



HEART OF ILLINOIS UNITED WAY ASSESSMENT OF STRATEGIC INTENT

2008



Prepared by Dr. Laurence Weinzimmer, Eric Michel, and Rebecca Earhart
Secondary Data Collection by Dr. Bernard Goitein

EXECUTIVE SUMMARY

The following strategic assessment has been designed to enhance the Heart of Illinois United Way's (HOIUW) ability to provide leadership to the Peoria-area community by identifying areas of strategic importance. The primary focus of this strategic assessment is to improve the HOIUW's effectiveness in identifying, assessing and supporting key areas of social concern. Additionally, the underlying intent of this study is to identify the best-practices of comparable and aspirational United Way organizations with regard to performing community needs assessment studies. Finally, this study develops a resource allocation instrument designed to assist the HOIUW in implementing its strategic plan.

UPDATE OF 2005 COMMUNITY ASSESSMENT

An in-depth assessment of Peoria-area community needs was performed in 2005. Information from that report is updated as part of the current study. Additionally, new sources of data are assessed and have been added to the updated 2005 assessment to provide additional perspectives on community needs. Strategic implications are discussed after each set of strategic issues. Specifically, the study highlights five critical areas of community needs:

CHILD AND YOUTH ISSUES – This set of issues includes data on areas such as quality of education, youth poverty, types of families, and a discussion of critical programs within strategic implications.

HEALTH ISSUES AND TRENDS – Factors impacting youth, families and adults are addressed. Specific topics include asthma trends, dental issues and trends in STDs.

SELF SUFFICIENCY – Issues facing individuals that are allowing or not allowing them to become self sufficient. Specific topics include homelessness, poverty, housing burden, available housing and individuals with disabilities.

FAMILIES – Issues and trends impacting families within our community. Specific topics include sources income, cost of living, housing, poverty by family type, employment, racial and gender equity, and overall poverty.

SAFETY ISSUES AND TRENDS – This area was added to the four areas of community needs based on its inclusion in many other United Way organizations' community assessments. Specific areas include crime rate, drug arrests, jail population and prisoner reentry back into society.

In addition to assessing current areas of strategic focus, this study also provides information regarding emerging issues that may be considered for future HOIUW support. Again, strategic implications are discussed. Specific emerging areas include dental health, prisoner reentry and homelessness. Note that discussions and implications of emerging areas are embedded in the five areas of strategic focus.

BEST PRACTICES

This study also includes an analysis of best practices regarding the development of community-needs assessments. Specifically, several other United Way organizations were contacted and leaders in those organizations were interviewed to identify best practices and strategic issues. Both comparable organizations and aspirational organizations were included in this assessment.

RESOURCE ALLOCATION METHODS

In the final section of this report, we developed an instrument to assist the HOIUW in allocating resources to the abovementioned areas of strategic concern. Specifically, we developed a scorecard tool that will help the HOIUW create a consistent and equitable process to allocate funds to critical areas of focus in our community.

I. METHODS

The HOIUW report includes an update of the 2005 community assessment, identification and assessment of emerging issues, identification of best practices and development of an instrument to encourage consistent and equitable distribution of funds among various community-based organizations in the Peoria MSA.

Update of the Community Assessment

In order to update the 2005 community assessment, we relied primarily on the use of secondary statistical data to provide the most recent information. Some data from the 2005 report were taken from Census data sources and updated information is not yet available. Note that several tables were aggregated from numerous data sources. For example, educational report-card tables 1.6-1.11 were compiled by collecting information from 50 individual school report cards and combining aggregated data into these tables. When available, a summary of the sources used to update the 2005 community assessment are integrated throughout the text.

Identify and Assess Emerging Areas of Consideration

To identify emerging areas of considerations, multiple sources were examined to assess these areas. Primarily secondary statistical data were primarily used. Additionally, subjective secondary reports were utilized. Moreover, primary data were collected via interviews with experts in the field of sociology.

Identify Community Assessment Best Practices

Again, a combination of primary and secondary sources of information were used. Benchmark organizations for both comparable and aspirational United Way organizations were identified via a fact-finding meeting between executives of the HOIUW and members of the research team. Initially, these organizations were assessed by looking at available information regarding activities and best practices used at these organizations. In addition, leaders at several best-practice organizations were contacted and interviewed to provide additional detail. Finally, the national United Way headquarters was contacted to gain additional insights into best practices.

Development of a Resource Allocation Process

In order to develop an instrument to create a repeatable process of the allocation of HOIUW funds, the HOIUW strategic plan was referenced to provide a framing mechanism for the development of a community-investment scorecard. Additionally, secondary sources were used to identify critical areas of potential focus in creating the specific instrument.

II. COMMUNITY NEEDS ASSESSMENT

According to the HOIUW Strategic Plan, 2008, four critical areas of focus exist in the Peoria-area community, including (1) Children and Youth Issues; (2) Health Trends and Issues; (3) Self-Sufficiency Issues; and (4) Family Issues. In order to draw strategic implications for these four areas, we first updated the 2005 HOIUW Community Assessment. We then assessed data for additional areas that were not included in the 2005 study.

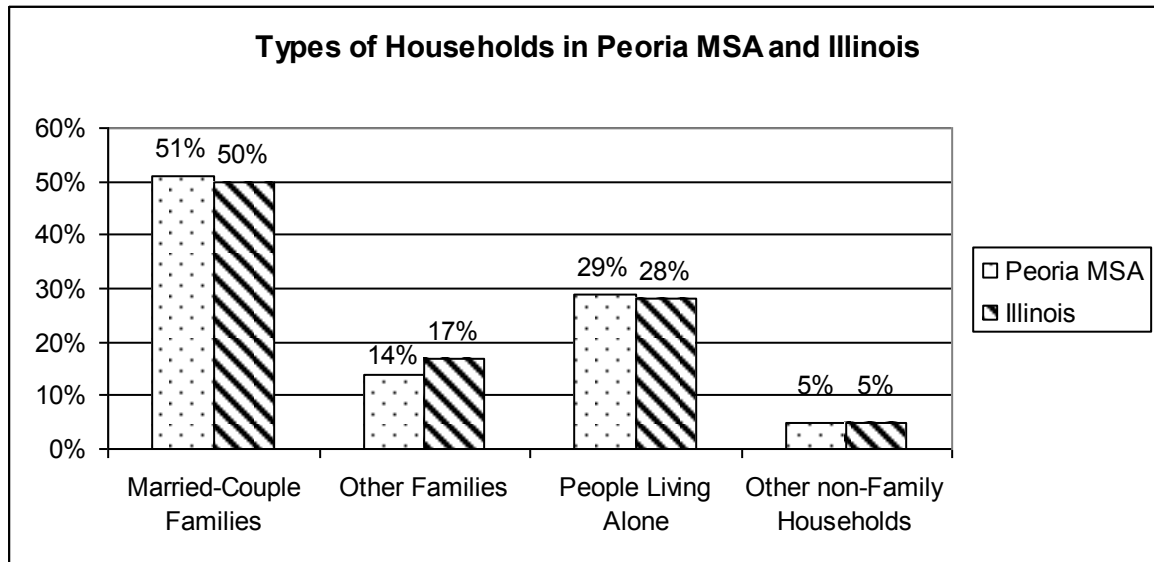
1. Child and Youth Issues

All children can succeed and contribute to society. Fundamentally, for this to happen, children and youth must have equal access to services. Investing in young children provides greater long-term returns and is less costly than retraining them later in life.

Children and youth should have the opportunity to enjoy their childhood in a caring community and to develop their full potential as they become responsible and contributing community members.

This set of issues includes quality of education, truancy rates, crime and supply/demand of critical programs. The selected data that follows provides context for the strategic implications offered at the conclusion of this section.

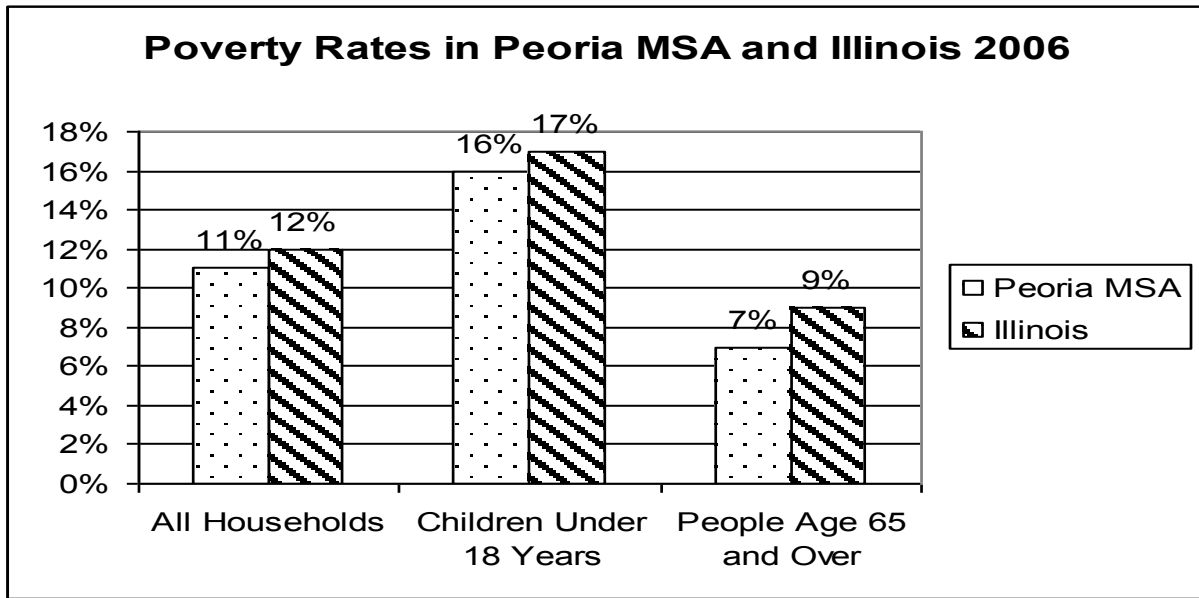
Figure 1.1. Types of Families



Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>

About two in three Peoria MSA persons are living in families, with the majority (51%) living in married-couples families and 14% not married, most often single parent families. Few (5%) reside as unmarried, unrelated persons living together. These results are similar to those found in the state of Illinois as a whole.

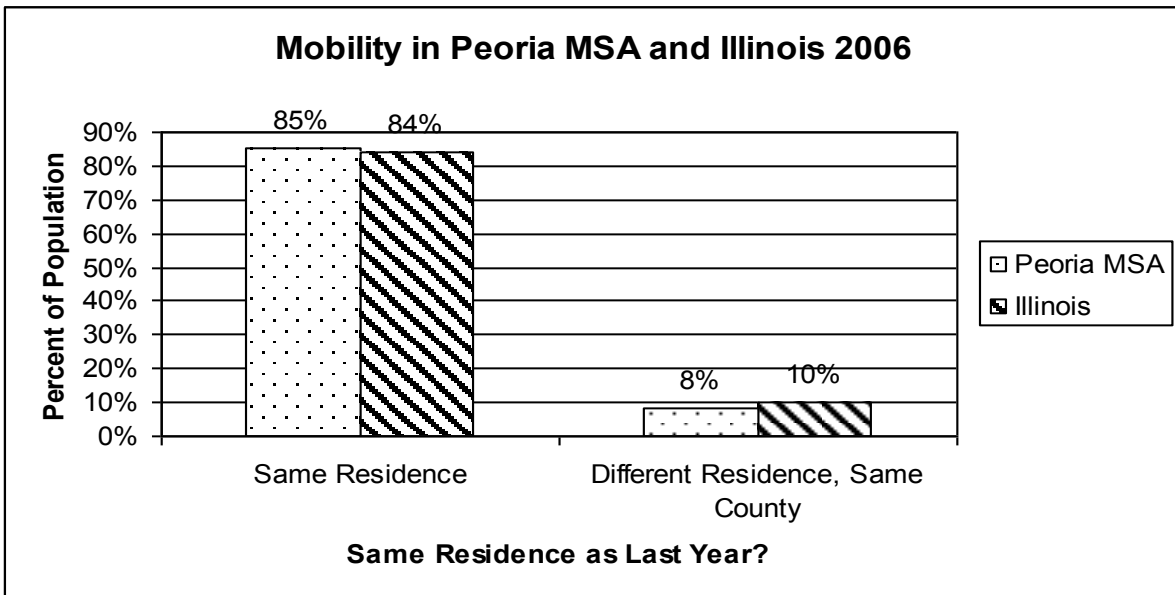
Figure 1.2. Youth Poverty



Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>

Poverty disproportionately affects children and youth. Poverty rates are higher than average among children under 18 while they are below average among persons 65 and older.

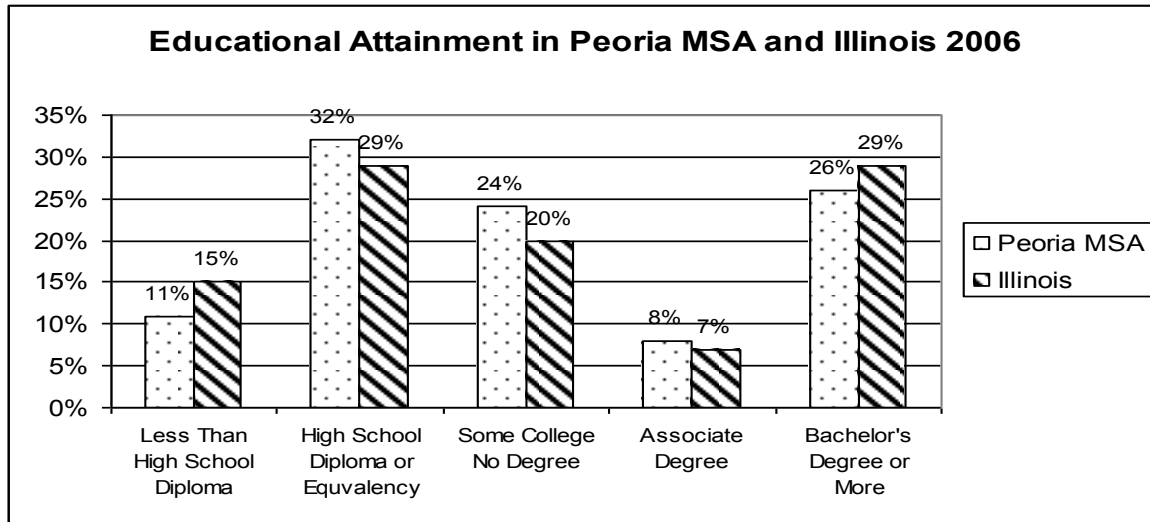
Figure 1.3. Mobility



Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>

Most residents (85% of the Peoria MSA, 84% for the State) have experienced no mobility over the past year. Ten percent of Illinois residents moved within the same county, a type of mobility less common in the Peoria MSA (8%) than in the State.

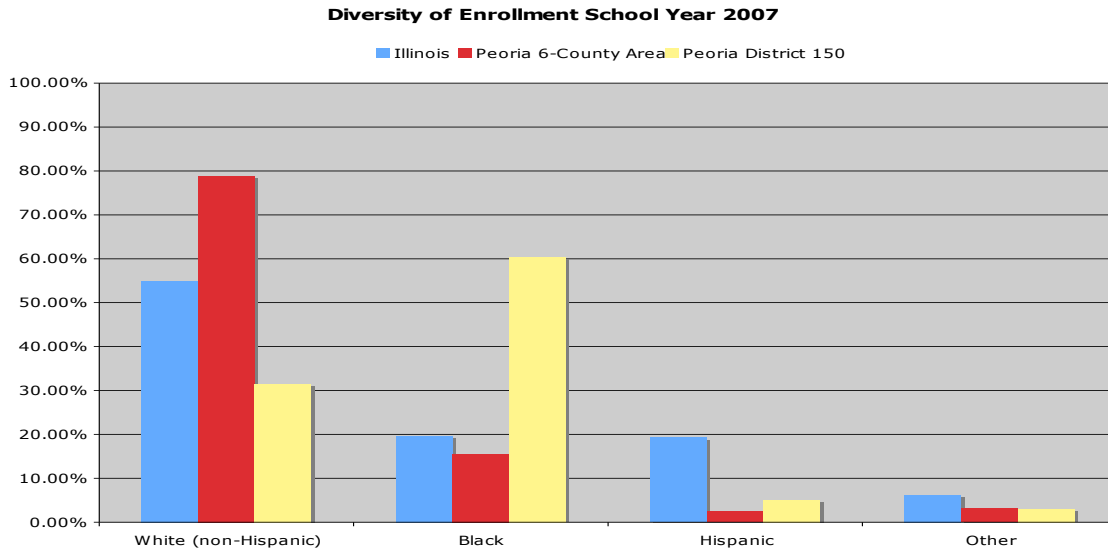
Figure 1.4. Educational Attainments



Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>

Relative to the state as a whole, the Peoria MSA has a higher percentage of people who have completed high school or more. Of the population 25 and older in the Peoria Five-County MSA in 2006, 89% have a high school degree, compared to 85% for Illinois. Relative to the state as a whole, the Peoria MSA has a lower percentage of people who have obtained their Bachelor’s degree or more (26% in Peoria MSA and 29% in Illinois).

Figure 1.5. Diversity of Enrollment

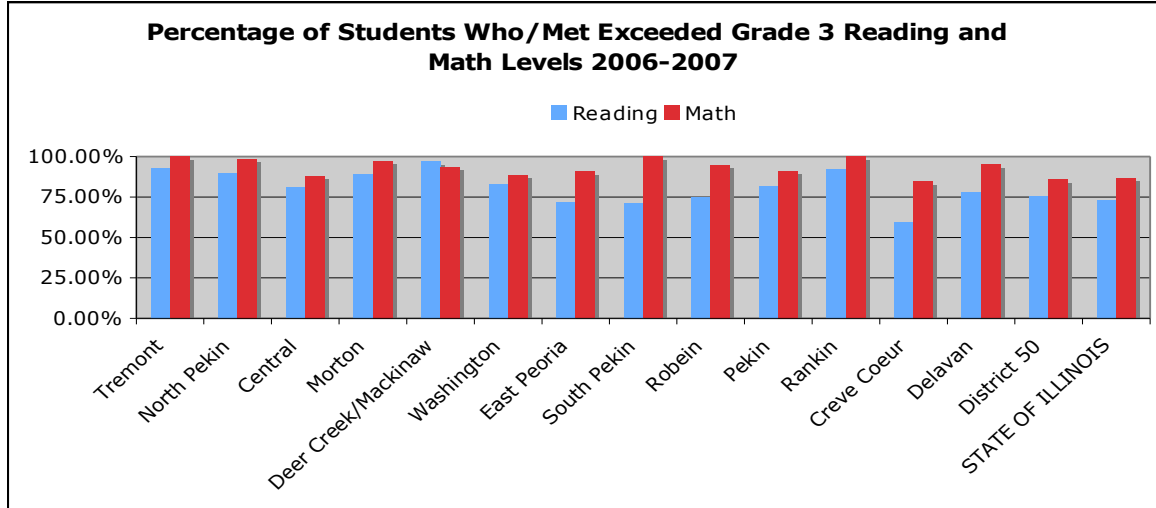


Source: State Board of Education, School Year 2007 District Report Card Summary

While the six-county area has a disproportionately large number of white students enrolled during the 2006-2007 school year, District 150 has a disproportionately large number of black students. Both the six county area and District 150 are lower than state

average for Hispanic students, as well as the “other” category. Note that these percentages are very consistent over time. In studies completed in 1999 and 2005, the percentages were very similar.

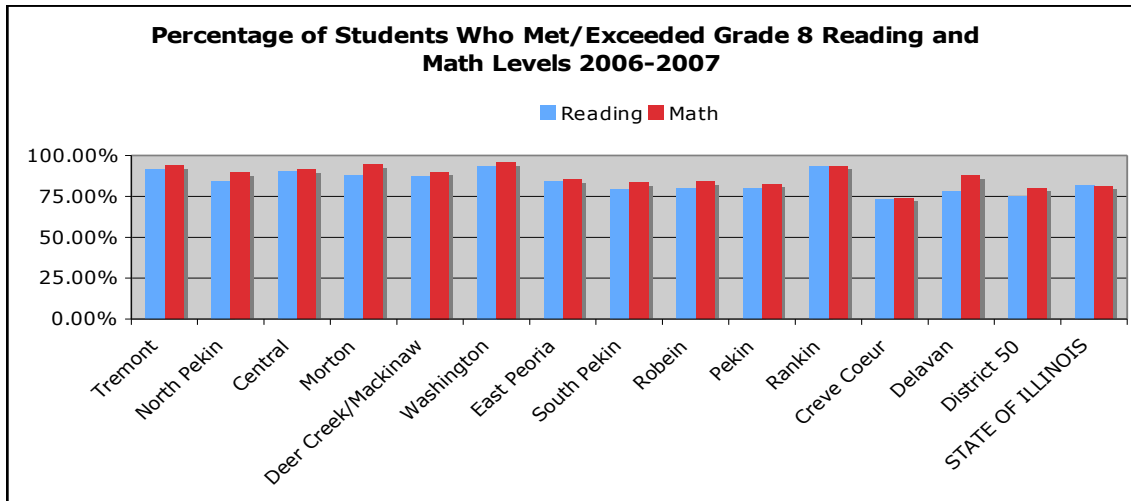
Figure 1.6. Grade 3 Student Achievement Tazewell County 2006-2007



Source: Illinois State Board of Education, School Year 2006-2007 District Report Card Summary

Most of the school districts exceed the state average in both reading and math. However, East Peoria, South Pekin and Creve Coeur are below the state average, while District 150 and Robein are similar to state averages. In terms of math, Creve Coeur is similar to state averages. Note that implications of low reading scores are discussed in strategic implications.

