

**Comprehensive Strategy/Healthy Siouxland Initiative  
Joint Meeting Documentation  
Thursday, September 22, 2016, 9-11 a.m.  
Briar Cliff University**

The meeting was called to order at 9 a.m. by Comprehensive Strategy Chair Barbara Aalfs. Barbara thanked Briar Cliff University for allowing us to use their great facility. Self-introductions were made by those in attendance.

Present:

Barbara	Aalfs	Comprehensive Strategy
Christy	Beatty	Community Action Agency
Mallory	Berkenpas	LSI
Erin	Binneboese	SHIP
Terrie	Binneboese	United Way
Brad	Bollinger	Sioux City Police Department
Melinda	Brienzo	Siouxland Community Foundation
Deb	Burnight	Facilitated Resources
Kim	Buryanek	Sioux City Schools
Richard	Closter	Iowa Dept of Human Services
Rita	DeJong	BOOST – FF
Erica	DeLeon	Norm Waitt Sr YMCA
Liz	Determan	Northwest AEA
John	Donavan	United Health
Linda	Drey	Siouxland District Health
Amberly	Edwards	Parent Partners
April	Gardner	Parent Partners
JoAnn	Gieselman	SHIP/DCC
Jennifer	Gomez	Sioux City Schools
Carla	Granstrom	Mercy Child Advocacy Center
Fitz	Grant	Sanford Community Center
Kevin	Grieme	Siouxland District Health
Jane	Griesel	CSADV
Jeff	Hackett	Boys Town
Kerri	Hall	SHIP
Mary Anne	Harrington	Boys & Girls Club
Jerry	Hernandez	Mercy Medical Center
Kelly	Hines Eckhoff	Unity Point
Carmen	Hoogers	Transitional Services of Iowa
Justin	Hummelgard	Siouxland PACE
Jeff	Johnson	Sky Ranch Behavioral Services
Sara	Johnson	Transitional Services of Iowa
Alexcia	Klemish	LSI
Leah	Knapp	St. Luke's
Rebecca	Krohn	Siouxland Community Foundation
Herb	Kuehne	Comprehensive Strategy
Allison	Larson	Sioux City College Access Network
Brad	Lego	Community Volunteer
Michelle	Lewis	Siouxland District Health
Karen	Mackey	SC Human Rights Commission
Leesa	McNeil	Third Judicial District
Sandy	Nation	Comprehensive Strategy
Nancy	Oates	ResCare Workforce Services
Allyson	Olson	South Sioux City Schools
Melissa	Ortiz	Girls, Inc
April	Padgett	Siouxland District Health
Jaque	Perez	Norm Waitt Sr YMCA
Linda	Phillips	Siouxland CARES
Rachel	Prodanovich	Jackson Recovery Centers
Carrie	Radloff	Planned Parenthood

Jerry	Rasmussen	Dakota Valley Schools
McKenzie	Roeber	Siouxland Mental Health
Bob	Scott	Sioux City Council
RoxAnn	Smith	Jackson Recovery Centers
Jill	Sokness	ISU & UNL Extensions
Meghan	Suing	Siouxland Mental Health
Amy	Tooley	Sioux City Housing Authority
Lori	Twohig	Big Brothers/Big Sisters
Gabriela	Valdovinos	Siouxland Mental Health
Brooke	Watson	LSI
Davidson	Wissing	Jackson Recovery Centers
Chrissie	Young	Boys Town
Taffy	Zoelle	Unity Point

Linda Phillips, Siouxland CARES, reviewed the Survey Monkey tool completed by 64 people on the Comprehensive Strategy mailing list.

Brad Lego discussed the LENA project, LENA.org. Children wear vests that tracks the number of words spoken to them. The research is fascinating and helps parents learn about ways to increase the number of words they speak to their children. For more information and ways some are addressing the research that the poorer parents are, the less they talk with their children, go to Providence Talks. The Mayor of Providence, RI, is trying to close the "word gap".

Kevin Grieme, Siouxland District Health Department, Facilitator, reviewed the meeting objectives:

- To further research the Feasibility Framework tool to assess our community's readiness to address the Risk Factor Academic Failure using a Collective Impact approach
- To share data on the Risk Factor Academic Failure and how health impacts this social problem
- To network with valued colleagues

Kevin then moved into discussing the Collective Impact Feasibility Framework using Academic Failure as an example. The Community Partners answered questions at their table on Collective Impact and results are listed below:

- Lack of complete care coordination-health assessment comparable to Risk Assessments. Parents don't always recognize all needs or take child to regular wellness visits or follow through with referrals.
- Parents need education.
- Need people to look at development issues and lack of future competent workplace.
- Need media/press to get facts out to community.
- Need to truly combine resources to achieve a collective impact.
- Under Actors, it was suggested we add DHS (because they deal with early abuse and neglect issues), community volunteers, elected officials.

#### **Influential Champions**

United Way (x4)  
School District (x4)  
Family Doctors/Pediatricians (x2)  
SHIP (x4)  
Healthcare  
The people in this meeting (x2)  
Siouxland CARES  
Clinic/family practice/health coaches  
Business community  
Media  
Bob Scott  
Sanford Center  
AEA  
In home visiting/HOPES (x2)  
Community Action Agency  
Girls Inc.

Susan Fey  
Healthcare  
Brad Lego  
Leesa McNeil  
Media  
Regina Roth  
Siouxland District Health Department  
Superintendents  
Christy Ver Mulm

## **Next Steps:**

- Identify backbone agency
  - Campaign with a targeted message to media, parents, businesses
  - Need cost-benefit analysis-this needs to be a long term commitment.
  - Get business community involved
  - Get Pediatricians and Family Practice Providers involved.
  - Need to involve Workforce Development, business community, media (work with press club), elected officials,
  - Suggestion to help coordinate: SHIP Early Childhood
  - Parents often don't have the skills to help their children due to the poor parenting they experienced.
  - Businesses can be involved through education of their employees, not just as funders.
  - Oral health needs urgent attention. Poor oral health leads to chronic childhood illnesses.
- The meeting adjourned at 10:35 a.m. Many partners stayed and networked until 11 a.m.

## **"Offers and Requests" were shared including:**

### **Offer:**

Who: Parent Partner Program – Coordinator April Gardner  
712-460-2511, [aprilg@cfiowa.org](mailto:aprilg@cfiowa.org)

What: To be involved & help with any work with Comprehensive Strategy

Where: We are in all 99 counties in Iowa but here we served Woodbury, Plymouth, & Monona

Why: We are parents empowering parents thru the DHS involvement process

### **Offer:**

Who: Siouxland District Health Department

What: Ribbon cutting – remodeled clinic

When: Tuesday, October 4, 2016 at 10:00am

Where: 1014 Nebraska Street, Sioux City

Why: Celebrating the remodel/service delivery

### **Offer:**

Who: Siouxland Coalition Against Human Trafficking

What: Human Trafficking Exhibit

When: Now

Where: Heelan Hall Atrium at Briar Cliff

Why: Create awareness about the prevalence of human trafficking

### **Offer:**

Who: Mercy Child Advocacy Center

What: Protecting Families Conference

When: October 12, 2016

Where: Bev's on the River

How: Go to [mercysiouxcity.com](http://mercysiouxcity.com) to register

### **Request:**

Who: United Way

What: AmeriCorp Members for Iowa Reading Corp

When: ASAP

Where: Sioux City Community School

How: Call United Way office at 255-3551

Why: Help students K-3 to improve literacy skills and reach grade level reading

**Evaluations** were completed by 56 partners. The results are as follows:

<b>Question</b>	<b>1 – Excellent</b>	<b>2</b>	<b>3 – Adequate</b>	<b>4</b>	<b>5 – Unhelpful</b>	<b>Total</b>	
Topics chosen for discussion	33	20		2	1	0	56
Meeting format	26	23		6	1	0	56
<b>Meeting objectives</b>	<b>1 – Fully Met</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5 – Not addressed</b>		
To further research the Feasibility Framework tool to assess our community’s readiness to address the Risk Factor Academic Failure using a Collective Impact approach	15	30		9	1	1	56
To share data on the Risk Factor Academic Failure and how health impacts this social problem	19	28		8	0	1	56
To network with valued colleagues	24	23		7	2	0	56

**“Ah-ha” Moment**

Lots of suggestions of activities to address the issue  
 Who are influential candidates  
 The importance of figuring out the urgency  
 The start of solving the problem is to start with family  
 No discussion of how our kids got there  
 55% of children are unprepared to start school  
 The public has not been notified of the new Iowa Code regarding 3rd grade requirements  
 Brain development age 3, age 5  
 All need to do more!  
 The valuable information shared by individuals during the large group discussion. We have some very knowledgeable and dedicated individuals in our community.  
 Stats on literacy deficit in community  
 Depth of problem  
 Bringing physicians into the conversation to help with raising awareness  
 Data low scores school aged kids very alarming  
 More congruence, urgency – SCCD seems on board  
 # of kids who aren’t ready for school  
 >50% children aren’t ready for kindergarten  
 The data about deficiency & 3 & under  
 Wasn’t aware of the hard #'s before – alarming & confirms what I, our organization suspected  
 The community is primed and ready  
 We need someone to do all this work.

**Suggestions for future sessions:**

The main topics of each agency they can help with.  
 Next steps in making progress on 0-5 brain development and working to help youth graduate!  
 If related to childhood literacy, invite: Library admin &/or children’s services, Chamber member, Jenna Rehnstrom &/or newspaper, Kid’s Scoop coordinator (Jeanette Hopkins), pediatrics/neo-natal health providers, Books for Budding Brains rep, foster grandparent rep/volunteers  
 Poverty, drugs, social determinants are the core of these problems. Educating the community will not be effective if the parents don’t care or if they have so many problems this would be the least of them. Setting kids back a year in 3rd grade would not be a drastic problem for them when they are dealing with issues much more important as most are in survival mode.  
 As the Mayor suggested – Business community  
 Focus on each health deficiency & ideas for improving  
 Report out from the tables to make sure all voices are heard  
 Start making plans/take action, develop sub-committee, something to start working toward our initiative  
 Include area educators elem, middle, & high schools  
 Good use of time & ideas – utilize connections to tap everyone  
 Keep going with this!

**Other comments:**

Keep the data in front of us! Very helpful!

Thanks!

I think PSAs made be a great way to educate the community (those not at the table, parents, etc.) in regards to what children need to know when they enter kindergarten.

The focus was fully lost at our table – until I changed it. The subject had nothing to do with Health 0-3.

Biggest issue will SC Schools work with others they don't work with agencies now? Do not play with others well!

Invite a media outlet to have a news anchor/reporter be part of this, not just report on it.

Very chilly temp in room

Great meeting!

Action sheet – details of what we suggest @ these meetings & what actions are being taken with them.

Very good info

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**Comprehensive Strategy  
Meeting Documentation  
Wednesday, July 20, 2016  
Briar Cliff University**

Present:

FIRST	LAST	FIRST	LAST
Barbara	Aalfs	Jerry	Hernandez
Emma	BearComesOut	Molly	Hewitt
Tamara	Bennett	Kelly	Hines Eckhoff
Mallory	Berkenpas	Justin	Hummelgard
Mary	Bertram	Dawn	Kimmel
Erin	Binneboese	Alexcia	Klemish
Terrie	Binneboese	Herb	Kuehne
Brad	Bollinger	Jonathon	LaPaglia
Taneka	Brazier	Allison	Larson
Deb	Burnight	Michelle	Lewis
Kim	Buryanek	Karen	Mackey
Richard	Closter	Dave	Madsen
Jim	Cole	Leesa	McNeil
Katie	Colling	Jenna	Meyer
Cara	Conrad-Koupal	Terry	Murrell
Heather	Craig-Oldsen	Johnny	Nash
Sarah	Deck	Sandy	Nation
Rita	DeJong	Gary	Niles
Erica	DeLeon	Matt	Ohman
Susie	Edgar	Allyson	Olson
Christie	Finnegan	Rachael	Ostermyer
Linnea	Fletcher	April	Padgett
April	Gardner	Nikki	Peirce
JoAnn	Gieselman	Linda	Phillips
Jennifer	Gomez	Carrie	Radloff
Jody	Graham	McKenzie	Roeber
Carla	Granstrom	Jill	Sokness
Jane	Griesel	Bridgid	Strait
Jeff	Hackett	Megan	Suing
David	Halaas	Amy	Tooley
Kerri	Hall	Carole	Utesch
Heather	Hennings	Davidson	Wissing

Welcome/Introductions/Context: Barbara Aalfs, Chair, Comprehensive Strategy, welcomed those in attendance. Barbara thanked Briar Cliff University for hosting this meeting. Self- introductions were made.

Deb Burnight, Facilitated Resources, and Facilitator of this meeting, introduced the agenda for the day and shared the meeting objectives:

- **To review updated data to discern current issues and progress related to positive youth development risk factors**
- **To introduce a Feasibility Framework tool that assesses a community's readiness to address complex issues using a Collective Impact approach**
- **To network with valued colleagues**

Partner Spotlight: Deb Burnight invited Heather Hennings from the United Way to share information on ALICE (Asset Limited, Income Constrained, Employed). Heather distributed data and materials on the ALICE project which provides a framework, language, and tools to measure and understand the struggles of the growing number of households in our communities who do not earn enough to afford basic necessities, a population call ALICE. Thanks Heather for all you and the United Way do in our community!

Data Showcase: Dr. Herb Kuehne, Comprehensive Strategy Data Committee Chair and Michelle Lewis, Siouxland District Health Department and from the Comprehensive Strategy Data Collection Committee then shared Community Data over time on Risk Factors, Health Factors, and Youth Problem Behaviors. Attendees then processed in small groups the one piece of data that stuck out in their minds.

**Collective Impact Feasibility Framework:** Next Linda Phillips, Siouxland CARES, and the Comprehensive Strategy Data Collection Committee, walked through the Collective Impact Feasibility Framework Community Assessment Tool. Comprehensive Strategy has presented the Collective Impact Framework at past meetings and at the last meeting was asked to continue discussion to find a common agenda, decide action plan, identify a common goal with the help of the community, people/organizations that need to be involved, identify backbone to move community forward, and do a coordinated needs assessment. The Comprehensive Strategy Council members have had several discussions about this and also with community partners to determine next steps. As an example of what a common agenda might look like, Comprehensive Strategy asked Dr. Kim Buryanek, Associate Superintendent of the Sioux City Community School District to present data on a project they have considered that needs community input and support-**Grade Level by 8**. The project focuses on increasing student achievement and reducing the achievement gap. It will focus on: Early literacy, Chronic absenteeism, and Summer literacy instruction. Dr. Buryanek shared data from the Sioux City Schools and potential areas that need improvement. They have been working with the Siouxland Community Foundation and group of interested people to

move this common agenda forward and felt that sharing it with the Comprehensive Strategy participants would further engage the community. More information to follow.

Adjournment: The meeting adjourned at 11:00 a.m. with many staying until 11:30 to further discuss this topic and network.

All materials presented at the meeting including 2016 Data Booklet and Dr. Buryanek's PowerPoint presentation are available at [www.siouxlandcares.org](http://www.siouxlandcares.org), Comprehensive Strategy tab, Data tab.

**The following Offers and Requests were shared and/or written down at the meeting.**

What: I AM SIOUXLAND

Who: Everyone

When: Now!

Where: IAMSIOUXLAND.org

How: Go to website and sign up as a volunteer or an organization needing volunteers

Why: Siouxland's comprehensive source for local volunteers & volunteers. The system automatically connects and notifies both! For more info - [Erica@nwsymca.org](mailto:Erica@nwsymca.org)

What: Plant the Town Red Ribbon Week-Tulip Bulbs for Sell-this year we have not only Red but Orange, Purple, and Yellow!

Who: Siouxland CARES

When: Preorder now. Tulips Bulbs delivered in October.

How: Order today by emailing [cares@longlines.com](mailto:cares@longlines.com) with the number and color of tulip bulbs you want. Bulbs are \$1 each.

Why: Plant during Red Ribbon Week in October and watch them grow in April during Alcohol Awareness Month-Promote community-wide awareness of drug prevention programs and services!

What: 5K Run/Walk - "Be True to Your School"

Who: Siouxland Community Health Center

When: Saturday, Aug. 20th

Where: Adams Homestead Nature Preserve

How: Register at [slandchc.com](http://slandchc.com)

Why: Cash prizes offered to school with most participation. Promote physical activity within the community

What: HR workshop on Hiring, Onboarding & Evaluation Best Practice

Who: Maureen De'Armond - presenter from ISU

When: Friday, Aug. 26, 9AM - 4 PM

Where: ISU Extension - 4728 Southern Hills Drive, Sioux City IA, 51106

How: \$40 - More info at [extension.iastate.edu/woodbury](http://extension.iastate.edu/woodbury)

What: Sister Muriel Ford Lecture – Human Trafficking  
Who: Sister Shirley Fineran presents free lecture to public  
When: Sunday, 9/18/2016 @ 5:30 PM  
Where:BCU St. Francis Center  
Why: Learn about dangers of human trafficking

What: Protecting Families Conference  
Who: Mercy Child Advocacy Center  
When: Oct 12  
Where:Bev's on the River

What: Poverty Simulation  
Who: Open to public  
When: Monday, November 14, 2016  
Where:BCU St. Francis Center  
Why: To learn what it is like to live in poverty and make tough choices to sparse resources

## **Participant Evaluation Responses**

### **Total turned in = 48**

### **How well were meeting objectives met or unmet?**

An "ah-ha" for me was...

