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EXECUTIVE SUMMARY

Education, financial stability and health are vital for building safe and stable lives. But for too many individuals and families in central Illinois, these fundamentals are out of reach.

- Quality education is essential to earning a livable wage.
- Improving financial stability leads to increased independence.
- Access to healthcare promotes wellness for all ages.

Through the Peoria Area Community Assessment, the Heart of Illinois United Way (HOIUW) examines the most critical community needs and then collaborates with a wide variety of community partners to support the education, financial stability and health of people in central Illinois. In 2020, the Heart of Illinois United Way will utilize the findings in this assessment to transition their Community Impact Fund process to focus on these three key areas. By realigning program indicators and outcomes, restructuring allocation panels, and directing Community Impact Fund grants towards education, financial stability and health, United Way will use a data-driven process to prioritize and address community needs.

The community assessment was designed to assess issues and trends impacting the communities served by the HOIUW. Specifically, the following report provides a detailed analysis of: (1) the Peoria-area community using secondary data; and (2) an assessment of workforce readiness in the region. The primary focus of this community assessment is to improve the HOIUW’s effectiveness in identifying, assessing and supporting key areas of social concern, as well as strategies to improve the ability of the HOIUW to improve its development efforts.

UPDATE OF THE 2017 COMMUNITY ASSESSMENT

A detailed analysis of secondary data was completed to update information from the assessment of the Peoria-Area Community Assessment completed in 2017. In order to perform these analyses, information was collected from numerous secondary sources, including new and updated sources of data to provide additional perspectives on community needs. Strategic implications are discussed after each set of strategic issues. Specifically, the study highlights three critical areas of community needs:

**EDUCATION** – This set of issues addresses present and future needs and issues impacting the children and youth of Central Illinois. Specific areas of focus include quality of education, youth poverty, family structures, and a discussion of critical programs within strategic implications.

**HEALTH** – Health issues and trends impacting youth, families, and adults are examined. Specific topics focused on health education and prevention, health treatments and services, and a general profile in areas such as substance abuse, obesity, dental issues, diabetes, asthma and mental health.

**FINANCIAL STABILITY** – Issues that influence self-sufficiency are assessed. Specific topics include homelessness, poverty, housing burden, available housing and individuals with disabilities. Additionally trends that impact families within our community are examined. Specific topics include sources of income, cost of living, housing, poverty by family type, employment, racial and gender equity, and overall poverty.

Note that these three areas are highly interdependent, as any one of the three areas ultimately impacts the other two areas.
UPDATE ON 2-1-1 DATA

A detailed analysis of secondary data was completed to update information from 2-1-1 data in the 2017 assessment. Specifically, 2-1-1 utilization by county and counts for types of information requested are assessed.

WORKFORCE READINESS

In this report, specific focus is devoted to the examining issues related to workforce readiness. There are four primary areas of focus, including: (1) Workforce Readiness and Typical Barriers; (2) Education and Workforce Readiness; (3) Employment and Income Needs Related to Workforce Readiness; and (4) Regional Workforce Development Alliance and The Big Table.
1. METHODS

To complete the comprehensive community assessment, multiple sources were examined. Secondary statistical data were primarily used for updating the previous community assessment. Based on availability of data, this assessment uses four different geographic definitions. These areas include:

- Tri-County Area – Peoria, Tazewell and Woodford Counties
- Peoria MSA – Tri-County Area and Marshall and Stark Counties
- HOIUW Peoria Six-County Area – Peoria MSA and Putnam
- Homeless Point-in-Time Report – Tri-County Area and Fulton County

1. Update of the Community Assessment
In order to update the 2017 community assessment, we first used existing secondary statistical data to provide the updated information. Note that several tables were aggregated from numerous data sources. For example, educational report-card tables were compiled by collecting information from 50 individual school report cards and presenting aggregated data within these tables. When available, a summary of the sources used to update the 2017 community assessment is integrated throughout the text.

2. 2-1-1 Program
In order to collect information and data to assess the current 2-1-1 program, the HOIUW collected data from Advanced Medical Transport. Monthly and quarterly reports, including program generated reports, as well as raw data from the number and types of calls/requested information were also analyzed.

3. Workforce Readiness
In order to collect information and data to assess workforce readiness, several fact-finding meetings were completed. Additionally, information was collected from the Regional Workforce Development Alliance. In 2019, the CEO Council, Greater Peoria Economic Council, Illinois Central College and multiple business, government, nonprofit organizations formed the Regional Workforce Development Alliance. The data were then compiled and summarized by the HOIUW.
II. COMMUNITY ASSESSMENT

According to the HOIUW Strategic Plan, three critical areas of focus exist in the Peoria-area community, including (1) Education; (2) Health; and (3) Financial stability. In order to draw conclusions and understand strategic implications for these three areas, we first updated the 2017 HOIUW Community Assessment.

1. Education

All children have the potential to succeed and make a positive contribution if given a supportive environment. 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.

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.

This set of issues includes data for: Family Structure; Children and Youth in Poverty; Quality of Education, Truancy Issues; Mobility Issues and Teenage Birth Rates. The selected data that follows provides context for the strategic implications offered at the conclusion of this section.

A. Family Structure

Figure 1-1: Types of Households in the Peoria MSA and the State of Illinois, 2017

![Bar chart showing types of households]


Regarding the types of households, approximately 70% of people living in the Peoria Metropolitan Statistical Area (MSA) live in families (averaging between 2-3 people). The majority of these (49.2%) live in married-couple families and the remainder (15.6%) live in single-parent families. Almost one third (30.2%) of residents in the Peoria MSA live alone and less than 5% live in households with others that are not related. Overall, these numbers are similar in the State of Illinois.
When we compare data between 2015 and 2017, we see .8% increase in the number of people living in married-couple families in the Peoria MSA, compared to a 0.1% increase for the State of Illinois. The Peoria MSA is experiencing a larger decrease in the number of people living alone in comparison with the State of Illinois.

### B. Children and Youth in Poverty

<table>
<thead>
<tr>
<th>All Households</th>
<th>Children Under 18 Years</th>
<th>People Age 65 and Over</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peoria MSA</td>
<td>State of Illinois</td>
<td></td>
</tr>
<tr>
<td>8.7%</td>
<td>9.8%</td>
<td>3.7%</td>
</tr>
<tr>
<td>14.0%</td>
<td>15.5%</td>
<td>5.1%</td>
</tr>
</tbody>
</table>

Poverty has a significant impact on the development of children and youth. Poverty rates in both the Peoria MSA and the State of Illinois are higher in households with children under 18 years than in all households combined.

Figure 1-4: Change in Poverty Rates in the Peoria MSA and the State of Illinois between 2015 and 2017


The poverty rate has fallen by 3.2% among all households in the Peoria MSA and by 3.8% in the State of Illinois. A very similar trend could be observed among children under 18 years. Also, poverty decreased by 2.9% among people over 65 years between years 2015 and 2017 in the Peoria MSA.
The large majority of both the Peoria MSA and the State of Illinois residents (87.9% and 87.1% respectively) remained in the same residence during 2017, indicating low mobility at both the local and state level.

C. Quality of Education

The Peoria MSA still has a higher percentage of people who have completed at least a high school degree (91.6%), compared to the State of Illinois (88.5%). Specifically, the Peoria MSA has a higher percentage of the population with a high school degree, 30.2% compared to 26.3% in the State of Illinois, and has a higher percentage in terms of some college-no degree education and associate degrees (23.0% vs. 20.9% and 10.3% vs. 7.9%, respectively). However, when assessing completion of a Bachelor’s Degree, Peoria (18.7%) is below the State average (20.5%).

Figure 1-7: Percent Change in Educational Attainment 2015 vs 2017, Population Age 25 and Older in the Peoria MSA and the State of Illinois

From 2015 to 2017, there has been a decrease in the percentage of people who do not complete high school in the Peoria MSA (-0.1%) and a decrease for the State of Illinois (-0.5%). Meanwhile, there is a significant increase in the percentage of people who are attaining Bachelor’s Degrees or higher in both the Peoria MSA (1.1%) and the State of Illinois (1.2%).
Comparing Peoria County to the State of Illinois, the percentage of people who did not complete high school in Peoria County and the State of Illinois were similar. However, Peoria County (31.2%) lags behind the State of Illinois (34.3%) in terms of people who are attaining a Bachelor’s Degree or higher.

Comparing Tazewell County to the State of Illinois, the percentage of people who did not complete high school in Tazewell County (8.4%) is lower than the State of Illinois (10.9%). However, Tazewell County (28.7%) lags behind the State of Illinois (34.3%) in terms of people who are attaining a Bachelor’s Degree or higher, as well as the Peoria MSA (29.9%).
Comparing Woodford County to the State of Illinois, the percentage of people who did not complete high school in Woodford County (5.4%) is significantly lower than the State of Illinois (10.9%). However, Woodford County (31.1%) lags behind the State of Illinois (34.3%) in terms of people who are attaining a Bachelor’s Degree or higher.

Comparing Marshall County to the State of Illinois, the percentage of people who did not complete high school in Marshall County (5.2%) is lower than the State of Illinois (10.9%). However, Marshall County (18.4%) lags significantly behind the State of Illinois (34.3%) in terms of people who are attaining a Bachelor’s Degree or higher, as well as the Peoria MSA (29.9%).
Comparing Stark County to the State of Illinois, the percentage of people who did not complete high school in Stark County (9.6%) is lower than the State of Illinois (10.9%). However, Stark County (18.8%) lags significantly behind the State of Illinois (34.3%) in terms of people who are attaining a Bachelor’s Degree or higher, as well as the Peoria MSA (29.9%).

Kindergarten readiness assesses possible developmental attributes that may have an impact on a child’s ability to adapt to the kindergarten classroom. Given variations in the extent and type of preschool environments, kindergarten may be a new and unfamiliar environment. In 2018, the Peoria six-county area (Peoria, Tazewell, Woodford, Marshall, Stark and Putnam counties) 36.6% of children met the readiness threshold. This was significantly higher than the State of Illinois (26.0%). Some of this difference may be due to the HOIUW Success by 6 program,
When looking at kindergarten readiness among counties, Peoria County (52.8%) is significantly higher than the other counties, while Tazewell (19.3%) and Woodford (21.0%) counties are significantly lower.

While the Peoria six-county area (Peoria, Tazewell, Woodford, Marshall, Stark and Putnam counties) had a disproportionally large number of White students enrolled during the 2015-2019 school year, Peoria Public Schools (a school district within Peoria County) had a disproportionally large number of Black students. The six-county area and Peoria Public Schools are lower than the State of Illinois.
average for Hispanic students. These percentages are very consistent over time. In studies completed in 1999, 2005, 2010, 2014 and 2017, the percentages were very similar.

Figure 1-16: Percentage of Students Who Met/Exceeded Grade 3 ELA and Math Levels in Tazewell County, 2018-2019


Eight school districts in Tazewell County scored at or above the State of Illinois averages for both 3rd grade ELA (English Language Arts) and Math. There were, however, some school districts that performed below the state average. These were Creve Coeur, East Peoria, South Pekin and District 50 – they all underperformed the State of Illinois in both ELA and Math.

It should be noted that the State of Illinois changed its standardized tests – from Illinois Standards Achievement Test, ISAT, (through 2014) to Partnership for Assessment of Readiness for College and Careers, PARCC, (2015). Therefore, any comparison between ISAT and PARCC might be misleading.
Eight of the Tazewell County school districts were below the State of Illinois average for 8th grade in ELA. Nine of the Tazewell County school districts were below the State of Illinois average for 8th grade in Math. Thus, the majority of schools in Tazewell County were below State of Illinois averages in both categories. Note there were no data available for Spring Lake CCSD for Grade 8 students because information is not displayed if the student group has less than 10 students.
Ten school districts in Peoria County were below the State of Illinois average for 3rd grade in ELA. Similarly, nine school districts in the Peoria County were below the State of Illinois average for 3rd grade in Math. Consequently, nine school districts were below State of Illinois averages in both ELA and Math.

Seven of the Peoria County school districts were below the State of Illinois average for 8th grade in ELA. Nine of the Peoria County school districts were below the State of Illinois average for 8th grade in Math. Consequently, seven of the Peoria County school districts were below the State of Illinois average for 8th grade in both ELA and math.

In the other four counties comprising the Peoria six-county area (including Marshall, Putnam, Stark and Woodford Counties), four school districts fell below the State of Illinois average for 3rd grade in ELA and fell below the State of Illinois average for 3rd grade in Math.
At the 8th grade level, six school districts fell below the State of Illinois average in ELA. Nine school districts were below the State of Illinois average in Math. From the four remaining counties in the six-county area, six school districts fell below the State of Illinois average for 8th grade in both ELA and Math.
High school graduation rates in 2015 and 2019 in Peoria County were below the State of Illinois average for six districts. All of these school districts were close to State averages with the exception of Peoria Public Schools. While increasing, the graduation rate for Peoria Public Schools fell over 15% lower than the State of Illinois average. The measure used in 2015 and 2019 was “4-year graduation rate.”

Figure 1-23: High School Graduation Rates for Peoria Public Schools, 2015 vs. 2019

Overall, the reports from 2015 and 2019 show that the high school graduation rate of Peoria Public Schools increased.
The Tazewell County high school graduation rates are generally much higher than the State average. All high school graduation rates were above the State of Illinois average in 2019.