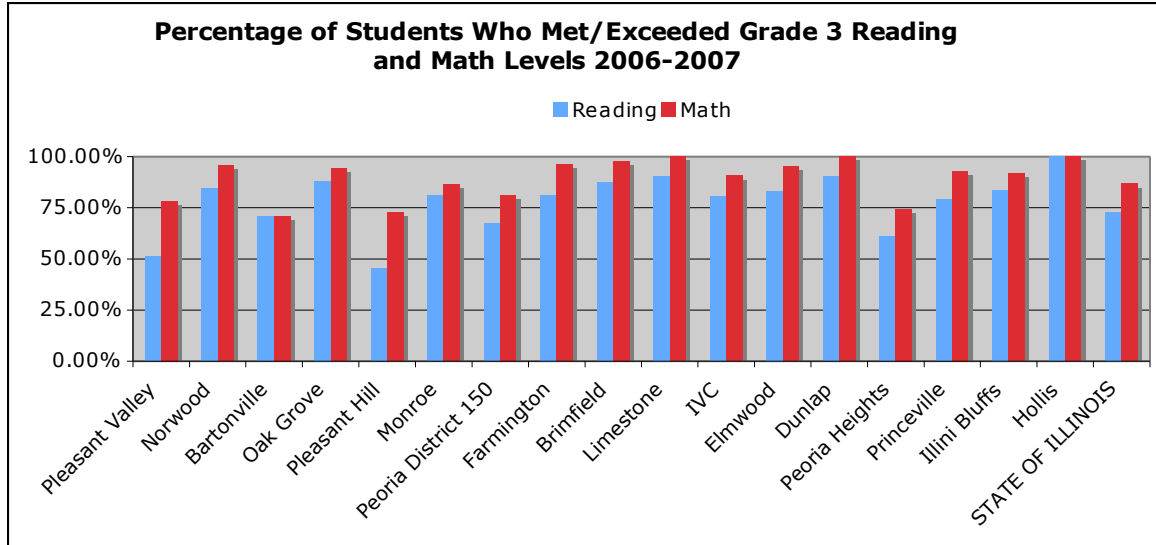
Figure 1.7. Grade 8 Student Achievement Tazewell County 2006-2007



Source: Illinois State Board of Education, School Year 2006-2007 District Report Card Summary

Most of the school districts exceed the state average. However, Creve Coeur is below the state average in terms of reading and math. South Pekin, Robein and Pekin are similar to state averages in terms of reading.

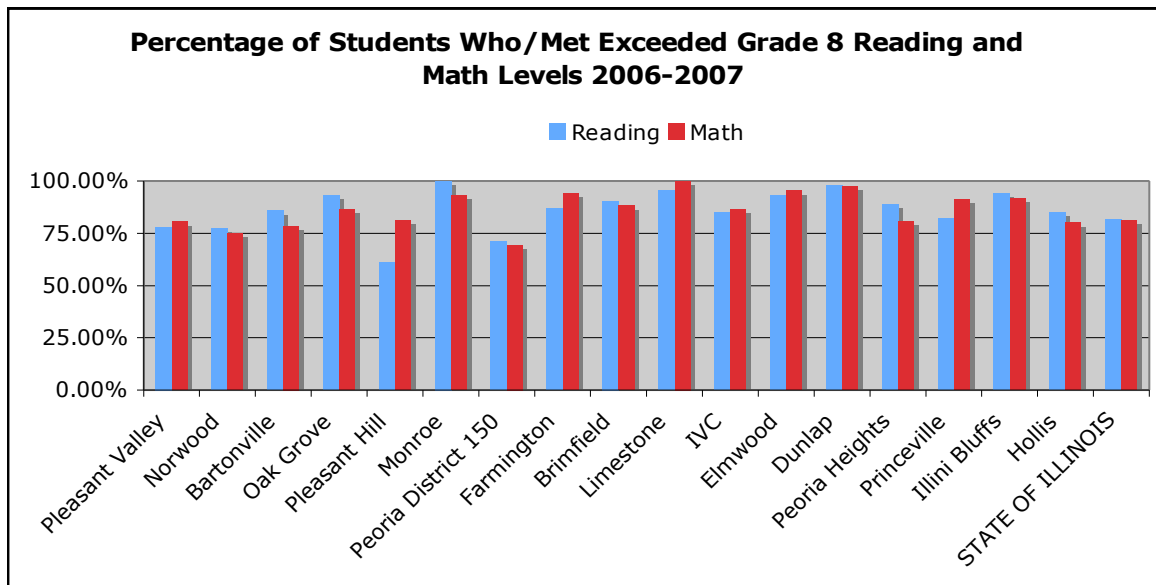
Figure 1.8. Grade 3 Student Achievement in Peoria County 2006-2007



Source: Illinois State Board of Education, School Year 2006-2007 District Report Card Summary

Pleasant Valley, Bartonville, Pleasant Hill, District 150 and Peoria Heights are below state averages in terms of reading. For math, the same school districts are below state averages. See strategic implications for consequences of low reading scores at grade three level.

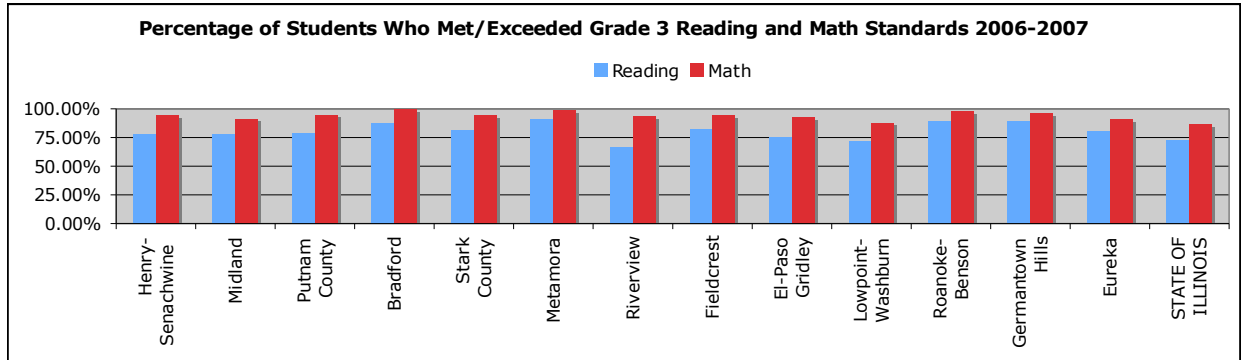
Figure 1.9 Grade 8 Student Achievement in Peoria County 2006-2007



Source: Illinois State Board of Education, School Year 2006-2007 District Report Card Summary

While Pleasant Valley, Norwood and Pleasant Hill fell below the state average in terms of reading, District 150 was the only school district to lag behind state averages for both reading and math.

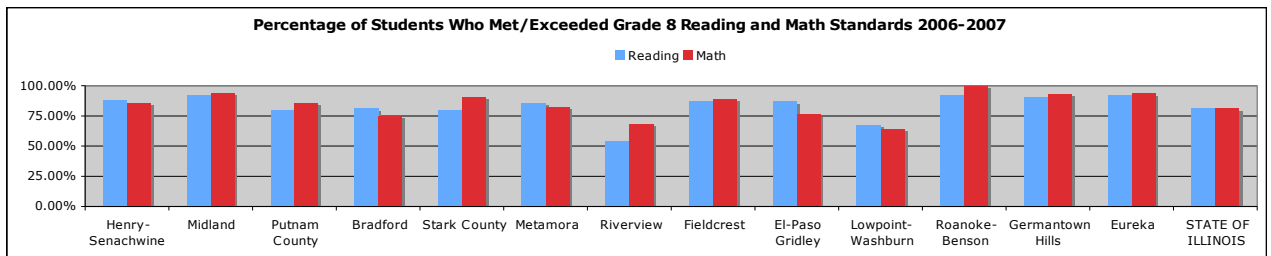
Figure 1.10 Grade 3 Student Achievement in Other Counties 2006-2007



Source: Illinois State Board of Education, School Year 2006-2007 District Report Card Summary

In other counties, only Riverview, Low Point/Washburn and El Paso/Gridley were lower than the state average in terms of reading. All counties at the third grade level were better than state average in terms of math.

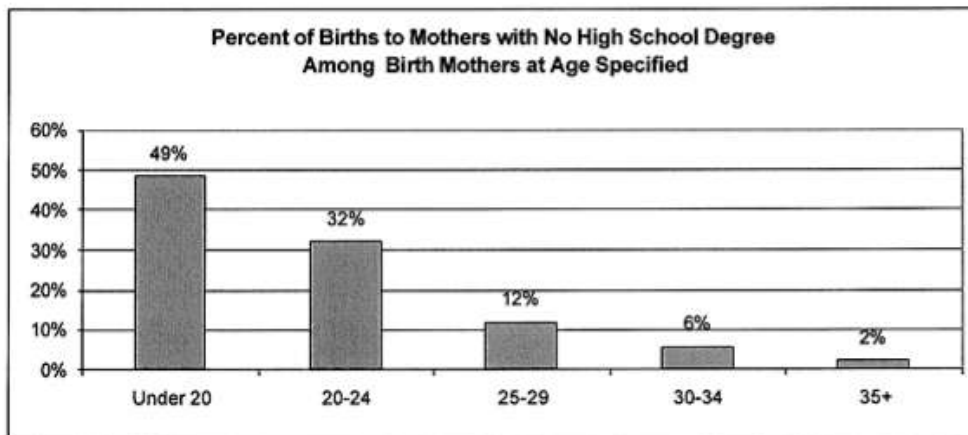
Figure 1.11. Grade 8 Student Achievement in Other Counties 2006-2007



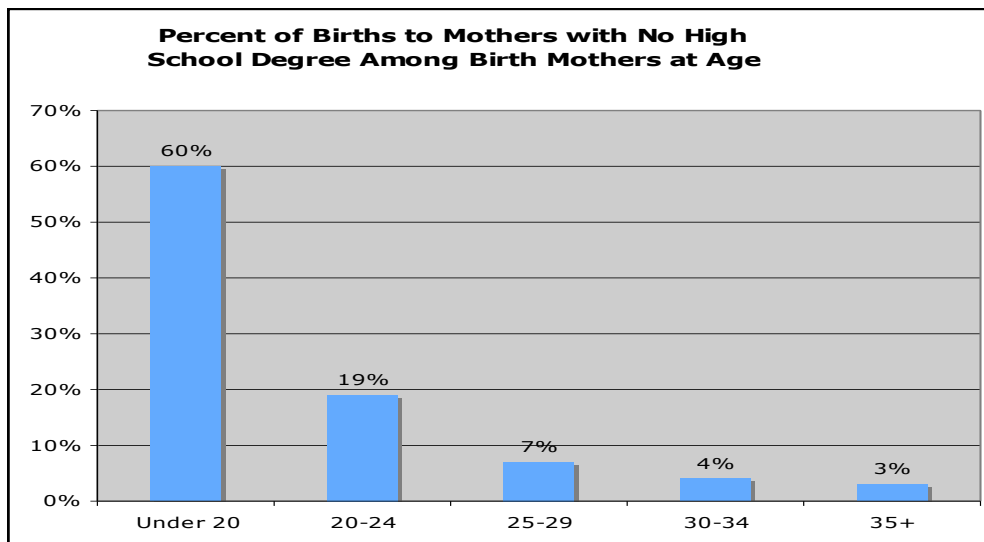
Source: Illinois State Board of Education, School Year 2006-2007 District Report Card Summary

At the 8th grade level, Riverview and Low Point/Washburn were below state averages for both reading and math.

Figure 1.12. Births to Mothers With No High School Degree in Peoria Six-County Area: 2000 vs. 2002



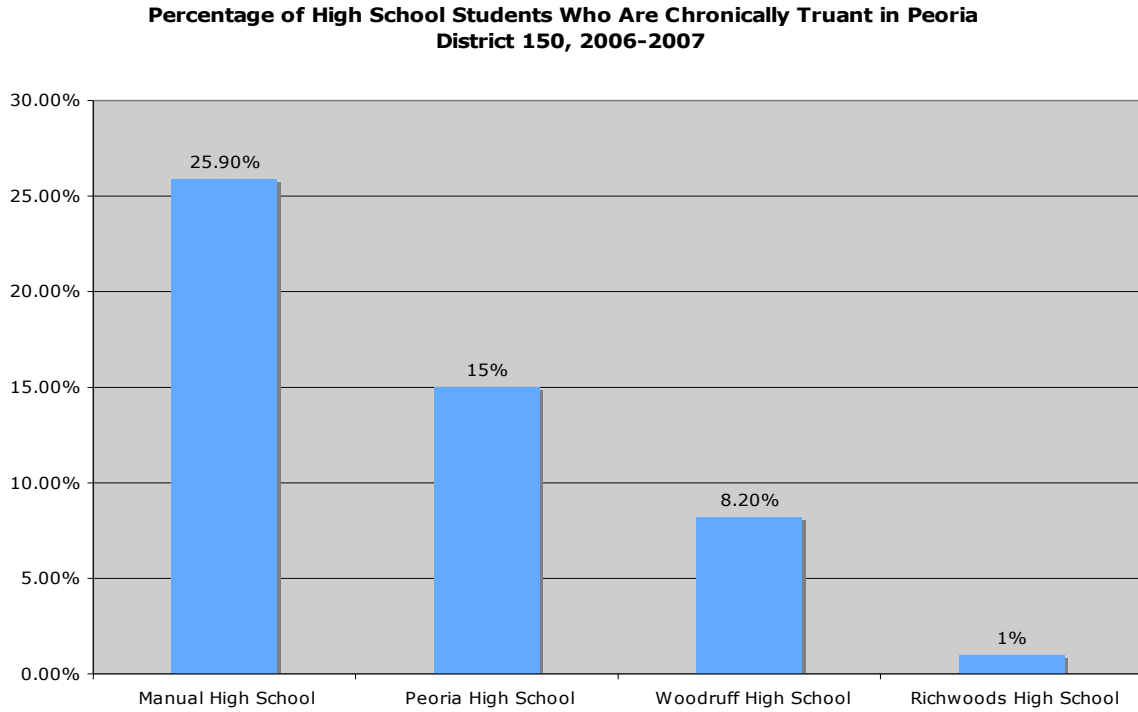
Illinois Department of Public Health, Vital Statistics 2000, Selected Natality Statistics among residents, pages 146-226



Source: Illinois Department of Public Health, Vital Statistics 2002, Selected Natality Statistics among residents, pages 218-298.

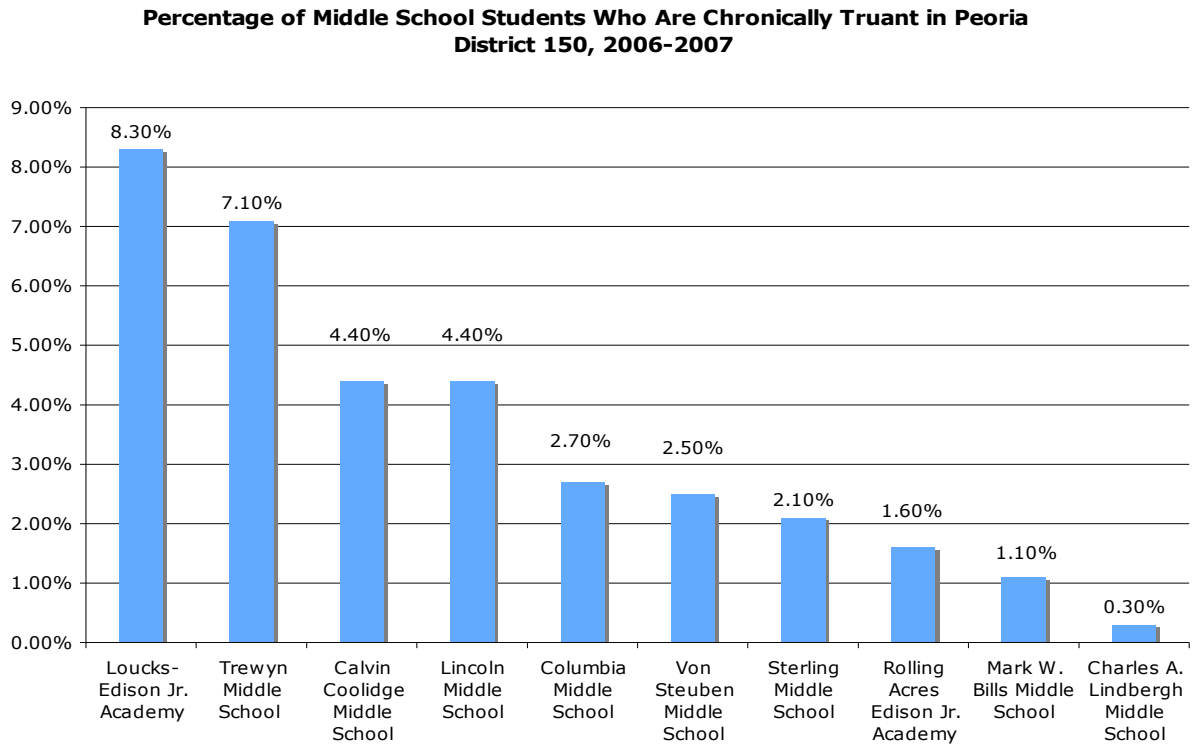
Note that births to mothers without a high-school degree rose 11 percent from 2000-2002 for mothers under the age of 20. Percentage of births to mothers with no high-school degree in other age groups was fairly constant.

Figure 1.13. High School Truancy for District 150



Source: Illinois State Board of Education, School Year 2006-2007 District Report Card Summary

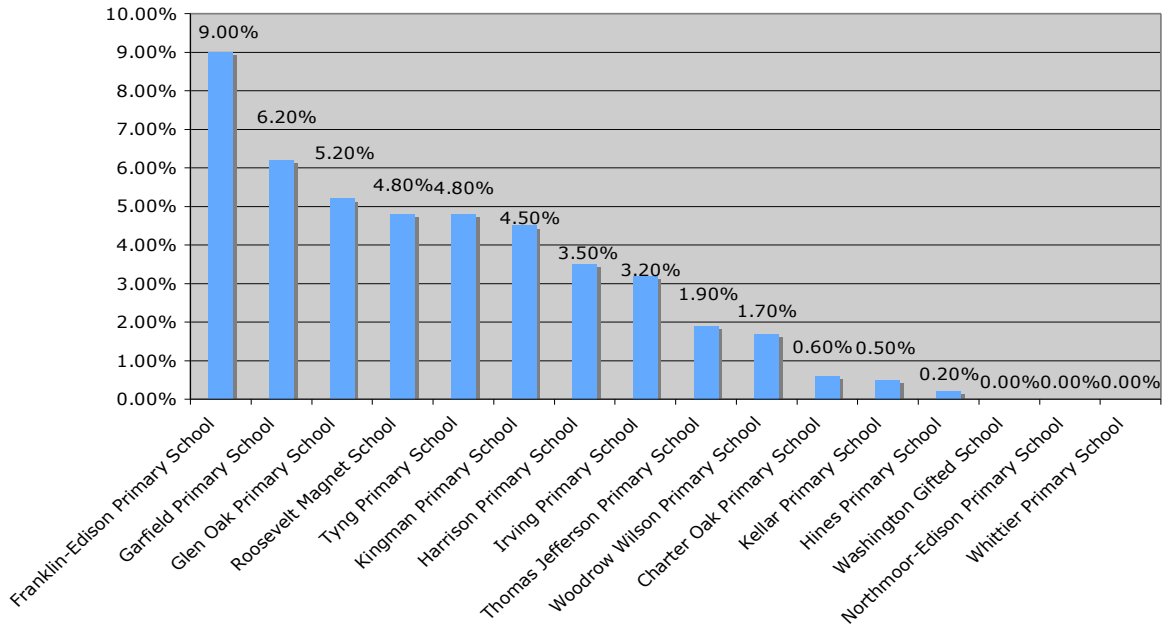
Figure 1.14. Middle School Truancy for District 150



Source: Illinois State Board of Education, School Year 2006-2007 District Report Card Summary

Figure 1.15. Primary School Truancy for District 150

Percentage of Primary School Students Who Are Chronically Truant in Peoria District 150, 2006-2007



Source: Illinois State Board of Education, School Year 2006-2007 District Report Card Summary

Chronic truancy is a major inhibitor to the academic progress of children and young adults. Figures 1.13, 1.14, and 1.15 demonstrate the large deviation among truancy rates in the Peoria Public Schools, District 150. The causes of truancy vary depending on the age of children; whereas truancy of middle and high school students is more likely a result of the adverse behavior and decisions of individual students, elementary school truancy often results from decisions and actions taken not by the student, but by the parent or caregiver of the child.

