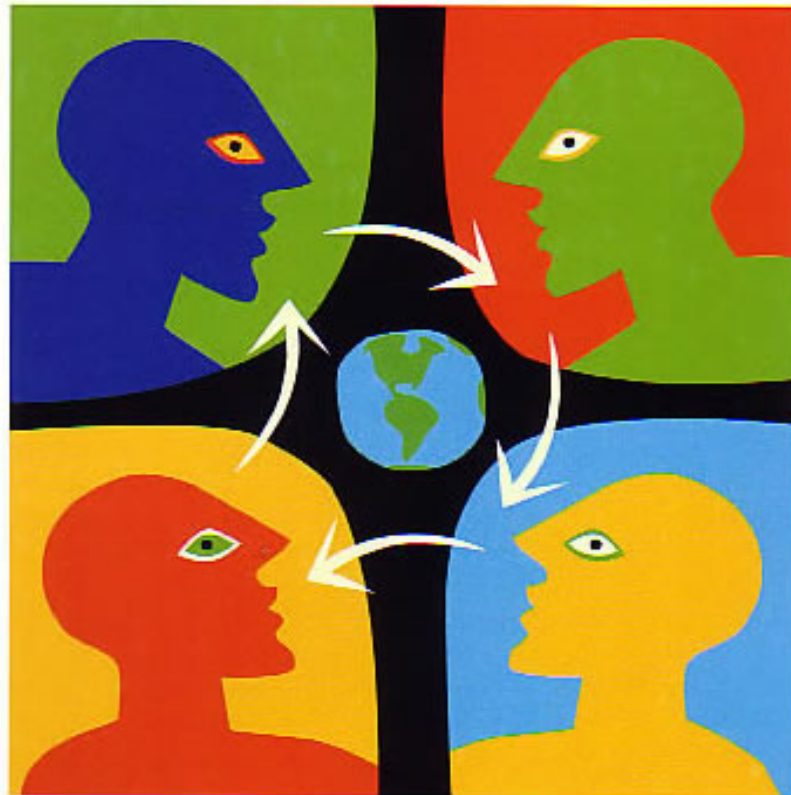


WHITE PAPER

on



POVERTY

in

NORTHERN KENTUCKY

A publication of Northern Kentucky Community Action Commission

PRESENTING THE
WHITE PAPER ON POVERTY IN NORTHERN KENTUCKY

On behalf of the hundreds of people from various socio-economic backgrounds representing dozens of communities and organizations, I present the “*White Paper on Poverty in Northern Kentucky*”.

Community Assessments have historically been used to determine the services people need, the level of services they actually receive and the barriers to and gaps in services that exist. In presenting this report we hope:

- to draw attention to the needs of Northern Kentuckians,
- to focus on the causes of poverty, not simply the conditions
- to provide policy makers and professionals insight from those living with the problems
- to initiate new direction for area human service agencies, healthcare providers, economic and workforce development organizations, government, and other funders of services,
- to chart a new course for addressing the issues, one that is coordinated, comprehensive and integrated, -- one designed by Northern Kentuckians in true cooperative spirit, and most importantly
- to be a starting point.

Empowering people and communities is the key to addressing poverty. In Northern Kentucky work groups are being convened in the topic areas addressed in the White Paper. Community Action takes seriously the responsibility to keep the process moving forward, to keep informed those already involved, to continue to seek out new partners and to proactively engage members from all segments of the community. But do not wait for Community Action to contact you. If you wish to continue your commitment to being a part of the process, call and determine where your involvement can best be utilized.

Now is the time to thank all who have helped in getting us to this point, to gain commitments to continuing the process, and to accept the challenge to end or significantly reduce, poverty in Northern Kentucky in this decade. Let us know how you will be involved.

Sincerely;

Brian Angus,
Executive Director

Table of Contents

Introduction	1
Topic 1: Northern Kentucky Families pursue and have access to services that support their health and well-being.	2
Health and Well Being symposium discussion group recommendations	3
Topic 2: Northern Kentuckians have access to good jobs.	7
Good Jobs symposium discussion group recommendations	9
Topic 3: Northern Kentuckians have opportunities to increase their skills and advance their careers through life long learning.	10
Life Long Learning symposium discussion group recommendations	12
Topic 4: Northern Kentucky families have access to services that support them in achieving and sustaining self-sufficiency.	13
Self Sufficiency symposium discussion group recommendations	15
Topic 5: Northern Kentucky families have access to the economic resources to withstand short term crises and prepare for the future.	19
Withstanding Short Term Crises symposium discussion group recommendations	21
Topic 6: Northern Kentucky's aging population has access to support services that sustain quality of life.	23
Aging symposium discussion group recommendations	25
Topic 7: Northern Kentuckians have equal access to justice and all the rights, safeguards and advantages of our society	26
Access To Justice symposium discussion group recommendations	28
Topic 8: Northern Kentucky families live in safe and healthy neighborhoods and communities with supportive social and spiritual networks, mutual respect across group boundaries, where each member is respected and provided opportunities to participate in civic affairs	29
Safe and Healthy Neighborhoods symposium discussion group recommendations	31
Acknowledgements	32
Excerpts from Lyndon Baines Johnson speech – March 16, 1964	33

Poverty Project and Symposium

INTRODUCTION

Because we live in an era of unprecedented change, the need to anticipate and prepare for what lies ahead has become central to the work and mission of the Northern Kentucky Community Action Commission, Inc. Increasingly, knowledge and information are the tools that enable policymakers in every arena to glimpse the shape of things to come, seize opportunities as they arise and avoid costly mistakes. To bring a future-oriented perspective to decision making NKCAC convened the “Poverty Project” with the charge to develop a Poverty Blueprint White Paper on the Impact of Public Policies that impact the social cost of poverty in the Northern Kentucky.

The Poverty Project’s mission was to enrich understanding of trends and forces influencing the future of the Northern Kentucky Region and to lend a long-term perspective to policymaking. The work of the Poverty Project included research, policy analysis, strategic planning, communication with different branches of government, and public outreach.

To ensure the Poverty Project’s independence, Community Action convened a panel of ten community leaders to develop an independent White Paper for presentation at a public forum on Poverty in the Northern Kentucky on May 14, 2003. The Poverty Project’s ambitious agenda was designed to increase knowledge about issues on Northern Kentucky’s horizon, guide planning efforts throughout local government, and engage citizens and policymakers in preparing for the future. Initiatives include:

- Northern Kentucky families pursue and have access to services that support their health and well-being;
- Northern Kentuckians have access to good jobs;
- Northern Kentuckians have opportunities to increase their skills and advance their careers through lifelong learning;
- Northern Kentucky families have access to services that support them in achieving and sustaining economic self-sufficiency;
- Northern Kentucky families have access to the economic resources to withstand short-term crises and prepare for the future;
- Northern Kentucky’s aging population has access to support services that sustains quality of life;
- Northern Kentuckians have equal access to justice and all the rights, safe guards and advantages of our society; and
- Northern Kentucky families live in safe and healthy neighborhoods and communities with supportive social and spiritual networks, mutual respect across group boundaries, where each member is respected and provided opportunities to participate in civic affairs.

Topic 1: Northern Kentucky families pursue and have access to services that support their health and wellbeing.

Access to primary health care is addressed as an issue in the *Northern Kentucky Community Health Plan 1996*. The three major risk factors associated with this issue are:

- Lack of sufficient means of payment for health services.
- Lack of transportation to medical facilities or the inability to access health facilities during the times these facilities offered services.
- Lack of a regular, identified primary care provider. The lack of insurance is the prime reason for the lack of an identified provider.

There are also three direct contributing factors associated with the lack of a primary care provider that have been identified. These factors are as follows:

- The inappropriate use of hospital emergency room services.
- Not being a member of a health maintenance plan or a physicians' practice group.
- Patients who manage their own medical needs without a designated primary care provider.

According to a 2002 survey from the Health Foundation of Greater Cincinnati, citizens who reside in rural counties are more likely to be dissatisfied with the quality of care they receive than those living in urban areas. Adults aged 18 to 29 and with income below the poverty level are also more likely to be dissatisfied with the quality of health care they receive.

Adults most likely dissatisfied with the availability to health care are male, between the ages of 18-45, and divorced/separated or never married.

Adults living in the District's rural counties (Carroll, Gallatin, Grant, Owen and Pendleton) are more likely to feel the cost of health care is unreasonable than those residing in Boone, Campbell and Kenton Counties. This is primarily due to income and health insurance availability. The adults range in age from 30 to 64 and are either high school graduates or have less than a high school education.

