

*2011 Community Needs Assessment*  
***Volume V: Final Report and***  
***Recommendations***



## ***About the 2011 Community Needs Assessment***

The United Way of Carlisle and Cumberland County engaged the Institute of State and Regional Affairs (ISRA) at Penn State Harrisburg to undertake a Community Needs Assessment to help them better understand and document their local community needs and issues. The activities undertaken by ISRA are documented individually in specific stand-alone reports (listed below) and culminate in a Final Report offering observations and recommendations.

The individual reports include:

**Volume I: In-Depth Interviews of Community Stakeholders**

**Volume II: Focus Groups**

**Volume III: Community Survey of Residents**

**Volume IV: Demographic and Socioeconomic Background Research**

**Volume V: Final Report and Recommendations**

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# **Volume V: Final Report and Recommendations**

**Technical Report**

**Conducted for:**

**The United Way of Carlisle and Cumberland County**

**Prepared by:**

**Center for Survey Research & Pennsylvania State Data Center  
Penn State Harrisburg**

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## INTRODUCTION AND BACKGROUND

As part of its strategic planning process, the United Way of Carlisle and Cumberland County (UWCCC) engaged the Institute of State and Regional Affairs (ISRA) at Penn State Harrisburg to conduct the 2011 Community Needs Assessment. Activities undertaken as part of the Community Needs Assessment were carried out by two ISRA applied research units – the Center for Survey Research the Pennsylvania State Data Center. In initiating this strategic planning process the UWCCC had specific goals to accomplish.

These included:

- Understanding the local environment
- Identifying community strengths, weaknesses, opportunities, and risks
- Identifying community needs
- Comparing needs to community impact areas
- Comparing needs with national level goals and indicators
- Preparing recommendations for 5-year strategic goals

Components of the Community Needs Assessment that were completed to help achieve these goals included:

- Holding Public Meetings (May 13 & August 25)
- Conducting In-depth Interviews of Community Stakeholders (June – July)
- Conducting Focus Groups of Community Stakeholders (June – July)
- Conducting a Community Survey of Residents (July – August)
- Conducting Demographic and Socioeconomic Background Research (July – August)

This report synthesizes the results/findings from each of those activities into a framework that facilitates suggestions for a strategic direction the UWCCC may wish to take over the next 5 years.

*A note on the geographic boundary of the UWCCC service area. The UWCCC defines its service area as including zip codes: 17007, 17013, 17015, 17065, 17072, 17081 and 17241. The public meetings, in-depth interviews, focus groups, and community survey involved residents in that area. The demographic and socioeconomic data researched were summarized from the*

*municipalities that include those zip codes. See map in Appendix A for details on these differences.*



## **EXECUTIVE SUMMARY - IDENTIFYING THE MOST PRESSING COMMUNITY NEEDS**

Community needs were uniquely identified or surfaced in each of the components of the Community Needs Assessment.

Community needs that surfaced during the in-depth interview process include:

- Increasing the supply of affordable housing
- Increasing the availability of public transportation
- Reducing domestic violence
- Increasing workforce and life skills training
- Increasing mental health services
- Improving collaboration and coordination among service providers
- Reducing crime
- Improving health outcomes including reducing obesity
- Developing a stronger youth component with more programs.

Community needs that were expressed during the 4 focus groups of community stakeholders include:

- Improving access to mental health services
- Increasing the availability of public transportation
- Increasing the supply of affordable housing
- Increasing employment opportunities
- Reducing environmental pollutants
- Improving racial relations
- More affordable medical care, especially for the elderly
- Increasing labor force education and training programs

The most persuasive and statistically sound evidence on community needs comes from the community survey that was conducted during July 2011 with 404 households within the UWCCC service area.

Determining community needs from the survey were done by subtracting the difference between how important an item was from how satisfied residents were with that same item.

Based on that approach, the items with the biggest gap include:

- Reducing drug use
- Availability of employment opportunities for adults
- Number of employers in the community
- Affordability of medical services
- Alleviating poverty
- Improving the quality of teaching at schools
- Alleviating homelessness
- Reducing crime
- Availability of small businesses in the community
- Availability of youth employment opportunities

Finally, the results of a public meeting held on August 25 with over 50 community members resulted in the following needs being identified:

- Improving services to those with intellectual disabilities, physical disabilities, and mental health disorders, especially youth and elderly/aging populations
- Increasing the availability of public transportation
- Increasing the supply of affordable housing

## **COMPARISON OF COMMUNITY NEEDS WITH UWCCC IDENTIFIED COMMUNITY IMPACT AREAS AND GOALS**

The UWCCC has identified improving education, achieving financial stability (income), and promoting healthy lives (health) as the primary impact areas and its priority focus.

Sorting the local identified needs into the primary impact areas yields the following:

### ***Improving Education***

- Improving racial relations
- Increasing labor force education and training programs
- Improving quality of teaching at schools
- Improving collaboration and coordination among service providers

### ***Achieving Financial Stability***

- Increasing the supply of affordable housing
- Increasing the availability of public transportation
- Increasing workforce and life skills training
- Reducing crime
- Increasing employment opportunities
- More affordable medical care, especially elderly
- Increasing labor force education and training programs
- Increasing the number of employers in the community
- Availability of small businesses in the community
- Availability of youth employment opportunities
- Alleviating poverty
- Alleviating homelessness
- Improving collaboration and coordination among service providers

### ***Promoting Healthy Lives***

- Reducing domestic violence
- Increasing mental health services

- Improving services to those with intellectual disabilities, physical disabilities, and mental health disorders, especially youth and elderly/aging populations
- Improving health outcomes including reducing obesity
- Reducing environmental pollutants
- Reducing drug use
- Improving collaboration and coordination among service providers

## COMPARISON OF LOCAL NEEDS WITH NATIONAL LEVEL GOALS AND INDICATORS

As indicated in the previous section, the UWCCC stated impact areas are improving education, achieving financial stability, and promoting healthy lives.

