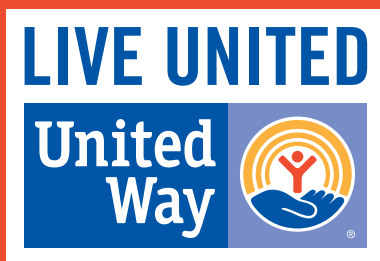


COMMUNITY SOLUTIONS  
 GROWTH HEALTH WELLNESS  
 FINANCIAL STABILITY FUTURE  
 CHANGE NEEDS HOPE CORPORATE OPPORTUNITIES  
 EDUCATION  
 JOB TRAINING SUPPORT  
 RESOURCES  
 ENGAGEMENT  
 SUCCESS DREAMS  
 ENVIRONMENT  
 VOLUNTEERS  
 WOMEN'S HEALTH  
 CHILDREN  
 POWER  
 BRIGHT  
 FAMILIES  
 HOUSING  
 HOMES  
 NEIGHBORHOODS  
 LITERACY  
 FOOD

..... ○ United Way of East Central Iowa



# COMMUNITY CONDITION

2015 REPORT

# CREATING POSITIVE CHANGE



**CHANGE** \cheynj\ verb (used with object) changed, changing.  
To transform or convert.

What kind of community do you want to live in? What is your vision for the future of eastern Iowa? To answer these questions we need to know and understand the community conditions that exist today.

United Way of East Central Iowa's Community Condition Report is a compilation of research about our community. It is a point in time, a status report about social conditions, issues, trends and people. It is also an ongoing process of collecting and analyzing critical data, programs and outcomes.

Creating positive change in a community takes all of us working together. Solutions arise from a thorough understanding of why conditions exist and a belief that we can make our community better. This information and process helps us make decisions about how change can happen and what are possible solutions. But it will not occur without your involvement, engagement, and investments.

Currently we have three strategic goals to reach by 2020 in the areas of education, financial stability and health.



## EDUCATION GOAL

To increase the number of children, in our five county area, who are developmentally and academically on track by 4th grade by 30%.



## FINANCIAL STABILITY GOAL

To increase the number of financially stable households by 15%.



## HEALTH GOAL

To improve social connectedness and mental health function of low-income adults by 10%.

Accomplishing these ambitious goals will require collaborative efforts and the combined work and expertise of many community partners.

Join United Way as we explore the challenges and opportunities in our community, be our partner in finding solutions to advance the common good and help us create a better place for the children and families of eastern Iowa.

Sincerely,

A handwritten signature in black ink that reads "Lois Buntz".

Lois Buntz  
President/CEO, United Way of East Central Iowa





# THE COMMUNITY CONDITION PROJECT

“REAL, LASTING COMMUNITY CHANGE IS BUILT AROUND KNOWING WHERE YOU ARE, WHERE YOU WANT TO BE, AND WHETHER YOUR EFFORTS ARE MAKING A DIFFERENCE. INDICATORS ARE A NECESSARY INGREDIENT FOR SUSTAINABLE CHANGE.”

— BEN WARNER, JACKSONVILLE COMMUNITY COUNCIL, INC.

The Community Condition Project was first launched in 2009 in order to offer a “big picture” view of our community and its well-being. The goal of the project is to highlight the strengths and challenges in our neighborhoods and communities. Planners, policy makers and concerned citizens may use this data to help them make decisions and build on this regions commitment to quality of life for its residents. Community level data is gathered to reflect the quality of life in five counties as

often as it is available (Benton, Jones, Cedar, Linn, and Iowa). This data is then compared to national and state measures and trends over time to offer a sense of perspective.

The data is only one part of the story and by itself has little effect. The Community Condition Project is an invitation to take action and shape the future of our community for the good of all.

CONTINUED →



## How Are We Doing?

How do you measure the well-being of a community? According to the American Human Development Project it is measured in more than economic indicators. Well-being is based on “three basic building blocks — health, education and income.”

In addition, the project will highlight a portion of this region’s civic health. Civic health, measured by voter participation, volunteerism and other community engagement activities has been shown to be an important indicator of resilience. Eastern Iowa communities are rich with social capital and a commitment to community-led solutions. This has been demonstrated in a variety of ways starting over fifteen years ago with Foresight 20/20, continued in 2005 with the launch of 15 in 5, and revealing itself most recently in the heroic efforts to recover from the 2008 floods. Our civic health can be seen in our robust volunteerism and vibrant local nonprofit community.

The Community Condition Project will highlight key changes and trends:

## Since Our Last Report:

### SOME THINGS ARE WORSE:

- 4th grade reading proficiency rates for low-income students have remained largely unchanged.
- The number of children born to single mothers continues to increase.
- Homelessness has continued to increase, particularly for women.
- Mental health has become a greater challenge for eastern Iowans, particularly those who are low-income.

### SOME THINGS ARE IMPROVING:

- Teen pregnancy rates are down.
- Smoking is on the decline.
- Educational attainment is improving. There are more residents with greater than a high school diploma and Linn County’s rates are better than Iowa and the nation.
- The number of Iowans with health insurance has increased.
- Unemployment is on the decline, though low-income Iowans still struggle to earn enough to pay their bills.

For more detailed information on these trends visit [uweci.org/communitycondition](http://uweci.org/communitycondition).

## How Have Things Changed?

Many of the issues identified in past needs assessments and perception surveys remain in the top five. There are still challenges facing many of our children, and families still struggle to make ends meet. Changing the course of these issues requires that we understand and know how to act on the complex forces at work — some of those forces are:

- Where we live impacts how well we live — there has been a growth in diverse and vulnerable neighborhoods where residents have concerns about safety, housing and food insecurity.
- The early years predict our later years — our health, our ability to learn and to earn. The impact of Adverse Childhood Experiences (ACEs) are significant in our community.
- The well-being of women has a tremendous impact on our community and the future of our children.
- The human service environment is complex and difficult to navigate.

## WHAT DO PEOPLE NEED?

Past needs assessments and perception studies undertaken by United Way of East Central Iowa revealed the following:

### 1986 - TOP 5 MOST SERIOUS COMMUNITY PROBLEMS:

- Lack of employment opportunities/unemployment
- Child abuse
- Alcoholism and drug abuse
- Lack of affordable medical services
- Lack of affordable housing

In the late 1990’s, a quality of life assessment conducted for the Foresight 20/20 project revealed that residents ranked low crime rate, good schools and job opportunities and health/wellness services among the top areas of importance.

### 2001 – THE TOP 4 “TOP OF MIND” CONCERNS IN THE 6 COUNTY AREA INCLUDED:

- General crime and safety
- Children and child safety
- Schools/education
- Drugs and alcohol

In comparison when asked about concerns for their household the 2001 respondents identified:



HEALTHCARE/  
INSURANCE



ENOUGH MONEY/  
PAYING BILLS



WATER/  
AIR QUALITY

In the 2006 needs assessment conducted by Frank N. Magid Associates, Inc., focus group participants ranked these issues in the top 5:

- Early childhood development and care
- Access to healthcare
- Affordable housing
- Youth development
- Hunger

A key finding in this assessment was the observation that “despite providers’ willingness to collaborate, the existing system is fractured and lacks overall cohesion. Every focus group complained of clients’ difficulty in ‘navigating the system.’”

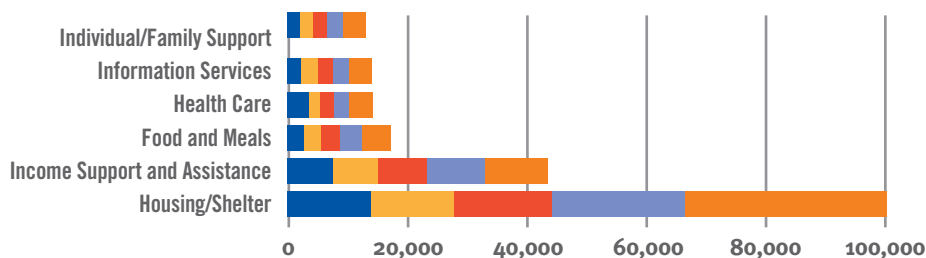
Participants also encouraged United Way to take a leadership role in convening partners, looking at the big picture and creating a data hub.

Since 2004, United Way of East Central Iowa has had the advantage of a “real-time” needs assessment tool. United Way 2-1-1 is a 24/7, 365 information and referral resource — by phone and online. We can assess our communities needs based on number of contacts, types of requests and unmet needs.

# WHAT DO PEOPLE NEED?

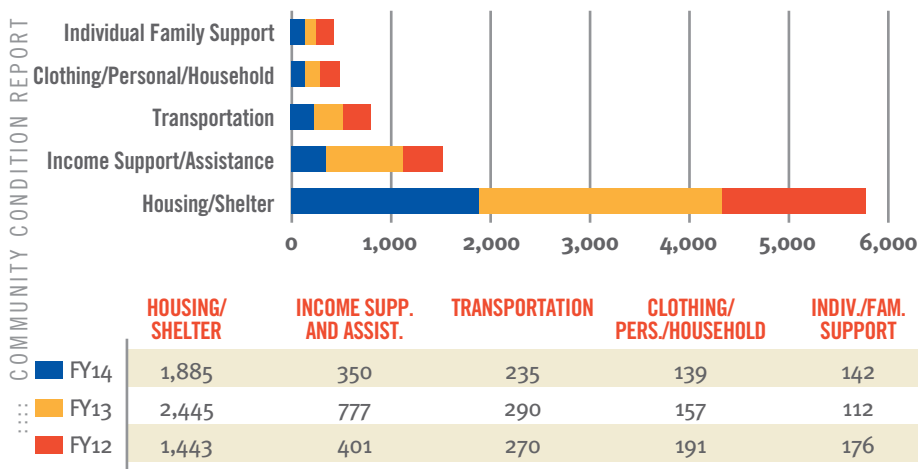
## United Way 2-1-1

United Way 2-1-1 is a free health and human service information and referral helpline. Between fiscal years 2010 and 2014, the top six needs represented 81% of what people called United Way 2-1-1 about. The chart below shows the top needs. Over the course of the last five fiscal years the topical areas have remained the same, however we have seen an increase in the number of healthcare calls in the past three years.



	HOUSING/ SHELTER	INCOME SUPP. AND ASSIST.	FOOD AND MEALS	HEALTH CARE	INFORMATION SERVICES	INDIV./FAM. SUPPORT
FY14	13,959	7,551	2,810	3,640	2,200	2,118
FY13	13,850	7,509	2,687	1,762	2,803	2,122
FY12	16,233	8,175	3,222	2,261	2,532	2,330
FY11	22,239	9,269	3,660	2,633	2,626	2,707
FY10	33,624	10,637	4,866	3,871	3,919	3,852

Information and Referral Specialists also document if they were able to provide referrals for those requested needs. In some instances they are not able to make a referral. During fiscal years 2012 to 2014, Information and Referral Specialists documented 10,207 unmet needs in the United Way 2-1-1 service delivery area. The needs most frequently identified as unmet can be found in the chart below. Three of the five areas listed were also some of the most requested services listed below.



	HOUSING/ SHELTER	INCOME SUPP. AND ASSIST.	TRANSPORTATION	CLOTHING/ PERS./HOUSEHOLD	INDIV./FAM. SUPPORT
FY14	1,885	350	235	139	142
FY13	2,445	777	290	157	112
FY12	1,443	401	270	191	176

## UNMET NEEDS

### HOUSING/SHELTER

Individuals who needed assistance in the area of housing/shelter most often were not able to receive referrals for rent assistance because the agencies that provide that assistance were out of funds.