Primary care providers are defined as those in the fields of Family Practice, General Practice, Internal Medicine, Ob/Gyn, and Pediatrics. There are 389 primary care providers within the eight counties and 1,006 patients per provider.

Eleven percent of the population expressed cost as a barrier to health care access and approximately 13 percent of the persons are without health insurance.

This issue presents a continuing problem due to the increasing costs of health insurance and people not wanting to become members of a health maintenance organization or physicians' practice group.

Symposium Discussion Group Recommendations – Health and Well Being

NEEDS

The issues related to poverty and health care span a variety of domains. Each of these domains overlaps and has consequences both for the health of the individual and the health of the community.

Personal Health Issues:

Persons living in poverty have the same health problems as the rest of the society except that they are often more severe due to lack of early diagnosis, delayed treatment, and inadequate medication. In addition to economic health concerns are issues associated with social conditions and environmental justice.

Some health issues stemming directly from poverty include a lack of preventive care such as screening for vision, hearing and dental health. Also lacking are screenings for early detection of cancer, diabetes, and heart disease. No health insurance or lack of coverage for prescriptions and dental is often the cause for delayed or incomplete treatment. This leads to more severe health problems later. The lack of medication is especially prevalent for chronic diseases.

Social issues include the social isolation of those suffering with mental illness and the physical trauma that may result from living in a violent neighborhood. Issues of environmental justice are related to living in environments found in poorer neighborhoods. These issues include increased asthma and COPD's aggravated by poor air quality, mold and dirty living conditions. The risk of lead poisoning in children is more prevalent in poor neighborhoods due to poorly maintained older housing containing lead-based paint and plumbing fixtures.

Risk Factors:

Risk factors associated with poverty include living in violent communities, poor personal hygiene lack of sanitation especially for the homeless population and the prevalent use of alcohol, tobacco & other drugs. Low literacy levels and poor education contributes to unhealthy lifestyles that include a poor diet and lack of exercise. Many living in poverty are missing a sense of spirituality as a component of well-being. The increased sense of daily crisis can lead to depression that immobilizes the individual from being able to cope with their problems.

Access to Care:

Those living in poverty have a greater need for a public health system. This need can be divided into three areas. There is a need for accessible and affordable health care and increased educational opportunities.

The lack of access to health care is acute in the rural areas where there are few providers. This is even worse when the lack of public transportation makes a trip to the doctor a major undertaking. For those in urban areas, there is a need for services to be coordinated and available so it is not necessary to take unpaid time off from work to

make a doctor's appointment. People living in poverty are often transient and they have the need for a medical home. It is difficult to find a medical or dental provider that will accept new clients, with or especially without health insurance.

The issue of no or inadequate health insurance for those in low paying jobs is at the heart of the issue of affordability. Many poor working individuals do not have health insurance through their employment, cannot afford private health insurance and do not qualify for public assistance. The few providers who will accept fee-for-service want payment at the time of service and will not accept a payment plan. Since illness and injury are not predictable, it is difficult to save for these events in advance. Health care for children is especially difficult for working parents who cannot afford to take off work to care for their child even if the child is covered by Medicaid or KCHIP.

In addition to access and affordability, many lack the awareness of what services are available to them and do not know how to access the system. They need education on to utilize health care services as well on how to access the health care system appropriately. The need for education is more important for those with low literacy rates and low levels of educational achievement. This population often has learning disorders or a low level of understanding and need additional attention.

BARRIERS

Just as those living in poverty have needs, the health care system also has barriers that need to be surmounted in order to meet the needs of the population living in poverty.

“It’s all about the money.” Money is a key factor not only for those living in poverty, but also for those seeking to help that population. Money becomes an issue of the “haves” and the “have-nots.” Ultimately, those with more assets need to help provide for those with fewer assets for the good of the whole community. The redistribution of assets ultimately becomes a political issue. It is necessary that those who make public health policy understand the issues of poverty and their impact on the health of the community. Other system needs include better coordination of services among agencies. The coordination of services and the sharing of information and equipment can lead to economies of scale, less duplication and competition, and better service for those in need.

The key to any system change is good data. Without data, it is very difficult to make system changes that will result in better or cheaper services. Current data collection and data sharing systems need to be improved.

SOLUTIONS

A new paradigm for service delivery is needed to provide services to those who really need them. There are enough service providers, at least in the urban communities to meet the needs of the population if service delivery systems are functioning at an optimal level. “The old health care system doesn’t work anymore.” In order to fix the problems or to develop a new system, long-term thinking is required. Short-term thinking often has long-term outcomes that are not the desired results.

While money is important, there can be better ways to distribute funding. Flexibility in funding is the key issue. Medicaid and private insurance have restrictive payment plans that inhibit the provider from adequately administering to the needs of the client. An example is a doctor who is paid for a diagnosis but the client is unable to afford the medication needed to successfully treat the condition. Funding needs to provide for all the related medical needs and provide for a seamless continuum of care. This includes adequate housing and nutrition. A solution is to advocate for changes in funding distribution and to assure that Northern Kentucky gets its "fair share" of state funds especially for mental health and substance abuse. Primary health care providers need public money to provide health services for those who cannot afford to pay for them and do not have adequate health care insurance. Private providers need to be encouraged to accept payment plans for fee-for-service clients and these needs to be a system to assure payment if the client cannot fulfill their fiscal responsibilities.

Coordination of services and collaboration are other way to be more efficient with available funding. Collaboration with medical and dental schools could help to reduce local cost while improving access. There needs to be a method to look at the health care system to eliminate duplication of services and competition for clients among agencies. In some cases mergers between organizations might be a solution or the elimination of duplicate services by other organizations.

A parallel to coordination and collaboration is the utilization of untapped community resources. This builds on the concept that, "It takes an entire village to raise a child." There is a need to return to a sense of community caring for itself. Central to a community are the churches. There is a need for churches in the community to be more involved in the spirituality of the entire community. This includes being a source for information and pointing people in need in the right direction. Personal contact through churches can help to bridge the gap between services and those who need them. Other community organizations such as community centers, senior service centers and local businesses need to get more involved in the health care of the community.

Other services need to be expanded in the community. School-based health centers are needed in the communities that do not have them and those that do, need to expand services. Aside from churches, schools are the other community asset that reaches a high number of residents of the community. Schools reach the children, parents and grandparents. With school-based health centers, Family Resource Centers and Youth Service Centers many of the special health and social needs of children and their families can be reached while freeing teachers to be able to teach and not worry if the other needs of the students are being met.

For those unable to reach clinics, especially in rural areas, mobile clinics are needed for more than preventive services. A traveling van equipped for medical and dental procedures could service a rural population that does not have access to transportation. A combination of primary care, preventive care and health education could reduce the reliance on 911 calls and emergency room visits.

Education is an important aspect for the utilization of health care. Many of those living in poverty do not have the educational level or the literacy levels to adequately provide for their own health care. It is important for those in need to be able to speak with someone

about their health needs. These individuals need to know about and be able to access “Ask an Nurse” and other Hotlines.

The complexity of connecting persons to needed services can be over-whelming. In addition, there is a need to affirm that the people needing services are viable individuals with real problems and they are worthy of helping. To overcome this complexity and affirm the individual needing help, different levels of case management are necessary. When needed, case management should be coordinated so there are not different case managers for different issues for the same individual. Many need expanded case management especially those with many needs. These individuals need one case manager who will listen to their needs and act as a guide among all the health care and social service providers. Others need to have providers located together in a “one-stop-shop” configuration where guidance among agencies is available and services are coordinated and provide a continuum of care and funding for all health and social problems. Others, who have a higher educational level and are more capable of directing their own health care need access to directories in easily accessible places such as libraries, churches and schools. This information might be available through interactive kiosks in public locations.

There needs to be one agency that is responsible for the assurance of health care for all of Northern Kentucky. This agency should be held accountable for the performance of the health care system and should hold the various components of the system accountable for the part they deliver. This agency would assure the continuum of care, the allocation of resources, and the of quality care. In order to do this, it is necessary to good data and data sharing agreements from all participating agencies. It is also necessary to have the capacity to analyze the data for the assessment of the system and the assurance of quality service.

EPILOG

When referring to persons living in poverty, we need to consider that they are individuals and not “families.” They may be a part of a family, but the struggle for survival is often a lonely undertaking. Those who have supportive families, do not feel the full impact of poverty and can better manage their health care. Those living alone, without families for support are in the greatest need for help. Therefore, in this document, the word “families” should be deleted from the general verbiage.