- Literacy data
- High level of deficient reading levels in Woodbury County
- We as a community need to pull together to solve every program's problems/struggles one at a time
- Reading literacy affecting children in Woodbury Co. – how do we help parents to communicate with their children
- The Iowa law requiring reading proficiency at Grade 3 and what is being addressed
- Data around early literacy and the urgent need to determine how to come together and address
- When the lady whose child goes to Heelan spoke about HS kids being empowered. I believe that is a great idea.
- If college students would see Dr. Kim's info, would they still want to be teachers?
- Family history
- A WOW meeting overall!
- # of percentage of drugs introduced at birth. Accountability is messing up with mobility.
- Attendance rates correlating with reading proficiency – even with high attendance proficiency is still just over 50%???
- Good work is happening to impact youth development, reflected in #s going down.



- Fetal alcohol syndrome disorders is an important issue to address.
- 400 kids below grade level in reading?
- The high number of students who are in summer school and the number of infants born with drugs in their system.
- 400 kids are going to summer school and it took a law to start making changes.
- What do families need to be successful?
- Impact of the data
- The people we are discussion about (poverty, mental health, etc.) they are not here. Having families present to get real life scenarios.
- The connection between absenteeism and school success in actual #'s!
- 40% each grade do not meeting reading level
- As a first-timer to the meeting I was in awe to see all the agencies represented and how I would be able to work with them.
- Vest-recorder Re: conversations per day. Example of 1400/day needs improvement is overwhelming and really not fathomable. I'd expect concerned parents to be overwrought by that because there is no way to put it in perspective. Maybe address kinds of conversations rather than quantity.
- Data was very interesting

I would suggest that in future sessions we...

- Need to continue the conversation on Collective Impact
- Invite HS kids and make them aware.
- Parents status, who goes to college, demographics, and studies showing parents' success.
- Continue discussion /planning for early literacy
- Need some elected officials in the room!
- Annie E. Casey Foundation – bring it.
- Grandparents' role
- I would like to continue with education to closing the reading gap
- N/A
- How to lower the poverty level.
- Adding some real life people we discuss about present
- A short break to allow networking
- Teen pregnancy, college and workforce readiness

Other comments...

- N/A
  - Hard to hear in the back
  - Are comments and ideas recorded? Great discussion today.
  - Thanks for the data! Excellent to have it on hand!
  - The meeting was very well organized. The topics fit together well also.
  - Excellent topics – relevant.
  - Great info and discussions!
-

Comprehensive Strategy  
Facilitating the creation of resource tools for positive youth development  
AND

Healthy Siouxland Initiative

A healthy, safe community in which individuals/families can live and grow to  
their full potential

JOINTLY PRESENT

"Collective Impact"

CS minutes 092415

Joint Quarterly Community Meeting – Thursday, September 24, 2015

Present: Barbara Aalfs, Eldon Benson, Mary Bertram, Erin Binneboese, Cynthia Brown, Richard Closter, Adam Dahlke, Dave Dawson, Sarah Deck, Rita DeJong, Liz Determan, Christie Finnegan, Susie Fischer, JoAnn Gieselman, Carla Granstrom, Kevin Grieme, Devon Gurnett, Jeff Hackett, Kerri Hall, Peggy Hart, Mary Anne Harrington, Heather Hennings, Jerry Hernandez, Molly Hewitt, Radine Himes, Chris Jones, Vanessa Jorgensen, Herb Kuehne, Rebecca Krohn, Michelle Lewis, Jean Logan, Karen Mackey, Matt Ohman, Linda Phillips, Carrie Radloff, Amy Tooley, Benita Triplett, Lori Twohig, Cheri Wingert, Davidson Wissing, Chrissie Young, Guest Speaker Jennifer Scala

Welcome/Introductions/Context: Barbara Aalfs, Chair, Comprehensive Strategy, welcomed those in attendance. Barbara thanked the College Center and South Sioux City Schools for hosting this meeting. Self introductions were made.

Kevin Grieme, Siouxland District Health Department Director and Facilitator of this meeting, shared the meeting objectives:

- To provide education on the "Collective Impact" community planning model and factors leading to its successful implementation
- To network with colleagues

Partner Spotlight: Michelle Lewis, Siouxland District Health Department, shared information from the July 27<sup>th</sup> Community Health Needs Assessment meeting. This tri-state assessment is a joint Community Health Needs Assessment (CHNA)/Health Improvement Plan (HIP), completed by Siouxland District Health Department, Mercy Medical Center, UnityPoint St. Luke's and the Dunes Surgical Hospital. It covers Union, SD, Thurston, Dixon, and Dakota, NE, and Plymouth and Woodbury Counties in Iowa. Areas that the Health Improvement Plans may focus on are Obesity, Tobacco, Teen Pregnancy, Access to Care, Cancer Screenings, Mental Health and Housing. It was noted that the CHNA and HIP are two separate documents. CHNA will document several needs in the community beyond the 7 listed above; however the HIP for the Health Dept. and hospitals may only focus on the 7 needs listed above.

"Collective Impact": Jennifer Scala, Nebraska Children and Families Foundation, presented information on Collective Impact. She shared a power point and discussed the Nebraska Children's model of Collective Impact for Well Being, Why Collective Impact?, and Successes and Lesson Learned in supporting the

model in partnership with communities. Jennifer also distributed the Report to Nebraska Children's Commission "Model for Community Ownership of Child Well-Being", her power point slides, and a Collective Impact Forum Readiness Assessment. Jennifer's presentation was very interactive and informative. Thank you!!

Community Conversation: Comprehensive Strategy Council members facilitated table discussion around the following questions.

Objective – (Everyone answers) In 10 words or less, what is ONE THING you heard that caught your attention in Jennifer's presentation? Switch mindset-learning together; Not on need, readiness to change; interested in creating large social change, collaboration, Fremont example of how much funding was leveraged;; difference between collaboration and collective impact; articulation of vision for community is very important; shared vision is vital; we can't change outcome without changing the norm; structured backbone-commitment-no one organization/agency can do this; working together with one common goal; working to restore resource vs. placing in care; process and structure of collaboration; leveraging of dollars and benefit for all; sustainability of programs; recognition/credit given to other agencies; looking at group and family participation; decision making community; focused on opportunities and challenges and importance of trust among agencies; idea of assessing services already in place rather than starting new program; results-number served, \$ leveraged; barriers broken down; loss of own agendas, the power company example; long-term success; consistent is key; neutrality-first time linked to \$'s; collaboration vs. collective impact comparison

Reflective – What are some components/pieces of Collective Impact you would say we already have in place in our community? What isn't currently in place (gaps)?

Siouxland CARES, HSI, Blue Zones, Data Collection, Comprehensive Strategy, Dakota County Connections, United Way Community Impact agenda, SHIP, community Needs Health Assessment, Mental Health Services, have some collaboration.

Gaps: Don't have centralized leadership; have a number of coalitions but they aren't integrated; there are so many little groves in Sioux city that work on issues, but not one overall vision or connectedness, overlap of services, one place for all community resources and community calendar, what can I do for you mentality, non profits need to be more business-like, legal barriers, with shrinking funding need to evolve, need to evolve with technology, need data and metrics and evidence, being proactive, wants to partner with others, business community and Chamber and decision makers are not always interested, funding shortfall, lack of community common agenda then the backbone, lack of parent/ family engagement.

Interpretive- What do you see as the benefits of a model like Collective Impact for dealing with complex social issues? How could it make a significant difference to the way we currently do business and the outcomes we are seeking?

Benefits: comprehensive and not one answer, dramatic outcome more than from collaboration, coming together, community coordinated response to urgent needs, will save dollars, decrease trauma for children/families (workers), continual improvement and service, agencies utilizing agencies, shared measurement, coordinated case management, reduce duplication, will help with technology, plays into financial ability of organizations, good return on investment-significant cost savings, rally around a cause or issue rather than an organization, build community support around issues and then all buy in, sustainability if a huge issue, helps to define the issues and resources before trying to solve them.

Make a Difference: Getting people on the same page, early intervention for families at risk, filling in gaps so children/families don't fall through the gaps, shared goal, access to what need, provide better service, change behaviors, community norms, focus public/community-at-large on issue, i.e. poverty. Interpretive- What would be some challenges to pursuing a Collective Impact approach in our communities?

A lot of competition to provide services, lack of trust due to fighting over resources, organization pride and identity rather than "giving away credit", trust, time, knowledge, how is it different, getting data from/to larger organizations, need universities/colleges to collect and analyze data, moving from the will/we want stage to the actual work stage, reducing competition, getting the right people at the table of collective impact (identified in gap section), need the decision makers, assumptions of "we already do that" (misinterpret collective impact for collaboration), traditional approaches to service delivers, some are committed to their leadership role-can community select leaders, where will funding come from, what will the focus be for a particular community, sources of data, types of data, collecting or building consensus around the problems/issues within the community, silos of programs and agencies, common agenda, agencies "follow the funds" to receive them; leading to need for less staff, jobs at risk, "leap of faith" because there will be no immediate impact, results will be a few years down the road, different eligibility criteria for programs, 3 different states and their different criteria. Decisional - What, if any, follow-up steps would you like to see happen at this point?

Establish a backbone, Integration of community assessments to review and determine gaps, define community-region or Counties or both, conversation in surrounding communities regarding community impact, shared initial goal, what does each agency do, determine what do we want to be, funding, routine/scheduled meeting one hour per month, identify common agenda, determine via prioritization, the right people at the table to ask if our community needs collective impact and determine the common agenda but they will need to be educated on collective impact first so can see vision of greater outcomes, funders need to come together, find all collective impact models and collaborate, better organization of resources in the community so many resource guides, community calendars-need to streamline, continue the conversation

“Offers and Requests”

- Protecting Families Conference, October 16, sponsored by Mercy Child Advocacy Center, 712-279-2507 for information
- Nonprofit Management Academy beginning in November, Certificate in Nonprofit Management-ISU, 10 classes, year-round, ISU Extension and Outreach, Topics welcome-send to [hewittm@iastate.edu](mailto:hewittm@iastate.edu), \$45 fee, \$5 CEUs, new building 4728 Southern Hills Drive, Sioux City, Iowa.
- Siouxland CARES Plant the Town Red fundraiser, purchase red tulips for \$1 per bulb, Plant during Red Ribbon Week, October 23-31, watch the red tulips grow in April which is Alcohol Awareness Month, contact CARES 712-255-3199 or [cares@longlines.com](mailto:cares@longlines.com). Form can be found at [www.siouxlandcares.org](http://www.siouxlandcares.org). Supplies are limited.
- Red Ribbon Night, free to public, great activity for kids, Monday, October 19, 5-7 p.m., Long Lines Family Rec Center, Sioux City, Iowa . Support drug-free lifestyles.
- Sioux City Housing invites you to send people to them or have them go online to fill out forms for Section 8 housing.

Evaluations: Evaluations were completed by 30 individuals. The results are: Average rating listed in ***bold italic***.

Please rate the following on a scale of 1 – 5, **with 1 as “Excellent” and 5 as “Unhelpful”**

	<i>Excellent</i>	<i>Adequate</i>	<i>Unhelpful</i>			
1. Topics chosen for discussion:				5		
	<i>(1.13)</i>	1	2	3	4	5
2. Meeting format:	<i>(1.23)</i>	1	2	3	4	5
Please rate the following meeting objectives according to the level you think they were met, with 1 being “fully met,” 5 being “not addressed at all.”						
		<b>Fully Met</b>				<b>Not</b>
		<b>addressed at all</b>				
<b>To provide education on the “Collective Impact” community planning model and factors leading to its successful implementation</b>	<i>(1.23)</i>	1	2	3	4	5
• <b>To network with colleagues and share insights</b>	<i>(1.33)</i>		2	3	4	5
		1				

An “ah-ha” for me during this session was...leverage potential of dollars and impact, all of it, backbone, how beneficial collaboration is to the families being served, reducing competition and working together, the dramatic results of collective impact, people are thinking about this, similarity to other models, the hope that we can move closer, loved the MidAmerican Utilities company example, efforts made in Nebraska to establish community needs and ongoing efforts, the whole collective impact model, the ability to leverage funds through collaboration, importance of backbone for collaboration to achieve goals long term, everyone seems to agree on the same issue means we all see the issue, but no significant impact is being done, the examples of collaboration that have come together and their outcomes, the impact that collective impact had on results, importance of communication and collaboration, being consistent once clear on common goal, need neutrality of backbone support.

**What next steps, if any, should our community take regarding community impact?** Find a common agenda, decide action plan, identify a common goal with the help of the community, strategic planning of people/organizations that need to be involved, sent out just a few, not a lot, some questions and ask people to read them so they come prepared mentally to answer the question as was said by Kevin “chew the cud”, identify backbone to move community forward, identify backbone-Chamber may be a great organization, finding an organization or individual willing to start creating the tri-state backbone, determining collective goals and collaborate between agencies, define “community” and do a coordinated needs assessment, another meeting to determine common interests we can work on, funders need to come together, figure out who needs to be involved and involving the community, educate decision makers-identify a common agenda, determine “community”, integration of community assessments, sell it, consider beyond Dakota County to surrounding Iowa counties.

**I would suggest that in future sessions we (include possible discussion topics and activities)...**Continuation of this discussion on deeper level, how do we make changes happen and who needs to be involved-public involvement?, set the context for the meeting in the beginning, continue today’s discussion and consider how it could be implemented, a group as a University to begin a data collection of all community agencies input to have a metric for evidence based program/grants, processes for helping community formulate a common agenda.

**Other comments (use back if necessary):** When we have a separate facilitator and recorder in group sessions, keep progressing on trying to make changes, great session and discussion, enjoyed-thanks, great meeting, very grateful to participate, Kevin does a great job! Thanks!

Adjournment: The meeting adjourned at 11:05 a.m. with many staying until noon to further discuss this topic.

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**Comprehensive Strategy  
Quarterly Community Meeting  
June 11, 2015  
Briar Cliff University**

Comprehensive Strategy for Positive Youth Development held a meeting on June 11, 2015 to receive and review new community data, as well as discuss mental health issues. Click on this tab to download the documentation from the meeting. Data is located under the data section on the Comprehensive Strategy tab on this website. [Documentation 061115](#)

**Participants:**

Barbara Aalfs, Sheila Martin, Katie Detloff, Veronica DeLeon, Jim Rixner, Denesha Jackson, Richard Closter, Karen Mackey, Erin Binneboese, Barbara Small, Davidson Wissing, Megan Wissing, Liz Rembold, Suzie Fischer, Sarah Stevens, Kelsey Volter, Alyssa O’Conner, Jeff Hackett, Briget Solomon, Amy Bloch, Rebecca Krohn, Madison Lee, Mandi Allen, Sandra Martinez, Terrie Binneboese, Heather Hennings, Sara Fay, Deb Lemmon, Jerry Hernandez, Cheri Houser, Audrey Larson, Sarah Nitzschke, Eldon Benson, Mary Anne Harrington, Kevin Grieme, Jo Fokken, Rachael Ostermyer, Sister Shirley Fineran, Michelle Haukap, Carla Granstrom, Amy Tooley, Rita DeJong, Linda Phillips, Jen Gomez, Carole Utesch, Michelle Lewis, Holly Keegan, Cynthia Brown, Callie Kreber, Amy Lord, Claudia Flores, Brad Bollinger, Mark Hantla, Dawn Kimmel, Mary Bertram, Bobby Bratvold, Carrie Radloff, Elizabeth Sterling, Dr. Angela Stokes, Nitcki Peirce, Mandy Johnson, Sarah Deck, Kim Jorgensen.