In 2008, the ***national*** United Way initiated a 10-year program designed to achieve the following goals by 2018:

- ***Improve education*** and cut the number of high school dropouts — 1.2 million students every year — in half.
- Help people achieve ***financial stability*** and get 1.9 million working families — half the number of lower-income families who are financially unstable — on the road to economic independence.
- ***Promote healthy lives*** and increase by one-third the number of youth and adults who are healthy and avoid risky behaviors.

The local needs identified for Improving eEducation and some suggested measures/indicators to monitor progress in these areas might include:

<i><b>Local Need - Education</b></i>	<i><b>Indicator</b></i>
Improving racial relations	Number of complaints filed with the Human Relations Commission or other public agency. Number of local police reports on racially motivated incidents.
Increasing labor force education and training programs	Number of programs, number of participants, funds allocated to such programs, unemployment rate.
Improving quality of teaching at schools	Teacher evaluations by individually school districts. Standardized test scores.
Improving collaboration/coordination among service providers	Number of programs between outside groups and school districts.

The local needs identified for Achieving Financial Stability and some suggested measures/indicators to monitor progress in these areas might include:

<b><i>Local Need - Achieving Financial Stability</i></b>	<b><i>Indicator</i></b>
Increasing supply of affordable housing	Number of housing units by median value and median rent. Number of subsidized units and number on waiting list for subsidized housing.
Increasing availability of public transportation	Number of transportation options – bus routes, taxi service, van service.
Increasing workforce/life skills training	Number of programs, number of participants, funds allocated to such programs, unemployment rate.
Reducing crime	Crime rates
Increasing employment opportunities	Number of help wanted ads, number of businesses, Unemployment rate
More affordable medical care, especially elderly	
Increasing labor force education/training programs	Number of programs, number of participants, funds allocated to such programs, unemployment rate.
Increasing number of employers	Number of prospects reported by Chamber of Commerce, Number of businesses
Availability of small businesses	Number of prospects reported by Chamber of Commerce, Number of businesses
Availability youth employment opportunities	Number of help wanted ads, number of businesses, Unemployment rate
Alleviating poverty	Number of person below poverty
Alleviating homelessness	Number of homeless
Improving collaboration/coordination among service providers	Number of programs collaborating/coordinating

The local needs identified for Promoting Healthy Lives and some suggested measures/indicators to monitor progress in these areas might include:

<b><i>Local Need - Promoting Healthy Lives</i></b>	<b><i>Indicator</i></b>
Reducing domestic violence	Number of reported cases. Number of victims treated.
Improving services to those with intellectual disabilities, physical disabilities, and mental health disorders, especially youth	Number served and number on waiting lists as reported by agencies supplying these services
Improving health outcomes including reducing obesity	Body Mass Index scores as reported by school districts
Reducing environmental pollutants	Tonnage in landfills of hazardous material.

	Number of trucks idling in area or passing through. Number of trucking firms in area.
Reducing illicit drug use	Number reported by police. Number being treated by area agencies.
Improving collaboration/coordination among service providers	Number of programs collaborating/coordinating

The next section also identified additional measures that may be used to monitor progress in each of the impact areas.

## **BENCHMARKS AND PERFORMANCE MEASURES FOR UWCCC**

While the previous section identified some specific indicators regarding specific community needs, this section identifies more general benchmarks and performance measures that the UWCCC may want to monitor over time to better understand the larger well-being of the community. In some cases these performance measures may also be used as specific indicators of progress in meeting specific community needs.

### Improving Education

The number of persons 25 and older graduating from high school

The number of persons 25 and older with a college degree

The number of high school drop-outs

The number of students going on to college

Comparison of public to private school enrollments

### Financial Stability

Percent of persons in poverty

Percent of families in poverty

Percent of households in poverty

Percent of those 18 and under below poverty

Percent of those 65 years and older below poverty

Percent of persons receiving public assistance income

Unemployment rate (county level)

Median Household Income

Percent of households that own their own home

Number of people on food stamps

Number of people on TANF

### Promote Healthy Lives

Number of Individuals with intellectual disabilities, physical disabilities, and mental health disorders

Percentage of adults ages 18 to 64 without health insurance



General Quality of Life Indicators

Diversity Measures around race (percent Black) and ethnicity (percent Hispanic).

Crime rates (county)

Teenage pregnancy

Number of single parent households

Elderly living alone

Long term care facilities and number of beds

## **SUMMARY OF COMMUNITY STRENGTHS, WEAKNESSES, OPPORTUNITIES, AND RISKS**

Community strengths, weaknesses, opportunities, and risks were uniquely identified or surfaced in each of the components of the Community Needs Assessment.

Community strengths weaknesses, opportunities, and risks that surfaced during the in-depth interviews, focus groups and community survey include:

- The quality of life, small-town character and atmosphere of the community is strong, and the community responds to needs when those needs are effectively communicated.
- There is an abundance of human and social service agencies available to address needs. That is a strength.
- There was also a sense too many agencies are duplicating services and therefore competing for scarce resources. That is a threat.
- The lack of public transportation, affordable housing, job opportunities as well as environmental concerns, racial discrimination, and influx of low income people were all considered community weaknesses.

In addition, the top 10 aspects of the community that rated the highest in satisfaction from the community survey include:

- Quality of library system
- Adequate ambulance services
- Adequate fire protection
- Availability of parks and recreation facilities
- Quality of public school system
- Quality of private school system
- Adequate law enforcement
- Quality of early childhood education
- Improving safety in schools
- Quality of teaching in schools

Opportunities for the UWCCC were also identified from each of the components of the Need Assessment.

Some specific opportunities identified include:

- Act as a broker to help the plethora of social and human service agencies collaborate and work more uniquely
- To help build capacity in organizations you fund
- To reach out to businesses to involve them in the prioritization of goals and plans
- To involve the younger community in providing more input and involvement
- To assist those “new” needy (recently unemployed). Best investment may be to help them.