### INCOME SUPPORT & ASSISTANCE

Those calling for income support/assistance most often were not able to receive referrals for agencies that provide tax organizations and services. This was primarily due to the fact that united way 2-1-1 received these calls either before the service was available or after the service had closed for the tax season.

### TRANSPORTATION

Individuals calling for transportation most frequently requested assistance for out of town transportation expense or local transportation expense. Information and referral specialists were not able to provide referrals because there are no resources available for this type of program.

### CLOTHING/PERSONAL/HOUSEHOLD

Those needing assistance with clothing/personal/household items most frequently needed furniture/appliances.

### INDIVIDUAL/FAMILY SUPPORT

Those who called for individual/family support most often requested holiday assistance. Again, we were unable to provide referrals because calls were received before or after the program was available.

Individuals can also find resources by searching the United Way 2-1-1 website at [FIRSTCALLFORHELPIOWA.ORG](http://FIRSTCALLFORHELPIOWA.ORG)

In FY 2014, 19,930 searches were conducted on the website.

# WHAT IS COMMUNITY?

## COMMUNITY IS DEFINED IN MANY DIFFERENT WAYS.

Look in the dictionary for “community” and you’ll find two definitions: (1) a group of people living in the same locality and under the same government or (2) a group of people having a common interest. As our community grows more diverse, and as technology increases our ability to reach across the world, our understanding of connectedness and the meaning of community changes — both for those who are members, and those who seek to serve and enhance a community’s experience.

Community may be measured in geographies, shared interests, a sense of membership, shared responsibility, shared world view or any combination of the above. For our purposes in this report, community reflects five counties in Eastern Iowa: Benton, Cedar, Iowa, Jones, and Linn. And within those geographies we will take a more intimate look at several neighborhoods in Cedar Rapids. We have chosen to follow a path of disparities — asking ourselves first, “what does well-being look like?” and then “who is least likely to have it in our community?”

We ask these questions because we are certain that our whole community benefits when all have access to the education, health and income that creates a successful life.

## SO, HOW ARE WE DOING?

2014 Data	COUNTIES					
	Linn	Benton	Cedar	Iowa	Jones	State
Total Population	217,751	25,680	18,411	16,375	20,375	3,107,126
Under 5	6.4%	5.7%	5.5%	5.8%	5.1%	6.3%
Under 18	23.9%	24%	23.2%	23.5%	21.5%	23.4%
65+	14%	16.6%	18%	17.9%	18.2%	15.6%
Black/African American	4.3%	0.5%	0.5%	0.6%	2.4%	3.3%
Two or More Races	2.3%	90%	1.1%	0.8%	0.6%	1.6%
Hispanic/Latino	2.9%	1.3%	1.9%	2.3%	1.6%	5.5%
White/Non-Hispanic	88.5%	96%	96%	96%	94.8%	87.6%
High School or Higher 25+	93.8%	91.9%	92.1%	93.2%	91.4%	91%
Renters	27%	19.6%	21.2%	20.3%	19.8%	27.8%
Median Household Income	\$57,260	\$56,669	\$58,088	\$58,008	\$55,041	\$51,843
Below Poverty	9.7%	8.4%	8%	10.9%	8.3%	12.4%

2014 Data	CITIES				
	Cedar Rapids	Marion	Hiawatha	Anamosa	Vinton
Total Population	128,429	36,147	7,145	5,545	5,181
Under 5	6.7%	7.5%	7.1%	5.4%	6.4%
Under 18	23.5%	26.5%	23.8%	19.6%	24.7%
65+	13.1%	13.1%	13.5%	17.2%	19.5%
Black/African American	5.6%	2%	5.1%	6.4%	30%
Two or More Races	2.9%	1.9%	2.5%	90%	1.2%
Hispanic/Latino	3.3%	2%	2.3%	2%	1%
White/Non-Hispanic	86%	92.6%	87.8%	89.6%	97.2%
High School or Higher 25+	93.1%	95.6%	92.7%	89.6%	93.3%
Renters	30.8%	25.2%	40.2%	29.9%	25.9%
Median Household Income	\$52,216	\$62,372	\$48,083	\$45,000	\$50,351
Below Poverty	11.8%	6.8%	12.5%	12.2%	13.7%

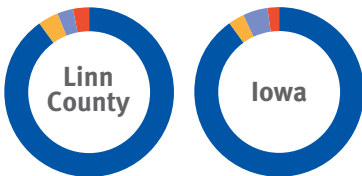




# CEDAR RAPIDS NEIGHBORHOOD COMPARISON

## POPULATION BY RACE AND ETHNICITY

Neighborhood	Total Pop.	Total Pop. Under 19	Median Income	White		Black		Hispanic		2 or more races	
Collins-Blairs	1,185	382 32.2%	\$33,100	805	68%	112	9%	161	14%	73	6%
Downtown	873	165 19.7%	\$25,469	607	70%	149	17%	59	7%	32	4%
Hawkeye	1,274	254 19.9%	\$32,016	1,088	85%	97	8%	57	4%	46	4%
Moundview	2,037	458 22.5%	\$30,541	1,684	83%	194	10%	86	4%	79	4%
Quaker	1,377	488 35.4%	\$29,510	1,176	85%	67	5%	61	4%	45	3%
River Bend	1,384	391 28.3%	\$27,353	1,206	87%	102	7%	31	2%	61	4%
Robins Road	1,351	325 24.1%	\$39,420	1,044	77%	159	12%	56	4%	63	5%
Wellington Heights	1,897	541 28.5%	\$28,766	1,210	64%	487	26%	174	9%	107	6%
Westdale	4,646	1,221 26.3%	\$24,098	3,579	77%	664	14%	314	7%	215	5%



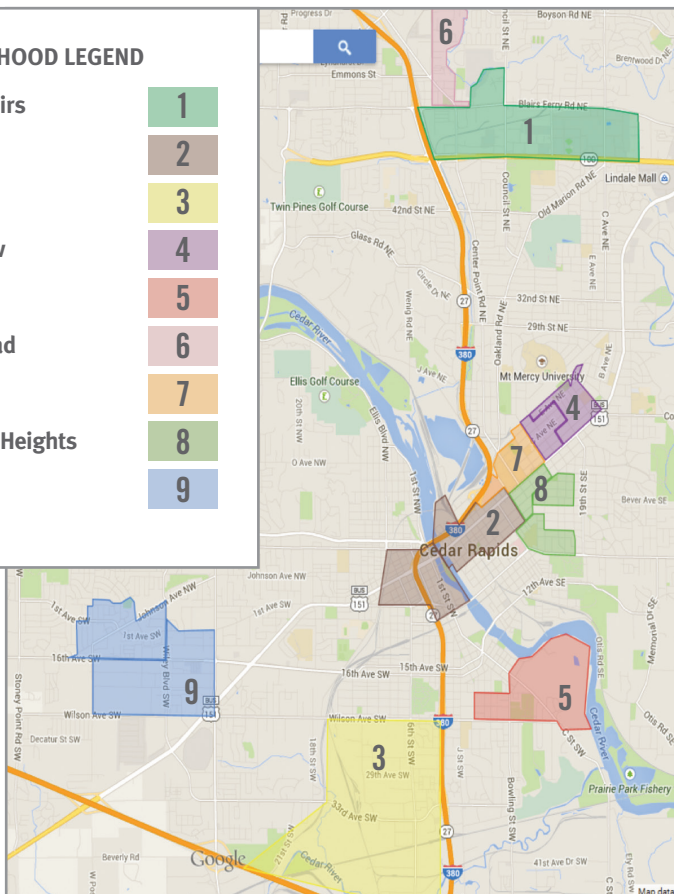
\*Race and ethnicity data may contain duplicates.

Source: USA.com. <http://www.usa.com> 2010 data; USA.com. <http://www.usa.com> 2012 data

**Linn County** \$56,790  
**Iowa** \$51,129  
**U.S.** \$53,046

### NEIGHBORHOOD LEGEND

Collins-Blairs	1
Downtown	2
Hawkeye	3
Moundview	4
River Bend	5
Robins Road	6
Quaker	7
Wellington Heights	8
Westdale	9



### HOUSING DATA: RENTERS VS. OWNERS

Westdale	2,404
Wellington Heights	920
Robins Road	758
River Bend	751
Quaker	199
Moundview	1,075
Hawkeye	598
Downtown	344
Collins-Blairs	618

Top Line - Total Housing Units (owners)  
Bottom Line - Renter Occupied Units (renters)

Source: USA.com. <http://www.usa.com> 2010 data



# EDUCATION

## THE CONDITION OF OUR YOUTH

**R**eading proficiency rates are a strong, single measurement to determine the state of our community's youth. If a child is not reading proficiently by the end of third grade, they are four times more likely to not graduate from high school on time. For children who are low-income, this rate jumps up to being thirteen times less likely to graduate on time compared to proficient, affluent peers.<sup>1</sup> Locally we know that many low-income students never catch up to their peers in reading as the gap between low-income students and their peers remains stagnant.<sup>2</sup> In the districts in United Way's five-county area, only 61% of low-income students in 4th grade are proficient in reading compared to 85% of the rest of the students, equaling a 24% gap between the two groups. This gap continues throughout school with a 21% gap between reading skills of low-income 11th graders and their higher-income peers. This gap leaves more than 1 in 4 low-income students lacking proficiency in reading by the time they are preparing to exit school and begin their futures.

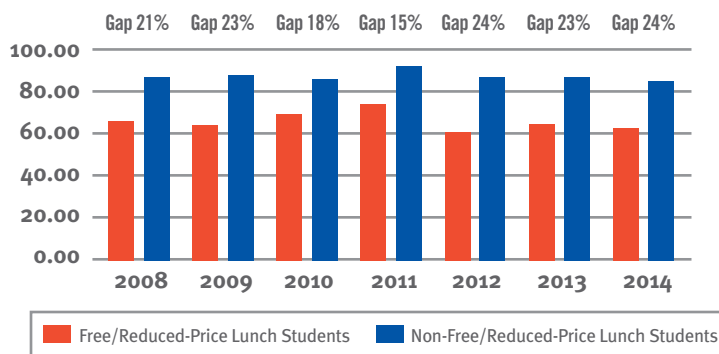
Research has also shown that third grade reading proficiency rates are closely related to many other vital education milestones in a child's life. Higher eighth grade reading, lower absenteeism in ninth grade, lower course failures in ninth grade, greater GPAs in ninth grade, greater high school graduation, and a greater probability of attending college are all outcomes of reading proficiency at or above grade level by 4th grade.<sup>3</sup>

While the proficiency gap between income levels has remained stagnant, the number of children in poverty in our community

continues to slowly climb in recent years as shown by increasing Free and Reduced Priced Lunch (FRPL) numbers. FRPL children are from families who earn 185% of the Federal Poverty Level or less and receive reduced priced meals during the school day.<sup>4</sup> Growing at about one percentage point per year, over 1 in 3 students are projected to be FRPL students by the end of the 2014-2015 school year in United Way's service area. Of the 16,054 children who were on FRPL in 2013, 7,724 or nearly half were from the Cedar Rapids Community School District, with more and more of those students struggling to read.

