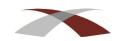
Indiana Community Needs Assessment Conducted for the Indiana Housing and Community Development Authority



334 N. Senate Avenue, Suite 300 Indianapolis, IN 46204





Indiana Community Needs Assessment Conducted for the Indiana Housing and Community Development Authority

April 2015 15-C22

Authors

Sue Burow Senior Policy Analyst IU Public Policy Institute

Laura Littlepage Clinical Lecturer IU Public Policy Institute

Jessica Majors Graduate Assistant IU Public Policy Institute

Acknowledgements	ii
List of Tables	iii
List of Maps	
List of Figures	iv
Executive Summary	1
Stakeholder detail current conditions in community discussions	1
Client Demographics	1
Mobility	
Adults Skills and Finances	
Household Support and Nutrition	2
Housing Affordability and Maintenance	
CAA Evaluation	3
Introduction	5
Methodology	5
Service Area Overview	6
Current Conditions	
Stakeholder Focus Groups Results	9
Poverty Overview	11
Demographics – State and Client Population	12
Financial Services	34
Health Insurance	37
Community Needs	
CAA Evaluation	44
Data from CAA Stakeholder Surveys	
CAA Programs and Services	45
Community Needs	
CAA Employee Survey	50
Conclusion	
Appendix A: MSA Areas by County	
Appendix B: Change in Poverty by CAA, 2009 – 2013	
Appendix C: Number of establishments providing check cashing services, by county	55
Appendix D. Number of establishments providing cash advance services (small loan	
lenders), by county	56



IU Public Policy Institute 334 North Senate Avenue, 3rd Floor, Indianapolis, Indiana 46204 (phone) 317.261.3000 (fax) 317.261.3050 www.policyinstitute.iu.edu



Acknowledgements

We would like to thank the six Community Action Agencies who hosted and invited participants for each of the focus groups.



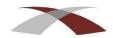
List of Tables

Table 1: Population and change in populations by Metropolitan Statistica		
Table 2: Indiana Population by age, 2009 and 2013		14
Table 3: Age of individuals served by CAAs, Indiana, 2010-2013		15
Table 4: Indiana population growth by race, 2009 and 2013		16
Table 5: Race of individuals served, CAA clients, Indiana, 2010-2013		
Table 6: Hispanic or Latino Population, Indiana and the U.S., 2009 and 2	2013	16
Table 7: Ethnicity of individuals served, % of CAA clients, Indiana, 2010-	2013	17
Table 8: Households, totals and % change, Indiana and the U.S., 2009 a	and 2013	17
Table 9: Household type of those served, % of CAA clients, Indiana, 201		
Table 10: Family size of those served, % of CAA clients, Indiana, 2010-2	2013	18
Table 11: Employment status of other adults in the household, as reported	ed by survey respondents, CAA clients, Indiana, 2014	19
Table 12. Unemployment rates and % change in per capita and median	household incomes, by Indiana MSA, 2009-2013	21
Table 13. Disability status of individuals served, % of CAA clients, Indian	a, 2010-2013	21
Table 14: Employment status of CAA clients, as reported by survey resp		
Table 15: Barriers to employment, as reported by survey respondents, C		
Table 16:. Income sources of clients, % of CAA clients, Indiana, 2010-20		
Table 17: Source of family income of those served, % of CAA clients rep		
Table 18: Family income level (% of HHS Guideline), % of CAA clients, I		
Table 19: Barriers to starting a business, % of CAA clients, as reported by		
Table 20: Poverty Rates by Age, Language Spoken and Educational Atta		
Lowest and Highest Rates for each category		
Table 21: Highest level of educational attainment of adults served by CA		
Table 22: Monthly rent for housing, Indiana, 2013		
Table 23: Housing status of individuals served by CAAs, Indiana, 2010-2		
Table 24. Barriers to locating rental housing, as reported by survey response	ondents, CAA clients, Indiana, 2014	33
Table 25: Barriers to home ownership, as reported by survey responden	ts, CAA clients, Indiana, 2014	33
Table 26: Access or usage of banking services, as reported by survey re		
Table 27. Drug Arrests in Indiana, 2012; Change in Total Drug Arrests, 2		
Table 28: Top 5 clandestine lab seizure rates by Community Action Age		
Table 29: Health insurance status of individuals served by CAAs, Indiana		
Table 30: Adult skills training needs, as reported by survey respondents,		
Table 31: Financial skills training needs, as reported by survey responde	ents, CAA clients, Indiana, 2014	39
Table 32: Family support needs, as reported by survey respondents, CA		
Table 33: Health and legal support needs, as reported by survey respon-		
Table 34: Food assistance and education needs, as reported by survey		
Table 35: Maintenance and repair assistance needs, as reported by surv		
Table 36: Housing and utility needs, as reported by survey respondents,		
Table 37: CAA client feedback, as reported by survey respondents, India		
Table 38: Likelihood of referrals and recommendation, as reported by su		
Table 39. How likely are you to recommend the services from (Agency)?	.,,,	46
Table 40. Adult skills traiing needs, as reported by community stakehold		
Table 41: Financial skills training needs, as reported by community stake		
Table 42. Household family support needs as reported by community sta	keholders, Indiana, 2014	48
Table 43. Household service support needs as reported by community s		
Table 44: Food needs as reported by community stakeholders, Indiana,		
Table 45: Home insulation and repair needs as reported by community s		
Table 46: Affordable housing needs as reported by community stakehold		
Table 47: How strongly you agree or disagree with the following statement		50



List of Maps

Map 1: Indiana Community Action Agencies Service Areas	7
Map 2: Barriers to employment by CAA, as reported by survey respondents, Indiana, 2014	
Map 3: Percentage of residents with an associate's degree or higher, by county, and location of state colleges/universities,	
2013	. 30
Map 4: Adult skills training needs, as reported by survey respondents, by CAA, Indiana, 2014	. 38
Map 5: Financial skills training needs, as reported by survey respondents, by CAA, Indiana, 2014	
Map 6: Family support needs, as reported by survey respondents, by CAA, Indiana, 2014	
Map 7. Health and legal support needs, as reported by survey respondents, by CAA, Indiana, 2014	42
List of Figures	
Figure 1: Unduplicated number of individuals and families served by CAAs, Indiana, 2010-2013	. 13
Figure 2: Gender of individuals served by CAAs, Indiana, 2010-2013	. 14
Figure 3: Age of adult survey respondents, CAA clients, Indiana, 2014	
Figure 4: Age of children as reported by survey respondents, CAA clients, Indiana, 2014	
Figure 5: Change in household compoitisons, Indiana and the U.S., 2009-2013	. 18
Figure 6: Median household income and full-time earnings, by gender, Indiana and U.S. comparison, 2013	
Figure 7: Comparison of Indiana and U.S. unemployment rate and change in Indiana labor force, 2009-2013	
Figure 8: Problems locating or keeping childcare, as reported by survey respondents, CAA clients, Indiana, 2014	
Figure 9: Percentage receiving SNAP, using local food pantries, and frequency of use as reported by survey respondents, CA/	
clients, Indiana 2014	
Figure 10: Educational attainment, population 25 years and older, Indiana, 2009-2013	
Figure 11: Highest level of educational attainment as reported by survey respondents, CAA clients, Indiana, 2014	
Figure 12: Percentage of median household income and per capita Income required for state college/university tuition, Indiana	
Figure 13: Gross rent as percentage of income, Indiana and U.S. Comparison, 2013 Figure 14: Monthly owner costs as percentage of income, Indiana and U.S. comparison, 2013	
Figure 15. Vehicles available by occupied housing units, Indiana, 2013	
Figure 16. Reason for not having access to reliable transportation, as reported by survey respondents, CAA clients, Indiana, 2014	
Figure 17. Overall how would you rate the programs and services offered by (Agency)?	45
Figure 18. How would you rate their delivery of services?	
Figure 19: What is the level of public awareness regarding the services that the (Agency) provides?	
Figure 20: In your experience, what is the best way to keep up-to-date with other programs' services and eligibility guidelines?	



Executive Summary

Stakeholder detail current conditions in community discussions

Six regional focus groups were held with stakeholders. During each focus group session, participants discussed the current conditions in the area, greatest needs, and possible strategies for addressing these needs. There were several common trends including poverty rates, employment issues, public transportation, mental health services (including substance abuse), homelessness, affordable housing, and education needs.

Client Demographics

Indiana's 22 Community Action Agencies (CAAs), served 1,030,819 individuals or 16 percent of the total state population in 2013. This is an increase from 2010 and 2012.

While children (under 18) were 24 percent of the state's population in 2013, they were 39 percent of individuals served by CAAs. The percent of clients over 55 has increased since 2010.

Sixty percent of survey respondents indicated their household included non-householder adults 18 and over. Twenty percent of these adults were disabled and 21 percent were unemployed.

The percent of individuals served by a CAA who are disabled increased from 17 percent in 2010 to 24 percent in 2013.

Mobility

Half of Indiana's counties are outside a major metropolitan area and therefore the ability of residents to travel to work, school, and health care appointments can be difficult without transportation. In 2013, 7 percent of households in Indiana were without a vehicle.

Indianapolis has the largest percentage of households without a vehicle. While, almost 23 percent of households without a vehicle reside in rural areas outside of a MSA.

Most (80 percent) respondents to the CAA client survey report access to reliable transportation. Of the 20 percent who did not, not owning a car was cited most frequently as the reason.

Adults Skills and Finances

Indiana's overall poverty rate is lower than the U.S. poverty rate. It is also lower for seniors and residents who have a high school degree or less, but higher for children and Spanish speakers. The highest poverty rates for Indiana, as a whole and for individual counties, occur among residents who speak Spanish or a language other than English.

The full-time earnings for both male and female full-time workers in Indiana lags behind the U.S. median earnings. The gap between the national and Indiana median earnings for female full-time workers is larger than the gap for the male median earnings. This wage gap is particularly relevant for females, as single-parent families, led by a female householder, make up 25 percent of the households with children in Indiana. The median household income in Indiana is \$5,000 less than the U.S. median household income.

Client survey respondents were asked to provide feedback on a number of factors related to greater adult skills (often linked to increased employability and income). The factors included



employment qualifications and skills and access to job opportunities. The client survey results show relatively consistent rankings across all areas. However, the need for financial aid was listed as most needed or somewhat needed most frequently. Whereas, stakeholders listed the need for computer skills training as most needed.

When asked about their need for financial skills training, nearly half of the respondents selected budgeting money as most needed or somewhat needed. Similar results were obtained from the stakeholder survey.

Most respondents to the CAA client survey indicated that they have a checking account, but only 37 percent indicated that they had a savings account, and almost 20 percent indicated that they used check cashing or cash advance services.

Household Support and Nutrition

The Family Household Support section of the survey included questions about the need for parenting skills training, childcare, youth and teen programs, and support for caregivers. For many households, the years before children are school age or times when school is out are the primary concerns.

Survey respondents listed the need for teen and youth programs most often, with childcare needs not far behind. With the percentage of Indiana's senior population growing, the demand for support for caregivers may grow over time. This is similar to the stakeholder survey responses and may identify a wide demand for services.

Survey respondents were asked to provide input on the need for food assistance and nutritional education. The demand for food assistance is closely tied with the need to access SNAP and food pantries, while the need for nutrition education provides insight on the growing obesity epidemic.

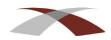
Over 70 percent of CAA clients reported that food assistance was either most needed or somewhat needed. Over 50 percent reported a need for nutrition education, but almost one-third said this was not needed. The stakeholder responses differ from the client responses for this topic. Stakeholders see an increased demand for food assistance (87 compared to over 70 percent), and a greater need for nutrition education (94 versus 56 percent). These differences may indicate the need for additional information for this topic or a closer examination by CAA.

Housing Affordability and Maintenance

Overall, 50 percent of Indiana renters spend 30 percent or more of their monthly income on rent and utilities. However, Indiana has fewer homeowners with excessive housing costs compared to the national average.

Over 25 percent of CAA clients surveyed indicated that they were dissatisfied with their current housing. The expense of heat and utilities was the most common reason for dissatisfaction. For those who are looking for housing, the most cited reasons for having a problem locating rental housing were financial. For those who indicated that they would be interested in home ownership, the main barrier that respondents identified was not being able to afford the down payment.

CAA clients were asked to provide feedback on the need for rent and mortgage assistance, utility payment assistance, homeless services, and down payment assistance.



Over 80 percent reported that utility payment assistance was most needed or somewhat needed. Of all the community needs topics, this received the largest response. Notably, over 27 percent reported that homeless services were not needed.