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**Comprehensive Strategy  
Quarterly Community Meeting  
Documentation**

3-3-15

Comprehensive Strategy for Positive Youth Development and SIMPCO TAG held a joint meeting on March 3, 2015 to discuss transportation and mobility issues in Siouxland. The documentation is quite lengthy so we have merged it into a scanned document for your convenience. Please let us know if you have any questions about the materials. Click on this tab to download the documentation from the joint Comprehensive Strategy/SIMPCO TAG meeting held on March 3, 2015 at Briar Cliff University. [Documentation Comp Strategy TAG 030315](#)

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**Comprehensive Strategy  
Quarterly Community Meeting  
Documentation**

**Comprehensive Strategy and Healthy Siouxland Initiative**

**Joint Quarterly Community Meeting**

**9:00 – 11:00 AM, September 25, 2014**

**Northeast Community College – South Sioux City, NE**

**Topic: Teen Sexual Health**

**Meeting Objectives:**

**To further clarify the critical issues related to teen sexual health in Siouxland**

- **To inventory resources in our communities that are available to improve teen sexual health**
- **To network with colleagues**

**Agenda:**

Welcome/Introductions

- Partner Spotlight – Linda Phillips – Teen Sexual Health Survey
- “Eyes On: Teen Pregnancy & Sexual Health” – Presentation by Bobbie Jo Sheridan – Eyes Open Iowa
- Community Conversation
- “Offers and Requests”
- Evaluations and Adjournment

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**Welcome and Introductions**

Lori McClaren, Associate Dean – Northeast Nebraska Community College, welcomed the participants to the session and gave background information about the College. Comprehensive Strategy Chair Barbara Aalfs led brief introductions. (For a list of attendees, see pages 5 – 6.) Kevin Grieme, Executive Director – Siouxland District Health Department, provided context related to community data on teen sexual health and information related to the Comprehensive Strategy risk and protective factors.

**Partner Spotlight**

Linda Phillips, Executive Director – Siouxland CARES, presented information on a survey currently being conducted to collect data on teen sexual health. (See attached survey form.) Persons wishing to deliver the survey to their clients are asked to contact Siouxland CARES. [Teen Sexual Health Survey 2014A](#)

**“Eyes On: Teen Pregnancy & Sexual Health” – Presentation by Bobbie Jo Sheridan – Eyes Open Iowa**

(See attached slides for information presented.) [EyesOpen Iowa PP](#)

## **Community Conversation**

During a participant feedback session following Bobbie Jo's presentation, participants submitted the following recommendations:

- Confidence for parents to know the information (support lines, classes)
- Tools for parents to know how to talk to kids and what to say to them
- Providing kids with the self esteem to stand up to bullying/sexting
- School having more health clinics available
- Representative of news media need to be part of Comp Strategy
- Community Awareness Campaign – what is really going on in our community focus on sexual activity – not pregnancy
- Common ground statement developed (respective of values, coming together to address issues)
- Human Anatomy/Biology 101 taught more in 5<sup>th</sup>-6<sup>th</sup> grades – the science of the body and human reproductive system
- Community prevention plan – sexual health (not just teen pregnancy)
- Have program on Black Hawk County's community coalition – what they did
- Research which county had a high teen birth rate and has reduced the rate. What did they do? Can their approach be replicated in Woodbury County – Look at Black Hawk County
- Ask parents what they want and what is important for the school to teach – during conferences maybe?
- Faith communities
- Teen community @ the table as well

Participants were invited to submit a list of teen sexual health resources of which they were aware in order to launch the compilation of a community inventory for agencies and parents to use. Comprehensive Strategy will continue to collect resources for future publication.

### **Offers and Requests**

**Siouxland Coalition for Preventing Pregnancy meeting** – Wednesday, October 1 from 11:30 – 12:30 at St. Luke's Lutheran Church fellowship room, 2039 S. St. Aubin Sioux City. Sponsored by Lutheran Services in Iowa.

**Sister Muriel Ford Lecture** presents Lisa Carolla-Wagner, 8:00 PM, Sunday, September 28 at the Stark Student Center, Briar Cliff University. Free attendance. The focus is on working with young incarcerated women.

### **An "ah-ha" for me during this session was...**

- Pregnancy stats
- It was all aha
- \$5.4 million spent
- Very glad I came. Extremely interested in this topic. Great to connect w/others and hear about their resources.
- Non-disclosure laws to avoid further trauma
- 20% of teens have texted an inappropriate picture of themselves
- \$5.4 million spent on teen childbearing in Woodbury Co.
- Education (comprehensive) delays sexual activity by 18 months
- 90% of parents approved Teen Sexual Health Curriculums being provided schools
- 21% seniors had 4 or more partners. \$5.4 million.
- Learning Iowa laws Re: this topic
- The State's mandate but nobody enforces it!
- Why we had so few questions for Bobbie Jo
- The statistics

### **I would suggest that in future sessions we...**

- Include those impacted such as teen parents or grandparents
- What has helped other communities



- Follow-up – Black Hawk County’s coalition – what they did
- Have outstanding presenters such as Bobbi Jo
- Include teens in convo

**Other comments:**

- We need to continue to meet on this topic!!
- Was there less attendance – less representation from organizations/agencies? Did we hit an awkward topic?
- Great facility!

**Attendees:**

First Name	Last Name	Organization
Barbara	Aalfs	Comprehensive Strategy
Amy	Bloch	Catholic Charities
Deb	Burnight	Burnight Facilitated Resources
Dr. Kim	Buryanek	Sioux City Schools
Becky	Carlson	Siouxland District Health Department
Richard	Closter	Iowa Dept. Human Services
Kirsten	Colt	Planned Parenthood
Heather	Craig-Oldsen	Briar Cliff
Rita	DeJong	BOOST
Linda	Drey	Siouxland District Health Dept.
Christie	Finnegan	Goosman Law Firm
Linnea	Fletcher	Jackson Recovery
Jody	Graham	SHIP
Carla	Granstrom	Mercy Medical Center/CAC
Kevin	Grieme	Siouxland District Health Dept.
Amy	Hennies	Boys Town
Jerry	Hernandez	Mercy Medical Center
Kim	Jorgensen	Jackson Recovery
Vanessa	Jorgensen	Crittenton Center
Adrienne	Jansen	ISU Extension
Dawn	Kimmel	SIMPCO
Richard	Kloster	DHS
Herb	Kuehne	Comprehensive Strategy
Karen	Mackey	Sioux City Human Rights Commission
Lori	McClaren	Northwest Community College
Mark	Monson	MRHD/Woodbury Cty. Bd. Of Supervisors
Lisa	Nelson	Juvenile Court Service
Tyler	Nelson	SHIP/Beyond the Bell
Zach	Nelson	Juvenile Court Service
Michelle	Nieman	LSI/IKN
Brenda	Noll-Norvell	Eckerd Youth Alternatives, Inc.
Allyson	Olson	South Sioux City Schools
Tiffany	Paulson	Dakota Co. Health
Tiffnee	Perron	LSI
Linda	Phillips	Siouxland CARES
L.	Sands	P-IHH/Siouxland Mental Health
Mona	Scaletta	Siouxland District Health Department
Erin	Schroeder	LSI
Bobbie Jo	Sheriden	EyesOpenIowa
Jim	Spencer	Mercy Medical Center
Tricia	Sutherland	WITCC
Jim	Spencer	Mercy Medical Center
David	Struve	Sioux Basin Active Collaboration
Bonita	Triplett	UnityPoint/St. Luke’s
Moises	Vasquez	Eckerd
Karen	Vlach	Mercy Home Care
Cheri	Williams	Siouxland Mental Health Center

**9:00 – 11:00 AM, June 10, 2014**

**Briar Cliff University**

**Topic: Community Data Presentation and Analysis**

**Meeting Objectives:**

- **To review the newest available data that measures our communities' progress toward positive youth development**
- **To network with colleagues**

Agenda:

- Welcome/Introductions
- Partner Spotlight – Dr. Paul Olson – Siouxland Social Science Research Center
- Data "Scramble"
- Analysis of Western Iowa Teen Birth Rates
- Community Conversation
- "Offers and Requests"
- Evaluations and Adjournment

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**Welcome and Introductions**

Comprehensive Strategy Chair Barbara Aalfs welcomed the participants and led brief introductions. (For a list of attendees, see pages 7-8.) The facilitator confirmed the agenda.

**Partner Spotlight**

Dr. Paul Olson presented on the services available to the Siouxland community through the Siouxland Social Science Research Center. Through the data repository at the Center, agencies may freely access statistics, data and research relevant to their work. Other services include:

Survey Research: Analysis of quantitative methods of information gathering; reporting on individual group and electronically collected data.

Field Interviews and Observation: Study of attitudes, trends and social mannerisms using mixed methods of personal interviewing and surveillance.

Focus Groups: Examination of attitudes and trends using a qualitative format in a group dynamic.

Telephone Surveys: A means of examining attitudes and trends using a more personal format by asking particular questions with one respondent at a time.

Data Management & Analysis: A study by reduction, summarization, tabulation and graphical analysis of data.

Empowerment Evaluation: The design, implementation and interpretation of program results, where the client is an active participant.

Program Evaluation: Assessment of goals, objectives, outputs and impacts of program implementation and outcomes.

**Data "Scramble"/Community Conversation**

The Comprehensive Strategy Data Work Team facilitated an exercise to focus on the following data sets (which were a subset of the 2014 Data book shared later with the participants):

**Annual Scores % Proficient for Math and Reading, Grades 3-5 in Sioux City**

2009-2010

2008-2009		Math	70.93	2010-2011		2011-2012		2012-2013	
		Reading	71.15						
Math	69.14			Math	71.41	Math	76.7	Math	76.81
Reading	69.27			Reading	69.5	Reading	65.54	Reading	72.88

**% Students Eligible for Free/Reduced Meals in Woodbury County**

2009	2010	2011	2012	2013
43.6%	48.6%	48.6%	49.6%	50.0%

**Median Household Income for Dakota and Woodbury counties**

	2009	2010	2011
2008 Woodbury Co.	\$43,820	Woodbury Co.	\$42,672
Woodbury Co.	\$43,616	Dakota Co.	\$42,192
Dakota Co.	\$43,813	Dakota Co.	\$43,729
		Woodbury Co.	\$43,362
		Dakota Co.	\$47,273

**Positive # of Tox screens and # of positive screens for newborns born in SC hospitals**

2009	2010	2011	2012	2013
Positive Tox Screens	1	32	140	1
Number of Screens	440	8	29	7
				238

**Teen Birth Rate, (% of live births <20) for Woodbury and Dakota County**

2008	2009	2010	2011
Woodbury Co.	11.9	Woodbury Co.	12.9
		Woodbury Co.	12.1
		Woodbury Co.	8.9

Dakota Co. 12.8 Dakota Co. 13.0 Dakota Co. 11.3 Dakota Co. 10.2

### # of Dissolutions of Marriage in Woodbury County

2008	2009	2010	2011	2012
260	214	201	169	71

The complete 2014 Comprehensive Strategy community data compilation (Progress Report 2014) may be accessed electronically on the Siouxland CARES website at:

[www.siouxlandcares.org](http://www.siouxlandcares.org)

### Analysis of Western Iowa Teen Birth Rates

Dr. Stephanie Bell of Briar Cliff University presented an analysis of teen birth rates in Western Iowa as compared to the other Urban 8 areas of Iowa. (See attached document for her presentational slides.) [Teen Pregnancy Presentation 2014](#)

### "Offers and Requests"

Participants shared the following information with their colleagues:

**BCU Psych Department** has senior students who complete a Senior Seminar Research Project who are looking for research ideas. Please contact Stephanie Bell at [Stephanie.bell@briarcliff.edu](mailto:Stephanie.bell@briarcliff.edu)

**Julius Fleschner** offers assistance with library research and finding published data. Call him at 712-279-5451.

**SIMPCO/Sioux City Public Library** – Sustainable Communities Grant through the U of I for school year 2014-2015. A U of I student study project to be determined. To support Early Literacy (inventory, cooperative programs, TBD) – what is happening in Sioux City – what could be happening to support reading at grade level by third grade.

**Choices Counseling Open House.** (Mental health therapy and behavioral health services.) June 26, 3-6 pm. 520 Nebraska St., Suite 408. Meet and Greet, door prizes, snacks and fun!

**TIPS** – For all alcohol license holders in Woodbury, Plymouth, and Monona counties through December to decrease underage and binge drinking. Contact Davidson Wissing.

**Youth Services Fair** – Midtown Center (corner of 14<sup>th</sup> and Nebraska), Friday, August 1 from 3pm – 6pm. Find out about many services offered to young people. Contact Jo Fokken (JTO), Cheryl Connot Perez (Midtown) or Sarah Sayavong (JCS/SHIP).

**Morningside College** is always looking for info from nonprofits to use on PSA's on their student radio/TV stations. Contact Dave Madsen at [madsend@morningside.edu](mailto:madsend@morningside.edu) or 274-5480.

**Social Work BSW Degree Completion Program – ONLINE.** – Launches in the fall at Briar Cliff University. Second entirely online BSW degree completion program in the US! Part of BCU's fully accredited program. Apply online to contact advisor at [www.briarcliff.edu](http://www.briarcliff.edu).

**South Sioux City Income Survey** – June 14<sup>th</sup> and June 21 from 2-6 in South Sioux City. Contact Philip Sigillito at [psigillito@southsiouxcity.org](mailto:psigillito@southsiouxcity.org) to volunteer to help.

**Beyond the Bell** – Has been awarded a new middle school grant – Contact Jenna Meyer at [jmeyer@beyondthebell.us.com](mailto:jmeyer@beyondthebell.us.com) to help figure out how to get sex education in the afterschool program.

For more information regarding Teen Pregnancy data and analysis contact:

Stephanie L. Bell Ph.D.  
 Associate Professor of Psychology  
 Briar Cliff University  
 Heelan Hall 374  
 3303 Rebecca Street  
 Sioux City, IA 51104  
[stephanie.bell@briarcliff.edu](mailto:stephanie.bell@briarcliff.edu)

**Evaluations and Adjournment**

Participants were asked to fill out session evaluation sheets and leave them on the tables.

Evaluation responses and names of those in attendance are listed on pages 5-8.

The session adjourned at 10:59 AM.

Respectfully submitted,  
 D. Burnight, CTF  
 Facilitated Resources

**Participant Evaluation Summary**

Number of respondents: 38  
 Average rating listed in ***bold italics***

	<i>Excellent</i>	<i>Adequate</i>	<i>Unhelpful</i>					
Topics chosen for discussion:			<b><i>1.29</i></b>					
			1	2	3	4	5	
Meeting format:			<b><i>1.18</i></b>					
			1	2	3	4	5	
<b>The following meeting objectives were rated according to the level respondents thought they were met. (1 being “fully met,” 5 being “not addressed at all”)</b>								
			<b><i>1.46</i></b>					
<b>To review the newest available data that measures our communities’ progress toward positive youth development</b>			1	2	3	4	5	
<b>To network with colleagues</b>			<b><i>1.51</i></b>					
			1	2	3	4	5	

**An “ah-ha” for me during this session was...**

- The associate between Teenage Pregnancy & political religious beliefs in Iowa as it pertains to geography.

- The number of agencies that are involved in the collection and analysis of this information and the services that are available.
- The massive amount of cooperation needed to make a change.
- Stats are evaluated through our values system. Conversations looked at education as a solution where so many issues are value based. Where are the dads?
- The Blackhawk County connection – I am going to look into this and hopefully get more strategies from Blackhawk.
- Beyond the Bell is starting a middle school program – if sex education isn't a priority in the schools – what can we do in our program to help the cause?
- Teen pregnancy rates and possible reasons.
- All the different data sets can be broken down even further for more clarified information.
- Amazed that the state of Iowa doesn't have a standard for sex education past the "biology discussion.
- Multiple births – how are they registered 19 year old with 3 children.
- I am not as in tune with data as I used to be. Also the offered studies to explore for teen births.
- See correlation of trend – juvenile arrests/teen births
- How much higher Woodbury Co. teen birth rates remain in comparison to the rest of Iowa.
- "Spare time" for teenagers is a big contributor to several key issues.
- The lack of sex education in the schools.

**I would suggest that in future sessions we...**

- What is the plan for the future as a community?
- "Bridges Out of Poverty" – Workforce Development – What businesses could do to more fully engage/understand/work with more effectively – impact staff turnover, productivity, absenteeism.
- Provide opportunities for group to use data for follow-up meetings to address changes.
- \* The impact of how girls are socialized very early on to be sexualized/attractive to males. Their value is tied to their ability to be sexy and wanted. This certainly impacts the # of girls having sex.
- What can I do to help? Direct networking here are the needs & who is going to do what?
- Have agencies who provide services highlight their skills and abilities to impact areas that need to be addressed (what they can do to help address and inform the community).
- Impact of values – can't get this in a classroom. Is there an answer to "sensation seeking?"
- Maybe include very short amount of time to follow-up on discussion topic from last meeting to see if any new info has come up or partnerships have formed to combat discussion topic since last meeting.
- Could we invite some representatives from our biggest minority groups to explain cultural differences so we could get a clearer picture on possible reasons why #'s are the way they are?
- The Puritan influence on state educators & other state sponsored programs.
- ID efforts on agreed upon issues and do follow-up on those efforts. Most organizations have to establish objectives that aim to impact negative trends. It would be interesting to highlight effective efforts on some of the topics of concern.
- Children's mental health issues.
- Identify areas that groups could break at to discuss further & decide how to solve or work toward solutions as a group.