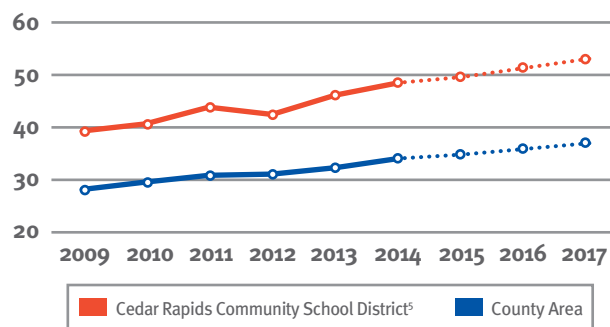
Recent research states that, locally, only 50 percent of FRPL kindergarteners are proficient in early literacy skills compared to 72 percent of their higher-income peers.<sup>5</sup> This data indicates that economic inequality is strongly connected to educational issues even at a very young age. Research also shows that children from economically disadvantaged families can be up to two years behind in language development.<sup>6</sup> This may be because children of low-income families hear fewer of words than children of high-income families hear, which equates to a word gap of 30 million words by the time the two groups of children are four.<sup>7</sup> Such disparities without intervention then can follow children through school. As research has shown that 44 of 50 students who were poor readers at the end of first grade remained poor readers at the end of fourth grade.<sup>8</sup> Literacy interventions must be implemented to reduce the achievement gap and support low-income students in catching up to their peers before it is too late.

4TH GRADE PROFICIENCIES FOR 5 COUNTY AREA



Source: 2014 Iowa Department of Education

% STUDENTS FRPL IN UNITED WAY'S 5 COUNTY AREA AND CEDAR RAPIDS SCHOOL DISTRICT



Source: 2014 Iowa Department of Education

<sup>1</sup> The Annie E. Casey Foundation. (2012). Double Jeopardy: How Third Grade Reading Skills and Poverty Influence High School Graduation. Baltimore, MD: Hernandez, Donald.

<sup>2</sup> 2009-10. Iowa Department of Education

<sup>3</sup> Lesnick, J., Goege, R., Smithgall, C., & Gwynne, J. (2010). Reading on grade level in third grade: How is it related to high school performance and college enrollment. Chicago: Chapin Hall at the University of Chicago.

<sup>4</sup> For a single parent with one child, this translates to an annual income of \$28,694 or less.

<sup>5</sup> For a family of four, this translates to an annual income (for both parents) of \$43,568 or less.

<sup>6</sup> Iowa Department of Education. (2009) Basic Educational Data Survey, Address and

Enrollment Files.

<sup>7</sup> Zill, Nicholas & West, Jerry, for the U.S. Department of Education, National Center for Education Statistics. (2001). Entering Kindergarten: A Portrait of American Children When They Begin School: Findings from The Condition of Education 2000. Washington, DC: U.S. Government Printing Office.

<sup>8</sup> Hart, B., and Risley, T.R. (1995). Meaningful Differences in the Everyday Experience of Young American Children. Baltimore, MD: Paul H. Brookes Publishing Co.

<sup>9</sup> Juel, Journal of Educational Psychology 80, no. 4 (1988): 437-447.



# WHAT WE KNOW



## 1 IN 3 STUDENTS

is eligible for free or reduced lunch during the school year in Linn County

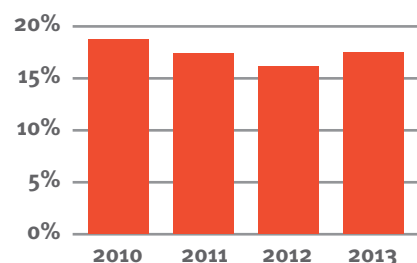
Source: Kids Count Data, 2010-15



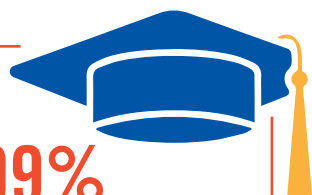
## 31.5%

of children in Linn County are raised by a single parent

## HIGH SCHOOL GRADUATION GAP BETWEEN LOW-INCOME STUDENTS AND ALL STUDENTS IN LINN COUNTY



Source: 2014 Iowa Department of Education



## 99%

of all students in Linn County report planning to graduate from high school

## ONLY 69%

of low-income students graduate

Source: Iowa Youth Survey, 2012; Iowa Dept. Edu., 2013

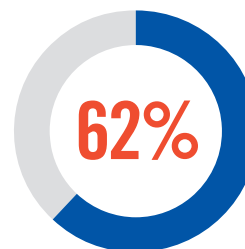
## ENGAGEMENT

A 2009 Gallup Study of 78,000 students in 160 schools found a 1% increase in engagement (involvement and enthusiasm for school), increased reading achievement by 6%, and math achievement by 8%.

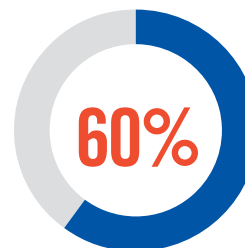
## HOPE

Hope has been found to be a better predictor of college success than high school GPA, SAT, and ACT scores. Hope has also been found to predict academic achievement above intelligence, personality, and previous class test scores.

Source: GALLUP Student Poll, USA Overall Data, 2012 Gallup, Inc; Day, L, Hanson, K, Maltby, J, Proctor, C, & Wood, A. (2010). Hope uniquely predicts objective academic achievement above intelligence, personality, and previous academic achievement, *Journal of research in personality*, 44, 550-553.



of youth in the Cedar Rapids metro area are **engaged in school**

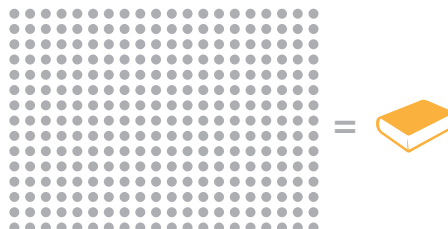


of youth in the Cedar Rapids metro area **are hopeful in school**

## Ratio of Age-Appropriate Books Per Child in Middle and Low-Income Neighborhoods



13 books per child  
Middle-income ratio



1 book per 300 children  
Low-income ratio

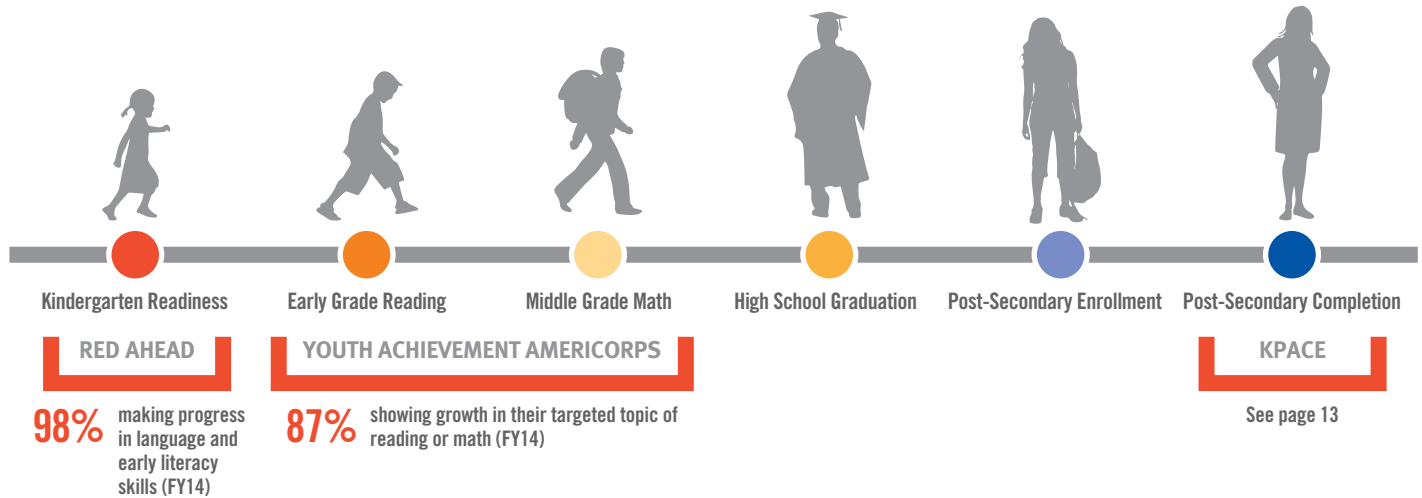
By the time both groups are 4 years old, higher-income children will hear

## 30 MILLION

more words than lower-income children.

Source: Neuman, Susan B. and David K. Dickinson, ed. Handbook of Early Literacy Research, Volume 2. New York, NY: 2006, p. 31. [www.serve.gov/toolkits/book-drive/index.asp](http://www.serve.gov/toolkits/book-drive/index.asp); Hart, B., and Risley, T.R. (1995). Meaningful Differences in the Everyday Experience of Young American Children. Baltimore, MD: Paul H. Brookes Publishing Co.

# WHAT WE'RE DOING ABOUT IT



**RED AHEAD:** Research shows that children from economically disadvantaged families can be up to two years behind in language development before they enter school. That's why RED Ahead starts early by providing low-income families with free books, models activities that parents do at home, and screens for developmental delays in order to ensure that children from birth to five have the skills they need to succeed in childhood. Serving 1,347 low-income families last fiscal year (with 48% of these families earning less than \$1,000 a month), RED Ahead targets those parents most in need of support and provides them with the materials and support they need to be their child's best teacher.

**YOUTH ACHIEVEMENT AMERICORPS:** Youth Achievement AmeriCorps enhances a pipeline of high-quality in and out-of-school time education programs, from birth through middle school, through the service of 15 full-time AmeriCorps members. Thirteen members work specifically in Schools in Need of Assistance for reading and/or math that have free and reduced price lunch rates between 56-87%. Within these schools, AmeriCorps members provide in-school tutoring and academic and enrichment support.

In the 2013-2014 school year, 3,735 hours of in-school tutoring, were provided by members with over 350 students receiving one-on-one or small group support throughout the year. Of those students, 88 were identified to attend AmeriCorps tutoring sessions consistently, and 87% of those students made growth in their targeted topic of reading or math.

**NETWORK OF PARTNERS:** We know that a community goal requires community involvement. That's why we partner with various members of our community including agencies, school districts, federal programs, national organizations, and many others to ensure the work gets done. A few partners are:

- Big Brothers/Big Sisters
- Boys & Girls Club of Cedar Rapids
- Boy Scouts - Hawkeye Council
- Cedar Rapids Community School District
- Cedar Rapids Public Library
- College Community School District
- Corporation for National and Community Service
- Grant Wood Area Education Agency
- Greater Cedar Rapids Community Foundation
- Hawkeye Area Community Action Program (HACAP)
- Iowa Association for the Education of Young Children
- Jane Boyd Community House
- Kids First Law Center
- Linn County Early Childhood Iowa
- Linn-Mar Community School District
- Marion Independent School District
- Rape Victim Advocacy Program
- Salvation Army
- Waypoint
- Women, Infants, and Children (WIC) Program
- Xavier High School
- YMCA of the Cedar Rapids Metropolitan Area
- Young Parents Network

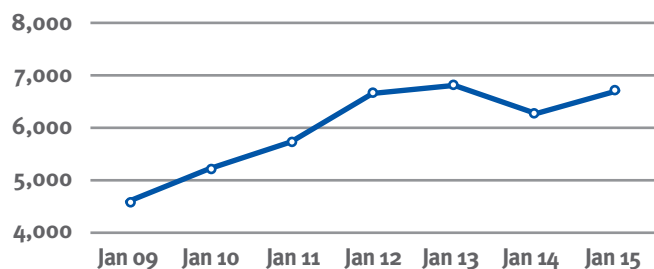
# FINANCIAL STABILITY

## THE CONDITION OF OUR FAMILIES

### Basic Needs

The causes of poverty may vary, but the milestones necessary for individuals and families to achieve long-term financial stability are easy to identify. Several of these milestones include food security, stable housing and work supports like child care.