Child and Youth Issues: Strategic Implications

Children deserve to be safe and live in a stimulating and nurturing environment. They need to develop pre-literacy skills so they can be more successful in school when they enter. There is a dramatic causal relationship between reading to small children and academic success; children who are not being read to have a lower vocabulary, start school behind other children, may have slower brain processing ability and ultimately are less likely to succeed.

In Richmond, VA, the United Way understands that helping children get off to a good start, perform well in school and avoid risky behavior is critical to ensuring future success for the community. They also know that new research on cognitive development shows the importance of health, nutrition, and intellectual stimulation during the first years of life.

Activities focusing on children can include a significant tutoring effort to help preschoolers get ready for kindergarten and elementary students learn to read by third grade and successfully complete algebra by the start of tenth grade. Note that the most

effective strategy used with the United Way of Dane County (UWDC) has been working with the Schools of Hope partners – a partnership designed to place volunteer tutors in schools to provide one-on-one interaction with students.

3rd Grade Reading. Research tells us that the most reliable predictor of educational success for children is whether they are reading at grade level by the end of 3rd grade. UWDC has virtually eliminated the difference between white and black students. In 1995, there was a 21 percent difference in the success rates of white students and black students. However, by 2004, they had reduced the gap to 2 percent. Note that according to data presented in Figures 1.6, 1.8 and 1.10, certain school districts (e.g., Pleasant Hill, Pleasant valley, District 150 and Peoria Heights) are below 3rd grade reading state averages.

Algebra by 10th Grade. According to research, a child from a low-income family who completes algebra has virtually the same chance of going to college as a child from an upper-income family who passes the course. Thus, it is not about the math, it's about learning to problem solve. Figures 1.7, 1.9 and 1.11 provide insights as of 8th grade.

Parental Education and Support. To be prepared to learn in kindergarten, children need pre-literacy skills. They must also be able to make and keep friends, develop positive relationships with adults, and feel a sense of opportunity and excitement for the world around them. As their child's first teacher, much of this responsibility falls upon parents. In Omaha, United Way volunteers are visiting first-time parents at their homes and giving them the tools they need to succeed. Research shows that the more involved parents are in supporting the education of the children, the lower the truancy rate. As seen in Figures 1.13, 1.14 and 1.15, truancy is a significant issue in our community.

Supporting Early Childhood Education. Child care providers can grow as professionals through workshops and other educational opportunities that provide them with best practices and chances to share what works. By bringing caregivers together, the UWDC is giving them a chance to learn practical ways they can influence early literacy and math skills.

Engage At-Risk Youth in Volunteering. Teenagers and pre-teens can spend part of their summer vacation in supervised volunteer projects. The Summer Youth Volunteer Program used by the UWDC engages youth in service projects that are challenging, rewarding and educational. The program helps to meet the needs of their community and promotes a lifetime ethic of service among the young people involved. The summer program projects take place at a variety nonprofit agencies.

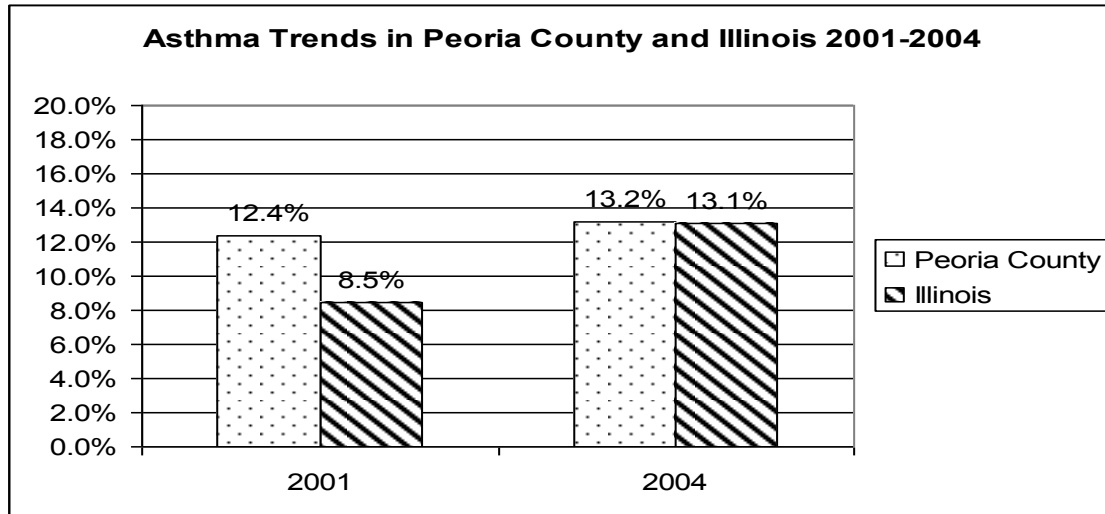
A best practice opportunity for the HOIUW may be to consider the YouthBuild program. The detail and benefits of this program can be seen at <http://www.youthbuild.org/site/c.htIRI3PIKoG/b.1223925/k.DF42/Programs.htm>. Additionally, Mclean County already has a YouthBuild Program and may be able to assist development of a similar program in the Peoria area (c.f., <http://www.youthbuildmcleancounty.org/joomla15/>).

Moreover, we strongly encourage the HOIUW to evaluate the community guide from www.helpingamericasyouth.gov. This site identifies risk factors, programs to management risk factors and success rates of programs. Data from this site may be invaluable to effectively managing problems with children and youth and ultimately in allocating resources to community programs.

2. Health Issues and Trends

All people in the HOIUW six-county area should have access to health care, with a focus on increasing access to health care, dental care and medications. It is imperative to provide opportunities for all residents to achieve optimal physical and mental health while promoting healthy lifestyles and healthy communities.

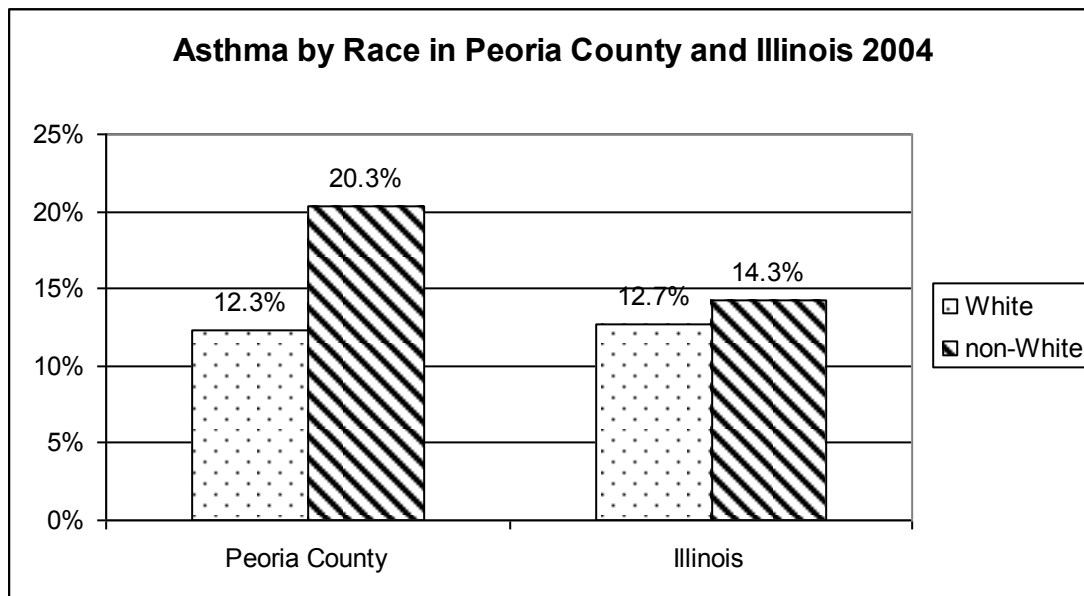
Figure 2.1. Asthma Trends



Source: IDPH Behavioral Risk Factors, <http://app.idph.state.il.us/brfss/>

Asthma is an increasing issue. In 2001, Peoria County had a higher asthma rate (12.4%) than in Illinois. In 2004, Peoria County's asthma rate increased slightly, while Illinois' asthma rate increased from 8.5% to 13.1%, comparable to Peoria County.

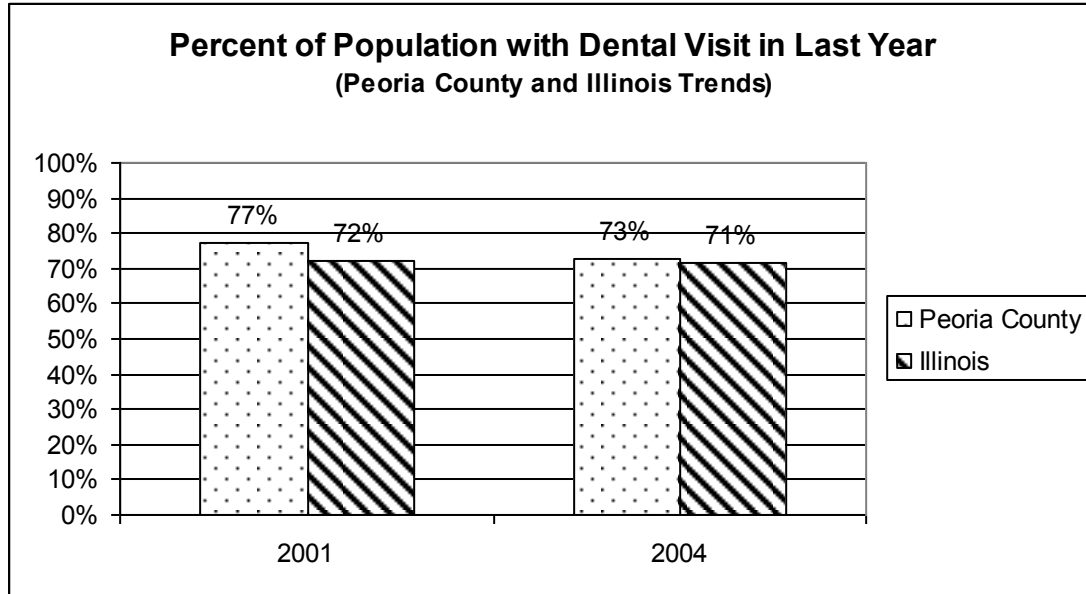
Figure 2.2. Asthma by Race



Source: IDPH Behavioral Risk Factors, <http://app.idph.state.il.us/brfss/>

Asthma rates in 2004 were higher in the non-white population than in the white population in Peoria County and Illinois, a difference that was particularly distinctive among residents of Peoria County.

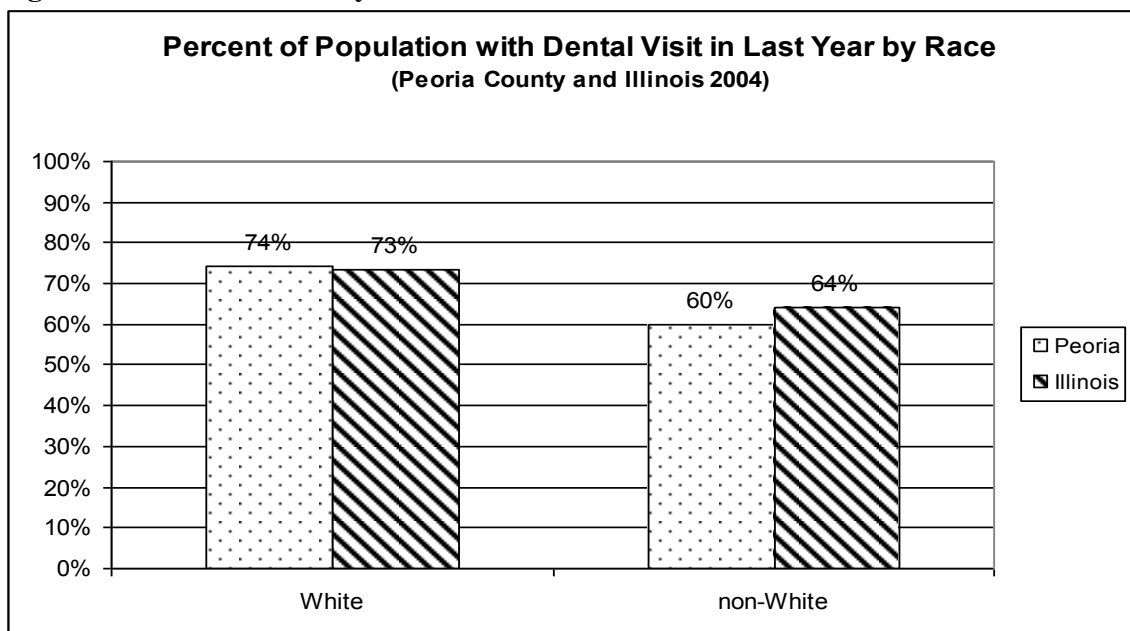
Figure 2.3. Dental Visits



Source: IDPH Behavioral Risk Factors, <http://app.idph.state.il.us/brfss/>

Dental visits are declining. Peoria County still averages more recent dental visits than Illinois.

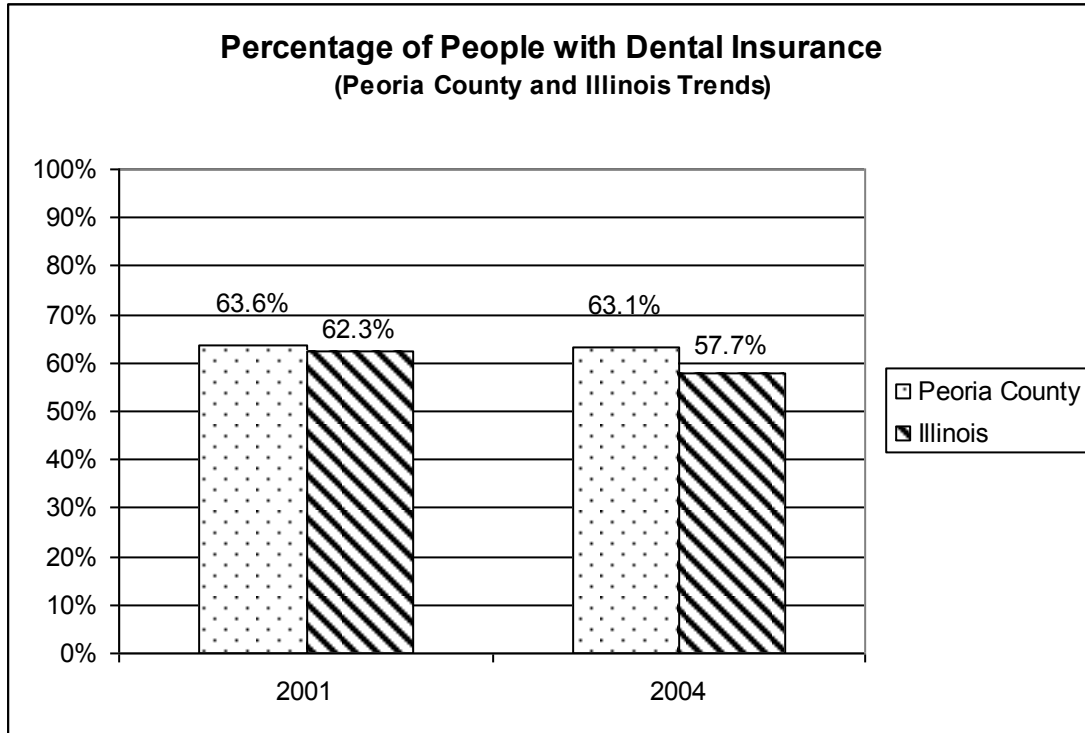
Figure 2.4. Dental Visits by Race



Source: IDPH Behavioral Risk Factors, <http://app.idph.state.il.us/brfss/>

The white population is more likely to have a recent dental visit than the non-white population, both statewide and in the Peoria Area.

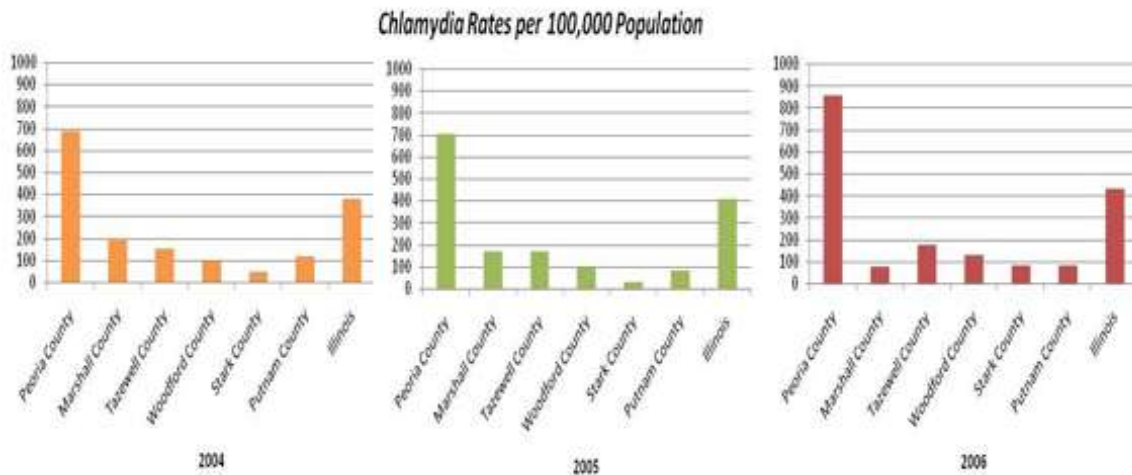
Figure 2.5. Percent of People with Dental Insurance



Source: IDPH Behavioral Risk Factors, <http://app.idph.state.il.us/brfss/>

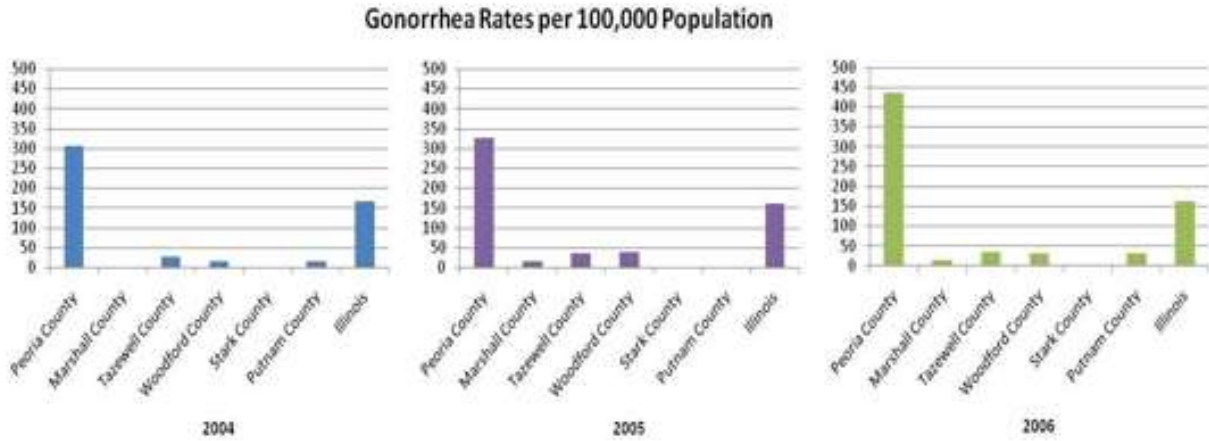
Dental coverage is declining. While the percentage of people with dental insurance in Peoria County fell only slightly, the percentage of people with dental insurance in Illinois had declined from 62.3% to 57.7%.

Figure 2.6 Chlamydia Trends



Source: Illinois Department of Public Health, www.idph.state.il/health/std/chlchases02_06.htm

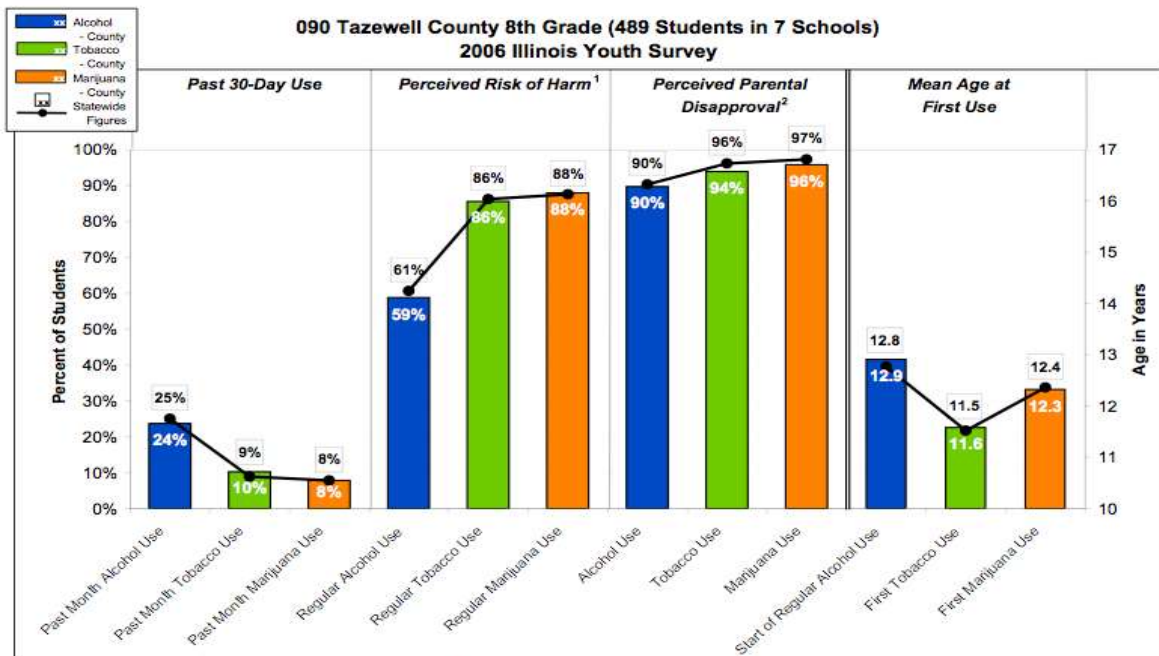
Figure 2.7. Gonorrhea Trends



Source: Illinois Department of Public Health, www.idph.state.il/health/std/gon02_06.htm

STDs are on the rise in Peoria County. While rates have historically been higher than state averages, between 2004-2006 we see a substantial increase in both Chlamydia and gonorrhea rates.

