

7. Meeting the Essentials

Essentials are the basic needs of individuals and families, like sufficient food, a stable place to live, health care and wellness, and crisis management skills. Barriers like unemployment, low wage rates, mental and physical illness, exposure to violence, substance abuse, and disabilities can prevent individuals from meeting these basic needs. United Way member agencies, along with many other public, nonprofit, and faith-based organizations located within Monroe, Lawrence, Owen and Greene counties offer services to help meet these essentials. Some providers deliver one specific service or program, while others offer a variety of services and programs to help address multiple needs. An example of this would be a homeless shelter that may also serve food, give away clothing, or run a job placement program or substance abuse treatment program.

A critical resource that has been created since SCAN 2003 is the 2-1-1 information and referral system. This three-digit telephone number connects callers with information about human services in their communities. The Indiana 2-1-1 Partnership, Inc. is the statewide organization that supports the 15 active, regional call centers across the state. Locally, 2-1-1 trained staff refer callers to community social services organizations, faith congregations, and government agencies that provide essential human services. The Area 10 2-1-1 Infolink Center in Ellettsville, IN operates the call center for Monroe and Owen counties. Calls to 2-1-1 are free and are answered 24 hours per day.

The American Recovery and Reinvestment Act of 2009 was passed on February 13, 2009, with the goal of reversing the recession and preventing a high rate of unemployment. Overall, ARRA cost approximately \$787 billion, with \$288 billion going toward tax cuts, \$224 billion for education and health care, and \$275 billion for federal contracts, grants, and loans.¹⁷

ARRA provided funding to states to support local community food banks; locally, Hoosier Hills Food Bank received \$53,406 in ARRA funding.¹⁸ Other social services agencies in Monroe County that received ARRA funds include Area 10 Agency on Aging (\$31,469) and the South Central Community Action Program (\$2,559,299).¹⁹ The funds were given to these two agencies to bolster a variety of programs including those providing basic services. Other agencies received funding for emergency food and shelter.

Having access to an adequate food supply continues to be a problem for some individuals and families. Hunger can be associated with homelessness, poverty, and unemployment. Individuals may find themselves in need of shelter for a variety of reasons, including lack of sufficient financial resources, natural disaster, loss of employment, serious health issues, decline in public assistance, domestic violence situations, mental illness, or substance abuse. Households in crisis may need help addressing multiple needs. While hunger, homelessness, domestic violence, and safety issues are presented in this section, for more detailed information about earnings, health care, and youth development, please refer to those respective sections.

Some of the key indicators for essentials are:

Table 7.1: Essentials indicators

	2003	2010
Percent of Monroe County households receiving SNAP ¹	3%	3%
Percent of Monroe County households receiving WIC ²	2%	2%
Percent of K-12 students that receive free lunch ³	26%	31%
Percent of K-12 students that receive reduced fee lunch ³	9%	11%
Percent of homeless that are unaccompanied youth ⁴	8%	3%
Number of sheltered households with children ⁴	77	55
Percent of households experiencing homelessness ⁴	0.10%	0.13%

SOURCES: ¹ Indiana Division of Family Resources, ² The Annie E. Casey Foundation, ³ Indiana Department of Education, City of Bloomington Department of Housing and Neighborhood Development

NOTES: Trends cannot be appropriately applied for "number of sheltered households with children" or "percent of households experiencing homelessness" due to changes in Point-In-Time Count methodology as mandated by HUD.

In the 2010 Household Survey, 58% of households with an income of less than \$15,000 said that running out of money at the end of the month is a major problem, and 22% said that this is a minor problem. As households run out of money, meeting basic needs becomes a greater challenge (Table 7.2).

Table 7.2: Percent of Households Running Out of Money by the End of the Month

Household Income	Major Problem	Minor Problem
Less than \$15,001	58%	22%
\$15,001-\$25,000	27%	38%
\$25,001-\$35,000	23%	23%
\$35,001-\$50,000	14%	34%
\$50,001-\$75,000	16%	25%
More than \$75,000	0%	10%
All Households	19%	23%

SOURCE: 2010 Household Survey (n=277)

▼ Additionally, households reporting that having enough money to keep the car running is a major problem increased from 2003 to 2010. See table 7.3.

Table 7.3: Percent of Households Having Difficulty with Having Enough Money to Keep the Car Running

Household Income	Major Problem		Minor Problem	
	2003	2010	2003	2010
Less than \$15,001	19%	32%	33%	26%
\$15,001-\$25,000	15%	16%	46%	20%
\$25,001-\$35,000	8%	12%	25%	35%
\$35,001-\$50,000	0%	11%	21%	27%
\$50,001-\$75,000	4%	7%	15%	18%
More than \$75,000	0%	0%	0%	4%
All Households	6%	10%	22%	18%

SOURCE: 2003 Household Survey (n=205); 2010 Household Survey (n=272)

HUNGER AND FOOD INSECURITY

Households struggling to obtain adequate food are deemed “food insecure,” meaning the household is forced to choose whether money should be spent on food, medical bills, or other essentials. Food insecurity may not be a problem faced by households on a regular basis. The recent increase in need for food assistance and drop in donors has kept food pantries struggling to keep up with demand. Many families from the middle class who normally would provide food to pantries have begun to seek assistance themselves due to the recent economic recession, causing not only a decrease in the food supply, but also an increase in the demand for food pantry services.

Across the nation, 16% of Americans are food insecure—the highest level of food insecurity that the United States has encountered since first reporting on the issue in 1995. The 2009 report from the Hunger and Homelessness Survey conducted by the U.S. Council of Mayors documents common reasons for food insecurity and how families attempt to fill the gap. The report shows that between 2008 and 2009 the request for emergency food assistance rose from 18% to 26%. This was the largest average increase in the past 18 years. Of the 37 million people served nationally in 2009, 37.8 percent were children and 8.1 percent were elderly.

The survey also found that the top three reasons people needed food assistance was due to unemployment (92%), high housing costs (60%), and low wages (48%).

Food insecurity rates are reported at the state and national levels. According to Feeding America, 11.2% of Indiana residents were classified as having food insecurity. Additionally, 13.1% of children under the age of 18 in Indiana are considered food insecure. The estimated average rate of children who are food insecure ranges between 10.9% and 22.1% across the country, and the

national average rate of children considered food insecure is 17.1%. Indiana ranks 45th in the country for its child food insecurity rate.

The national spike in food insecure households is also reflected locally. Area 10’s 2-1-1 Infolink reports that 8% of their 2010 requests for assistance were food-related referrals.²⁰ Additionally, 20,820 Monroe County residents were considered food insecure in 2009—16.3% of the population. Of those classified as food insecure, 61% had an income at or below 130% of the poverty threshold, 2% were at 130-185% of the poverty threshold, and 37% had incomes above 185% of the poverty threshold.

The 2010 Household Survey reveals that those struggling most with food have less than \$15,001 in annual income, with over 50% reporting that having enough money for food was a major or minor problem. Households in the \$25,000 to \$35,000 (8%) and \$35,000 to \$50,000 (11%) brackets also had a major problem with having enough money for food. This is consistent with other measures that show more middle class families struggling.

Table 7.4: Percent of households experiencing difficulty having enough money for food over the past twelve months

Household Income	Major Problem		Minor Problem	
	2003	2010	2003	2010
Less than \$15,001	7%	34%	24%	23%
\$15,001-\$25,000	2%	12%	26%	4%
\$25,001-\$35,000	0%	8%	11%	15%
\$35,001-\$50,000	0%	11%	14%	4%
\$50,001-\$75,000	0%	0%	6%	11%
More than \$75,000	0%	0%	3%	0%
All Households	--	9%	--	8%

SOURCE: 2010 Household Survey (n=220), 2003 Household Survey (n=279)



In the 2010 Client Challenges Survey, 89% of service providers indicated at least some of their clients had difficulty paying for food. Only 11% of the providers indicated clients they serve have little to no problem paying for food (see Table 7.5).