**Other comments:**

- I liked the way the scramble was planned – small group interaction that didn't put anyone on the spot. Good conversation.
- Great job!
- Programming?
- Thank you for the invitation to attend.
- Enjoyed the data scramble.

- Great meeting, thank you to everyone that put this together – very meaningful.
- Always very interesting! <smiley face>
- Nice job – good session!
- I missed much of the meeting due to a conference call. Thank you for the data.
- I appreciate the ability to get together over the data! Involve individuals/families that have used programs and come out better to help organizations understand what works of the clients – why it works – what they know that prevented services for some.
- Great data exercise!

**Attendees:**

Barbara	Aalfs	Comprehensive Strategy
Keith	Ashmore	Dakota Valley Schools
Stephanie	Bell	Briar Cliff
Mary	Bertram	Community Action Agency of Siouxland
Aaron	Beutler	Boys & Girls Home
Terrie	Binneboese	United Way of Siouxland
Erin	Binneboese	SHIP
Sgt. Brad	Bollinger	Sioux City police department
Marian	Burnett	Crittenton Center
Deb	Burnight	Burnight Facilitated Resources
Jim	Cole	Youth for Christ
Heather	Craig-Oldsen	Briar Cliff
Linda	Cron	Northwest AEA
David	Dawson	Attorney at Law
Rita	DeJong	BOOST
Terri	Dooley	Boys and Girls Home
Julie	Elbert	Catholic Charities
Sr. Shirley	Fineran	Briar Cliff
Melissa	Fischer	Girl Scouts
Julius	Fleschner	Briar Cliff
Linnea	Fletcher	Jackson Recovery
Jody	Graham	SHIP Board
Kevin	Grieme	Siouxland District Health Dept.
Jane	Griesel	CSADV
Pete	Groetken	Sioux City Council
Jeff	Hackett	Boys Town
Heather	Hennings	United Way
Ashley	Hobbs	Siouxland CARES Teen Court
Jeff	Johnson	Skyranch
Holly	Keegan	Comprehensive Strategy Intern
Courtney	Kilberg	Choices Counseling & Consulting
Rebecca	Krohn	Siouxland Community Foundation
Herb	Kuehne	Comprehensive Strategy
Jean	Logan	Community Action Agency of Siouxland
Dave	Madsen	Morningside College
Leesa	McNeil	Court Administrator
Jenna	Meyer	Beyond the Bell
Brenda	Noll-Norvell	Eckerd Youth Alternatives, Inc.
Matt	Ohman	SHIP

Paul	Olson	Briar Cliff
Linda	Phillips	Siouxland CARES
Chrissie	Reynolds	Boys Town
Jim	Rixner	Siouxland Mental Health Center
Robin	Rowland	Choices Counseling & Consulting
Kari	Sauer	Boys and Girls Home
Sarah	Sayavong	Juvenile Court/SHIP
Erin	Schroeder	Lutheran Services in Iowa
Dewey	Sloan	Woodbury County Attorney's Office
Jonette	Spurlock	Center for Siouxland
Betsy	Thompson	Sioux City Public Library
Amy	Tooley	Sioux City Housing
Lori	Twohig	United Way
Carole	Utesch	Boys and Girls Home
Ashley	Wall	Salvation Army
Davidson	Wissing	Jackson Recovery
Sr. Grace Ann	Witte	Clare House
Tyler	Zellmer	SHIP
Taffy	Zoelle	St. Luke's UnityPoint Health

**Poverty Simulation Documentation  
Comprehensive Strategy and the Micah Project  
In Cooperation with Northwest Area Education Agency  
Wednesday, May 7, 2014, 1-4 p.m.  
Northwest Area Education Agency**

Comprehensive Strategy and the Micah Project convened a group to engage in a poverty simulation.

Special thanks to the Northwest Area Education Agency for hosting this great session.

Poverty Simulation Evaluation, 5/7/14 by Comprehensive Strategy, 48 participated:

- Scale: 7 is excellent, 1 is not:
- Overall satisfied with session and the facilitator's presentation style contributed to my participation, both 6.58.
- The exercises/activities we completed were engaging and I was comfortable with the pace of the session, both 6.67.
- Comments: Very engaging experience-thought provoking. Thank you. Best CS meeting in the last 3 years. Awesome! Great awareness.

**Participants included (several others participated but did not sign in):**

Aaron	Beutler	Boys & Girls Home
Erin	Binneboese	SHIP
Bobby	Bratvold	BOOST



Lynne	Brehm	Nebraska Children & Families Foundation
Deb	Burnight	Burnight Facilitated Resources
Dr. Kim	Buryanek	Sioux City Schools
Rhonda	Capron	City of Sioux City
Marilyn	Charging	Sioux City Schools
Thomas	Clark	BOOST
Lavennia	Coover	Community Action Agency of Siouxland
Rita	DeJong	BOOST
Michelle	Delperdang	South Sioux City Schools
Julie	Elbert	Catholic Charities
Cheryl	Engle	SHIP
Christie	Finnegan	Goosmann Law Firm
Linnea	Fletcher	Jackson Recovery
Cheri	Foster	
Carolyn	Goodwin	Retired School Counselor
Andrea	Hsu	South Sioux City Schools
Kim	Jenkins	SHIP
Pastor Paul	Johnston	Trinity Lutheran Church
Chris	Jones	BOOST
Nancy	Keairns	SHIP
Holly	Keegan	Jackson Recovery
Callie	Kreber	BOOST
Karen	Mackey	Sioux City Human Rights Commission
Eduardo	Martinez	
Gay	McTate	Nebraska Children & Families Foundation
Matt	Ohman	SHIP
Penny	Patrick	South Sioux City Schools
Linda	Phillips	Siouxland CARES
Margarita	Ramirez	Community Action Agency of Siouxland
Georgina	Ramirez	Briar Cliff
Lance	Ridgely	Westwood Schools
Stephanie	Robinson	Transitional Services of Iowa
Edith	Rohde	Boys & Girls Home
Art	Silva	Boys & Girls Home/RE Scott
Chad	Sims	
Larris	Slagle	
Dewey	Sloan	Woodbury County Attorney's Office
RoxAnn	Smith	Jackson Recovery
Kelci	Teut	BBBS
Jason	Wagner	Transitional Services of Iowa
Tyler	Zellmer	SHIP

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**Documentation**  
**Comprehensive Strategy/Healthy Siouxland Initiative**  
**Joint Community Meeting**  
**9:00 – 11:00 AM, September 26, 2013**  
**Siouxland District Health Department**

**Topic:**

“Poverty in Siouxland: Research Results.”

Executive Summary of the Siouxland Social Service Utilization Study – tk edit

Siouxland Social Service Utilization Study

Meeting Objectives:

- **To share results of a recent** Siouxland Research Center **study commissioned by the Comprehensive Strategy Council**
- **To increase provider understanding of client-centered needs for services**
- **To network with colleagues**

Agenda:

Partner Spotlight – Sioux City BOOST

- Presentation of Poverty Research Results
- Community Conversation
- “Offers and Requests”
- Evaluations and Adjournment

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**Welcome and Introductions**

Comprehensive Strategy Chair Barbara Aalfs welcomed the participants and introduced the facilitators. (For a list of attendees, see pages 7 & 8.) The agenda was confirmed.

**Partner Spotlight**

Rita DeJong, Program Director – Sioux City BOOST, provided information regarding the program. BOOST works with young adults, ages 18-21, who have had previously been involved in the juvenile justice system. The goal is to assist them in a variety of areas, including (but not limited to) obtaining a high school diploma, entering and completing an occupational training program resulting in a certificate, building community ties, and becoming employed in the Siouxland area.

**Presentation of Poverty Research Results**

Siouxland Research Center Director Dr. Regan Murray, Ph.D, presented the results of a research study, commissioned by the Comprehensive Strategy Council, of Woodbury County residents whose income levels fell at or below the poverty level. The primary purpose of the study was to help determine what barriers, if any, prevented residents from utilizing social service agencies in the Siouxland area. To help answer this question, the SRC first conducted focus groups with members of the target population, and then mailed surveys to approximately 1,200 Woodbury County residents who met study criteria. Key findings of the study included:

- Generally people reported satisfaction with how they are treated by agencies, access to services, and the services provided.
- A majority of the Woodbury County residents know where to obtain help for services, i.e. health care, food, utilities.
- Males and African Americans report less satisfaction and have less knowledge about existing services which may affect future utilization of services.

Individual agency directors may contact Dr. Murray to access agency-specific survey results. She may be reached at [regan.murray@briarcliff.edu](mailto:regan.murray@briarcliff.edu). 712-279-1619 (NOTE: The Comprehensive Strategy Council does not have access to agency-specific survey results.)

**Community Conversation**

Following a short networking break, the participants self-selected into conversation groups and discussed the following questions:

- What stands out to you from Dr. Murray’s presentation?
- What impresses you about the research process or the project itself?
- What concerns you about the information presented?
- What does your agency do to make clients feel respected and meet their real and/or perceived needs?

- What other questions does this study raise for you?  
Some key participant observations and insights are listed below:
- The number of people who feel that their experience didn't matter is concerning
- Males and African Americans with low satisfaction and knowledge
- Alarm around family-friendly
- 1/3 didn't get what they needed – Why? What did they expect?
- Want deeper dive into certain barriers...i.e. hours, transportation, child care
- Where did these respondents live? Target pockets?
- Male vs. female access
- Only 20% for lottery gift card (as incentive for returning survey) – people wanted to have voice
- "I treat everyone the same" = not respecting cultural differences
- Are we addressing cultural issues – training needed?
- Are we respectful at the first contact?  
*Question: What are some creative ways agencies could help clients overcome real or perceived barriers that prevent utilization of services?*
- Do more around paperwork – explain better with person, make them feel it is OK to ask questions
- Be a client! Be in their steps (If not comfortable at own organization or want to see how staff does it, swap with other agencies – "secret shopper" approach)
- Work together (across agencies) to create a satisfaction survey to be used
- Create a list of basic services and agencies that provide them
- Include some basic information to help create a set of expectations up front
- Is all the paperwork understandable for clients (i.e. third/fifth grade reading level)
- Specific focus group within each agency
- Address the paperwork issue
- Are extended hours feasible?
- Larger focus group between directors and those living in poverty to discuss barriers, respect and cultural issues
- Non-judgmental
- Create a 1-pager take-away for anyone leaving agency with information about available services
- Customer service training available for agency staff (Briar Cliff offering?)
- Cross-agency paperwork collaboration – Create single community data form – transfers with client – electronically accessed
- Help clients create "basic data" folder they can carry with them
- Establish liaisons – advocates – to help access services
- Cross-train staff to be able to make referrals with realistic expectations
- Train staff in cultural competency
- Train "first responders" – receptionists, etc.  
*Question: What are some policy changes that could better support client-centered needs?*
- First just need to share survey results with local government leaders/city leaders
- Evaluate criteria around certain assistance programs
- Do agencies need to look at hiring practices so employees reflect clients? Goal: Create ethnic balance to match client mix. (Challenge in that is around skills and training...so means targeting ethnicity groups and providing educational funds/grants/scholarships for them)
- Cultural education & have them be clients for a day to see that they go through ... "a day in the life of..."
- Outreach to males
- Create client parking lots
- Open up hours of service
- HIPPA changes
- Staff training yearly

### **"Offers and Requests"**

**Disability Awareness Event** – Connecting employers with individuals with disabilities. Iowa Vocational Rehabilitation Services, October 18, 1-3:00, Room D, AEA building on Morningside

Ave. Exploring current relationships between IVRS and Sioux City Community Schools and how our Agency is preparing students for employment.

**Affordable Care Act Educational Sessions** – Siouxland Community Health Center, 10/8 at 2-4 PM and 10/10 at 9-11 AM. To inform agencies about health coverage through ACA and how to make information available to your clients.

**Open discussion/presentation on a local coordinated intake and referral system**

**Evaluations and Adjournment** – Presented by the Micah Project at Siouxland District Health Department on October 1, 10 – noon.

**Protecting Families** – Child Abuse/Dating Violence, sponsored by the Mercy Child Advocacy Center on Oct 11. Held at Sioux City Convention Center – Register at 279-2509.

**International Peacemaking – Lessons from Iraq** – Presentation by Dr. Zuhair Fathalla, Tues, Oct. 1 at 7:00 PM in the Assisi Room – St Francis Center, Briar Cliff University. Free and open to the public.

**Evaluations and Adjournment**

All participants and presenters were thanked, evaluation forms were collected and the meeting adjourned at 11:00.

Respectfully submitted,

Facilitators:

D. Burnight

K. Grieme

### Participant Evaluation Summary

Number of respondents: 34

Average rating listed in ***bold italics***

<i>Excellent</i>	<i>Adequate</i>	<i>Unhelpful</i>				
Topics chosen for discussion:						
		<b><i>1.30</i></b>				
		1	2	3	4	5
Meeting format:						
		<b><i>1.42</i></b>				
		1	2	3	4	5
<b>The following meeting objectives were rated according to the level respondents thought they were met. (1 being “fully met,” 5 being “not addressed at all”)</b>						
<b>To share results of a recent Siouxland Research Center study</b>		<b><i>1.42</i></b>				
		1	2	3	4	5
<b>To increase provider understanding of client-centered need for services</b>		<b><i>1.73</i></b>				
		1	2	3	4	5
<b>To network with colleagues</b>		<b><i>1.51</i></b>				
		1	2	3	4	5

### **An “ah-ha” for me during this session was...**

- Too much repetition filling out forms at different agencies
- There is a sizable population that still has access issues
- Most people do know about services available
- That the person who is probably the lowest on the pay scale is often the first impression of the agency.
- That the study is not as diverse as the community
- Nobody here knows how our clients feel.

- How little is understood about the causes of poverty, and how we perceive barriers (tangible vs. intangible)
- Males need more info
- The number of people disappointed in services. Too high!
- Survey results
- BOOST
- BC having research availability
- The data from the research study
- Everything was interesting – I enjoyed it all.
- Findings on African American men – Low % of surveys completed by the AA group – impact on findings
- So many want the same thing, agency & service recipients, what can't it be done?
- Institutional research bias of research content ("barriers") can be radically different than those of care providers.
- Very good – let's keep talking!!
- Things haven't changed when serving clients
- Males don't understand how to access services.
- **I would suggest that in future sessions we...**
- How can we share training between agencies on customer services/cultural awareness
- Centralized services in geographic area
- Informational session on population in area @ ethnicity, employment, poverty. Regular sessions in this helps to focus for ideas to address issues.
- Invite legislators so that policy changes can be addressed
- All walks of life. More that just our area – perhaps – agencies.
- The community
- Clients present
- Invite the new person in charge of 211 to present. This system needs updating and she needs help. Tammy – ISU Extension either in Des Moines or Ames.
- How to prevent poverty or addiction to how to better services those living in poverty
- More agency-specific info
- I have no suggestions. I think everything was good.
- Bring in people from the community that are not from an agency.
- **Other comments:**
- I was surprised at the % of African Americans that didn't know where to access services and that at agencies felt they were treated not treated respectfully
- Thanks!
- Can the 211 service, or something else, be a central database of information so organizations can collaborate and people can have a central spot to locate services?
- It was good.
- Good time frame
- Access an issue for mobility impaired – you sent us to an entrance with steps
- Well-run meeting – Very effective!
- Followed time schedule
- Great groups/discussions.
- Agency staff should REGULARLY & CONSTNATLY impress upon each other that people come to them b/c there is often no other choice. Never acceptable to judge.
- (Meeting format) Well conceived.
- Put all clients' information – birth certificate, medical records, DL, address, family history etc. – on a flash drive.
- This was not the topic I thought I was coming to hear. This is about agency feedback vs. poverty solutions.
- Room arrangement

**Participants**

BCU

Sister Shirle

Finerian

Boys and Girls Home and Family Services  
BOOST  
Boys & Girls Home

Boys Club  
Boys Town  
Briar Cliff University

Community Action

Comp Strategy  
Connections AAA/SRTS/SIMPCO  
Eckerd  
Facilitated Resources  
Goosman Law Firm/Comp Strategy  
IA Department of Human Services  
Iowa Vocational Rehabilitation  
IVRS  
Jackson Recovery

LSI  
Mercy Health

Micah Project  
Northwest AEA

Retired  
S.C. Human Rights  
SCHC

SDHD  
SDHD (cont.)