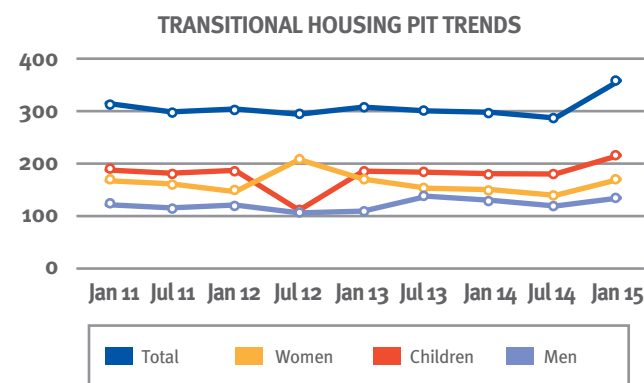
The number of participants in the Supplemental Nutrition Assistance Program (SNAP) food program remains high. There has been a 47% increase in participants from January 2009 to January 2015.



Source: Iowa Department of Human Services Periodic Reports/Food Assistance

### Transitional Housing

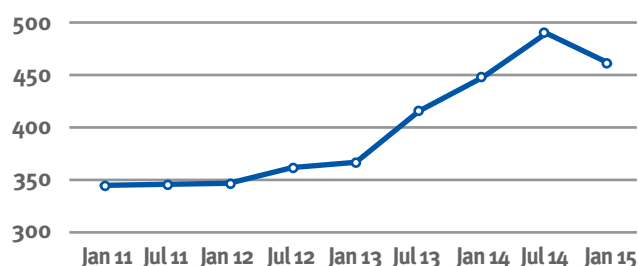
The graph below shows a four-year trend of homeless individuals served by transitional housing providers on PIT counts. Women and children represent 78% of all individuals served in transitional housing on January 28, 2015.



### Homelessness

The number of homeless individuals found in Cedar Rapids during the twice a year point-in-time (PIT) count continues to be an issue. For over four years we have experienced a 34% rise. On January 28, 2015, a total of 461 individuals were served by local emergency shelters, transitional housing facilities, or were found living on the street. This number consisted of 174 children, 152 men and 135 women.

TOTAL # OF HOMELESS INDIVIDUALS FOUND DURING PIT COUNTS

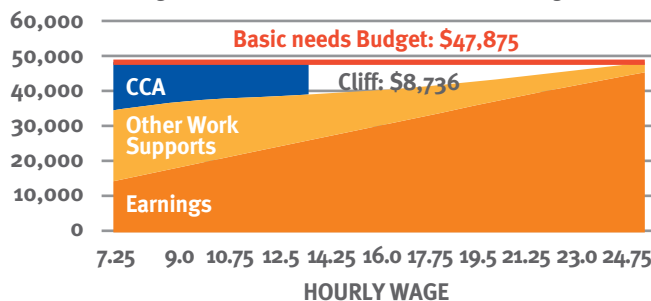


### Child Care Fiscal Cliff

The cliff effect in Iowa's Child Care Assistance (CCA) program is severe. A parent deciding whether to find a job that pays more per hour or allows more hours per week could find herself facing a dilemma: the higher earnings could push her over the benefit cliff just as she is nearing a level of earnings sufficient to get by, so that getting the better job would make her family worse off.

HOW WORK SUPPORTS DECLINE AS EARNINGS INCREASE (MAXIMUM BENEFITS POSSIBLE)

Single Parent with Two Children, Statewide Average

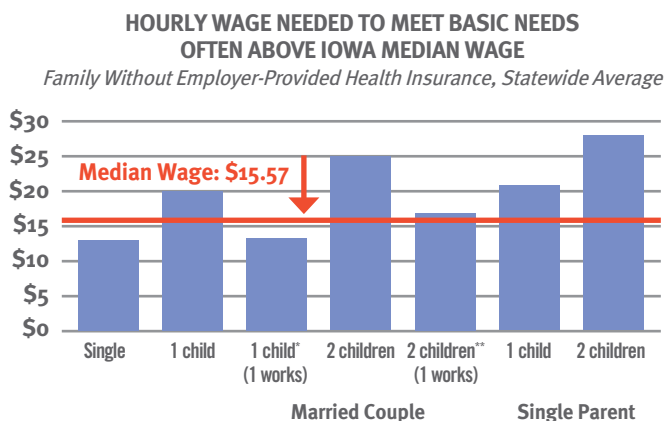


This graph shows how families use critical supports like child care assistance before they are making enough to fill the gap.

# WHAT WE KNOW

Nearly 17% of Iowa households are earning incomes below what is needed to meet their basic standard of living, including childcare, food, housing, clothing, healthcare, and transportation. This is called the break-even level of income, or basic needs. More than half (59.1%) of single parent households and over one quarter (27.1%) of single adults with no children are not able to reach this break-even level of income.<sup>1</sup>

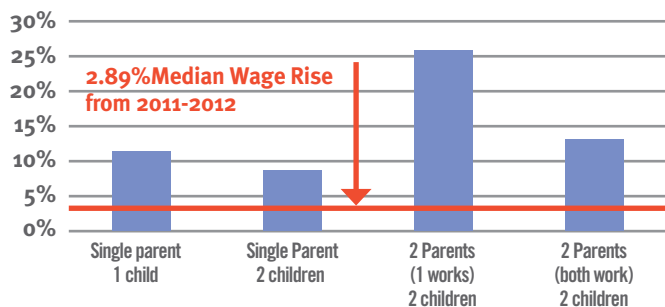
In Iowa, the median wage falls short of the hourly wage needed to meet the basic needs of families. In 2013, the median hourly wage in Iowa was \$15.57, but a single parent with two children in daycare needed a wage of \$28.07 to meet their family's basic needs.<sup>2</sup>



\*Child in daycare \*\*Child in daycare, 1 income

Source: The Cost of Living in Iowa 2014 edition – part 3 by Peter Fisher and Lilly French

In the Cedar Rapids metro area, the median wage is rising at a much slower rate than the hourly wage needed to meet basic needs. From 2011 to 2013, a single parent with one child in daycare needed an additional 11.39% in their hourly wage to meet their basic needs, but during this same period the median wage only increased by 2.89%.



Source: The Cost of Living in Iowa 2014 edition – part 3 by Peter Fisher and Lilly French

## More Education = More Income

Low-income families can improve their living wage through training and education. Over half (56%) of the jobs available in the Iowa labor market are classified as middle-skill, while only 33% of the available workers have the skills to perform the duties of these jobs.

## More Jobs Than Workers

Middle-skills jobs require more than a high school diploma but not a 4 year degree. Examples of middle-skill jobs include advanced manufacturing, healthcare, business, information technology, and financial services. There are more middle-skill jobs available than we have workers to fill them.

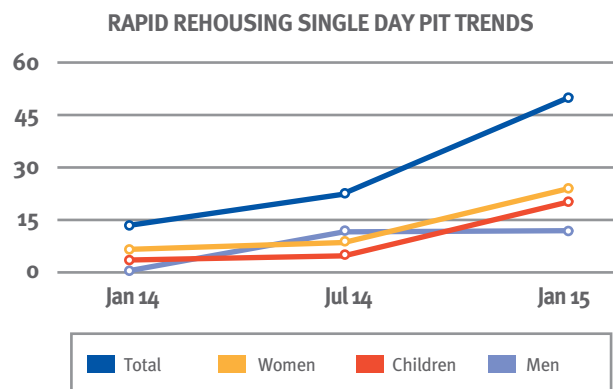


Source: Iowa Workforce Development 2014

# WHAT WE'RE DOING ABOUT IT

## Meeting Basic Needs: Housing

Linn County families that are at risk of becoming homeless are being helped through the Waypoint Services Rapid Rehousing program. Waypoint works with these individuals and families to quickly rehouse and stabilize them by providing services including short-term or medium-term rental assistance, housing relocation, and stabilization services such as mediation, credit counseling, security or utility deposits, utility payments, moving cost assistance, and case management. The goal of Rapid Rehousing is to prevent individuals and families from becoming homeless. The graph below shows an increasing two-year trend of clients being served by Rapid Rehousing on a single day.



<sup>1</sup> The Cost of Living in Iowa 2014 edition – part 2 by Peter Fisher and Lilly French

<sup>2</sup> The Cost of Living in Iowa 2014 edition – part 3 by Peter Fisher and Lilly French



## Meeting Basic Needs: Food

Over the past three years the Hawkeye Area Community Action Program (HACAP) has distributed over eight million pounds of food to families in need. In just the last year, HACAP increased its food attainment and distribution by close to one million pounds in order to meet the existing needs.

**3.38 MILLION**  
**LBS. FOOD**  
**150% INCREASE**  
since 2012

## Stabilization of Resources

### TAX ASSISTANCE IN THE EASTERN IOWA REGION:

These free services saved hundreds of thousands of dollars each year in out of pocket fees for tax preparation, and have returned millions of dollars to families through tax refunds and credits. These services are a cross sector partnership including: United Way 2-1-1, Linn County AARP, Linn County Volunteer Income Tax Assistance (VITA), Jones County RSVP, and others. United Way 2-1-1 scheduled tax appointments for the following partners who provided free tax preparation services:

#### IN 2014

- Linn County AARP, Linn County VITA, Black Hawk County VITA, Washington County VITA and Jones County RSVP completed 3,790 returns.
- Total refunds including federal, state and EITC for 2014 was \$7,194,898. This is an increase of \$845,446 compared to last year.

LINN COUNTY VITA	2009	2010	2011	2012	2013	2014
Completed Tax Returns	1,142	1,275	1,347	814	1,033	1,695
Total Federal Refund	\$2,832,514	\$2,608,969	\$2,982,561	\$1,981,297	\$2,405,286	\$2,824,233

## Growing Income

Kirkwood Community College helps lower-skilled, low-income adults gain the skills necessary to reach higher employment wages. The Kirkwood Pathways for Academic Career Education and Employment (KPACE) is set up to support individuals' abilities to advance over time to successively higher levels of education and employment, helping them gain financial stability along the way. This program weaves together basic skills training, workplace readiness training, academic learning and credential attainment, preparing the students for work in local middle-skill industries that have a shortage of qualified employees.

A complementary program is the GAP tuition assistance program. This program provides funding for need-based tuition assistance to enable applicants to complete continuing education certificate training programs for in-demand occupations.

KPACE results from August 2013 through December 2014:



### The network of partners and support organizations helping families reach financial stability:

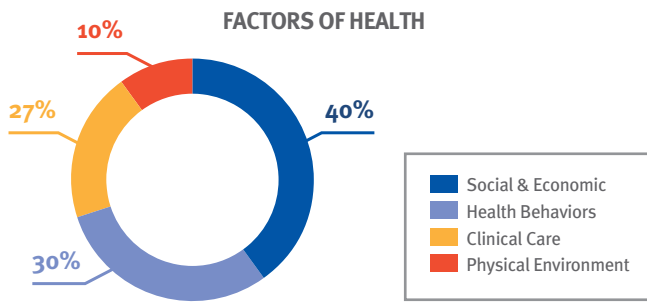
- Blue Zones
- Boys and Girls Club
- Catherine McAuley Center
- Catholic Charities
- Cedar Rapids City Council
- Cedar Rapids Community School District
- Cedar Rapids Housing Authority
- Cedar Rapids Police Department
- Center for Law and Social Policy
- Community of Christ
- Goodwill
- HACAP
- Homeless Coordination Board
- Horizons: A Family Service Alliance
- Iowa Department of Education
- Iowa Legal Aid
- Iowa Policy Project
- IRS
- ISED Ventures
- ISU Extension
- Jane Boyd Community House
- Kirkwood Community College
- Linn County Community Services
- Linn County Continuum of Care
- Marion Public Library
- New Disciples Church
- Parent Advisory Board
- Waypoint
- Westdale Area Neighborhood Association
- Willis Dady
- Young Parents Network

# HEALTH

## THE CONDITION OF OUR NEIGHBORS

### What We Know

There are several factors that contribute to a person's overall health. Some factors play a larger role in determining our health than others. The good news is that we are able to control several of these factors to create better health for ourselves and our community. With the right knowledge and access to health services and supportive systems we can begin to reduce health barriers and promote well-being, healthy behaviors, and healthy aging across all life stages.



