategies	Desired Outcomes	SAMPLE Indicators of Success
Youth succeed in school	Engage youth in activities that foster success in school	<ul style="list-style-type: none"> • Youth develop a positive attitude toward school • Youth develop increased interest in reading • Youth develop higher expectations for school success • Youth develop improved study habits • Youth demonstrate improved content knowledge 	<ul style="list-style-type: none"> • Percent of youth demonstrating fewer disciplinary problems • Percent of youth demonstrating improved attendance • Percent of youth demonstrating increase in grades, test scores • Percent of public high school students who graduate • Percent of youth who enroll in AP courses in high school
<ul style="list-style-type: none"> • Youth successfully transition from school to adulthood 	<ul style="list-style-type: none"> • Engage youth in activities that build personal assets • Enhance the ability of parents to foster positive youth development 	<ul style="list-style-type: none"> • Youth develop attitudes that promote positive development • Youth gain new skills and knowledge that promote positive development • Youth develop positive relationships with parents and other adults • Youth develop positive relationships with peers • Youth develop a sense of belonging • Youth develop a positive view of the future • Youth have knowledge of consequences of risky behaviors • Youth display behaviors that foster positive transition into adulthood • Youth make positive use of leisure time • Youth acquire life/workplace skills • Youth plan for advanced training or degrees • Parents gain skills and knowledge that promote positive development • Parents engage in behaviors that foster positive transition into adulthood 	<ul style="list-style-type: none"> • Percentage of youth with an increased number of assets (40 Assets model) • Percentage of youth who have positive relationships with at least three adults outside the home • Percentage of youth who demonstrate a decrease in risky behaviors • Percentage of youth who pursue advanced training • Percentage of 18- to 24-year-olds who are not working or in school • Percentage of youth who report have a safe, nurturing, stable home environment

Promoting Family Stability

UWAC Goal: *Families are able to live productive and economically stable lives*

UWAC Target Issues	Recommended Strategies	Desired Outcomes	SAMPLE Indicators of Success
<p>Families live productive and economically stable lives</p>	<p>Enhance the ability of individuals to secure and/or maintain adequate employment</p> <p>Enhance the ability of individuals and families to achieve financial stability</p> <p>Enhance the ability of individuals and families to access community services necessary to support productivity and stability</p> <p>Enhance the ability of family members to access mental health services that strengthen life functioning</p>	<ul style="list-style-type: none"> • Individuals gain or improve skills, knowledge, and motivation to secure stable employment • Individuals gain skills and knowledge to increase financial assets • Individuals demonstrate improved life skills to support economic stability and independence • Individuals gain access to case management and/or supportive services that foster stability and independence • Case managers have skills and tools necessary to foster stability and independence • Families move from being in crisis to stability on the Housing scale in the Family Development Matrix • Family members engage in behaviors that demonstrate improved mental/emotional stability and life functioning • Families have safe and nurturing home environments 	<ul style="list-style-type: none"> • Increased income • Percentage of lower-income working families that spend more than 40% of their income on housing • Percentage of lower-income families that have a checking or savings account with a minimum of \$300 • Percentage of homeless families that acquire stable housing • Percentage of families receiving supportive services that make progress as measured by the at least one of the Life Domains in the Family Development Matrix • Percentage of people who make progress in mental/emotional stability • Percentage of families that live in safe and nurturing home environments

Promoting Family Stability (cont.)

UWAC Target Issues	Recommended Strategies	Desired Outcomes	SAMPLE Indicators of Success
<p>Seniors and people with disabilities maintain independence</p>	<p>Enhance the ability of seniors and people with disabilities to maintain the highest possible level of independence in activities of daily living</p>	<ul style="list-style-type: none"> • Seniors and people with disabilities gain new knowledge and skills that support independent living • Seniors and people with disabilities demonstrate behaviors that support independence • Seniors and people with disabilities experience improved functioning and independence through in-home services • Seniors and people with disabilities experience improved functioning and independence through rehabilitation services • Seniors and people with disabilities have access to transportation for services to support independence 	<ul style="list-style-type: none"> • Percentage of people who remain independent in their own homes • Percentage of people who maintain an adequate level of activities of daily living

Meeting Basic Needs

UWAC Goal: *The community is able to support the most basic needs of its residents*

UWAC Target Issues	Recommended Strategies	Desired Outcomes	Program Outputs
<p>Families and individuals are able to meet their most basic needs</p>	<p>Enhance family support by providing material and financial resources</p> <p>Provide clients access to resources or services critical to stabilizing a crisis situation through information and referral services</p> <p>Enhance the ability of family members to access required medical services and other basic needs resources</p>	<p>Families and individuals will have the food they need</p> <p>Families and individuals will have the rent, mortgage, utility, shelter and other assistance they need</p> <p>Families and individuals will have access to the full range of services available in the community</p> <p>Family members access appropriate physical health services</p>	<ul style="list-style-type: none"> • # of people who received assistance with food • Amount of food distributed • # of people who received assistance with utilities • Amount of utility assistance provided • # of people who received assistance with rent or mortgage • Amount of rent/mortgage assistance provided • # of people who received emergency shelter • # of people who received clothing • # of families accessing case coordination services • Data on information and referral services • # of people that gain access to services through translation, interpretation and other support services • # of people who access physical health services