SHIP  
Sioux City Housing

Sioux City Schools  
Siouxland CARES  
Siouxland Community Foundation  
Siouxland Mental Health  
St. Thomas  
State Legislature  
Third Judicial District Court  
United Way

Aaron  
Rita  
Terri  
Carole  
Kari  
Vernon  
Chrissie  
Tina  
Angela  
Daniell  
Heather  
Candace  
Paul  
Abby  
Brian  
Mary  
Jean  
Barbara  
Dawn  
Brenda  
Deb  
Christie  
Richard  
Adam  
Mindy  
Jane  
RoxAnn  
Linnea  
Erin  
Jim  
Carla  
Pat  
Liz  
Linda  
Herb  
Karen  
Cara  
Lynnsey  
Maranda  
Michelle  
Tyler  
Sharon  
Linda  
Kevin  
Mona  
Sara  
Jody  
Tiffany  
Amy  
Kim  
Linda  
Rebecca  
Jim  
Torey  
David  
Leesa  
Terrie  
Lori

Beutler  
DeJong  
Dooley  
Utesch  
Ruchti  
Meyer  
Reynolds  
Tassler  
Nash  
John  
Craig-Oldsen  
Payer  
Olson  
Buckhouse  
McCarthy  
Bertram  
Logan  
Aalfs  
Kimme  
Noll-Norvell  
Burnight  
Finnegan  
Closter  
Dahlke  
Collins  
Sanders  
Smith  
Fletcher  
Schroeder  
Spencer  
Granstrom  
Johnson  
Determan  
Cron  
Kuehne  
Mackey  
Conrad-Koupal  
Davison  
Hollins  
Lewis  
Brock  
Schroeder  
Drey  
Grieme  
Scaletta  
Wester  
Graham  
Clayborne  
Tooley  
Buryanek  
Phillips  
Krohn  
Rixner  
Lightcap  
Dawson  
McNiel  
Binneboese  
Twohig

Unity Point Health  
Woman Aware  
Woodbury County  
Woodbury County Attorneys Office

Bergen  
Katie  
Mark  
Dewey

Peterson  
Colling  
Monson  
Sloan

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**Documentation  
Comprehensive Strategy  
Quarterly Community Meeting  
9:00 – 11:00 AM, June 18, 2013  
Briar Cliff University**

**Topic:** "Community Data: What IS it GOOD for?"

## Meeting Objectives:

- **To review the newest available data that measures our community's progress toward positive youth development**
- **To confirm the best means of collection and use of data to support our work toward positive youth development**
- **To network with colleagues**

Meeting Agenda:

- Welcome/Introductions/Context
- Partner Spotlight
- Updates on Comp Strategy Work Teams
- Constituent Survey
- Poverty Research
- Individual Development Accounts
- Evaluations and adjournment
  - "Offers and Requests"
  - Data Presentation
  - Community Conversation
  - o What kinds of data does our community need to collect?
  - o How can data collection and distribution be done in the most useful way?

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### **Welcome and Introductions**

Comprehensive Strategy Chair Barbara Aalfs welcomed the participants and led brief introductions. (For a list of attendees, see page 8.) The facilitator confirmed the agenda.

## Partner Spotlight

Boys Town representative Chrissie Reynolds provided information regarding Boys Town scope, programming, and services.

## Updates on Comp Strategy Work Teams

Comprehensive Strategy Council members presented information related to the following ongoing work groups:

- Constituent Survey
- Poverty Research
- Individual Development Account (IDA) initiative

## "Offers and Requests"

Participants shared the following information with their colleagues:

*The Micah Project* will be sponsoring a "Streets of Hope" strategic planning conference on homelessness on Thursday, June 27<sup>th</sup> from 8:30 – 4:30 in the Mercy Leiter room. Please RSVP to Micah Project – [525@gmail.com](mailto:525@gmail.com) for lunch count.

*Sioux City YouthBuild* Open House will be held for anyone working with youth ages 16-24 on Friday, June 28<sup>th</sup>, at the Goodwill Admin Building, 3100 W. 4<sup>th</sup> St. Youth will give guided tours to get the word out for the next enrollment in August.

## Data Presentation

The CS Data Work Group presented the latest data available related to community indicators in the five (5) youth problem behaviors that Comp Strategy has been tracking over time:

Substance abuse

Teen Pregnancy

Delinquency

Violence

School Dropout

An in-depth compilation of the annual Comprehensive Strategy Progress Report and related data, including risk factors, protective factors and community outcomes, may be accessed on the Siouxland CARES website at: [www.siouxlandcares.org](http://www.siouxlandcares.org)

## Community Conversation

**The participants self-selected into six discussion teams (healthcare/public health, education, social service/faith community, neighborhood focus, justice system, and government) to answer the following key questions:**

- **What kinds of data does our community need to collect?**
- **How can data collection and distribution be done in the most useful way?**

Following table conversations, plenary discussion revealed the participants' primary observations and insights.

Below are recorded the verbatim comments from the table notes:

### ***What kinds of data do you use?***

- Presentation to partners – financial – grants – programming
- City life – investing in community
- Report to National
- Demographics of middle/high school youth
- Neighborhood demographics
- Internal collected data
- Internal data
- Limited English proficiency
- Vacancy rates & affordable housing
- Census info about population in community
- To examine changes
- Crime statistics going up. Council wants to know as early indication of other things (Siouxland CARES)
- Moving lower qualified people to mid or higher qualified skill level
- Certified Worker program – have employees require
- Justice system: Complaints, detention placements, petitions, adjudications
- Workforce development – unemployment, job projections, skill level of workforce
- College completion rates
- Council – crime stats, drug stats
- Housing Authority (limited language proficiency), vacancy rates, available affordable housing
- Census information
- Population based data (census, IDPH vital stats, Health Rankings, poverty, health risk assessment, age demographics, financial data – insurance, health concerns, readmission rates, chronic disease, economic factors, well-being index for Blue Zones)



- Iowa Youth Survey
- CARES survey
- State and Federal
- Day to day agency data
- Most from agency
- Evidenced data-outcome from programs
- Substance
- Residential interagency
- State data for IDA & local agency
- Zip code data

***What are the ways your organization uses data?***

- Use in-house data
- Good relationships
- Use more internal data for reporting to national organization
- For some fundraising (90%)/grant proposals (10%)
- Progress report
- Annual report
- Grant application
- Use info to make change – Human Rights may visit with transportation
- Community policing model – positive change
- Compare data of their mentored students to that of non-mentored
- Measures outcomes of their programs
- Certified worker program – how to move people through system
- Government reporting, in part using census data
- How serving low income people
- Hospital: Budget projects, program planning, strategic planning, grant writing, needs assessment, quality measurement, well-being (see if really improving health)
- Kids Count – says state and national

***What role does data play in your organization's planning efforts?***

- Stories
- Earn the right to talk to them
- Measure outcomes of their programs & services. Determine if effective and how complements schools
- Useful for appropriate development of programs and skills (strategic planning for future)
- Important to use data to move things forward instead of just "collecting" data
- Use data to affect system change (example – transit system)
- Use some data to dictate programs but also just do the grants/programs that are available.
- Look at RFP's interest and need to us or not
- Use data for training purposes (domestic violence, substance abuse, mental health)
- Strategic planning
- Quality improvement projects

***What are your primary data sources?***

- EOM reports of (unreadable)
- Time spent, attendance, grades
- Demographics (Census)
- Internal data connection
- Internal data gathering to meet federal guidelines for renewal finding for poverty rental assistance
- All use census data of planning
- Iowa Workforce Development
- Report cards and attendance

- Some new to all the Comp Strategy data so not sure how/if can use but really good and thankful for it
- Their own program data outcomes
- Use national (census), state, local – but also collect their own data for reporting and planning
- Community policing and school resource officers could be used more effectively. School uses police as “cop” in school. More important to emphasize relationships.
- Veterans – new focus requires staff to find new ways to gather data and access. Only place getting new funding – Renovations to make things handicapped accessible
- IDPH vital stats
- Internal hospital data
- General census data
- General demographic info
- Program information

***What are your government or private funders wanting to fund in the current planning environment?***

- Comparing to national statistics
- Teen pregnancy
- Financial literacy
- Hard copy from individuals employee
- School district
- Tax credit renovations – funded to become more accessible
- Veteran programs
- Council still going to fund youth or kid programs
- Have to provide evidence of the need
- Can’t provide evidence of homeless veterans
- Won’t give funds until proved that you have used your money wisely – show outcomes
- Parent engagement is critical this mindset
- Accuracy of mental health diagnosis – more skilled staff
- Working on alternative therapies/approaches to behavior management and academic skill building (i.e. interactive metronome, brainbased programs)
- Literacy
- Skill development – short-term needs (hot jobs)
- Wellness
- Prevention
- Collaboration with partners
- Quality improvement based on outcomes
- Neighborhood data/zip codes
- Demographics
- Risk factors – Woodbury County chosen because of need from data statewide
- Poverty – rent, utilities
- Parenting
- Home visitation
- Curriculum
- Local foods (gardening)
- Medicare, Medicaid
- Decreasing teen pregnancy

***What are the data implications of those requirements?***

- #’s How many students in Siouxland
- Neighborhood
- Pregnancy
- Funding is short-term sometimes
- Does funding align with true needs?

- Sometimes where biggest needs are, are first to get out (i.e. counselors, reading specialists, etc.)

***Other issues recorded on scribe sheets included:***

- Data may not be reliable enough for accessing resourcing
- Data on delinquency petitions and adjudications labeling properly
- Is the data provided by Comp Strategy useful?
- Would like more data on:
- Parenting data would be interesting (value of education, expectation of school, etc.)
- Students with learning and other disabilities (TAP program within high schools and vocational rehab)
- Alternative programs/education effectiveness/measures
- We should get data for reading, math, etc, skills for earlier than 6<sup>th</sup> grad – Early development is key – so SHOW it!
- Observations of data:
- Need more counselors – specialists like reading are first to get out
- Mental health issues increasing
- Health and fitness (military information shocking, worst county shocking)
- Graduation rate increasing, but competency decreasing – not ready for college/jobs (basic skills deficient)
- Economic poverty chart
- Early childhood education and parenting are key
- Skill and fitness
- Personal finance management missing in youth
- Can you find out % of funding we get compared to other counties?
- Parents mindset and engagement (understanding their expectations will help lead to better engagement)
- Need more data on early childhood (Our data starts too late)
- Need for more support around mental health – better diagnosis and more skilled staff to work thru the special needs. How measure?
- Curriculum and learning styles need to change – not for data committee but for community focus – one voice
- Surprises in the data presented:
- Environment – poorly ranked
- Woodbury County ranks so high
- Other key points:
- Statistics or data on positive outcomes from community policing
- A high percentage of poverty in Siouxland – compare to funding levels in other counties
- In current funding environment veterans still receiving new money – HUD has programs
- We all use census data as well as collect internal data for funding. Federal must track outcomes.
- Continue to collect data – snapshot of community
- Do use lots of internal data
- We use data for grant planning but do often just follow the \$\$\$ for sustainability purposes
- Environmental strategies
- Were/how much funding comes to us – is it less and therefore we are worse off?
- Need MSA data
- Start data collection earlier
- Hard numbers of pregnancy – 12-18 year olds
- Demographics per neighborhood
- Demographics per schools (tri-state)

***Evaluations and adjournment***

The attendees were thanked for their participation and insights and the meeting adjourned at 10:58 a.m.

Respectfully submitted,  
D. Burnight, CTF  
Facilitation Resources

**Attendees who signed in at the Quarterly Community Forum included:**

Katie Johnson	Carla Granstrom
Herb Kuehne	Michelle Lewis
Barbara Aalfs	Dewey Sloan
Michele Haupt	Carole Utesch
Anne Tooley	Linda Phillips
Pat Johnson	Deb Burnight
Chrissie Reynolds	Mary Bertram
Cara Conrad	Mark Hantla
Erin Schroeder	Mellany Risdal
Kevin Grieme	Linnea Fletcher
Debbie Hubbard	Priscilla Anderson
Bob Scott	Sue Brown
Christie Finnegan	Richard Closter
Mary Anne Harrington	Vernon Meyer
Lynnsey Davison	Zack Nelson
Brenda Noll Nowell	Karen Mackey
Jo Fokken	Dennis Bogenrief (IVRS)
Sarah Sayavong	George Sayavong
Kari Van Cura	Sally Kolbe

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**Documentation  
Comprehensive Strategy  
Quarterly Community Meeting  
9:00 – 11:00 AM, February 7, 2013  
Briar Cliff University  
Topic:  
TOPIC**

"An Alternative Approach to Economic Deprivation in Siouxland: Exploring the Individual Development Account Model."

**Meeting Objectives:**

- **To raise awareness of the "mobility" approach to economic deprivation**
- **To learn about the Individual Development Account model and explore its feasibility to address poverty issues in Siouxland**
- **To network with colleagues**

## Agenda:

- Welcome/Introductions
- Partner Spotlight – The Micah Project
- Update on Consumer Survey Planning
- Overview of the "Mobility Model"
- Case Story – "A Community in Action"

- Community Conversation
- "Offers and Requests"
- Evaluations and Adjournment

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**Welcome and Introductions**

Comprehensive Strategy Chair Barbara Aalfs welcomed the participants and led brief introductions. (For a list of attendees, see pages 9-10.) The facilitator confirmed the agenda.

## Partner Spotlight

The Reverend Pat Johnson provide information regarding recent community planning efforts related to the Micah Project, a local faith-based collaboration organized to combat issues of poverty in Siouxland.

**Update on Consumer Survey Planning**

Comprehensive Strategy Coordinator Sally Kolbe provided a progress report from the task team organized to explore possibilities related to implementing a survey process to determine grassroots needs in Siouxland. She invited others to join the team if they wished.

**Overview of the "Mobility Model"**

Associate Professor Heather Craig-Oldsen, Briar Cliff University, presented education about Individual Development Accounts, a model designed to provide financial literacy and economic mobility to program participants. Anyone interested in obtaining a copy of her power point presentation is encouraged to contact her at Briar Cliff ([heather.craig-oldsen@briarcliff.edu](mailto:heather.craig-oldsen@briarcliff.edu)).

**Case Story – "A Community in Action"**

Amy Munderloh, representing the Northeast Nebraska Community Action Partnership, Inc., presented information about an Individual Development Account program that has been successfully undertaken in Pender, Nebraska, and answered questions about their experience.

**Community Conversation**

Following Ms. Munderloh's community story, participants were given the opportunity to discuss the case study and determine the implications for implementing similar programs in their communities. The following observations and insights were recorded from both table conversations and plenary dialogue:

**Observations and Insights from Table Conversations:**

What is one thing that stands out to you from Pender's case story?

- Savings benefit
- He was going to try to pay it forward
- Restrictive
- Intergenerational
- Structured support – following this
- Continued savings to follow up
- \$ money issue – overlapping with other programs
- Excellent resource
- Motivational factors during the process
- Recruitment?
- Recipient has "skin in the game"
- Given choices – good
- \$\$ goes to vendor – good
- Required to do classes – good
- Alternative to welfare system
- Goal establishment – long term not instant, temp fix
- Personal investment/vested interest
- Interactive education – long term habit/relationships
- Developing continued partnerships
- Family unification
- Lifetime lesson to manage money

- Convince others about benefits
- Important emphasis on consistent & time-oriented
- Experience with similar program in Des Moines for aging out: financial literacy education
- Matching of funds
- Great ideas how to get move on
- How to make it a habit
- Habitat partnership
- Move client up
- Make partnership
- Limit 3 choices

What seemed to be key success factors in Pender's experience?

- An entire change in thinking – learning to save in small amounts – paying it forward
  - 2-1 matching incentive
  - Controlling one's savings
  - Federal \$\$
  - Federal funding & United Way
  - Buy-in from banks and credit union
  - Community buy-in: professionals on board
  - That CAA realigned their focus to career development & IDA's
  - Strict guidelines to follow; discourages some behaviors, encourage consistency
  - Time limit – so there will be concrete benefit
  - 2:1 \$\$ incentive
  - Start small
  - Community
  - Support from community partners
- Who are the stakeholders in a mobility project like this one? Who stands to gain something? What is gained?
- Credit funders
  - Private organizations
  - Banks/Credit Unions – gained customers
  - Community – increase income from property taxes, more residents with college degrees
  - Stakeholders – client, community
  - Who gains? – community, city-county-state
  - What gained? Life change, sense of attainable goals
  - Clients – stability, financial, budgeting, habits are life long, learn what \$500 can purchase! Home ownership, education gains.
  - Community/taxpayers – fewer on welfare/housing programs
  - Financial institutions
  - The agencies – Consumer Credit counseling, Habitat, keeps them in the program
  - Other community could replicate in Credit Unions or any agency that –paying it forward
  - Entire community, bring federal \$\$, less crime, better test scores
  - Quality of life for individual
  - Mobility/stability for families
- What programs/efforts in your community are already in place that approximate or are moving in the direction of "mobility" approaches?
- The housing authority – self-sufficiency program
  - There are no central locations
  - Habitat for Humanity – consumer credit counseling
  - EITC program
  - Women Aware
  - SC housing – family self-sufficiency prog.
  - Community Development division
  - Micah Project
  - Sioux Valley credit Union IDA program

- Habitat for Humanity
  - Center for Siouxland
  - Micah
  - Credit Union – Sioux Valley
  - Family Development in SC housing
  - Habitat
  - Early childhood scholarship
  - Sioux Valley Credit Union – Yea!
  - Center for Siouxland – credit counseling
  - WIT
  - United Way
  - Women Aware
  - SC Boost
  - Certificate programs in high schools
- What are the perceived barriers to moving in the direction of mobility approaches in our community? What would it take to overcome them?
- There are always everyday emergencies – between choices with food, housing, transportation, medication it would take added resources and partnerships co-occurring and added support at the end of the program.
  - Consumer oriented culture/changing habits – buying too much – wants vs. needs
  - Long term thoughts
  - Simple – too detail oriented
  - Difficult to understand
  - Funding
  - Income from family
  - Credit score
  - Finding the people
  - Transportation/child care/work schedule – issue attending required training classes
  - Partnering with other agencies that can provide those services
  - Need a survey or focus group to truly find out what the barriers are they tell us vs. us trying to guess
  - Re-framing thoughts – earned not charity
  - Pre-conceived notions
  - Is 200% too strict?
  - Getting right people connected @ right time
  - Not fall into lull if one project does begin and think “it is done”
  - Mobility (population moving state to state)
  - Program barriers – hard to see future when immediate needs
  - Can only make so much before penalized for insurance cost medication, food stamps, housing,
  - Don’t know what you don’t know
- Based on this conversation and our insights, what actions (if any) could/should be taken at this point? By whom? By when?
- More of a collaborative effort between agencies
  - Banks – get funding – investors
  - Center for Siouxland – educating on finance
  - Community Action Agency
  - Peer or family mentoring “Be Friend” program at church-based program
  - Micah Project – ongoing
  - Spreading the word!
  - Central location for information
  - Navigators – that are bilingual
- Other comments listed on recording sheets:
- John- the Iowa program – Can also purchase a vehicle, assisted technology, someone impacted by natural disaster.