According to the Robert Wood Johnson Foundation's (RWJF) County Health Rankings<sup>6</sup> research, there are four main factors that contribute to our overall health: health behaviors, clinical care, social and economic factors, and physical environment. 70% of our health outcomes can be attributed to social & economic factors and health behaviors as determinants of length and quality of life.

RWJF's County Health Rankings rank all five eastern Iowa counties in our service area in the top third for overall health outcomes.

Social and Economic factors include things like employment, housing stability, family structure, and social cohesion. Adversity in any of these areas such as homelessness, family members (particularly parents) with mental health issues or involvement in the corrections system, abuse, and neglect can lead to both short term and long term negative health outcomes like chronic disease and early death.

### How Is Our Health?

For a comprehensive picture of our community's health, please review the county health needs assessments for Linn, Jones, Benton, Iowa and Cedar counties.

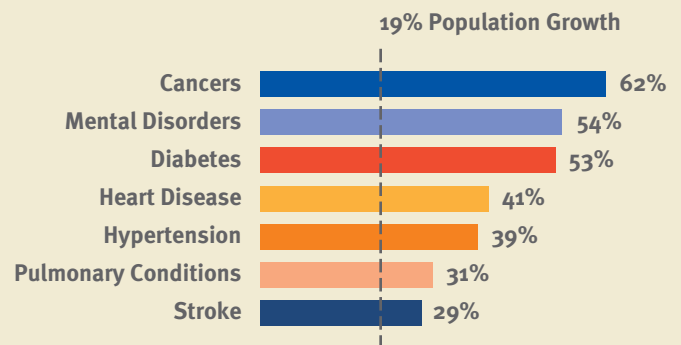
### Current Conditions

By 2023, the projected growth of chronic disease will have outpaced population growth in the US.<sup>1</sup> According to the Centers for Disease Control Behavioral Risk Factor Surveillance System<sup>2</sup>, the percentage of Iowans who report their health is in fair to poor condition increases as annual household income decreases.

In 2012, 39.4% of persons with an annual household income of \$15,000 or less reported their health as fair to poor; this increased from 33.6% as reported in 2011 for the State of Iowa. Iowa was higher than the nation's percentage of 38.2% in 2012.

Overall, approximately 14% of Linn County residents reported their health is fair or poor in 2010 (BRFSS, Linn county 2010).

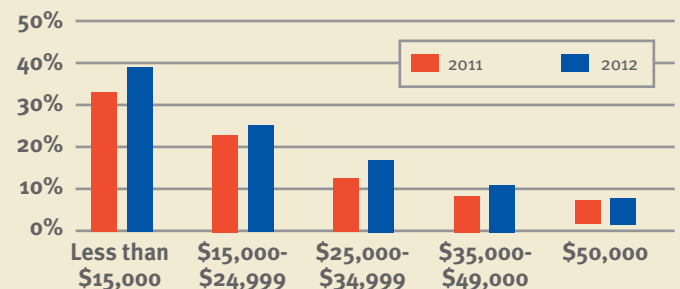
### PROJECTED RISE IN CASES OF CHRONIC DISEASES, 2003-2013



The human cost of chronic diseases cannot be ignored:

- **Chronic diseases cause 7 out of every 10 deaths.<sup>3</sup>**
- **Chronic diseases such as diabetes, cancer, and heart disease are the leading causes of disability and death in the US.<sup>4</sup>**

### PERCENTAGE REPORTING FAIR TO POOR HEALTH, BY INCOME<sup>4</sup>



<sup>1</sup> Data Source: DelVol, Ross, and Armen Bedroussian, An Unhealthy America: The Economic Burden of Chronic Disease, Milken Institute, October 2007. Report prepared with support from the Pharmaceutical Research and Manufacturers of America. Available at: [www.milkeninstitute.org](http://www.milkeninstitute.org)

<sup>2</sup> Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Available at: <http://apps.nccd.cdc.gov/brfss/>

<sup>3</sup> Centers for Disease Control and Prevention. Chronic Disease Overview: Costs of Chronic Disease. Available at <http://www.cdc.gov/nccdphp/overview.htm>

<sup>4</sup> Triple Solutions for a Healthier America. The Impact of Chronic Disease on Healthcare. Available at <http://www.forahealthieramerica.com/ds/impact-of-chronic-disease.html>

In general, the incidence rates for disease, risk factors, and poor health outcomes are worse for low-income, low-educational attainment, and minority populations in Linn County and the surrounding areas. Increased smoking, obesity, poor mental health, less access to fresh food, and chronic diseases all impact these populations with greater frequency. Many of these factors can be most directly tied to family income which is by its nature a reflection of the education of the head of household.

## Mental Illness: Prevalence and Treatment

According to the Centers for Disease Control Behavioral Risk Factor Surveillance System Health-Related Quality of Life Survey<sup>5</sup> the populations at highest risk for frequent mental distress are: Black, Non-Hispanic persons at **16.9%**, persons aged 55 to 64 years at **9.1%**, and women at **8%** versus **7.1%** over all for the state of Iowa and **12.6%** for the nation in 2010.

**1 in 4** adults has a mental health disorder and less than one-third of those with a diagnosable mental health disorder receive needed treatment.<sup>6</sup> According to the Iowa 2012 Mental Health National Outcomes Report, community utilization rate of mental health services per 1,000 for Iowa is 16.91 vs. the National rate of 21.67.

**1 in 5** children has a mental health disorder and less than one half with a diagnosable mental health disorder receives treatment in a given year.<sup>7</sup>

Mental Illness in Eastern Iowa - Estimated 2012 population age 18+ in UWECL service area = 221,896<sup>8</sup>

- 2011-2012 Age 18+ any mental illness in the past year estimate= 18.4% (40,829)<sup>8</sup>
- 2011-2012 Age 18+ serious mental illness in the past year = 4.12% (9,142)<sup>8</sup>

Source: SAMSHA Iowa

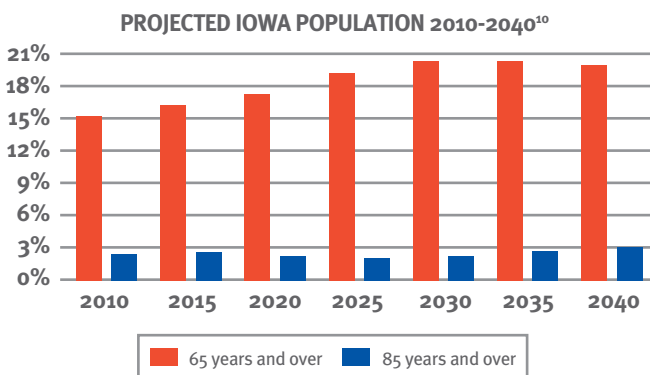
## What We're Doing About It

We must understand and support the needs of our most vulnerable populations. Who are they?:

- Older Adults
  - In 2010, Iowa ranked 5th in the percentage of people age 65 and older.
  - 10,183 adults ages 65 and over are below 200% of the Federal Poverty Level.<sup>9</sup>
- Children
  - Those who experience multiple Adverse Childhood Experiences (ACEs) (See pages 16-17)
- Women (See pages 18-19)

## NETWORK OF PARTNERS

- Abbe Center for Community Mental Health
- Aging Services, Inc
- Area Substance Abuse Council
- Blue Zones
- Benton County Volunteer Program
- Cedar Rapids Community School District
- College Community School District
- Community Health Free Clinic
- Department of Human Services
- Eastern Iowa Health Center
- Foundation 2
- Four Oaks
- Hawkeye Area Community Action Program (HACAP)
- Horizons: A Family Service Alliance
- Linn County Child & Youth Development Center
- Linn County ISU Extension
- Linn County Public Health
- Mississippi Valley Child Protection Center
- Neighborhood Associations
- Matthew 25
- Prevent Child Abuse Iowa
- Rural Employment Alternatives, Inc.
- Southeast Linn Community Center
- Tanager Place
- Unity Point St. Luke's - Child Protection Center & The Dr. Rhys B. Jones Dental Health Center
- University of Iowa
- Volunteer Services of Cedar County
- 6th Judicial District- Juvenile Court



<sup>5</sup> Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, Health-Related Quality of Life. Available at: <http://apps.nccd.cdc.gov/HRQOL/>

<sup>6</sup> Kessler RC, Chiu WT, Demler O, Walters EE. Prevalence, severity, and comorbidity of twelve-month DSM-IV disorders in the National Comorbidity Survey Replication (NCS-R). Archives of General Psychiatry, 2005 Jun;62(6):617-27. Retrieved from: [http://www.nimh.nih.gov/statistics/1ANYDIS\\_ADULT.shtml](http://www.nimh.nih.gov/statistics/1ANYDIS_ADULT.shtml)

<sup>7</sup> New Freedom Commission on Mental Health. (2003). Achieving the promise: Transforming mental health care in America. Final report (DHHS Pub. No. SMA-03-3832). Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

<sup>8</sup> [http://www.samhsa.gov/data/sites/default/files/State\\_BHBarometers\\_2014\\_1/BHBarometer-IA.pdf](http://www.samhsa.gov/data/sites/default/files/State_BHBarometers_2014_1/BHBarometer-IA.pdf)

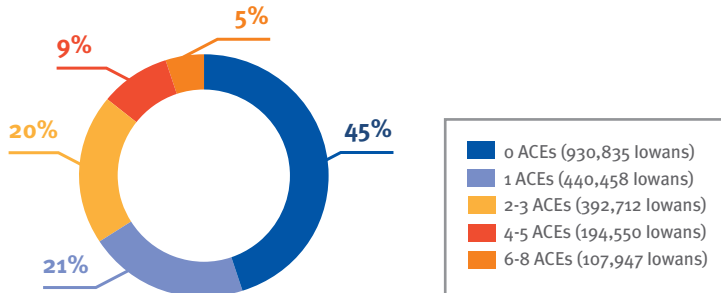
<sup>9</sup> U.S Census Bureau, American Fact Finder. Available at: <http://factfinder2.census.gov/faces/nav/jsf/pages/index.xhtml>

<sup>10</sup> Iowa State Data Center and Iowa Department on Aging. 2014 Older Iowans Report. Available at: [https://www.iowaaging.gov/sites/files/aging/documents/OlderIowans2013\\_o.pdf](https://www.iowaaging.gov/sites/files/aging/documents/OlderIowans2013_o.pdf)

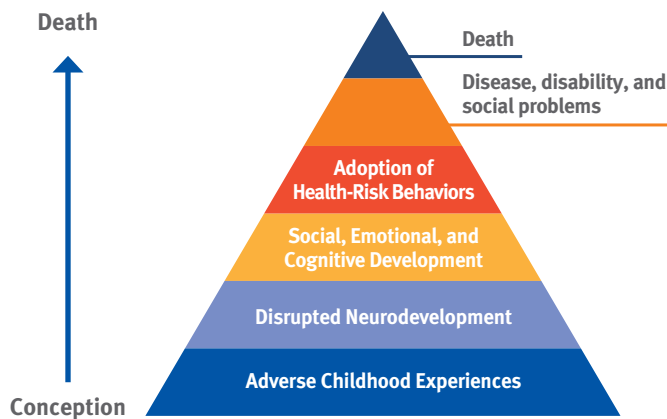
# ACES ADVERSE CHILDHOOD EXPERIENCES

## Early Adversity Predicts Future Well-Being

IOWA POPULATION ESTIMATES OF ACES CO-OCCURRENCE



According to research from the Center for Disease Control, there is a strong connection between early childhood trauma, known as Adverse Childhood Experiences (ACEs), and serious health and mental health effects in later life. ACEs are defined as lasting experiences where a child is involved in one or more of the following situations: abuse (physical, emotional or sexual), neglect, or household dysfunction (substance abuse, mental illness, parental loss through separation, abandonment or divorce, or witnessing violence and crime in the home).