## **DEMOGRAPHIC AND SOCIOECONOMIC INFORMATION AND OTHER QUANTITATIVE AND QUALITATIVE DATA COLLECTED**

See Appendix B for a detailed listing of demographic and socioeconomic characteristics for the United Way of Carlisle and Cumberland County Service area. Presented here are highlights from that data.

### **Total Population**

The total population of the service area in 2010 was 97,505. This is nearly a 10% increase from the 2000 population of 88,844. This increase is well above the state's population increase of 3.4% from 2000 to 2010.

### **Population by Age**

The youth population (under age 18) is 21.7% of the total population – comparable to 22.0% for the state. The size of the youth population has declined since 2000 when it was 23.5% of the total population for the service area. The population of persons age 65 and older was 16.1% of the total in 2010 – slightly higher than the 15.4% statewide.

### **Population by Race**

The population in the service area was not as diverse as the statewide population in 2010.

The population of the service area was 92.8 % White in 2010 compared to 81.9 % White statewide.

The population of the service area was 2.7% Black or African American compared to 10.8% statewide.

The population of the service area was 2.3% Hispanic in 2010 compared to 5.7% statewide.

Some individual municipalities in the service area are more diverse. In Carlisle Borough, for example, the percent Black or African American is 8.3%.

In Carlisle Borough and Mount Holly Springs Borough, the percent Hispanic is 4.5%.

### **Poverty**

The poverty rate for persons and families in the service area is less than the comparable rate statewide. Persons below poverty in 2010 in the service area was 5.9% compared to 12.1%

statewide. Families below poverty in 2010 in the service area was 3.6% compared to 8.3% statewide.

The only category where the service area has a higher poverty rate is single male-headed households – both total and with children, which was 14.3% and 23.6%, respectively, in 2010.

### **Teenage Pregnancy**

The teenage pregnancy rate for 2009 in Cumberland County was 6.8%, which was less than the statewide rate of 8.9%.

The county rates were less than the state for all age groupings of young mothers (under age 16, age 16-17, and age 18-19).

### **Crime**

The county crime rates are below the statewide rates for all offenses except DUI arrests.

The county rate for DUI arrests has been higher than the statewide rate for the last 5 years, and the number of DUI arrests in the county has increased from 971 in 2005 to 1,280 in 2009, a nearly 32% increase.

### **Unemployment**

Overall the unemployment rate for the service area during the 2005-2009 period was 5.6% compared to the statewide average of 6.8%. The unemployment rate for younger females was greater than that for young males in the service area (14.6% compared to 22.8%).

Unemployment rates were higher for younger workers both male and female, which is similar to the statewide trend.

The most current unemployment rate available is for August 2011 from the PA Department of Labor and industry and stood at 7.2% compared to the statewide rate of 8.2%.

### **Labor Force - Type of Worker**

The majority of workers in the United Way Service Area are employed by private, for-profit businesses – 70.0%, similar to the state rate of 71.5%.

## **Household Income**

Comparing the service area to the state, a larger percentage of households in the service area had incomes above \$50,000 (58.6% compared to 49.7%).

## **Source of Income**

The percentage of households in the service area receiving SSI income and public assistance income is less than the state percentage (29.0% compared to 31.2%).

Also, the percentage in the service area with wage or salary income is higher than the state average (78.6% compared to 74.5%).

## **Housing**

Total occupied housing units in the service area increased at a much faster pace than the state overall between 2000 and 2010 (12.6% compared to 5.1%). The increase in owner-occupied units was more than 4 times the statewide increase (11.6% compared to 2.5%).

Renter-occupied units in the service area also increased, outpacing the state increase (16.0% compared to 11.4%).

The median rent for the state for 2005-2009 period was \$716. Cooke Township (\$1,050) and West Pennsboro Township (\$1,014) had median rents over \$1,000. Newville Borough had the lowest median rent in the county, \$573.

## **Educational Attainment**

The percent of persons age 25 and older who are a high school graduate or higher is larger for the service area than the state (88.5% compared to 86.9%).

The percent with a bachelor's degree or higher for the service area is also larger than the state average (27.2% compared to 26.0% statewide).

## **Dropout Rates**

The service area includes all or part of 4 school districts. They include:

Big Spring, which had a dropout rate of 2.03%.

Carlisle Area, which had dropout rate of 1.49%.

Cumberland Valley, which had a dropout rate of 0.87%.

South Middleton, which had a dropout rate of 0.46%.

The statewide dropout rate for 2009 was 1.5%.

Big Spring with a dropout rate of 2.03% was the only one with a dropout rate higher than the statewide average.

### **College Bound**

Statewide, 72.6% of public school graduates were college bound in 2009.

In the United Way service area school districts the comparable figures are:

Big Spring – 60.9%

Carlisle Area – 70.3%

Cumberland Valley – 82.0%

South Middleton – 76.2%

Cumberland Valley had the highest percentage of college bound graduates with 82.0%.

## **RECOMMENDATIONS FOR 5-YEAR (JULY 1, 2011 – JUNE 30, 2015) STRATEGIC GOALS**

The Penn State Harrisburg study team provides the following strategic goal recommendations in the context of what we heard from the community. Ultimately the UWCCC must use its own organizational and stakeholder processes to adopt goals that are consistent with its history and culture.

### *Recommendation 1*

#### **Spend your limited resources to maximize the funds that you raise in the community.**

Establish a fundraising goal of increasing the amount raised by a specific percent each year. A suggestion was made that UWCCC should also promote the fundraising that supported agencies do. (This also relates to Recommendation 4 regarding building capacity.)

A number of suggestions were made to better communicate and promote what you do. (Some specifics are provided in the next section - **OTHER RECOMMENDATIONS/ SUGGESTIONS.**)

### *Recommendation 2*

#### **Look for new and innovative ways of doing business.**

Suggestions included looking at models such as the AmeriCorps program for increasing the pool of volunteers. Suggestions also included pursuing more formal relationships with the faith-based community.