Table 7.5: Percent of clients experiencing difficulty having enough money for food

Percent of Clients	Frequency	Percent
Most or All (80-100%)	14	22%
About Half (40-60%)	15	23%
Some (20-30%)	28	44%
Few to None (about 0%)	7	11%
Total	64	100%

SOURCE: 2010 Client Challenges Survey (n=88)

Demand for Food Assistance

The increase in hunger and food insecurity has prompted an increase in the need for emergency or supplemental assistance. In the 2010 Client Challenges Survey, 40% of service providers reported that some of their clients needed emergency or supplemental food assistance on a regular basis over the past 12 months. Forty-five percent of providers also said that over half needed assistance in this area. Only 15% of the service providers in the Monroe County area reported no clients needing assistance with food.

Table 7.6: Percent of clients needing emergency or supplemental food assistance on a regular basis over the last twelve months

Percent of Clients	Frequency	Percent
Most or All (80-100%)	7	11%
About Half (40-60%)	21	34%
Some (20-30%)	25	40%
Few to None (about 0%)	9	15%
Total	62	100%

SOURCE: 2010 Client Challenges Survey (n=88)

While there has been a strain on organizations providing emergency food relief, government agencies have been working to help alleviate the increased demand. Between 2008 and 2009, federal emergency food assistance increased 5 percent. In 2010, one-member households in Monroe County had the highest usage of emergency food assistance (36%), followed by 2-3 member households at 29% and 4-6 member households at 28%. Individuals between the ages of 30-49 were the most common recipients of emergency food, followed closely by children age 6-17 (23%).

Table 7.7: Percent of households needing emergency or supplemental food assistance

Household Income	Major Problem		Minor Problem	
	2003	2010	2003	2010
Less than \$15,001	5%	13%	29%	22%
\$15,001-\$25,000	6%	0%	9%	32%
\$25,001-\$35,000	0%	0%	4%	4%
\$35,001-\$50,000	0%	7%	0%	5%
\$50,001-\$75,000	4%	0%	0%	0%
More than \$75,000	0%	0%	0%	0%
All Households	2%	3%	5%	8%

SOURCE: 2010 Household Survey (n=272), 2003 Household Survey (n=205)

Supplemental Nutrition Assistance Program (SNAP)

SNAP, previously known as the Federal Food Stamp Program, provides food assistance and support to raise the nutritional levels of low-income households and individuals. The US Department of Agriculture, Food and Nutrition Service (FNS), administers SNAP at the federal level and develops the regulations that govern the program's implementation, which aims to help low-income families purchase nutritious food. Furthermore, the federal government funds 100% of the benefits and 50% of the administrative program costs associated with implementing SNAP. State agencies administer the program at the state and local levels and determine eligibility criteria and benefit distribution levels.

In order to qualify for Indiana's Food Stamp Program, households must meet financial and non-financial requirements. Financial requirements include a series of household income tests and a household asset test, while non-financial requirements include state residency, United States' citizenship or alien status, work registration, and compliance with the Indiana Manpower and Comprehensive Training (IMPACT) job placement program.

The Family & Social Services Administration (FSSA) administers the food assistance program in the state of Indiana through electronic benefits transfer (EBT) cards. FSSA ensures consistency in implementation of SNAP across each Indiana County according to federal regulations; however, each local office of the Division of Family Resources is responsible for processing applications, certifying eligibility, and issuing benefits. ARRA has invested more than \$8 billion in the Supplemental Nutrition Assistance Program (SNAP). ARRA increased SNAP recipient benefits by 13.6% nationally and states received \$300 million for SNAP administrative costs.

SNAP not only provides funding, but also information and programs that help people understand how to shop with nutrition in mind. In 2011, the number of SNAP recipients during a one-month period were 25% higher than the previous year, while the average benefits per household decreased slightly from \$283 to \$274. Table 7.9 shows data for Indiana during the same time period.

Table 7.8: Monroe County monthly Supplemental Nutrition Assistance Program recipients

	February 2010	February 2011
Households receiving SNAP	4,123	5,274
Individuals receiving SNAP	8,778	10,935
Average per household	\$283	\$274
Average per recipient	\$133	\$132
Total assistance issued	\$1,168,615	\$1,445,182

SOURCE: Indiana Division of Family Resources. *Monroe County Monthly Management Report: February 2011.*

Table 7.9: Indiana monthly Supplemental Nutrition Assistance Program recipients

	February 2010	February 2011
Households receiving SNAP	342,946	377,083
Individuals receiving SNAP	804,578	871,570
Average per household	\$309	\$304
Average per recipient	\$132	\$132
Total assistance issued	\$106,097,11	\$114,798,38

SOURCE: Indiana Family and Social Services Administration. *State of Indiana Monthly Management Report: February 2011.*

Temporary Assistance to Needy Families (TANF)

TANF, formerly known as Aid to Families with Dependent Children (AFDC) or welfare, is a governmental program that provides cash assistance and supportive services to families. Families with children under the age of 18 are eligible for TANF benefits in Indiana. Eligibility is also based upon income, past or current benefits from other government assistance programs such as Medicaid or Social Security, and medical information for members of the household. Generally, families with an adult receiving support through TANF may obtain benefits for a maximum lifetime limit of 60 months.

Between 2003 and 2009, the annual average number of families receiving TANF benefits in Monroe County decreased 38 percent. The number of families receiving TANF grants during this time in Owen, Greene, and Lawrence counties decreased by 36%, 29%, and 19%, respectively.

Women, Infants, and Children (WIC)

The WIC program provides grants to obtain food as well as nutrition education to low-income pregnant women, post-partum women, and their children who are considered at a nutritional risk. Applicants must meet categorical, residential, income, and nutrition risk requirements in order to be eligible to receive benefits. For the categorical area, women must either be pregnant or postpartum. Pregnant women receive assistance until six weeks after the end of the pregnancy. For women that are postpartum, assistance can be received up until six months after the

pregnancy, while those that are breastfeeding are entitled to benefits until the child is one year of age. Children qualify for benefits up to age five. To meet the residential requirement, one has to reside in the state where they are seeking assistance. A candidate must also have an income level that is at or below the specified level of the state agency. However, those already participating in SNAP, TANF, and/or Medicaid are considered eligible despite their income level. Finally, a physician must determine the applicant must be nutritionally at risk. WIC was created by the USDA in 1972 to provide supplemental food, healthcare, and nutrition information for low-income women, infants, and children 5 and under who are nutritionally at risk. Nationally, WIC participants increased 20% to 9,175,000 from 2003 to 2010. Monroe County saw a slower growth in WIC recipients, increasing 13% to 3,808 from 2003 to 2009. According to the Hoosier Hills Food Bank, WIC is used by 43% of the clients they serve within the Monroe County area.

Free and Reduced School Lunch Program

The Free and Reduced School Lunch Program provides free and reduced-price lunches to school children from economically disadvantaged, low-income families. The US Department of Agriculture publishes income guidelines for program eligibility that factor household income and size in relation to the federal poverty guidelines. Children from families with incomes at or below 130 percent of the federal poverty level are eligible for free meals, through the USDA’s National School Lunch Program. Children from families with incomes between 130 percent and 185 percent of the federal poverty level are eligible for reduced price lunches.

Indiana’s Department of Education, Division of School and Community Nutrition Programs, administers the program for the state of Indiana. In Indiana, children in households receiving SNAP or TANF benefits receive free school meals, regardless of family income. Eligible schools include public, nonprofit, private, and residential care institutions. Meals provided from the program are either low-cost or free. For the 2009-10 school year, the Indiana Department of Education (IDOE) reported 14,115 students enrolled in public, nonprofit private, and charter schools in Monroe County. Of these students, 3,550 received free lunches and 1,088 received reduced fee lunches through the program. Similar to statewide average statistics, almost one-third of students enrolled in the Monroe County Community School Corporation (MCCSC) participated in NSLP. Overall, MCCSC has witnessed an increase in the number of students who participate in NSLP (See Table 7.10).