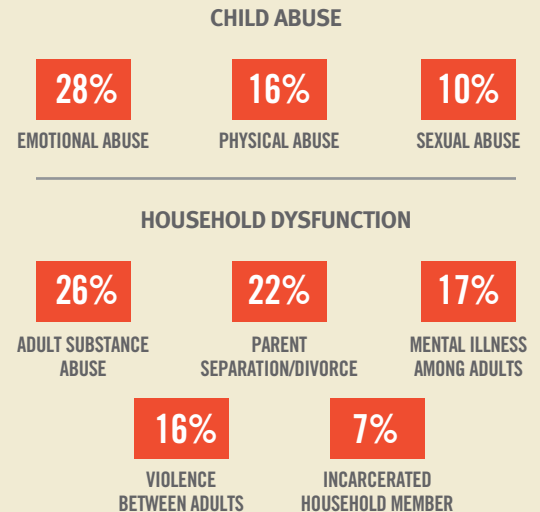


ACEs have been found to be common (CDC). 55% of the population in Iowa has experienced one or more ACEs (BRFSS, 2012). The ACEs that are experienced in childhood dramatically increase the risks for negative impacts on lifelong health. Individuals experiencing ACEs have higher rates of cancer, heart attacks, obesity, and mental health issues. ACEs also have an impact on the work force and affect absenteeism and poor job performance (CDC). These negative effects and rates only go up as the number of ACEs an individual experiences rises. The trauma caused by ACEs can have lifelong consequences but also affects children today and can leave them feeling powerless, fearful, and hopeless for their future.

## WHAT IS THE PREVALENCE OF ACES?

**79.7%** of low-income children in Iowa experienced two or more ACEs<sup>1</sup>

Prevalence of ACEs in Iowa<sup>2</sup>:



**OVER 1500 CHILDREN** experienced maltreatment in Linn County in 2012<sup>2</sup>

**54%** were five or younger<sup>2</sup>

**50%** of children with four+ ACEs have learning and behavioral issues<sup>4</sup>

**90%** of children with 6+ ACEs have developmental delays<sup>5</sup>

## WHAT IS THE COST OF ACES?

Individuals with 4 or more ACEs are:

**222%** times as likely to be obese

**357%** times as likely to experience depression

**1,525%** times as likely to attempt suicide

<sup>1</sup> 2011/2012 National Survey of Children's Health

<sup>2</sup> Iowa Department of Human Services Child Maltreatment Statistical Report, 2012

<sup>3</sup> Iowa Behavioral Risk Factor Surveillance System (BRFSS) 2012

<sup>4</sup> Burke, N. J., Hellman, J. L., Scott, B. G., Weems, C. F., & Carrion, V. G. (2011). The impact of adverse childhood experiences on an urban pediatric population. *Child Abuse & Neglect*, 35(6), 408-413. doi:10.1016/j.chiabu.2011.02.006

<sup>5</sup> Barth, R. P., et al. (2008). *Developmental status and early intervention service needs of maltreated children*. Washington, DC: U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. 408-413. doi:10.1016/j.chiabu.2011.02.006



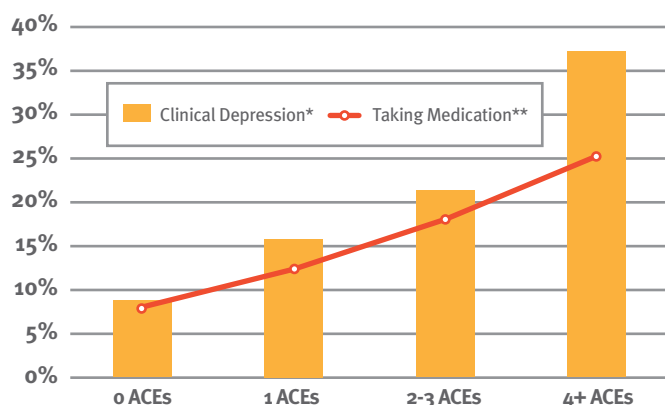
## ACE-RELATED ODDS OF HAVING A PHYSICAL HEALTH CONDITION IN IOWA

Health Condition	0 ACEs	1 ACEs	2 ACEs	3 ACEs	4+ ACEs
Arthritis	100%	130%	145%	155%	236%
Asthma	100%	115%	118%	160%	231%
Cancer	100%	112%	101%	111%	157%
COPD	100%	120%	161%	220%	399%
Diabetes	100%	128%	132%	115%	201%
Heart Attack	100%	148%	144%	287%	232%
Heart Disease	100%	123%	149%	250%	285%
Kidney Disease	100%	83%	164%	179%	263%
Stroke	100%	114%	117%	180%	281%
Vision	100%	167%	181%	199%	354%

Note: the divide between blue and red numbers represent ACE-related threshold relative to the group with zero ACEs. For example, at 200% a group has double the odds of having the condition compared to those with no ACEs.

\*Survey questions about chronic health diagnoses were preceded with this question stem, "Has a doctor, nurse, or other health professional ever told you that you had any of the following?" (BRFSS, 2012)

## ACES AND DEPRESSION IN IOWA



\*Clinical depression is based on a positive response to the question, "[Has a doctor] ever told you that you have a depressive disorder, including depression, major depression, dysthymia, or minor depression?"

\*\*Taking medication is based on a positive response to the question, "Are you now taking medicine or receiving treatment from a doctor or other health professional for any type of mental health condition or emotional problem?" (BRFSS, 2012)

## What We're Doing About It

United Way has teamed up with many local professionals to address ACEs locally. A community summit occurred in 2012, and more than half a dozen community conversations were held to increase awareness and our community's capacity to address adversity. A team of experts from Linn County Public Health, the Department of Human Services, Abbe Center for Community Mental Health, Cedar Rapids Community School District, local psychologists, HACAP, Four Oaks, Linn County Prevent Child Abuse Council, Linn County Child & Youth Development Center, Partnership for Safe Families, ASAC, Grant Wood AEA, Juvenile Justice, Young Parents Network, United Way, and others are working on preventing and responding to adversity and trauma.

Strategies include ACEs training for community members and providers, parent education and support, trauma informed care training for agencies, and legislative advocacy.

## BUILDING CHILDHOOD RESILIENCE

Establish positive relationships with caring adults (schools, family, friends, or neighbors)

Facilitate nurturing home environments by modeling supportive parenting (parenting classes, parenting support groups)

Assist parents in recognizing their own experiences with ACEs (counseling services)

Establish concrete supports that meet a child's basic needs (housing, food, clothing, and healthcare)

Provide tools to reduce stress (practicing problem solving, peer support opportunities, mindfulness training)

Train professionals to recognize ACEs in a variety of settings (physicians, teachers, etc.)

Establish child-focused programs to decrease negative consequences of ACEs (Head Start, school-based counseling, adult-led youth groups)

Pearl, R. (4/16/15). Can we stop a traumatized child from becoming a traumatized adult? Forbes Magazine. Retrieved from <http://www.forbes.com/sites/robertpearl/2015/04/16/can-we-stop-a-traumatized-child-from-becoming-a-traumatized-adult-2/>

## What Can You Do?

As a community we can change our conversation to focus on resiliency. By shifting our thinking we can create more compassionate environments that support our children regardless of what they experience. By building safe, stable, nurturing relationships, we can break the cycle of abuse and promote healthy futures for each child in our community.

If you would like to get involved, reach out to any of the agencies mentioned in this article or visit this website for more information:

[www.unitedwayofeastcentraliowa.org/aces-building-resilient-community/](http://www.unitedwayofeastcentraliowa.org/aces-building-resilient-community/)

# WOMEN'S HEALTH

## THE CONDITION OF WOMEN IN LINN COUNTY

Women's health in Iowa is an important way to measure Iowa's health in general. Healthy women contribute to a healthy workforce, a healthy community, and lead to healthy families. Women's well-being is also strongly linked to the condition of children and is a key indicator of their future. Maternal education, mental health, and the attachment between a woman and her child are key predictors of a child's success in the future. Four critical factors contribute to women's overall health outcomes and well-being:



**ACCESS  
TO CARE**



**SOCIOECONOMIC  
FACTORS**



**HEALTH  
BEHAVIORS**



**ENVIRONMENT**

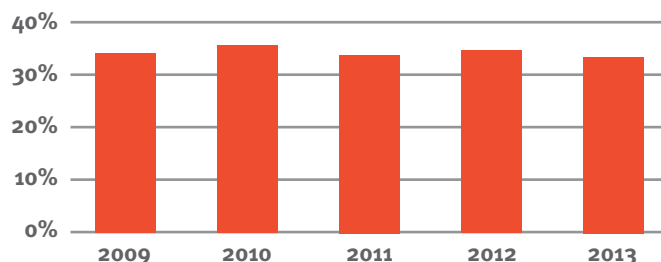
### Socioeconomic Factors

Household income and education are important influences on the well-being of women. Women's access to health care drops as their education level and income decreases. When looking at the rate of women in Iowa getting mammograms between 2010 and 2012, only 63.5% of the population with less than a high school diploma received screening. The rate is similar in women who earned less than \$15,000 with only 60.3% receiving mammograms. Lower socioeconomic status aligns with lower health screening rates and limited access to care due to transportation, difficulty getting time off work, and lack of health insurance (Chelsea Kennan, Gazette, 4/29/15). This disparity has been an area of focus for United Way when considering women's health and building supportive services to address needs.

### Family Structure

Women from low income households are more likely to have greater complications at birth.<sup>1</sup> In Iowa, women living under 185% of the Federal Poverty Level can receive Medicaid support to improve their birth outcomes. In 2013, 38.1% of all births in Linn County were to unwed mothers, second to Jones at 39%. 11% of these mothers were on public assistance and 43% were living below the poverty line.<sup>2</sup> Low-income women face many obstacles keeping them from accessing adequate health care. Medicaid assists these women by providing prenatal care, labor, delivery, 60 days of post-partum care, and one year of health coverage for their baby.<sup>3</sup> Medicaid can help impoverished women who would otherwise not be able to afford care, reducing health disparities and improving outcomes.<sup>4</sup> The number of births funded by Medicaid in Linn County has reduced slightly in the past five years. In 2009, there were 981 Medicaid births compared to 897 in 2013.<sup>5</sup> This number, despite reducing, still shows the large number of women and children living under the poverty line and therefore is a cause for concern. Limited financial resources can create many barriers in a woman's life trying to provide for her children. Seeking and receiving adequate health and preventative care are examples of those barriers and an area to focus attention when considering low-income mothers.

