



United Way of Douglas & Pope Counties Priority Areas:

EDUCATION- Helping children and youth reach their potential.

Outcome:

- Increase children and youth's access to enriched learning opportunities.
- Ensure that children are fully prepared for kindergarten or age appropriate development.
- Increase early grade literacy for students K-3.

INCOME- Promoting financial stability leading towards independence.

Outcome:

- Promote access to programs that help increase assets, achieve stabilization, and/or provide job training to improve employability.
- Help individuals gain financial literacy skills.
- Ensure the basic human service needs are met.

HEALTH- Improving people's emotional, mental and physical well-being.

Outcome:

- Improve access to affordable and quality physical, mental and dental health care.
- Increase independent living and quality of life by investing in programs that help older adults and those living with disabilities.
- Increase access to programs that teach healthy behaviors and promote wellness to prevent future problems.

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WHY WE INVEST:

- Only 59% percent of Minnesota kindergarteners are fully ready for kindergarten in the areas of language and literacy.¹
- In Minnesota, children entering kindergarten unprepared cost the school system \$113 million annually.²
- Children from families with limited resources hear 32 million fewer words by the time they are five years of age than children from middle class families.³
- In Minnesota, only 63 percent of low-income students pass the MCA-II reading test, in contrast with the 88 percent pass rate of their higher-income counterparts.⁴
- By third grade, a child's grades and absenteeism rates can predict whether he or she will complete high school.⁵ Nationally, each graduate saves the public \$209,000.⁶ If a child is behind at this pivotal point, the achievement gap can increase, causing additional academic, social and emotional problems. Ensuring educational success in the early years is one of the most important pathways out of poverty.
- Every Minnesota youth has an average of 2,000 hours of discretionary non-school time in a given year; this is roughly equivalent to a full-time job. Approximately 42% of Minnesota's 10-12 year olds are home unsupervised after school.⁷
- For every \$1 invested in out-of-school-time programming, there is a \$10.51 return through the benefits of improved school performance, reduced crime and welfare costs, and increased wages.⁸
- Early education and participation in afterschool programs can reduce initiating drug use among youth by nearly 46 percent while reducing the likelihood of them skipping school by half.⁹

¹ Minnesota School Readiness Study: Developmental Assessment at Kindergarten Entrance Fall 2010. Minnesota Department of Education, November 2011

² Wilder Research: The Cost Burden of Minnesota K-12 when Children are Unprepared for Kindergarten, 2008

³ Hart, B. and Risley, T.R. The early catastrophe: The 30 million word gap by age 3. [American Educator, Spring 2003](#)

⁴ Minnesota Department of Education, 2009

⁵ Dr. Robert Barr. Hope at Last for At-Risk Youth, 1994

⁶ Henry M. Levin, The Economic Payoff to Investing in Educational Justice, Educational Researcher Magazine, 2009

⁷ Commission on Out of School Time. Journeys into Community: Transforming Youth Opportunities for Learning and Development, Minneapolis, MN: Center for 4-H Youth Development, 2005

⁸ Newman, R.P., Smith, S.M. & Murphy, R. A Matter of Money: The Cost and Financing of Youth Development. Center for Youth Development and Policy Research, 2001.

⁹ Cunha, Flavio and Heckman, J. J. Investing in Our Young People. University of Chicago. 2006

INCOME-Promoting financial stability leading towards independence.

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- Increased access to programs that help increase assets, achieve stabilization, and/or provide job training to improve employability.
- Help individuals gain financial literacy skills.
- Ensure the basic human service needs are met.

WHY WE INVEST:

- In Douglas County, 9.6% of individuals are living in poverty. The rate is higher for children (12.7%) and seniors (9.7%). In Pope County, poverty impacts 10.5%; 13.8% of children and 8.9% of seniors.¹⁰
- Approximately one third of residents in Douglas and Pope Counties are living at or below 200% of the poverty line, which for a family of 4 equals \$46,100 annually.¹¹
- To meet only basic needs, a family of four needs to earn an income of approximately \$55,000, requiring each adult to have full time employment earning \$12.95/hour; a single individuals without dependents must earn \$11.74/hour to meet basic needs¹². Unfortunately, nearly half of the jobs in the nine county region pay less.¹³
- In Minnesota, an estimated 18% of families are not claiming the tax credits they've earned.¹⁴
- Over the past five years, hunger has doubled in Minnesota.¹⁵ Approximately 1 in 7 Minnesotans experiences hunger,¹⁶ which in Douglas/Pope Counties amounts to 6,600 people.
- 38% of households served by food shelves are working; 40% of individuals benefitting are children.¹⁷
- Lack of access to adequate and nutritious food has serious implications for individuals of all ages, developmentally, physically, mentally, behaviorally, and socially.¹⁸
- Children under age 3 who are hungry are at risk of interrupting important development of the brain and central nervous system, negatively impacting their ability to learn and compete academically later in life.¹⁹
- Fair market rental costs/utilities for a modest, two bedroom apartment in Douglas/Pope County costs \$590-\$630. Full time employment at approximately \$12/hour is required to sustain this housing, however, the average renter in these counties only earns between \$7.65 and \$8.49.²⁰
- 42.5% of Douglas County and 25.3% of Pope County households are paying more than 35% of their income towards rent²¹; 13% of Douglas County and 8% of Pope County households are paying as much as half of their income towards housing, a proportion that is considered severely unaffordable.²²
- In Douglas County, only 41 rental units are available and affordable for every 100 low income renters. In Pope County, there are 73 units per 100 in need.²³
- In the West Central Region, one single day in 2009 yielded 358 individuals who were homeless, approximately one half of them being under age 21.²⁴
- Approximately 13,100 individuals are homeless in Minnesota on any given night; 20% of adults who are homeless are employed; only 6% are employed full-time.²⁵
- In June 2012, the average unemployment rate in both Douglas/ Pope Counties remained just below 5%, impacting approximately 2,300 individuals in the two counties, not including individuals who have stopped actively seeking employment. Locally, there are approximately 2.5 job seekers per vacant job.²⁶