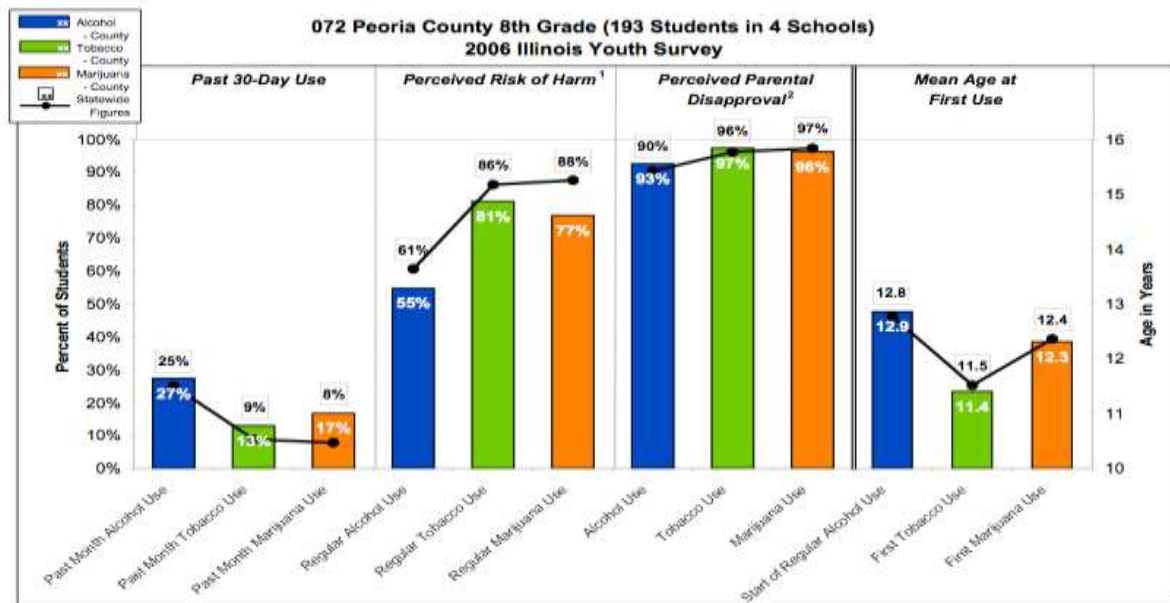
Figure 2.8 Reported Substance Abuse Usage of Tazewell County 8th Graders, 2006



¹ Perceived Risk of Harm: Percent who responded "Moderate Risk" or "Great Risk" of harm.

² Perceived Parental Disapproval: Percent who responded "Wrong" or "Very Wrong" attitude of parents toward youth use of substance.

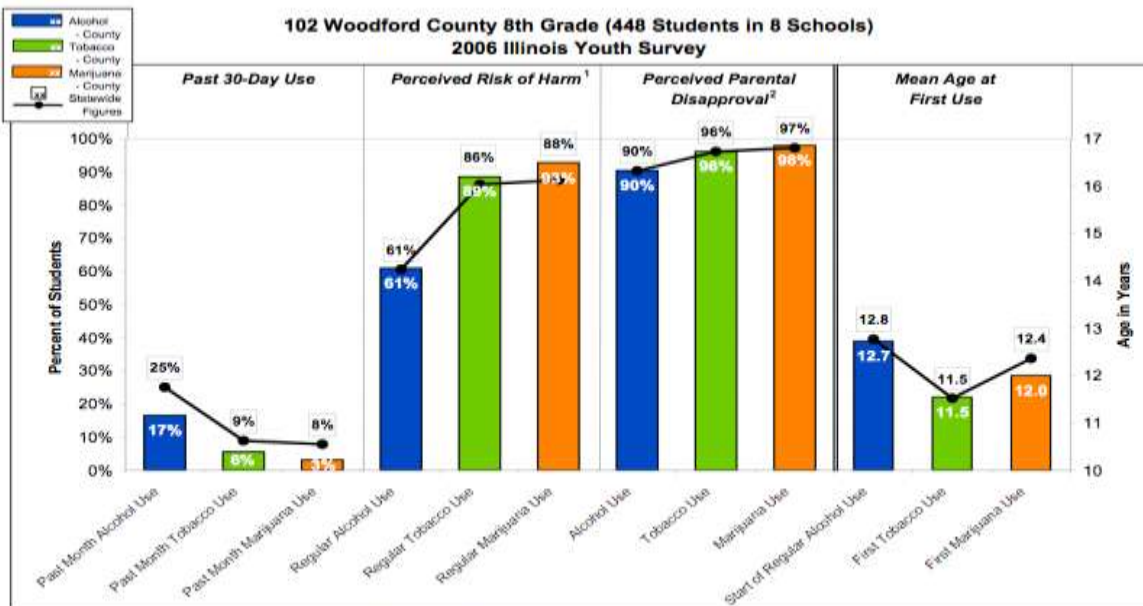
Figure 2.9 Reported Substance Abuse Usage of Peoria County 8th Graders, 2006



¹Perceived Risk of Harm: Percent who responded "Moderate Risk" or "Great Risk" of harm.

²Perceived Parental Disapproval: Percent who responded "Wrong" or "Very Wrong" attitude of parents toward youth use of substance.

Figure 2.10 Reported Substance Abuse Usage of Woodford County 8th Graders, 2006



¹Perceived Risk of Harm: Percent who responded "Moderate Risk" or "Great Risk" of harm.

²Perceived Parental Disapproval: Percent who responded "Wrong" or "Very Wrong" attitude of parents toward youth use of substance.

Source: http://www.illinoisyouthsurvey.org/results/countyreports_2006.html

Data from the 2006 Illinois Youth Survey (Figures 2.8-2.10) provide considerable insight into trends for substance abuse usage from 8th grade students in Peoria, Tazewell, and Woodford Counties. The three most common substances used by area 8th graders are alcohol, tobacco, and marijuana. Across the three counties, students utilize tobacco as their gateway into substance usage at approximately 11.5 years of age. Alcohol is the drug with highest reported usage rates and while Tazewell and Peoria County 8th graders use alcohol at rates consistent with statewide averages, Woodford County youth use alcohol at a lower rate.

Mental Health. According to a local mental-health expert, “The mental-health system in Peoria is fragmented for kids. There are many providers and disperse data.” Stable mental health is critical to the developmental maturity and academic success of children and youth. According to the Center for Disease Control and Prevention, statewide in Illinois, suicide is the third leading cause of death for 15-19 year olds. On an annual basis, nearly a quarter (24%) of Illinois high school students consider suicide, while 10% attempt suicide, and 3% require medical attention following a suicide attempt. Depression is the leading cause of suicide and among Illinois students 12-17, 8% have suffered a major bout of depression within the last year.

Nationally, 10% of children and adolescents in the United States suffer from serious emotional and mental disorders that disrupt day-to-day function. Unfortunately, only 20% of these children in a given year are identified and receive treatment. This dichotomy has grave consequences for children, but especially adolescents. In 2001, approximately 50% of students with a mental disorder age 14 and older dropped out of high school.

Health Issues and Trends: Strategic Implications

The impact of a healthy community spills over into every other area of strategic focus for the HOIUW strategic plan. Consider that healthier children miss fewer days of school and are more "ready to learn." It is difficult to hold a job when a person is not healthy.

The uninsured are less likely to access preventive care or seek early treatment of illness and therefore may miss more time at work or school. Using health care appropriately, instead of the ER in non-emergencies, is better for patients and lowers cost of health care to society.

Untreated mental health problems contribute to homelessness, low academic achievement and lack of independence. Finally, children's mental health issues effect the entire family and those around them. Numerous United Way offices have well-established programs that offer insights into strategic implications for healthcare.

Healthcare Access Pilot. *In 2005, UWDC helped people without health insurance to appropriately access primary care through a unique partnership with local health care providers. Together, they launched the Healthcare Access Pilot, a new program aimed at finding a community-wide health care solution for uninsured residents.*

Children's Dental Care. *Dental pain is one of the top reasons children miss school. Given that percentage of people visiting the dentist is declining, as seen in Figure 2.3 , as well as a decrease in the percentage of people with dental insurance, as seen in Figure 2.4, this area is an important emerging issue.*

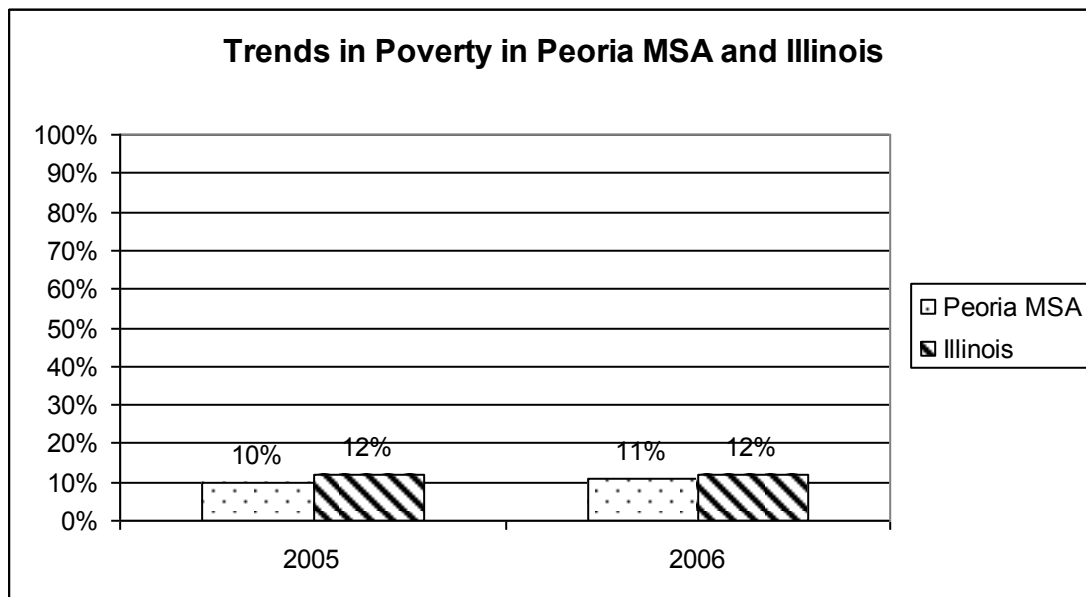
Mental Health Care for Children and Youth. *The UWDC is helping children cope with mental health issues that affect every area of their lives. Through group counseling, children work through problems - such as depression, anxiety and anger - facing children in elementary, middle and high schools. As indicated above, due to a lack of a centralized service provider for all youth and adolescent mental health concerns, the needs of Peoria and Central Illinois may not be adequately addressed. With dispersed service providers, there is a risk of duplication of mental health services and supporting select populations. Considering 80% of children with mental illnesses remain unidentified and untreated, continued efforts to de-stigmatize mental illness, better identify, and more rapidly connect children and adolescents to treatment would be advantageous. In the event mental illness and behavioral disorders can be identified and treated at a young age, these individuals will be more likely to develop behavior management and coping skills to become contributing members of society as adults.*

3. Self-Sufficiency Issues

There needs to be a focus on decreasing homelessness and increasing affordable housing. A mobilization plan should focus on landlord and tenant connections, financial counseling, food access and direct access to permanent housing, in order to meet their daily basic needs with dignity. The bottom line is that the HOIUW needs to find ways to reduce and eliminate homelessness.

Independence is also a critical concern in the area of self-sufficiency for both the elderly and persons with disabilities. In terms of the elderly, people live longer, happier lives when they are able to remain in their home. Seniors and people with disabilities can make great contributions to our society when they remain independent.

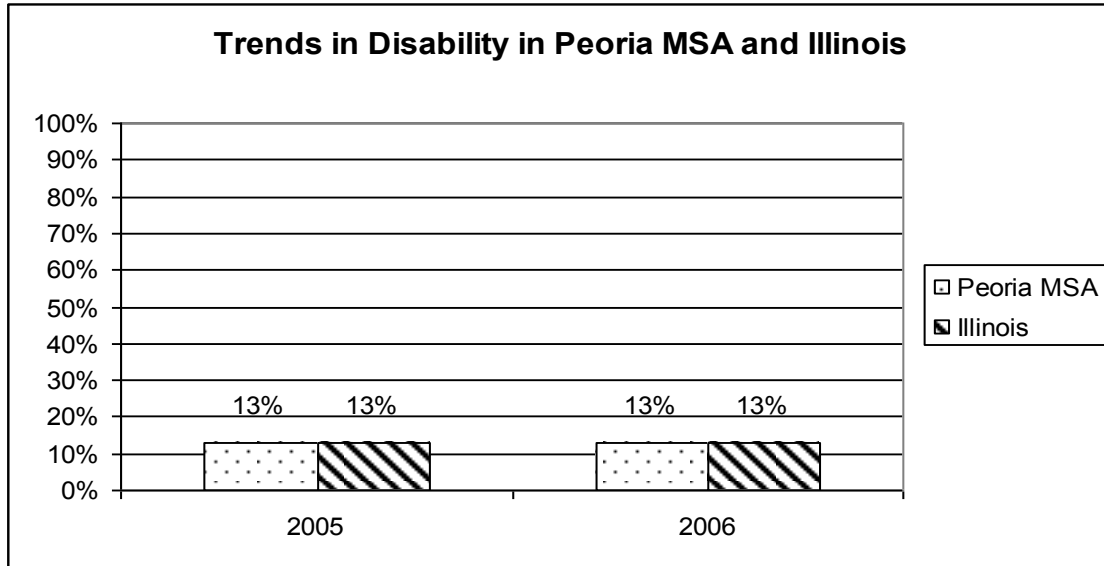
Figure 3.1. Trends in Poverty



Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>

Economic self sufficiency is the rule in the Peoria MSA, with only 11% of persons in poverty during 2006. The Peoria MSA poverty rate is up slightly from 2005, but remains below the state average.

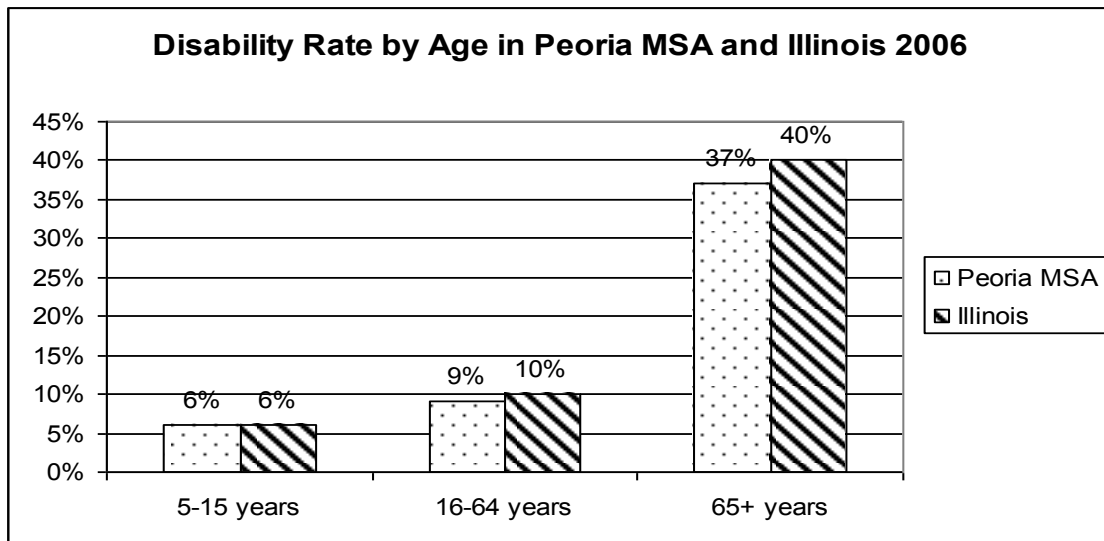
Figure 3.2 Disability Trends



Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census>

Most (87%) persons in the Peoria MSA do not have a disability that might limit their economic self sufficiency. The disability rate in the Peoria MSA is the same as found for Illinois. The 13% disability rate of the Peoria MSA has not changed from 2005 to 2006.

Figure 3.3. Disability by Age

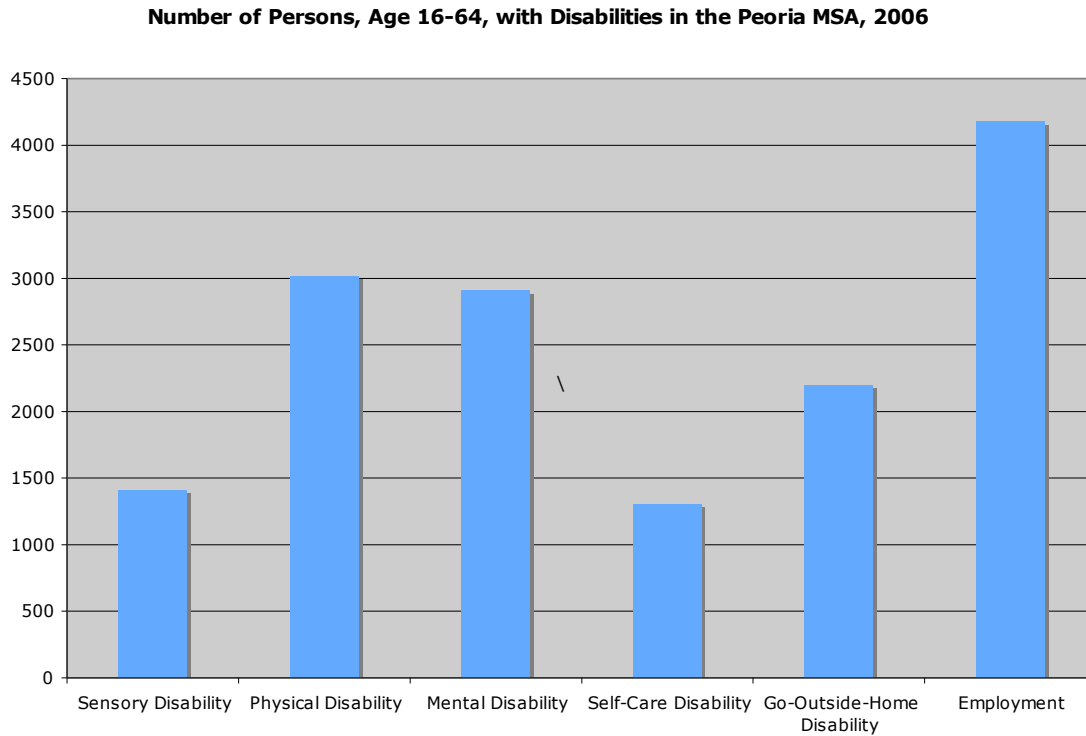


Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>

The low disability rates among children and working age adults in the Peoria MSA are comparable to those found statewide. Disability rates are significantly greater among persons aged 65 and over than among younger persons, both in the Peoria MSA and statewide. Disability rates among the population 65+ are not as great in the Peoria

MSA (37% of all persons 65+ are disabled) as the state average (40% of all persons 65+ in the state of Illinois are disabled).

Figure 3.4. Disability by Type



Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census>

Of the types of disabilities affecting non-institutionalized individuals in the Peoria MSA in 2006, disabilities inhibiting employment are the most prevalent and are most likely to deter financial independence.