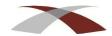
CAA clients were asked to share the demand for home insulation and weatherproofing and removal and repair of condemned and vacant homes. As reported earlier, clients often need assistance paying their utility bills. Increasing or improving insulation and weatherproofing can help lower heating and cooling costs.

The survey responses show over 50 percent reporting insulation and weatherproofing assistance as most or somewhat needed. Stakeholders reported the need for weatherization assistance at 93 percent. This is more in line with the reported need for utility assistance (71 percent) and may signal a need for increased education regarding the potential uility cost savings of home insulation and weatherization. Finally, respondents to the client survey reported a lower need for down payment assistance than did the stakeholders (56 versus 78 percent, respectively).

CAA Evaluation

Clients responding to the survey provided very favorable feedback on the CAA staff and programs this is very similar to the 90 percent of stakeholder respondents would rate the CAA programs as good or excellent. CAA clients also were asked how likely they were to recommend CAA services and programs and to share how likely they were to return to the CAA for assistance in the future. Ninety-seven percent said they were likely or highly likely to recommend the CAA program and services. Ninety-five percent were likely or highly likely to return for services in the future.





Introduction

The Community Services Block Grant (CSBG) is funded by the U.S. Department of Health and Human Services. The Indiana Housing and Community Development Authority (IHCDA) is the state oversight agency for this federal block grant program. Funds made available through this grant are used to support activities that alleviate poverty for low-income families and individuals at or below 125 percent of the federal poverty level. Indiana receives approximately \$9 million annually. By regulation, 90 percent of the funds are allocated to private nonprofits or local units of government that provide self-sufficiency programs. In Indiana, funds are allocated to the state's 22 Community Action Agencies (CAA). According to federal regulations, the state and the CAAs are required to conduct a community needs assessment. The goals of the community needs assessment are to identify the current state of low-income families and to identify gaps in services for low-income families within local communities.

Methodology

The data required to support this report come from three groups of data. First, qualitative data were gathered from six regional focus groups with stakeholders (one urban and one rural in each of the three regions—north, central, and south). During each focus group session, participants discussed the current conditions in the area, greatest needs, and possible strategies for addressing these needs. This information provided a better sense of conditions across the state and aided in the identification of additional data sources to be used or data collection methods to be deployed.

Second, quantitative data were collected from the U.S. Census Bureau, Indiana Business Research Center, Uniform Crime Reporting Data, Indiana Methamphetamine Investigation System, Indiana Department of Financial Institutions, and the Indiana Community Services Block Grant Data. These data are used to provide detail regarding client demographics (population, gender, age, race, ethnicity, family size, household type, educational attainment, and income), use of financial services, health insurance coverage, and substance abuse and arrest.

Third, several surveys were conducted at all CAA locations. Each CAA was asked to distribute a survey to their clients. The surveys were made available in multiple formats including paper, electronic, and Spanish-language versions. The initial survey instrument included questions to supplement and support the quantitative data collected from secondary sources. The survey also asked clients to identify and weight community needs in six categories: adult skills training, financial skill training, household support, food, home maintenance and repair, and affordable housing. Lastly, the survey asked clients to rate the programs and services of the local CAA. There were 5.950 total client surveys completed.



Service Area Overview

Twenty-two Community Action Agencies (CAAs) serve Indiana's 92 counties. These CAAs make up the Indiana Community Action Network. The following agency listing and map detail the location and counties of the CAAs.

1. AREA FIVE: Area Five Agency on Aging & Community Services, Inc.

Logansport

Cass, Howard, Miami, Tipton, Wabash

2. AREA IV: Area IV Agency on Aging & Community Action Programs

Lafayette

Carroll, Clinton, Tippecanoe, White

3. CAGI: Community Action of Greater Indianapolis

Indianapolis

Boone, Hamilton, Hendricks, Marion

4. CANI: Community Action of Northeast Indiana

Fort Wayne

Allen, DeKalb, LaGrange, Noble, Steuben, Whitley

5. CASI: Community Action of Southern Indiana. Inc.

Jeffersonville

Clark, Floyd, Harrison

6. CAPE: Community Action Program of Evansville and Vanderburgh County, Inc.

Evansville

Gibson, Posey, Vanderburgh

7. CAPWI: Community Action Program, Inc. of Western Indiana

Covington

Benton, Fountain, Montgomery, Parke, Vermillion, Warren

8. CFSI: Community and Family Services, Inc.

Portland

Adams, Blackford, Huntington, Jay, Randolph, Wells

CICAP: Central Indiana Community
 Action Program Anderson
 Grant. Madison

10. HOOSIER: Hoosier Uplands Economic Development Corp.

Mitchell

Lawrence, Martin, Orange, Washington

11. HSI: Human Services, Inc.

Columbus

Bartholomew, Decatur, Jackson, Johnson, Shelby

12. ICAP: Interlocal Community Action Program, Inc.

New Castle

Delaware, Fayette, Hancock, Henry, Rush, Wavne

13. LHDC: Lincoln Hills Development Corporation

Tell City

Crawford, Perry, Spencer

14. NCCAA: North Central Community Action Agencies, Inc.

Michigan City

LaPorte, Pulaski, Starke

15. NWICA: Northwest Indiana
Community Action Corporation
Crown Point

Jasper, Lake, Newton, Porter

16. OVO: Ohio Valley Opportunities

Madison

Jefferson, Jennings, Scott

17. PACE: Pace Community Action Agency

Vincennes

Daviess, Greene, Knox, Sullivan

18. REAL: Real Services

South Bend

Elkhart, Fulton, Kosciusko, Marshall, St. Joseph

19. SCCAP: South Central Community Action Program, Inc.

Bloomington

Brown, Monroe, Morgan, Owen

20. SIEOC: Southeastern Indiana Economic Opportunity Corporation

Aurora

Dearborn, Franklin, Ohio, Ripley, Switzerland, Union

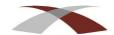
21. TRI-CAP: Dubois-Pike-Warrick Economic Opportunity Committee Jasper

Dubois, Pike, Warrick

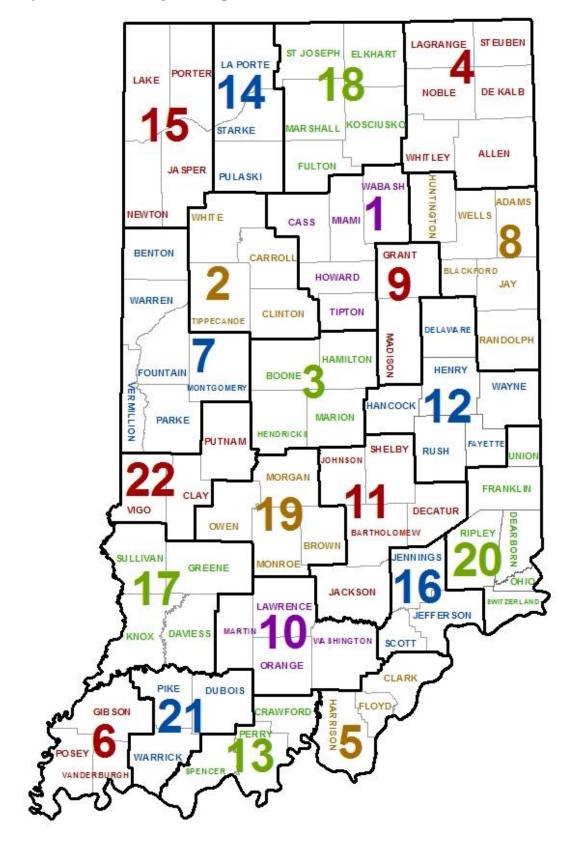
22. WICAA: Western Indiana Community Action Agency, Inc.

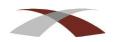
Terre Haute

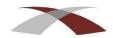
Clay, Putnam, Vigo



Map 1: Indiana Community Action Agencies service areas







Current Conditions

Stakeholder Focus Groups Results

Six regional focus groups were held with stakeholders (one urban and one rural in each of the three regions—north, south, and central). During each focus group session, participants discussed the current conditions in the area, greatest needs, and possible strategies for addressing these needs. There were several common trends including poverty rates, employment issues, public transportation, mental health services (including substance abuse), homelessness, affordable housing, and education needs.

Some participants stated that poverty is often hidden and therefore many are not aware of the problems the area faces. For example, Hamilton County has had an increase in requests for public assistance because families have moved to the area for the school system but cannot afford the cost of housing and transportation in the area.

Employment needs varied among the areas; however, all participants expressed the need for increased employment opportunities. In some areas, the inability to pass a drug screening process to obtain employment has become an issue. This hindrance increases the level of poverty in the areas. While some areas are struggling to find employers willing to hire convicted felons, one participant expressed that the area has an employer willing to hire felons, but the lack of transportation hinders employment. Lack of transportation hindering employment was also mentioned in most of the areas. Participants expressed a need for entry level or low skill jobs that pay a living wage in all areas. Additionally, each area noted that there is a definite need to incentivize people to take a job or a promotion instead of relying on public assistance.

All areas expressed concern about public transportation. Participants stated that the lack of transportation, or the limited hours of available transportation, makes it difficult for clients to get to work, appointments, and school. One participant mentioned that lack of public transportation means homeless persons were not able to get to job interviews and therefore miss out on job opportunities.

Participants had several suggestions for ways to increase the public transportation opportunities. The first suggestion is to extend the hours and service areas that public transportation covers. Another suggested that they would like to find a legal way to be able to use school buses to help bridge the gap between the availability and need for public transportation. Some communities suggested that neighboring communities could pool their resources to purchase a van for transportation and create a fund that would cover maintenance and possibly the purchase of more vehicles as needed.

Participants also were concerned about the walkability (and ability to ride a bike) in their communities because of lack of sidewalks and/or bike lanes. They would like a safer environment for clients to walk or bike safely to work or other appointments. Respondents also suggested municipalities implement policies that require developers to build sidewalks in communities.

Each group discussed the need for more mental healthcare services, including substance abuse programs. Currently, some areas are relying on religious organizations for limited counseling, but participants stressed the need for more services. While a few areas do have larger mental healthcare facilities nearby, the lack of transportation hinders the ability for clients to keep



appointments and seek treatment. Participants would like to see more funding for doctors and nurses for these services.

Substance and drug abuse was closely tied to mental healthcare in discussions. Each group indicated that the problem of drug abuse was becoming increasingly worse. Lack of treatment for substance abuse is a problem most areas are currenly trying to handle. Clients attempting to seek treatment are often unable to find a treatment center in the area,often have to find a way to commute to a larger city to seek treatment. Most strategies that participants offered were changes to policies and laws. For example, participants would like to see a change in the policies for housing programs to allow clients with drug convictions to be eligible for the programs. Participants would also like an increase in funding for substance abuse programs.

Homelessness was an issue in each area. The lack of shelters, drug abuse programs, and mental health services all increase the need for additional services for this population. Access to better, more affordable transitional housing was also mentioned. Participants would like to see a reduction in the amount of time individuals spend locating and obtaining assistance so they can focus more time on increasing education or skill levels. Participants expressed the need for a way to identify clients who need homelessness services, and suggested a day center, perhaps funded by the United Way, could coordinate services for this population. It was also suggested using local churches as food pantries, and temporary housing may help alleviate some of the burden to find temporary housing.

Participants in each session expressed the need for more affordable housing options. Some areas are experiencing a decrease in the number of property owners willing to take part in Housing Choice Vouchers (often referred to as Section 8 housing). The number of people who have excessive housing burden (housing costs are more than 30 percent of monthly income) has become an issue for the areas. Participants mentioned the need for funding to rehabilitate homes, especially for elderly clients or clients whose homes require renovation to qualify for weatherization programs. Participants discussed ways to increase the availability of affordable housing and suggested that communities will have to become creative in solving the issue. Strategies suggested included finding alternative means for high-risk borrowers to obtain housing loans, and using YMCA's/boarding houses as a source of temporary housing. Participants also expressed a need for an increase to the IHCDA housing tax credits.

All six groups noted that there were educational needs in their communities. Participants noted that clients move frequently which makes it difficult for schools to keep accurate records of students and whether the educational needs of the students are being met. Participants suggested that implementing tutoring and mentoring programs, as well as advocating for free full day pre-kindergarten, could help with some of the education needs. Each area has seen an increase in the number of students who are eligible for free or reduced lunches, and expressed concern about food insecurities for the children when they are not at school. One rural county indicated there is a need for increased salaries for teachers to keep them in the area and invested in the community. Another area suggested that Goodwill teach English as a Second Language and have a corporate partner sponsor the program. It was also suggested that more information regarding vocational education and training be distributed, and perhaps the Boys and Girls Clubs could help teach trade skills.