In order to have an impact on poverty and the need for health care in Northern Kentucky, the process of collaboration begun with the Poverty Symposium needs to continue. The recommendations and ideas expressed need to be translated into practical plans and policies to raise the level of health among those living in poverty and thus to raise the level of health for the entire Northern Kentucky community.

Topic 2: Northern Kentuckians have access to good jobs.

Good jobs pay wages and provide benefits that enable individuals and families to consistently pay for their health and living expenses, and to build assets for future needs such as college tuition, moving expenses, or retirement. Good jobs provide income stability when they are in traditional industries that are sustainable or new industries with a potential for future growth and sustainability. Connecting Northern Kentuckians to good jobs and connecting Northern Kentucky employers to good employees should be the core mission of Northern Kentucky's workforce and economic development activities.

Accessibility to good jobs is a critical need of those Northern Kentuckians living at or below poverty level. Most residents of the region would agree with this statement. After "high wages" and "good benefits" however, perception of the other qualities and characteristics that comprise a "good job" can vary widely from one person to the next, depending on interests, education level, skills, etc.

Jobs paying higher wages and providing first-rate benefits require special skills and knowledge that can only be obtained through higher education and other formalized training. While it is not realistic to think that we can educate and train every poor person so they can access high wage jobs (especially since there are more living in poverty than there are high wage jobs), it is reasonable, and in fact probable, that a good percentage of poor people can attain the education and skills necessary to access these high wage jobs with the right resources. In depth, comprehensive programs are a must – educational, technical and social services that have adequate financial resources and responsible (reasonable) time frames to educate and train the worker for self-reliance would enable access to high wage jobs that eliminate the need and eligibility for public assistance programs. However, the dedicated funds, reasonable time frames and strong connection with a support system are not as available as needed for this to be accomplished.

Since high wages and good benefits are not reasonably attainable for all those living in poverty, a job earning \$5.15 – 7.00 per hour can be a good job, as long as there is access to and utilization of public assistance programs to help sustain the family in living a life out of poverty. Obtaining a low wage job is usually not a problem. There are many jobs available that provide services badly needed by the region. In low wage jobs, retention becomes the main issue. Low-wage workers (who typically have low education and skill levels) tend to have multiple issues in their lives that take precedence over employment. For instance, the low wage worker may be forced to choose between going to work or staying home to care for a sick child who is unable to go to school or to daycare; or he/she may have to choose between going to work and re-certifying for a public assistance program that provides stability to the family. Even though social service agencies have attempted to offer more flexible hours to assist the working poor, the typical service provider is still open M-F, 8:30 – 5:00. In cases such as these, the loss of a job is often the more acceptable alternative.

It is critical to support programs targeted at increasing the educational and skill level of the working poor so moving a person out of a life of poverty and public assistance can become a reality. However since it is not likely the current bureaucratic system will be changing (minimum wage @ \$5.15/hr and numerous public assistance programs), the focus cannot be solely on getting low-income people the education and skills necessary

for high paying wages with benefits. Focus must also be placed on getting the private and public sectors to work cooperatively to help the low-wage worker navigate public assistance programs.

There must be a concentrated effort on familiarizing private corporations with the difficulties the working poor can encounter in accessing the public assistance network and the role they can play in helping their low-wage workers overcome them. For instance, human resource departments could assist their low-wage employees in getting food stamps, childcare assistance, legal aid and other needed services. Human resource information systems could be utilized to generate the information necessary to assist these workers in certifying or re-certifying for the public assistance programs for which they are eligible. Companies could also take the initiative in bringing these services to their physical location to decrease the hassle for their workers while at the same time reducing lost productivity for them. In addition, there must also be equal effort applied to educate workers about the far-reaching consequences absence can have on employers, the importance of dependability in an employee and the necessity of taking pride in themselves and the importance of the work they do, no matter what that job happens to be.

Expending the time and resources to provide learning of this type can result in a win-win situation for everyone. It can benefit the working poor through reduced stress and higher job retention, the employer through an increased bottom line from lower turnover and higher productivity and the region as a whole through greater economic growth and stability. Connecting Northern Kentuckians to good jobs and connecting Northern Kentucky employers to good employees will improve Northern Kentucky's workforce and economic development activities.

Symposium Discussion Group Recommendations – Good Jobs

1. Educate employers about these problems. Next year employers need to be at the table for this discussion. Host open house for human resources departments from companies and discuss services employees need to be more self-sufficient.
2. Familiarize low-income with available services through a variety of ways, including employers. Ensure that low-wage earners are connected with these services.
3. Continuity in service provision for clients and one-on-one assistance. Consolidated intake system as a bridge to connect agencies for comprehensive service.
4. More assistance for entrepreneurs/starting own business..
5. Actively educate community about poverty so discrimination of the poor begins to decrease and is eventually eliminated.
6. More job and support services for seniors over 50. The population continues to age and current services are not meeting the needs of this age group.
7. Offices need to stay open longer and on Saturday morning. More satellite offices are needed for easy access for clients.
8. Focus on high wages particularly through jobs that have a lot of openings - like non-traditional jobs for women.
9. Transportation, Transportation and more Transportation. TANK needs to be at the table next year
10. Child Care Assistance needs better funding.
11. Address the waiting lists for mental health, substance abuse and housing. All of these directly affect a good job.
12. Prescription assistance.
13. Employment opportunities for felons.
14. Child care stipend from employer or on-site child care.
15. More funding for food stamp program.
16. Raise minimum wage.
17. Help people with basic life skills - beginning work skills and give them lots of support so they don't fail. Get them to envision themselves as employable.

Topic 3: Northern Kentuckians have opportunities to increase their skills and advance their careers through lifelong learning.

Kentuckians can trace their historically dismal rankings in a variety of topics to its failure to embrace the value of education. Low rankings in the educational attainment of Kentuckians are a major factor that correlates to a general lower standard of living. Specifically, high rates of infant mortality, teenage smoking, alcohol and drug use, unemployment, and percentage of children in poverty can be linked to lower rates of education attainment. The general lower level of education among the population is a primary factor in the lack of entrepreneurial activity and business development that prevent Kentucky from greater individual and societal prosperity and stability.

Kentuckians, including those in the northern region, can alter the future by understanding the causal relationship between education attainment and quality of life issues and by changing its activity to place life-long learning at the top of its priorities. Bold initiatives in the education reforms of 1990 and 1997 are but beginnings of what must be a sustained decades-long effort to reverse a century of educational neglect in the Commonwealth.

Northern Kentucky, with its recent phenomenal growth and apparent prosperity, is not immune to these historical trends. Beneath the surface of the relative prosperity are troubling and systemic factors that should signal concern for the future long-term health and vitality of the region. Among these trends include the following:

- High school dropout rates for the region that are above national averages;
- Illiteracy rates that range from 25% - 40% across the region;
- The percent of the region's population with a bachelor's degree (10% - 14%) that is significantly lower than national figures (22% - 50%) for comparable regions and metropolitan service areas;
- Unacceptable high levels of children in poverty (especially in the urban core);
- Increased percentages of students entering postsecondary education and training with significant deficiencies in reading, writing, and math skills that require remediation.

Additionally, the region faces a shift in the current and future workforce that places emphasis on high levels of basic education competencies, teamwork, communication, problem solving, and other critical thinking skills required for high technology, high wage jobs. Even the manufacturing, transportation, and distribution industries where slower growth is predicted will require postsecondary level education and training. The American Diploma Project outlines well the relationship between education and jobs during the past 50 years and offers some direction for the future.

- Jobs that traditionally require the most education and offer the best pay are growing the fastest, that is, they account for an increasing share of all jobs in the economy.
- Many jobs that now require postsecondary education previously did not. Highly paid professional jobs together with well-paid skilled jobs now account for about 62% of all jobs (full and part time).

- That share is expected to continue to rise while the percentage of factory jobs and natural resource jobs that will continue to exist are becoming relatively more skilled.”

For Northern Kentuckians, a lack of educational opportunities from pre-school through university levels is not the issue. There exists a continuum of education programs that are accessible for a vast majority of residents needing further education at remedial, developmental, and/or advanced levels. Early child development programs are available; programs dealing with basic adult education, GED, and literacy are located in nearly every community. Public and private K-12 systems exist throughout the region. Gateway Community and Technical College, Northern Kentucky University, and Thomas More College provide a collaborative backbone for postsecondary education and training.