From the rest of the counties in the six-county area, only three school districts were below the State of Illinois graduation rate in 2019.
Figure 1-26: Average SAT Test Scores in Peoria County, 2018 vs. 2019


Figure 1-27: Average SAT Test Scores in Peoria Public Schools, 2018 vs. 2019

SAT testing is required for all the students in the six-county area, including those students who do not plan to go to college. However, in many other school districts, only students planning to attend college take the SAT exam, thus inflating average scores. Therefore, when interpreting average SAT scores shown in Figures 1-26 through 1-29, discrepancies with the restricted sample of students in the State of Illinois should be taken into consideration.

Peoria Public Schools were well below the State of Illinois’ average SAT test scores in every category. Overall, Richwood’s scores inflated Peoria Public Schools’ SAT scores, yet the district scores are still well below the State of Illinois average.
D. Truancy Issues

Chronic truancy is a major challenge to the academic progress of children and young adults. Figures 1-30 to 1-35 show truancy rates and their changes over past five years. The causes of truancy vary considerably for young children; however, truancy of middle- and high-school students is more likely a result of the adverse behavior and decisions of individual students. Primary school truancy often results from decisions and actions of the parents or caregivers of the children rather than the students.

It is important to note that the criteria for a student to be considered chronically truant changed between the 2015 and 2019 school years. Truancy rates have changed considerably from time period to time period. For example, in 2010, the student needed to be absent for 10% of the academic year to be considered chronically truant. In 2013, the student only needed to miss 5% of the academic year to be considered chronically truant. In 2015, this number increased to 9%. In 2019, the student only needed to miss 5% of the academic year in order to be considered chronically truant. Therefore, much of the notable increase in the truancy rates between 2015 and 2019 can be attributed to this change. Given there is an average of 175 days of school per academic year, this translates to 9 school days of unexcused absences per year.

Figure 1-30: Percentage of High School Students Who Were Chronically Truant in Peoria Public Schools, 2015 vs. 2019

Figure 1-31: Percentage of Middle School Students Who Were Chronically Truant in Peoria Public Schools, 2015 vs. 2019

Figure 1-32: Percentage of Students Who Were Chronically Truant in Peoria County, 2015 vs. 2019


Figure 1-33: Percentage of Primary School Students Who Were Chronically Truant in Peoria Public Schools, 2015 vs. 2019

E. Student Mobility

In K-12 education, “student mobility,” also called “churn” or “transience,” can be defined as situations where students change schools for reasons excluding grade promotion. Consequently, it refers to students changing schools during a school year for voluntary reasons.
(e.g., a student changing schools to participate in a new program), or involuntary (e.g., being expelled). However, the most prevalent cause of student mobility is related to residential mobility (e.g., when a family becomes homeless or moves due to changes in a parent’s job). \(^1\)

Figure 1-36: Student Mobility Rates in Peoria County, 2015 vs. 2019

![Bar chart showing student mobility rates in Peoria County districts, 2015 vs. 2019.](chart.png)


While most school districts had decreased mobility rates between 2015 and 2019, there was a significant increase in student mobility in the Limestone CHSD between 2015 and 2019. Specifically, the mobility rate in 2015 was 17 and it more than doubled in 2019 to 34.1. Fifty percent of school districts in Peoria County (Pleasant Valley, Norwood, Bartonville, Oak Grove, Pleasant Hill, Peoria SD, Farmington, Limestone CHSD, and Peoria Heights) had significantly higher mobility rates than the State of Illinois average in 2019.

Figure 1-37: Student Mobility Rates in Peoria Public Schools, 2015 vs. 2019

![Bar chart showing student mobility rates in Peoria public schools, 2015 vs. 2019.](chart.png)

\(^1\) Education Week, May 11, 2017
While the State of Illinois had a decrease in mobility rates between 2015 and 2019, all three Peoria public schools realized an increase. Moreover, Peoria High School and Manual Academy were significantly higher than State averages.

Figure 1-38: Student Mobility Rates in Tazewell County, 2015 vs. 2019

The majority of school districts in Tazewell County were close to state averages with the exception of East Peoria CHSD 309, East Peoria SD 86, South Pekin SD 137, Pekin CSD 303, Pekin PSD 108, Creve Coeur SD 76, and Spring Lake CCSD 606.

Figure 1-39: Student Mobility Rates in Other Counties, 2015 vs. 2019
The majority of school districts in Marshall, Putnam, Stark and Woodford counties follow the State of Illinois averages for mobility rates except for slightly higher rates in Bradford CUSD 1, Riverview CCSD 2, Fieldcrest CUSD 6, and Low-Point Washburn CUSD 21.
F. Chronic Absenteeism

Chronic absenteeism is consequential to the academic progress of children and young adults. Figures 1-40 to 1-42 show absenteeism rates for 2019 and compare to State of Illinois averages and their changes over past five years. Chronic absenteeism is a major challenge to student success. When students are absent, they lose time in the classroom, resulting in decreased levels of achievement. Consequently, chronic absenteeism can have adverse effects on learning and graduation rates.

Note that the difference between absenteeism and truancy is absenteeism is a measure of total absences, which include both unexcused and excused, while truancy only measure unexcused absences. Note in Illinois to be considered chronically absent, a student needs to miss 10 percent (or 18 days) of school during the academic year, including excused and unexcused absences, as

Figure 1-40: Percentage of Students Chronically Absent in Peoria County 2019


In Peoria County, six school districts are higher than state averages. Note however that Pleasant Valley SD 62 and Peoria Public School are roughly twice the state average.
While five school districts are above the state average, Pekin CSD 303 is roughly twice the state average.

All remaining school districts with the exception of El Paso-Gridley CUSD 11 are below state rate for chronic absenteeism.
G. Low Income Students

Overall, 42.5% of students enrolled in public schools in the Six-County Peoria Region are considered low-income by the Illinois State Board of Education (ISBE) of students. These students are eligible to receive free or reduced-price lunches, live in substitute care, or have families that receive public aid.

Low-income criteria reported by the State of Illinois for students ages 3-17 includes students who receive or live in households that receive public aid from SNAP (Supplemental Nutrition Assistance Program) or TANF (Targeted Assistance for Needy Families); students who are classified as homeless, migrant, runaway, Head Start participants, or foster children; or live in a household where the household income meets (USDA) guidelines to receive free or reduced-price meals.

1-43: Percentage of Low-Income Students, 2018-2019 School Year, Peoria County


Six school districts in Peoria County have higher rates of low income students compared to state averages. Moreover, two school districts, Pleasant Hill SD 69 and Pleasant Valley SD 62, have over 90% of students that fall into the low income category.
Seven school districts in Tazewell County have higher rates of low income students when compared to state averages. Moreover, South Pekin SD 137 has over 90% of students falling into the low income category.

1-45: Percentage of Low-Income Students, 2018-2019 School Year, Marshall, Putnam, Stark and Woodford Counties

In the other counties, three school districts have higher rates of low income students compared to state averages.

Overall, in the Six-County Peoria Region, 30 school districts have more than 1/3 of students reported as low-income. This remains steady from the 2015-2016 school year where the region had experienced a 25% increase in the number of districts with 1/3 of students reported low-income compared to 2013 and a 58% increase compared to 2010.

**H. Teenage Birth Rates**

Figure 1-46: Provisional Teenage Birth Rates in the Peoria Six-County Area and the State of Illinois, 2016-2018

![Figure 1-46: Provisional Teenage Birth Rates](image)

Source: IDPH Behavioral Risk Factors Surveillance System.
Note: Numbers provided are provisional and are subject to change.

Figure 1-46 illustrates teenage birth rates in the six-county area. While the overall trend in both the Peoria six-county area and the State of Illinois is decreasing from 2016 to 2018, Peoria County, Putnam and Tazewell Counties had a higher rate than the State of Illinois in 2018.

**Children and Youth: Strategic Implications**

*Empirical research demonstrates children who grow up in a safe and nurturing environment are more productive members of society as adults. Children need to develop pre-literacy skills so they can be more successful as they transition into school. 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.*

*Poverty. Living in poverty has a wide range of negative effects on the physical and mental health and well-being of children. Poverty impacts children at home, in school, and in their neighborhoods and communities. Poverty is linked with negative conditions such as substandard housing, homelessness, inadequate nutrition and food insecurity, inadequate child care, lack of access to health care, unsafe neighborhoods, and under resourced schools which adversely impact children. Poorer children and teens are also at greater risk for several negative outcomes such as poor academic achievement, school*
dropout, abuse and neglect, behavioral and socioemotional problems, physical health problems, and developmental delays.\textsuperscript{2}

Note in Figure 1-4 that between 2015 and 2017, the percentage of children living in poverty in the Peoria MSA decreased by 3.2% and the percentage of children living in poverty in the State of Illinois decreased by 3.6%. Additionally, teenage pregnancy can contribute to child poverty. As seen in Figure 1-4, while teenage pregnancy decreased in 4 of the 6 counties in the Peoria area since 2016 (except for Putnam and Tazewell Counties), Peoria County is still significantly higher than the State average.

\textbf{Adverse Childhood Experiences.} Adverse Childhood Experiences (ACEs) are increasingly common. ACEs include physical, emotional or sexual abuse; witnessing domestic violence; household member substance abuse; mental illness; parental separation/divorce; incarceration of a family member; and emotional/physical neglect. The more ACEs experienced in childhood, the greater the likelihood of experiencing negative health and well-being outcomes later in life.\textsuperscript{3}

To reduce the impact of traumatic events and ACEs, possible strategies include:

\begin{itemize}
  \item Increase understanding and awareness of trauma and ACEs
  \item Provide trauma-informed care and services
  \item Increase parent/guardian/family support and education
  \item Invest in prevention and resiliency practices and programs
  \item Develop nurturing, resilient and trauma-informed communities \textsuperscript{4}
\end{itemize}

\textbf{Early Childhood Education and Intervention.} Experiences and environments in which children develop in their earliest years can have lasting impact on later success in school and life. Providing high-quality early childhood programs help provide a healthy environment in which to learn and grow is critical. Differences in the size of a child’s vocabulary first appears at 18 months of age, based on whether s/he was born into a family with high education and income or low education and income. By age 3, children with college-educated parents or primary caregivers have a cumulative vocabulary (words) of approximately 1,200 compared to an approximate 400-word vocabulary of children whose parents or primary caregivers did not completed high school. By the time these children reach elementary school, they are already behind their peers unless they are engaged in a language-rich environment early in life.\textsuperscript{5}

\textbf{3rd Grade ELA.} Research tells us the most reliable predictor of educational success for children is whether they are reading at grade level by the end of the 3\textsuperscript{rd} grade. Note that according to data presented in Figures 1-16, 1-18 and 1-20, while a majority of school districts are above the State of Illinois averages, certain school districts are below the 3\textsuperscript{rd} grade reading state averages.

\textbf{Algebra by 10\textsuperscript{th} 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. Perhaps one reason for this phenomenon is the fact that success in Math coursework is a rough surrogate for successful critical thinking. Figures 1-17, 1-19 and 1-21 provide insights to the area’s 8\textsuperscript{th} grade Math literacy.

\begin{itemize}
  \item America Psychological Association (http://www.apa.org/pi/families/poverty.aspx)
  \item https://www.cdc.gov/violenceprevention/acetudy/
  \item http://www.preventionlane.org/adverse-childhood-experiences-trauma
  \item http://developingchild.harvard.edu/resources/five-numbers-to-remember-about-early-childhood-development/
\end{itemize}
**Parental Education and Support.** Research shows that the more involved parents are in supporting the education of the children, the lower the truancy rate. As seen in Figures 1-30 –1-35, truancy rates are higher in 2019 compared to 2015, which is to be expected, given the definition of chronically truant was changed from missing 9% of the year to . Service providers who actively engage parents in their child’s development and growth from prenatal care to graduation has a lasting impact on the family unit and the child’s overall health and well-being. Providers who establish effective school-to-home and home-to-school communication, adapt programming and delivery to be more accessible for parents and students and encourage families in service planning, agency leadership and meaningful volunteer opportunities will increase a family’s knowledge and skills to support and extend their child’s learning at home.

**Engage At-Risk Youth in Volunteering.** Teenagers and preteens 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 of nonprofit agencies.

Additionally, during the summer, learning loss becomes an important consideration for youth living in poverty. It is defined as a situation where young people lose academic skills over the summer, is one of the leading causes of the achievement gap between lower- and higher-income children and a significant predictor of high school dropout rates. Moreover, summer is a time when youth living in poverty struggle to find food and a safe place to be. 

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6 http://www.summerlearning.org/
2. Health

All people in the Peoria six-county area should have 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.

Specific areas addressed in this section include: Asthma, Oral Health, Health Care, Preventative Health, Sexually Transmitted Infections, Substance Abuse, Depression, Obesity, and Diabetes.

The data were obtained from the Illinois County Behavioral Risk Factor Surveys (ICBRFS) conducted by the Illinois Department of Public Health in individual counties over the course of 3-4 years (referred to as county rounds). County round 6 from 2015-2019 is the latest county-level data to be released.

NOTE: Peoria, Tazewell and Woodford Counties were completed in Round 6 (2015-2019). These reports are still unpublished at the time this community assessment was completed. None of the other counties in the HOIUW six-county region were available. Also, the most recent data for the State of Illinois varies from 2016 to 2017. When comparing county data with State data, the years do not align. State-level data is provided for reference only.