Poverty Overview

Indiana has had a 19.7% increase in the number of people who are living in poverty from 2009 to 2013. Table 1 details the poverty rates for 2009 and 2013 for each Metropolitan Statistical Area (MSA) and for the counties not included in a MSA. Half of Indiana's counties are located in an MSA. Only Indiana counties are included in the populations for MSAs where the principal city is outside Indiana. The map in Appendix A details the counties that are part of each MSA and the counties that are outside of a MSA.

The three Indiana counties that are included in the Cincinnati – Middletown, OH MSA are Decatur, Franklin and Ohio. These counties had the largest percent increase in Indiana from 2009 to 2013. The Bloomington MSA, which is comprised of only Monroe County, has had the smallest increase in poverty.

The percentage of Indiana's population living in a rural area (all other counties not in MSA) has remained relatively constant from 2009 to 2013, 22 percent and 21.7 percent, respectively. The percentage of the rural population in poverty has also remained constant at 21.9 percent and 21.1 percent respectively.

Table 1. Change in poverty by Metropolitan Statistical Area, 2009 to 2013

	Poverty Rate				
MSA Area	2009	2013	% Change 2009- 2013		
Bloomington MSA	19.5%	19.8%	7.4%		
Chicago, IL MSA - Gary, IN Division	14.0%	15.3%	9.6%		
Cincinnati - Middletown, OH MSA	10.1%	13.0%	31.5%		
Columbus MSA	9.5%	11.8%	29.1%		
Elkhart - Goshen MSA	12.5%	16.3%	29.7%		
Evansville MSA	11.7%	13.0%	14.1%		
Fort Wayne MSA	10.9%	14.0%	31.1%		
Indianapolis MSA	11.2%	13.8%	27.9%		
Kokomo MSA	13.9%	15.3%	9.5%		
Lafayette - West Lafayette MSA	17.0%	18.2%	13.9%		
Louisville, KY MSA	11.0%	12.7%	18.4%		
Michigan City - LaPorte MSA	11.7%	15.2%	30.6%		
Muncie MSA	18.3%	20.8%	16.0%		
South Bend - Mishawaka MSA	13.0%	16.9%	29.4%		
Terre Haute MSA	16.0%	17.3%	9.9%		
All other counties not in MSA (46)	12.6%	14.4%	15.2%		
Indiana Total	12.6%	14.8%	19.7%		

Source: Indiana Business Research Center, STATS Indiana; 2009 and 2013; U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates 2009 U.S. Census Bureau MSA definitions

Table 2 displays the change in total poverty, poverty among children under 18 and poverty for seniors by CAA. Hoosier Uplands and PACE are the only two CAAs that did not have an increase in total poverty rate between 2009 and 2013. H.S.I. had the largest overall increase in poverty (33.2 percent). PACE is the only CAA that showed a decline in poverty rates for all three categories.



OVO had the largest increase in children under 18 in poverty for this time period. As later discussed, OVO also has the highest number of drug arrests (of all ages) per 1,000 people in Indiana. The large amount of drug use may be a contributing factor to this high increase in child poverty.

The number of Indiana's senior population (65 years and older) who are in poverty has remained the same from 2009 to 2013. The largest change in poverty rates for this age group occurred in Tri-Cap. There was a decrease in senior poverty by 32.6 percent. This area had an 18.4 percent increase in the overall population of residents who are 65 and older. While all CAAs had an overall incease in residents who are 65 and older, less than half of the CAAs had an increase of seniors are are living at or below poverty level.

The map in Appendix B shows the rate of change for total poverty by CAA.

Table 2: Change in Poverty by CAA, 2009-2013

CAA	Total Poverty	Under 18	65 and Older
Area 5	14.0%	15.2%	-11.8%
Area IV	12.1%	20.3%	-4.1%
CAGI	26.5%	27.0%	10.4%
CANI	28.3%	28.9%	11.5%
CAPE	10.2%	7.9%	3.2%
CAPWI	13.4%	18.9%	-14.8%
CASI	23.5%	19.2%	11.2%
CFSI	20.4%	24.5%	-1.8%
CICAP	21.1%	24.7%	-3.5%
H.S.I.	33.2%	32.8%	1.6%
Hoosier Uplands	-4.9%	1.1%	-16.1%
ICAP	26.7%	38.4%	7.1%
LHDC	4.1%	-1.2%	-10.9%
NCCAA	23.3%	18.3%	12.1%
NWICA	9.6%	5.1%	3.2%
OVO	17.3%	39.3%	-18.1%
PACE	-6.8%	-15.2%	-7.3%
REAL	29.7%	32.8%	-3.6%
SCCAP	14.6%	16.4%	-0.9%
SIEOC	23.4%	31.5%	2.0%
TRI-CAP	20.0%	35.4%	-32.6%
WICAA	5.4%	4.9%	-21.3%
Indiana Total	19.7%	21.1%	0.0%

Source: Indiana Business Research Center, STATS Indiana; 2009 and 2013; U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates 2009 U.S. Census Bureau MSA definitions

Demographics – State and Client Population

Indiana's population increased 2.3 percent from 2009 to 2013, less than the U.S. total population growth of 3.3 percent. Table 3 details the changes in population by MSA. Only Indiana counties are included in the populations for MSAs where the principal city is outside Indiana. Counties in the Lafayette and Bloomington MSAs have had the highest rate of population growth, while the Kokomo and South Bend - Mishawaka MSA counties have seen a decrease in population.

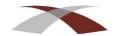


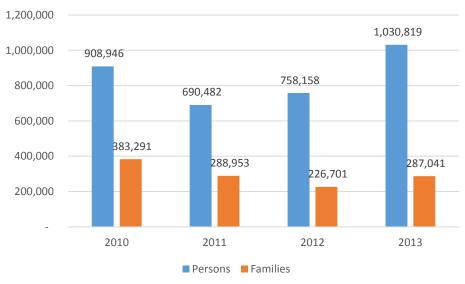
Table 3: Population and change in populations by Metropolitan Statistical Area, 2009-2013

	Total Population				
MSA Area	2009	2013	% Change 2009-2013		
Bloomington MSA	185,598	195,870	5.5%		
Chicago, IL MSA - Gary, IN Division	704,361	705,489	0.2%		
Cincinnati - Middletown, OH MSA	54,136	55,222	2.0%		
Columbus MSA	76,063	79,587	4.6%		
Elkhart - Goshen MSA	200,502	200,563	0.0%		
Evansville MSA	292,709	301,545	3.0%		
Fort Wayne MSA	414,315	424,122	2.4%		
Indianapolis MSA	1,875,075	1,953,961	4.2%		
Kokomo MSA	98,787	98,410	-0.4%		
Lafayette - West Lafayette MSA	196,329	209,027	6.5%		
Louisville, KY MSA	248,351	256,125	3.1%		
Michigan City - LaPorte MSA	111,063	111,281	0.2%		
Muncie MSA	115,192	117,484	2.0%		
South Bend - Mishawaka MSA	267,613	266,709	-0.3%		
Terre Haute MSA	169,825	172,195	1.4%		
All other counties not in MSA (46)	1,413,194	1,423,312	0.7%		
Indiana Total	6,423,113	6,570,902	2.3%		

Source: Indiana Business Research Center, STATS Indiana; 2009 and 2013; 2009 U.S. Census Bureau MSA definitions

Indiana's 22 Community Action Agencies (CAAs), served 1,030,819 individuals or 16 percent of the total state population in 2013. This is an increase of 36 percent from 2012 and 13 percent from 2010. The number of families served increased by 27 percent from 2012 but decreased by 25 percent since 2010 (Figure 1).

Figure 1: Unduplicated number of individuals and families served by CAAs, Indiana, 2010-2013



Source: Indiana Community Services Block Grant Data, 2010-2013



Gender

In 2013, 59 percent of the CAAs clients were females, consistent with the previous years, but higher than the state percent female (50.7) (Figure 2).

70% 60% 59% 59% 59% 60% 50% 41% 41% 40% 41% 40% Male 30% ■ Female 20% 10% 0% 2010 2011 2012 2013

Figure 2: Gender of individuals served by CAAs, Indiana, 2010-2013

Source: Indiana Community Services Block Grant Data, 2010-2013

Age

In Indiana, the largest change in population by age between 2009 and 2013 occurred within the 65 and older category—an increase of 10.4 percent. Current population projections suggest that this category will increase even more in the future as a percent of total population (Table 4).

Table 4: Indiana population by age, 2009 and 2013

	20	2009		2013		
Age	Population	% of Total Population	Population	% of Total Population	Change in Population, 2009-2013	
< 5 years	445,604	6.9%	420,815	6.4%	-5.6%	
5 - 17 years	1,143,761	17.8%	1,165,212	17.7%	1.9%	
18 - 24 years	643,920	10.0%	666,413	10.1%	3.5%	
25 - 44 years	1,689,050	26.3%	1,669,039	25.4%	-1.2%	
45 - 64 years	1,672,187	26.0%	1,734,390	26.4%	3.7%	
65 or older	828,591	12.9%	915,033	13.9%	10.4%	

Source: U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates

While children (under 18) were 24 percent of the population in 2013, they were 39 percent of individuals served by CAAs, slightly down from 41 percent in 2010 (Table 5). The percent of clients over 55 has increased from 17 percent in 2010 to 21 percent in 2013. Results from the client survey showed a similar pattern in age of client (Figure 3).

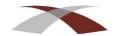
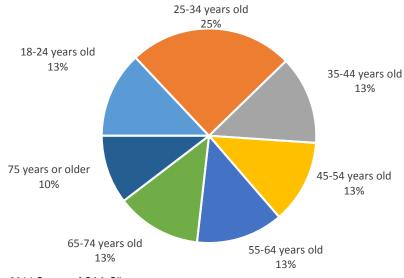


Table 5: Age of individuals served by CAAs, Indiana, 2010-2013

Year	< 5	5-17	18-23	24-44	45-54	55 or older
2010	15%	26%	8%	24%	10%	17%
2011	16%	25%	7%	23%	11%	18%
2012	14%	26%	8%	23%	10%	20%
2013	13%	26%	7%	23%	11%	21%

Source: Indiana Community Services Block Grant Data, 2010-2013

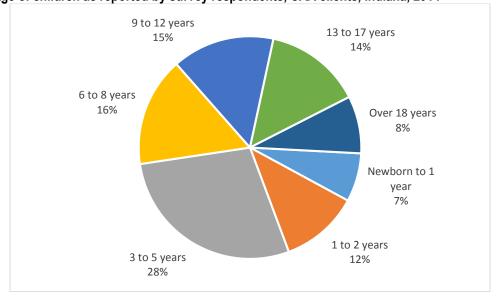
Figure 3: Age of adult survey respondents, CAA clients, Indiana, 2014



Source: 2014 Survey of CAA Clients

Fifty-three percent of survey respondents reported children living in the home. Figure 4 shows the largest age group of children as reported by survey respondents was 3-5 years old (28 percent).

Figure 4: Age of children as reported by survey respondents, CAA clients, Indiana, 2014





Source: 2014 Survey of CAA Clients

Race

Indiana is predominantly White (86 percent), however the percentage of the population who is White increased at the lowest rate (Table 6).

Table 6: Indiana population growth by race, 2009 and 2013

Race	2009	2013	% Change 2009 - 2013
White	5,436,153	5,510,618	1.4%
Black	548,998	592,954	8.0%
Asian	85,470	107,563	25.8%
Other (including Native American, Hawaiian, Pacific Islander, and Other)	160,236	167,024	4.2%
Two or More Races	111,612	136,702	22.5%

Source: U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates

The percent of clients who identify as White increased from 67 percent in 2010 to 71 percent in 2013, while those who identify as Black or African American, decreased from 26 percent to 23 percent (Table 7).

Table 7: Race of individuals served, CAA clients, Indiana, 2010-2013

Year	White	Black or African American	American Indian and Alaska Native	Asian	Native Hawaiian and Other Pacific Islander	Other Race	Multi-Race
2010	67%	26%	0%	0%	0%	3%	3%
2011	72%	22%	0%	0%	0%	2%	3%
2012	73%	21%	1%	0%	0%	2%	4%
2013	71%	23%	0%	0%	0%	3%	3%

Source: Indiana Community Services Block Grant Data, 2010-2013

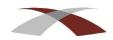
Ethnicity

The Hispanic or Latino population grew at a faster rate from 2009 to 2013 in Indiana than for the United States as a whole, and Hispanic or Latino are 6.4 percent of the population in Indiana (Table 8). While Marion and Lake counties have the largest Hispanic populations, Switzerland and Warren counties have experienced the largest increase in Hispanic or Latino populations during that time period.