### *Recommendation 3*

#### **Focus on those programs that facilitate job training and improving life skills including getting parents more involved with their children.**

The root of the problems that some in need experience can be alleviated by being employed and making good choices about healthy lifestyles. Parents were also identified as the biggest factor in making children successful in school and the community.



*Recommendation 4*

**Encourage collaboration and provide support for capacity building among organizations that you fund.**

There was general consensus that UWCCC must take the lead in un-duplicating services and getting organizations to cooperate - not compete for limited funds. Measuring program outcomes and supporting and funding efforts to build capacity among these organizations is critical. Suggestion was also made that UWCCC should require agencies to create a managed care approach for clients.

*Recommendation 5*

**To ensure that the UWCCC Board and decision making process is open to all segments of the community.**

A number of suggestions were made regarding involving more participation from the western portion of the service area as well as getting more business participation. One such suggestion was to develop a consortium of manufacturing companies to help address needs of the community

*Recommendation 6*

**Fund and support programs that serve a community need identified by the 2011 Community Needs Assessment.**

If you are putting resources to things other than what was documented as a community need or strategy, then you run the risk of saying to your community that you are not listening or you do not agree with them. Both can carry some negative consequences. If you choose to support something else, be prepared to defend or justify why that decision was made.

There were also some conflicting recommendations. For example, there were some individuals that suggested the UWCCC should focus its limited resources on those most in need and deal with most fundamental support – food, clothing, shelter. There were others that suggested some of the newer unemployed that may have never had to rely or request assistance would pay bigger dividends if they were given assistance. As with most things, it may need to be a balanced approach with some of each. A related issue was that the timing of offering service is important. If services only become available to someone in crisis, it is much more difficult and expensive to

provide aid. Try to get them into a program of assistance before things are “critical” (also related to Recommendation 4 on managed care).

## OTHER RECOMMENDATIONS AND SUGGESTIONS

### Communicating with the Community

The Community Needs Assessment is designed to enable the UWCCC to evaluate the current impact areas (Education, Income, and Health), identify needs and service gaps, and streamline the impact areas and goals to more effectively address the most pressing needs of the community.

We recommend that the Community Needs Assessment needs, measures and indicators be made available (on UWCCC website) for continual review and feedback by clients and stakeholders. Strategic planning is a process that needs to be continually updated and refreshed if it is to be valuable.

Many suggestions were made regarding improving the communication with the community. The Community Survey found that 28% of those contacted were not familiar with the services offered by the UWCCC. Some suggestions for improving communication include:

- Undertake longitudinal studies of individuals that were helped by United Way services and show how those people's lives were changed long-term.
- A variation on this theme was the suggestion that case studies of specific individuals who have been served by the programs be put on the local media.
- Have a "Visit the United Way Agencies Day" where potential donors would have a chance to go and see what the agencies do on a daily basis.
- Use social media as a means for the United Way to demonstrate to the community an awareness of outcomes because of their agencies' intervention that yield a sustainable change in people's lives.
- Make the message that giving to the United Way is "investing in the quality of life of their community" rather than "giving to a charity."
- Communicate outcomes by using graphs showing the percentage of the goals met in terms of people served or assisted with United Way dollars. This idea is similar to how the United Way communicates its effort in reaching annual fundraising goals.

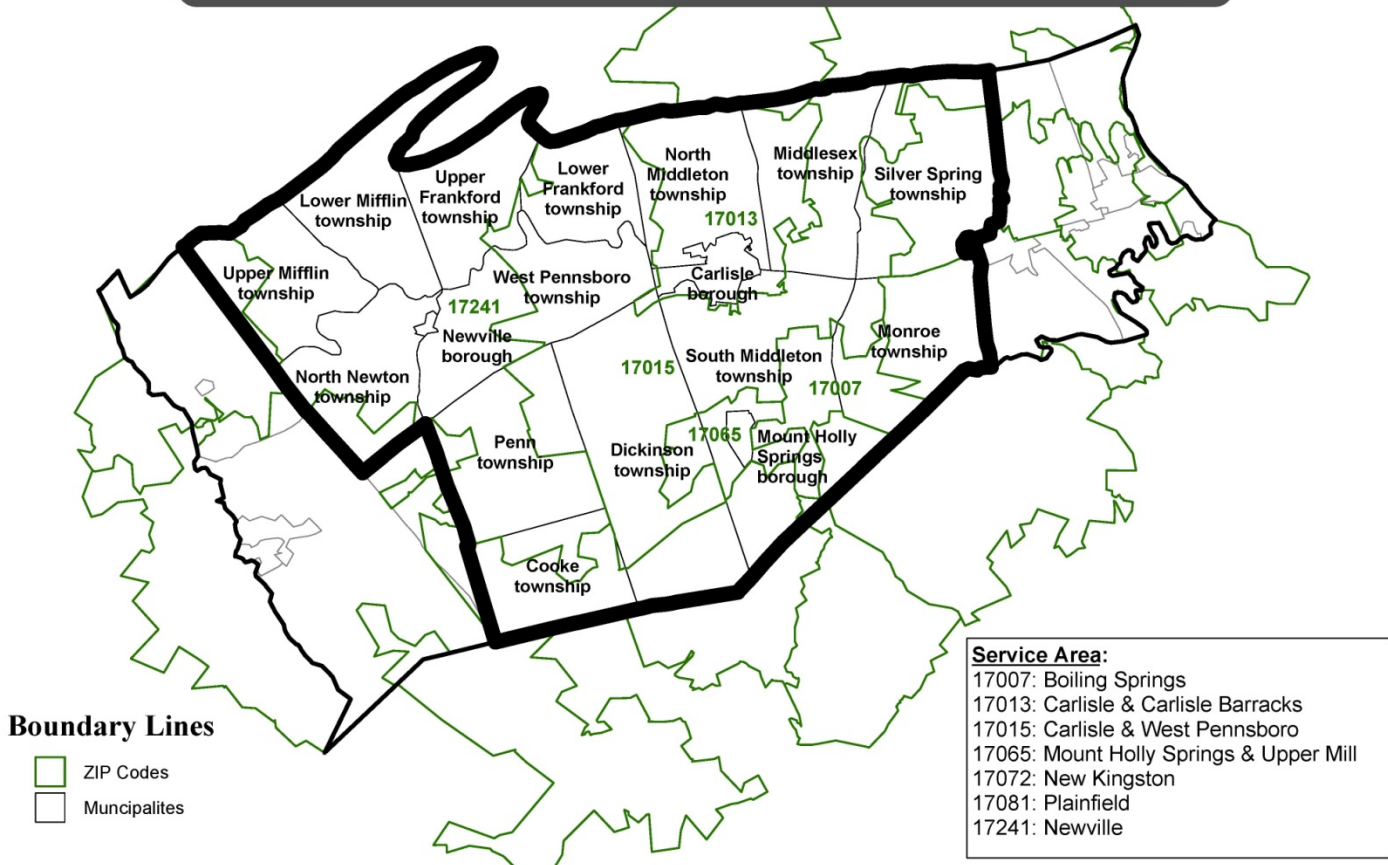
- Put videos on your website about the individual programs supported with United Way funding.