On the surface, Northern Kentucky has the tools with which to secure a bright future for all its citizens. Its challenge is to increase the value placed on life-long learning by the citizens. If it is to reverse a century-long trend that has devalued education attainment, the region must begin with its most precious asset, its children.

The region:

Must insure that every child begins with a healthy start –

- prenatal care, postnatal care, early childhood/family education that prepares every child to be ready to succeed in school and every parent to be an action participant in education.
- Become a “reading community” by building community activities that insures that every child (citizen) reads at grade level throughout K-12;
- Become a ‘graduating community” by creating pathways that provide access to postsecondary education and training through scholarships, post graduation jobs, and career development;
- Provide tangible incentives for students that increase high school retention and graduation rates and reduce the need for remediation of basic education; and,
- Utilize a network of adult education providers that increases the percentage of the adult population with a high school or GED to above the national average.

These and other actions will create a culture that values education attainment. As a result of increasing education attainment, the future of Northern Kentucky will look different and consist of the following: high school graduation rates that lead the state and are among the highest in the nation; illiteracy rates among adults over 21 that are less than 5%, the lowest of any comparable MSA in the country; all mothers and children are provided with pre-natal/post-natal care, early childhood development programs so that every child comes to school ready to succeed; regional programs exist to eliminate children in poverty; the percentage of the population with a bachelor’s degree exceeds 40% and is among the highest in comparable metropolitan service areas in the country; and; all children read at grade level.

A future linked to educational attainment is a future with significantly reduced poverty, illness, and limited economic flexibility; all trends that exist today among Northern Kentucky’s surface prosperity. The issue is about establishing a long-term commitment to education attainment, by creating a culture of high educational standards and expectations, and implementing tangible quality of life rewards to those who attain education success. The gateway from poverty to prosperity is education

Symposium Discussion Group Recommendations – Life Long Learning

1. Ensure that all parents understand the value of P-16 education for their children.
2. Encourage parent involvement in volunteering to be involved in child's education– give opportunity by schools to be involved.
3. Every child/ family receives early career pathways and realistic careers.
4. Make life long learning relevant, meaningful, personal and valuable.
5. Every child have the opportunity to access postsecondary education/training.
6. Every child in pre-school, attends school regularly and experiences success.
7. Every child can succeed and every educational organization believes it.
8. Child care that is accessible, affordable, flexible and that is available in the communities / neighborhoods, businesses and industries.
9. Maintain / expand Head Start – including Early Head Start or partner with every child succeeds.
10. Ensure that life long learning is available and accessible to those “outside” – e.g. those in prison, institutionalized.
11. Awareness campaign for programs and services. Advertising so everyone needing services knows how to access them, starting education earlier.
12. Integrate all education opportunities that function together for people to learn.
13. “Education provider” designation – sign.
14. Transportation connected to educational sites, job sites, child-care sites that is convenient, affordable, accessible.
15. Take educational opportunities to the neighborhoods.
16. Send out facts about poverty and surveys to the communities to get input on what they can do to help their community or volunteer services. Such as: share a ride, trade babysitting, providing information where to get help, “Be a sponsor”, Sponsor a needy family just by giving them Encouragement - “You Can Do It”

Additional Recommendations

- Step 1:** Poverty Symposium
- Step 2:** Organize meeting with funders, key stakeholders, and policymakers to consider symposium recommendations.
- Step 3:** Bring together larger group to fine tune recommendations and develop strategies to implement.

Topic 4: Northern Kentucky families have access to services that support them in achieving and sustaining economic self-sufficiency.

Making childcare available and affordable to low-income families is essential to their ability to work and to remain self-sufficient. However, faced with a growing low-income population and a state budget deficit, Kentucky will have to cut the number of families currently receiving childcare subsidy. Last year the state used \$16.5 million from the general fund and \$3 million in tobacco settlement funds to match \$122.5 million in federal funds for the childcare subsidy program. The Cabinet for Families and Children, budgeted to serve 76,400 children in 2003, is serving approximately 78,000 at this time. While the need for the program is growing, the dollars available are likely to remain the same. The state may be faced with changing the guidelines to reduce the number of families eligible for childcare assistance. Changes under consideration at this time include: lowering the eligibility income level, raising the co-payment amounts families must pay and lowering the amount of the subsidy. Under current guidelines, families who make less than 165% of the federal poverty level are eligible for financial subsidies. The subsidies now pay about two thirds of the actual cost for a family on the top end of the scale and more for poorer families. With changes in the guidelines, current estimates could reduce eligible families by 10,000 at the state level and 1,000 in the Northern Kentucky region. However, until the state budget is final and congress votes on renewing the federal subsidy levels, no decision can be finalized.

Northern Kentucky is not much different than the rest of the state in the need for improved transportation options. The lack of transportation in most rural areas is an on going challenge. Especially troubling in Northern Kentucky is the shortage of mass transit routes from the urban core where a large number of the entry-level employee pool resides and the growing industry area where the employers are located. With recent reductions in funding of TANK services, there have been even more cutbacks in mass transportation routes. While transportation services are available for elderly and disabled residents, medical emergency and non-emergency trips and limited transportation assistance is available through Kentucky Transitional Assistance Program (KTAP), the majority of economically disadvantaged residents of Northern Kentucky face limited transportation options.

Kentucky has some of the lowest housing costs and highest homeownership rates in the nation. This places Kentucky in a better position than many states to help its residents become homeowners; however, the state's lower per capita income means that even with low housing costs many residents still are unable to meet monthly rent or mortgage obligations, which is the number one cause of homelessness in Kentucky. The following is a breakdown from the 2000 US Census Bureau on housing units in the three Northern Kentucky counties of Boone, Campbell and Kenton.

	Boone	Campbell	Kenton	Kentucky
Housing Units	33,351	36,898	63,571	1,750,927
Home Ownership Rates %	74.30%	69.00%	66.40%	70.80%
Housing Units in Multi-Unit Structures %	22.20%	30.20%	29.00%	17.70%

The national home ownership percentage rate of 66.20% falls below all three rates in the Northern Kentucky counties listed. In addition, the housing units in multi-unit structures compared to the national percentage rate of 26.40% in two of three counties are higher. However, a priority in Northern Kentucky is rehabilitation of existing substandard single-family homes for purchase by the very low-to low-income households.

The 2001 Kentucky Homeless Survey indicated that the leading causes of homelessness across the state are related to economic issues. The top five leading causes are inability to pay rent, unemployment, domestic violence, alcohol/substance abuse, and eviction/foreclosure. In addition, the majority of respondents indicated their homelessness occurred in the same county they reported as their residence. The overall conclusion indicated a strong need to increase the supply of safe, decent, affordable housing as well as increase and improve preventive services and access to financial assistance resources. The majority of homeless services in the eight county Northern Kentucky Area Development District (NKADD) are located in the northern most, urban counties of Campbell and Kenton. The majority of Kenton County's services are located in Covington. The priority to address the needs of homeless citizens in the eight county region comprising the Northern Kentucky Area Development District is the continuance of existing programs and services while increasing the supply of permanent housing with support and services targeted toward the chronically homeless population including individuals and families with disabilities and victims for domestic violence.

Statewide and within the Northern Kentucky region, an effective strategy to encourage employers to hire low-skilled, low-income adults is critical for families to begin to achieve self-sufficiency. Increasing retention of these same front-line/entry-level employees in the workplace is the key to families sustaining self-sufficiency. The problem of low job retention interferes with employees' ability to sustain self-sufficiency, as well as the company's productivity, consequently hurting the economic capacities of the entire Northern Kentucky region. Employees who secure an entry-level job often face multiple barriers to retaining the job. While the Kentucky Transitional Assistance Program (KTAP) offers assistance to participants to overcome these barriers, once a participant leaves the program many of the services needed to retain their self-sufficiency are no longer available. Frequently, these barriers can cause the employee to lose or quit their job and thus the cycle begins again. Clearly, some type of programs are needed that support entry-level employees' retention and advancement in their jobs within the companies that employ large numbers of entry-level employees. Initiating new programs that work with area businesses to encourage new processes and methods to increase access to benefits and support services for these employees can assist in breaking the cycle. These processes and methods will also serve to strengthen the human resource function of participating businesses, leading to lower costs and improved profitability.