Table 8: Hispanic or Latino Population, Indiana and the U.S., 2009 and 2013

	2009	2013	% Change 2009 - 2013
Indiana	321,320	400,788	24.7%
U.S.	45,476,938	51,786,591	13.9%

Source: U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates



Five percent of clients served by the CAAs were of Hispanic or Latino origin and that has remained consistent since 2010 (Table 9).

Table 9: Ethnicity of individuals served, % of CAA clients, Indiana, 2010-2013

Year	Hispanic or Latino	Non-Hispanic or Latino
2010	5%	95%
2011	5%	95%
2012	5%	95%
2013	5%	95%

Source: Indiana Community Services Block Grant Data, 2010-2013

Household Composition

The total number of households with children under 18 has declined in Indiana and nationwide (Table 10). There has also been a decline in married with children households. While single parent family households have remained stagnant or declined in Indiana, these households have grown in the nationally. The increase in households with seniors living alone is also important to note as this segment of Indiana's population continues to grow and may have additional community needs.

Table 10: Households, totals and % change, Indiana and the U.S., 2009 and 2013

	2009	2013	Indiana % Change 2009 - 2013	U.S. % Change 2009 - 2013
Total households	2,468,006	2,481,793	0.6%	2.7%
Households with children	766,321	734,537	-4.1%	-2.1%
Married	523,774	492,012	-6.1%	-4.2%
Single male parent	60,319	59,485	-1.4%	4.1%
Single female parent	182,228	183,040	0.4%	2.4%
Single householders, 65 or Older	232,479	244,196	5.0%	7.9%

Source: U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates

Figure 5 details the composition of residents in households in Indiana. From 2009 to 2013, Indiana has had a decrease in the number of spouses living in households, while there was a slight increase of spouses in the United States. The number of households where other relatives live together has increased two times as much as the national total. For the United States, the number of unmarried partners living in households has increased faster than Indiana. However, the large increase in other relatives, but not in unmarried partners in Indiana suggests that more households in Indiana are made of up non-traditional families and less of spousal and partner households.

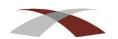
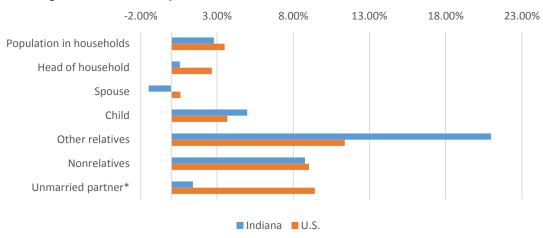


Figure 5: Change in household compositions, Indiana and the U.S., 2009-2013



Source: U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates *Unmarried partner is a subcategory of Nonrelatives.

Clients in single person households increased from 37 percent in 2010 to 42 percent in 2013, the largest category of household type (Table 11). Households with children decreased from 50 percent in 2010 to 41 percent in 2013.

Table 11: Household type of those served, % of CAA clients, Indiana, 2010-2013

Year	Single Person Household	Single Parent, Female-Headed Household	Single Parent, Male-Headed Household	Two Parent Household	Two Adults, No Children Household	Other Household Types
2010	37%	30%	4%	16%	8%	4%
2011	39%	27%	4%	16%	9%	5%
2012	39%	28%	2%	15%	9%	6%
2013	42%	26%	2%	13%	9%	7%

Source: Indiana Community Services Block Grant Data, 2010-2013

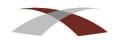
Almost two-thirds of the clients served were in families with one or two members (64 percent) in 2013, an increase from 59 percent in 2010 (Table 12).

Table 12: Family size of those served, % of CAA clients, Indiana, 2010-2013

		Number of People in Family								
Year	1	1 2 3 4 5 6 7								
2010	39%	20%	17%	13%	7%	3%	1%	1%		
2011	39%	21%	17%	13%	7%	3%	1%	1%		
2012	40%	21%	17%	12%	6%	3%	1%	1%		
2013	43%	21%	15%	11%	6%	2%	1%	0%		

Source: Indiana Community Services Block Grant Data, 2010-2013

The presence of other adults in the home can be due to many things. It could be an elderly parent who needs care or an adult child that needs to move home because of job loss or mortgage foreclosure. Regardless of the reason, the situation may present additional challenges



to the household and may indicate financial hardship. Sixty percent of survey respondents indicated their household included non-householder adults 18 and over. Twenty percent of these adults were disabled and 21 percent were unemployed (Table 13).

Table 13: Employment status of other adults in the household, as reported by survey respondents, CAA clients, Indiana, 2014

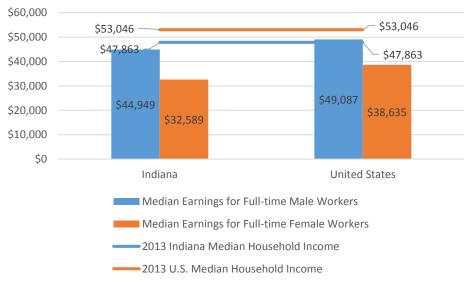
Employment status	% of Respondents
Disabled	20%
Full-time	34%
Full-time, still looking for additional work/higher income	5%
Part-time	9%
Part-time, looking for work	3%
Retired	7%
Unemployed, looking for work	15%
Unemployed, not looking for work	6%

Source: 2014 Survey of CAA Clients

Employment

The full-time earnings for both male and female full-time workers in Indiana lags behind the U.S. median earnings (Figure 6). The gap between the national and Indiana median earnings for female full-time workers is larger than the gap for the male median earnings. This wage gap is particularly relevant for females, as single-parent families, led by a female householder, make up 25 percent of the households with children in Indiana. The median household income in Indiana is \$5,000 less than the U.S. median household income.

Figure 6: Median household income and full-time earnings, by gender, Indiana and U.S. comparison, 2013



Source: U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates

Between 2009 and 2013, Indiana's unemployment rate decreased more than the U.S. unemployment rate (Figure 7). However, the labor force size in Indiana has decreased (1 percent) while the U.S. total labor force has increased (1 percent change). A decrease in



unemployment rate and labor force size may indicate that some job seekers have stopped searching for jobs and no longer file unemployment claims.

12.0% 3,210,000 10.3% 3,205,000 10.0% 3,200,000 7.9% 7.8% 8.0% 3,195,000 6.9% 3,190,000 6.0% 3,185,000 4.0% 3,180,000 3,175,000 2.0% 3,170,000 0.0% 3,165,000 2009 2013 Indiana Unemployment Rate U.S. Unemployment Rate Indiana Labor Force

Figure 7: Comparison of Indiana and U.S. unemployment rate and change in Indiana labor force, 2009-2013

Source: Indiana Business Research Center, STATS Indiana, Not-Seasonally Adjusted Labor Force Overview, Annual Averages

When we compare unemployment rates and the changes in per capita and median household incomes for each Indiana MSA area for 2009 to 2013, Elkhart MSA showed a decline in median household income, but experienced the largest percent increase in per capita income and the unemployment rate was cut by more than half (Table 14). Indiana counties not included in an MSA (half of all Indiana counties) show a higher increase in per capita and median household incomes than the state as a whole. The unemployment rate for these counties is similar to the entire state. Overall, while median household incomes remained stagnant or changed very little from 2009 to 2013, the per capita incomes of each MSA area increased by at least 10 percent. However, the per capita income for these areas are still lower than the U.S. per capita income (not shown in table).

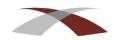


Table 14. Unemployment rates and % change in per capita and median household incomes, by Indiana MSA, 2009-2013

MSA	2009 unemployment rate	2013 unemployment rate	% change in per capita income	% change in median household income
Bloomington MSA	7.2%	6.2%	11.0%	5.9%
Chicago, IL MSA - Gary Division*	10.3%	8.1%	19.4%	2.1%
Cincinnati - Middletown, OH MSA*	11.5%	7.1%	16.2%	1.4%
Columbus MSA	9.6%	5.2%	20.7%	3.1%
Elkhart - Goshen MSA	18.0%	6.9%	22.0%	(4.5%)
Evansville MSA	8.2%	6.3%	19.8%	3.7%
Fort Wayne MSA	10.7%	6.8%	16.4%	2.0%
Indianapolis MSA	8.8%	6.4%	14.8%	1.0%
Kokomo MSA	14.5%	7.3%	16.3%	(1.2%)
Lafayette - West Lafayette MSA	9.3%	6.2%	17.2%	6.7%
Louisville, KY MSA*	9.1%	6.8%	13.9%	4.8%
Michigan City - LaPorte MSA	11.9%	8.5%	12.8%	1.0%
Muncie MSA	10.7%	7.8%	10.2%	0.2%
South Bend - Mishawaka MSA	11.5%	8.1%	10.6%	0.0%
Terre Haute MSA	10.5%	8.7%	15.5%	4.8%
All Counties Not in MSA (46)	12.0%	6.8%	18.2%	3.3%
Indiana Total	10.3%	6.9%	17.0%	2.8%

Source: U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates; 2009 U.S. Census Bureau MSA definitions

The percent of individuals served by a CAA who are disabled increased from 17 percent in 2010 to 24 percent in 2013 (Table 15).

Table 15. Disability status of individuals served, % of CAA clients, Indiana, 2010-2013

Year	Yes	No
2010	17%	83%
2011	16%	84%
2012	18%	82%
2013	24%	76%

Source: Indiana Community Services Block Grant Data, 2010-2013

The survey asked clients to share their employment status. Nearly one-quarter of all respondents reported being disabled. The same number stated they were looking for work or jobs with higher income (includes full-time still looking, part-time, looking, and unemployed, looking). Sixteen percent are retired (Table 16).

^{*}Only Indiana counties are included in the totals for MSAs where the principal city is outside Indiana.



Table 16: Employment status of CAA clients, as reported by survey respondents, Indiana, 2014

Employment status	% of Reporting
Disabled	24%
Full-time	18%
Full-time, still looking for additional work/higher income	4%
Part-time Part-time	11%
Part-time, looking for work	4%
Retired	16%
Unemployed, looking for work	16%
Unemployed, not looking for work	7%

Source: 2014 Survey of CAA Clients

Table 17 details those who reported looking for work were asked to detail what is keeping them from getting work, and could choose more than one response. Again, the most common responses were either a disability or retired. This is indicative that more people are unable to support themselves based solely on retirement or disability funds alone. Lack of childcare or problems paying for childcare were most often listed as other barriers to employment.

Table 17: Barriers to employment, as reported by survey respondents, CAA clients, Indiana, 2014

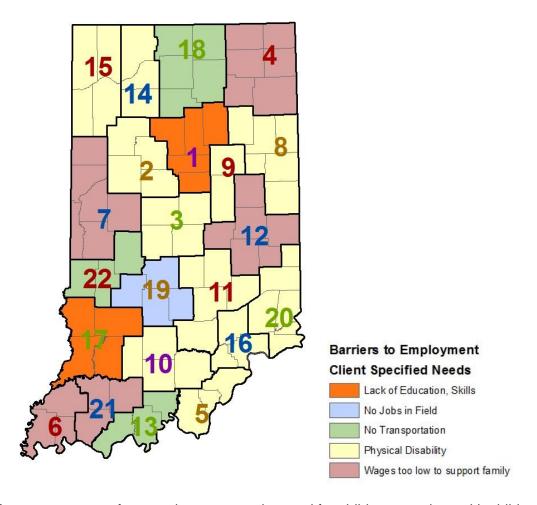
Barriers to employment	% of respondents
No jobs in my field	3%
No transportation	5%
Lack of training, education, or skills	6%
Wages too low to support family	6%
Physical disability	14%
Retired	9%
Lack of required experience	4%
Other	7%

Source: 2014 Survey of CAA Clients



Map 2 details client responses to barriers of employment by CAA. Having a physical disability was the most common barrier in eleven CAAs. Jobs with wages that are too low to support a family was a common barrier for clients, as well.

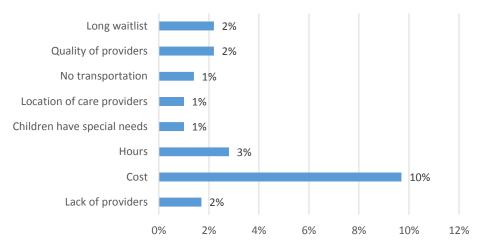
Map 2: Most common barriers to employment by CAA, as reported by survey respondents, Indiana, 2014



Fourteen percent of respondents reported a need for childcare services with children ages three to five most in need. The survey also asked if there were any problems locating childcare services. Those CAA clients who did list child care problems cited problems with cost most often (Figure 8). Hours, quality childcare options, waiting lists, and lack of providers also were mentioned as barriers. The survey also asked if individuals received help paying for childcare services. Twenty-two percent reported receiving childcare assistance.