Housing Burden

Figure 3.5a Housing Burden

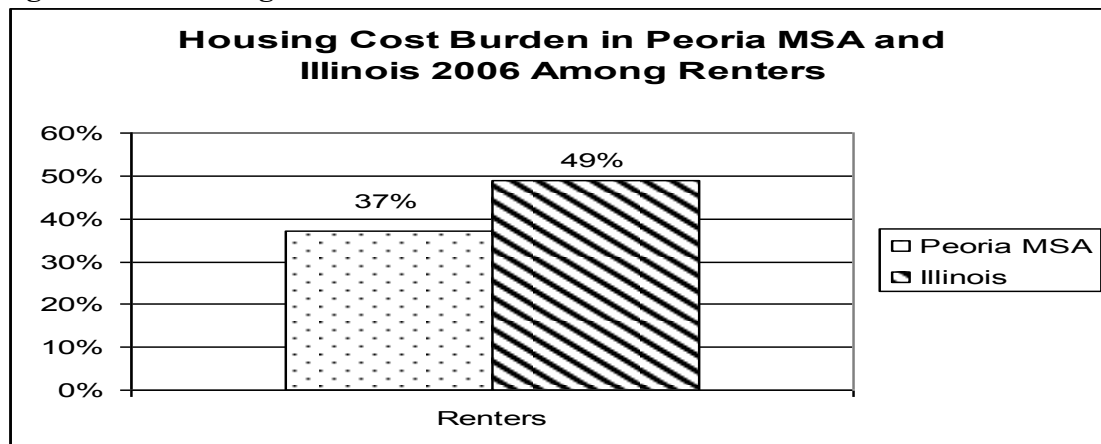


Figure 3.5b Housing Burden

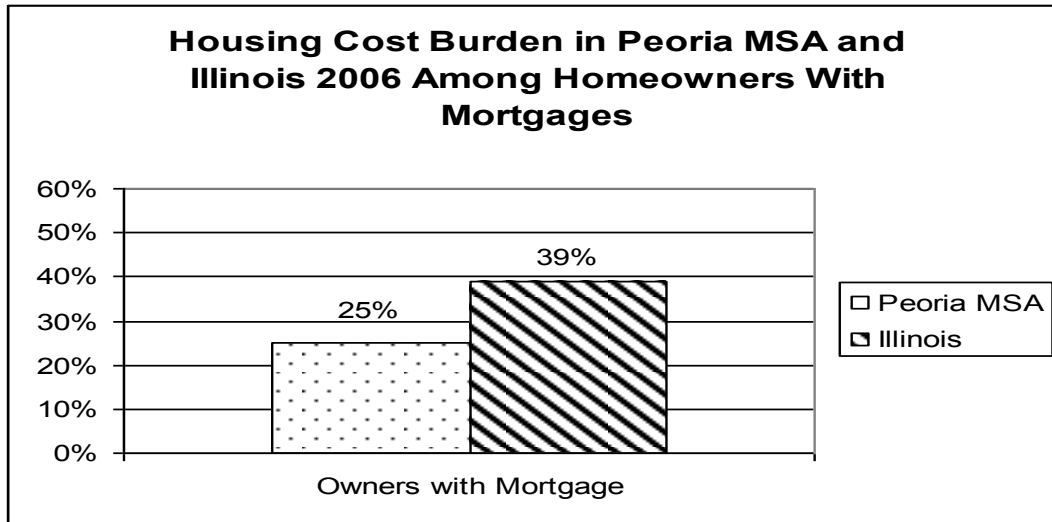
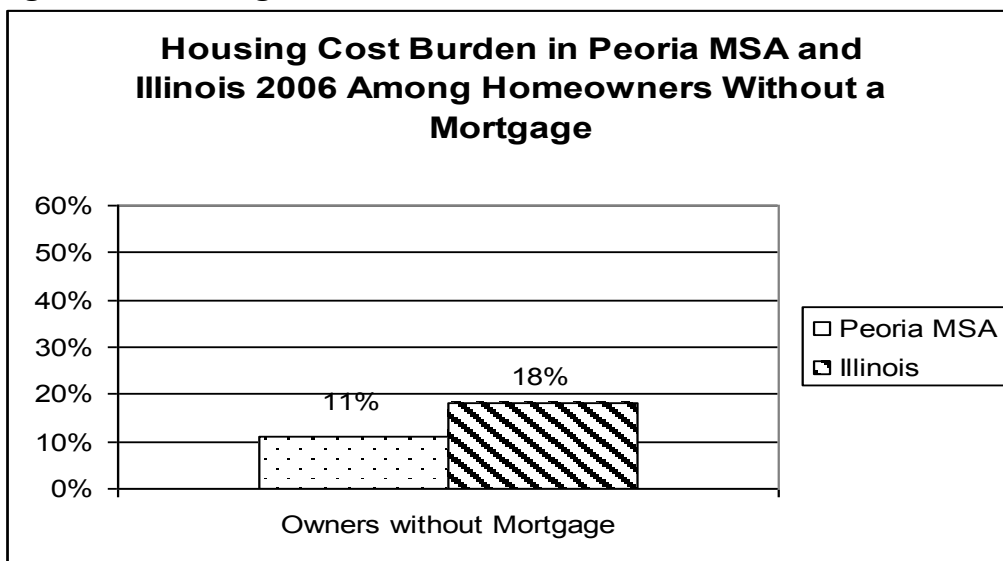


Figure 3.5c Housing Burden

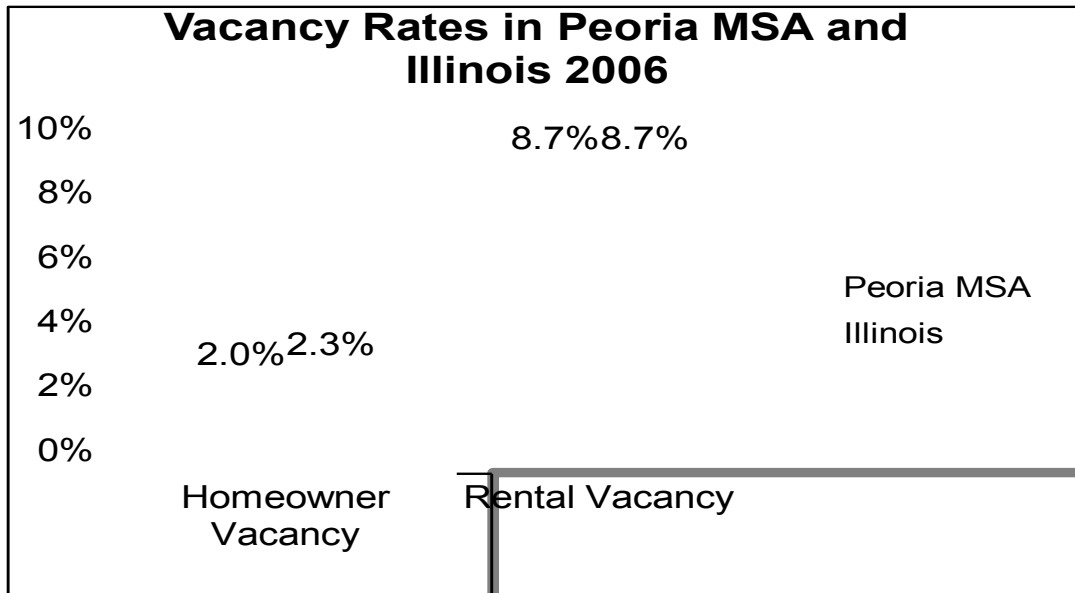


Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>

Housing cost burden is defined as having to pay 30% or more of the family's income for housing. Housing cost burdens are consistently a less frequent problem in the Peoria MSA than in Illinois. Overall, housing cost burden is most frequent among renters, and least frequent among homeowners who do not have to pay a mortgage.

Available Housing

Figure 3.6. Vacancy Rates

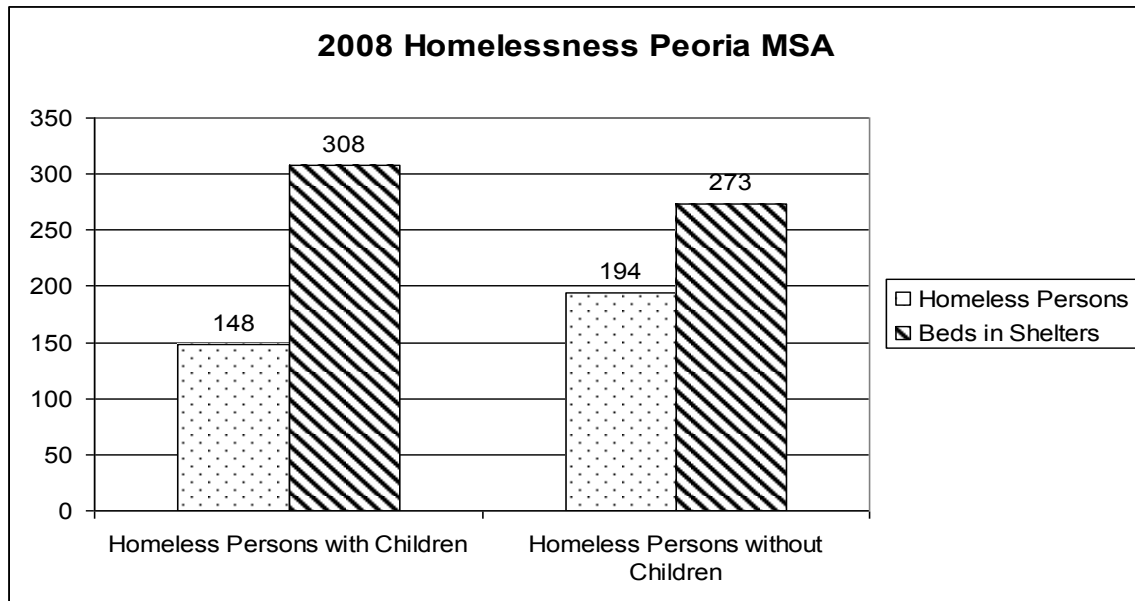


Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>

Would-be renters enjoy a good supply of vacant homes, with close to 9% of all rental homes vacant in 2006. Homeowner vacancy rates are lower than rental vacancy in the Peoria MSA and statewide.

Homelessness

Figure 3.7 Homelessness Data



Source: Preliminary Data from Dustin Swigart, YWCA Peoria, HMIS Director/IT Admin

A good supply of beds for Peoria MSA homeless persons continues to be evident in the 2008 data. As in our previous study, the supply of beds for the homeless exceeds the number of homeless, particularly for homeless parents with children.

Self-Sufficiency Issues: Strategic Implications

The path to personal independence begins in one place – the home. Without a home, it is difficult to obtain and keep consistent employment, thus creating a vicious circle. The effect of homelessness has a dramatic effect on children – children living in homelessness are subject to greater health problems, are absent from school more often, have more behavior problems, and have more barriers to learning to read. Overall, the homeless tend to lose their connection with family and friends, resulting in a weaker support system. From a resource allocation standpoint, research shows that supporting the homeless costs more than providing housing. Furthermore, homelessness affects academic and employment success; behavior problems disrupt entire classrooms and work environments and absenteeism affects reading skill and productivity. Employment disability, the largest disability type in Peoria, contributes to self-sufficiency instability. Fortunately, the Peoria MSA enjoys a surplus of beds in shelters that support the homeless population.

Living with disabilities greatly impacts the degree of self-sufficiency of individuals. With the changing demographics resulting from the aging of baby boomers, communities will experience an increase in the number of elderly individuals living with disabilities.

For families with children, several programs are being implemented through United Way organizations in other communities.

Bridge Builder – Help people avoid eviction through early identification of problems and financial education to build bridges between tenants and property managers that will help decrease avoidable loss of housing.

Improved Surplus Food Supply – Work with surplus food distributors to eliminate the tough choice families make between putting food on the table and keeping a roof over their heads.

Case Management – Improve the quality and capacity of case management to give homeless families and those at risk of becoming homeless the support and opportunities they need to remain in stable housing.

Housing First Programs – Research shows that when chronically homeless families have "housing first," they are better able to manage other issues in their lives.

For the elderly, to provide dignity and a sense of purpose, several programs are being instituted through other United Way organizations.

Volunteers in Neighborhoods - Neighbor to Neighbor. For many seniors and people with disabilities, a few hours of help each week can mean the difference between living at home or in a skilled nursing facility. In 2005, the UWDC and United Way Richmond recruited and trained volunteers to help older adults and people with disabilities preserve their independence, stay involved in their community and remain in their homes.

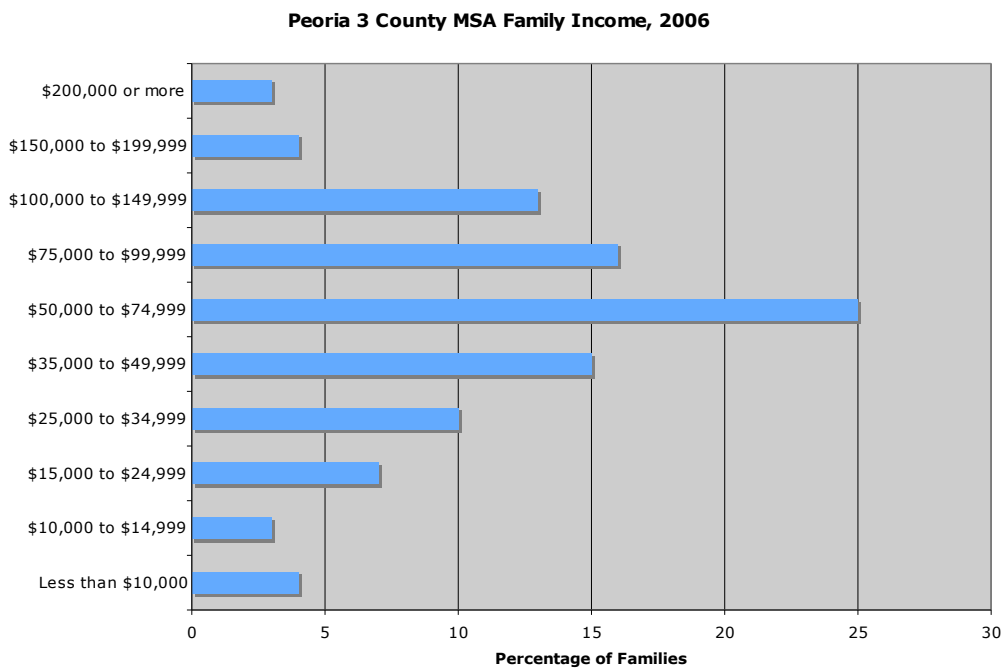
Caregiver Support. With support from either family/unpaid or professional/paid caregivers, seniors and people with disabilities are able to remain independent and valued members of our community. By supporting caregivers through training, outreach and improved services, the HOIUW can improve lives and build a stronger community.

Culturally-Competent Services. Reach out to communities of color in order to remove pockets of isolation and provide culturally-competent services.

4. Family-Related Issues

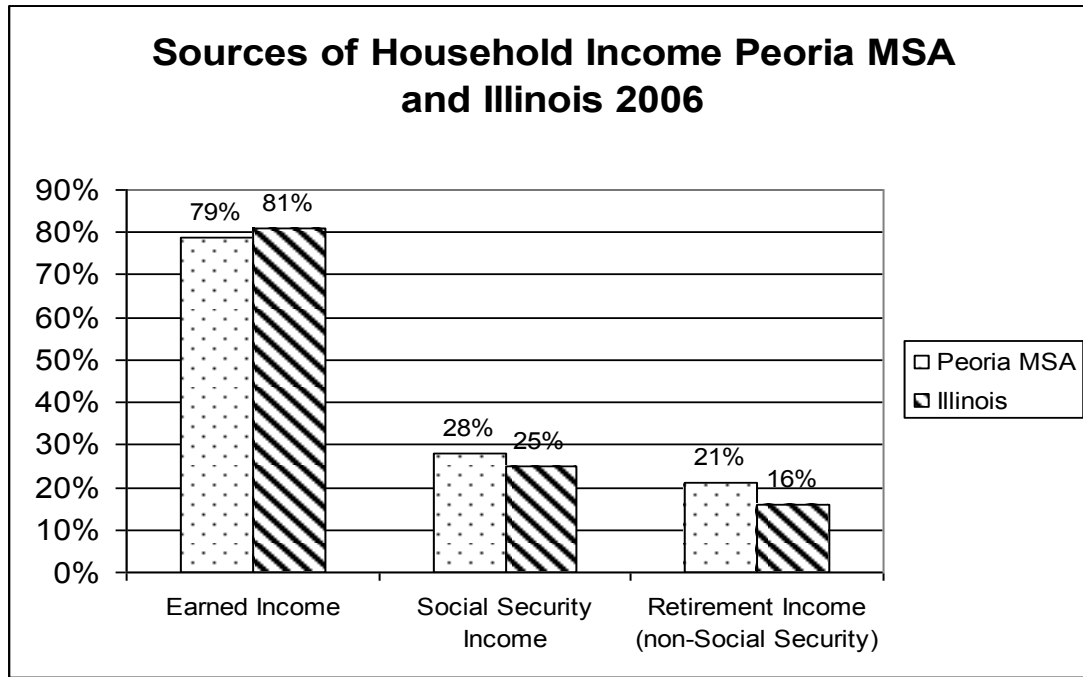
A stronger, more vibrant community begins with all families and individuals being able to fulfill their basic needs – including food, housing and childcare. Key focus areas may include: Literacy, Health and Nutrition, Family Involvement and School Readiness. Recent and current projects for the Early Childhood Development Coalition used by the United Way of Evansville includes a lead awareness campaign, literacy parties and kindergarten readiness preparedness for families. Moreover, there is a need to provide positive adult role models through mentoring programs and avoid high risk behavior after school hours.

Figure 4.1 Peoria 3 County MSA Family Income, 2006



Source: U.S. Census Bureau, American Community Survey 2006, Peoria three county

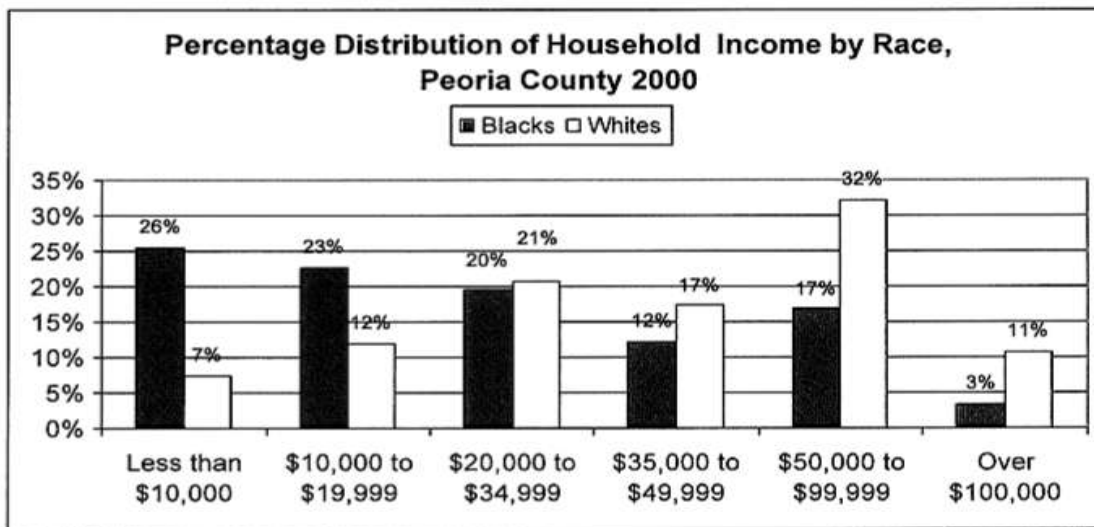
Figure 4.2 Tri-County Peoria Area Sources of Income, 2006



Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>
 Percentages may add to more than 100% due to multiple sources of income per household.

Most Peoria MSA households (79%) report earned income. Nearly three in ten (28%) receive Social Security, and about one in five (21%) have non-Social Security retirement income. Retirement income (Social Security and non-Social Security retirement income) is more common in the Peoria MSA than in Illinois.

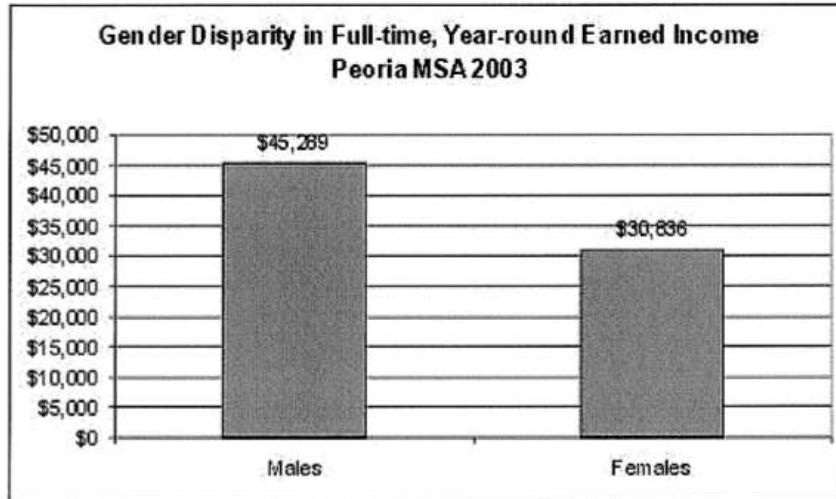
Figure 4.3 Household Income By Race, Peoria County 2000



U.S. Census Bureau, Census 2000, Summary File 3 (SF3) Sample data P151B, P151I, P152A, P152B

As of 2000, significant income disparity existed between white and black residents in Peoria County. Black residents were a considerable majority in households having incomes of less than \$20,000 and white residents were a considerable majority for households having incomes of greater than \$50,000.