## APPENDIX A

### MAP OF SERVICE AREA

#### United Way of Carlisle & Cumberland County Service Area

Municipalities & ZIP Codes



Prepared by:  
The Pennsylvania State Data Center  
<http://pasdc.hbg.psu.edu/>



Source: U.S. Department of Commerce  
United States Census,  
Population Division

PENNSTATE



Institute of State and Regional Affairs

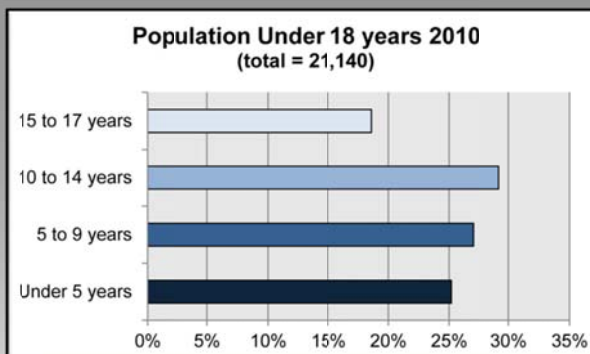
## APPENDIX B

### DEMOGRAPHIC PROFILE OF UWCCC SERVICE AREA

#### United Way of Carlisle & Cumberland County 2011 Community Needs Assessment



Population by Age 2010			
Service Area		State	
	Number	Percent	Percent
Total	97,505	100.0%	100.0%
Under 5 years	5,324	5.5%	5.7%
5 to 19 years	18,598	19.1%	19.3%
20 to 24 years	5,768	5.9%	6.9%
25 to 44 years	22,932	23.5%	24.6%
45 to 64 years	29,154	29.9%	28.0%
65 years and over	15,729	16.1%	15.4%
85 years and over	2,158	2.2%	2.4%
16 years and over	79,053	81.1%	80.8%
Under 18 years	21,140	21.7%	22.0%
18 years and over	76,365	78.3%	78.0%



Population by Gender 2010			
Service Area		State	
	Number	Percent	Percent
Total	97,505	100.0%	100.0%
Male	47,668	48.9%	48.7%
Female	49,837	51.1%	51.3%

Population by Race 2010			
Service Area		State	
	Number	Percent	Percent
White	90,511	92.8%	81.9%
Black or African American	2,671	2.7%	10.8%
American Indian and Alaska Native	167	0.2%	0.2%
Asian	1,787	1.8%	2.7%
Native Hawaiian and Other Pacific Islander	31	0.0%	0.0%
Some Other Race	597	0.6%	2.4%
Two or More Races	1,741	1.8%	1.9%

Households by Type 2010			
Service Area		State	
	Number	Percent	Percent
Total Households	38,554	100.0%	26.9%
Family Households	26,727	69.3%	65.0%
With own children under 18 years	10,590	27.5%	26.9%
Husband-wife family	21,846	56.7%	48.2%
With own children under 18 years	7,855	20.4%	18.3%
Male householder, no wife present	1,483	3.8%	4.6%
With own children under 18 years	829	2.2%	2.2%
Female householder, no husband present	3,398	8.8%	12.2%
With own children under 18 years	1,906	4.9%	6.5%
Nonfamily households	11,827	30.7%	35.0%
Householder living alone	9,726	25.2%	28.6%
Householder 65 years and over	3,949	10.2%	11.4%
Average household size	2.52		
Average family size	2.93		

Percent Below Poverty 2005-2009			
Service Area		State	
	Number	Percent	Percent
<b>Population by Age</b>			
Total	5,382	5.9%	12.1%
Under 5 years	579	11.8%	19.8%
Under 18 years	1,420	7.0%	16.8%
18 to 64 years	3,362	5.9%	11.1%
65 years and older	600	4.4%	9.0%
<b>Families</b>			
Total	947	3.6%	8.3%
Married-couple families	229	1.0%	3.5%
Married-couple families with related children under 18 years	131	1.5%	4.7%
Female householder, no husband present	517	19.1%	27.1%
Female householder, no husband present with related children under 18 years	477	26.6%	36.9%
Male householder, no wife present	201	14.3%	13.0%
Male householder, no wife present with related children under 18 years	162	23.6%	18.6%

Source of Income 2005-2009			
Service Area		State	
	Number	Percent	Percent
Total Households	37,436	100.0%	100.0%
Wage or Salary Income	29,425	78.6%	74.5%
Self-Employment Income	4,284	11.4%	10.1%
Interest, Dividend, or Net Rental Income	13,287	35.5%	28.6%
Social Security Income	10,838	29.0%	31.2%
Supplemental Security Income (SSI)	952	2.5%	4.2%
Public Assistance Income	816	2.2%	3.1%
Retirement Income	9,161	24.5%	20.1%
Other Types of Income	5506	14.7%	14.1%