Symposium Discussion Group Recommendations – Self Sufficiency

CHILD CARE

1. More affordable and available - Currently there is a freeze on new childcare services.
2. Availability in rural counties/private or day care centers are needed.
3. 2nd and 3rd shift availability and weekends; restrictions to take certain jobs due the hours that childcare centers are open.
4. Daycare for children with special needs.
5. Emergency/sick child care for when children are ill and parents cannot take off.
6. Childcare centers accept several age groups of children so parents do not have to take children to several different centers.
7. Available childcare for people while they are seeking jobs.
8. Available childcare for those trying to get their GED.
9. Standards in place to ensure quality of childcare experience-are they learning/getting properly educated.
10. Rural areas need more after school programs.
11. More flexible income guidelines for childcare program so more low-income are families are eligible for program.
12. Work with childcare providers regarding more flexibility (no or less financial penalty) when parent is late to pick up child due to circumstances beyond their control (bus schedule).
13. Allow low-income parent to avoid payment on day a child misses due to sickness.
14. Freeze on childcare makes it difficult for those who may want to work because they will not receive a subsidy (less funding and more need).
15. Educate employers about difficult choices working poor families must make when a child is sick – miss work or leave child in less than desirable situation? Employers need to be more flexible when families have sick children.
16. Design expectations for childcare centers - basic needs vs. early education.
17. More childcare centers in neighborhoods or near places of business where low wages workers are employed.
18. Address the quality of the child care providers – educational requirements and pay.
19. In other states/models (Oregon was noted) stay-at-home mothers are receiving a stipend for being “stay-at-home moms”.
20. A program to pay for parents to stay home with very sick children.
21. Job sharing
22. Rotational group that helps care for sick children. St. Luke has a program for sick childcare (very expensive though and medical insurance covers very little).
23. Students’ volunteers for service hours (day or evening).
24. Students volunteer to gain practicum hours.
25. Affordable summer childcare for those normally in school.
26. People to volunteer for just a few hours a day or week. Develop a system of ongoing support for families that are very stressed, with few resources and little support. Individual to family or family-to-family networking and support i.e. families could support other families with children of similar ages and interest. Children could have the opportunity of engaging in more sports, cultural, and recreational opportunities.
27. Tapping into government money to provide more summer care/after school care
28. Employers to provide onsite free or reduced child care for employees (with a nurse and sick room). For small companies, they could combine resources to develop. Parents would also be able to eat lunch with their children each day if they want to. This would perhaps lead to less separation anxiety for children and more productive workers.
29. Have senior centers help by volunteering a few hours at a time babysitting, sewing, cooking for families who are just struggling with time and money.
30. Head Start programs all day at school
31. Churches set up day-cares. Possibly have volunteer help.

TRANSPORTATION

1. Public or private transportation in rural areas.
2. Program to assist low-income with purchase, insurance, gasoline, upkeep and repair of automobile.
3. More bus routes (that are safe) with regular schedules (in case of emergency or illness).
4. More affordable public transportation.
5. Decrease length of time (6 months) for permit before obtaining a drivers license.
6. Address quality of life issues that are directly affected by lack of transportation- how do you go to the grocery store, doctor visits, Laundromat, school or children's in school and after school activities on a bus?
7. Get information out about Goodwill/St. Vincent DePaul's donated vehicles and car seats.
8. Encourage public officials to follow a mom or dad on public transportation to see how long it takes and what is involved (weather, transferring from one bus to another, delays, not showing up at all).
9. Institute Speaker's Bureau (like Welcome House) to go out into the community and tell the "reality" about situations low-income/working poor face.
10. The challenge is "If it is not good enough for me, it is not good enough for anyone else".
11. Agencies need more vans and more volunteers to drive people to work, school, and other outside activities.
12. Use church buses with older members volunteering to drive families around.
13. Cab/Bus vouchers.
14. Companies purchase vans to transport employees back and forth.
15. Offer a tank of gas to employees who pick up coworkers and bring them into work.
16. Better collaboration of agencies so that all appointments are made on the same day.

HOUSING

1. Increase affordable, safe and decent housing as well as subsidized housing (with utilities included).
2. Increase in emergency and transitional housing (specifically in rural areas) so children can stay in as stable of environment as possible. On-site support for at-risk families is needed to enhance their ability to stabilize housing situation.
3. Programs/financial assistance to address past and present utility bills.
4. Assistance with deposit and rent.
5. Increase diverse housing/group homes for special needs populations including mentally ill, those released from prison and others who cannot function in single family homes.
6. Standards in place for landlords to ensure quality housing and penalties to address slumlords.
7. Increase landlord cooperation for weatherization services to decrease energy burden.
8. Address drugs/violence surrounding low-income housing.
9. Make renters insurance more affordable.
10. In situations of domestic violence, the offender should be the one that has to leave the home. Child support should start at that time so women do not have to choose between living on the streets with children or returning to the abuser.
11. Address stigma/discrimination attached to living in public housing.
12. Educate landlords about the importance of providing good references for good tenants.
13. Educate utility companies about the hardships facing low-income people so they will be more likely to work with these individuals and families during difficult financial circumstances.
14. More prevention services are needed to help individuals/families avoid eviction. Agencies work creatively with landlords by using aggressive case planning for people who have previously been evicted in order for landlord to accept them into housing.
15. Integrate public housing with private sector (low and middle income families living in the same neighborhoods).
16. Cities should develop plans to integrate housing and provide for the diverse needs of the population.

EMPLOYMENT

1. Develop training programs to provide work skills.
2. Make education affordable and easy to access.
3. More mental health/substance abuse treatment programs.
4. Provide social and life skills for the work place. Train on good work ethic.
5. Address employment issues of those who have been incarcerated and drug treatment centers.
6. Address the increasing use of temporary services by companies: worker must have phone number to be reached; jobs are usually on the spot which gives little time to plan for transportation and childcare; lack of any real benefits; this population receives lower wages; only held in system for 90 days.
7. Train/educate low-wage workers to think big as many do not think beyond entry level mentality.
8. Address child care/transportation issues for third shift and weekend shift.
9. Provide workers items they need for personal hygiene and clothing for interviews and for work.
10. Increase education level so basic writing and language skills are learned. Provide more job training.
11. Detailed case planning to work with individual in overcoming poor past work history.
12. Train for skills in jobs/careers that pay higher wages, benefits and upward mobility.
13. Address affordable/quality child care issue.
14. Employers provide on-call nurse for employees with sick children.
15. Mentoring program within companies for new employees.
16. Provide free budgeting and computer courses.
17. Companies could provide on-site social worker to provide resources and counseling regarding childcare, transportation, etc. as part of an EAP.
18. Provide employees information on support services available through payroll.
19. Educate executives of companies about poverty issues.
20. Provide on-site food stamp certification, life skills training, AA counseling and GED courses.
21. Expand number of employers participating in EAP programs.
22. Businesses assist regularly with agency wish lists.
23. Develop career paths and upwardly mobile tracks to increase earning within the employer.
24. Tax incentives to employers who provide these services to their employees.

MENTAL/PHYSICAL HEALTH

1. Comprehensive approach to end poverty as those experiencing generational poverty often times lack motivation, suffer with depression and a general lack of hope.
2. Provide access to health care for things like Post Traumatic Depression/Anxiety.
3. Address lack of affordable health insurance since many self medicate with over the counter medication and alcohol when there is a lack of insurance to cover physician visits and prescriptions.
4. Address issue of lack of Physicians/Psychologists in Northern Kentucky area.
5. Address long waiting periods to see Physicians/Psychologists.

MISCELLANEOUS

1. Budgeting and planning skills must be taught to low-income.
2. Training/jobs must be in higher paid positions so a living wage can be earned.
3. Work and self-sufficiency must be made easier for low-income by addressing the child care, housing, transportation, etc. issues that often makes the low-wage worker late, make mistakes on job and are no good to families when they get home.
4. Families need outside help (evening time so they can spend at least a small amount of time with family and/or time for themselves).
5. Self-esteem of these individuals must be addressed.