A. Asthma

Figure 2-1: Prevalence of Asthma in the Peoria Tri-County Area 2015-2019 and the State of Illinois 2017

In 2015-2019, the Peoria Tri-County region has an asthma rate of 13.9% compared to the State of Illinois’ asthma prevalence rate of 8.2%. Historically, the Peoria area has had a higher asthma rate than the State of Illinois in 2010-2014 round. The asthma rates have decreased in both the Peoria area and the State of Illinois since 2007-2009, with the State of Illinois experiencing a more rapid decline.
B. Oral Health

Figure 2-2: Percentage of Population with Dental Visits in the Peoria Tri-County Area 2015-2019 and the State of Illinois 2016

Oral health is much more than healthy teeth – it is integral to overall health. In the Peoria Tri-County area, 71.6% of population visited a dentist within the last year. The State of Illinois lags the Peoria Tri-County area with only 65.5% of the population having visited a dentist within the past year using 2016 data. In both the Peoria Tri-County area and the State of Illinois, there is around 30% of population who did not visit dentist in one year or more. The percentage of population who did not visit a dentist in more than two years or never is significant in the Peoria Tri-County area (18.5%) as well as in State of Illinois (20.9% in 2016) based on data from the Illinois Department of Public Health.

C. Health Care Coverage

Figure 2-3: Healthcare Coverage in the Peoria Tri-County Area 2015-2019 and the State of Illinois 2017

The percentage of people with healthcare coverage is considerably higher in the Peoria Tri-County area (95.1%) in 2019 compared to the State of Illinois (89.4%) in 2017. Between 2013 and 2014,
number of uninsured individuals in Illinois declined from 18.4% to 13.0%. Meanwhile, monthly Medicaid enrollment increased by 15.9%. The Affordable Care Act may have impacted these numbers, but we will not know the extent of this impact until more data are available.

Figure 2-4: Percentage of Population with a Usual (Primary) Health Care Provider in the Peoria Tri-County Area (2015-2019) and the State of Illinois 2017


Note: The most up-to-date data available for Illinois is year 2017.

The percentage of the population that visited a usual, or primary, health care provider is closely related to the population with health coverage. In the Peoria Tri-County area this percentage of population is 88.1%.

Figure 2-5: Percentage of Population Unable to Go to Doctor Due to Cost in the Peoria Tri-County Area 2015-2019 and the State of Illinois 2017


Note: The most up-to-date data available for Illinois is year 2017.

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7 http://www.unitedhealthgroup.com/modernization
A significant percentage of the population does not visit a doctor when needed due to cost. In the Peoria Tri-County area, this percentage of the population was 7.4% These numbers are considerably lower relative to the State of Illinois at 12%.

**D. Preventative Health**

Figure 2-6: Percentage of Population to Receive a Flu Shot in the Peoria Tri-County Area and the State of Illinois

![Flu Shot Percentage Chart](image)


**Note: The most up-to-date data available for Illinois is year 2017.**

The overall health of a community can be greatly impacted by preventative measures such as immunizations. The percentage of people who had flu shot in 2015-2019 was 40.5% in the Peoria Tri-County area, which was higher than State average of 37.5%.

Figure 2-7: Percentage of Population to Receive a Pneumonia Shot in the Peoria Tri-County Area and the State of Illinois

![Pneumonia Shot Percentage Chart](image)


**Note: The most up-to-date data available for Illinois is year 2017.**
Pneumonia shots are less frequent than flu shots with the Peoria Tri-County area rate being 36.2% and the State of Illinois being 38.1%. It is worth noting that the percentage increased from 2010-2014 in both the Peoria area and the State of Illinois.

Figure 2-8: Percentage of Population with Last Routine Checkup in the Peoria Tri-County Area and the State of Illinois

![Bar chart showing percentage of population with last routine checkup in the Peoria Tri-County Area and the State of Illinois.]


*Note: The most up-to-date data available for Illinois is year 2017.*

Numerous health problems can be minimized when detected early, and routine checkups are one means to detect such problems. The proportion of the State of Illinois’ population is similar to the Peoria Tri-County area’s population regarding visits to a doctor for a checkup within 1 year or less.

E. Sexually Transmitted Infections

Figure 2-9: Chlamydia Rates per 100,000 Population in Peoria Six-County Area & State of Illinois, 2012-2016

![Bar chart showing chlamydia rates per 100,000 population in Peoria Six-County Area & State of Illinois, 2012-2016.]

STIs continue to be a significant problem in Peoria County. Both Gonorrhea and Chlamydia rates in Peoria County increased in the past year. Both rates are still significantly higher than the State average.

F. Substance Abuse

The consequences of youth substance abuse include lower grades, school absenteeism and an increased risk of death through suicide, homicide, accident or illness. It can also lead to mental health problems such as depression, apathy, withdrawal, personality disorders and loss of short-term memory. Teens using alcohol and other drugs often disengage from school and community activities and jeopardize many aspects of family life. The Illinois Youth Survey measures illegal substance use (alcohol, tobacco, marijuana, inhalants, and other drugs) among adolescents.

The substance use increases with the age of the youth. The greatest substance use of alcohol, cigarettes, marijuana and other illicit drugs prevails among 12th Grade youth. The usage more than doubles in majority cases between 8th and 12th grade youth. This should be cause for concern as the usage in the Peoria Tri-County area are often higher than State averages in many cases. Overall, 27% of 8th graders, 40% of 10th graders and approximately 55% of 12th graders were drinking alcohol in 2018. Another significant fact is in regard to marijuana usage. On average, approximately 10% of 8th graders, 19% of
10th graders and 31% of 12th graders smoked marijuana in 2018. This number may increase due to the legalization of marijuana in 2019.

Assessing trends over time provides additional insights into substance abuse among youth. The most used substance in all three counties is alcohol. Since 2016, there was an increase of 4% in Peoria County and a 2% decrease in Tazewell and Woodford Counties of 12th graders drinking alcohol. In 2018, Peoria youth smoking cigarettes decreased by 7%. Tazewell County experienced a decrease of 4% and Woodford county percentage of youth smoking cigarettes declined by 6%. More 12th graders smoke marijuana in Tazewell County. Note that students’ perceptions of the risks of smoking marijuana were significantly lower than how they perceived risks associates with smoking cigarettes. State of Illinois 2016 data do not exist for substance abuse, so comparisons are only made within and between counties for 2014 and 2016.

**Adult Substance Use**

Given the decrease of frequency in the BRFSS through the IDPH, additional insights can be gained from survey data collected from the 2019 Tri-County Community Health Needs Assessment (CHNA). Survey results were obtained from a survey distributed in English and Spanish to residents in the Tri-County area.
Survey respondents were asked “On a typical DAY, how often do you use substances (either legal or illegal) to make yourself feel better?” Note given the increase in opioid abuse, use of legal drugs was included in the question. Of respondents, 84% indicated they do not use substances to make themselves feel better.

Multiple social determinants show significant relationships with substance use. The following relationships were found using correlational analyses:

- Use of substances tends to be rated higher by Latino people, those with less education, those with lower income and those in an unstable (e.g., homeless) housing environment.

### G. Mental Health

*Importance of the measure:* Self-perceptions of health can provide important insights to help manage population health. Not only do self-perceptions provide benchmarks regarding health status, but they can also provide insights into how accurately people perceive their own health.
The CHNA survey asked respondents to indicate specific issues, such as depression and stress/anxiety. Of respondents, 54% indicated they did not feel depressed in the last 30 days.

Multiple social determinants show significant relationships with behavioral health. The following relationships were found using correlational analyses:

- Depression tends to be rated higher for those with less education, those with less income, Peoria County residents, and those in an unstable (e.g., homeless) housing environment.
- Depression tends to be rated lower by Woodford County residents.

The CHNA survey asked respondents to indicate specific issues, such as depression and stress/anxiety. Of respondents, 60% indicated they did not feel anxious in the last 30 days.

Multiple characteristics show significant relationships with behavioral health. The following relationships were found using correlational analyses:
Stress and anxiety tends to be rated higher for younger people, those with less education, those with less income and those in an unstable (e.g., homeless) housing environment.

Survey respondents were also asked if they spoke with anyone about their mental health in the last year. Of respondents 33% indicated that they spoke to someone, the most common response was a doctor/nurse (38%).
According to the 2019 CHNA survey for the Tri-County area, residents were asked to identify the most prevalent health issues in the community. Mental health was identified as the most significant issue (69% of the population). Note that percentages do not equal 100, as participants could select up to three issues.
H. Obesity

Figure 2-21: Percentage of Adult Population with Obesity in the Peoria Tri-County Area and the State of Illinois

Source: IDPH Behavioral Risk Factors Surveillance System.

Note: The most up-to-date data available for Illinois is year 2017.

The rise in obesity among is a national epidemic, according to the Centers for Disease Control and Prevention, contributing to heart disease, stroke, diabetes and some types of cancer. The percentage of the population in the Tri-County area was 64.7%, compared to the State of Illinois average of 65.8%.

I. Diabetes

Figure 2-22: Percentage of Population with Type 2 Diabetes in the Peoria Tri-County Area & State of Illinois

Source: IDPH Behavioral Risk Factors Surveillance System.

Note: The most up-to-date data available for Illinois is year 2017.

Over 7% of residents in the Peoria Tri-County area had type 2 diabetes in 2019. This is lower than the State of Illinois in 2017. The prevalence of diabetes is slightly decreasing in the Peoria Tri-County area.
J. Access to Healthcare When Needed

In the Tri-County CHNA survey, respondents were asked, “Was there a time when you needed care but were not able to get it?” Access to four types of care were assessed: medical care, prescription medications, dental care, and counseling.

Figure 2-23: Did not Have Access to Care When Needed, Tri-County, 2019

![Bar Chart]

Source: CHNA Survey

Survey results show that 14% of the population did not have access to medical care when needed; 13% of the population did not have access to prescription medications when needed; 16% of the population did not have access to dental care when needed; and 12% of the population did not have access to counseling when needed.

Several social determinants show a significant relationship with an individual’s ability to access care when needed. The following relationships were found using correlational analyses:

- **Access to medical care** tends to be higher for White people, those with higher education, those with higher income, Tazewell County residents and those with a stable housing environment. Access to medical care tends to be lower for Black people and Peoria County residents.
- **Access to prescription medications** tends to be higher for White people, those with higher education, those with higher income, and those with a stable housing environment. Access to prescription medications tends to be lower for Black people and Peoria County residents.
- **Access to dental care** tends to be higher for White people, those with higher education, those with higher income, and those with a stable housing environment. Access to dental care tends to be lower for Black people, Latino people and Peoria County residents.
- **Access to counseling** tends to be higher for White people, those with higher education, those with higher income, and those with a stable housing environment. Access to counseling tends to be lower for Black people.
Figure 2-24: Causes of No Access to Medical Care When Needed, Tri-County, 2019

Survey respondents who reported they were not able to get medical care when needed were asked a follow-up question. The leading causes of the inability to gain access to medical care were the inability to afford the copay (32%), too long to wait for an appointment (30%), no insurance (25%), and no way to get to the doctor (13%).

Figure 2-25: Causes of No Access to Prescription Medication When Needed, Tri-County, 2019

Survey respondents who reported they were not able to get prescription medications when needed were asked a follow-up question. The leading causes of the inability to gain access to prescription medicine were the inability to afford copayments or deductibles (52%) and no insurance (23%).
Survey respondents who reported they were not able to get dental care when needed were asked a follow-up question. The leading causes of inability to gain access to dental care were no insurance (44%) and the inability to afford copayments or deductibles (34%).

Survey respondents who reported they were not able to get counseling when needed were asked a follow-up question. The leading causes of the inability to gain access to counseling were the inability to afford co-pay (31%), embarrassment (27%), lack of insurance (18%), doctor refused insurance (14%), and no way to get to the counselor (11%).
Health and Rehabilitation: Strategic Implications

A healthy community impacts 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.” Similarly, 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 ED in non-emergencies, is better for patients and lowers cost of health care to society.

Cost of Health Care. A significant percentage of the population does not visit a doctor when needed due to cost. In the Peoria Tri-County area, 7.4% of the population was not able to get healthcare when needed in 2019.

Unexpected circumstances, like a health issue, can cause significant stress when people do not have health insurance. Therefore, the United Way Worldwide partnered with the SunTrust Foundation to launch My Smart Money,™ a free and easy online tool that can help anyone with financial challenges, such as paying medical bills. For additional information see https://www.unitedway.org/my-smart-money/about.

Sexually Transmitted Infections. STIs continue to be a significant problem in Peoria six-county area - especially in Peoria County. Gonorrhea and Chlamydia rates in Peoria County have increased. Both rates are significantly higher than the State average. Many STIs are treatable, and treatment deserves attention going forward. STIs impact community health but they are preventable. Therefore, the greatest challenges to decreasing preventable STIs is providing access to education and testing. Unfortunately, the cost of health care and cultural stigma often results in high rates of these infections among youth and people living in lower income areas. Mobile wellness clinics, outreach efforts to community events, youth education, promotion of test-and-treatment services offer opportunities to impact this issue.

Youth and Substance Abuse. Substance abuse among youth happens for many reasons. For most teenagers, curiosity and peer pressure leads to their first drug experience. It is natural for teenagers to engage in risky behavior. They do it for excitement or to fit in with their peers. The consequences of youth substance abuse include lower grades, school absenteeism and an increased risk of death through suicide, homicide, accident or illness. It can also lead to mental-health problems such as depression, apathy, withdrawal, personality disorders and loss of short-term memory. Teens using alcohol and other drugs often disengage from school and community activities and jeopardize many aspects of family life. Therefore, it is important to support health education as it teaches critical life skills that improve nutrition, increase exercise, reduce substance abuse, lower stress and lessen risky behaviors.