Educational Attainment 2005-2009			
Service Area		State	
	Number	Percent	Percent
Less than 9th grade	2,186	3.3%	4.1%
9th to 12th grade, no diploma	5,385	8.2%	9.1%
High school graduate (includes equivalency)	25,895	39.2%	38.1%
Some college, no degree	6,141	9.3%	10.2%
Associate's degree	4,085	6.2%	7.2%
Bachelor's degree	11,147	16.9%	16.1%
Graduate or professional degree	6,811	10.3%	9.9%
HS graduate or higher	58,460	88.5%	86.9%
Bachelor's degree or higher	17,958	27.2%	26.0%

Household Income 2005-2009			
Service Area		State	
	Number	Percent	Percent
Total Households	37,436	100.0%	100.0%
Less than \$10,000	1,587	4.2%	7.3%
\$10,000 to \$14,999	1,604	4.3%	6.0%
\$15,000 to \$24,999	3,042	8.1%	11.4%
\$25,000 to \$49,999	9,244	24.7%	25.5%
\$50,000 to \$74,999	7,986	21.3%	19.1%
\$75,000 and more	13,973	37.3%	30.6%

Number of Persons Eligible for Medical Assistance 2008-2009		
Source: PA Department of Public Welfare		
	Cumberland County	State
Total Eligible	17,492	20,247
Percent of Population	7.7%	16.3%
Categorically Needy	13,067	12,944
Medically Needy	1,347	1,205



# United Way of Carlisle & Cumberland County 2011 Community Needs Assessment

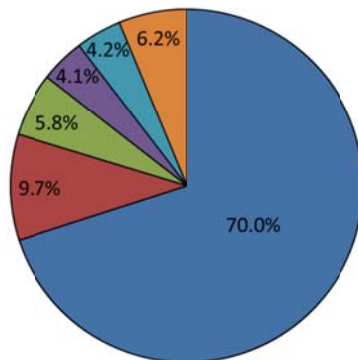


Occupation 2005-2009			
	Service Area		State
	Number	Percent	Percent
Civilian Employed Age 16 and over	48,125	100.0%	100.0%
Management, professional, and related occupations	16,217	33.7%	34.8%
Service occupations	7,040	14.6%	16.3%
Sales and office occupations	12,202	25.4%	25.8%
Farming, fishing, and forestry	251	0.5%	0.4%
Construction, extraction, maintenance, and repair	4,073	8.5%	8.7%
Production, transportation, and material moving	8,342	17.3%	14.0%

Unemployment 2005-2009			
	Service Area		State
	Number	Percent	Percent
Total Age 16 and older	2859	5.6%	6.8%
Male	1,537	5.7%	7.1%
Age 16 to 19	179	14.6%	23.8%
Age 20 to 24	230	12.5%	14.4%
Age 25 to 44	797	7.2%	6.1%
Age 45 to 64	308	2.7%	4.8%
Age 65 and older	23	1.6%	4.3%
Female	1322	5.5%	6.4%
Age 16 to 19	340	22.8%	18.9%
Age 20 to 24	245	10.9%	10.8%
Age 25 to 44	356	3.8%	6.0%
Age 45 to 64	340	3.4%	4.1%
Age 65 and older	41	4.7%	4.2%

**Class of Worker, 2005-2009**

- Private for-profit
- Private not-for-profit
- Local Government
- State Government
- Federal Government



Means of Transportation to Work 2005-2009			
	Service Area		State
	Number	Percent	Percent
Workers Age 16 and over	47,354	100.0%	100.0%
Cars, trucks, vans	42,686	90.1%	85.9%
Drove alone	38,902	82.2%	76.4%
Carpooled	3,784	8.0%	9.5%
Public Transportation (excluding taxi cabs)	210	0.4%	5.4%
All other means	2,776	5.9%	5.3%
Worked at home	1,682	3.6%	3.4%

Occupied Housing Units, 2000 - 2010					
		Change 2000 - 2010			
		Service Area		State	
	2010	2000	Number	Percent	Percent
Total occupied housing units	38,554	34,232	4,322	12.6%	5.1%
Owner-occupied housing units	29,178	26,151	3,027	11.6%	2.5%
Renter-occupied housing units	9,376	8,081	1,295	16.0%	11.4%

Travel Time to Work 2005-2009			
	Service Area		State
	Number	Percent	Percent
Workers Age 16 and over	45,672	100.0%	100.0%
(who did not work at home)			
Less than 10 minutes	7,059	15.5%	15.0%
10 to 19 minutes	14,902	32.6%	29.5%
20 to 29 minutes	9,758	21.4%	20.8%
30 to 45 minutes	9,651	21.1%	19.1%
45 to 59 minutes	2,536	5.6%	7.8%
60 or more minutes	1,766	3.9%	7.9%

**Arrests per 100,000 Population 2009**  
Source: PA State Police, Uniform Crime Report

	Cumberland County		State	
	Number	Rate	Rate	
Arson	7	3.0	5.2	
Assault	66	28.4	124.5	
Burglary	104	44.7	77.3	
DUI	1,280	550.6	421.1	
Drug Violation	614	264.1	432.8	
Larceny/Theft	855	367.8	376.7	
Murder	2	0.9	4.1	
Property Offenses	976	419.8	482.1	
Rape	10	4.3	9.0	
Robbery	28	12.0	55.0	

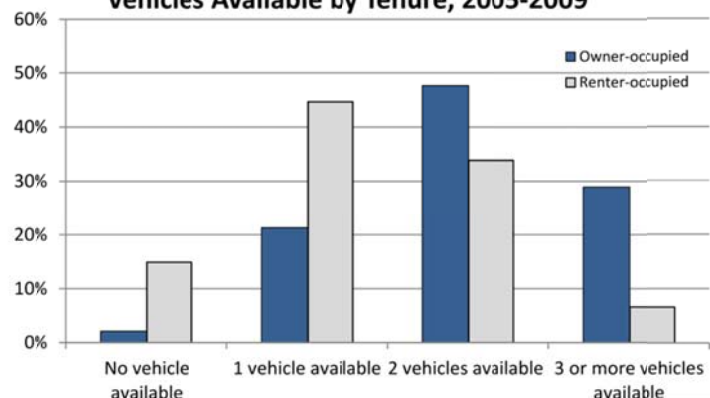
**Births by Age of Mother 2009**  
Source: PA Department of Health \*

	Cumberland County		State	
	Number	Percent	Percent	
Total under 20	164	6.8%	8.9%	
Under age 16	8	0.3%	0.5%	
Age 16-17	32	1.3%	2.3%	
Age 18-19	125	5.3%	5.2%	

\*These data were provided by the Bureau of Health Statistics and Research, Pennsylvania Department of Health. The Department specifically disclaims responsibility for any analyses, interpretations or conclusions.