Table 7.10: Public Students Receiving Free and Reduced Price Lunches (Percent)

County	2007	2008	2009	2010	2011
Monroe	29.7%	26.0%	32.0%	33.5%	35.9%
Lawrence	33.1%	37.1%	37.4%	43.3%	45.2%
Owen	40.1%	40.3%	40.6%	44.3%	38.8%
Green	38.7%	39.3%	41.1%	44.1%	44.2%

SOURCE: IYI Kids Count Data Center

In addition to the National School Lunch program, the USDA operates the School Breakfast Program using the same eligibility guidelines. The USDA collects and reports aggregated information about the School Breakfast Program in Indiana. In 2009, 226,762 children in Indiana received over 35 million breakfast meals through Indiana’s School Breakfast Program. The total number of breakfasts served in Indiana has steadily increased since 2005, when approximately 26 million breakfasts were served to 210,886 participants. Between January 2009 and January 2010, participation in the School Breakfast Program in Indiana increased 13.5 percent.

It is important to recognize that not all who are eligible for any of the public food assistance programs will choose to apply and receive benefits. This could result from a variety of factors, such as a lack of awareness about the program, an inability to complete the necessary applications, feelings of embarrassment, or an unwillingness to enroll in a government assistance program.

When surveying Monroe County households, 13% said that having enough money for food was at least a minor problem, whereas 86% said that having enough money for food was not a problem within their household. The percentage of respondents who said that having enough money for food was not a problem in the 2010 Household Survey was similar to the percentage of respondents in the 2003 Household Survey.

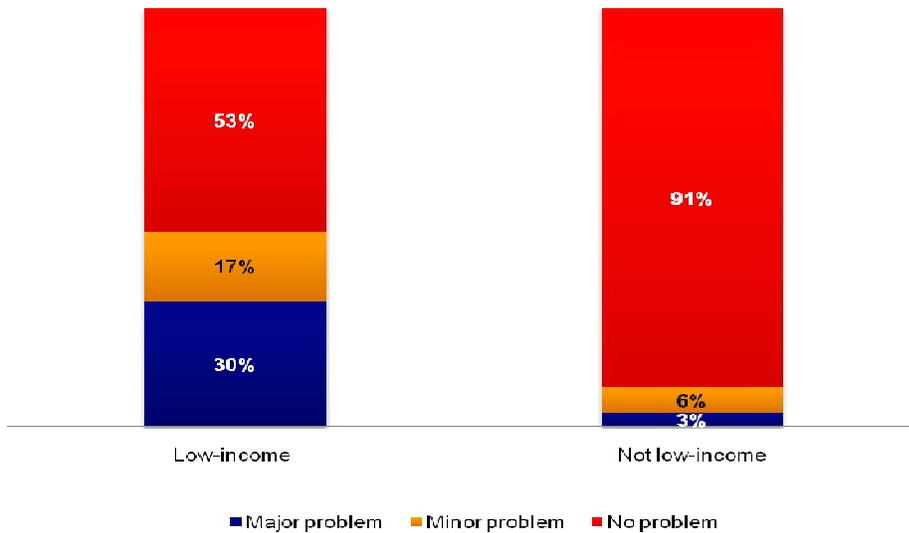
Table 7.11: Percent of households having a problem with having enough money for food

	Percent
A major problem	6%
A minor problem	7%
No problem	86%

SOURCE: 2010 Household Survey
(n=272)

Approximately 89% of service providers believed that at least some of their clients (20% or more) had a problem with having enough money for food. Responses varied by income, as can be seen in Figure 7.1. Nearly half (47%) of low-income respondents said that having enough money for food was at least a minor problem.

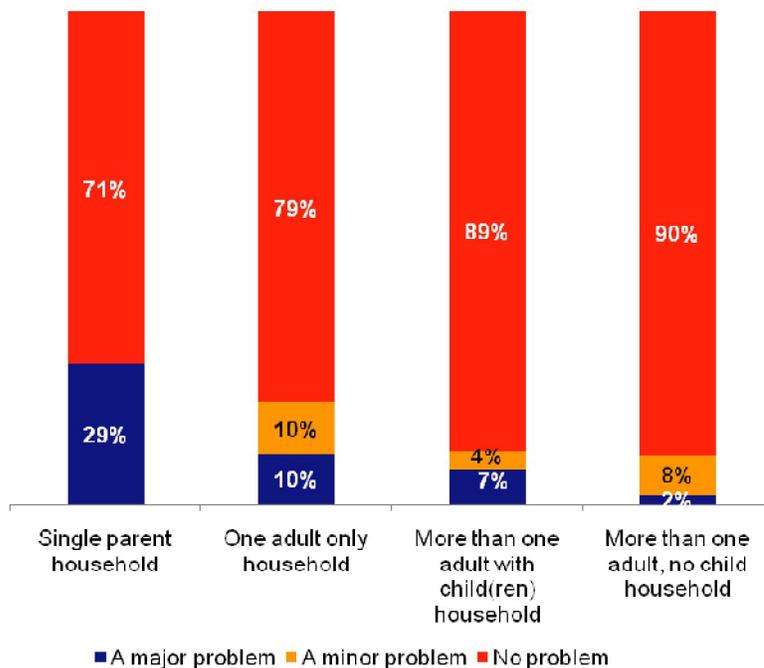
Figure 7.1: Having enough money for food



SOURCE: 2010 Household Survey (n=272)

Responses about having enough money for food also varied according to household composition. Of single parent households, 29% said that having enough money for food was a major problem. By comparison, only 7% of households with more than one adult and child stated this was a major problem. Figure 7.2 shows the full distribution.

Figure 7.2: Having enough money for food by single parent household



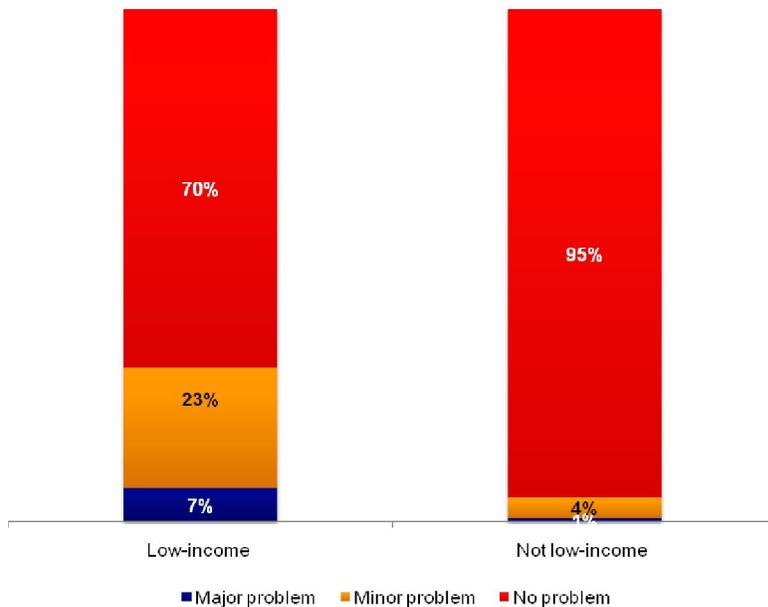
SOURCE: 2010 Household Survey (n=272)

The Household Survey participants' responses about having enough money for food also differed by the age of the respondent. Of all age groups, 30-44 year-olds had the largest share of households who had at least a minor problem with having enough money for food (23% for 30-44 year-olds, compared to 15% for those 65 and older, 10% for 45-64 year-olds, and 0 for 18-29 year-olds).

When asked if needing emergency and supplemental food assistance was an issue, 92% of 2010 Household Survey respondents said that it was no problem. This is similar to the percentage of 2003 Household Survey respondents who said it was not a problem.

Household Survey respondents, when broken into low-income and not low-income categories, responded differently about the degree to which finding emergency or supplemental food assistance was a problem. Of low-income respondents, 30% said that needing emergency or supplemental food assistance for their household was at least a minor challenge.

Figure 1: Needing emergency or supplemental food assistance by low-income



SOURCE: 2010 Household Survey (n=272)

Many government food assistance programs require applicants to complete a detailed application. When surveyed about their clients' challenges, 80% of providers believed that at least some of their clients were having a problem completing an application for state and federal assistance programs.

Several nonprofit and faith-based organizations provide food to residents of Monroe and nearby counties. The information included in this section is by no means a comprehensive overview of all food assistance services in these counties. The examples below are simply meant to illustrate the variety of food assistance programs and services in the region, and are food providers in the 2-1-1 Infolink call system.