Mental Health. Untreated mental health problems contribute to homelessness, low academic achievement and decreased self-reliance. Note that 9% of residents have felt depressed more than five days in the past month and 7% of the population has felt anxious or stressed more than five days in the past month, according to 2019 Community Health Needs Assessment (CHNA) survey data.

An Overweight and Obese Population. The rise in obesity among U.S. adults and children is a national epidemic, according to the Centers for Disease Control and Prevention, contributing to heart disease, stroke, diabetes and some types of cancer. The percentage of overweight or obese adults stayed almost the same in the State of Illinois, and the Peoria area is experiencing a slightly lower rate. Moreover, over 7% of residents in the Peoria Tri-County area have diabetes. Compared to the State of Illinois, the prevalence of diabetes is slightly decreasing in the Peoria area.
**FamilyWize.** Through a network of local United Way organizations (including the Heart of Illinois United Way), the community service partnership United Way Worldwide has with FamilyWize ([familywize.org](http://familywize.org)) annually helps more than 10 million people nationwide obtain much-needed prescription medications they otherwise would not be able to afford. On average, people can save 40% on prescription medications resulting in $1-billion in savings on the cost of medications in 2018.

**Partnership for a Healthy Community.** The Partnership for a Healthy Community (PFHC) is developing programs to impact the overall health of the community. Specifically, there are four areas of priorities for the Partnership for a Healthy Community (PFHC).

1. **Mental Health Priority** is to improve mental health among tri-county residents through preventative strategies and increased access to services. The program adopts evidence-based intervention strategies to increase knowledge of mental health and reduce stigma by providing Mental Health First Aid and Youth Mental Health First Aid. It utilizes universal school-based suicide awareness & education programs, and school based social emotional instructions. It’s also integrated with behavioral health primary care. It also has structured evaluation plan.

2. **Substance Use Priority** aims to reduce substance use to protect the health, safety, and quality of life for tri-county residents. The evidence-based strategy for it includes: criminal justice, harm reduction efforts, and technology-enhanced classroom instruction.

3. **Cancer (breast, lung, colorectal) priority** is to reduce the illness, disability and death caused by lung, breast and colorectal cancer in the tri-county area. Its intervention strategies include: increase the proportion of women who receive a breast cancer screening; increase the proportion of adults who received a colorectal cancer screening based on the most recent guidelines, etc.

4. **Healthy Eating, Active Living (HEAL) priority** is to foster and promote healthy eating and active living to reduce chronic disease and food insecurity in the tri-county area. It utilizes community-based social support for physical activity and nutrition, breastfeeding promotion programs, family-based physical activity intervention, etc. to promote healthy eating and living.
3. Financial Stability

Financial Stability is largely impacted by income and wealth; thus, poverty rates in the Peoria six-county area warrant examination. Poverty rates are lowest in traditional families. When a family has a single female as the head of household, poverty rates increase significantly. It is vitally important for the community to target these women with services and programs. The ability of families and individuals to fulfill basic needs, such as food, housing, and childcare is an important step in building a stronger, more sustainable community. Specific areas addressed in this section include: Poverty Issues; Disabilities in the Community; Housing Issues; Household Income; Population Growth; and Employment data.

Elderly individuals live longer, happier, and more meaningful lives when they are able to live in their homes. Seniors and individuals with disabilities make great contributions to our community when they remain independent and can hold employment.

Housing burden represents a percentage of income devoted to housing costs that is over 30%. Thus, the higher the housing burden, the less economic self-reliance people experience. Specifically, they may need to rely upon other sources of funds for necessities such as food, utilities, healthcare, and transportation, and they have less disposable income to contribute to their local economy.

A. Poverty Issues

Figure 3-1: Trends in Poverty for Individuals in the Peoria MSA and the State of Illinois, 2010-2017

The percentage of residents living in poverty in the Peoria MSA remained below the poverty rate of the State of Illinois. From 2015 to 2017, the percentage of individuals living in poverty decreased by 2.0% in the Peoria MSA and while there was an increase of 0.2% in the State of Illinois.
Poverty rates are lowest in traditional married-couple families. Families with female head of household are more than 10 times likely to experience poverty in the Peoria MSA, even though there was a decrease between years 2015 and 2017 in percentage of families with female householder living in the poverty. At the time this report was written, recessionary projections resulting from the COVID-19 pandemic will result in higher poverty rates.

**B. Disabilities in the Community**

The disability rate in the Peoria MSA and the State of Illinois fluctuated roughly between 10 to 12% from 2010 to 2017. In the State of Illinois, the percentage was more stable and reached the peak in 2013 with 11.1%. People living with disabilities tend to have lower incomes, a higher unemployment rate and have limited housing options.
Disability rates are significantly greater among individuals 65 and older in the State of Illinois. Almost 50% of individuals 75 years and over struggle with some type of disability. The rates of disability are lower among children and younger working adults in the Peoria MSA as well as the State of Illinois in 2017. Note that in the Peoria MSA, individuals from 34-64 constitute the highest age groups with disabilities in the Peoria MSA.

Ambulatory, independent living and cognitive difficulties are the most limiting disabilities for individuals between ages 18 and 64 in the Peoria MSA. In addition, there are a significant number of individuals experiencing hearing, self-care and vision difficulty. These disabilities are very likely to limit financial independence and employment.
C. Housing Issues

Figure 3-6: Housing Problems Peoria Six-County Area and the State of Illinois, 2016

Source: HUD Disproportionate Housing Data for 2016

Figure 3-7: Housing Problems for House Owners in Peoria Six-County Area and the State of Illinois, 2016

Source: HUD Disproportionate Housing Data for 2016
3-8: Housing Problems for Renters in Peoria Six-County Area and the State of Illinois, 2016

The four housing problems include: 1) incomplete kitchen facilities, 2) incomplete plumbing facilities, 3) more than 1 person per room; and 4) cost burden greater than 30%. Households with at least one of the four housing problems are much more prevalent for renters versus house owners. The Peoria six-county area is lower than state averages in both categories for households with at least one of the abovementioned problems.

Figure 3-9: Housing Cost Burden for Renters in the Peoria MSA and the State of Illinois, 2015 vs. 2017

Figure 3-10: Housing Cost Burden for Homeowners with Mortgages in the Peoria MSA and the State of Illinois, 2015 vs. 2017


Figure 3-11: Housing Cost Burden for Homeowners without Mortgages in the Peoria MSA and the State of Illinois, 2015 vs. 2017


Figure 3-12: Housing Cost Burden in the Peoria MSA and the State of Illinois, 2015 vs. 2017


Housing cost burden is defined as having to pay 30% or more of a family’s income for housing. Housing cost burdens are significantly less for individuals in the Peoria MSA than in the State of Illinois.
Illinois. Overall, housing cost burden is highest among renters and lowest for homeowners without a mortgage. The housing cost burden for renters, homeowners with mortgages and even homeowners without mortgages were at similar rates between 2015 and 2017 in the Peoria MSA and the State of Illinois. This reflects the state of economy, which was slowly improving after the crisis in 2008.

3-13: Rent Expenses for Low Income Workers for Peoria MSA and the State of Illinois

Rental expenses for low-income workers for the Peoria MSA ($577) are significantly lower than the State of Illinois ($621).

Figure 3-14: Vacancy Rates in the Peoria MSA and the State of Illinois, 2015 vs. 2017

The Peoria MSA renters experienced a decrease in the supply of vacant housing options from 2015 to 2017. On the other hand, the State of Illinois average remained stable. Homeowners’ vacancy rates were relatively stable from 2015 to 2017 in both the Peoria MSA and the State of Illinois.
The Peoria area maintains sheltered help for many homeless individuals. Nevertheless, based on “a point in time count” there was an increase in people being unsheltered and a decrease in people being sheltered in 2016 and an increase in people being sheltered and a decrease in people being unsheltered in 2018. One reason could be mild winter in the Peoria area in 2016 and the harsh winter in 2018. Note that “a point-in-time count” is a census data point that counts homeless people on one night in a designated community.

**D. Energy Assistance**

Funded by the federal government and the State of Illinois, the Low Income Home Energy Assistance Program (LIHEAP) provides assistance to manage costs associated with home energy bills. In Illinois, LIHEAP primarily provides one-time energy assistance benefits as direct payments to vendors, reconnection assistance, or payment plans based on a percentage of household income.

Households living at 150% of the federal poverty level are eligible for LIHEAP assistance. In the Tri-County Area, the majority of households receiving LIHEAP are in Peoria County. In 2015, only 15.2% of the eligible households in Peoria County received LIHEAP assistance which dropped to 13.4% in 2018. In Tazewell County, approximately 15-16% of eligible households receive LIHEAP assistance; and in Woodford County, approximately 10-11% of eligible households receive assistance. All three counties lag significantly behind the State of Illinois average of 25.4%.

By comparing the number of eligible households to the number of households receiving assistance, this illustrates the gap between need and available resources. According to the U.S. Energy Information Administration, 28% of households nationwide that struggle to pay energy bills report forgoing food and medicine on a monthly basis.

Within the breakdown of LIHEAP recipients more than 75% of recipients in the Tri-County Area are households with seniors age 60-plus, disabled individuals, or households with children age five and younger. While the maximum heating assistance available from LIHEAP funding is $1,270, in Illinois the average benefit received is only $420.

E. Household Income

Figure 3-18: Household Income in the Peoria MSA, 2015 vs. 2017


The percentage of households making less than $10,000 per year increased since 2015 from 6.4% of households to 7.9% of households. Moreover, the number of households earning from $10,000 to
$34,999 increased. At the same time, the percentage of families earning from $35,000 to $74,999 decreased as well as those earning $100,000 to $149,999.

Figure 3-19: Median Income in the Peoria MSA and the State of Illinois, 2015 vs. 2017


The median income in the Peoria MSA continues to lag behind the median income for the State of Illinois, even though there has been an increase in the median income between 2006 and 2017 in Peoria MSA. However, the State of Illinois median income increased at a faster rate, creating a larger gap. Note that three-year comparisons were made. However, due to data availability, for the last period of observation, 2015-2017 yielded a two-year comparison.

Figure 3-20: Median Household Income by Race in the Peoria MSA, 2015- 2018


Comparing data from 2015, 2017 and 2018 within the Peoria MSA illustrates modest growth for all ethnicities. Moreover significant income disparity existed between ethnicities in the Peoria MSA. Black residents earned significantly less than all other ethnicities, while Asian and White households continue
to possess incomes at higher level. When comparing 2018 Peoria MSA data to the state, all ethnicities were below state averages with the exception of Asian residents.

**3-21: Median Household Income by Age, Peoria MSA Counties and the State of Illinois in 2018**

![Graph showing median household income by age for Peoria MSA counties and the State of Illinois in 2018.](source)


In 2018, there were significant income differences between counties in the Peoria MSA, where Woodford County was the only county that was higher than the State of Illinois.

**Figure 3-22: Sources of Household Income in the Peoria MSA and the State of Illinois, 2017**

![Bar chart showing sources of household income in the Peoria MSA and the State of Illinois in 2017.](source)

Source: US Census Bureau 2017 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 (75.9%) reported earned income. Almost one third (31.7%) received social security, and about one fourth (23.4%) had non-social security retirement income. Retirement income and social security income are more common in the Peoria MSA than in the State of Illinois overall.
Annual earnings differ significantly according to the level of education a person has attained. Specifically, education is directly correlated to income level. Note that annual earnings in most categories over between 2015 to 2017, however those with advanced degrees experienced a decline.

Significant gender disparity continues to exist between men and women in 2018. There are significant differences at every level of education. While dollar-value differences increase as expected with higher
levels of education, other than those without a high-school education, graduate or professional degrees had the highest percentage difference. Specifically, for less than high school, there was a 102% difference, for high-school graduates there was a 57% difference, for those with some college there was a 63% difference, for those with a bachelor’s degree there was a 53% difference and for those with graduate or professional degrees, there was an 80% difference. Moreover, men without a high-school degree earn slightly more than women with some college.

**F. Family Poverty**

Figure 3-25: Percentage of Households in the Peoria MSA at Ages Specified Living below Poverty, 2015 vs. 2017

As previously discussed, children represent the highest percentage of those living in households below the poverty level. Between 2015 and 2018, there was a 0.7% decrease in the number of households with children under the age of 18 living in below the poverty level, but there is still nearly a one in seven chance a child under the age of 18 is living in a household below the poverty line.
Nearly half (49.8%) of Peoria MSA households with children under 18 received supplemental nutrition assistance program (SNAP) benefits in 2018.

When comparing households with and without children, households with children experience food insecurity at a higher rate. The USDA defines households as food secure if they have access, at all times, to enough food for an active, healthy life for all household members.
Households with food insecurity are uncertain or unable to acquire enough food to meet the needs of all their members because of insufficient income or other resources. To avoid limiting their diets, disrupting eating patterns, or reducing food intake, households need to access a variety of foods by participating in food assistance programs or getting emergency food from community food pantries.

According to the survey from the 2019 Tri-County Community Assessment (CHNA), there are 19,612 people in Peoria County that go hungry at least once per week, 2,625 people that go hungry in Tazewell County at least once per week and 1,148 people that go hungry in Woodford County at least once per week.