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**Vehicles Available by Tenure, 2005-2009**



Source: U.S. Census Bureau unless noted otherwise  
Prepared: August 2011  
By The Pennsylvania State Data Center

## **APPENDIX C**

### **METHODS DOCUMENTATION FROM NEEDS ASSESSMENT ELEMENTS**

Each of the unique elements of the 2011 Community Needs Assessment resulted in the preparation of its own stand-alone report (see inside cover for list). Included here is the methodological summary from each report. For a more in-depth discussion, please see the individual reports.

#### **Methodology for In-Depth Interviews**

The United Way of Carlisle and Cumberland County (UWCCC) recently conducted the 2011 Community Needs Assessment as a means of updating its strategic plan. As part of that effort a study team from Penn State Harrisburg conducted 11 in-depth interviews with local stakeholders. The purpose of the interviews was to gather thoughts and perspectives on the local environment and to identify the most pressing needs of the local community.

In-depth interviews were held with stakeholders identified by the UWCCC. Participants included:

Andrea Crouse, Director , Carlisle Parks and Recreation

Judge Merle "Skip" Ebert, Cumberland County

Elaine Herstek, Executive Director, Sadler Health Center Corp.

Chris Houston, Executive Director, Cumberland/Perry Housing Redevelopment Authority

Dennis Marion, Clerk of Courts, Cumberland County

Patrice Pickering, Director of Homeless Asst. Program, Cumberland County

Reverend Walter Reed , Pastor, St. Peter AME

Jay "Buck" Swisher, local staff representative, U.S. Congressman Todd Platts

Kenn Tuckey, Business Owner, Tuckey Mechanical Services, Inc.

Doris Ditzler, Director of Prevention and Education, Carlisle Area Health & Wellness Foundation

Kathy Byers, Collection Development/Reference Librarian, Bosler Memorial Library



Interviews were conducted during the months of June and July 2011. Conducting the interviews were Michael Behney, Director, Institute of State and Regional Affairs at Penn State Harrisburg; Christopher Gulotta, Principal of the Gulotta Group; and Dr. Robert Garatty, CEO of Garraty Workforce Investment.

A set of key questions was developed by the study team and approved by the UWCCC and used as a guide during the in-depth interviews. The time to complete the interviews ranged from 40 minutes to over 1 hour.

### **Methodology for Focus Groups**

#### **Participant Recruiting**

Several recruiting strategies were utilized to recruit the four focus group populations to attain the most participation possible.

#### **Service Providers/Community Leaders**

The United Way of Carlisle and Cumberland County (UWCCC) sent a direct mail pre-notification letter to a list of service providers and community leaders that were selected by the UWCCC. The letter contained information about the Community Needs Assessment and encouraged their participation in the focus groups. A few days later an invitation email was sent to the UWCCC-provided lists. Participation was on a first-come, first served basis. Interested participants were placed in a focus group session and given final confirmation of the date, time, and location of the session via phone or email. Reminder emails were also sent the day before the scheduled focus group session to confirm participant attendance.

#### **Community Members**

The Center for Survey Research purchased a listed household sample representing the UWCCC coverage area. UWCCC sent a direct mail invitation letter to the targeted sample. Participation was on a first-come, first served basis. Interested participants were scheduled for the focus group session and given final confirmation of the date, time, and location of the session via phone. Reminder phone calls were also made the day of the scheduled focus group session to confirm participant attendance.

### Consumers

The Center for Survey Research sent an email and recruiting flyer to a list of United Way member agencies requesting their assistance to recruit direct consumers of their services for a focus group session. United Way member agencies were asked to forward the email or post the recruiting flyer in their offices. Participation was on a first-come, first served basis. Reminder phone calls were also made the day of the scheduled focus group session to confirm participant attendance.

### **Composition of Focus Groups**

In total, 28 individuals participated in the UWCCC focus group sessions. The groups ranged in size from 4 to 10 participants per group.

### **Incentives**

For the community members and consumers groups, a \$20 cash incentive was given to participants as a thank-you for their participation. Light refreshments were also served at those focus group sessions. In lieu of a cash incentive, the community leaders and service providers groups were given boxed lunches prior to the start of the focus group sessions.

### **Moderating**

The four focus groups were moderated by professional, experienced CSR staff members familiar with focus group methods and facilitation. Nicole Sturges served as moderator, and Timothy Servinsky and Michael Behney were note-takers. CSR used moderator's guides developed in conjunction with the UWCCC. Each focus group lasted 1 to 2 hours. Prior to participating in the focus group discussion, participants signed an informed consent form and completed a short intake form designed to collect demographic information.

The final moderator's guide and study protocol were submitted to Penn State University's Office for Research Protections for review and were subsequently approved for use under Penn State IRB #36620.

### **Recording**

CSR staff digitally recorded each group with a dual recorder system.

## **Methodology Community Survey**

### **Instrument Development**

In June 2011, the study team conducted in-depth interviews and focus groups as part of the broader United Way of Carlisle and Cumberland County (UWCCC) Community Needs Assessment. CSR utilized results from these data collection efforts to identify content domains for further exploration, and subsequently worked in consultation with the UWCCC to develop survey questions for use in data collection. The final survey instrument and study protocol were submitted to Penn State University's Office for Research Protections for review and were subsequently approved for use under Penn State IRB #36620.