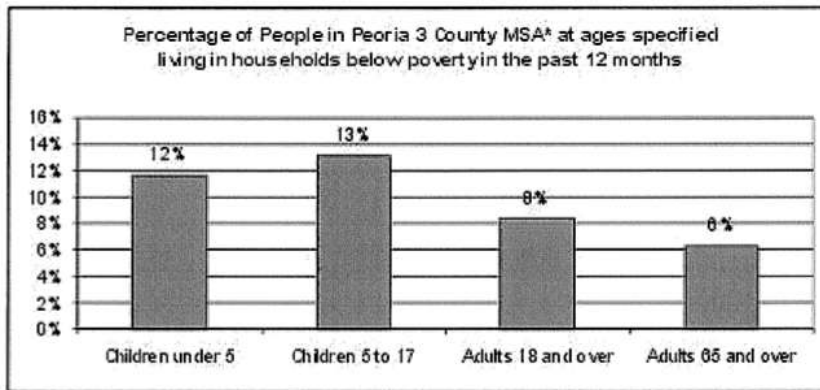
Figure 4.4 Gender Disparity in Peoria County Earned Income 2003



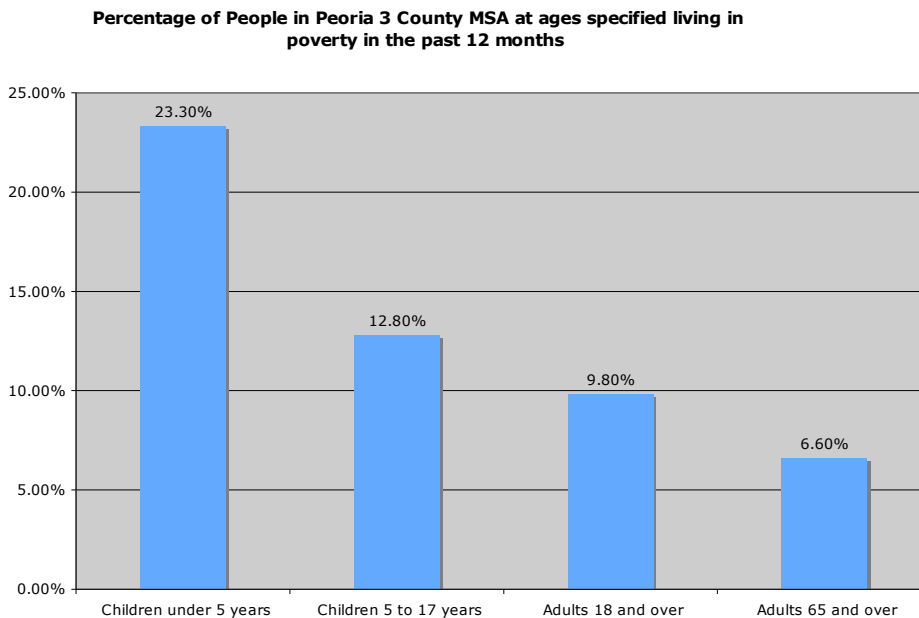
*U.S. Census Bureau American Community Survey 2003, Peoria three county MSA (Peoria, Tazewell and Woodford Counties). Table 3 Selected Economic Characteristics
The 2003 American Community Survey is limited to the household population and excludes the population living in institutions, college dormitories, and other group quarters.
Households include family households (at least 2 related persons living together) and non-family households (1 person household or multiple unrelated persons living together).

Significant gender disparity exists between men and women. Men have earned income that is approximately 50 percent higher than women.

4.5 Households Living in Poverty, Tri-County Peoria Area: 2003 vs. 2006



Source: U.S. Census Bureau, American Community Survey 2003, Peoria three county MSA

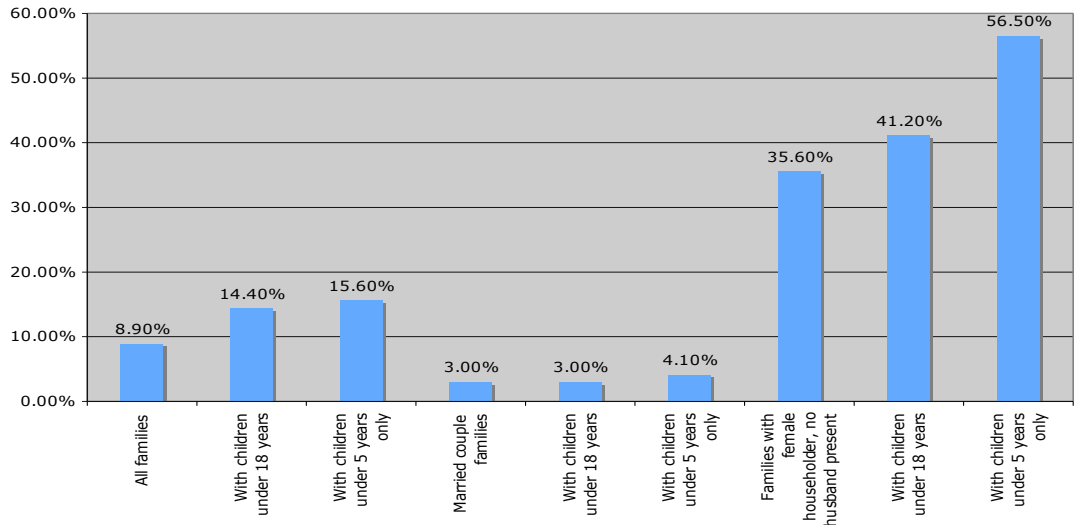


Source: U.S. Census Bureau, American Community Survey 2006, Peoria three county MSA

Note that there has been almost a 100 percent increase in children under the age of 5 living in poverty between 2003 and 2006, increasing from 12 percent to over 23 percent in 2006.

Figure 4.6 Composition of Families and Impact on Prevalence of Poverty 2006

Composition of Family and Impact on Prevalence of Poverty in Peoria 3 County MSA in the past 12 months

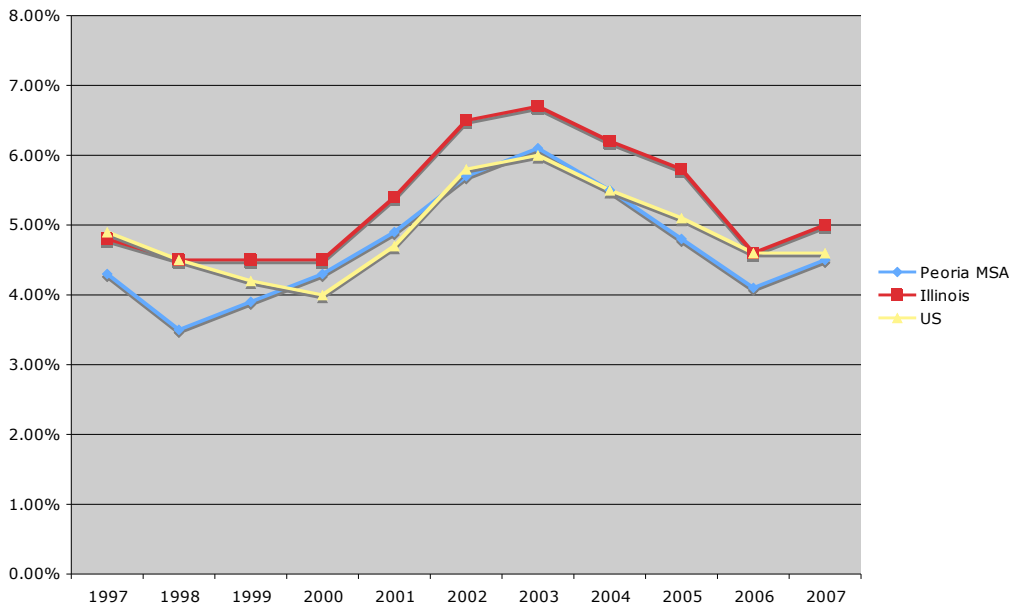


Source: U.S. Census Bureau, American Community Survey 2006, Peoria three county MSA

Family situation and poverty are significantly related. For families with two parents, poverty rates are extremely low (3%). However, for families with single mothers, the poverty rate increases significantly (35.6%), most significantly with children under the age or 5 (56.5%).

Figure 4.7 Unemployment

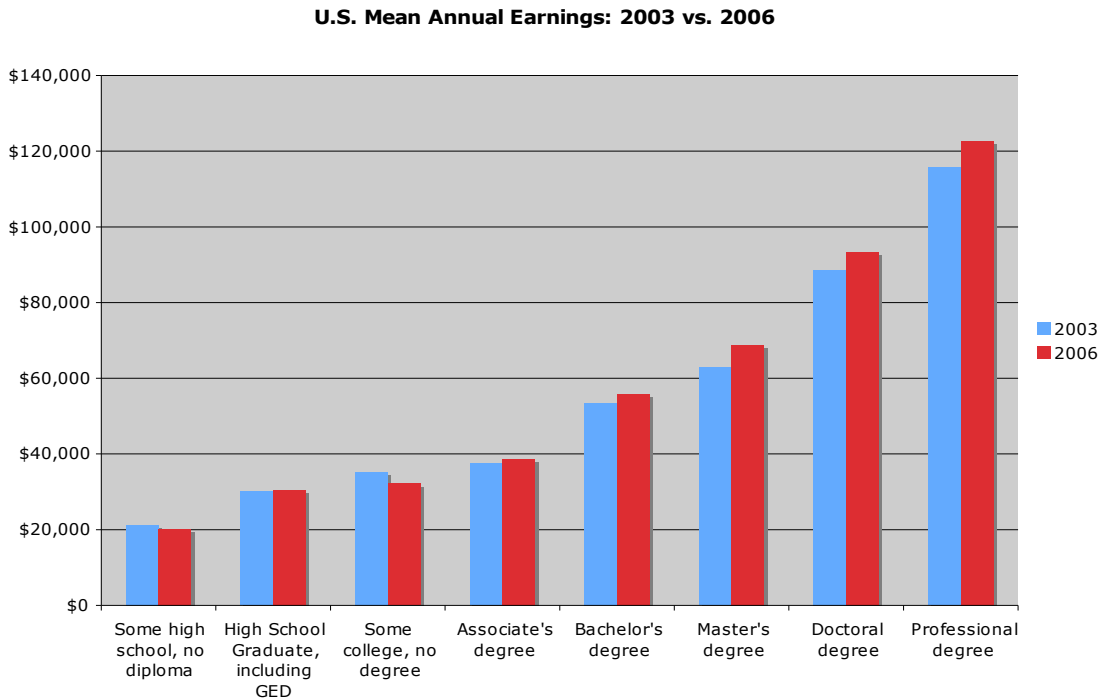
Peoria MSA / Illinois / U.S. Average Annual Unemployment Rates



Source: IDES State of Illinois, Peoria MSA and U.S. Annual Average 1997-2007

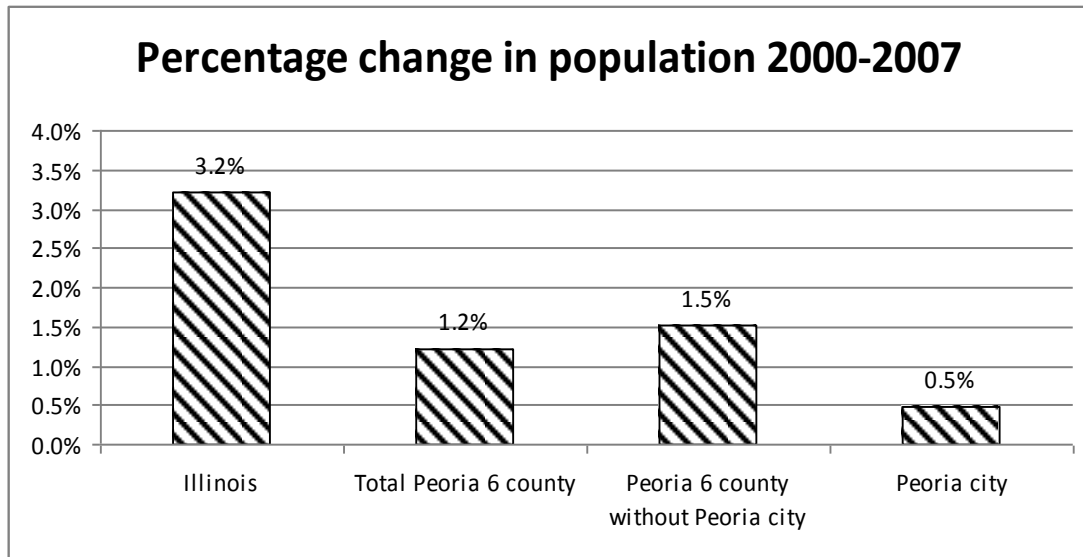
Peoria unemployment rates as of 2007 were below both the state and national levels.

Figure 4.8 Return on Investment for Education, 2003 vs. 2006



Source: www.census.gov/population/www/socdemo/education/cps2006.html

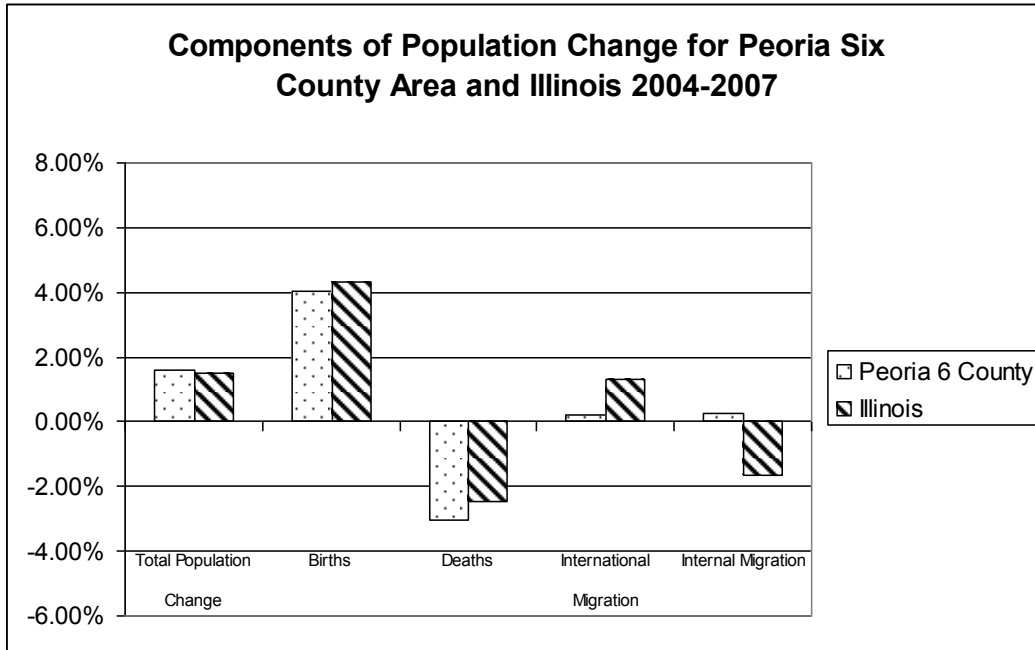
Figure 4.9 Population Growth



Source: US Bureau of the Census, Annual Population Estimates

Modest population growth is found during the decade in the Peoria Six-County region.

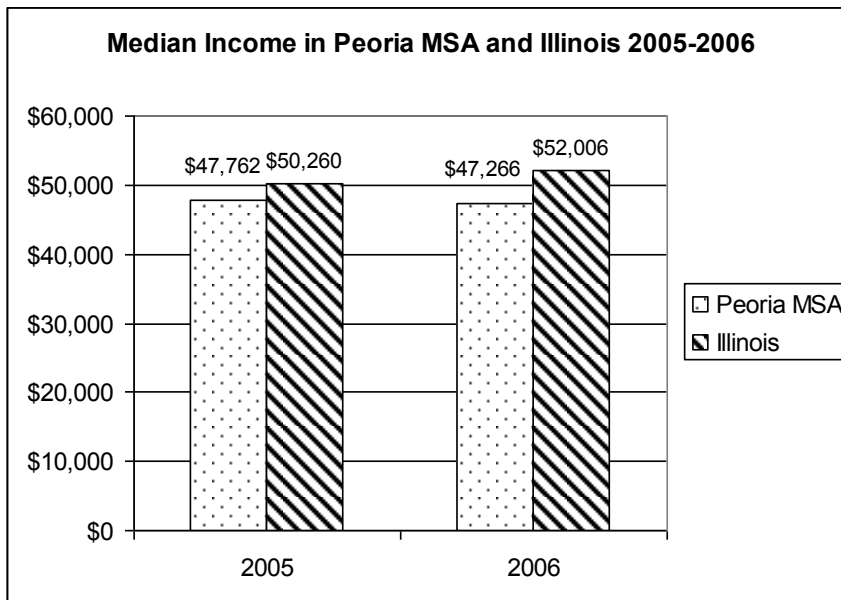
Figure 4.10 Components of Population Change



Source: US Census Bureau 2004-2007 Population Estimates, <http://census.gov/popest>

Recent growth in the Peoria Six-County Area can be attributed to natural increase and to migration to the Peoria Area from other areas of the United States. The Peoria Area continues to lag in attracting international immigrants, relative to the state as a whole.

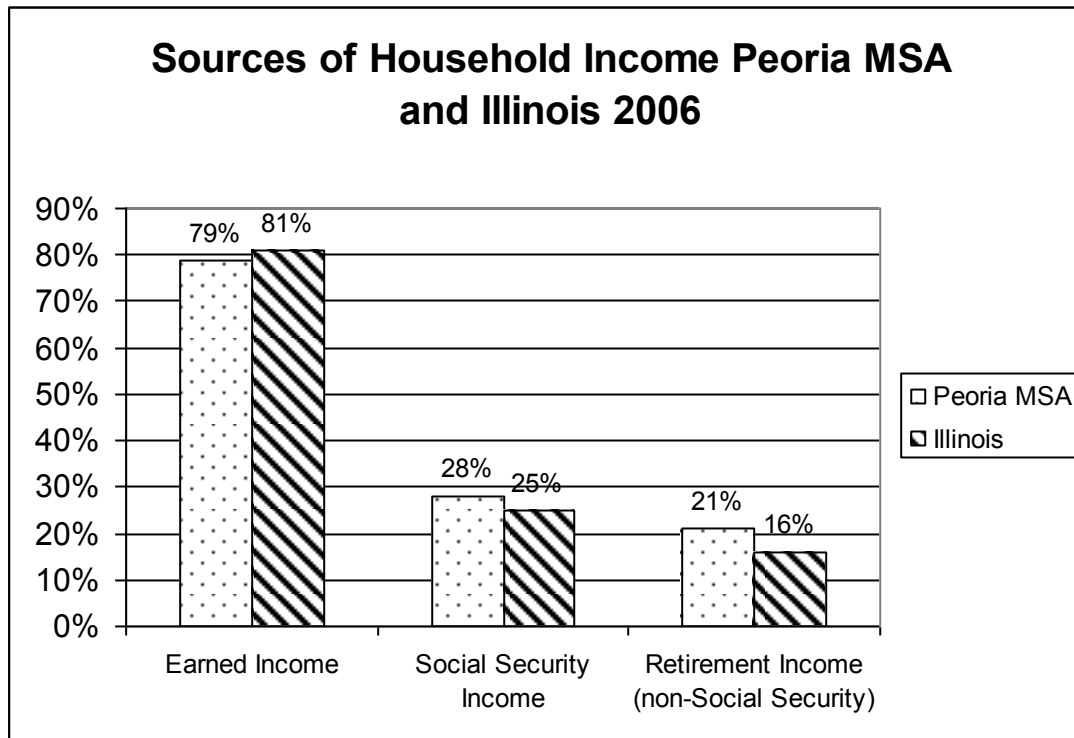
Figure 4.11 Median Income



Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>

The median income in the Peoria MSA continues to lag behind the median income statewide. While the median income of households in Illinois rose by 3.5% from 2005 to 2006, the Peoria MSA median income fell slightly by 1.0% over the same period.

Figure 4.12 Sources of Income



Source: US Census Bureau 2006 American Community Survey, <http://factfinder.census.gov>
 Percentages may add to more than 100% due to multiple sources of income per household.

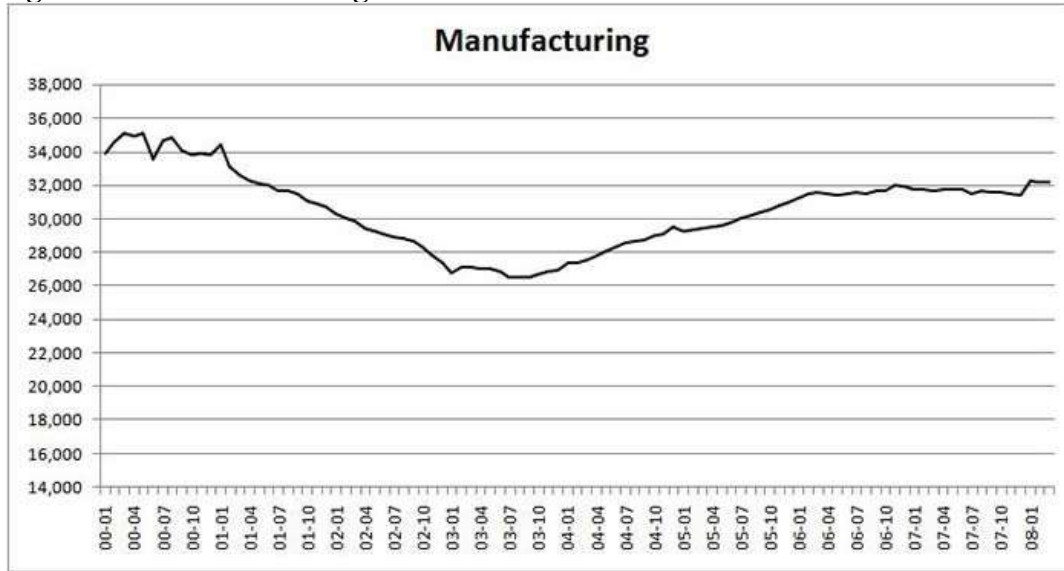
Most Peoria MSA households (79%) report earned income. Nearly three in ten (28%) receive Social Security, and about one in five (21%) have non-Social Security retirement income. Retirement income (Social Security and non-Social Security retirement income) is more common in the Peoria MSA than in Illinois.