MISCELLANEOUS (continued)

6. Plan successful programs so low motivation will be turned around (they have already tried so many times, why try again?).
7. Address all systems in place - many feel like the systems are failing them.
8. Campaign to educate low-income about the resources that are available and who is eligible to receive them.
9. Address waiting lists.
10. Give children the opportunities to participate in outside activities. School families “adopt” other students by taking them to practice and games. (getting them involved socially and recognizing individual interests and talents)
11. Create packages of presentation to churches or social clubs, explaining the services of certain agencies. Do not leave without leaving suggestions of ways they can help.
12. People are more likely to donate or help out if they know who they are helping. Make it more personal for everyone without breaking confidentiality.
13. Give out awards to volunteers (contact businesses and let them know their employees are volunteering. See if they can find ways/incentives to get other employees to help volunteer as well.
14. Better Inter-agency communication (round table sharing between agency and possible regional meetings)
15. Rural and urban agencies working together to see what they can do for one another.
16. SEC 8/HUD-check into home ownership/separate from KY Housing Corp.
17. Get the Judge Execs more involved in the planning
18. More involvement of public officials and CEOs of businesses to increase awareness and participate in innovative solutions.
19. Have a symposium held by the Northern Kentucky Chamber of Commerce. Agencies could then hold open houses and give tours.
20. Get a panel of clients together to speak to businesses/and board members of different businesses/organizations
21. Have a community board in local libraries/government agencies/etc.. asking for help with individual families or assignments
22. Have the board members of different agencies go back to their businesses to give presentations and ask for help.
23. PIP established in KY-% goes towards utilities
24. Develop volunteer base to spend time with families, letting them know someone cares and gives encouragement.

Topic 5: Northern Kentucky families have access to the economic resources to withstand short-term crises and prepare for the future.

Since the implementation of welfare reform in 1996, Northern Kentucky achieved a 60% reduction in the welfare roles. This is due to the economic health of the region and the unique level of collaboration with the Cabinet for Families and Children, community partners, and the business sector. While the success is encouraging, much remains to be done.

A study by the University of Louisville on welfare reform documents many of the successes across the state. However, it also documents that a significant portion of families no longer receiving TANF cash assistance remains below poverty or precariously close to poverty levels. 9% of the population no longer receiving K-Tap cash assistance subsides on income under 50% of the poverty rate. This research also indicates that a large percentage of the families no longer receiving K-Tap, and also a significant portion of families still receiving K-Tap, do not receive many other available sources of support such as child support payments, food stamps, housing subsidies, etc. These families, certainly surviving on very meager incomes, do not have the economic assets to sustain them through crises.

Building these assets is a life long process. Assets can be defined in a number of ways, but those that most directly impact the ability of Kentuckians to withstand short-term crisis are those supports in the community that can provide a critical safety net. For families that have experienced generational poverty, the very idea of asset building can be a foreign one. Kentucky must organize its own “assets” in a way that more effectively serves families at risk and helps them to achieve long-term economic security.

A fundamental prerequisite of asset building is availability of support systems, both formal and informal, that helps families in crisis identify their needs and assist them in meeting those needs. Ideally, these systems will play a supportive role, allowing families to take the lead in developing a safety net that will lead to self-sufficiency. The community must assist families in holistically identifying their needs and then working collaboratively to provide a comprehensive response to those needs. These supports should include a variety of service providers such as government agencies, private non-profits, schools, businesses, and faith-based organizations.

There are typically predictable areas that create crisis for families. Developing specific support systems with families around those issues would assist families in creating this economic safety net. Components of this safety net would include:

- Affordable, flexible childcare that is available at various times during the day and available to sick children.
- Affordable and comprehensive health insurance that is connected to a health care system that is flexible enough to meet the needs of the working single parent.
- Emergency assistance for temporary crises in families such as transportation, utilities, food shortages, etc.
- Transportation assistance.
- Assistance in developing long-term life skills such as mentoring young families and choosing and buying a car, assistance in buying a home, budgeting, etc.

Lessons learned from successes in welfare reform provide documentation that assisting families through crisis creates long-term benefits. Research has documented that families who are working, even part-time, report greater levels of well-being in both family indicators and child indicators such as housing, overall health, emotional health, and school performance. Programs aimed at assisting families through crisis and avoiding long-term dependence on welfare have also been successful. The Cabinet for Families and Children, Family Alternative Diversion Program (FAD) is designed to assist with short-term cash payments for clients in need. This program has resulted in significantly fewer families entering the TANF Program. By providing this temporary assistance to families, the state is saving nearly one million dollars per year in cash assistance payments. Similarly, the state's relocation assistance program (WRAP) has resulted in higher employment rates and higher earning rates for families who receive this program. These two programs clearly demonstrate that providing crisis or temporary assistance to families in need provides long-term benefits both in terms of achieving self-sufficiency and overall family well being.

Symposium Discussion Group Recommendations – Withstanding Short Term Crisis

Action Steps:

GOAL #1: There is a need to be proactive in helping families manage their “at risk areas” and develop a plan for coping.

Tasks:

- A.** Develop a research based assessment and screening tool to utilize with families who are in or near poverty.
- B.** Engage traditional and non-traditional partners in planning with families.
- C.** Target ASFA populations for prevention and skill building information.
- D.** Engage schools in financial skill building for elementary and middle school children.

GOAL #2: To provide temporary assistance through financial crisis with services that are empowering and teach families coping skills.

Tasks:

- A.** Provide integrated referral and short-term crisis management services.
- B.** Develop performance-based incentives for participating in skill building exercises as a requirement to receiving some form of crisis assistance.
- C.** Engage non-traditional partners in planning to assist in supporting the working poor.

Miscellaneous Recommendations

Tasks:

- Integrate into existing assessment tools questions, which will assess the presents of non-traditional partners in families’ lives.
- Convene a ½ day planning meeting with the Chamber of Commerce and business leaders.
- Convene a planning meeting with local church groups and the ministry leaders to develop strategies for effective partnering.
- Identify ministerial associations in the Northern Kentucky area to provide an infrastructure for a comprehensive approach to partnership.

Rural Counties Issues:

- Limited resources cause transience. Rural counties see an influx of poor families because the cost of living is lower (rent etc).
- Lack of zoning (trailers)
- Funding and resources are limited to help families get through a crisis.
- Travel to a city is foreign to some.

Ways to Be Proactive:

- Identification of at risk population
- Case management to help families learn skills needed for self-sufficiency. Help meet short-term crisis and build support system for future.
- Offering information on available resources
- Assisting families to learn coping mechanisms
- Goal setting
- Empowerment
- Identification and education of mental health and substance abuse issues.
- Case management to address mitigating circumstances and consequences.
- Combining services/funding with incentives to participate.
- Dollars for classes
- Volunteer services

Identifying Points of Crisis:

- Assisting families with mental health coping mechanism.
- Families in need of Substance Abuse Recovery Programs
- Families are unaware/unfamiliar of services available.
- Unfamiliar with location/access to services.
- Focus on successes but there are barriers to services (funding and availability).
- Family assets that interfere with the eligibility but the family is still in need of assistance (working poor).
- Funds are not available for emergencies.
- Need to be proactive – ask questions (First generation in college, off welfare etc). but tend to fall back on old coping mechanisms. They need a system to support them because they don't have informal support systems. They need a mentor to help them deal positively with a crisis. Coping mechanism to include education on how to avoid crisis.
- Helping families realize importance of establishing good credit. Society teaches a different message. We want it know and don't see how the consequences will affect us later. Families need help with setting goals and priorities. They need to start with the basic needs and build.
- Need to start educating in elementary school to set goals early.
- College search program – not a lot – but they do reach out and give a picture that they can attend college if they choose. There also needs to be more information on vocational opportunities.
- It's not the parents that read the paper we need to target. They see information and involve children. How do we target at risk population?

Topic 6. Northern Kentucky's aging population has access to support services that sustains quality of life.

The phenomenon known as the aging of the population is expected to be pronounced. Anticipating the almost certain fiscal as well as the myriad cultural, social, and physical changes that lie ahead is critically important for local, state, and federal policymakers. Faced with the difficult challenge of fashioning budgets that are adequate to meet today's enormously complex challenges, policymakers also must anticipate the simple and widely embraced mandate to care for society's elders, particularly those who are frail and who cannot care for themselves.

In Spring 2002, the Northern Kentucky Area Development District/Area Agency on Aging conducted a Consumer needs assessment survey of in excess of 600 people aged 60 and over who experienced more than one major health problem. The survey was conducted throughout the eight-county region comprising the Northern Kentucky Area Development District. The target population involved those who would be considered to have an income near, at or below the federal poverty level. In the survey, each participant was asked what assistance he or she needed. Surveys were distributed to senior center attendees, home delivered meals clients, the residents of senior housing and the caregivers of adult day care clients. The top ten concerns voiced by respondents were:

1. Transportation
2. Help with shopping
3. Help with housekeeping tasks
4. Help paying for prescription drugs.
5. Help fixing meals
6. Hearing
7. Personal Care
8. Loneliness
9. Boredom
10. Seeing

The top five needed Services indicated by these consumer respondents were:

1. Transportation
2. Housekeeping assistance
3. Home delivered meals
4. Help with shopping
5. Personal care

During the same time frame a companion survey was completed with approximately 150 key informants including Senior Services of Northern Kentucky Outreach Workers, Northern Kentucky Area Development District/Area Agency on Aging Case Managers, Council on Aging Members and those in the Northern Kentucky community who work professionally with the aged 60 and older cohort having incomes that are near, at or below the federal poverty level. The Key Informants were asked to identify and prioritize the 10 Concerns and Needs, which they most often heard from people aged 60 and over. The pattern of Concerns and Needs that were obtained in the Key Informant survey were largely reflective of those identified in the Consumer survey although their prioritization varied somewhat.