Figure 8: Problems locating or keeping childcare, as reported by survey respondents, CAA clients, Indiana, 2014



Source: 2014 Survey of CAA Clients

Income

In 2013, 87 percent of clients reported at least one source of income, down from 94 percent in 2010 (Table 18).

Table 18: Income sources of clients, % of CAA clients, Indiana, 2010-2013

Year	One or more sources of income	Zero income reported
2010	94%	6%
2011	94%	6%
2012	94%	6%
2013	87%	13%

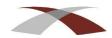
Source: Indiana Community Services Block Grant Data, 2010-2013

Of those who reported income, 40 percent indicated that at least a portion of it came from employment, an increase from 29 percent in 2010 (Table 19).

Table 19: Source of family income of those served, % of CAA clients reporting income, Indiana, 2010-2013

Year	TANF	ISS	Social Security	Pension	General Assistance	Unemployment Insurance	Employment + Other Sources	Employment Only	Other
2010	4%	10%	21%	2%	14%	7%	8%	21%	11%
2011	4%	11%	23%	3%	13%	7%	13%	20%	8%
2012	2%	12%	27%	3%	9%	6%	10%	25%	5%
2013	1%	12%	26%	3%	10%	4%	16%	24%	4%

Source: Indiana Community Services Block Grant Data, 2010-2013



The income level of clients shifted slightly between 2010 and 2013, from 67 percent at 100 percent or less of Health and Human Services (HHS) Guidelines in 2010 to 70 percent in 2013 (Table 20).

Table 20: Family income level (% of HHS Guideline), % of CAA clients, Indiana, 2010-2013

Year	Up to 50%	51% to 75%	76% to 100%	101% to 125%	126% to 150%	151% to 175%	176% to 200%	201% and over
2010	25%	19%	22%	17%	13%	2%	1%	0%
2011	24%	20%	23%	17%	13%	2%	1%	0%
2012	25%	20%	23%	18%	12%	1%	0%	0%
2013	26%	19%	24%	17%	11%	1%	0%	0%

Source: Indiana Community Services Block Grant Data, 2010-2013

Child support payments, or lack thereof, may have a tremendous impact on households. Of respondents who indicated that they were entitled to receive child support, only 30 percent reported that they receive support on a regular basis. Nearly half of these respondents reported receiving support once a month or less than once a month. It is important to note that roughly half of those who reported child support eligibility did not respond to the questions regarding receipt on a regular basis or frequency of receipt.

Entrepreneurial Nature

For those that are unemployed or underemployed, one potential option is to start a business of their own. Nearly 60 percent of those surveyed replied they would be interested in starting their own business. When asked what prevents them from proceeding, lack of finances and knowhow are the leading barriers (Table 21).

Table 21: Barriers to starting a business, % of CAA clients, as reported by survey respondents, Indiana, 2014

Barriers to business creation	% of Respondents		
Lack of finances/money	21%		
Lack of education/training	8%		
Lack of child care	3%		
Don't know how to get started	13%		
Lack of time	4%		
Not enough assistance	8%		
Too much red tape	5%		
Other	3%		

Source: 2014 Survey of CAA Clients

Poverty

Indiana's overall poverty rate is lower than the U.S. poverty rate. It is also lower for seniors and residents who have a high school degree or less, but higher for children and Spanish speakers. The highest poverty rates for Indiana as a whole and for individual counties occur among residents who speak Spanish or a language other than English.

Indiana has a lower total poverty rate than the U.S. There are only two categories where poverty rates are greater than one percent, Spanish speakers and those who speak a language other than English (Table 22).



Table 22: Poverty rates by age, language spoken, and educational attainment, 2013 for Indiana, and three counties with the lowest and highest rates for each category

Total population	Children	Seniors	English only speakers	Language other than English	Spanish speakers	Less than high school	High school or equivalent	Some college or associate	Bachelor degree or higher
United States									
15.4	21.6	9.4	13.1	20.8	24.3	27.1	13.7	10.1	4.3
Indiana									
14.9	21.8	7.3	13.7	24.0	28.5	26.2	11.9	10.1	3.8
3 lowest counties									
4.9	6.3	2.8	4.5	3.9	0	9.7	5.5	2.4	0.3
Hendricks	Hendricks	Hamilton	Hendricks	Warren	Warren	Ohio	Tipton	Hendricks	Carroll
5.1	6.7	3.3	4.7	4.8	0	10.4	5.9	2.7	0.4
Hamilton	Hamilton	Warrick	Hamilton	Vermillion	Pike	Jasper	Dubois	Warren	Adams
7.0	8.5	3.8	6.8	4.9	0	12.4	6.3	5	0.7
Warren	Boone	Hancock	Warren	Martin	Vermillion	Warren	Hendricks	Hamilton	Hancock
3 highest counties									
21.9	33.9	11.4	21.6	39.8	46.2	35.4	15.5	14.4	8.0
Switzerland	Fayette	Scott	Fayette	Crawford	Clay	Vermillion	Fayette	Vigo	Jay
22.4	34.5	11.7	21.7	39.9	52.6	35.4	15.9	15.2	8.7
Monroe	Wayne	Pulaski	Delaware	Adams	Rush	Montgomery		Jennings	Scott
22.5	38.8	14.6	23.7	56.4	58.0	36.1	16.8	16.5	8.9
Fayette	Switzerland	Crawford	Monroe	Orange	Lawrence	Harrison	Marion	Henry	Monroe

Source: U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates

Food Security

Over half of the survey respondents indicated that they received SNAP, commonly referred to as food stamps, and most of those also indicated that they used a food pantry, usually about once a month (Figure 9).

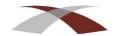
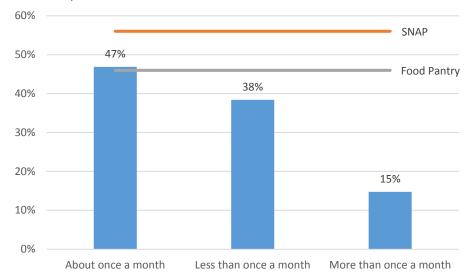


Figure 9: Percentage receiving SNAP, using local food pantries, and frequency of use as reported by survey respondents, CAA clients, Indiana 2014



Source: 2014 Survey of CAA Clients

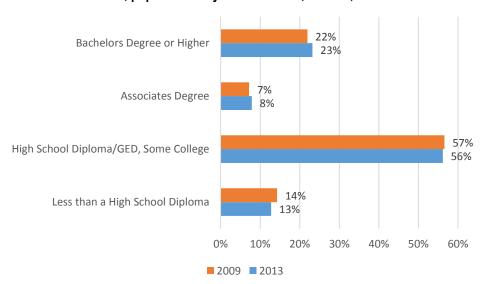
When asked questions regarding food insecurity, 27 percent indicated that they had skipped some meals, 7 percent had gone at least a day without eating, and 3 percent had children who complained of being hungry. In addition, 18 percent would like to feed their children better/healthier meals.

Of those who reported problems in obtaining food, many (47 percent) indicated that the cost of food was the issue.

Educational Attainment

Educational attainment has remained relatively unchanged from 2009 to 2013 in Indiana (Figure 10), and the state lags behind national rates.

Figure 10: Educational attainment, population 25 years and older, Indiana, 2009-2013



Source: U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates



The educational attainment of clients (24 years and older) served by the CAA network, remained relatively consistent from 2010 through 2013, except for those who had only completed to the 8th grade or below and those completing high school or equivalency from 2012-2013 (dropping from 17 percent of the population to 8 percent, and increasing from 57 percent to 66 percent, respectively) (Table 23).

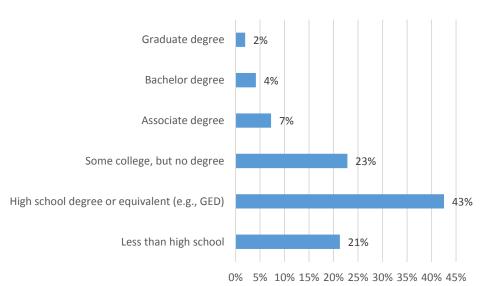
Table 23: Highest level of educational attainment of adults served by CAAs (24 Years or Older), Indiana, 2010-2013

Year	Completed some grade(s) from K- 8 th grade	Completed some grade(s) from 9-12 th grade	High school graduate or equivalency	Some post- secondary	2 or 4 year college graduates
2010	11%	23%	49%	10%	7%
2011	16%	22%	49%	7%	8%
2012	17%	26%	42%	7%	8%
2013	8%	25%	50%	7%	9%

Source: Indiana Community Services Block Grant Data, 2010-2013

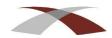
Most survey respondents (79 percent) graduated from high school with 13 percent earning a post-secondary degree of some kind (Figure 11).

Figure 11: Highest level of educational attainment as reported by survey respondents, CAA clients, Indiana, 2014



Source: 2014 Survey of CAA Clients

To understand the financial burden of college and university tuition costs on residents who are pursuing an associate's or bachelor's degree, an analysis of state university and college tuition costs was completed. The cost per academic year for each four-year and two-year public college in Indiana was obtained from the Indiana Commission for Higher Education. The averages of tuition rates for the 2009 to 2010 and 2012 to 2013 academic years were calculated. The average median household and per capita incomes for both years were also calculated.



The percentage of income required to obtain a degree continues to rise each year (13 percent from 2009 to 2013). The average per capita income for the same time period decreased 3 percent and the average median household income increased by less than 1 percent. Figure 12 displays the percentages of per capita income and median household income required to cover the average cost of tuition for a state college or university.

40% 35% 35% 32% 30% 25% 20% 15% 14% 15% 10% 5% 0% Share of Per Capita Income Share of Median Household Income **2009 - 2010 2012 - 2013**

Figure 12: Percentage of median household income and per capita income required for state college/university tuition, Indiana

Source: U.S. Census Bureau, American Community Survey, 2005-2009 and 2009-2013, 5-Year Estimates; Indiana Commission for Higher Education

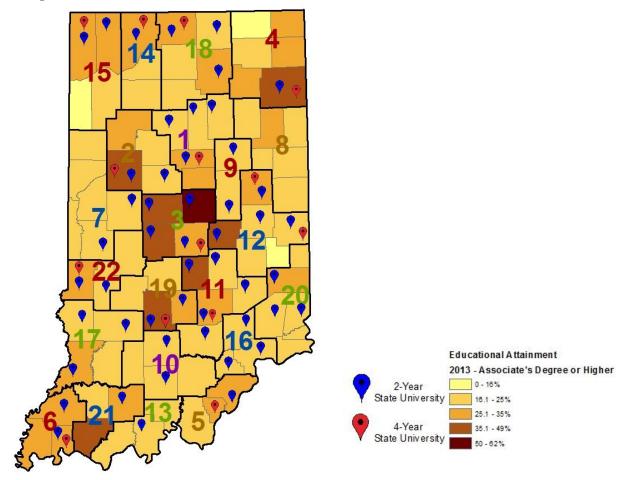
An additional analysis was done to determine the percentage of residents, by county, with an associate's degree or higher, in relation to the availability of 2- and 4-year state colleges or universities in each county. There are two main areas of Indiana where there is a lack of state colleges. The CAA area of CFSI (based in Portland) does not presently have a state college in any of the counties that make up the area. In the west central to northwest sections of Indiana, there is a gap of state college coverage as well.

There are three CAA areas that only have one location: CAPWI, LHDC, and Tri-Cap. CANI, NCCAA, both have a 2- and 4-year option, but both schools are located in the same county.

Map 3 details educational attainment by county and the location of state two and four-year universities. The west central and east central portions of the state have limited access to state universities.



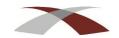
Map 3: Percentage of residents with an associate's degree or higher, by county, and location of state colleges/universities, 2013



Source: U.S. Census Bureau, American Community Survey, 2013 Five-Year Estimates; Indiana Commission for Higher Education

Housing

Seventy percent of households in Indiana own their own home, compared to 65 percent nationally. A higher percentage renters in Indiana spend less than 25 percent on housing costs than the national totals (Figure 13). However, Indiana's percentage of renters whose housing costs exceed 35 percent of their monthly income (41 percent) is very similar to the national percentage (43 percent). Overall, 50 percent of Indiana renters spend 30 percent or more of their monthly income on rent and utilities.



50.0% 41.3% 43.2% 45.0% 40.0% 35.0% 30.0% 25.0% 20.0% 12.7% 12.1% 12.9% 15.0% 11.3% 2.5% 11.6% 8.9% 10.0% 5.0% 0.0%

Figure 13: Gross rent as percentage of income, Indiana and U.S. comparison, 2013

Source: U.S. Census Bureau, American Community Survey, 2009-2013, 5-Year Estimates

20 - 24.9%

25 - 29.9%

30 - 34.9%

Table 24 shows monthly rents in Indiana in 2013. The gross median rent in Indiana was \$730, lower than the U.S. gross median rent for 2013 of \$904.