- Where would we find funding for surveys? Focus groups?
- Families that are receiving rental assistance
- Community services campus – future
- Education
- Bridges Out of Poverty – Opportunities – Passport – Kids at 19+ – 2 year program aging out of the system
- It is a model that could scale up – to schools, churches – empower people to get involved in their own ongoing groups
- What if they got a job that brought them about 200% level while in program?

### **Observations and Insights from Plenary Conversation:**

What stood out from the Pender case study:

- Gentleman in video: pay it forward/ telling other people about the program, telling his nephew: breaking the generational cycle
- Liked that it involved long term goal setting with time confinements (how long to save, taking action within three years, having to adhere to a schedule, “consistency”
- Liked that it appears to be a well thought out program with education but allowing for choices in how the money was spent, would make a bigger impact.

Key success factors in Pender

- Who are the stakeholders in a mobility project like this?
- Any home ownership or small business support is good for the community as a whole
- Kids aging out of foster care system
- Good education for organizations and for individuals, to know mobility resources exist
- Creates a more welcoming environment, helping people “navigate the system”

What efforts are in the community already that are moving toward ‘mobility’ approaches:

- The Center: Financial literacy
  - Micah Project: hoping to create a community service campus
  - Habitat for Humanity: contact: Mark Custer 712-255-6244
  - City of Sioux City Housing Authority: Self sufficiency program with matching funds for earned & saved assets; especially for rental assistance participants
- Perceived barriers:
- Community buy-in, need to make a shift in the mental model of what “help” would look like
- Options for Action:
- Starting with an assessment tool: Rev. Johnson/ Micah can take on more of the role of developing a community resource/ assessment tool.
  - Request for people to consider ideas for funding the \$8,000 research project that the Assessment task force has been working with Dr. Murray on.
  - John Parks: the Sioux Valley Community Credit Union / Iowa Project:
  - Restrictions are lower in Iowa than in Nebraska, and people can use the assets to purchase a vehicle, technical assistance for their homes if they have a disability or for a home-based business, or if they have been affected by a natural disaster.
  - They need a local non-profit partner; Community Action Agency of Siouxland may be interested.
  - Organizations that could refer resources/ participants:
  - Transitional Services of Iowa, Micah, Women Aware, Sioux City Housing Authority, Sioux City BOOST,
  - Habitat for Humanity, Legal Aid, Center for Siouxland, Workforce Development, SHIP (help identify agencies to work with), Jackson Recovery Center/ Sanctuary Apartments, Crittenton Center / Project Life or Westside Resource Center, 4Directions, Salvation Army, New Iowan Center
  - Potential funders:
  - Siouxland Economic Development Corporation provides micro lending for Siouxland projects
  - United Way of Siouxland
  - MRHD & {new casino}
  - Siouxland Community Foundation



**“Offers and Requests”**

Participants shared the following information with their colleagues:  
 “Bowl for Kids Sake” needs bowlers and/or sponsors. April 4, 5, & 6 at Rush Werks. Team of 5 = \$500 – Bowl 2 games – shoes, and bowling free. BBBS fundraiser – call Teresa at 239-9890 for information.  
 Poverty Simulation – 2-4 o’clock, Monday February 11 at BCU Stark Stage. Contact Heather Craig-Oldsen for this cool experience.  
 Guatemalan Presentation – 7-8 o’clock, Tuesday, February 12, at BCU Assisi room – Learn about the Guatemalan culture here in Siouxland.  
 Dwight Howe Native American Cultural presentation, 7-8:00 o’clock, Wednesday, February 27, BCU Assisi room. Learn about Native people in Siouxland.

**Evaluations and Adjournment**

Participants were asked to fill out session evaluation sheets and leave them on the tables, and asked to consider the following questions:  
*What do I know as a result of today’s meeting?*  
*How does this impact me and/or my organization?*  
*Who else needs to know?*  
*How do I get the information to them?*  
 Evaluation responses and names of those in attendance are listed on pages 8-10.  
 The session adjourned at 10:55 AM.

Respectfully submitted,  
 D. Burnight, CTF  
 Facilitated Resources

**Participant Evaluation Summary**

Number of respondents: 32  
 Average rating listed in ***bold italics***

<b><i>Excellent</i></b>	<b><i>Adequate</i></b>	<b><i>Unhelpful</i></b>				
Topics chosen for discussion:						
		<b><i>1.44</i></b>				
		1	2	3	4	5
Meeting format:						
		<b><i>1.47</i></b>				
		1	2	3	4	5
<b>The following meeting objectives were rated according to the level respondents thought they were met. (1 being “fully met,” 5 being “not addressed at all”)</b>						
<b>To raise awareness of the “mobility” approach to economic deprivation</b>		<b><i>1.72</i></b>				
		1	2	3	4	5
<b>To learn about the Individual Development Account model and explore its feasibility to address poverty issues in Siouxland</b>		<b><i>1.57</i></b>				
		1	2	3	4	5
<b>To network with colleagues</b>		<b><i>1.62</i></b>				
		1	2	3	4	5

**An “ah-ha” for me during this session was...**

- Hearing about “be friend” program in Norfolk from people @ my table
- It is good for the right person but it is a small group & it is costly
- Some programs provide greater benefit to program developers and facilitators than to the targets of the program – in this case the impoverished.

- The current like-mindedness and drive to move forward – something big is about to happen!
- How IDA's can be used for youth aging out of the system
- IDA
- Continuing to partnership for outcomes in our community
- Having credit union, financial advisor & other business contacts here today!
- Hearing bout potential partnerships for IDA's
- How impacting the program could be
- IDA's – I had no idea about this program
- Realizing how many agencies could work together
- How dependent even the IDA award is on govt. funding – supplemental \$\$ from assets for Independent Account

**I would suggest that in future sessions we...**

- Where are or how can we develop low skill employment for the caretakers with children living in poverty
- The education piece is such a value and keeps everyone up-to-date. Thought there was a more "get-stuff-done" attitude @ this meeting.
- Take action steps
- Wasn't aware of the program
- Have more opportunity to discuss questions about programs
- Importance of increasing education for youth to slowly pull them (and the community) out of poverty. The importance of education on financial advancement.
- Focusing on most critical needs in the community

**Other comments:**

- Thanks
- Too many of there sessions avoid issues of impoverished children
- Just trying to learn about C.S. Today this session was good for that.
- Helpful to meet individuals and network around table
- Great location!

**"Attendance List"**

Name	Organization
Barbara Aalfs	Community Volunteer
Mary Bertram	Community Action Agency
Abby Buckhouse	Briar Cliff University
Deb Burnight	Burnight Facilitated Resources
Paul Campbell	Presbytery of Prospect Hill
Thomas Clark	Sioux City BOOST
Jim Cole	Siouxland Youth for Christ
Katie Colling	Women Aware
Cheryl Connot-Perez	Wooddbury County Extension
Heather Craig-Oldsen	Briar Cliff University
Linnsey Davison	Siouxland Community Health
Rita DeJong	Sioux City BOOST
Sara Fay	St. Luke's Hospital
Sister Shirley Fineran	Briar Cliff University
Linnea Fletcher	Jackson Recovery Centers
Jennifer Gomez	Sioux City Community Schools
Jeff Hackett	Boys Town
Sue Harder	Mercy Home Care
Ed Huff	Crittenton Center
Rev. Pat Johnson	Micah Project
Chris Jones	Sioux City BOOST
Dawn Kimmel	Siouxland Aging/SIMPCO TAG
Bruce Kolbe	Community Member

Sally Kolbe	Comprehensive Strategy
Herb Kuehne	Community Volunteer
Michelle Lewis	Siouxland District Health Depart.
Linda Madison	Sioux City Community Schools
Jade Meier	Briar Cliff University
Ivy Menke	Sioux City BOOST
Stephanie Mohrhauser	City of Sioux City/ Housing
Regan Murray	Briar Cliff University
Amy Munderloh	Northast Nebraska Community Action Partnership
Callie Naylor	Sioux City BOOST
Brenda Noll	Eckerd Youth Alternative
Matt Ohman	SHIP
John Parks	Sioux Valley Credit Union
Linda Phillips	Siouxland CARES
Joy Reuss	Lutheran Services of Iowa
Chrissie Reynolds	Boys and Girls Home
Andrea Rohlena	Jackson Recovery Centers
Dewey Sloan	Woodbury County Attorney
RoxAnn Smith	Jackson Recovery Centers/ River Hills
Dusti Storm	Northeast Nebraska Community Action Partnership
Abbie Susie	Big Brothers Big Sisters
Mark Stuck	R.W. Baird
Jason Wagner	Transitional Services of Iowa
Jenna Walsh	United Way of Siouxland
Ted Wilson	Briar Cliff University

**Documentation**  
**Comprehensive Strategy/Siouxland Healthy Initiative**  
**Quarterly Community Meeting**  
**September 28, 2012**

**Northwest Area Education Agency**

**Topic: "Economic Deprivation: A Prescription for Change"**

**Focus Question: "If indeed poverty is a significant root cause of problem behaviors (and our research indicates this to be true), how can we mobilize the community to impact extreme economic deprivation in Siouxland?"**

**Meeting Objectives:**

- **To raise awareness of the linkage between problem behaviors, risk and protective factors and the environmental strategies that can impact them**
- To identify priority community environmental strategies that could reduce risk and build protection around our community goal for "Extreme Economic Deprivation"**
  - **To network with colleagues**

**Agenda:**

- **Welcome/Introductions**
- **Partner Spotlight**
- **Online Comprehensive Strategy Partner Satisfaction Survey Results**
- **Impacting Economic Deprivation – A Comprehensive Approach**
- **Community Conversation**
- **"Offers and Requests"**
- **Evaluations and Adjournment**

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**Welcome and Introductions**

**Comprehensive Strategy Chair Barbara Aalfs welcomed the participants and led brief introductions. (For a list of attendees, see pages 7 & 8.) The facilitator confirmed the agenda.**

## Partner Spotlight

Jenna Walsh, United Way of Siouxland, presented information related to United Way's current efforts related to addressing issues of economic deprivation. United Way raises community funds and distributes them to 30 agencies. They have three impact areas, one of which is focused on families. Examples of agencies providing programming to address poverty issues are:

- The Center has financial counseling, payee services, and transitional housing assistance.
- Mary Treglia Community House serves refugees, and helps with transitioning people into the community.
- Women Aware helps clients create action plans.

United Way also partners to support the Earned Income Tax initiatives, helping people with tax preparation, which returned \$400,000.00 locally last year, adding to the \$1million returned since the program began. This is money that would have otherwise gone unclaimed and would not have come back to the Siouxland community. All United Way partners influence poverty in some way.

## Satisfaction Survey Report

Allyson Olson, Comprehensive Strategy Council member, presented data from an online survey intended to provide direction for Comprehensive Strategy's future focus and activities. The survey was distributed in July and August in order to assess partner satisfaction levels with Comprehensive Strategy's process, outcomes, and opportunities for engagement. 58 partners responded to the survey. Overall, levels of partner satisfaction were very high. If anyone is interested in the full results of the survey, please contact Allyson at [Allyson.olson@ssccardinals.org](mailto:Allyson.olson@ssccardinals.org).

## Impacting Economic Deprivation

Three members of the Comprehensive Strategy Council – Kevin Grieme, Linda Phillips, and Herb Kuehne – presented education intended to raise awareness of the Comp Strategy model and its approach to reducing risk and building protection around the risk factor of "extreme economic deprivation." (See Appendix #1, page 9) Also included was information derived from geomapped census data for the Siouxland area, illustrating pockets of poverty in our tri-state region.

## Community Conversation

Four questions were asked in order to share group knowledge and insights related to the topic of poverty in Siouxland:

- What strategies related to poverty issues are you aware of currently being utilized in Siouxland that focus on the individual?
- What specific environmental strategies related to "extreme economic deprivation" are you aware of that are currently in use in the Siouxland area?
- What are other environmental strategies we could focus on (as a community)? What difference would that make?
- What are our recommendations for action? What would it take to make that happen?

What are our next steps?

Participant responses recorded from table conversations are listed on page 3 – 5.

What strategies (related to poverty issues) are you aware of currently being utilized in Siouxland that focus on individual behaviors?

Table 1:

- Backpacks for meals being taken home by students for weekend meals
- Summer lunch program – being under-utilized
- Food Bank service opportunities for helping to pack programs
- Medical access for children – free to sliding fee scales
- I-Smile program – working to get students into dental homes, especially for Title IXX
- Free dental services provided by local dentists on identified days
- WIC program – nutrition education and food benefits

Table 2:

- Available information is given to school counselors
- The key is always going to be education and jobs in Siouxland, good paying jobs to be more specific
- Bring in awareness of the poverty level, where did stats come from

Table 3:

- Programs to help people help themselves
- Fed SS – Family Development – help to get off FIP
- Beyond Poverty – Salvation Army
- Women Aware programs
- CSADV programs
- Family team meetings – Crittenton
- Boys Town model
- Need hands-on intense services
- Need to remove barriers
- That congregations
- Move from acts of charity to systemic change

Table 4:

- Access to transportation
- Shopping cards
- Individual plans to access community supports
- Rental Assistance (family self sufficient through education and training)
- Increase savings, build escrow (75 families)
- Educational plans
- Determine eligibility for certain programs for support

Table 5:

- SHIP – scholarship funds for low income families
- Family team meetings – connect to resources by choice, not dictated by court system
- Love and Logic parenting classes
- Siouxland Beyond Poverty classes

Table 6:

- Job retraining/training – DHS
- Churches work closely with schools and with children in poverty – fundraisers to raise money for families in need – Ponca
- Food assistance, cash assistance – DHS, nutrition education for individuals

What specific environmental strategies related to “extreme economic deprivation” are you aware of that are currently in use in the Siouxland area?

Table 1:

- Job retaining strategies – skill development for new
- Health care – training for high school students (CNA) program
- Career academies

Table 2:

- The funding for state and federal funds are decreasing. Programs will need to downsize and merge
- Also discussed helping people who are afraid to ask for help

Table 3:

- Scholarships to receive education
- Bus/taxi vouchers – for targeted clients
- Boost
- Swis program
- Hopes program
- Food pantries, banks

Table 4:

- Urban revitalization
- Siouxland Community Health Center – based on income so people can get affordable health care

Table 5:

- TANF – policy allows states to fashion own Welfare to Work – some have better employment rates
- Pierce Street Corridor development – heart of inner city

Table 6:

- Low-income housing
- Sliding scales at Jackson, Health Center, Siouxland Mental Health Center

What are other environmental strategies we could focus on (as a community)? What difference would that make?

Table 1:

- Have a conversation with "poverty" individuals to determine what is needed – barriers that are encountered by them to self-sufficiency

Table 2:

- More youth earlier to develop educational and leadership skills
- An environmental problem is a need for good low income housing options for the community. A focus needs to be affordable housing.

Table 3:

- One stop shop for all needs

Table 4:

- Concentration of poverty – segregation of children in neighborhoods
- Need a true integration where people are willing to live in neighborhoods with diversity in economic status
- Microloans
- Integration
- Skill-based education
- Community needs assessment
- Start a conversation!