1. Help paying for prescriptions
2. Transportation
3. Money problems (not enough to meet basic needs)
4. Paying for health insurance
5. Keeping medication straight
6. Doing housekeeping tasks
7. Not knowing where to get help
8. Personal care / Loneliness (tie)
9. Help with shopping
10. Respite

The top five needed Services indicated by the Key Informant respondents were:

1. Assistance with managing medication, finances, daily routine
2. Transportation
3. Personal care
4. Home delivered meals
5. Help finding needed services / Respite (tie)

Interpreting the results of both surveys, it is apparent that transportation emerges as the leading Concern and Need across the eight county Northern Kentucky area. Financial Concerns and Needs are notable particularly with regard to prescription drug, insurance and basic needs assistance. In-home services including home delivered meals, homemaking (includes shopping assistance), personal care assistance, medication and financial management (banking/bill paying) and respite are also prominent. Items such as boredom and loneliness are endemic to this cohort comprised largely of single individuals (primarily female) living by themselves. Hearing and seeing challenges are reflective of the ongoing physical process of aging.

Symposium Discussion Group Recommendations – Aging Population

1. Explore ways of educating seniors on political issues and where each candidate stands on the issues affecting seniors (since seniors are the largest groups of voters).
2. Form committees to address these issues and come back together in 6 months.
3. Provide more education for seniors on available benefits and services.
4. Information needs to be more user friendly.
5. Make access to the social security office easier.
6. One-Stop facility is needed specifically for seniors.
7. Involve general community, churches and business to access more funding and volunteers.
8. Provide easy to use book listing of Northern Kentucky service providers and the specific services they provide to seniors.
9. Publish book and make easy to access (deliver with newspaper and available and local churches).
10. Bring elected officials to the table next time – make sure they know we know they were invited and chose not to attend. Write a letter to the Editor of local papers addressing this issue.
11. Bring in League of Women Voters

Summary of needs:

- Prescription drug coverage
- Lack of appropriate funding, Lack of knowledge to access, Difficulty with proper dosage, Over medicating and/or abuse
- Housing
- Not enough affordable housing, Poor management, Increase in social security , increases rent, Location, Waiting lists
- Confusion concerning benefits
- Medical, dental, vision, hearing, psychological, Eligibility and Income guidelines leave many not eligible
- Transportation
- Lack of, Affordability, Accessibility for elderly and disabled, Waiting lists
- Personal Care and Home Care
- Nutrition
- USDA and Home Delivered Meals, Cost, Ability to buy or cook

Topic 7: Northern Kentuckians have equal access to justice and all the rights, safe guards and advantages of our society.

Notions of justice and fairness are central to the American belief that the pursuit of a healthy and productive life is the right of all citizens. Justice works best when all participants within the system have access to adequate resources.

Yet in Northern Kentucky—

- Individuals are being denied housing because of the color of their skin or their family composition;
- Elderly and disabled homeowners are seeing their home taken from them because of the practices of lenders who engage in predatory mortgage lending practices;
- Homeless individuals have few places to seek shelter. If outdoors is where they reside, then these individuals are at risk of losing what possessions they do have if they attract the attention of officials;
- In our area's largest school systems, for both law violations and school board violations, African-American students are suspended at rates higher than white students;¹
- African-Americans are 7.3 percent of Kentucky's population, but are 35 percent of Kentucky's prison population.

The amount of justice you receive should not depend on the amount of money you have.

Northern Kentucky is not without resources to address the legal needs of its citizens whose income is below the poverty level.² The Northern Kentucky Legal Aid Society, Northern Kentucky Volunteer Lawyers, the Children's Law Center and the National Association for the Advancement of Colored People and the Kentucky Commission on Human Rights all offer civil legal assistance. In the area of criminal defense, the Kenton County Office of the Kentucky Department of Public Advocacy represents individuals' accused of serious crimes. In the Northern Kentucky area, approximately 1,500 private attorneys are licensed to practice law.

While there are these local resources, they do not come close to meeting the needs of the low-income citizens of Northern Kentucky. A 1993 civil legal needs study conducted by the University of Louisville, Center for Urban and Economic Research, found that 30 percent of low income Kentuckians reported one or more civil legal problems in the year prior to the survey. Of those who sought legal assistance, 19 percent were not able to obtain either free or paid counsel.

¹Richart, David, Kim Brooks, Mark Soler. Unintended Consequences: The Impact of 'Zero Tolerance' and Other Exclusionary Policies on Kentucky Students, 2003.

²The 2002 federal poverty level for a family of four is \$18,400 per year.

In the criminal law arena in 2001, of the multitude of cases that were prosecuted in district and circuit courts, the Department of Public Advocacy defended 108,000. The average number of cases handled by a trial attorney at DPA was 436.³

The Kentucky Bar Association encourages its members to donate at least 50 hours a year to helping the indigent, but only 7 percent did so in 2001.

As this data indicates, there is a stark and disturbing difference between what is needed and what is being done to provide access to justice. In the real world there are seldom-sufficient resources to meet the needs of everyone, and institutions are routinely forced to make difficult decisions regarding who will be favored and who will not. As we address the issues and complexities of poverty in Northern Kentucky, we must never lose sight of the goal of equal access to justice for all.

³ The National Advisory Commission on Criminal Justice Standards and Goals, established by the U.S. Justice Department, recommend that state public defenders handle no more than 310 cases per year.

Symposium Discussion Group Recommendations – Access to Justice

- A. Social Justice – Eradicate discrimination thru:
 - a. Vigorous enforcement of anti-discrimination laws
 - b. Through Judicial System
 - c. Mandated early intervention to educate people to evil of discrimination

- B. Civil Justice
 - a. Establish fully funded justice services to reduce public defenders caseloads
 - b. Establish Civil Justice for all

- C. Economic Justice
 - a. Speak Out
 - b. Give people more money
 - c. Perseverance

- D. Structures to Change
 - a. more efficient social service bureaucracy
 - i. Reform eligibility for unemployment insurance
 - ii. Address inadequacies of benefit programs
 - b. Corporate – perpetuates paternalism
 - c. Economic
 - i. reform tax structure
 - ii. transfer wealth towards poor
 - iii. work for living wage

Topic 8: Northern Kentucky families live in safe, and healthy neighborhoods and communities with supportive social and spiritual networks, mutual respect across group boundaries, where each member is respected and provided opportunities to participate in civic affairs.

"What would our community look like if it were a really healthy place to live?" The National Civic League (NCL) posed this question to neighbors in hundreds of communities across the country. This is how people everywhere responded:

- A clean and safe environment
- A diverse and vibrant economy
- A place that has good housing for all
- A place where people respect and support each other
- A place that promotes and celebrates its cultural and historical heritage
- A place where citizens and government share power
- A place that has affordable health care for all
- A place that has good schools
- A place that has and supports strong families

But we are moving away from this ideal. Many voluntary associations no longer have the influence or position in our communities they once had. For example, PTA participation has fallen dramatically, as has participation in Boy Scouts, Red Cross volunteers, labor unions membership, and civic clubs like the Lions and the Elks. (*Bowling Alone*, by Robert Parker)

In the Gannet News "Mood of America" poll, 76 percent of citizens agreed, "there is less concern for others than there once was."

We must be careful not to over generalize, since some Northern Kentucky communities may not fit these trends fully, or even at all. There will always be crosscurrents and countertrends. A few communities may have high levels of interconnectedness and public participation, with few glaring social problems and plenty of resources. But these communities are the exceptions.

By and large, the quality of life and the social fabric of many Northern Kentucky communities are being threatened by these trends.

And there is no denying current social problems mirroring national trends, such as poverty, street violence, domestic abuse, drugs, racial/ethnic divides, urban sprawl and homelessness remain very much with us here in Northern Kentucky.

How can Northern Kentucky address the Healthy Communities issues identified by the National Civic League?