■ Indiana ■ U.S.

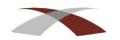
Table 24: Monthly rent for housing, Indiana, 2013

Less than 15% 15 - 19.9%

	Number of Renters	Percent of Renters		
< \$200	14,660	2.1%		
\$200 - \$299	24,651	3.5%		
\$300 - \$499	78,025	11.1%		
\$500 - \$749	256,115	36.5%		
\$750 - \$999	201,505	28.7%		
\$1,000 - \$1,499	102,356	14.6%		
<u>></u> \$1,500	23,727	3.4%		

Source: U.S. Census Bureau, American Community Survey, 2009–2013, 5-Year Estimates

Over 56 percent of homeowners in Indiana spend 20 percent or less of their monthly income on housing costs (Figure 14). Indiana also has fewer homeowners with excessive housing costs compared to the national average. The 2013 weighted average of the median housing costs (for owners with and without mortgages) in Indiana is \$896. The U.S. weighted average of median housing costs for 2013 was \$1,174.



60.0% 56.6% 48.4% 50.0% 40.0% 30.0% 22.0% 20.0% 15.5% 13.6%13.2% 8.6% 9.6% 5.7% 6.8% 10.0% 0.0% Less Than 20% 20 - 24.9% 25 - 29.9% 30 - 34.9% 35% or More ■ Indiana ■ U.S.

Figure 14: Monthly owner costs as percentage of income, Indiana and U.S. comparison, 2013

Source: U.S. Census Bureau, American Community Survey, 2009-2013, 5-Year Estimates; Homeowners with and without mortgages are combined.

The percent of CAA clients experiencing homelessness in Indiana decreased from 2 percent in 2010 to less than 1 percent (0.3 percent) in 2013, while those owning their own home increased from 34 percent to 38 percent (Table 25).

Table 25: Housing status of individuals served by CAAs, Indiana, 2010-2013

Year	Own	Rent	Homeless	Other
2010	33.8%	62.7%	2.1%	1.4%
2011	35.5%	62.5%	0.4%	1.6%
2012	35.8%	62.7%	0.5%	1.0%
2013	37.7%	61.1%	0.3%	0.9%

Source: Indiana Community Services Block Grant Data, 2010-2013

Nearly 40 percent of survey respondents said they spend more than one-third of their income on housing expenses. Over 25 percent indicated that they were dissatisfied with their current housing. The expense of heat and utilities was the most common reason for dissatisfaction. For those who are looking for housing (Table 26), the most cited reasons for having a problem locating rental housing were financial (bad credit and don't have the money for security deposit and/or first or last month's rent).

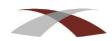


Table 26. Barriers to locating rental housing, as reported by survey respondents, CAA clients, Indiana, 2014

Reason given	% of respondents
Bad credit	13%
Can't find any units for a household member with special needs	1%
Don't have good references/background check	4%
Don't have the money for security deposit and/or first or last month's rent	19%
Evicted from subsidized housing in the past	1%
I don't have a car and there aren't any rental near school, work, grocery store, etc.	3%
I have a felony conviction	2%
Not sure how or where to look	5%
I wouldn't be any better off as the places I can afford are unsafe, unhealthy, or too small	5%

Source: 2014 Survey of CAA Clients

For those who indicated that they would be interested in home ownership, the main barrier that respondents identified was not being able to afford the down payment (Table 27).

Table 27: Barriers to home ownership, as reported by survey respondents, CAA clients, Indiana, 2014

Reason given	% of respondents
I can't afford the down payment	29%
I can't find anything in my price range	14%
I don't know how to begin the process	11%
I have bad credit	24%
I was turned down for mortgage financing	4%

Source: 2014 Survey of CAA Clients

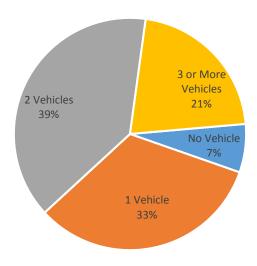
Transportation

Half of Indiana's counties are outside a major metropolitan area and therefore the ability of residents to travel to work, school, and health care appointments can be difficult without transportation. In 2013, 7 percent of households in Indiana were without a vehicle (Figure 15).

While 93 percent of households indicated that they have at least one car, almost 23 percent of those without a vehicle reside in rural areas outside of a MSA. The Indianapolis MSA has the largest share of households without vehicles (26 percent).



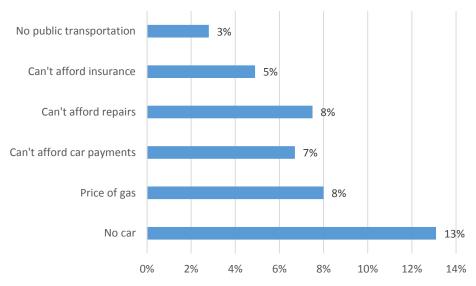
Figure 15. Vehicles available by occupied housing units, Indiana, 2013



Source: U.S. Census Bureau, American Community Survey, 2009-2013, 5-Year Estimates

Most (80 percent) respondents to the CAA client survey report access to reliable transportation. Of the 20 percent who did not, not owning a car was cited most frequently as the reason (Figure 16).

Figure 16. Reason for not having access to reliable transportation, as reported by survey respondents, CAA clients, Indiana, 2014



Source: 2014 Survey of CAA Clients

Financial Services

Most respondents to the CAA client survey indicated that they have a checking account, but only 37 percent indicated that they had a savings account, and almost 20 percent indicated that they used check cashing or cash advance services (Table 28).

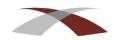


Table 28: Access or usage of banking services, as reported by survey respondents, CAA clients, Indiana, 2014

Reason given	% of respondents
Checking account	70%
Savings account	37%
Credit card	29%
Check cashing or cash advance	19%

Source: 2014 Survey of CAA Clients

The availability of institutions, besides banks, that provide check cashing services is important for residents who are unable to obtain a checking account. A list, compiled from Indiana Department of Financial Institutions data, was analyzed to determine the number of check cashing and small loan lender establishments by county in Indiana. There are likely other establishments that offer these services not included in this count; the data provided here are businesses registered with the state for those purposes.

Two maps were created from these data. The first map (Appendix C) displays the number of check cashing locations by county. The second map (Appendix D) displays the number of small loan lenders by county. For each map, the CAA numbers, corresponding with the agency listing on page 4 are listed as well.

In total, there are 445 check cashing establishments and 363 small loan lenders in Indiana. Some of the small loan lenders were also listed as check cashing locations. There are 27 counties that do not have any registered small loan lenders, and 30 counties without any registered check cashing locations.

Drug Abuse

Drug abuse was identified as a serious issue in the focus groups. Focus groups expressed concern that it hinders employment because residents are unable to pass drug tests. Areas are also experiencing problems with locating affordable housing for residents who have been convicted of a felony, including drug related felonies. Stakeholders also relayed that the lack of mental healthcare had led to an increase the drug use in their areas.

In an effort to assess the need for drug intervention, data regarding the number of drug arrests and clandestine lab seizures were obtained. Data regarding drug arrests were obtained from Uniform Crime Reporting (UCR) which is compiled by the Federal Bureau of Investigation (FBI). Participation in reporting is not required and varies from state to state. In Indiana, there are 86 police agencies who report crime statistics for UCR. All counties were represented in the data, however, the total number of arrests in this report may not include all drug arrests. The data provided are the minimum number of arrests that occurred in 2009 and 2012.

Table 29 details the number of arrests made in Indiana and the top five counties with the highest arrests for that category. Synthetic drugs include methamphetamine (meth). Opiate drugs include heroin and cocaine. The total drug arrests also include arrests for marijuana and other substances such as illegal use of prescription drugs.



Each category was normalized for arrests per 1,000 people as well as the total number of arrests made. While Indiana has had an overall decline in drug arrests from 2008 to 2012, some counties had a significant increase, more than doubling.

Table 29. Drug arrests in Indiana, 2012; change in total drug arrests, 2008 to 2012

Total drug arrests	Drug arrests per 1,000 population	Synthetic drug arrests	Synthetic drug arrests per 1,000 population	Opiate drug arrests	Opiate drug arrests per 1,000 population	% change total drug arrests 2008-2012
Indiana						
26,674	4.11	3,018	0.47	3,109	0.48	-11.8%
Top 5 counties						
4,862	30.82	234	2.99	392	3.87	135.0%
Marion	Scott	Clark	Scott	Marion	Scott	Orange
2,455	13.72	225	2.67	349	2.23	133.3%
Lake	Rush	Marion	Orange	Lake	LaGrange	Martin
1,122	8.61	175	2.43	175	1.81	122.4%
Vanderburgh	Floyd	Vanderburgh	Parke	Clark	Howard	Rush
902	7.11	171	2.43	162	1.59	119.1%
Allen	Orange	Tippecanoe	Blackford	LaPorte	Clark	Fulton
900	6.80	142	2.13	150	1.46	98.6%
Hamilton	Clark	Vigo	Clark	Howard	LaPorte	Washington

Source: National Archive of Criminal Justice Data, Uniform Crime Reporting Data: County-Level Detailed Arrest and Offense Data, 2009 and 2012

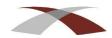
Clandestine labs are places where illegal substances, most frequently methamphetamines (meth), are made. Since 2007, Indiana tracks the locations of where labs are seized by law enforcement. As of November 5, 2014, a total of 9,581 labs had been seized by Indiana State Police. These data are only for seizures made by the Indiana State Police or reported to the Indiana State Police for review.

Table 30 lists lab seizure rates for some CAAs, It is interesting to note that Area Five has the fifth highest seizure rate for the CAAs, however none of the counties that make up Area Five rank in the top five when reviewing seizures by county. Jennings County is second for the number of seizures per 1,000 people by county, but the Ohio Valley Opportunities agency does not rank in the top five CAAs. This indicates that while some CAA areas are burdened areawide by meth production, other CAA areas may have one or two counties where meth production is high.

Table 30: Top 5 clandestine lab seizure rates by Community Action Agencies, Indiana

Total labs seized	Labs per 1,000 population
REAL (1,256)	PACE (4.22)
CANI (1,105)	REAL (3.44)
H.S.I. (1,054)	CAPE (3.43)
CAPE (821)	H.S.I. (3.37)
AREA FIVE (624)	HOOSIER UPLANDS (3.06)

Source: Indiana Methamphetamine Investigation System, Clan Lab Addresses; November 5, 2014



Health Insurance

The percent of individuals with health insurance served by a CAA has increased slightly from 61 percent in 2010 to 63 percent in 2013 (Table 31).

Table 31: Health insurance status of individuals served by CAAs, Indiana, 2010-2013

Year	Yes	No
2010	61%	39%
2011	60%	40%
2012	64%	36%
2013	63%	37%

Source: Indiana Community Services Block Grant Data, 2010-2013

Nearly 80 percent of survey respondents reported having health care coverage. Those who did not report having health insurance were asked what makes it hard for them to obtain coverage. By far, most (63 percent) said cost. Many of the other responses listed some combination of cost, lack of knowledge, or no employer provider coverage as the reason for their lack of coverage.

Community Needs

All clients surveyed were asked to provide feedback on community needs. Questions included what was most needed, somewhat needed, not needed, and do not know for 33 different issues. Respondents were given the opportunity to include other responses. The identified needs were categorized into six areas: adult skills training, financial skills training, household support, food, home maintenance and repair, and affordable housing.

Adult skills training

Respondents were asked to provide feedback on a number of factors related to adult skills. Some concerned employment qualifications, while other addressed the ability to improve skills and access job opportunities. For each of these topic areas, the need for greater adult skill levels is often linked to increased employability and income. The survey results show relatively consistent rankings across all areas. However, the need for financial aid was listed as most needed or somewhat needed most frequently. Financial aid could mean that the client needs assistance with filling out paperwork to receive grants and loans for higher education or the client needs monetary assistance paying for technical or higher education classes. Table 32 shows the responses for all categories within adult skills training.