PERCENTAGE OF BIRTHS WHERE THE PRIMARY SOURCE OF PAYMENT WAS MEDICAID IN LINN COUNTY

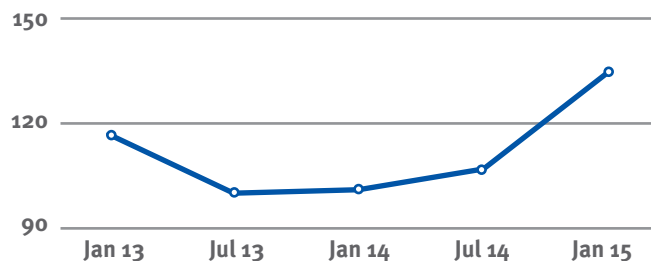


Source: Iowa Department of Public Health, 2015

### Homelessness

Homelessness is a growing concern in Cedar Rapids. Between 2013 and 2014, there was a 27.2% increase of women experiencing homelessness (PIT Count). This number has grown consistently in the past four years. An increase in female-headed households, births to unmarried women, and families living under the poverty line is likely to be a factor in this statistic. However, an 8.1% increase between 2009 and 2010 in the prevalence of domestic violence in Iowa and mental health rates are also strong factors leading to a greater number of women experiencing homelessness (ICADV). Homelessness and the lack of stability that comes with it directly and negatively affect healthy outcomes for women and mothers.

PIT TREND OF NUMBER OF HOMELESS WOMEN IN CEDAR RAPIDS



Source: Iowa Department of Public Health, 2015

<sup>1</sup> Iowa Department of Public Health, 2014 [http://www.idph.state.ia.us/hpcdp/common/pdf/family\\_health/mh\\_ch\\_business\\_plan.pdf](http://www.idph.state.ia.us/hpcdp/common/pdf/family_health/mh_ch_business_plan.pdf)

<sup>2</sup> U.S. Census, 2013 <http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#>

<sup>3</sup> Medicaid, 2015 <http://www.medicaid.gov/medicaid-chip-program-information/by-population/pregnant-women/pregnant-women.html>

<sup>4</sup> Iowa Department of Public Health, 2014 [http://www.idph.state.ia.us/hpcdp/common/pdf/family\\_health/mh\\_ch\\_business\\_plan.pdf](http://www.idph.state.ia.us/hpcdp/common/pdf/family_health/mh_ch_business_plan.pdf)

<sup>5</sup> Medicaid, 2015 <http://www.medicaid.gov/medicaid-chip-program-information/by-population/pregnant-women/pregnant-women.html>

<sup>6</sup> Linn County Public Health, BRFSS, 2010

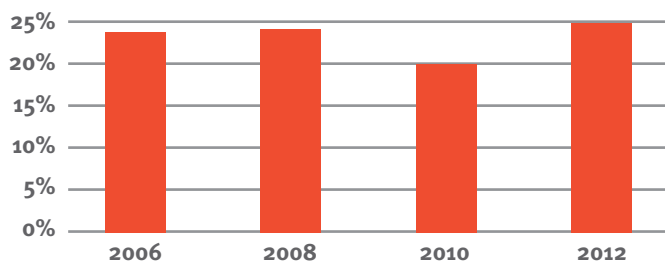
<sup>7</sup> <http://www.healthdata.org>, 2012

<sup>8</sup> <http://www.healthdata.org>, 2011

## Health Behaviors

Since early 2014, the Affordable Care Act has assisted thousands of low-income women in accessing affordable health insurance in Iowa. Despite the growth in accessing preventative health, dental exams remain an area that women are lacking treatment. In 2012, 24.8% (384,420) women in Iowa did not receive a dental exam in the past year. Dental exams are extremely important for several reasons. Regular dental exams every six months can prevent conditions from becoming worse and impairing vital functioning such as eating, swallowing, and talking. They also are the first indication of other serious health issues such as signs of diabetes and possible HIV infection.<sup>9</sup> Limited access and priority of yearly dental exams leads to poor oral health, impacting women's overall health and well-being.

PERCENTAGE OF WOMEN IN IOWA WHO HAVE NOT HAD A DENTAL EXAM IN THE PAST YEAR

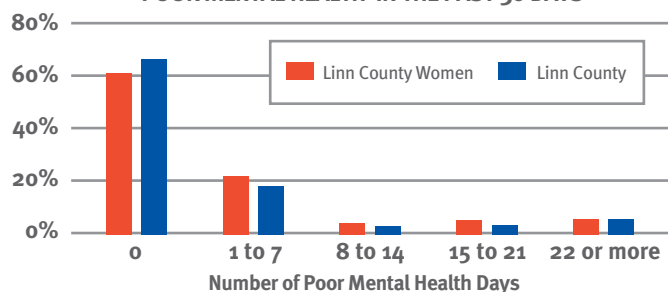


Source: Data after 2011 was collected utilizing a different survey method; Behavioral Risk Factor Surveillance System, 2006-2012

## Health Outcomes

Poor maternal mental health is a concern in Linn County. When comparing women in Linn County to the general public and Iowa, women consistently had higher days experiencing poor mental health. In the state of Iowa in 2013, 24.3% of women were told by a doctor they had some form of depression.<sup>10</sup> This rate increased by 2.7% from 2011 to 2013.<sup>10</sup> For women, as income decreases, poor mental health increases. Low income mothers are twice as likely to experience some form of depression in their lifetime.<sup>11</sup> Depression affects mothers functioning in society and leads to higher rates of adverse experiences (divorce, unemployment, poverty, etc.).<sup>12</sup> Nationally only half of all mothers experiencing depression receive support services. In 2010, 19.1% of women in Linn County experienced inadequate social and emotional support.<sup>6</sup> This is especially true for Black and Hispanic women experiencing greater adversity.<sup>12</sup> When a mother is depressed it also affects her children. Cognitive and social-emotional development, behavior, school readiness, and overall health of a child is negatively impacted when their mother is depressed.<sup>11</sup> By increasing access to care and supportive services, and reducing stigma, women who are experiencing poor mental health can access the help they need in Linn County.

PERCENTAGE OF WOMEN IN LINN COUNTY EXPERIENCING POOR MENTAL HEALTH IN THE PAST 30 DAYS



Source: Linn County Public Health, 2005-2011

<sup>9</sup> CDC [http://www.cdc.gov/oralhealth/publications/factsheets/adult\\_oral\\_health/adults.htm](http://www.cdc.gov/oralhealth/publications/factsheets/adult_oral_health/adults.htm) (2006)

<sup>10</sup> BRFFS <http://apps.nccd.cdc.gov/brffs/display.asp?cat=OH&yr=2012&qkey=8471&state=IA>  
<sup>11</sup> Knitzer, J., Theberge, S. and Johnson, K. Reducing Maternal Depression and Its Impact on Young Children: Toward a Responsive Early Childhood Policy Framework, National Center for Children in Poverty, January 2008 [http://www.nccp.org/publications/pub\\_791.html](http://www.nccp.org/publications/pub_791.html)

<sup>12</sup> Ertel, K., Rich-Edwards, J., Koenen, K. (2011). Maternal depression in the United States: Nationally representative rates and risks. *Journal of Women's Health*, 20(11), 1609-1617.

## LINN COUNTY WOMEN BY THE NUMBERS

**76.9%** of women in Linn County participated in some type of physical activity in the past month.<sup>6</sup>

**8.2%** of women in Linn County participated in heavy drinking.<sup>2</sup>

**17.5%** of women in Linn County binge drank.<sup>7</sup>

**18.3%** of women in Linn County smoked.<sup>7</sup>

**35.2%** of women in Linn County were obese.<sup>8</sup>

**9%** of women in Linn County lacked access to health care coverage.<sup>6</sup>

## WHAT WE'RE DOING ABOUT IT

### United Way's Women's Health Initiative

Since its beginning, United Way's Women's Leadership Initiative (WLI) has raised over \$1 million to reduce barriers to care for low-income women. WLI focuses on United Way partnerships that will increase affordability and reduce barriers to access, improve utilization of healthcare systems, and improve mental health for low-income women in Linn County. These partners provide prescription and co-pay assistance, dental services and vouchers, HPV vaccination, vision exams and eye glasses, and diabetic testing supplies, in addition to other durable supplies. In 2014, 2,978 women were provided these needed services through our community partners.

### Women's Health Needs Survey

<b>210</b> TOTAL RESPONDENTS	<b>77%</b> FROM LINN CO.	<b>84%</b> WERE FEMALE
	<b>18%</b> WERE FEMALE- HEADED HOUSEHOLD	

**25%** OF  
RESPONDENTS

had at least one medical condition and at least one barrier preventing them from getting adequate treatment (all callers, not just women)

Conducted by United Way 211- (Health Barriers Data, 2012)

# NONPROFIT SECTOR REPORT



The nonprofit sector is a critical piece of our economy and service sector. It is diverse and is often a good barometer of the changing needs of our community. The sector has been buffeted by strong “disruptive forces” in the last several years. Many of these changes were highlighted in the Disruptive Forces project launched by the Alliance for Strong Families and Communities.<sup>1</sup> We have added a few “forces” to the list:

- The impoverishment of government
- The need for purposeful experimentation
- Information liberation
- Jobless recovery
- Integrating science into practice
- Uncompromising demand for impact
- Support for causes, not organizations
- A shift from donors to investors

## A SNAPSHOT OF THE LINN COUNTY NONPROFIT SECTOR

### EMPLOYMENT (CEDAR RAPIDS)<sup>2</sup>

Health and Social Assistance .....	2,240
Annual Mean Wages .....	\$38,860
Education.....	9,030
Annual Mean Wages .....	\$44,780
Art, Culture, and Entertainment.....	1,610
Annual Mean Wages .....	\$42,620

### # OF NONPROFIT ORGANIZATIONS (LINN CO.)<sup>3</sup>

Public Charities .....	710
Private Foundations.....	55
Other Nonprofit Organizations .....	343

### CATEGORIES OF NONPROFIT ORGANIZATIONS<sup>3</sup>

Health Services .....	50
Education.....	126
Arts, Culture, and Entertainment .....	90
Human Services .....	300
Other (with Societal Benefits) .....	274

### ECONOMIC IMPACT<sup>3</sup>

Total Assets .....	\$4,117,382,280
Total Revenue .....	\$1,564,989,775

## NATIONAL NONPROFIT HIGHLIGHTS

ABOUT

**1 NON-PROFIT  
FOR EVERY  
175 AMERICANS**

is becoming a larger and more important part of the economy

AN ESTIMATED

**2.3  
MILLION**



Nonprofit organizations operate in the U.S.