¹⁰ U.S. Census Bureau, 2010

¹¹ U.S. Census Bureau, 2010

¹² JOBS NOW Coalition, Key Region 4 Findings and Analysis, March 2010

¹³ JOBS NOW Coalition, The Cost of Living in Minnesota, 2009

¹⁴ MN Department of Employment and Economic Development, Job Vacancy Survey, 4th Quarter 2010

¹⁵ Hunger Solutions Minnesota, 2012

¹⁶ John T. Cook, University of Minnesota Twin Cities Survey; Twin Cities Hunger Initiative; The Costs of Ending U.S. Hunger: A Technical Note, 2010

¹⁷ Hunger Solutions Minnesota, 2012

¹⁸ Hunger in America, Feeding America, 2012

¹⁹ Cook, J. and Jeng, K. Child Food Insecurity: The Economic Impact on our Nation, Feeding America, 2009

²⁰ HUD Fair Market Rent (FMR), 2012; Out of Reach 2012, NLIHC

²¹ 2006-2010 American Community Survey 5-Year Estimates, U.S. Census Bureau, 2010

²² American Community Survey (ACS) 2008-2010, U.S. Census Bureau, 2010

²³ NLIHC analysis of CHAS data, 2005-9

²⁴ Wilder Research Center, 2010

²⁵ MN Housing Partnership, U.S. Census Bureau, 2008

²⁶ Local Area Unemployment Statistics, MN DEED, 2012

HEALTH-Improving people's emotional, mental and physical well-being.

Outcome:

- Improve access to affordable and quality physical, mental and dental health care.
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WHY WE INVEST:

- Approximately 438,000 Minnesotans are uninsured.²⁷
- More than half (52%) of Americans say that someone in their household put off needed health care in the past year because of the cost.²⁸
- Asthma is the largest cause of chronic school absence, and the third leading cause of hospitalizations in children under 15. Almost 10 percent of Minnesota children have been diagnosed with asthma.²⁹
- Approximately one in five school-age children are overweight or obese.³⁰ A child who experiences food insecurity during their toddler years is 3.4 times more likely to be obese at age 4.5 than their food secure peers.³¹
- In Douglas County, 3% of individuals age 18-64 have an independent living difficulty. This increases to 11.4% for individuals over 65. In all of MN, 11.3% of individuals are living with some type of disability.³²
- The annual cost of home health care services is \$57,200, significantly less than the approximately \$74,460 cost for a one-year stay in a nursing home.³³
- Of all age groups, people ages 75-84 have the highest suicide rates.³⁴ Suicide is the second leading cause of death in people between the ages of 10 and 34.³⁵
- Rural areas, such as Douglas and Pope Counties, are seeing increased need for mental/behavioral health services, but are unable to meet the needs due to a shortage of providers and high cost for services, resulting in limited access for children and adults in need.³⁶
- Nearly 19% of the MN population is living with some sort of mental health concern.³⁷ Unfortunately, the public mental health system in MN only provides services to 22% of all adults living with a serious mental illness.³⁸

²⁷ The Kaiser Family Foundation, statehealthfacts.org, Data Source: Urban Institute and Kaiser Commission on Medicaid and the Uninsured estimates based on the Census Bureau's March 2008 and 2009 Current Population Survey (CPS: Annual Social and Economic Supplements), <http://www.statehealthfacts.org/comparetable.jsp?typ=1&ind=125&cat=3&sub=39>

²⁸ The Henry J. Kaiser Family Foundation, Kaiser Health Tracking Poll, March 2011

²⁹ Asthma in Minnesota. Minnesota Department of Health, 2005 and Asthma in Minnesota: 2008 Epidemiology Report. Asthma Program. Minnesota Department of Health, December 2008.

³⁰ Minnesota Department of Health Fact Sheet: Overweight and Obesity, December 2009.

³¹ Dubois, L. et. al. Family Food Insufficiency is Related to Overweight Among Preschoolers. *Social Science and Medicine*, 2006

³² American Community Survey (ACS) 2008-2010, U.S. Census Bureau, 2010

³³ State-Specific Data for Minnesota from the Genworth 2010 Cost of Care Survey: Home Care Providers, Adult Day Health Care Facilities, Assisted Living Facilities and Nursing Homes. Genworth Financial, April 2010.

³⁴ Contemporary Issues Facing Aging Americans: Implications for Rehabilitation and Mental Health Counseling by C.G. Dixon and C.W. Rollins in *Journal of Rehabilitation* 69 pp. 5-12 (2003).

³⁵ MN Department of Health, Rural Health Advisory Committee's Report on Mental Health and Primary Care, 2005

³⁶ MN Department of Health, Rural Health Advisory Committee's Report on Mental Health and Primary Care, 2005

³⁷ MN Department of Health, Rural Health Advisory Committee's Report on Mental Health and Primary Care, 2005

³⁸ Aron, L., Honberg, R., Duckworth, K., et al., *Grading the States 2009: A Report on America's Health Care System for Adults with Serious Mental Illness*, (Arlington, VA: National Alliance on Mental Illness, 2009)