Hoosier Hills Food Bank is the primary food distributor to nonprofit food pantries and free feeding programs in Monroe, Martin, Owen, Orange, Brown, and Lawrence counties. The organization has a meal sharing program whereby volunteers repackage food that has been prepared but remains unused at restaurants; the repackaged food is then distributed to local and rural feeding agencies. Hoosier Hills Food Bank receives food donations from commercial businesses, civic groups, and the USDA.

Food pantries operate in the Monroe County community to help people requiring short-term food assistance.

Mother Hubbard's Cupboard specializes in healthy, nutritious food. In addition to offering a food pantry focused on healthy food options, the organization offers nutrition education and gardening programs to give clients a better awareness of food and to encourage self-sufficient food practices regardless of income.

Monroe County United Ministries (MCUM) has operated in the community for 70 years. MCUM gives clients a three-day supply of food combined with other emergency assistance, such as clothing, hygiene items, and rent/utility assistance, as needed. MCUM receives significant food donations, volunteers, and financial support from congregations and other local faith-based groups. Some of MCUM's supporting congregations also operate smaller food pantry facilities on-site.

Community Kitchen specializes in serving both hot sit-down and cold to-go meals at their primary location on the south side of Bloomington, as well as hot and cold to-go meals at Community Kitchen Express on the west side of Bloomington. The Community Kitchen's Feed Our Future program provides sack lunch meals to at-risk youth in after-school programs. Another program targeted at youth hunger is Backpack Buddies, where the organization gives backpacks containing a weekend's supply of food to selected low-income children at four local elementary schools. Additionally, the Summer Breakfast program provides children in eight low-income neighborhoods with a free, nutritious 'brown bag' breakfast during the summer. In addition to serving youth, Community Kitchen serves identified, local HIV positive individuals through the Nutrition Links program, where volunteers deliver two carryout meals free of charge daily.

Shalom Community Center (SCC) offers a weekly food pantry on Wednesday afternoons. In addition to the pantry, SCC serves breakfast and lunch on-site Monday through Friday to anyone needing a meal. SCC also brings food and other necessities to Templeton Elementary School in Bloomington on Friday afternoons, so families can obtain these essentials.²¹

Backstreet Missions, Inc. offers a food pantry on Thursdays and hot breakfast, lunch, and dinner meals through Geno's Cafeteria. Backstreet Missions, Inc. provides additional basic necessities and promotes Christian messages and values.

The Salvation Army runs a food pantry in addition to supplying other basic needs services.

Area 10 Agency on Aging, in Ellettsville, maintains a food pantry and delivers hot meals to the elderly. The organization provides additional services to the elderly including transportation, healthcare, and other programs to assist this special population.

EMERGENCY AND TRANSITIONAL SHELTER

As defined by the U.S. Department of Housing and Urban Development (HUD), an individual is considered homeless if he or she lacks a fixed, regular, and adequate nighttime residence, or if the individual's primary residence can be considered a shelter, other institution, or a structure not designed for living. Individuals may experience homelessness for a temporary period of time or be chronically homeless.

In SCAN 2012, the term "shelter" refers to temporary housing sources ranging from emergency shelter, which allows entry on a nightly basis, to transitional housing, which offers longer-term stays and a designated bed or room. Each type of housing may serve a specific client base (i.e.: single women only, families only) and enforce unique rules and regulations upon patrons (i.e.: require identification, completing intake forms). While emergency shelter primarily focuses on meeting the basic need for a warm, safe space to sleep, transitional housing tends to offer its residents more comprehensive services like case management, transportation, or assistance with employment. To measure the extent of shelter needed in Monroe County and the surrounding area, data was collected from point-in-time estimates and secondary research on persons experiencing homelessness or struggling to provide their own housing. Capturing the actual count of individuals experiencing homelessness at any given time can be a challenge due to the transient nature of homelessness.

Shelter is often used as a generic term to describe the variety of temporary housing options for those in need of assistance. The term can mean an emergency shelter, which allows entry on a nightly basis. Other, longer-term shelters exist, where individuals may have a designated bed and place to stow belongings. For these individuals, shelter is guaranteed for a certain length of time based on the organizations' programs and policies. Additional longer-term arrangements include transitional housing or halfway houses. While not always the case, transitional housing more often resembles permanent living conditions, resembling apartments or rooms in a house. In this case, fewer individuals receive services at a given time, but the services are more comprehensive. Providers often help clients obtain employment, access other services, or get back on their feet after experiencing domestic violence. The goal of transitional housing programs is to enable individuals to move into their own, permanent housing.

Certain shelters focus on a particular target group, such as women who are victims of domestic violence, youth, or families. Some shelters offer both emergency housing as well as longer-term transitional housing. Because people who experience homelessness often face additional challenges, many shelters offer a variety of services. Such services include case management, substance abuse prevention and treatment, employment services, and provision of food, clothing, and hygiene items.

Shelters may also operate with certain entry requirements. For example, entry into some shelters

is contingent upon passing a breathalyzer test and those who fail are denied access to the shelter. Other shelters advertise as being low-barrier, meaning that anyone will be permitted entry, regardless of whether or not they are under the influence of drugs or alcohol.

The Local Scope of Homelessness

Individuals experiencing homelessness constitute a relatively small proportion of the local community, approximately 0.13 % in 2009. The community relies on the annual, locally-conducted Point-in-Time (PIT) Count for current data on the scope of homelessness.

Coordinated by the South Central Housing Network, the 2009 PIT Count found 233 individuals experience homeless on any given night in the local area. During the 2009 PIT Count, 21% of participants (49 individuals) experiencing homelessness met the criteria for being “chronically homeless.” Of this group, 28 participants resided in emergency or transitional shelter, while 21 respondents were unsheltered or lived in a place not meant for human habitation. To qualify as chronically homeless and gain access to additional shelter options, such as permanent supportive housing, an individual must be unaccompanied, have a disabling condition, and either be continuously homeless for a year or have experienced at least four episodes of homelessness in the past three years. A qualifying disability is “a diagnosable substance abuse disorder, a serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions.” Additionally, a disabling condition “limits an individual’s ability to work or perform one or more activities of daily living.”

The 2009 PIT Count also identified specific characteristics that can classify clients or respondents as chronically homeless. Both the unsheltered and sheltered homeless populations reported similar rates of mental illness (21% of sheltered and 24% of unsheltered individuals) and drug or alcohol addiction (33% of sheltered and 31% of unsheltered).

Table 7.12: Summary of homeless subpopulations for Monroe, Lawrence, Owen, and Greene counties, 2009

Subpopulation	Unsheltered		Sheltered		Total Homeless	
	Frequency	Percent of Unsheltered	Frequency	Percent of Sheltered	Frequency	Percent Total
Chronically Homeless	21	36%	28	16%	49	21%
Mental Illness	14	24%	36	21%	50	21%
HIV/AIDS	0	0%	11	6%	11	5%
Addiction	18	31%	58	33%	76	33%

SOURCE: City of Bloomington. Department of Housing and Neighborhood Development (HAND), 2010-2014 Consolidated Plan: 3-5 Year Strategic Plan

NOTE: Data in this table is a summary of Tables A52-A55 in the Appendix. See Appendix tables for greater detail on each demographic subpopulation. Table does not reflect unique individuals; count participants may identify with more than one characteristic and fit into several categories.

Research shows mental illness among the homeless in the Bloomington MSA (21%) mimics national trends, while the state statistic (12%) is much lower compared to other states and national figures. The National Coalition for the Homeless published findings from the U.S. Department of Health and Human Services Substance Abuse & Mental Health Services Administration (SAMHSA), which indicated that 20-25% of the homeless population in the United States suffers from some form of severe mental illness, compared to only 6% of the total U.S. population.

Service provider responses to the 2010 Client Challenges Survey showed that having a consistent place to sleep indoors was a problem for nearly half of their clients. While 52% noted that few to none of their clients experienced difficulty having indoor accommodations, 30% of service providers said some of their clients have trouble. Additionally, 18% of service providers indicated either half, most, or all of their clients have trouble finding a consistent place to sleep indoors.