Figure 3-28: Composition of Family and Impact on Prevalence of Poverty in the Peoria MSA, 2015 vs. 2017


Family composition and poverty are significantly related. Families with two parents are significantly less likely to be affected by poverty in comparison with families with female only. Families with children under the age of 18 have a higher prevalence of poverty compared to similar families without children in all the categories. In the Peoria MSA, more than 40% of households with children under age 18 with a female head of household live in poverty.
G. Population Growth

Figure 3-29: Percentage Change in Population between 2015 and 2017


The Peoria six-county region population has decreased less than one percent from 2012-2015, but the decline rate is significantly higher if the City of Peoria is excluded. The State of Illinois has a growth rate of -0.15%.
H. Employment

Figure 3-30: Annual Unemployment Rates in the Peoria MSA, the State of Illinois, and U.S.

The Peoria MSA unemployment rates worsened in comparison with both the State of Illinois and national trends in 2017. The unemployment in the Peoria MSA was less than the State averages and most national averages each year until 2014, when in the middle of the year Peoria MSA's unemployment rate surpassed both Illinois and U.S. unemployment percentages.

Peoria MSA Employment Trends
A review of local employment in five key NAICS industries is presented below. All data have been seasonally adjusted by the Center for Business and Economic Research (CBER), allowing underlying economic trends to be observed.
The data show sensitivity of manufacturing services and business and professional services to the business cycle. Manufacturing services were reaching its highest level during expansion in 1990, peaking at 35,000 during 2000. Influenced by national recession in March 2001, local manufacturing employment rates dropped and resulted in employment below 26,500 jobs by the August of 2003. Between 2003 and 2007, the economy partially recovered which led to the increase in job creation in the manufacturing sector up to 32,000 jobs. After experiencing another recession in December 2007, the manufacturing sector experienced another drop and employment reached a low of 24,400 jobs in December 2009. Since then, employment in manufacturing improved in 2012 and decreased again to result in approximately 22,600 jobs in August, 2019.

Employment in business and professional services includes jobs such as accounting and law firms, marketing, computer consulting services, and other similar service type firms. The expansion of local business and professional services is reflected in the increase in area employment in the sector, increasing from 16,000 at the beginning of 2000 to approximately 23,700 jobs in 2019. Business and professional services were also influenced by the recessions in 2000 and 2008 but the drops were not that significant as in the manufacturing sector. Moreover, there is an obvious decline in employment in the manufacturing sector and an increase in business and professional services as the economy is undergoing transformation from a manufacturing economy to a service economy. In addition, in 2015, Caterpillar, the main employer in the manufacturing sector in the Peoria MSA, announced a major restructuring plan that included elimination of more than 10,000 job positions and closure or consolidation of more than 20 facilities globally through 2018.8

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8 http://www.reuters.com/article/us-caterpillar-layoffs-idUSKCN0RO1I820150924
Figure 3-32: Peoria MSA Employment Trends – Healthcare vs. Retail vs. Hospitality Services

Source: http://www.bradley.edu/academic/colleges/fcba/centers/economic/trends/
Note: Horizontal axis shows last two digits of year and month - for example 1908 = August 2019

Health care services employment increased since the beginning of 2002, with employment growing until December 2008 when the number of jobs in health care services peaked at slightly over 30,000 employees. After the recession, the health care services sector decreased and employment fell to 28,955 jobs by January 2010. In September 2019 employment in the sector was approximately 32,100 jobs.

Hospitality and entertainment and retail employment in Peoria MSA have remained quite consistent since 2001. In September 2019, there were approximately 18,000 jobs in the hospitality/entertainment sector and 24,100 jobs in the retail sector.

I. Grandparents as Heads of Households

Grandparents raising grandchildren are shaping the resource allocation of community service providers in addition to altering 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 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
Financial Stability: Strategic Implications

Self-reliance refers to the amount of income needed to meet basic needs, such as food, clothing, housing and sustainable employment. Self-reliance also represents one’s ability to foster maximum independence. 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 education. 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.

Self-reliance is largely impacted by income and wealth; thus, poverty rates in the Peoria six-county area warrant examination. Poverty rates are lowest in married-couple families. When a family has a single female as the head of household, poverty rates increase significantly. It is vitally important for the community to focus services and programs for these women and the families they support.

The baby boomers (demographic group born between approximately 1946-1964), has been driving change in the age structure of the U.S. population since their birth. This group is projected to continue to influence characteristics of the nation in the years to come. The baby boomers began turning 65 in 2011 and are now driving growth at the older ages of the population. By 2029, when all of the baby boomers will be 65 years and over, more than 20 percent of the total U.S. population will be over the age of 65. Older adults can continue to age at home with supportive services and access to a social network. The most effective way to lower long-term care costs and to delay or prevent nursing home placement, is through home and community based services.

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. Individuals with disabilities make great contributions to our community when assistance is provided to help achieve a maximum level of sustainable independence. When individuals with disabilities develop a new skill accompanied with the removal of impediments, they can develop a sense of optimism and self-efficacy that allows them to sustain independence and recognize opportunities rather than barriers.

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 levels of employment and compensation rates into adulthood.

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 pm and 6 pm. Those are the high-risk hours after school, before parents return home from work.

Finally, regarding financial stability, a McKinsey report states “The most promising approach, then, is to identify sectors with high growth potential where there are shortages or a high turnover of workers. Governments should conduct job-market analyses to identify each area’s distinctive attributes and

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supply-and-demand dynamics, as well as the current state of the workforce. This means looking at posted job vacancies, public infrastructure investment, demographics, local university-research commercialization, venture-capital spending, and regulation. The analysis should be done at the city and regional levels, and then buttressed by interviews with major companies in the area.” - Closing the skills gap: Creating workforce development programs that work for everyone, Martha Laboissiere & Mona Mourshed | Public Sector February 2017, McKinsey
III. HEART OF ILLINOIS 2-1-1 DATA

The Heart of Illinois 2-1-1 Information and Referral Service is a partnership between the Heart of Illinois United Way and Advanced Medical Transport (AMT) of Central Illinois. The 2-1-1 service is easily accessible by the public and connects agencies and their services to individuals and families in need of critical health and human care services throughout Peoria, Tazewell, Woodford, Marshall, Stark and Putnam counties.

The data collected by 2-1-1 provides demographics and referral information that can be used to anticipate demand for health and human care services as well identify emerging social trends to support community planning efforts. It is important to include these baseline data in the 2017 Peoria Area Community Assessment to generate awareness of need requests and service referrals.

Figure 4-1: Total Number of Calls from Each County in 2018 and 2019

In the six-county area, there were 11,482 calls received in 2018 and 10,962 calls received in 2019. Over half of the calls to 2-1-1 are from Peoria County in 2019. Note that 41% of calls in 2018 and 34% calls in 2019 originated outside of the six-county area.
Figure 4-2: The Most Identified Needs in the Heart of Illinois in 2018 and 2019

The most common topics people call about are housing issues and utility assistance. Housing issues create more than one-quarter of all calls and utility assistance approximately one-fifth of calls. This is followed by queries for food/meal support, individual/family and community support, clothing/personal/household support and health care support. Other areas include legal, consumer and public safety services, mental health and addiction help, employment, transportation, income support and other needs such as government/economic services, arts, culture and recreation needs, disaster services, volunteer and donation opportunities, information services and education.

Source: The Heart of Illinois 2-1-1 Information and Referral Service
IV. WORKFORCE READINESS

A. Workforce Readiness and Typical Barriers

An economically stable community is dependent upon having a workforce with the necessary skills to meet employer needs while earning sustainable, living wages. By working collaboratively with businesses, government, educational institutions, and nonprofit organizations, communities can collectively address the challenge of attracting and retaining businesses while ensuring these businesses, their employees, and their families thrive.

In 2019, the CEO Council, Greater Peoria Economic Council, Illinois Central College and multiple business, government, nonprofit organizations formed the Regional Workforce Development Alliance. Working together, the alliance has identified the need to increase the number of people with credentials and certifications from 40 to 60% to ensure the success of economic development in the Peoria area and to improve the financial stability of the people who call our community home.

The benefits of investing in workforce readiness are as multi-faceted as populations and organizations who are part of the inter-connected system that ensures the community has a pool of well-trained employees who earn sustainable wages. From the single mother returning to the workforce to the recent high school graduate enrolled in community college, our educational institutions, governmental entities, nonprofit organizations, and employers can work together to improve the education, financial stability, and health of individuals and families.

Health and human care programs play a vital role in workforce readiness. Representing a continuum of services from early childhood through adulthood, a resilient workforce starts with quality education programs that are essential to earning a livable wage, financial stability programs that lead to increased independence while moving individuals and families out of poverty, and accessible healthcare programs that promote workers’ social-emotional and physical health needs.

The first step for schools, employers, and local governments can take to significantly reduce or remove barriers to workforce readiness is to collaborate with their community’s existing health and human care programs. Many of the populations served by social services have difficulty finding work because they have lower levels of educational attainment, lack occupational or soft skills, and face other home or family life barriers. Investing in early childhood education, after school programs, tutoring and mentoring programs, life-skills education, GED programs, affordable childcare for working families, and much more, can help build this potential human resource.

“The supports and services needed to secure employment or increase wages vary considerably. For some, a bus pass, a childcare voucher, or some training is sufficient to help secure and maintain employment, but others may need intensive mental health services or significant additional education before they can find employment.” - Evidence Matters, Summer/Fall 2018, Housing Assistance, Employment, and Self-Sufficiency, huduser.gov/portal/periodicals/em/summer-fall-18/highlight1.html

Beyond a high school education, increasing postsecondary enrollment and academic success in community college, trade schools, apprenticeship programs, and credential or certification programs can help fill the “skills gap” often identified by community-based workforce development programs.

“On the one hand, almost 40 percent of American employers say they cannot find people with the skills they need, even for entry-level jobs. Almost 60 percent complain of lack of preparation, even for entry-
level jobs. On the other hand, this “skills gap” represents a massive pool of untapped talent, and it has dire consequences, including economic underperformance, social unrest, and individual despair.” - *Closing the skills gap: Creating workforce development programs that work for everyone, Martha Laboissiere & Mona Mourshed | Public Sector February 2017, McKinsey*

Workforce readiness is critical to maintaining and growing local economies. By assessing occupational areas where employees are needed within the community, supporting health and human care programs that address barriers to workforce readiness, and developing educational programs that improve essential skills needed for identified occupations, communities can substantially increase their labor force participation rates.

“States, cities, counties, and community groups, such as chambers of commerce, can encourage work-based learning and act as intermediaries to match businesses with local schools. A key component is requiring higher education institutions to consult with local chambers of commerce, workforce development boards, and other similar groups to boost student workforce-ready skills.” - *5 Ways Policymakers Can Help Build A Future-Ready Workforce Today*, forbes.com/sites/gradsoflife/2020/02/18/5-ways-policymakers-can-help-build-a-future-ready-workforce-today, Feb 18, 2020

**Typical Populations Most Affected by Barriers to Workforce Readiness**

- Adults with a high school diploma/equivalent or less
- People living in poverty
- Low-income, at-risk youth moving into adulthood or young adults previously in foster care
- Women with preschool or younger children
- Racial/ethnic minorities
- People with poor physical health, disabilities, or mental health issues
- Persons transitioning from substance abuse treatment, homelessness, or incarceration
- People living in sparsely populated areas
- People who are unemployed or underemployed due to workplace closings and layoffs
- Foreign born individuals (U.S. Census Bureau uses the term foreign born to refer to anyone who is not a U.S. citizen at birth.)
- Veterans moving from military to civilian jobs

**Typical Barriers to Workforce Readiness**

- Education, training, and skill-based barriers
- Social and family/home life barriers
- Employment and experience barriers
- Transportation and housing barriers
- Health and human care program barriers
- Race, ethnicity, and gender inequality barriers

*Education, Training, and Skill-Based Barriers to Workforce Readiness*

- Low-level of math and reading proficiency
- Lack of high school diploma or GED
- Lack of professional skills that affect ability to maintain a job (timeliness, communication skills, etc.)
- Low-level of computer and technology skills
- Lack of job training providing technical skills beyond high school diploma
- Limited adult learning programs available (ABE) to help improve basic math and reading skills prior to obtaining a GED
- Cost of post-secondary education and training or certification courses

**Social and Family/Home Life Barriers to Workforce Readiness**
- Limited “personal support systems” result in low-skilled workers and low-income individuals who have lower resiliency to bounce back from crises leads to unstable employment
- Low-income individuals spend a higher percentage of their income on housing costs
- Low-income individuals cannot afford transportation, professional attire, etc.
- Mental health, substance abuse and disabilities can lead to reduced capacity to work
- Lack of supportive services such as affordable childcare
- Lack of flexible workplace policies for family illnesses or emergencies

**Employment and Experience Barriers to Workforce Readiness**
- Lack of entry-level jobs that pay family-supporting wages
- Limited opportunities to move from entry-level jobs to higher skilled positions that pay living wage
- Lack of knowledge by people new to the workforce, or those who are underemployed or unemployed, about industries that are hiring and available training
- Limited work experience by young adults and middle-aged adults returning to the workforce

**Transportation and Housing Barriers to Workforce Readiness**
- Expense of transportation and lengthy public transit times are prohibitive
- Access to public transportation by low-income individuals who do not have access to bus routes
- Limited service schedules for second and third shift workers
- Public transportation costs use a higher percentage of low-income earners’ wages
- Portion of skilled jobs require special driver’s licenses
- Lower-income individuals are less likely to obtain and renew driver’s licenses due to suspensions, cost of insurance, etc.
- Lack of stable, affordable housing represents higher housing cost burdens for low-income households and limits individual from obtaining employment or maintaining employment to move out of poverty

**Health and Human Care Program Barriers to Workforce Readiness**
- Eligibility for government assistance programs often decreases with increased employment earnings leading to disincentives for participants to earn higher wages due to loss of benefits that cannot be replaced with higher wages
- Persons with multiple employment readiness barriers require more resources and take longer to reach gainful employment
- Gaps in employment, criminal records and discrimination make it difficult for previously incarcerated individuals to re-integrate into society and the workforce

**Race, Ethnicity, and Gender Inequality Barriers to Workforce Readiness**
- Low-income neighborhoods that are predominantly black lead to low-performing elementary and high schools, higher poverty rates, higher crime, and limited resources for educational attainment and job skills training
- Biases in hiring, lower wages, and inequities in educational attainment limit available employment opportunities for certain races and ethnicities
• Median hourly wages are lower, and unemployment is higher, for people who are Black, Latino, Native American, or mixed race
• Women of color start their careers with lower wages and have a larger gender pay gap
• Women returning seeking employment after an absence from the workforce earn less; women with children make less than men with children or women without children
• The gender pay gap widens as women progress in their career and women’s careers advance at a slower rate

B. Education and Workforce Readiness

When focusing on workforce readiness and the needs of local employers, preparing students for postsecondary education can shift from only college prep to include career-focused learning that integrates academic and career instruction. This starts with increasing opportunities for students to explore various career paths at a younger age, building soft skills throughout K-12 education, starting career and technical education as early as middle school, and entering postsecondary education and certification programs with the necessary levels of reading, math and communication skills.