Peoria Area Employment Trends

Seasonal Adjustment

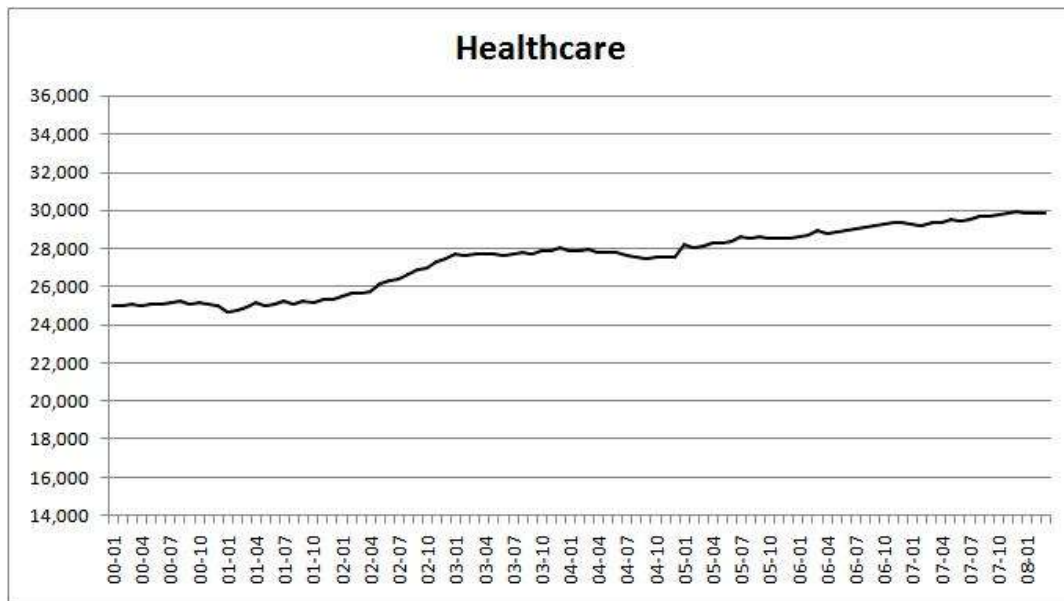
Note that in the creation of employment trends below, the Center for Business and Economic Research relied on the Census X-11 ARIMA (Auto Regressive Integrated Moving Averages) procedure in SPSS for seasonal adjustment. The seasonal adjustment procedure removed the impact of seasonal components, (e.g., the predictable seasonal variations of the data), so that underlying trends in the data series can be more readily discerned.

Figure 4.13 Manufacturing



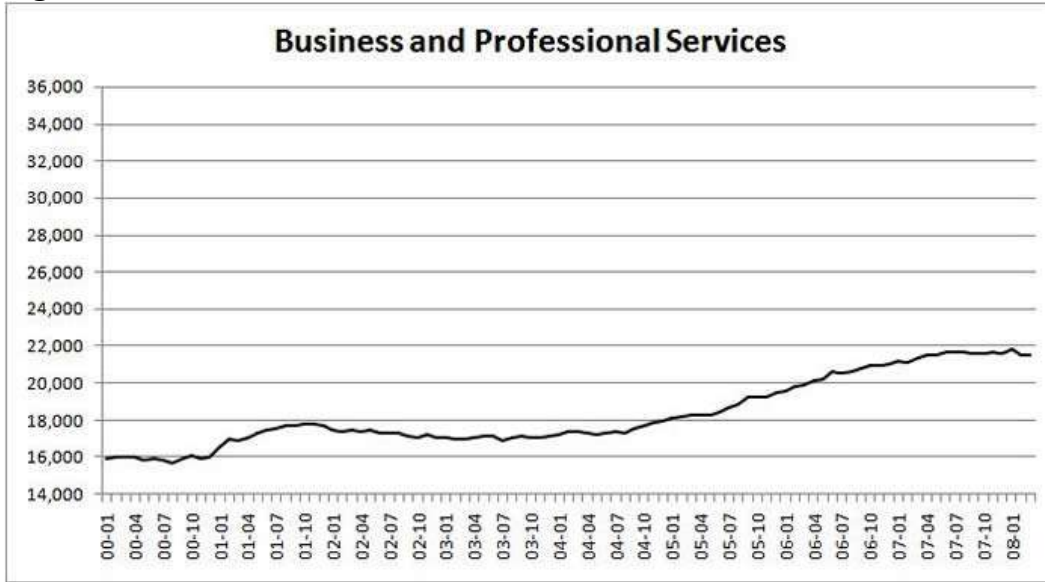
The data show manufacturing's sensitivity to the business cycle. Manufacturing employment grew during the 1990's expansion, peaking at 35,000 during 2000. A national recession began in March 2001 and local manufacturing employment dropped below 26,500 by the August of 2003. Economic expansion since then has steadily increased, reaching 32,171 by March 2008.

Figure 4.14 Health Care Services



Expansion of local health care services is reflected in the steady increase in area health care employment, rising from 25,009 at the beginning of 2000 to 29,826 in the March 2008.

Figure 4.15 Business/Professional Services



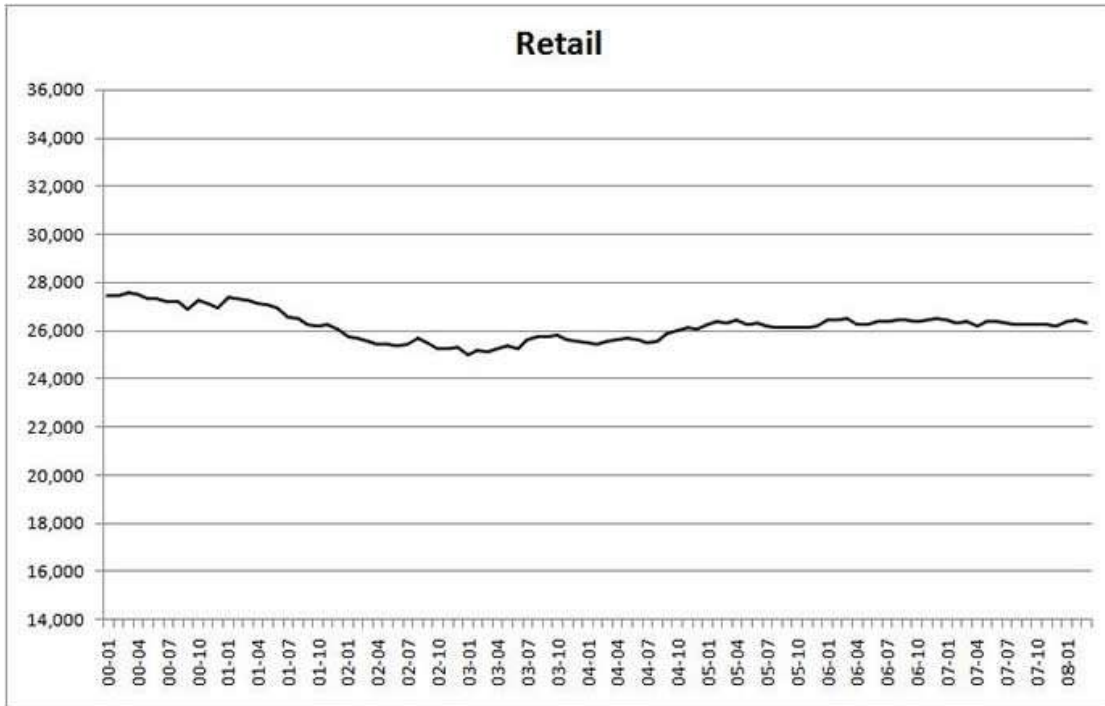
Employment in Business/Professional services includes jobs at accounting and law firms, marketing and computer consulting services, temporary help agencies, and similar firms. Expansion of local business and professional services is reflected in the increase in area employment in the sector, rising steadily from 16,001 at the beginning of 2000 to 21,496 in March 2008.

Figure 4.16 Hospitality/Entertainment



Employment in the hospitality/entertainment category includes restaurants, bars, hotels and entertainment (ranging from museums to gambling establishments). As of March 2008, employment in the sector was 21,496.

Figure 4.17 Retail Trade



Employment in retail trade fell steadily and reached the bottom of 25,000 workers in January 2003. It has increased since then, rising to 26,342 by March 2008.

Grandparents

Grandparents raising grandchildren are shaping the resource allocation of community service providers in addition to the conventional definition of family. In Illinois, over 200,000 children under the age of 18 are living in a grandparent-headed home resulting in more than 100,000 grandparents providing care for their grandchildren. The Illinois Department on Aging, in cooperation with the Illinois Task Force on Grandparents Raising Grandchildren, works to locate, assist and promote awareness of older caregivers who are currently raising their family's children. The phenomenon of grandparents and other relatives raising children is not new. However, the number of children being raised by someone other than a parent has increased dramatically over the last 25 years. Several factors contribute to the growing number of grandparents raising grandchildren encompassing components of several of the HOIUW Strategic Areas:

- Alcohol and Drug Abuse
- Neglect, Abuse, and Abandonment
- Death of a Parent
- HIV/AIDS
- Divorce
- Unemployment / Poverty
- Parental Incarceration
- Teen Pregnancy

Family-Related Issues: Strategic Implications

Many long-term community issues can be traced back to children entering kindergarten without being properly prepared for school through the basic family unit. Note that 85% of a child's brain growth is complete by age five, making early learning activities critical to ensure that children succeed. Every \$1 invested in early childhood yields at least an \$8 return to the community through saved taxpayer-funded social services. Finally children who participate in early learning programs experience higher employment and compensations rates into adulthood.

With the overwhelming evidence of Figures 4.8 and 4.4 demonstrating the return on investment for education and gender income disparity, it is imperative that women and single mothers are provided opportunities for educational advancement. These considerations are compounded by Figure 4.6 denoting that 35% of single mothers in Peoria are living in a state of poverty. Unfortunately, children bear the brunt of this problem, as Figure 4.5 reflects the alarming increase in the number of Peoria children under the age of 5 living in poverty compared to three years ago.

One strategy to help children make better choices is to provide positive adult role models through mentoring programs. Moreover, most teen behavioral problems occur Monday through Friday between 3 and 6 pm. Those are the high-risk hours after school, before parents return home from work.

United Way of Evansville has successfully integrated the Born Learning program into its community to help improve family structures. Born Learning is a public awareness campaign that shows parents and caregivers of young children how to make the most of everyday teachable moments, such as grocery shopping or cooking. The program provides easy ways to integrate learning shapes, colors and counting into daily life. To see more detail, the website is www.bornlearning.org.

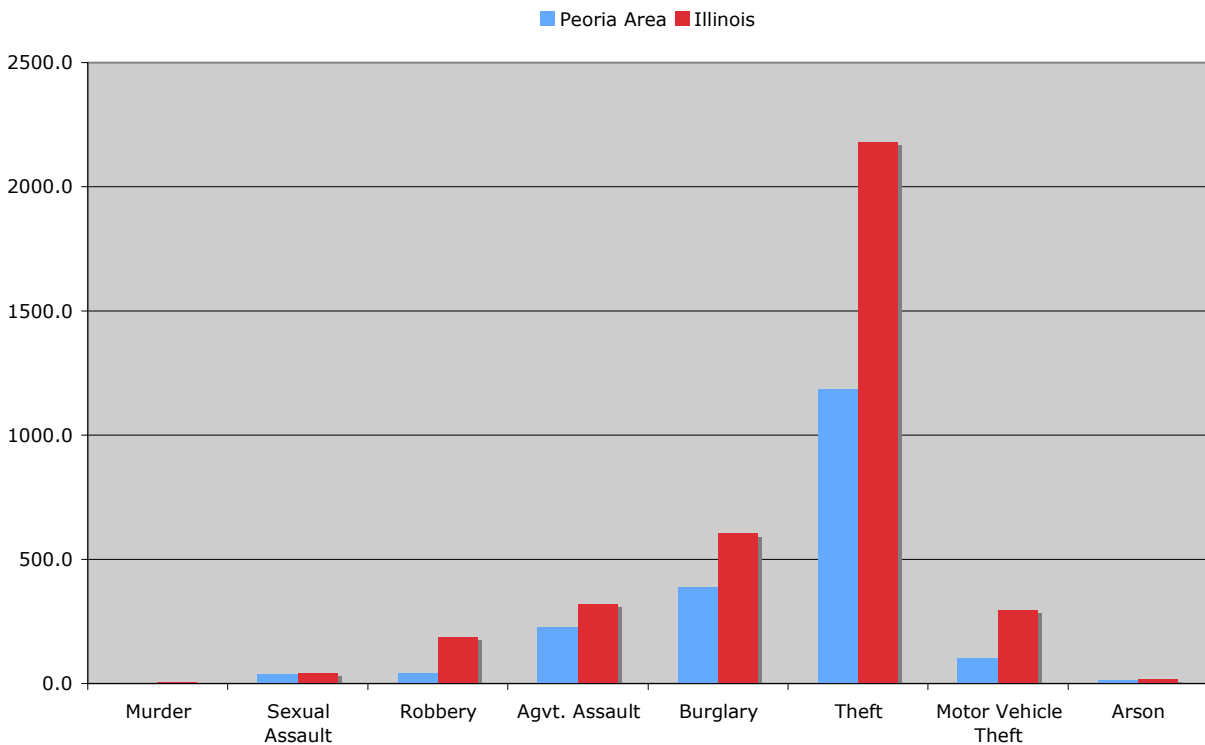
Additionally the United Way of Evansville has a program that aids in financial stability for families. Specifically, the program is designed to help hardworking families become self-sufficient and take the next steps to long-term financial independence. They teach about savings, taxes, and how to save for college, home or retirement.

5. Safety Issues and Trends

In the HIOUW strategic plan, the abovementioned issues are identified as critical areas of focus. During our research, we noticed that consistently across other United Way plans, community safety was a common theme. While it can be embedded across the other four strategic areas, a separate assessment is provided here in order to remain consistent with other United Way organizations.

Reduction in violence for individuals and families is critical for any thriving community. It costs approximately \$28,000 per year to keep one person in prison. Children who grow up in homes with one or more parents in prison are six times as likely to end up in prison. Children who live in violent homes are more likely to run away, self-mutilate and attempt suicide. Therefore it is the goal of many United Way organizations to build communities and neighborhoods that are caring, inclusive, safe, and economically productive.

Figure 5.1a Crime Rates in the Peoria 6 County Area and Illinois, 2006
Major Crime in the Peoria 6 County Area and Illinois, 2006



Source: Illinois State Police Department Crime Index Offense Data, 2006

Figure 5.1b Crime Rates in the Peoria 6 County Area and Illinois, 2002-3

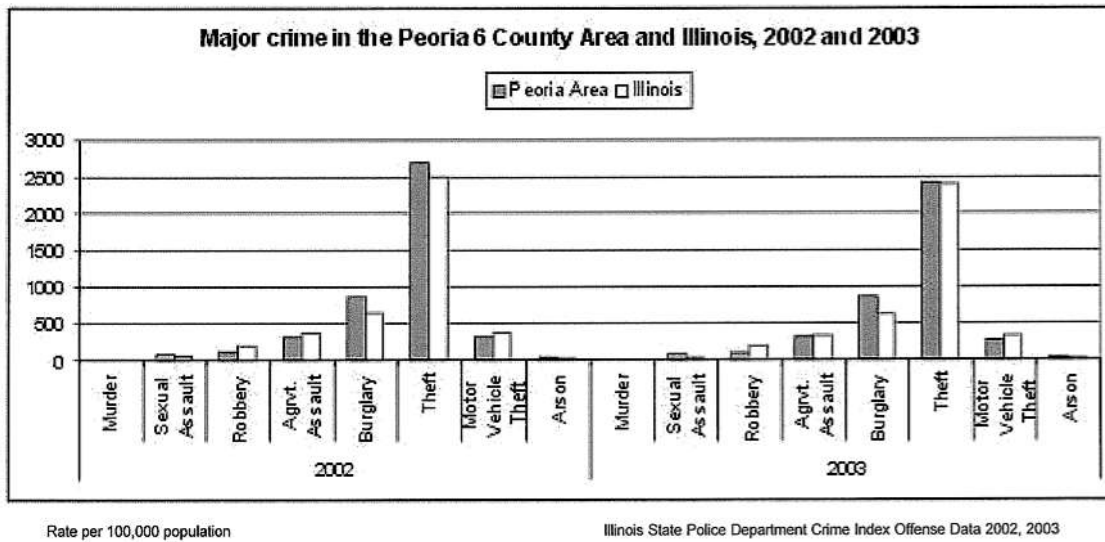
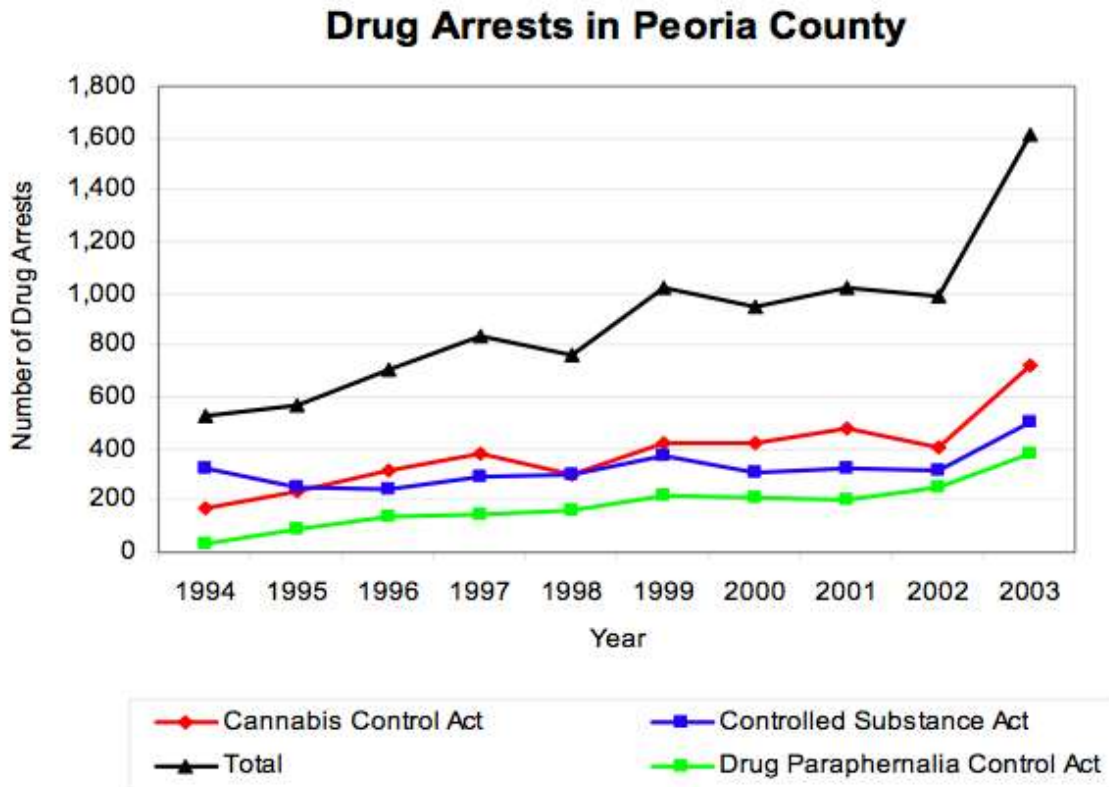
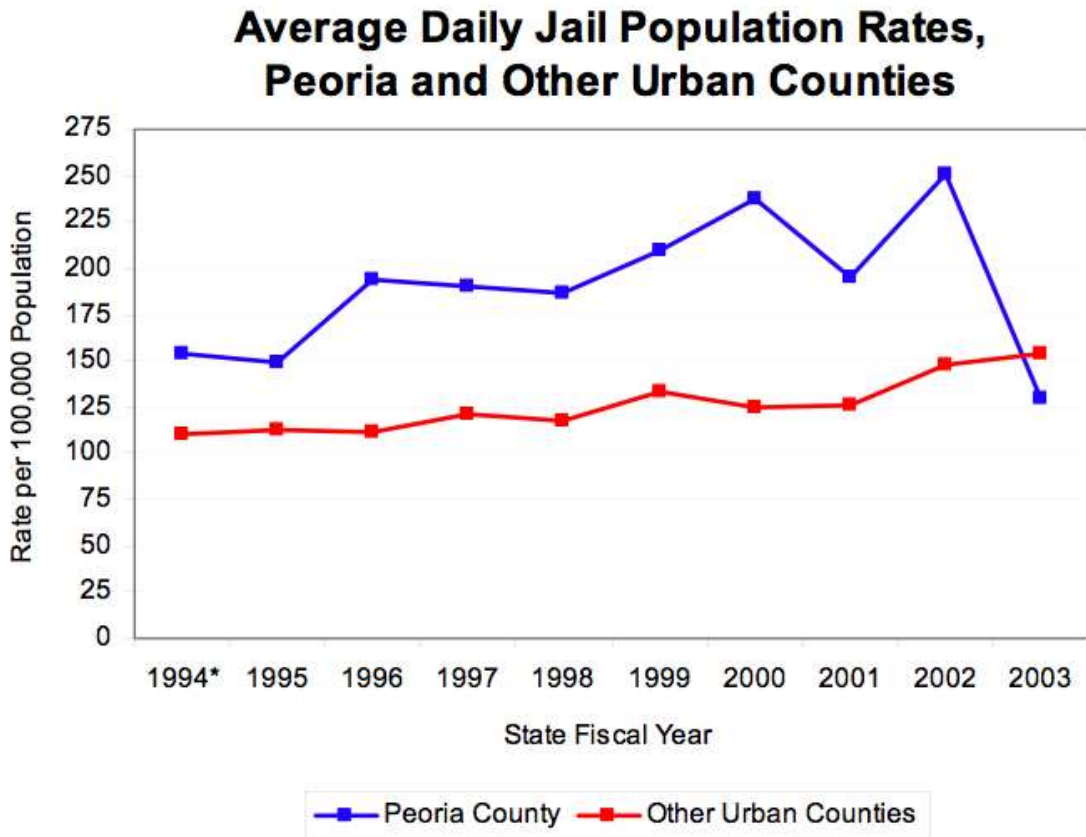