Emergency and Transitional Shelter

The 2009 PIT Count also found that 174 individuals use emergency and transitional shelter within the Bloomington jurisdiction as well as 2 facilities outside the boundary. The number of emergency and transitional shelter beds decreased 21%, from 349 to 277. In 2010, key informants indicated that additional shelter capacity is needed for two-parent families and low-barrier shelters.

Table 7.13: Year-round shelter for persons experiencing homelessness in Monroe, Owen, and Green counties

	2004	2010
Emergency Shelter Beds	140	108
Average percent of beds filled	--	43%
Transitional Shelter Beds	209	169
Average percent of beds filled	--	83%
Permanent Supportive Housing	83	37
Average percent of beds filled	--	100%

SOURCES: City of Bloomington. Department of Housing and Neighborhood Development (HAND), 2005-2010 Consolidated Plan 3-5 Year Strategic Plan and 2010-2014 Consolidated Plan 3-5 Year Strategic Plan

NOTE: Annual bed coverage was not reported for 2004.

Youth and Family Homelessness

The National Coalition for the Homeless lists various reasons why youth typically become homeless: family problems, economic problems, and residential instability. Youth may choose to leave unhealthy home environments characterized by abuse and neglect or parental substance abuse, rendering them homeless. In addition, youth and their parents may become homeless if the family suffers a financial hardship, such as chronic low wages, job loss, or lack of access to affordable housing. Although in this situation the family unit becomes homeless together, parent(s) and children may ultimately be separated while seeking shelter assistance or other social services. Further, some youth never have a stable or permanent home. Upon discharge

from the foster system, youth often have no housing or financial support and are too old to legally remain in state care.

Data collected during the PIT Count indicated youth homelessness occurs much less frequently in the Bloomington MSA when compared to state and national averages. Locally, 3% of households experiencing homelessness on a given night in 2009 were headed by a person under 18 years of age, and all of those households were sheltered in emergency or transitional housing. Comparatively, unaccompanied youth constitute nearly 12% of the state homeless population. Of the 652 unaccompanied homeless youth, 31% were unsheltered and 69% resided in emergency or transitional housing. However, it should be noted that obtaining an accurate count of youth experiencing homelessness is difficult to determine as they are much more likely to “crash” with family or friends or enter the foster system, or be involved with the criminal justice system, therefore escaping the strict definition of homeless.

Table 7.14: Frequency of homeless households headed by an individual under 18 years of age

Age	Unsheltered		Sheltered		Total	
	Frequency	Percent of Unsheltered	Frequency	Percent of Sheltered	Frequency	Percent Total
Under 18	0	0%	8	5%	8	3%
18 and Older	59	100%	166	95%	225	97%
Total	59	100%	174	100%	233	100%

SOURCE: City of Bloomington. Department of Housing and Neighborhood Development (HAND), *2010-2014 Consolidated Plan: 3-5 Year Strategic Plan (Draft Version)*

Of the local homeless population, 65% of sheltered individuals and 7% of the unsheltered report they are part of a family. While many shelters take single parents with children, there are fewer resources for a couple with children.

On the Edge: Vulnerability to Homelessness

The Area 10 Agency 2-1-1 Infolink Center, serving Monroe and Owen counties, logged 5,429 calls in 2010. Area 10 reports that of the total calls it received in 2010, 24% requested assistance with “housing and utilities.” Many of the callers contacting the Infolink Center were already in an emergency situation; 10% of those seeking help with rent were already facing eviction and 10% of those seeking help with utilities were already disconnected. The Infolink Center also reported that calls for emergency shelter in 2010 increased 7% from the previous year.

At the state level, the Indiana 2-1-1 Partnership reported that 31% of the approximately 440,000 calls for assistance they received in 2009 came from individuals or families experiencing an emergency housing situation. Referral requests included utility assistance (18%), rent and mortgage assistance (6%), shelter (4%), and other housing needs (3%). The 2-1-1 Partnership also reported that the top unmet needs for 2009 included financial assistance for rent, mortgage and utilities, shelter, transportation, and food.

FSSA Hybrid System

Indiana's Family and Social Services Administration (FSSA) transitioned its TANF and SNAP eligibility process. Indiana FSSA had contracted eligibility screening for these programs with International Business Machines (IBM) so people could apply for benefits online or through an Interactive Voice Response System (IVR). To check the status of a submitted application, a person could call a 24-hour hotline. However, he or she would not be connected to the local FSSA office. Users of the program disliked the inability to communicate with a local caseworker, as the person on the hotline would often be in a different region of the state.

The State of Indiana cancelled its contract with IBM in 2009, and FSSA piloted a new hybrid system in the Vanderburgh region to combine the benefits of face-to-face interaction of the pre-modern system with the options of the modernized system. In the hybrid model, FSSA communicates directly with providers regionally. The Vanderburgh pilot region added 20 caseworkers to its county offices and completed SNAP eligibility recertification within its county offices. Calls to the FSSA 1-800 number are routed to the local county office (within the Vanderburgh region) of the person calling. Clients seeking TANF and SNAP benefits still have the ability to check the status of their case 24 hours a day, 7 days a week through the interactive voice response (IVR) system, as well as, apply online to receive benefits. FSSA implemented this hybrid system though other regions of Indiana, including locally.

Several nonprofit and faith-based organizations provide shelter to residents of Monroe and nearby counties. The information included in this section is by no means a comprehensive overview of all emergency and transitional housing services in Monroe, Lawrence, Owen, or Greene counties. The examples below are simply meant to illustrate the variety of shelter assistance programs and services in the region. Providers were included that meet one or more of the following criteria: a large (by staff size and/or budget) provider in the service area, a long-established or highly visible provider, a provider serving a specific target population, a provider that offers a unique combination of human services, or a provider that was mentioned in SCAN.

Martha's House offers emergency shelter and social services, including case management and employment assistance, to both men and women.²²

Middle Way House provides emergency shelter for women who are victims of domestic violence and their children. In addition, Middle Way House runs a two-year transitional housing program, designed to prepare residents to sustain permanent housing and reintegrate into the community.

Amethyst House provide residential services for men and women with drug and alcohol addiction as well as outpatient treatment, therapy, and case management services.

Stepping Stones focuses on youth who are experiencing homelessness. Stepping Stones provides transitional housing for up to two years, and requires that youth seek employment. **The Binkley House, part of the Youth Services Bureau**, provides short-term residential care and crisis intervention.

Shalom Community Center, offer a day-use shelter.

The Interfaith Winter Shelter runs from November through March each year and offers a low-barrier emergency shelter so people do not have to sleep outside during cold winter months. The shelter operates out of rotating sites, meaning that shelter is offered at one of four locations depending on the day of the week. Unlike other shelters, the Interfaith Winter Shelter does not require that clients pass a breathalyzer test to enter.

South Central Community Action Program, Inc. (SCCAP) provides assistance for individuals to obtain and maintain permanent housing. SCCAP provides affordable housing services, Section 8 vouchers, and self-sufficiency programming.

Roosevelt Mission is an emergency shelter in Greene County, which also offers transitional housing and three daily meals.

Michael's Haven in Lawrence County provides overnight shelter for men along with three daily meals.

The Salvation Army in Lawrence County offers temporary shelter in a motel, but is not itself a shelter. The Salvation Army also offers clothing, rent and utility assistance, as well as furniture and household items.²³

CLOTHING

In addition to food and shelter, clothing and hygiene items are fundamental basic needs. Basic clothing is defined as essential, weather appropriate shoes and attire needed on a day-to-day basis. The inability to access appropriate clothing, shoes, and hygiene items can hinder an individual's ability to meet their basic needs.

A number of organizations including Goodwill, the Salvation Army, Opportunity House, My Sister's Closet, the American Red Cross, Monroe County United Ministries (MCUM), and Township Trustees provide basic clothing assistance to individuals in need within and around Monroe County. Additionally, several faith-based organizations distribute clothing and household items along with providing other basic services.

The 2010 Household Survey revealed that 20% of respondents had at least a minor problem with having enough money to buy needed clothing and shoes, while 80% of respondents had no problem having enough money to buy needed clothing and shoes. This is similar to what was found in 2003.