The shift in the job market towards a more educated workforce does not necessarily mean that all of the positions offering a livable wage require an undergraduate diploma. Helping students understand the variety of higher-skilled jobs offering higher wages, can lead to increased enrollment, and academic success, across the entire continuum of postsecondary learning from a few courses to a certificate, a two-year degree, a four-year degree, and beyond.

Sources for Career or Technical Credentials Beyond High School

• Community Colleges
• Trade or Technical Schools
• Union Apprenticeships
• Industry Organizations or Associations
• Military
• Social Service and Nonprofit Agencies

5-1: Population Enrolled in School, Peoria MSA, 2018, Percentage of Population Age 3-Years and Older Enrolled in School

American Community Survey, US Census Bureau (data.census.gov), 2018, 5-Year Estimates, data.census.gov
High-quality early education, specifically programs at schools and childcare centers, prepare children for success in kindergarten and beyond. As an economist with the Federal Reserve Bank explains, “The first few months and years of a child’s life establish the building blocks for skill development during school and at the workplace. With a strong foundation, the workforce development pipeline can build on early gains.” –Preparing the Future Workforce: Early Care and Education Participation among Children of Immigrants by Erica Greenberg, Victoria Rosenboom, and Gina Adams, March 2019, Urban Institute

In 2019, the State of Tennessee announced their “Future Workforce Initiative” to increase science, technology, engineering, and mathematics (STEM) training in K-12 schools as a response to the growing technology industry. The initiative includes launching career and technical education (CTE) programs for middle schools, increasing the number of K-8 teachers qualified to teach work-based learning and advanced computer science courses, and expanding post-secondary STEM opportunities for high school students through dual-enrollment and credit programs.

In the Peoria MSA, 11.6% of females in the Peoria MSA have an associate’s degree compared to the male population at 8.9%. Male and Female population with a bachelor’s degree is comparable at 18.9% compared to 18.6% respectively. Looking at Graduate degrees, more males in the Peoria MSA (10%) hold a degree at this level compared to females (8.9%); this is the opposite of the state averages of 12.7% for males and 13.2% for females. Overall, the Peoria MSA has a higher percentage of the population with at least a high school diploma through the associate degree level but falls behind the state averages for bachelor’s degrees and higher.
Median earnings for males 25 and older in the Peoria MSA are significantly higher than females age 25 and older across all degree levels: males with less than a high school diploma earn a 67.7% more, males with a high school diploma or equivalent earning 66% more, males with some college or an Associate’s degree earn 67.8% more, males with a Bachelor’s degree earn 72.3% more, and males with a Graduate or professional degree earn 73.1% more. In fact, the median income for a female in the Peoria MSA with a Graduate or professional degree is only 14% higher than the median income for a male in the Peoria MSA with some college or an associate degree. Women in the Peoria MSA with some college or an associate degree earned a median income less than $28,000 in 2017.

“Demand for middle-skill jobs will remain strong well into the future. Between 2014-2024, nearly half of job openings will be middle-skill. In comparison, high-skill jobs —those requiring a bachelor’s degree or beyond — will represent only 32 percent of job openings. Lower-skill jobs will represent 20 percent of job openings. However, the United States faces a middle-skill gap: middle-skill jobs account for 53 percent of the labor market, but only 43 percent of workers have access to training at the middle-skill level. Further, many jobs that require middle-skill credentials are well-paying jobs.” - The Roadmap for Racial Equity: An imperative for workforce development advocates National Skills Coalition, September 2019.
Comparison of male to female percentages in white population are evenly distributed. In the black population, the percentage of females with a high school degree or higher is slightly higher by 3.5%; and a similar pattern of 2.2% more black females in Peoria MSA have a bachelor’s degree or higher. In the Hispanic/Latino population, females lead males by 11% for those with a high school diploma or higher, but at the bachelor’s degree or higher level, males and females are comparable around 20%.

The poverty rate for women in the Peoria MSA is close to 4% higher than the male population when comparing all levels of educational attainment from less than a high school graduate through some
college or associate degree level. At the bachelor’s degree level, the poverty rate between male and female population begins to level with females in poverty only 1.1% higher than males.

5-6: High School Student Enrollment in Career and Technical Education, Peoria Region, 2018-2019
Percentages of High School Students Enrolled in CTE by County

For the 2018-2019 school year, the Illinois State Board of Education started tracking the number of students enrolled in Career and Technical Education (CTE) courses. According to ISBE and the Illinois Community College Board, CTE offers education and advanced training that supports high-wage, high-skill, and in-demand occupations. In Illinois, middle and high school students who take specialized CTE courses (core academic subjects, work-based learning, mentorships, and hands-on projects) are more likely to graduate from high school and roughly two-thirds of these students enroll in postsecondary education after graduation.

CTE programs also exist at Illinois community colleges serving more than 130,000 students statewide. These programs offer flexible scheduling, work-based learning, and stackable credentials that provide a pathway from education to employment not only for recent high school graduates, but also for returning adults, veterans, and workers wanting to update their skills. In 2018, more than 60% of all Illinois community college graduates earned a CTE degree or certificate. (Illinois Community College Board/Illinois State Board of Education)
The percentage of high school graduates from the Peoria Region enrolling in Illinois community college is higher than the state average. Excluding the slight decrease in Peoria County between 2013 and 2017, enrollment in Illinois community colleges by high school graduates increased in 2017.

Community colleges can provide remedial education, technical-skills, hands-on training, and job certifications that can stand on their own or lead students to obtaining an associate’s degree or transferring to a four-year college. This positions community colleges with the opportunity to bridge the gap between the employment needs of local businesses and industry and developing a strong workforce.

“Community colleges, sandwiched in the middle of the pathway, reach down to secondary education and up to baccalaureate programs to link students to viable careers for the workforce, all while concurrently reaching out to business and industry.” - How Community Colleges Support the Local Workforce, Rhonda Tracy, Former Chancellor, Kentucky Community and Technical College System, May 2018, evolllution.com/revenue-streams/workforce_development/how-community-colleges-support-the-local-workforce
Remedial coursework is designed to help students achieve a level of college and career readiness that will enable them to succeed in core academic subjects such as reading, math, and science. Community colleges require students to take remedial courses if they are judged to need additional preparation in order to earn credit from college-level studies. Students enrolled in remedial education at the community college level are more likely to not complete degree or certification programs. In addition, these courses incur tuition costs, but do not earn college credit.

Statewide, more than 44% of high school graduates entering community colleges in 2017 were placed in developmental education in at least one subject in the areas of reading, mathematics, or communication skills (writing and speaking).

Comparing 2013 and 2017, the percentage of high school graduates from the Peoria Region who enrolled in Illinois community colleges taking remedial courses increased in Marshall, Peoria, and Tazewell counties. In general, remedial coursework enrollment in the region is lower than the state average. High schools who had 2017 graduates attending Illinois community colleges with more than 33% of their graduates enrolled in remedial coursework include:

- Manual High School, 72.2%
- Peoria High School, 56.8%
- Quest Charter Academy School, 53.8%
- El Paso-Gridley High School, 51.6%
- Henry-Senachwine High School, 50.0%
- Farmington Central High School, 47.2%
- Delavan High School, 46.2%
- Limestone Community High School, 44.4%
- Fieldcrest High School, 43.3%
- Midland High School, 35.3%
- Dee-Mack High School, 34.4%
- Richwoods High School, 33.9%
- Illini Bluffs High School, 33.3%
- East Peoria High School, 33.0%
Breaking down 2017 graduate enrollment in remedial coursework at the community college level for the Peoria region:

- 12% or less of high school graduates needed to improve reading skills
- Up to 55% of high school needed to improve math skills
- Up to 30% of high school graduates needed to improve speech and writing skills

A major barrier to success in postsecondary education is remedial math. Mathematical literacy is crucial to middle-skilled occupations that require education beyond high school but not more than a 4-year degree including jobs in healthcare, manufacturing, sales, and transportation as technology continues to change job requirements in these sectors.

“As for businesses, the U.S. workforce finds itself at a crucial inflection point. Middle-skill jobs, which require education beyond high school but not a four-year degree, make up the largest part of the labor market in the United States and in each of the 50 states. Yet too few workers can access the skills, training, and education for middle-skill jobs, resulting in a middle-skills gap.” - The Roadmap for Racial Equity: An imperative for workforce development advocates, National Skills Coalition, September 2019

Working with their local community colleges, some Illinois high schools are teaching college-level remedial courses to high school seniors and are seeing dramatic reductions in numbers of students needing remediation at the college level. The Illinois State Board of Education’s Postsecondary and Workforce Readiness Act evaluates students’ math proficiency during junior year in high school. Students who are not ready for postsecondary math education can choose from three types of transitional math courses for 12th grade and the content of each course corresponds to the student’s career pathway of interest.

**C. Employment and Income Needs Related to Workforce Readiness**

The primary goals of workforce readiness are to retain and attract employers to the community while increasing the percentage of the population earning a livable wage. A strong workforce, working for strong businesses, leads to a stronger community both economically and socially.
5-9: Employed (Civilian) Population, Peoria MSA, 2018, Number of people, US Born and Foreign Born, age 16 and older employed in Peoria MSA

In 2018, 62.3% of the 2018 Peoria MSA population 16 and older were in the labor force. United States born citizens account for 96% of the Peoria MSA workforce.

5-10: Household Income Sources, Peoria MSA, 2018, Percentage of Households with Earnings, Cash and Non-Cash Programs, and Retirement Income

The majority of households in the Peoria MSA earn wages, salaries, and/or self-employment income. The average amount of income earned from Social Security is $19,698, average income from Supplemental Social Security is $10,101, and the average income from cash assistance programs (such as TANF) is $2,724. These supplemental sources of income can be combined with earnings and retirement income.

Most cash (TANF) and nutrition assistance (SNAP) programs include work-related requirements (job search, job training, and/or employment) as a condition of program eligibility. These requirements are in-place as a means of “offsetting potential work disincentives” and to ensure “participants
demonstrate that they are deserving of assistance funded with scarce federal tax dollars”. Various studies on how effective work-related requirements show modest employment increases that decreased with time and did not increase stable employment, with most working TANF recipients having household incomes below 100 percent of the federal poverty level. - Work Requirements in Social Safety Net Programs: A Status Report of Work Requirements in TANF, SNAP, Housing Assistance, and Medicaid by Heather Hahn, Eleanor Pratt, Eva Allen, Genevieve Kenney, Diane K. Levy, Elaine Waxman, December 2017, Urban Institute.