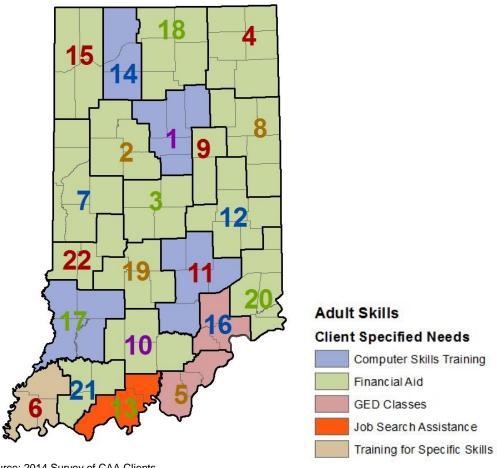
Table 32: Adult skills training needs, as reported by survey respondents, CAA clients, Indiana, 2014

	Literacy	Training for specific skills	GED classes	Financial aid	Computer skills training	Job search assistance	Reliable transporta tion
Most Needed	19%	30%	29%	39%	32%	34%	35%
Somewhat Needed	24%	24%	21%	22%	26%	23%	19%
Not Needed	32%	26%	30%	22%	25%	26%	28%
Don't Know	25%	20%	20%	17%	17%	16%	18%

Source: 2014 Survey of CAA Clients

In an effort to highlight any differences across the state, the responses were analyzed by CAA. Map 4 shows which adult skills training need was listed most often. All categories are reported most frequently in at least one CAA.

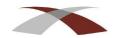
Map 4: Adult skills training needs, as reported by survey respondents, by CAA, Indiana, 2014



Source: 2014 Survey of CAA Clients

Financial skills training

CAA clients also were asked about their need for financial skills training. The topics include: budgeting money, credit counseling, tax preparation, applying for benefits, health insurance,



home foreclosure, starting a business, and financial education. These topics impact many aspects of the clients day-to-day activities and may hinder income and employment opportunities.

Over half of the respondents selected budgeting money as most needed or somewhat needed. However as shown in Table 33, the need for financial skills training is strong in all categories.

Table 33: Financial skills training needs, as reported by survey respondents, CAA clients, Indiana, 2014

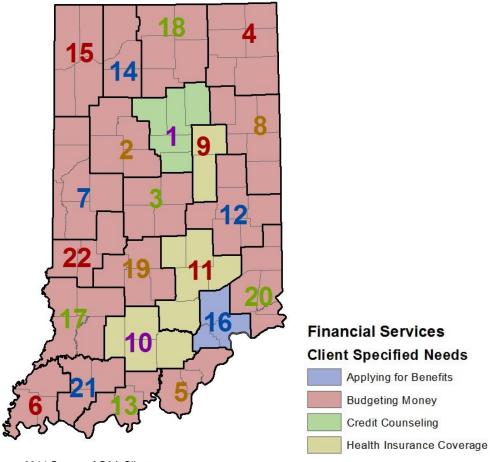
	Budgeting money	Credit counseling	Tax preparation	Applying for benefits	Health insurance coverage	Home foreclosure	Starting a business	Financial education
Most Needed	36%	30%	20%	27%	41%	18%	20%	29%
Somewhat Needed	25%	25%	26%	23%	17%	19%	22%	21%
Not Needed	24%	27%	36%	36%	29%	39%	34%	30%
Don't Know	15%	17%	18%	15%	13%	24%	24%	21%

Source: 2014 Survey of CAA Clients



Looking at the need for financial training by CAA shows that budgeting money is cited most often. Map 5 shows which financial service training was selected most often for each CAA.

Map 5: Financial skills training needs, as reported by survey respondents, by CAA, Indiana, 2014



Source: 2014 Survey of CAA Clients

Household support

The Family Household Support section of the survey included questions about the need for parenting skills training, childcare, youth and teen programs, and support for caregivers. For many households, the years before children are school age or times when school is out are the primary concerns.

Survey respondents listed the need for teen and youth programs most often, with childcare needs not far behind (Table 34). With the percentage of Indiana's senior population growing, the demand for support for caregivers may grow over time.

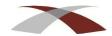


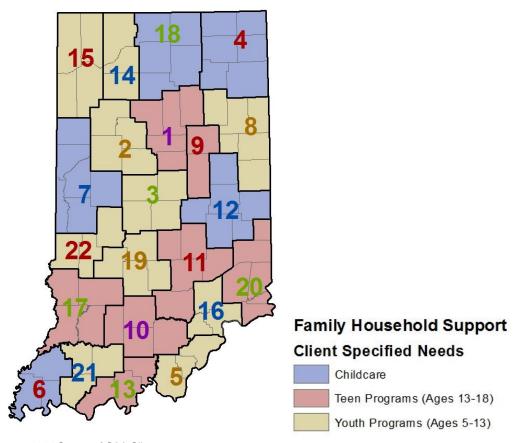
Table 34: Family support needs, as reported by survey respondents, CAA clients, Indiana, 2014

	Parenting Skills	Childcare	Youth Programs	Teen Programs	Support for Caregivers
Most Needed	25%	32%	37%	36%	28%
Somewhat Needed	20%	19%	18%	16%	20%
Not Needed	40%	35%	33%	34%	36%
Don't Know	15%	14%	13%	13%	16%

Source: 2014 Survey of CAA Client

Map 6 shows which family support need was selected most often for each CAA. For this issue there is variation throughout the state.

Map 6: Family support needs, as reported by survey respondents, by CAA, Indiana, 2014



Source: 2014 Survey of CAA Clients

CAA clients were asked to highlight the need for healthy lifestyle tools, healthy relationship classes, support groups, mental health services, and legal services. These topics cover several different aspects, but all highlight the potential need for services outside the home.

The client-specified need for these services is very consistent across all topics. Healthy lifestyle tools was selected most often, with 54 percent saying it was most needed or somewhat needed (Table 35). All topics were identified by at least 48 percent of clients as needed.



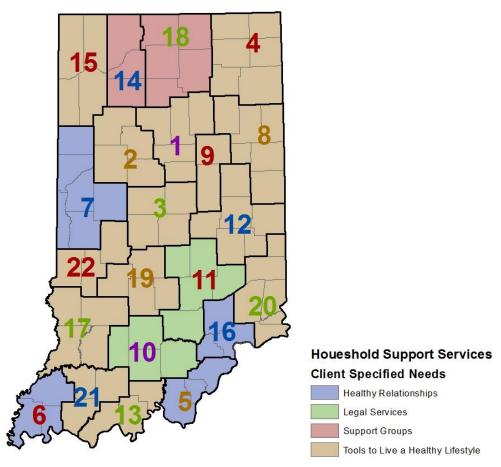
Table 35: Health and legal support needs, as reported by survey respondents, CAA clients, Indiana, 2014

	Healthy Lifestyle Tools	Healthy Relationship Classes	Support Groups	Mental Health Services	Legal Services
Most Needed	27%	28%	27%	28%	29%
Somewhat Needed	27%	23%	23%	21%	21%
Not Needed	32%	34%	34%	36%	35%
Don't Know	14%	15%	15%	16%	15%

Source: 2014 Survey of CAA Clients

A closer look at these topics by CAA yields similar results. All of these topics were selected most often by at least one CAA (Map 7).

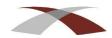
Map 7. Health and legal support needs, as reported by survey respondents, by CAA, Indiana, 2014



Source: 2014 Survey of CAA Clients

Food

Survey respondents were asked to provide input on the need for food assistance and nutritional education. The demand for food assistance is closely tied with the need to access SNAP and food pantries, while the need for nutrition education provides insight on the growing obesity epidemic.



As shown in Table 36, over 70 percent of CAA clients reported that food assistance was either most need or somewhat needed. Over 50 percent reported a need for nutrition education, but almost one-third said this was not needed.

Table 36: Food assistance and education needs, as reported by survey respondents, CAA clients, Indiana, 2014

	Food assistance	Nutrition education
Most Needed	43%	28%
Somewhat Needed	28%	28%
Not Needed	21%	32%
Don't Know	8%	12%

Source: 2014 Survey of CAA Client

Home maintenance and repair

CAA clients were asked to share the demand for home insulation and weatherproofing and removal and repair of condemned and vacant homes. As reported earlier, clients often need assistance paying their utility bills. Increasing or improving insulation and weatherproofing can help lower heating and cooling costs.

Table 37 shows the survey responses with over 50 percent reporting insulation and weatherproofing assistance as most or somewhat needed.

Table 37: Maintenance and repair assistance needs, as reported by survey respondents, CAA clients, Indiana, 2014

	Home insulation/weatherproofing	Removal/repair of condemned or vacant houses
Most Needed	36%	30%
Somewhat Needed	22%	18%
Not Needed	29%	37%
Don't Know	13%	15%

Source: 2014 Survey of CAA Clients

Affordable housing

With 50 percent of Indiana residents spending 30 percent or more of their income on housing expenses, it is clear that affordable housing is an issue in many communities. CAA clients were asked to provide feedback on the need for rent and mortgage assistance, utility payment assistance, homeless services, and down payment assistance.

Table 38: Housing and utility needs, as reported by survey respondents, CAA clients, Indiana, 2014

	Rent/mortgage assistance	Utility assistance (electric/gas/water)	Homeless services/shelters	Down payment assistance
Most Needed	48%	62%	38%	38%
Somewhat Needed	21%	20%	16%	18%
Not Needed	22%	11%	35%	30%
Don't Know	9%	6%	12%	14%

Source: 2014 Survey of CAA Clients



Over 80 percent reported that utility payment assistance was most needed or somewhat needed (Table 38). Of all the community needs topics, this received the largest response. Notably, 35 percent reported that homeless services were not needed.

CAA Evaluation

Clients responding to the survey provided very favorable feedback on the CAA staff and programs (Table 39), including:

- 92 percent rated services as either excellent or good;
- 93 percent rated staff treatment as excellent or good;
- 91 percent responded favorably to the reliability of staff; and
- 97 percent found responses to questions and problems to be satisfactory.

Table 39: CAA client feedback, as reported by survey respondents, Indiana, 2014

	Excellent	Good	Fair	Poor	Don't know
Overall, how would you rate the program or services					
you received?	56%	36%	6%	1%	2%
How would you rate the way the staff treated you?	62%	31%	5%	1%	2%
How would you rate the reliability of the program staff					
in doing / what they said they would do?	57%	34%	6%	1%	3%
How would you rate the timeliness of the program					
staff in / responding to your questions or problems?	54%	35%	8%	1%	2%

Source: 2014 Survey of CAA Clients

CAA clients also were asked how likely they were to recommend CAA services and programs and to share how likely they were to return to the CAA for assistance in the future (Table 40). Ninety-seven percent said they were likely or highly likely to recommend the CAA program and services. Ninety-five percent were likely or highly likely to return for services in the future. Table 38 shows all the survey responses.

Table 40: Likelihood of referrals and recommendation, as reported by survey respondents, CAA clients, Indiana, 2014

	Highly Likely	Likely	Unlikely	Highly Unlikely	Don't know
If you had a friend who was in need of the same or similar services / you received, how likely is it that you would					
recommend the program / or service to him or her?	72%	25%	1%	0%	2%
How likely are you to seek services from this agency again?	69%	26%	1%	1%	4%

Source: 2014 Survey of CAA Clients



Data from CAA Stakeholder Surveys

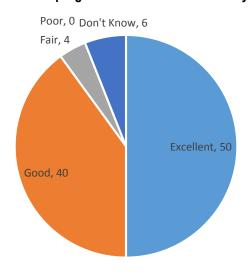
Stakeholders provide another source of data for the assessment. They are knowledgeable about current conditions in the community and are able to provide feedback on CAA operations and impact.

CAA Programs and Services

Responses to the stakeholder surveys are similar to the client feedback, and suggest a favorable review of CAA programs and services.

Figure 17 shows that 90 percent of stakeholder respondents would rate the CAA programs as good or excellent. Figure 18 shows that 87 percent would rate the delivery of CAA services as good or excellent. Ninety-five percent were either likely or highly likely to recommend CAA services (Table 41).

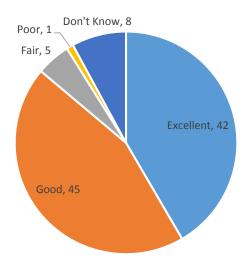
Figure 17. Overall how would you rate the programs and services offered by (Agency)?



Source: 2014 Survey of CAA Stakeholders



Figure 18. How would you rate their delivery of services?



Source: 2014 Survey of CAA Stakeholders

Table 41. How likely are you to recommend the services from (Agency)?

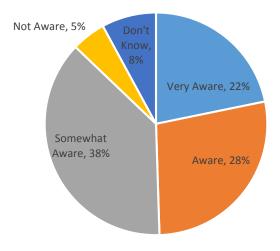
	% of respondents
Highly Likely	70%
Likely	25%
Unlikely	0%
Highly Unlikely	0%
Don't Know	5%

Source: 2014 Survey of CAA Stakeholders

However, when asked about the public awareness of CAA programs, Figure 19 shows the response is not as clear. Only 50 percent are either very aware or aware of CAA services. Thirty-eight percent responded that the public was only somewhat aware of CAA services. This is an area for further evaluation and discussion. The impact of CAAs may be enhanced with greater public awareness.



Figure 19: What is the level of public awareness regarding the services that the (Agency) provides?