Is the solution financial? Solutions often cost money, so, of course, more public funding address local problems would be helpful. Support these efforts, but realize that in the present economic and political climate, success will not come easily and will cost each of us more than money. We need to understand there are no short-term solutions. We need Community leaders who will engage, listen and translate the words into compelling

long-term actions. Leaders who can then garner the support of government, private sector, faith community, public sector organizations and residents for the action plans.

President Bush, in his Inaugural Address said: “What you do is as important as anything government does. I ask you to seek a common good beyond your comfort; to defend needed reforms against easy attacks; to serve your nation, beginning with your neighbor. I ask you to be citizens. Citizens, not spectators. Citizens, not subjects. Responsible citizens, building communities of service and a nation of character.”

Residents, along with the people who work, worship or have roots in a community need to be seen as an alternative resource, as someone with something important to share.

The task is to identify these alternative resources, then to coalesce and organize them, to plan, develop, implement, and sustain multiple community wide solutions. This will not happen all by itself. The structure for organizing and mobilizing community resources is generally not in place. A big plus is that people, 63 percent in one poll, believe that people are willing to pitch in and fix what is wrong in their communities, if they knew how. Mechanisms for involvement are rare, but do exist. Let us identify these processes and bring them into our communities.

America is the great democratic example, but because we lead there is no blueprint. America’s greatness has been due to our ability, on the national, state and local levels, to find common ground. To a large extent, it is our ability to reach consensus through civil discourse that has contributed to our greatness. Today, in our communities, neighborhoods, media and even in our legislative bodies, far too often, a difference of opinion is painted as evil, making constructive dialogue impossible.

In doing this work, the Boston Foundation developed “Seven Guiding Principles for a New Social Contract.”

- Incorporate those directly affected by policies at the heart of dialogue and community building.
- Value racial and cultural diversity at the foundation for wholeness.
- Promote active citizenship and political empowerment.
- Build on community strengths and assets.
- Ensure access to fundamental opportunities and remove obstacles to equal opportunities.
- Support and enhance the well being of children and their families.
- Foster sustained commitment, coordination, and collaboration base on a shared vision and mutual respect.

We hear congress can’t get anything done, or that government can’t get anything right. We are a democracy; the government is a reflection of ourselves.

The task ahead will be long and is not easy, so it is important we get started. In the words of Bobby Kennedy: **“The future does not belong to those who are content with today, apathetic toward common problems and their fellow man alike, timid and fearful in the face of bold projects and new ideas. Rather, it will belong to those who can blend passion, reason and courage in a personal commitment to the ideals of American society.”**

Symposium Discussion Group Recommendations – Safe and Healthy Neighborhoods

Communities, Neighborhoods, Families and individuals have become more isolated. Reasons for this include:

Families are too busy; there have been dramatic community transformations; malls negatively impacted downtown areas; families are more transient: economics have forced some from their neighborhoods and economics have allowed others to move out of their neighborhoods; Neighborhoods are less “walkable” today.

If the assumption that a strong social fabric is necessary for a healthy community is agreed upon, then to be acted upon, it becomes necessary to develop a measure of the social fabric.

Foster a community involvement that empowers residents and neighbors to act for their mutual benefit, both internally and externally.

- Develop a program that implements activities that strengthen the sense of community.
- Design an evaluation with identified community outcome measures that:
 - provides a reliable and valid mapping of the sense of community that exists in a given neighborhood,
 - demonstrates that sense of community is a useful construct in community building efforts, and
 - identifies factors that increase the sense of community.

Specific recommendations include:

Build connections, to increase the sense of shared community ownership, between neighbors, police, schools, human service agencies, elected officials, faith communities, social and service organizations and the business community. Enlist each of these sectors of the community in the fight against drugs

Design and implement programs and activities in many different places in our communities that support families. Help Parents take a more active role in their children’s education. Support current out of school activities and create more, with more varied options. Ensure these activities bring prevention messages to the youth involved.

Acknowledgments

This process was successful due to many people. We gratefully acknowledge their efforts and the support of their organizations.

Charles Alexander, Principle in Charge
Alexander / Camabeam and Associates

Brian Angus, Executive Director
Northern Kentucky Community Action

Scott Bowden, Counter Bio-Terrorist Administrator
N. Ky. Independent District Health Dept.

Bill Butler, President / C.E.O.
Corporex Companies, Inc.

Fr. William Cleves, Vice Chancellor
Thomas More College

Dick Cullison, Executive Director
Legal Aid of Bluegrass

Dr. Jim Decker, Chair
Social Work and Human Services Dept
Northern Kentucky University

Danny Fore, Executive Director
Tri-ED Commission

Judy Garratt, Resident Service Coordinator
Housing Authority of Covington

Joel Griffith, Senior Regional Administrator
N KY Dept. of Community Based Services

Barry Grossheim, Vice President
The Partnership Center

Kate Hackett, Prevention Coordinator
Covington Public School System

Glenda Harrison, Attorney
Legal Aid of Bluegrass

Linda Huff, SCSEP - Interim Director
Northern Kentucky Community Action

Dr. Edward G. Hughes, President
Gateway Community and Technical College

Michael Hurysz, Human Service Specialist
N Ky Area Development District

Hensley Jemmott, Vice President
Northern Kentucky N.A.A.C.P.

Alan Kalos, Health Planning Manager
N. KY Independent District Health Dept.t

Viola Miller, Secretary
Kentucky Cabinet for Families and Youth

Pam Nortker, Regional Training Coordinator
N KY Dept. of Community Based Services

Col Owen, Chairperson
Covington Board of Education

Gwen Pate, (former) Director
United Way - Northern Kentucky District
(current) Fifth Third Bank

Phil Racine, Human Service Specialist
NKADD - Area Agency on Aging

Tim Rawe, President and C.E.O.
Northern Kentucky Fifth Third Bank

Jennifer Shofner, Director
Planning and Program Development
Northern Kentucky Community Action

Bill Simon, Executive Director
Housing Authority of Covington

Paul Smith, Regional General Manager
Fidelity Investment Corporation

Barbara Stewart, Coordinator
Workforce Development Division
N Ky Area Development District

Dr, Barbara Stonewater, Executive Director
Council of Partners in Education

Dr. Angie Taylor, Dean
Community and Economic Development
Gateway Community and Technical College

Gary Toebben, Executive Director
Northern Kentucky Chamber of Commerce

Linda Young, Executive Director
Welcome House

Bill Young, Executive Director
N KY One Stop Career Alliance

Wayne Whalen, President
N Ky AFL/CIO Central Labor Council
Member – I.B.E.W Local 212

Excerpts from message sent to Congress

What does this poverty mean to those who endure it?

It means a daily struggle to secure the necessities for even a meager existence. It means that the abundance, the comforts, the opportunities they see all around them are beyond their grasp. Worst of all, it means hopelessness for the young. The young people who grow up without a decent education, in a broken home, in a hostile and squalid environment, in ill health or in the face of racial injustice - that young man or woman is often trapped in a life of poverty. He does not have the skills demanded by a complex society. He does not know how to acquire those skills. He faces a mounting sense of despair, which drains initiative and ambition and energy

The war on poverty is not a struggle simply to support people, to make them dependent on the generosity of others. It is a struggle to give people a chance. It is an effort to allow them to develop and use their capacities, as we have been allowed to develop and use ours, so that they can share, as others share, in the promise of this nation.

We do it also because helping some will increase the prosperity of all. Our fight against poverty will be an investment in the most valuable of our resources--the skills and strength of our people. And in the future, as in the past, this investment will return its cost many fold to our entire economy. Our history has proved that each time we broaden the base of abundance, giving more people the chance to produce and consume, we create new industry, higher production, increased earnings and better income for all.

Giving new opportunity to those who have little will enrich the lives of all the rest. Because it is right, because it is wise, and because, for the first time in our history, it is possible to conquer poverty, I submit, for the consideration of the Congress and the country, the Economic Opportunity Act of 1964.

The Act does not expand old programs or improve what is already being done. It charts a new course. It strikes at the causes, not just the consequences of poverty.

We are fully aware that this program will not eliminate all the poverty in America in a few months or a few years. Poverty is deeply rooted and its causes are many. But this program will show the way to new opportunities for millions of our fellow citizens. It will provide a lever with which we can begin to open the door to our prosperity for those who have been kept outside. It will also give us the chance to test our weapons, to try our energy and ideas and imagination for the many battles yet to come.

As conditions change, and as experience illuminates our difficulties, we will be prepared to modify our strategy.

Lyndon Baines Johnson
March 16, 1964