Nearly one-third (30%) of respondents with income less than \$15,000 said that buying clothing and shoes was a major problem. The percentage of individuals with a major or minor problem buying clothing and shoes decreased as income increased, with no individuals in the top two income tiers (\$50-\$75,000 and \$75,000+) reporting any major challenges.

Goodwill accepts donations of clothing and household items to resell in their thrift stores, resale shops, or second-hand stores. Similarly, the **Salvation Army** collects clothing and household goods to resell in their thrift stores. **My Sister’s Closet** provides low-income women with free workforce attire through vouchers in addition to selling affordable, professional clothing. **Opportunity House** is a resale shop that accepts clothing and household item vouchers from MCUM’s Emergency Services clients. It sells low-cost, gently-used items, and supports MCUM financially through clothing and goods revenues.

The **American Red Cross** provides clothing and household items to individuals who have lost their possessions due to disasters such as fires, floods, and tornados. **MCUM** provides limited clothing, such as socks, underwear, and winter-weather necessities, and personal hygiene items to individuals seeking emergency assistance through their Emergency Services Program.

COMMUNITY AND PERSONAL SAFETY

Community Strengths

In an attempt to assess the collective strength of a given community, it is common to look at indicators such as voluntarism, civic activity, and the cohesiveness of neighborhoods in comparison to the relative diversity of the area. The areas around Monroe, Lawrence, Greene and Owen Counties have often prided themselves on a unique blend of relative diversity and strong communities.

In assessing community strength, the 2010 Household Survey asked Monroe County residents whether they felt like “part of a neighborhood.”

▲ Nearly 83% of households felt as though they were part of a neighborhood, compared to SCAN 2003 where approximately 69% felt that they were.

Respondents were also asked how connected they felt to a broader community. The community connectedness question was new to the survey in 2010.

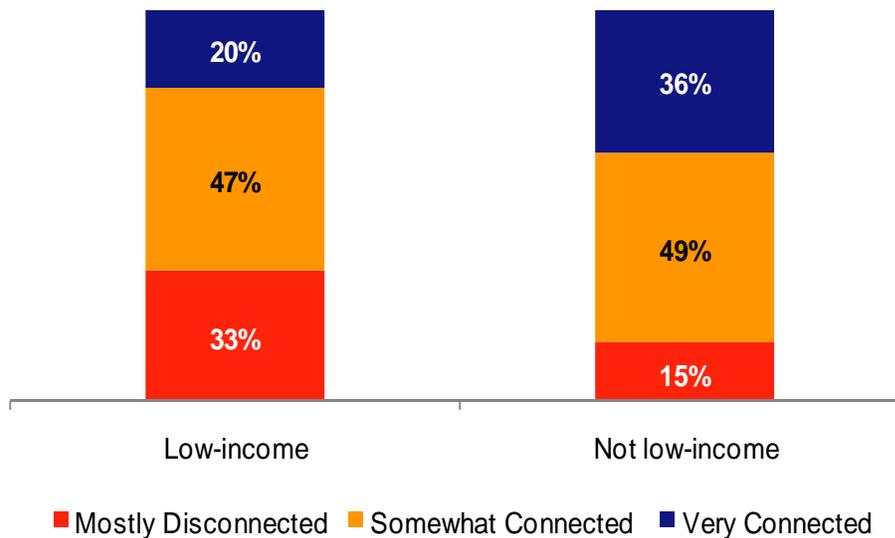
Table 7.15: How connected do you feel to your community?

	Frequency	Percent
Mostly Disconnected	35	16%
Somewhat Connected	106	49%
Very Connected	77	35%

SOURCE: 2010 Household Survey (n=272)

When comparing the community connectedness results with the income of the respondents, those with lower incomes felt more disconnected from the community. More respondents who did not fall into the low-income category felt very connected to the community.

Figure 7.4: Community connection by income



Source: Household Survey 2010

Finally, respondents were asked how often they felt that the people living around them watched out for each other. Only 10% of respondents indicated that they felt that those around them rarely or never watched out for others. Compared to SCAN 2003, the 2010 responses show an increase in perception that people always looked out for each other.

Table 7.16: How often do people who live near you watch out for each other?

	2003	2010
Always	25%	52%
Sometimes	42%	38%
Rarely	15%	8%
Never	18%	2%

SOURCE: 2003 Household Survey, 2010 Household Survey (n=272)

▲ When compared to the SCAN 2003 responses, respondents feel significantly more connected to the neighborhood and community around them, and generally feel that neighbors are watching out for each other.

Household Crime and Vandalism

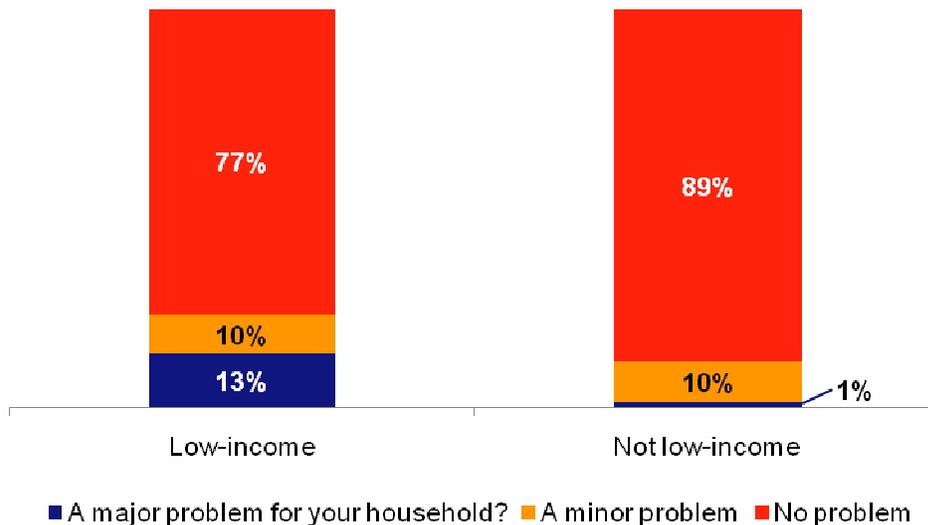
Household crime and vandalism are particular types of crimes that can affect the level of security that citizens feel within a community and point to a breakdown in civility. These types of crimes might include offenses such as burglary, theft, or vandalism. Although home safety is perceived to be no problem or only a minor problem to 98% of the respondents of the Household survey, service providers perceive it to be a problem for approximately half of their clients according to the responses of the Client Challenges survey. Three percent of the respondents to the household survey reported that feeling safe in their homes was a major problem, and 10% said that it was a minor problem. About 10% of respondents stated that they have personally been victims of household crimes.

Violent crimes include murder & non-negligent manslaughter, forcible rape, robbery, and aggravated assault. Property crimes include burglary, larceny/theft, motor vehicle theft, and arson. According to the Federal Bureau of Investigation, trends show that in 2007 violent crimes began declining in Monroe and Greene Counties. However, Lawrence County has been reporting an increase in violent crimes since 2005.

As part of the household survey, respondents were asked if they themselves felt unsafe in their homes or the location they currently slept. Three percent of those surveyed stated that they thought feeling unsafe was a major problem.

Low-income respondents stated that feeling safe in their home was a problem with greater frequency than those that were not low-income.

Figure 7.7: Percentage feeling unsafe in home by income



Source: Household Survey 2010

Close to half of service providers stated that 20% or more of their clients had been actual victims of household crimes such as burglary, theft, or vandalism within the past 12 months. In SCAN

2003, service providers responded that 5% of clients had a minor problem and 5 percent had a major problem with being a victim of a household crime.

CRISIS SERVICES

Domestic Violence

Domestic violence is a type of abuse where one person injures another person in a relationship such as a spouse, partner, or family member. This abuse can take the form of rape, emotional abuse, sexual assault, child abuse, threats of harm, and stalking among other forms. Domestic violence offenses often go unreported, so statistics regarding this issue may not accurately portray the scope of the problem. This abuse can affect the health of citizens and overall well-being of a community, and so it is useful to be aware of local efforts and initiatives to address these issues. Middle Way House is the sole dedicated provider of domestic violence services within Monroe, Greene, Owen, Lawrence, and Martin counties. It provides transitional housing and counseling for domestic violence victims, and also offers outreach programs which promote awareness of domestic violence issues.