5-11: ALICE™: Asset Limited Income Constrained Employed, 2017, Number and Percentage of Peoria Regional Households by Poverty and ALICE™ Level

ALICE™ is the acronym for “Asset Limited Income Constrained Employed” households that earn more than the federal poverty level but less than the basic cost of living for the county or region represented. Combined, ALICE™ and poverty-level households represent the total population struggling to afford basic needs—which is 33.5% of total households in the Peoria Region.
5-12: ALICE™: Asset Limited Income Constrained Employed Households by County, 2017
Breakdown of the Number and Percentage of Peoria Regional Households by Poverty and ALICE™ Level

<table>
<thead>
<tr>
<th>County</th>
<th>Total Number of Households</th>
<th>Number of Households Living in Poverty</th>
<th>Percentage of Households Living in Poverty</th>
<th>Number of ALICE™ Households</th>
<th>Percentage of ALICE™ Households</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marshall</td>
<td>4,900</td>
<td>525</td>
<td>11%</td>
<td>1,063</td>
<td>22%</td>
</tr>
<tr>
<td>Peoria</td>
<td>71,371</td>
<td>10,612</td>
<td>15%</td>
<td>15,950</td>
<td>22%</td>
</tr>
<tr>
<td>Putnam</td>
<td>2,438</td>
<td>181</td>
<td>7%</td>
<td>462</td>
<td>19%</td>
</tr>
<tr>
<td>Stark</td>
<td>2,330</td>
<td>298</td>
<td>13%</td>
<td>570</td>
<td>24%</td>
</tr>
<tr>
<td>Tazewell</td>
<td>54,253</td>
<td>4,946</td>
<td>9%</td>
<td>11,588</td>
<td>21%</td>
</tr>
<tr>
<td>Woodford</td>
<td>14,547</td>
<td>1,045</td>
<td>7%</td>
<td>2,946</td>
<td>20%</td>
</tr>
</tbody>
</table>


In Peoria County, the percentage of households living in poverty and the ALICE™ level represent 37.2% of the total households. A breakdown of these household populations by zip code shows the Peoria County zip codes of 61602, 61603, 61604, 61605, 61616 and 61539 are the most heavily impacted by employed individuals and families struggling to make ends meet. Other counties by zip codes with households heavily impacted include Tazewell County (61610, 61564, and 61759), Woodford County (61545), and Stark County (61449 and 61491). See list of ALICE™ percentages by zip code in the Appendix.

ALICE™: Asset Limited Income Constrained Employed Hourly Wages Needed to Meet Basic Needs, 2017
Minimal Household Hourly Wages Needed to Cover Basic Needs by County

<table>
<thead>
<tr>
<th>County</th>
<th>Single Adult, No Children</th>
<th>Married Couple, No Children</th>
<th>1 Adult, 1 School-Age Child</th>
<th>1 Adult, 1 Infant</th>
<th>2 Adults, 2 School-Age Children</th>
<th>2 Adults, 1 Infant, 1 Preschooler</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marshall</td>
<td>$9.76</td>
<td>$13.60</td>
<td>$13.84</td>
<td>$16.73</td>
<td>$23.32</td>
<td>$29.49</td>
</tr>
<tr>
<td>Peoria</td>
<td>$9.76</td>
<td>$13.61</td>
<td>$13.84</td>
<td>$17.26</td>
<td>$23.32</td>
<td>$30.08</td>
</tr>
<tr>
<td>Stark</td>
<td>$9.76</td>
<td>$13.60</td>
<td>$13.84</td>
<td>$16.94</td>
<td>$23.32</td>
<td>$29.69</td>
</tr>
<tr>
<td>Tazewell</td>
<td>$9.76</td>
<td>$13.61</td>
<td>$13.84</td>
<td>$17.62</td>
<td>$23.32</td>
<td>$30.25</td>
</tr>
<tr>
<td>Woodford</td>
<td>$9.76</td>
<td>$13.66</td>
<td>$14.36</td>
<td>$18.65</td>
<td>$24.32</td>
<td>$32.78</td>
</tr>
</tbody>
</table>

Compiled by United for ALICE™ on behalf of United Way of Illinois | Sources: The budgets reflect different costs based on the age of children in the household; full-day care for infants and preschoolers (4-year-old) and after school care for school-age children. To create budgets for additional family types: For an additional infant, increase the total budget by 14 percent; for an additional 4-year-old, by 11 percent; and for a school-age child, by 5 percent. Sources: American Community Survey, 2017; BLS, 2017—Consumer Expenditure Surveys; Consumer Reports, 2017—Best Low-Cost Cell-Phone; HUD, 2017—Fair Market Rents; IRS, 2017—About Form 1040; Illinois Department of Human Services, 2018; Tax Foundation, 2017; Telelogical Systems, 2016; USDA, 2017—Official USDA Food Plans; U.S. Department of Health and Human Services, 2017—Medical Expenditure Panel Survey.
ALICE™ data includes the bare-minimum costs to live and work in the modern economy by calculating the costs of basic necessities (housing, childcare, food, transportation, health care, and a basic smartphone plan) in Illinois, adjusted for different counties by household type. The minimal survival budget does not include setting aside savings or living in a home with household internet. Based on a 40-hour work week, the minimal annual gross income to cover basic needs for a single adult in Peoria Region is $19,895 compared to $61,651 for a family of two with an infant and toddler at home.

“Access to stable employment with adequate pay is critical for families’ stability and livelihood. Children who grow up in poverty tend to do worse in school, have poorer health outcomes, and do worse in the labor market as adults than children who do not. The absence of work is associated with high poverty rates for households, although nearly 20 percent of households in poverty in 2015 were working (Bureau of Labor Statistics 2017). These data demonstrate the importance of helping parents access good jobs that pay family-sustaining wages. Such jobs increasingly require education beyond high school, suggesting the need to help people access not only jobs but education and training as well. The public workforce system helps job seekers access training and jobs and can contribute to the economic stability of children, yet we know little about how the system meets families’ needs.” - *Family-Centered Approaches to Workforce Program Services: Findings from a Survey of Workforce Development Boards* by Shayne Spaulding and Semhar Gebrekrastos, March 2018

### 5-13: Earnings Breakdown, Peoria MSA, 2018, Population with Earnings, 16-years and Older, Inflation-Adjusted for Year-Round Workers

<table>
<thead>
<tr>
<th>Total Earnings</th>
<th>% of Total Population</th>
<th>% of US-Born Population</th>
<th>% of Foreign-Born Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss or up to $9,999</td>
<td>1.5%</td>
<td>1.5%</td>
<td>1.8%</td>
</tr>
<tr>
<td>$10k-$14,999</td>
<td>2.6%</td>
<td>2.7%</td>
<td>1.9%</td>
</tr>
<tr>
<td>$15k-$24,999</td>
<td>11.8%</td>
<td>11.6%</td>
<td>14.5%</td>
</tr>
<tr>
<td>$25k-$34,999</td>
<td>15.0%</td>
<td>15.2%</td>
<td>11.9%</td>
</tr>
<tr>
<td>$35k-$49,999</td>
<td>21.2%</td>
<td>21.8%</td>
<td>8.9%</td>
</tr>
<tr>
<td>$50k-$74,999</td>
<td>23.5%</td>
<td>23.7%</td>
<td>19.7%</td>
</tr>
<tr>
<td>$75k-plus</td>
<td>24.4%</td>
<td>23.5%</td>
<td>41.2%</td>
</tr>
</tbody>
</table>

American Community Survey, US Census Bureau (data.census.gov), 2018, 5-Year Estimates, data.census.gov

Approximately 31% of the working Peoria MSA population earn less than $35,000 annually. Compared to US-born citizens in the Peoria MSA, a higher rate of foreign-born residents (both citizens and non-citizens) in the Peoria MSA earn $75,000 or more primarily due to increased employment rates in higher paying industries such as manufacturing, professional/scientific occupations, and education and healthcare occupations. Note that these data are slightly different than data presented in Figure 3-18 as that data sources is based on individuals versus households.
5-14: Private-Sector Employment Average Annual Wages, 2017, Average Annual Wages by Private-Sector Employer Size per County

<table>
<thead>
<tr>
<th>County</th>
<th>Firms with 0-19 Employees</th>
<th>Firms with 20-49 Employees</th>
<th>Firms with 50-249 Employees</th>
<th>Firms with 250-499 Employees</th>
<th>Firms with 500+ Employees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marshall</td>
<td>$28,812</td>
<td>$31,848</td>
<td>$35,712</td>
<td>$53,796</td>
<td>$45,816</td>
</tr>
<tr>
<td>Peoria</td>
<td>$35,364</td>
<td>$38,304</td>
<td>$41,376</td>
<td>$40,116</td>
<td>$58,752</td>
</tr>
<tr>
<td>Putnam</td>
<td>$33,876</td>
<td>$69,888</td>
<td>$37,548</td>
<td>$47,760</td>
<td>$50,880</td>
</tr>
<tr>
<td>Stark</td>
<td>$34,164</td>
<td>$42,552</td>
<td>$45,048</td>
<td>NA</td>
<td>$44,376</td>
</tr>
<tr>
<td>Tazewell</td>
<td>$30,492</td>
<td>$36,864</td>
<td>$39,804</td>
<td>$41,244</td>
<td>$50,868</td>
</tr>
<tr>
<td>Woodford</td>
<td>$30,168</td>
<td>$33,228</td>
<td>$45,684</td>
<td>$32,688</td>
<td>$43,272</td>
</tr>
</tbody>
</table>


While most employers pay higher wages based on their community’s cost of living, wages often do not cover the cost of basic needs. Average wages can also vary by employer size with larger firms offering higher wages and more job stability. However, small businesses that pay less and offer less stability often account for more jobs overall, especially in rural areas. Medium-sized employers pay more but typically employ the fewest total workers.

5-15: Employment Numbers by Industry, Peoria MSA, March 2020, Percent Change in Nonfarm Employment Compared to March 2019

<table>
<thead>
<tr>
<th>Peoria Area Nonfarm Employment</th>
<th>March 2020 Number Employed</th>
<th>Percentage Change from March 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mining, logging, and construction</td>
<td>6,800</td>
<td>-2.9%</td>
</tr>
<tr>
<td>Manufacturing</td>
<td>22,100</td>
<td>-6.0%</td>
</tr>
<tr>
<td>Trade, transportation, and utilities</td>
<td>30,700</td>
<td>-0.3%</td>
</tr>
<tr>
<td>Information</td>
<td>1,800</td>
<td>-5.3%</td>
</tr>
<tr>
<td>Financial Activities</td>
<td>6,900</td>
<td>0.0%</td>
</tr>
<tr>
<td>Professional and business services</td>
<td>21,300</td>
<td>-5.3%</td>
</tr>
<tr>
<td>Education and health services</td>
<td>31,400</td>
<td>1.3%</td>
</tr>
<tr>
<td>Leisure and hospitality</td>
<td>15,000</td>
<td>-9.3%</td>
</tr>
<tr>
<td>Other services</td>
<td>7,600</td>
<td>-1.3%</td>
</tr>
<tr>
<td>Government</td>
<td>20,800</td>
<td>0.0%</td>
</tr>
<tr>
<td>Total nonfarm employment</td>
<td>165,000</td>
<td>-2.5%</td>
</tr>
</tbody>
</table>


Comparing March 2019 to March 2020, employment in leisure and hospitality dropped the largest percentage by 9.3%, followed by manufacturing at 6.0%, followed by information and professional/business services at 5.3%. As the economy recovers from employment loss from COVID-19 response, future workforce development practices will need to be focused on removing barriers to safety net assistance (health care, food, housing, and cash), providing re-training for displaced workers, assisting small and mid-sized businesses to adapt to new technologies, addressing trained employee shortages in industries that respond to crises (health care, logistics, manufacturing, etc.), and supporting certification and apprenticeship programs that could benefit jobs to rebuild the nation’s infrastructure that will create jobs coming out of the pandemic. - nationalskillscoalition.org/covid19
“The coronavirus pandemic of 2020 has forced a large portion of the population to work remotely, with layoffs on the horizon for some occupations and industries. Women have a higher risk of suffering greater penalties in earnings as result. Women make up a larger percentage of occupations in community & social services, education, library & training, office & administrative support, and personal care & services, which are more likely to be suspended, laid off, or forced to work reduced hours. Women are also more likely to have to take time off work, or even resign their positions, in order to care for children who are no longer in school as well as other family members.” - *The State of the Gender Pay Gap 2020* by PayScale

5-16: Selected Average Hourly Wages, Peoria MSA, May 2019, Hourly Wages for Selected Occupations in Peoria MSA Compared to United States Averages

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Peoria Area Average Wage</th>
<th>United States Average Wage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical and health services managers</td>
<td>$61.02</td>
<td>$55.37</td>
</tr>
<tr>
<td>Registered nurses</td>
<td>$32.43</td>
<td>$37.24</td>
</tr>
<tr>
<td>Welders, cutters, solderers and brazers</td>
<td>$22.30</td>
<td>$21.73</td>
</tr>
<tr>
<td>Industrial truck and tractor operators</td>
<td>$17.98</td>
<td>$18.24</td>
</tr>
<tr>
<td>Office clerks, general</td>
<td>$17.15</td>
<td>$17.48</td>
</tr>
<tr>
<td>Waiters and waitresses</td>
<td>$10.41</td>
<td>$12.88</td>
</tr>
<tr>
<td>All occupations</td>
<td>$25.38</td>
<td>$25.72</td>
</tr>
</tbody>
</table>


The May 2019 US Bureau of Labor Statistics *Peoria Area Economic Summary* highlighted the average wages for selected occupations most often requiring a certification beyond a high school diploma or equivalent.