Table 5:

- Habitat for Humanity – policy – assist with substandard housing by giving interest-free loans
- Low equity loans – promote own ownership
- Need policy for guaranteeing associate degree enrollment to every high school student – payment for tuition to school

Table 6:

- Ask them what THEY need – Platinum Rule – Educating families on what and where to get assistance

What are our recommendations for action? What would it take to make that happen? What are our next steps?

Focus Question: "If indeed poverty is a significant root cause of problem behaviors (and our research indicates this to be true), how can we mobilize the community to impact extreme economic deprivation in Siouxland?"

Recommendations for action:

1. Participants were encouraged to attend the upcoming Micah Project community meeting (see Offers and Requests for details). The purpose of the Micah Project is to more effectively alleviate poverty in our community.
2. A task team formed to design and implement a survey tool that can be used to assess families' true economic needs, as seen through their eyes (i.e. "Platinum Rule" – "Do unto others as they would have you do unto them"). Sally Kolbe, Comprehensive Strategy Coordinator, will coordinate the work of the group.

Volunteers include:

- Amy Tooley, City of Sioux City
- Dewey Sloan, Woodbury County Attorney
- Margaret Sanders, CSADV
- Jenna Walsh, United Way
- Paul Olson, Briar Cliff University
- Mary Bertram, Community Action Agency of Siouxland

Based on the outcomes of the Micah Project meeting and the needs assessment task team, the Comprehensive Strategy Council will consider continuing this conversation at the next community meeting, to be held in December 2012. Those with suggestions for the agenda are encouraged to contact any Council member.

## "Offers and Requests"

The following announcements were made:

The Micah Project Community Meeting: Thursday, October 11, 2012, 9:00 am – 3:00 pm, Scottish Rite Temple, 801 Douglas St., Sioux City. Breakfast and lunch provided, off-street parking available. RSVP for meals, please. Contact: Rev. Patricia Johnson, Director, 712-547-6020, [Michaproject525@gmail.com](mailto:Michaproject525@gmail.com). During these difficult economic times, with substantial funding cuts affecting programs and services, how can congregations partner with business, government, and social services to more effectively alleviate poverty.

Slavery: It Didn't End with the Civil War (Human Trafficking): Patrick Atkinson for the Sister Muriel Ford Lecture presentation, 7:00 Sunday night, September 30, Briar Cliff University, Saint Francis Center. Open to the public. Human trafficking impacts our community today!

Cold Stone Creamery Fundraiser: Briar Cliff students – Sunday, September 30, noon – 4:00 pm, Cold Stone Creamery, 18th and Hamilton, will donate ½ profits to house building funds for service learning project in Guatemala in January 2013.

Domestic Violence Vigil: CSADV, Wednesday, October 3, 6:00 pm, Library Gleeson Room. October is Domestic Violence Awareness month.

Community Family Team Meetings – Serving all of Siouxland: Sponsored by Community Partnership for Protecting Children. Contact Audrey at 712-252-8262, email [alarson@crittentoncenter.org](mailto:alarson@crittentoncenter.org).

SPFSIG Coordinator Position Available: Strategic Prevention Framework State Incentive Grant Woodbury County position through Jackson Recovery Centers. Apply online to [Jacksonrecovery.com](http://Jacksonrecovery.com) or call Priscilla Anderson at 234-2314.

Red Ribbon Week Kickoff: Sponsored by Siouxland CARES, Sioux City Mayor's Youth Commission, Sioux City Elks Lodge 112. Positive youth development – alternative activity at Long Lines Family Rec Center, 5:30-7:00 p.m., October 15, 2012.

### Evaluations and Adjournment

A participant evaluation will be distributed with the documentation and participants are asked to return for ongoing performance improvement to Sally Kolbe at [Sally.source@yahoo.com](mailto:Sally.source@yahoo.com). Those in attendance were thanked for their participation and insights and the meeting officially adjourned at 10:59 AM.

Respectfully submitted,

D. Burnight, Facilitated Resources

October 2, 2012

Participant List (those who signed in):

Barbara Aalfs Community Volunteer

Mary Bertram Community Action Agency

Kathy Boman BCU student

Abby Buckhouse BCU student

Deb Burnight Burnight Facilitated Resources

Becky Carlson Siouxland District Health Dept.

Katie Colling Women Aware

Cheryl Connot-Perez Woodbury County Extension

Riley Cowell BCU student

Heather Craig-Oldsen Briar Cliff

Linda Cron NWAEA

Rita DeJong, BOOST-Bridging & Overcoming Obstacles thru Service and Training

Nene Diallo BCU student

Jo Fokken, Western Iowa Tech Community College

Jennifer Gomez SCCSD

Jody Graham Community Member

Kevin Grieme Siouxland District Health Dept.

Jane Griesel CSADV

Tammy Hovde

Pat Johnson Micah Project

Sally Kolbe Insight Source.org  
Herb Kuehne Sioux City Police Dept.  
Brian McCorthy BCU student  
Leesa McNeil Woodbury County Courts  
Mark Monson County Supervisor  
Gary Niles Juvenile Court Services  
Brenda Noll Eckerd Youth Alternative  
Paul Olson Briar Cliff University  
Jennifer Paulsen BCU student  
Linda Phillips, Siouxland CARES  
Paige Reinning Big Brothers/Big Sisters  
Margaret Sanders CSADV  
Dewey Sloan Woodbury County Attorney  
RoxAnn Smith River Hills recovery  
Paul Speidel Westlaun Presbyterian  
Abbie Susie BBBS  
Tina Tassler BCU student  
Amy Tooley City of Sioux City  
Gabriela Valdovinos BCU student  
Jenna Walsh United Way of Siouxland  
Sara Wester Siouxland District Health Dept.

APPENDIX #1 – Provided by Linda Phillips

Communities That Care Model for Comprehensive Strategy for Positive Youth Development Vision: Our community will provide opportunities for youth and families to be healthy and resilient contributors to society.

Mission: To facilitate the creation of resource tools for positive youth development.

Five Objectives:

1. Reduce the availability of alcohol, tobacco and other drugs for illegal purposes.
2. Provide opportunities and support so families will be safe, healthy and nurturing.
3. Provide early opportunities and motivation for youth to develop positive meaningful relationships with their community
4. Provide early opportunities, motivation and support for academic success for all youth.
5. Foster economic growth that will enable families to achieve financial independence.

Specific individual and interpersonal risk factors for Objective 5 above:

- Lack of prenatal care
- Lack of health, dental and mental health care and/or coverage of medical insurance
- Unable to meet basic needs: food, housing, etc.
- Lack of quality early education and care programming
- Inadequate caregiver abilities
- Violence (child abuse, neglect, domestic violence)
- Poor children who live in old apartments or homes-high rates of accidental injury or exposed to toxics-lead/asthma
- Lack of networks and support increases family isolation
- Children not living with two parents
- Child living with parent(s) who do not have steady, full-time employment
- Unengaged fathers
- Family income below the poverty level
- Family receiving welfare benefits
- Household head is high school dropout
- Minimum entry level job skills
- Lack of job-seeking skills
- Lack of coordinated, comprehensive school to work efforts
- Lack of basic work readiness and/or occupational skills
- Low paying wages to meet basic family needs
- Decline in employer healthcare benefits
- Lack of flexible work schedules, family-friendly businesses, corporate childcare



partnerships

Effective Approaches-Strategies

• Prenatal and Infancy Programs

o Perinatal approaches – Ensuring healthy pregnancies and healthy infants; Preparing all young people for parenthood; Meeting demands of a high-needs infant; Making family planning services available

o Scope of Health Care for Very Young Children – Providing well-child care programming; Counseling and support services for children with chronic or handicapping conditions; Providing dental services

o Dependable Caregivers – Ensuring quality child care choices; Providing affordable child care options; Developing networks of family-centered child care programs for infants and toddlers

o Mobilize Community to support Young Children and Families

• Youth Employment with Education

o Collaborative Relationships – wrap around services

o Skill Training Opportunities

o Job Mentoring Opportunities

o Meeting Basic Needs

o Leadership Development – opportunities for leadership development and civic participation

**Documentation  
Comprehensive Strategy  
Quarterly Community Meeting  
June 19, 2012**

**Topic:**

**“Data Review – Resetting the Targets”**

## Meeting Objectives:

- **To provide community partners with current data impacting youth development**
- **To explore current data trends and provide anecdotal information to inform what the numbers are telling us**
- **To make community recommendations for 2015 target outcomes, based on current trends**
- **To network with colleagues**

## Agenda:

- Welcome/Introductions
- Partner Spotlight
- Data and Trends Review/Community Conversation
- 2015 Target Outcomes
- “Offers and Requests”
- Evaluations and Adjournment

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### **Welcome and Introductions**

Comprehensive Strategy Chair Barbara Aalfs welcomed the participants and led brief introductions. (For a list of attendees, see page 7.) The facilitator confirmed the agenda.

## Partner Spotlight

Through a short presentation and video, BriarCliffUniversity representatives Regan Murray and Paul Olson provided a brief history of the institution and information related to the Siouxland Social Science Research Center. The Siouxland Social Science Research Center is an organization which designs and conducts affordable social science research in order to provide information needed by private or public agencies, non-profit organizations, and other community groups. The Center can generate useful information for policy analysis, program evaluation, social impact studies, needs assessments, or action-oriented research. Both qualitative and quantitative research techniques are used, including but not limited to questionnaires, interviews, case studies, focus groups, polls, content analyses, and unobtrusive data-collecting strategies.

### **Data and Trends Review/Community Conversation**

Northwest AEA representative Marlin Jeffers led the group in an electronic response exercise to review current key data indicators related to the five Comprehensive Strategy problem behaviors: 1) Substance Abuse, 2) Teen Pregnancy, 3) School Dropout, 4) Delinquency, and 5) Violence. The results of the exercise can be found in the PDF attachment entitled, "Comprehensive Strategy Clicker Report." Table and plenary conversations revealed the following insights from the participants:

*What surprises you about this information?*

- Dropout rates (improved by 1% in Sioux City, decreased in SSC)
- Teen pregnancy rates (alarming compared to state rate for both Iowa and Nebraska)
- Difficulty at which teens can obtain alcohol or drugs
- Other things going down & marijuana use is up
- Drink more in a shorter time
- Binge drinking going down along with alcohol use in general
- Lower numbers in all categories
- Marijuana use was dipped in 2010
- Not surprised
- Not reflective of ten years ago – suspect that there is underreporting
- Some surprise at high use of marijuana by seniors

*How does this information relate to your observations or experience working with your target population/client base/constituents? What do you see happening in your world?*

- Trends look good, but what data aren't we tracking (K2)??
- Jackson Recovery – numbers are steady
- Big Brothers Big Sisters – Not seeing much with substance abuse, Younger "littles" (5% are age 14-18)
- Perhaps youth who fill out surveys are underreporting or youth with problem behaviors aren't in attendance

*What do you think is behind the numbers? What are current trends, events or anecdotal information that helps to explain what's going on here?*

- Rural vs. urban areas
- Lower SES vs. higher SES areas
- Lack of parent involvement
- Behavior model/generational
- Social stigma of marijuana use as diminished with increase in medicinal marijuana
- (Our) Table does not believe that the drop in alcohol is actual
- We have alcohol problem. We have special unit – but also high alcohol rate
- Child abuse high – and these children grow into adults with problems
- Drop in drug screening state – perhaps due to changes in hospital staff, mothers going to smaller or out-of-state hospitals, mothers using new drugs that are not tested
- Binge drinking – You can get very drunk without "binging" depending on what you drink. "One drink" size is changing as portions get larger
- Dropout – many factors make it complicated to track (late graduation, early, graduation, alternative schools, state versus local policies)

*Questions raised:*

- Survey should be administered at end of school year. Are they?
- Why is there such a difference from year to year?
- Why is Woodbury County so high compared to rest of state?  
**(Note: Data sheets included in the participants' packets included: 1) Comprehensive Strategy Annual Progress Report, 2) Updated Risk Factor data (including data from Dakota County), 3) Urban 8 comparisons, 4) County Health Rankings, 5) Metro Area Youth Survey, and 6) Previous 5-10-15 year Goals for the Problem Behaviors. Community partners wishing to access the current data reports are encouraged to visit the Siouxland CARES website link for Comprehensive Strategy at: <http://siouxlandcares.org/comprehensive-strategy/data/> )**

**2015 Target Outcomes**

**Following a short networking break, the participants self-selected into problem behavior teams to re-set 2015 target outcomes, based on key indicators for each of the five problem behaviors. The teams reported back on the following recommendations for target outcomes:**

<b>Problem Behavior:</b>	<b>2015 Target Outcome:</b>	<b>Rationale:</b>
Substance Abuse (30 day prevalence)		
Alcohol	30%	Current positive trends
Binge drinking	20%	How low can it realistically go?
Tobacco	18%	Sends the message that there is still work to do
Marijuana	18%	
		Previous rate 100
		Minimal resources – 3-5 year grants
		Small target is hit with grant \$\$ – not entire community/schools
		Not much change expected without change in attitudes, funds, awareness
		Top program – PP
		Capp dollars – PP, LSI, Girls Inc.
		Value systems/SES of our community
Teen Pregnancy	115 per birth rate per 1,000	Generational
		Graduation coaches
		Career academies
		Legislative issues (Consistent definition of “dropout”, 5 years to complete diploma, count GED completion and training)
School Dropout	Public (7-12) 2% (9-12) 3%	
		Be at the state average for We believe there will be a downward trend
		juvenile simple arrests and over the next 5 years due to the resources
		larcenies and increased collaborative efforts in the
Delinquency and Violence	50%	community

The participants indicated their levels of agreement with the proposed targets using the “clicker” response system. Their responses are documented as item numbers 15-22 in the attached document entitled “Comprehensive Strategy Clicker Report.”

At the next Comprehensive Strategy quarterly community meeting, the new target outcomes will be reviewed, confirmed and/or adjusted, and environmental strategies that can help achieve these targets will be discussed in preparation for the annual Comprehensive Strategy legislative (public policy) forum in December.

**“Offers and Requests”**

The following announcements were made:

Jackson Healthy Kids and Communities Newsletter: Send your email address to [pandersen@jacksonrecovery.com](mailto:pandersen@jacksonrecovery.com) to be added to the mailing list

Jackson Recovery Centers – Prevention Job Opening: SPF SIG coordinator for Plymouth County. Apply to Jackson Recovery Centers, [jacksonrecoverycenters.com](http://jacksonrecoverycenters.com) – Pricilla Andersen, 712-284-2314

**Evaluations and Adjournment**

Participants were asked to fill out evaluations of the community meeting. (Note: A summary of evaluation responses is found on pages 5-6 of this document). Those in attendance were thanked for their participation and insights. The Data Collection Team was thanked in particular for all the hours of time and energy spent in collecting and organizing the 2012 data report. The meeting officially adjourned at 11:00 AM.

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**Comprehensive Strategy/Healthy Siouxland Initiative Joint Community Meeting  
March 12, 2012**

**Topic: Environmental Strategies--“Strategies that target the broader physical, social, cultural, and institutional forces that contribute to problem behaviors.”**

**Meeting Objectives:**

- .. Raise awareness of the potential for how environmental strategies can support lasting community change
- .. Identify possible strategies that partners can implement (as individual organizations or collectively) that can significantly impact positive youth behavior
- .. Network with community partners in the interest of positive youth development

**Agenda:**

- Welcome/Introductions
- Context-What are “environmental strategies?”
- Partner “Spotlight” – Priscilla Andersen, Jackson Recovery Centers; Holly Keegan, Monona County SPF SIG Coordinator; Katie Brannen, Woodbury County SPF SIG Coordinator; Andrew Dutler, Plymouth County SPF SIG Coordinator
- Small Group Discussion
- Debriefing of Small Group Discussion
- “Offers and Requests”
- Evaluations and Adjournment

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Welcome and Introductions: Comprehensive Strategy Chair Barbara Aalfs welcomed the participants and led brief introductions. Linda Phillips, Siouxland CARES, and Michelle Lewis, Siouxland District Health Department, defined “environmental strategies” and gave examples of some currently being used in their work.

**Partner Spotlight**

Four representatives (see list in agenda) from Jackson Recovery Centers presented information on the Strategic Prevention Framework State Incentive Grant environmental strategies currently being implemented in Monona, Woodbury and Plymouth counties.

**Small Group Discussion and Debrief**

Tables were asked the following questions and given time to share answers with each other.

1. What do you see going on related to environmental strategies in your world? Where are you

using or observing environmental strategies? What is the impact/result on individual/family/organizational/community behaviors?

2. If you see evidence of environmental strategies in your work or experience, what is driving a push in that direction? (i.e., funding opportunities, marketing, competition, etc.?)