Middle Way House reports that 184 women were accommodated with emergency shelter services in 2009. However, the number of requests for emergency shelter was 396. Although some requests for service were denied due to mitigating circumstances, Middle Way House did not offer services to 102 of these 396 because it was full when the requests were made and lacked the capacity to accommodate these women.

Table 7.17: Middle Way House emergency shelter services, 2009

	Frequency
Total number of people sheltered	184
Requests for shelter	396
Shelter days provided	\$5,358
Shortest shelter stay	<24 hours
Longest shelter stay	7 months, 24 days

SOURCE: Domestic Violence Program and Rape Crisis Center Annual Statistics 2009. Middle way House.

Monroe County residents receive more services provided by Middle Way House than any other county, particularly in the city of Bloomington. This is to be expected, however, since the population of Bloomington is larger than any other city within the service area.

Table 7.18: Women and children sheltered by Middle Way House in 2009

	Women	Children
Monroe—Bloomington	45	20
Monroe—Other	30	12
Owen	9	4
Lawrence	8	7
Greene	5	5
Other IN Counties	25	9
Out of state	3	2
TOTAL	125	59

SOURCE: Domestic Violence Program and Rape Crisis Center Annual Statistics 2009. Middle Way House.

The Rape Crisis Center at Middle Way House provided 91 clients with sexual assault or rape services.

Table 7.19: Rape crisis center services by Middle Way House, 2009

Offense Type	Women Served
Sexual assault/rape	91
Incest	0
Child sexual abuse	7
Sexual harassment	3

SOURCE: Domestic Violence Program and Rape Crisis Center Annual Statistics 2009. Middle way House.

Legal advocacy is a service that Middle Way House provides to its clients.

Table 7.19: Legal advocacy by Middle Way House in 2009

	Cases
New Clients	376
Continuing clients	612
Protective orders filed	78
Dissolution/Child support	546
Court cases monitored	3597

SOURCE: Domestic Violence Program and Rape Crisis Center Annual Statistics 2009. Middle way House.

Only one-third of service provider respondents perceived that “few to none” of their clients were victims of domestic violence. (Table 7.20).

Table 7.20: Frequency of clients who are victims of domestic violence

	Frequency	Percent
Most or All (80-100%)	0	0%
About Half (40-60%)	7	14%
Some (20-30%)	25	51%
Few to None (about 0%)	17	35%
Total	49	100%

SOURCE: 2010 Service Provider Survey (n=87)

Thirty-nine percent of service providers perceived that some of their clients had engaged in sex that they had not consented to (Table 7.21).

Table 7.21: Frequency of clients who did not consent to sex

	Frequency	Percent
Most or All (80-100%)	0	0%
About Half (40-60%)	0	0%
Some (20-30%)	13	39%
Few to None (about 0%)	20	61%
Total	33	100%

SOURCE: 2010 Service Provider Survey (n=87)

LEGAL ASSISTANCE

Finding legal assistance can be a significant challenge for low income individuals. This is due to the lack of funding for legal service providers to meet population demand, difficulty of locating free legal services, income eligibility requirements, or lengthy waits for assistance and client related barriers such as transportation or time availability. Additionally, non-native English speakers are challenged with obtaining legal assistance from providers with the ability to communicate with these potential clients.

This large demand for services puts a strain on legal service provider’s finances. The pro bono district has been able to alleviate some of these issues, assisting in the coordination of networks between legal service providers, attorneys, social service providers and potential clients. Furthermore, the IU Maurer School of Law has been an additional resource for the community through the law clinics that it provides.

The Indiana Pro Bono Districts enhance coordination between legal service providers, pro bono attorneys, social service providers as well as potential clients. Monroe, Greene, Lawrence and Owen Counties are within District Ten. The district tracks the legal needs of the community. Initially, it found that there was insufficient coordination between legal service providers and the district as well as between legal service providers and social service providers. The local district also discovered that lengthy waits for assistance were due to the insufficient number of providers available to handle legal needs. Furthermore, client related factors such as having income slightly above the eligibility requirement, lack of transportation, or follow-up with necessary paperwork and appointments, created additional barriers to legal assistance.

A persistent issue for the district is the number of legal service providers for low income individuals. The Indiana Legal Needs Assessment of 2008 developed a ratio for identifying the insufficient availability of legal services. The ratio of attorneys to Hoosiers living below 125 percent Federal Poverty Level (FPL) is about one attorney per 8,850 potential clients. For Hoosiers living between 125 percent to 200 percent of FPL the ratio increases to one attorney per 16,100 potential clients, while the ratio of private attorneys providing paid legal services to the general population is about one attorney to 668 potential clients. Indiana Legal Services states that 75% of income eligible applicants were unable to receive attorney representation to fully meet their legal needs.

The surveys conducted by the Pro Bono District show that many private attorneys are unwilling to provide pro bono services, which limits the necessary legal services within the community. These attorneys struggle to maintain a profitable practice, especially in rural areas and small towns. They are often reluctant to take cases outside of their area of expertise due to the fear of malpractice suits. They fear becoming involved in lengthy family law cases, as well as being overwhelmed with pro bono cases, impairing their ability to service paying clients. Furthermore, there is a general lack of incentive for attorneys from the judicial system to provide pro bono representation. It has become part of the district's mission to recruit and retain pro bono attorneys, but it is a difficult task.

Public defenders assist in providing services for individuals who do not have the necessary funds for legal representation. These attorneys often provide services for those facing criminal charges, juvenile delinquency, CHINS petitions, termination of parental rights petitions, mental health commitments, contempt hearings, appeals and petitions to revoke suspended sentences. However, they tend not to take cases that involve civil law suits. In order to obtain a public defender an individual must request one from the Judge who determines if the individual is capable for paying for legal services. If he or she is not capable of paying for legal services, the Judge appoints a public defender to the case.

Currently, Monroe County has eleven public defenders with the assistance of two investigators, two paralegals and a number of law clerks. In order to maintain efficient services, the county limits the number of active cases to each public defender, which is determined by the standards adopted by the Indiana Public Defender Commission. Interpreter services are also provided for non-native English speakers for all interviews, investigations, consultations and court proceedings, at the request of the client.

Guardian Ad Litem (GAL)/Court Appointed Special Advocates (CASA) are trained volunteers that advocate for children during legal proceedings. These volunteers advocate for children who are victims of physical abuse, sexual abuse and neglect to ensure that the child remains the focus of court proceedings and finds a safe, permanent home as quick as possible. The number of cases tends to be greater than the number of volunteers. Therefore, it is a challenge to recruit and retain volunteers for the program.

Justice System and Law Enforcement

The United States (U.S.) Justice System can be a significant challenge for the average person.

However, these challenges can be even greater for specific populations, such as low-income individuals or non-native English speakers. These individuals may find it difficult to locate free legal services, pay legal fees and tend to delay seeking assistance. However, circuit courts have made it possible for many individuals to find alternative forms of justice and sentencing through the Family Court projects in Monroe and Owen Counties as well as diversion programs for first time offenders. The court system is able to save judicial time with these programs and maintain high levels of case disposition. Law enforcement resources have also been enhanced through the development of the Sherriff's Reserve, which has increased the number of patrols in Monroe County. Additionally, the Monroe County Correctional Facility has been increasing its capacity through the placement of two bunks or double bunking within each individual cell as well as developing agreements to prevent a population crisis, where the population exceeds the capacity of the facility.



The structure of the Monroe, Greene, Owen and Lawrence Counties' judicial system is important in understanding the challenges that each county faces. These court systems have jurisdiction over every category of cases that can be filed within Indiana court law from traffic violations to felonies. These cases involve individuals as well as families. Monroe County is a unified circuit court with nine divisions that each has one judge. Greene County has a circuit court as well as a superior court with a total of two judges. Owen County has a circuit court structure with two judges. Lastly, Lawrence County has a similar structure to Greene County with a circuit court and superior court. It has a total of three judges with one judge for the circuit court and two judges for the superior court.