Figure 5.2 Drug Arrests in Peoria County, 1994-2003



Source: Illinois State Police

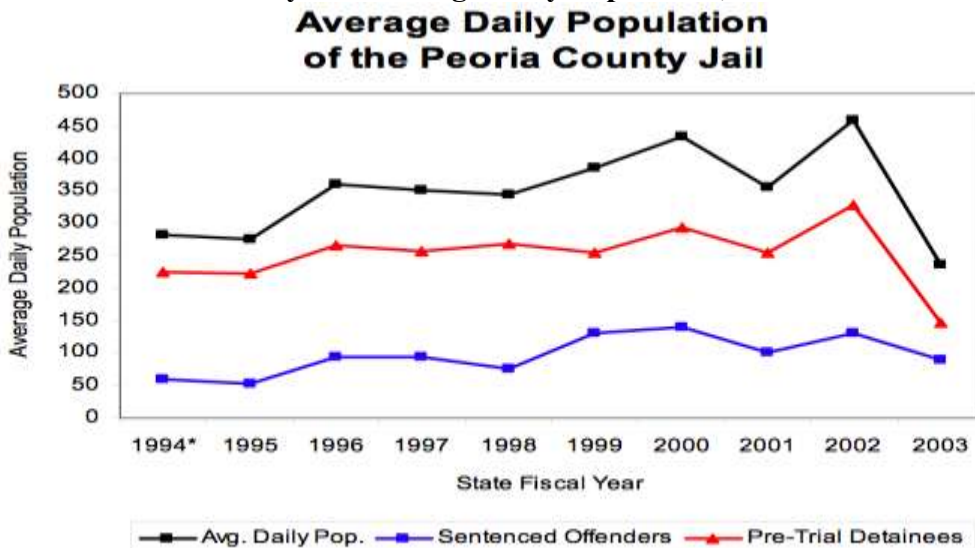
Figure 5.3 Daily Jail Population Peoria and Other Urban Counties, 1994-2003



Source: ICJIA calculation using Illinois Department of Corrections and U.S. Census Bureau data

* Information estimated by ICJIA

Figure 5.4 Peoria County Jail Average Daily Population, 1994-2003



Source: Illinois Department of Corrections

*Information estimated by ICJIA

Safety Issues and Trends: Strategic Implications

Fortunately, crime rates in the Peoria MSA are on average, lower than the rest of the state of Illinois. Compared to 2002 and 2003, the Peoria area is experiencing a marked decrease in theft and burglary. The daily population at the Peoria County Jail has decreased, despite an increase in drug-related arrests. Several United Way organizations sponsor programs to improve and enhance community safety. UWDC has the most aggressive programs to manage safety. Below are some of the programs they support.

Breaking the Cycle. *Children who have experienced violence are susceptible to serious long-term problems, including depression, anxiety and violent behavior. Therefore, programs are designed at helping them overcome emotional difficulties and heal.*

Youth Education. *Educating youth on the importance of positive relationships and non-violent conflict resolution is paramount. By engaging young people, they can see that they can make positive choices throughout their lives. This preventive work is creating positive change by stopping violence before it can begin (similar to the CHOICES program in Peoria).*

Community Reintegration Pilot. *In Dane county, 66 percent of prisoners returning to the community are likely to commit a crime and return to prison, often because of their difficulty in finding housing, employment, and a positive support network. This pilot program is providing a one-stop resource for returning prisoners to meet with organizations that provide the support they need to successfully re-enter the community.*

Prisoner Reentry. *Each day, 1,600 individuals leave state correctional institutions across the United States. Due to serving longer sentences, these individuals are more likely to be disconnected from family and friends, are less educated and employable, and suffer from untreated mental illness and substance abuse. Without substantial assistance from social programs, these individuals often relapse back to criminal behavior.*

The correctional literature discusses several prisoner reentry programs that have been successful in reducing the tendency to relapse into criminal behavior. This can be achieved by designing programs to prepare ex-convicts to safely re-integrate into their community and live in accordance with the law. Best practices include:

- *Cognitive Behavior Programs: These types of programs are goal-focused and help to define the problems that led to conflict with authorities. Once the problems are identified, societal-acceptable solutions can be generated and implemented.*
- *Vocational Training & Work Release Programs: Vocational and educational programs help to provide a path to self-sufficiency and financial stability.*
- *Drug Treatment Programs: Intensive programs followed with community-sponsored aftercare have been particularly effective.*

III. COMMUNITY ASSESSMENT BEST PRACTICES

In order to identify best practices regarding community assessments, we researched several aspiration United Way organizations. These organizations were identified by management of the HOIUW. Specifically, in this study, we considered United Way organizations from Madison, WI, Evansville, IN, Omaha, NE, Grand Rapids, MI, Redding, PA and Richmond, VA.

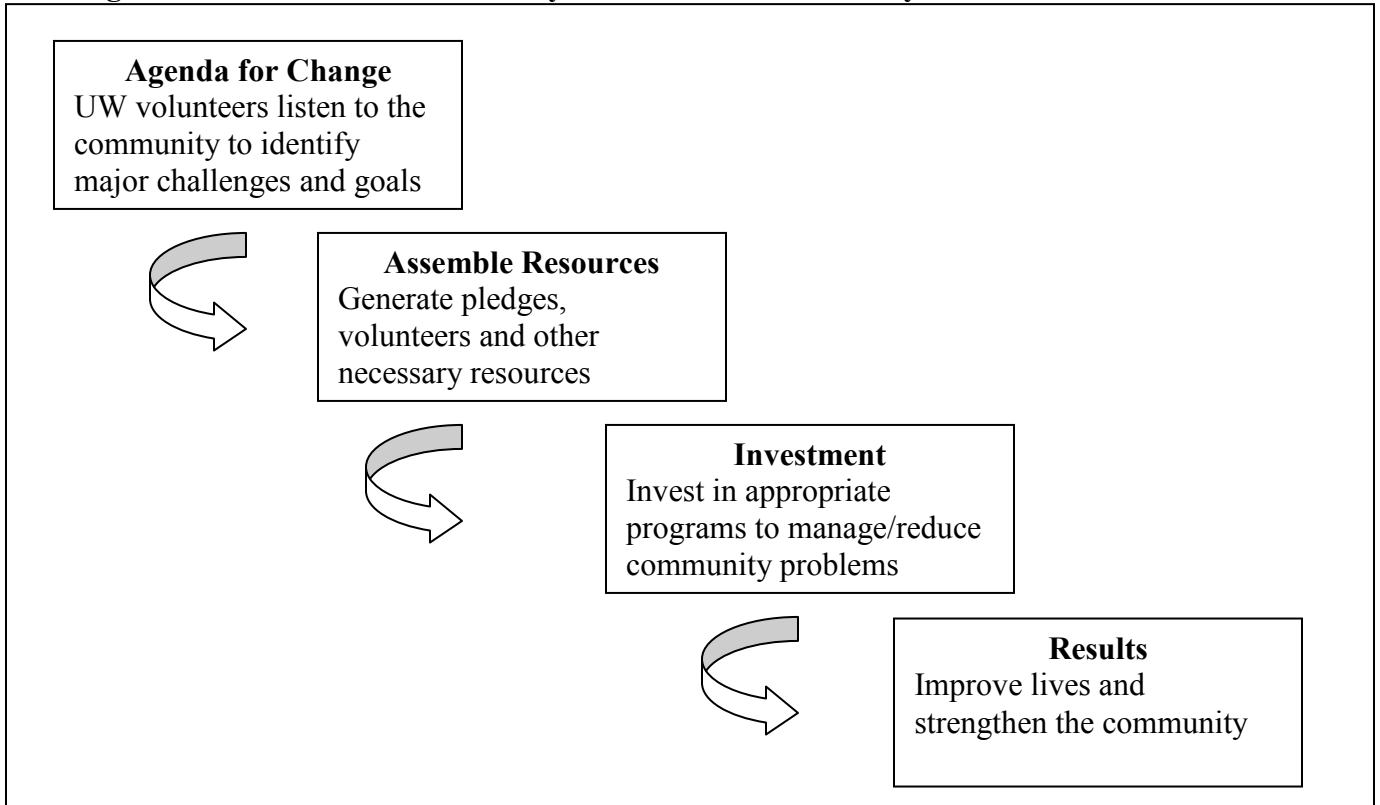
With regard to best practices, we observed a common theme – all community assessments that have recently been completed relied on primary data collection. Secondary data were typically used as a supplement to primary data. Primary data collection efforts included community surveys focusing on:

- ▶ Identification and prioritization of needs
- ▶ Extent to which needs are satisfactorily being met by community organizations (e.g., gaps in coverage versus duplication of efforts).

Primary Data as a Catalyst

Based on the United Way of Dane County (UWDC) best practices, collection of primary survey data is the catalyst for all changes in the community. By asking community stakeholders to identify perceived challenges, as well as how investment dollars can help to manage these challenges, the UWDC creates/maintains partnerships with community organizations to provide effective allocation of resources. The concept of starting with primary data collection can be seen in Figure 6.1.

Figure 6.1. Flowchart with Primary Data Collection as Catalyst



Best Practice Techniques for Community Assessment

Based on a review of several United Way studies, a comprehensive community assessment usually involves two distinct phases, including: (1) the identification and prioritization of needs and perceived strengths; (2) assessment regarding the extent to which social service organizations were working collaboratively to address community issues.

A good benchmark study for this two-tiered approach to community assessment was recently released at the end of June, 2008 by the United Way of Southwestern Indiana (UWSI). The organization utilized several traditional needs assessment methods and administered 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. In order to develop the survey instrument (as it should be somewhat unique to every community), *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.

Identification of Issues and Community Strengths. Once the community-wide needs assessment survey was developed, it was administered to key stakeholder groups. Both strengths and areas that require additional attention were identified 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 provide criterion-related validity for 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.

Assessment of Duplication or Gaps in Social Services. Social service providers completed 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 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.

Assurance of Best Practice for Community Assessments

A review of literature related to community assessments should be conducted to ensure that the methodology and analysis are grounded in best practice as well as appropriate statistical methods. According to the UWSI study, the following key practices contribute to high-quality community assessments:

(1) 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)

(2) 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)

(3) 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).

(4) 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)

(5) 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)

(6) Develop a steering committee to guide the needs assessment process (Bohse, 2005)

(7) Blend both secondary analysis and direct data collection techniques to enhance understanding of community issues

(8) 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)

(9) 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)

Best Practices that Support Objective Data Collection

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

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

Involve Stakeholders in the Process. As the first step in the needs assessment process, a Planning Team can be formed to guide all aspects of the study. Members of the team included should leaders from the United Way, key community stakeholders, outside researchers familiar with effective research design methods.

In addition to the Planning Team, an Advisory Committee should be formed to provide input into the development of survey instruments and to give feedback regarding communication of survey results. Members of the Advisory Committee should be selected from a wide array of community, school, government, and private organizations, and represent a diverse cross-section of demographics. A pilot survey will need to be conducted to assess validity and reliability, as well as readability of the survey and ease of completion.

Ensure Transparency. A transparent, open communication process should be established to ensure individuals in the community are kept apprised of the progress of the study. A communications plan can be developed with a goal to keep stakeholders informed about important milestones and dates associated with the study.

Focus on Community Strengths and Capacities. In order to provide continuity, efforts should be made to integrate previous needs assessment studies, while at the same time offering ways of building on the methods that already had been utilized.

Integration of Primary and Secondary Data. To enhance understanding of community issues, the assessment study should blend 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 the 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 other United Way organizations, but also other community surveys across the country. In terms of methodological and analytical techniques, the evaluators should strive to achieve representative samples, both related to demographics and response rates, and incorporated random selection of the community-at-large stakeholder group. Finally, a number of methods for analysis and presentation of needs and strength areas should be researched, as well as techniques for measuring service duplication and collaboration.

Summary of Needs Assessment Best Practice References used in UWSI Study

Below is a summary of Best Practices sources. This list includes some actual community assessments as well as some material that includes best practice techniques and methodologies.

2004 City of Denton community needs assessment: a report on health, housing, and human services in the City of Denton. The United Way of Denton County and The City of Denton Community Development Division. Available at:

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<http://www.njslom.org/ConductingCommunityNeedsAssessment.html>

Butler, L.M. and Howell, R.E. (1996).

Coping with growth: community needs assessment techniques. Utah State University, Western Rural Development Center. Available at: <http://www.ext.usu.edu/wrdc/>

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Conducting a community needs assessment: primary data collection techniques. Florida Cooperative Extension Service. Available at

<http://www.reachyouthprogram.org/system/files/PrimaryDataCollection.pdf>

Community Environmental Health Resource Center.

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Surveying community needs and priorities: a community needs assessment tool kit.

Cooperative Extension Division, Institute of Agriculture and Natural Resources, University of Nebraska-Lincoln. Available at:

http://eric.ed.gov/ERICDocs/data/ericdocs2/content_storage_01/00000000b/80/23/dc/e5.pdf . Israel, G.D. and Ilvento, T.W. (1995).

Everybody wins: involving youth in community needs assessment. Journal of Extension, 33(2). Available at: <http://www.joe.org/joe/1995april/a1.html> Kent State University (1997).

Retention at Kent State University: Progress and directions 1996-1997. Available at:

<http://dept.kent.edu/retention/srsc1.htm> Kretzmann, J.P. and McKnight, J.L. (1993).

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<http://www.northwestern.edu/ipr/abcd/kelloggabcd.pdf> . United Way Comprehensive Community Assessment 117 Laboratory for Community and Economic Development, University of Illinois at Urbana-Champaign Factsheet.

Community needs assessment: taking the pulse of your community. Available at:
<http://www.aomunitydevelopment.uiuc.edu/resources/factsheets/needpuls.html>

Pathways to Progress: Laying the Foundations for a Healthier Marin – 2005 Community Needs Assessment and Plan. Healthy Marin Partnership Leadership Group. Available at:
<http://www.healthymarinpartnership.org/MCNA/index.htm>
Sharma, A., Lanum, M. and Suarez-Balcazar, Y. (2000).

A community needs assessment guide: a brief guide on how to conduct a needs assessment. Center for Urban Research and Learning and the Department of Psychology Loyola University Chicago. Available at:
http://www.luc.edu/curl/pdfs/A_Community_Needs_Assessment_Guide_.pdf Noel-Levitz (2008).

Student Satisfaction Inventory. Available at: <https://www.noellevitz.com/>
The Asset-Based Community Development Institute, Institute for Policy Research Northwestern University.

Capacity inventory. (2006). Available at:
<http://www.northwestern.edu/ipr/abcd/abcdciforeward.html>
Utah State University Extension. (2003).

Community needs assessment survey guide. Available at:
<http://extension.usu.edu/files/SGuide.pdf>

IV. REPEATABLE PROCESS FOR RESOURCE ALLOCATION

Developing a repeatable process to make investment decisions for the HOIUW can provide improved efficiencies, ensure equitable distribution of resources and provide community organizations with a format that illustrates how the HOIUW allocates resources. In order to create a repeatable process, a scorecard approach is used as an instrument that will aid in making resource allocation decisions.

Scorecard Development

This scorecard focuses on effectiveness (doing the right thing) rather than efficiencies (doing things right).

Strategic fit. Does the value provided by a community organization that is looking for support from the United Way fit within the domain of HOIUW's strategic intent? Specifically, any product or service offered by community an organization trying to gain support should fit within the HOIUW mission. Some specific considerations to assess the appropriateness of strategic fit are:

1. Mission and objectives

- Does the opportunity fit HOIUW's current mission and objectives?

2. Current strategic position of HOIUW

- Is the opportunity appropriate for the current social concerns of the community?

3. Effect on strategic perspective

- Does the opportunity support the strategic perspective of the HOIUW (e.g., proactive versus reactive values)?

4. Skills, competence and resources

- Does the social organization have the skills, competence and available resources to meet community needs?

- Does the social organization possess the expertise and competencies necessary? If not, should it try to align with another organization?

Benefits. An initial task to assess potential investment decisions for the HOIUW is to make a concerted effort to identify benefits. Benefits should be identified at multiple levels. Initially, a summary of objectives should be identified (e.g., what does the investment in a certain community-based organization *intend* to accomplish). Some specific considerations to assess the beneficial impact are:

1. Strategic needs of HOIUW

- Does the opportunity have the ability to significantly impact strategic areas identified by the HOIUW?

- What is the direct impact of the opportunity on the community?

- What are the indirect effects of the opportunity on the community?

2. Stakeholder needs and preferences

- Does the opportunity impact critical stakeholders in HOIUW?
- Are stakeholder groups supportive of the opportunity?

Duplicated efforts. When assessing an investment opportunity, the actions of other community organizations needs to be considered. Is there another organization fulfilling a similar *need*? Note the focus is on need fulfillment, not services. If other community organizations' activities are not being delivered effectively, even if they sound similar, community needs for that particular topic are not being satisfied. Also, by focusing on needs rather than services, there may not be another specific service that sounds similar to those offered by HOIUW, resulting in perceived differentiation.

Feasibility and Effectiveness. Do investments in social organizations have the ability to deliver value to the community? Does the organization offer the appropriate content? Is the delivery offered at the best time, in the most convenient location for a particular community need, using the most appropriate techniques? Did the product/service meet the HOIUW expectations? Some specific considerations to assess the feasibility and effectiveness are:

1. Issues of implementation

- The opportunity should be feasible in terms of financial requisites, and implementation factors (e.g., organizational structure and commitment)

2. Other resources considerations

- Do HOIUW/social organizations have the expertise to add value through the opportunity?

3. Reaction of other stakeholders ("competitor" assessment)

- Is this opportunity something HOIUW needs to take an active role in, or is it more appropriate for another organization?

4. Timing

- How quickly does the HOIUW/social organization have to react?
- Can HOIUW put together an effective strategy in a timely manner?

5. Risk

- Does the opportunity spread HOIUW too thin?
- What are the explicit risks of offering a specific service (political realities)?
- What are the implicit risks of not offering a specific service?
- What is the likelihood HOIUW/social organization will succeed in offering the service?

Financial assessment. Finally, HOIUW needs to know if each investment is financially effective. In order to assess whether a service generates a value to the community, specific performance metrics need to be identified.

Selection/Recommendations

There are two major outcomes that result from developing a scorecard to assess current services and future opportunities. First, information from the scorecard can be used to decide whether or not to invest in a particular service in the future. In many organizations, go/no-go decisions such as this are based exclusively on financials (e.g., if the opportunity makes a profit, it will continue and if it fails to make a profit, it will be terminated). HOIUW should take a more holistic approach in deciding whether to continue offering each service. For example, a certain product may exist that is not generating an immediate, direct value, but it may support other strategic initiatives HOIUW is trying to accomplish, or may indirectly add value to HOIUW. Therefore, HOIUW will consider offering loss-leaders as part of its portfolio.

The second outcome of this process will be in the form of recommendations for improvement. As each service is assessed, ideas may be generated to improve the effectiveness.

Pilot Program

Rather than trying to develop specific quantifiable weights to each category, the final analytic tool should employ a more holistic approach of taking all strategic factors into consideration to see if a service is appropriate for the HOIUW to invest in. The HOIUW can initiate a pilot program to assess the scorecard. A summary of steps necessary to create the scorecard can be seen in following figure.

Summary of Scorecard Development