Source: 2014 Survey of CAA Stakeholders

Community Needs

Stakeholders were asked to identify the need for community resources to match demand in the community. There are differences between the needs identified by the client and stakeholder surveys.

Adult skills training

The CAA clients listed financial aid and computer skills training most frequently. While there is agreement on the need for computer skills, stakeholders also highlighted the need for specific skills training, job search assistance, and reliable transportation (Table 42).

Table 42. Adult skills training needs, as reported by community stakeholders, Indiana, 2014

	Literacy	Training for specific skills	GED classes	Financial aid	Computer skills training	Job search assistance	Reliable transportation
Most Needed	31%	48%	29%	41%	44%	48%	49%
Somewhat Needed	41%	32%	38%	36%	43%	32%	31%
Not Needed	7%	4%	20%	6%	4%	7%	6%
Don't Know	21%	16%	13%	17%	10%	13%	14%

Source: 2014 Survey of CAA Stakeholders

Financial skills training

When asked to list the needs for financial skills training, the responses match the client feedback. Both list budgeting money, financial education, and health insurance coverage at or near the top of the list of needs (Table 43). This level of agreement may assist in developing training to match community need.



Table 43: Financial skills training needs, as reported by community stakeholders, Indiana, 2014

	Budgeting money	Credit counseling	Tax preparation	Applying for benefits	Health insurance coverage	Home foreclosure	Starting a business	Financial education
Most Needed	62%	54%	29%	40%	56%	28%	21%	46%
Somewhat Needed	26%	30%	41%	44%	32%	43%	37%	38%
Not Needed	3%	5%	15%	7%	6%	10%	22%	4%
Don't Know	9%	11%	15%	8%	6%	18%	21%	13%

Source: 2014 Survey of CAA Stakeholders

Household support

The stakeholder responses to the need for household support is very consistent across all topics. This is similar to the client survey responses and may identify a wide demand for services. Table 44 shows stakeholders view household services as either most needed or somewhat needed for all topics areas.

Table 44. Household family support needs as reported by community stakeholders, Indiana, 2014

	Parenting skills	Childcare	Youth programs	Teen programs	Support for caregivers
Most Needed	64%	61%	45%	50%	43%
Somewhat Needed	27%	29%	40%	38%	45%
Not Needed	3%	5%	5%	3%	3%
Don't Know	5%	5%	9%	9%	9%

Source: 2014 Survey of CAA Stakeholders

The stakeholders reported need for household support services is consistent across topics. As shown in Table 45, the variation in responses is not more than a percentage or two. These responses are similar to the client survey results and may identify another area of agreement for services and programs.

Table 45. Household service support needs as reported by community stakeholders, Indiana, 2014

	Tools to live a healthy lifestyle	Healthy relationship programs/ classes	Support groups	Mental health services	Legal services
Most Needed	44%	34%	57%	43%	51%
Somewhat Needed	43%	47%	29%	42%	37%
Not Needed	2%	4%	5%	5%	3%
Don't Know	10%	14%	9%	9%	10%

Source: 2014 Survey of CAA Stakeholders

Food

The stakeholder responses differ from the client responses for this topic. As Table 46 shows, stakeholders see an increased demand for food assistance (87 compared to 71 percent), and a



greater need for nutrition education (94 versus 56 percent). These differences may indicate the need for additional information for this topic or a closer examination by CAA.

Table 46: Food needs as reported by community stakeholders, Indiana, 2014

	Food assistance	Nutrition education
Most Needed	55%	47%
Somewhat Needed	32%	47%
Not Needed	9%	1%
Don't Know	5%	5%

Source: 2014 Survey of CAA Stakeholders

Home maintenance and repair

Stakeholders reported higher levels of demand for home insulation and weatherproofing as well as the removal or repair of condemned or vacant homes than the client surveys (Table 47). This may indicate a gap in perception of housing conditions. It also differes from the client reported need for utility payment assistance.

Table 47: Home insulation and repair needs as reported by community stakeholders, Indiana, 2014

		Removal/repair of condemned or vacant
	Home insulation/weatherproofing	houses
Most Needed	59%	68%
Somewhat Needed	34%	23%
Not Needed	1%	3%
Don't Know	5%	6%

Source: 2014 Survey of CAA Stakeholders

Affordable housing

Table 48 shows a consistent level of need for affordable housing as reported by the stakeholders. For three out of the four topics, the variation between client and stakeholder responses is important. Clients reported a lower need for rent and mortgage assistance than stakeholders (69 versus 92 percent, respectively), and help paying utility bills (82 versus 95 percent, respectively). Respondents to the client survey reported a lower need for down payment assistance than did the stakeholders (55 versus 78 percent, respectively). The reported stakeholder need for utility assistance corresponds to the need for insulation and weatherproofing.

Table 48: Affordable housing needs as reported by community stakeholders, Indiana, 2014

	Rent/mortgage assistance	Utility assistance (electric/gas/water)	Homeless services/shelters	Down payment assistance
Most Needed	56%	65%	57%	40%
Somewhat Needed	36%	30%	34%	38%
Not Needed	2%	2%	4%	9%
Don't Know	6%	3%	5%	13%

Source: 2014 Survey of CAA Stakeholders



CAA Employee Survey

CAA employees were asked to provide confidential feedback on CAA programs and services. As both the clients and stakeholders have a positive view of CAA programs and services, it is helpful to see how employees view these services.

From the employee responses in Table 49, they believe they are knowledgeable about CAA programs and services (88 percent), that CAA programs are collaborating to meet client needs (85 percent), and working to enroll clients in all agency programs for which they are eligible (88 percent). They also are knowledgeable about programs outside the agency (83 percent) and understand how to make referrals (80 percent). Finally, they do not believe it is difficult to remain up-to-date with program requirements as only 35 percent of the employee responses agree or strongly agreed with that statement.

Table 49: How strongly do you agree or disagree with the following statements?

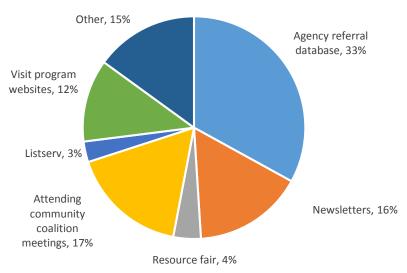
	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I know about other programs at the agency and how					
to make referrals.	40%	48%	6%	4%	1%
Programs within the agency collaborate to meet participants' needs.	30%	55%	9%	4%	2%
I know about services outside the agency and how to make referrals to them.	25%	55%	13%	7%	1%
When new participants enroll in my program, we think about what agency programs they might be eligible for and make sure they get information and referral to these programs.	38%	48%	10%	3%	1%
When new participants enroll in my program, we think about what services and benefits outside the agency they might be eligible for and make sure they get information and referral to these services.	35%	48%	13%	3%	1%
It is difficult for the staff of my agency to keep up-to- date with other programs' services and eligibility guidelines.	5%	30%	28%	30%	7%

Source: 2014 Survey of CAA Employees

CAA employees report utilizing a variety of resources and information gathering techniques. Figure 20 shows the tools used and how often. While 15 percent of the employees checked other, a review of the responses finds the most common to be all of the above rather than any additional source or type of information.



Figure 20: In your experience, what is the best way to keep up-to-date with other programs' services and eligibility guidelines?

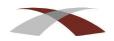


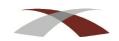
Source: 2014 Survey of CAA Employees

Conclusion

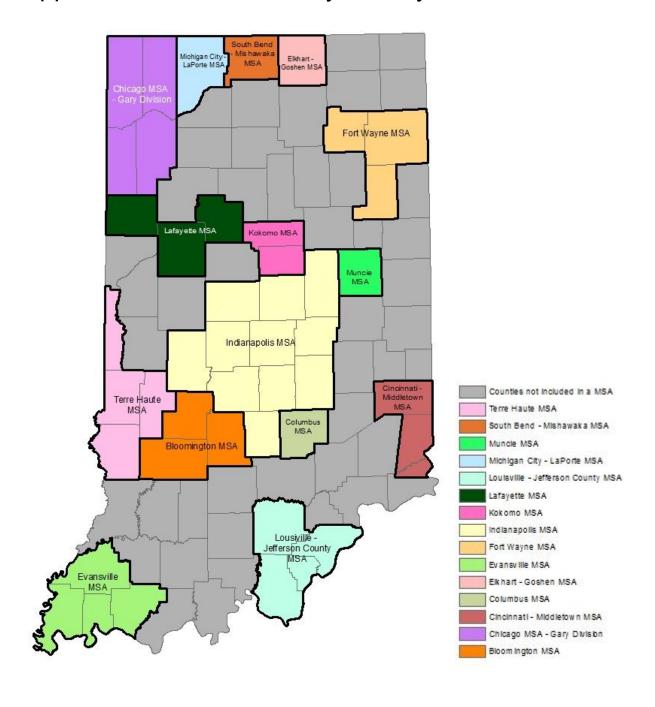
With the needs assessment complete, it is helpful to summarize the key findings. First, the CAA's are well-utilized and well regarded by clients and community partners. CAA staff are knowledgeable about the program offerings and can identify ways to remain current in their program knowledge. Community stakeholders rate the programs and delivery of services highly and are likely to recommend their services.

The focus group discussions and the data collection highlighted poverty rates, employment issues, public transportation, mental health services (including substance abuse), homelessness, affordable housing, and education needs. The data also show that housing remains affordable and most have access to reliable transportation. The survey of CAA client's added additional detail. Respondents shared a need to for financial education, food and childcare assistance, and home insulation and utility payment support. The survey of CAA stakeholders highlighted the need for literacy training, parenting skills and support for caregivers, and nutrition education.



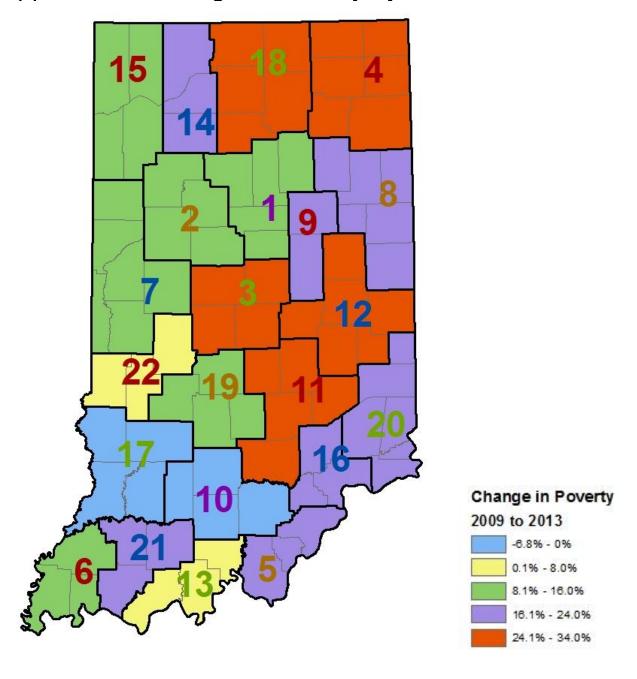


Appendix A: MSA Areas by County



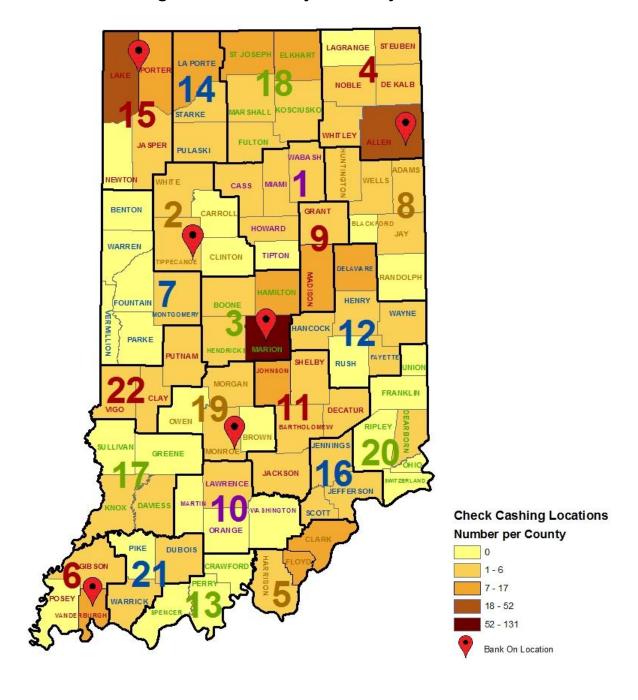


Appendix B: Change in Poverty by CAA, 2009 – 2013





Appendix C: Number of establishments providing check cashing services, by county





Appendix D. Number of establishments providing cash advance services (small loan lenders), by county