Following plenary discussion, each table was asked to write 5-10 environmental strategies that had been listed at their tables on sheets of paper (color-coded to indicate whether the strategies were at the Home/Family level, the Workplace level, the Community level or the State/Federal level). The examples were collected and organized into eleven different focus areas (see "Appendix 1" for detail on the resulting work product). In debriefing the exercise, the participants noted that areas of strength included "Food Selection Choices" and "Physical Activity and Exercise." Areas that were noted for needing more attention included:

- A need for less disconnect between those who want to eat healthier and cost of healthy food
  - Supporting positive sustainable policies for all facets of Life
  - More workplace strategies at all levels (Note: Michelle Lewis shared information related to local efforts to support workplace wellness – anyone wishing to get involved in the initiative or find out more about it is encouraged to call Angela Drent at the Siouxland District Health Department.)
- When asked what should be done with the work product created, the participants suggested sharing the information with the Blue Zone team (considering the good programs and strategies that are already in place) and emphasizing the message that this work will continue to move forward.

### **"Offers and Requests"**

The following announcements were made:

MARY TREGLIA HEALTH FAIR: April 19, 9 AM – noon at 900 Jennings. Purpose is to educate immigrant families on health services and related programs. Looking for more providers who have information to share with this new population.

MULTICULTURAL FAIR: Everyone is invited Sunday, March 25 from Noon – 4 PM at Long Lines for food, entertainment and education.

"GREAT HURT:" Awareness of historic trauma and impact on Native American families, children and youth. March 25 at 7:00 PM at the Briar Cliff University Stark Center. Open to the public.

JACKSON RECOVERY CENTERS: Annual banquet, March 24th at the Marina Inn. National speaker to present – for more information, contact [www.jacksonrecovery.com](http://www.jacksonrecovery.com)

DOMESTIC VIOLENCE ASSESSMENT AND INTERVENTION FOR SERVICE PROVIDERS: Presented by CSADV and the Iowa Department of Public Health on Friday, May 18, 8:30 AM to 12:30 PM, at the Northwest Area Education Agency. Free – Contact Deb at 277-0131 for more information.

AGENCY SUMMIT: For all service providers on Friday, March 30th at St. Thomas Church (12th & Douglas) to share and gather info. Appropriate for line staff to learn about services available to clients. Call Mary at Community Action Agency to register.

KIDS FEST: For kids 0-5 in IDA County – Booths, fun education, and prizes. Ida Grove Skate Palace on April 12, 3:30 – 6:30.

NEEDED: Information on who can put healthy food in vending machines

Evaluations and Adjournment

Participants were asked to fill out evaluations of the community meeting and leave them at the door as they left (Note: A summary of evaluation responses is found on page 4 of this document). Those in attendance were thanked for their participation and insights. The meeting adjourned at 10:55 AM.

Respectfully submitted,

D. Burnight, Facilitated Resources

Participant Evaluation Summary

Number of respondents: 24

Note: A formatting issue neutralized available information from the quantitative evaluation component – therefore, no quantitative scores are included in this summary.

Narrative responses included:

An "ah-ha" for me during this session was...

- Seeing what was offered in the community as environmental strategies currently
- We operate in a bubble
- Learning what other agencies' strategies are – some great ideas. Getting everyone involved.

I would suggest that in future sessions we...

- Include clients as part of meeting
- I like the meeting format

Other comments:

- Need to focus on what inhibits behavioral change
- Allow more time for large activity – felt too rushed
- Excellent
- Excellent!

### **Legislative Forum**

**Friday, December 9, 2011, 9:00 a.m.**

**Stoney Creek Inn & Conference Center**

**Hosted by Comprehensive Strategy**

Welcome: Barbara Aalfs, Comprehensive Strategy Chair

Introductions/Process: Kevin Grieme, Director, Siouxland District Health Department, (712) 279-6119, [kgrieme@sioux-city.org](mailto:kgrieme@sioux-city.org).

#### ACADEMIC FAILURE

Mandatory attendance until successful graduation or 18 years of age.

*Presented by Dr. Linda Madison, Associate Superintendent, Sioux City Community School District, 712- 251-5882 (cell), [madisol@live.siouxcityschools.com](mailto:madisol@live.siouxcityschools.com).*

Background: A few points made through the research....

- Economic future of our states/country and the dropout problem are related.
- Suggests as much as a 12% increase in earnings post-high school.
- Students less likely to report being unemployed, having health problems, being depressed, and working in lower-skilled jobs.
- People with more schooling report higher levels of satisfaction with their lives overall.
- A compulsory school age helps raise expectations among students, their parents, school authorities, and the general public.

Current Law/Regulation

Iowa

Iowa Code, Chapter 299, covers compulsory school attendance and truancy:

“The parent, guardian, or legal or actual custodian of a child who is of compulsory attendance age (6-16 years old), shall cause the child to attend some public school, an accredited nonpublic school, or competent private instruction.”

Nebraska

July 1, 2005 Nebraska legislation made attendance at school compulsory until age 18. The rationale behind this enactment was a strong commitment to all students earning a high school diploma. More importantly is the new legislation that requires each district to report attendance to the state on a monthly basis and requires that students with excessive absences to be reported to and prosecuted by the County attorney.

South Dakota

Effective July 1, 2008, South Dakota passed legislation making attendance compulsory until age 18 unless students have earned a high school diploma or have completed a school based GED program passing the GED test from the Dept. of Labor.

TEEN PREGNANCY

Continue funding programs that address the teen pregnancy issue and support of mandatory attendance until successful graduation at age 18.

*Presented by Sarah Deck, Clinical Supervisor of Staff Development and Education, Jackson Recovery Centers, 712-234-2384, [sanderson-deck@jacksonrecovery.com](mailto:sanderson-deck@jacksonrecovery.com)*

Background:

- Page 5 of Comprehensive Strategy June 2011 Progress Report—percentage of teen pregnancies for Woodbury County, State of Iowa, Dakota County and State of Nebraska
- Handout: Sioux City’s rate of teen childbirth compared to Urban 5 in Iowa
- Handout: The Cost of Teenage Pregnancy
- Handouts (3): The Public Costs of Teen Childbearing in Iowa, Nebraska and South Dakota
- Handout: Other Information Related to Teenage Pregnancy

#### Data Highlights:

- Teen pregnancy rates have been increasing since 2007 in both Woodbury and Dakota counties.
- According to a Geo-mapping Study using grant funding that was completed using teen births in 1997-1999,
- The race breakdown of "urban" teen mothers was:
  - 85% Caucasian
  - 8% Native American
  - 5% Black
  - 2% Asian
- The race breakdown for "rural" teen mothers was:
  - 93% Caucasian
  - 7% Asian
- Public Costs of Teen Childbearing in 2008:
  - \$99 million in Iowa
  - \$67 million in Nebraska
  - \$23 million in South Dakota
- In 2008 costs to taxpayers in Iowa, Nebraska and South Dakota associated with the children of teen mothers were:
  - \$36 million for public health care
  - \$64 million for child welfare
  - \$28 million due to increased rates of incarceration
  - \$49 million in lost tax revenue
- Teen pregnancy coincides with other problem behaviors being addressed by Comprehensive Strategy for Positive Youth Development:
  - Economic deprivation
  - Availability of alcohol and other drugs
  - Academic failure
- What works to reduce teen pregnancy:
  - Comprehensive sex education: curriculum-based education that encourages both abstinence and contraceptive use.
  - Service learning programs that engage youth in their communities.
  - Youth development programs that encourage participants to plan for their future.
  - Parent programs that involve parents and youth and seek to improve communication.
  - Community-wide programs that encourage involvement from the entire community.
- Current Human Sexuality/Development Education Begins:
  - Iowa: Sioux City Public Schools' current curriculum is to introduce puberty via fifth grade human growth and development class. The Sioux City Catholic Schools do teach human sexuality courses and their curriculum is abstinence-only.
  - Nebraska: South Sioux City's current curriculum is 4-6 grade girls get information on menstrual cycles and body changes associated with puberty. All 5-6grade boys are educated about body changes associated with puberty. No additional education is completed.
  - South Dakota: Dakota Valley's current curriculum is to introduce puberty and male/female development during an informational talk during fifth grade science class.
- What We Know and Want You to Know...and Continue to Fund:
  - Prevention education is key:
  - While teen sexual activity is down among most teens, it has risen among girls younger than 15. Terry, E., & Manlove, J. (2000). *Trends in Sexual Activity and Contraceptive Use Among Teens*. Washington, DC: National Campaign to Prevent Teen Pregnancy.
  - We recommend broadening the span of human sexuality education within schools' core competency—starting early and provide ongoing education.
  - We also recommend that schools and parents allow the surveying of students to help target more effective programming and education. (For example: Substance Abuse survey/decreasing usage; new Mental Health screening/identifying depression)

- Parents have a definite role (and are vital) in reducing teenage pregnancy.
- Teenagers want to talk to their parents about sex, love, relationships and birth control:
- A study showed that 7 of 10 teens interviewed said that they were ready to listen to things parents thought they were not ready to hear.
- Another study found that when asked about the reasons why teenage girls have babies, 78% of white and 70% of African-American teenagers reported that lack of communication between a girl and her parents is often a reason teenage girls have babies. *Premarital Sexual Experience Among Adolescent Women – U.S. 1970-1988. Morbidity and Mortality Weekly Report, Vol. 39, Nos. 51 & 52, (January, 1991). Princeton Survey Research Associates for the Henry J. Kaiser Family Foundation. (1996, June). The 1996 Kaiser Family Foundation Survey on Teens and Sex: What Teens Today Say They Need to Know, and Who They Listen To. Menlo Park, CA: Author.*
- According to *TheNationalCampaign.org*, age-appropriate conversations about relationships, sex, love, and intimacy should begin early in a child's life and continue through adolescence. Having the stereotypical "talk" once with your child is not enough and often occurs too late.
- We recommend somehow integrating core competency and parental engagement—possibly having parents determine level of education and when, etc. Reinforced communication and education from both schools and parents will only aid in preventing teenage pregnancy. Siouxsland should prioritize funding to conduct a new geo-mapping study as well as begin a study of "best practices" from other Iowa counties and states where teen pregnancy rates are low to better understand teen pregnancy in our area and to help target more effective programming and education.
- Investing in programs that provide education and prevention of teenage pregnancy and that allow teen parents to continue to gain independence, will save taxpayers in the long run. An effective example is the child care center for Sioux City high schools.

#### SUBSTANCE ABUSE, ADDICTION, AND MENTAL HEALTH SERVICES

Initiatives that improve outcomes for people who suffer from addiction or mental illness should be provided and funded to decrease additional costs in the future.

*Presented by Kermit Dahlen, President and CEO, Jackson Recovery Centers, 712-234-2364, kdahlen@jacksonrecovery.com*

Extent of the problem: 7.8% of the population suffers from addiction and 5% from Severe Mental Illness.

#### Children:

- 11.9% of children live with a parent that is addicted or abuse alcohol and/or drugs.
- Children are the largest growth population and most children are being raised in poverty and by a single parent (mother).
- 28% of US children, between the ages of 12-20, on average drink 6 times per month and have 5 or more drinks per drinking episode.
- 50% of all mental illness begins by age 14.
- 20% of all children suffer from mental illness.
- Robert Wood Johnson Foundation calls Addiction the number one public health problem.
- Costs the American economy \$275 billion a year.
- Total expenditures for treatment only \$18 billion.
- Cost benefit ratio (without cost of corrections) is for each \$1 spent on treatment there is a \$7 return.
- If you count corrections savings – the ratio is for each \$1 spent on treatment results in a \$12 return.

#### Recommendations:

1. Fund in-jail Treatment: The Phoenix Program in Woodbury County works! All State and Federal funding has been eliminated after October of 2012. The Phoenix Program has demonstrated its effectiveness by outside objective evaluation conducted by the University of Iowa Substance Abuse Consortium. The Phoenix Program has been credited with helping prevent the need for a new jail.
2. Utilizing tax credits as a way to incent business to grow or invest in capital does not work for not-for profits. The substance abuse treatment and prevention system would benefit from a sales tax exemption like those already provided hospitals, schools, etc.



3. The Mental Health System inIowaneeds to be redesigned and funded adequately.
4. A standardized set of core mental health services need to be available to all Iowans.
5. Substance abuse treatment is a specialty that demands highly trained professional staff. Addiction is a diagnosis historically that does not respond to general mental health or physical health intervention. It is imperative that the addiction treatment specialty not be lost in any attempts to redesign the mental health system or state government realignment. We strongly believe that the SA system is best placed in the Department of Public Health and that the payment system should not be merged with the mental health system in the redesign. We believe both systems are underfunded and the merger of two underfunded systems only creates a new exceedingly underfunded system without focus and priority.
6. A full continuum of substance abuse and mental health treatment should be included as an essential benefit in any health care reform benefit design inIowa.
7. Regional child and adolescent crisis stabilization and evaluation units are essential services that are missing in the current continuum of care.
8. In-school mental health and substance abuse programs need to continue to be funded.

#### AVAILABILITY OF ALCOHOL AND OTHER DRUGS

Increase Iowa, Nebraska, and South Dakota's Beer Excise Tax to \$0.73 per gallon. Presented by Carolyn Goodwin, Adult Advisor, Sioux City Mayor's Youth Commission, (712) 251-4502, [goodwin.mk@gmail.com](mailto:goodwin.mk@gmail.com).

#### Background:

Alcohol abuse results in deaths, injuries, violence, teen pregnancy, school absenteeism, and crime, to name a few. Many times cities, counties, and states bear the burden of alcohol abuse in the form of law enforcement, court and health care costs.

Research has shown that implementing alcohol environmental strategies as part of a comprehensive plan is effective in reducing costs associated with the alcohol abuse as well as underage drinking. Locally, our alcohol environmental strategies include keg registration, enforcement of underage drinking laws, holding adults responsible for teen parties, compliance checks, party patrols, and responsible beverage server training. Another equally important environmental strategy is the raising of the beer excise tax. Raising the beer excise tax will reduce youth access to alcohol and will provide much-needed funds for prevention, treatment, corrections, and enforcement services, all of which can help reduce the use of alcohol and the associated costs.

#### Iowa

Current Beer Excise Tax Rate: \$0.19 per gallon (ranked as the 26<sup>th</sup> state from the top-Alaska is 1<sup>st</sup> at \$1.07 per gallon). Wine tax inIowa is \$1.75 per gallon. The beer excise tax inIowa has not been raised since July 1, 1986. Inflation adjustment is not built in so we continue to lose revenue. In 2010,Iowa's Beer Excise Tax was \$14,488,000, compared to \$14,657,000 in 2009. Impact: An increase in the beer tax of 54 cents per gallon would be about a 5 cent per serving increase in a typical 12 oz. serving of beer (128 ounces in a gallon divided by 12 oz. serving is approximately 11 of the 12 oz. servings=5 cents per serving).

- The proposed tax would add \$0.60 to the cost of a 12-pack of beer.
- The proposed tax would cost a light drinker (two beers a week) \$5.20 per year.
- The proposed tax would cost a heavy drinker (twelve beers a week) \$31.20 per year.
- The proposed increase would generate approximately \$41.6 million dollars annually based upon FY2009 beer sales of just over 77 million gallons of beer statewide.

#### Nebraska

Current Beer Excise Tax Rate: \$0.31 per gallon (ranked 14<sup>th</sup> state). Wine tax inNebraska is \$0.95 per gallon. In 2009,Nebraska's Beer Excise Tax was approximately \$14,380,000.

Impact: An increase in the beer tax of 42 cents per gallon would be about a 4 cent per serving increase in a typical 12 oz. serving of beer (128 ounces in a gallon divided by 12 oz. serving is approximately 11 of the 12 oz. servings=4 cents per serving).

- The proposed tax would add \$0.48 to the cost of a 12-pack of beer.
- The proposed tax would cost a light drinker (two beers a week) \$4.16 per year.
- The proposed tax would cost a heavy drinker (twelve beers a week) \$24.96 per year.

- The proposed increase would generate approximately \$19.5 million dollars annually based upon FY2009 beer sales of just over 46 million gallons of beer statewide.

South Dakota

Current Beer Excise Tax Rate: \$0.27 per gallon (ranked 16<sup>th</sup> state). Wine tax in South Dakota is \$0.93 per gallon. In 2009, South Dakota's Beer Excise Tax was approximately \$5,900,000.

Impact: An increase in the beer tax of 46 cents per gallon would be about a 4 cent per serving increase in a typical 12 oz. serving of beer (128 ounces in a gallon divided by 12 oz. serving is approximately 11 of the 12 oz. servings=4 cents per serving).

- The proposed tax would add \$0.48 to the cost of a 12-pack of beer.
- The proposed tax would cost a light drinker (two beers a week) \$4.16 per year.
- The proposed tax would cost a heavy drinker (twelve beers a week) \$24.96 per year.
- The proposed increase would generate approximately \$10.4 million dollars annually based upon FY2009 beer sales of just over 21 million gallons of beer statewide.

Utilization of revenue: The increase in revenue could be used to fund drug enforcement, corrections, treatment, and prevention services. These services might include, but are not limited to, drug courts, jail-based treatment, multi-jurisdictional drug task forces, prevention programs, and other treatment services.