5-17: Peoria MSA: Projections to 2029 for High-Demand Occupations, Occupations Requiring a Credential Certificate with Median Hourly Earnings Above $15

Excludes occupations requiring an associate degree or higher
Excludes occupations where total number of jobs in 2019 was less than 10
Median hourly earnings are adjusted to Peoria MSA cost-of-living index

1) Heavy and Tractor-Trailer Truck Drivers  
2) Automotive Service Technicians and Mechanics  
3) Licensed Practical and Licensed Vocational Nurses  
4) Heating, AC and Refrigeration Mechanics and Installers  
5) Dental Assistants  
6) Medical Records and Health Information Technicians  
7) Phlebotomists  
8) Telecomm Equipment Installers and Repairers (  
9) Tool and Die Makers  
10) Wind Turbine Service Technicians  
11) Electrical Repairers, Commercial and Individual Equipment  
12) Aircraft Mechanics and Service Technicians  
13) Psychiatric Technicians  
14) Surgical Technologists  
15) Sales Engineers  
16) Health Technologists and Technicians, All Other  
17) Medical Transcriptionists  
18) Audio and Video Equipment Technicians  
19) Ophthalmic Medical Technicians  
20) Captains Mates and Pilots of Water Vessels  
21) First-Line Supervisors and Fire Fighting and Prevention Workers  
22) CNC Machine Tool Programmers, Metal and Plastic  
23) Health and Safety Engineers, Except Mining  
24) Insurance Appraisers, Auto Damage  
25) Motorcycle Mechanics  
26) Electrical Repairers, Powerhouse, Substation, Relay  
27) Ship Engineers  
28) Electrical Installers and Repairers, Transportation Equipment

Source: EMSI Analyst, provided by Illinois Central College/Regional Workforce Development Alliance
Illinois Central College, working with the Regional Workforce Development Alliance, utilized EMSI Analyst data to project the highest demand occupations for 2029 that only require a credential certification and represented median hourly earnings above $15/hour.

**D. Regional Workforce Development Alliance and The Big Table**

**Collaborating to Address Workforce Development in Central Illinois**
Peoria area employers cite the ability to hire qualified employees as one of their biggest challenges. The CEO Council, working with the Greater Peoria Economic Council, Illinois Central College and multiple business, government, nonprofit organizations formed the Regional Workforce Development Alliance.

**Working Goal:** Create the regional workforce required to stabilize and grow our economy by systemically connecting employers, educators, community-based organizations with high school graduates, the under-credentialed and multi barriered adults to ensure 60% of the Peoria area population earns the required certifications to obtain gainful employment.

- **40%** Current percentage of Adults in Peoria area who have a credential beyond a high school diploma
- **60%** Percentage of Adults in Peoria area who need to have a credential beyond a high school diploma to earn family sustaining wages and drive the regional economy*

  "- Regional Workforce Development Alliance, September 2019"

**Regional Workforce Development Alliance Strategies**
The alliance focuses on three main strategic areas: supporting the emerging workforce, removing multiple-barriers, and increasing credentials of adult workers to address workforce gaps.

**Emerging Workforce:** Support K-12 education, addresses middle school and high school career exploration, expands high school internships, increases early college credit programs, and encourages earning postsecondary education (including career and technical education certification programs, community college, trade schools, union and non-union apprenticeships, and regional 4-year colleges/university enrollment).

**Multiple-Barriers to Workforce Readiness:** Collaborate with community-based organizations to support systems that help individuals with multiple-barriers become work ready including basic needs such as housing, transportation, education, case management, mental health services, expungement, and entry-level and technical skills training. Work with employers and social services to develop and adopt supportive employment policies.

**Adult Up-Skilling:** Promote and ensure offered credentialing programs align with regional workforce gaps, increase access to “earn and learn” programs such as apprenticeships, support recruiting adults into full-time workforce gap careers, increase percentage of adults with Baccalaureate degrees in region, build model to assist businesses to train and retain to reduce
turnover and recruitment needs, and build regional, collaborative efforts to invest in high demand employment sectors.

*Adopted in 2008, Goal 3 of the Illinois Board of Higher Education’s “The Illinois Public Agenda for College and Career Success” is to increase the proportion of adults in Illinois with high-quality postsecondary degrees and credentials to 60% by the year 2025.

The 2019 Big Table – Greater Peoria

The Big Table was a daylong regional community building event that served as a platform for more than 700 community members to exchange ideas, discuss common challenges, and share ideas focused on four major areas: workforce development, diversity and inclusion, innovation and entrepreneurship, and quality of life and place.

As the local economy continues to shift from manufacturing to professional and service jobs, workforce development must adapt to new realities. Community-wide workforce development is necessary to sustain and grow the regional economy while meeting our community’s employment needs.

Participants in The Big Table event rated workforce development on a five-point scale where 1 = “strongly disagree” and 5 = “strongly agree.”

- Need to improve workforce development: 4.74 rating
- Opportunities exist to improve workforce development: 4.47 rating
- Demands on workforce development have changed in last ten years: 4.33 rating

The Big Table participants felt the key to our region’s workforce development efforts is to remove major barriers, such as financial issues and resources. Common views of participants included:

- Provide more paid internships, apprenticeships, job shadowing opportunities, career coaching, and mentorships to students who are close to graduating and ready to move into the workforce
- Assist and education parents on how to guide their children on education and career planning
- More career guidance, job readiness, basic skills and career-centered training offered in schools
- Companies should offer financial support for their employees to pursue additional education in order to progress in their careers
- Better advocate the quality of life in our community to encourage young graduates to stay
- Support nonprofit organization’s efforts to address multiple barriers preventing residents from earning a livable wage including funding education, providing life skills training such as budgeting, and reinforcing soft skills such as work ethic and communication skills
- Change perceptions to embrace multiple opportunities for post-secondary advancement—not just four-year college degrees
### Appendix with Additional Data

#### 5-18: ALICE™: Asset Limited Income Constrained Employed Households by Zip, 2017

Number and Percentage of Peoria Regional Households by Poverty and ALICE™ Level, Sorted High-to-Low

<table>
<thead>
<tr>
<th>County</th>
<th>Location</th>
<th>Zip Code</th>
<th>Number of Households</th>
<th>Percentage of Households Living in Poverty</th>
<th>Percentage of Households Living in ALICE™ Level</th>
<th>Percentage of Households Living in Poverty and ALICE™ Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peoria</td>
<td>Peoria</td>
<td>61605</td>
<td>5,786</td>
<td>43.3%</td>
<td>28.6%</td>
<td>71.9%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Peoria</td>
<td>61602</td>
<td>617</td>
<td>43.8%</td>
<td>27.0%</td>
<td>70.8%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Peoria</td>
<td>61603</td>
<td>6,395</td>
<td>25.9%</td>
<td>33.6%</td>
<td>59.5%</td>
</tr>
<tr>
<td>Stark</td>
<td>La Fayette</td>
<td>61449</td>
<td>189</td>
<td>12.7%</td>
<td>37.0%</td>
<td>49.7%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Peoria</td>
<td>61604</td>
<td>12,736</td>
<td>15.8%</td>
<td>30.7%</td>
<td>46.5%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Peoria Heights</td>
<td>61616</td>
<td>2,726</td>
<td>12.4%</td>
<td>31.4%</td>
<td>43.8%</td>
</tr>
<tr>
<td>Tazewell</td>
<td>Creve Coeur</td>
<td>61610</td>
<td>2,194</td>
<td>18.1%</td>
<td>24.0%</td>
<td>42.1%</td>
</tr>
<tr>
<td>Tazewell</td>
<td>South Pekin</td>
<td>61564</td>
<td>373</td>
<td>6.4%</td>
<td>33.0%</td>
<td>39.4%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Kingston Mines</td>
<td>61539</td>
<td>105</td>
<td>10.5%</td>
<td>27.6%</td>
<td>38.1%</td>
</tr>
<tr>
<td>Tazewell</td>
<td>Minier</td>
<td>61759</td>
<td>625</td>
<td>10.4%</td>
<td>27.7%</td>
<td>38.1%</td>
</tr>
<tr>
<td>Woodford</td>
<td>Lowpoint</td>
<td>61545</td>
<td>296</td>
<td>1.0%</td>
<td>36.5%</td>
<td>37.5%</td>
</tr>
<tr>
<td>Stark</td>
<td>Wyoming</td>
<td>61491</td>
<td>842</td>
<td>12.7%</td>
<td>24.3%</td>
<td>37.0%</td>
</tr>
<tr>
<td>Woodford</td>
<td>Minonk</td>
<td>61760</td>
<td>1,008</td>
<td>6.0%</td>
<td>30.5%</td>
<td>36.5%</td>
</tr>
<tr>
<td>Tazewell</td>
<td>East Peoria</td>
<td>61611</td>
<td>10,924</td>
<td>7.6%</td>
<td>28.7%</td>
<td>36.3%</td>
</tr>
<tr>
<td>Tazewell</td>
<td>Pekin</td>
<td>61554</td>
<td>17,263</td>
<td>11.2%</td>
<td>24.6%</td>
<td>35.8%</td>
</tr>
<tr>
<td>Marshall</td>
<td>Tolula</td>
<td>61369</td>
<td>694</td>
<td>9.5%</td>
<td>26.1%</td>
<td>35.6%</td>
</tr>
<tr>
<td>Woodford</td>
<td>Roanoke</td>
<td>61561</td>
<td>1,037</td>
<td>1.5%</td>
<td>34.2%</td>
<td>35.5%</td>
</tr>
<tr>
<td>Marshall</td>
<td>Henry</td>
<td>61537</td>
<td>1,131</td>
<td>13.3%</td>
<td>22.1%</td>
<td>35.4%</td>
</tr>
<tr>
<td>Stark</td>
<td>Toulon</td>
<td>61483</td>
<td>883</td>
<td>9.2%</td>
<td>26.2%</td>
<td>35.4%</td>
</tr>
<tr>
<td>Marshall</td>
<td>Washburn</td>
<td>61570</td>
<td>628</td>
<td>11.1%</td>
<td>24.0%</td>
<td>35.1%</td>
</tr>
<tr>
<td>Woodford</td>
<td>El Paso</td>
<td>61738</td>
<td>1,554</td>
<td>11.1%</td>
<td>22.5%</td>
<td>33.6%</td>
</tr>
<tr>
<td>Stark</td>
<td>Bradford</td>
<td>61421</td>
<td>480</td>
<td>15.6%</td>
<td>16.7%</td>
<td>32.3%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Elmwood</td>
<td>61529</td>
<td>1,051</td>
<td>5.2%</td>
<td>26.5%</td>
<td>31.7%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Peoria</td>
<td>61614</td>
<td>12,714</td>
<td>9.4%</td>
<td>22.3%</td>
<td>31.7%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Chillicothe</td>
<td>61523</td>
<td>4,569</td>
<td>10.2%</td>
<td>21.2%</td>
<td>34.5%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Peoria</td>
<td>61606</td>
<td>2,153</td>
<td>12.4%</td>
<td>19.0%</td>
<td>34.4%</td>
</tr>
<tr>
<td>Marshall</td>
<td>Lacon</td>
<td>61540</td>
<td>1,118</td>
<td>11.8%</td>
<td>19.4%</td>
<td>31.2%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Peoria</td>
<td>61615</td>
<td>10,014</td>
<td>10.4%</td>
<td>20.5%</td>
<td>30.9%</td>
</tr>
<tr>
<td>Putnam</td>
<td>Mark</td>
<td>61340</td>
<td>131</td>
<td>6.1%</td>
<td>24.4%</td>
<td>30.5%</td>
</tr>
<tr>
<td>Putnam</td>
<td>Standard</td>
<td>61363</td>
<td>115</td>
<td>15.7%</td>
<td>14.8%</td>
<td>30.5%</td>
</tr>
<tr>
<td>Marshall</td>
<td>Sparland</td>
<td>61565</td>
<td>640</td>
<td>9.4%</td>
<td>20.2%</td>
<td>29.6%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Hanna City</td>
<td>61536</td>
<td>1,166</td>
<td>5.2%</td>
<td>23.5%</td>
<td>28.7%</td>
</tr>
<tr>
<td>Woodford</td>
<td>Eureka</td>
<td>61530</td>
<td>2,542</td>
<td>10.0%</td>
<td>18.5%</td>
<td>28.5%</td>
</tr>
<tr>
<td>Marshall</td>
<td>Varna</td>
<td>61375</td>
<td>522</td>
<td>4.2%</td>
<td>24.3%</td>
<td>28.5%</td>
</tr>
<tr>
<td>Peoria</td>
<td>Peoria</td>
<td>61607</td>
<td>4,504</td>
<td>5.2%</td>
<td>22.6%</td>
<td>27.8%</td>
</tr>
<tr>
<td>Putnam</td>
<td>Granville</td>
<td>61326</td>
<td>988</td>
<td>7.5%</td>
<td>20.1%</td>
<td>27.6%</td>
</tr>
<tr>
<td>Tazewell</td>
<td>Delavan</td>
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<td>19.2%</td>
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</tr>
<tr>
<td>Putnam</td>
<td>Putnam</td>
<td>61560</td>
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</tr>
<tr>
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<td>Magnoia</td>
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</tr>
<tr>
<td>Woodford</td>
<td>Benson</td>
<td>61516</td>
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<tr>
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<td>Secor</td>
<td>61771</td>
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</tr>
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</tr>
<tr>
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<td>Princeville</td>
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<tr>
<td>Tazewell</td>
<td>Groveland</td>
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</tr>
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<td>Trivoli</td>
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<td>Edelstein</td>
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<tr>
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<td>Mc Nabb</td>
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<td>Morton</td>
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<tr>
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<td>Hennepin</td>
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</tr>
<tr>
<td>County</td>
<td>Location</td>
<td>Zip Code</td>
<td>Number of Households</td>
<td>Percentage of Households Living in Poverty</td>
<td>Percentage of Households Living in ALICE™ Level</td>
<td>Percentage of Households Living in Poverty and ALICE™ Levels</td>
</tr>
<tr>
<td>----------</td>
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<td>Tazewell</td>
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<td>Metamora</td>
<td>61548</td>
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<tr>
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<td>Goodfield</td>
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<td>Edwards</td>
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<tr>
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</tbody>
</table>