**1.6 MILLION  
NONPROFITS**

are registered with the IRS as of 2012



**62.8 MILLION**

Number of Americans who volunteered with different nonprofit organizations in 2010

## SOURCES

<sup>1</sup> <http://alliance1.org/disruptive-forces/about>

<sup>2</sup> May 2013 Metropolitan and Nonmetropolitan Area Occupational Employment and Wages Estimate: Cedar Rapids, Iowa: Bureau of Labor Statistics, [http://www.bls.gov/oes/current/oes\\_16300.htm#31-0000](http://www.bls.gov/oes/current/oes_16300.htm#31-0000)

<sup>3</sup> <http://nccsweb.urban.org/tablewiz/bmf.php>

### BROAD INFORMATION ON NONPROFITS

<http://nccsdataweb.urban.org/NCCS/extracts/nonprofit/alanacflyerpdf.pdf>



# VOLUNTEER ENGAGEMENT



## HIGHLIGHTS

**97%** utilize volunteers to help deliver their social mission



### VOLUNTEERS PLAY A SIGNIFICANT ROLE

**75%** say volunteers are a large part of their main workforce

**72%** of organizations have capacity for more volunteers



### WORD OF MOUTH

is the most common way volunteers get introduced to an organization

### TOP 5 NEEDED SKILLED VOLUNTEERS

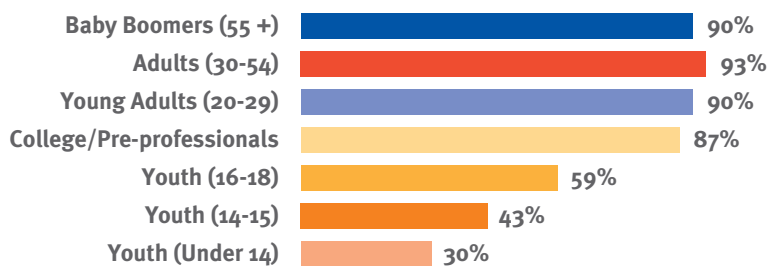
- Organizing/Outreach
- Marketing & Comm. – Design & Writing
- Skilled Labor
- Administrative/Clerical Community
- Fundraising

## 2015 VOLUNTEER ENGAGEMENT NEEDS ASSESSMENT SUMMARY

In December 2014 and January 2015 United Way of East Central Iowa (UWECI) conducted a survey of nonprofits and faith-based organizations in Linn and surrounding counties & 96 responded.

Agencies provide opportunities for an array of individuals and groups. Almost all have opportunities for those ages 20 years and older.

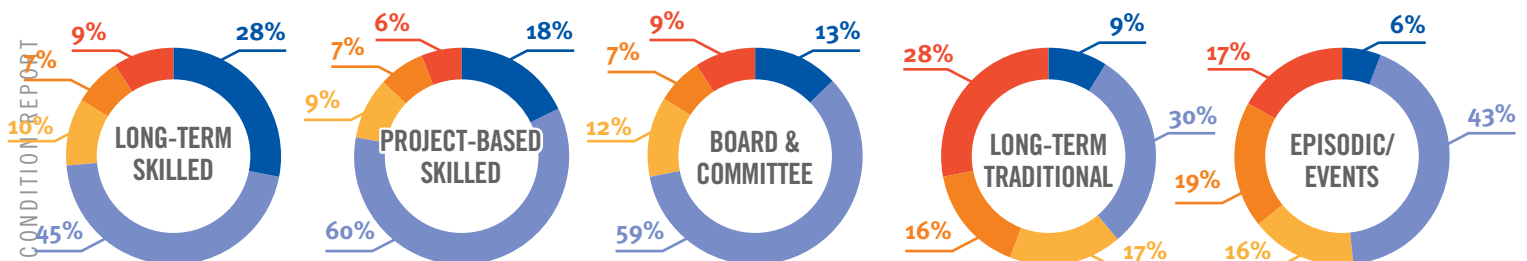
### VOLUNTEER POPULATIONS ENGAGED



### NUMBER OF VOLUNTEERS ENGAGED

Organizations vary in the number of individuals that volunteer annually. An impressive 30% responded that they engage more than 400 volunteers (note: this does not indicate the frequency). On the contrary, 21% engage 50 or fewer volunteers. There's almost equal distribution for the remaining half of respondents.

### TYPES OF VOLUNTEERISM



The assessment surveyed some generic types of volunteer engagement (long-term skilled, project-based skilled, board & committee, long-term traditional, and episodic) and the percentage of the organization's volunteers that serve in that capacity.



## National, State, and Local Volunteer Trends

Volunteering in America, [www.volunteeringinamerica.gov](http://www.volunteeringinamerica.gov)

Volunteer Stats Comparison	Volunteer Rate in 2013 (% of residents volunteer)	Volunteer hours in 2013 (hours per resident)
National	25.4%	32.1
Iowa	34.7%	35
Cedar Rapids	38.9%	40.9

## CIVIC ENGAGEMENT AMONG MEN & WOMEN (NATIONALLY)

**29.3% OF WOMEN** volunteer, contributing on average 50 hours per year

**22.9% OF MEN** volunteer, contributing on average 52 hours per year



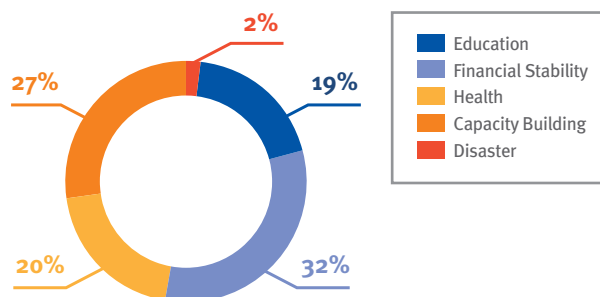
## UWECI Fiscal Year 2014 Volunteer Statistics

**ENGAGED  
2,600  
VOLUNTEERS**

**Volunteers  
contribute  
62,600  
HOURS**

Volunteer  
hours valued at **\$1.4  
MILLION**

## UNITED WAY IMPACT VOLUNTEERS 2014



# SOLUTIONS

## WHAT'S NEXT?

### What Will We Do?

Past successes will not guarantee future impact. As UWECI moves forward we will focus on key strategies and innovations.

### Work Together

“COLLECTIVE IMPACT OCCURS WHEN ORGANIZATIONS FROM DIFFERENT SECTORS AGREE TO SOLVE A SPECIFIC SOCIAL PROBLEM USING A COMMON AGENDA, ALIGNING THEIR EFFORTS, AND USING COMMON MEASURES OF SUCCESS.”<sup>1</sup>

UWECI has embraced a collective impact model that emphasizes partnerships and strategic investments. We've made significant progress, but much remains to be achieved for the benefit of our community. Going forward we will focus on developing asset

based strategies that build on existing capacity, collaborations and momentum. We will work to ensure multiple partners share the vision as well as the accountability for success. If we are to make progress on our community's goals we must attack root causes and not respond solely or primarily to symptoms.

### Build Holistic and Comprehensive Strategies

There is strong evidence for the need for comprehensive, multi-generational, place-based strategies. We must take a system's approach to building solutions. Individual agencies often demonstrate excellence in the delivery of services and many agencies have aligned their programs to meet our community's goals. However, the human service system is often fragmented, and lacking in continuity of services, which limit the ability of our partner agencies to achieve maximum results and their client's ability to access services.

And people do not have isolated issues. Often they are complex, interrelated and even generational. They need solutions that recognize these dynamics and resources that assist them in navigating complicated systems of care.

<sup>1</sup> <http://www.fsg.org/approach-areas/collective-impact>

## 3RD GRADE READING SUCCESS MATTERS

# The Campaign for Grade-Level



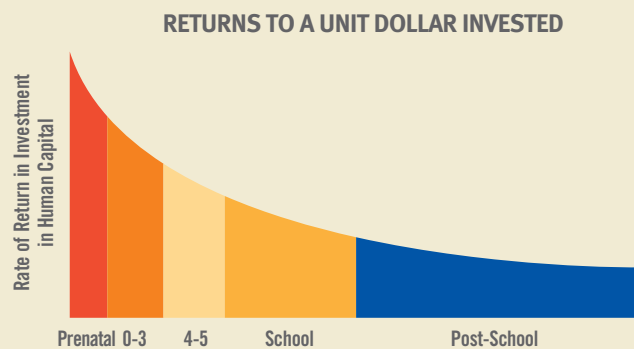
**READING  
into  
SUCCESS**  
THE CAMPAIGN FOR GRADE LEVEL READING

### Collective Impact in Action!

**READING INTO SUCCESS (RIS):** Helping children succeed takes a village. That's why United Way, the Greater Cedar Rapids Community Foundation, all four local public school districts, Xavier Catholic Schools, Grant Wood AEA, the Cedar Rapids Public Library, the Gazette Company, Rockwell Collins, and more partners have come together to form Reading into Success, the local Campaign for Grade-Level Reading. This campaign focuses on Kindergarten readiness before children get to school, constant attendance in school, summer learning outside of school, building hope and well-being in children both in and out of school, and promoting every day reading in order to help more children read proficiently by the end of third grade.

### Start Early

Numerous studies have calculated the greatest return on investment when interventions are strengths-based and begin early.



Source: James Heckman, Nobel Laureate in Economics (2008)

### And Finally, Build Resilience

We can increase resilience for children and families to improve long term outcomes. What long term outcomes do we seek? Every child and family has the opportunity to develop the capability for well-being. This means focusing on removing the barriers to education, financial stability and health and strengthening the elements that buffer the impact of toxic stress and adversity. Individuals become more resilient when they have social connectedness and positive relationships. Organizations make this possible when they offer compassionate and inclusive environments focused on equipping and empowering the people that they serve. These elements create the foundation for successful change.



## OTHER SOURCES OF INFORMATION ABOUT COMMUNITY CONDITION

### THE COST OF LIVING IN IOWA 2014

<http://www.iowapolicyproject.org/2014docs/140226-COL.pdf>

### COMMUNITY HEALTH NEEDS ASSESSMENT AND HEALTH IMPROVEMENT PLAN

<http://www.linncounty.org/DocumentCenter/View/232>

### 2014 UPDATE OF COMPREHENSIVE HOUSING NEEDS ANALYSIS FOR CEDAR RAPIDS, IOWA

[http://www.cedar-rapids.org/government/departments/community-development/housing/Documents/2014%20Cedar%20Rapids%20Housing%20Needs%20Update\\_Finalv2.pdf](http://www.cedar-rapids.org/government/departments/community-development/housing/Documents/2014%20Cedar%20Rapids%20Housing%20Needs%20Update_Finalv2.pdf)

### CORRIDOR MPO PASSENGER TRANSPORTATION PLAN

[http://www.corridormpo.com/images/files/Publications/Corridor\\_MPO\\_FY\\_2012\\_PTP\\_Update\\_Final.pdf](http://www.corridormpo.com/images/files/Publications/Corridor_MPO_FY_2012_PTP_Update_Final.pdf)

### COUNTY HEALTH RANKINGS

<http://www.countyhealthrankings.org/>

### IOWA KIDS COUNT DATA CENTER

<http://www.cfpciowa.org/index.cfm?nodeID=70548&audienceID=1>

### IOWA ACES RESEARCH

<http://www.iowaaces360.org/iowa-aces-research.html>

### SHE MATTERS: ISSUES AND ACTIONS

<http://www.iwlcleads.org/Content/State-of-Women-in-Iowa/Research/SHE-MATTERS-2015-ISSUES-and-ACTIONS-report.aspx>

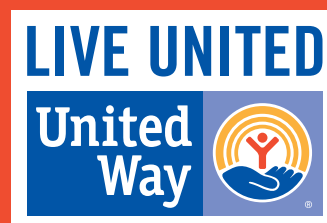
### WORKFORCE AND ECONOMIC DEVELOPMENT REGIONAL STATUS REPORT

[http://www.iowaworkforce.org/lmi/labsur/status\\_reports/Status%20Report\\_Region1online.pdf](http://www.iowaworkforce.org/lmi/labsur/status_reports/Status%20Report_Region1online.pdf)



**United Way  
of East Central Iowa**

[UnitedWayofEastCentrallowa.org](http://UnitedWayofEastCentrallowa.org)



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