The instrument was programmed using Voxco computer-assisted telephone interviewing (CATI) software. The CATI program's interface allows complex questioning patterns and automatic skipping when appropriate to allow the seamless flow from one question to the next during the interviews.

### **Sample Design**

The sample drawn for the UWCCC survey used a listed-household (LHH) sampling frame corresponding to the geographies of interest in the study. See Appendix A for a list of the zip codes included in the sample. LHH samples are comprised of telephone numbers derived from the White Pages in the telephone directory. This sample frame guaranteed that every listed landline telephone household within the target geography had an equal chance of being selected for inclusion in the survey. The LHH telephone sample frame was constructed by the Marketing Systems Groups (MSG) of Fort Washington, Pennsylvania. Any household member age 18 or older was eligible to complete the UWCCC survey.

### **Data Collection**

Data for this project were collected by approximately 20 telephone interviewers using VOXCO computer-assisted telephone interviewing (CATI) software. The CATI system accommodated 20 concurrent interviewers and quality control supervisors assisted by VOXCO's monitoring and

productivity tools. Before starting to interview, each CSR interviewer was trained in proper data collection techniques through a formalized interview training class, which included role-playing and feedback, in addition to the technical methodology of interviewing. Additionally, each interviewer was trained to become familiar with the UWCCC survey instrument. All interviewers completed Penn State University's Human Participants Seminar and passed an online training test administered through the University's Office for Research Protections.

Throughout the data collection period, ongoing interviewer training sessions were held to ensure data quality was maintained through 1) interviewer success in gaining respondent cooperation and 2) consistency in delivering the survey to respondents. Three field supervisors and CSR's lead research associate were responsible for training, supervising, monitoring, and evaluating the interviewer staff throughout the data collection period.

A working draft of the survey instrument was pre-tested with a small sample of respondents before full-field interviewing began. The pre-test process ensured the skipping patterns of the programmed survey instrument were functioning as intended. Pre-testing increases the likelihood that the questions provide accurate data and decreases the likelihood of collecting unusable data. Thus, it is an integral component of questionnaire design. The pre-test findings were reviewed, found to be error-free, and incorporated into the final dataset.

Production interviewing for the UWCCC survey took place from CSR's call center on the Penn State Harrisburg campus between July 12 and August 9, 2011. Hours for interviewing for the project were Mondays through Thursdays from 6:00 p.m. to 9:00 p.m. and Saturdays from 10:00 a.m. to 6:00 p.m.

In addition to scheduling specific callbacks to accommodate respondents' schedules, CSR also attempted to contact households that were not reached initially. Follow-up calls to households that did not answer or where busy signals or answering machines were reached were scheduled for subsequent attempts at varying times of day or evening. Because these callbacks are the principal means by which response rates are increased, CSR interviewers attempted a maximum

of 8 contacts to identify a number's actual disposition, with an average number of 2.59 call attempts per telephone number. Calls continued until 408 interviews had been completed.

### **Data Preparation**

All completed survey data were extracted from the CATI system into Statistical Package for the Social Sciences (SPSS) software. Data were verified for accuracy of variable coding, and verbatim text was edited for consistency in formatting before final review by the senior staff of the Center for Survey Research. A survey dataset was created in SPSS for Windows version 17.0.

### **Methodology on Conducting the Demographic and Socioeconomic Research**

Most of the data presented in the demographic profile for the United Way service area (Appendix B) is from the U.S. Census Bureau. There are 2 sources from the U.S. Census used for this study. The first is from the 2010 Decennial census, and the second is from the American Community Survey (ACS).

The U.S. Decennial Census counts every resident in the United States. It is mandated by Article I, Section 2 of the Constitution and takes place every 10 years. The data collected by the decennial census determine the number of seats each state has in the U.S. House of Representatives and is also used to distribute billions in federal funds to local communities. The Decennial Census data in this profile is from April of 2010.

The American Community Survey (ACS) is a monthly survey conducted by the Census Bureau to replace the census long form in 2010. The 2005-2009 file is the first release of data for all geographic areas that provided the data at the municipal level. The next release of data will be the 2006-2010 file, which is scheduled for release in December of this year and then each year after that.

The United Way service area was defined by zip codes. However, because the data was only available at the municipal level, in order to aggregate the demographic data to the service area, we needed to use municipal boundaries. We used GIS software to overlay the zip code

boundaries with the municipal boundaries and determine the municipalities to be included in the data aggregation. There are a total of 17 municipalities within Cumberland County in the UWCCC service area. These include:

Cooke Township

Dickinson Township

Lower Frankford Township

Lower Mifflin Township

Middlesex Township

Monroe Township

North Middleton Township

North Newton Township

Penn Township

Silver Spring Township

South Middleton Township

Upper Frankford Township

Upper Mifflin Township

West Pennsboro Township

Carlisle Borough

Mount Holly Springs Borough

Newville Borough

### **Other data and data sources**

The data on births by age of mother was obtained from the Pennsylvania Department of Health website under Health Statistics and Research – Birth, Death and Other Vital Statistics ([http://pa.gov/portal/server.pt/community/health\\_statistics\\_and\\_research/11599](http://pa.gov/portal/server.pt/community/health_statistics_and_research/11599)).

The data in the profile is from 2009 for Cumberland County and Pennsylvania.

The data on arrests per 100,000 population was obtained from the Pennsylvania State Police, Uniform Crime Report (<http://ucr.psp.state.pa.us/UCR/ComMenuUI.asp>). To access the data choose Reports – Annual – and choose a year. The data in the profile is from 2009.

The data on number of persons eligible for Medical Assistance was obtained from the Pennsylvania Department of Public Welfare and is published annually in the *Pennsylvania Statistical Abstract* available from the Pennsylvania State Data Center. The data in the profile is for the fiscal year 2008-2009 and is available in the 2010 edition of the *Pennsylvania Statistical Abstract*.