In 2010, the Monroe County Circuit Court had a total caseload of 65,528. On average, each of the nine divisions see 7,281 cases. These cases involve cases that are pending, new filings, redocket cases, civil infractions and ordinance violations. Felony filings increased by 9% from 2009 to 2010, but misdemeanor cases decreased by 3% in that same time period.

Alternative forms of providing justice and sentencing can help save judicial time through the utilization of mediation services as well as diversion programs for first time offenders. For instance, family law tends to be the primary legal need of individuals in Indiana. In many

instances, these cases can be resolved through dispute resolution, allowing the parties involved to develop long term problem solving techniques that focus on the best interest of the child.

Family Court Projects were developed throughout the state of Indiana to provide case coordination and programming based on family relations. It avoids uninformed, inconsistent or delayed rulings for families with multiple cases in the court system. Additionally, there is a disclosure of all information concerning the family's legal cases in order to obtain complete and long lasting resolutions to family situations. These projects were only developed in Monroe and Owen Counties, to assist in issues such as divorce, paternity or guardianship. The services of these projects have been expanded to serve not only families but children, adults, as well as pro se litigants, who represent themselves without the assistance of an attorney in a court proceeding.

Recent research suggests that the majority of legal challenges are faced by low-income individuals and non-native English speakers within the four counties of Monroe, Lawrence, Greene and Owen. The dynamics of these various counties make it difficult for the individuals in need of services to access potential resources. Based on a state needs assessment conducted by the Indiana Legal Services, Indiana Bar Foundation and Indiana State Bar Association released in 2008, 86% of survey respondents with income below the 125 percent Federal Poverty Level (FPL) reported having at least one legal problem. However, they tended to experience difficulties with transportation, telephone service, paperwork, or time availability as well.

Non-native English speaking populations are growing in the area, especially Spanish speakers. It has been a challenge for many community assessments to develop reliable data on these specific populations due to issues with immigration status or proficiency in English. The client challenges survey suggests that 78% of the providers surveyed have clients who are non-native English speakers and 63% of providers stated that their client's primary language is Spanish. Additionally, the Indiana Supreme Court Commission on Race and Gender Fairness found that these individuals tend to have less favorable outcomes within the justice system due to language and cultural differences.

To assist non-native English speakers, the state has developed a statewide interpreter system. Currently, the system is being tested for Spanish. The goal is to provide law firms, government agencies and local organizations with an interpreter certification program, a code of ethics for interpreters, and a registry of all interpreters by state districts. Monroe, Owen, Lawrence and Greene Counties are located in District 10, which has only three interpreters listed within the registry. The Indiana Supreme Court Commission on Race and Gender Fairness conducted a statewide survey concerning translation services and found that 77% of the respondents had to postpone court proceedings due to the unavailability of an interpreter.

Law Enforcement

Within Monroe County, law enforcement resources are divided into two sections: Patrol and Investigations. Within the patrol sector the number of deputies has remained constant from 2007 to 2008. However, in 2009 the number of deputies decreased due to the development of the Sheriff's Reserve, which includes volunteer deputies appointed by the Sheriff. These deputies have the same police power, training and duties as full-time merit deputies. The average caseload for the Investigations sector from 2005 to 2009 has been about 151 cases with at least 28% of these cases resulting in arrests. This caseload is managed by two to four detectives.

The Bloomington Police Department is a full service police agency. Currently, there are 128 full-time personnel with 92 sworn officers and 36 civilian personnel. It is divided into 11 divisions and units: Bike Patrol, Critical Response Team, Central Emergency Dispatch Center, Dive Team, Detective Division, Honor Guard, K-9 Unit, Patrol Division, Property and Evidence, Records and School Liaison. The Central Emergency Dispatch Center answers 9-1-1 calls from Monroe County, excluding the Indiana University (IU) campus that has its own 9-1-1 center.

The Indiana University Police Department (IUPD) has jurisdiction on any real property owned or occupied by the University, which includes any streets that are through and adjacent to the campus. It shares jurisdiction with Monroe County through an agreement with the Sheriff's Department. It is one of the larger university police organizations in the United States and it is among the 12 largest law enforcement organizations in the state of Indiana. Currently, IUPD employs 44 full-time sworn officers with part-time and student cadets assisting with functions of public safety at IU. These officers are fully certified by the Indiana Law Enforcement Training Board.

Correctional System

The Monroe County Correctional Facility is the largest division within the Sheriff's Department. Over the years, it has been struggling with the issue of overcrowding, and had to implement double bunking within cells. With the population exceeding the capacity of the facility in 2008, the Monroe County Sheriff's Department developed additional agreements to assist in dealing with the issue of overcrowding. In December of 2009, The Private Settlement Agreement was established, which allows the facility to request the release of inmates in order to avoid exceeding the facility's population limit. If the facility exceeds its capacity the Sheriff has the ability to contact other facilities in the area to transfer excess inmates.

Recidivism rates are an important aspect of the correctional system. Indiana recidivism rates capture an offender's return to incarceration within a three year period of their release date. There is no national standard definition for recidivism, which makes it difficult to compare rates at the national level. The state recidivism rates have decreased for three consecutive years. In 2005 the Monroe County recidivism rate of 38.9% was better than the state recidivism rate of 37.4%, likely due to some of the rehabilitation programs that are provided in the correctional system. These include adult basic education, GED preparation, Work Key certification through WorkOne, and Ivy Tech Community College entrance exams. Studies have shown that higher levels of education increase the likelihood of employment, which in turn decreases the likelihood of recidivism.

Additional Policy Information for Essentials:

Monroe County Comprehensive Community Plan: Monroe County CARES was established in 1983, and deals with alcohol and drug problems in the community. In 2008 it held a community-wide meeting to discuss new goals. These include increasing the number of consumers served in State certified addiction treatment programs in Monroe County, reducing the impact of alcohol and drug related criminal activity in the community, and decreasing the use and abuse of alcohol, tobacco, and other drugs.

Commission on Hispanic and Latino Affairs: The focus of this commission is issues of health, education, public safety, and cultural competency that affect the Hispanic and Latino community in Bloomington. Results of a recent community wide survey of both service providers and Latinos pointed to qualified interpreters and qualified written translation as the biggest needs for both sectors of the population. The commission has focused particularly on improving access to services for Limited English Proficient (LEP) individuals by training area agencies on best practices for serving LEP individuals and by building a network of trained and qualified community interpreters with whom those agencies can work. This does not apply to medical and legal interpretation.

Monroe County Sexual Assault Response Team (SART): A coalition including the Monroe County Prosecutor's Office, Indiana University, local law enforcement, and Bloomington Hospital have teamed up to implement coordination protocol for the community response to sexual assault. The Sexual Assault Response Team was announced on August 27, 2009, and provided training to the community on September 22, 2009.²⁴ The protocol utilizes Bloomington Hospital's Sexual Assault Nurse Examiner (SANE) Program in gathering evidence and giving victims of sexual assault privacy options. One of those options is to not report the crime, but for the evidence gathered to remain on record for one year after the assault. The SANE Program was started by private donations that totaled \$27,000.

Two recent pieces of legislation that effect homelessness include:

Indiana State Government House Bills 1165 and 1290: House Bill 1165 (effective July 1st, 2008) requires the Indiana Housing and Community Development authority to encourage a regional homeless delivery system, distribute information to assist individuals and families in accessing local homelessness resources, services, and programs, and collect data on the number of homeless individuals, including children and youth. Additionally, the bill allows youth at least 16 but less than 18 years of age or unattached youth to receive shelter, services, and items without parental consent. House Bill 1290 expanded foster care benefits to individuals up to the age of 21 (formerly the age limit for services was 18).

McKinney-Vento Homeless Assistance Act: The McKinney-Vento Act is a federal law enacted in July of 1987 that provides federal funds for homeless youth for education. The U.S. Congress established the Act with the goal of ensuring the enrollment, attendance, and success of homeless youth in school. States receive grants through the Act, and in response, must comply with its terms. The state of Indiana is in support of and in compliance with the Act, which is directed through the Indiana Department of Education.